

# REQUEST FOR PROPOSAL #17-3

Site Construction and Installation of Modular Classroom Units  
Head Start Center,  
3050 Spruce Avenue, Egg Harbor Township, NJ 08234  
Client: Gateway Community Action Partnership

## I. PROPOSAL PARAMETERS AND GUIDELINES

- A. **Submission Requirements.** All proposals must be presented in accordance with the requirements, format, and guidelines described in this Request for Proposal (RFP) document.
- B. **Submission Deadline.** Interested entities must submit (3) copies of proposals no later than **10:00 a.m., Friday, March 31<sup>st</sup>, 2017** with bid opening immediately following. Submittals should be addressed and delivered to:

Edward Bethea, Executive Vice President/Chief Operating Officer  
Gateway Community Action Partnership  
110 Cohansey Street 08302  
(856) 451-6330, Ext. 6655

- C. **Interpretation and Addenda.** All questions, requests for interpretation, and comments shall be prepared in writing and submitted Robert Magyar ([rmagyar@gatewaycap.org](mailto:rmagyar@gatewaycap.org)) via email by March 21<sup>st</sup>, 2017. Question and clarification responses will be sent to all parties having submitted questions. All responses will be binding. If a respondent has no questions please state so via email so that responses will be forwarded. Oral and other interpretations will be without legal effect.

## II. REQUEST FOR PROPOSAL

This RFP is issued by Gateway Community Action Partnership (GCAP), a 501 (c) (3) tax exempt nonprofit corporation.

## III. RFP SUBMISSION REQUIREMENTS

- A. Respondent's submissions must include the following core components, in order to be considered responsive to this solicitation:
- Completed pricing schedule(s) to include turn-key package, as well as any options identified
  - A preliminary deliverable schedule
  - A Business Registration & Insurance Certificate
  - A signed W-9.
  - Certificate of Insurance with the following **minimum** coverage limits
    - General Liability \$1,000,000 Occurrence, \$2,000,000 Aggregate
    - Worker's Compensation, as determined by law
    - Employer's Liability Insurance \$500,000 per employee, \$1,000,000 Aggregate

## IV. CONDITIONS FOR SUBMISSION OF PROPOSAL

- A. All proposals in response to this request must meet the following conditions to be considered:
- Proposals must be received by the date and time specified; **late proposals will be disqualified.**
  - In order to be considered for selection, applicants must submit a complete proposal. **Incomplete proposals may not be considered.**
  - Proposals must include a Cover Sheet or Letter clearly stating the name of the applicant, address and telephone number of the applicant representative.

- B. The funding award for these services and project shall be made at the sole discretion of the Gateway Community Action Partnership Board of Directors. Gateway Community Action Partnership is under no obligation to select any presented proposals. Funding is subject to all necessary approvals by Federal, State and local agencies and their representatives. GCAP reserves the right to request additional information from all applicants. GCAP reserves the right and anticipates inviting top respondents to engage in an interview process to obtain additional information that will be used during the selection process. GCAP reserves the right to reject any and all proposals submitted, and to negotiate portions thereof.

**V. APPLICATION RANKING CRITERIA.**

- A. All submissions shall be initially reviewed to determine if they are responsive to the submission requirements. Those not meeting the minimum requirements set forth herein will be deemed non-responsive, and will not be subject to further review.
- B. The responsive submissions shall be evaluated and ranked in accordance with the scoring criteria, based upon a 10-point system.
  - 2 points – Completeness according to specification sheets provided
  - 6 points – Overall cost estimates
  - 2 points – Timeliness of project deliverables

## **CERTIFICATION FORM NOTE**

**THIS PAGE MUST BE COMPLETED AND INCLUDED WITH THE SUBMITTAL CERTIFICATION**

The undersigned hereby certifies, on behalf of the Respondent named in this Certification (the "Respondent"), that the information provided in this RFP submittal to ISSUER is accurate and complete, and I am duly authorized to submit same. I hereby certify that the Respondent has reviewed this RFP in its entirety and accepts its terms and conditions.

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(Name of Respondent)

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(Signature of Authorized Representative)

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(Typed Name of Authorized Representative)

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(Title)

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(Date)