



3251 S. Derby Rd  
Sidney, MI 48885  
P: 616-754-9315  
TTY: 711  
F: 616-754-9310  
[www.8cap.org](http://www.8cap.org)

DATE: March 1st, 2024  
TO: Potential Contractors  
FROM: Devin Cavendish, Energy Program Manager  
RE: Request for Proposals (RFP)

EightCAP would like to thank you for your interest in the Request for Proposals process, as it pertains to the Weatherization Assistance Program. You will find attached, the Request for Proposals package with all the pertinent information. The following is the timeline for implementation:

**March 1st , 2024**

Notification advertised on 8cap.ORG will be run continuously until services are filled.

Please contact Jyll Mitchell, Weatherization Coordinator, or Devin Cavendish, Energy Program Manager with any questions.

Jyll Mitchell

616-236-1039

[Jyllm@8cap.org](mailto:Jyllm@8cap.org)

Devin Cavendish

616-255-6543

[Devinc@8cap.org](mailto:Devinc@8cap.org)

Completed bid packets are due to EightCAP.

Lori Johnson - President



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Packets should be sealed and addressed to:

EightCAP, INC – Attn: Weatherization

3251 S Derby RD

Sidney, MI 48885

**Once packet is received, packet will be opened and reviewed and notice of selection will be within 2 weeks of received dates.**

Lori Johnson - President

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EightCAP, Inc. is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.



# **EightCAP, Inc.**

## **Weatherization Assistance Program**

**Request for Proposals: General Contractor Services for  
Gratiot, Ionia, Isabella, and Montcalm Counties**

**PROPOSALS AND INQUIRIES SHOULD BE SUBMITTED TO**

**EightCAP, Inc.  
Energy Programs Manager  
3251 S. Derby Rd  
Sidney, MI 48885  
Or  
[devinc@8cap.org](mailto:devinc@8cap.org)**

EightCAP, Inc.(8CAP) seeks to identify, and roster qualified general contractors to perform energy-efficiency measures for its Weatherization Assistance Program. This program, funded by Federal and State resources, is designed to increase the energy efficiency of homes occupied by low-income persons and reduce heating and fuel costs for the client while investing in energy efficiency to create jobs, save money, and reduce our reliance on fossil fuels. This is an open solicitation that begins on March 1st, 2024, and shall remain active until at least three contractors have been selected to be placed on a roster. Selected contractors will be offered a two-year contract.

## OVERVIEW OF WEATHERIZATION PROGRAM ACTIVITIES

The following illustrates the general sequence of activities involved in the Weatherization Assistance Program:

- A. 8CAP receives a request for weatherization from a county resident.
- B. 8CAP verifies that the resident is eligible to participate in the Weatherization Program.
- C. 8CAP completes a pre-inspection (Energy Audit) of the dwelling and prepares a work order that identifies approved measures. The average cost per unit is capped at \$8,250.
- D. Contractor(s) will be selected from the roster to perform required work per the work order. The contractor will purchase materials and perform all required measures in accordance with the Michigan Department of Health and Human Services, Department of Energy, Department of Labor, and 8CAP standards.
- E. The contractor is responsible for completing blower door testing during the job and meeting the blower door goal. Blower door testing must be performed on each unit weatherized.
- F. Combustion spillage testing will be completed at the end of each day on all weatherized units to test the worst-case draft.
- G. When the job is complete the contractor will turn in all completed paperwork required by 8CAP.
- H. Contractor submits an invoice to 8CAP within 5 business days of completion of job to request payment based on the approved contract price sheet estimates.
- I. 8CAP will perform a quality control inspection (QCI) within 10 business days of receipt of contractor invoice. If the QCI identifies an issue or missed work, the contractor will be notified and called back to the job to correct any deficiencies before payment is approved for processing.
- J. 8CAP issues payment within 20 days of final QCI.

K. Contractor must warranty all work for a minimum of 18 months.

## REQUIRED WEATHERIZATION ACTIVITIES

8CAP requires that all the following measures be completed on each unit as appropriate and needed, following the U.S. Department of Energy/State of Michigan Department of Human Services energy audit and within program cost limitations. All work measures shall be completed to successfully perform the intended function on a continuing basis (quality of product and installation to provide a minimum 10-year life under normal conditions).

Work shall be completed in a manner so as not to detract from the general appearance and structural integrity of the home and shall follow governing codes, the requirements of this document, and the manufacturer's recommendations.

1. Insulating all Attics when determined cost effective. All bypasses and preparation measures (i.e., barriers, damming, etc.) must be addressed before insulation is installed. Attic ventilation will be assessed and installed when required.
2. Insulating sidewalls to R-11 or R-value determined by wall thickness by removing siding first and drilling. Only drill through the outer siding or interior walls when the siding is not removable.
3. Insulating an R-11 or R-19 on the floor or perimeter wall. Ground cover is addressed when applying for either application. The R factor or insulation depth will be determined by the National Energy Audit Tool (NEAT).
4. Stopping major infiltration by addressing all gaps that are more than 1/8 of an inch on interior applications and 1/4 of an inch on the exterior, per the blower test requires.
5. Addressing all repairs which would allow you then to install the insulation (i.e., belly repair, air sealing, etc.).
6. Band joist insulation will be installed when identified in the audit.
7. Installation of storm windows will be addressed on a site-built home when called for by NEAT, Mobile Home units will receive insider storms when found cost effective.
8. Blower Door testing at the start and finish of the job is preferred; the pre-inspector will have the pre-number and final goal set prior to the start of the job. When the work has been completed by the contractor it is expected that the goal is met. This can be verified by the contractor completing a blower door; otherwise, there may be callbacks to try to meet the goal.
9. Infiltration will be addressed accordingly. A final blower door test will be done after all work is completed by the Quality Control Inspector (to verify the potential savings).
10. Energy related health and safety measures are assessed and installed with current funding limits.
11. Air sealing (including duct sealing) will be as called for including caulking all windows as identified to be cost effective.

12. Ceiling-roof insulation will be completed on all mobile homes when found cost effective by the Mobile Home Energy Audit tool (MHEA).
13. Mandatory Standard Manufactured Home Door replacement for non-repairable units will be replaced when determined necessary.
14. Wall Insulation is installed if space exists.
15. Belly-Floor Insulation (If existing R-Value is less than R-19) and determined cost effective by MHEA.
16. For mechanical contractors - Heating System tune-up (Replacement if SSE is less than 70%) and a Setback (clock) Thermostat will be installed.
17. Domestic Hot Water Tank Insulation (including insulating supply line) when determined effectively.

## SELECTION OF CONTRACTORS

8CAP plans to select up to three (3) contractors to meet its production goals but reserves the right to select more or fewer contractors to serve the best interest of the agency and program goals. Contractor qualifications will be assessed to determine if the submitter meets the requirements to be added to the Roster. 8CAP will use the contractor proposed price sheets to create individual audit libraries for each contractor. The price sheets must be completed in full so 8CAP can assess the cost effectiveness of each measure and total job cost.

Work will be awarded to rostered contractors based on overall cost effectiveness for each individual job. Fair distribution of jobs to all qualified contractors on the roster will be the goal; however, 8CAP may need to choose a contractor based on overall average cost per unit.

A blank price sheet is included with this packet. Please break down the labor and material for each measure in the price sheet and submit it with the full bid packet. Contractors that meet all minimum contractor requirements will be offered a two-year contract and placed on a Roster. 8CAP provides services to Gratiot, Ionia, Isabella, and Montcalm counties. The proposal for services must indicate which counties the Contractor is willing to perform services.

The Contractors will have the responsibility to complete these units in a timely manner and in compliance with all applicable building codes, in compliance with the U.S. Department of Energy (DOE), the State of Michigan (SOM), and all related program regulations, policies, and program notices that relate to Weatherization including the Standard Work Specifications for Home Energy Upgrades (SWS) and the Michigan Weatherization Field Guide.

Procurement for the Agency shall be handled in a manner providing fair opportunity to all businesses. This shall be accomplished without abrogation or sacrifice of quality and as determined to be in the best interest of the Agency.

## REQUIRED WORKSHOPS FOR WEATHERIZATION CONTRACTORS

The contractor, as well as any employee of the contractor who will be performing any work for the Agency, will be required to attend appropriate training sessions on the direction of the Agency at no additional cost to 8CAP. All reasonable efforts are made to schedule training at times convenient for the contractor and their employees. Failure to attend required training courses within the specified time periods shall render the Contractor and/or their employees ineligible to perform any weatherization work for 8CAP.

- Lead Safe Weatherization (LSW) -- within 180 days of acceptance -- 8 hours.
- Indoor Air Quality/Mold Training -- within 180 days of acceptance -- 8 hours
- MIOSHA -- within 180 days of acceptance -- 10 hours

In addition, all Contracting Firms must be EPA Lead Certified. (EPA LRRP Firm/Renovator). Contractors must follow EPA Lead rules, including LRRP training requirements. Additional training may be required by the State of Michigan because of state and/or federal monitoring.

## MINIMUM CONTRACTOR REQUIREMENTS

### Licenses

Participating contractors are further required to maintain the following licenses from the State of Michigan:

1. A Builder's License, OR
2. A Maintenance and Alteration License, PLUS
3. A Mobile Home Installer/Repairer License

A copy of the current licenses must be submitted in this bid package.

Participating contractors will be required to indemnify and hold all its officers, agency, and employees harmless from any claim, loss, damage, cost, charge, expense, lien, settlement, or judgment arising directly or indirectly out of or in connection with work performed.

### Insurance

Any contractor wishing to participate in the Weatherization Assistance Program must be able to provide 8CAP with certificates of insurance as part of the bid package requirement. The following coverages are the minimum allowed:

1. Commercial General Liability Insurance
  - Minimal Limits: \$1,000,000 Each Occurrence Limit; \$1,000,000 Personal & Advertising Injury Limit; \$2,000,000 General Aggregate Limit; \$2,000,000 Products/Completed Operations
  - Deductible Maximum: \$50,000 Each Occurrence
  - The CONTRACTOR must have their policy endorsed to add 8CAP as additional insured.
2. Automobile Liability Insurance
  - Minimal Limits: \$1,000,000 Per Occurrence

- Policy must include Hired and Non-Owned Automobile coverage
  - The CONTRACTOR must have their policy endorsed to add 8CAP as additional insured.
3. Workers' Compensation Insurance
    - Must meet, at minimum, the statutory requirements for the State of Michigan
    - Waiver of subrogation, except where required by law.
  4. Employers Liability Insurance
    - Minimal Limits: \$500,000 Each Accident; \$500,000 Each Employee by Disease; \$500,000 Aggregate Disease

Selected contractors must name 8CAP as the CO-insured (additional) on General Liability and Automobile policies. In addition, all work performed must be guaranteed for a period of 18 months from the date of work completion.

### **Performance Evaluation**

If a job does not pass the Quality Control Inspection, the contractor will be required to fix, repair, clean, or otherwise finish assigned work before payment to the contractor for the job shall occur or new work is issued. All Contractors are required to meet minimum standards regarding the quality of materials purchased to weatherize a unit for 8CAP and Department of Health & Human Services specifications. 8CAP will utilize a contractor evaluation process to strictly monitor the performance of all Weatherization Contractors.

### **Price Sheets**

The included Price Sheets must be filled out completely. Please be sure to separate the Labor and Material costs into the proper columns. Pricing will play a vital role in the selection of contractors and issuance of work. Failure to complete the Price Sheets will render the proposal void of any consideration. Selected contractors may update their price schedules on a quarterly basis as 8CAP requests new bids and adjusts the Set Unit Price List.

Materials shall be installed in accordance with the specifications and policies outlined in the Michigan Weatherization Field Guide and the SWS. The Electronic version of the SWS can be found at <http://sws.nrel.gov/> and <http://wxfieldguide.com/mi/> Bidding contractors must be able to provide all measures specified in the Price Sheets in accordance with all applicable federal, state, county, and local standards and specifications. All prices are for weatherization measures installed according to industry and program standards and include labor, material, permits, job site cleanup, overhead, 18-month warranty, and all other associated costs. All materials used in the weatherization program must meet the specifications of the various funding authorities and 10 CFR 440 Appendix A. All prices for blown insulation materials shall be for materials that meet federal recycled materials specifications.

All weatherization measures not specified on the price list will be negotiated with the contractor on a job-by-job basis (E.G., time and materials) or prices will be requested through a supplemental bid. The Grantee reserves the right to delete any such measure if the price is deemed to be inappropriate because the Weatherization program has average job cost maximums for the program year, calculated as total job costs for all



jobs divided by the number of jobs closed, set at the Federal level that need to be adhered to at the end of the program year.

## SPECIFICATIONS SUMMARY

All Weatherization work shall comply with the Department of Energy (DOE) Weatherization Program Notice 14-4 Section 1, Work Quality Guidelines and Specifications. All tasks performed on client homes must meet these specifications, objectives, and desired outcomes outlined in the Standard Work Specifications for Home Energy Upgrades (SWS) and the Michigan Weatherization Field Guide.

All Weatherization work orders will include references to applicable SWS standards for each measure. All work shall comply with these standards and the final Quality Control Inspection (QCI) will verify compliance.

All Weatherization materials used must conform to the standards set forth in 10 CFR 440 Appendix A. Copies are available at 8CAP or online at <http://www.waptac.org>.

A hard copy of the State of Michigan Weatherization Field Guide and the DOE Weatherization Program Standard Work Specifications for Home Energy Upgrades may be picked up at 8CAP or can be found electronically at <https://sws.nrel.gov> and [http://wxfieldguide.com/mi/MIWxFG\\_2018\\_SWS\\_edition.pdf](http://wxfieldguide.com/mi/MIWxFG_2018_SWS_edition.pdf).

The Contractor will continue to keep all insurance, licenses, and permits current, and supply all current copies to the agency. The Contractor will have NO MORE than 45 days from receiving a project assignment to complete the project, including passing the final post-inspection. If a contractor fails to meet the 45-day timeline, this contract is subject to cancellation.

## JOB AWARDS

8CAP may apply other, non-price eligibility criteria specified herein to determine whether the next Contractor on the Roster is eligible to receive that job/bundle at that time, such as 5 jobs per contractor at time due to work capacity. If not, the eligibility criteria are applied to the next Contractor on the Roster, and so on until all eligibility criteria are met. The next eligible Contractor in order of the Roster is awarded the job/bundle.

## CONTRACT UNDERSTANDING

Contractors are required to furnish their own tools and must have an alternate power source (portable) for all weatherization jobs; storage for materials being used; acquire permits, furnish their own transportation; documentation of current liability, worker's compensation, and auto insurance; be licensed and bonded in the State of Michigan.

To be considered as a weatherization contractor, the following forms must be completed and submitted by the due date: A General Information form, Background Information, Customer Reference Authorization, Price Sheets, Non-Collusion Affidavit, 8CAP Confidentiality Policy, Certification Regarding Debarment Form, and Criminal History Consent Form for 8CAP. The Criminal History/Criminal Background check consists of an Internet Criminal History Access Tool (ICHAT) check and a national and state sex offender registry check for each new employee, subcontractor, subcontractor employee, or volunteer who works directly with clients or has access to client information. The contractor, and all staff performing weatherization work, must also complete a Central Registry Clearance Request which is to be sent to the State of Michigan Department of Health and Human Services (MDHHS) and provide us with the original documented results of the clearance.

All costs incurred in the preparation and presentation of the Request for Proposal shall be wholly absorbed by the Contractors. Proof of Licenses, Certifications, and Insurance must be submitted with your bid package. All documents submitted will become the property of 8CAP.

An authorized officer and/or employee of the company appearing on the Request for Proposal must sign the RFP. The signature represents a commitment on the part of the company to provide such goods and services offered to 8CAP should it be determined that the vendor meets the qualifications.

By submitting a completed RFP for consideration, applicants are agreeing to perform all work for the prices identified on their 2024 Unit Price List.

All applicant's bid packages will be reviewed by a contractor selection committee. Each contractor applying to work with the weatherization program will receive either an acceptance or a denial letter.

## SUBMISSION

Submission of documents is a conclusive presumption that the contractor is familiar with the Request for Proposal, understands, and agrees to abide by all the stipulations and requirements. Contractors must return a proposal intact and complete. Each submission shall be prepared simply and economically, providing a straightforward, concise description of the contractor's approach and ability to meet 8CAP's needs, as stated in the RFP and all attached documents.

EightCAP will pursue agreements with qualified contractors until the capacity of our contractor roster is sufficient to meet the production needs of the program.

Submissions may be mailed to: 8CAP Weatherization 3251 S Derby Road Sidney, MI 48885 or electronically to [devinc@8cap.org](mailto:devinc@8cap.org)

### **QUESTIONS:**

Questions regarding bid specifications may be directed to Devin Cavendish, Energy Programs Manager: [devinc@8cap.org](mailto:devinc@8cap.org) or at 616-754-9315.



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### GENERAL INFORMATION

In further description of this Bid, we desire to submit sheets marked as follows:

\_\_\_\_\_

Bidding under the name of: \_\_\_\_\_

Federal Employer Identification Number: \_\_\_\_\_

which is (check one of the following):

Corporation, incorporated under the laws of the State of:

\_\_\_\_\_

Partnership, consisting of (list partners):

\_\_\_\_\_

Assumed Name (Register No.) \_\_\_\_\_

Individual

AUTHORIZED SIGNATURE: \_\_\_\_\_

Printed or typed signature: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_

City, State: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

.....  
When payment on such order or contract is to be directed to the same company at an address different from above, please list the address to be used below:

Lori Johnson - President



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**NON-COLLUSION AFFIDAVIT**

STATE OF )  
 ) ss  
COUNTY OF )

\_\_\_\_\_, being first duly sworn, deposes and says that he/she is authorized on behalf of \_\_\_\_\_ (Bidder Name) who is making the foregoing proposal(s) that:

- 1) Such proposals are genuine and not collusive or a sham.
- 2) This Bidder has not colluded, conspired, connived or agreed, directly or indirectly, with any other Bidder or person to submit a proposal which is a sham.
- 3) This Bidder has not in any manner agreed with any other persons or businesses to fix the proposed price, overhead, profit, or any cost element of the submitted proposal.
- 4) This Bidder has not attempted to secure any advantage against any other Bidders through collusion with any other Bidder or employees or representative of the County.
- 5) That the proposals submitted are true and accurate to the best of my knowledge and belief and are made in good faith.
- 6) This Bidder has not directly or indirectly submitted or disclosed its proposal or its contents or divulged information or data relative thereto to any association or to any member or agent of any other Bidder to this proposal.

Further, Affiant sayeth not.

\_\_\_\_\_

Subscribed and sworn to before me  
this \_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Notary Public

Lori Johnson - President

EightCAP, INC.  
3251 S Derby Road  
Sidney, MI 48885

CONTRACTOR'S NAME \_\_\_\_\_

**Certification Regarding**

**Debarment, Suspension and Other Responsibility Matters**

**Primary Covered Transactions**

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 29 CFR Part 98, Section 98.510, Participants' responsibilities. The regulations were published as Part VII of the May 26, 1988 Register (pages 19160 – 19211).

**(Before Signing Certification, Read Instructions)**

1. The prospective contractor certifies to the best of its knowledge and belief, that it and its principals:
  - a. Are not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from covered transactions by any Federal department or agency;
  - b. Have not within a three-year period preceding this proposal, been convicted of or had a civil judgement rendered against them or commission of fraud or criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or Local) transaction or contract under a public transaction; 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;
  - c. Are not presently indicted for or otherwise criminally or civilly charged by a government entity(Federal, State or Local) with commission of any of these offences enumerated in paragraph (1)(b) of this certification; and
  - d. Have not within a three-year period preceding this application/proposal has one or more public transactions (Federal, State or Local) terminated for cause or default.
  
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 this proposal.

**NAME AND TITLE OF AUTHORIZED REPRESENTATIVE**

Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal, the prospective contractor is providing the certification set out.
2. The inability of a person to provide the certification required will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out. The certification or explanation will be considered in connection with the Department of Labor's (DOL) determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when the DOL determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the DOL may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the DOL if at any time the prospective primary participant learns its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms "covered transaction", "debarred", "suspended", "ineligible", "lower tier covered transaction", "participant", "person", "primary covered transaction", "principal", "proposal" and "voluntarily excluded", as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the DOL for assistance in obtaining a copy of those regulations.
6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible or voluntarily excluded from participation in this covered transaction, unless authorized by the DOL.
7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transactions", provided by the DOL, without modification, in all lower tier covered transactions and all solicitations for lower tier covered transactions.
8. A participant in a covered transaction may rely upon certification of a prospective participant in a lower tier covered transaction that is not debarred, suspended, ineligible or voluntarily excluded from the covered transactions; unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determined the eligibility of its principals. Each participant may, but is not required, to check the List of Parties Excluded from Procurement or Non-Procurement Programs.
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render, in good faith, the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction with a person who is suspended, debarred, ineligible or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the agency may terminate this transaction for cause or default.

# CRIMINAL HISTORY CHECK

Name, Including Previous Married or Maiden Names \_\_\_\_\_

Program \_\_\_\_\_

Have you been convicted of any violation of law other than minor traffic violations, nor have been involved in a substantiated case of abuse or neglect of children and/or adults. If so, please list and explain below. Collection of this information is required by Child Care Licensing Rules or program regulations.

| Conviction  | Date | Circumstances |
|---|------|---------------|
|   |      |               |
| Are there any felony charges pending against you? |      |               |
|   |      |               |
|   |      |               |

I certify that the statements above are a true and complete record of my legal convictions. I understand that falsifications or omission of any information regarding my legal record may be cause of rejection or termination of employment. I further authorize EightCAP, Inc. to check my record with the Michigan Department of Police.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Date of Birth \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_

## **WHO SHOULD BE NOTIFIED**

The Personnel Department is in the process of updating employees' records of the person or persons to be notified in case of emergency. Please complete and return the following information to the Personnel Office.

In case of emergency, please contact \_\_\_\_\_  
NAME

ADDRESS \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

We hope we never have to use this information, but if we do, we want current information in your file. **Also, please notify us of any changes in your address or telephone number as they occur.**

Thank you,

Dee Andersen, Personnel Manager

Name \_\_\_\_\_ Date \_\_\_\_\_



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## EightCAP, Inc Confidentiality Policy

It is the policy of EightCAP, Inc. to maintain the confidentiality of our clients and fellow employees. All Contractors will, in the performance of their duties, gain access to information pertaining to clients. All information concerning our clients, such as telephone numbers, addresses, social security numbers, income, case history, or any other personal information, written or unwritten, must be treated with the utmost confidentiality. Such information is strictly privileged and confidential. Under no circumstances should this information be given to others, nor should it be discussed with anyone outside of EightCAP. Information may only be shared with other EightCAP staff members if it is necessary to ensure that program or grant requirements are fulfilled according to guidelines. Information data sources, such as client files, client tracking software, etc., are to be always protected. If there is ever a question as to whether information should be released, Contractors are to check with management first. Without the client's prior consent, this includes answering questions as to whether a particular person is our client. Violation of this policy is subject to disciplinary actions up to and including immediate termination of your contract with EightCAP.

\_\_\_\_\_ My signature below acknowledges that I have read this.  
(Initial) Confidentiality Policy. I understand the serious nature of maintaining the confidentiality of our clients and coworkers, and that failure to comply with this policy may lead to discipline up to and including suspension and/or termination.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

Lori Johnson - President

EightCAP, Inc. is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.





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### Background Information

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Owner Name(s): \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Contracting Listing with the State is by: Date Company Formed: \_\_\_\_\_

\_\_\_\_\_ Individual \_\_\_\_\_ Principle Officer

Social Security Number of Owner(s): \_\_\_\_\_

Will you allow us to run your credit report? Yes \_\_\_\_\_ No \_\_\_\_\_

Employer Tax ID Number: \_\_\_\_\_

Is the Company 51% or more Minority Owned? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the Company 51% or more Female Owned? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you worked as Weatherization Contractor in Michigan? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you dealt with MMCAA in the past? Yes \_\_\_\_\_ No \_\_\_\_\_

How many employees does your company have? \_\_\_\_\_

List your Major Suppliers: \_\_\_\_\_

List your Insurance Carriers: \_\_\_\_\_

List Your References:

**Business Name:** \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**Business Name:** \_\_\_\_\_

Contact Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Lori Johnson - President

# DHS-1929, CENTRAL REGISTRY CLEARANCE REQUEST

Michigan Department of Health and Human Services

(Revised 11-22)

|  |
|--|
| <p><b>COPY PHOTO ID HERE</b></p> <p><b>OR</b></p> <p><b>ATTACH A SEPARATE PAGE</b></p> |
|--|

## SECTION 1 – INFORMATION ON PERSON BEING CLEARED

|   |   |                   |
|---|---|-------------------|
| Name, (First, Middle, Last)                 | Signature Required for Individual Being Cleared | Date              |
| Maiden Name, Aliases, also known as (A.K.A) | Social Security Number                          | Date of Birth     |
| Address                                     | City  | State    Zip Code |
| Phone Number                                | Email   |                   |

I am completing this for myself.

I would like to pick up my results in \_\_\_\_\_ County (For Michigan Residents Only).

## SECTION 2 – REQUESTER INFORMATION

Check Appropriate Box

- Employer
- Volunteer Agency
- Adoption/Foster Care Home Screening
- Court/Law Enforcement/Department of Corrections/Prosecuting Attorney
- Child Caring Institution
- Friend of the Court/Alternate Caregiver Clearance
- Other

|  |                                   |                              |                   |
|--|-----------------------------------|------------------------------|-------------------|
| Name of Agency or Organization (if applicable)<br>EightCAP, Inc. | Name of Requester<br>Dee Andersen |                              |                   |
| Address<br>5827 Orleans Road                                     | City<br>Orleans                   | State<br>MI                  | Zip Code<br>48865 |
| Email<br>DeeA@8cap.org   | Fax<br>616-754-7816               | Phone Number<br>616-225-5978 |                   |

# EightCAP Weatherization Specification and Price Quote

\_\_\_\_\_  
**Contractor Name**

All quotations in response to this request for qualifications (RFP) must comply with the following instructions. Failure to do so may result in disqualification.

All work shall comply with the State Michigan DHHS BCAEO Weatherization Field Guide along with any applicable state and local codes. Work must also aligned with Standard Work Specifications developed through U.S. Department of Energy

[\\*Both the State of Michigan Field Guide and DOE SWS are available on-line.](#)

All materials used in provision of services must meet or exceed 10 CFR 440 Appendix A: "Standards for Weatherization Services".

\_\_\_\_\_  
Contractor Signature

\_\_\_\_\_  
Date

**WX Measures and Description**

| <b>Major Bypass</b>  |          | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|--|----------|----------------------|-------------------|--------------|
| Drywall Repair-Walls (including prep) drywall, tape & mud 1 coat   | sq. ft.  |                      |                   | 0.00         |
| Replace ceiling tile 12"x12"   | each     |                      |                   | 0.00         |
| Drywall Repair-Ceiling (including prep) drywall, tape & mud 1 coat                                       | sq. ft.  |                      |                   | 0.00         |
| Remove existing drop ceiling and disposal (price is sq. ft.)   | sq. ft.  |                      |                   | 0.00         |
| Steel pre-hung entry door (6 panel door w/lockset, deadbolt, caulking, interior and exterior trim)       | each     |                      |                   | 0.00         |
| Steel pre-hung entry door w/door lite (6 panel door w/lockset, deadbolt, caulking, int./ext. trim)       | each     |                      |                   | 0.00         |
| Steel pre-hung entry door upcharge for custom size(cutdown door and framing to fit)                      | each     |                      |                   | 0.00         |
| Insulated dual pane, Low-E, white vinyl, window including caulking, int./ext. trim, (LSW if app)         | sq. ft.  |                      |                   | 0.00         |
| <b>All door/window replacement cost shall include disposal of old material, applicable permits, etc,</b> |          |                      |                   |              |
| <b>All work shall conform with lead safe work practices</b>  |          |                      |                   |              |
| Reframe basement window opening (jamb) w/treated lumber & mortared in place                              | each     |                      |                   | 0.00         |
| Broken glass replacement   | sq. inch |                      |                   | 0.00         |
| Flue collar (at ceiling)   | each     |                      |                   | 0.00         |

|  |         |  |      |
|--|---------|--|------|
| Board over basement window (w/treated lumber)  | sq. ft. |  | 0.00 |
| Rebuild basement bulkhead door (w/treated lumber)  | each    |  | 0.00 |
| Frame basement door opening & install reinforced 3/4" plywood door<br>(w/hinges, latches, weatherstrip, sweep) | sq. ft. |  | 0.00 |
| Seal Coal chute - Insulate with R-13 unfaced fiberglass, secure with screws and caulk                          | each    |  | 0.00 |
| Seal whole house fan w/ insulated vinyl cover at ceiling (use hook and loop fastener)                          | each    |  | 0.00 |
| Fireplace balloon (to include high visabilty signing)  | each    |  | 0.00 |
| 3/4" OSB   | sq. ft. |  | 0.00 |
| 1/2" OSB   | sq. ft. |  | 0.00 |

| <b>Major Bypass-Attic Access (within thermal boundary)</b>  |         | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|---|---------|----------------------|-------------------|--------------|
| Install ceiling/knee wall access-new<br>(1 x 4 trim, 3/4 CDX, Foam weatherstrip, rigid foam attached to match assembly R-value(up tp R-49)) | each    |                      |                   | 0.00         |
| Install ceiling/knee wall access-existing opening   | each    |                      |                   | 0.00         |
| (1 x 4 trim, 3/4 CDX, Foam weatherstrip, rigid foam attached to match assembly R-value(up tp R-49))   | each    |                      |                   | 0.00         |
| Pull down stair treatment (box over) or Stair well cover  | each    |                      |                   | 0.00         |
| (2 piece lid, (drop-in style), 3/4 plywood, insulate, weather-strip, caulk)   | each    |                      |                   | 0.00         |
| Chase capping (1/2" osb supported w/ 2x4 24" o.c., airsealed with 1 part foam)  | sq. ft. |                      |                   | 0.00         |
| Remove unused flue vent to above ceiling and cap  | each    |                      |                   | 0.00         |

| <b>Major Bypass-Crawl Space/Exterior Access (within thermal boundary)</b>   |      | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|---|------|----------------------|-------------------|--------------|
| Install crawl space access panel and framing - new opening<br>(3/4 treated plywood, wolmanized frame, clips, wx strip, rigid foam to match wall R value (Up to R-20)) | each |                      |                   | 0.00         |
| Install crawl space access panel and framing - existing opening   | each |                      |                   | 0.00         |
| (3/4 treated plywood, wolmanized frame, clips, wx strip, rigid foam to match wall R value (Up to R-20))   | each |                      |                   | 0.00         |
| Air seal, weather-strip and rigid foam board to existing access   | each |                      |                   | 0.00         |

| <b>Major Bypass-Manufactured Home Measures</b>   |      | <u>Material Cost</u> | <u>Total</u> |
|--|------|----------------------|--------------|
| Combination Door Replacement (w/storm dr.) includes lockset, deadbolt, putty tape, interior trim | each |                      | 0.00         |
| Side door (exterior swing) includes lockset, putty tape, interior trim (as applicable)           | each |                      | 0.00         |
| Water Heater Replacement (manufactured) Door, includes clips                                     | each |                      | 0.00         |
| Prime Window - Vinyl, insul glass, white, double hung-Complete - Under 100 United inches         | each |                      | 0.00         |
| Prime Window - Vinyl, insul glass, white, double hung-Complete - over 100 United inches          | each |                      | 0.00         |

| <b>Infiltration-Doors</b>   |            | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|---|------------|----------------------|-------------------|--------------|
| Weather-strip door (aluminum weather-strip w/rubberized Flap and white caulk) | each       |                      |                   | 0.00         |
| Bump threshold - aluminum (in wood or concrete)                               | each       |                      |                   | 0.00         |
| Under door threshold - aluminum (in wood or concrete)                         | each       |                      |                   | 0.00         |
| Door Bottom   | each       |                      |                   | 0.00         |
| Door sweep  | each       |                      |                   | 0.00         |
| Replace existing lockset  | each       |                      |                   | 0.00         |
| Replace existing deadbolt   | each       |                      |                   | 0.00         |
| Replace Door Sill with Treated Board  | each       |                      |                   | 0.00         |
| Replace storm door closure  | each       |                      |                   | 0.00         |
| Replace storm door handle and latch   | each       |                      |                   | 0.00         |
| Replace storm door wind chain   | each       |                      |                   | 0.00         |
| Door stop Moulding  | linear ft. |                      |                   | 0.00         |
| Interior casing: 2 1/4" casing  | linear ft. |                      |                   | 0.00         |
| lumber up to 1" x 6"  | linear ft. |                      |                   | 0.00         |
| Brick mold (must be primed-includes caulking)                                 | linear ft. |                      |                   | 0.00         |
| Priming   | linear ft. |                      |                   | 0.00         |

| <b>Infiltration-Windows</b>  |            | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|--|------------|----------------------|-------------------|--------------|
| Glaze single pane window   | linear ft. |                      |                   | 0.00         |
| Install sash lock (cam-style)  | each       |                      |                   | 0.00         |
| Weather-strip window   | each       |                      |                   | 0.00         |
| Pulley covers (per pair)   | pair       |                      |                   | 0.00         |
| 3/4" Plywood around A/C in window and caulk (seal between sashes)    | each       |                      |                   | 0.00         |
| Foam insert between sashes (for existing window A/C)                 | each       |                      |                   | 0.00         |
| Air conditioning cover   | each       |                      |                   | 0.00         |
| Wood replacement: Window stop (must be primed-includes caulking)     | linear ft. |                      |                   | 0.00         |
| Wood replacement: 1" x 6" Casing (must be primed-includes caulking)  | linear ft. |                      |                   | 0.00         |
| Wood replacement: 1" x 3" furring (must be primed-includes caulking) | linear ft. |                      |                   | 0.00         |
| Exterior window clips  | each       |                      |                   | 0.00         |
| Turn buttons   | each       |                      |                   | 0.00         |
| Window Sealing: Caulk window and trim Inside and out                 | each       |                      |                   | 0.00         |
| Remove A/C   | each       |                      |                   | 0.00         |

|                                      |            |  |      |
|--------------------------------------|------------|--|------|
| Install window trim: (2 1/4" primed) | lineal ft. |  | 0.00 |
|--------------------------------------|------------|--|------|

| <b>Infiltration-Miscellaneous</b>   |            | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|---|------------|----------------------|-------------------|--------------|
| Duct sealing setup  | each       |                      |                   | 0.00         |
| Airsealing setup  | each       |                      |                   | 0.00         |
| High Temp Caulking  | lineal ft. |                      |                   | 0.00         |
| Caulking  | lineal ft. |                      |                   | 0.00         |
| Spray Foam (1 part)   | 24oz       |                      |                   | 0.00         |
| Unfaced Fiberglass for Stuffing   | sq. ft.    |                      |                   | 0.00         |
| Labor cost per unit (unit = 15 min.)  | 1/4 hr     |                      |                   | 0.00         |
| Blower Door Pressure Testing (Pictures are required)                        | each       |                      |                   | 0.00         |
| <b>Tests are to be done at the start of work and when work is complete.</b> |            |                      |                   |              |

| <b>Health and Safety</b>  |      | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|---|------|----------------------|-------------------|--------------|
| Carbon Monoxide alarm- 10 yr. life  | each |                      |                   | 0.00         |
| Smoke Detector - 10 yr. life, battery operation with nuisance/hush button                               | each |                      |                   | 0.00         |
| Dryer vent - hood only - existing opening (plastic/HD metal, non-louvered, w/clamps, includes caulking) | each |                      |                   | 0.00         |
| Dryer vent w/flex duct, 2 elbows, clamps - replace existing up to 8' (incl. caulking)                   | each |                      |                   | 0.00         |
| Dryer vent w/rigid duct, 2 elbows, clamps - replace existing up to 8' (incl. caulking)                  | each |                      |                   | 0.00         |
| Dryer flex duct only, 2 elbows, clamps, up to 8' (UL approved flex)                                     | each |                      |                   | 0.00         |
| Rigid Duct - 2 ft. section  | each |                      |                   | 0.00         |
| Exhaust bath fan through roof or gable - 1st floor (dampered vent, insulated R-8 flex for duct)         | each |                      |                   | 0.00         |
| Exhaust bath fan through roof - 2nd floor -(dampered vent, insulated R-8 flex for duct)                 | each |                      |                   | 0.00         |
| Replace existing bath exhaust fan w/light - 90 cfm (includes venting to outside)                        | each |                      |                   | 0.00         |
| Replace existing bath exhaust fan w/o light - 90 cfm (includes venting to outside)                      | each |                      |                   | 0.00         |
| ASHRAE In-line fan (includes venting to outside)  | each |                      |                   | 0.00         |
| ASHRAE Range hood replacment (includes venting to outside)  | each |                      |                   | 0.00         |
| Domestic Hot water drop tube (3/4' copper pipe, within 3" of floor or through floor)                    | each |                      |                   | 0.00         |

| <b>Duct / Pipe Insulation/Sealing</b>   |          | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|---|----------|----------------------|-------------------|--------------|
| Install duct insulation (R-8 minimum) - Reflectix or equivalent (sq. ft.)/2-part Spray Foam                       | sq. ft.  |                      |                   | 0.00         |
| Secure and seal ducts w/butyl-back foil tape and mastic   | lin. Ft. |                      |                   | 0.00         |
| Plenum sealing ( No A-coil Remove furnace A-coil cover Seal w/ foil tape and mastic)                              | each     |                      |                   | 0.00         |
| Plenum sealing ( A-coil present Seal from underside w/ skim coat 2 part spay foam)                                | each     |                      |                   | 0.00         |
| Seal trunk line ends( Panning cut to fit inside trunkline placed 18" away from last duct, foil tape and mastic)   | each     |                      |                   | 0.00         |
| Seal trunk line ends( Reflectex cut to fit inside trunkline placed 18" away from last duct, foil tape and mastic) | each     |                      |                   | 0.00         |
| Duct repair (galvanized panning, screws,tape, mastic)   | each     |                      |                   | 0.00         |
| Tape and mastic duct boots (layer foiltape, mastic, Fiber mesh tape on seams,joints.and holes to)                 | each     |                      |                   | 0.00         |

| <b>Optional-Manufactured Home Measures</b>   |      | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|--|------|----------------------|-------------------|--------------|
| New metal drip cap for door or window  | each |                      |                   | 0.00         |
| Insulate water heater (minimum R-10) - includes top on electric, 3 straps & 12 ft. pipe wrap | each |                      |                   | 0.00         |

| <b>Wall Insulation</b>                                 |         | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|--|---------|----------------------|-------------------|--------------|
| Dense pack cellulose: 2x4 filled                       | sq. ft. |                      |                   | 0.00         |
| Dense pack cellulose: 2x6 filled                       | sq. ft. |                      |                   | 0.00         |
| Fiberglass batts: R-13                                 | sq. ft. |                      |                   | 0.00         |
| Fiberglass batts: R-19                                 | sq. ft. |                      |                   | 0.00         |
| Loose fill blown cellulose(manufactured home measure)  | per bag |                      |                   | 0.00         |
| Loose fill blown fiberglass(manufactured home measure) | per bag |                      |                   | 0.00         |

**All wall insulation measures to include removal and reattachment of siding, drilling, plugging or filling drill holes**

| <b>Wall Insulation - Additional Costs</b>          |         | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|--|---------|----------------------|-------------------|--------------|
| Added cost if lead safe workpractices are required | each    |                      |                   | 0.00         |
| Added cost if RRP is required                      | sq. ft. |                      |                   | 0.00         |
| Added cost to dense pack masonry walls             | sq. ft. |                      |                   | 0.00         |

| <b>Attic Insulation</b>                   |         | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|---|---------|----------------------|-------------------|--------------|
| Open attic: blown cellulose R-11          | sq. ft. |                      |                   | 0.00         |
| Open attic: blown cellulose R-19          | sq. ft. |                      |                   | 0.00         |
| Open attic: blown cellulose R-30          | sq. ft. |                      |                   | 0.00         |
| Open attic: blown cellulose R-38          | sq. ft. |                      |                   | 0.00         |
| Open attic: blown cellulose R-49          | sq. ft. |                      |                   | 0.00         |
| Open attic: blown fiberglass R-11         | sq. ft. |                      |                   | 0.00         |
| Open attic: blown fiberglass R-19         | sq. ft. |                      |                   | 0.00         |
| Open attic: blown fiberglass R-30         | sq. ft. |                      |                   | 0.00         |
| Open attic: blown fiberglass R-38         | sq. ft. |                      |                   | 0.00         |
| Open attic: blown fiberglass R-49         | sq. ft. |                      |                   | 0.00         |
| Open attic: install fiberglass batts R-13 | sq. ft. |                      |                   | 0.00         |
| Open attic: install fiberglass batts R-19 | sq. ft. |                      |                   | 0.00         |
| Open attic: install fiberglass batts R-30 | sq. ft. |                      |                   | 0.00         |
| Open attic: install fiberglass batts R-38 | sq. ft. |                      |                   | 0.00         |
| Open attic: install fiberglass batts R-49 | sq. ft. |                      |                   | 0.00         |
| Open attic: dense pack floor R-13         | sq. ft. |                      |                   | 0.00         |
| Open attic: dense pack floor R-19         | sq. ft. |                      |                   | 0.00         |
| Open attic: dense pack floor R-30         | sq. ft. |                      |                   | 0.00         |
| Open attic: dense pack floor R-38         | sq. ft. |                      |                   | 0.00         |
| Open attic: dense pack floor R-49         | sq. ft. |                      |                   | 0.00         |

|  |         |      |
|--|---------|------|
| Attic insulation 2-part spray Foam R-11                  | sq. ft. | 0.00 |
| Knee walls: Dense pack cellulose R-13 with Housewrap     | sq. ft. | 0.00 |
| Knee walls: Dense pack cellulose R-19 with Housewrap     | sq. ft. | 0.00 |
| Knee walls: Unfaced fiberglass batts R-13 with Housewrap | sq. ft. | 0.00 |
| Knee walls: Install Housewrap                            | sq. ft. | 0.00 |
| Rafter Runs: Tube slopes to dense pack R-19              | sq. ft. | 0.00 |
| Rafter Runs: Tube slopes to dense pack R-13              | sq. ft. | 0.00 |
| Loose fill blown cellulose(manufactured home measure)    | per bag | 0.00 |
| Loose fill blown fiberglass(manufactured home measure)   | per bag | 0.00 |

**\*\*Installation of blown attic insulation includes the following basic attic preparation: etc. as applicable  
Flag electrical junction boxes and other critical structures.  
Includes permits, fees, Insulation measuring sticks every 300 sq. ft. required.**

| <b>Additional Attic Insulation/Ventilation</b>             |            | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|--|------------|----------------------|-------------------|--------------|
| Remove existing insulation and disposal (price is sq. ft.) | sq. ft.    |                      |                   | 0.00         |
| Install roof vent - cut opening in roof (one story)        | each       |                      |                   | 0.00         |
| Install roof vent - cut opening in roof (second story)     | each       |                      |                   | 0.00         |
| Replace existing roof vent                                 | each       |                      |                   | 0.00         |
| Install standard size gable vent (one story)               | each       |                      |                   | 0.00         |
| Install standard size gable vent (second story)            | each       |                      |                   | 0.00         |
| Replace existing standard size gable vent                  | each       |                      |                   | 0.00         |
| Install new soffit vent - one story: 8" x 16" or 4" x 16"  | each       |                      |                   | 0.00         |
| Install new soffit vent - two story: 8" x 16" or 4" x 16"  | each       |                      |                   | 0.00         |
| Replace existing soffit vent: 8" x 16" or 4" x 16"         | each       |                      |                   | 0.00         |
| Install soffit vent chute 16" or 24"                       | each       |                      |                   | 0.00         |
| Ridge Vent   | linear ft. |                      |                   | 0.00         |
| Barrier around attic access                                | each       |                      |                   | 0.00         |
| Damming/collar (around heat source)                        | linear ft. |                      |                   | 0.00         |

| <b>Compact Fluorescent Light Bulbs</b>   |      | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|--|------|----------------------|-------------------|--------------|
| LED Bulb - 8 watt (Replaces standard 40W, energy star rated, lead free, daylight bulb)                   | each |                      |                   | 0.00         |
| LED Bulb - 10 watt (Replaces standard 60W, energy star rated, lead free, daylight bulb)                  | each |                      |                   | 0.00         |
| LED Bulb - 13 watt (Replaces standard 75W, energy star rated, lead free, daylight bulb)                  | each |                      |                   | 0.00         |
| LED Chandelier bulb- 5 watt (Replaces chandelier style 40W, energy star rated, lead free, daylight bulb) | each |                      |                   | 0.00         |
| LED Bulb - 3-way (energy star rated, lead free, daylight bulb)   | each |                      |                   | 0.00         |
| LED Recess Conversion Fixture 10watt (Replaces standard 60W, energy star rated, daylight bulb)           | each |                      |                   | 0.00         |
| <b>(All LED Bulbs must be rated for a Min. of 18,000 hrs Lifetime)</b>                                   |      |                      |                   |              |

| <b>Foundation Insulation</b> | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|------------------------------|----------------------|-------------------|--------------|
|------------------------------|----------------------|-------------------|--------------|



|  |         |  |      |
|--|---------|--|------|
| Sillbox Insulation 2-part spary Foam 1" R-7 (must meet flame spread code)                              | sq. ft. |  | 0.00 |
| Sillbox Insulation 2-part spary Foam 2" R-15 (must meet flame spread code)                             | sq. ft. |  | 0.00 |
| Sillbox insulation rigid foam board R-10 (to include 1 part spray foam airseal around perimeter/seams) | sq. ft. |  | 0.00 |
| Sillbox insulation rigid foam board R-20 (to include 1 part spray foam airseal around perimeter/seams) | sq. ft. |  | 0.00 |
| Foundation wall insulation rigid foam board R-10 ( to include sealed seams)                            | sq. ft. |  | 0.00 |
| Foundation wall insulation 2 part spray foam 1" R-7 (must meet flame spread code)                      | sq. ft. |  | 0.00 |
| Foundation wall insulation 2 part spray foam 2" R-15 (must meet flame spread code)                     | sq. ft. |  | 0.00 |
| Add R-13 blown fiberglass to floor joist cavities (includes screen/mesh)                               | sq. ft. |  | 0.00 |
| Add R-19 blown fiberglass to floor joist cavities (includes screen/mesh)                               | sq. ft. |  | 0.00 |
| Add R-30 blown fiberglass to floor joist cavities (includes screen/mesh)                               | sq. ft. |  | 0.00 |
| Add R-38 blown fiberglass to floor joist cavities (includes screen/mesh)                               | sq. ft. |  | 0.00 |
| Add R-13 blown cellulose to floor joist cavities (includes screen/mesh)                                | sq. ft. |  | 0.00 |
| Add R-19 blown cellulose to floor joist cavities (includes screen/mesh)                                | sq. ft. |  | 0.00 |
| Add R-30 blown cellulose to floor joist cavities (includes screen/mesh)                                | sq. ft. |  | 0.00 |
| Add R-38 blown cellulose to floor joist cavities (includes screen/mesh)                                | sq. ft. |  | 0.00 |
| Install R-13 Fiberglass batts in floor joist cavities (includes supports 2' o.c.)                      | sq. ft. |  | 0.00 |
| Install R-19 Fiberglass batts in floor joist cavities (includes supports 2' o.c.)                      | sq. ft. |  | 0.00 |
| Install R-30 Fiberglass batts in floor joist cavities (includes supports 2' o.c.)                      | sq. ft. |  | 0.00 |
| Install R-38 Fiberglass batts in floor joist cavities (includes supports 2' o.c.)                      | sq. ft. |  | 0.00 |
| Loose fill blown cellulose(manufactured home measure,includes screen/mesh)                             | per bag |  | 0.00 |
| Loose fill blown fiberglass(manufactured home measure, includes screen/mesh)                           | per bag |  | 0.00 |

| <b>Additional Foundation Insulation / Ventilation</b>  |            | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|--|------------|----------------------|-------------------|--------------|
| Replace existing foundation vent (use cast aluminum or abs plastic type)   | each       |                      |                   | 0.00         |
| Install new foundation Vent - remove block (use cast aluminum or abs plastic type)   | each       |                      |                   | 0.00         |
| Install 6 mil. Vapor barrier on ground - overlap seams 12" & up wall 6" (sq. ft.)  | sq. ft.    |                      |                   | 0.00         |
| Install pipe insulation (R-8 minimum) (lineal ft.)   | lineal ft. |                      |                   | 0.00         |
| Repair Mobile Home Belly with House wrap and Insulation R-19(mechanically fastend w/ furring strips (mechanically fastend w/ furring strips and belly repair tape)     | sq. ft.    |                      |                   | 0.00         |
| Repair Mobile Home Belly with House wrap (mechanically fastend w/ furring strips and belly repair tape) (mechanically fastend w/ furring strips and belly repair tape) | sq. ft.    |                      |                   | 0.00         |

| <b>Storm Windows</b>  |      | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|---|------|----------------------|-------------------|--------------|
| Interior storm window - single pane insert type, includes turn buttons, caulk trim - under 100 UI | each |                      |                   | 0.00         |
| Interior storm window - single pane insert type, includes turn buttons, caulk trim - over 100 UI  | each |                      |                   | 0.00         |
| House exterior storm window - single pane, includes clips, caulk trim - under 100 UI              | each |                      |                   | 0.00         |
| House exterior storm window - single pane, includes clips, caulk trim - over 100 UI               | each |                      |                   | 0.00         |

| <b>Lead Safe Work/Miscellaneous Repairs/Roofing, Fascia, Soffit</b>                             |           | <u>Material Cost</u> | <u>Labor Cost</u> | <u>Total</u> |
|---|-----------|----------------------|-------------------|--------------|
| Tar/Flashing repair   | each      |                      |                   | 0.00         |
| Fascia Repair 1X6   | lineal ft |                      |                   | 0.00         |
| 5/4" Deck Board Replace   | lineal ft |                      |                   | 0.00         |
| Fascia metal 6" (per lineal ft.)  | lineal ft |                      |                   | 0.00         |
| Alum. Soffit Install  | lineal ft |                      |                   | 0.00         |
| Lead Safe Work Walls/per 20 lineal feet   | 20 ln ft  |                      |                   | 0.00         |
| Lead Safe Work per Measure  | each      |                      |                   | 0.00         |
| Install and program set back thermostat   | each      |                      |                   | 0.00         |
| 3/4" Pipe insulation/wrap   | each      |                      |                   | 0.00         |
| Insulate water heater (minimum R-10) - includes top on electric & 12 ft. pipe wrap (Site Built) | each      |                      |                   | 0.00         |



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TTY: 711  
F: 616-754-9310  
[www.8cap.org](http://www.8cap.org)

## Selection Criteria

### Point System for Weatherization Contractor Applicants

\_\_\_\_\_ of 15 Points—Prior Experience Working with Michigan’s Weatherization Program

\_\_\_\_\_ of 10 Points—Prior Experience Working with EightCAP

\_\_\_\_\_ of 10 Points—IAQ certification-certificate attached

\_\_\_\_\_ of 15 Points— Lead Certification (LRRP)-Certificate Included

\_\_\_\_\_ of 5 Points— Blower Door Experience

\_\_\_\_\_ of 5 Points —Blower Door Available

\_\_\_\_\_ of 10 Points —Female or Minority Owned

\_\_\_\_\_ of 10 Points —EPA LRRP Firm Status in Place

\_\_\_\_\_ of 10 Points —Satisfactory Record of Past Performance

\_\_\_\_\_ of 10 Points —All Documents Requested in RFP are fully completed and submitted

Office Summary: Total Points \_\_\_\_\_ of 100

Contractor \_\_\_\_\_ Reviewer \_\_\_\_\_ Date \_\_\_\_\_

Lori Johnson - President



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### Contractor Bid Application

Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Owner: \_\_\_\_\_

#### Instructions:

Complete this package and return to **EightCAP** for the final phase of the bidding process anytime starting March 1st, 2024. Bids will be opened immediately, and a decision made within 2 weeks of receiving the bid. The contractor with completed packages and the highest points will be contacted by EightCAP to sign agreements.

- Background Information
- Customer Reference Authorization
- Certification Regarding Debarment
- National Sex Offender Registry
- Criminal History
- Central Registry Clearance
- Confidentiality Policy
- Proposed Costs including Labor and Material
- Contract for Service
- Copies of License(s) and Certifications
- Builders Licenses or
- Maintenance and Alteration or
- Mechanical License
- Lead Certification
- IAQ Certification
- Renovator certificate
- Firm Status

#### Proof of:

- Workers Compensation
- Employers Liability
- Comprehensive General Liability
- Auto Insurance

Lori Johnson - President

EightCAP, Inc.  
**APPEAL POLICY**

**1. Purpose**

The purpose of the EightCAP, Inc. Appeal Policy (“Policy”) is to establish a process that provides the opportunity to appeal any of the following decisions made by EightCAP staff members regarding contracts or services that are funded through the State of Michigan – Department of Health and Human Services – Bureau of Community Action and Economic Opportunity (“BCAEO”):

- A. An application for a low-income service if there has been a partial or complete denial of assistance and if all of the following provisions have been satisfied:
  - 1) The services denied are specific, tangible benefits for which BCAEO provides funding.
  - 2) Funds are currently available.
  - 3) The grantee has authority to provide or disburse funds.
  - 4) The applicant has completed a formal, written application for such services.
  - 5) The applicant falls within the program guidelines or believes that he or she can prove that he or she falls within the program guidelines.
- B. A service provider's contract that has been suspended, terminated, or not renewed.
- C. A contractor's or potential contractor's application or proposal to provide services that has been denied.
- D. The Agency has determined that a Weatherization Assistance Program job must be deferred.
- E. An administrative action that limits, or imposes requirements on, the contractor or service provider.

**2. Appeal Procedure**

- A. Within 20 days of an action listed in Section 1, parts A-E above, EightCAP shall provide the affected party with a written notice. The written notice shall include:
  - 1) Information or criteria on which EightCAP’s action was based and a statement that such information/criteria is available for review by affected parties.
  - 2) All appeals shall be requested on the “Appeal Request Form” (see Attachment A), to be completed and returned to EightCAP by the affected party or parties within 10 days of the written notice being provided by the Agency. The form must be thoroughly completed.
  - 3) The person making the appeal must be the affected party.

- 4) The affected party making the appeal may provide documentation to supplement the information that he or she provides on the "Appeal Request Form."
- B. Upon the receipt of an "Appeal Request Form," an administrative review of the facts and circumstances surrounding the denial shall be conducted by the President of EightCAP, Inc. or his/her designee. This review will be completed within 10 days of receiving the completed "Appeal Request Form."
- C. If it is determined that a meeting of the Appeals Committee is necessary in order for a final determination on the appeal, then:
- 1) The Appeals Committee of the EightCAP, Inc. Governing Board shall meet to make a determination on the appeal. The decision will be made within 30 days of EightCAP, Inc. having received a completed "Appeal Request Form."
  - 2) Notice of the Appeals Committee meeting at which their appeal will be considered shall be sent to the affected party or parties. This notice shall indicate:
    - a) The time, date, and location of the meeting.
    - b) That the appellant may appear in person or through a designated representative to appeal EightCAP's denial.
  - 3) A record of the meeting, including relevant facts, shall be maintained and a determination shall be rendered, in writing, by the Appeals Committee.
  - 4) The decision rendered by the Appeals Committee shall be final at the Agency level.
  - 5) Written notice of the decision shall be provided, in writing, to the affected party or parties within 30 days of the appeal filing date. This notice shall include a statement that appellants may appeal the decision to the BCAEO within 10 days of the written notice and that BCAEO shall review and act on the appeal pursuant to the provisions of its Administrative Rule No. R400.19201(5).

### **3. Denial of a Request for Appeal Hearing**

A request for an appeal hearing may be denied if the appellant fails to comply with the appeal procedures required by this Policy or due to lack of standing by the appellant.

**APPEAL REQUEST FORM**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

County: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Denial, Termination of Contract, or Other Applicable EightCAP, Inc. Action: \_\_\_\_\_

Benefit/Service/Contract Denied: \_\_\_\_\_

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

Statement of Applicant's reasons for appeal (use back of sheet if necessary; attach additional information and documentation as appropriate): \_\_\_\_\_

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

Applicant's Signature: \_\_\_\_\_

**OFFICE USE ONLY**

Date of Administrative Review: \_\_\_\_\_

Reviewer's Name and Title: \_\_\_\_\_

Denial Upheld

Denial Overturned

Date of Appeals Committee Hearing (if applicable): \_\_\_\_\_