PURPOSE

The Peninsula Housing Authority is seeking proposals from legal firms to provide a variety of legal services on an as-needed basis for the next two to five years. Legal counsel has frequent contact with senior management and the Executive Director on an as-needed basis.

BACKGROUND

The Peninsula Housing Authority (PHA) is an independent political subdivision of the State of Washington that is authorized by and operates under State law, particularly RCW 35.82.

PHA is dedicated to increasing safe, affordable housing and providing opportunities for persons experiencing barriers to housing. Our goal is to lead the communities we serve in assisting residents with affordable housing needs, while creating opportunities and incentives for self-sufficiency.

The Peninsula Housing Authority is governed by an eight-member Board of Commissioners appointed by Clallam and Jefferson County Commissioners. The Board meets once each month and as needed for special meetings. The basic area of jurisdiction of the PHA is Clallam and Jefferson counties.

The Housing Authority has a staff of approximately 35. It administers a number of programs funded with federal, state and local tax funds including:

1. Public Housing
2. Section 8 Housing Choice Vouchers
3. Tax exempt housing revenue bonds, notes, and securities offered for public and private sale
4. Tax credit units
5. Federal, state and local housing funds
6. USDA Section 515
7. USDA Mutual Self-Help Housing

A total of 484 housing units are owned by the PHA. An additional 637 units are subsidized by the PHA through rental assistance. Ongoing home ownership programs provide housing for low-income, first time homebuyers in addition to the foregoing rental portfolio.
DESCRIPTION OF SERVICES

Routine services, compensated through a monthly retainer fee, include:

- Advise all PHA officials on matters relating to PHA business.
- As directed, attend all Board of Commissioners meetings.
- Assist with preparation and/or review of resolutions, contracts, agreements, leases, deeds and other related documents.
- Monitor current housing authority State and Federal legislation and/or litigation.
- Provide legal opinions on matters relating to PHA activities, including employment issues.
- Participate in the development of staff recommendations for action by the PHA Board of Commissioners.
- Make recommendations for updating existing resolutions and other policies and practices.
- Represent PHA in intergovernmental relations as appropriate.
- Maintain appropriate records and files.
- Act as liaison with Bond/Tax Credit counsel (if PHA obtains such counsel).
- Act as liaison with PHA’s insurance provider in litigation matters.
- Perform related duties as necessary.

Non-routine services, compensated through a per hour fee, include:

- Represent (or assist as appropriate) PHA in tenant eviction proceedings as directed by PHA Executive Director.

Legal services required by the PHA typically fall into one of the categories listed below. Any legal firm submitting a proposal may offer services in any one or more of these categories. The PHA reserves the right to select more than one firm to provide such services.

1. Tenant/Landlord Relations, Unlawful Detainer Pleadings, Evictions
2. Employment Law/ADA
3. Real Estate Acquisition, Development, Construction Bidding and Contract Matters
4. Tax Exempt Bond Issues, Indentures, Regulatory Agreements, Tax Credit Issues
5. Land Use Law, Environmental Law
6. Liability and General Legal Matters, e.g., Corporate Counsel Services
7. State Open Public Meetings Act and Public Records Act
8. Civil Rights/Discrimination
9. Federal Housing Laws and Rules

CONTENT OF PROPOSALS

The PHA requests that interested firms submit a proposal containing the following:

1. Cover letter which identifies the firm’s primary contact person(s) for the proposal.
2. Description of the firm’s qualifications, organizational structure and areas of special expertise.
3. Identification of the types of legal services to be provided to the PHA, using the categories as listed in “Description of Services” above. Other categories of services may be provided, if desired, and some services may be specifically excluded when such expertise is not available.
4. Description of experience working with clients in the public and municipal sectors. Specifically address your experience with landlord/tenant matters.
5. Summarize key personnel who would be assigned and represent the PHA for specific services.
6. Description of all known fees and charges to be incurred by the PHA. This should include the monthly retainer, hourly rate(s) charged and the methodology for rate increases.

7. Provide the form of contract for services that the firm would propose to execute with PHA.

8. List of three references (not including the Housing Authority) for which similar services are or have been provided.

9. Required Documents
   - Attachment A - Vendor Information Sheet
   - Attachment B - Section 3 Plan If not applicable - please state “Not Applicable” in your proposal.
   - Attachment C - W-9 Form
   - Attachment D - Minority Report
   - Attachment E Non-Collusive Affidavit
   - Attachment F Suspension and Debarment Certification
   - Attachment G - Evidence the firm has the required professional and general liability as well as workman’s compensation insurance

10. Any additional information that will assist the Housing Authority in evaluating the firm’s capability to perform the proposed services.

DEADLINE

One signed original and one copy of the proposal must be submitted not later than 12:00 noon on Monday, June 15th, 2020. Fax or emailed documents will not be considered. Proposals received after this time will not be accepted. Proposals must be mailed or hand-delivered as follows:

Sarah Martinez
Executive Director
PENINSULA HOUSING AUTHORITY
2603 S. Francis Street
Port Angeles, WA 98362

Questions about this proposal should be addressed in writing by fax to 360-457-7001 or emailed to smartinez@peninsulapha.org. No phone calls please.

CRITERIA AND SELECTION

The PHA will use the criteria listed below, in the priority shown, to make its selections:

1. Qualifications in the area(s) of service proposed
2. Experience working with the public sector and specifically, housing authorities or municipal organizations
3. Fees and charges
4. Section 3 Plan
5. References submitted with the proposal
PROPOSAL COSTS

All costs incurred in the preparation and presentation of the proposal shall be completely absorbed by the offerer.

All documents submitted as part of the proposal will become the property of the PHA. Requests for specific material to be returned to the offerer will be considered.

Any material submitted that is considered confidential must be clearly marked as such.

GENERAL TERMS AND CONDITIONS

1. All proposals will be open for public inspection only after contract award.
2. All proposals shall be considered valid for a period of ninety (90) days from the proposal closing date and shall contain a statement to that effect.
3. All proposals shall be subject to applicable public disclosure laws. Any information received within the proposal will be considered part of the public record of this procurement.
4. The selected firm will be required to declare that it will represent PHA to the exclusion of all other clients having potential conflicts with PHA.
5. The Housing Authority expressly reserves the following rights:
   a. To reject any/all proposals or portions thereof.
   b. To allow proposers to correct minor proposal irregularities, if in the best interest of the Housing Authority.
   c. To base awards with due regard to quality of services, experience, compliance with specifications, and other such factors as may be necessary and appropriate in the circumstances.
   d. To make the award to any proposer or combination of proposers whose proposals(s), in the opinion of the Housing Authority, is in the best interest of the Authority.
   e. Any proposal or proposal-modification received after the hour and date specified as the deadline, will be returned unopened.
   f. To terminate a contract awarded pursuant to this RFP at any time for its convenience upon 30 days’ written notice to the successful proposer.

AFFIRMATIVE ACTION

The PHA is an Equal Opportunity Business Enterprise which promotes competitive solicitations and does not discriminate on the basis of race, color, religion, creed, national origin, sex, disability, age, or sexual orientation.

The PHA encourages minority and women-owned business enterprises to respond to this solicitation. If your firm is minority or women-owned or owned by a disabled person, please state and provide a statistical representation of your work force with your quote.

SECTION 3 PLAN

The purpose of Section 3 of the Housing and Urban Development Act of 1968 (12 U.S.C. 1701u) (Section 3) is to ensure that employment and other economic opportunities generated by certain HUD financial assistance shall, to the greatest extent feasible, and consistent with existing Federal, State, and local laws and regulations, be directed to low and very-low income individuals, particularly recipients of government assistance for housing, and to business concerns which provide economic opportunities to low and very-low income
individuals. (Section 3 means section 3 of the Housing and Urban Development Act of 1968, as amended 12 U.S.C. 1701u). The PHA Section 3 Plan is attached.

Section 3 requirements apply in some form to all contractors and subcontractors performing work in connection with projects and activities funded by public housing assistance covered by Section 3. Section 3 covered contracts do not include contracts for the purchase of supplies and materials unless the contract includes the installation of the materials.

A business concern seeking to qualify for a Section 3 contracting preference shall certify or submit evidence that the business concern qualifies as a Section 3-business concern. (Refer to What Is A Section 3 Business Concern? in the PHA Section 3 Plan which is attached). The Section 3 business must also be able to demonstrate its ability to complete the contract. The ability to perform successfully under the terms and conditions of the proposed contract is required of all contractors and subcontractors subject to the procurement standards of 24 CFR 85.36, 24 CFR 85.36b(8).

Contractors who do not qualify as Section 3 business concerns, but who enter into contracts with the Peninsula Housing Authority, must agree to comply with certain general conditions (refer to Section 3 Clause). All contractors and subcontractors, including Section 3 businesses, must comply with these general conditions. Failure to comply with these general conditions may lead to sanctions which can include termination of the contract for default and suspension or debarment from future HUD-assisted contracts.

CONFLICT OF INTEREST

The offerer represents, warrants and agrees that to the best of its knowledge, it does not presently have, nor will it acquire during the term of this contract, any interest direct or indirect, by contract, employment or otherwise, or as a partner, joint venturer or shareholder (other than as a shareholder holding a one percent (1%) or less interest in publicly-traded companies) or affiliate with any business or business entity that has entered into any contract, subcontract or arrangement with the PHA, or other contractual or employment during the term of the contract by any other persons, business or corporation in which employment will or may likely develop a conflict of interest between the PHA’s interest and the interest of the third parties.
In order for us to establish you as a vendor with the Peninsula Housing Authority, we need the following information:

| Company Name: |  |
| Billing Address: |  |
| City State Zip: |  |
| Location Address: |  |
| City State Zip: |  |
| Phone: |  |
| Fax: |  |
| Contact Person: |  |
| Email Address: |  |
| Federal ID #: |  |
| Are you incorporated? | Yes | No |
| Unified Business ID Number (UBI) Washington State Only: |  |
| Are you a minority contractor? | Yes | No |
| On what basis are you a minority contractor? Please select one of the following: |  |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| Caucasian | Black | Native American | Hispanic | Asian Pacific | Hasidic Jew | Woman* | Other; Please describe: |
| *If you are a women owned business, please also circle the ethnicity. |
| Are you a Section 3 Vendor? | Yes, qualify by # | No (See Attachment B for details) |

| PHA Use Only |
| Vendor Number |  |
| 1099 Yes/No |  |
| Date |  |
ATTACHMENT B
Certification for Business Concerns Seeking Section 3 Preference in Contracting and Demonstration of Capability

Name of Business ______________________________________________________________

Address of Business _____________________________________________________________

Type of Business:  ☐ Corporation    ☐ Partnership  
☐ Sole Proprietorship  ☐ Joint Venture

Attached is the following documentation as evidence of status:

For businesses claiming status as a Section 3 resident-owned enterprise:
• Copy of resident lease
• Copy of receipt of public assistance
• Copy of evidence of participation in a public assistance program  Other evidence

For business entity as applicable:
• Copy of Articles of Incorporation
• Assumed Business Name Certificate
• List of owners/stockholders and percent ownership of each
• Organization chart with names and titles and brief function statement
• Certificate of Good Standing
• Partnership Agreement
• Corporation Annual Report
• Latest Board minutes appointing officers
• Additional documentation

For businesses claiming Section 3 status by subcontracting 25 percent of the dollar amount awarded to qualified Section 3 businesses:
• List of subcontracted Section 3 business(es) and subcontract amount

For business claiming Section 3 status, claiming at least 30 percent of their workforce are currently Section 3 residents or were Section 3 eligible residents within three years of date of first employment with the business:
• List of all current full-time employees
• PHA residential lease less than three years from date of employment
• List of employees claiming Section 3 status
• Other evidence of Section 3 status less than three years from date of employment

Evidence of ability to perform successfully under the terms and conditions of the proposed contract:
• Current financial statement
• Statement of ability to comply with public policy
• List of owned equipment
• List of all contracts for the past two years

___________________________________________ (Corporate Seal)

Authorizing Name and Signature

Attested by: _______________________________ Date _________________________
**ATTACHMENT C**

**W-9**

**Request for Taxpayer Identification Number and Certification**

**Give form to the requester. Do not send to the IRS.**

<table>
<thead>
<tr>
<th><strong>Name (as shown on your income tax return)</strong></th>
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<tr>
<th><strong>Business name, if different from above</strong></th>
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**Check appropriate box:**

- [ ] Individual/sole proprietor
- [ ] Corporation
- [ ] Partnership
- [ ] Limited liability company
- [ ] Other (tax instructions): __________

**Exempt payee**

**Address (number, street, and apt. or suite no.)**

<table>
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<tr>
<th><strong>City, state, and ZIP code</strong></th>
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**Social security number**

**Employer identification number**

**List account number(s) here (optional)**

**Part I  Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN); however, for a resident alien, sole propietor, or disregarded entity, see the Part I instructions on page 5. For other entities, it is your employer identification number (EIN) if you do not have a number, see how to get a TIN on page 9.

Note: If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

**Part II  Certification**

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, Item 2 does not apply. For mortgage interest paid, acquisition of a mortgage or interest on a mortgage, grantor retained investment arrangement (GRA), and generally payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

**Sign Here**

<table>
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<th><strong>signature of U.S. person</strong></th>
<th><strong>Date</strong></th>
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**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Purpose of Form**

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest paid, acquisition of property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued), and
2. Certify that you are not subject to backup withholding, and
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

**Definition of a U.S. person.** For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-3).

**Special rules for partnerships.** Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partner's share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,
ATTACHMENT D
Contractors’ Statement of Utilization
Woman and Minority Business

The following woman and/or minority business enterprises have been contacted to submit a proposal for subcontracting in the performance of the contract work on which this request for proposal is based. Instructions outlining the procedure to fill out this form appear on the next page.

<table>
<thead>
<tr>
<th>1 Trade/ Specialty</th>
<th>2 Name of Firm</th>
<th>3 WBE</th>
<th>4 MBE</th>
<th>5 Approx. Dollar Amount</th>
<th>6 Apparent Low Bid</th>
<th>7 Not Responsive</th>
<th>8 Expect to Award Subcontract</th>
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Total dollar amount of bid expected to be performed by WBE: $ _________________
Percentage of total bid amount: _________________%

Total dollar amount of bid expected to be performed by MBE: $ _________________
Percentage of total bid amount: _________________%

I hereby certify that the above information, to the best of my knowledge, is true and accurate, and that the subcontractors are a Woman Business Enterprise (WBE) or Minority Business Enterprise.

Date: ____________________  Signature:  ________________________________________
Instructions for Completing Woman and Minority Business Utilization Form:

1. **Trade/Specialty**
   List the trade/specialty for which the subcontractor or supplier is bidding, i.e. plumbing, electrical, etc.

2. **Name of Firm**
   List the full name of the firm.

3. **WBE**
   The definition of Woman Business Enterprise (WBE) states that:
   “WBE must have 50% women ownership and control of the management and daily operations of the business.”

4. **MBE**
   The definition of Minority Business Enterprise (MBE) states that:
   “WBE must have 50% women ownership and control of the management and daily operations of the business.”

5. **Approximate Dollar Amount**
   List the approximate dollar amount of the subcontractor’s bid.

6. **Apparent Low Bid**
   Check the “Yes” column if the subcontractor’s bid appears to be the low bid in that trade. If there are two or more subcontractors listed for a specific trade, check the “Yes” column for only one subcontractor. All other subcontractors would be checked in the “No” column.

7. **Not Responsive**
   Check the column only if the subcontractor’s bid is non-responsive for reasons other than the amount of the bid, i.e. failure to complete all necessary information on which the request for proposal is based, failure to respond, etc.

8. **Expect to Award Subcontract**
   Put a check in this column beside the subcontractor who would be reasonably expected to be awarded the bid. Again, check only one subcontractor/supplier for a specific trade/specialty.
ATTACHMENT E  
Non-Collusion Affidavit

State of _______________)

) ss

County of _______________)

being first duly sworn, deposes and says:

That he/she is: ____________________________________________
The party making the foregoing proposal to the Peninsula Housing Authority in Port Angeles, Washington; is genuine and not collusive or sham; that said proposer (offeror) has not colluded, conspired, connived or agreed, directly or indirectly, with any bidder, offeror or person, to put in a sham bid or to refrain from bidding, and he has not in any manner directly or indirectly, sought by agreement or collusion or communication or conference, with any person, to fix the bid price of affiant or any other proposer (offeror), or to fix any overhead, profit or cost element of said bid price, or that of any other proposer (offeror), or to secure any advantage against the Peninsula Housing Authority; U.S. Department of Housing and Urban Development (HUD) or any person(s) interested in the proposed contract; and that all statements in said proposal are true.

________________________________
NAME (Corporate Seal)

________________________________
Witness

Subscribed and sworn to me

This _______ day of ____________, 20___

________________________________
My commission expires __________________
ATTACHMENT F
Suspension and Debarment Certification

_____________________________________ certifies that neither it, nor any person or firm
which has an interest in the above named firm are debarred, suspended or ineligible from
involvement by any federal, state or local government.

_______________________________
Signature

_______________________________
Name

_______________________________
Title

_______________________________
Date
ATTACHMENT G
Insurance Requirements

Insurance Endorsements

In order to comply with HUD's requirement that Housing Authorities not assume the liability of contractors or their subcontractors, and in the exercise of responsible risk management, Insurance Endorsements shall be required in order to protect the Housing Authority. Prior to the beginning of any work under this contract, an authorized representative of each successful bidder's insurers shall submit Insurance Endorsements naming the Housing Authority as Additional Insured on all but Professional Liability coverage.

*If the duties under this contract require Professional Liability Insurance, the Additional Insured requirement of these Special Conditions shall be waived. However, all other provisions herein shall remain in effect.*

Insurance offered to indemnify the Housing Authority shall be provided by insurers rated by the A. M. Best Company with a rating of not less than B+ Vl.

If the coverages offered are on a claims made form, the insurer shall provide an extended five year reporting period to the Additional Insured.

All such insurance shall be primary, and not contributing with any other insurance or self insurance maintained by the Housing Authority notwithstanding any inconsistent provisions in any such policies maintained by the Housing Authority and shall not require contribution by any insurance or self insurance maintained by the Housing Authority on any basis, pro rata, or otherwise.

The policy to which the Additional Insured endorsement is attached shall apply separately to each insured against whom claim is made or suit is brought except with respect to the limits of the Company's liability.

The policy to which the Additional Insured endorsement is attached shall not be subject to cancellation, change in coverage, reduction of limits or non-renewal except after written notice of not less than thirty (30) days given to the designated Housing Authority official by certified mail, return receipt requested prior to the effective date thereof.

The Housing Authority has provided its Instructions to Bidders and standard insurance endorsements which contain other insurance clauses required under this contract. ISO Endorsements or others, will also be acceptable provided they contain the same clauses and protection contained in the endorsements provided with these Special Conditions.

1. A policy of commercial general liability, including Washington Stop-Gap, naming Peninsula Housing Authority as additional insured, protecting and holding Peninsula Housing Authority harmless from any and all damages which may arise in connection with the services to be provided hereunder, in at least the principal amount of a single combined limit of One Million Dollars ($1,000,000) per occurrence, Two Million Dollars ($2,000,000) aggregate personal injury and/or property damage liability. Such insurance is subject to approval by Peninsula Housing Authority.
2. A policy of automobile liability insurance in the amount of One Million Dollars ($1,000,000) per accident for bodily injury and property damage.

3. If automobiles are used in connection with any activity performed under contract(s) resulting from this RFP, a policy of commercial automobile liability, including coverage for owned, non-owned, leased or hired vehicles with a minimum coverage of Three Hundred Thousand Dollars ($300,000) per accident.

4. A policy of Professional Liability of not less than One Million Dollars ($1,000,000) per occurrence.