



Solicitation Cover Page

1. Solicitation #: 1600000045

2. Solicitation Issue Date: 9/11/2019

3. Brief Description of Requirement:

The Office of Management and Enterprise Services, on behalf of the Oklahoma Department of Commerce, is accepting proposals from entities that specialize in Department of Energy residential weatherization energy audits.

Solicitation Notice: Please note that on a Request for Proposal (RFP), no pricing shall be released at the time of opening. Should a public opening be requested, the only information to be released will be a list of bidders without pricing.

All questions regarding this solicitation must be submitted in writing and are to be emailed no later than September 23, 2019 at 3:00 PM CST/CDT. Questions are to be emailed to Stephanie.Beshears@omes.ok.gov. Questions and answers will be posted on our website after this listed deadline.

4. Response Due Date¹: October 2, 2019

Time: 3:00 PM CST/CDT

5. Issued By and RETURN SEALED BID TO²:

U.S. Postal Delivery Address: 5005 N. Lincoln Blvd. Ste. 300

Oklahoma City, OK 73105

Common Carrier Delivery Address: 5005 N. Lincoln Blvd. Ste. 300

Oklahoma City, OK 73105

Electronic Submission Address: N/A

6. Solicitation Type (type "X" at one below):

- ☐ Invitation to Bid
☒ Request for Proposal
☐ Request for Quote

7. Contracting Officer:

Name: Stephanie Beshears

Phone: 405-522-1037

Email: Stephanie.Beshears@omes.ok.gov

¹ Amendments to solicitation may change the Response Due Date (read GENERAL PROVISIONS, section 3, "Solicitation Amendments")

² If "U.S. Postal Delivery" differs from "Carrier Delivery, use "Carrier Delivery" for courier or personal deliveries



Responding Bidder Information

*"Certification for Competitive Bid and Contract" **MUST** be submitted along with the response to the Solicitation.*

1. RE: Solicitation # 1600000045

2. Bidder General Information:

FEI / SSN : _____ Supplier ID: _____

Company Name: _____

3. Bidder Contact Information:

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Name: _____

Contact Title: _____

Phone #: _____ Fax #: _____

Email: _____ Website: _____

4. Oklahoma Sales Tax Permit¹:

☐ YES – Permit #: _____

☐ NO – Exempt pursuant to Oklahoma Laws or Rules – Attach an explanation of exemption

5. Registration with the Oklahoma Secretary of State:

☐ YES - Filing Number: _____

☐ NO - Prior to the contract award, the successful bidder will be required to register with the Secretary of State or must attach a signed statement that provides specific details supporting the exemption the supplier is claiming (www.sos.ok.gov or 405-521-3911).

6. Workers' Compensation Insurance Coverage:

Bidder is required to provide with the bid a certificate of insurance showing proof of compliance with the Oklahoma Workers' Compensation Act.

☐ YES – Include with the bid a certificate of insurance.

☐ NO – Exempt from the Workers' Compensation Act pursuant to 85A O.S. § 2(18)(b)(1-11) – Attach a written, signed, and dated statement on letterhead stating the reason for the exempt status.²

¹ For frequently asked questions concerning Oklahoma Sales Tax Permit, see <https://www.ok.gov/tax/Businesses/index.html>

² For frequently asked questions concerning workers' compensation insurance, see <https://www.ok.gov/wcc/Insurance/index.html>

7. Disabled Veteran Business Enterprise Act

- ☐ YES – I am a service-disabled veteran business as defined in 74 O.S. §85.44E. Include with the bid response 1) certification of service-disabled veteran status as verified by the appropriate federal agency, and 2) verification of not less than 51% ownership by one or more service-disabled veterans, and 3) verification of the control of the management and daily business operations by one or more service-disabled veterans.
- ☐ NO – Do not meet the criteria as a service-disabled veteran business.

Authorized Signature

Date

Printed Name

Title



**Certification for Competitive
Bid and/or Contract
(Non-Collusion Certification)**

NOTE: A certification shall be included with any competitive bid and/or contract exceeding \$5,000.00 submitted to the State for goods or services.

Agency Name: Oklahoma Department of Commerce

Agency Number: 160

Solicitation or Purchase Order #: 1600000045

Supplier Legal Name: _____

SECTION I [74 O.S. § 85.22]:

A. For purposes of competitive bid,

1. I am the duly authorized agent of the above named bidder submitting the competitive bid herewith, for the purpose of certifying the facts pertaining to the existence of collusion among bidders and between bidders and state officials or employees, as well as facts pertaining to the giving or offering of things of value to government personnel in return for special consideration in the letting of any contract pursuant to said bid;
2. I am fully aware of the facts and circumstances surrounding the making of the bid to which this statement is attached and have been personally and directly involved in the proceedings leading to the submission of such bid; and
3. Neither the bidder nor anyone subject to the bidder's direction or control has been a party:
 - a. to any collusion among bidders in restraint of freedom of competition by agreement to bid at a fixed price or to refrain from bidding,
 - b. to any collusion with any state official or employee as to quantity, quality or price in the prospective contract, or as to any other terms of such prospective contract, nor
 - c. in any discussions between bidders and any state official concerning exchange of money or other thing of value for special consideration in the letting of a contract, nor
 - d. to any collusion with any state agency or political subdivision official or employee as to create a sole-source acquisition in contradiction to Section 85.45j.1. of this title.

B. I certify, if awarded the contract, whether competitively bid or not, neither the contractor nor anyone subject to the contractor's direction or control has paid, given or donated or agreed to pay, give or donate to any officer or employee of the State of Oklahoma any money or other thing of value, either directly or indirectly, in procuring this contract herein.

SECTION II [74 O.S. § 85.42]:

For the purpose of a contract for services, the supplier also certifies that no person who has been involved in any manner in the development of this contract while employed by the State of Oklahoma shall be employed by the supplier to fulfill any of the services provided for under said contract.

The undersigned, duly authorized agent for the above named supplier, by signing below acknowledges this certification statement is executed for the purposes of:

☐ the competitive bid attached herewith and contract, if awarded to said supplier;

OR

☐ the contract attached herewith, which was not competitively bid and awarded by the agency pursuant to applicable Oklahoma statutes.

Supplier Authorized Signature

Certified This Date

Printed Name

Title

Phone Number

Email

Fax Number

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A. GENERAL PROVISIONS

A.1. Definitions

As used herein, the following terms shall have the following meaning unless the context clearly indicates otherwise:

- A.1.1. "Acquisition" means items, products, materials, supplies, services, and equipment an entity acquires by purchase, lease purchase, lease with option to purchase, or rental;
- A.1.2. "Addendum" means a written restatement of or modification to a Contract Document executed by the Supplier and State.
- A.1.3. "Bid" means an offer in the form of a bid, proposal, or quote a bidder submits in response to a solicitation;
- A.1.4. "Bidder" means an individual or business entity that submits a bid in response to a solicitation;
- A.1.5. "Solicitation" means a request or invitation by the State Purchasing Director or a state agency for a supplier to submit a priced offer to sell acquisitions to the state. A solicitation may be an invitation to bid, request for proposal, or a request for quotation; and
- A.1.6. "Supplier" or "vendor" means an individual or business entity that sells or desires to sell acquisitions to state agencies.

A.2. Bid Submission

- A.2.1. Submitted bids shall be in strict conformity with the instructions to bidders and shall be submitted with a completed Responding Bidder Information, OMES-FORM-CP-076, and any other forms required by the solicitation.
- A.2.2. Bids shall be submitted to the Central Purchasing Division in a single envelope, package, or container and shall be sealed, unless otherwise detailed in the solicitation. The name and address of the bidder shall be inserted in the upper left corner of the single envelope, package, or container. SOLICITATION NUMBER AND SOLICITATION RESPONSE DUE DATE AND TIME MUST APPEAR ON THE FACE OF THE SINGLE ENVELOPE, PACKAGE, OR CONTAINER.
- A.2.3. The required certification statement, "Certification for Competitive Bid and/or Contract (Non-Collusion Certification)", OMES-FORM-CP-004, must be made out in the name of the bidder and must be properly executed by an authorized person, with full knowledge and acceptance of all its provisions.
- A.2.4. All bids shall be legible and completed in ink or with electronic printer or other similar office equipment. Any corrections to bids shall be identified and initialed in ink by the bidder. Penciled bids and penciled corrections shall NOT be accepted and will be rejected as non-responsive. In addition to a hard copy submittal, the bidder will also be required to submit an electronic copy. Electronic responses must be submitted in the identical format contained in the solicitation (for example Microsoft Word, Microsoft Excel, but not Adobe PDF). In the event the hard copy of the price worksheets and electronic copy of the price worksheets do not agree, the electronic copy will prevail.
- A.2.5. All bids submitted shall be subject to the Oklahoma Central Purchasing Act, Central Purchasing Rules, and other statutory regulations as applicable, these General Provisions, any Special Provisions, solicitation specifications, required certification statement, and all other terms and conditions listed or attached herein—all of which are made part of this solicitation.

A.3. Solicitation Amendments

- A.3.1. If an "Amendment of Solicitation", OMES-FORM-CP-011, is issued, the bidder shall acknowledge receipt of any/all amendment(s) to solicitations by signing and returning the solicitation amendment(s). Amendment acknowledgement(s) may be submitted with the bid or may be forwarded separately. If forwarded separately, amendment acknowledgement(s) must contain the solicitation number and response due date and time on the front of the envelope. The Central Purchasing Division must receive the amendment acknowledgement(s) by the response due

date and time specified for receipt of bids for the bid to be deemed responsive. Failure to acknowledge solicitation amendments may be grounds for rejection.

- A.3.2. No oral statement of any person shall modify or otherwise affect the terms, conditions, or specifications stated in the solicitation. All amendments to the solicitation shall be made in writing by the Central Purchasing Division.
- A.3.3. It is the bidder's responsibility to check the OMES/Central Purchasing Division website frequently for any possible amendments that may be issued. The Central Purchasing Division is not responsible for a bidder's failure to download any amendment documents required to complete a solicitation.

A.4. Bid Change

If the bidder needs to change a bid prior to the solicitation response due date, a new bid shall be submitted to the Central Purchasing Division with the following statement "This bid supersedes the bid previously submitted" in a single envelope, package, or container and shall be sealed, unless otherwise detailed in the solicitation. The name and address of the bidder shall be inserted in the upper left corner of the single envelope, package, or container. SOLICITATION NUMBER AND SOLICITATION RESPONSE DUE DATE AND TIME MUST APPEAR ON THE FACE OF THE SINGLE ENVELOPE, PACKAGE, OR CONTAINER.

A.5. Certification Regarding Debarment, Suspension, and Other Responsibility Matters

By submitting a response to this solicitation:

- A.5.1. The prospective primary participant and any subcontractor certifies to the best of their knowledge and belief, that they and their principals or participants:
 - A.5.1.1. Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal, State or local department or agency;
 - A.5.1.2. Have not within a three-year period preceding this proposal been convicted of or pled guilty or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) contract; or for 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;
 - A.5.1.3. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph A.5.1.2. of this certification; and
 - A.5.1.4. Have not within a three-year period preceding this application/proposal had one or more public (Federal, State, or local) contracts terminated for cause or default.
- A.5.2. 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 its solicitation response.

A.6. Bid Opening

Sealed bids shall be opened by the Central Purchasing Division at 5005 N. Lincoln Blvd. Suite 300, Oklahoma City, Oklahoma, 73105 at the time and date specified in the solicitation as Response Due Date and Time.

A.7. Open Bid / Open Record

Pursuant to the Oklahoma Public Open Records Act, a public bid opening does not make the bid(s) immediately accessible to the public. The procurement or contracting agency shall keep the bid(s) confidential, and provide prompt and reasonable access to the records only after a contract is awarded or the solicitation is cancelled. This practice protects the integrity of the competitive bid process and prevents excessive disruption to the procurement process. The interest of achieving the best value for the State of Oklahoma outweighs the interest of vendors immediately knowing the contents of competitor's bids. [51 O.S. § 24A.5(5)]

Additionally, financial or proprietary information submitted by a bidder may be designated by the Purchasing Director as confidential and the procurement entity may reject all requests to disclose information designated as confidential pursuant to 62 O.S. (2012) § 34.11.1(H)(2) and 74 O.S. (2011) § 85.10. Bidders claiming any portion of their bid as proprietary or confidential must specifically identify what documents or portions of documents they consider confidential and identify applicable law supporting their claim of confidentiality. The State Purchasing Director shall make the final decision as to whether the documentation or information is confidential pursuant to 74 O.S. §

85.10. Otherwise, documents and information a bidder submits as part of or in connection with a bid are public records and subject to disclosure after contract award or the solicitation is cancelled.

A.8. Late Bids

Bids received by the Central Purchasing Division after the response due date and time shall be deemed non-responsive and shall NOT be considered for any resultant award.

A.9. Legal Contract

- A.9.1. Submitted bids are rendered as a legal offer and any bid, when accepted by the Central Purchasing Division, shall constitute a contract.
- A.9.2. The Contract resulting from this solicitation may consist of the following documents in the following order of precedence:
 - A.9.2.1. Any Addendum to the Contract;
 - A.9.2.2. Purchase order, as amended by Change Order (if applicable);
 - A.9.2.3. Solicitation, as amended (if applicable); and
 - A.9.2.4. Successful bid (including required certifications), to the extent the bid does not conflict with the requirements of the solicitation or applicable law.
- A.9.3. Any contract(s) awarded pursuant to the solicitation shall be legibly written or typed.

A.10. Pricing

- A.10.1. Bids shall remain firm for a minimum of sixty (60) days from the solicitation closing date.
- A.10.2. Bidders guarantee unit prices to be correct.
- A.10.3. In accordance with 74 O.S. §85.40, ALL travel expenses to be incurred by the supplier in performance of the Contract shall be included in the total bid price/contract amount.

A.11. Manufacturers' Name and Approved Equivalents

Unless otherwise specified in the solicitation, manufacturers' names, brand names, information and/or catalog numbers listed in a specification are for information and not intended to limit competition. Bidder may offer any brand for which they are an authorized representative, and which meets or exceeds the specification for any item(s). However, if bids are based on equivalent products, indicate on the bid form the manufacturer's name and number. Bidder shall submit sketches, descriptive literature, and/or complete specifications with their bid. Reference to literature submitted with a previous bid will not satisfy this provision. The bidder shall also explain in detail the reason(s) why the proposed equivalent will meet the specifications and not be considered an exception thereto. Bids that do not comply with these requirements are subject to rejection.

A.12. Clarification of Solicitation

- A.12.1. Clarification pertaining to the contents of this solicitation shall be directed in writing to the Central Purchasing Contracting Officer specified in the solicitation, and must be prior to the closing date of the solicitation.
- A.12.2. If a bidder fails to notify the State of an error, ambiguity, conflict, discrepancy, omission or other error in the SOLICITATION, known to the bidder, or that reasonably should have been known by the bidder, the bidder shall submit a bid at its own risk; and if awarded the contract, the bidder shall not be entitled to additional compensation, relief, or time, by reason of the error or its later correction. If a bidder takes exception to any requirement or specification contained in the SOLICITATION, these exceptions must be clearly and prominently stated in their response.
- A.12.3. Bidders who believe proposal requirements or specifications are unnecessarily restrictive or limit competition may submit a written request for administrative review to the contracting officer listed on the solicitation. This request must be made prior to the closing date of the solicitation.

A.13. Negotiations

- A.13.1. In accordance with Title 74 §85.5, the State of Oklahoma reserves the right to negotiate with one, selected, all or none of the vendors responding to this solicitation to obtain the best value for the State. Negotiations could entail discussions on products, services, pricing, contract terminology or any other issue that may mitigate the State's risks. The State shall consider all issues negotiable and not artificially constrained by internal corporate policies. Negotiation may be with one or more vendors, for any and all items in the vendor's offer.
- A.13.2. Firms that contend that they lack flexibility because of their corporate policy on a particular negotiation item shall face a significant disadvantage and may not be considered. If such negotiations are conducted, the following conditions shall apply:
- A.13.3. Negotiations may be conducted in person, in writing, or by telephone.
- A.13.4. Negotiations shall only be conducted with potentially acceptable offers. The State reserves the right to limit negotiations to those offers that received the highest rankings during the initial evaluation phase.
- A.13.5. Terms, conditions, prices, methodology, or other features of the bidders offer may be subject to negotiations and subsequent revision. As part of the negotiations, the bidder may be required to submit supporting financial, pricing, and other data in order to allow a detailed evaluation of the feasibility, reasonableness, and acceptability of the offer.
- A.13.6. The requirements of the Request for Proposal shall not be negotiable and shall remain unchanged unless the State determines that a change in such requirements is in the best interest of the State Of Oklahoma.

A.14. Rejection of Bid

The State reserves the right to reject any bids that do not comply with the requirements and specifications of the solicitation. A bid may be rejected when the bidder imposes terms or conditions that would modify requirements of the solicitation or limit the bidder's liability to the State. Other possible reasons for rejection of bids are listed in OAC 260:115-7-32.

A.15. Award of Contract

- A.15.1. The State Purchasing Director may award the Contract to more than one bidder by awarding the Contract(s) by item or groups of items, or may award the Contract on an ALL OR NONE basis, whichever is deemed by the State Purchasing Director to be in the best interest of the State of Oklahoma.
- A.15.2. Contract awards will be made to the lowest and best bidder(s) unless the solicitation specifies that best value criteria is being used.
- A.15.3. In order to receive an award or payments from the State of Oklahoma, suppliers must be registered. The vendor registration process can be completed electronically through the OMES website at the following link: <https://www.ok.gov/dcs/vendors/index.php>.

A.16. Contract Modification

- A.16.1. The Contract is issued under the authority of the State Purchasing Director who signs the Contract. The Contract may be modified only through a written Addendum, signed by the State Purchasing Director and the supplier.
- A.16.2. Any change to the Contract, including but not limited to the addition of work or materials, the revision of payment terms, or the substitution of work or materials, directed by a person who is not specifically authorized by the Central Purchasing Division in writing, or made unilaterally by the supplier, is a breach of the Contract. Unless otherwise specified by applicable law or rules, such changes, including unauthorized written Addendums, shall be void and without effect, and the supplier shall not be entitled to any claim under this Contract based on those changes. No oral statement of any person shall modify or otherwise affect the terms, conditions, or specifications stated in the resultant Contract.

A.17. Delivery, Inspection and Acceptance

- A.17.1. Unless otherwise specified in the solicitation or awarding documents, all deliveries shall be F.O.B. Destination. The supplier(s) awarded the Contract shall prepay all packaging, handling,

shipping and delivery charges and firm prices quoted in the bid shall include all such charges. All products and/or services to be delivered pursuant to the Contract shall be subject to final inspection and acceptance by the State at destination. "Destination" shall mean delivered to the receiving dock or other point specified in the purchase order. The State assumes no responsibility for goods until accepted by the State at the receiving point in good condition. Title and risk of loss or damage to all items shall be the responsibility of the supplier until accepted by the receiving agency. The supplier(s) awarded the Contract shall be responsible for filing, processing, and collecting any and all damage claims accruing prior to acceptance.

- A.17.2. Supplier(s) awarded the Contract shall be required to deliver products and services as bid on or before the required date. Deviations, substitutions or changes in products and services shall not be made unless expressly authorized in writing by the Central Purchasing Division.

A.18. Invoicing and Payment

- A.18.1. Upon submission of an accurate and proper invoice, the invoice shall be paid in arrears after products have been delivered or services provided and in accordance with applicable law. Invoices shall contain the purchase order number, a description of the products delivered or services provided, and the dates of such delivery or provision of services. An invoice is considered proper if sent to the proper recipient and goods or services have been received.
- A.18.2. State Acquisitions are exempt from sales taxes and federal excise taxes.
- A.18.3. Pursuant to 74 O.S. §85.44(B), invoices will be paid in arrears after products have been delivered or services provided.
- A.18.4. Payment terms will be net 45. Interest on late payments made by the State of Oklahoma is governed by 62 O.S. § 34.72.
- A.18.5. Additional terms which provide discounts for earlier payment may be evaluated when making an award. Any such additional terms shall be no less than ten (10) days increasing in five (5) day increments up to thirty (30) days. The date from which the discount time is calculated shall be the date of a proper invoice.

A.19. Tax Exemption

State agency acquisitions are exempt from sales taxes and federal excise taxes. Bidders shall not include these taxes in price quotes.

A.20. Audit and Records Clause

- A.20.1. As used in this clause, "records" includes books, documents, accounting procedures and practices, and other data, regardless of type and regardless of whether such items are in written form, in the form of computer data, or in any other form. In accepting any Contract with the State, the successful bidder(s) agree any pertinent State or Federal agency will have the right to examine and audit all records relevant to execution and performance of the resultant Contract.
- A.20.2. The successful supplier(s) awarded the Contract(s) is required to retain records relative to the Contract for the duration of the Contract and for a period of seven (7) years following completion and/or termination of the Contract. If an audit, litigation, or other action involving such records is started before the end of the seven (7) year period, the records are required to be maintained for two (2) years from the date that all issues arising out of the action are resolved, or until the end of the seven (7) year retention period, whichever is later.

A.21. Non-Appropriation Clause

The terms of any Contract resulting from the solicitation and any Purchase Order issued for multiple years under the Contract are contingent upon sufficient appropriations being made by the Legislature or other appropriate government entity. Notwithstanding any language to the contrary in the solicitation, purchase order, or any other Contract document, the procuring agency may terminate its obligations under the Contract if sufficient appropriations are not made by the Legislature or other appropriate governing entity to pay amounts due for multiple year agreements. The Requesting (procuring) Agency's decisions as to whether sufficient appropriations are available shall be accepted by the supplier and shall be final and binding.

A.22. Choice of Law

Any claims, disputes, or litigation relating to the solicitation, or the execution, interpretation, performance, or enforcement of the Contract shall be governed by the laws of the State of Oklahoma.

A.23. Choice of Venue

Venue for any action, claim, dispute or litigation relating in any way to the Contract shall be in Oklahoma County, Oklahoma.

A.24. Termination for Cause

- A.24.1. The supplier may terminate the Contract for default or other just cause with a 30-day written request and upon written approval from the Central Purchasing Division. The State may terminate the Contract for default or any other just cause upon a 30-day written notification to the supplier.
- A.24.2. The State may terminate the Contract immediately, without a 30-day written notice to the supplier, when violations are found to be an impediment to the function of an agency and detrimental to its cause, when conditions preclude the 30-day notice, or when the State Purchasing Director determines that an administrative error occurred prior to Contract performance.
- A.24.3. If the Contract is terminated, the State shall be liable only for payment for products and/or services delivered and accepted.

A.25. Termination for Convenience

- A.25.1. The State may terminate the Contract, in whole or in part, for convenience if the State Purchasing Director determines that termination is in the State's best interest. The State Purchasing Director shall terminate the Contract by delivering to the supplier a Notice of Termination for Convenience specifying the terms and effective date of Contract termination. The Contract termination date shall be a minimum of 60 days from the date the Notice of Termination for Convenience is issued by the State Purchasing Director.
- A.25.2. If the Contract is terminated, the State shall be liable only for products and/or services delivered and accepted, and for costs and expenses (exclusive of profit) reasonably incurred prior to the date upon which the Notice of Termination for Convenience was received by the supplier.

A.26. Insurance

The successful supplier(s) awarded the Contract shall obtain and retain insurance, including workers' compensation, automobile insurance, medical malpractice, and general liability, as applicable, or as required by State or Federal law, prior to commencement of any work in connection with the Contract. The supplier awarded the Contract shall timely renew the policies to be carried pursuant to this section throughout the term of the Contract and shall provide the Central Purchasing Division and the procuring agency with evidence of such insurance and renewals.

A.27. Employment Relationship

The Contract does not create an employment relationship. Individuals performing services required by this Contract are not employees of the State of Oklahoma or the procuring agency. The supplier's employees shall not be considered employees of the State of Oklahoma nor of the procuring agency for any purpose, and accordingly shall not be eligible for rights or benefits accruing to state employees.

A.28. Compliance with the Oklahoma Taxpayer and Citizen Protection Act of 2007

By submitting a bid for services, the bidder certifies that they, and any proposed subcontractors, are in compliance with 25 O.S. 1313 and participate in the Status Verification System. The Status Verification System is defined in 25 O.S. §1312 and includes but is not limited to the free Employment Verification Program (E-Verify) through the Department of Homeland Security and available at www.dhs.gov/E-Verify.

A.29. Compliance with Applicable Laws

The products and services supplied under the Contract shall comply with all applicable Federal, State, and local laws, and the supplier shall maintain all applicable licenses and permit requirements.

A.30. Special Provisions

Special Provisions set forth in SECTION B apply with the same force and effect as these General Provisions. However, conflicts or inconsistencies shall be resolved in favor of the Special Provisions.

B. SPECIAL PROVISIONS

B.1. Contract Period and Renewal Options

- B.1.1.** The initial Contract period shall begin on October 1, 2019 (or from the time of final contract execution) through March 31, 2020. The contractor shall not commence work, commit funds, incur costs, or in any way act to obligate the State until notified in writing with the approval of the contract.
- B.1.2.** Under Oklahoma law, the State may not contract for a period longer than one (1) year (the "Initial Term"). By mutual consent of the parties hereto, it is intended that there shall be two (2) options to renew, subject to the terms and conditions set forth herein, each for duration of one (1) year. The Renewal Period will be April 1 – March 31. Renewals will be at the same terms and conditions, unless there are changes to Federal funding requirements.
- B.1.3.** Renewals will be dependent upon availability of funding, favorable performance evaluation, and Oklahoma Department of Commerce need.
- B.1.4.** Grant Funds for this contract may come from the U.S. Department of Energy or Oklahoma Department of Human Services (OKDHS).
- B.1.5.** Final awarded amount may vary up to the allowable funding amount. For example, if a successful bidder is awarded to provide training, based on initial evaluation (See Section C.2.1.), it may be determined that more or less days of training are needed to meet the Mandated Outcomes in Section B.4.

B.2. 90 Day Extension

The State may extend the term of this contract up to ninety (90) day intervals if mutually agreed upon in writing by both parties.

B.3. Definitions

As used herein, in addition to the definitions listed in A.1., the following terms are specific to the services being solicited.

- B.3.1.** **BPI** - The Building Performance Institute is the certification and standard setting organization for home performance professionals. All weatherization workers (Energy Auditors, Retrofit Installers, Crew Leaders, and Quality Control Inspectors) must be trained according to BPI standards, although only Quality Control Inspectors are required to have a BPI certification at this time.
- B.3.2.** **CAA** - Community Action Agencies are state designated local private and public non-profit organizations that were created under the 1964 Economic Opportunity Act. CAAs are designated recipients of Community Service Block Grant funding. In Oklahoma, the only agencies that currently administer the DOE WAP program are 12 CAAs – ODOC Subgrantees.
- B.3.3.** **CAA Implementation Manual** - The Community Action Agency Implementation Manual is a set of mutually agreed upon programmatic implementation procedures established between ODOC and the CAAs that the awarded Bidder will be required to use when monitoring CAA's for compliance with ODOC policies.
 - B.3.3.1.** The CAA Implementation Manual can be accessed here:
http://okcommerce.gov/assets/files/grants/CAA_Supplier_Implementation_Manual.pdf
- B.3.4.** **CFR** - The Code of Federal Regulation is the codification of the general and permanent rules published in the Federal Register by the departments and agencies of the Federal Government. 10 CFR 440 contains the Federal rules guiding the implementation of the DOE WAP.
- B.3.5.** **DOE** - The United States Department of Energy is the funding authority for the Oklahoma Weatherization Assistance Program.
- B.3.6.** **EA** - An Energy Audit or Energy Auditor, this acronym can stand for either one. An energy audit uses diagnostic testing to assess the energy consumption and needs of a home. An EA determines what cost saving investments might be recommended in a home to improve the energy efficiency of the home. Energy Auditors are experienced professionals who evaluate the health and safety of issues, durability, comfort, and energy use of a residential building. They conduct diagnostic tests, gather and analyze data, and create models to draw conclusion and make recommendations to the client for improvements. EAs are not required to be BPI certified, but it is preferred. Any EA working for, or contracted by, the WAP must possess the knowledge, skills and abilities listed in the National Renewable Energy Laboratory Job Task Analysis for EAs.
 - B.3.6.1.** The definition and NREL Job Task Analysis for an EA can be found here:
<https://www.nrel.gov/docs/fy18osti/70985.pdf>
- B.3.7.** **JTA** - A Job Task Analysis is an analysis of the core knowledge areas, critical work functions, and/or skills typically found across a representative sampling of current practitioners or job incumbent workers.
- B.3.8.** **MHEA** - The Manufactured Home Energy Audit is a part of the Weatherization Assistant 8.9 program developed by the Oak Ridge National Laboratory specifically as an energy audit software tool for the DOE WAP for mobile homes.

- B.3.9. NEAT** - The National Energy Audit Tool is a part of the Weatherization Assistant 8.9 program developed by the Oak Ridge National Laboratory specifically as an energy audit software tool for the DOE WAP for single-family houses.
- B.3.10. NREL** - The National Resource Energy Laboratory is a national laboratory of the U.S. Department of Energy and the Office of Energy Efficiency and Renewable Energy, operated by the Alliance for Sustainable Energy. NREL is responsible for maintaining and updating the SWS, the standards for home energy upgrades.
- B.3.11. ODOC** - The Oklahoma Department of Commerce. ODOC is the State Grantee for DOE WAP funding from the US Department of Energy.
- B.3.12. OKGrants** - OKGrants is ODOC's grant management system for reporting, payment, and monitoring.
- B.3.13. Oklahoma Weatherization Field Guides** - The field guides that CAAs or ODOC Subgrantees are required to use. The DOE approved guide aligns SWS standards with DOE allowable measures and ODOC policies. There are two (2) field guides, once for Manufactured Homes and one for Single Family Homes.
- B.3.13.1.** Manufactured Homes Field Guide can be accessed here:
<https://storcloud.ok.gov/index.php/s/Hlzm0F1ZWpxllo8h>
- B.3.13.2.** Single Family Homes Field Guide can be accessed here:
<https://storcloud.ok.gov/index.php/s/vZXJkG7eDeoQ0zH>
- B.3.14. PY19** - Program Year 2019 for the Weatherization Assistance Program, funded by the United States Department of Energy, runs April 1, 2019 – March 31, 2020 for Oklahoma.
- B.3.15. QCI** - Home Energy Professional, BPI certified Quality Control Inspector is a residential energy efficiency professional who ensures the completion, appropriateness, and quality of energy upgrade work by conducting a methodological energy audit/inspection of the building, performing safety and diagnostic tests, and observing the work. QCIs working for, or contracted by, the WAP must possess the knowledge, skills and abilities listed in the National Renewable Energy Laboratory Job Task Analysis for QCIs as mandated in DOE WPN 15-4.
- B.3.15.1.** The definition and NREL Job Task Analysis for a QCI can be found here:
<http://www1.eere.energy.gov/wip/pdfs/51670.pdf>
- B.3.16. RFP** – Request for Proposal
- B.3.17. T&T/A** - Training and Technical Assistance refers to any training or technical assistance that a CAA/ODOC Subgrantee or ODOC receives regarding implementing their WAP program according to DOE and ODOC policies.
- B.3.18. Unit** - A residential dwelling (primarily mobile homes and single-family dwelling) that is eligible for and has received weatherization services.
- B.3.19. WAP** - The Weatherization Assistance Program is a federally funded DOE program that is operated through contractual partnerships with 12 CAA Subgrantees in Oklahoma.
- B.3.20. WPN** - United States Department of Energy Weatherization Program Notice. WPNs are official policy and guidelines that are periodically issued by DOE.

B.4. Mandated Outcomes

- B.4.1.** ODOC is issuing this solicitation to procure immediate and long term services of one (1) or more entities specialized in the DOE residential weatherization energy audits (conducted according to NREL's Energy Audit Job Task Analysis) and Weatherization Assistant 8.9 National Energy Audit Tool (NEAT) and Manufactured Home Energy Audit (MHEA) to assist ODOC with energy audit quality improvement throughout the state.
- B.4.1.1.** Bidders can choose to bid on all or some of the work outlined in Sections B.4.2 and C.2 – C.6. Bidders must be very clear in their proposal which work they are bidding on.
- B.4.1.2.** ODOC reserves the right to award none, some, or all of any proposals submitted.
- B.4.2.** In order to achieve energy audit quality improvement throughout the state, ODOC is seeking qualified entities to provide the following services and strategies as needed to meet the accompanying outcomes. More details about the anticipated work required to meet the outcomes is outlined in Sections C.2 – C.6.
- B.4.2.1. NEAT/MHEA and Energy Audit (as it relates to NEAT/MHEA) Training** - Conduct onsite classroom based, in the field, and remote (webinar or phone) based trainings on Energy Audit processes, data entry, and data analysis of WA 8.9. Trainings would be for Subgrantees, ODOC staff, and for Oklahoma's IREC accredited weatherization training center.
- B.4.2.1.1. Outcome 1:** Increase Subgrantee knowledge of WA 8.9 NEAT/MHEA audit software and quality of Oklahoma energy audits.
- B.4.2.1.2. Outcome 2:** Train ODOC Staff, any ODOC Contractors, and Oklahoma's Training Manager at Oklahoma's IREC accredited weatherization training center to be expert trainers and technical assistance providers for WA 8.9 NEAT/MHEA.

B.4.2.2. NEAT/MHEA Technical Manual and Policy Development - Assist ODOC with the development of technical energy audit related policies.

B.4.2.2.1. **Outcome 1:** Develop a comprehensive ODOC Energy Audit Manual to meet DOE's requirements.

B.4.2.2.2. **Outcome 2:** Assess if there is any need for additional Energy Audit policies (in addition to the technical manual). Make recommendations to ODOC.

B.4.2.3. Energy Audit Form and Process Development and Implementation - Assist ODOC with review of energy audit forms and required processes/procedures and recommend changes. Help ODOC develop processes and forms if needed to implement recommended changes.

B.4.2.3.1. **Outcome 1:** Improve the quality of ODOC technical energy audit forms and processes

B.4.2.4. Monitoring Process and Tool Improvements - Assist ODOC with development or improvement of energy audit monitoring tool and monitoring processes.

B.4.2.4.1. **Outcome 1:** Improve the quality of ODOC technical oversight and monitoring processes over the energy audit.

B.4.2.5. Desktop Review and Pre-Authorization of Energy Audits - ODOC provides pre-authorization on a sampling of energy audits and client files before Subgrantees can begin work. Assist ODOC with these tasks in an ongoing manner and use information from the desktop reviews to develop online retention trainings to reinforce concepts as needed.

B.4.2.5.1. **Outcome 1:** Increase the quality of energy audits and eliminate the risk of disallowable measures recommended on audits.

B.4.2.5.2. **Outcome 2:** Improve training quality and state policy effectiveness based on audit information reviewed.

B.5. Contract Administration and Management

B.5.1. The successful Bidder will report to the Senior Energy Program Manager.

B.5.2. The Senior Energy Program Manager will maintain first-line administrative responsibility for the Contract or delegate some or all of those responsibilities by receiving all deliverables and authorizing payment for services rendered. The Senior Energy Program Manager or designated parties will monitor, document and evaluate the work performance of the Bidder on an on-going basis during the contract period.

B.5.3. Any amendments/contract modifications to this contract shall be in writing, dated, and executed by both the Bidder and ODOC. Once the document has been signed/approved by the Bidder and ODOC, please refer to A.16 Contract Modification for the remaining procedure.

B.6. Drug-Free Workplace

The Bidder certifies it will provide a drug free workplace in accordance with the Drug Free Workplace Act of 1988 and implemented at 45 CFR Part 76, Subpart F for grantees, as defined at 45 CFR Part 76, Sections 76.605 and 76.610.

B.7. Invoicing (In addition to Section A.18.)

B.7.1. Invoices shall be submitted to:

B.7.1.1. Oklahoma Department of Commerce
ATTN: Accounts Payable
900 North Stiles
Oklahoma City, OK 73104-3234

B.7.1.2. E-mail: accountspayable@okcommerce.gov, and copied to wxqualityassurance@okcommerce.gov.

B.7.2. ODOC may withhold or delay payment to any Bidder failing to provide required programmatic documentation and/or requested financial documentation.

B.7.3. If the Bidder is unable to support any part of its claim to ODOC and it is determined that such inability is attributed to misrepresentation of fact or fraud on the part of the Supplier, the Bidder shall be liable to ODOC for an amount equal to such unsupported part of the claim in addition to all costs, including legal, attributable to the reviewing and discovery of said part of claim. Liability under this section shall be determined within five years of the commission of such misrepresentation of fact or fraud.

B.7.4. ODOC may routinely request supporting documentation to validate vendor expenses.

B.8. Non-Discrimination

The Bidder is an Equal Opportunity Employer, a provider of services and/or assistance, and assures compliance with the 1964 Civil Rights Act, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, as amended, Executive Orders 11246 and 11375, and the Americans with Disabilities Act of 1990 (Public Law 101 336), all amendments to, and all requirements imposed by the regulations issued pursuant to this act.

B.9. Other Certifications

- B.9.1.** The Bidder certifies compliance with the provisions of Titles VI and VII of the 1964 Civil Rights Act and Section 504 of the Rehabilitation Act 1973, the Age Discrimination Act of 1975, the Hatch Act, the Pro Children Act of 1994, Drug Free Workplace Act of 1988, the American with Disabilities Act of 1990, Title IX or the Education Amendments of 1972, 31 U.S.C. Sections 1352, Public Law 105-78, and the Single Audit Act of 1984, as applicable.
- B.9.2.** Title IV of the Lead-Based Paint poisoning Prevention Act (42 USC 4821, et seq.), which prohibits the use of lead-based paint in residences for which federal assistance is provided. Regulations are at 24 CFR, Part 3.

B.10. Client Confidentiality

The Bidder must assure compliance with ODOC's requirements pertaining to the protection, use and release of personal information and applicable State laws found in Title 10, Oklahoma Statutes, Chapter 73, Article VII. Bidder will hold confidential all personal information regarding individuals, including lists of names, addresses, photographs, evaluations, and all other records of the client. This information may not be disclosed, directly or indirectly, unless consent is obtained in writing from the client.

B.11. Breach of Contract

Failure to perform any and all of the terms and conditions of this contract shall be deemed a substantial breach thereof and give the State cause to cancel this contract on seven (7) days written notice to the Supplier. The State then reserves the right to re-award the contract to the next lowest responsible available bidder -OR- should this contract be awarded to multiple vendors; the State may utilize those vendors. In the event of cancellation of this contract, the Bidder shall not be entitled to damages and agrees not to sue the State for damages thereof. After notice of cancellation, the Bidder agrees to perform the terms and conditions of this contract up to and including date of cancellation, as though no cancellation had been made and notwithstanding other legal remedies which may be available to the State because of the cancellation, agrees to indemnify the State for its costs in procuring the services of a new Supplier.

B.12. Minor Deficiencies or Informalities

- B.12.1.** "Minor deficiency" or "minor informality" means an immaterial defect in a bid or variation in a bid from the exact requirements of a solicitation that may be corrected or waived without prejudice to other bidders. A minor deficiency or informality does not affect the price, quantity, quality, delivery or conformance to specifications and is negligible in comparison to the total cost or scope of the acquisition.
- B.12.2.** The State Purchasing Director may waive minor deficiencies or informalities in a bid if the State Purchasing Director determines the deficiencies or informalities do not prejudice the rights of other bidders, or are not a cause for bid rejection.

B.13. Hold Harmless

Supplier agrees to hold harmless ODOC and its trustees, officers, servants, employees, agents and consultants, against any claims, demands and liabilities resulting from any act or omission on the part of the Supplier and/or agents, subcontractors, servants, and employees thereof in the performance of this contract.

B.14. Mandatory Vendor Registration for Contract Award (In Addition to Section A.15.3.)

- B.14.1.** Acquisitions issued by agencies under the authority of Title 74 require vendors to register with Central Purchasing prior to award. Vendors will not be required to register to submit a bid response but will be required to register prior to being awarded a contract and renew their registration prior to each renewal of an award.
- B.14.2.** Vendors pending contract award to a bid released by the Central Purchasing Division or other Oklahoma state agency MUST register with the state at: <https://www.ok.gov/dcs/vendors2/app/index.php>
 - B.14.2.1.** Pursuant to 74 O.S. § 85.33.B: A vendor may register with the Central Purchasing Division to be placed on the Supplier List for bid notification.
 - B.14.2.2.** Registration entitles a supplier to receive all bid notices for the commodity classes specified by the vendor in the registration process for a period of one year.
 - B.14.2.3.** The Vendor Registration fee is \$25 for EACH family code for which the vendor desires registration.
 - B.14.2.4.** The following items describe information requested by the vendor registration application. To expedite the application process, vendors are encouraged to have the information readily available prior to beginning the registration application. If your company is not currently transacting business in the State of Oklahoma, you may not have some of the items listed. However, any vendor selected for award of a

contract with the state of Oklahoma must meet the requirements prior to the issuance of a purchase order.

- B.14.2.5.** E-mail address - if possible, we encourage all vendors to create a central e-mail address, to which all state bidding e-mail correspondence can be sent. A central e-mail for your organization will assure personnel changes or employee absences do not inhibit your ability to receive timely notifications of State bidding opportunities.
- B.14.2.6.** An Oklahoma Sales Tax Permit Number and its Expiration Date or explanation of the exemption status (FAQs)
- B.14.2.7.** An Oklahoma Secretary of State Filing Number, or explanation of the exemption status (www.sos.ok.gov or 405-521-3911)
- B.14.2.8.** A Workers Compensation Insurance Certificate (PDF file) or explanation of the exemption status (FAQs)
- B.14.2.9.** Vendors must complete all 12 steps of the registration application, which require business information about your company, a substitute W-9 form and designation of the commodity codes/classifications your company is interested in. We recommend vendors search UNSPSC Website Code Posting to identify the applicable commodity codes prior to beginning the registration application. However, you will have the option to select and deselect a family, class and commodity during the online registration process before finalizing your application.
- B.14.2.10.** Payment information related to a bank checking account (example), or VISA, MasterCard or American Express credit card. All payments are made through an encrypted secure server and payment information is not stored after a transaction. You will receive confirmation after your registration is validated and approved by the Vendor Registration Officer.
- B.14.3.** Note to Vendors: The State of Oklahoma does NOT provide legal advice regarding exemptions from Sales Tax Permit, Secretary of State, and Workers Compensation Insurance registrations

C. SOLICITATION SPECIFICATIONS

C.1. Project Overview

- C.1.1.** ODOC has been responsible for the administration of the DOE federally funded Oklahoma Low Income WAP since 1977 and the DHS LIHEAP WX Program since 1984. Both funding streams make up Oklahoma's Weatherization Assistance Program.
- C.1.2.** ODOC currently contracts with 12 (twelve) CAAs to serve Oklahoma counties' low-income eligible clients with weatherization services. Oklahoma's weatherization mission is to "reduce costs for low income families, particularly for the elderly, people with disabilities, and children, by improving the energy efficiency of their homes while ensuring their health and safety."
 - C.1.2.1.** For more information and mission reference: <https://www.energy.gov/eere/wipo/weatherization-assistance-program>
- C.1.3.** Before any weatherization work and services can be provided to clients, each CAA must conduct a professional energy audit according to NREL's Energy Audit Job Task Analysis, and with any other Federal and State regulations.
- C.1.4.** Every five (5) years ODOC is required to submit to DOE a re-approval request of Oklahoma's Weatherization Assistance Program Energy Audit Processes and Procedures. In June 2019, DOE granted ODOC conditional approval to proceed with Energy Audits in PY19, provided ODOC meets multiple conditions to improve our audit processes. The purpose of this request for proposal (RFP) is to obtain expert assistance in meeting these DOE conditions and other strategies to improve Oklahoma's energy audit knowledge and processes.
- C.1.5.** Bidders can choose to bid on all or some of the work outlined in Sections C.2 – C.6. Bidders must be very clear in their proposal which work they are bidding on.

C.2. Statement of Work – NEAT/MHEA and Energy Audit (as it relates to NEAT/MHEA) Training

- C.2.1.** Bidder is asked to work with ODOC on assessment of NEAT/MHEA and Energy Audit related training needs and use this information to develop a customized on-site training in Oklahoma to meet the outcomes identified in Section B.4.1.1. Training sessions or "tracks" would need to be developed for at least three different audiences:
 - C.2.1.1.** One (1) training or series of trainings would be developed for ODOC Monitoring Staff and for the Oklahoma Association of Community Action Agency's Training Manager. This training would be focused more on "training the trainers" and how to "audit the audits."
 - C.2.1.2.** A second training or series of trainings would be developed for Subgrantee Energy Auditors who are doing the work.

- C.2.1.3. A third training or series of trainings would be developed for QCIs who are not doing the energy audits. This training would be more focused on how to “audit the audits” and provide oversight for CAAs or any weatherization Subgrantees.
 - C.2.2. Training must be at least three (3) days, although more days may be needed. If the bidder believes additional types of training are needed to meet the outcome listed in Section B.4.2.1, those types of trainings should be described and their costs listed in the RFP.
 - C.2.2.1. Proposed trainings should be provided as soon as possible, preferably before the 2019 calendar year end.
 - C.2.2.2. A cost per day for each type of training must be provided in the RFP response.
 - C.2.2.3. In coordination with the state office, bidder would be responsible for securing training facilities, Wi-Fi, and other necessary facilities (restrooms, parking, etc.), and at least two field homes. Preferred initial location for training is Edmond, at our Oklahoma IREC Weatherization Training Center.
 - C.2.2.4. Training can be provided using multiple delivery methods but must include classroom instruction and field visits to homes that have not been weatherized, including one single family home and one mobile/manufactured home. Preferred specifications for each field home will be provided by the state office.
 - C.2.2.5. Trainer will verify accuracy of Weatherization Assistant data entry completed by training participants following field visits and address any inconsistencies during on-site training.
 - C.2.2.6. Prior to training, contractor will review at least fifteen (15) completed .wdz files (NEAT and MHEA) and any additional information provided by the State.
 - C.2.2.7. Fifteen (15) days after receipt of .wdz files, contractor shall provide a written summary or the review and proposed curriculum for the training, describing how the training will be customized to meet the needs of the participant
 - C.2.2.8. Training must include pre and post exams to assess the training effectiveness, and determine CAA or Subgrantee increased knowledge of WA 8.9 NEAT MHEA.
 - C.2.2.8.1. Trainer will review the answers to the exams during the onsite training and provide immediate feedback as requested by participants.
 - C.2.2.8.2. Trainer must provide participants an opportunity to complete written evaluations onsite. The evaluation must be reviewed and approved by the state office prior to being finalized.
 - C.2.2.9. Contractor must participate in a debrief meeting with state staff after the onsite training, within fifteen (15) business days.
 - C.2.2.10. Training must include at least one (1) online retention activity thirty (30) days following the onsite training completion, and ODOC may request up to one (1) per quarter for at least the first year. More online retention activities may be requested in subsequent years (if contract renewed).
 - C.2.2.11. Trainer must provide a written summary report forty-five (45) days following the onsite training which includes exam scores, summaries of the evaluations, field visit data entry and training retention activities, and a training needs assessment for future activities. This summary report must also describe whether the outcomes in Sections B.4.2.1.1 and B.4.2.1.2 were met and how this was determined

C.3. Statement of Work – Energy Audit NEAT/MHEA Technical Manual and Policies

- C.3.1. ODOC is seeking a Bidder to help in the creation and writing of a comprehensive energy audit policy and technical manual. Draft must be developed no later than December 1, 2019, to be submitted to DOE for review. Technical Manual would then need to be updated based on DOE or network feedback, and a final draft implemented no later than March 31, 2020.
 - C.3.1.1. Bidder will be asked to help develop and administer an electronic survey of the network, and analysis the survey responses, to receive feedback on the final draft version of the manual.
 - C.3.1.2. Subsequent years (if contract renewed) would include similar work, but only for continuous improvement of Manual.
- C.3.2. Bidder would be asked to assess whether additional energy audit related policies (outside of the NEAT/MHEA Technical Manual, would also be recommended. Bidder must provide any recommendations in writing.

C.4. Statement of Work – Energy Audit Form and Process Development and Implementation

- C.4.1.** ODOC is seeking a Bidder to review ODOC's current energy audit forms and required processes/procedures necessary to utilize them. Bidder must provide written recommended changes or improvements if needed and help develop and implement recommended changes. Any form updates would have to be completed by February 2 of any contract period. See Attachment A for a copy of the currently used Energy Audit Form (Form 28).

C.5. Statement of Work – Monitoring Process and Tool Improvements

- C.5.1.** Bidder would be responsible for assisting ODOC with development or improvement of energy audit monitoring tool and monitoring tool processes. See Attachment B (Form 44) for current technical onsite monitoring tool.
- C.5.1.1.** Bidder would be responsible for helping ODOC develop a monitoring tool for both onsite technical review and for non-technical client file desktop review.

C.6. Statement of Work – Desktop Review and Pre-Authorization of Energy Audits

- C.6.1.** ODOC is reviewing a sampling of energy audits prior to weatherization work for PY19, and providing pre-authorization to CAAs on energy audits/client files before any work can begin. Bidder would be responsible for conducting the reviews, and providing written, requested changes or a list of questions to CAAs. Please see ODOC Weatherization Program Notice 19-1 for guidance regarding the energy audit review process: <https://okacaa.org/training/odoc-memos-notices/>. ODOC's anticipates that approximately 75 – 150 Energy Audits will require review and authorization for the remainder of PY19. However, this final number could be more or less.
- C.6.1.1.** Bidder would be expected to use the desktop review of audits to identify training opportunities and online training retention webinars/activities with these tasks in an ongoing manner and use information from the desktop reviews to develop online retention trainings to enforce concepts as needed.

D. EVALUATION

D.1. Best Value

- D.1.1.** This solicitation will be evaluated as best value in accordance with Title 74, §85. The best value criteria for this proposal is listed below and all proposals will be reviewed and awarded based on the following evaluation criteria:
- D.1.1.1.** Bidder Profile (Section E.3.1.)
 - D.1.1.2.** History, Knowledge and Experience (Section E.3.2.)
 - D.1.1.3.** An assessment of the Bidder's Training and Technical Work Plan, which outlines proposed strategies and capacity to meet one or more Statements of Works as identified Sections C.2. – C.6. This Training and Technical work plan must also address the outcomes listed in Section B.4.2. (Section E.3.3.)
 - D.1.1.4.** Budget (Section E.3.4.)
 - D.1.1.5.** Training Presentation Samples (Section (E.3.5.)
 - D.1.1.6.** References (Section E.3.6.)
- D.1.2.** The State reserves the right to negotiate with one or more Bidders as deemed in the best interest of the State. The Office of Management and Enterprise Services/Central Purchasing Division (OMES/CP) may negotiate any and all contents of the proposal on behalf of the Oklahoma Department of Commerce.
- D.1.3.** ODOC reserves the right to reject any or all committee recommendations.

E. INSTRUCTIONS TO BIDDER

E.1. Bid Preparation

- E.1.1.** All costs incurred by the bidder for proposal preparation, and participation in this competitive proposal procurement will be the sole responsibility of the bidder. All proposals submitted in response to this RFP become the property of the State and will not be returned. All proposals submitted and all information contained therein, unless otherwise specified as proprietary, shall be subject to the Oklahoma Open Records Act, 51 O.S. 24A.1 et. seq. (1991).
- E.1.2.** Submitted proposals are rendered as a legal offer and any proposal when awarded by State shall constitute a firm contract.
- E.1.3.** The State reserves the right to reject any Proposal that does not comply with the requirements and specifications of the RFP. A Proposal will be rejected when the Bidder imposes terms or conditions that would modify requirements of the RFP or limit the Bidder's liability to the State.
- E.1.4.** The State reserves the right to withdraw or cancel this RFP at any time during the procurement process. Issuance of this RFP in no way obligates the State to award or issue a contract or to pay any costs incurred by a Bidder as a result of such a withdrawal.

E.2. Proposal Format

- E.2.1.** Supplier is to submit two (2) complete copies of their bid response on two (2) separate USB/Flash Drives which includes the completed proposal, including the scanned images of the completed/signed OMES forms. USB/Flash Drives can be Word, Excel, or PDF format, but must be an unprotected document. ***This requirement overrides hard copy submittal requirements of A.2.4 of the General Provisions.***
- E.2.2.** Faxed or emailed responses will not be accepted. Hard copies of the solicitation are not needed.
- E.2.3.** Responses to this RFP should be in clear and concise language suitable for inclusion in a contract with the State.

E.3. Proposal Content

E.3.1. Bidder Profile - Summarize the following:

- E.3.1.1.** Bidder's organizational characteristics and structure (organizational chart), including organizational type (corporation, partnership, etc.), date established, and number of employees (if applicable).

- E.3.1.1.1.** Bidder should provide supporting documentation for organizational type and date established.

- E.3.1.1.2.** Bidder should describe any information necessary to establish that Bidder has the stability and resources to manage the project.

E.3.2. Bidder History, Knowledge and Experience - Provide a detailed narrative explaining the Bidder's experience with the relevant experience, technical training, and knowledge needed to perform the work (whether at the federal, state, or local level) required to provide the services outlined in Section C. Include years and dates, types of training, work experience, and anything else to confirm that the bidder has the necessary qualifications skills.

- E.3.2.1.** Explain the Bidder's previous experience with the DOE WAP program and DOE WAP energy audits, energy audit training and Weatherization Assistant 8.9 experience and training, including, but not limited to the following:

- E.3.2.1.1.** Describe experience conducting energy audits for DOE WAP, including years and at what level (local, state, federal).

- E.3.2.1.2.** Describe experience with providing energy audit process evaluation and improvement to others.

- E.3.2.1.2.1.** ODOC will give preference to bidders that have provided energy audit process improvement consultation to one (1) or more Grantees in the past.

- E.3.2.1.2.2.** If a bidder has not provided consultation to a Grantee, bidder must provide similar experience in a different capacity. For example, if a Bidder has assisted a local weatherization provider with process improvement, or a national partner like the Community Action Partnership.

- E.3.2.1.3.** Describe experience with evaluating technical policies and procedures, and writing technical policies or manuals.

- E.3.2.1.3.1.** ODOC will give preference to bidders that provide example technical policies or procedures that were self-developed.

- E.3.2.1.4.** Describe experience using Weatherization Assistant 8.9 and all trainings or technical assistance provided to others in NEAT/MHEA (both in the classroom and in the field).

- E.3.2.2.** Bidder must provide documentation of training certifications, trainings, continuing education, etc. to provide verifiable third party evidence that the Bidder is qualified to do the work outlined in the Training and Technical Work Plan.

- E.3.2.2.1.** Bidder must have verifiable experience conducting energy audits at the local or state level for at least three (3) years;

- E.3.2.2.2.** Preference will be given to bidders that possess a Building Performance Institute (BPI) Energy Audit (EA) Certification.

- E.3.2.2.3.** If bidding on any training, Bidder must have verifiable documented NEAT/MHEA trainings they have conducted with groups of participants, preferably to Grantee staff or to large groups of multiple local agencies through a weatherization training center (See Section E.3.5. for more information)

- E.3.2.3.** If bidding on C.3, C.4, or C.5, list experience with writing technical policies or procedures in some capacity (whether for a training center, a training, a local agency, a state office, or a federal partner).

- E.3.2.3.1. Preference will be given to bidders who supply sample policies or procedures that have been self-developed.

E.3.3. Training and Technical Assistance Work Plan - Bidder must develop a training and technical assistance work plan that outlines the strategies, activities or services the Bidder proposes to complete in order to meet the outcomes listed in Mandated Outcomes Section B.4. and Statement of Work Sections C.2. – C.6. The plan must include the following:

- E.3.3.1. Bidder must use the supplied cover letter (See Attachment C). Replace the text in the box with the date, organization name, and contact information.
- E.3.3.2. Bidder must check which work is being bid on, which outcomes the Bidder is prepared to meet. *If a bidder can only meet some of the RFP outcomes, but not all, they may still submit a proposal.*
- E.3.3.3. For each outcome checked in the cover letter, Bidder must supply the following detailed information with the plan:
 - E.3.3.3.1. How the Bidder proposes to meet each outcome checked. In most cases, ODOC, through this RFP, is asking for an expert's assistance in developing the strategies and processes to meet the desired outcomes – ODOC does not have clearly defined tasks for the successful Bidder. Rather, ODOC is asking for the Bidder to help ODOC identify and develop the work, tasks, processes and procedures that are necessary to meet the desired outcomes.
 - E.3.3.3.2. In a few cases, such as in C.2, ODOC does have specific work listed that a successful bidder for this outcome would be responsible for. However, ODOC is open to alternative strategies, provided the outcomes can still be achieved. Include in the submitted T&TA Work Plan any more detailed or alternative plans to meet the desired ODOC outcomes. Include any anticipated barriers and solutions to meet the barriers.
 - E.3.3.3.3. When possible, a detailed plan should include ways the Bidder plans to measure or determine outcome success or achievement.
 - E.3.3.3.4. Any attachments, sample forms, printed materials that would explain or further illustrate the plan should be submitted as appendices to the T&TA Work Plan.

E.3.4. Budget Form - Bidder must submit their proposed costs, as requested in the Attachment D - Budget Form.

Attachment D can be accessed on the Office of Management & Enterprise Services/Central Purchasing Website where the solicitation is posted.

- E.3.4.1. Bidder must supply costs for Expense Items pre-listed in the budget form, along with associated metric or unit, a list of all included expenses, and, finally, a brief detailed description of all items or costs. Use the blank additional row to include any additional costs not already listed.
- E.3.4.2. Proposed costs MUST be listed for each outcome and statement of work the Bidder is proposing to meet, as described in the T&TA Work Plan.
 - E.3.4.2.1. Example, if Bidder provides a T&TA plan to meet the outcomes associated with the Statement of Work for NEAT/MHEA EA Training (See Section B.4.2.1.), the Bidder must also complete the first tab of the Budget Form (NEAT/MHEA EA Training B.4.2.1.)
- E.3.4.3. Each statement of work has its own separate budget form on a separate tab within the Budget Form. Bidder must complete EACH tab for EACH statement of work being bid on.

E.3.5. Training Presentation Samples - If bidding on any training related work and outcomes [NEAT/MHEA EA Training B.4.2.1.], Bidder must provide samples of previous provided trainings. This can be in any form, but some examples might be: Power Point presentation, recorded webinars, and post training surveys from participants.

E.3.6. References - Please provide at least one (1) reference letter to include name, address, phone number, and email address, that demonstration your organization's ability to meet the desired outcome(s).

- E.3.6.1. References must be from principals at state, local, or federal weatherization network partners on which the bidder was involved and that are similar in scope and/or content to the one being proposed.
- E.3.6.2. If the bidder bids on more than one (1) type of work and proposes to meet more than one (1) outcome, there must be at least one (1) reference to support each type of work and associated outcome(s).
- E.3.6.3. Preference may be given to those with more references.

F. CHECKLIST

F.1. Listed below is a checklist of items that are to be completed and returned with the proposal. This is not an all-inclusive list and it is the Vendor's responsibility to ensure that they submit all required and requested documentation:

- F.1.1.** OMES Form CP076 – Responding Bidder Information
- F.1.2.** OMES Form CP004 – Certification for Competitive Bid and/or Non-Collusion
- F.1.3.** Proof of Liability and Workers' Compensation Insurance
- F.1.4.** Signed Amendments, if applicable
- F.1.5.** Bidder Profile (Section E.3.1.)
- F.1.6.** Bidder History Knowledge and Experience (Section E.3.2.)
- F.1.7.** Training and Technical Assistance Work Plan, with Cover Page (Section E.3.3.)
- F.1.8.** Budget Form – Attachment D (Section E.3.4.)
- F.1.9.** Training Presentation Samples, if applicable (Section E.3.5.)
- F.1.10.** Reference(s) (Section E.3.6.)

G. OTHER

G.1. Questions

All questions regarding this solicitation must be submitted in writing and are to be emailed no later than Monday, September 23, 2019 at 3:00 PM Central Standard Time. Questions are to be emailed to Stephanie.Beshears@omes.ok.gov. Questions received after this date will not be answered. If any questions are received, an amendment to this solicitation will be posted on our website after this deadline listing all questions received and their answers. Any communication regarding this solicitation must be sent to the Contracting Officer listed above. Failure to do so, (contacting the agency directly) may result in your proposal being deemed as non-responsive. Please be sure to reference the solicitation number when emailing questions.

H. PRICE AND COST

Please refer to Attachment D – Budget Form (Section E.3.4.). **Attachment D can be accessed on the Office of Management & Enterprise Services/Central Purchasing Website where the solicitation is posted.**

Diagnostics:

Blower Door

		Ring	Time AV	Temp.	Wind est.	Comments
Initial Audit	/50					
Post Wx	/50					
QCI	/50					
ODOC QA	/50					

Zonal

	House to Attic	Garage	H/crawl	Other _____	Comment
Initial Audit					
Post Wx					
QCI					
ODOC QA					

Pressure Pan: Register Locations

	Initial pa	Post pa	QCI	ODOC QA
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

Room Pressure

	Location	Initial pa	Post pa	QCI	ODOC QA
1					
2					
3					
4					
5					
6					
7					
8					

Dominant

Duct

With AH on

With AH off

Comments

Initial Audit	pa	pa	
Post Wx	pa	pa	
QCI	pa	pa	
ODOC QA	pa	pa	

Isolated CAZ

Date Isolated:	w/o BD	w/BD
/ /	pa	pa
QCI	pa	pa
ODOC QA	pa	pa

CAZ Testing

Ambient	Initial Audit ppm:	Post ppm:	QCI ppm:	QA ppm:
CAZ CO				

For multiple
combustion
WHs or HVACs,
Primary = #1,
Secondary = #2

	↓ Worst Case CAZ Depressurization: ↓ *See actions listed below this chart				↓ Combustion Appliance Testing ↓ Commonly Vented See Below			
	DG700 - CAZ Door Open	DG700 - CAZ Door Closed	DG700 w/ Air Handler OFF	DG700 w/ Air Handler ON	WH Spillage (2 min) Pass or Fail	Furnace Spillage (2 min) Pass or Fail	WH CO Air Free (5 min)	Furnace CO Air Free (5 min)
Initial Audit								
Day 1								
Date:								
Day 2								
Date:								
Day 3								
Date:								
Day 4								
Date:								
Day 5								
Date:								
Post Wx								
Date:								
QCI								
ODOC QA								

*CAZ DOOR: Leave CAZ Door OPEN or CLOSED during Spillage and CO, based on which reading above is the most NEGATIVE

*AIR HANDLER: Leave Air Handler ON or OFF during Spillage and CO, based on which reading above is the most NEGATIVE

*Commonly Vented Appliances: Turn on HVAC while testing WH Spillage, after 2 minutes of HVAC running, RETEST WH Spillage then immediately test HVAC Spillage.

Combustion Air

Vertical

Horizontal

Door

Single

Location

Existing

Required

Initial Audit						in	in
Post Wx						in	in
QCI						in	in
ODOC QA						in	in

**Existing
Exhaust Fan
Flow**

CFM: Kitchen Bath 1 with shower or bath Bath 2 with shower or bath Bath 3 with shower or bath Rooms w/Openable Window(s) Comment

Initial Audit						
Post Wx						
QCI						
ODOC QA						

**If ASHRAE Requires -
Ventilation Fan Install**

of Bedrooms + 1 = ____

Continuous

OR

Intermittant

Required CFM ____

cfm per hr ____ minutes per hr ____

CFM Measured

Switch Plate labeled

Comments

Post Wx			cfm	Yes	No	
QCI			cfm	Yes	No	
ODOC QA			cfm	Yes	No	

Maximum amount of Allowable Duct Leakage

(House SF ____ ÷ 500 = ____) X 400 = ____ cfm X .06 = ____ Max Leakage

OR Unit Tons ____ X 400 = ____ cfm X .06 = ____ Max Leakage

Total Duct Leakage Results

Initial Audit	/25	ring A B C	<input type="checkbox"/> Pre Actual <input type="checkbox"/> Pre Estimated	
Post Wx	/25	ring A B C	Post MUST be Actual	
QCI	/25	ring A B C	Post MUST be Actual	
ODOC QA	/25	ring A B C	Post MUST be Actual	

Duct leakage to outside Results

Initial Audit	/25	ring A B C	<input type="checkbox"/> Pre Actual <input type="checkbox"/> Pre Estimated	
Post Wx	/25	ring A B C	Post MUST be Actual	
QCI	/25	ring A B C	Post MUST be Actual	
ODOC QA	/25	ring A B C	Post MUST be Actual	

Site Diagram

↑ North East South West ↑

A large grid for a site diagram, consisting of 20 columns and 20 rows of squares. The grid is used for drawing a site plan. The orientation is indicated by the text 'North East South West' at the top, with arrows pointing up for North and West, and down for South.

Agency Wx Crew

	RRP	Fit Test	OSHA
Wx QCI:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 10 <input type="checkbox"/> 30
Energy Auditor:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 10 <input type="checkbox"/> 30
Crew Leader:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 10 <input type="checkbox"/> 30
Retrofit Installer:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 10 <input type="checkbox"/> 30
Retrofit Installer:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 10 <input type="checkbox"/> 30

Energy Audit Details and Work Orders

*******All Bold Outlined Boxes are Crew and/or Contractor Work Orders*******

Mobile Home

Overall Length_____ Width_____

☐ Outside Water Heater Closet ☐ Skirting Present

Covered Porch Length_____ Width_____

Carport Length_____ Width_____

Walls: Studs 2x2 2x4 2x6

Existing Insulation Thickness:_____"

Orientation of Long Wall : N S E W

Walls: Vented Unvented

Mobile Roof: Flat - Bowstring - Pitched

White or Reflective - Normal or Weathered

Bowstring Only - Height of Roof _____"

Flat Roofs Only - Joist Spacing: _____"

Existing Insulation Type:_____

Existing Depth:_____ " Cathedral %:_____

Mobile Belly:

Access Location: _____

Access Opening Size: _____

Floor Joist Direction: Lengthwise Widthwise

Floor Joist Size: 2x4 2x6 2x8

Round Square Flat Condition: Good Average Poor

Standing Water Unsanitary

Maximum Belly Cavity Depth_____"

Batt/Blanket Thickness_____"

☐ No Insulation ☐ Existing Insulation Type:_____ Attached: Under or Between Joists

Insulation Type:Needed_____ Installed R-Value:_____ Installed Depth:_____"

Roof Coating ☐ Needed ☐ Not Needed

Belly Repair ☐ Needed ☐ Not Needed

Roof Repair ☐ Needed ☐ Not Needed

Vapor Barrier ☐ Needed ☐ Not Needed

Insulation ☐ Needed ☐ Not Needed

Entrance Signage ☐ Needed ☐ Not Needed

Specific Air Infiltration Locations: ☐ All Measures are on Notes Page ☐ Detailed Work Order Attached

Site Built

Exterior Wall Height _____

Overall SF _____

Exterior Walls: (Wall, Window, and Door #'s must match #'s on Site Diagram)

#	R-	SF	Balloon/Platform	Wood/Vinyl/Brick/Other	N	S	E	W	2x4	2x6	Buffered/Exposed
#	R-	SF	Balloon/Platform	Wood/Vinyl/Brick/Other	N	S	E	W	2x4	2x6	Buffered/Exposed
#	R-	SF	Balloon/Platform	Wood/Vinyl/Brick/Other	N	S	E	W	2x4	2x6	Buffered/Exposed
#	R-	SF	Balloon/Platform	Wood/Vinyl/Brick/Other	N	S	E	W	2x4	2x6	Buffered/Exposed
#	R-	SF	Balloon/Platform	Wood/Vinyl/Brick/Other	N	S	E	W	2x4	2x6	Buffered/Exposed
#	R-	SF	Balloon/Platform	Wood/Vinyl/Brick/Other	N	S	E	W	2x4	2x6	Buffered/Exposed
#	R-	SF	Balloon/Platform	Wood/Vinyl/Brick/Other	N	S	E	W	2x4	2x6	Buffered/Exposed
#	R-	SF	Balloon/Platform	Wood/Vinyl/Brick/Other	N	S	E	W	2x4	2x6	Buffered/Exposed
#	R-	SF	Balloon/Platform	Wood/Vinyl/Brick/Other	N	S	E	W	2x4	2x6	Buffered/Exposed
#	R-	SF	Balloon/Platform	Wood/Vinyl/Brick/Other	N	S	E	W	2x4	2x6	Buffered/Exposed

Wall Insulation: ☐ Not Needed ☐ Needed Wall #(s) _____

Insulation Install Type: _____

Exterior Windows:

Wall	Window #				VT (Very Tight)	T (Tight)	M (Medium)	L (Loose)	VL (Very Loose)					
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W
		X	Wood/Vinyl	Metal - Single	Double	Storm	-	VT	T	M	L	VL	-	N S E W

Windows: ☐ Not Needed ☐ Needed Replacement Window #(s) _____

Replacement Storm Window #(s) _____

Exterior Doors:

Wall	Door #	Door #s with Storm Door _____									
		x	RH	LH	SF	Loose	Tight	Standard Manufactured Mobile Door			
		x	RH	LH	SF	Loose	Tight	Mobile w/Storm Combo			
		x	RH	LH	SF	Loose	Tight	Steel	Hollow	Solid	Sliding Glass Double
		x	RH	LH	SF	Loose	Tight	Steel	Hollow	Solid	Sliding Glass Double
		x	RH	LH	SF	Loose	Tight	Steel	Hollow	Solid	Sliding Glass Double

Doors: ☐ Not Needed ☐ Needed

Replacement Door #(s) _____

Site Built Attic(s):Roof Type: Cathedral Pitched Flat
Roof Material: Normal/Weathered White/Reflective**Attic 1** Type: Floored - Unfloored - Flat Roof / Joist Spacing: _____" / Area Sq Ft: _____☐ Conditioned Space ☐ Unconditioned Space ☐ Unintentionally Conditioned Space**Attic 2** Type: Floored - Unfloored - Flat Roof / Joist Spacing: _____" / Area Sq Ft: _____☐ Conditioned Space ☐ Unconditioned Space ☐ Unintentionally Conditioned Space

Attic Access Location(s): _____

Existing Insulation Type: _____ Existing Depth: _____"

Added Insulation Type: _____ **Installed R-Value:** _____ **Installed Depth:** _____"

- ☐ Junction Box Flags # of Flags _____ ☐ Wx / Seal / Insulate Access
- ☐ Insulation Depth Markers # of Markers _____ ☐ Flues/Chimneys # to Dam _____
- ☐ Installed Access Size _____X_____ ☐ Recessed/Can Lights # to Wx _____
- ☐ Cavities/Chases # to Wx _____ ☐ Baffles # to Install _____

Specific Air Infiltration Locations: ☐ All Measures are on Notes Page ☐ Detailed Work Order Attached**Crawlspace:** Access Location: _____ Accessible Not Accessible

Foundation SF _____ Joist 4" 6" 8" Existing Insulation: _____ R-Value: -__ Perimeter _____

Lowest Clearance Point: _____" Condition: Good Average Poor Standing Water Unsanitary

☐ Conditioned ☐ Slab ☐ Unconditioned ☐ Unintentionally ConditionedAccess ☐ Needed ☐ N/AVapor Barrier ☐ Needed ☐ Not NeededInsulation ☐ Needed ☐ Not NeededEntrance Signage (if moisture barrier installed) ☐ Needed ☐ Not Needed

Added Insulation Type: _____ Installed R-Value: _____ Installed Depth: _____"

Specific Air Infiltration Locations: ☐ All Measures are on Notes Page ☐ Detailed Work Order Attached

Livingroom:

☐ ____ # of CFL or LED Replacements in Livingroom Locations:
Specific Air Infiltration Locations: ☐ All Measures are on Notes Page ☐ Detailed Work Order Attached

Bedroom(s): Number of Bedrooms: ____

☐ ____ # of CFL or LED Replacements in Bedrooms Locations:
Specific Air Infiltration Locations: ☐ All Measures are on Notes Page ☐ Detailed Work Order Attached

Bathroom(s): Number of Bathrooms: ____

☐ ____ # of CFL or LED Replacements in Bathroom(s) Bathroom(s) # ____
☐ LowFlow Showerhead(s) Bathroom(s) # ____ ____ # Needed ☐ Not Needed
☐ Wx Plumbing Penetrations Bathroom(s) # ____ ____ # Needed ☐ Not Needed
☐ Bathroom Exhaust Ventilation Bathroom(s) # ____ ____ # Needed ☐ Not Needed
Specific Air Infiltration Locations: ☐ All Measures are on Notes Page ☐ Detailed Work Order Attached

Hallway:

☐ ____ # of CFL or LED Replacements in Hallway Locations:
Specific Air Infiltration Locations: ☐ All Measures are on Notes Page ☐ Detailed Work Order Attached

Laundry Room:

☐ ____ # of CFL or LED Replacements in Laundry Room Locations:
☐ Wx Plumbing Penetrations ☐ Needed ☐ Not Needed
☐ Dryer Vent Replace or Wx ☐ Needed ☐ Not Needed
Specific Air Infiltration Locations: ☐ All Measures are on Notes Page ☐ Detailed Work Order Attached

Kitchen:

<input type="checkbox"/> ____ # of CFL or LED Replacements in Kitchen	Locations:
<input type="checkbox"/> Refrigerator Top Freezer / Side By Side	<input type="checkbox"/> Replace <input type="checkbox"/> Don't Replace
<i>Kwh/yr: ____ Age ____ yrs Seal: good poor Metered: Yes No Meter Min: ____ Kwh: ____</i>	
<input type="checkbox"/> Cookstove Exhaust Ventilation	<input type="checkbox"/> Needed <input type="checkbox"/> Not Needed
<input type="checkbox"/> Wx Plumbing Penetrations	<input type="checkbox"/> Needed <input type="checkbox"/> Not Needed
Specific Air Infiltration Locations:	<input type="checkbox"/> All Measures are on Notes Page <input type="checkbox"/> Detailed Work Order Attached

Total # of CFL's / LED's Needed ____

Primary Furnace

Existing Unit Type: <input type="checkbox"/> Wall <input type="checkbox"/> Floor <input type="checkbox"/> Central	<input type="checkbox"/> Heat Pump <input type="checkbox"/> Forced Air <input type="checkbox"/> Electric Portable <input type="checkbox"/> Heated Space <input type="checkbox"/> Electric <input type="checkbox"/> Propane (LP) <input type="checkbox"/> No Input	<input type="checkbox"/> Unvented Space Heater <input type="checkbox"/> Vented Space Heater <input type="checkbox"/> Wood or Pellet Stove <input type="checkbox"/> Unintentionally Heated Space <input type="checkbox"/> Natural Gas <input type="checkbox"/> Wood <input type="checkbox"/> kBTU/Hr Gals/Hr Kw Other
<input type="checkbox"/> Unconditioned Space		
Fuel Type: Drip Leg Sediment Trap Present <input type="checkbox"/>		
Input Units:		
Input Rating: _____		Output Capacity: _____
Efficiency Rating %: 90 80 70		Actual Measured Efficiency: _____%
Heat Pump HSPF or Yr Purchased: _____	<input type="checkbox"/> Pilot / IID	<input type="checkbox"/> Working <input type="checkbox"/> Not Working
Condition: Good Fair Poor		<input type="checkbox"/> Retention Head Recommended
Duct Location: <input type="checkbox"/> Floor <input type="checkbox"/> Ceiling		<input type="checkbox"/> Programmable Thermostat Present
Duct Insulation: <input type="checkbox"/> None <input type="checkbox"/> Above		<input type="checkbox"/> Wall <input type="checkbox"/> Below

Secondary Furnace

Existing Unit Type: <input type="checkbox"/> Wall <input type="checkbox"/> Floor <input type="checkbox"/> Central	<input type="checkbox"/> Heat Pump <input type="checkbox"/> Forced Air <input type="checkbox"/> Electric Portable <input type="checkbox"/> Heated Space <input type="checkbox"/> Electric <input type="checkbox"/> Propane (LP) <input type="checkbox"/> No Input	<input type="checkbox"/> Unvented Space Heater <input type="checkbox"/> Vented Space Heater <input type="checkbox"/> Wood or Pellet Stove <input type="checkbox"/> Unintentionally Heated Space <input type="checkbox"/> Natural Gas <input type="checkbox"/> Wood <input type="checkbox"/> kBTU/Hr Gals/Hr Kw Other
<input type="checkbox"/> Unconditioned Space		
Fuel Type: Drip Leg Sediment Trap Present <input type="checkbox"/>		
Input Units:		
Input Rating: _____		Output Capacity: _____
Efficiency Rating %: 90 80 70		Actual Measured Efficiency: _____%
Heat Pump HSPF or Yr Purchased: _____	<input type="checkbox"/> Pilot / IID	<input type="checkbox"/> Working <input type="checkbox"/> Not Working
Condition: Good Fair Poor		<input type="checkbox"/> Retention Head Recommended
Duct Location: <input type="checkbox"/> Floor <input type="checkbox"/> Ceiling		<input type="checkbox"/> Programmable Thermostat Present
Duct Insulation: <input type="checkbox"/> None <input type="checkbox"/> Above		<input type="checkbox"/> Wall <input type="checkbox"/> Below

Replacements - ALWAYS Attempt as Energy Measure on NEAT/MHEA first. If no SIR is given:

1) Include NEAT Input Report in file AND

2) Document reason(s) why it should be allowed as a H&S cost.

Document reason(s) in the provided section on "Note"s Page.

HVAC Work Order:

Unit Location: _____

Client Name: _____

Phone: _____

Client Address: _____

- ☐ Seal Ducts
- ☐ Build/Seal Return
- ☐ Install / Repair Flue

- ☐ Replace Unit
- ☐ Install Drip Leg
- ☐ Combustion Air

- ☐ Tune-Up / Repair Unit
- ☐ Remove Existing Unit
- ☐ Makeup Air Bypass

Detailed Instructions:

☐ All Measures are on Notes Page ☐ Detailed Work Order Attached

Crew Work Order:

Unit Location: _____

- ☐ Build/Seal Return

- ☐ Wx Unit / Flue
- ☐ Combustion Air

- ☐ Seal Ducts
- ☐ Makeup Air Bypass

Detailed Instructions:

☐ All Measures are on Notes Page ☐ Detailed Work Order Attached

Cooling Unit(s)

Brand: _____ Model #: _____

☐ Central Unit☐ Window A/C # units _____☐ Heat Pump

Duct Location:

☐ Floor☐ Ceiling☐ Wall

Duct Insulation:

☐ None☐ Above☐ Below

Unit 1: SEER _____ or Year _____ Or EER _____ or Year _____ % of House Cooled _____ % Size (kBTU/hr) _____ Efficiency: _____	Unit 2: SEER _____ Or Year _____ EER _____ Or Year _____ % of House Cooled _____ % Size (kBTU/hr) _____ Efficiency: _____
--	---

Unit 3: SEER _____ or Year _____ Or EER _____ or Year _____ % of House Cooled _____ % Size (kBTU/hr) _____ Efficiency: _____	Unit 4: SEER _____ Or Year _____ EER _____ Or Year _____ % of House Cooled _____ % Size (kBTU/hr) _____ Efficiency: _____
--	---

Replacements - ALWAYS Attempt as Energy Measure on NEAT/MHEA first. If no SIR is given:1) Include NEAT Input Report in file **AND**

2) Document reason(s) why it should be allowed as a H&S cost.

Document reason(s) in the provided section on "Note"s Page.**HVAC Work Order:**

Unit Location: _____

Client Name: _____

Phone: _____

Client Address: _____

☐ Seal Ducts☐ Replace Unit☐ Tune-Up / Repair Unit☐ Build/Seal Return☐ Remove Existing Unit**Detailed Instructions:**☐ All Measures are on Notes Page☐ Detailed Work Order Attached**Crew Work Order:**

Unit Location: _____

☐ Build/Seal Return☐ Replace Window A/C☐ Wx Unit☐ Seal Ducts**Detailed Instructions:**☐ All Measures are on Notes Page☐ Detailed Work Order Attached

Water Heater 1

Fuel Type: ☐ Electric ☐ Natural Gas ☐ Propane (LP)

Location Description(s): _____

☐ Unconditioned Space ☐ Heated Space ☐ Unintentionally Heated Space

of Gallons Existing: _____

☐ kBTU / kW

Rated Input : _____

Energy Factor: _____

Recovery Efficiency %: _____

☐ Unit Working ☐ Not Working

R - Value: _____

Estimated Actual Efficiency: _____ %

Drip Leg Sediment Trap Present ☐

Water Heater Wrap: ☐ Present ☐ Not Present

Water Heater Pipe Insulation: ☐ Present ☐ Not Present

Replacements - ALWAYS Attempt as Energy Measure on NEAT/MHEA first. If no SIR is given:

1) Include NEAT Input Report in file AND

2) Document reason(s) why it should be allowed as a H&S cost.

Document reason(s) in the provided section on "Note"s Page.

Plumber Work Order: Water Heater Location: _____

Client Name: _____ **Phone:** _____

Client Address: _____

Work Scope:

☐ Remove Existing Unit

☐ No Work Needed

☐ Replace Unit

☐ Tune-Up / Repair Unit

☐ Pressure Relief

☐ Flue ☐ Pan

☐ Expansion Tank

☐ Combustion Air

☐ 1" Clearance
Drywall/Flue

☐ Drip Leg / Sedimentary Trap

☐ Tank Wrap / Pipe Insulation

Detailed Instructions:

☐ All Measures are on Notes Page

☐ Detailed Work Order Attached

Wx Crew Work Order: Water Heater Location: _____

Work Scope:

☐ Combustion Air

☐ No action necessary

☐ Wx Unit

☐ Wx Flue

☐ Floor Stabilization

☐ WH Blanket

☐ Pressure Relief

☐ Pipe Insulation

☐ 1" Clearance for Drywall/Flue

Detailed Instructions / Air Infiltration: ☐ All Measures are on Notes Page ☐ Detailed Work Order Attached

Water Heater 2

Fuel Type:

☐ Electric

☐ Natural Gas

☐ Propane (LP)

Location Description(s): _____

☐ Unconditioned Space

☐ Heated Space

☐ Unintentionally Heated Space

of Gallons Existing: _____

☐ kBTU / kW

Rated Input : _____

Energy Factor: _____

Recovery Efficiency %: _____

☐ Unit Working Not Working

Existing R - Value: _____

Estimated Actual Efficiency: _____%

Drip Leg Sediment Trap
Present ☐ Not Present ☐

Water Heater Wrap: ☐ Present ☐ Not Present

Water Heater Pipe Insulation: ☐ Present ☐ Not Present

Replacements - ALWAYS Attempt as Energy Measure on NEAT/MHEA first. If no SIR is given:

1) Include NEAT Input Report in file AND

2) Document reason(s) why it should be allowed as a H&S cost.

Document reason(s) in the provided section on "Note"s Page.

Plumber Work Order: Water Heater Location: _____

Client Name: _____ **Phone:** _____

Client Address: _____

Work Scope:

☐ No Work Needed

☐ Tune-Up / Repair Unit

☐ Remove Existing Unit

☐ Replace Unit

☐ Expansion Tank

☐ Pressure Relief

☐ Flue ☐ Pan

☐ Drip Leg / Sedimentary Trap

☐ Combustion Air

☐ 1" Clearance
Drywall/Flue

☐ Tank Wrap / Pipe Insulation

Detailed Instructions:

☐ All Measures are on Notes Page

☐ Detailed Work Order Attached

Wx Crew Work Order: Water Heater Location: _____

Work Scope:

☐ No action necessary

☐ Wx Flue

☐ Wx Unit

☐ Pipe Insulation

☐ Combustion Air

☐ WH Blanket

☐ 1" Clearance for Drywall/Flue

☐ Floor Stabilization

☐ Pressure Relief

Detailed Instructions / Air Infiltration: ☐ All Measures are on Notes Page ☐ Detailed Work Order Attached

Electrical

☐ Breaker Box - Voltage/Amps: _____

☐ Unconditioned Space

☐ Conditioned Space

Breaker Box Location(s)

Electrician Work Order:

Client Name: _____ Phone: _____

Client Address: _____

Work Scope:

☐ No action necessary

☐ Install Ventilation Per Code, ASHRAE 62.2 & SWS

☐ Install Additional Circuit Breakers

☐ Repair Wiring

Location: _____

☐ Junction Boxes

Location: _____

☐ Install Outlet

Location: _____

Detailed Instructions:

☐ All Measures are on Notes Page

☐ Detailed Work Order Attached

Wx Crew Work Order:

Crew:

☐ Wx Breaker Box

Detailed Instructions:

☐ All Measures are on Notes Page

☐ Detailed Work Order Attached

Additional Instructions / Notes:

☐☐☐☐☐☐☐☐☐☐☐

If H&S Funds are needed in order to Replace a Water Heater, Furnace, or Cooling Unit, please explain the reason(s) it is considered a H&S issue and needs replaced:

NEAT/MHEA Audit Recommendation Deviations

☐

NEAT/MHEA Recommendation:

Reason for Deviation:

☐

NEAT/MHEA Recommendation:

Reason for Deviation:

☐

NEAT/MHEA Recommendation:

Reason for Deviation:

☐

NEAT/MHEA Recommendation:

Reason for Deviation:

Additional Instructions / Notes:

☐☐☐☐☐☐☐☐☐☐☐

If H&S Funds are needed in order to Replace a Water Heater, Furnace, or Cooling Unit, please explain the reason(s) it is considered a H&S issue and needs replaced:

NEAT/MHEA Audit Recommendation Deviations

☐

NEAT/MHEA Recommendation:

Reason for Deviation:

☐

NEAT/MHEA Recommendation:

Reason for Deviation:

☐

NEAT/MHEA Recommendation:

Reason for Deviation:

☐

NEAT/MHEA Recommendation:

Reason for Deviation:

Quality Control Report

Client Name: _____	<input type="checkbox"/> Wx Completed or <input type="checkbox"/> In Progress	
Address: _____		
Phone: _____	Street	City & County
	Own <input type="checkbox"/>	Rent <input type="checkbox"/>
<u>Housing:</u>	Single Family <input type="checkbox"/>	Mobile Home <input type="checkbox"/>
<u>Fuel Type</u>	Natural gas <input type="checkbox"/>	Propane <input type="checkbox"/>
	Multi-family <input type="checkbox"/>	Electric <input type="checkbox"/>

* **Attic Insulation** (no knob and tube)

Installed: ☐ Blown Cellulose ☐ Blown Fiberglass ☐ Batts ☐ Dense Pack ☐ Other _____

Total sf ft. of insulated attic space:
 Existing depth documented at audit:
 Addition depth required:
 # of bags required:
 # used:
 Certificate:
 Flags:
 Depth markers:
 Attic Hatch/Access Insulated
 Can light(s) sealed:
 Vent pipes sealed/dammed:
 Chimney sealed/dammed:

Verified By QCI		Verified By ODOC State QCI	
	sf		sf
	in		in
	in		in
	#bags		#bags
	#bags		#bags
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N

Comments

* **Wall Insulation** (no knob and tube)

Installed: ☐ Blown Cellulose ☐ Blown Fiberglass ☐ Batts ☐ Dense Pack ☐ Other _____

Total cu ft. of wall:
 Estimate of bags to be used:
 Actual # of Bags used:
 Air leakage points sealed:

	cf		cf
	#bags		#bags
	#bags		#bags
Y	N	Y	N

* **Floor Insulation**

Installed: ☐ Blown Cellulose ☐ Blown Fiberglass ☐ Batts ☐ Dense Pack ☐ Other _____

Total sq. feet of floor to be insulated:
 Estimated amount of material needed:
 Actual Amount of Material Used:

	sf		sf

* **Crawl Space**

Entrance Location: _____

Hatch Size _____

Lowest Point of Clearance _____

	in		in
	in		in
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N

Ground Condition: Dry
 Moist or Standing Water
 Ground Moisture barrier installed
 Entrance Signage

* **Air Sealing**

Top Plates:
 Wire Holes:
 Flue pipes:
 Plumbing penetrations:
 Vent pipes:
 Chimneys:
 Hatches:
 Knee walls:
 Open chases:
 Can lights: # sealed _____
 Other:

Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N
Y	N	Y	N

Initial Audit Date: _____ Agency: _____

Post Wx Date: _____ QCI Date: _____ ODOC QA Date: _____

Agency Wx Crew	RRP	Fit Test	OSHA	
Wx QCI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 10	<input type="checkbox"/> 30
Energy Auditor:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 10	<input type="checkbox"/> 30
Crew Leader:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 10	<input type="checkbox"/> 30
Retrofit Installer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 10	<input type="checkbox"/> 30
Retrofit Installer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 10	<input type="checkbox"/> 30

Material & Health and Safety Measures Completed

<input checked="" type="checkbox"/> OQCI	Measure	Receipts	Work Plan	NEAT/MHEA Audit	SIR	H/S	Installed	Comments
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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CONTINUE ON NEXT PAGE

Material & Health and Safety Measures Completed (cont. from previous page)

<input checked="" type="checkbox"/> OQCI	Measure	Receipts	Work Plan	NEAT/MHEA Audit	SIR	H/S	Installed	Comments
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Line #____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Quality Control Inspector Weatherization Close-Out

- ☐ I have reviewed Form 28 - H&S as well as confirmed visually and diagnostically that all H&S Issues were identified and addressed. Client was educated accordingly. OR

☐ The Following H&S Issues/Concerns Were Overlooked or Not Addressed Properly:

**Client Comments and
Satisfaction Level:** _____

QCI Required Corrections / Comments

CHECK BOXES BELOW if Correction is Required ☒

QCI Initial & Date Once Correction is Completed	File /Audit Discrepancies:	<input type="checkbox"/>
QCI Initial & Date Once Correction is Completed	File /Audit Discrepancies:	<input type="checkbox"/>
QCI Initial & Date Once Correction is Completed	File /Audit Discrepancies:	<input type="checkbox"/>
QCI Initial & Date Once Correction is Completed	Air Infiltration Missed:	<input type="checkbox"/>
QCI Initial & Date Once Correction is Completed	Air Infiltration Missed:	<input type="checkbox"/>
QCI Initial & Date Once Correction is Completed	Air Infiltration Missed:	<input type="checkbox"/>
QCI Initial & Date Once Correction is Completed	Air Infiltration Missed:	<input type="checkbox"/>
QCI Initial & Date Once Correction is Completed	Other Discrepancies:	<input type="checkbox"/>
QCI Initial & Date Once Correction is Completed	Other Discrepancies:	<input type="checkbox"/>
QCI Initial & Date Once Correction is Completed	Other Discrepancies:	<input type="checkbox"/>
QCI Initial & Date Once Correction is Completed	Other Discrepancies:	<input type="checkbox"/>

By providing my signature below, I hereby certify the following:

- This unit has been inspected.
- All NEAT/MHEA recommended measures and any required Health and Safety measures have been inspected following Department of Energy, Oklahoma Department of Commerce and DOE Standard Work Specifications guidelines.
- PRE and Post Pressure Diagnostic test were verified.
- Worst Case Combustion Appliance Testing at the end of each work day was verified as completed unless no air sealing was done during the work day or CAZ was correctly isolated.

Agency Quality Control Inspector

Do Not Sign Below Until ALL Corrections Are Completed and Documented

Quality Control Inspector Printed Name

Quality Control Inspector Signature

Final Close Out Date

ODOC Quality Assurance Inspector Weatherization Close-Out

- ☐ I have reviewed Form 28 - H&S as well as confirmed visually and diagnostically that all H&S Issues were identified and addressed. Client was educated accordingly. OR

☐ The Following H&S Issues/Concerns Were Overlooked or Not Addressed Properly:

**Client Comments and
Satisfaction Level:** _____

ODOC QA Required Corrections / Comments

CHECK BOXES BELOW if Correction is Required ☒

ODOC QA Initial & Date Once Correction is Completed	File/Audit Discrepancies:	<input type="checkbox"/>
ODOC QA Initial & Date Once Correction is Completed	File/Audit Discrepancies:	<input type="checkbox"/>
ODOC QA Initial & Date Once Correction is Completed	File/Audit Discrepancies:	<input type="checkbox"/>
ODOC QA Initial & Date Once Correction is Completed	Air Infiltration Missed:	<input type="checkbox"/>
ODOC QA Initial & Date Once Correction is Completed	Air Infiltration Missed:	<input type="checkbox"/>
ODOC QA Initial & Date Once Correction is Completed	Air Infiltration Missed:	<input type="checkbox"/>
ODOC QA Initial & Date Once Correction is Completed	Air Infiltration Missed:	<input type="checkbox"/>
ODOC QA Initial & Date Once Correction is Completed	Other Discrepancies:	<input type="checkbox"/>
ODOC QA Initial & Date Once Correction is Completed	Other Discrepancies:	<input type="checkbox"/>
ODOC QA Initial & Date Once Correction is Completed	Other Discrepancies:	<input type="checkbox"/>
ODOC QA Initial & Date Once Correction is Completed	Other Discrepancies:	<input type="checkbox"/>

By providing my signature below, I hereby certify the following:

- This unit has been inspected.
- All NEAT/MHEA recommended measures and any required Health and Safety measures have been inspected following Department of Energy, Oklahoma Department of Commerce and DOE Standard Work Specifications guidelines.
- PRE and Post Pressure Diagnostic test were verified.
- Worst Case Combustion Appliance Testing at the end of each work day was verified as completed unless no air sealing was done during the work day or CAZ was correctly isolated.

ODOC Quality Assurance Inspector

Do Not Sign Below Until ALL Corrections Are Completed and Documented

Quality Assurance Inspector Printed Name

Quality Assurance Inspector Signature

Final Close Out Date

ENERGY AUDIT RFP TRAINING AND TECHNICAL ASSISTANCE WORK PLAN COVER PAGE

Delete this Text and Insert the Following Information:

Date

Name of Organization

Primary Contact Person

Primary Contact Email

Primary Contact Phone

This training and technical assistance plan describes what we will do to meet the following outcomes (SELECT ONE OR MORE):

NEAT/MHEA and Energy Audit Training - C.2

Conduct onsite classroom based, in the field, and remote (webinar or phone) based trainings on Energy Audit processes, data entry, and data analysis of WA 8.9. Trainings would be for Subgrantees, ODOC staff, and for Oklahoma's IREC accredited weatherization-training center

- ☐ B.4.2.1.1 - Increase Subgrantee knowledge of WA 8.9 NEAT/MHEA audit software and quality of Oklahoma energy audits.
- ☐ B.4.2.1.2 - Train ODOC Staff, any ODOC Contractors, and Oklahoma's Training Manager at Oklahoma's IREC accredited weatherization training center to be expert trainers and technical assistance providers for WA 8.9 NEAT/MHEA.

NEAT/MHEA Technical Manual and Policy Development – C.3

Assist ODOC with the development of technical energy audit related policies.

- ☐ B.4.2.2.1 Develop a comprehensive ODOC Energy Audit Manual to meet DOE's requirement
- ☐ B.4.2.2.2 Assess if there is any need for additional Energy Audit policies (in addition to the technical manual). Make recommendations to ODOC.

Energy Audit Form and Process Development and Implementation – C.4

Assist ODOC with review of energy audit forms and required processes/procedures and recommend changes. Help ODOC develop processes and forms if needed to implement recommended changes.

- ☐ B.4.2.3.1 - Improve the quality of ODOC technical energy audit forms and processes

Monitoring Process and Tool Improvements – C.5

Assist ODOC with development or improvement of energy audit monitoring tool and monitoring tool processes.

- ☐ B.4.2.4.1 - Improve the quality of ODOC technical oversight and monitoring processes over the energy audit.

Desktop Review and Pre-Authorization of Energy Audits – C.6

ODOC provides pre-authorization on a sampling of energy audits and client files before Subgrantees can begin work. Assist ODOC with these tasks in an ongoing manner and use information from the desktop reviews to develop online retention trainings to reinforce concepts as needed.

- ☐ B.4.2.5.1 - Increase the quality of energy audits and eliminate the risk of disallowable measures being called for on audits.
- ☐ B.4.2.5.2 - Improve training quality and state policy effectiveness based on audit information reviewed.



Vendor/Payee Form

Agency: OMES Vendor Management requires the following information for all new non-registered vendors (payees) before payments may be processed. Information is used to establish the payee in the State's PeopleSoft vendor file for payment and procurement activities.

DO NOT use this form for:

- **Garnishment Payees:** Use [OMES Form GarnVendor](#)
- **State Employees:** Use [OMES Employee Vendor Request Form](#)
- **Vendors pending contract award** to a solicitation released by the division of Central Purchasing or another Oklahoma state agency **MUST** first register online with the state unless exempt per statute. For additional information, please refer to [Central Purchasing Vendor Registration](#).

AGENCY SECTION (To be completed by state agency representative):

State agency representative should provide form to payee for completion of the vendor section shown below. Upon receipt of the completed form the agency should enter request instructions below. Please email completed and signed form to vendor.form@omes.ok.gov or fax to 405-522-3663.

Agency Name		Contact Name	
Phone #		Fax #	
Agency Request To – Please select all applicable request types			
<input type="checkbox"/> Add New Vendor	<input type="checkbox"/> Update Existing Vendor	PeopleSoft 10-digit Vendor ID _____	
<input type="checkbox"/> Add New Address	<input type="checkbox"/> Change Address/Location	PeopleSoft Address # _____	PeopleSoft Location # _____
<input type="checkbox"/> Change Vendor Tax ID	<input type="checkbox"/> Change Vendor Name	<input type="checkbox"/> Add Alternate Payee Name	PeopleSoft Location # _____
<input type="checkbox"/> Other	Explain _____		
Vendor 1099 Reportable Status	Attention Paying Agency: Please check the Add box on the left if payments to this vendor/payee are represented by Account Codes listed on page 3 of this form. If the vendor is incorrectly showing as 1099 Reportable, check the Remove box. The PeopleSoft system requires specific details regarding the type of transaction. Please check the box that applies to this vendor:		
<input type="checkbox"/> Add:	<input type="checkbox"/> 1 - Rents <input type="checkbox"/> 2 - Royalties <input type="checkbox"/> 3 - Other Income <input type="checkbox"/> 6 - Medical & Health Care <input type="checkbox"/> 7 - Non-Employee Compensation <input type="checkbox"/> 10 - Crop Insurance Proceeds <input type="checkbox"/> 14 - Gross Proceeds to an Attorney		
<input type="checkbox"/> Remove:			

VENDOR/PAYEE SECTION (To be completed by vendor/payee)

Please print legibly or type information. Form must be completed and signed by authorized individual. Email or fax to requesting state agency.

Payee Information: Please provide the requested information for the payee receiving funds from the Oklahoma state agency. All information should match U.S. Internal Revenue Service filing records for the business, individual or government entity receiving payment.						
Name				Contact Name		
<i>Payee Legal Name for Business, Individual or Government Entity as filed with IRS</i>				Contact Title		
DBA Name				Phone #		
<i>Doing Business As "DBA", or Disregarded Entity Name if different than Legal Name</i>				Fax #		
Tax Identification Number (TIN) and Type:			<input type="checkbox"/> Federal Employer ID (FEIN) <input type="checkbox"/> Social Security Number (SSN)			
Business Address -- Please provide primary address as reflected on payee's annual U.S. Internal Revenue Service tax documentation						
Address				City		
State		Zip+4		Remittance Email		
Optional Addresses – Please select address type as applicable						
Type:	<input type="checkbox"/> Remitting	<input type="checkbox"/> Ordering	<input type="checkbox"/> Pricing	<input type="checkbox"/> Returning	<input type="checkbox"/> Mailing	<input type="checkbox"/> Other:
Address				City		
State		Zip+4		Remittance Email		
Financial Registration: Please provide contact information for the Authorized Individual who can provide financial information used for ACH Electronic Funds Transfer payment processes. An email will be sent providing instructions for accessing the State of Oklahoma online registration system.						
Name			Title		Email	

The information below is requested under U.S. Tax Laws. Failure to provide this information may prevent you from being able to do business with the state, or may result in the state having to deduct backup withholding amounts from future payments.

U.S. Taxpayer Identification Number (TIN)

Please provide tax identification number applicable for payee IRS tax reporting

Federal Employer Identification Number (FEIN) _____ If none, but applied for, date applied _____

U.S. Social Security Number (SSN) _____ If none, but applied for, date applied _____

Entity Filing Classification:

☐ Domestic (U.S.) Sole Proprietor or Individual ☐ Domestic (U.S.) Partnership ☐ Domestic (U.S.) Corporation Type: _____

☐ Limited Liability Company Type: _____

LLC Disregarded Entity: ☐ YES ☐ NO **Must be verified by LLC's tax division. If applicable, parent name/tax id is required.**

☐ Domestic (U.S.) Other Explain: _____

☐ Foreign (Non-U.S.) Sole Proprietor or Individual* ☐ Foreign (Non-U.S.) Partnership* ☐ Foreign (Non-U.S.) Type: _____

☐ Foreign (Non-U.S.) Other* Explain: _____

FOREIGN VENDOR INSTRUCTIONS:

*** ADDITIONAL DOCUMENTATION IS REQUIRED.**

Please submit the proper U.S. Internal Revenue Service (IRS) Form W-8, Certificate of Foreign Status. Select form below matching the payee's entity or individual description. Please refer to IRS for additional instructions (<http://www.irs.gov/pub/irs-pdf/iw8.pdf>).

- **Form W-8BEN:** Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals). <http://www.irs.gov/pub/irs-pdf/iw8ben.pdf>
- **Form W-BEN-E:** Certificate of Status of Beneficial Owner for United States Tax Withholding and Reporting (Entities). <http://www.irs.gov/pub/irs-pdf/iw8bene.pdf>
- **Form W-8ECI:** Certificate of Foreign Person's Claim That Income is Effectively Connected With the Conduct of a Trade or Business in the United States. <http://www.irs.gov/pub/irs-pdf/iw8eci.pdf>
- **Form W-8EXP:** Certificate of Foreign Government or Other Foreign Organization for United States Tax Withholding and Reporting. <http://www.irs.gov/pub/irs-pdf/iw8exp.pdf>
- **Form W-8IMY:** Certificate of Foreign Intermediary, Foreign Flow-Through Entity, or Certain U.S. Branches for United States Tax Withholding and Reporting. <http://www.irs.gov/pub/irs-pdf/iw8imy.pdf>

This may exempt you from backup withholding. Form W-8 does not exempt you from the 30% (or lower percentage by treaty) non-resident withholding taxes. To claim this exemption, you must file IRS Form 8233 with us. For more information, refer to IRS Publication 519.

SIGNATURE - AND SUBSTITUTE IRS FORM W-9 CERTIFICATION

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below), and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement account (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN.

Signature of Vendor Representative or Individual Payee

Date

Title of individual signing form for company

Vendor/Payee (Must be the same as Payee Name from page 1)

Account Codes for 1099 Reporting - By Category (TO BE COMPLETED BY AGENCY REPRESENTATIVE)

<input type="checkbox"/> 1 - RENTS 532110 Rent of Office Space 532120 Rent of Land 532130 Rent of Other Building Space 532140 Rent of Equipment and Machinery 532150 Rent of Telecommunications Equip 532160 Rent of Electronic Data Processing Equipment 532170 Rent of Electronic Data Processing Software 532190 Other Rents	<input type="checkbox"/> 1- RENTS (continued) 532141 Rent of Motor Vehicles 532142 Lease of Motor Vehicles <input type="checkbox"/> 2 – ROYALTIES 553170 Royalties	<input type="checkbox"/> 3 – OTHER INCOME 552120 Incentive Awards – Monetary & Material 552160 Incentive Payments – Oklahoma Horse Breeders & Owners 552170 Incentive Payments – Oklahoma Film Enhancement Rebate 553165 Current/Former Employee Reportable Court Ordered or Legal Settlements 553220 Other IRS Reportable Income		
<input type="checkbox"/> 6 - MEDICAL & HEALTH CARE PAYMENTS <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> 515530 Veterinary Services 515700 Offices of Physicians (except Mental Health Specialists) 515710 Offices of Physicians, Mental Health Specialists 515720 Offices of Dentists 515730 Offices of Chiropractors 515740 Offices of Optometrists 515750 Offices of Mental Health Practitioners (except Physicians) 515760 Offices of Physical, Occupational & Speech Therapists, & Audiologists 515770 Offices of Podiatrists 515780 Offices of all other Miscellaneous Health Practitioners 515790 Family Planning Centers 515800 Outpatient Mental Health & Substance Abuse Centers 515810 Other Outpatient Care Centers 515820 Medical and Diagnostic Laboratories </td> <td style="width: 50%; vertical-align: top;"> 515830 Home Health Care Services 515840 Ambulance Services 515850 All other Ambulatory Health Care Services 515860 General Medical & Surgical Hospitals 515870 Psychiatric & Substance Abuse Hospitals 515880 Specialty Hospitals (except Psychiatric & Substance Abuse) 515890 Nursing Care Facilities 515900 Residential Services for People with Developmental Disabilities 515910 Residential Mental Health & Substance Abuse Facilities 515920 Community Care Facilities for the Elderly 515930 Other Residential Care Facilities 537210 Laboratory Services & Supplies 551230 Medical Services to Indigents (from agencies other than DHS) 551240 Hospital Services to Indigents (from agencies other than DHS) 551250 Other Health Services to Indigents (from agencies other than DHS) </td> </tr> </table>			515530 Veterinary Services 515700 Offices of Physicians (except Mental Health Specialists) 515710 Offices of Physicians, Mental Health Specialists 515720 Offices of Dentists 515730 Offices of Chiropractors 515740 Offices of Optometrists 515750 Offices of Mental Health Practitioners (except Physicians) 515760 Offices of Physical, Occupational & Speech Therapists, & Audiologists 515770 Offices of Podiatrists 515780 Offices of all other Miscellaneous Health Practitioners 515790 Family Planning Centers 515800 Outpatient Mental Health & Substance Abuse Centers 515810 Other Outpatient Care Centers 515820 Medical and Diagnostic Laboratories	515830 Home Health Care Services 515840 Ambulance Services 515850 All other Ambulatory Health Care Services 515860 General Medical & Surgical Hospitals 515870 Psychiatric & Substance Abuse Hospitals 515880 Specialty Hospitals (except Psychiatric & Substance Abuse) 515890 Nursing Care Facilities 515900 Residential Services for People with Developmental Disabilities 515910 Residential Mental Health & Substance Abuse Facilities 515920 Community Care Facilities for the Elderly 515930 Other Residential Care Facilities 537210 Laboratory Services & Supplies 551230 Medical Services to Indigents (from agencies other than DHS) 551240 Hospital Services to Indigents (from agencies other than DHS) 551250 Other Health Services to Indigents (from agencies other than DHS)
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<input type="checkbox"/> 14 - GROSS PROCEEDS TO AN ATTORNEY 553180 Settlements – Paid To/Thru Attorney				