**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 |  |  |
|  | 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 |  |  |
|  | All Operations located off-reserve |  |  |
|  | Providing Rent Supplements for self-identifying Indigenous people who will reside off-reserve (only applicable to Rent Supplement Funding) |  |  |
|  | Able to demonstrate the project will be provide affordable housing for a minimum of 20 years (only applicable to Rental Housing Funding) |  |  |
|  | Intending to use OPHI funding to provide Rent Supplements for 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 OPHI, including eligible types of Rent Supplement Funding and/or Rental Housing 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 |  |  |
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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 peoples 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 how you will be promoting the rent supplement services to those who identify as First Nation, status and non-status, Métis and Inuit? |  |  |
|  | **Included** promotional information that ensures Rent Supplements are intended for First Nation, Métis and Inuit people. E.g. applications, web site, posters, flyers, brochures etc.  |  |  |
|  | **PLEASE COMPLETE IF APPLYING FOR RENTAL HOUSING FUNDING**  |  |  |
|  | 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 Rental Housing components are included? |  |  |
|  | Provided an action-plan to hire Indigenous Apprentices and Employees in the construction or renovation phase of your development, if applicable?  |  |  |
|  | Indicated the readiness of your project(s)? Projects that are substantially "ready to go" will receive priority consideration for the 2020/21 allocation.  |  |  |
|  | Provided proof of the capacity to support the 25% of capital funding required to cover your contribution to OPHI Rental Housing Funding. |  |  |
|  | 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:**

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|  | **Page Reference****Number** |  |
|  |  | Completed RFP Template |
|  |  | **Signed** Letters Patent |
|  |  | **Signed** Corporation’s Constitution and By-Laws |
|  |  | **Signed** 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 |
|  |  | **Signed** Corporation’s Hiring Policies |
|  |  | List # of Employees who self-identify as First Nation, Métis and Inuit |
|  |  | Operating Budget (Schedule 5) |
|  |  | List of Board of Directors and their self-identification as First Nation, Métis and/or Inuit  |
|  |  | Capital Budget (Schedule 4), (for Rental Housing Funding only) |
|  |  | 20 Year Projected Cash Flow Statement (for Rental Housing Funding only) |
|  |  | Conditional agreement of Purchase of Sale, if applicable (for Rental Housing Funding only) |
|  |  | Proof of Financial commitment from Financial Institution (for Rental Housing only) |
|  |  | Board of Directors or Management Responses to Management Letters (if applicable)  |
|  |  | **Signed** Motion from Board of Directors (for Rental Housing Funding 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** **ophi@oahssc.ca****.**

Name: Signature:

Authorized Signing Authority Authorized Signing Authority

 Date: Date: