



KEITH KNOX
TREASURER AND TAX COLLECTOR

COUNTY OF LOS ANGELES TREASURER AND TAX COLLECTOR

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January 10, 2022

SENT VIA EMAIL

Dear Interested Party:

REQUEST FOR STATEMENT OF QUALIFICATIONS FOR REAL PROPERTY INSURANCE SERVICES ADDENDUM FOUR

Addendum Four to the Real Property Insurance Services Request for Statement of Qualifications (RFSQ) contains updated information related to the RFSQ. Please note the following:

1. In the RFSQ, the following Subsections shall be replaced in their entirety in Attachment 1:

Replaced

- a. Subsection 1.4, Vendor's Minimum Qualifications
- b. Subsection 1.10, Mandatory Requirement to Register on County's WebVen
- c. Subsection 1.34, Notification to County of Pending Acquisitions/Mergers by Proposing Company
- d. Subsection 2.7.3, Vendor's Qualifications (Section A), A. Vendor's Background and Experience (Section A.1) and B. Vendor's References (Section A.2)
- e. Subsection 3.1.1, Adherence to Minimum Qualifications

2. In Appendix H, Sample Master Agreement, the following Subparagraph shall be replaced in its entirety in Attachment 2:

Replaced

- a. Subparagraph 8.2, Assignment and Delegation/Mergers or Acquisitions

3. In the RFSQ, Appendix A, Required Forms, the following Exhibits shall be either replaced or added in their entirety in Attachment 3:

Replaced

- a. Exhibit 1, Vendor's Organization Questionnaire/Affidavit
- b. Exhibit 6, Prospective Vendor References
- c. Exhibit 7, Prospective Vendor List of Contracts
- d. Exhibit 8, Prospective Vendor List of Terminated Contracts

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Added

a. Exhibit 1A, Community Business Enterprise (CBE) Information

Should you have any questions, you may contact Ashley Cupino of my staff at (213) 974-7360 or contracts@ttc.lacounty.gov.

Very truly yours,

KEITH KNOX
Treasurer and Tax Collector

Elena Villacrés Torres

Elena Villacrés Torres
Administrative Services Manager III

EVT:MV:AC:lac

Attachments

1.0 GENERAL INFORMATION

1.4 Vendor's Minimum Qualifications

Interested Vendors that meet the Minimum Qualifications stated below are invited to submit an SOQ. Vendor shall attest it meets each Minimum Qualification on Appendix A, Required Forms, Exhibit 1A, Vendor's Organization Questionnaire/Affidavit and CBE Information, page 2.

1.4.1 Vendor must demonstrate (e.g., copies of licenses, tax returns, etc.) that it has been in business for at least three years, providing the required services equivalent or similar to the services identified in Appendix I: Statement of Work (SOW).

In the event the Vendor itself does not have the requisite three years, but one or more of the principals involved in managing the daily operation of the firm individually do, then their individual or collective experience performing services equivalent or similar to the required services identified in Appendix I, SOW, may be considered in meeting this requirement at the County's sole discretion. Vendor must provide a written detailed description and/or resume demonstrating its principal's three years of experience to fulfill this requirement.

1.4.2 Vendor must have an administrative business office located within the County or within a county contiguous to the County with a responsible person(s) to provide services and maintain all required records specified in this RFSQ. The Vendor must provide the address of its business office in its SOQ.

1.4.3 Vendor must demonstrate its California insurance broker or agent's license is in good standing. See Subsection 2.7.6, Proof of Licenses and/or Permits (Section D).

1.4.4 Vendor must demonstrate it has a valid, current State and Local business licenses necessary to conduct business and perform the required services in accordance with all State and local laws and regulations. See Subsection 2.7.6, Proof of Licenses and/or Permits (Section D).

1.4.5. Vendor must demonstrate evidence of compliance with all insurance requirements set forth in the Sample Master Agreement, Appendix H, Subparagraphs 8.23 and 8.24.

1.4.6 Vendor must demonstrate financial stability sufficient to maintain an insurance firm that provides property/casualty insurance products to

provide liability, casualty, fire, and related insurance coverages for real properties and/or contents of real properties (e.g., by providing evidence it has been in operation for three or more years; or has branched off from another business which operated for more than three years; or is taking over for a former business which has operated for more than three years; or has a strong cash flow on its financial statements; or has substantial cash reserves in its bank account).

- 1.4.7 **All potential Vendors must be registered in the County's WebVen by or before the submission of their respective SOQ.** Vendors shall provide proof of WebVen registration in its Proposal, by listing its County WebVen Number on Appendix A, Required Forms, Exhibit 1A, Vendor's Organization Questionnaire/Affidavit ~~and CBE Information~~.

1.10 **Mandatory Requirement to Register on County's WebVen**

All potential Vendors must be registered in the County's WebVen by or before the submission of their respective SOQs. Vendors shall provide proof of WebVen registration in the SOQ, by listing the County WebVen Number on Appendix A, Required Forms, Exhibit 1A, Vendor's Organization Questionnaire/Affidavit ~~and CBE Information~~.

The County's WebVen contains the Vendor's business profile and identifies the goods/services the business provides. Registration can be accomplished online via the internet by accessing the County's home page at <http://camisvr.co.la.ca.us/webven/>.

1.34 **Notification to County of Pending Acquisitions/Mergers by Proposing Company**

The Vendor shall notify the County of any pending acquisitions/mergers of its company unless otherwise legally prohibited from doing so. If the Vendor is restricted from legally notifying the County of pending acquisitions/mergers, then it should notify the County of the actual acquisitions/mergers as soon as the law allows and provide to the County the legal framework that restricted it from notifying the County prior to the actual acquisitions/mergers. This information shall be provided by the Vendor on Required Form, Exhibit 1A, Vendor's Organization Questionnaire/Affidavit ~~and CBE Information~~, located in Appendix A. Failure of the Vendor to provide this information may eliminate its SOQ from any further consideration. Vendor shall have a continuing obligation to notify the County of changes to the information contained in Exhibit 1A, ~~Proposer's Vendor's Organization Questionnaire/Affidavit/ and CBE Information~~, during the pendency of this RFSQ by providing a revised Exhibit 1A, ~~Proposer's Vendor's~~ Organization

Questionnaire/Affidavit/~~and CBE Information~~, to the County upon the occurrence of any event giving rise to a change in its previously-reported information.

2.0 INSTRUCTIONS TO VENDORS

2.7 Preparation and Format of the Statement of Qualifications

2.7.3 Vendor's Qualifications (Section A)

To demonstrate that the Vendor's organization has the experience to perform the required services the following sections must be included:

A. Vendor's Background and Experience (Section A.1)

The Vendor shall complete, sign, and date the ~~Contractor's~~ Vendor's Organization Questionnaire/Affidavit ~~and CBE Information~~, Exhibit 1A as set forth in Appendix A. **The person signing the form must be authorized to sign on behalf of the Vendor and to bind the Vendor in a Master Agreement.** Provide a summary of relevant background information to demonstrate that the Vendor meets the Minimum Qualifications stated in Subsection 1.4 of this RFSQ and has the capability to perform the required services as a corporation or other entity. In addition to the summary, the Vendor shall complete and submit Exhibit 1B, Project Staff Background, with the Vendor's SOQ and provide the following documentation:

1. The Vendor must provide evidence of having at least one business location within the borders of the County or within a county contiguous to the County for the Vendor to provide liability, casualty, fire, and related insurance coverages for real properties and/or contents of real properties managed by the PA.
2. The Vendor must provide evidence of valid, current State and Local licenses and permits to sell property insurance in the State of California (See Subsection 2.7.6, Proof of Licenses and/or Permits).

Based on the structure of the Vendor's organization, the Vendor shall submit the required documents below. If the Vendor's organization does not fit into one of these categories, upon receipt of the SOQ or at some later time, the County may, in its discretion, request additional documentation regarding the Vendor's business organization and authority of individuals to sign Contracts.

If the below referenced documents are not available at the time of SOQ submission, Vendors must request the appropriate documents from the California Secretary of State and provide a statement on the status of the request.

Required Support Documents:

Corporation or Limited Liability Company (LLC):

The Vendor must submit the following documentation with the SOQ:

- 1) A copy of a “Certificate of Good Standing” with the state of incorporation/organization.
- 2) A conformed copy of the most recent “Statement of Information” as filed with the California Secretary of State listing corporate officers or members and managers.

For Vendors incorporated in another state, please refer to the California Secretary of State website at <http://www.sos.ca.gov/business-programs/business-entities/faqs/>, and under Frequently Asked Questions, click on Form/register, license or terminate a business entity link. Refer to the following questions to determine if you must register with the CA Secretary of State:

- Do I have to qualify or register a foreign (out-of-state or out-of-country) business entity?
- How do I qualify or register a foreign (out-of-state or out-of-country) business entity in California?

The TTC is not able to advise Vendors incorporated in another State as to whether or not the business must qualify/register to do business in California. Vendors should consult with its respective legal counsels on this matter as necessary.

If you determine you are not required to qualify/register with the California Secretary of State, you must provide a conformed copy of the most recent “Statement of Information” or its equivalent from your state.

Limited Partnership:

The Vendor must submit a conformed copy of the Certificate of Limited Partnership or Application for Registration of Foreign Limited

Partnership as filed with the California Secretary of State, and any amendments.

For Vendors incorporated in another state, please refer to the information in Subsection 2.7.3A above related to the requirement to qualify or register with the California Secretary of State.

B. Vendor's References (Section A.2)

It is the Vendor's sole responsibility to ensure that the accuracy of each firm's reference's name, and point of contact's name, title, and contact information phone number for each reference is accurate. The same references may be listed on both forms, Exhibits 6 and 7 in Appendix A, Required Forms.

The County may disqualify a Vendor if:

- References fail to substantiate the Vendor's description of the services provided; or
- References fail to support that the Vendor has a continuing pattern of providing capable, productive and skilled personnel; or
- The TTC is unable to reach the point of contact Vendor's reference with reasonable effort (i.e., three attempts). It is the Vendor's responsibility to inform the point of contact reference of that the TTC's may contact Vendor's references during normal working hours (defined as between 8 a.m. and 5 p.m., PT).

The Vendor must complete and include Required Forms, Exhibits 6, 7, and 8 as set forth in Appendix A.

- Prospective Contractor Vendor References, Exhibit 6: The Vendor must provide three references for current clients for whom the Vendor provides the same or similar scope of services to those services set forth in this RFSQ. **References for existing or terminated Contracts and/or Subcontracts with the TTC will not be accepted to meet this requirement.**
- Prospective Contractor Vendor List of Contracts, Exhibit 7: The listing must include all Public Entities (e.g., city, county, or any other government) Contracts for the last three years. A

photocopy of this form should be included if necessary. Use additional sheets if necessary. **If Vendor did not have any contracts with Public Entity during the last three years, Vendor shall include a statement to that effect.**

- Prospective ~~Contractor~~ Vendor List of Terminated Contracts, Exhibit 8: Listing must include any Contracts terminated within the past three years with a reason for termination. **If Vendor did not have any contracts terminated within the past three years, Vendor shall include a statement to that effect.**

3.0 STATEMENT OF QUALIFICATIONS REVIEW/SELECTION/QUALIFICATION PROCESS

3.1 Review Process

3.1.1 Adherence to Minimum Qualifications

The TTC staff shall review the Vendor's Organization Questionnaire/Affidavit ~~and CBE Information~~, Exhibit 1A of Appendix A, Required Forms, and determine if the Vendor meets the Minimum Qualifications as outlined in Section 1.4 of this RFSQ.

Failure of the Vendor to comply with the Minimum Qualifications may eliminate its SOQ from any further consideration. The County may elect to waive any informality in an SOQ if the sum and substance of the SOQ is present.

If the TTC eliminated a Vendor's SOQ from consideration because the Vendor did not initially comply with the Minimum Qualifications, the Vendor may submit a new SOQ for consideration as long as the solicitation is still open.

- All SOQs shall be firm offers and may not be withdrawn for a period of 270 calendar days following the last day to submit SOQs.

8.0 STANDARD TERMS AND CONDITIONS

8.2 ASSIGNMENT AND DELEGATION/MERGERS OR ACQUISITIONS

- 8.2.1 The Contractor shall notify the County of any pending acquisitions/mergers of its company unless otherwise legally prohibited from doing so. If the Contractor is restricted from legally notifying the County of pending acquisitions/mergers, then it should notify the County of the actual acquisitions/mergers as soon as the law allows and provide to the County the legal framework that restricted it from notifying the County prior to the actual acquisitions/mergers.
- 8.2.2 The Contractor shall not assign, exchange, transfer, or delegate its rights or ~~delegate its~~ duties under this Master Agreement, ~~or both,~~ whether in whole or in part, without the prior written consent of County, in its discretion, and any attempted assignment or delegation, ~~or otherwise transfer of its rights or duties,~~ without such consent shall be null and void. For purposes of this Subparagraph, County consent shall require a written amendment to the Master Agreement, which is formally approved and executed by the parties. Any payments by the County to any approved delegatee or assignee on any claim under this Master Agreement shall be deductible, at County's sole discretion, against the claims, which the Contractor may have against the County.
- 8.2.3 Shareholders, partners, members, or other equity holders of Contractor may transfer, sell, exchange, assign, or divest themselves of any interest they may have therein. In the event any such sale, transfer, exchange, assignment, or divestment is effected in such a way as to give majority control of Contractor to any person(s), corporation, partnership, or legal entity other than the majority controlling interest therein at the time of execution of the Master Agreement, such disposition is an assignment requiring the prior written consent of County and a written amendment to the Master Agreement in accordance with applicable provisions of this Master Agreement. However, an equity ownership adjustment or other administrative change of Contractor, which does not result in a change of actual management or ownership of Contractor, shall require the written consent of the Treasurer and Tax Collector, or his designee, not a written amendment to the Master Agreement. Any such written consent shall become part of this Master Agreement.

- 8.2.4 Any assumption, assignment, delegation, or takeover of any of the Contractor's duties, responsibilities, obligations, or performance of same by any person or entity other than the Contractor, whether through assignment, delegation, merger, buyout, or any other mechanism, with or without consideration for any reason whatsoever without County's express prior written approval, shall be a material breach of the Master Agreement which may result in the termination of this Master Agreement. In the event of such termination, County shall be entitled to pursue the same remedies against Contractor as it could pursue in the event of default by Contractor.

APPENDIX A – REQUIRED FORMS

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- 3 VENDOR'S EEO CERTIFICATION
- 4 REQUEST FOR PREFERENCE PROGRAM CONSIDERATION
- 5 FAMILIARITY WITH THE COUNTY LOBBYIST ORDINANCE CERTIFICATION
- 6 PROSPECTIVE CONTRACTOR REFERENCES
- 7 PROSPECTIVE CONTRACTOR LIST OF CONTRACTS
- 8 PROSPECTIVE CONTRACTOR LIST OF TERMINATED CONTRACTS
- 9 ATTESTATION OF WILLINGNESS TO CONSIDER GAIN/GROW PARTICIPANTS
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APPENDIX A – REQUIRED FORMS

VENDOR’S ORGANIZATION QUESTIONNAIRE/AFFIDAVIT

Please complete, sign and date this form. The person signing the form must be authorized to sign on behalf of the Vendor and to bind the applicant in a Contract.

1. Is your firm a corporation or limited liability company (LLC)? **Yes** **No**

If yes, complete:

Legal Name (found in Articles of Incorporation) _____

State _____ Year Inc. _____

2. If your firm is a limited partnership or a sole proprietorship, state the name of the proprietor or managing partner:

3. Is your firm doing business under one or more DBA’s? **Yes** **No**

If yes, complete:

Name	County of Registration	Year became DBA
_____	_____	_____
_____	_____	_____

4. Is your firm wholly/majority owned by, or a subsidiary of another firm? **Yes** **No**

If yes, complete:

Name of parent firm: _____

State of incorporation or registration of parent firm: _____

5. Has your firm done business as other names within last five years? **Yes** **No**

If yes, complete:

Name _____ Year of Name Change _____

Name _____ Year of Name Change _____

6. Is your firm involved in any pending acquisition or mergers, including the associated company name?

Yes **No** If yes, provide information:

Vendor acknowledges and certifies that it meets and will comply with all of the Minimum Qualifications listed in Subparagraph 1.4 – Minimum Qualifications, of this Request for Statement of Qualifications (RFSQ), as listed below.

APPENDIX A – REQUIRED FORMS

VENDOR’S ORGANIZATION QUESTIONNAIRE/AFFIDAVIT

Check the appropriate boxes:

<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>1.4.1 Vendor must demonstrate (e.g., copies of licenses, tax returns, etc.) that it has been in business for at least three years, providing the required services equivalent or similar to the services identified in Appendix I: Statement of Work (SOW).</p> <p>In the event the Vendor itself does not have the requisite three years, but one or more of the principals involved in managing the daily operation of the firm individually do, then their individual or collective experience performing services equivalent or similar to the required services identified in Appendix I, SOW, may be considered in meeting this requirement at the County’s sole discretion. Vendor must provide a written detailed description and/or resume demonstrating its principal’s three years of experience to fulfill this requirement.</p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>1.4.2 Vendor must have an administrative business office located within the County or within a county contiguous to the County with a responsible person(s) to provide services and maintain all required records specified in this RFSQ. The Vendor must provide the address of its business office in its SOQ.</p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>1.4.3 Vendor must demonstrate its California insurance broker or agent’s license is in good standing. See Subsection 2.7.6, Proof of Licenses and/or Permits (Section D).</p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>1.4.4 Vendor must demonstrate it has a valid, current State and Local business licenses necessary to conduct business and perform the required services in accordance with all State and local laws and regulations. See Subsection 2.7.6, Proof of Licenses and/or Permits (Section D).</p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>1.4.5 Vendor must demonstrate evidence of compliance with all insurance requirements set forth in the Sample Master Agreement, Appendix H, Subparagraphs 8.23 and 8.24.</p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>1.4.6 Vendor must demonstrate financial stability sufficient to maintain an insurance firm that provides property/casualty insurance products to provide liability, casualty, fire, and related insurance coverages for real properties and/or contents of real properties (e.g., by providing evidence it has been in operation for three or more years; or has branched off from another business which operated for more than three years; or is taking over for a former business which has operated for more than three years; or has a strong cash flow on its financial statements; or has substantial cash reserves in its bank account).</p>
<input type="checkbox"/> Yes <input type="checkbox"/> No	<p>1.4.7 All potential Vendors must be registered in the County’s WebVen by or before the submission of their respective SOQ. Vendors shall provide proof of WebVen registration in its Proposal, by listing its County WebVen Number on Appendix A, Required Forms, Exhibit 1, Vendor’s Organization Questionnaire/Affidavit.</p>

Vendor further acknowledges that if any false, misleading, incomplete, or deceptively unresponsive statements in connection with this SOQ are made, the SOQ may be rejected. The evaluation and determination in this area shall be at the Director’s sole judgment and his/her judgment shall be final.

APPENDIX A – REQUIRED FORMS

VENDOR’S ORGANIZATION QUESTIONNAIRE/AFFIDAVIT

DECLARATION: I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE.

VENDOR NAME:		COUNTY WEBVEN NUMBER:
ADDRESS:		
PHONE NUMBER:	EMAIL:	
INTERNAL REVENUE SERVICE EMPLOYER IDENTIFICATION NUMBER:	CALIFORNIA BUSINESS LICENSE NUMBER:	
VENDOR OFFICIAL NAME AND TITLE (PRINT):		
SIGNATURE		DATE

APPENDIX A – REQUIRED FORMS

COMMUNITY BUSINESS ENTERPRISE (CBE) INFORMATION

TITLE	REFERENCE				
1 FIRM/ORGANIZATION INFORMATION	The information requested below is for statistical purposes only. On final analysis and consideration of award, contractor/vendor will be selected without regard to race/ethnicity, color, religion, sex, national origin, age, sexual orientation, or disability.				
Total Number of Employees in California:					
Total Number of Employees (including owners):					
Race/Ethnic Composition of Firm. Enter the make-up of Owners/Partners/Associate Partners into the following categories:					
Race/Ethnic Composition	Owners/Partners/ Associate Partners		Percentage of how ownership of the firm is distributed		
	Male	Female	Male	Female	
Black/African American			%	%	
Hispanic/Latino			%	%	
Asian or Pacific Islander			%	%	
American Indian			%	%	
Filipino			%	%	
White			%	%	
2 CERTIFICATION AS MINORITY, WOMEN, DISADVANTAGED, DISABLED VETERAN, AND LESBIAN, GAY, BISEXUAL, TRANSGENDER, QUEER, AND QUESTIONING-OWNED (LGBTQQ) BUSINESS ENTERPRISE	If the firm is currently certified as a Community Based Enterprise (CBE) by a public agency, complete the table by entering the names of the certifying Agency and placing an "X" under the appropriate CBE designation (Minority, Women, Disadvantaged, Disabled Veteran or LGBTQQ). Enter all the CBE certifications held by the firm.				
Agency Name	Minority	Women	Disadvantaged	Disabled Veteran	LGBTQQ

APPENDIX A – REQUIRED FORMS

PROSPECTIVE CONTRACTOR REFERENCES

Contractor’s Name: _____

List three references, as required in the RFSQ, Subsection 2.7.3 Vendor’s Qualifications, Subsection B Vendor’s References (Section A.2), where the same or similar scope of services were provided in order to meet the Minimum Qualifications stated in this solicitation.

1. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Email
Name or Contract No.	# of Years/Term of Contract	Type of Service	Dollar Amount	
2. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Email
Name or Contract No.	# of Years/Term of Contract	Type of Service	Dollar Amount	
3. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Email
Name or Contract No.	# of Years/Term of Contract	Type of Service	Dollar Amount	

APPENDIX A – REQUIRED FORMS

PROSPECTIVE CONTRACTOR LIST OF CONTRACTS

Contractor’s Name: _____

List of all public entities for which the Contractor has provided service within the last three years as required in RFSQ, Subsection 2.7.3 Vendor’s Qualifications, Subsection B Vendor’s References (Section A.2). Use additional sheets if necessary.

1. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Fax # ()
Name or Contract No.	# of Years / Term of Contract		Type of Service	Dollar Amt.
2. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Fax # ()
Name or Contract No.	# of Years / Term of Contract		Type of Service	Dollar Amt.
3. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Fax # ()
Name or Contract No.	# of Years / Term of Contract		Type of Service	Dollar Amt.
4. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Fax # ()
Name or Contract No.	# of Years / Term of Contract		Type of Service	Dollar Amt.
5. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Fax # ()
Name or Contract No.	# of Years / Term of Contract		Type of Service	Dollar Amt.

APPENDIX A – REQUIRED FORMS

PROSPECTIVE CONTRACTOR LIST OF TERMINATED CONTRACTS

Contractor’s Name: _____

List all contracts that have been terminated with the past three years, as required in the RFSQ, Subsection 2.7.3 Vendor’s Qualifications, Subsection B Vendor’s References (Section A.2).

1. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Fax # ()
Name or Contract No.	Reason for Termination:			
2. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Fax # ()
Name or Contract No.	Reason for Termination:			
3. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Fax # ()
Name or Contract No.	Reason for Termination:			
4. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Fax # ()
Name or Contract No.	Reason for Termination:			
5. Name of Firm	Address of Firm	Contact Person	Telephone # ()	Fax # ()
Name or Contract No.	Reason for Termination:			