## New York City Department of Housing Preservation and Development

Office of Enforcement & Neighborhood Services
Emergency Operations Division
Contractor Compliance Unit
nyc.gov/hpd

### **FACT SHEET**

# Tenant Interim Lease and Alternative Enforcement Program Prequalified List ("TIL/AEP PQL")

#### Purpose:

The City of New York ("City") Department of Housing Preservation and Development ("HPD") is responsible for the management, disposition, and development of City-owned urban renewal and/or residential properties and the enforcement of compliance with the laws, rules and regulations of New York State and the City governing residential dwellings in the City. HPD is responsible for the administration of buildings taken In-Rem, for Urban Renewal, or through Condemnation. Under HPD's Tenant Interim Lease Program ("TIL Program" or "TIL"), such buildings are leased to a tenants' association that takes over the management of the building. HPD's Alternative Enforcement Program ("AEP"), created through Local Law 29 of 2007 and as amended by Local Law 7 of 2011, is an enforcement program that enables HPD to identify severely distressed multiple dwelling residences and ensure that any violations and their underlying conditions are corrected. Under AEP, if the owner fails to make required corrections in compliance with the law, HPD has the right to hire a contractor to make the necessary repairs.

HPD, through its Office of Enforcement and Neighborhood Services Emergency Operations Division ("EOD") Contractor Compliance Unit ("CCU"), maintains lists of contractors who are prequalified to perform general construction work (not including the Wicks Law licensed trades) (each list a "PQL"). By establishing contractors' qualifications and experience in advance, the EOD maintains a pool of competent contractors from which it can draw to promptly perform emergency repairs in buildings administered by the TIL Program and AEP. These PQLs are used to select contractors for repair work up to a maximum of \$100,000 per work order.

Please note that HPD separately maintains a PQL under its Emergency Repair Program ("ERP"). While the work performed by contractors in the trades associated with the ERP PQL may be very similar or the same as work performed by TIL/AEP PQL contractors, the ERP PQL is separate and distinct from the TIL/AEP PQL. Vendors who are currently on the ERP PQL and who meet the criteria indicated herein are strongly encouraged to apply for inclusion on the TIL/AEP PQL. Vendors are also advised that solicitations for work under the TIL Program and AEP will be issued as work orders separate and distinct from ERP and will be clearly identified as TIL or AEP work orders.

In the event that HPD does not receive any responses to a solicitation issued to the TIL/AEP PQL, HPD reserves the right to reissue the solicitation to the ERP PQL to ensure that the necessary or required work is completed. In the event that there is a paucity of vendors or continuous lack of responses by vendors within the TIL/AEP PQL, HPD reserves the right to terminate the individual TIL/AEP PQL by giving written notice of such termination to all vendors on the list and thereafter issue solicitations for work under the TIL Program and/or AEP to the ERP PQL.

The vendors selected for inclusion on the TIL/AEP PQL will be invited to participate in the New York City Department of Small Business Services' (SBS) Construction Mentorship Program which focuses on increasing the use of small NYC contractors by making them more competitive in their pursuit of NYC contracts and increasing their contract capacity and capability. Firms participating in the Construction Mentorship Program will have the opportunity to take management classes and receive on-the-job training provided by a construction management firm.

### Participation by New York City Certified Minority-Owned and Women-Owned Business Enterprises

Local Law No. 129 of 2005, which added Section 6-129 to the Administrative Code of the City of New York, and was amended by Local Law 1 of 2013, created a program for participation by minority-owned and women-owned business enterprises (MBEs and WBEs) in City procurement. This program is designed to enhance the opportunities for M/WBE contractors and subcontractors in City procurements. The NYC Department of Small Business Services ("SBS") certifies the firms categorized as M/WBEs. New York City Certified M/WBEs are strongly encouraged to apply to HPD's Pregualified Contractor Lists.

If you are an MBE or WBE and are not yet certified, please contact SBS through their website at www.nyc.gov/sbs or call the Citizen Service Center at 311 and ask for Small Business Services.

### **Requirements for Applying:**

HPD will consider only those applications for the TIL/AEP Pre-qualified Lists that meet any one of the following criteria:

- Applicant must be a Minority and Women-owned Business Enterprise ("New York City-certified M/WBE") certified by the New York City Department of Small Business Services (SBS)<sup>1</sup>; or
- 2. Applicant must have entered into a qualified joint venture agreement between one or more New York City-certified M/WBEs, in which such M/WBE firm(s) are entitled or exposed to at least 25% of the total profit or loss<sup>2</sup>; or
- 3. Applicant must agree to subcontract no less than 50% of any awarded job to a New York City-certified M/WBE for each and every work order awarded.

Vendors who are currently approved on HPD's ERP PQL and who meet any of the criteria above may also apply for inclusion on the TIL/AEP PQL by completing the attached Application Form.

TIL/AEP PQL Application

<sup>1</sup> Firms that are in the process of becoming a New York City-certified MWBE may submit a PQL application and submit an M/WBE Acknowledgement Letter, which states that SBS has begun the Certification process.

<sup>2</sup> If a Joint Venture is not registered, you must provide a copy of the Joint Venture Agreement with your application. If the Joint Venture is registered, you must provide a copy of the document(s) evidencing such registration with your application.

#### **How to Apply**

All organizations intending to do business with the City of New York <u>must</u> enroll in the City's Procurement and Sourcing Solutions Portal ("PASSPort") at:

https://www1.nyc.gov/site/mocs/systems/about-go-to-passport.page

Once you have enrolled in PASSPort, the following documents must be submitted to HPD's Contractor Compliance Unit, at 100 Gold Street, Room 6-J, New York, NY 10038, for review and evaluation:

- (1) An original completed Application Form for inclusion on one of the Prequalified Lists, signed before a Notary by an owner or officer of the company, along with all attached documents, including:
  - **a.** Tax Affirmation form completed and signed. Add corporate seal if a corporation.
  - **b. Bidder's Certification of Compliance with Iran Divestment Act** completed and signed before a Notary.
  - **c. Doing Business Data Form** completed and signed.
- (2) A copy of your Business Certificate or Certificate of Incorporation.
- (3) Internal Revenue Service Letter 147C (proof of tax ID number) To obtain call 1-800-829-0115
- (4) Most recent company annual Financial Statements, including Balance Sheet and Statement of Income.
- (5) References from separate clientele for a minimum of three (3) comparable jobs completed within the City of New York during the past twelve (12) months. If applying to more than one (1) PQL, three (3) comparable references for jobs completed within the past twelve (12) months must be provided for each PQL. Please note: in lieu of references, HPD may, at its own discretion, review and consider Performance Evaluations listed in PASSPort, if applicable to vendor.
- (6) Copies of any Trade Licenses and/or Certifications held by the company and/or its principals and employees are required, including, without limitation:
  - a. A New York City Department of Consumer Affairs ("DCA") Home Improvement Contractor License, required for all trades in General Construction. Further information on obtaining such license can be found on the DCA website at <a href="http://www1.nyc.gov/site/dca/businesses/licenses-apply.page">http://www1.nyc.gov/site/dca/businesses/licenses-apply.page</a>.
  - b. An EPA Renovator Firm Certification. (HPD strongly recommends that all General Construction companies obtain EPA Renovator Firm Certification as most HPD repair jobs require such certification by federal law and HPD will only solicit jobs that require EPA Renovator Firm Certification to companies that have such certification.) Further information on obtaining such license can be found on EPA website at: https://www.epa.gov/lead#contractors
- (7) An active Dunn & Bradstreet "D-U-N-S" Number.
- (8) Registration on the federal System for Award Management (SAM.gov) website.

### **Review Process and Eligibility**

HPD will verify and evaluate the information contained in your application, check the references provided and/or Performance Evaluations, and secure the appropriate clearances as required, for completion of the process.

In addition, as part of the application process, applicants will be required to appear for a technical interview to demonstrate that they have appropriate knowledge of construction techniques and regulations and confirm that they have the requisite experience and ability to perform the work. Interviews will be conducted by qualified agency personnel who will evaluate the applicant's experience and their knowledge of construction techniques and regulations.

All applicants are required to attend a Pre-Award Conference, the topics of which include Equal Employment Opportunity, Labor Standards, Subcontractor Obligations/Business Enterprise Programs, and Fair Housing. Applicants must arrange for their principal, their Equal Employment Opportunity Officer, or other designee to attend. Applicants can schedule an appointment by calling (212) 863-7928. Please note, however, that appointments are not necessary, as HPD holds such conferences in the Lobby of 100 Gold Street, New York, NY 10038 every Tuesday, excluding holidays, at 9:45 A.M. If you wish to attend, please arrive no later than 9:30 A.M.

### **PQL Orientation:**

Once your eligibility has been established, you will be required to appear for an Orientation at HPD, at which you will be provided information as to procedures on bidding on jobs, guidelines on submission of paperwork, and requirements on how to remain on the list(s) as a Pre-qualified Vendor with HPD. At this Orientation you must present the insurance documents as required below.

#### **Insurance Requirements:**

You must provide evidence that you maintain the following types of insurance, with the minimum limits and special conditions as specified. All required insurance policies must be maintained with companies that may lawfully issue such policies in the United States and have an A.M. Best rating of "A-/VII" or a Standard and Poor's rating of at least "A". Please note that insurance requirements may change as required under a specific contract:

- 1. Commercial General Liability Insurance with combined single limits not less than \$1,000,000 per occurrence and \$2,000,000 annual aggregate, covering claims for property damage and/or bodily injury, including death, is required. . As proof of such insurance, you shall provide
  - a. a Certificate of Insurance certifying the issuance and effectiveness of the policy and naming the City of New York, including its officials and employees as additional insureds; and
  - **b.** a duly executed Certification by Insurance Broker or Agent in the form attached hereto.
- 2. Workers' Compensation Insurance, Employer's Liability Insurance, and Disability Benefits Insurance as required by the laws of the laws of New York State.
  - **a.** As proof of such insurance, you shall provide:
    - for Workers' Compensation Insurance one of the following forms: C-105.2 Certificate of Workers' Compensation Insurance; U-26.3 - State Insurance Fund Certificate of Workers' Compensation Insurance; Request for WC/DB Exemption (Form CE-200); the equivalent or successor forms used by the New York State Workers' Compensation Board; or other proof of insurance in a form acceptable to HPD.

ii. for Disability Benefits Insurance you shall submit DB-120.1 - Certificate Of Insurance Coverage Under The NYS Disability Benefits Law; Request for WC/DB Exemption (Form CE-200); equivalent or successor forms used by the New York State Workers' Compensation Board; or other proof of insurance in a form acceptable to HPD. .

Note: ACORD forms are not acceptable.

- b. You shall also provide an Experience Modification Rate ("EMR") for the past three (3) years. In such cases where an EMR cannot be obtained, HPD shall take into consideration an applicant's record of protecting the health and safety of workers on job sites by such means as may be available.
- 3. Commercial Automobile Liability Insurance with a combined single limit of not less than \$500,000 per accident for liability arising out of ownership, maintenance or use of any owned (if any), non-owned and hired vehicles with coverage at least as broad as the latest edition of ISO Form CA0001. As proof of such insurance, you shall provide:
  - a. a Certificate of Insurance certifying the issuance and effectiveness of the policy; and
  - **b.** a duly executed Certification by Insurance Broker or Agent in the form attached hereto.

**NOTE:** If vehicles are used for transporting hazardous materials, the policy shall be endorsed to provide pollution liability broadened coverage for covered vehicles (endorsement CA 99 48) as well as proof of MCS 90.

<u>Please Note</u>: The insurance requirements listed here are subject to change by HPD, in its sole discretion, as may be required under specific contracts.

### **PQL Contractor Communications Requirements:**

Your company must have the following:

- 1. dedicated working fax number,
- 2. a company email address,
- **3.** a company phone which must be staffed during business hours and/or have the ability to receive messages which the vendor is able to and does regularly retrieve.

#### Notes:

The selection of vendors from the TIL/AEP PQL to solicit the performance of work will be made randomly using a computer-generated program. In some extreme emergency cases, however, alternative methods of selection may be employed.

BE ADVISED that a prequalified vendor's lack of response to a solicitation under the TIL/AEP PQL shall be deemed a response of 'no bid' for the purpose of complying with the Procurement Policy Board Rule 3-10(I)(3).

For more information or assistance on prequalification, please contact the Contractor Compliance Unit at (212) 863-7815. HPD also conducts weekly vendor opportunity sessions where contractors can learn about business opportunities with HPD and other City Agencies. For more information or to set up an appointment, please call HPD at (212) 863-7928.

### **New York City Department of Housing Preservation and Development**

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# Criteria for Acceptance Emergency Operations Division Emergency Repair Program Prequalified Contractor Lists

The minimum criteria for acceptance to and maintenance on HPD's ERP PQL includes, but not limited to, the following:

- 1. Business integrity and financial capacity.
- 2. Company must have been in business for at least one (1) year at the time of application filing.
- 3. Absence of delinquent tax or other governmental debts or liens.
- 4. Absence of active governmental exclusions.
- PASSPort enrollment
- 6. Department of Investigation Vendor Name Check with no closing memoranda.
- 7. References from separate clientele for a minimum of three (3) comparable jobs completed within the City of New York during the past twelve (12) months. If applying to more than one (1) PQL, three (3) comparable references for jobs completed within the past twelve (12) months <u>must be provided for each PQL</u>. Please note: in lieu of references, HPD may, at its own discretion, review and consider Performance Evaluations listed in PASSPort, if applicable to vendor..
- 8. A completed and approved Application for Vendor Pregualification.
- 9. Continuous insurance coverage as described in the Fact Sheet.
- 10. Willingness to work in all boroughs of the City of New York.
- 11. For General Construction work, ability of Principal or permanent staff member to pass a technical interview based upon knowledge of construction techniques and terms.
- Continuous licensure/certification as required to perform the trades requested.
- 13. Maintenance of a Workers' Compensation Experience Modification Rate of 1.0 or less.
- Continuous adherence to all requirements specified in the attached "Fact Sheet."
- 15. An active Dunn & Bradstreet "D-U-N-S" Number.
- 16. Registration on the federal System for Award Management (SAM.gov) website.

# APPLICATION FOR PREQUALIFIED CONTRACTOR LISTS Emergency Operations Division

### **Tenant Interim Lease and Alternative Enforcement Program**

This **application must be completed by a principal** (owner or corporate officer) of the applicant. Please answer all questions fully and completely, as this will expedite the review. Please be assured that all information provided will be held in confidence and will be used only to establish your qualifications to perform work under Emergency Operations Division programs.

Return the completed application and supporting documentation to:
 NYC Department of Housing Preservation and Development
Office of Enforcement & Neighborhood Services - Emergency Operation Division
 Contractor Compliance Unit
 100 Gold Street, Room 6-J New York, NY 10038

Nar	me of Company:								
Bus	siness Address (No P.O. B	ox):							
Contact Person:					Title:				
Pho	one No.:					FAX No.:			
Em	ergency No.:					Cellular No.(s):			
Em	ail Address(es):								
PA: Are	SSPort enrollment date: you a NYC Certified Min	ority							
TYI Dat	SCRIPTION OF BUSINES PE OF ORGANIZATION: e ablished:		·		I	ership		Joint Venture □ LLC	
Soc	Employer I.D. No. (EIN) or Social Security No.: DUNS Number:  Gross Receipts in most recent tax year: \$ Year ending (date)								
	TRADE OR TRADES F	OR	WHICH PREQUAL	IFICATI	ON	IS REQUESTED (Check	all a	pplicable PQL Lists):	
	Asbestos Abatement		Exterminating (Pest Control)	Services		GC: Roof (Repair)		Mold Remediation	
	Asbestos Analysis		Fireguard Services			GC: Scaffolding		Plumbing: Repairs	
	Asbestos Investigation		GC: Carpenter			GC: Seal-up		Plumbing: Sprinklers	
	Asbestos Monitoring		GC: Concrete			GC: Scrape, Plaster & Paint		Rubbish- Laborers Clean-up	
	Boiler/Burner: Oil		GC: Door			GC: Window		Sewer & Water Mains	
	Boiler/Burner: Gas		CG: Fence			Intercom Systems		Other (Specify):	
	Drain Cleaning (Stoppage)		GC: Masonry			Iron Work: Fire Escape Replacement & Welding		Other (Specify):	
	Electrical Repair		GC: Mildew Remova	al		Lead Abatement		Other (Specify):	
	Elevator Services		GC: Roof (New)			Lead Analysis		Other (Specify):	

How did you hear about the	HPD Prequalified Lists: □	City Record ☐ Internet ☐ Tradesma	an
☐ Other:			
If your company is approve	d would you be interested in t	he following program(s)?	
24 Hour Program ☐ Yes*	□ No	Disaster Preparedness Program □	Yes □ No
	uires you to be willing to respond to terial to start work within two (2) ho	o an immediate emergency at any time, day or urs of notification.	night, and be able to
PRINCIPALS: List below a stock): Attach additional page		oration, all officers and others who own mo	re than 10% of the
Name of Principal	Home Address	Social Security No.	%
-	-	s as part of your work force, and would you e: All subcontractors must be enrolled in F	
If yes, provide the name(s) of	the subcontractor(s) and percer	ntage of subcontracting you anticipate usin	g:
	rmation is voluntary and will be als 51 percent or more of the bus	used only for statistical purposes. Please siness (CHECK ONLY ONE):	check which of the
□ White □ Native America	ın □ Asian □ African-Am	erican □ Hispanic □ Other	
Please check which gender g	roup controls 51% (percent) or r	more of the business: $\square$ Male $\square$ Fe	male
LICENSES:			
	certifications held in the name o	f the company or any individual, and attacl	n copies:
Type of License	Issuing Agency	Individual or Organization Name	Expiration Da
1.			
2.			
3.			
4.			
5.			

STAFF: D	escribe number of sta	ff and their qualifications, i.e. thei	r technical skills, experience, and in which trades.
EQUIPMENT	T: Describe below perf	inent equipment, materials, and s	supplies owned by your company, or attach a list.
By my signa knowledge a		at the information contained in t	his application is accurate and true to the best of m
		Signature	
		Print Name	
Sworn to before	ore me this	day of	, 20
	Notary's N	ame	

### **REFERENCES**

<b>Applicant Company</b>	y Name:		PQL List Name:  mparable jobs completed within the City of New York during the past twelve (12) months. If applying to some completed within the past twelve (12) months must be provided for each PQL. Please note: in lieu coefformance Evaluations listed in PASSPort, if applicable to vendor. (Copy this page for each PQL List)					
more than one (1) F	PQL, three (3) cor	mparable references for jo						
For each reference,	, provide the follo	owing information:						
	CLIENT		LOCATION AND DESCRIPTION OF WORK	# OF JOBS	DATES	DOLLAR VALUE (\$)		
Person's Name:								
Company Name:								
Address:								
City:	State:	Zip Code:	-					
Person's Name:								
Company Name:								
Address:								
City:	State:	Zip Code:	-					
Person's Name:								
Company Name:								
Address:								
City:	State:	Zip Code:						
Person's Name:								
Company Name:								
Address:								
City:	State:	Zip Code:						

### TAX AFFIRMATION

The undersigned Contractor affirms and declares that it is not in arrears to The City of New York upon debt, contract or taxes and is not a defaulter, as surety or otherwise, upon obligation to The City of New York, and has not been declared not responsible, or disqualified, by any agency of The City of New York, nor is there any proceeding pending relating to the responsibility or qualification of the Contractor to receive public contracts except:

(If none, so state)
Full name of Proposer or Bidder:
Address
City
State
Zip Code
CHECK ONE (1) BOX AND INCLUDE APPROPRIATE NUMBER:
☐ A - Individual or Sole Proprietorships SOCIAL SECURITY NUMBER
<ul> <li>□ B - Partnership, Joint Venture or other unincorporated organization</li> <li>EMPLOYER IDENTIFICATION NUMBER</li> </ul>
☐ C - Corporation EMPLOYER IDENTIFICATION NUMBER
By:
Signature
Title

If a corporation place seal here

Must be signed by an officer or duly authorized representative.

\* Under the Federal Privacy Act the furnishing of Social Security Numbers by bidders on City contracts is voluntary. Failure to provide a Social Security Number will not result in a bidder's disqualification. Social Security Numbers will be used to identify bidders, proposers or vendors to ensure their compliance with laws, to assist the City in enforcement of laws as well as to provide the City a means of identifying businesses which seek City Contracts.



LOUISE CARROLL
Acting Commissioner
ANNMARIE SANTIAGO
Deputy Commissioner
JOSH CUCCHIARO
Assistant Commissioner

Office of Enforcement & Neighborhood Services
Emergency Operations Division
100 Gold Street
New York, N.Y. 10038

# Dear Applicant:

We are distributing the enclosed information regarding the Iran Divestment Act of 2012 to all applicants to HPD's Prequalified List of vendors. This Act prohibits municipalities, including the City of New York, from doing business with persons engaged in investment activities in the energy sector of Iran. See the descriptions on the following page to determine if you or your company are engaged in such activities as defined by the Act.

Read the attached documents carefully. Pursuant to General Municipal Law §103-g, please sign before a notary the <u>Bidder's Certification Of Compliance with Iran Divestment Act</u>, checking one of the two boxes, as applicable, to indicate whether or not you appear on the list of entities engaged in investment activities in Iran created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law. If you are unable to certify that you are not on the list, you must attach a signed, notarized statement detailing why you cannot do so.

An owner or officer of the company must sign before a notary the <u>Bidder's</u> <u>Certification of Compliance with Iran Divestment Act</u>, with the appropriate box checked, and return the original to:

New York City Department of Housing Preservation and Development
Contractor Compliance Unit
100 Gold Street
Contractor Compliance Unit, Room 6J
New York, NY 10038

Be advised that completion of this document is required in order to be qualified for the vendor list.

Sincerely,

Michael Vayser Contractor Compliance

# IRAN DIVESTMENT ACT COMPLIANCE RIDER FOR NEW YORK CITY CONTRACTORS

The Iran Divestment Act of 2012, effective as of April 12, 2012, is codified at State Finance Law ("SFL") §165-a and General Municipal Law ("GML") §103-g. The Iran Divestment Act, with certain exceptions, prohibits municipalities, including the City, from entering into contracts with persons engaged in investment activities in the energy sector of Iran. Pursuant to the terms set forth in SFL §165-a and GML §103-g, a person engages in investment activities in the energy sector of Iran if:

- (a) the person provides goods or services of twenty million dollars or more in the energy sector of Iran, including a person that provides oil or liquefied natural gas tankers, or products used to construct or maintain pipelines used to transport oil or liquefied natural gas, for the energy sector of Iran; or
- (b) the person is a financial institution that extends twenty million dollars or more in credit to another person, for forty-five days or more, if that person will use the credit to provide goods or services in the energy sector in Iran and is identified on a list created pursuant to paragraph (b) of subdivision three of Section 165-a of the State Finance Law and maintained by the Commissioner of the Office of General Services.

A bid or proposal shall not be considered for award nor shall any award be made where the bidder or proposer fails to submit a signed and verified bidder's certification.

Each bidder or proposer must certify that it is not on the list of entities engaged in investment activities in Iran created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law. In any case where the bidder or proposer cannot certify that they are not on such list, the bidder or proposer shall so state and shall furnish with the bid or proposal a signed statement which sets forth in detail the reasons why such statement cannot be made. The City of New York may award a bid to a bidder who cannot make the certification on a case by case basis if:

- (1) The investment activities in Iran were made before the effective date of this section (i.e., April 12, 2012), the investment activities in Iran have not been expanded or renewed after the effective date of this section and the person has adopted, publicized and is implementing a formal plan to cease the investment activities in Iran and to refrain from engaging in any new investments in Iran: or
- (2) The City makes a determination that the goods or services are necessary for the City to perform its functions and that, absent such an exemption, the City would be unable to obtain the goods or services for which the contract is offered. Such determination shall be made in writing and shall be a public document.

# IRAN DIVESTMENT ACT COMPLIANCE RIDER FOR NEW YORK CITY CONTRACTORS

Pursuant to General Municipal Law §103-g, which generally prohibits the City from entering into contracts with persons engaged in investment activities in the energy sector of Iran, the bidder/proposer submits the following certification:

[Please Check One]

ER'S CERTIFICATION						
By submission of this bid or proposal, each bidder/proposer and each person signing or behalf of any bidder/proposer certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief, that each bidder/proposer is not on the list created pursuant to paragraph (b) of subdivision 3 of Section 165-a of the State Finance Law.						
appear on the list created pursuant to para	d the name of the bidder/proposer does no agraph (b) of subdivision 3 of Section 165-a of signed statement setting forth in detail why					
, New York						
, 20						
	SIGNATURE					
	PRINTED NAME					
	TITLE					
to before me this						
_ day of, 20						
Public						
	By submission of this bid or proposal, each behalf of any bidder/proposer certifies, and certifies as to its own organization, und knowledge and belief, that each bidder/p paragraph (b) of subdivision 3 of Section of I am unable to certify that my name and appear on the list created pursuant to parathe State Finance Law. I have attached a cannot so certify.					

Dated:



# **Doing Business Data Form**

To be completed by the Cit	ty agency prior to distribution	Agency	Т	ransaction ID		
Check One	Transaction Type (check one)					
☐ Proposal ☐ Award	☐ Concession ☐ Economic I	Development Agreement	☐ Franchise	☐ Grant ☐ Pe	ension Investment Contract	☐ Contract
either type responses directly	for or proposing on an award or a into this fillable form or print answ n is required for a proposal to b	wers by hand in black ink,	and be sure to fill	out the certificati	ion box on the last page. <b>Sub</b>	mission of a
Data Form will be included in	nation to be provided on principa a public database of people who this form will be disclosed to the	do business with the City	of New York, as v	vill the organization	ons that own 10% or more of	the enitity. No
	d Data Form to the City office the or 212-788-8104 with any ques					
Entity Information				If you are comp	pleting this form by hand, <b>plea</b>	ase print clearly
Entity EIN/TIN	Entity Nar	me				
Filing Status		(Select One)				
<b>NEW:</b> Data Forms submitted listing of <b>organizations</b> , as wor more ownership of the en of ownership is submitted the update form, a no change form.	vell as individuals, with 10% tity. Until such certification rough a change, new or	☐ Change from previous changed, and indicate	us Data Form date te the name of the	ed persons who no	m. Fill out the entire form.  Fill out only those secti longer hold positions with the Skip to the bottom of ti	e entity.
apaate form, a no change to	ini wiii not be accepted.	in the change nom pre	vious Bata i Simi		Oup to the bottom of the	ic last page.
Entity is a Non-Profit	□ Yes □ No					
Entity Type	any type) □ Joint Venture □	LLC ☐ Partnership (any	type) 🗆 Sole P	roprietor	ner (specify)	
Address						
City			State		Zip	
Phone	E-mail					
	hange Form and the person listed laced so his/her name can be ren  O) or equivalent officer				ate that the change became	
-	er, such as the President, Executive Direc					
First Name	MI _	Last			_ Birth Date (mm/dd/yy)	
Office Title		Employer (if no	ot employed by er	ntity)		
Home Address						
☐ This person replaced forme	er CEO				_ on date	
Chief Financial Officer (CFO	) or equivalent officer such as the Treasurer, Comptroller, Finan	cial Director or VP for Finance.			☐ This position	on does not exist
First Name	MI _	Last			_ Birth Date (mm/dd/yy)	
Office Title		Employer (if no	ot employed by er	ntity)		
Home Address						
☐ This person replaced forme	er CFO				on date	
Chief Operating Officer (CO The highest ranking operational office	O) or equivalent officer er, such as the Chief Planning Officer, Dir	rector of Operations or VP for Op	perations.		☐ This position	on does not exist
First Name	MI _	Last			_ Birth Date (mm/dd/yy)	
Office Title		Employer (if no	ot employed by e	ntity)		
Home Address						
☐ This person replaced forme	er COO				_ on date	

### **Principal Owners**

Please fill in the required identification information for all individuals or organizations that, through stock shares, partnership agreements or other means, **own or control** 10% or more of the entity. If no individual or organization owners exist, please check the appropriate box to indicate why and skip to the **Senior Managers** section. If the entity is owned by other companies that control 10% or more of the entity, those companies must be listed. If an owner was identified on the previous page, fill in his/her name and write "See above." If the entity is filing a Change Form, list any individuals or organizations that are no longer owners at the bottom of this section. If more space is needed, attach additional pages labeled "Additional Owners."

If more space is needed, attach addition	nal pages labeled "Additional Owners."	
There are no owners listed because ( ☐ The entity is not-for-profit	(select one):  ☐ The entity is an individual	☐ No individual or organization owns 10% or more of the entity
Other (explain)		
Individual Owners (who own or contr	ol 10% or more of the entity)	
First Name	MI Last	Birth Date (mm/dd/yy)
Office Title	Emp	oloyer (if not employed by entity)
Home Address		
First Name	MI Last	Birth Date (mm/dd/yy)
Office Title	Emŗ	oloyer (if not employed by entity)
Home Address		
Organization Owners (that own or co	entrol 10% or more of the entity)	
Organization Name		
Organization Name		
Organization Name		
Remove the following previously-rep	orted Principal Owners	
Name		Removal Date
Name		Removal Date
Name		Removal Date
will be considered incomplete. If a senio	or manager has been identified on a pre	ny transaction with the City. At least one senior manager must be listed, or the Data Form evious page, fill in his/her name and write "See above." If the entity is filing a Change Form, i. If more space is needed, attach additional pages labeled "Additional Senior Managers."
•	MI Last	Birth Date (mm/dd/yy)
		bloyer (if not employed by entity)
Home Address	LIIIP	nover (it not employed by entity)
First Name	MI Last	Birth Date (mm/dd/yy)
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	•	in the completed by chargy
First Name	MI Last	Birth Date (mm/dd/yy)
		oloyer (if not employed by entity)
Remove the following previously-rep		
Name	•	removal date
		removal date
		nal pages is accurate and complete. I understand that willful or fraudulent submission of a e and therefore denied future City awards.
Name		Title
Entity Name		Work Phone #
<b>O</b> ! .		





### What is the purpose of the Doing Business Data Form (DBDF)?

To collect accurate, up-to-date identification information about organizations that have business dealings with the City of New York in order to comply with Local Law 34 of 2007 (LL 34), a campaign finance reform law. LL 34 limits municipal campaign contributions from principal officers, owners and senior managers of entities doing business with the City and mandates the creation of a Doing Business Database to allow the City to enforce the law. The information requested in this DBDF must be provided, regardless of whether the organization or the people associated with it make or intend to make campaign contributions. No sensitive personal information collected will be disclosed to the public.

# Why have I received this DBDF?

The contract, franchise, concession, grant or economic development agreement you are proposing on, applying for or have already been awarded is considered a business dealing with the City under LL 34. No proposal or application will be considered and no award will be made unless this DBDF is completed. Most transactions valued at more than \$5,000 are considered business dealings and require completion of the Doing Business Data Form. Exceptions include transactions awarded on an emergency basis or by "conventional" competitive sealed bid (i.e. bids that do not use a prequalified list or "Best Value" selection criteria.) Other types of transactions that are considered business dealings include real property and land use actions with the City.

#### What individuals will be included in the Doing Business Database?

The principal officers, owners and certain senior managers of organizations listed in the Doing Business Database are themselves considered to be doing business with the City and will be included in the Database.

- **Principal Officers** are the Chief Executive Officer (CEO), Chief Financial Officer (CFO) and Chief Operating Officer, or their functional equivalents. See the DBDF for examples of titles that apply.
- **Principal Owners** are individuals who own or control 10% of more of the organization. This includes stockholders, partners and anyone else with an ownership or controlling interest in the entity.
- Senior Managers include anyone who, either by job title or actual duties, has substantial discretion and high-level oversight regarding the solicitation, letting or administration of any contract, concession, franchise, grant or economic development agreement with the City. At least one Senior Manager must be listed or the Data Form will be considered incomplete.

NEW FOR 2018: As of January 2018, the DBDF must report organizations, as well as individuals, that own 10% or more of the entity. A DBDF with such a certification, filed as a full (never filed before) or as a change form, must be submitted before an entity can then file a DBDF that indicates no changes since the previous form. Contact DBA at 212-788-8104 or at doingbusiness@mocs.nyc.gov to inquire if DBA has received such a form.

### I have already completed a Doing Business Data Form, do I have to submit another one?

Yes. An organization is required to submit a DBDF each time it enters into a transaction considered a business dealing with the City, including contract, concession and franchise proposals. However, the DBDF has both a Change option, which requires only information that has changed since the last DBDF was filed, and a No Change option. No organization should have to fill out the entire DBDF more than once.

If you have already submitted a DBDF for one transaction type (such as a contract), and this is the first time you are completing a DBDF for a different transaction type (such as a grant), please select the Change option and complete Section 4 (Senior Managers) for the new transaction type.

# Will the personal information on the DBDF be available to the public?

No. The names and titles of the officers, owners and senior managers reported on the DBDF will be made available to the public, as will information about the organization itself. However, personal identifying information, such as home address and date of birth, will not be disclosed to the public, and home address will not be used for communication purposes.

### I provided some of this information in PASSPort; do I have to provide it again?

Yes. Although a Doing Business Data Form and PASSPort request some of the same information, they serve entirely different purposes. In addition, the DBDF requests information concerning senior managers, which is not in PASSPort.

# What organizations will be included in the Doing Business Database?

Organizations that hold \$100,000 or more in grants, contracts for goods or services, franchises or concessions (\$500,000 for construction contracts), or that hold any economic development agreement or pension fund investment contract, are considered to be doing business with the City for the purposes of LL 34. Because all of the business that an organization does or proposes to do with the City will be added together, the DBDF must be completed for all transactions valued at more than \$5,000 even if the organization doesn't currently do enough business with the City to be listed in the Database.

### No one in my organization plans to contribute to a candidate; do I have to fill out this DBDF?

Yes. All organizations are required to return this DBDF with complete and accurate information, regardless of the history or intention of the entity or its officers, owners or senior managers to make campaign contributions. The Doing Business Data Form must be complete so that the Campaign Finance Board can verify whether future contributions are in compliance with the law.

# My organization is proposing on a contract with another firm as a Joint Venture that does not exist yet; how should the Data Form be completed?

A joint venture that does not yet exist must submit a DBDF for each of its component firms. If the joint venture receives the award, it must then complete a form in the name of the joint venture.

# How long will an organization and its officers, owners and senior managers remain listed on the Doing Business Database?

- Contract, Concession and Economic Development Agreement holders: generally for the term of the transaction, plus one year.
- Franchise and Grant holders: from the commencement or renewal of the transaction, plus one year.
- **Pension investment contracts**: from the time of presentation on an investment opportunity or the submission of a proposal, whichever is earlier, until the end of the contract, plus one year.
- **Line item and discretionary appropriations**: from the date of budget adoption until the end of the contract, plus one year.
- **Contract proposers**: for one year from the proposal date or date of public advertisement of the solicitation, whichever is later.
- Franchise and Concession proposers: for one year from the proposal submission date.

For information on other transaction types, contact the Doing Business Accountability Project.

### How does a person remove him/herself from the Doing Business Database?

When an organization stops doing business with the City, the people associated with it are removed from the Database automatically. However, any person who believes that s/he should not be listed may apply for removal. Reasons that a person would be removed include his/her no longer being the principal officer, owner or senior manager of the organization. Organizations may also update their database information by submitting an update form. Removal Request and Update forms are available online <a href="https://www1.nyc.gov/site/mocs/resources/forms.page">https://www1.nyc.gov/site/mocs/resources/forms.page</a> or by calling 212-788-8104.

### What are the campaign contribution limits for people doing business with the City?

Contributions to City Council candidates are limited to \$250 per election cycle; \$320 to Borough President candidates; and \$400 to candidates for citywide office. Please contact the NYC Campaign Finance Board for more information at <a href="https://www.nyccfb.info">www.nyccfb.info</a>, or 212-306-7100.

# The DBDF is to be returned to the City office that issued it.

If you have any questions about the Doing Business Data Form please contact the Doing Business Accountability Project at 212-788-8104 or <a href="mailto:doingbusiness@mocs.nyc.gov">doingbusiness@mocs.nyc.gov</a>.

# CITY OF NEW YORK CERTIFICATION BY INSURANCE BROKER OR AGENT

The undersigned insurance broker or agent represents to the City of New York that the attached Certificate of Insurance is accurate in all material respects.

	[Name of broker or agent (typewritten)]
	[Address of broker or agent (typewritten)]
	[Email address of broker or agent (typewritten)]
	[Phone number/Fax number of broker or agent (typewritten)]
	[Signature of authorized official, broker or agent]
	[Signature of authorized official, broker of agent]
	[Name and title of authorized official, broker, or agent (typewritten)]
State of	) ) ss.:
County of	) ss.: )
Swarn to hafara ma this	day of20
Sworn to before the tills	day 01 20
NOTARY PUBLIC FOR	R THE STATE OF