

# Request for Proposal (RFP)

For  
PROJECT-BASED VOUCHER PROGRAM

**Brown County Housing Authority**

Project # 2443



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***Posting Date:* June 23<sup>rd</sup>, 2021**

***Response Deadline:* July 23<sup>rd</sup>, 2021      4:00 PM      Local Time  
CST**

**To:**

**Brown County Housing Authority**

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**PROJECT-BASED VOUCHER PROGRAM  
REQUEST FOR PROPOSALS (RFP)**

The Brown County Housing Authority (BCHA) is accepting proposals from property owners and developers wishing to place Department of Housing and Urban Development (HUD) Project-Based Voucher (PBV) in developments in Brown County. The goal of this request is to deconcentrate poverty and expand economic and housing for low- to moderate-income families. The PBV program is designed to conform to the Project-Based Voucher Program Final Rule published on October 13, 2005 at 24 CFR Part 983, the HERA Act of 2008 from November 24, 2008, and other related PIH Notices and HUD guidance.

**RFP PROJECT TIMELINE**

Please Note: These dates are for planning purposes. They represent the BCHA’s desired timeline for implementing this project. Any revision to the Due Date for submission of proposals will be made by addendum. All other dates may be adjusted without notice, as needs and circumstances dictate.

**Project Timeline:**

June 21 <sup>st</sup> , 2021	BCHA Authorizes RFP
June 23 <sup>rd</sup> , 2021	RFP Posting Date
June 30 <sup>th</sup> , 2021	Vendor Question Deadline by 4:00pm via email to <a href="mailto:Patrick.leifker@browncountywi.gov">Patrick.leifker@browncountywi.gov</a>
July 2 <sup>nd</sup> , 2021	Answers to Questions Published as Addendum by 4:00pm
July 23 <sup>rd</sup> , 2021	Proposal Due and Proposal Opening at 4:00pm
August 16 <sup>th</sup> , 2021	Presentation of selected proposal(s) to BCHA Board

**Questions**-All questions related to this RFP must be in writing and received via email to the BCHA Executive Director. Questions can be delivered via e-mail to: [Patrick.Leifker@browncountywi.gov](mailto:Patrick.Leifker@browncountywi.gov)  
Questions MUST be clearly marked in the subject line: **“Questions for Project 2443”**

RFP QUESTIONS & ANSWERS POSTED DATE: JULY 2<sup>nd</sup>, 2021 at 4:00PM

**Answers** – Answers to all written questions will be issued in the form of an addendum. Answers will be published on the Brown County website at:

Answers will be published on the Brown County website at:  
[browncountywi.gov](http://browncountywi.gov) > Departments > Purchasing > Open Projects

AND

[browncountywi.gov](http://browncountywi.gov) > Departments > Planning and Land Services > Housing Authority

It is the responsibility of all interested vendors to access the web site(s) for project information. Calls for assistance with the web site can be made to (920) 448-4423.

**DESCRIPTION OF PBV PROGRAM**

Through the PBV Program, the BCHA will enter into housing assistance payments contracts with selected property owners for designated rental units for an initial term of up to twenty years and renewable for up to twenty years, for a maximum total term of forty years, subject to funding availability. Housing assistance subsidies will be provided while eligible families occupy the rental housing units and the units meet other program standards. The BCHA will refer families from its Project Based Housing Choice Voucher program waiting list to the project owner in order to fill vacant units. The BCHA’s published subsidy standards will determine the appropriate unit size for the family size and composition.

## **ELIGIBLE HOUSING**

The BCHA may authorize PBV assistance for both existing housing units that substantially comply with Housing Quality Standards and newly constructed and rehabilitated housing units (units developed pursuant to an agreement for use in the PBV program).

Certain types of housing units and/or developments that are not eligible for PBV assistance include:

- Shared housing;
- Units on the grounds of a penal, reformatory, medical, mental, or similar public or private institution;
- Nursing homes or facilities providing continuous psychiatric, medical, nursing service, board and care, or intermediate care;
- Units that are owned or controlled by an educational institution or its affiliate and designed for occupancy by the students of the institution;
- Manufactured homes;
- Cooperative housing;
- Transitional housing;
- High-rise elevator projects for families with children;
- Owner-Occupied housing units;
- Units occupied by an ineligible family at the time of proposal submission or prior to execution of the Housing Assistance Payment (HAP) contract;

The number of PBV assisted units in the project generally cannot exceed 25 percent (25%) of the total number of dwelling units in the project, except as provided by regulation. Notwithstanding this provision, exceptions to the 25 percent cap include units in a project that are specifically made available for “qualifying families” that are elderly or disabled, or that are receiving specific supportive services, or single-family housing (defined as 1-4 units).

Sites selected for PBV assistance must be:

- Consistent with the goal of de-concentrating poverty and expanding housing and economic opportunities, consistent with the BCHA’s PHA Plan, Administrative Plan, and other local plans. Specific factors are discussed at 24 CFR 983.57(b)(1),
- In full compliance with the applicable laws regarding non-discrimination and accessibility requirements;
- Meeting Housing Quality Standards (HQS) site standards; and
- Must meet HUD regulations for site and neighborhood standards. For existing and rehabilitated housing, the site selected must: a) be adequate size, exposure and contour to accommodate the number and type of units proposed, and adequate utilities and streets must be available to the site; b) promote greater choice of housing opportunities and avoid undue concentration of assisted persons in areas containing a high proportion of low-income persons; c) be accessible to social, recreational, educational, commercial, and health facilities and services that are at least equivalent to those typically found in the neighborhoods consisting largely of unassisted, standard housing of similar market rents; and, d) be located within reasonable travel times and cost via public transportation or private auto to places of employment. For new construction units, site and neighborhood standards are detailed at 24 CFR 983.57 (e).

Activities under the PBV program are subject to HUD environmental regulations and may be subject to review under the National Environmental Policy Act by local authorities.

When newly constructed housing sites are selected for PBV assistance, the owner must agree to develop the contract units to comply with HQS. The BCHA may elect to establish additional requirements for quality, architecture, or design of PBV housing, over and above the HQS. The owner and the owner’s contractors and subcontractors must comply with all applicable State and federal labor relations laws and regulations, federal equal employment opportunity requirements, and HUD’s implementing regulations.

The BCHA will enter into a Housing Assistance Payments (HAP) contract with the owner for all sites selected and approved for PBV assistance. The BCHA will make housing assistance payments to the owner in accordance with the HAP contract for those contract units leased and occupied by eligible families during the HAP contract term subject to funding availability.

The BCHA does not conduct screening to determine a PBV applicant family's suitability for tenancy. The owner is responsible for screening and selection of all families, despite being referred by the BCHA's waiting list. The owner's tenant screening criteria is subject to BCHA approval. Such criteria must adhere to BCHA, local, state, and federal requirements. The owner must apply the same screening criteria to all tenants, regardless of PBV assistance.

During the course of the tenant's lease, the owner may not terminate the lease without good cause. "Good cause" does not include a business or economic reason, or desire to use the unit for an individual, family, or non-residential rental purpose. Upon expiration of the lease, the owner may: renew the lease, refuse to renew the lease for good cause, or refuse to renew the lease without good cause.

For existing housing, the owner must provide the BCHA enough information regarding existing tenants prior to execution of the HAP contract to determine if the families are eligible for PBV assistance. Existing tenants who qualify for PBV assistance will be placed on the BCHA PBV waiting list and given an "absolute preference" for continued occupancy in their unit with PB assistance. Existing tenants who do not qualify for PBV assistance cannot be displaced in order for their unit to be project based; instead their unit will not be included in the HAP contract.

The amount of the rent to owner is determined in accordance with HUD regulations. Except for certain tax credit units, the rent to owner including utility allowances must not exceed the lowest of:

- An amount determined by the BCHA, not to exceed 110 percent (110%) of the applicable fair market rent (FMR) for the unit bedroom size, including any applicable tenant-paid utility allowance;
- The reasonable rent; or
- The rent requested by the owner.

BCHA's current Payment Standards for determining maximum rents with all utilities included are available on Exhibit A. The BCHA's utility allowances are attached as Exhibit B.

An independent reasonable rent study will be prepared to determine the rent.

The total rent to the owner for PBV assisted units consists of the tenant rent (the portion of the rent to owner paid by the family) and the rental assistance paid by the BCHA in accordance with the contract with the owner. The BCHA determines the tenant rent in accordance with HUD requirements.

#### **APPLICATION EVALUATION PANEL**

The BCHA's Executive Director will appoint a PBV Evaluation Panel to review, evaluate, rank, and select the applications according to the criteria described herein.

#### **APPLICATION REVIEW**

In submitting the application, the owner certifies that the application and the property are in conformity with HUD program regulations and requirements, including the following items:

- The indicated owner is indeed the owner of the property or, for new construction or rehabilitation, the owner has appropriate site control and could submit evidence upon request;
- The owner and other property principals are not on the U.S. General Services Administration (GSA) list of parties excluded from federal procurement and non-procurement programs

- The owner understands the BCHA will conduct a background check on owners and may deny PBV participation if there is a preponderance of evidence that they have been involved in drug related, gang related, violent or fraudulent activity within 3 years for an ordinance violation or misdemeanor and 5 years for a felony or have had bankruptcy or foreclosures in the past 10 years or have had non-payment of property or income taxes.
- The owner and other property principals do not have any possible conflicts of interest that would be a violation of the HAP contract or HUD regulations. The owner and principal parties must not be:
  - A member or officer of the BCHA board of commissioners;
  - A BCHA employee, or a contractor, subcontractor or agent of the BCHA, who formulates policy or who influences decisions with respect to the program;
  - A public official, member of a governing body, or state or local legislator, who exercises functions or responsibilities with respect to the programs;
  - A member of the Congress of the United States;
  - The spouse, parent, child, grandparent, grandchild, sister, or brother of any member of a family residing in a proposed contract unit;
- The property is appropriately zoned or in the process of being rezoned for the intended use and meets local design standards as well as the site and neighborhood standards explained above;
- For occupied rehabilitation housing, the owner will provide a relocation plan and certifies that any relocation will be done in accordance with the Uniform Relocation Act;
- For new construction or rehabilitation, the owner will comply with and provide appropriate documentation to confirm compliance with labor standards, including Davis-Bacon and Section 3 employment and training requirements;
- The owner has necessary property insurance, including flood insurance, if necessary;
- The owner is current on property taxes and utilities;
- Existing housing units must, at the time of the BCHA's selection, substantially comply with the Housing Quality Standards;
- The owner understands the rent amounts will be set in accordance with the rent calculations explained above;
- The property is not an ineligible housing type or does not utilize prohibited housing subsidies listed above;
- For new construction projects, no construction has begun, as evidence by the BCHA inspection;
- Existing housing, as well as new construction and rehabilitation projects must meet program accessibility standards of both Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794) and implementing regulations at 24 CFR part 8 and the Fair Housing Amendments Act of 1988. Specifically, for projects containing four or more units that are designed, constructed, or altered after July 11, 1988, a minimum of five percent (5%) of the total PBV units, or at least one, whichever is greater, must be fully accessible for people with mobility impairments. An additional two percent (2%) must be fully accessible for persons with hearing or vision impairments;

If a project does not meet the requirements indicated above, it will be designated non-responsive. A notice mailed to the applicant will identify the disqualifying factor.

#### **OTHER REQUIREMENTS**

1. Before executing an Agreement or HAP Contract with any selected owner, the BCHA will:
  - a. Establish rents in accordance with §983.301 (Determining Rent to Owner);
  - b. Obtain subsidy-layering reviews from HUD or a HUD-approved Housing Credit Agency, if applicable;
  - c. Obtain environmental clearance in accordance with §983.58;
2. Before an Agreement is executed for new construction units, the owner must submit the design architect's certification that the proposed new construction reflected in the working drawings and specifications comply with housing quality standards, local codes and ordinances, and zoning requirements (§983.57(e)).

## RANKING AND SELECTION CRITERIA

Proposals that appear to meet the requirements will be evaluated and ranked by the BCHA Evaluation Panel. The BCHA will prepare a ranking list in accordance to the points awarded to each proposal. The BCHA may, at its discretion, select one or more of the proposals submitted, or none of the proposals submitted.

The BCHA reserves the right to reject any or all proposals, to waive any informality in the RFP process, or to terminate the RFP process at any time, if deemed by the BCHA to be in its best interests. The BCHA reserves the right to reject and not consider any proposal that does not meet the requirements of this RFP, including but not necessarily limited to incomplete proposals and/or proposals offering alternate or non-requested services. The BCHA shall have no obligation to compensate any applicant for any costs incurred in responding to this RFP.

The BCHA's Evaluation Panel will review and score each proposal based on the following criteria:

CRITERIA	MAXIMUM POINTS AVAILABLE
1. Accessibility for Disabled Individuals	10
2. Services	15
3. Financial Capacity	20
4. Deconcentration of Poverty	25
5. Owner/Management Experience	15
6. Income Mixing	15
<b>Total</b>	<b>100</b>

### Scoring Criteria for Existing Units:

Units must be inspected by the BCHA to ensure they substantially comply with Housing Quality Standards before a proposal will be selected. Owners must provide a list of the units proposed for assistance. If specific units are not permanently designated as the PBV units (floating units), then all units in the project which are likely to become project based must be inspected.

For a further breakdown of the selection criteria, see Exhibit C.

### APPLICATION FORMAT

Three (3) hard copies of owner applications must be submitted as well as an electronic copy, sent either to the email address indicated below or provided on CD or USB memory stick (will not be returned).

### APPLICATION SUBMISSION

Owner applications will be accepted at the BCHA office, located at:

Brown County Housing Authority  
305 E. Walnut St, Rm 320  
P.O. Box 23600  
Green Bay, WI 54305  
Attn: Patrick Leifker  
[Patrick.Leifker@browncountywi.gov](mailto:Patrick.Leifker@browncountywi.gov)

### NON-RESPONSIVE OR NON-COMPLIANT APPLICATIONS

If the BCHA determines that an application is non-responsive or non-compliant with this RFP, written selection criteria and procedures, or HUD program regulations, the applicant will be notified of the deficiencies and provided five (5)

calendar days to correct all deficiencies. The application will be considered for the program if the missing information is submitted within this time period.

The BCHA reserves the right to cancel this RFP for any reason or to reject applications at any time for misinformation, errors, or omissions of any kind, regardless of the stage in the process that has been achieved.

## **APPLICATION CONTENT**

Applications for PBV assistance must include all of the following information, consisting of both the BCHA PBV Application Form and the accompanying narrative and supplemental information:

The following information must be provided on the BCHA PBV Application Form:

- Project or Property name
- Owner name: If necessary, attach a separate sheet to identify all owners, developers or architects (for new construction or rehab), management agents, officers, principal members, shareholders, investors and other parties with an interest in the project
- Project Address/Addresses
- Name, phone number, and email address for the main contact person for this application
- Description of the general location/locations of the project
- Indicate if the project is existing housing, new construction or rehabilitation. For existing, indicate the date the project was built and dates of any major rehabilitation. For new construction or rehab, include an attachment indicating all major milestones and anticipated dates for the financing and construction or rehab
- Description of building type, for example one-story, townhouse, high rise with elevator, etc.
- Total number of buildings and units per building, indicating total units in the project
- Total number of units by bedroom size in the project, including square footage (ie: 20 1-bedroom, 550 square feet; 16 2- bedroom, 700 square feet, etc.)
- Total number of proposed project based units by bedroom size
- Specify if owner wishes to project base specific units or to have floating units. Floating units means that specific units are not permanently designated, but rather may change based on tenant turnover. If specific units, list the apartment numbers of each specific unit. If floating units, list all potential units, which may include all units in the project, if so desired. Attach additional sheet if necessary
- Initial term requested for PBV contract. Initial term is a maximum of 20 years and may be renewed for up to 20 additional years for a total of 40 years. Indicate initial term only
- Proposed contract rent for each unit type/size
- Breakdown of utility responsibilities to be paid by the tenant and by the owner.

In addition, the following information must be provided as attachments to the application:

- **Project Narrative:** Explain the ways in which the proposed housing project meets the BCHA's mission of ensuring that all residents of Brown County have the opportunity for safe, affordable housing. Explain how the project is consistent with at least one of the BCHA's goals: expand supply of assisted housing; improve the quality of assisted housing; increase assisted housing choices; provide an improved living environment; promote self-sufficiency and asset development of assisted households; ensure equal opportunity and affirmatively further fair housing. *(Limit narrative to no more than 1,000 words)*
- **Site selection standards narrative:** Demonstrate that the project is consistent with HUD's statutory goal of de-concentrating poverty and expanding housing and economic opportunities (as per §983.57). Explain which of the following HUD criteria apply to the property and how, identifying data sources used: *(Limit narrative to no more than 500 words)*
  - HUD-designated Enterprise Zone, Economic Community, or Renewal Community;

- Located in a census tract where the concentration of assisted units will be or has decreased as a result of public housing demolition;
- Located in a census tract which is undergoing significant revitalization;
- State, local, or federal dollars have been invested in the area that has assisted in the achievement of the statutory requirement;
- New market rate units are being developed in the same census tract that will positively impact the poverty rate in the area;
- Experiencing an overall decline in the poverty rate in the past five years if the poverty level is over 20 percent;
- Meaningful opportunities for educational and economic advancement in the census tract;
- **Experience:** Include a narrative and/or other documentation demonstrating experience related to this RFP. For new construction or rehabilitation, indicate the developer's experience and capability to build or rehabilitate affordable housing; for existing housing, indicate experience with HUD Subsidized Housing Programs and owner's compliance with owner obligations under HCV. Include a description of the management agent's experience;
- **Financial Capacity:** For existing housing, include a copy of the most recent audited financials and a listing of accounts payable greater than 90 days; For new construction or rehab, include evidence of financing, including project-specific operating proforma for the life of the PBV contract;
- **Amenities and services:** Provide a listing of amenities and services included such as off-street parking, laundry facilities, playgrounds, community rooms, wiring for electronic media, free cable TV, services or activities for elderly or people with disabilities, etc.;
- **Photos** (for existing housing) or **renderings** (for new construction or rehab) of the property, including exterior, common areas, typical unit interior;
- **Handicapped accessibility features:** Describe the units which meet accessibility features required by Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794) and the Fair Housing Amendments Act of 1988. Indicate the total number of accessible units and include the apartment numbers of such units requesting to be project-based. If housing was constructed prior to June 2, 1988 and the percentage of accessible units does not meet Section 504 requirements, provide documentation to support that an undue financial or administrative burden would exist if such requirements were met;
- **Tenant Selection Plan:** Detail tenant screening and selection criteria, include any tenancy preferences owner offers. Examples include a review of applicants' credit history, a criminal background check, an evaluation of applicants' income to determine affordability, etc. Tenant screening and selection criteria must adhere to the BCHA, local, state, and federal requirements. The owner/agent must apply the same screening criteria to all tenants at the property, regardless of PBV assistance. Criteria must include target population and income limits required by any governmental programs involved in the project;
- **Rent and Occupancy Status:** For existing housing, indicate the extent to which units are occupied by families that are eligible to participate in the PBV program (ie: to the owners' knowledge, if families meet the BCHA's criminal screening requirements, are income eligible, are not otherwise ineligible for the Housing Choice Voucher Program, and don't already have a tenant-based Voucher). Ineligible families cannot be displaced and residents who already have a tenant-based Voucher cannot be required to give up their Voucher in order to project base a unit;
- **Description of other governmental assistance** in the project, include the amount and type of funding and if it applies to specific units. For new construction or rehab, if a subsidy layering review has already been completed, provide a copy. If not yet completed, provide all HUD- required documentation so that it can be completed;
- **Section 3:** For new construction or rehabilitation, provide a plan detailing how Section 3 employment and training opportunities requirements will be met.

For any questions regarding this RFP, please contact Patrick Leifker at (920) 448-6486 or by email at [patrick.leifker@browncountywi.gov](mailto:patrick.leifker@browncountywi.gov).



**EXHIBIT A: BCHA PROJECT-BASED VOUCHER SUBSIDY  
STANDARDS AND INCOME LIMITS**

**2021 PROJECT-BASED SUBSIDY STANDARDS – 110% OF FAIR MARKET RENT**

(Includes estimates for tenant-paid utilities)

0-Bedroom	\$693
1-Bedroom	\$748
2-Bedroom	\$981
3-Bedroom	\$1387
4-Bedroom	\$1402
5-Bedroom	\$1612

**2021 GROSS INCOME LIMITS BY FAMILY SIZE**

<b>Family Size</b>	<b>Low Income</b>	<b>Very Low Income</b>	<b>Extremely Low Income</b>
1	\$45,200	\$28,250	\$16,950
2	\$51,650	\$32,300	\$19,400
3	\$58,100	\$36,350	\$21,960
4	\$64,550	\$40,350	\$26,500
5	\$69,750	\$43,600	\$31,040
6	\$74,900	\$46,850	\$35,580
7	\$80,050	\$50,050	\$40,120
8	\$85,250	\$53,300	\$44,660

## ***EXHIBIT B: BCHA 2021 UTILITY ALLOWANCES***

\*\*Please note that the Brown County Housing Authority updates their utility allowances every July; therefore the utility allowance schedule below is applicable until June 30<sup>th</sup>, 2022 and new schedules will be published effective July 1<sup>st</sup>, 2022.

**Attached**



## IS THIS UNIT AFFORDABLE FOR MY FAMILY?

Section 8 Housing Choice Voucher Program – Brown County

**(Lower of) VOUCHER/BEDROOM SIZE = 1**

**Step 1:** Determine utility expenses. Complete step 1 if you are responsible for paying for any utilities (otherwise go to **step 2**).

- a) Determine the type of unit (see back page for definitions of unit type.)
- b) Determine which utility you pay for and its fuel source.
- c) If you pay for (or own) any of the utilities, add the corresponding number to the calculation column  
*Example: If the tenant pays for the heat fueled by Natural Gas in a "Two Family Duplex" you would add the corresponding number. If you do not pay for a given utility, enter "0" in the calculation column.*

	Single Family Detached	Two Family Duplex	Older Home Converted	Row/Town House	High Rise	Mobile Home	Calculation Column
<b>Heating</b>							
Natural Gas	21	20	18	17	15	26	
Bottle Gas	79	73	68	63	58	100	
Electric	56	52	48	45	41	74	
Oil	117	109	101	94	85	147	
Wood	73	68	63	58	53	92	
<b>Cooking</b>							
Natural Gas	4	4	4	4	4	4	
Bottle Gas	5	5	5	5	5	5	
Electric	9	9	9	9	9	9	
<b>Water Heating</b>							
Natural Gas	9	9	9	9	9	9	
Bottle Gas	16	16	16	16	16	16	
Electric	28	28	28	28	28	28	
Oil	11	11	11	11	11	11	
<b>Electricity</b>	27	27	27	27	27	27	
<b>Water / Sewer</b>	54	54	54	54	54	54	
<b>Trash Collection</b>	17	17	17	17	17	17	
<b>Central Air</b>	15	14	13	12	11	19	
<b>Fridge</b> (add if tenant owns)	6	6	6	6	6	6	
<b>Stove</b> (add if tenant owns)	4	4	4	4	4	4	
<b>Electric Meter Charge</b>	25	25	25	25	25	25	
<b>Gas Meter Charge</b>	18	18	18	18	18	18	

**Total Utility Expenses:** \_\_\_\_\_

**Step 2:**     \$ \_\_\_\_\_     +     \$ \_\_\_\_\_     =     \$ \_\_\_\_\_  
Rent
Utilities
**GROSS HOUSING EXPENSES**

**Step 3:** If the **Gross Housing Expenses** are less than or equal to the Voucher Payment Standard below, unit is affordable for you. If not, contact your specialist to determine if the unit is affordable based on your household's income.

**Voucher Payment Standard = \$725** (Inside Green Bay City Limits)  
**Voucher Payment Standard = \$740** (Outside Green Bay City Limits)

# IS THIS UNIT AFFORDABLE FOR MY FAMILY?

Section 8 Housing Choice Voucher Program – Brown County

**(Lower of) VOUCHER/BEDROOM SIZE = 2**

**Step 1:** Determine utility expenses. Complete step 1 if you are responsible for paying for any utilities (otherwise go to **step 2**).

- a) Determine the type of unit (see back page for definitions of unit type.)
- b) Determine which utility you pay for and its fuel source.
- c) If you pay for (or own) any of the utilities, add the corresponding number to the calculation column  
*Example: If the tenant pays for the heat fueled by Natural Gas in a "Two Family Duplex" you would add the corresponding number. If you do not pay for a given utility, enter "0" in the calculation column.*

	Single Family Detached	Two Family Duplex	Older Home Converted	Row/Town House	High Rise	Mobile Home	Calculation Column
<b>Heating</b>							
Natural Gas	27	25	23	22	20	34	
Bottle Gas	101	94	87	81	74	127	
Electric	72	67	62	58	53	91	
Oil	150	140	129	120	110	189	
Wood	94	87	81	75	69	118	
<b>Cooking</b>							
Natural Gas	5	5	5	5	5	5	
Bottle Gas	7	7	7	7	7	7	
Electric	12	12	12	12	12	12	
<b>Water Heating</b>							
Natural Gas	12	12	12	12	12	12	
Bottle Gas	21	21	21	21	21	21	
Electric	36	36	36	36	36	36	
Oil	14	14	14	14	14	14	
<b>Electricity</b>	34	34	34	34	34	34	
<b>Water / Sewer</b>	69	69	69	69	69	69	
<b>Trash Collection</b>	22	22	22	22	22	22	
<b>Central Air</b>	19	18	16	15	14	24	
<b>Fridge</b> (add if tenant owns)	6	6	6	6	6	6	
<b>Stove</b> (add if tenant owns)	4	4	4	4	4	4	
<b>Electric Meter Charge</b>	25	25	25	25	25	25	
<b>Gas Meter Charge</b>	18	18	18	18	18	18	

**Total Utility Expenses:** \_\_\_\_\_

**Step 2:**     \$ \_\_\_\_\_ + \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
Rent
Utilities
**GROSS HOUSING EXPENSES**

**Step 3:** If the **Gross Housing Expenses** are less than or equal to the Voucher Payment Standard below, unit is affordable for you. If not, contact your specialist to determine if the unit is affordable based on your household's income.

**Voucher Payment Standard = \$950** (Inside Green Bay City Limits)  
**Voucher Payment Standard = \$970** (Outside Green Bay City Limits)

## **IS THIS UNIT AFFORDABLE FOR MY FAMILY?**

Section 8 Housing Choice Voucher Program – Brown County

**(Lower of) VOUCHER/BEDROOM SIZE = 3**

**Step 1:** Determine utility expenses. Complete step 1 if you are responsible for paying for any utilities (otherwise go to **step 2**).

- Determine the type of unit (see back page for definitions of unit type.)
- Determine which utility you pay for and its fuel source.
- If you pay for (or own) any of the utilities, add the corresponding number to the calculation column

*Example: If the tenant pays for the heat fueled by Natural Gas in a "Two Family Duplex" you would add the corresponding number. If you do not pay for a given utility, enter "0" in the calculation column.*

	Single Family Detached	Two Family Duplex	Older Home Converted	Row/Town House	High Rise	Mobile Home	Calculation Column
<b>Heating</b>							
Natural Gas	33	31	28	26	24	42	
Bottle Gas	124	115	107	99	91	156	
Electric	88	82	76	70	64	111	
Oil	184	171	158	147	134	232	
Wood	115	107	99	92	84	145	
<b>Cooking</b>							
Natural Gas	6	6	6	6	6	6	
Bottle Gas	8	8	8	8	8	8	
Electric	14	14	14	14	14	14	
<b>Water Heating</b>							
Natural Gas	15	15	15	15	15	15	
Bottle Gas	26	26	26	26	26	26	
Electric	44	44	44	44	44	44	
Oil	17	17	17	17	17	17	
<b>Electricity</b>	42	42	42	42	42	42	
<b>Water / Sewer</b>	85	85	85	85	85	85	
<b>Trash Collection</b>	27	27	27	27	27	27	
<b>Central Air</b>	23	21	20	18	17	29	
<b>Fridge</b> (add if tenant owns)	6	6	6	6	6	6	
<b>Stove</b> (add if tenant owns)	4	4	4	4	4	4	
<b>Electric Meter Charge</b>	25	25	25	25	25	25	
<b>Gas Meter Charge</b>	18	18	18	18	18	18	

**Total Utility Expenses:** \_\_\_\_\_

**Step 2:**     \$ \_\_\_\_\_ + \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
                   Rent                                 Utilities   **GROSS HOUSING EXPENSES**

**Step 3:** If the **Gross Housing Expenses** are less than or equal to the Voucher Payment Standard below, unit is affordable for you. If not, contact your specialist to determine if the unit is affordable based on your household's income.

**Voucher Payment Standard = \$1340** (Inside Green Bay City Limits)  
**Voucher Payment Standard = \$1370** (Outside Green Bay City Limits)

## **IS THIS UNIT AFFORDABLE FOR MY FAMILY?**

Section 8 Housing Choice Voucher Program – Brown County

### (Lower of) VOUCHER/BEDROOM SIZE = 4

**Step 1:** Determine utility expenses. Complete step 1 if you are responsible for paying for any utilities (otherwise go to **step 2**).

a) Determine the type of unit (see back page for definitions of unit type.)

b) Determine which utility you pay for and its fuel source.

c) If you pay for (or own) any of the utilities, add the corresponding number to the calculation column

*Example: If the tenant pays for the heat fueled by Natural Gas in a “Two Family Duplex” you would add the corresponding number. If you do not pay for a given utility, enter “0” in the calculation column.*

	Single Family Detached	Two Family Duplex	Older Home Converted	Row/Town House	High Rise	Mobile Home	Calculation Column
<b>Heating</b>							
Natural Gas	42	39	36	34	31	53	
Bottle Gas	157	146	135	126	115	198	
Electric	112	104	96	90	82	141	
Oil	234	218	201	187	171	295	
Wood	146	136	126	117	107	184	
<b>Cooking</b>							
Natural Gas	7	7	7	7	7	7	
Bottle Gas	11	11	11	11	11	11	
Electric	18	18	18	18	18	18	
<b>Water Heating</b>							
Natural Gas	19	19	19	19	19	19	
Bottle Gas	33	33	33	33	33	33	
Electric	56	56	56	56	56	56	
Oil	21	21	21	21	21	21	
<b>Electricity</b>	53	53	53	53	53	53	
<b>Water / Sewer</b>	108	108	108	108	108	108	
<b>Trash Collection</b>	35	35	35	35	35	35	
<b>Central Air</b>	30	28	26	24	22	38	
<b>Fridge</b> (add if tenant owns)	6	6	6	6	6	6	
<b>Stove</b> (add if tenant owns)	4	4	4	4	4	4	
<b>Electric Meter Charge</b>	25	25	25	25	25	25	
<b>Gas Meter Charge</b>	18	18	18	18	18	18	

**Total Utility Expenses:** \_\_\_\_\_

**Step 2:**     \$ \_\_\_\_\_                                     +     \$ \_\_\_\_\_                                     =     \$ \_\_\_\_\_  
Rent Utilities **GROSS HOUSING EXPENSES**

**Step 3:** If the **Gross Housing Expenses** are less than or equal to the Voucher Payment Standard below, unit is affordable for you. If not, contact your specialist to determine if the unit is affordable based on your household's income.

**Voucher Payment Standard = \$1355** (Inside Green Bay City Limits)  
**Voucher Payment Standard = \$1370** (Outside Green Bay City Limits)

## **IS THIS UNIT AFFORDABLE FOR MY FAMILY?**

Section 8 Housing Choice Voucher Program – Brown County

### **(Lower of) VOUCHER/BEDROOM SIZE = 5**

**Step 1:** Determine utility expenses. Complete step 1 if you are responsible for paying for any utilities (otherwise go to **step 2**).

- a) Determine the type of unit (see back page for definitions of unit type.)
- b) Determine which utility you pay for and its fuel source.
- c) If you pay for (or own) any of the utilities, add the corresponding number to the calculation column

*Example: If the tenant pays for the heat fueled by Natural Gas in a "Two Family Duplex" you would add the corresponding number. If you do not pay for a given utility, enter "0" in the calculation column.*

	Single Family Detached	Two Family Duplex	Older Home Converted	Row/Town House	High Rise	Mobile Home	Calculation Column
<b>Heating</b>							
Natural Gas	48	45	41	38	35	60	
Bottle Gas	180	167	155	144	131	227	
Electric	128	119	110	102	93	161	
Oil	267	248	230	214	195	336	
Wood	167	155	144	134	122	210	
<b>Cooking</b>							
Natural Gas	8	8	8	8	8	8	
Bottle Gas	12	12	12	12	12	12	
Electric	21	21	21	21	21	21	
<b>Water Heating</b>							
Natural Gas	21	21	21	21	21	21	
Bottle Gas	38	38	38	38	38	38	
Electric	64	64	64	64	64	64	
Oil	24	24	24	24	24	24	
<b>Electricity</b>	<b>61</b>	<b>61</b>	<b>61</b>	<b>61</b>	<b>61</b>	<b>61</b>	
<b>Water / Sewer</b>	<b>123</b>	<b>123</b>	<b>123</b>	<b>123</b>	<b>123</b>	<b>123</b>	
<b>Trash Collection</b>	<b>40</b>	<b>40</b>	<b>40</b>	<b>40</b>	<b>40</b>	<b>40</b>	
<b>Central Air</b>	<b>34</b>	<b>32</b>	<b>29</b>	<b>27</b>	<b>25</b>	<b>43</b>	
<b>Fridge</b> (add if tenant owns)	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>	
<b>Stove</b> (add if tenant owns)	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	
<b>Electric Meter Charge</b>	<b>25</b>	<b>25</b>	<b>25</b>	<b>25</b>	<b>25</b>	<b>25</b>	
<b>Gas Meter Charge</b>	<b>18</b>	<b>18</b>	<b>18</b>	<b>18</b>	<b>18</b>	<b>18</b>	

**Total Utility Expenses:** \_\_\_\_\_

**Step 2:**      \$ \_\_\_\_\_      +      \$ \_\_\_\_\_      =      \$ \_\_\_\_\_  
                          Rent                                      Utilities                                      **GROSS HOUSING EXPENSES**

**Step 3:** If the **Gross Housing Expenses** are less than or equal to the Voucher Payment Standard below, unit is affordable for you. If not, contact your specialist to determine if the unit is affordable based on your household's income.

**Voucher Payment Standard = \$1550** (Inside Green Bay City Limits)  
**Voucher Payment Standard = \$1585** (Outside Green Bay City Limits)



## IS THIS UNIT AFFORDABLE FOR MY FAMILY?

Section 8 Housing Choice Voucher Program – Brown County

**(Lower of) VOUCHER/BEDROOM SIZE = 6**

**Step 1:** Determine utility expenses. Complete step 1 if you are responsible for paying for any utilities (otherwise go to **step 2**).

- a) Determine the type of unit (see back page for definitions of unit type.)
- b) Determine which utility you pay for and its fuel source.
- c) If you pay for (or own) any of the utilities, add the corresponding number to the calculation column

*Example: If the tenant pays for the heat fueled by Natural Gas in a "Two Family Duplex" you would add the corresponding number. If you do not pay for a given utility, enter "0" in the calculation column.*

	Single Family Detached	Two Family Duplex	Older Home Converted	Row/Town House	High Rise	Mobile Home	Calculation Column
<b>Heating</b>							
Natural Gas	54	50	46	43	39	68	
Bottle Gas	202	188	174	162	147	255	
Electric	144	134	124	115	105	181	
Oil	301	280	259	241	220	379	
Wood	188	175	162	150	137	237	
<b>Cooking</b>							
Natural Gas	9	9	9	9	9	9	
Bottle Gas	14	14	14	14	14	14	
Electric	23	23	23	23	23	23	
<b>Water Heating</b>							
Natural Gas	24	24	24	24	24	24	
Bottle Gas	42	42	42	42	42	42	
Electric	72	72	72	72	72	72	
Oil	27	27	27	27	27	27	
<b>Electricity</b>	69	69	69	69	69	69	
<b>Water / Sewer</b>	139	139	139	139	139	139	
<b>Trash Collection</b>	44	44	44	44	44	44	
<b>Central Air</b>	38	35	33	30	28	48	
<b>Fridge</b> (add if tenant owns)	6	6	6	6	6	6	
<b>Stove</b> (add if tenant owns)	4	4	4	4	4	4	
<b>Electric Meter Charge</b>	25	25	25	25	25	25	
<b>Gas Meter Charge</b>	18	18	18	18	18	18	

**Total Utility Expenses:** \_\_\_\_\_

**Step 2:**     \$ \_\_\_\_\_     +     \$ \_\_\_\_\_     =     \$ \_\_\_\_\_  
Rent
Utilities
**GROSS HOUSING EXPENSES**

**Step 3:** If the **Gross Housing Expenses** are less than or equal to the Voucher Payment Standard below, unit is affordable for you. If not, contact your specialist to determine if the unit is affordable based on your household's income.

**Voucher Payment Standard = \$1750** (Inside Green Bay City Limits)  
**Voucher Payment Standard = \$1800** (Outside Green Bay City Limits)

## **Determining Unit Type**

**Single Family Detached**: 1 building; 1 unit; 1 address.

**Two Family Duplex**: 1 building; 2 separate units each having their own address.

**Row/Town House**: 1 building; 3 or more separate units having their own address. Each unit has their own entrance at ground level. Units may have more than one level.

**Older Home Converted/Older Multi-Family**: 1 building; more than 1 unit on more than 1 level.

**High Rise**: 1 building; 1 main outside entrance; elevator required.

**EXHIBIT C: SCORE SHEET**  
**PROJECT-BASED VOUCHER PROGRAM**

*(This score sheet is for your information only, there is no need to submit it with your application packet.)*

<b>SELECTION</b>	<b>NUMBER OF CRITERIA POINTS</b>
1. <b>Accessibility for Disabled Individuals.</b> Accessibility for persons with disabilities meeting the minimum requirements of the Americans with Disabilities Act and local and State building codes. (Preference given to one-floor units and buildings with elevators).	0-10
2. <b>Services.</b> Projects that offer services and amenities for residents. Onsite services will score higher. These services may include, but are not limited to, employment preparation, placement and support; education and vocation training; life skills coaching; mental health counseling; AODA Counseling; and transportation. Services tailored to meet the individual needs of residents will receive higher scores. Owners may provide the supportive services themselves or by third parties. Provide documentation that services exist or will be established if this project is approved.	0-15
3. <b>Financial Capacity.</b> Evidence that this project is financially sound.	0-20
4. <b>Deconcentrate Poverty.</b> Extent to which the project furthers the goals of deconcentrating poverty and expanding housing and economic opportunity. Projects must be in census tracts with poverty concentrations of 20 percent or less; projects in census tracts with a higher poverty concentration must demonstrate how they will complement other local activities designed to deconcentrate poverty and expand housing and economic opportunities, such as those listed on page 11 of the RFP. (See Exhibit H for a Brown County map showing poverty ratio by census tracts).	0-25
5. <b>Owner/Management Experience.</b> Evidence of management experience. <ul style="list-style-type: none"> <li>• (For new construction or rehab): Experience and capacity to build or rehab housing; (For existing housing): Experience in and compliance with the PBV or Tenant-based voucher program. 0-5</li> <li>• Number of years the management team has managed rental housing. 0-5</li> <li>• Financial capacity as evidence by financial statements. 0-5</li> </ul>	0-15
6. <b>Income-Mixing.</b> In multi-family housing, projects with a lower concentration of PBV will score higher, except for units that exclusively serve elderly families, units that house households eligible for supportive services, or projects in census tracts with a poverty rate of 20 percent or less.	0-15

**Total Possible Points: 100**

# EXHIBIT D: RFP DESIGNATION OF CONFIDENTIAL & PROPRIETARY INFORMATION

(Use of this form is required when submitting proposal)

The attached material submitted in response to this project includes proprietary and confidential information which qualifies as a trade secret, as provided in s. 19.36(5) Wis. Stats., or is otherwise material that can be kept confidential under the Wisconsin Open Records Law. As such, we ask that certain pages, as indicated below, of this proposal response be treated as confidential material and not be released without our written approval.

**Prices always become public information when bids/proposals are opened, and therefore cannot be kept confidential. Blanket labeling of confidential/proprietary information in headers/footers of documents will not be considered as confidential/proprietary.**

Information cannot be kept confidential unless it is a trade secret. Trade secret is defined in s. 134.90(1)(c), Wis. Stats. as follows: "Trade secret" means information, including formula, pattern, compilation, program, device, method, technique or process to which all of the following apply:

1. The information derives independent economic value, actual or potential, from not being generally known to, and not being readily ascertainable by proper means by, other persons who can obtain economic value from its disclosure or use.
2. The information is the subject of efforts to maintain its secrecy that are reasonable under the circumstances.

**We request the following pages not be released:**

Section	Page #	Topic

IN THE EVENT THE DESIGNATION OF CONFIDENTIALITY OF THIS INFORMATION IS CHALLENGED, THE UNDERSIGNED HEREBY AGREES TO **PROVIDE LEGAL COUNSEL OR OTHER NECESSARY ASSISTANCE TO DEFEND THE DESIGNATION OF CONFIDENTIALITY AND AGREES TO HOLD BROWN COUNTY HARMLESS FOR ANY COSTS OR DAMAGES ARISING OUT OF THE COUNTY'S AGREEING TO WITHHOLD THE MATERIALS.**

Failure to include this form in the proposal response may mean that all information provided as part of the proposal response will be open to examination and copying. The County considers other markings of confidential/proprietary in the proposal document to be insufficient. The undersigned agrees to hold the County harmless for any damages arising out of the release of any materials unless they are specifically identified above.

**Company Name:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## ***EXHIBIT E: RFP ADDENDUM(S) ACKNOWLEDGEMENT***

*(If Addendums exist for this project, please sign and date and send with your bid)*

The undersigned acknowledges receipt of the following addenda by checking the box(es) below:

1       2       3       4       5       6

<b>Additional Addenda should be written here:</b>

I have examined and carefully prepared the RFB/RFP/RFQ from the plans and specifications and have checked the same in detail before submitting the RFB/RFP/RFQ to Brown County. Attached is my list of subcontractors along with their respective trades-if applicable.

<b>The Undersigned agrees to the above statement:</b>
<b>Company Name:</b>
<b>Printed Name:</b>
<b>Signature:</b>
<b>Date:</b>

If this RFB/RFP/RFQ is assigned a project number all vendors are responsible to check for addendums, published on our web site at [www.browncountywi.gov](http://www.browncountywi.gov), for this project prior to the due date. No notification will be sent when addendums are published unless there is an addendum within three business days of RFB/RFP/RFQ due date.

All vendors receiving initial notification of project and those who register as downloading the project off our web site will be notified by Brown County of all addendums issued within 3 business days prior to due date. If RFB/RFP/RFQ has already been submitted, vendor is required to acknowledge receipt of addendum via fax or e-mail prior to due date. New RFB/RFP/RFQ must be submitted by vendor if addendum affects costs.

Vendors that do not have Internet access are responsible for contacting our purchasing department at 920-448-4040 to ensure receipt of addendums issued.

RFBs/RFPs/RFQs that do not acknowledge addendums may be rejected.

All RFBs/RFPs/RFQs submitted will be sealed. Envelopes are to be clearly marked with required information. Sealed RFBs/RFPs/RFQs that are opened by mistake due to inadequate markings on the outside may be rejected and returned to the vendor.

## ***EXHIBIT F: RFP APPEALS***

*(This appeals attachment is for your information only, there is no need to sign or mail it back.)*

To: Vendors

RE: Brown County Housing Authority Appeals Process

An appeal refers to a written request from a vendor for reconsideration of vendor selection on a RFB, RFP or RFQ

Appeals may be submitted for the following purchases:

1. the item is a public work project bid under Section 55.52 (29) and 66.29 of the Wisconsin Statutes, or
2. the item price or proceeds is \$5000 or more or the total order is \$10,000 or more, and
3. vendor selection was based on factual errors, or
4. the lowest price or highest proceeds vendor was not selected for RFQ or RFB, or
5. failure by the County or its agents to adhere to the County's policies and procedures or other legal requirements

Appeals shall be submitted in writing and should specify the factual error or policy, procedure or other legal requirement which has been violated. Vendor appeals are to be submitted to the Housing Administrator within 3 business days from the receipt of the rejection letter. Appeals not containing the necessary information or not filed on a timely basis shall be rejected by the Housing Administrator.

If the Housing Administrator determines that an appeal is valid, an appeals hearing shall be convened. A decision on all appeals will be rendered within 5 working days of the date upon which the request for appeal was received. All decisions of the Appeals Committee shall be final.

	Brown County Housing Administrator
	305 E. Walnut St Rm 320
<b>Submit To:</b>	P.O. Box 23600
	Green Bay, WI 54305

## ***EXHIBIT G: Brown County Housing Authority Project Based Voucher Application***

(See Page 7 of Request for Proposals for Instructions)

<b>Project/Property Name</b>	
<b>Owner Name</b> (attach separate sheet to list all individuals)	
<b>Project Street Address &amp; City</b>	
<b>Main Contact</b> (Name, Email & Phone Number)	
<b>Description of General Location</b>	
<b>Existing, Rehab, or New Construction and Date</b>	
<b>Description of Building Type</b>	
<b>Total Number of Buildings and Units per Building</b>	
<b>Total Units by Bedroom Size, including square footage</b>	
<b>Proposed Project Based Units by Bedroom Size</b>	
<b>Specific Units or Floating? Indicate Apartment Numbers</b>	
<b>Initial PBV Contract Term Requested</b>	
<b>Proposed Contract Rent by Unit Type</b>	
<b>Utility Responsibilities</b>	Tenant Utilities:  Owner Utilities:

I certify that all information included in this application is accurate and complete to the best of my knowledge and believe. I further certify that this application and the property are in conformity with HUD program regulations and requirements, as outlined in this Request for Proposals.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date