



Date: February 17, 2023

**CONNECTICUT HOUSING FINANCE AUTHORITY  
REQUEST FOR QUOTATIONS FOR CONSULTANT TO PERFORM  
CAPITAL NEEDS ASSESSMENT AND DEVELOP  
CAPITAL IMPROVEMENT PLAN**

The Connecticut Housing Finance Authority (“CHFA”) is seeking quotations from qualified Connecticut firms or individuals to perform a capital needs assessment and develop a detailed five-year and up to fifteen year summary capital improvement document for CHFA for its office building and property located at 999 West Street in Rocky Hill, Connecticut.

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-income 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 Service:**

CHFA is seeking quotes from qualified firms or individuals to perform an architectural and engineering systems assessment comprised of field investigation and evaluation of the existing infrastructure, exterior grounds and code requirements of the facility located at 999 West Street in Rocky Hill, Connecticut. The selected firm or entity will be expected to use the above-described capital needs assessment as the basis for developing a five-year detailed capital improvement plan (“CIP”) and summary long-term (up to fifteen year) CIP plan for CHFA. The CIP should include, but not be limited to, providing the useful life of each component of the property, identifying, and prioritizing both critical maintenance issues and future projects, estimated overall costs for each project, and estimated timeline for each project.

A site visit will be held on Tuesday, March 7, 2023, at 10:00 a.m. Attendance is encouraged but not mandatory. Please contact Shelly Mondo at [shelly.mondo@chfa.org](mailto:shelly.mondo@chfa.org) if you plan on attending.

Please respond to CHFA no later than **4:00 p.m., EDT on March 27, 2023**, by emailing your response to [RFP.RFQ@chfa.org](mailto:RFP.RFQ@chfa.org) with the following:

- 1) Provide a brief overview of the firm and qualifications to perform the services being requested. Please include your experience with governmental projects and programs similar in scope and size.
- 2) Please provide either an hourly not to exceed rate or a flat lump sum fee for the services.

- 3) Provide an estimated timeline for completing the services.
- 4) Please provide as references, a minimum of three clients for whom your firm has performed similar and substantial services. Please include the name of the person to contact, their phone number and email address. Please include as references any other State of Connecticut agencies or departments that have engaged your firm to perform services.
- 5) Describe your presence in Connecticut, if any, including corporate existence in Connecticut, whether formed in Connecticut or authorized to do business in the state. This may include, but not be limited to, information on the number of offices your firm maintains in Connecticut, the location of such offices, the number of Connecticut residents employed in those offices, and payroll and corporate taxes paid in Connecticut. If your firm currently is not registered with the Connecticut Secretary of State, please indicate whether your firm will so register if your firm is awarded a contract.
- 6) Firms should supply, if applicable, Small/Minority Business Enterprise Certificate.
- 7) Selected firm(s) 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.
- 8) Selected firm(s) will be required to provide documentation regarding general liability, umbrella, worker's compensation, and professional liability coverage, in limits identified in "CHFA Insurance Requirements" attached.
- 9) All questions should be submitted to [RFP.RFQ@chfa.org](mailto:RFP.RFQ@chfa.org) by **4:00 p.m. EDT** on Monday, March 27, 2023.

CHFA reserves the right to:

- a. Reject any and all responses received to this request;
- b. Negotiate the fees contained in any submission;
- c. Waive or modify any irregularities in submissions received;
- d. Award contracts in any manner necessary to serve the best interest of CHFA and the State of Connecticut, without obligation to accept a quote based upon the lowest fee schedule; and

- e. Request additional information as determined necessary or request some or all firms or individuals responding to make oral presentations.

All quotes and required documentation must be submitted to [RFP.RFQ@chfa.org](mailto:RFP.RFQ@chfa.org) by **4:00 p.m. EDT** on Monday, **March 27, 2023**.

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</b></p> <p><b>Employers Liability</b></p>	<p>Statutory coverage in compliance with compensation laws of the State of Connecticut.</p> <p><b>\$100,000</b> each accident, <b>\$500,000</b> Disease – Policy limit <b>\$100,000</b> each employee</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>
	<p><b>Cyber 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 Caldarone**, 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)

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(type/print name of contractor or vendor)

\_\_\_\_\_  
Date