



# Corrections and Community Supervision

KATHY HOCHUL  
Governor

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Acting Commissioner

## ATTACHMENT 13 Proposal Document Checklist

Please reference Section 7.0 for the appropriate format and quantities for each proposal submission.

RFP# 2022-01 – Medicated Assisted Treatment Program		
For the Administrative Proposal		
RFP §	Submission	Included
§ 6.1.1	Attachment 1 – Bidder’s Disclosure of Prior Non-Responsibility Determinations, completed and signed.	<input type="checkbox"/>
§ 6.1.2	Freedom of Information Law – Proposal Redactions (If Applicable)	<input type="checkbox"/>
§ 6.1.3	Attachment 3 – Vendor Responsibility Attestation	<input type="checkbox"/>
§ 6.1.4	Attachment 4 – Vendor Assurance of No Conflict of Interest or Detrimental Effect	<input type="checkbox"/>
§ 6.1.5	M/WBE Participation Requirements:	<input type="checkbox"/>
	Attachment 5 – Form #1 (If Applicable)	<input type="checkbox"/>
	Attachment 5 – Form #2 (If Applicable)	<input type="checkbox"/>
	Attachment 5 – Form #4	<input type="checkbox"/>
	Attachment 5 – Form #5	<input type="checkbox"/>
§ 6.1.6	Attachment 6 – Encouraging Use of New York Businesses	<input type="checkbox"/>
§ 6.1.7	Attachment 7 – Bidder’s Certified Statements, completed & signed.	<input type="checkbox"/>
§ 6.1.8	Attachment 9 – References	<input type="checkbox"/>
§ 6.1.9	Attachment 10 – Diversity Practices Questionnaire	<input type="checkbox"/>
§ 6.1.10	Attachment 11 – Executive Order 177 Prohibiting Contracts with Entities that Support Discrimination	<input type="checkbox"/>
§ 6.1.11	Attachment 12 – State Finance Law § 139-L Certification	<input type="checkbox"/>
For the Technical Proposal		
RFP §	Submission	Included
§ 6.2.1	Title Page	<input type="checkbox"/>
§ 6.2.2	Table of Contents	<input type="checkbox"/>
§ 6.2.3.A	Minimum Qualifications Narrative	<input type="checkbox"/>
§ 6.2.3.B	Preferred Qualifications Narrative	<input type="checkbox"/>
§ 6.2.4	Technical Proposal Narrative	<input type="checkbox"/>
§ 6.2.4.A	Organization and Experience	<input type="checkbox"/>
§ 6.2.4.B	Work Plan	<input type="checkbox"/>

§ 6.2.4.C	Staffing	<input type="checkbox"/>
§ 6.2.4.D	Reporting/Record Keeping	<input type="checkbox"/>
§ 6.2.4.E	Project Implementation	<input type="checkbox"/>
§ 6.2.4.F	Information Technology/Electronic Interface	<input type="checkbox"/>
§ 6.2.4.G	Security	<input type="checkbox"/>
§ 6.2.4.H	Transition	<input type="checkbox"/>
<b>For the Cost Proposal Requirement</b>		
<b>RFP §</b>	<b>Requirement</b>	<b>Included</b>
§ 6.3	Attachment 15 - Cost Proposal	<input type="checkbox"/>
	Attachment 15-1: Region 1 (Only submit if proposing for Region 1)	<input type="checkbox"/>
	Attachment 15-2: Region 2 (Only submit if proposing for Region 2)	<input type="checkbox"/>
	Attachment 15-3: Region 3 (Only submit if proposing for Region 3)	<input type="checkbox"/>
	Attachment 15-4: Region 4 (Only submit if proposing for Region 4)	<input type="checkbox"/>
	Attachment 15-5: Region 5 (Only submit if proposing for Region 5)	<input type="checkbox"/>