



SOLICITATION NO: RFA 003 – Domestic Violence Shelter– 2021 – NPS

SOLICITATION NAME: Request for Applications for Domestic Violence Shelter

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| DATE ISSUED: | Thursday, February 25, 2021 |
| RFA APPLICATION DUE DATE: | Thursday, March 25, 2021, 3 PM CST |
| THRESHOLD FORM DUE DATE | Thursday, March 4, 2021 at 3 PM CST |
| Anticipated Start date of contract: | May 15, 2021 |
| Questions regarding the RFA are due on or before | March 25, 2021 at 9 AM CST |
| Questions must be submitted in writing to the Authorized Contact Person or through Partnergrants | Authorized Contact Person: Natasha Ponczek Shoemake <u>Contract Management Specialist III</u> E-Mail: Natasha.Ponczek@austintexas.gov |
| Questions and Answers will be available: | In Partnergrants and on the solicitation website: APH Competition Website |
| Optional Pre-Bid Meeting- Date and Time: | Monday, March 1, 2021 2 PM – 3 PM |
| Pre-Bid Meeting Location: | Registration Required with this link to get the Conference Call details: EVENTBRITE REGISTRATION LINK |

APH is only accepting applications through the Partnergrants database. No paper copies will be accepted.

All Applicants must:

1. Confirm that their organization is a registered vendor with the City of Austin
 - To confirm enter the organization’s City of Austin Vendor Number when registering as a user in the Partnergrants system (see #2 below).
 - To find the City of Austin Vendor Number please visit [Austin Finance Online](#). and search for the organization’s legal name.
 - To register to become a potential City of Austin vendor, go to [Austin Finance Online](#) to register.
2. Be a registered user in the Partnergrants system. The applications will be submitted through this web-based system. To register, visit the Partnergrants site and click on “Register Here.” Note that the organization’s City of Austin Vendor number is required to complete registration in Partnergrants.

This Offer Sheet must be signed and submitted in Partnergrants to be considered for award.



This solicitation is comprised of the following required sections. Please carefully read each section including those incorporated by reference. By signing this document, you are agreeing to all the items contained herein and will be bound to all terms.

All of the following items can be found on the RFA Website: [APH Competition Website](#)

| FORM NO. | TITLE OF REQUIRED FORMS | REQUIRES RESPONSES DUE |
|-------------|--|---|
| | Note: Forms 1-4 must be scanned, signed or filled out and uploaded into Partnergrants. | |
| 1 | OFFER SHEET | 3/25/2021 |
| 2 | RFA APPLICATION | 3/25/2021 |
| 3 | PROGRAM BUDGET AND FUNDING SUMMARY | 3/25/2021 |
| 4 | COA CERTIFICATIONS AND DISCLOSURES | 3/25/2021 |
| SECTION NO. | TITLE | INFORMATION ONLY |
| A | THRESHOLD REVIEW FORM | <i>Form input in Partnergrants Due 3/4/2021</i> |
| B | STANDARD SOLICITATION PROVISIONS AND INSTRUCTIONS | Information Only |
| C | RFA SCOPE OF WORK | |
| D | APH CLIENT ELIGIBILITY REQUIREMENTS | |
| E | STANDARD APH AGREEMENT BOILERPLATE | |
| F | APPLYING FOR APH-FUNDED OPPORTUNITY – PARTNERGRANTS INSTRUCTIONS | |

INTERESTED PARTIES DISCLOSURE

In addition, Section 2252.908 of the Texas Government Code requires the successful Applicant to complete a Form 1295 “Certificate of Interested Parties” that is signed and includes an “unsworn declaration” for a grant agreement award requiring City Council authorization. The “Certificate of Interested Parties” form must be completed on the [Texas Ethics Commission website](#), printed, signed and submitted to the City by the authorized agent of the Business Entity with acknowledgment that disclosure is made under oath and under penalty of perjury prior to final grant agreement execution.



CITY OF AUSTIN, TEXAS

Austin Public Health

REQUEST FOR APPLICATION (RFA) OFFER SHEET



The undersigned, by their signature, represents that they are submitting a binding offer and is authorized to bind the Applicant to fully comply with the solicitation document contained herein. The Applicant, by submitting and signing below, acknowledges that they have received and read the entire document packet sections defined above including all documents incorporated by reference, and agrees to be bound by the terms therein.

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|---|--|
| Company Name: | |
| Company Address: | |
| City, State, Zip: | |
| Federal Tax ID No.: | |
| Printed Name of Officer or Authorized Representative: | |
| Title: | |
| Email Address: | |
| Phone Number: | |

Signature of Officer or Authorized Representative: _____

Date: _____

* This Offer Sheet must be signed and submitted in Partnergrants to be considered for award. Electronic Signature is acceptable.