



**Arizona Community Action Association (ACAA)  
Home Energy Assistance Fund (HEAF) Partner Application**

**Application No:** ACAA2018-1

**Program Year:** July 1, 2018 through June 30, 2019

**Requested Dollars:** Approximately \$ \_\_\_\_\_

**Submission Deadline:** n/a

Please submit application with all requested documents to:

Arizona Community Action Association  
Energy Bill Assistance Application  
Attn: Luke Emerson  
340 E. Palm Lane, Suite 315  
Phoenix, Arizona 85004

Your application and requested documents may be emailed in PDF format to:  
[lemerson@azcaa.org](mailto:lemerson@azcaa.org).

**SOLICITATION:** ACAA is soliciting applications from Applicants qualified, responsible and willing to provide the following services in compliance with all solicitation specifications and requirements contained or referenced herein. A contract will be issued prior to request for services. Contract awards for one year, **which begins July 1, 2018 through June 30, 2019 and may be extended for up to two additional, one-year periods.** Contracts awarded for applications after July 1, 2018, will be in effect through June 30, 2019. ***All submitted information will become public record unless the Applicant clearly notes information is proprietary.***

**GENERAL DESCRIPTION:** Providers will be contracted to provide utility bill assistance and/or utility repair and replacement assistance to eligible low income customers throughout the state of Arizona.

Applicants may pick up an application, Monday through Friday, excluding legal holidays, from 8:00 a.m. to 5:00 p.m. MST, at the address indicated above, **beginning January 4, 2018** at 8:00 a.m., or request an application via e-mail or phone at any time.

Any questions with respect to this solicitation must be submitted in writing via email to Luke Emerson at [lemerson@azcaa.org](mailto:lemerson@azcaa.org).



## **SECTION 1: BACKGROUND**

The Arizona Community Action Association (ACAA) is a 501 (c)(3) non-profit agency created in 1967 to address poverty throughout Arizona. Through a collaboration of organizations and individuals, ACAA develops and implements strategies to address, and ultimately eliminate poverty.

Through a collaboration of community action agencies and community partners state-wide, ACAA administers funds for Salt River Project (SRP), Arizona Public Service (APS), Southwest Gas/Low-Income Energy Bill Assistance Program (SWG/LIEC), Southwest Gas/Energy Share Program, Unisource Energy (UNS), Tucson Electric (TEP) Power, Global Water, Utility Repair, Replacement, & Deposit (URRD) Assistance Program, and Arizona's first Home Energy Assistance Fuel Fund (HEAF) to help low-income families with utility assistance and weatherization services.

**The purpose of this application is to select state-wide community partners to assist eligible individuals and/or families with utility bill assistance and/or utility repair and replacement assistance.**

ACAA is seeking partners who have the capacity to provide assistance in their communities. The initial contract period will be July 1, 2018 through June 30, 2019. Depending on funding availability, and contractor's performance, contracts may be renewed up to two years.

### ***A. Administrative Costs***

Contractors will be able to use a certain portion of their total grant award for program delivery costs. Please see Appendix D for the program delivery percentages for each fund source ACAA administers.

### ***B. Financial Accountability***

If awarded a contract, the agency shall have an accounting manual that describes its financial procedures in sufficient detail to allow reasonable understanding of financial practices and adherence to all Internal Revenue Services (IRS) Rules and Regulations.

Contractors selected to be funded by ACAA for utility assistance through this solicitation must maintain financial accountability.



### ***C. Eligible Applicants***

Any private for-profit business entity, private non-profit corporation, or public entity, including faith-based entities, may apply. Selected applicants must be authorized to conduct business in Arizona prior to entering into a contract with ACAA.

## **SECTION 2: EVALUATION**

Applications shall be evaluated according to the evaluation criteria set forth herein, including completeness and good fit with the needs of the program.

Forms provided and requested for inclusion in this proposal shall not be modified.

ACAA reserves the right to request additional information and/or clarification. Any clarification of an application shall be in writing via email to [lemerson@azcaa.org](mailto:lemerson@azcaa.org). Recommendation for award will be to the responsible and responsive Applicant whose submission is determined to be advantageous to ACAA and the HEAF program, taking into consideration the evaluation criteria set forth in this application.

If an award is made, ACAA will enter into an agreement with the Applicant(s) by executing and transmitting a contract. ACAA may conduct discussions with the Applicant to clarify the offer and agreement details provided that they do not substantially change the intent of the solicitation. Unless otherwise specified, relative ranking of proposal(s) will be made considering the average of total points given to each proposal by evaluators.

## **SECTION 3: PREPARATION AND SUBMISSION OF APPLICATION**

The submittal shall include all information requested in this solicitation and utilize without modification the forms provided in this solicitation. Applicants are cautioned and advised that applications must be complete and accurate and must respond to all areas of the application.

Applicants are to complete, execute and submit the required form(s); **no additional appendices will be accepted or considered. Submit and attach ONLY what is requested.** Please prepare and submit your application as requested below.



### **CHECKLIST for Preparation and Submission of Application:**

1. All Proposals shall be made using the forms provided in this package and must be typewritten, using no less than a 10 point font.
2. Submit one original and all requested documents to the Arizona Community Action Association, in person (340 E. Palm Lane, Suite 315, Phoenix, AZ 85004), by postal/mail delivery, or via email in PDF format to [lemerson@azcaa.org](mailto:lemerson@azcaa.org) no later than the time/date specified (if applicable).
3. Complete the following Appendices as requested, include the required documentation, and provide narrative responses to the questions, answering the questions in the order in which they are presented:
  - i. Appendix A: Cover Page / Application, complete, sign the application (must be signed by an authorized agent of the Applicant), and use as cover page. Incomplete or unsigned documents cannot be accepted.
  - ii. Appendix B: Agency Minimum Qualifications
  - iii. Appendix C: Program Information

Failure to comply with the application requirements, including submittals that modify the application requirements, may be cause for the respondent's application to be rejected and not evaluated.

### **SECTION 4: INQUIRIES**

Inquiries regarding questions about this application may be submitted via email to [lemerson@azcaa.org](mailto:lemerson@azcaa.org).

### **SECTION 5: AWARD NOTICES**

Results of this evaluation will not be given in response to telephone inquiries. A *Notice of Recommendation for Award* will be sent via email to all entities that respond to this solicitation for applications. Funding, if awarded, is contingent upon the information provided in this application. ACAA reserves the right to withdraw funding if significant changes are made to key staff or other elements of the application.



## **SECTION 6: PROTESTS**

An interested party may file a protest regarding any aspect of a solicitation, evaluation, or recommendation for award. The process concerning protests will be provided by ACAA once awards have been made.

## **SECTION 7: AWARD PROCESS**

### ***A. Selection of Applicants***

Selection will be made by the Arizona Community Action Association. ACAA reserves the right to:

1. Reject any proposal(s) or to waive irregularities and informalities if it is deemed in the best interest of ACAA. Unless expressly agreed otherwise, resulting agreements are not exclusive, are for the sole convenience of ACAA, and ACAA reserves the right to obtain services from other sources.
2. Award on the basis of scoring the application and other factors, including but not limited to such factors as delivery time, quality, uniformity of services, suitability for the intended task, and Applicant's ability to perform.
3. Award monies to contractors receiving funding under this solicitation.
4. Make no award.
5. Reject the proposal of any persons or corporations that have previously defaulted on any contract with ACAA or who have engaged in conduct that constitutes a cause for debarment.
6. Negotiate necessary adjustments in proposed funding levels and program activities in order to meet available budget.
7. Request additional information from Applicants.
8. Re-advertise for proposals previously rejected.

### ***B. Contract Requirements***

Selected Applicants will be required before any contract is issued to submit the following certifications:

1. W-9 Tax Identification
2. Certificate of Insurance as required by ACAA; **insurance requirements as follows:**
  - a) Contractor shall obtain and maintain at its own expense, during the entire term of this Contract the following type(s) and amounts of insurance:



1. Commercial General Liability in the amount of \$2,000,000.00 combined single limit Bodily Injury and Property Damage. ACAA is to be named as an additional insured for all operations performed within the scope of the Contract between ACAA and Contractor;
2. Commercial or Business automobile liability coverage for owned, non-owned and hired vehicles used in the performance of this Contract with limits in the amount of \$1,000,000.00 combined single limit or \$1,000,000.00 Bodily Injury, \$1,000,000.00 Property Damage;
3. If this Contract involves professional services, professional liability insurance in the amount of \$1,000,000.00; and,
4. If required by law, workers' compensation coverage including employees' liability coverage.
  - b) Contractor shall provide ACAA with current certificates of insurance. All certificates of insurance must provide for guaranteed thirty (30) days written notice to ACAA of cancellation, non-renewal or material change.
  - c) Prior to performing any work or receiving any payment pursuant to this Contract, ACAA must have current Certificates of Insurance.
3. Policy and procedures:
  - a) Grievance policy and procedure
  - b) Policy for reporting fraud, abuse, or other related criminal activities
  - c) Confidentiality policy and procedure
  - d) Nondiscrimination and Equal Opportunity requirements certificate
4. Most recent full Audit Report. If an audit is not available, submit the most recent set of Financial Statements.
5. Applicable certifications, accreditations and licenses.
6. If applicable, fingerprinting and background check documentation for staff working with minors.
7. Federal Fair Labor Standards Act Assurances.

## **SECTION 8: ACKNOWLEDGEMENT AND ACCEPTANCE**

If Applicant's terms are inconsistent with the terms of the resultant agreement, the terms herein shall govern, unless Applicant's terms are accepted in writing by ACAA. No oral agreement or understanding shall in any way modify this order or the terms and conditions herein. Applicant's acceptance, delivery or performance called for herein shall constitute unqualified acceptance of the terms and conditions of the resultant agreement.



## **SECTION 9: COMPLIANCE WITH AGREEMENT**

ACAA will execute an agreement with the successful Applicant by issue of a contract. The Applicant agrees to establish, monitor, and manage an effective administration process that assures compliance with all requirements of the agreement. In particular, the Applicant agrees that they shall not provide services in excess of the executed agreement items (services), item quantity, item amount, or agreement amount without prior written authorization by revision or change order properly executed by the ACAA. HEAF funds are restricted for HEAF purposes only.

**END OF INSTRUCTIONS TO APPLICANTS**



**APPENDIX A: COVER PAGE / APPLICATION**

<b>Agency Federal Identification Number (FEI):</b>		<b>RFP #</b>	
		<b>RFP REQUEST:</b>	
Legal name of the entity (or individual) submitting this application:			
Address:			
City:	State:	Zip Code:	
Mailing Address if different from above:			
Telephone number:		Fax number:	
Name of Contact Person (for this application):			
E-mail address (for Contact Person):			
<b>TYPE OF APPLICANT</b>		<b>CITIES TO BE SERVED IN SERVICE TERRITORY</b>	
A. Non-Profit     _____ B. For-Profit     _____ C. Government    _____			
Do you have satellite offices?    ___Yes    ___No			
Where will proposed services be provided?			
Is your agency ADA accessible?    ___Yes    ___No			
Hours of Operation: _____			
Does your agency provide evening, weekend appointments or extended hours? ___Yes    ___No Does your agency accept walk-ins with no appointment? ___Yes    ___No			
To the best of my knowledge and belief, all of the information in this application is true and correct. The document has been authorized by the governing body of the applicant and the applicant will comply with the attached assurances if funding is awarded.			
Authorized Signature of President or Chief Executive Officer		Date signed:	
Typed name of President, Chief Executive Officer or Individual Applicant			



## APPENDIX B: AGENCY MINIMUM QUALIFICATIONS

### APPLICANT'S NAME:

Applicant certifies that they possess the following minimum qualifications and shall provide the requested documents that substantiate their satisfaction of the Minimum Qualifications. Failure to provide the information required by these Minimum Qualifications required to substantiate *responsibility* may be cause for the Applicant's submission to be rejected as **Non-Responsive**.

Provide documented and verifiable evidence that your agency satisfies the following Minimum Qualifications and indicate what and if appendices are submitted.

ITEM NO.	MINIMUM QUALIFICATIONS	DOCUMENT TITLE AND NUMBER OF PAGES
1.	a. Applicant Articles of Incorporation, if applicable. b. If Corporation, proof of up to date Corporate Commission records.	
2.	Agency Internal Revenue 501-C3 letter, if applicable.	
3.	A copy or website address of your most recent full financial Audit Report. If an audit is not available, submit the most recent set of Financial Statements.	
4.	Submit the resume(s) of the person(s) who will be responsible for overseeing this program, if funded.	
5.	Organizational Chart	



## APPENDIX C: PROGRAM INFORMATION

(Please answer the questions below with complete sentences)

### APPLICANT'S NAME:

#### I. Agency Description

Please provide a few brief sentences about your organization, including your mission, brief history, and any relevant experience or programs.

a. **Mission:**

b. **History:**

c. **Relevant experience/programs:**

#### II. Agency Scope of Work

a. Describe the current delivery of services (i.e. how clients are assisted through your agency).

b. What target populations (e.g. Hispanic, elderly working poor, etc.) will your organization focus on? Which cities/towns?

c. What are the most prevalent utility needs within your community? Which utility companies provide services to members of your community?

d. How many individuals or families does your agency expect to assist with utility assistance in one year?

e. Describe how your organization will promote the utility assistance program (ex. Community Newsletters, Flyers, Referrals, etc.).

f. Does your agency provide home visits? \_\_\_\_Yes or \_\_\_\_No



- i. If not, how will your agency handle requests for services from individuals who are homebound?
- g. Describe your agency's procedures on how walk-ins are handled.
- h. How many staff will be dedicated to this program? \_\_\_\_\_ Will they be part-time \_\_\_ or full-time \_\_\_\_\_?
- i. If your agency is awarded funding, you will be **required** to conduct the application process through the Grant Management System (GMS), which is a web-based application and client data tracking system. Does your agency have internet access in order to comply with this requirement? \_\_\_\_\_Yes or \_\_\_\_\_No

### III. Financial Information

- a. Describe your present accounting system. Include any financial programs/applications your agency utilizes such as Quick Books, etc.
- b. Describe the current financial reconciliation process used.
- c. Does your agency have the capacity for check writing and reporting? \_\_\_\_\_Yes or \_\_\_\_\_No
- d. Does your agency have the cash-flow to process utility payments for the amount of funds you are requesting?
- e. Who maintains your financial records?

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_



## **APPENDIX D: FUND SOURCES & PROGRAM DELIVERY**

<b>1. APS Bill Assistance</b>	<b>20% Program Delivery</b>
<b>2. Global Water Bill Assistance</b>	<b>10% Program Delivery</b>
<b>3. HEAF Bill Assistance</b>	<b>10% Program Delivery</b>
<b>4. SRP Bill Assistance</b>	<b>10% Program Delivery</b>
<b>5. SW Gas Energy Share Assistance</b>	<b>10% Program Delivery</b>
<b>6. SW Gas LIEC Bill Assistance</b>	<b>0% Program Delivery</b>
<b>7. TEP Bill Assistance</b>	<b>20% Program Delivery</b>
<b>8. UNS Warm Spirit Bill Assistance</b>	<b>10% Program Delivery</b>
<b>9. UNS Electric Bill Assistance</b>	<b>20% Program Delivery</b>
<b>10. URRD Assistance</b>	<b>8% Program Delivery</b>