



Southeast Side  
**COMMUNITY**  
Business District  
Special Service Area 5

---

10241 S. Commercial Ave. • Chicago, IL 60617 • 778-235-0345 • Fax 708-235-0355

**South Chicago Parents & Friends, Inc.**  
**Service Provider for**  
**Special Service Area 5**  
Request for Proposal: Security Contractor

Proposal Number: 0003  
Release Date: November 2, 2020

SUBMITTING A COMPLETE AND TIMELY PROPOSAL IN RESPONSE TO THIS RFP IS THE SOLE RESPONSIBILITY OF EACH RESPONDENT. SOUTH CHICAGO PARENTS & FRIENDS, INC. IS NOT ACCOUNTABLE FOR DELAYS CAUSED BY ANY MAIL, PACKAGE OR COURIER SERVICE, INCLUDING U.S. MAIL, OR CAUSED BY ANY OTHER OCCURRENCE. SCP&F IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE BASED ON AGE, GENDER, RACE, SEXUAL ORIENTATION OR DISABILITY.

## TABLE OF CONTENTS

TABLE OF CONTENTS .....	1
INTRODUCTION .....	3
Overview .....	3
Term of Contract.....	3
Special Regulations.....	3
PROFESSIONAL SERVICE REQUIREMENTS.....	4
Scope of Services.....	4
Reporting Requirements .....	5
Additional Requirements .....	6
SUBMITTAL REQUIREMENTS.....	7
Letter of Interest.....	7
Threshold Requirements .....	7
Main Proposal .....	8
SELECTION PROCESS .....	9
QUESTIONS .....	9
SUBMITTAL DUE DATE.....	9
CERTIFICATION FORM .....	10
RFP SUBMITTAL REQUIREMENTS CHECKLIST.....	11
APPENDIX A: CONFLICT OF INTEREST STATEMENT .....	12
APPENDIX B: Special Service area #5 Boundaries and map.....	13

## INTRODUCTION

### **Overview**

This Request for Proposal (“RFP”) is being issued by South Chicago Parents & Friends, Inc. (“SCP&F”) in its capacity as the managing Local Service Provider (“LSP”) of the Special Service Area 5 (the “SSA”) for the City of Chicago. The purpose of this notice is to solicit qualifications from Security Contractors.

Contractors with demonstrated experience in providing security for large service areas and with an interest in making their services available to SCP&F are invited to respond to this RFP. “Respondent” refers to the company or individual(s) that submits a proposal in response to this RFP. It is understood that the selected Respondent acting as an individual, partnership, corporation or other legal entity, is state-licensed, certified and capable of providing the specified services. The Respondent shall be financially solvent and each of its members, if a joint venture, its employees, agents or sub-contractors of any tier shall be competent to perform the services required under this RFP document.

Nothing in this RFP shall be construed to create any legal obligation on the part of the SCP&F or any Respondent. SCP&F reserves the right, in its sole discretion, to amend, suspend, terminate, or reissue this RFP in whole or in part, at any stage. In no event shall SCP&F be liable to Respondents for any cost or damages incurred in connection with the RFP process, including but not limited to, any and all costs of preparing a response to this RFP or any other costs incurred in reliance on this RFP. No respondent shall be entitled to repayment from SCP&F for any costs, expenses or fees related to this RFP. All supporting documentation submitted in response to this RFP will become the property of SCP&F. Respondents may also withdraw their interest in the RFP, in writing, at any point in time as more information becomes available.

### **Term of Contract**

Any contract awarded pursuant to this RFP solicitation shall be for a contract period of 2 years.

### **Special Regulations**

The successful Respondent implementing the scope of services must comply with the South Chicago Parents and Friends, Inc. Contract Agreement for 2021 with the City of Chicago ([www.cityofchicago.org](http://www.cityofchicago.org)). Respondents are strongly encouraged to read these regulations prior to submitting their response to this RFP.

## PROFESSIONAL SERVICE REQUIREMENTS

### *Scope of Services*

South Chicago Parents & Friends, Inc. seeks sealed proposals from qualified Respondents to provide security services for the specified service area. **See Appendix B – Special Service Area Boundaries and Map.**

Respondent shall provide armed, uniformed security services implementing SSA 5 security objectives. Security services shall be conducted Sunday through Saturday, from 10:00 a.m. to 8:00 p.m. The Respondent shall respond as necessary to accommodate additional hours as may be requested by the SCP&F and adjust service hours should conditions require it. All work performed shall be completed on the days indicated on the approved work schedule and may be changed with the approval of the SSA Program Manager. The successful Respondent shall provide staffing to perform security services in the event of unforeseen changes, special events or emergencies. A 24-hour emergency phone number and name of contact person shall be provided to SCP&F.

The Respondent shall be solely responsible for the appropriate and necessary management, and supervision of all its employees, including but not limited to providing adequate uniforms and equipment needed to continuously meet and perform contract requirements. All equipment utilized by the Respondent in the execution of the agreement shall be maintained by the Respondent. In addition, the Respondent shall administer all cost accounting and billing relative to this contract.

The successful Respondent shall provide the following:

#### General Requirements

- Provide security for businesses and its customers, buildings, and vehicles that are located within the service area. This includes, but is not limited to,
  - Roving patrols of interior and exterior building areas
  - Monitoring and responding to base building intrusion detection systems
  - Responding as necessary to support life-saving duties as identified in post orders
  - Making rounds of assigned areas and key locations
  - Assuring locks of gates and doors
  - Respond to requests for service, alarms, suspicious activities, fires, injuries, security incidences, or any emergency situations
- Create records in real time of each incident and/or unsafe condition, including photographs as necessary. These records should be transmitted electronically to persons designated by SSA.
- Provide a monthly summary of Incident and Unsafe Condition records and participate in monthly SSA Security Committee meeting to identify corrective actions to improve safety and security within commercial district.
- Follow guidelines and requirements set forth in the Post Orders (see below).
- Communicate with a broad diversity of persons, including the communication of information to patrons in a courteous and professional manner.
- Perform any other duties or functions not specifically outlined or set forth above but which are reasonably identified as falling within the scope and realm of a security contractor's duties and responsibilities.

#### Tracking System

- The chosen security firm is required to provide a method of tracking the progress of each patrol. This can include GPS tracking in each vehicle or Radio Frequency Identification System (RFID)

#### Communications and Records

- Officers shall be in communication with Respondent headquarters and shall have mobile communication capability to contact police.
- Respondent shall provide accurate, legible reports of daily activity (DARs) and submit to the SSA monthly.

- The DARs should include, but not be limited to, all unsafe equipment or conditions and any accidents or injuries occurring within the service area.
- In the event of an emergency, incidents shall be reported to the designated SSA representative immediately.

#### Post Orders

The successful Respondent shall provide “post orders” to guide the performance of its security personnel while servicing the SSA. The Respondent shall submit a complete, final copy of the post orders for the SSA Commission’s review and approval by no more than 15 days from the finalization of this contract. These post orders shall be prepared in consultation with the SSA and shall be subject to regular update and inspection. The Respondent shall provide interested parties, upon request and adequate notice, access to the existing post orders. The existing post orders will be made available for review at the SSA’s office.

Post orders shall be type-written and contain complete duty instructions for staffing, including provisions for handling critical incidents (emergency procedures). All contract security personnel shall have access to these post orders at all times while on duty. All contract security personnel are responsible for knowing the locations of these written post orders and shall be familiar with their contents. The SSA shall have a comprehensive set of all post orders in their possession.

Post orders define the basic work to be performed by contract security personnel. Post orders shall include, but are not limited to:

- Service area information (e.g. business operations, bus schedules and LSP information)
- Vehicular traffic control
- Access control procedures
- Emergency and critical incident response procedures
- Security and communication control systems
- Response to injury and illness
- Safeguarding property located within service area
- Interaction with businesses and vendors, and the broader service area community

#### ***Special Service Area 5 Boundaries and Communities***

##### Communities

- South Chicago

##### Boundaries

- Commercial Avenue from 87<sup>th</sup> Street to 93<sup>rd</sup> Street.
- 92<sup>nd</sup> Street from South Chicago Avenue to Lake Shore Drive.
- 91<sup>st</sup> Street from Exchange Avenue to Houston Avenue.

#### ***Reporting Requirements***

The Respondent is to report to the SSA Commissioners and SCP&F and will cooperate and confer as necessary to ensure work completed is satisfactory. All reports, estimates, memoranda and documents submitted by the successful Respondent must be dated and bear the successful Respondent’s name. All reports made in connection with these services are subject to review and final approval by the SSA Commissioners and SCP&F. SSA Commissioners and SCP&F may review and inspect the Respondent’s activities during the term of this contract. When applicable, the successful Respondent shall submit written reports to the Commissioners and SCP&F. After reasonable notice to the successful Respondent, the Commissioners and SCP&F may review any of the successful Respondent’s internal records, reports, or insurance policies.

***Additional Requirements***

This project will comply with all codes, standards, regulations, and workers' safety rules that are administered by federal, state and city agencies (HUD, EPA, OSHA, DNR, DCH, and DOT) and any other local regulations and standards (i.e. local ordinance and building codes) that may apply.

This contract is binding with South Chicago Parents & Friends, Inc. and the successful Respondent, their successors and assigns. Neither SCP&F nor the successful Respondent will assign or transfer its interest in this contract without written consent of the other. Changes mutually agreed upon by SCP&F and the successful Respondent will be incorporated into this contract by written amendments signed by both parties.

Termination shall be without cause. Either party may terminate the contract by giving forty-five (45) day written notice to the other party.

The successful Respondent is responsible for all applicable state and federal social security benefits and unemployment taxes and agrees to indemnify and protect SCP&F against such liability.

## SUBMITTAL REQUIREMENTS

RFP responses must be submitted both via hard copy and scanned e-mail copy sent to [dprice@scpf-inc.org](mailto:dprice@scpf-inc.org). Hard copy should be mailed to the address listed on page eight (8) of this RFP. Each respondent shall submit one (1) original and one (1) copy of the following documents in an 8.5 by 11-inch format. Responses not submitted both via hard copy and e-mail will not be considered.

South Chicago Parents & Friends, Inc. reserves the right to seek additional information to clarify responses to this RFP.

Each response must include the following:

### ***Letter of Interest***

Please submit a Cover Letter of Interest signed by a duly authorized officer or representative of the Respondent, not to exceed two pages in length. The Letter of Interest must also include the following information:

1. The principal place of business and the contact person, title, telephone/fax numbers and email address.
2. A brief summary of the qualifications of the Respondent and team.
3. Description of the organization (i.e. Corporation, Limited Liability Company, or Joint Venture).
4. The names and business addresses of all Principals of the Respondent. For purposes of this RFP “Principals” shall mean persons possessing an ownership interest in the Respondent.
5. If the Respondent is a partially-owned or fully-owned subsidiary of another organization, identify the parent organization and describe the nature and extent of the parent organization’s approval rights, if any, over the activities of the Respondent.
6. The Certification Form attached at the end of this RFP and incorporated herein by reference must be signed by Respondent and attached to the Letter of Interest.

### ***Threshold Requirements***

These documents must be submitted and acceptable before South Chicago Parents & Friends, Inc. will review the Experience and Capacity proposal:

1. Certificate of Good Standing (Corporation) or Certificate of Existence (Limited Liability Company) issued by the Illinois Secretary of State (If Respondent is a joint venture, a Certificate of Good Standing or Certificate of Existence, as applicable, must be submitted for each entity comprising the joint venture.)
2. Evidence of Insurance: Commercial General Liability (Primary and Umbrella) with limits not less than \$1,000,000 per occurrence for bodily injury, personal injury, and property damage; Workers Compensation and Employers Liability with limits not less than \$500,000 each accident, illness and/or disease; and, Automobile Liability (Primary and Umbrella) with limits not less than \$1,000,000 per occurrence for bodily injury and property damage. Professional Liability covering acts, errors, or omissions must be maintained with limits not less than \$1,000,000. The Special Service Area Commission, City of Chicago, and South Chicago Parents & Friends, Inc. are to be named as additional insured on a primary, non-contributory basis for any liability arising directly or indirectly for work/services.
3. Three (3) references of related projects, including date of project, contact person and phone number, and a brief description of the scope of services.
4. Conflict of Interest Statement & Supporting Documentation: Respondent shall disclose any professional or personal financial interests that may be a conflict of interest in representing the SSA and SCP&F.

***Main Proposal***

Please provide the following information:

1. Years of experience and detailed qualifications in performing the range of security services on various areas.
2. Include a staffing plan indicating the number of employees, job titles, responsibilities for the contract work, tasks, full/part time employment status, and the number of hours per week they would be assigned to perform the work.
3. Narrative examples of three (3) projects that are similar in nature to projects described in this RFP.
4. Pricing proposal should include the hourly and/or unit rates for different categories of work. List the new cost to the SCP&F. New cost to SCP&F should include all labor and materials needed to complete the scope of services. The Respondent should sign a fixed price contract to include all work and services as identified in the scope of services.
5. State MBE/WBE/DBE and BEPD certifications, if any. If so, please provide a copy of a current MBE/WBE/DBE and BEPD certification letter(s).

## SELECTION PROCESS

The Selection Committee, comprised of SCP&F, the SSA Commissioners and staff, will review qualifications in accordance with the Professional Service Requirements set forth herein and the SSA objectives and policies. Proposals that are submitted timely and comply with the requirements of this RFP will be evaluated in accordance with the terms of this RFP.

## QUESTIONS

Questions regarding this RFP should be submitted via email to [dprice@scpf-inc.org](mailto:dprice@scpf-inc.org) with “RFP for Security Contractor Questions” in the subject line or via telephone with the SSA 5 Program Manager, David Price – (773) 251-4581.

## SUBMITTAL DUE DATE

Responses to this RFP are due by 12:00 p.m. on November 30, 2020. Responses to this RFP must be e-mailed to: David Price, [dprice@scpf-inc.org](mailto:dprice@scpf-inc.org)

Each Respondent is responsible for labeling the exterior of the sealed envelope containing the proposal response with the proposal number, proposal name, proposal due date and time, and LSP's name.

Hard copies must be delivered to:

ATTN: David Price  
SSA 5 Program Manager  
South Chicago Parents & Friends, Inc.  
10241 South Commercial Avenue  
Chicago, IL 60617

## CERTIFICATION FORM

THIS PAGE MUST BE COMPLETED AND INCLUDED WITH THE SUBMITTAL CERTIFICATION

The undersigned hereby certifies, on behalf of the Respondent named in this Certification that the information provided in this RFP submittal to South Chicago Parents & Friends, Inc. is accurate and complete, and I am duly authorized for its submittal. I hereby certify that the Respondent has reviewed this RFP in its entirety and accepts its terms and conditions.

\_\_\_\_\_  
(Name of Respondent)

\_\_\_\_\_  
(Signature of Authorized Representative)

\_\_\_\_\_  
(Typed Name of Authorized Representative)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

## RFP SUBMITTAL REQUIREMENTS CHECKLIST

Please provide Checklist with response to RFP

- Cover Letter of Interest
- Certification
- Certificate of Good Standing (Corporation) or Certificate of Existence (Limited Liability Company) issued by the Illinois Secretary of State (If Respondent is a joint venture, a Certificate of Good Standing or Certificate of Existence, as applicable, must be submitted for each entity comprising the joint venture.)
- Evidence of Insurance
- State License and/or Certification
- Proof of Valid City of Chicago Business License
- References
- Conflict of Interest Statement & Supporting Documentation
- Description of Company
- Capacity of Company
- Pricing Proposal
- MBE/WBE/DBE and BEPD certifications, if applicable
- RFP Submittal Requirements Checklist

## APPENDIX A: CONFLICT OF INTEREST STATEMENT

### [Respondent] Conflict of Interest Statement

The owner(s), corporate member(s) or employee(s) of [Respondent], shall derive any personal profit or gain, directly or indirectly, by reason of his or her participation with South Chicago Parents & Friends, Inc. Each individual shall disclose to South Chicago parents & Friends, Inc. any personal interest or direct relationship which he or she may have and shall refrain from participation in any decision making in related manners.

Any owner, corporate member or employee of [Respondent] who is an officer, board member, committee member or staff member of a related organization shall identify his or her affiliation with such agency or agencies; further, in connection with any policy committee or board action specifically associated with the SCP&F, he/she shall not participate in the decision affecting that entity and the decision must be made and/or ratified by the full board.

At this time, I am a Board member, a committee member, or an employee of the following organizations/companies:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This is to certify that I, except as described below, am not now nor at any time during the past year have been:

1) A participant, directly or indirectly, in any arrangement, agreement, investment, or other activity with any vendor, supplier, or other party doing business with the SCP&F which has resulted or could result in personal benefit to me.

2) A recipient, directly or indirectly, of any salary payments or loans or gifts of any kind or any free service, discounts or other fees from or on behalf of any person or organization engaged in any transaction with the SCP&F.

Any exceptions to 1 or 2 above are stated below with a full description of the transactions and of the interest, whether direct or indirect, which I have (or have had during the past year) in the persons or organizations having transactions with the SCP&F.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed name: \_\_\_\_\_

**Respondent:**

**Address:**

**Telephone:**

## APPENDIX B: SPECIAL SERVICE AREA #5 BOUNDARIES AND MAP

