



REQUEST FOR PROPOSALS (RFP) Solicitation 2022-4005;
Tax Syndicator for Beechwood

FORM OF PROPOSAL
(Attachment G)

(This Form must be fully completed and placed under Tab No. 1 of the "hard copy" tabbed proposal submittal.)

Instructions: Unless otherwise specifically required, the items listed below must be completed and included in the proposal submittal. Please complete this form by marking an "X," where provided, to verify that the referenced completed form or information has been included within the "hard copy" proposal submittal submitted by the proposer. Also, complete the Section 3 Statement and the Proposer's Statement as noted below:

X=ITEM INCLUDED	SUBMITTAL ITEMS
_____	Section 1 Form of Proposal (Attachment G)
_____	Section 2 HUD Form Packet (Attachment H)
_____	Section 3 Proof of Insurance and Licensing
_____	Section 4 Syndicator Evaluation Form (Attachment B)
_____	Section 5 Equal Employment Opportunity
_____	Section 6 Subcontractor/Joint Venture Information (If Applicable)
_____	Section 7 Other Information (Optional)
_____	Contract Award and Acceptance Form (Attachment E) in Separate electronic copy

ADDENDA

Offeror acknowledges receipt of the following Addenda:

Addendum Number: _____ Dated: _____
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Debarred Statement: Has this firm, or any principal(s) ever been debarred from providing any services by the Federal Government, any state government, the State of Ohio, or any local government agency within or without the State of Ohio? **Yes** **No**
 If "Yes," please attach a full detailed explanation, including dates, circumstances and current status.
 Regardless of response, complete and return HUD 2922 *Certification Regarding Debarment and Suspension*

Disclosure Statement: Does this firm or any principals thereof have any current or past personal or professional relationship(s) with any Commissioner, Officer or employee of the Cincinnati Metropolitan Housing Authority (the Authority)? **Yes** **No**
 If "Yes," please attach a full detailed explanation, including dates, circumstances and current status

Non-Collusive Affidavit: The undersigned party submitting this proposal hereby certifies that such proposal is genuine and not collusive and that said proposer entity has not colluded, conspired,
CINCINNATI METROPOLITAN HOUSING AUTHORITY (the Authority)



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connived or agreed, directly or indirectly, with any proposer or person, to put in a sham proposal or to refrain from proposing, and has not in any manner, directly or indirectly sought by agreement or collusion, or communication or conference, with any person, to fix the proposal price of affiant or of any other proposer, to fix overhead, profit or cost element of said proposal price, or that of any other proposer or to secure any advantage against the Authority or any person interested in the proposed contract; and that all statements in said proposal are true.

PROPOSER'S STATEMENT

The undersigned proposer hereby states that by completing and submitting this Form and all other documents within this proposal submittal, he/she is verifying that all information provided herein is, to the best of his/her knowledge, true and accurate, and that if the Authority discovers that any information entered herein to be false, such shall entitle the Authority to not consider or make award or to cancel any award with the undersigned party. Further, by completing and submitting the proposal submittal, the undersigned proposer is thereby agreeing to abide by all terms and conditions pertaining to this RFP as issued by the Authority, either in hard copy or on the noted Internet System. Upon issuance of award to proposer, CMHA is accepting Contractor's offer contained in the proposal submittal and Best and Final Offer (if applicable). No other contractual documents will be necessary or accepted unless specifically expressed in the Contract Acceptance and Award. Pursuant to all RFP Documents, this Form of Proposal, and all attachments, and pursuant to all completed Documents submitted, including these forms and all attachments, the undersigned proposes to supply the Authority with the services described herein for the fee(s) submitted pertaining to this RFP.

Signature Date Printed Name Company

E-mail _____

Phone _____