**Schedule 7: RFP Submission Checklist You Must Insert Organization Name Here**

**This Checklist MUST appear at the FRONT of each copy of your completed RFP**

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| **RFP Page #** | **Please check Yes or No in regard to your organization:** | **Yes****✓** | **No ✓** |
|  | Indigenous Non-Profit |  |  |
|  | Indigenous For-Profit (only applicable to Capital Funding) |  |  |
|  | Board of Directors is comprised of a majority of Indigenous Directors |  |  |
|  | Incorporated (or in the process of) in Ontario |  |  |
|  | Located in non-reserve urban or rural areas of Ontario |  |  |
|  | Head Office located off-reserve |  |  |
|  | Corporate Office located off-reserve |  |  |
|  | Operations located off-reserve |  |  |
|  | Providing supportive housing for self-identifying Indigenous people who will reside off-reserve |  |  |
|  | Able to demonstrate the project will be provide supportive housing for a minimum of 20 years (only applicable to Capital Funding) |  |  |
|  | Intending to use ISHP funding to provide supportive housing for 100% First Nation, Métis and Inuit households |  |  |
|  | Intending to provide housing for Indigenous families and/or individuals, without priority given to members of any organization, First Nation, or tribal affliation unless otherwise provided for specifically under the program |  |  |
|  | Submitting an RFP that corresponds to the goals and objectives of ISHP, including eligible types of Operating Funding and/or Capital Funding |  |  |
|  | Has capacity to develop, deliver, and operate the project(s) |  |  |
|  | Hiring policies demonstrate the use of the talent, skills, and experience of the Indigenous community |  |  |
|  | Is your proposal inclusive of people who self identify as being First Nation, both status and non-status? |  |  |
|  | Is your proposal inclusive of people who self identify as being Métis? |  |  |
|  | Is your proposal inclusive of people who self identify as being Inuit? |  |  |
|  | Have you identified how you will be promoting the support services to those who identify as First Nation, status and non-status, Métis and Inuit? |  |  |
|  |  |  |  |

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| --- | --- | --- | --- |
| **RFP****Page #** | **HAS YOUR PROPOSAL:**  | **Yes****✓** | **No ✓** |
|  | Outlined the justification for the project and provide evidence-based materials? |  |  |
|  | Met the needs of Indigenous people living off-reserve in a specific community or area in Ontario, as demonstrated by evidence-based materials (e.g. needs assessments, environmental scans, reports, and waiting lists)? |  |  |
|  | Identified maximum rent? |  |  |
|  | Outlined the size of the project/number of households? |  |  |
|  | Demonstrated how the project(s) will adhere to applicable laws including the *Accessibility for Ontarians with Disabilities* Act (AODA) and *Ontario Human Rights* Code? |  |  |
|  | Been developed with the intent of affordability and cost effectiveness? |  |  |
|  | Demonstrated energy efficiency and considered using green materials, if capital components are included? |  |  |
|  | Provided an action-plan to hire Indigenous Apprentices and Employees in the construction or renovation phase of your development. |  |  |
|  | Indicated the readiness of your project(s)? Projects that are substantially "ready to go" will receive priority consideration for the 2019/20 allocation.  |  |  |
|  | Indicated how, if project(s) is comprised of partnerships with non-Indigenous organizations, the Indigenous organization is the project lead and holds the majority for decision-making purposes, either by agreement or by Board resolutions provided at the time of application. If applicable, a non-Indigenous organization would be required to transfer the asset (property) to the Indigenous organization partner. |  |  |

**REQUIRED ATTACHMENTS:**

|  |  |  |
| --- | --- | --- |
|  | **Page Reference****Number** |  |
|  |  | Completed RFP Template |
|  |  | Letters Patent |
|  |  | Corporation’s Constitution and By-Laws |
|  |  | Latest audited financial statements |
|  |  | Management Letters from Auditor(s) for last three years  |
|  |  | Contact information or a reference from a major funding partner  |
|  |  | Partnership Commitment letter(s), financial or in-kind, if applicable |
|  |  | Capital Budget (Schedule 4), (for Capital Funding only) |
|  |  | 20 Year Projected Cash Flow Statement (Schedule 5), (for Capital Funding only)  |
|  |  | Conditional agreement of Purchase of Sale, if applicable (for Capital Funding only) |
|  |  | Proof of Financial commitment from Financial Institution (for Capital only) |

This checklist is provided as a summarized tool to help Service Providers prepare their submission. Requirements are fully outlined in the Program Guidelines and the RFP document as applicable. If you have any difficulty with this checklist, please contact us as soon as possible.

**ATTENTION: Seven (7) hard copies of your RFP and all attachments must be submitted by mail/courier to Ontario Aboriginal Housing Services and one (1) copy of your RFP and all attachments must be emailed to** **ishp@oahssc.ca****.**

Name: Signature:

Authorized Signing Authority Authorized Signing Authority