REQUEST FOR PROPOSALS (RFP)
DISEASE CONTROL
GRANT MANAGEMENT AND COORDINATION SERVICES

ISSUE DATE: May 9, 2022
RESPONSE DUE DATE: June 3, 2022
REPLY TO: PROCUREMENT@FPHNYC.ORG

RELEASED BY

22 Cortlandt Street, 8th Floor, Suite 802 • New York, NY 10007
Phone: (646) 710-4860 • Fax: (212) 693-1856 • www.fphnc.org
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SECTION I: SUMMARY OF THE REQUEST FOR PROPOSALS

This Request for Proposals (RFP) is issued by the Fund for Public Health in New York City (FPHNYC), on behalf of the New York City Department of Health and Mental Hygiene’s (NYC DOHMH) Bureau of Division Management and Systems Coordination (DMSC) to provide comprehensive project management services facilitating successful oversight and coordination across multiple, multimillion dollar federal grants awarded to the Division of Disease Control.

A. RFP Timetable

<table>
<thead>
<tr>
<th>EVENT</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Release of Request for Proposals</td>
<td>May 9, 2022</td>
</tr>
<tr>
<td>Deadline for Written Questions</td>
<td>May 18, 2022 - 11:59 PM EST</td>
</tr>
<tr>
<td>Q&amp;A Posted</td>
<td>May 23, 2022</td>
</tr>
<tr>
<td>Deadline for Receipt of Proposals</td>
<td>June 3, 2022 - 11:59 PM EST</td>
</tr>
<tr>
<td>Expected Notice of Award*</td>
<td>June 22, 2022</td>
</tr>
<tr>
<td>Expected Project Start Date*</td>
<td>July 19, 2022</td>
</tr>
</tbody>
</table>

*Notice of award and project start dates are target dates only. FPHNYC may amend the schedule as needed.

B. Applicant Eligibility

To be eligible for consideration, Applicants must have:

- A minimum of five (5) years’ experience in project management;
- Experience applying for and administering large (at least $5 million annually) government grants;
- Experience working with city, county, or state agencies on public health initiatives;
- Information systems to carry out collaborative work (e.g., MS Teams, Zoom, etc.);
- Systems in place to record time and effort toward contract scope and deliverables;
- Registered as a City of New York approved vendor. Further detail on registering as an approved vendor can be found in Section V on page 14.
- Proof of required insurance coverage. Further detail on insurance requirements can be found in Section V on page 13.

C. Basic Funding Information

<table>
<thead>
<tr>
<th>Funding Term</th>
<th>Initial contract period will begin on July 19, 2022 and run through June 30, 2023. Subsequent contract periods are contingent upon funding availability (up to two years).</th>
</tr>
</thead>
</table>
Ast icipated Funding and Payment Structure

The anticipated funding amount is $250,000 per period. DOHMH and FPHNYC reserve the right to change the value of the award. Payments will be released for invoiced hours worked and deliverables achieved. **Invoices for completion of deliverables must be accompanied by documented proof of completion and approved by DOHMH.**

*See budget section for more details.*

D. RFP Inquiries, Written Questions and Answers

Questions and requests for clarification about this RFP must be submitted via e-mail to procurement@fphnyc.org with the subject line of “Disease Control Grant Management and Coordination Services.” All questions and inquiries must be received by May 18, 2022 by 11:59 p.m. EDT. Any questions received after the deadline may not be answered.

The Q&A will be posted at: [https://www.fphnyc.org/get-involved/rfps/](https://www.fphnyc.org/get-involved/rfps/).

Applicants are encouraged to check the webpage frequently to stay informed throughout the procurement process.

E. Submission Instructions

Completed proposals must be submitted electronically. Please format all documents submitted in response to this in accordance with the provided instructions. Proposals must be e-mailed to the following address, no later than **Friday, June 3, 2022 - 11:59 PM EST.**

**Subject:** Disease Control Grant Management and Coordination Services  
**E-mail:** procurement@fphnyc.org

Interested applicants should follow the proposal instructions in Section III: Completing the Proposal.

F. Addenda to the RFP

If necessary, FPHNYC will issue addenda to amend conditions or requirements relating to the RFP. Any addenda to the RFP will be posted on the FPHNYC website: [https://www.fphnyc.org/get-involved/rfps/](https://www.fphnyc.org/get-involved/rfps/). Applicants are encouraged to check the website prior to submitting their final proposal. Each Applicant shall acknowledge receipt of such addenda on the form provided.
SECTION II: SCOPE OF SERVICES

A. Background/Purpose

In early 2020, New York City Department of Health and Mental Hygiene (NYC DOHMH) was selected to receive supplemental Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) funding from the Centers for Disease Control and Prevention (CDC) to respond to the COVID-19 pandemic. Since the start of the response, NYC has received supplemental funding in excess of $350MM to support various segments of the COVID-19 response which includes expanding testing, building laboratory capacity, addressing gaps in information systems, conducting case investigations, and outbreak response among many other activities. While the grant periods for ELC supplemental awards are expected to end by July 31, 2024, the oversight required highlighted a need for dedicated federal grant project management support to ensure compliance with ELC terms and the terms of other grants awarded to DOHMH and managed by the Division of Disease Control. Support is also needed to apply for new grant awards and continuations.

To support compliance with the administrative requirements of federal grant awards, DOHMH or “the Agency” is seeking an appropriately qualified vendor to provide project management services for the Division of Disease Control Bureau of Division Management and Systems Coordination (DMSC). The vendor will work with Disease Control leadership and staff, program and administrative staff across the Agency (e.g., Finance, IT, Bureau of Communicable Diseases, etc.), subrecipients of grant funds (which may include Department of Social Services (DSS), NYC Health + Hospitals (H+H), and other city agencies), and other project management consultants engaged in supporting grant-funded activities.

The selected vendor for this RFP must be able to seamlessly transition from the existing contract for project management services so that current activities are uninterrupted.

B. Project Scope of Work

Through this RFP, the NYC DOHMH (the Agency) seeks a consultant to:

1. Advise the Agency on new and continuing proposals for federal funding and manage grant proposal processes:
   
   • Review notices of funding opportunities, continuation guidance, and other requests for new and continuing proposals and advise the Agency on pursuing funding;
   
   • Convene key stakeholders in the Agency and external partners (where applicable) involved in the development of grant proposals for proposal orientation meetings, develop proposal timelines, and facilitate discussions of grant proposal roles and responsibilities;
• Compile components of proposals, review for completeness, and prepare for submission by the Agency.

2. Develop and maintain systems and protocols to ensure compliance with terms of federal funding:

• Develop, share, and carry out a Project Management, Collaboration, and Communication Plan for each grant being managed including, but not limited to: reporting templates, timelines, deadlines, committees, meeting schedules, and contact information for all grant partners and key program staff;
• Design and distribute forms, spreadsheets, and templates, as needed, for use by grant partners to report milestones, performance data, budget modifications, and other metrics throughout the grant period;
• Participate in meetings with grant partners to plan and coordinate development of workplans and budget documents;
• Gather and track data, reports, and documents from grant-funded programs (including those managed by subrecipients) and enter information into grant reporting systems (e.g. REDCap);
• Prepare and review draft workplan and budget documents, distribute to grant leads for their review, compile and incorporate edits and feedback, and submit to grant funders for approval;
• Organizing and submitting program and budget modification requests from grant-funded programs;
• Navigate and use information systems required to report grant activities and maintain compliance with terms;
• Facilitate completion of response to grant Terms & Conditions within specified timeframes;
• Remind grant partners about workplan milestones and grant reporting deadlines (e.g. progress report due dates, budget report and modification due dates, submission of required reports, etc.).

3. Facilitate coordination among grant partners to implement funded activities for Disease Control-awarded grants:

• Represent the Agency when interacting with grant funders;
• Serve as a liaison among the Agency and its grant partners (subrecipients and other key stakeholders in grant-funded programs);
• Create and maintain a contact list of grant partner key staff that briefly summarizes each person’s role and responsibilities;
• Hold grant partners accountable for timely reporting of progress, milestones, performance data, and other components of grant compliance;
• Solicit and integrate feedback from grant partners about communication and collaboration preferences and needs;
• Consult with Agency Finance and grant management staff to track grant spending, modifications, and award amendments;
• Plan, schedule, and facilitate routine collaborative meetings for grant stakeholders covering administrative (i.e. fiscal, human resources, etc.) and programmatic activities. Meetings should cover: project progress and priorities, contracts, spending, modifications, barriers to implementation and how they may be addressed, and assessing and managing risks to grant awards;
• Collaborate with other Agency consultants working on DOHMH grants, as needed, to manage the administrative components of federal grants;
• Provide other administrative and management support and consultation to facilitate successful execution of grant activities.

C. Schedule of Deliverables and Compensation
The vendor will be compensated for invoiced hours worked with some hourly payments contingent upon the achievement of deliverables described in the following table.

To be paid, the vendor must submit monthly invoices for services provided under the scope of work. Invoices must be detailed and clearly list services provided (specifying the project), hours worked per service, and the hourly rate associated with the service. Invoices must be submitted on time according to a regular schedule but no more frequently than every 30 days.

<table>
<thead>
<tr>
<th>DELIVERABLES</th>
<th>MINIMUM REQUIRED ACTIVITIES AND DOCUMENTATION</th>
<th>DUE DATE</th>
<th>AMOUNT TO BE PAID UPON COMPLETION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deliverable 1: Project Management, Collaboration, and Communication plan for Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) cooperative agreement</td>
<td>Draft, refine, and finalize a detailed project plan for the ELC cooperative agreement portfolio. The plan should include, at minimum, details on how the contractor will facilitate progress toward grant milestones, processes for working with DOHMH and grant partners, templates and forms for reports and modifications, timelines for grant partners on submissions for both new and existing grant awards, meetings to check-in on progress, and a detailed contact list. As additional grants are added to the contract scope, additional Project Management, Collaboration, and Communication plans will be developed.</td>
<td>9/1/2022 (for ELC portfolio); 45 days after the notice of award (NOA) for subsequent grant awards</td>
<td>Hourly rate for completion of deliverable</td>
</tr>
<tr>
<td>Deliverable 2: Project Management, Collaboration, and Communication plan for COVID-19 Vaccination Activities Grant</td>
<td>Draft, refine, and finalize a detailed project management plan for the COVID-19 Vaccination Activities. The plan should include, at minimum, details on how the contractor will facilitate progress toward grant milestones, processes for working</td>
<td>9/1/2022; 45 days after the notice of award (NOA) for subsequent grant awards</td>
<td>Hourly rate for completion of deliverable</td>
</tr>
</tbody>
</table>
with DOHMH and grant partners, including other Divisions, programs and city agencies’ templates and forms for reports and modifications, timelines for grant partners on submissions for both new and existing grant awards, meetings to check-in on progress, and a detailed contact list. As additional grants are added to the contract scope, additional Project Management, Collaboration, and Communication plans will be developed.

| Deliverable 3: Submission of grant performance measures and progress updates | Gather, review, and submit on time monthly, quarterly, twice annual, and annual performance measures and progress updates for all grants under scope. Submission systems include, but are not limited to, CDC’s Redcap reporting program. | Corresponds to submission deadlines | Hourly rate for completion of deliverable |

**D. Recipient Requirements**

- The recipient of the contract will be required to name a dedicated project lead who will serve as the main point of contact for DOHMH. The project lead should be the individual responsible for day-to-day management of the project.
- The recipients will also be required to name a fiscal/administrative contact who will serve as the main point of contact for contract administration and invoicing (may be the same as the project lead).
- The recipients will be required to have information systems needed to meet expectations and carry out the proposed project management approach (e.g. reporting requirements [REDCap], telecommunications, file management, videoconferencing [MS Teams and/or Zoom], etc.).

**E. Project Management**

Lauren da Fonte, COVID Project Manager (ldafonte2@health.nyc.gov), will serve as the contract monitor and will be responsible for overseeing day-to-day activities and the completion of deliverables.

Bi-weekly meetings will be conducted to provide programmatic updates, review contract progress, and identify any challenges and/or needs of the project.

Proof of deliverable completion and invoices should be submitted to DOHMH by the specific deliverable due date as outlined in Section II.C: the Schedule of Deliverables and Compensation.
SECTION III: COMPLETING THE PROPOSAL

Instructions: The items contained in this section must be included in the Applicant’s proposal to meet the minimum requirements for evaluation. The sections must be in the order described and written in a straightforward and concise manner. Proposals will be evaluated based on their content, not length.

Respondents must carefully examine all requirements stipulated in this RFP and respond to each requirement in their proposal.

A. Proposal Format Requirements
   - Font: 12 point – Times New Roman
   - Spacing: Single
   - Pages: No more than 8 pages, numbered (exclusive of title page, table of contents, and example documents)
   - Margins: 1 inch
   - Paper: 8 ½ x 11
   - File Format: PDF

B. Content of Proposal

The proposal must respond to all of the sections below and address all the questions in each section in the order listed. Label the beginning of each section as indicated (e.g., “Project and grant management approach”) and include each question number and letter.

To be considered for an award, Applicants must submit their completed proposal by June 3, 2022, at 11:59 p.m. EDT. All proposals must be submitted via email to procurement@fphnyc.org.

The proposal should consist of the following components:

1. Contract Attestation (Attachment A)
2. Applicant Signature Form (Attachment B)
3. Applicant Eligibility Questionnaire (Attachment C)
4. Proposal
   A. Staffing
      - List the proposed staff who will be working on this project and, for each, describe their experience and their project roles
      - Attach an organizational chart showing all proposed project staff
      - Proposals will be scored according to the years of experience that proposed staff have: 1) administering large grants and 2) working with city, county, or state agencies on public health initiatives.
Scores will also be based on the whether applicants comply with recipient requirements for staffing (Section II).

B. Organizational capacity

- Describe the Proposer's relevant organizational qualifications and experience over the last five (5) years in:
  - Providing project management services;
  - Overseeing large grants (in excess of $5MM); and
  - Working with city, county, or state agencies on public health initiatives.
- Provide two applicant references including contact information.
- Proposals will be scored according to the years of experience that the organization has 1) providing project management services; 2) administering large grants; and 3) working with city, county, or state agencies on public health initiatives. Scores will also be based on whether references report satisfaction with the services provided by the applicant.

C. Project and grant management approach

- Detailed description outlining the Applicant's approach to project management including establishing workflows and timelines, client communication protocols, and systems of operation utilized (i.e., any project management tools, Zoom, MS Teams, etc.).
  - Include examples of timelines, communication plans, and reporting tools/templates from previous projects (will not count towards the page count).
- Detailed explanation of how the Applicant would deliver the scope of services as outlined in Section II.B: Project Scope of Work. Submissions should specifically address how the applicant will:
  - Advise the Agency on new and continuing proposals for federal funding and manage grant proposal processes;
  - Develop and maintain systems and protocols to ensure compliance with terms of federal funding;
  - Facilitate coordination among grant partners to implement grant-funded activities.

Proposals will be scored according to whether the applicant offers a clear approach to workflows, timelines, and communications for: Advising the agency on new and continuing proposals for federal funding and managing grant proposal processes; developing and maintaining systems and protocols to ensure compliance with terms of federal funding; and facilitating coordination among grant partners to implement grant-funded activities. Scores will also be based on whether applicants include examples of timelines, communication plans, and reporting tools/templates from previous projects.
D. Budget (using Budget Template Workbook – Attachment D)

- The applicant should complete the budget template and include all proposed costs.
- In the proposal, please provide an hourly rate inclusive of all costs (Please also provide a justification for the rate); and
  - Annual cost for deliverables
    1. If hourly rates differ by service provided, please explain
    2. If the Applicant would like to propose a different compensation structure, please detail the structure and why it would deliver improved value
- Proposals will be scored according to whether the applicant offers a budget that demonstrates the best value (quality and quantity) for the services provided.

5. Organization W9
6. Acknowledgement Of Addenda (Attachment E)
SECTION IV: EVALUATION AND AWARD PROCEDURES

All proposals submitted within the stated deadline will be reviewed to determine if they meet the minimum requirements of this RFP and have responded to all necessary questions and requests. The Evaluation Committee will evaluate and rate all qualified proposals based on the Evaluation Criteria described below.

A. Evaluation Criteria

A selection committee at DOHMH will review proposals and select one for this project based on qualifications and the strength of the proposed approach. The relative weight of each section is:

<table>
<thead>
<tr>
<th>Organizational capacity</th>
<th>30%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staffing</td>
<td>25%</td>
</tr>
<tr>
<td>Proposed project and grant management approach</td>
<td>30%</td>
</tr>
<tr>
<td>Cost proposal and budget justification</td>
<td>15%</td>
</tr>
</tbody>
</table>

B. Selection Process

The selection process consists of the following steps:

1. Adherence to Mandatory Minimum Requirements
   
   All proposals will undergo an initial administrative review for completeness. For an proposal to be evaluated, it must be responsive (i.e., include all required components) and the applicant must meet all required eligibility criteria.

2. Proposal Evaluation
   
   All responsive proposals will be judged by a review committee consisting of DOHMH employees. The Committee will evaluate proposals and score Applicants according to the criteria described under Contents of the Proposal. Each proposal will be scored by five reviewers. All sections will be scored from 1-5 with 5 indicating that all expectations are met and 1 indicating that none of the section expectations are met.

   After scoring, the Committee will select the applicant with the highest score. Applicants with an average score below 3 will not be considered for an award.

C. Award Process

Each applicant applying will be notified in writing regarding the decision concerning their proposal. Once the selection is made, the designated recipient will enter a contract with FPHNYC. Final contract execution is contingent upon successful completion of contract negotiations and demonstrated compliance with all requirements of FPHNYC, DOHMH, the City of New York, and/or any other applicable federal and state laws and policies.
SECTION V: GENERAL DISCLOSURES

Right to Amend, Cancel this RFP, or Solicit a New RFP
FPHNYC may amend or cancel this RFP at any time, without any liability to FPHNYC, and/or DOHMH. FPHNYC or DOHMH may solicit new requests for information and/or proposals regarding the services addressed in this RFP at any time.

Right to Reject Proposals
DOHMH may reject any or all proposals received and may ask for further clarification or documentation. Submitted information that does not respond to all items in this RFP may be excluded from further consideration and alternative information packages may not be considered.

Insurance
Contractors will also be required to provide proof of insurance which includes, general liability, worker’s compensation insurance coverage, and professional liability. FPHNYC and DOHMH shall be named as Certificate Holders for all required insurance. Contractors will need to demonstrate that necessary insurance coverage is in place from the start of the contract.

Current insurance requirements for vendors are as follows. Please note these insurance requirements may change.

A. Insurance: Contractor warrants and represents that it has, and will have continuously during the term of this Agreement, and that it shall require all subcontractors to obtain and maintain continuously during the term of this Agreement:

1. Commercial General Liability: insurance to provide coverage for bodily injury and property damage, including damage to any facilities, equipment or vehicles, in limits of no less than $1,000,000 per occurrence $3,000,000 aggregate, $1,000,000 personal and advertising injury aggregate; written on an occurrence basis with coverage at least as broad as the most recently-issue version of ISO form CG 00 01, and no exclusions other than as required by law or approved in writing by DOHMH. Such insurance shall include the City of New York and FPHNY, including their respective officials, and employees as additional insured, with coverage at least as broad as the most recently issued ISO form CG 20 26.

2. Professional Liability: If Contractor is providing professional services, Contractor shall obtain professional liability insurance, in limits of no less than $1,000,000 per occurrence and $3,000,000 aggregate;

3. Employers Liability: maintain employer's liability as required by law. and
4. Workers' Compensation: workers' compensation and disability insurance as required by the applicable New York State law.

5. Commercial Auto: If Contractor uses any vehicles in the performance of services under this Agreement, Contractor shall obtain commercial auto coverage for all owned, non-owned, and hired vehicles, written on a form at least as broad as ISO form CA 00 01, with minimum limits of $1,000,000 per accident.

6. Excess Umbrella Liability: in the event that contractor’s insurance policy(s) does not meet the limits stated above.

Contractor shall maintain on file with FPHNY current Certificates of Insurance for the above referenced policies, listing FPHNY and the City as Additional Insureds for General Liability policies and as Certificate Holders for all other required insurance. All of the above policies shall provide for a waiver of subrogation in favor of the City of New York and FPHNY, including their respective officials and employees, and shall be primary and non-contributing to any insurance or self-insurance maintained by any of those parties. Contractor waives all claims against the City of New York and FPHNY, including their respective officials and employees, that would be covered under any policy of insurance required by this Agreement. Acceptance of a certificate of insurance or policy of insurance by FPHNY or the City of New York does not waive the requirements of this section. Contractor’s insurance obligations are in addition to, separate from, its obligations to defend and indemnify the City of New York and FPHNY and their respective officials and employees as provided for elsewhere in this Agreement. The limits stated in this section are minimums; the amount available to the City and FPHNY and their respective officials and employees as additional insured, shall be the greater of such minimum limits or the maximum total insurance limits available to the Contractor under all primary and excess policies of insurance.

NYC Vendor Registration
This project requires that vendors register in the City’s Payee Information Portal (PIP). In PIP, vendors can view financial transactions with the City of New York, register for Electronic Funds Transfer payments and more. For more information, please visit: https://a127-pip.nyc.gov/webapp/PRDPCW/SelfService.

Vendors will also be required to register in PASSPort, the City’s digital procurement system. PASSPort training and information materials are available through videos, user guides and FAQs at www.nyc.gov/passport.

If awarded, the applicant will be required to comply with NYC EO’s regarding COVID-19 Precautions & Vaccination Requirements. The Contractor shall comply with all New York City Executive Orders and Orders of the Commissioner of Health and Mental Hygiene.
(“City Orders”) that apply to City contractors and subcontractors. The Contractor shall also be responsible for ensuring that the Contractor remains current with all such City Orders and requirements, which may be subject to change.

**Proposal Costs**
The Applicant will be solely responsible for any costs incurred in preparing, delivering, or presenting responses to this RFP. Applicants will not be reimbursed for any costs incurred in preparing proposals.

**Fulfillment of Requirements**
By submitting an information package, the Applicant acknowledges that the respondent has read and understands this RFP and can fulfill all requirements.

**Submitted Information**
Once submitted, responses will be the property of FPHNYC and will not be returned.
SECTION VI: ATTACHMENTS/ APPENDICES
**ATTACHMENT B**

**APPLICANT SIGNATURE FORM**

**INSTRUCTIONS:** Applicants must complete and submit this Applicant Information Form signed and dated by the Project Director and the firm’s Authorizing Official.

<table>
<thead>
<tr>
<th>Lead Applicant Organization</th>
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<tbody>
<tr>
<td>Applicant Organization Name:</td>
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</table>

<table>
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<tr>
<th>Certifications</th>
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<tbody>
<tr>
<td>As Project Director, I certify that all information provided in this proposal is correct and accurate to the best of my knowledge.</td>
<td></td>
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</table>

Signature of Project Director ___________________________ Date ___________________________

Printed Name and Title ___________________________

|  |
|-----------------|--|
| As the Authorizing Official for the entity submitting this proposal, I am supportive of this proposal and commit my organization to fully engaging in the work proposed as part of this proposal. |  |

Signature of Authorizing Official ___________________________ Date ___________________________

Printed Name and Title ___________________________
ATTACHMENT C
APPLICANT ELIGIBILITY QUESTIONNAIRE

INSTRUCTIONS: Applicants must respond to each of the questions below. Failure to submit a response or meet the minimum eligibility requirements will disqualify the Applicant from further consideration.

Part I:

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Does your organization have a minimum of five (5) years’ experience in project management?</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Does your organization have experience applying for and administering large (at least $5 million annually) government grants?</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Does your organization have experience working with city, county, or state agencies on public health initiatives?</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Does your organization have information systems in place to carry out collaborative work (e.g., MS Teams, Zoom, etc.)?</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Does your organization have systems in place to record time and effort toward contract scope and deliverables?</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Is your organization, or your fiscal sponsor, registered as a City of New York approved vendor in both PIP and Passport?</td>
<td></td>
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<tr>
<td>7.</td>
<td>Does your organization, or your fiscal sponsor, have proof of required insurance coverage?</td>
<td></td>
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</table>

Part II:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>APPLICANT’S CERTIFICATION</td>
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</table>
By my signature below, I certify that I am an authorized representative of the applicant named below, and that all information provided above is true and complete to the best of my knowledge.

Signature of Authorizing Official  Date

Organization Name
ATTACHMENT E

ACKNOWLEDGEMENT OF ADDENDA

INSTRUCTIONS: Complete Part I OR Part II as applicable; complete, sign, and date in Part III.

Part I – Acknowledgement of Receipt of Addenda

Listed below are the dates of issue for each Addendum received in connection with this RFP:

Addendum #1: Dated ____________________
Addendum #2: Dated ____________________
Addendum #3: Dated ____________________
Addendum #4: Dated ____________________
Addendum #5: Dated ____________________
Addendum #6: Dated ____________________
Addendum #7: Dated ____________________
Addendum #8: Dated ____________________
Addendum #9: Dated ____________________

Part II – Acknowledgment of No Receipt

_____ No Addenda were received in connection with this RFP.

Part III – Signature

_________________________________________            __________
Signature of Authorizing Official                          Date

_________________________________________
Printed Name and Title

_________________________________________
Applicant Organization