

Restored Homes Housing Development Fund Corporation

REQUEST FOR QUALIFICATIONS

GENERAL CONTRACTORS

ISSUE DATE:

RFQ RESPONSE DUE DATE: Open/Rolling

Questions should be submitted to ccotter@neighborhoodrestore.org



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1. INTRODUCTION

A. GENERAL RFQ INFORMATION

Restored Homes Housing Development Fund Corporation (“Restored Homes”) is issuing this RFQ to identify eligible General Contractors (also referred to in this document as GCs) for a pre-qualified list for upcoming 1-to-4 family residential projects within NYC. GCs approved for Restored Homes’ pre-qualified list will be invited to bid on residential renovation and repair projects throughout NYC. The volume of work and frequency at which a pre-qualified GC is invited to participate in ongoing programs and projects will depend on Restored Homes’ assessment of select competitive criteria, which are detailed further below. Not all Applicants deemed qualified may be selected to participate.

GCs selected through this RFQ will be responsible for carrying out all construction work per an itemized scope of work and any NYC Department of Buildings (“DOB”) approved plans and relevant governmental agency approvals, as may be applicable. Project scopes may range from minor repair and rehabilitation to substantial rehabilitation and/or new construction. GCs are to perform all work in a manner acceptable to Restored Homes and in compliance with health and safety standards and acceptable trade/industry practices. GCs will be responsible for obtaining all agency signoffs, as required for upcoming NYC residential projects. Contractors will also oversee the execution of the construction plans through completion and sign off. GC’s workloads are dependent upon the scopes of work for each home.

B. RESTORED HOMES PROGRAMS

Restored Homes is a non-profit organization which specializes in the rehabilitation of 1- to 4- family homes throughout New York City. Since 2005, Restored Homes has administered several homeownership programs in collaboration with New York City Department of Housing Preservation and Development (“HPD”), the US Department of Housing and Urban Development (“HUD”), the New York State Housing and Community Renewal (“HCR”) and the New York City Housing Authority (“NYCHA”). Below are brief descriptions of three current programs. As a program administrator, Restored Homes is responsible for construction-related predevelopment activities, the coordination and oversight of all scoping, any required plan reviews and DOB filing, and will monitor the repair work on the homes included in these Programs. Given its extensive experience with the rehabilitation of 1- to 4- family homes, Restored Homes has also provided technical assistance and construction management and monitoring services to other organizations.

1. HOMEFIX (HOME REPAIR PROGRAM)

The New York City HomeFix Program (“HomeFix”) offers low-interest and forgivable home rehabilitation loans, education, and financial counseling to NYC homeowners of 1 to 4 family homes who may not qualify for conventional loans. The Center for New York City Neighborhoods, Inc. administers the program with funding from Enterprise Community Partners, the New York City Council, the City of New York, and the Office of the New York Attorney General in collaboration with HPD. Restored Homes, as non-profit partner, oversees each project from scope of work development through construction close out, providing construction management and technical assistance to help homeowners achieve long-term stability.

2. NYC HOUSING AUTHORITY (NYCHA) SMALL HOMES REHABILITATION PROGRAMS

Restored Homes, in collaboration with NYCHA and HPD, has rehabilitated and sold 61 vacant single-family foreclosed homes through the NYCHA Small Homes Rehabilitation Program. These homes, in NYCHA’s inventory for decades, are primarily located in Southeastern Queens - an area still recovering

from the effects of the 2008 foreclosure crisis and Hurricane Sandy. The homes developed through this program achieve Enterprise Green Communities certification. Public subsidy provided by HPD and AHC leverages private capital, secures construction financing, and maintains affordability for homeowners. Restored Homes The rehabilitated were sold to low- and moderate-income, qualified homebuyers. Restored Homes intends to acquire a new portfolio of properties for rehabilitation soon.

3. ACCESSORY DWELLING UNIT PROGRAM

Restored Homes is serving as the program administrator for the Plus One accessory dwelling unit ("ADU") Program ("Program") in New York City. The Program will assist low- and moderate-income single-family homeowners with the predevelopment, construction, and monitoring resources necessary to safely build or convert ADUs on their properties. Financial assistance for the Program is being contributed in the form of grants through New York State Homes and Community Renewal ("HCR") as well as additional subsidy as low interest of forgivable loans through New York City Department of Housing Preservation and Development.

Property eligibility for the Program is limited to detached or semi-attached 1-to-2 family homes that are able to convert or construct ADU as-of-right under the City's zoning code. ADUs can be converted from existing space within the home, such as an attic or basement, or on the property, such as a detached garage/shed. Newly constructed, detached or attached structures may also be considered for properties with adequate space, as defined by the zoning and building code, to add them. ADUs require a minimum of 300 square feet, but can be as large as 800 square feet. All ADUs must have a separate entrance either from the exterior or a public corridor within the primary dwelling and must also have a separate kitchen and bathroom, as well as separate access to controls for HVAC, electrical and gas services.

Restored Homes will work with design professionals to develop design plans for approval by DOB and will manage all contractor bidding and oversee construction through to final approvals.

C. GENERAL CONTRACTOR ROLE

GCs selected through this RFQ will be responsible for carrying out all construction work per an itemized scope of work and any DOB approved plans and any other relevant governmental agency approvals, as may be applicable. General Contractors are to perform all work in a manner acceptable to Restored Homes and in compliance with health and safety standards and acceptable trade/industry practices. General Contractors will be responsible for obtaining all agency signoffs, as required for NYC residential projects.

GENERAL ASSUMPTIONS

- Pre-qualified GCs will be assigned projects by participating in a competitive bidding process, and submitting the lowest, most reasonable bid.
- All projects assigned by Restored Homes will require a formal contract and itemized scope of work, prepared by Restored Homes.
- All construction will be compliant with the New York City Building Code, Fire Code, Housing Maintenance Code, and any other required regulations.
- GCs will be required to utilize specially licensed subcontractors when construction work requires it, such as plumbing and electrical work.
- Scopes of work and material selections will be further dictated by specific program requirements and guidelines.
- Construction work requiring permitting and agency approvals/sign-off(s) will require full compliance with approved plans. Construction work will not be considered complete until any/all required final agency approvals have been issued and a notice of final acceptance provided by Restored Homes. Final agency approvals may include issuance of a new Certificate of Occupancy.
- All construction work will be monitored by Restored Homes. All GC payment requests will undergo review by Restored Homes, as well as government agency funding partners and/or design professionals, as required.
- Depending upon the program and/or project scopes, homes may or may not be occupied for the duration of the construction work.

Restored Homes must require that any participating sub-recipient, contractor, sub-contractor, agent or third party comply with all applicable Federal, New York State, and Local laws and regulations. Participating third parties must adopt and perform reviews and inspections to ensure compliance with all applicable Federal, State and Local laws and regulations. All third parties are required to indemnify Restored Homes, along with any program partner non-profit or government agency, from all claims arising out of the Third Party's performance or work.

REPORTING REQUIREMENTS

GCs will be required to provide information on each project's status. This will include information about the status of scopes of work, status of DOB approvals and filings, progress of repair work and projected completion dates. This information will include (as needed) written reports, pictures of the progress of work, urgent issues requiring resolution, and potential setbacks or defects in the work. In addition to regular reporting on all aspects of the project(s) verbally and in writing, the GC is responsible for communicating all red flags and urgent issues that could potentially delay or change the project in real time.

2. REQUEST FOR QUALIFICATION PROCESS

This RFQ has been issued to determine the eligibility of “Applicants” to serve as General Contractors in the Program. A pre-qualified list of General Contractors will be maintained from which to select for participation in the Program. **It is important to note that not all Applicants deemed qualified may be selected to participate in the Program.**

A. SUBMISSION OF APPLICATIONS

Applicants must submit their qualifications in accordance with the instructions and attachments contained in the RFQ. Submission of qualifications shall be deemed to be permission by Applicants for Restored Homes to make inquiries concerning Applicants as deemed necessary.

B. REVIEW AND SELECTION

Applicants must meet the threshold requirements outlined in the RFQ to be considered for participation in the Program. Failure to meet these threshold requirements or to provide the complete information required in the RFQ will disqualify Applicants from consideration in the Program. Restored Homes will review the responses to the RFQ and identify eligible Applicants. Upon review, Restored Homes, at its discretion, may notify Applicants that additional information or clarification is necessary. Failure to meet any of the requirements listed below may result in the rejection of the application.

C. MINIMUM THRESHOLD REQUIREMENTS

1. Experience

- Demonstrate completion, including references, of at least three (3) relevant construction or rehabilitation projects within the past 3 years. These projects should represent at least moderate rehabilitation of 1- to 4- family properties in New York City, in accordance with applicable codes, standards, rules and regulations.
 - To be considered to participate in the NYCHA and Plus One ADU programs:
 - GCs must demonstrate completion, including references, of at least (3) projects filed as Alteration Type 1 with NYC DOB.
 - At least one of the relevant projects provided should include a rehab that took place within an occupied 1- to 4- family property.
- A business that can demonstrate three (3) or more years of proven experience.
- Demonstrated familiarity with NYC DOB and industry requirements/standards.

2. Capacity

- Demonstrated ability to complete projects in a timely fashion.
- Financial Capacity as deemed adequate by Restored Homes
- Staff as deemed adequate by Restored Homes.

3. Licensed and Insured

- Fully licensed as a General Contractor with NYC DOB
- Appropriate certifications by General Contractor or subcontractors for all lead-based paint and asbestos activities.
- Maintain required insurance: Evidence of general liability, auto, workers compensation and disability insurance. Minimum coverage limits for participation in all programs are as follows:
 - General Liability-\$1,000,000 per occurrence/\$2,000,000 aggregate/\$2,000,000 products/completed operations aggregate;
 - Worker’s Compensation and Disability Insurance;
 - Auto Insurance-\$1,000,000;
 - Proof of environmental liability insurance for contractors or subcontractors performing environmental work, including, but not limited to the removal of lead and asbestos.
- Additional insurance requirements may apply for each program, including but not limited to Umbrella Liability and Builder’s Risk Coverage. Specific program coverage limits may be included in an attachment to this RFQ or can be provided by Restored Homes upon request.

4. Sponsor Review

Satisfactory Sponsor Review at HPD is mandatory for Program participation. Following a successful threshold review, Licensed General Contractors will be asked to submit the following sections from HPD's Compliance Package <https://www1.nyc.gov/assets/hpd/downloads/pdfs/services/hpd-hdc-compliance-package.pdf>

Section 1: Participant Identification

Section 4: Participant Information; Part J and Part K

An Applicant may be rejected at any time during the evaluation process if adverse findings are made regarding the Applicant or any of its principals or related entities, including, but not limited to, adverse findings with respect to any of the following:

- Past or pending government or private mortgage foreclosure proceedings or arrears with respect to any property owned or managed by the Applicant.
- Past or pending governmental tax or lien foreclosure, or substantial tax arrears.
- Findings of tenant harassment or a pending case of harassment
- Arson, fraud, bribery, or grand larceny conviction or a pending case
- Past or pending default on any obligation to, unsatisfied judgment or lien held by, or contract with, any governmental agency
- Past or pending suspension, debarment, or finding of non-responsibility by any government agency
- A past or pending voluntary or involuntary bankruptcy proceeding
- A negative history with any other government agency
- A negative history with Restored Homes Litigation/Indictments

Selection of Applicants under this RFQ means only that Restored Homes has determined that such Applicants meet the requirements set forth in this RFQ to participate in the Program.

D. COMPETITIVE CRITERIA

For all Applicants that pass all minimum threshold criteria, the following competitive criteria, listed below, will be considered. Competitive assessments will determine the frequency at which a General Contractor is invited to bid on residential construction and rehabilitation projects. In addition, Restored Homes, generally, will contact General Contractors who are reviewed more competitively to bid on complex and extensive projects, as well as emergency repairs.

- Total years of proven experience: Restored Homes will assess how long an Applicant has been in business with a proven track record of completed work.
- Quality and Extent of Previous Renovation and Repair Experience: Restored Homes will consider the following factors: (i) total number and size/scope of projects previously completed, (ii) quality of construction in completed projects or those under way.
- Proven experience with NYC DOB and industry requirements/standards: This will include an assessment of total NYC DOB filings and completed permits.
- Completion of rehabilitation projects with green building requirements/elements; Applicant's overall experience with green, energy-efficient building standards and practices, including any relevant certifications.
- Prior experience working with government and/or not-for-profit organizations.
- Certified New York State and New York City MWBE General Contractors and/or General Contractors committed to working with MWBE certified subcontractors.
- Likelihood of Early Construction Start: Restored Homes will consider Applicant's track record in delivering projects on time and within budget, this includes a demonstrated capacity to deal with projects in an expedited fashion.
- Organizational Capability: Applicants should demonstrate that they possess sufficient capacity to undertake the project, including effective staffing, record keeping abilities and overall organization. This includes the experience, qualifications and stability of staff who would be involved in the project.
- Financial Capacity: This includes financial stability of the organization and the quality of its financial management.
- Housing Experience: This includes both the extent and quality of experience in providing contracting services for housing for low- and moderate- income households; as well as total number of completed minor to moderate rehabilitation projects of 1- to 4- family properties in NYC.
- Current Capacity: The Applicant's current workload in relation to its staffing and other resources will be evaluated to determine whether it has the capacity to provide renovation services within the time frame required by this RFQ.

E. TERMS AND CONDITIONS

This RFQ is subject to the specific conditions, terms and limitations stated below:

The proposed work shall conform to the provisions all applicable laws, rules, regulations, and ordinances of all Federal, State, and City authorities having jurisdiction, as the same may be amended from time to time,

Restored Homes is not obligated to pay nor shall in fact pay any costs or losses incurred by any Applicant at any time including the cost of responding to the RFQ.

Restored Homes reserves the right to reject at any time any or all proposals and/or to withdraw this RFQ in whole or in part, to negotiate with one or more applicants, and/or dispose of the sites on terms other than those set forth herein. Restored Homes likewise reserves the right, at any time, to waive compliance with, or change any of the terms and conditions of this RFQ, and to entertain modifications and additions to the selected proposals.

F. CONFLICTS OF INTEREST

Current and former employees of the City of New York may respond to this Request only in accordance with Chapter 68 of the New York City Charter governing ethics and conflicts of interest affecting City personnel. Section 2604© (7) of the City Charter contains specific prohibitions that exclude enumerated groups of employees from applying.

Persons in the employ of the City considering a submission are advised that opinions regarding propriety of their participation may be requested from the New York City Conflicts of Interest Board. This body is empowered, under Section 2602 of the City Charter, to issue advisory opinion on conflict of interest questions and other matters of ethical considerations. It is not necessary, however, that such an opinion be obtained prior to responding to this Request.

Former employees of the City of New York are also advised that the City Charter imposes certain restrictions on post-employment and business relationships with the City. Such individuals are advised to consult the specific provisions on this issue contained in the City Chart.

3. SUBMITTING AN APPLICATION

Restored Homes will accept hardcopy or electronically sent applications, provided they are complete with all attachments and fully executed. Submission of an incomplete application may be grounds for disqualification of Applicants. The application must be signed by an authorized representative of the Applicant. The application must also include a cover sheet with the name of the Applicant. **PLEASE NOTE THAT EACH APPLICATION OF THE APPLICANT'S QUALIFICATIONS MUST CONTAIN THE FOLLOWING FORMS AND SUPPORTING DOCUMENTATION AS STATED BELOW.**

A. CONTENTS OF SUBMISSION

FORM A - Applicant Questionnaire

The Applicant Questionnaire provides Applicants with the opportunity to explain their organization's structure and capacity, as well as describe the team's experience. For Applicants that are joint ventures or newly formed business partnerships, provide a separate Questionnaire for each entity that comprises the joint venture. For Applicants that are newly formed business entities, the forms and documentation listed below should be completed or provided for the entity or entities providing the renovation experience.

FORM B - Residential Development Experience

General Contractors should have three years of experience in rehabilitation of 1- to 4- dwelling units in New York City. A completed Residential Development Experience form is required for each entity. List all projects that have been completed within the last three years or that are in construction, in pre-development or have otherwise been committed. The spreadsheet can be provided in an alternate format as long as it contains the information required in a clear and concise way.

FORM C - Principal's Property Listing

A completed Property Listing Form for the Applicant and each principal of the development team, listing all properties owned (defined as more than 10% ownership) within the last three years, either directly by the principal(s), or by an organization in which the principal(s), was a corporate officer, general partner, or held more than a 10% interest.

FORM D-Assets Statement

A current financial statement for the Applicant and each principal (i.e. within 12 months of the date of submission of this application) for the two most recent years are required. This statement may be provided on the form, or in another format, provided that all required information is included.

FORM E-Credit Authorization Form

Completed and signed credit authorization form for each principal and Applicant.

ADDITIONAL DOCUMENTATION

- Proof of Insurance-This should include Applicant's most recent Certificate of Insurance
- Copy of Applicants NYC DOB General Contractors License
- Copies of any other relevant certifications, including but not limited to NYS and/or NYC MWBE certification.
- Resume(s) and/or company brochures

B. SUBMISSION DELIVERY

All submissions become the property of Restored Homes. Submissions shall be delivered by hand or via delivery service (FedEx/UPS/mail, etc.) or electronically to the address as follows:

Restored Homes HDFC
Attn: Colin Cotter
150 Broadway, Suite 2101
New York, NY 10038
(212)584-8981 x26
ccotter@neighborhoodrestore.org

The Submission Due Date is January 9th, 2026. Submissions will be promptly reviewed by Restored Homes. Interviews, site visits and/or additional information may be requested.

FORM A

GENERAL CONTRACTOR RFQ
APPLICANT QUESTIONNAIRE

ALL APPLICANTS SHALL COMPLETE THIS FORM AS WELL AS THE QUESTIONNAIRE THAT IS ATTACHED.

If the applicant is a joint venture, a separate Questionnaire and Attachment shall be provided for each entity that comprises the joint venture, as identified in Section 2 below. If the applicant is a newly formed joint venture or business, information on the entity with their rehabilitation and marketing and sales experience must be provided.

If additional space is needed, please submit separate sheet(s), identifying the question(s) being answered on each sheet.

1. NAME OF APPLICANT: _____

ADDRESS: _____

Name of CONTACT PERSON: _____
(for the Applicant)
Address: _____

Telephone Number: _____

Fax Number: _____

E-Mail: _____

2. IS THE APPLICANT A JOINT VENTURE? YES [] NO []

If yes, list below the name, address, and phone number of each entity which comprises the applicant entity stated above, and the percentage of ownership interest in the joint venture.

<u>Name of Entity</u>	<u>Address</u>	<u>% of Ownership</u>
_____	_____	_____

APPLICANT NAME: _____

NAME OF ENTITY COMPLETING THIS QUESTIONNAIRE: _____
(If other than applicant, i.e. joint venture)

3. PRINCIPALS

- (a) Provide the following information about all principals of this entity. For corporations: provide the names of the officers and controlling shareholders (those owning 10% or more). For partnerships, provide the names of all general partners. For not-for-profits, please provide the names of the Board of Directors and Officers.

Also state the role that each would play in this Program.

Name/ Position/Title	Home Address	Role	SS#	% Owned

4. ORGANIZATIONAL CAPACITY

- (a) Provide organization resumes or any brochures describing your organization and the projects undertaken.
- (b) State number of years business has been in operation.
- (c) State number and type of employees and describe their general duties and experience.
- (d) Does your organization generally or most efficiently operate as a member of a development team that includes other entities? If yes, identify the other individuals and/or organizations and their respective roles.
- (e) If the applicant is a joint venture or a newly formed business entity, has any member of the joint venture or principals of the new business entity jointly carried out another project? If so, state the name(s) and location(s) of each project. Indicate which members of the joint venture or principals of the new business participated in each project.

- (f) Identify for profit and non-profit developers and architects that you have worked with in the past? Describe the extent of the work you have performed for these entities.

- (g) Describe any experience or other factors that would demonstrate your knowledge and experience in rehabilitating/renovating existing and/or developing new scatter-site 1-4-unit housing in New York City.

- (h) How does your organization handle post-construction warranty issues? What is the turn-around time for responding to these issues? How do you monitor service responses?

- (i) Describe any experience your organization has with green building construction. Include any professional certifications and identify completed or in-process projects.

- (j) Indicate if your organization is MWBE certified. If not, identify any Minority or Women Owned Businesses (MWBE) certified with New York City and/or New York State that you have worked with and plan to work with should you be selected to participate in this Program. Please provide business names and trades.

- (k) Indicate interest and capacity in participating in Emergency Repairs as explained above and provide references for any prior emergency work commenced and completed within 72 hours. List type of work, duration of work, home address and homeowner contact information.

5. ORGANIZATIONAL STRUCTURE

(a) Type of Organization: Sole proprietorship [] Partnership []
 Corporation [] Not-For Profit []

(b) For corporations or partnerships: provide the following information about all partners, officers, and shareholders. For non-profits list your board members and officers.

Name Position/Title	Percentage of Ownership	Date of Ownership

(c) Do any principals and/or officers maintain a business relationship with or have an ownership interest in another company?
 Yes [] No []

If yes, provide the following information:

Name of Principal/Officer	Name, Address, Tel. # of Affiliated Company	Position with and % Interest with Company

- (d) Is company owned in full or in part by another firm or investor(s)? Yes [] No []
If yes, provide the following information:

Name of Firm/Investor	Address and Phone	% of Ownership

6. EXPERIENCE

- (a) Complete the form below (TAB B) for your organization. If any key member has had other experience that you consider relevant to your organization's qualifications, provide a separate form for each such individual:

7. REFERENCES

Provide the name, address, telephone and fax numbers, and e-mail addresses (if available) of at least three business references whom we may contact regarding your residential renovation experience. For each, identify the home or homes about which the individual is informed. References may include building owners, lenders, architects, engineers, homeowners, and other development professionals with whom you have worked in the past.

8. OTHER

Has any principal identified on page 1, or any organization in which the principal is or was a general partner, or corporate officer, or owned more than 10% of the shares of the corporation been the subject of any of the following:

- A. Past or pending government or private mortgage foreclosure proceeding or arrears;
- B. Past or pending government tax or lien foreclosure, or substantial tax arrears;
- C. Findings of tenant harassment or a pending case of harassment;
- D. Arson, fraud, bribery or grand larceny conviction or a pending case;
- E. Past or pending default on any obligation to, unsatisfied judgment or lien held by, or contract with, any governmental agency;
- F. Past or pending suspension, debarment, or finding of non-responsibility by any government agency;
- G. A past or pending voluntary or involuntary bankruptcy proceeding;
- H. A negative history with any other government agency;
- I. A negative history with Restored Homes or with the Center
- J. Litigation/Indictments

YES	NO

If yes, please state the following information:

(1) Name of principals: _____

(2) Name of organization/corporation and if an officer, state title:

(3) Date of action: _____

(4) Current status of action: _____

(5) Explanation of Circumstances: _____

9. CERTIFICATION

[This certification must be signed by one of the Individuals listed above; if the Respondent Entity is a joint venture, an Individual representing each Principal of the joint venture must sign it.]

I certify that the information set forth in this application and all attachments and supporting documentation is true and correct. I understand that the Restored Homes will rely on the information in or attached to this document and that this document is submitted to induce the Restored Homes to select us as a Contractor.

I understand that this statement is part of a continuing application and that until such time that the Program homes are finally and unconditionally approved by the Restored Homes team for admission into the program I will report any changes in or additions to the information herein and will furnish such further documentation or information as may be requested by Restored Homes or any agency thereof.

I understand that if I am selected as a Contractor, I must submit all additional disclosure forms required.

Name of Principal: _____

Signature of Individual: _____

Print Name and Title of Individual: _____

Name of Principal: _____

Signature of Individual: _____

Print Name and Title of Individual: _____

FORM B
 RESIDENTIAL RENOVATION EXPERIENCE WITHIN NYC
 LAST 3 YEARS

NAME OF APPLICANT: _____

NAME OF INDIVIDUAL/ORGANIZATION completing this form: _____

Instructions: Please list property addresses separately even if they are part of a multi-site project. Fill out form completely and use as many forms as necessary to list **ALL** relevant experience within NYC in the last 3 years. Please note, 1-to-4 family ALT1 filing projects will be reviewed prioritized for review over all other project types. If applicable, you may list residential renovation project experience outside of NYC once you've exhausted all relevant NYC projects.

ADDRESS Bldg. #, Street, City, State, Zip	DOB FILING NUMBER	PROJECT NAME	# OF UNITS	TOTAL CONST. COST	GOV'T PROGRAM	STATUS		WORK TYPE	MO/YR	MO/YR	OWNER (Contact Name & Phone No.)
						O/V	P/I/C		STRT	COMPL.	

OCCUPENCY STATUS	WORK STATUS	WORK TYPE
O = Units occupied during rehab	P = Pre-development	Alteration 1
V = Units vacant during rehab	I = In-construction	Alteration 2
	C = Completed	Directive 14

FORM D
ASSETS STATEMENT

Assets Statement must be dated and signed on PAGE THREE

Assets Statement must describe financial status within the last twelve months

Financial Statement is submitted for (check one):

- INDIVIDUAL
- CORPORATION
- LIMITED PARTNERSHIP
- NOT-FOR-PROFIT
- OTHER (Specify): _____

SECTION 1 - PERSONAL INFORMATION	
Name:	
Business Name:	
Business Phone/Fax:	
Marital Status:	
Residence Address:	
City, State, Zip Code:	
Business Address:	
City, State, Zip Code:	
Position (Title):	
Years of Service:	Bonus/Commission:
Other Income:	Source:
Gross Life Insurance:	
Beneficiaries:	
Are you a defendant in any lawsuits or legal action? If so, describe below:	
Have you ever declared bankruptcy? If so, describe below:	
Do you have any contingent liabilities? If so, describe below:	

SECTION 2 - STATEMENT OF FINANCIAL CONDITION AS OF:			
ASSETS	DOLLARS (Omit Cents)	LIABILITIES	DOLLARS (Omit Cents)
Cash on Hand and in Banks		Notes Payable to Banks - Secured	
		Notes payable to Banks - Unsecured	
Notes Receivable		Notes Payable to Others - Secured	
Real Estate (See Schedule A)			
Mortgages Owned		Notes Payable to Others - Unsecured	
indicate primary residence			
(list separately and check		Debt Balances in Margin	
those pledged as collateral)		Accounts with Brokers	
Marketable Securities			
(list separately and check		Loans Against Life Insurances	
those pledged as collateral)		Mortgages on Real Estate	
		(See Schedule A)	
		Other Liabilities (Itemize)	
Cash-Value Life Insurance			
Other Assets *(Itemize)			
		Total Liabilities	
		Net Worth	
TOTAL		Total Liabilities & Net Worth	

* ANY INTEREST IN A CLOSELY HELD BUSINESS MUST BE DOCUMENTED BY PROVIDING A CURRENT BALANCE SHEET FOR THAT BUSINESS AND STATING THE PERCENT INTEREST THAT THE APPLICANT HOLDS.

SCHEDULE B INCOME FROM PROPERTIES					
Property No. (Refer to Schedule A)	1	2	3	4	5
Present Annual Gross Income Not Including Vacancies & Concessions					
Less Total Operating Expenses & Property Taxes					
Net Income					
Less Amortization & Interest Payments					
Net Profit					
Net Rental Value of Present Vacancies					
Annual Rental Value of Space on which lease expires during next six months					
Net Profit Last Year					
Amount & Classes of Insurance Carried					
List Other Encumbrances, Debits, Taxes, Mortgage Installments or Interest past due:					
By whom are Present Mortgage(s) on Property held?					
Any Mortgages endorsed or guaranteed? If so, by whom?					
List (circumstances of) any Litigation or Judgment(s) pending in connection with the above listed Properties:					

For the purpose of procuring and maintaining credit from time to time in any form whatsoever with you, the undersigned hereby represents the above to be a true and accurate Statement signed as of the date herein before set forth and agrees (I) that, if said Statement or any part thereof proves false or misleading in any particular, each and all of the obligation and/or liabilities of the undersigned of every kind to you, whether joint or several, primary or secondary, direct or contingent, shall, at your option, become immediately due and payable all without demand or notice of any kind and (II) that you will be notified promptly in writing of any materially unfavorable changes in the financial conditions herein set forth. Whenever the undersigned may apply to you for credit, and until a substitute Statement may have been submitted to you, this Statement shall have the same force and effect as if delivered at the time such further credit is requested.

Name of Principal: _____

Signature of Individual: _____

Print Name and Title of Individual: _____

Date: _____

FORM E
CREDIT AUTHORIZATION FORM

I authorize Restored Homes HDFC to obtain a credit report on:

ORGANIZATION NAME: _____

Complete Section A for the Applicant and sign where indicated below:

Section A

Applicant's Employer Identification Number: _____

Date of Incorporation: _____

Date of Partnership or Joint Venture Formation_____

Complete Section B for Each Principal of the Applicant and sign where indicated below:

Section B

PRINCIPAL'S NAME*: _____

ADDRESS: _____

Social Security Number: _____

Date of Birth: _____

*Please indicate if you are a Jr., Sr. or III.

If you have been married less than two years, or if you have been known by another name, please indicate former name:

If at the above address less than two years, indicate prior address:

Signature:_____

Plus One ADU Program
GENERAL CONTRACTOR INSURANCE

General Contractor will maintains for the duration of each project, such coverage as is customary in New York City, which generally will include the following:

Builders Risk

All Risk/Special Form Perils

Valuation: Replacement Cost, including existing structures (without sublimits)

Completed Value with building limit not less than the full replacement cost.

Soft Costs Endorsement for actual loss sustained with no monthly limitation

Deductible not more than \$10,000

Owner and tenants as named insured

“The City of New York, its officials and employees, and their successors and/or assigns”, “the State of New York, and the Housing Trust Fund Corporation, and any of their agents and employees” and “Restored Homes Housing Development Fund Corporation”.” as mortgagee, lender’s loss payable and loss payee, as applicable.

Policy issued for the term of the project or not less than one year

Premium fully prepaid for a period of not less than three months

Commercial General Liability Insurance: Coverage shall be on "Occurrence" current ISO Form or an equivalent and shall include such coverage as is customary in New York City, which generally will include the following

Monetary limits not less than:

\$2,000,000 annual aggregate

\$2,000,000 products/completed operations aggregate including extended completed operations not less than 36 months.

\$1,000,000 per occurrence covering bodily injury & property damage

\$50,000 for fire damage liability

Owner(s) of and all tenants in each property in Program as additional insured

“The City of New York, including its officials and employees and their successors and/or assigns”, “the State of New York, and the Housing Trust Fund Corporation, and any of their agents and employees” and “Restored Homes Housing Development Fund Corporation as additional insureds.

Policy issued for an unexpired term of not less than one year

Premium fully prepaid for a period of not less than one year

The Commercial General Liability insurance will generally include the following.

- no action-over exclusions. (NY Labor Law/Scaffold Law) 200, 240 and 241,
- no work at height limitations or exclusions,
- no exterior work exclusions
- Contractual liability coverage as found in the most recent ISO Commercial General Liability form CG0001, or its equivalent,
- Commercial General Liability insurance shall not contain any work/classification limitations or exclusions for the work performed under this agreement
- Additional insured endorsements CG2010, CG2026, CG2037, CG2038 or their equivalents. The additional insureds shall be specifically listed on endorsements CG2010 and CG2037. Blanket additional insured endorsements shall not be acceptable
- Additional Insured Status shall be on a primary and non-contributory basis for ongoing and completed operations.
- Not exclude "X" "C" "U" Explosion, Collapse, & Underground hazards.

Umbrella Liability coverage

Minimum of \$5,000,000. Owner, tenants, "The City of New York, its officials and employees, and their successors and/or assigns", "the State of New York, and the Housing Trust Fund Corporation, and any of their agents and employees" and "Restored Homes Housing Development Fund Corporation" as additional insured on a primary, non-contributory basis for ongoing and completed operations. Including a waiver of subrogation in favor of all additional insureds

Workers' Compensation Insurance

Statutory Workers' Compensation Coverage and Employer's Liability (Coverage must apply to operations conducted in the State of New York, under the New York Workers' Compensation Laws)

Comprehensive Business Automobile Liability Insurance

Covering owned and non-owned vehicles used in connection with the Work with limits as may be designated by NYC Department of Housing Preservation and Development from time to time but in any event with limits of not less than \$1,000,000 combined single limit per occurrence with respect to personal and bodily injury, death and property damage. Coverage must be at least as broad as ISO Form CA0001 (10/01 ed.). "Restored Homes Housing Development Fund Corporation "The City of New York, its officials and employees and its successors and/or assigns", "the State of New York, and the Housing Trust Fund Corporation, and any of their agents and employees" as Additional Insureds.

Environmental Pollution Liability (applicable to any contractor, sub-contractor of any tier involved in environmental services)

\$1,000,000 limit to new construction projects or demolition naming "The Restored Homes Housing Development Fund Corporation "The City of New York, its officials and employees, and their successors and/or assigns" and "the State of New York, and the Housing Trust Fund Corporation, and any of their agents and employees" as Additional Insureds with Primary Non-Contributory language. Coverage should include but not be limited to pre-existing and new conditions; lead, asbestos and mold.