



**Housing Services  
Services de logement**

A city where everyone has a place to call home • Une ville où tout le monde a un chez-soi

## **Action Ottawa Affordable Housing Initiative**

# **2017 APPLICATION FORM**

**July 5<sup>th</sup>, 2017**

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**ottawa.ca**

City services **3-1-1**  
Services municipaux  
TTY/ATS 613-580-2401

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**1. LEGAL NAME OF ORGANIZATION and LEAD RESPONDENT****2. TYPE OF ORGANIZATION**

(Note: All applicants must be incorporated)

 Non-profit Corporation Private Corporation

Date of Incorporation	Incorporation Number	Charitable Number (if applicable)
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**3. CONTACT FOR THE ORGANIZATION**

Name		Job Title
Telephone	Fax Number	Email Address

**4. MAILING ADDRESS OF ORGANIZATION**

Street Address		
City and Province		Postal Code
Telephone	Fax Number	Email Address
Website		

**5. CONTACT PERSON FOR PROJECT INFORMATION**

(if different than above)

Name		Job Title
Telephone	Fax Number	Email Address

**Provide a brief description of your organization's mission and activities.**

**Provide a brief description your proposal**

**Provide a list of all members of the Board of Directors, subsidiary companies and their directors**

Empty box for providing a list of all members of the Board of Directors, subsidiary companies and their directors.

**Identify Partner Organization(s) Information (if applicable):**

Organization Name:	Type of Corporation	Letter or Memorandum of Understanding (Attached):	Board Resolution (Attached)
	<input type="checkbox"/> Non-profit Corporation <input type="checkbox"/> Private Corporation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Non-profit Corporation <input type="checkbox"/> Private Corporation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Non-profit Corporation <input type="checkbox"/> Private Corporation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Non-profit Corporation <input type="checkbox"/> Private Corporation	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Good Standing with the City of Ottawa:

The applicant must not be in receipt of a “Notice of Breach” of any existing contracts with the City of Ottawa, that has not been rectified to the City’s satisfaction by the time of closing of this

I have no contracts with the City

I have current contracts with the City:

No, I am not in Breach.

- Yes, we are in receipt of a “Notice of Breach”

Comments:

*Organizations that are in Breach of an existing contract with the City are not eligible to apply.*

# Conflict of Interest Declaration

(To be submitted by the Proponent)

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(Name of Proponent)

We confirm that neither the Proponent nor any of its Team Members has or will have directly or indirectly employ, engage or retain an employee, servant, Council member or agent of the City in relation to the Affordable Housing Request for Qualifications.

Except as disclosed below, we are not aware of any City employee, Council member or member or employee of a City agency, board or commission having a financial interest in our Proponent team:

- ..
  - ..
  - ..
1. The Proponent team has/has no (strike out the inapplicable portion) knowledge of or the ability to avail itself of confidential information of the City of Ottawa in relation to the Affordable Housing project other than confidential information which may have been disclosed by the City of Ottawa to Registered Parties in the normal course of the RFP.

We hereby confirm that, except as otherwise disclosed herein, we are not aware of any conflict of interest (real or perceived or potential) in submitting a response to this RFQ, nor is one anticipated in the event the undersigned Proponent responds (as part of a consortium) to a subsequent RFP.

Signature of Authorized Representatives of the Proponent

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(Signature)

Name:

Title:

Date:



**SIGNATURE FORM**

I hereby certify that all information provided in this application is as accurate as possible in all respects, and certify my intent to implement this project as presented, should it be selected for funding. I further certify there is no conflict of interest between said corporation (s) or its/their employees with respect to this project and the City of Ottawa.

Name of Corporation:

\_\_\_\_\_

Signed: \_\_\_\_\_

\_\_\_\_\_

I have the authority to bind the Corporation

Name of Signatory  
(Please print)

Date: \_\_\_\_\_

Signed: \_\_\_\_\_

\_\_\_\_\_

I have the authority to bind the Corporation

Name of Signatory  
(Please print)

Date: \_\_\_\_\_

**Note: *Municipal Freedom of Information and Protection of Privacy Act:***

The City of Ottawa is subject to the *Municipal Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c. M. 56, as amended (“MFIPPA”) with respect to, and protection of, information under its custody and control. Accordingly, all documents provided to the City in response to this Request for Proposal (“RFP”) may be available to the public unless the party submitting the information requests that it be treated as confidential.

All information is subject to MFIPPA and may be subject to release under the Act, notwithstanding your request to keep it confidential.

## Checklist of Attachments to complete Action Ottawa Qualification

**Ten (10) Copies** of Proposal Document including Forms A through G

Provide One Copy of:

- |                                                                                                     |                          |
|-----------------------------------------------------------------------------------------------------|--------------------------|
| 1. Conflict of Interest Declaration                                                                 | <input type="checkbox"/> |
| 2. Procurement Documents for Consultants (if Applicable)                                            | <input type="checkbox"/> |
| 3. Signed and dated signature page                                                                  | <input type="checkbox"/> |
| 4. Articles of Incorporation                                                                        | <input type="checkbox"/> |
| 5. Most recent Audited Financial Statement                                                          | <input type="checkbox"/> |
| 6. Letters of Participation and/or Memorandum of Understanding and Board Resolutions from partners. | <input type="checkbox"/> |
| 7. List of Board of Directors                                                                       | <input type="checkbox"/> |