



**INDIANAPOLIS HOUSING AGENCY  
REQUEST FOR QUOTE (RFQ)  
SERVICE FIRE EXTINGUISHERS**

**INTRODUCTION**

The Indianapolis Housing Agency (IHA) manages ten communities, four of which are located in the downtown, Center Township area, and the remaining six are scattered throughout Marion County. Six of the communities are family developments, while four are senior/disabled high rises. There are approximately 1750 public housing residential units overall. The IHA administrative offices are located at 1919 N. Meridian Street.

**Deadlines**

The Indianapolis Housing Agency will receive an original and one copy of the quote from qualified companies or combinations of qualified companies to **service Fire Extinguishers** for all communities of IHA including its Administrative Offices. One quote shall be marked original. Quotes will be received at IHA Administrative Offices, 1919 N. Meridian Street, Indianapolis, IN 46204 on **Friday, December 2, 2011 until 2:00 P.M. local time.**

**Proposals will not be accepted after 2:01 P.M. local time. Faxed or e-mail copies will not be accepted.**

Indianapolis Housing Agency reserves the right to waive any minor informalities, or irregularities in the RFQ and RFQ documents and to reject any and all responses. Lateness of response is not considered a minor informality or irregularity.

A more detailed description of the work and other requirements, provisions, specifications and instructions to responders, contract forms, quote requirements, insurance, and other documents related to the project will be set forth in the RFQ and deemed a part of this notice and are available on the IHA web at [www.indyhousing.org](http://www.indyhousing.org) “contracting opportunities.”

**SUBMITTAL OF QUOTE AND BID TAB STRUCTURE**

The quote tab sheet has a different structure based on the HUD mandated Asset Management Plan (AMP). The ten IHA communities have been divided into 5 AMP’s (Asset Management Plan) with the Administrative Office as a separate location as follows:

1. Barton and Barton Annex (373 units)
2. Lugar Tower and Indiana Avenue Sr. Apts (332 units)
3. Blackburn Terrace and Twin Hills (314 units)
4. Beechwood and Hawthorne ( 324 units)
5. Laurelwood and Rowney Terrace ( 242 units)

6. Administrative Office, 1919 N. Meridian Street

There is a tab sheet for each AMP, one tab sheet for Agency wide (all 5 AMP's), and one for the Administrative Office. It is a vendor business decision to respond to a specific AMP(s) or respond to all, as provided in the tab sheet. IHA will choice a single or multiple contractors all to the benefit of IHA.

IHA also reserves the right to re-quote or not to award the quote depending item costs, budget restrictions, and availability of funding. IHA assumes no liability for any and all costs incurred in the preparation of this quote response.

A certificate of current insurance is required with each quote. The successful Quoter must be able to supply certificates of insurance for the following: Minimum of one million dollars in general liability and one million dollars vehicular liability and statutory requirements for worker's compensation. The successful quoter shall be required to name IHA and the City of Indianapolis as an additional insured.

### **PRICE INCREASES**

IHA will allow contract price increase based on the Consumer Price Increase or an IHA acceptable industry/trade bench mark is acceptable. Amount to be negotiated between IHA and the successful contractor, all to the benefit of IHA

### **SUBMITTALS: An Original and one (1) Copy is required**

#### **Along with the Quote Tab sheet(s), complete and return the following:**

1. HUD-5369-B Instructions to Offerors Non-Construction (information only)
2. HUD-5369-C Certifications and Representations of Offerors Non-Construction Contract
3. MBE/WBE certification (Where Applicable)
4. Certificate of Non-Organizational Conflict of Interest
5. Non-Collusive Non-Identity of Interest Affidavit
6. Certificate on Non-Segregated facilities
7. Compliance with E-Verify Affidavit
8. List of at least three (3) references; to include name address telephone and name of principal contact
9. A certificate of current certificate of insurance is required with each quote. The successful quoter must be able to supply certificates of insurance for the following: Minimum of one million dollars in general liability and one million dollars vehicular liability and statutory requirements for worker's compensation.
10. Three references to include names, address, and telephone numbers. References shall include apartment complexes that approximate the size of IHA communities and unit sizes.
11. A community directory for the Indianapolis Housing Partners is included with the RFQ.
12. Quote tab sheets for each AMP and the Administrative Office are the only acceptable submittals for the RFQ.
13. Contract shall be for one year of duration with the option of renewal for another like period or periods.

**ALL DOCUMENTS WITH THE EXCEPTION OF THE INSURANCE FORM AND MBE WBE CERTIFICATE ARE AVAILABLE ON THE IHA WEBSITE**

**FAILURE TO INCLUDE ANY OF THESE DOCUMENTS MAY CAUSE THE BID RESPONSE TO BE DECLARED INVALID**

### **GENERAL CONDITIONS**

The Scope of work is identified as “Attachment A” and is included. Bid tab sheets for AMPs 1 through 6 are identified as “Attachment B-1 through B-7,” and “Attachment C,” is identified as the delivery locations for the communities. The documents are also available on the IHA website at [www.indyhousing.org](http://www.indyhousing.org) under Bidding Opportunities (IHA forms).

No other documents(s) will be considered as a valid response. Price/s shall be quoted and there shall be no extras. Delivery costs are considered an “extra.” Contractor is responsible for providing all labor, materials, and and/or equipment required.

As a condition of the quote, contractor will include delivery price in the “per unit” cost. There shall be no extras for delivery.

It is anticipated that all contacted vendors may not be able to fill all the requirements in the quote sheet. Contractors are requested to complete the items that are appropriate to their product line and/or core business. Minimum and maximum numbers of items are not guaranteed. Listed quantities are approximate.

Vendor shall store materials and shall deliver “on call-as needed.”

Delivery shall be within 24 hours of IHA’s notification.

If Contractor cannot delivery item(s) in accordance with time frames, IHA reserves the right to purchase items from another Vendor

### **QUESTIONS**

Deadline for questions is: **Monday, December 5, 2011 11: A.M. local time.** Questions must be formatted and submitted by e-mail to Diane Padgett, Materials and Contracts Manager, [Dpadget@indyhousing.org](mailto:Dpadget@indyhousing.org). Questions not in writing will not be answered.

Questions and answers will be posted on IHA’s web site @ [www.indyhousing.org](http://www.indyhousing.org), select Contracting Opportunities. It is strongly suggested that the website be monitored on a regular basis for updates.

### **HOLIDAY CLOSURE**

IHA will be closed for Thanksgiving, November 24 and 25 and will reopen November 28, 2011.

## **MBE/WBE/VBE**

It is the policy of IHA to encourage responses from MBE/WBE/VBE supporting contractors on such fields as, but not limited to delivery and clerical services and other associated support.

The contractor's compliance with the executive order and its regulations in 41 CFR Part 60-4 shall be based on its implementation of the equal opportunity clause and specific affirmative action obligations and its efforts to meet these goals.

IHA parallels the goals of the City of Indianapolis for MBE (15%), WBE (8%), and VBE (3%) participation.

A respondent proposing to register as an MBE/WBE/VBE or to utilize an MBE/WBE/VBE that has not been certified as such by the City of Indianapolis, Division of Minority & Women Business Development (DMWBD) shall submit a completed certification application for such MBE/WBE/VBE. The MBE/WBE/VBE must become certified by DMWBD to count toward attainment of the WBE/MBE/VBE goal for the project. Bidders must obtain copies of the Certification from DMWBD at Suite 1260, City-County Building, 200 E. Washington Street, Indianapolis, IN 46204. Phone is 317-327-5262; Fax is 317-327-4482.

## **SECTION 3**

Prospective responders are advised that the project is a "Section 3" covered project and described in 24 CFR 135, which implements Section 3 of the Housing and Urban Development Act of 1968, as amended ("Section T). Without limitation of any other applicable affirmative action requirements, the successful bidder and any other subcontractor's, such as, but not limited to, delivery, assembly and provision of raw materials, will also have an obligation to cause the work to be performed, to the greatest extent feasible, by business concerns located in or owned in substantial part by persons residing in the area of the project (i.e., City of Indianapolis), as those terms are defined in the documents. The employment of individuals residing in the communities or neighborhoods in which the project is located is considered as integral part of the Section 3 requirement. Admissions(s) to apprenticeship programs may also be considered as a fulfillment of the Section 3 requirement. The forms and further information on Section 3 are available on IHA's website. Failure to complete and include this form will disqualify a Contractor's response.

## **COMPLIANCE WITH E-VERIFY PROGRAM**

- Pursuant to IC 22-5-1.7, CONTRACTOR shall enroll in and verify the work eligibility status of all newly hired employees of CONTRACTOR through the E-Verify Program ("Program"). CONTRACTOR is not required to verify the work eligibility status of all newly hired employees through the Program if the Program no longer exists.
- CONTRACTOR and its Subcontractors shall not knowingly employ or contract with an unauthorized alien or retain an employee or contract with a person that CONTRACTOR or its Subcontractor subsequently learns is an unauthorized alien. If CONTRACTOR violates this section, OWNER shall require CONTRACTOR to remedy the violation not later than thirty (30) days after OWNER notifies CONTRACTOR. If CONTRACTOR

fails to remedy the violation within the thirty (30) day period, OWNER shall terminate the contract for breach of contract. If OWNER terminates the contract, CONTRACTOR shall, in addition to any other contractual remedies, be liable to OWNER for actual damages. There is a rebuttable presumption that CONTRACTOR did not knowingly employ an unauthorized alien if CONTRACTOR verified the work eligibility status of the employee through the Program.

- If CONTRACTOR employs or contract with an unauthorized alien but OWNER determines that terminating the contract would be detrimental to the public interest or public property, OWNER may allow the contract to remain in effect until OWNER procures a new contractor.
- CONTRACTOR shall, prior to performing any work, require each Subcontractor to certify to CONTRACTOR that the Subcontractor does not knowingly employ or contract with an unauthorized alien and has enrolled in the Program. CONTRACTOR shall maintain on file a certification from each Subcontractor throughout the duration of the Project. If CONTRACTOR determines that a Subcontractor is in violation of this section, CONTRACTOR may terminate its contract with the Subcontractor for such violation. Such termination may not be considered a breach of contract by CONTRACTOR or the Subcontractor.

## **TERMS AND CONDITIONS AND SUBMISSIONS**

Unless all responses are rejected, and subject to approval by IHA, and possible approval by the IHA Board of Commissioners and the U.S. Department of Housing and Urban Development (HUD), an award of awards will be made to the most responsive and responsible quoter(s) for the quoted services.

Contractors may quote on single AMP's or multiples AMP's, IHA Administrative Office or Agency wide. IHA reserves the right to award the contract to multiple contractors all to the benefit of IHA.

A contract will be required of the successful vendor. Please see sample posted on IHA's Website at [www.indyhousing.org](http://www.indyhousing.org), "Contracting Opportunities."

## **END OF CONDITIONS**

## **SCOPE OF WORK, TAB SHEETS, AND COMMUNITY LISTING FOLLOW**



**ATTACHMENT A  
SCOPE OF WORK  
FIRE EXTINGUISHERS**

Contractor shall inspect and repair fire extinguishers at the locations specified in Attachment “C.” Contractor shall furnish all labor, materials and tests to inspect, repair, and recharge. Contractor shall replace fire extinguishers on an as needed basis in accordance with, but not limited to all local, state and federal codes, regulations and statues.

1. Contractor shall conduct a new inspection for all fire extinguishers to include recharged service.
2. Agency shall provide Contractor with reasonable and free access to the fire extinguishers for the purpose of service and repair.
3. Contractor shall inspect fire extinguishers to determine whether it is service compliant and in accordance with the current National Fire Protection Association Standards and other related regulations.
4. Contractor shall identify detrimental conditions to (a) or any fire extinguisher that could compromise the performance of the equipment.
5. Contractor shall be responsible to tag fire extinguishers as required by the State Fire Marshall, and perform all required records for the equipment.
6. Contractor shall be responsible to compile a complete report of (a) and all inspection/s, and Perform all required records for the equipment.
7. Repairs and Extras: An Agency representative shall be permitted to accompany the Contractor’s service personnel for repairs and service to fire extinguishers.
8. Strikes and Lockouts: In the event Contractor should become involved in a labor dispute, Strike, or lockout, the Contractor shall be required to make whatever arrangements are necessary to ensure that the conditions of this Agreement are met in its entirety. In the event the Contractor would not be able to fulfill the Agreement requirements, the Agency reserves the right to make alternative arrangements to ensure the satisfactory performance of the fire extinguishers and during such time that the Contractor is unable to perform the required duties. Any costs incurred by the Agency as a result of such action shall be charged to the Contractor.



**ATTACHMENT A  
SCOPE OF WORK  
FIRE EXTINGUISHERS**

**Hours of Service:** Contractor shall observe the hours of 8:00 AM to 5:00 P.M., Monday Through Friday as regular working hours. However, these times are not intended to limit or Restrict Contractor’s ability to establish or perform its contractual duties.

**Holidays:** Contractor shall list in the space below all holidays observed whereby overtime charges could be considered if service is requested by Agency.

New Year’s Holiday	_____
Martin Luther King Jr.,	_____
Presidents Day	_____
Good Friday	_____
Memorial Day	_____
Independence Day	_____
Labor Day	_____
Thanksgiving	_____
Christmas Day	_____

**END OF SCOPE**



**ATTACHMENT B-1 QUOTE TAB SHEET**  
**PROVIDE, INSPECT AND SERVICE FIRE EXTINGUISHERS**  
**ASSET MANAGEMENT PLAN NO. 1 BARTON & BARTON ANNEX**

Item #	DESCRIPTION	UNIT OF MEASURE	EST. QUAN	PRICE QUOTE	EXT.
1.	<b>OSHA tags:</b>	ea	150		
2.	<b>HT-DC # 10 Hydro test dry chemical:</b>	ea	Unk		
3.	<b>HT-DC # 2 to 9 hydro test dry chemical:</b>	ea	Unk		
4.	<b>ABC # 5 recharge stored pressure extinguisher</b>	ea	Unk		
5.	<b>ABC #10 recharge stored pressure extinguisher</b>	ea	Unk		
6.	<b>Replace: 5#</b>	ea	Unk		
7.	<b>Replace 10#</b>	ea	Unk		
8.	<b>Other/Note</b>				

By submittal of this Quote, vendor certifies that it has the labor and materials necessary to perform the tasks as outlined in the Scope of Work. By submission of this quote response, Contractor affirms that it has the necessary expertise, labor, and equipment to perform scope of work in a professional and workmanlike fashion in accordance with the standards of the trade.

Name of Company \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Cellular: \_\_\_\_\_

Name of Person Preparing Quote: \_\_\_\_\_

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

E-mail address: \_\_\_\_\_



**ATTACHMENT B-2 QUOTE TAB SHEET**  
**PROVIDE, INSPECT AND SERVICE FIRE EXTINGUISHERS**  
**ASSET MANAGEMENT PLAN NO. 2 IN. AVE. SR APTS & LUGAR TOWER**

Item #	DESCRIPTION	UNIT OF MEASURE	EST. QUAN	PRICE QUOTE	EXT.
1.	<b>OSHA tags:</b>	ea	150		
2.	<b>HT-DC # 10 Hydro test dry chemical:</b>	ea	Unk		
3.	<b>HT-DC # 2 to 9 hydro test dry chemical:</b>	ea			
4.	<b>ABC # 5 recharge stored pressure extinguisher</b>	ea	Unk		
5.	<b>ABC #10 recharge stored pressure extinguisher</b>	ea	Unk		
6.	<b>Replace: 5#</b>	ea	Unk		
7.	<b>Replace 10#</b>	ea	Unk		
8.	<b>Other/Note</b>				

By submittal of this Quote, vendor certifies that it has the labor and materials necessary to perform the tasks as outlined in the Scope of Work. By submission of this quote response, Contractor affirms that it has the necessary expertise, labor, and equipment to perform scope of work in a professional and workmanlike fashion in accordance with the standards of the trade.

Name of Company\_\_\_\_\_

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

Telephone:\_\_\_\_\_ Cellular:\_\_\_\_\_

Name of Person Preparing Quote:\_\_\_\_\_

Signature:\_\_\_\_\_ E -mail address: \_\_\_\_\_



**ATTACHMENT B-3 QUOTE TAB SHEET**  
**PROVIDE, INSPECT AND SERVICE FIRE EXTINGUISHERS**  
**ASSET MANAGEMENT PLAN NO 3. BLACKBURN & TWIN HILLS**

Item #	DESCRIPTION	UNIT OF MEASURE	EST. QUAN	PRICE QUOTE	EXT.
1.	<b>OSHA tags:</b>	ea	150		
2.	<b>HT-DC # 10 Hydro test dry chemical:</b>	ea	Unk		
3.	<b>HT-DC # 2 to 9 hydro test dry chemical:</b>	ea			
4.	<b>ABC # 5 recharge stored pressure extinguisher</b>	ea	Unk		
5.	<b>ABC #10 recharge stored pressure extinguisher</b>	ea	Unk		
6.	<b>Replace: 5#</b>	ea	Unk		
7.	<b>Replace 10#</b>	ea	Unk		
8.	<b>Other/Note</b>				

By submittal of this Quote, vendor certifies that it has the labor and materials necessary to perform the tasks as outlined in the Scope of Work. By submission of this quote response, Contractor affirms that it has the necessary expertise, labor, and equipment to perform scope of work in a professional and workmanlike fashion in accordance with the standards of the trade.

Name of Company \_\_\_\_\_

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

Telephone : \_\_\_\_\_ Cellular: \_\_\_\_\_

Name of Person Preparing Quote: \_\_\_\_\_

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

E-mail address: \_\_\_\_\_



**ATTACHMENT B-4 QUOTE TAB SHEET**  
**PROVIDE, INSPECT AND SERVICE FIRE EXTINGUISHERS**  
**ASSET MANAGEMENT PLAN NO. 4 BEECHWOOD & HAWTHORNE**

Item #	DESCRIPTION	UNIT OF MEASURE	EST. QUAN	PRICE QUOTE	EXT.
1.	<b>OSHA tags:</b>	ea	150		
2.	<b>HT-DC # 10 Hydro test dry chemical:</b>	ea	Unk		
3.	<b>HT-DC # 2 to 9 hydro test dry chemical:</b>	ea			
4.	<b>ABC # 5 recharge stored pressure extinguisher</b>	ea	Unk		
5.	<b>ABC #10 recharge stored pressure extinguisher</b>	ea	Unk		
6.	<b>Replace: 5#</b>	ea	Unk		
7.	<b>Replace 10#</b>	ea	Unk		
8.	<b>Other/Note</b>				

By submittal of this Quote, vendor certifies that it has the labor and materials necessary to perform the tasks as outlined in the Scope of Work. By submission of this quote response, Contractor affirms that it has the necessary expertise, labor, and equipment to perform scope of work in a professional and workmanlike fashion in accordance with the standards of the trade.

Name of Company \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Cellular: \_\_\_\_\_

Name of Person Preparing Quote: \_\_\_\_\_

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

E-mail address: \_\_\_\_\_



**ATTACHMENT B-5 QUOTE TAB SHEET**  
**PROVIDE, INSPECT AND SERVICE FIRE EXTINGUISHERS**  
**ASSET MANAGEMENT PLAN NO. 5 LAURELWOOD & ROWNEY**

Item #	DESCRIPTION	UNIT OF MEASURE	EST. QUAN	PRICE QUOTE	EXT.
1.	<b>OSHA tags:</b>	ea	150		
2.	<b>HT-DC # 10 Hydro test dry chemical:</b>	ea	Unk		
3.	<b>HT-DC # 2 to 9 hydro test dry chemical:</b>	ea			
4.	<b>ABC # 5 recharge stored pressure extinguisher</b>	ea	Unk		
5.	<b>ABC #10 recharge stored pressure extinguisher</b>	ea	Unk		
6	<b>Replace: 5#</b>	ea	Unk		
7.	<b>Replace 10#</b>	ea	Unk		
8.	<b>Other/Note</b>				

By submittal of this Quote, vendor certifies that it has the labor and materials necessary to perform the tasks as outlined in the Scope of Work. By submission of this quote response, Contractor affirms that it has the necessary expertise, labor, and equipment to perform scope of work in a professional and workmanlike fashion in accordance with the standards of the trade.

Name of Company \_\_\_\_\_

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

Telephone : \_\_\_\_\_ Cellular: \_\_\_\_\_

Name of Person Preparing Quote: \_\_\_\_\_

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

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



**ATTACHMENT B-6 QUOTE TAB SHEET**  
**FIRE ALARM SYSTEM AND PANEL**  
**ALL ASSET MANAGEMENT PLAN AGENCY WIDE**

<b>Item #</b>	<b>DESCRIPTION</b>	<b>UNIT OF MEASURE</b>	<b>EST. QUAN</b>	<b>PRICE QUOTE</b>	<b>EXT.</b>
1.	<b>OSHA tags:</b>	ea	150		
2.	<b>HT-DC # 10 Hydro test dry chemical:</b>	ea	Unk		
3.	<b>HT-DC # 2 to 9 hydro test dry chemical:</b>	ea	Unk		
4.	<b>ABC # 5 recharge stored pressure extinguisher</b>	ea	Unk		
5.	<b>ABC #10 recharge stored pressure extinguisher</b>	ea	Unk		
6.	<b>Replace: 5#</b>	ea	Unk		
7.	<b>Replace 10#</b>	ea	Unk		
8.	<b>Other/Note</b>				

By submittal of this Quote, vendor certifies that it has the labor and materials necessary to perform the tasks as outlined in the Scope of Work. By submission of this quote response, Contractor affirms that it has the necessary expertise, labor, and equipment to perform scope of work in a professional and workmanlike fashion in accordance with the standards of the trade.

Name of Company \_\_\_\_\_

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

Telephone : \_\_\_\_\_ Cellular: \_\_\_\_\_

Name of Person Preparing Quote: \_\_\_\_\_

Signature: \_\_\_\_\_ E-mail \_\_\_\_\_



**ATTACHMENT B-7 QUOTE TAB SHEET**  
**FIRE ALARM SYSTEM AND PANEL**  
**IHA ADMINISTRATIVE OFFICE, 1919 N. MERIDIAN**

Item #	DESCRIPTION	UNIT OF MEASURE	EST. QUAN	PRICE QUOTE	EXT.
1.	<b>OSHA tags:</b>	ea	150		
2.	<b>HT-DC # 10 Hydro test dry chemical:</b>	ea	Unk		
3.	<b>HT-DC # 2 to 9 hydro test dry chemical:</b>	ea	Unk		
4.	<b>ABC # 5 recharge stored pressure extinguisher</b>	ea	Unk		
5.	<b>ABC #10 recharge stored pressure extinguisher</b>	ea	Unk		
6.	<b>Replace: 5#</b>	ea	Unk		
7.	<b>Replace 10#</b>	ea	Unk		
8.	<b>Other/Note</b>				

By submittal of this Quote, vendor certifies that it has the labor and materials necessary to perform the tasks as outlined in the Scope of Work. By submission of this quote response, Contractor affirms that it has the necessary expertise, labor, and equipment to perform scope of work in a professional and workmanlike fashion in accordance with the standards of the trade.

Name of Company \_\_\_\_\_

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

Telephone : \_\_\_\_\_ Cellular: \_\_\_\_\_

Name of Person Preparing Quote: \_\_\_\_\_

Signature: \_\_\_\_\_ E-mail \_\_\_\_\_

**END OF QUOTE**



**ATTACHMENT “C”  
DELIVERY LOCATIONS INDIANAPOLIS HOUSING AGENCY**

<b>John J. Barton Apartments 555 Massachusetts Avenue Indianapolis, IN 46204</b>	<b>261-7214 main office 261-7225 fax</b>
<b>John J. Barton Annex 501 North East Street Indianapolis, IN 46204</b>	<b>261-7213 main office 261-7309 fax</b>
<b>Indiana Avenue Sr Apartments 825 Indiana Avenue Indianapolis, IN 46202</b>	<b>261-7221 main office 261-7313 fax</b>
<b>Lugar Tower Apartments 901 Fort Wayne Avenue Indianapolis, IN 46202</b>	<b>261-7226 main office 261-7311 fax</b>
<b>Blackburn Terrace 3091 Baltimore Avenue Indianapolis, IN 46218</b>	<b>261-7317 main office 261-7231 fax</b>
<b>Beechwood Gardens 2915 North Graham Avenue Indianapolis, IN 46218</b>	<b>261-7212 main office 261-7323 fax</b>
<b>Twin Hills 2210 East 36<sup>th</sup> Street Indianapolis, IN 46218</b>	<b>261-7230 main office 261-7315 fax</b>
<b>Hawthorne Place 5244 East 32<sup>nd</sup> Street Indianapolis, IN 46218</b>	<b>261-7456 main office 261-7321 fax</b>
<b>Laurelwood Apartments 3340 Teakwood Drive Indianapolis, IN 46227</b>	<b>261-7234 main office 261-7325 fax</b>
<b>Rowney Terrace 1353 South Riley Avenue Indianapolis, IN 46203</b>	<b>261-7326 main office 261-7328 fax</b>
<b>IHA Administrative Office 1919 N. Meridian Street Indianapolis, IN 46202</b>	<b>261-7184 Procurement Office 261-4264 fax</b>

