

**CONNECTICUT HOUSING FINANCE AUTHORITY**  
**SCOPE OF SERVICES: GRAPHIC DESIGNER**

The Connecticut Housing Finance Authority (“CHFA”) is seeking quotes from qualified firms in the State of Connecticut to provide graphic design services for CHFA’s annual report.

CHFA, a body politic and corporate constituting a public instrumentality and political subdivision of the State of Connecticut, was created in 1969 and operates pursuant to Chapter 134 of the Connecticut General Statutes, as amended. CHFA’s purpose is to help alleviate the shortage of affordable housing for low- and moderate-income families and persons in Connecticut by providing single family mortgages, financing for rental housing, and mortgages for the purchase, development and construction of housing. For additional information about CHFA, please reference CHFA’s website at [www.chfa.org](http://www.chfa.org).

**Scope of Work:**

CHFA is seeking quotes from qualified firms in the State of Connecticut to provide graphic design and production of the printed and digital (desktop and mobile) versions of CHFA’s Annual Report (“Annual Report”). The selected firm will be responsible for the discovery, creative design, development and delivery of the Annual Report. The services requested will include the following:

- **Artwork and Production:** In addition to the text, the Annual Report may include maps, charts, graphs, tables or other recommended visual displays of information. It may require design of artwork and photo manipulation. The content shall be provided by CHFA, and the selected firm will be responsible for the artwork.
- **Photography and Video:** The selected firm will be responsible for providing any stock photography. Photographs and videos unique to CHFA will be provided by CHFA.
- **Print and Distribution:** CHFA’s annual report will be printed in professional four-color printing, and approximately 250 hard copies of the final publication will be provided to CHFA for distribution.
- **Timeline:** The web-based version should be delivered to CHFA on or before August 1, 2021. The printed version of the Annual Reports should be completed, printed and available to CHFA on or before September 1, 2021.

**Requirements:**

- 1) Provide a brief overview of your firm and the qualifications of the individuals who would be working with CHFA.
- 2) Firm must provide pricing and references on the attached “Quote Form” to [RFP.RFQ@chfa.org](mailto:RFP.RFQ@chfa.org) no later than **Monday, April 26, 2021**.
- 3) Firm must supply, if applicable, Small Business Set-Aside Certificate.
- 4) Firm must supply a copy of W-9 form.

- 5) Selected firm will be required to execute a contract satisfactory to CHFA and will agree that it will comply with the provisions of Connecticut General Statutes applicable to contracts with CHFA including, but not limited to, nondiscrimination and affirmative action provisions.
- 6) Firm will be required to provide documentation regarding general liability, in limits identified in “CHFA Insurance Requirements” attached.

Please submit any questions to [RFP.RFQ@chfa.org](mailto:RFP.RFQ@chfa.org) by **Wednesday, April 14, 2021**, Questions and answers will be posted on CHFA’s Website.

CHFA is an Affirmative Action/Equal Opportunity Employer.

**Graphic Designer for Annual Report  
Quote Form**

Company Name:

Contact Name:

Title:

Phone:

Email:

Price for Graphic Design Services:

\$ \_\_\_\_\_

Breakout of fees, if  
necessary: \_\_\_\_\_

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**Reference 1:**

Company Name:

Contact Name:

Title:

Email:

Phone:

**Reference 2:**

Company Name:

Contact Name:

Title:

Email:

Phone:

**Reference 3:**

Company Name:

Contact Name:

Title:

Email:

Any Experience with any CT state agency must be listed here:

**COMPLETED QUOTE FORM SHOULD BE SUBMITTED TO RFP.RFQ@CHFA.ORG NO LATER THAN  
MONDAY, APRIL 26, 2021**

CHFA is an Affirmative Action/Equal Opportunity Employer.

## Instructions: CHFA Insurance Requirements

All contractors and vendors are required to provide proof of the required insurance coverage before entering the premises or commencing any work at any CHFA facility. Contractors and vendors must obtain, at their own expense, all the insurance required here, and acceptable evidence of such insurance must be properly furnished to, and approved by, CHFA.

All subcontractors are subject to the same requirements. It is the responsibility of the primary contractor or vendor to obtain acceptable evidence of insurance from subcontractors.

CHFA also requires that they be named as an additional insured on your general liability policy(ies). Your general liability policy must be endorsed with ISO Endorsement CG 20 10 (or equivalent) *or* ISO Endorsement CG 20 26 (or equivalent), *and* ISO Endorsement CG 20 37 (or equivalent) if so required. These form numbers must be specifically referenced on the certificate of insurance. If your insurance company uses a different form to provide CHFA with additional insured status on your policies, copies of those forms must be provided in advance with the insurance certificate for review and approval by CHFA. All coverage must be primary as to CHFA.

The proper name for the entity to be named as additional insured is: “Connecticut Housing Finance Authority, and/or related or affiliated entities.”

Evidence of compliance with these requirements is with the ACCORD form 25, “Certificate of Liability Insurance”, with 30 day notice of cancellation, plus copies of any required additional insured endorsements. Certificates should be sent to: Connecticut Housing Finance Authority, Attention: Legal Dept., 999 West St., Rocky Hill, CT 06067. Tel.: (860) 721-9501, Fax: (860) 721-0527.

Current insurance certificates must be furnished to CHFA at all times. Replacement certificates must be furnished *prior to the expiration or replacement* of referenced policies.

Required (if checked)	Type of Insurance	Standard Requirement
√	<p><b>Commercial General Liability</b></p> <p><b>Contractors or service vendors:</b></p>	<p><b>\$1,000,000</b> per occurrence/ <b>\$2,000,000</b> aggregate bodily injury/property damage.</p> <p>The CGL policy must include coverage for:</p> <ul style="list-style-type: none"> <li>• liability from premises and operations.</li> <li>• liability from products or completed operations.</li> <li>• liability from actions of independent contractors.</li> <li>• liability assumed by contract.</li> </ul> <p>All coverage provided to CHFA under this section must be primary.</p> <p>CHFA must be named as “additional insured” on your CGL policy with ISO form CG 20 10 or CG 20 26 or equivalent</p> <p>CHFA must <i>also</i> be named as “additional insured” on your CGL policy with form CG 20 37 or equivalent</p> <p>The Aggregate limit must apply per job/project.</p> <p>Products/completed operations must be carried for 2 years after completion of job/acceptance by owner.</p>
	<p><b>Automobile Liability</b></p>	<p><b>\$1,000,000</b> per accident for bodily injury/property damage, including hired &amp; non-owned vehicles</p>
	<p><b>Workers' Compensation Employers Liability</b></p>	<p>Statutory</p> <p><b>\$1,000,000</b> each accident</p>
	<p><b>Umbrella Liability</b></p>	<p><b>\$1,000,000</b> Excess over underlying limits described above.</p>
	<p><b>Professional Liability</b></p>	<p><b>\$1,000,000</b> per occurrence/ <b>\$1,000,000</b> aggregate</p>

Insurance Requirements

Contractors or vendors working for and/or doing business with the Connecticut Housing Finance Authority (CHFA), or using CHFA facilities, shall agree as a condition of acceptance to furnish and perpetually maintain, at their own expense, for the duration of any project, work, contract or use of CHFA facilities the following policies of insurance covering the following items. Insurance must be primary and endorsed to be noncontributory by CHFA, must be written in an insurance company A.M. Best rated as “A-VII” or better, and CHFA must be endorsed to the policy as an additional insured (except Worker’s Compensation) unless this requirement is specifically waived in writing by CHFA. Contractors further agree that any subcontractor they intend to use on CHFA assigned work will be required to submit to the same indemnity and insurance requirements contained in this schedule. Contractor shall obtain insurance certificates stating that both Contractor and CHFA shall be endorsed to the subcontractor’s insurance policies as additional insured.

**Indemnification**

The contractor/vendor shall save harmless, indemnify, and in the event of claim, notification or suit will immediately defend CHFA and any related or subsidiary entities, their officers, employees and volunteers, from and against all loss, costs, damage, expense, claims or demands arising out of or caused or alleged to have been caused in any manner by the performance of work or use of facilities herein provided, including all suits, claims or actions of every kind or description brought against the CHFA either individually or jointly with the entity or organization for or on the account of any damage or injury to any person or persons or property, including the entity or organization’s employees or their property, caused or occasioned, or alleged to have been caused or occasioned in whole or in part by the entity or organization, including any subcontractor, their employees or agents.

**Certificates of Insurance**

Before starting any work, or commencing any use or occupancy of CHFA premises, the contractor or vendor shall furnish to CHFA a certificate of insurance indicating, specifically, the existence of those coverages and limits set forth as follows. CHFA must be named on the insurance certificate as “additional insured” for the coverage’s afforded, and a copy of the actual policy endorsement that adds CHFA as an additional insured must be attached to the certificate (Blanket additional insured endorsements are deemed acceptable). It is also the duty of contractor or vendor to provide renewal or replacement certificates and endorsements to CHFA upon renewal or new placement of any insurance policy which may expire or renew during the term of any project or engagement, and to give CHFA thirty (30) days notice of any cancellation or change in the terms of such policy or policies during the periods of coverage. Upon request of CHFA, the contractor or vendor shall furnish to CHFA for its examination and approval such policies of insurance with all endorsements, or copies thereof, certified by the agent of the insurance company.

The contractor or vendor agrees to forward a signed original of this Insurance Requirement signed by an authorized Officer or Agent for the contractor or vendor, to the care of: Connecticut Housing Finance Authority, **Theresa Calderone**, General Counsel, 999 West St., Rocky Hill, CT 06067. Tel.: (860) 571-4389, Fax: (860) 721-0527, Email: [Theresa.Caldarone@CHFA.org](mailto:Theresa.Caldarone@CHFA.org), as an acknowledgement and acceptance to the terms and conditions stated herein and prior to the commencement of any work being performed.

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Signed by (contractor or vendor)

\_\_\_\_\_  
(type/print name of contractor or vendor)

\_\_\_\_\_  
Date