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# **ILLINOIS MEDICAL DISTRICT** **COMMISSION**



## **REQUEST FOR PROPOSALS**

*RFP for Vertiport Developer*  
*IMDC 10-001*

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# ILLINOIS MEDICAL DISTRICT COMMISSION

(RFP for Vertiport Developer / IMDC 10-001)

The ILLINOIS MEDICAL DISTRICT COMMISSION (hereinafter "IMDC") is requesting Offers (bids / proposals) from responsible Vendors to meet the IMDC's needs. Below is a brief description of our needs with detailed requirements in subsequent sections of this solicitation. If you are interested and able to meet these requirements, please submit an Offer.

## Brief Description:

- A. The ILLINOIS MEDICAL DISTRICT COMMISSION ("IMDC") is requesting written qualifications and offers from qualified Developers and/or Development Teams ("Developer") interested in leasing land owned by the IMDC for the development and operation of a world-class, emergency medical-focused, public-use vertiport/heliport (the "Facility"). The approximately ten (10) acre RFP site sits on land within the Illinois Medical District and is bounded on the north on Hastings Street, on the south by 15th Street, on the west by Wood Street and the east by the Chicago Transit Authority (CTA) elevated tracks.



A project overview is set forth below, with detailed requirements found in Section 3 of the RFP. If you are interested and able to provide these services, we would appreciate and welcome an offer.

Please read the RFP and submit your Offer in accordance with the RFP, "RFP for Vertiport Developer." If you have any questions, please contact the RFP Contact identified in Section 3 of the RFP.

Upon completion of the RFP process, the property will be made available to the successful Developer through a long term Ground Lease Agreement.

B. The IMDC is a body politic and corporate that was formed by an act of the Illinois State Legislature in 1941 (70 ILCS915/0.01, *et seq.*) (the "IMD Act") for the purpose of administering the zoning and property within the District to ensure the orderly expansion of medical research facilities. Its mission is to attract both medically-related commerce and research and new business ventures for the economic vitality and general welfare of the State of Illinois, Cook County, and the City of Chicago.

The Illinois Medical District (“IMD”) is a world-class collaboration of hospitals, universities, institutes, social services, and technology commercialization facilities, located on the near west side of the City of Chicago, Illinois in Cook County that is bounded by Congress Street on the north, Ashland Avenue on the east, Oakley Boulevard on the west, and the Union Pacific inter-modal yard on the south. The Illinois Medical District area is comprised of 560 acres. The seven-member IMDC governs the District’s growth, development, and mission.

Please read the RFP and submit your Offer in accordance with Section 6 of the RFP.

If you have any questions, please contact the RFP Contact identified in Section 3 of the RFP.

C. Project Overview: The IMDC seeks qualified vendors who can develop, operate and provide high-quality architectural design and/or who demonstrate proven expertise in financing, building, operating and managing a vertiport/heliport facility. In addition, the Developer should demonstrate expertise in the following disciplines: architectural/engineering services related to the planning, design and construction of vertiport/heliport facilities or comparable facilities; operations planning related to general aviation and aviation support businesses; and urban design.

Currently, the Illinois Medical District’s Helicopter Emergency Medical Service (HEMS) needs are served by the Robin Dean Heliport (IL75) at the John H. Stroger Hospital of Cook County. This helipad is located 0.85 miles to the north of the designated site, and accommodates approximately 20 HEMS operations per month. This activity will shift to the Facility upon its successful establishment.

The IMDC’s goal is to establish a world-class public-use vertiport/heliport that will accommodate emergency medical, law enforcement, charter and air taxi, and other commercial tilt-rotor and helicopter operations serving the Illinois Medical District, the State of Illinois and the City of Chicago. Furthermore, the Facility shall be developed in a manner that maximizes safety while seeking to achieve a balance between its operational needs, financial viability and the surrounding area’s quality of life.

The Development Parcel is ideally suited for urban Vertiport/Heliport development, especially from the surrounding land use perspective. To the east, running along the full length of the project site are the elevated CTA Pink Line tracks that establish a visual barrier and define a clear delineation between the site and adjacent vacant parcels. Site boundaries to the south and west are adjacent to the Union Pacific Global 1 Intermodal Yard, which again delineates the site and provides Vendors with unique opportunities for developing community compatible approach and departure paths.

Proximity to Downtown Chicago and area airports further enhances the Development Parcel’s overall commercial utility. Typical vehicular trip times between the site and Downtown are approximately five to ten minutes. Chicago O’Hare International Airport (ORD) is located approximately 15 miles northwest of the site and Chicago Midway International Airport (MDW) is located seven miles to the southwest. At this location, the floor of ORD’s Class B airspace is located at 3,000 feet.

The solicitation package consists of two parts:

**Part A INSTRUCTIONS FOR SUBMITTING AND EVALUATING BIDS AND PROPOSALS:** Part A consists of the following sections:

- SECTION 1 INSTRUCTIONS, DATES, RESERVATIONS AND OTHER GENERAL INFORMATION
- SECTION 2 METHOD OF EVALUATION
- SECTION 3 SPECIFICATIONS / QUALIFICATIONS

These sections provide information necessary for submitting an Offer (a bid or proposal), set forth the basic legal and policy requirements associated with this solicitation and indicate how we may evaluate Offers.

**Part B OFFER RESPONSE FORMS:** Part B consists of the following sections:

- SECTION 4 OFFER TO IMDC
- SECTION 5 RESPONSIBILITY FORMS
- SECTION 6 RESPONSIVENESS

Your response to Part B will constitute your Offer to the IMDC and will provide us with information about you, what you will provide, your ability to perform and your price. We will evaluate this information as well as compliance with the Instructions.

In this document the IMDC will be referred to as “we” or “us”. The person submitting an Offer will be referred to as “Vendor”, “Contractor”, “Developer”, “Respondent”, “Proposer” or “You”. “We” is used appropriate to the context.

Please read the entire solicitation package and submit your Offer for evaluation in accordance with all instructions.

**Public Act 95-971 contains registration requirements regarding bids and proposals submitted by vendors. You must read and comply with the requirements. See [www.purchase.state.il.us](http://www.purchase.state.il.us) for additional information.**

***NON-DISCRIMINATION POLICY** In compliance with the State and Federal Constitutions, the Illinois Human Rights Act, the U.S. Civil Rights Act, and Section 504 of the Federal Rehabilitation Act, the State of Illinois does not discriminate in employment, contracts, or any other activity.*

**SECTION 1 - INSTRUCTIONS, DATES, RESERVATIONS AND OTHER GENERAL INFORMATION**

**1.1 PROJECT CONTACT:** If you have a question or suspect an error, you must immediately notify the Project Contact identified in this section. Do not discuss the solicitation or your Offer, directly or indirectly, with any IMDC officer or employee other than the IMDC Project Contact.

Only written answers to questions shall be binding on the IMDC.

Mark S. Jamil, Chief Legal Counsel  
Illinois Medical District Commission  
600 S Hoyne Ave  
Chicago, IL 60612-3756

Phone: (312) 633-3434  
Fax: (312) 633-3438  
TDD: (312) 633-3440  
E-mail: vertiportrfp@medicaldistrict.org

Please note that any written or oral communications received by the Project Contract that imparts or requests material information or makes a material argument regarding potential action concerning this procurement shall be reported to the Procurement Policy Board as required by Public Act 96-0795. When an oral communication is made by a person required to register under the Lobbyist Registration Act (25 ILCS 170) and received by an IMDC employee, all individuals who initiate or participate in the communication shall submit a written report to that IMDC employee memorializing the communication and for reporting to the Procurement Policy Board.

**1.2 DEVELOPER CONFERENCE / SITE VISIT:** A Pre-Submittal Meeting will be held on Tuesday, August 3, 2010 at the location listed below.

Date and Time: August 3, 2010, 2:00PM (CST)

Location: 2100 W Harrison St, Auditorium, Chicago, IL 60612

**1.3 OFFER DUE DATE, TIME AND SUBMISSION LOCATION:** Due Date: September 10, 2010 Time: 2:00PM (CST)

**DELIVER OFFERS TO:**  
ILLINOIS MEDICAL DISTRICT COMMISSION  
Attn: Mark S. Jamil, Chief Legal Counsel  
600 S Hoyne Ave, Chicago, IL 60612-3756

**LABEL OUTSIDE OF ENVELOPE / CONTAINER:**  
RFP for Vertiport Developer, IMDC 10-001  
Due Date: September 10, 2010  
Developer Name & Address

We will open Offers at the Due Date, Time and Delivery Location. Prior to the due date, you may mail or hand-deliver Offers, modifications, and withdrawals. We do not allow e-mail, fax, or other electronic submissions. We must physically receive submissions as specified; it is not sufficient to show you mailed or commenced delivery before the due date and time. We will not consider Offers, modifications or withdrawals submitted after the due date and time. All times are State of Illinois local times.

**RFP MILESTONES:**

Issue RFP – Thursday, July 1, 2010

Pre-Submittal Conference – Tuesday, August 3, 2010

Due Date and Time for Offers – Friday, September 10, 2010, 2:00PM (CST)

Opening Date – Friday, September 10, 2010

**1.4 INTERVIEWS:** The Finalists (expected to be not less than two and not more than 5) judged to be most qualified from the responses may be required to attend an interview. The interview, if necessary in the sole discretion of the IMDC, will occur at the IMDC offices located at 600 S Hoyne Ave, Chicago, IL 60612-3756.

**1.5 NUMBER OF COPIES:** You must submit a signed original and three (3) copies of the Offer in a sealed container. In addition, you must submit 1 copy on CD in MS Word or PDF format. You must submit separate CDs for technical and price with the price CD sealed in the pricing envelope. If you are requesting confidential treatment, you must make that request in the form and manner specified elsewhere in this solicitation. If Minority, Female, and Person with Disability Subcontracting is marked "YES", you must also submit one (1) original and one (1) copy of your Utilization Plan in a separate sealed envelope within your Offer container.

In accordance with Public Act 95-971, if you are required to submit the State Board of Elections Registration Certificate and fail to do so, your bid / proposal will be disqualified.

**1.6 OFFER FIRM TIME:** Your Offer must remain firm for 270 days from opening.

**1.7 GOOD FAITH DEPOSIT:** The Developer's Price Proposal must be accompanied by a Good Faith Deposit ("Deposit"). The Deposit will be \$10,000. Acceptable forms of deposit include cashier's check or certified check. Checks should be made payable to the "Illinois Medical District Commission." This deposit will be returned to respondents that are not selected. The deposit of the selected respondent shall become a non-refundable deposit applied to the first ground lease payment.

**1.8 PROTEST REVIEW OFFICE:**

ILLINOIS MEDICAL DISTRICT COMMISSION  
Attn: Judith Salgado  
600 South Hoyne Avenue, Chicago, Illinois 60612

Ph: (312) 633-3434  
Fax: (312) 633-3438  
TDD:(312) 633-3440

You may submit a written protest of our actions to the PROTEST REVIEW OFFICE following the requirements of the Standard Procurement Rules (44 Ill. Adm. Code 1.5550). We must physically receive the protest by noon of the seventh calendar day after you knew or should have known of the facts giving rise to the protest.

**1.9 SMALL BUSINESS SET-ASIDE:** No.

**1.10 MINORITY, FEMALE AND PERSONS WITH DISABILITY SUBCONTRACTING:** Yes This solicitation contains a goal to include businesses owned and controlled by minorities, females and persons with disabilities in the State's procurement and contracting processes. In addition to the number of copies requested above, **you must submit an original and 1 copy of the Utilization Plan sealed separately within the offer container.** Failure to submit a Utilization Plan as instructed later in this solicitation will render the offer non-responsive. All questions regarding the subcontracting goal must be directed to Mark Jamil at [mjamil@medicaldistrict.org](mailto:mjamil@medicaldistrict.org) or (312) 633-3434. prior to submission of bids or proposals. Vendors who submit bids or proposals for contracts shall not be given a period after the bid or proposal is submitted to cure deficiencies in the Utilization Plan and the Letter of intent, unless mandated by federal law or regulation (30 ILCS 575(4)(c)). Firms included on Utilization Plans as meeting BEP requirements as prime or sub-contractors must be certified by CMS as BEP vendors prior to contract award. Go to [http://www.sell2.illinois.gov/bep/Business\\_Enterprise.htm](http://www.sell2.illinois.gov/bep/Business_Enterprise.htm) for complete requirements for BEP certification.

**1.11 PUBLIC CONTRACTS NUMBER:** (775 ILCS 5/2-105) If you do not have a Department of Human Rights' (DHR) Public Contracts Number or have not submitted a completed application to DHR for one before opening we may not be able to consider your Offer. Please contact DHR at 312-814-2431 or visit <http://www.state.il.us/dhr/index.htm> for forms and details.

**1.12 ILLINOIS PROCUREMENT BULLETIN (Bulletin):** We publish procurement information (including updates) in the electronic Bulletin (<http://www.purchase.state.il.us>). Procurement information may not be available in any other form or location. You are responsible for monitoring the Bulletin; we cannot be held responsible if you fail to receive the optional e-mail notices.

**1.13 AWARD:** We will post a notice to the Bulletin identifying the apparent awardee. The notice extends the Offer Firm Time until we sign a contract or determine not to sign a contract. We may accept or reject your Offer as submitted, or may require contract negotiations. If negotiations do not result in an acceptable agreement, we may reject your Offer and begin negotiations with another Vendor. Protested awards are not final and are subject to resolution of the protest.

**1.14 PUBLIC RECORDS AND REQUESTS FOR CONFIDENTIAL TREATMENT:** Offers become the property of the IMDC and these and late submissions will not be returned. Your Offer will be open to the public under the Illinois Freedom of Information Act (FOIA) (5 ILCS 140) and other applicable laws and rules, unless you request in your Offer that we treat certain information as exempt. We will not honor requests to exempt entire Offers. You must show the specific grounds in FOIA or other law or rule that support exempt treatment. Regardless, we will disclose the successful Vendor's name, the substance of the Offer, and the price. If you request exempt treatment, you must submit an additional copy of the Offer with exempt information deleted. This copy must tell the general nature of the material removed and shall retain as much of the Offer as possible. You will be responsible for any costs or damages associated with our defending your request for exempt treatment. You agree the State may copy the Offer to facilitate evaluation, or to respond to requests for public records. You warrant that such copying will not violate the rights of any third party.

**1.15 RESERVATIONS:** You must read and understand the solicitation and tailor your Offer and activities to ensure compliance. We reserve the right to amend the solicitation; reject any or all Offers; to award by item, group of items, or grand total; and to waive minor defects. We may request a clarification; inspect your premises; interview staff; request a presentation; or otherwise verify the contents of the Offer, including information about subcontractors and suppliers. We may request Best & Final Offers when appropriate. We will make all decisions on compliance, evaluation, terms and conditions, and shall make decisions solely in the best interests of the State. This competitive process requires that you provide additional information and otherwise cooperate with us. If you do not comply with requests for information and cooperate, we may reject your Offer. You have no right to an award by submitting an Offer, nor do you have the right to a contract based on our posting your name in a Bulletin notice. We are not responsible for and will not pay any costs associated with the preparation and submission of your Offer. If you are the awardee, you shall not commence, and will not be paid for any billable work prior to the date all parties execute the contract, unless approved in writing in advance by the IMDC.

**1.16 GOVERNING LAW AND FORUM:** Illinois law and rule govern this solicitation and any resulting contract. You must bring any action relating to this solicitation or any resulting contract in the appropriate court in Illinois. We do not allow binding arbitration. This document contains statutory

references designated with "ILCS". You may view the full text at <http://www.ilga.gov/legislation/ilcs/ilcs.asp>. The Illinois Procurement Code (30 ILCS 500) and the Standard Procurement Rules (44 Ill. Adm. Code 1) are applicable to this solicitation and may be viewed by users registered for the Illinois Procurement Bulletin at <http://www.purchase.state.il.us>.

**1.17 EMPLOYMENT TAX CREDIT:** Vendors who hire qualified veterans and certain ex-offenders may be eligible for tax credits. Please contact the Illinois Dept. of Revenue (312-814-3215) for information about tax credits. If you receive this tax credit you must report to the Dept. of Central Management Services the number of individuals hired for whom you received tax credits. You must submit this information by August 31 of each year covering the previous 12 months (July–June) (PA 94-1067; 30 ILCS 500/45-67 and 45-70).

## SECTION 2 - HOW WE WILL EVALUATE OFFERS

**2.1 OFFER RESPONSE FORMS:** We will evaluate the information you provide in the Offer Response Forms. You will find these forms in later sections of this solicitation.

**2.2 EVALUATION CATEGORIES:** We evaluate four categories of information: Administrative Compliance, Responsibility, Responsiveness, and Price. We will consider the information you supply or don't supply, and the quality of that information when evaluating your Offer. If we find a failure or deficiency, we may have to reject the Offer or reflect that in the evaluation.

**2.2.1 ADMINISTRATIVE COMPLIANCE:** We will determine whether your Offer complied with the Instructions for submitting Offers. Except for late submissions, we may require that a Developer correct deficiencies as a condition of further evaluation.

**2.2.2 RESPONSIBILITY:** We will determine whether you are a "Responsible" Developer; a Developer with whom we can or should do business.

- i. A "Responsible" Developer must exist as a legal entity and must be authorized to do business in Illinois at the time a bid or proposal is submitted for an IMDC contract. Evidence of good standing can include Certificate of Good Standing, copy of assumed name certificate from home county, etc.
- ii. Public Law 96-0795 provides that a "prohibited bidder" includes a person assisting the State of Illinois or a State agency in determining whether there is a need for contract unless such information was part of a response to a publicly issued request for information (RFI). Additionally, one assisting the IMDC by reviewing, drafting or preparing a request for proposals or request for information or provided similar assistance is deemed a prohibited bidder. See certifications section of the Contract for the required certifications prior to entering into a contract with the State of Illinois.
- iii. Other factors that we may evaluate to determine Responsibility include, but are not limited to: certifications, conflict of interest, financial disclosures, taxpayer identification number, past performance, references (including those found outside the Offer,) compliance with applicable laws, financial stability and the perceived ability to perform completely as specified. Every bid submitted to and contract executed by the IMDC and every subcontract subject to Section 20-120 of the Procurement Code shall contain a certification by the bidder, contractor, or subcontractor, respectively, that the bidder, contractor, or subcontractor is not barred from being awarded a contract or subcontract under this Section and acknowledges that the chief procurement officer shall declare the related contract void if any of the certifications are false.

You must at all times have financial resources sufficient, in the sole opinion of the IMDC, to ensure performance of the contract and must provide proof upon request. The IMDC may terminate the Contract, consistent with the termination for cause provision of this Contract, if the Vendor lacks the financial resources to perform under the Contract. We may require that a Developer correct any deficiencies as a condition of further evaluation.

**2.2.3 RESPONSIVENESS:** We will determine whether the Offer meets the stated requirements. Minor differences or deviations that have negligible impact on the price or suitability of the supply or service to meet the IMDC's needs may be accepted or corrections allowed. If no administratively compliant and responsible Developer meets a particular requirement, we may waive that requirement.

**2.3 AWARD:** We will award to the Responsible Developer whose Offer passes Administrative review, is Responsive, and who submits the best value as shown by the combination of Responsiveness and Price.

We will determine how well Offers meet the Responsiveness requirements. A point ranking system or other evaluation methods are tools the IMDC often, but not always, uses to aid it in the evaluation process. In its sole discretion, the IMDC may rank Offers, without consideration of Price, from best to least qualified using a point ranking system (unless otherwise specified) as an aid in conducting the evaluation. Vendors who receive fewer than the minimum required points will not be considered for Price evaluation and award. The IMDC reserves the right to use its discretion to eliminate offers that are deemed unacceptable.

If we do not consider the Price to be fair and reasonable and we cannot negotiate to an acceptable Price, we reserve the right to cancel the award and take appropriate action to meet our needs. We will determine whether the price is fair and reasonable by considering the Offer,

including the Vendor's qualifications, the Vendor's reputation, all prices submitted, other known prices, the project budget and other relevant factors.

2.3.1 The chart below shows the elements of Responsiveness that we will evaluate, their relative weights in point format and any minimum point requirements. The total number of points for Responsiveness is 700. Vendors who receive less than 500 of the total Responsiveness points will not be considered for price evaluation and award.

Elements for Review	Weight
Operating Experience/Qualifications	250
Project Plan/Operations Plan	250
Financial Capability	200

2.3.2 The total number of points for Price is 300. We will determine Price points using the following formula:  
Maximum Price Points X (Lowest Price/Offeror's Price) = Total Price Points

2.3.3 The maximum number of points is 1000 (Responsiveness + Price).

2.3.4 Alternative Evaluation: If three or fewer Offers are received, the Offers may, in the sole and absolute discretion of the IMDC, be evaluated using simple comparative analysis of the elements of responsiveness (and price where applicable) instead of any announced method of evaluation (such as points).

### SECTION 3 - SPECIFICATIONS / QUALIFICATIONS

3.1 **NEED FOR A DEVELOPER:** The IMDC is requesting written qualifications and offers from qualified Vendors interested in leasing land owned by the IMDC for the development and operation of a world-class, emergency medical-focused, public-use vertiport/heliport (the "Facility"). The approximately ten (10) acre parcel sits on land within the Illinois Medical District and is bounded on the north on Hastings Street, on the south by 15th Street, on the west by Wood Street and the east by the Chicago Transit Authority (CTA) elevated tracks.

3.2 **REQUIRED SERVICES:** The successful Developer shall respond to and comply with the following Project Objectives and Development Requirements:

The IMDC requires that the Facility be designed, developed, operated, managed, and financed by a third party selected through this RFP. As such, the IMDC envisions entering into a long-term lease agreement with the Developer to ensure uninterrupted service at the Facility while providing the Developer with an adequate time frame to maximize financial investment returns.

3.2.1 The Facility shall be established on the Development Parcel, or a portion thereof, based on the following design aircraft:

Helicopter: Sikorsky S-92  
Tilt-rotor: Bell-Agusta BA-609

3.2.2 Required facility components shall include: tiltrotor/helicopter Final Approach and Takeoff Area (FATO); Touchdown and Liftoff Takeoff Surfaces (TLOFs); appropriately sized aircraft parking area; a fixed-base operator/maintenance facility; a jet and aviation fuel delivery system; and an access control system ensuring and maximizing security and public safety.

3.2.3 The Developer shall engage a licensed architect and/or aviation planner to design all airside, landside and terminal components consistent with a world-class aviation facility.

3.2.4 The Facility shall be planned and designed in accordance with the Federal Aviation Administration (FAA) Advisory Circulars 150/5390-2B, *Heliport Design*, and 150/5390-3, *Vertiport Design* as well as any other applicable FAA, State of Illinois and City of Chicago guidelines and rules and regulations.

3.2.5 All airside, landside and terminal activities including, but not limited to, aircraft landing, takeoff, and parking, vehicle parking, circulation and storage must take place within the site's boundaries.

3.2.6 The Proposer shall demonstrate financial capability to undertake this development and at least five-years of successful management and operation of comparable vertiport, heliport, or airport support facilities. Descriptions of current or previously

operated aviation facilities must be submitted as well as any and all NTSB or other federal, state or local safety reports issued for those facilities.

3.2.7 Fueling operations shall meet the City of Chicago's regulations, the Illinois State Fire Marshal's regulations, and FAA regulations including Advisory Circular 150/5230-4A, *Aircraft Fuel Storage, Handling, and Dispensing on Airports*. In addition, the Proposer shall comply with all applicable National Fire Protection Association (NFPA) codes and standards, including, but not limited to, NFPA 418, *Standard for Heliports*.

3.2.8 The IMDC encourages Proposers to incorporate environmentally sensitive "green" development aspects that qualify for basic Leadership in Energy and Environmental Design (LEED) Certification or higher.

The Developer shall also demonstrate a thorough knowledge of Vertiport/Heliport facility development and operations by preparing and including the following in its proposal submission:

3.2.9 Project Vision/Description: A comprehensive Vision Statement (not to exceed 10 pages) demonstrating a full understanding of the project and how its project approach meets and/or exceeds IMDC's goals and objectives. The narrative should describe potential demand for a vertiport/heliport at the designated site, facility requirements to meet that demand and the Developer's general approach to establishing the Facility as well as management, airside and landside operations, airspace, security, public safety and community compatibility. The vision statement should also include and describe any innovative economic opportunities and community benefits that may result from the Facility's long-term development and operation.

3.2.10 Project Plan: A detailed Project Plan that lists and describes the individual, multi-disciplined steps and tasks required to establish and operate the Facility. The Project Plan should include a conceptual layout drawing of the Facility that graphically depicts the development of airside and landside facilities. Additionally, the Project Plan should include a schedule for the project's key milestones, including prerequisite permits and approvals.

3.2.11 Operations Plan: A detailed Operational Plan for the entire Facility, including but not limited to operating efficiencies (take-off landing, parking, etc), maintenance, proposed products and services, any plans to use and/or install environmentally-preferable products or devices. The Operations Plan shall specify how HEMS activity at the Facility will be provided the highest operational priority, including a description of vehicular access systems to minimize patient transfer times.

3.2.12 Airspace Plan: An Airspace Plan detailing Facility flight procedures showing proposed approach and departure paths to/from the Facility as well as compliance with all applicable Federal Aviation Regulations (FARs) and consistency with the current edition of the FAA's Chicago Helicopter Route Chart. Flight Path design shall incorporate Helicopter Association International's "Fly Neighborly" program elements, which encourage noise abatement through increased pilot awareness, pilot training, and increased sensitivity to community concerns.

3.2.13 Security/Public Safety Plan: A Security/Public Safety Plan detailing implementation of a 24 hour-a-day/7 days-per-week security system featuring access control and public safety mechanisms. The Developer shall be responsible for all security functions, plans and systems at its sole cost and expense. Additionally, such plans and systems are subject to the approval of IMDC.

3.2.14 Public Acceptance/Community Compatibility: A description of any systems deemed necessary to address potential public acceptance and community compatibility issues associated with developing the Facility at the designated site.

### 3.3 DEVELOPER AND STAFF REQUIREMENTS/EXPERIENCE

3.3.1 Proposers are encouraged to assemble a team of specialists to address the specific, yet varied disciplines typically associated with aviation facility development. Descriptions of the Proposer's development team shall include the following information:

A. PROPOSING ENTITY: Provide the organizational form of the entity that would enter into a lease agreement with IMDC. If the entity is a subsidiary or affiliate of another organization the proposer shall indicate such relationship.

B. CORPORATE OFFICERS: Identify the names and addresses of all corporate officers of the Proposing entity.

C. ORGANIZATIONAL CHART: Provide a project organization chart illustrating the Development Team's structure, indicating the roles and responsibilities of each team member and the proposed interrelationships of the team with IMDC during the design, development and operation of the Facility.

D. PERSONNEL: Proposer must provide resumes for all key personnel, including the project manager, who will be involved in providing the services contemplated by this RFP. Resumes must include the full name, education background, and years of experience and employment history particularly as it relates to the scope of services specified herein.

E. MINORITY, FEMALE AND PERSONS WITH DISABILITY SUBCONTRACTING: This solicitation contains a goal to include businesses owned and controlled by minorities, females and persons with disabilities in the IMDC's procurement and contracting processes. Please provide an original and 1 copy of your Utilization Plan.

F. FINANCIAL CAPACITY INFORMATION: The Developer shall demonstrate financial capability to undertake the services requested and should include a financial statement or statements prepared in accordance with standard accounting procedures. Financial statements should include, but are not limited to, annual income and net worth (assets and liabilities), including a breakdown of liquid and non-liquid assets. Proposers should include supporting documentation of their financial worth, including but not limited to Certified Financial Statements, Balance Sheets and Income Statements and three (3) years of past tax returns (corporate or personal). Proposers may also be required to provide additional financial information upon request.

G. RELEVANT EXPERIENCE: Provide information related to relevant past experience of the team, demonstrating specific experience in the project's major technical components, as identified by the IMDC and Developer. The IMDC requires that team qualifications demonstrate extensive experience (at least five (5) years) in heliport operations, management of aviation facilities, management of helicopter service providers, and provision of FBO services. Project descriptions should include project elements, location, dates, and development team members and their roles (including master developer and construction manager) as well as an overview of financing structures for such projects.

H. AVIATION SAFETY RECORDS: Provide copies of safety record(s) from any member of the development team's past and/or current airport and/or heliport operations, including but not limited to any and all National Transportation Safety Board (NTSB) and/or other federal, state or local safety reports.

3.3.2 Subcontractor Disclosure. Will you be using any subcontractors? Yes No

If yes, you must identify the names and addresses of all subcontractors you will be using in the performance of this Contract, together with the anticipated amount of money that each subcontractor is expected to receive pursuant to this Contract. We may request updated information at any time.

3.3.3 References: You must provide references from established private firms and/or government agencies, (four total references preferred) other than the procuring entity, that can attest to your experience and ability to perform the contract subject of this solicitation. You must provide the name, contact information and a description of the supplies or services provided.

**3.4 DEVELOPER'S PRICE PROPOSAL:** The Developer's Price Proposal (3 copies) must be submitted in a separate, sealed envelope or container in the Offer container. The Developer will provide its Price Proposal in accordance with the specifications provided. The IMDC envisions entering into a long-term lease agreement with the Developer to ensure uninterrupted service at the Facility while providing the Developer with an adequate time frame to maximize financial investment returns.

3.4.1 Ground Lease Term - Proposed duration for the Ground Lease Agreement

3.4.2 Ground Lease Payment Schedule – Proposed rate per square foot and schedule of payments commencing upon execution of ground lease.

3.4.3 Pro-forma Income and Expense Projection – Developers must include a detailed, well articulated pro-forma income and expense projection for the first ten (10) years of operations, including an estimate of activity, projected landing fees and potential revenue sharing scenarios as well as summaries for subsequent years. This pro-forma projection must include explanations for the assumptions used in its formation.

3.4.4 Good Faith Deposit – The Developer's Price Proposal must be accompanied by a Good Faith Deposit ("Deposit"). The Deposit will be \$10,000.00. Acceptable forms of deposit include cashier's check or certified check. Checks should be made payable to the "Illinois Medical District Commission". The Deposit will be returned to respondents that are not selected. The Deposit of the selected respondent shall become a non-refundable deposit applied to the first payment under the ground lease.

**SECTION 4 - OFFER TO IMDC**

Project Title / Reference # RFP for Vertiport Developer / IMDC 10-001

The undersigned authorized representative of the identified Developer does hereby submit this Offer to perform in full compliance with the subject solicitation. By completing and signing this Form, we are making an Offer to the IMDC that the IMDC may accept. We are also certifying to compliance with the various requirements of the solicitation and the documents contained in the solicitation.

We have marked each blank below as appropriate and have used N/A when a section is not applicable to this solicitation. We understand that failure to meet all requirements is cause for disqualification.

We have:

Reviewed the Offer Form, including all referenced documents as well as the solicitation Instructions, filled in all relevant blanks, provided any requested information, and

Signed on the space(s) provided.

Acknowledgment of Amendments.

We acknowledge receipt of any and all amendments to the solicitation and have taken those into account in making this Offer.

Offer Response Forms. Accompanying and as part of this Offer you will find:

For all Offers

- Bid Security, if required
- Designated number of copies
- Electronic copies, if required. For RFP's include separate disks for technical and pricing, with pricing disk sealed in pricing envelope.
- Completed Responsibility Forms packet
  - Business and Directory Information
  - Conflict of Interest Disclosures
  - Completed and Signed Taxpayer Identification Number form
- Completed Minority, Female and Person with Disability Status and Subcontracting form, if required
- References, if required
- Political Contributions - We have made the certification required by Public Act 95-971, and attached the State Board of Elections certificate of registration if applicable.

For IFBs

Completed and signed Contract

For RFPs

Response to Statement of Work/Specifications/Qualifications and Price sections completed and submitted in separate sealed envelopes in the Offer package.

Exceptions. In preparing the Offer we have taken (check one)

- No Exceptions
- Exceptions to the State's language or requirements in the following sections of the Offer:
  - Contract
  - Responsibility forms

Details of the exceptions are shown (check one)

- in the text of each section of the Offer
- on a separate labeled attachment

Domestic Products (check one)

We are not making a claim for preference under the Procurement of Domestic Products Act (30 ILCS 517).

\_\_\_\_ We are making a claim for preference under the Procurement of Domestic Products Act (30 ILCS 517). After reading the Act we certify we are eligible and that the following product or products bid or proposed in response to this solicitation meet the requirements of the Act. Check and complete as applicable:

\_\_\_\_ All products

\_\_\_\_ The following individual products (show line item if applicable)

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Request for Confidential Treatment (check one)

\_\_\_\_ We are not requesting confidential treatment for this Offer.

\_\_\_\_ We are seeking confidential treatment for portions of this Offer. We have supplied, as an attachment to this Offer, a listing of the provisions identified by section number for which we seek confidential treatment along with the statutory basis under Illinois law for exempting that information from public disclosure. We have supplied an additional copy of the Offer with confidential information deleted. In the event the designation of confidentiality of this information is challenged, the undersigned hereby agrees to provide legal counsel or other necessary assistance to defend the designation of confidentiality and agrees to hold the State harmless for any costs or damages arising out of the State agreeing to withhold the materials based on Vendor's request.

Protests and Negotiations

If we are selected for award, we understand that does not entitle us to a contract. We further understand the award is conditioned on favorable resolution of any protests and to successful negotiation of terms and conditions including, but not limited to price and any exceptions requested.

Developer Contact Person: The contact person for purposes of responding to any questions the State may have is:

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

Address \_\_\_\_\_

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

Email \_\_\_\_\_

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(Developer name and DBA)

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(Signature of party authorized to bind the named Vendor)

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

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Address \_\_\_\_\_

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

E-mail \_\_\_\_\_

**SECTION 5 - RESPONSIBILITY FORMS**

We have identified various information we need in order to determine if you are eligible to contract with the IMDC and can be considered a "Responsible" Vendor.

You will need to:

Review each of the Responsibility forms, fill in all relevant blanks and provide any requested information.

Business and Directory Information

Conflict of Interest Disclosures

Minority, Female, Person with Disability Status and Subcontracting

Political Contributions

Complete and sign the:

Taxpayer Identification Form

You must include all of this as part of your Offer or risk disqualification.

## Business and Directory Information

- (a) Name of Business (Official Name and D/B/A)
- (b) Business Headquarters (include Address, Telephone and Facsimile)
- (c) If a Division or Subsidiary of another organization provide the name and address of the parent
- (d) Billing Address
- (e) Name of Chief Executive Officer
- (f) Customer Contact (include Name, Title, Address, Telephone, Toll-Free Number, Facsimile and E-mail)
- (g) Company Web Site
- (h) Type of Organization (i.e., Sole Proprietor, Corporation, Partnership, etc. -- should be the same as on the Taxpayer ID form below)
- (i) Length of Time in Business
- (j) Annual Sales (for most recently completed Fiscal Year)
- (k) Number of Full-Time Employees (average from most recent Fiscal Year)
- (l) Type of and description of business
- (m) State of incorporation, state of formation or state of organization
- (n) Identify and specify the location(s) and telephone numbers of the major offices and other facilities that relate to the Vendor's performance under the terms of this solicitation.
- (o) Department of Human Rights (DHR) Public Contract Number  
If Developer has employed fifteen (15) or more full-time employees at any time during the 365-day period immediately preceding the publication of this solicitation in the Illinois Procurement Bulletin (or issuance date if not published), then Developer must have a current Public Contract Number or have proof of having submitted a completed application for one prior to the Solicitation opening date. (44 Ill. Adm. Code 750.210(a)) For application information call the DHR Public Contracts unit at (312) 814-2431.

Show # \_\_\_\_\_ or attach proof of application.

## DISCLOSURES AND CONFLICTS OF INTEREST

**Instructions:** Developer shall disclose financial interests, potential conflicts of interest and contract information identified in Sections 1, 2 and 3 below as a condition of receiving an award or contract (30 ILCS 500/50-13 and 50-35). Failure to fully disclose shall render the contract, bid, proposal, subcontract, or relationship voidable by the chief procurement officer if s/he deems it in the best interest of the State of Illinois and may be cause for barring from future contracts, bids, proposals, subcontracts, or relationships with the State.

- There are five sections to this form and each must be completed to meet full disclosure requirements.
- Note: The requested disclosures are a continuing obligation and must be promptly supplemented for accuracy throughout the process and throughout the term of the resultant contract if the bid/offer is awarded. As required by 30 ILCS 500/50-2, for multi-year contracts Vendors must submit these disclosures on an annual basis.

A publicly traded entity may submit its 10K disclosure in satisfaction of the disclosure requirements set forth in Section 1 below. HOWEVER, if a Developer submits a 10K, they must still must complete Sections 2, 3, 4 and 5 and submit the disclosure form.

If the Developer is a wholly owned subsidiary of a parent organization, separate disclosures must be made by the Developer and the parent. For purposes of this form, a parent organization is any entity that owns 100% of the Vendor.

This disclosure information is submitted on behalf of (show official name of Vendor, and if applicable, D/B/A and parent):

Name of Vendor: \_\_\_\_\_

D/B/A (if used): \_\_\_\_\_

Name of any Parent Organization: \_\_\_\_\_

### Section 1: Section 50-35 Disclosure of Financial Interest in the Vendor. *(All Vendors must complete this section)*

*Vendors must complete subsection (a), (b) or (c) below. Please read the following subsections and complete the information requested.*

- a. If Developer is a Publicly traded corporation subject to SEC reporting requirements
  - i. Developer shall submit their 10K disclosure (include proxy if referenced in 10k) in satisfaction of the financial and conflict of interest disclosure requirements set forth in subsections 50-35 (a) and (b) of the Procurement Code. The SEC 20f or 40f, supplemented with the names of those owning in excess of 5% and up to the ownership percentages disclosed in those submissions, may be accepted as being substantially equivalent to 10K.

Check here if submitting a 10k, 20f, or 40f.

**OR**

- b. If Developer is a privately held corporation with more than 400 shareholders
  - i. These Vendors may submit the information identified in 17 CFR 229.401 and list the names of any person or entity holding any ownership share in excess of 5% in satisfaction of the financial and conflict of interest disclosure requirements set forth in subsections 50-35 a and b of the Illinois Procurement Code.

**OR**

- c. If Vendor is an individual, sole proprietorship, partnership or any other not qualified to use subsections (A) or (B), complete (i) and (ii) below as appropriate.
  - i. For **each individual** having any of the following financial interests in the Vendor (or its parent), please mark each that apply and show the applicable name and address. Use a separate form for each individual.

Do you have an ownership share of greater than 5% of the offering entity or parent entity?

Yes No

Do you have an ownership share of less than 5%, but which has a value greater than \$106,447.20?

Yes No

Do you receive more than \$106,447.20 of the offering entity's or parent entity's distributive income? (Note: Distributive income is, for these purposes, any type of distribution of profits. An annual salary is not distributive income.)

Yes No

Do you receive greater than 5% of the offering entity's or parent entity's total distributive income, but which is less than \$106,447.20?

Yes No

5. If you responded yes to any of questions 1 – 4 above, please provide either the percentage or dollar amount of your ownership or distributive share of income: \_\_\_\_\_ . For partnerships with more than 50 partners, the percentage share of ownership of each individual identified above may be shown in the following ranges (dollar value fields must also be completed when applicable):

0.5% or less \_\_\_\_\_ >0.5 to 1.0% \_\_\_\_\_ >1.0 to 2.0% \_\_\_\_\_ >2.0 to 3.0 % \_\_\_\_\_ > 3.0 to 4.0% \_\_\_\_\_ %  
>4.0 to 5.0% \_\_\_\_\_ and in additional 1% increments as appropriate \_\_\_\_\_ %

6. If you responded yes to any of the questions 1-4 above, please check the appropriate type of ownership/distributable income share:

Sole Proprietorship    Stock    Partnership    Other (explain) \_\_\_\_\_

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

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

ii. In relation to individuals identified above, indicate whether any of the following potential conflict of interest relationships apply. If "Yes," please describe each situation (label with appropriate letter) using the space at the end of this Section (attach additional pages as necessary). If no individual has been identified above, mark not applicable (N/A) here \_\_\_\_\_.

(a) State employment, currently or in the previous 3 years, including contractual employment of services directly with the individuals identified in Section 1 in their individual capacity unrelated to the Vendor's contract. Yes No

(b) State employment of spouse, father, mother, son, or daughter, including contractual employment for services in the previous 2 years. Yes No

(c) Elective status; the holding of elective office of the State of Illinois, the government of the United States, any unit of local government authorized by the Constitution of the State of Illinois or the statutes of the State of Illinois currently or in the previous 3 years. Yes No

(d) Relationship to anyone holding elective office currently or in the previous 2 years; spouse, father, mother, son, or daughter. Yes No

(e) Appointive office; the holding of any appointive government office of the State of Illinois, the United States of America, or any unit of local government authorized by the Constitution of the State of Illinois or the statutes of the State of Illinois, which office entitles the holder to compensation in excess of expenses incurred in the discharge of that office currently or in the previous 3 years. Yes No

(f) Relationship to anyone holding appointive office currently or in the previous 2 years; spouse, father, mother, son, or daughter. Yes No

(g) Employment, currently or in the previous 3 years, as or by any registered lobbyist of the State government. Yes No

(h) Relationship to anyone who is or was a registered lobbyist in the previous 2 years; spouse, father, mother, son, or daughter. Yes No

(i) Compensated employment, currently or in the previous 3 years, by any registered election or re-election committee registered with the Secretary of State or any county clerk in the State of Illinois, or any political action committee registered with either the Secretary of State or the Federal Board of Elections. Yes No

(j) Relationship to anyone; spouse, father, mother, son, or daughter; who is or was a compensated employee in the last 2 years of any registered election or reelection committee registered with the Secretary of State or any county clerk in the State of Illinois, or any political action committee registered with either the Secretary of State or the Federal Board of Elections. Yes No



A bid, offer, or proposal that does not include this disclosure shall not be considered responsive. We may consider this disclosure when evaluating the bid, offer, or proposal or awarding the contract.

You must check one of the following items and if item 2 is checked you must also make the necessary disclosure:

There are no business operations that must be disclosed to comply with the above cited law.

The following business operations are disclosed to comply with the above cited law:

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**Section 5: Current and Pending Contracts** *(All Vendors must complete this section).*

Does the Vendor have any contracts pending contracts, bids, proposals or other ongoing procurement relationships with units of State of Illinois government? Yes No

If yes, please identify each contract, pending contract, bid, proposal and other ongoing procurement relationship it has with units of State of Illinois government by showing agency name and other descriptive information such as bid number, project title, purchase order number or contract reference number.

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**Section 6: Representative Lobbyist/Other Agent** *(All Vendors must complete this section).*

Is the Vendor represented by or employ a lobbyist or other agent who is not identified under Sections 1 and 2 and who has communicated, is communicating, or may communicate with any State officer or employee concerning the bid, offer or contract? Yes No

If yes, please identify each agent / lobbyist, including name and address.

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Costs/Fees/Compensation/Reimbursements related to assistance to obtain contract (describe):

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Vendor certifies that none of these costs will be billed to the State in the event of contract award. Vendor must file this information with the Secretary of State.

**This Disclosure is signed and made under penalty of perjury.**

This Disclosure information is submitted on behalf of: \_\_\_\_\_

(Vendor/Subcontractor Name)

Name of Authorized Representative: \_\_\_\_\_

Title of Authorized Representative: \_\_\_\_\_

Signature of Authorized Representative: \_\_\_\_\_

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

\_\_\_\_\_, 20\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_

(seal)

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

My Commission Expires: \_\_\_\_\_

**Minority, Female, Person with Disability Status and Subcontracting**

The Business Enterprise Program Act for Minorities, Females and Persons with Disabilities (BEP) (30 ILCS 575) establishes a goal for contracting with businesses that have been certified as owned and controlled by persons who are minority, female or who have disabilities. While you must complete this form, your response will not be considered in the evaluation. A listing of certified businesses may be obtained from the Department of Central Management Services' Business Enterprise Program for Minorities, Females and Persons with Disabilities by calling 312/814-4190 (Voice & TDD), 800/356-9206 (Toll Free), or 800/526-0844 (Illinois Relay Center for Hearing Impaired).

Name of Company (and D/B/A): \_\_\_\_\_

Is your company at least 51% owned and controlled by individuals in one or more of the following categories? Yes No

If "Yes" check each that applies:

- Category:
- Minority
- Female
- Person with Disability
- Disadvantaged

If "Yes," please identify, by checking the applicable blanks, which agency certified the business and in what category:

- Certifying Agency:
- Department of Central Management Services
- Women's Business Development Center
- Chicago Minority Business Development Council
- Illinois Department of Transportation
- Other (please identify): \_\_\_\_\_

- Category:
- Minority
- Female
- Person with Disability
- Disadvantaged

If you are not a certified BEP business, do you have a written policy or goal regarding contracting or subcontracting with BEP certified Vendors? Yes (attach copy) No

If "No," will you make a commitment to contact BEP certified Vendors and consider them for subcontracting opportunities on this contract? Yes No

Do you plan on ordering supplies or services in furtherance of this contract from BEP certified Vendors? Yes No

If "Yes," please identify what you plan to order, the estimated value as a percentage of your total Offer, and the names of the BEP certified Vendors you plan to use.

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**TAXPAYER IDENTIFICATION NUMBER**

I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).
  - *If you are an individual, enter your name and SSN as it appears on your Social Security Card.*
  - *If you are a sole proprietor, enter the owner's name on the name line followed by the name of the business and the owner's SSN or EIN.*
  - *If you are a single-member LLC that is disregarded as an entity separate from its owner, enter the owner's name on the name line and the d/b/a on the business name line and enter the owner's SSN or EIN.*
  - *If the LLC is a corporation or partnership, enter the entity's business name and EIN and for corporations, attach IRS acceptance letter (CP261 or CP277).*
  - *For all other entities, enter the name of the entity as used to apply for the entity's EIN and the EIN.*

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

**Taxpayer Identification Number:**

Social Security Number \_\_\_\_\_  
or  
Employer Identification Number \_\_\_\_\_

**Legal Status (check one):**

- |   |  |
|---|--|
| Individual  | Governmental   |
| Sole Proprietor   | Nonresident alien  |
| Partnership/Legal Corporation   | Estate or trust  |
| Tax-exempt  | Pharmacy (Non-Corp.)   |
| Corporation providing or billing<br>medical and/or health care services     | Pharmacy/Funeral Home/Cemetery (Corp.)   |
| Corporation NOT providing or billing<br>medical and/or health care services | Limited Liability Company (select applicable tax classification)<br>D = disregarded entity<br>C = corporation<br>P = partnership |
| Other: _____  |  |

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

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

## SECTION 6 - RESPONSIVENESS

For this solicitation, you will need to respond to each of the points identified in Section 3 of the Solicitation. You must follow the format referenced below.

### 6.1 GENERAL INSTRUCTIONS

6.1.1 These instructions prescribe the format and content of the Offer. They are designed to facilitate a fair and uniform review Process. Failure to adhere to this format will impact our evaluation and may result in disqualification of the Offer.

6.1.2 The response—completed, signed and returned—will constitute the Offer. A signed original and the designated number of copies of each Offer are required (See Section 3 of the RFP). Failure to submit the required number of copies may prevent the Offer from being evaluated within the allotted time.

6.1.3 Your offer must provide all information requested (See Section 3 of the RFP) and must address all points. Suggested exceptions to requirements, while allowed, are discouraged. The IMDC is under no obligation to accept exceptions or modifications suggested by the Developer (or any third parties/subcontractors), and any exceptions or modifications will affect our evaluation and may result in rejection. If the Developer (or any third parties/subcontractors) does wish to suggest exceptions or modifications, all such exceptions or modifications must be made prior to the Offer submission deadline. Offers, including suggested exceptions to requirements and contract modifications, must be submitted in ink, typed, or printed form and signed by an authorized representative. The IMDC may require that offers be submitted in electronic form. All terms to which Developer does not suggest an exception or modification will be deemed by the IMDC as having been accepted by the Developer. Suggested exceptions or modifications shall be made by the Developer (or any third parties/subcontractors) on the relevant page containing the language to be modified or the requirement to which an exception is proposed. If the suggested changes cannot reasonably be made on the relevant page, the Developer may include specific, suggested exceptions or modifications referencing specific paragraphs of the RFP.

6.1.4 The Offer is divided into two parts: (1) the Developer's Proposal and (2) the Developer's Price Proposal. The Offer must be Submitted in a sealed envelope or container, with the Developer's Price Proposal under separate cover in a separate, sealed envelope or container in the Offer container. If multiple envelopes or containers for each Offer are used, the envelopes or containers must be numbered in the following fashion: 1 of 4, 2 of 4, etc. The envelopes or containers must be labeled with the following information: IMDC's name and address, RFP Title and Reference Number, Due Date and Time and Developer's Name and address.

6.1.5 If the Developer designates any information in its Offer as confidential, the Developer must also submit one (1) copy of the Offer from which confidential information has been excised. The confidential material must be excised in such a way as to allow the public to determine the general nature of the material removed and to retain as much of the Offer as possible.

6.1.6 Offers must not contain promotional or display materials.

6.1.7 Attachments must be referenced in the Offer.

**6.2 DEVELOPER'S PROPOSAL:** The following documents and responses will be included in the Developer's Proposal and tabbed as such in the order given below:

6.2.1 Title Page/Transmittal Letter: An individual authorized to legally bind the Developer must sign the transmittal letter. The person who signs the transmittal letter will be considered the contact person for all matters pertaining to the Offer unless the Developer designates another person in writing. The letter must include the Developer's mailing address, e-mail address, fax number and telephone number along with all participating developer firm name(s). Any request for confidential treatment of information must be included in the transmittal letter in addition to the specific statutory basis supporting the request, an explanation of why disclosure of the information is not in the best interest of the public, and the specific basis under Section 7 of the Illinois Freedom of Information Act (5 ILCS 140/7) for the exemption from disclosure of such information. The transmittal letter must also contain the name, address and telephone number of the individual authorized to respond to the IMDC about the confidential nature of the information.

6.2.2 Table of Contents: The Developer must include a table of contents in its proposal indicating the tabbed sections at a minimum. The proposal must be page numbered sequentially from front to back.

6.2.3 Project Narrative/Executive Summary: The Developer must prepare an Executive Summary and overview of the offer including but not limited to all of the following information:

6.2.3.1 Project timeline for the development from the start through occupancy including but not limited to the major Milestones of Site Plan and Elevations, Start of Project/Groundbreaking, Permitting, Start of Construction, Completion of Construction and Occupancy.

6.2.3.2 Letters of intent from potential tenants and/or users who have expressed interest in locating to the Development or are interested in using same.

6.2.3.3 The estimated number of construction jobs generated as well as the estimated number of new full and part time jobs that will be created.

6.2.3.4 A description of the public benefit of the project to those that work, live and visit the IMD.

6.2.4 Plans and Drawings/Technical Approach: The Developer must provide a detailed description of how the Developer plans to approach each project objective and requirement as expressed by the IMDC in Section 3.2 of the RFP. Respondents need not prepare construction drawings at this Time. All plans or drawings should be no larger than 11" x 17".

6.2.4.1 Project Vision/Description

6.2.4.2 Project Plan

6.2.4.3 Operations Plan

6.2.4.4 Airspace Plan

6.2.4.5 Security/Public Safety Plan

6.2.4.6 Public Acceptance/Community Compatibility

6.2.5 Developer Team Qualifications/Technical Experience: The Developer must provide information regarding its team and experience as defined in RFP Section 3.3.

6.2.6 References: The Developer shall provide the name, address, telephone number, e-mail address and other contact information of three (3) References for which you have provided services similar to those described in this RFP. Provide the project/facility name and services provided for each reference.

6.2.7 Project Ownership Structure: A description of the ownership structure (i.e. corporation, LLC, LP, etc.) of the proposed project, including all entities and individuals, and the responsibilities and percentages of ownership of the parties comprising each entity, if available. Include an ownership structure chart that illustrates the description of the ownership structure, if available. Include an ownership structure chart that illustrates the description of said structure.

6.2.8 Financial Information: Respondents must submit all documents listed below. Proposals that do not include the items listed below cannot be adequately compared to the other proposals and cannot be fully evaluated for their responsiveness to the RFP. Please provide the following financial documents:

6.2.8.1 Sources and Use of Funds Statement – Include equity, loans with terms and interest rates. Identify financial institutions, if any, which have shown an interest in providing financing toward this project along with letter of interest from these institutions, if available.

6.2.8.2 Project Development Budget – Include anticipated costs of planning, design and construction. Show the construction cost per use.

6.2.9 Changes to the RFP: If the IMDC issues any changes (including amendments or addenda) to this RFP, these changes must be signed by an individual authorized to legally bind the Developer and included in the Technical Proposal.

6.2.10 Forms Required of the Developer: The successful Respondent may be required to provide certain certifications, complete certain forms and comply with various State laws relating to the proposed redevelopment, as required by the Illinois Procurement Code, 30 ILCS 500/1-1 *et. seq.*, as it relates to Construction and Construction-related services.

**6.3 DEVELOPER'S PRICE PROPOSAL**: The Developer's Price Proposal (3 copies) must be submitted in a separate, sealed envelope or container in the Offer container. The Developer will provide its Price Proposal in accordance with the specifications provided. The IMDC envisions entering into a long-term lease agreement with the Developer to ensure uninterrupted service at the Facility while providing the Developer with an adequate time frame to maximize financial investment returns.

6.3.1 Ground Lease Term - Proposed duration for the Ground Lease Agreement

6.3.2 Ground Lease Payment Schedule – Proposed rate per square foot and schedule of payments commencing upon execution of ground lease.

6.3.3 Pro-forma Income and Expense Projection – Developers must include a detailed, well articulated pro-forma income and expense projection for the first ten (10) years of operations, including an estimate of activity, projected landing fees and potential revenue sharing scenarios as well as summaries for subsequent years. This pro-forma projection must include explanations for the assumptions used in its formation.

6.3.4 Good Faith Deposit – The Developer's Price Proposal must be accompanied by a Good Faith Deposit ("Deposit"). The Deposit will be \$10,000.00. Acceptable forms of deposit include cashier's check or certified check. Checks should be made payable to the "Illinois Medical District Commission". The Deposit will be returned to respondents that are not selected. The Deposit of the selected respondent shall become a non-refundable deposit applied to the first payment under the ground lease.

