

# City of Memphis

## Division of Housing and Community Development

### Office of Development Services

#### Residential Accessibility Modification Program (RAMP)



#### **Request for Proposals for Residential Accessibility Modification Program Contractors**

**PROPOSAL NUMBER: 2026-RAMP-001**

**DATE ISSUED: February 16, 2026**

**RFP Proposal- Open Submittal period of performance for these activities is 42 months.  
FY 2026-2030**

#### **Request for Proposal (RFP) & Statement of Qualifications (SOQ)**

#### **Residential Accessibility Modification Program Contractors**

- **Proposal Number:** 2026-RAMP-001
- **Date Issued:** February 17, 2026
- **Open Submission Deadline:** March 06, 2026

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## INTRODUCTION

The City of Memphis – Division of Housing and Community Development (HCD) is soliciting proposals and statements of qualifications (SQQ) from certified contractors to perform comprehensive housing rehabilitation services, focusing on by providing and installing high-quality, no-cost accessibility modifications to homes. Modifications may include, but are not limited to, items such as ramps, grab bars, walk-in showers, raise toilets, hand-held shower controls, accessible light switches, universal design features, etc. to participate in HUD-funded programs: **Residential Accessibility Modification Program (RAMP)**.

This comprehensive purpose is to restore independence (for some) and ensure safety (for all) low-to-moderate income senior program participants (ages 62 yrs. and older) and individuals with disabilities by providing and installing high-quality, no-cost accessibility modifications to homes within the Memphis city limits and for-profit companies with experience in **rehabilitation homes assessments, remediation, minor home repairs, and environmental testing** are invited to submit.

This solicitation is **open and rolling**, and responses will be reviewed and accepted throughout the performance period. The City reserves the right to amend or cancel the RFP/SOQ at any time and will not reimburse applicants for costs associated with their submissions.

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## PROGRAM OVERVIEW

The Residential Accessibility Modification Program (RAMP) is funded by the U.S. Department of Housing and Urban Development (HUD) through the Community Development Block Grant (CDBG), the initiative aims to ensure that vulnerable residents can live in decent, safe, and sanitary conditions that are in compliance with federal housing quality standards (24 CFR § 570.208).

The primary objective of this program is to assist **low- to moderate-income households** within the City of Memphis in maintaining **safe, sanitary, decent, and accessible housing**, with particular emphasis on addressing accessibility needs for seniors and persons with disabilities. All accessibility-related home repair interventions funded through the Community Development Block Grant (CDBG) must comply with all applicable federal, state, and local laws and regulations, including HUD requirements, the Americans with Disabilities Act (ADA), Section 504 of the Rehabilitation Act of 1973, applicable building codes, and City of Memphis standards. All work must be completed in accordance with recognized construction and rehabilitation best practices.

Eligible activities include **accessibility improvements and reasonable housing modifications** necessary to accommodate persons with disabilities and to remove architectural barriers. These activities may include, but are not limited to:

- Installation of wheelchair and entry way ramp
- Bathroom and kitchen accessibility modifications such as walk-in shower or bathroom, handheld shower control
- Installation of handrails, grab bars, and other mobility-assistance features
- Modifications required to improve safe access to and use of the home
- Accessible light switches
- Universal design features

All rehabilitation and accessibility improvements must comply with the following federal requirements, as applicable:

- Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. § 794) and its implementing regulations at 24 CFR Part 8, which prohibit discrimination on the basis of disability and require accessibility in programs receiving federal financial assistance
- Americans with Disabilities Act (ADA), including Titles II and III, as applicable, and the 2010 ADA Standards for Accessible Design
- Community Development Block Grant (CDBG) rehabilitation eligibility and standards under 24 CFR § 570.202(a)(1) and 24 CFR § 570.202(b)
- HUD Guidelines 24 CFR Part 35 — Lead-Based Paint Poisoning Prevention in Certain Residential Structures

The RAMP is funded by the U.S. Department of Housing and Urban Development (HUD) through the Community Development Block Grant (CDBG) program. The primary objective of this program is to assist low- to moderate-income households within the City of Memphis in maintaining safe, sanitary, decent, and accessible housing, with particular emphasis on enabling residents—especially seniors and persons with disabilities—to safely remain in their homes.

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## **SCOPE OF WORK**

The City of Memphis, Division of Housing and Community Development (HCD), seeks qualified contractors to provide residential home repair and accessibility modification services under the Residential Repair and Modification Program (RAMP). The program is funded by the U.S. Department of Housing and Urban Development (HUD) through the Community Development Block Grant (CDBG) program and is intended to assist low- to moderate-income, and owner-occupied households within the City of Memphis.

The purpose of RAMP is to correct health, safety, code, and accessibility deficiencies and to remove architectural barriers so that eligible residents—particularly seniors and persons with disabilities—may safely remain in their homes.

Preferred Certifications: Certified Aging-in-Place Specialist (CAPS) – National Association of Home Builders (NAHB)

- Universal Design Certified Professional or equivalent accessibility-focused credential
- Valid State of Tennessee General Contractor License or applicable trade license
- Accessibility Specialist Certification or demonstrated ADA/Section 504 compliance training
- OSHA 10-hour or 30-hour Construction Safety Certification
- HUD Section 3 Business Concern Certification, where Hazard Remediation, Abatement, and Construction Work applicable
- EPA Lead Renovation, Repair and Painting (RRP) Certification (required for pre-1978 housing, preferred for firms and supervisors)

Contractor must be certified or licensed to perform intervention related to:

- Active State of Tennessee General Contractor License
- City of Memphis business registration (or ability to obtain prior to award)
- Must be in good standing with all state and local licensing authorities
- Must be registered to do business in the City of Memphis (if applicable)
- General construction, roofing, plumbing, HVAC, and electrical repair
- Certified Aging-in-Place Specialist (CAPS) – NAHB
- Accessibility / Universal Design training (HUD, NAHB, ICC, or equivalent)
- Section 504 / ADA construction compliance training (course or certificate)

### **Minimum Requirements:**

- Minimum 2–4 years of documented experience performing residential rehabilitation  
Demonstrated experience completing accessibility modifications, including but not limited to:
  - ADA-compliant ramps and handrails
  - Accessible bathroom modifications (roll-in showers, grab bars, toilet clearances)
  - Accessible
- General Liability Insurance (minimum limits per City of Memphis requirements)
- Ability to obtain performance and payment bonds (if required by project size)
- Ability to submit required documentation, not limited to:
  - Certified payrolls (if applicable)
  - Invoices aligned with approved scopes of work
  - Proof of materials and labor compliance

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## **PROFESSIONAL REQUIREMENTS**

All responding entities must:

- Be certified and licensed by all applicable authorities (e.g., TDEC, EPA, TN Board for Licensing Contractors)
- Have active SAM.gov registration and not be debarred
- Carry adequate insurance (as required in the Insurance requirement) listing the City of Memphis as the certificate holder
- Comply with Build America, Buy America Act (BABA) requirements, when applicable
- Ensure adherence to OSHA, EPA, and HUD regulations

### **Content of Submission**

The submittal should include the Statement of Qualification (SOQ) Response form and any additional documentation to support the vendor's qualifications and capacity to perform the services outlined in this solicitation.

## **SELECTION CRITERIA**

Submissions will be reviewed by a selection committee from HCD's. Selected vendors will be:

- Added to a Qualified Contractors List or
- Invited to participate in a master contract and competitive bidding process

RAMP reserves the right to accept or reject any or all (SOQ). Evaluation of SOQ will utilize the following factors:

- Contractor experience and expertise
- Staff experience and expertise
- Workload capacity
- Past performance selection process
- Technical qualifications and certification
- Financial and operational stability

A selection sub-committee will review and assess capacity and capability for all SOQs. The qualified respondents will be shortlisted and invited to participate in a master contract with the City to bid on task orders. Once on the master contract, vendors will be able to respond to task order requests based on the scope of work provided.

## **Compliance with Laws**

The selected vendor agrees to be bound by all applicable Federal, State, and Local laws, regulations, and directives as they pertain to the performance of the contract. This includes compliance with the Build America, Buy America Act. No contract award may be made to parties listed on the governmentwide exclusions in the System for Award Management (SAM), in accordance with the OMB guidelines on debarment and suspension at 2 CFR part 180.

## **Build America, Buy America**

The RAMP is subject to the Build America, Buy America Act (BABA), part of the Infrastructure Investment and Jobs Act (IIJA; Public Law No. 117-58). Contractors under this program agree to comply with all applicable domestic preferences under BABA, to provide sufficient product purchase information to RAMP to verify compliance with BABA, and to provide to RAMP upon request a statement of certification signed by an authorized representative attesting to the contractor's compliance with BABA.

## **Equal Opportunity**

RAMP, in accordance with 2 CFR §200.327, Appendix II of Part 200, and Executive Order 11246, seeks to ensure that all segments of the business community have access to supplying the goods and services needed by its programs. RAMP provides equal opportunity for all businesses and does not discriminate against any companies regardless of race, color, religion, age, sex, and national origin or disability.

## **Title VI Solicitation Notice**

RAMP, in accordance with the provisions of Title VI of the Civil Rights Act of 1964 (78 Stat. 252, 42 USC §§ 2000d to 2000d-4), hereby notifies all respondents that it will affirmatively ensure that any contract entered into pursuant to this advertisement, disadvantaged business enterprises will be afforded full and fair opportunity to submit responses to this solicitation and will not be discriminated against on the grounds of race, color, or national origin in consideration for an award.

## **SUBMITTAL REQUIREMENTS**

***Required Documents (must be submitted electronically or hard copy):***

### **A. General Documents**

- Cover Letter (max 2 pages)
- Signed Certification Form
- Completed Vendor Response Form

### **B. Threshold Documentation**

- TN Business License

- TN Contractor License/ Home Improvement License, (if applicable)
  - Insurance Certificate
  - EPA RRP Certification
  - TDEC Lead Certifications (Firm, Supervisor, Worker)
  - SAM.gov registration with CAGE Code
  - DUNS Number
- C. Supporting Materials
- Certificate of good standing
  - Staff Resumes and Certifications
  - References or Work Samples
  - Financial Statements
  - City of Memphis vendor registration
  - Conflict of Interest Statement

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## **SUBMISSION INSTRUCTIONS**

### **Electronic Submission**

Send complete electronic packages to: [Patricia.Lane@memphistn.gov](mailto:Patricia.Lane@memphistn.gov)

Label your submission clearly with: Proposal Number: 2026-RAMP-001

Title: Residential Accessibility Modification Program

Submitting Firm Name

Performance Period: FY 2026–2030

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## **8. QUESTIONS AND CONTACT INFORMATION**

For inquiries about this RFP/SOQ, please contact:

**Patricia Lane**, Sr. Real Estate Development Manager

[Patricia.Lane@memphistn.gov](mailto:Patricia.Lane@memphistn.gov)

Residential Accessibility Modification Program  
Vendor Response Form

Instructions:

Please complete all sections of this form. Ensure that all information provided is accurate and up to date to the best of your knowledge. Support documentation such as certifications will be requested in the instance your response is selected for future consideration. Ensure the form is signed and dated. Please email the completed response form to Patricia Lane at [Patricia.Lane@memphistn.gov](mailto:Patricia.Lane@memphistn.gov)

Company Names \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Areas of expertise: Please check all that apply: Lead remediation and abatement

General contracting for carpentry installations

Roofing

Electrical

Plumbing

HVAC (replacement or repair)

Flooring

Drywall and Painting Background and Experience:

Provide a brief description of your company's history:

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Do you have any staff who have experience in hazard assessment?    Yes    No    If so, how many?

Code Compliance and Inspections:

- Local and State building codes
- City and County inspection process
- Ability to pull permit
- Schedule Inspections (code, MLGW etc.) Correct deficiencies promptly

ADA & Section 504 Accessibility Modifications:

- Ramps (slope, landings, handrails)
- Grab bars and accessible bathrooms
- Understanding of **HUD Section 504** requirements for federally funded programs

HUD-Funded Project Experience:

Experience working under **federal funding rules**, including:

- CDBG and/or HOME programs
- Reimbursable cost structures
- Cost reasonableness

Familiarity with:

- Davis-Bacon (if applicable)
- Section 3 requirements
- Required documentation and reporting

Other: **Please initial each of the following statement.**

Are there any obstacles foreseen with delivering one or more parts of the scope of work in this solicitation?

Is your company a registered vendor with the City of Memphis Yes                  No

**Initial to confirm understanding:**

The selected vendor agrees to be bound by all applicable Federal, State, and Local laws, regulations, and directives as they pertain to the performance of the contract. No contract award may be given to parties listed on the government wide exclusions in the System for Award Management (SAM), in accordance with the OMB guidelines on debarment and suspension at 2 CFR part 180. \_\_\_\_\_

The Residential Accessibility Modification program is subject to the Build America, Buy America Act (BABA), part of the Infrastructure Investment and Jobs Act (IIJA; Public Law No. 117-58). Contractors under this program agree to comply with all applicable domestic preferences under BABA, to provide sufficient product purchase information to RAMP to verify compliance with BABA, and to provide to RAMP upon request a statement of certification signed by an authorized representative attesting to the contractor’s compliance with BABA. \_\_\_\_\_

# CERTIFICATION FORM NOTE

THIS PAGE MUST BE COMPLETED AND INCLUDED WITH THE SUBMITTAL CERTIFICATION.

The undersigned hereby certifies, on behalf of the Respondent named in this certification (the “Respondent”), that the information provided in this Request submittal to the RAMP is accurate and complete, and I am duly authorized to submit same. I hereby certify that the Respondent has reviewed this request in its entirety and accepts its terms and conditions.

\_\_\_\_\_  
Name of the Respondent

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

\_\_\_\_\_  
Typed Name of authorized representative

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date





RESIDENTAL ACCESABILTY MODIFICATION PROGRAM  
 170 NORTH MAIN ST. MEMPHIS, TN 38103 – 901-636-7300

**CONTRACTOR APPLICATION**

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Date \_\_\_\_\_

**I. FIRM IDENTIFICATION:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Phone \_\_\_\_\_ Home/Cell \_\_\_\_\_

Month and Year Established \_\_\_\_\_

**II OWNERSHIP OF FIRM:**

Type of Ownership:    Individual                      Partnership                      Corporation

If more than 50% ownership owned by a minority or female            Yes            No

Name, Title, and Address

Name \_\_\_\_\_ Title \_\_\_\_\_ % of Ownership \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % of Ownership \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % of Ownership \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ % of Ownership \_\_\_\_\_

**III MANAGEMENT**

Name \_\_\_\_\_ Position \_\_\_\_\_ Education \_\_\_\_\_ MGT/Tech \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_ Education \_\_\_\_\_ MGT/Tech \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_ Education \_\_\_\_\_ MGT/Tech \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_ Education \_\_\_\_\_ MGT/Tech \_\_\_\_\_

**IV. Self -Work Perform**

As a general contracting firm, list the types of work your firm normally performs with its own workforce (self-performed work) **(check all that apply)**

Commercial      Residential      New Construction      Remodeling      Single family home  
ADA Repairs      Minor Repair      Demolition

**V. ABILITY TO PERFORM WORK: RESOURCES**

**1. Labor**

Supervisory Personnel:

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Responsibilities \_\_\_\_\_

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Responsibilities \_\_\_\_\_

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Responsibilities \_\_\_\_\_

Office Workforce:

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Responsibilities \_\_\_\_\_

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Responsibilities \_\_\_\_\_

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Responsibilities \_\_\_\_\_

Field Workers

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Trade \_\_\_\_\_

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Trade \_\_\_\_\_

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Trade \_\_\_\_\_

Other Personnel:

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Responsibilities \_\_\_\_\_

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Responsibilities \_\_\_\_\_

Name \_\_\_\_\_ Years of Experience \_\_\_\_\_ Responsibilities \_\_\_\_\_

**2. Trade References**

List all material suppliers that will extend trade credit to your firm for **thirty (30) days or more.**

Name \_\_\_\_\_ Contact person \_\_\_\_\_ Contact phone \_\_\_\_\_

Type of material \_\_\_\_\_ Credit term \_\_\_\_\_



**VII. CONTRACTS OR JOBS RECENTLY COMPLETED**

*(List all projects completed in previous years, including project name, year completed, brief scope of work, and contract amount, attached another page if necessary)*

Project name or type (single family, commercial etc.)	Year of Completion	Brief Scope of work (rehab, new construction etc.)	Amount of project

**VIII ACTIVE CONTRACT OR JOBS**

NAME	ADDRESS	PHONE NUMBER	DESCRIPTION

**IX FINANCIAL:**

Name of Bank and Branch	Name of Loan Officer (familiar with contractor’s credit)

Average size of monthly payroll during preceding 12 months \_\_\_\_\_

Residential Accessibility Modification Program

**X. INSURANCE REQUIRMENTS**

- A. Proof of Insurance required,
- B. Record of surety and Fidelity Bonds: (List bonds obtained during last two years- bid payment or performance).

Date	Contract/Job	Company/Agent	Type of Bond	Amount Surety

C. Is your company currently engaged in any **pending litigation**?      Yes      No If **Yes**, please **state the**

**nature of the litigation**, including the parties involved and the current status.

- D. Does anyone working with this firm have a financial interest or investment in any other contracting firm associated with the City of Memphis?    Yes    No – If yes, please state with whom the interest exists and describe the nature of the financial interest. (, *attached another page if necessary*)

**XI. COMMENTS (fillable)**

\_Begin typing ; :