



GOVERNOR'S OFFICE OF STORM RECOVERY

Andrew M. Cuomo
Governor

James Rubin
Executive Director



HOUSING TRUST FUND CORPORATION

Notice of Funding Availability

For

NY Rising Community Center Program

Facility Site Selection

Tier 1 – Requests for Statements of Qualifications

February 10, 2015

Responses must be received by
5:00 p.m. (Eastern), March 11, 2015

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1.0 GENERAL INFORMATION

1.1 Overview:

The Governor’s Office of Storm Recovery (GOSR) announces this Notice of Funding Availability (NOFA) through the NY Rising Community Reconstruction (NYRCR) Program to seek Statements of Qualifications (SOQ) from owners/operators of existing buildings to be retrofit and designated as a NY Rising Community Center (Center), in coordination with selected NY Rising Community Center Public Service Providers.

It is the intent of GOSR to provide the needed funding to establish these Centers in the following NY Rising Communities (Communities) of: Bergen Beach, Georgetown, Marine Park, Mill Basin, Mill Island; Brighton Beach, Coney Island, Manhattan Beach, Sea Gate; Canarsie; Gerritsen Beach and Sheepshead Bay; Howard Beach; Lower Manhattan; Red Hook; Rockaway East; Rockaway West; and Staten Island. NYRCR Planning Committees (Committees) representing these Communities proposed the State’s funding of these services in their respective NYRCR Plans. Centers will be selected based on the specific and unique needs of each of these participating Communities, as identified in the individual NYRCR Plan.

The NYRCR Plans are available online at: <http://www.stormrecovery.ny.gov/nyrcr/final-plans>.

The State will fund and directly manage a retrofit of selected Centers, to promote the ongoing recovery of disaster impacted communities by reducing the susceptibility of the structures to damage from extreme weather, for the purpose of making these structures accessible to the public and nonprofit entities committed to providing recovery services within the Centers.

1.2 Purpose:

The overall purpose of the NY Rising Community Center Program is to create a network of resilient facilities in the aforementioned Communities where organizations can provide critical recovery and social services to disaster-affected Communities, targeting the most vulnerable population sectors, which include but are not limited to residents: (1) of low/moderate income; (2) possessing physical disabilities; and/or (3) having limited ability to control their environments. Seniors, persons with disabilities/home-bound persons, and those with limited English proficiency were particularly affected by the impacts of Superstorm Sandy.

A NY Rising Community Center is conceived of as a large and currently operating community space coordinating with other locations throughout the Community, borough, and City. This design will allow various organizations to offer particular expertise and resources through a comprehensive network of services.

1.3 Service Delivery Areas:

The following service delivery areas are geographical descriptions of NYRCR Planning Areas, as defined by NYRCR Committees:

- **Bergen Beach/Georgetown/Marine Park/Mill Basin/Mill Island:** Bounded by Gerritsen and Nostrand Avenues to the west, Jamaica Bay to the south, Paerdegat Basin to the east, and Ralph Avenue, Avenue N and Flatlands Avenue to the north;
- **Brighton Beach/Coney Island/Manhattan Beach/Sea Gate:** Bounded by Gravesend Bay to the west, Rockaway Inlet to the east, Coney Island Creek, the Belt Parkway and Sheepshead Bay to the north, and Lower New York Bay to the South;
- **Canarsie:** Bounded by Paerdegat Basin to the west, Jamaica Bay to the south, Fresh Creek to the east, and Williams Avenue, Stanley Avenue, the MTA L train line, Linden Boulevard, Ditmas Avenue and Ralph Avenue to the north;
- **Gerritsen Beach/ Sheepshead Bay:** Bounded by Ocean Parkway to the west, Avenue P to the north, Gerritsen Avenue and Burnett Street to the east, and Shore Parkway, Sheepshead Bay and Shell Bank Creek to the south;
- **Howard Beach:** Bounded by Conduit Boulevard to the north, Elderts Lane, 78th Street and Spring Creek to the west, the MTA A train line to the east, and Jamaica Bay to the south;
- **Lower Manhattan:** Bounded by 14th Street to the north, New York Harbor to the south, the Hudson River to the west, and the East River to the east;
- **Red Hook:** Bounded by the waterfront of New York Harbor, Gowanus Bay, Gowanus Canal, Degraw Street to the north, and the BQE to the east;
- **Rockaway East:** Bounded by Beach 74th Street to the west, Jamaica Bay to the north, the Nassau County line to the east, and the Atlantic Ocean to the south;
- **Rockaway West:** Bounded by Beach 149th Street to the west, Jamaica Bay to the north, Beach 74th Street to the east, and Atlantic Ocean to the south; and
- **Staten Island:** The entirety of the Borough of Staten Island.

1.4 Relationship to NYRCR Project Profiles:

Facilities to be retrofitted through the NY Rising Community Center Program will be selected based on the specific and unique needs of each participating Community as identified in the individual NYRCR Plans. Statements of Qualifications should reflect the Project Profiles found within a specific Community's NYRCR Plan. NYRCR Plans are available online at: <http://www.stormrecovery.ny.gov/nyrcr/final-plans>.

1.5 Funding Source:

These U.S. Department of Housing and Urban Development (HUD) Community Development Block Grant-Disaster Recovery (CDBG-DR) funds are being made available through the NY Rising Community Reconstruction Program, which is a program of GOSR. When property owners receive financial assistance from the federal government following a Presidentially declared disaster, they may be required to obtain flood insurance. Flood insurance coverage will be required when a facility is insurable under the National Flood Insurance Program and is located in the 100-year floodplain. The extent of coverage required will vary depending on the amount of federal assistance received and other factors.

1.6 Period of Performance:

Funds will be provided for a period of two years:

- Estimated Project Start Date: 2nd Quarter (CY) 2015
- Estimated Project End Date: 2nd Quarter (CY) 2017

2.0 EVALUATION AND SELECTION

2.1 Review Information and Selection Criteria:

The selection of facilities will be conducted through a two-tier process:

- Tier 1—Request for Statements of Qualifications; and
- Tier 2—GOSR site inspection.

To be considered for selection, facilities which best meet the evaluation criteria detailed below will be inspected by GOSR and its representatives. The purpose of this visit will be to determine compliance with the threshold eligibility requirements, and to further assess the evaluation criteria. In addition to the on-site visit, and the scoring of the evaluation criteria below, information contained in the SOQ will be evaluated for selection.

2.2 Threshold Eligibility Requirements:

Preference will be given to structures which:

- Are structurally sound and inhabitable;
- Have adequate access to parking/staging, and for emergency service/supply resources;
- Are in a state of immediate occupancy and service to the community, with minimal repairs;
- Have the capacity to accommodate 200 persons, and;
- Are connected to all utilities (i.e., potable water, sewerage, electricity, heating facilities, etc.).

The requirements above are mandatory. Buildings not meeting all of the conditions will not be considered for further evaluation as potential sites. GOSR will send written notifications to both successful and unsuccessful respondents.

2.3 Evaluation Criteria for Potential Facilities:

Facilities that GOSR determines meet the aforementioned requirements, will be evaluated and ranked on the following criteria: (Possible 100 Points)

Structure is centrally located within the service delivery area:	Up to 15 Points
Structure is easily accessed by pedestrian and/or vehicular traffic:	Up to 15 Points
Structure functions as a resource/community center on a regular basis:	Up to 15 Points
Structure has functioned as a resource/community center in the aftermath of a major disaster:	Up to 15 Points
Structure is located in proximity to vulnerable populations (i.e. Low/Moderate Income, seniors, disabled persons, limited English proficiency, etc.):	Up to 15 Points
Submission is coordinated with a NY Rising Community Center Public Services Program NOFA application:	Up to 25 Points

3.0 RESPONDENT REQUIREMENTS

3.1 Requests for Statements of Qualifications:

Respondents are requested to complete Exhibit A, and provide the supplemental documentation requested. SOQs will be reviewed to determine the worthiness of a building to be considered for a NY Rising Community Center facility. If a building is selected, the owner(s) will be required to allow the service providers to establish social services in the Center for no less than twenty-four (24) months.

SOQs must be filed electronically in Portable Document Format (.pdf) file, compatible with Adobe Reader XI, version 11.0.4. Unless otherwise noted, respondents must complete and submit all forms, information, and other documentation listed herein as part of their electronic proposal submissions. Only complete SOQs will be evaluated. In all instances, GOSR's determination regarding the completeness of any SOQ shall be final. Coordination between Facility Site Selection and Public Services Program respondents is strongly encouraged.

SOQs must be delivered by e-mail no later than: **5:00 p.m. (Eastern) March 11, 2015**. Any SOQ delivered after 5:00 p.m. (Eastern) will be returned. Delivery delays shall not excuse late bid submissions. The respondent is responsible to ensure that e-mails and attachments are delivered on time in a legible format. Complete SOQs, including all multiple parts, must be received by the deadline in order for a SOQ to be considered submitted on time. Those submitting a SOQ assume all risks associated with delivery. The determination of whether any SOQ was received on time is at the sole discretion of GOSR.

3.2 Submission Requirements:

All respondents are required to submit a completed Exhibit A in accordance with the following:

- All Responses must be typed;
- Ensure the completed SOQ Submittal Checklist (Page 1 of Exhibit A) is part of the official response to this NOFA; and
- Ensure all sections (see below) of SOQ Application are complete.

4.0 ADMINISTRATION INFORMATION

4.1 Respondents' Webinar and Questions:

A webinar is scheduled to discuss this NOFA, accept questions, and provide preliminary responses. GOSR is in the process of finalizing the details of the webinar and will post an update to the GOSR Procurement Opportunities webpage: <http://stormrecovery.ny.gov/procurement-opportunities>. We strongly encourage interested respondents to check the Procurement Opportunities webpage frequently for updates and additional information pertaining to this NOFA.

Respondents may also submit questions outside of the conference by e-mail to NYRisingNOFA@stormrecovery.ny.gov. Answers to all substantive questions, including any substantive questions arising from the respondents' webinar, will be posted on the GOSR Procurement Opportunities webpage listed above as soon as practical following the deadline for question submission. All questions and correspondence must be sent to NYRisingNOFA@stormrecovery.ny.gov. Any correspondence or questions sent to any other email address regarding this NOFA will not be answered.

4.2 NY Rising Community Center NOFA Timeline:

Target Date	Event
February 10, 2015	Release of NOFAs
February 25, 2015	Anticipated Respondents' Conference
February 27, 2015	Last Day to Submit Questions – 5:00 p.m. (Eastern)
March 4, 2015	Issuance of Answers to Questions
March 11, 2015	SOQ Submission Deadline – 5:00 p.m. (Eastern)
April 2015	Target for Tier 2 Evaluation Process

Please note that the NOFA timeline includes target dates and may change. It is the responsibility of respondents to periodically review the GOSR website for regular updates to the NOFA timeline and other important information, which may alter the terms or requirements of this NOFA.

4.3 Proposal Instructions:

Statements of Qualifications shall be submitted by e-mail to:

Governor's Office of Storm Recovery
NYRisingNOFA@stormrecovery.ny.gov

E-mail Subject Title: NY Rising Community Center NOFA_(insert Community)_Facility Site Selection



EXHIBIT A

GOVERNOR'S OFFICE OF STORM RECOVERY NY RISING COMMUNITY RECONSTRUCTION PROGRAM

NOTICE OF FUNDING AVAILABILITY (NOFA) NY RISING COMMUNITY CENTERS FACILITY SITE SELECTION

STATEMENT OF QUALIFICATIONS (SOQ)

Submittal Checklist

Owner/Operator(s) Name: _____

Corresponding NY Rising Community or Communities: _____

INSTRUCTIONS

Enter an "X" next to each item below as it is completed. If the form or document listed does not apply to your facility, enter "N/A" next to the item. This checklist must be included as part of your SOQ response packet.

SOQ: Required of All Respondents

	SOQ Submittal Checklist (i.e., this form)
	SOQ Application

Required Contents of Response

	1. A description of the structure (age, size, location, exterior materials, types of roof, etc.)
	2. Legal description of property
	3. Zoning classification of property
	4. Photographs of each side of structure
	5. Photographs of the interior of structure (all rooms)
	6. Proof of ownership
	7. Site plan of the property depicting all structures, rights-of-ways, servitudes, parking area, and driveway locations
	8. Description of the role the structure played both pre- and post-storm with supporting photographs, if available
	9. Description as to how the structure meets threshold

Project Category:	NY Rising Community Centers
	Statement of Qualifications
	Facility Selection

SOQ Number: (GOSR Use Only)	
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STATEMENT OF QUALIFICATIONS (SOQ)

Application

1. RESPONDENT INFORMATION

Property Owner(s) Legal Name:			
Property Owner(s) Address:			
Phone Numbers	Work:	Cell:	
E-mail Address:			

2. PROPOSED PROPERTY INFORMATION

Property Street Address:					
City:		State:		Zip Code:	
Legal Description:					
Annual Taxes (\$)	City:	County:		Other:	
# of Units in Building:	# of Stories:	Is structure currently occupied?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
Dimensions	Lot size:		Building (sq. ft.)		
Zoning Classification/Description:					
Utilities	Public	Other (Describe)	Utilities	Public	Other (Describe)
Electricity			Water		
Gas			Sewer		
Year Built: Foundation: Concrete Slab <input type="checkbox"/> Crawl Space <input type="checkbox"/> Full Basement <input type="checkbox"/> Partial Basement <input type="checkbox"/>					
Exterior Description		Materials		Condition	
Foundation Walls					
Exterior Walls					
Roof					
Windows					
Gutters/downspouts					
Parking Area					
Interior Description		Materials		Condition	
Floors					
Walls					
Ceiling					
Other					

Mechanical/Plumbing/Electrical Systems	Type/Source	Condition
Heating		
Cooling		
Plumbing		
Electrical		
Energy Efficient items (describe):		
Are you (the property owner(s),) aware of any significant defects/malfunctions in any of the items listed in the sections (exterior, interior, mechanical/plumbing/electrical systems) listed above? If yes, please explain. Attach additional sheets if necessary.		

3. Disclosures

Are you (the property owner(s)) aware of any of the following:
Substances, materials, or products that may be an environmental hazard such as, but not limited to, asbestos, formaldehyde, radon gas, lead-based paint, fuel or chemical storage tanks, and/or contaminated soil and/or water on the proposed property? Yes <input type="checkbox"/> No <input type="checkbox"/>
Features of the property shared in common with adjoining landowners, such as walls, fences or driveways, etc., whose use or responsibility for maintenance may have an effect on the subject property? Yes <input type="checkbox"/> No <input type="checkbox"/>
Any encroachments, easements, or similar matters that may affect your interest in the subject property? Yes <input type="checkbox"/> No <input type="checkbox"/>
Room additions, structural modifications, or other alterations or repairs made without necessary permits? Yes <input type="checkbox"/> No <input type="checkbox"/>
Room additions, structural modifications, or other alterations or repairs not in compliance with building codes? Yes <input type="checkbox"/> No <input type="checkbox"/>
Fill (compacted or otherwise) on the property or any portion thereof? Yes <input type="checkbox"/> No <input type="checkbox"/>
Any settling from any cause, or slippage, sliding, or other soil problems? Yes <input type="checkbox"/> No <input type="checkbox"/>
Flooding, drainage, or grading problems? Yes <input type="checkbox"/> No <input type="checkbox"/>
Major damage to the property or any of the structures from fire, earthquake, floods, or landslides? Yes <input type="checkbox"/> No <input type="checkbox"/>

Any zoning violations, nonconforming uses, violations of setback requirements? Yes <input type="checkbox"/> No <input type="checkbox"/>
Neighborhood noise problems or other nuisances? Yes <input type="checkbox"/> No <input type="checkbox"/>
Any covenants, conditions, or other deed restrictions or obligations? Yes <input type="checkbox"/> No <input type="checkbox"/>
Any notices of abatement or citations against the property? Yes <input type="checkbox"/> No <input type="checkbox"/>
Any lawsuits by or against the owner(s) threatening to or affecting the proposed property, including any lawsuits alleging a defect or deficiency in this property or common areas? Yes <input type="checkbox"/> No <input type="checkbox"/>
If the answer to any of the above is "yes," please explain below. Attach additional sheets if necessary.

Is this submission coordinated with a NY Rising Community Center Public Services Statement of Qualification submission?

Yes No If yes, provide respondent(s) name(s): _____

Signature and Certification:

The undersigned hereby acknowledges and confirms submittal of a response to the NOFA requesting Statements of Qualifications to the Governor’s Office of Storm Recovery, NY Rising Community Centers Program Facility Site Selection, and certifies that, to his/her best knowledge and belief, all information provided is true and correct.

Signature Responder/Building Owner

Date

E-mail Address

Phone Number

****GOSR USE ONLY****

SUBMITTAL TYPE	DATE RECEIVED	TIME RECEIVED	GOSR STAFF INITIALS
E-Mail Delivery			