REQUEST FOR STATEMENT OF QUALIFICATIONS
FOR PROFESSIONAL SERVICES FOR MARKETING, BRANDING &
PUBLIC RELATIONS SERVICES

Date Issued: May 5, 2017

The Riviera Beach Community Redevelopment Agency (RBCRA) is seeking Qualified Marketing, and Public Relations Consultants/Companies. The RBCRA is interested in identifying Consultants/Companies that can provide proof of extensive experience with marketing, branding and public relations. Preference will be shown to Consultants/Companies that have had previous history working with Riviera Beach Businesses and residents or is located in the City of Riviera Beach.

SCOPE OF SERVICES

Riviera Beach Community Redevelopment Agency (RBCRA) is seeking qualified Consultants/Companies that can provide marketing and public relations services for projects, programs, and events occurring within the Riviera Beach Community Redevelopment Area as well as provide brand reputation and management services.

- Management of media relations
- Development of content for media and press releases
- Management of and content development for digital and social media platforms
- Management of and content development for website
- Promotion of projects, programs, and the CRA
- Promotion of CRA revitalization efforts
- Development of content and design for brochures, flyers, and other promotional collateral material
- Management of brand reputation
- Promotion of weekly and monthly events and programs
FEE PROPOSAL

The CRA is requesting the Company/Consultant’s to furnish a typical fee schedule. Enter the cost of services as a unit per month or hour for each service description. The few schedule is for informational purposes only, and must be provided in a sealed envelope inside the sealed package submittal in response to this opportunity.

<table>
<thead>
<tr>
<th>Description</th>
<th>Unit</th>
<th>Unit Fee</th>
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<tbody>
<tr>
<td>Management of website: rbcra.com</td>
<td>Per Month</td>
<td></td>
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<tr>
<td>Content Management System: WordPress</td>
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<tr>
<td>Management of social media platforms: Facebook, Twitter, and Constant Contact</td>
<td>Per Month</td>
<td></td>
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<tr>
<td>Promotion of CRA revitalization efforts, projects, programs, and management of brand reputation and media relations</td>
<td>Per Hour</td>
<td></td>
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<tr>
<td>Content development and design for social media platforms</td>
<td>Per Hour</td>
<td></td>
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<tr>
<td>Content development and design for website</td>
<td>Per Hour</td>
<td></td>
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<tr>
<td>Content development for media and press releases</td>
<td>Per Hour</td>
<td></td>
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<tr>
<td>Development of content and design for brochures, flyers, and other promotional collateral material to include print, digital, and social media platforms</td>
<td>Per Hour</td>
<td></td>
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</tbody>
</table>

Submittal Requirements

The following information, at a minimum, is to be included in the response to this RFQ:

- Vendor Profile Form (attached);
- Provide (3) Professional client references with contact information.
- Provide (3) recent examples of previous work experience similar to the services outlined in the scope of work.
- Provide a letter describing your companies’ experience and summarizing your skillset and focus area, including number of years in business, capability and capacity of the business to carry out some or all components of the proposed scope of work,
- Provide resumes of proprietor/partners and pertinent staff, and a list of other
- Extent of minority and local business participation;
- Applicable licenses; and Insurance certificates

The information requested will be the basic criteria for screening and selection for interviews. Please submit the above information/documentation along with information specified in the qualification request for each profession, industry, or service (retrieve from www.RBCRA.com or from office address below).
Business Requirements

Licenses
All Consultants/Companies are required to have all applicable licenses. Licenses from the Department of Business and Professional Regulation and/or from Palm Beach County, depending on the trade, are required to be submitted with the RFQ response. (Business Tax Receipts must also be submitted with the response.

It is the responsibility of the Consultants/Companies to ensure that all sub-contractors are licensed when required (ex: [sandblaster or what subs would be needed for the task]).

The Consultants/Companies must possess and submit a copy of one of the following licenses and/or State Registration (if applicable) at the time of RFQ response.

State Licenses:
- Business Licenses
- General Contractors, or

County Licenses (State Registration Required):
- Business Licenses
- General Contractor, or

Preference
Preference will be given to Local and Minority businesses.
Submission Due Date:

The RBCRA will accept Statements of Qualifications for a minimum of 14 days starting May 8, 2017. Sealed submittals must be received by May 19, 2017 at 3:00pm at the Riviera Beach CRA office. Submit one (1) original and six (8) copies to:

Riviera Beach Community Redevelopment Agency
Attention: Scott Evans, CRA Interim Executive Director
2001 Broadway, Suite 300
Riviera Beach, FL 33404

Submissions will be opened and evaluated in the Riviera Beach CRA conference room at 2001 Broadway Suite 300, Riviera Beach, FL, 3:30 PM, May 19, 2017, or as soon thereafter as is practical by the evaluation committee.
This notice does not bind RBCRA to pursue further steps with any interested parties. Accordingly, RBCRA is not liable for any costs incurred in connection with the submittal of materials in response to this request.
The CRA reserves the right to reject any and/or all submissions and waive technicalities and/or any irregularities therein. The CRA further reserves the right to award a contract to that qualified proposer whose proposal best serves the interests of the CRA in the sole discretion of the CRA.

All responses must be complete upon initial submission. Faxed responses will not be accepted. Electronic versions will not be accepted. Submissions will be time and date stamped.

(REMAINDER OF PAGE LEFT BLANK)
**VENDOR PROFILE**

All questions must be answered and the responses given must be clear and comprehensive. The contractor may submit additional information as appropriate.

Company Name: ______________________________________________

Company Owner (s): ____________________________________________

Address: ______________________________________________________

Phone: _________________________________________________________

Federal IRS Tax I.D. #: __________________________________________

DUNS #: _______________________________________________________

License No.: __________________________________________________ (Attach Copy)

Type of Ownership: Corporation ( ) Partnership ( ) Sole Proprietorship ( )

Company Principals and Titles: ____________________________________

Names of Corporation Officers (if corporation), Partners (if partnership), Owner (if sole):

1. 
   Name ____________________________________________ Title ______
   Address __________________________________________ City __________ ST __________ Zip ______
   Office Phone # __________________ Cell Phone # __________

2. 
   Name ____________________________________________ Title ______
   Address __________________________________________ City __________ ST __________ Zip ______
   Office Phone # __________________ Cell Phone # __________

3. 
   Name ____________________________________________ Title ______
   Address __________________________________________ City __________ ST __________ Zip ______
   Office Phone # __________________ Cell Phone # __________

4. 
   Name ____________________________________________ Title ______
   Address __________________________________________ City __________ ST __________ Zip ______
   Office Phone # __________________ Cell Phone # __________
Attach copy of:

1. Current License/Certificate/Registration
2. Current Insurance Certificate(s)
3. Corporate Resolution verifying authorized signatures

Number of years in business as this entity: ________ years.
If the company name has changed, what was the original name(s)

1._____________________________________________________________________

Company Name

__________________________

Address

City

ST

Zip

2._____________________________________________________________________

Company Name

__________________________

Address

City

ST

Zip

Number of individuals on your company’s payroll? ________________

How many times have you failed to complete any work or defaulted on a contract awarded to you?

___________________________________________________________________________

If so, when, where and why?

___________________________________________________________________________

JOB REFERENCES

List three (3) references. Supply name, phone number, address, and type of work completed. (Please give us references that we can contact and receive a response to reference checks).

1. Name: _______________________________________________________________

Address: _______________________________________________________________

Phone: _______________________________________________________________

Type of work performed:

___________________________________________________________________________

2. Name: _______________________________________________________________

Address: _______________________________________________________________

Phone: _______________________________________________________________
Type of work performed:
______________________________________________________________________________
______________________________________________________________________________

3. Name: _____________________________________________________________
Address: _____________________________________________________________
Phone: ______________________________________________________________

Type of work performed:
______________________________________________________________________________
______________________________________________________________________________

ADDITIONAL INFORMATION

General background, such as experience of partners and staff, can be submitted as an attachment. Please list suppliers with whom you have credit accounts:

Name | Phone
-----|------
Name | Phone
Name | Phone
Name | Phone

Provide a current list of subcontractors with whom your company has done business. Include the name of company, phone number(s) and contract person for each subcontractor on the attached reference form.

Have you ever filed for bankruptcy? ____________________________

Name(s) of those authorized to sign contracts, bids, contract change order requests, and endorse checks

Name | Title
-----|------
Name | Title
Name | Title

I/we hereby certify that the above statements are true and complete to the best of my knowledge.

I/we further understand that Riviera Beach Community Redevelopment Agency will keep all the information confidential and use such information only to verify the qualification of the undersigned as a general contractor.
The undersigned hereby authorizes and requests any person, firm, or corporation to furnish any information requested by Riviera Beach Community Redevelopment Agency in verification of the recitals comprising this Contractor Profile.

<table>
<thead>
<tr>
<th>Print Name</th>
<th>Title</th>
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<tbody>
<tr>
<td>Signature</td>
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