



CHIEF EXECUTIVE OFFICER
Ms. Jennifer Corcione

Community Action for Improvement, Inc.
1380 Lafayette Parkway
LaGrange, GA 30241
(706)-884-2651



PRESIDENT, BOARD OF DIRECTORS
Mr. Derrick Teagle

**REQUEST FOR QUALIFICATIONS
OF
HOME REPAIR AND ROOFING CONTRACTORS
FOR**

Community Action for Improvement, Inc. (CAFI)

**Serving these Counties:
Carroll, Coweta, Douglas, Harris
Heard, Meriwether, Muscogee, and Troup**

Due Date: September 18, 2026 by 9:00 am EST

INTRODUCTION

A.) PURPOSE OF THIS REQUEST FOR QUALIFICATIONS

Community Action for Improvement, Inc. hereinafter referred to as “CAFI” is soliciting qualifications of contractors to provide labor and materials for home repair projects, including roofing.

Contractors will be responsible for supplying labor, material, and equipment in completing all units as specified on work orders issued by CAFI. The contractors will have the responsibility of completing the units in a timely manner and in compliance with the standards set forth by CAFI.

CAFI intends to work with contractors to install new roofs or other minor repairs to up to 25-45 houses per year

B.) BACKGROUND AND SCOPE OF PROJECT(S)

CAFI is a non-profit Community Action Agency that operates and administers programs in Carroll, Coweta, Douglas, Harris, Heard, Meriwether, Muscogee, and Troup counties. The Minor Home Repair Program prioritizes services for the elderly, people with disabilities, and families with small children. The Agency’s professionally trained auditors determine the most cost-effective measures appropriate for each home.

We are seeking Contractors who are interested in providing services for multiple properties. CAFI intends to work with contractors to install new roofs or other minor repairs to up to 25-45 houses per year. Houses generally range in size from 850 sq ft to 2000 sq ft. Most of the homes are older in age, ranging from 10 – 40 years old. Some houses will be older, and many are in poor condition. Repairs may include roof work or replacement, floor repair, window repair or replacement, ceiling repair, minor plumbing work, etc. Contractors may respond to all the work orders we put forth, or only select those that best align. For example, a Contractor who only does roofing may only respond to those work order requests...and not reply to those asking for plumbing work or floor repair.

C.) MAJOR OBJECTIVES OF REQUEST FOR QUALIFICATIONS

The major objectives of the solicitation are to:

- 1) Identify and establish a pool of qualified contractors that will provide services for CAFI.
- 2) Establish competitive pricing for materials and services.
- 3) To ensure that all materials and/or services standards and requirements.
- 4) To ensure that all materials and/or services are provided in the timeframe established by CAFI.

D.) OVERSIGHT AND MANAGEMENT

Oversight of the Agreement will be exercised by Jennifer Corcione, CEO.

E.) Liaison

A liaison will serve as the contact point for the contractor. The liaison will coordinate the services and serve as the communication link between CAFI and the contractor.

F.) PROCUREMENT SCHEDULE KEY DATES

The following are the estimated key dates in the schedule for this procurement:

Notice of Request for Qualification	September 9, 2026
Qualifications due	September 18, 2026
Qualifications due and opened	September 18, 2026
Qualifications Evaluated and scored	September 21, 2026
Agreement(s) Signed	September 22, 2026

CAFI reserves the right to proceed under a modified version of this schedule.

CAFI QUALIFICATIONS REQUIREMENTS

A.) INQUIRIES

All inquiries concerning this Request for Qualifications will be submitted in writing and addressed to:

*Shequetta Caldwell, Weatherization Manager
Community Action for Improvement, Inc.
1380 Lafayette Parkway
LaGrange, GA 30241
Email: scaldwell@cafi-ga.org*

B.) DATE, TIME AND PLACE TO SUBMIT QUALIFICATIONS

One copy labeled "Home Repair" shall be provided and addressed to:

*Shequetta Caldwell, Weatherization Manager
Community Action for Improvement, Inc.
1380 Lafayette Parkway
LaGrange, GA 31041*

Qualifications shall be accepted until September 18, 2026 at 9:00 am EST.
Qualifications shall be accepted in person, by courier service, or the US Mail.

Qualifications received after the process is closed shall not be accepted. It is the sole responsibility of prospective offerors to take notice of the date and time that quotations are due, and to ensure their submittals are received prior to the due date and time.

C.) QUALIFICATIONS SUBMISSION

The CAFI Information/Application Form must be submitted with the Qualifications. Misleading and/or inaccurate information shall be grounds for disqualification at any stage in the process.

The qualifications package consisting of the all required information, shall be SEALED, clearly labeled with the following information and delivered to:

Contact Name: Shequetta Caldwell, Weatherization Manager

Address: 1380 Lafayette Parkway, LaGrange, GA 30241

Request for Quotations: Home Repair

Location: 1380 Lafayette Parkway, LaGrange, GA 30241

Submission of a signed proposal(s) is acknowledgment and acceptance of all terms and conditions of this solicitation. CAFI reserves the right to reject all proposals.

D.) QUALIFICATIONS AND PROPOSALS OPENING

Qualifications and proposals shall be opened publicly at CAFI, 1380 Lafayette Parkway, LaGrange, GA 30241.

E.) MINIMUM OFFEROR QUALIFICATIONS

The Offeror shall have a DUNS number and have an active registration clear of exclusions with the federal System for Award Management (SAM). (www.sam.gov)

F.) INTEGRITY OF PROPOSALS AND RFQ

By signing a proposal, an Offeror affirms that he/she has not given any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a CAFI member in connection with the submitted proposals. Failure to sign the proposals, or signing it with a false statement, shall void the submitted proposals or any resulting agreements, and the Offeror shall be removed from all contractor lists.

G.) LICENSES

Offerors shall maintain in status all Federal, state, and local licenses and permits required for the operation of business conducted by the Offeror.

H.) PREFERENCES

Preference will be given to each of the following:

- Minority firms;
- Women business enterprises;
- Labor surplus area firms; and
- Small Business

I.) DOCUMENTATION OF INSURANCE

Prior to the implementation date of the agreement, the Offeror shall provide CAFI with **documentation** evidencing insurance for a minimum:

1. The Contractor shall maintain Worker's Compensation Insurance for all its employees and those of its subcontractors engaged in work at the site in accordance with the State of Georgia Worker's Compensation Laws.
2. The Contractor shall maintain professional liability insurance (errors and omissions insurance) applicable to the work being performed. If there is no professional liability insurance product applicable to the work being performed, the Contractor shall maintain a commercial general liability policy covering his/her work. The Contractor shall file with the Agency a certificate of insurance from an insurance company licensed to do business in the State of Georgia showing evidence of such professional or commercial general liability insurance in limits of not less than \$3,000,000 in the aggregate, and \$1,000,000 per occurrence. Any deductibles and self-insurance retention may not be greater than \$25,000.
3. The Contractor shall carry Automobile Liability Insurance covering all owned, hired and non-owned vehicles with a minimum combined single limit of \$500,000 each accident for bodily injury and property damage.

The Offeror shall name CAFI as an additional insured party to address application and equipment damage that occurs during agreement or service operations.

J.) COSTS FOR PREPARATION OF PROPOSALS

No payments shall be made to cover costs incurred by any Offeror in the preparation or submission of the quotations, nor any other associated costs.

K.) RFP MODIFICATIONS

CAFI shall prepare written Modifications(s) if needed.

L.) CERTIFICATION OF INDEPENDENT PRICE DETERMINATION

By submission of a response, Offeror certifies that in connection with this procurement:

Prices in future proposals or work orders have been determined independently, without consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any competitor.

Each person signing future quotations or work orders certifies either that:

He or she is the person in the Offeror's organization responsible for the decision as to any prices being offered, and that he or she has not participated in, and shall not participate in, any action contrary to the requirements of this document.

He or she is not the person in the Offeror's organization responsible for the decision as to any prices being offered, but that he or she has been authorized to act as agent for the people responsible for such decision. Furthermore, those persons have not participated in, and shall not participate in, any action contrary to the requirements of this document.

M.) QUALIFICATIONS AND PROPOSALS EVALUATION AND AWARD(S)

All qualifications and proposals submitted shall be evaluated in accordance with CAFI criteria of qualifications, experience, capacity, and pricing.

N.) MISCELLANEOUS

CAFI reserves the right to accept or reject any part of any proposals, and to accept or reject any or all proposals without penalty. CAFI reserves the right to waive minor deficiencies and informalities if, in the judgment of CAFI, the best interests of CAFI shall be served.

EVALUATION

a. EVALUATION PROCESS

CAFI will evaluate this RFQ based on the criteria as listed in Attachment A. CAFI will determine the best contractors, based on qualifications and references. Qualifications must meet all the mandatory criteria in order for the proposals to be evaluated. Proposals that are incomplete or contain significant inconsistencies or inaccuracies may be rejected by CAFI without further discussion.



Community Action for Improvement, Inc.
1380 Lafayette Parkway
LaGrange, GA 30241
(706) 884-2651 x223

Contractors Information/Application Form

HOME REPAIR

Please Note: Copies of your Contractor's License and local tax licenses must accompany this application. If qualified, also include a copy of your certificate from a minority/women business program. Please also ask your insurance agent to submit a copy of your Certificate of Insurance and Bonding.

PLEASE PRINT OR TYPE

DATE: _____

Business Name: _____

Owner/Representative (Title): _____

Business Address: _____

<i>Number</i>	<i>Street</i>	<i>City/State</i>	<i>Zip Code</i>
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Mailing Address: _____

<i>Number</i>	<i>Street</i>	<i>City/State</i>	<i>Zip Code</i>
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Phone Numbers: _____

<i>Office</i>	<i>Fax</i>	<i>Mobile</i>
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E-mail Address: _____

Date and State Company Formed _____

Type of Ownership _____

Federal I.D./Social Security Number _____

List the types of licenses with expiration date held by the company (**attach a copy of each**): _____

How long have you been in the contracting business? _____
Years Months

Are you registered with a minority/women's business enterprise program or LSA?
Yes _____ No _____ *If your answer is "YES," please submit a copy of certification.*

Please check the type of work you have performed in the last year:

- ☐ Roofing (new roofs and/or roof repairs)
☐ General construction ☐ Sheetrock ☐ Water Heater Repair/Replacement
☐ Electrical Repairs ☐ Plumbing Repairs

Specify: _____

List the types and coverage amounts of insurance carried by the Contractor:

Worker's Compensation: Per Occurrence _____ Aggregate _____

General Liability: Per Occurrence _____ Aggregate _____

Automobile: Per Occurrence _____ Aggregate _____

Other: _____

List two major suppliers from whom you purchase most of your supplies.

Name	Address	City/State/Zip	Phone Number
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_____	_____	_____	_____
_____	_____	_____	_____

List two financial institutions (banks, savings and loan association, etc.) with whom you have established credit.

Name	Address	City	Phone Number
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_____	_____	_____	_____
_____	_____	_____	_____

Approximately how many jobs have you completed as contractor? _____

What is the smallest/value job you have done? _____

What is the largest/value job you have done? _____

How many employees do you employ full-time? _____

Counties in which work has been performed within the last 3 years:

_____ Carroll

_____ Heard

_____ Coweta

_____ Meriwether

_____ Douglas

_____ Muscogee

_____ Harris

_____ Troup

If selected, are you willing to perform work in all counties listed above? Yes _____

No _____ If no, why not and list ones you are willing to work in? _____

Describe any previous work experience with CAFI _____

Knowing payment will be made within up to 30 days after work approval at final inspection of all work at the house, are you still interested? Yes _____ No _____

Describe your current capacity in staff and equipment to begin performing jobs? _____

Do you perform the work or is it subcontracted? _____

Have any claims or lawsuit been brought against your company as a result of services you provided in the past three years? Yes _____ No _____

Would you be willing to provide concessions when possible, such as low pricing or competitive pricing for non-profit work, or providing other things for elderly clients, such as free smoke detectors, light bulbs, etc. Yes _____ No _____

(This factor alone will not decide if Contractor is awarded work.)

Tell us anything else about your skills and experience that you would like us to know.

Do you perform criminal background checks and drug screens on all of your workers and what is your policy for hiring applicants with criminal backgrounds or drug usage?

THE UNDERSIGNED CONTRACTOR CERTIFIES THAT ALL INFORMATION GIVEN HEREIN IS SUBSTANTIALLY CORRECT AND FURTHER AGREES:

- Contractor License Class is current, and the undersigned contractor agrees to maintain in current status all licenses as required by the CAFI.
- That the work be performed in accordance with the State of Georgia Procedures and property and building code standards.
- That if the work performed by the contractor is found to be unsatisfactory by the administering agency or if contract relations between the contractor, homeowner or other parties are found to be unsatisfactory, that the administering agency may remove the contractor's name from the approved list, with such accompanying publicity as it deems necessary.
- The contractor will abide by the federal regulations pertaining to equal employment opportunity.

Contractor:

BY: _____ Date _____
Signature of Authorized Representative

Print Name _____ Title _____

CUSTOMER REFERENCE CHECK AUTHORIZATION

Please give us the names, addresses and phone numbers of 2 customers for whom your company has performed work:

The provision of these names and your signature below signifies that you authorize Community Action for Improvement, Inc. to contact the listed persons. Community Action for Improvement, Inc. will contact each customer you list and ask them questions about how satisfied they are with the work and your firm's customer relations.

This authorization is valid until the conclusion of the contractor selection process. Include the customer name, customer city, phone number, and type of work performed.

Company: _____

Owner Signature: _____ Date: _____

1) _____

2) _____

Contractor Information Regarding Debarment and Suspension

CONTRACTOR'S NAME: _____

Certification Regarding Debarment, Suspension, and Other Responsibility Matters Primary Covered Transactions

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 29 CFR Part 98, Section 98.510, Participants' responsibilities. The regulations were published as Part VII of the May 26, 1988 Federal Register (pages 19160-19211).

(Before Signing Certification, Read Attached Instruction)

1. The prospective contractor certifies to the best of its knowledge and belief, that it and its principals:
 - a. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - b. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - c. Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offense enumerated in paragraph (1)(b) of this certification; and
 - d. Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.
2. Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

NAME AND TITLE OF AUTHORIZED REPRESENTATIVE

Name

Title

Signature

Date

Contractor Information Regarding Byrd Anti-Lobbying Amendment

CONTRACTOR'S NAME: _____

Byrd Anti-Lobbying Amendment

The prospective contractor certifies to the best of its knowledge and belief, that it and its principals will not and have not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352.

NAME AND TITLE OF AUTHORIZED REPRESENTATIVE

Name

Title

Signature

Date

ATTACHMENT A

RFQ Evaluation and Scoring Criteria SAMPLE

Responses to this RFQ will be evaluated and scored based on the following criteria:

Criteria	Maximum Points	Points Awarded
Response package is completely filled out, licenses provided, all references are provided, etc.	20	
Previous work experience and references provided	10	
Contractor has worked with a Community Action Agency in the past and can certify so.	5	
Licensing: All business and trade licenses and certifications current and copies provided with this RFQ (Example Lead Safe Work Practices Certified or other)	20	
Contractor is willing to provide concessions when possible, such as low pricing or competitive pricing for non-profit work, or providing other things to elderly clients, such as free smoke detectors, light bulbs, etc.	20	
Will provide service within ALL counties within service area (8 counties)	5	
Small business, minority, female or veteran owned business	20	
Total Points	100	

Comments:

Evaluated By: _____

Title: _____

Date: _____