



**SOQ 24-033**

**To Provide Senior Citizens Needs Assessment Survey**

**Submission Deadline: October 25, 2024 at 3:30 PM**

**ATTENTION VENDORS!!!**

**Please review all pages and respond accordingly, complying with all provisions in the public notice and Jefferson Parish Code of Ordinances Section 2-926 et seq. All submissions must be received on the Purchasing Department's e-Procurement site, [www.jeffparishbids.net](http://www.jeffparishbids.net), by the SOQ submission deadline date and time. Late submissions will not be accepted.**

**Jefferson Parish Purchasing Department  
General Government Building  
200 Derbigny Street, Suite 4400  
Gretna, LA 70053**

**Purchasing Specialist II Name: Doris Abraham  
Purchasing Specialist II Email: [Doris.Abraham@jeffparish.gov](mailto:Doris.Abraham@jeffparish.gov)  
Purchasing Specialist II Phone: (504) 364-2690**

**PUBLIC NOTICE**

**SOQ 24-033**

**TO PROVIDE SENIOR CITIZEN NEEDS  
ASSESSMENT SURVEY**

The Parish of Jefferson, authorized by Resolution No.144736, is hereby soliciting a Statement of Qualifications (General Professional Services Questionnaire) from persons or firms interested in conducting a senior citizen needs assessment survey for the Parish of Jefferson.

**DEADLINE FOR SUBMISSIONS: 3:30 p.m., October 25, 2024**

That the Purchasing Department is hereby authorized to advertise for Statements of Qualifications from persons or firms interested in conducting a senior citizen needs assessment survey for the Parish of Jefferson.

The following criteria shall be used to evaluate the Statements of Qualification the firms/individuals submit:

1. Professional training and experience in relation to the type of work required for the services (Maximum points awarded shall be thirty (30)).
2. Size of firm considering the number of professional and support personnel required to perform the tasks. (Maximum points awarded shall be ten (10)).
3. Capacity for timely completion of the work. (Maximum points awarded shall be ten (10)).
4. Past performance by person or firm on similar projects or similar comparable projects. (Maximum points awarded shall be ten (10)).
5. Preference shall be given to persons or firms with a principal business office as follows: (1) Jefferson Parish, including municipalities located within Jefferson Parish (15 Points); (2) neighboring parishes of the Greater New Orleans Metropolitan Region, which includes Orleans, Plaquemines, St. Bernard, St. Charles and St. Tammany Parishes (twelve (12) points); (3) parishes other than the foregoing (ten (10) points); (4) outside the State of Louisiana (six (6) points). (Maximum points awarded shall be fifteen (15)).
6. Adversarial legal proceedings between the parish and the person or firm performing professional services, in which the parish prevailed or any ongoing adversarial legal proceedings between the parish and the person or firm performing professional services, excluding those instances or cases where the person or firm was added as an indispensable party, or where the person or firm participated in or assisted the public entity in prosecution of its claim. In the event that the person or firm fails to provide accurate and detailed information regarding legal proceedings with the parish, including the absence of legal proceedings, the person or firm shall be deemed unresponsive with regard to this category, and zero (0) points shall be awarded. (Maximum points awarded shall be ten (10) for the lack of any such adversarial proceedings as defined).
7. Prior successful completion of projects of the type and nature described, for which firm has provided verifiable references. (Maximum points to be awarded shall be fifteen (15)).

The person or firm submitting a Statement of Qualification (General Professional Services Questionnaire) must identify all subcontractors who will assist in providing professional services for the project, in the professional services questionnaire. Each subcontractor shall be required to submit a (General Professional Services Questionnaire) and all documents and information included in the questionnaire. (Refer to Jefferson Parish Code Ordinance, Section 2-928)

All persons or firms (including subcontractors) must submit a Statement of Qualifications (General Professional Services Questionnaire) by the deadline. The latest professional services questionnaire may be obtained by contacting the Purchasing Department at (504) 364-2678 or via the Jefferson Parish website at [www.jeffparish.gov](http://www.jeffparish.gov). This questionnaire can be accessed by hovering over "Business and Development" on the website and clicking on the (General Professional Services Questionnaires) option under "Doing Business in Jefferson Parish".

Submissions will only be accepted electronically via Jefferson Parish's e-Procurement site, Central Bidding at [www.centrauctionhouse.com](http://www.centrauctionhouse.com) or [www.jeffparishbids.net](http://www.jeffparishbids.net). Registration is required and free for Jefferson Parish vendors by accessing the following link: [www.centrauctionhouse.com/registration.php](http://www.centrauctionhouse.com/registration.php).

No submittals will be accepted after the deadline.

Affidavits are not required to be submitted with the Statement of Qualifications, but shall be submitted prior to contract approval.

Proposer shall furnish the Parish with certificates of insurance evidencing Professional Liability insurance prior to contract approval.

Disputes/protests relating to the decisions by the evaluation committee or by the Jefferson Parish Council shall be brought before the 24<sup>th</sup> Judicial Court.

**ADV: The New Orleans Advocate: October 2, 9 and 16, 2024**

## **General Professional Services Questionnaire Instructions**

- The General Professional Services Questionnaire shall be used for all professional services except outside legal services and architecture, engineering, or survey projects.
- **The General Professional Services Questionnaire should be completely filled out. Complete and attach ALL sections. Insert “N/A” or “None” if a section does not apply or if there is no information to provide.**
- Questionnaire must be signed by an authorized representative of the Firm. Failure to sign the questionnaire shall result in disqualification of proposer pursuant to J.P. Code of Ordinances Sec. 2-928.
- All subcontractors must be listed in the appropriate section of the Questionnaire. Each subcontractor must provide a complete copy of the General Professional Services Questionnaire, applicable licenses, and any other information required by the advertisement. Failure to provide the subcontractors' complete questionnaire(s), applicable licenses, and any other information required by the advertisement shall result in disqualification of proposer pursuant to J.P. Code of Ordinances Sec. 2-928.
- If additional pages are needed, attach them to the questionnaire and include all applicable information that is required by the questionnaire.

**General Professional Services Questionnaire**

**A. Project Name and Advertisement Resolution Number:**

**B. Firm Name & Address:**

**C. Name, title, & contact information of Firm Representative, as defined in Section 2-926 of the Jefferson Parish Code of Ordinances, with at least five (5) years of experience in the applicable field required for this Project:**

**D. Address of principal office where Project work will be performed:**

**E. Is this submittal by a JOINT-VENTURE? Please check:**

YES \_\_\_\_\_ NO \_\_\_\_\_

**If marked “No” skip to Section H. If marked “Yes” complete Sections F-G.**

**F. If submittal is by JOINT-VENTURE, list the firms participating and outline specific areas of responsibility (including administrative, technical, and financial) for each firm. Please attach additional pages if necessary.**

**1.**

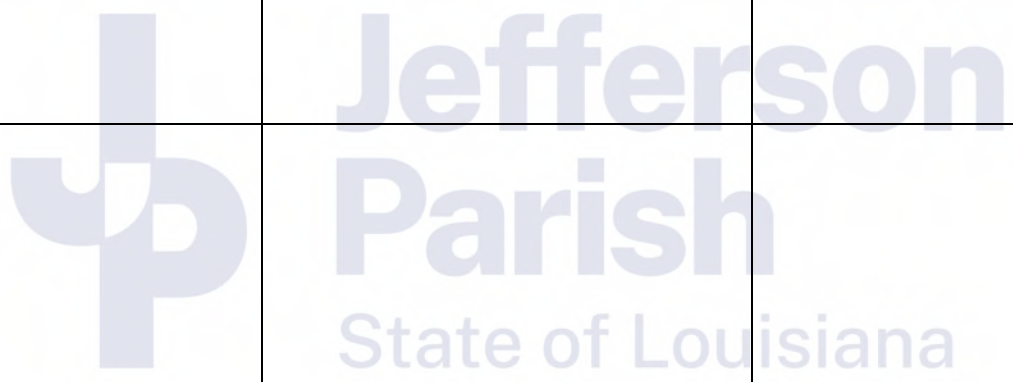
**2.**

## General Professional Services Questionnaire

G. Has this JOINT-VENTURE previously worked together? Please check: YES \_\_\_\_\_ NO \_\_\_\_\_

H. List all subcontractors anticipated for this Project. Please note that all subcontractors must submit a fully completed copy of this questionnaire, applicable licenses, and any other information required by the advertisement. See Jefferson Parish Code of Ordinances, Sec. 2-928(a)(3). Please attach additional pages if necessary.

Name & Address:	Specialty:	Worked with Firm Before (Yes or No):
1.		
2.		
3.		
4.		
5.		



## General Professional Services Questionnaire

**I. Please specify the total number of support personnel that may assist in the completion of this Project:**

\_\_\_\_\_

**J. List any professionals that may assist in the completion of this Project. If necessary, please attach additional documentation that demonstrates the employment history and experience of the Firm's professionals that may assist in the completion of this Project (i.e. resume). Please attach additional pages if necessary.**

### **PROFESSIONAL NO. 1**

**Name & Title:**

**Name of Firm with which associated:**

**Description of job responsibilities:**

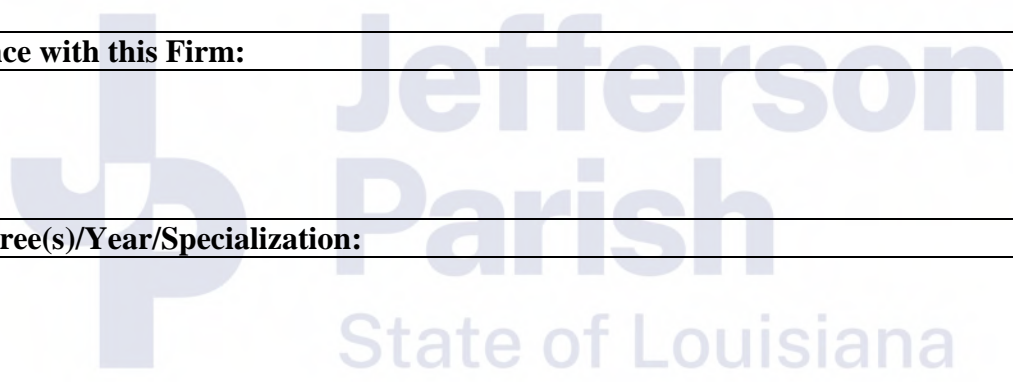
**Years' experience with this Firm:**

**Education: Degree(s)/Year/Specialization:**

**Other experience and qualifications relevant to the proposed Project:**

**General Professional Services Questionnaire**

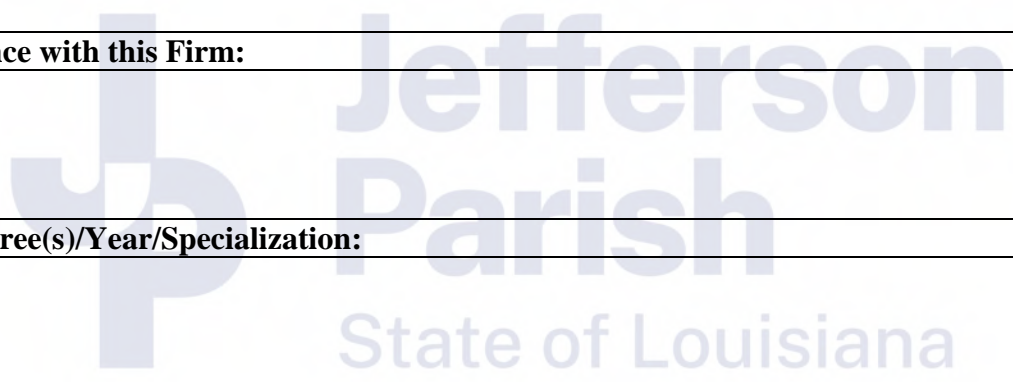
<b>PROFESSIONAL NO. 2</b>
<b>Name &amp; Title:</b>
<b>Name of Firm with which associated:</b>
<b>Description of job responsibilities:</b>
<b>Years' experience with this Firm:</b>
<b>Education: Degree(s)/Year/Specialization:</b>
<b>Other experience and qualifications relevant to the proposed Project:</b>





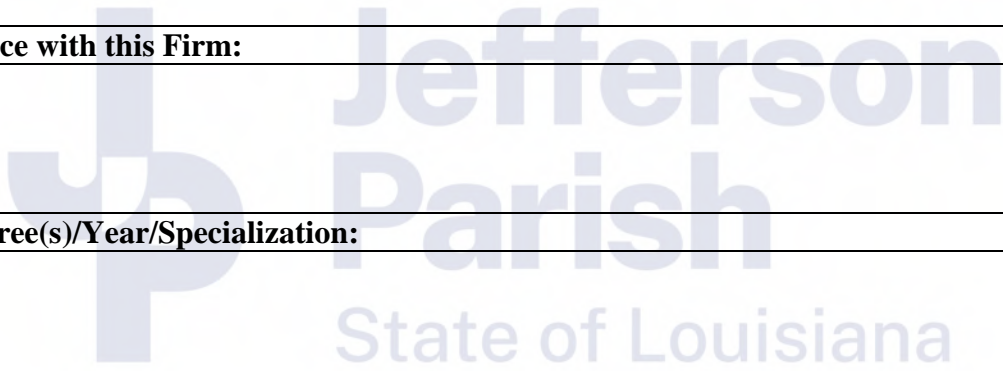
**General Professional Services Questionnaire**

<b>PROFESSIONAL NO. 3</b>
<b>Name &amp; Title:</b>
<b>Name of Firm with which associated:</b>
<b>Description of job responsibilities:</b>
<b>Years' experience with this Firm:</b>
<b>Education: Degree(s)/Year/Specialization:</b>
<b>Other experience and qualifications relevant to the proposed Project:</b>



**General Professional Services Questionnaire**

<b>PROFESSIONAL NO. 4</b>
<b>Name &amp; Title:</b>
<b>Name of Firm with which associated:</b>
<b>Description of job responsibilities:</b>
<b>Years' experience with this Firm:</b>
<b>Education: Degree(s)/Year/Specialization:</b>
<b>Other experience and qualifications relevant to the proposed Project:</b>



**General Professional Services Questionnaire**

**PROFESSIONAL NO. 5**

**Name & Title:**

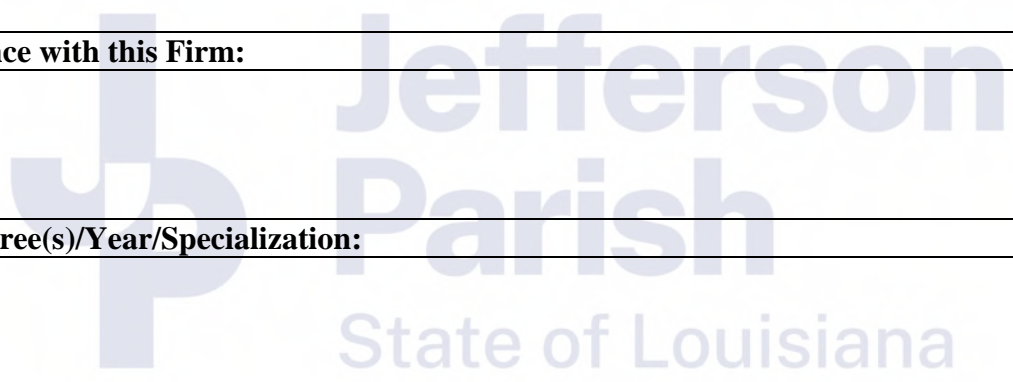
**Name of Firm with which associated:**

**Description of job responsibilities:**

**Years' experience with this Firm:**

**Education: Degree(s)/Year/Specialization:**

**Other experience and qualifications relevant to the proposed Project:**



## General Professional Services Questionnaire

**K. List all prior projects that best illustrate the Firm's qualifications relevant to this Project. Please include any and all work performed for Jefferson Parish. Please attach additional pages if necessary.**

### **PROJECT NO. 1**

<b>Project Name, Location and Owner's contact information:</b>	<b>Description of Services Provided:</b>
<b>Length of Services Provided:</b>	<b>Cost of Services Provided:</b>

### **PROJECT NO. 2**

<b>Project Name, Location and Owner's contact information:</b>	<b>Description of Services Provided:</b>
<b>Length of Services Provided:</b>	<b>Cost of Services Provided:</b>

**General Professional Services Questionnaire**

<b>PROJECT NO. 3</b>	
<b>Project Name, Location and Owner's contact information:</b>	<b>Description of Services Provided:</b>
<b>Length of Services Provided:</b>	<b>Cost of Services Provided:</b>

<b>PROJECT NO. 4</b>	
<b>Project Name, Location and Owner's contact information:</b>	<b>Description of Services Provided:</b>
<b>Length of Services Provided:</b>	<b>Cost of Services Provided:</b>

**General Professional Services Questionnaire**

<b>PROJECT NO. 5</b>	
<b>Project Name, Location and Owner's contact information:</b>	<b>Description of Services Provided:</b>
<b>Length of Services Provided:</b>	<b>Cost of Services Provided:</b>

<b>PROJECT NO. 6</b>	
<b>Project Name, Location and Owner's contact information:</b>	<b>Description of Services Provided:</b>
<b>Length of Services Provided:</b>	<b>Cost of Services Provided:</b>

**General Professional Services Questionnaire**

<b>PROJECT NO. 7</b>	
<b>Project Name, Location and Owner's contact information:</b>	<b>Description of Services Provided:</b>
<b>Length of Services Provided:</b>	<b>Cost of Services Provided:</b>

<b>PROJECT NO. 8</b>	
<b>Project Name, Location and Owner's contact information:</b>	<b>Description of Services Provided:</b>
<b>Length of Services Provided:</b>	<b>Cost of Services Provided:</b>

**General Professional Services Questionnaire**

<b>PROJECT NO. 9</b>	
<b>Project Name, Location and Owner's contact information:</b>	<b>Description of Services Provided:</b>
<b>Length of Services Provided:</b>	<b>Cost of Services Provided:</b>

<b>PROJECT NO. 10</b>	
<b>Project Name, Location and Owner's contact information:</b>	<b>Description of Services Provided:</b>
<b>Length of Services Provided:</b>	<b>Cost of Services Provided:</b>



## General Professional Services Questionnaire

**L. List all prior and/or on-going litigation between Firm and Jefferson Parish. Please attach additional pages if necessary.**

<b>Parties:</b>		<b>Status/Result of Case:</b>
<b>Plaintiff:</b>	<b>Defendant:</b>	
<b>1.</b>		
<b>2.</b>		
<b>3.</b>		
<b>4.</b>		

**M. Use this space to provide any additional information or description of resources supporting Firm's qualifications for the proposed project.**

Jefferson Parish  
State of Louisiana

**N. To the best of my knowledge, the foregoing is an accurate statement of facts.**

**Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## **Statement of Qualifications Affidavit Instructions**

- **Affidavit is supplied as a courtesy to Affiants, but it is the responsibility of the affiant to insure the affidavit they submit to Jefferson Parish complies, in both form and content, with federal, state and parish laws.**
- **Affidavit must be signed by an authorized representative of the entity or the affidavit will not be accepted.**
- **Affidavit must be notarized or the affidavit will not be accepted.**
- **Notary must sign name, print name, and include bar/notary number, or the affidavit will not be accepted.**
- **Affiant MUST select either A or B when required or the affidavit will not be accepted.**
- **Affiants who select choice A must include an attachment or the affidavit will not be accepted.**
- **If both choice A and B are selected, the affidavit will not be accepted.**
- **Affidavit marked N/A will not be accepted.**
- **It is the responsibility of the Affiant to submit a new affidavit if any additional campaign contributions are made after the affidavit is executed but prior to the time the council acts on the matter.**

*Instruction sheet may be omitted when submitting the affidavit*

**Statement of Qualifications**

**AFFIDAVIT**

**STATE OF** \_\_\_\_\_

**PARISH/COUNTY OF** \_\_\_\_\_

BEFORE ME, the undersigned authority, personally came and appeared: \_\_\_\_\_  
\_\_\_\_\_, (Affiant) who after being by me duly sworn, deposed and said that  
he/she is the fully authorized \_\_\_\_\_ of \_\_\_\_\_ (Entity),  
the party who submitted a Statement of Qualifications (SOQ) to \_\_\_\_\_  
\_\_\_\_\_ (Briefly describe the services the SOQ  
will cover), to the Parish of Jefferson.

Affiant further said:

Campaign Contribution Disclosures

**(Choose A or B, if option A is indicated please include the required attachment):**

**Choice A** \_\_\_\_\_ Attached hereto is a list of all campaign contributions, including the date and amount of each contribution, made to current or former elected officials of the Parish of Jefferson by Entity, Affiant, and/or officers, directors and owners, including employees, owning 25% or more of the Entity during the two-year period immediately preceding the date of this affidavit or the current term of the elected official, whichever is greater. Further, Entity, Affiant, and/or Entity Owners have not made any contributions to or in support of current or former members of the Jefferson Parish Council or the Jefferson Parish President through or in the name of another person or legal entity, either directly or indirectly.

**Choice B** \_\_\_\_\_ there are **NO** campaign contributions made which would require disclosure under Choice A of this section.

Affiant further said:

Debt Disclosures

**(Choose A or B, if option A is indicated please include the required attachment):**

**Choice A** \_\_\_\_\_ Attached hereto is a list of all debts owed by the affiant to any elected or appointed official of the Parish of Jefferson, and any and all debts owed by any elected or appointed official of the Parish to the Affiant.

**Choice B** \_\_\_\_\_ There are **NO** debts which would require disclosure under Choice A of this section.

Affiant further said:

Solicitation of Campaign Contribution Disclosures

**(Choose A or B, if option A is indicated please include the required attachment):**

**Choice A** \_\_\_\_\_ Attached hereto is a list of all elected officials of the Parish of Jefferson, whether still holding office at the time of the affidavit or not, where the elected official, individually, either by **telephone or by personal contact**, solicited a campaign contribution or other monetary consideration from the Entity, including the Entity's officers, directors and owners, and employees owning twenty-five percent (25%) or more of the Entity, during the two-year period immediately preceding the date the affidavit is signed. Further, to the extent known to the Affiant, the date of any such solicitation is included on the attached list.

**Choice B** \_\_\_\_\_ there are **NO** solicitations for campaign contributions which would require disclosure under Choice A of this section.

Affiant further said:

Subcontractor Disclosures

**(Choose A or B, if option A is indicated please include the required attachment):**

**Choice A** \_\_\_\_\_ Affiant further said that attached is a listing of all subcontractors, excluding full time employees, who may assist in providing professional services for the aforementioned SOQ.

**Choice B** \_\_\_\_\_ There are **NO** subcontractors which would require disclosure under Choice A of this section.

Affiant further said:

That Affiant has employed no person, corporation, firm, association, or other organization, either directly or indirectly, to secure the public contract under which he received payment, other than persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project or in securing the public contract were in the regular course of their duties for Affiant; and

*[The remainder of this page is intentionally left blank.]*

That no part of the contract price received by Affiant was paid or will be paid to any person, corporation, firm, association, or other organization for soliciting the contract, other than the payment of their normal compensation to persons regularly employed by the Affiant whose services in connection with the construction, alteration or demolition of the public building or project were in the regular course of their duties for Affiant.

\_\_\_\_\_  
Signature of Affiant

\_\_\_\_\_  
Printed Name of Affiant

SWORN AND SUBSCRIBED TO BEFORE ME

ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_.

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

\_\_\_\_\_  
Printed Name of Notary

\_\_\_\_\_  
Notary/Bar Roll Number

My commission expires \_\_\_\_\_.