

1. BIDDER INFORMATION

Bidder Organization Name	
Bidder Organization's Headquarter Address	
City/State/Zip	
Name of Executive Director or Equivalent	Title
Phone	Email
Name of Contact Person	Title
Phone	Email
Response Date	

2. REQUEST FOR INTEREST RESPONSE

Submit in writing how your organization meets the following requirements:

a. Experience

(1) State your organization's experience in providing licensed crisis residential services described above to the priority population including program location, and

(2) Provide an example of a grant you received for a construction project and how you manage both the funds and the project.

Submit in writing how your organization meets the following requirements:

b. Facilities - Describe the facilities for housing these services, including:

- (1) Condition,**
- (2) Capacity,**
- (3) Location, and**
- (4) Plan for obtaining site control if proposed facilities are not currently owned.**

