REQUEST FOR PROPOSALS FOR MANAGEMENT AND OPERATION OR LEASE OF YORK ICE SKATING ARENA



CITY OF YORK

RESPONSES DUE BY:

JANUARY 30, 2020

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OVERVIEW

The City of York, Pennsylvania (the "City" or "York"), with this Request For Proposals ("RFP"), invites proposals ("Proposals") from qualified firms ("Responder" or "Firm") to either manage and operate ("Manager" or "Operator"), or to lease ("Operator" or "Lessee") the City of York Ice Skating Arena ("Arena," "Rink," or "Facility"), which provides public skating, figure skating, hockey programs, and other non-skating programs to York City and York County residents, guests, schools, and other users ("Users" or "Patrons").

The City will entertain Proposals to (i) manage and operate the Facility for and on behalf of the City ("Manage and Operate"), and (ii) rent the Facility from the City ("Rent"). Responders may submit Proposals for either or both options. Services included in Manage and Operate Proposals shall include all management, operating, promotion, reporting, maintenance, improvement, and other services related to the complete management and operation of the Facility. Lease proposals shall include proposed rent or rent calculations. Facility shall be managed and operated in the best interests of the City under either option.

FACILITY

The York Ice Skating Arena Facility, I located at 941 Vander Avenue, York, Pennsylvania 17403, is owned by the City of York (population 43,900), a beautiful historic city in south-central Pennsylvania and the county seat of York County, Pennsylvania (population 446,000). York is home to two universities: York College of Pennsylvania (enrollment 4,317) and Penn State York (a campus since 1939 of The Pennsylvania State University, with enrollment of 1,000), and four business and technical schools.²

The Facility was planned, constructed, and financed by the York City Recreation Corporation ("YCRC") to replace the Memorial Park Ice Rink. The Facility opened in September 2001 and received further upgrades in 2004 and 2018. YCRC managed and operated the Facility. In October 2014, baseball organization York Revolution assumed management and operation of the Facility.

The Facility (the coolest place in York³) contains two National Hockey League ("NHL") sized skating rinks with 1,000 spectator seats, a pro shop with skate rentals, and food and beverage and catering facilities. The Facility hosts public skating, skating lessons, figure skating, ice hockey, hockey tournaments, junior, adult, high school and varsity leagues and teams, Special Olympics competitions, State Winter Games, and other public and private events and rentals.

¹ https://www.yorkpa.org/listing/york-ice-arena/622/, http://www.yorkskate.com/, https://www.facebook.com/yorkcityicearena/

² York Technical Institute, York County School of Technology, Consolidated School of Business–York, and Yorktowne Business Institute

³ https://www.yorkpa.org/listing/york-ice-arena/622/

The Facility has hosted many tournaments, skating and hockey camps, as well as playoffs for college conferences such as the College Hockey East ("CHE"), a mixed (male and female) Division 2 and 3 university league of the American Collegiate Hockey Association ("ACHA"), one of the oldest club hockey programs in the country.

The Facility has also hosted and served as the home field for the York Capitals (subsequently the Central Penn Capitals of Harrisburg, PA), an indoor football team and member of the American Indoor Football League ("AIFL"), a professional indoor football league. The Facility has also received international media coverage.⁴

Usage information See Appendix V

PROPOSALS

Proposals shall include a **Service Proposal, Cost Proposal,** and a **Sample Contract** submitted in electronic form and with ____ five (5) paper copies. Lengthy additions, such as registration or regulatory information may be submitted in electronic form.

Proposals need not follow the outlined format but should address all information requested. Additional information may be submitted. Responses and questions shall be submitted to:

Mr. Chaz A. Green, Director of Public Works City of York 101 S. George St., P.O. Box 509 York, PA 17401

Email: CGreen@yorkcity.org

The City reserves its right to amend the RFP requirements and Timetable, to waive non-conformities, and to reject Proposals. Responders are responsible for expenses incurred.

TIMETABLE

| RFP ISSUE DATE | December 18, 2019 |
|-------------------------------|--------------------------------------|
| Ice Rink Tour(s) | January 06, 2020 to January 17, 2020 |
| QUESTIONS RE RFP DUE | January 8, 2020 |
| RESPONSES TO QUESTIONS POSTED | January 15, 2020 |
| PROPOSALS DUE | January 30, 2020 |
| INTERVIEWEES NOTIFIED | February 06, 2020 |

⁴ https://en.wikipedia.org/wiki/York City Ice Arena, https://www.dailymail.co.uk/news/article-2923845/Packing-punch-Furious-hockey-dad-smashes-ice-rink-safety-glass-single-blow-shocked-spectators.html

| INTERVIEWS | February 17, 2020 to February 20, 2020 |
|-------------------------|--|
| NOTIFY SELECTED MANAGER | March 03, 2020 |
| SIGN AGREEMENT | March 11, 2020 |
| BEGIN MANDATE | July 1, 2020 |

SELECTION AND AWARD OF CONTRACT

- A. Proposals will be evaluated based on information requested and submitted, references, reasonable due diligence investigation, and the following:
- B. To comply with City Ordinances and meet the goals of City Ordinance Article 136,5 Small and Disadvantaged Business Enterprise Program, which is designed to encourage and support Local and Small business enterprises, Proposals may be awarded preferences as follows (Article 136.04(b)):
- i. Eight points of a possible 100, eight percent (8%), for Local business enterprises;
- ii. Two points of a possible 100, two percent (2%), for businesses located in enterprise zones;
- iii. Four points of a possible 100, four percent (4%), for a Small business enterprise;
- iv. However, in no event shall any bidder receive greater than twelve points of a possible 100, twelve percent (12%), preference.

Local business enterprises and Small businesses enterprise are defined in Article 136.02(d) and (e), and are generally defined as follows: a Local Business Enterprise has its principal office in the City of York, or is majority-owned by and has a majority of employees of City residents (Article 136.02(d)), and a Small business enterprise generally has its principal office and/or a significant percentage of its assets, employees, owners, or sales revenues in the City of York metropolitan area (Article 136.02(e)).

C. The City of York encourages participation by Small Diverse Businesses as prime contractors and encourages all prime contractors to make a significant commitment to use Small Diverse Businesses as subcontractors and suppliers.

A Small Diverse Businesses are certified minority-owned, woman-owned, veteran-owned, or service-disabled veteran-owned businesses.

A Small Business is a business in the United States which is independently owned, not dominant in its field of operation, employs no more than 100 full-time or full-time equivalent employees, and earns less than \$7 million in gross annual revenues for building design, \$20 million in gross

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⁵ yorkcity.org/wp-content/uploads/2017/04/Article-136-Small-Disadvantaged-Business-Enterprise-Program.pdf

annual revenues for sales and services, and \$25 million in gross annual revenues for information technology sales or service.

SERVICE PROPOSAL

Service Proposal shall include Firm Information, Service information, Non-Discrimination Statement, Anti-Collusion Affidavit, Business Relationship Affidavit, proposed draft Agreement(s), and signature of Authorized Firm Representative. Additional information may be provided.

A. FIRM INFORMATION

Organizational Information

- Firm, related and affiliated entities, Firm ownership and history, including ownership changes in last 5 years, and Firm classification and regulatory bodies, if any
- Contact information and organizational function chart
- Individual completing the Response: name and contact information of Authorized Firm Representative and confirmation Representative is authorized to represent and bind the Firm and sign Agreement
- Fidelity bond and fiduciary liability insurance
- Evidence of financial strength of Firm____? [INCLUDE____?]
- Information, if any, distinguishing Firm from competitors

Service History and Performance

- History of Firm's offering of proposed service
- Representative client list for proposed service
- Changes in last 5 years: Describe and explain Services, Contracts, or Facilities no longer serviced in last 5 years, and percentage of type lost and gained
- Benchmarks, if any: Describe benchmarks used and how Firm tracks, monitors, and controls performance and deviation from benchmarks, if any

Facilities under Management

- Facilities under Management: Describe facilities, service provided, and performance history
- Changes in last 5 years: Describe and explain Services, Contracts, or Facilities no longer serviced in last 5 years, and percentage of type lost and gained

Firm Personnel

- Firm size and personnel information, e.g., number of employees, managers, client service personnel, and other relevant functions, qualifications, average years of experience, average years tenure, and other relevant information
- Describe and explain Turnover in key personnel in last 3 years

Management and Operating Philosophy

 Describe management and operating philosophy, process, methods, and style, including any information unique to Firm

Governance

- Firm's internal control and governance structure
- Potential conflicts of interest Firm, affiliates, related parties, and personnel may have or be perceived to have with this mandate and how such conflicts will be addressed
- · Firm's Code of Ethics and Standards of Conduct, if any
- Process: how Firm manages, measures, monitors, and controls risk
- Succession, Crisis, Disaster Recovery and Business Continuity Plans

Compliance

- Proof that Firm and assigned personnel are licensed and registered to practice in Pennsylvania
- Identity, title, and biography of chief compliance officer, if any, and to whom she/he reports;
 and personnel responsible for risk and quality management
- · Firm's registration and proof of compliant corporate standing
- Most recent regulatory inspection report and follow-ups, if any
- · Compliance process including methods, frequency, and other relevant information
- Last compliance assessment report, if any
- 5 year history of orders, sanctions, formal investigations, litigation, threatened litigation and administrative proceedings involving Firm, affiliates, or principals

Firm Reputation

• Describe client satisfaction measurement process and information, and recent client satisfaction report, if any

Technology

Technology, software, back-up, and redundancy services used by Firm

Third Party Relations and Fee Arrangements

• Firm's approach to and use of fee or cost sharing arrangements, including direct or indirect recapture, rebate, referral, selection, retention, discount, performance, or other fee or cost sharing arrangements with affiliated parties, vendors, suppliers, service providers, brokers, or third parties. Provide details including information re entities, arrangements, revenue significance, conflict and disclosure policy, and impact on proposed service costs

References

• 3 references, preferably from representative client list, with contact information and length of relationship

Independence & Conflicts of Interest

Firm must certify that it and any person affiliated with the Firm who is or may be involved with the Proposal, contract execution, and proposed services, have no actual, potential or reasonably perceivable conflict of interest with the City of York or any of its component units, affiliates, elected officials, officers, employees, contractors or sub-contractors, and that any person so affiliated with the Firm has not had an affiliation with the City of York or been a City officer, elected or appointed City official or family member thereof, for a period of two (2) years prior to the RFP Issue Date. Exceptions should be noted. Responders may consult the City Conflict of Interest Policy

B. SERVICE INFORMATION

Proposed Service

- Describe proposed service to Manage and Operate or Rent, or both
- If Manage and Operate option, describe and, where relevant, provide samples of communications, marketing materials, budget, periodic performance and other reports, and other relevant information. If Rent option, provide proposed rent or rent calculation
- Strategies and programs to maintain and raise Facility use and Patron participation, and distinguish proposing Firm from other Responders

Personnel

Personnel involved in proposed service, including managers, marketing, client service, and other
personnel: provide name, title, role, education, biography, years of service with Firm, years of
investment experience, regulatory history, and other relevant information

C. NON-DISCRIMINATION STATEMENT

Signed attached Non-Discrimination Statement, Appendix I

D. AMERICANS WITH DISABILITIES ACT COMPLIANCE STATEMENT

Signed attached Americans with Disabilities Act Compliance Statement, Appendix II

E. ANTI-COLLUSION AFFIDAVIT

Signed and notarized attached Anti-Collusion Affidavit, Appendix III

F. BUSINESS RELATIONSHIP AFFIDAVIT

Signed and notarized attached Business Relationship Affidavit, Appendix IV

G. PROPOSED ADMINISTRATION AGREEMENT

Proposed draft Agreement. Final agreement to be agreed by City and selected Firm

H. SIGNATURE OF AUTHORIZED REPRESENTATIVE

• Service Proposal signed by Authorized Firm Representative certifying information in Service and Sealed Cost Proposals is complete, accurate, and binds Firm.

II. SEALED COST PROPOSAL

A separate Sealed Cost Proposal shall be signed by Authorized Firm Representative and contain the following:

PROPOSED FEES AND FEE STRUCTURE

- If Proposal to Manage and Operate, provide complete fee structure and schedule for proposed service, billing frequency, and payment method. If Proposal to Rent, provide proposed rent or rent calculation
- Include all fees and other forms of compensation accruing to or benefitting Firm, related entities, or employees, including direct or indirect recapture, rebate, referral, selection, retention, discount, performance, or other fee or cost sharing arrangements with affiliated

parties, vendors, suppliers, service providers, brokers, or third parties, related to proposed services

• All other fees or costs that may be charged to City.

APPENDIX I: NON-DISCRIMINATION STATEMENT

This Statement is submitted by an Authorized Firm Representative of Responding Firm, as part of this Proposal.

Responding Firm agrees, in connection with the performance of work under this Proposal, as follows:

- a. Firm will not discriminate against any employee or applicant for employment because of race, creed, color, sex, age, national origin, ancestry or disability, and shall undertake affirmative action to ensure employees and applicants are treated without regard to such discriminating factors, including actions related to, *inter alia*, employment, promotion, demotion or transfer, recruitment, advertising, lay-off, termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. Firm agrees to post, in a conspicuous place available to employees and applicants for employment, notices to be provided by the City Clerk/Secretary setting forth the provisions hereof,
- b. Firm will include this non-discrimination clause in any subcontracts connected with the performance of work under this Proposal; and
- c. In the event of Firm's non-compliance herewith, the awarded contract may be canceled or terminated by the City and the City may declare the responding Firm and affiliated entities ineligible for further contracts with the City, until satisfactory proof of compliance is provided to the City.

THIS FORM MUST BE SIGNED BY AN AUTHORIZED FIRM REPRESENTATIVE:

| Signature of Authorized Representative | Title | | | |
|--|----------|--|--|--|
| Note: The owner or an officer of the business or corporation may sign this document. A Corporate Seal or a letter of authorization is needed for any other signer. For instance, if a Salesperson or Manager signs this form, a letter of authorization or Corporate Seal is to be attached. | | | | |
| Printed Name of Individual | Title | | | |
| Company Name and Address | Zip Code | | | |
| Telephone Number, Email, and Fax | | | | |

APPENDIX II: AMERICANS WITH DISABILITIES ACT COMPLIANCE STATEMENT

This Statement is submitted by an Authorized Firm Representative of Responding Firm, as a part of this Proposal.

Responding Firm agrees, in connection with the performance of work under this Proposal, as follows:

- a. Pursuant to federal regulations promulgated under the authority of the Americans with Disabilities Act, 28 C.F.R. Section 35.101 et seq., the Firm understands and agrees that no individual with a disability shall, based on the disability, be excluded from participation in this contract or from activities provided for under this 10 contract. As a condition of accepting and executing this contract, the Firm agrees to comply with the "General Prohibitions Against Discrimination", 28 C.F.R. Section 35.130, and all other regulations promulgated under Title II of the Americans with Disabilities Act which are applicable to the benefits, services, programs and activities provided by the City of York through contracts with outside contractors.
- b. The Firm shall be responsible for and agrees to indemnify and hold harmless the City of York from all losses, damages, expenses, claims, demands, suits and actions brought by any party against the City of York because of the Firm's failure, or that of its employees and affiliates, to comply with the provisions of paragraph a., above.
- c. The Firm will include this Statement in any subcontracts connected with the performance of work under this Proposal; and
- d. In the event of Firm's non-compliance herewith, the awarded contract may be canceled or terminated by the City and the City may declare the responding Firm and affiliated entities ineligible for further contracts with the City, until satisfactory proof of compliance is provided to the City.

THIS FORM MUST BE SIGNED BY AN AUTHORIZED REPRESENTATIVE OF RESPONDER:

| Signature of Authorized Representative | Title | | | |
|--|----------|--|--|--|
| Note: The owner or an officer of the business or corporation may sign this document. A Corporate Seal or a letter of authorization is needed for any other signer. For instance, if a Salesperson or Manager signs this form, a letter of authorization or Corporate Seal is to be attached. | | | | |
| Printed Name of Individual | Title | | | |
| Company Name and Address | Zip Code | | | |
| Telephone Number, Email, and Fax | | | | |

APPENDIX III: ANTI-COLLUSION AFFIDAVIT

This Affidavit is submitted by an Authorized Representative of Responder, as a part of this Proposal. The undersigned, of lawful age and duly sworn, affirms and states that the undersigned has lawful authority to execute the Proposal for and on behalf of the Responder, and that the Responder has not, directly or indirectly, entered into any agreement, express or implied, with any other proposer or proposers, having for its object the controlling of the price or amount of such proposal or proposals, the limiting of proposals or proposers, the parceling or farming out to any proposer or proposers or other persons of any part of the proposal or proposals or of the profits thereof, and that the Responder has not and will not divulge the sealed Proposal to any person whomsoever, except those having a partnership or other financial interest with the Responder in the said Proposal, until after the said sealed proposals are opened. The undersigned further states that the Responder has not been a party to any collusion among proposers in restraint of freedom of competition by any agreement to propose at a fixed price or to refrain from proposing, or with any City official, employee, or agent as to the quantity, quality, price, or other terms in the Proposal, or concerning the exchange of money or other thing of value for special consideration in the award of a contract, and that it has not paid, given, or donated, or agreed to pay, give, or donate to any City official, employee, agent, or awarding agency, any money or other thing of value, either directly or indirectly, in the procuring of the award of contract pursuant to this Proposal. THIS FORM MUST BE SIGNED BY AN AUTHORIZED REPRESENTATIVE OF RESPONDER: Signature of Authorized Representative Title Note: The owner or an officer of the business or corporation may sign this document. A Corporate Seal or a letter of authorization is needed for any other signer. For instance, if a Salesperson or Manager signs this form, a letter of authorization or Corporate Seal is to be attached. Printed Name of Individual Title **Company Name and Address** Zip Code Telephone Number, Email, and Fax TO BE COMPLETED BY NOTARY: State of _____

County of

| This Affidavit signed and sworn to (or affirmed) before me | (name) |
|--|-----------------------------|
| on | (date) |
| by | , Authorized Representative |
| of | , Responder. |
| | |
| Signature of notarial officer: | |
| Title of office: | |
| Commission Number: | |
| Commission expires: | |
| Stamp: | |

APPENDIX IV: BUSINESS RELATIONSHIP AFFIDAVIT

This Affidavit is submitted by an Authorized Representative of Responder, as a part of this Proposal.

The undersigned, of lawful age and duly sworn, affirms and states that the Responder is fully knowledgeable of Responder's business relationships and associations, and further states that the nature of any corporation, company, partnership, joint venture, or other business relationship presently in effect or which existed within one (1) year prior to the date of this statement between Responder and the Mayor, Members of City Council, any Trustee, Trust, or Authority of or benefiting the City, entities or parties affiliated with such individuals, significant known City contractors, or other parties, consultants, or employees engaged to further this project, is as follows:

(If none of the above Business Relationships exists, Responder shall state 'NONE' or otherwise indicate the absence of such Business Relationships. IF ABOVE IS BLANK, PROPOSAL WILL BE REJECTED.)

Responder further states that any such Business Relationship presently in effect or which existed within one (1) year prior to the date of this statement between any officer, agent, employee, partner or director of the Responder and any officer or director, agent, employee, or partner of the above entities or individuals is as follows:

(If none of the above Business Relationships exists, Responder shall state 'NONE' or otherwise indicate the absence of such Business Relationships. IF ABOVE IS BLANK, PROPOSAL WILL BE REJECTED.)

The names and positions of all persons having any such Business Relationships are as follows:

(If none of the above Business Relationships exists, Responder shall state 'NONE' or otherwise indicate the absence of such Business Relationships. IF ABOVE IS BLANK, PROPOSAL WILL BE REJECTED.)

(Proposal will not be considered unless this Affidavit has been fully completed and signed by an Authorized Representative of the Responder and duly notarized and dated by a Notary Public.)

THIS FORM MUST BE SIGNED BY AN AUTHORIZED REPRESENTATIVE OF RESPONDER:

Signature of Authorized Representative

Title

Note: The owner or an officer of the business or corporation may sign this document. A Corporate Seal or a letter of authorization is needed for any other signer. For instance, if a Salesperson or Manager signs this form, a letter of authorization or Corporate Seal is to be attached.

·

| Printed Name of Individual | Title | |
|--|-----------------------------|--|
| Company Name and Address | Zip Code | |
| Telephone Number, Email, and Fax | | |
| TO BE COMPLETED BY NOTARY: | | |
| State of | | |
| County of | | |
| This Affidavit signed and sworn to (or affirmed) before me | (name) | |
| on | (date) | |
| by | , Authorized Representative | |
| of | , Responder. | |
| | | |
| Signature of notarial officer: | | |
| Title of office: | | |
| Commission Number: | | |
| Commission expires: | | |
| Stamp: | | |