

# CITY of WESTON



**REQUEST FOR QUALIFICATIONS  
("RFQ")**

**for**

**Legal Counsel**

**Original Posting: February 14, 2008**

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## **I. BACKGROUND**

The City of Weston's ("City") City Council is seeking Qualification Statements from Respondents interested in serving as legal counsel ("Attorney") to the City in a variety of practice areas.

The mission of the Attorney is to effectively represent and promote the City's legal interests in order to actively assist the City in accomplishing its goals. In addition to providing legal representation in various aspects of law, including all litigation, the Attorney acts as legal advisor to the City Council, City Staff and appointed boards and commissions. The City handles a wide variety of legal issues including drafting resolutions, ordinances, legal opinions, agreements and other legal documents; working with other City departments to prepare agenda items; and assisting the public with issues involving the City. The Attorney is also responsible for prosecuting all actions in Municipal Court and for representing the City in lawsuits and administrative matters.

Minimum qualifications for submission of a Qualification Statement include: 1) being licensed to practice in Texas or Federal/State courts in which Respondent may represent City; 2) being a member in good standing with Texas State Bar Association or Respondent's respective State Bar Association; 3) being willing to work according to the terms of this agreement included in this RFQ; and 4) having no actual or potential conflicts of interest with the City.

Respondents who meet the qualifications established in this RFQ may be contacted and placed on an Agenda to interview with the City Council.

## **II. SCOPE OF SERVICES**

If selected to be placed on the List, Respondents will be required to:

- A. Provide the City with not less than annual updates of the required Discretionary Contracts Disclosure during the period Respondent is included on the List;
- B. Provide the City with periodic updates regarding staff changes to include deletions and additions to staff and proposed hourly rates for such new staff;
- C. Maintain hourly fees for professional services at the level acceptable to the City for a period of three years.;
- D. Understand and be responsive to the City's goals for assigned work and be able to complete the assigned matters to achieve those goals;
- E. Provide competent legal counsel and advocacy;
- F. Provide required resources in order to support the work assigned;
- G. Accomplish the assigned work in a manner that is efficient in terms of time, staffing and costs;
- H. Maintain professional relationships and work with the City Mayor's Office and other City staff as part of a team, including providing needed reports, briefings to members of the City Council, boards, commissions and committees, and/or City staff, as required by the and; maintain open communication and accessibility to all concerned;
- I. Invoice the City for services rendered; and
- J. Agree to provide insurance as may be required.

## **III. QUALIFICATION STATEMENT REQUIREMENTS**

Respondent's Qualification Statement shall include the following information in the sequence as listed:

- A. **RESPONDENT QUALIFICATIONS QUESTIONNAIRE:** A completed Respondent Qualifications Questionnaire that is provided in RFQ Attachment 1.
- B. **RESUMES:** A resume for each individual listed in response to Questions # 5 and 6 on the Questionnaire. Resumes for attorneys should be prepared in the format commonly referred to as “Functional”. They should include sections for each Practice Area in which the attorney is proposed to provide services to the City. The final section in each resume should be titled, “Employment History” and include a simple, chronological list of employers including beginning and ending dates with each employer.
- C. **DISCRETIONARY CONTRACTS DISCLOSURE:** A completed Discretionary Contracts Disclosure Form set out in RFQ Attachment 2.
- D. **PROPOSED FEE SCHEDULE:** A completed Proposed Fee Schedule set out in RFQ Attachment 3.
- E. **SIGNATURE PAGE:** A completed Signature Page set out in RFQ Attachment 4. The Signature Page must be signed by a person (or persons) who is authorized to bind the Respondent Firm.

Respondent is expected to examine this RFQ carefully, understand the terms and conditions for providing the services listed herein and respond completely. FAILURE TO COMPLETE AND PROVIDE ANY OF THESE DOCUMENTS MAY RESULT IN YOUR FIRM NOT BEING PLACED ON THE QUALIFIED LIST.

#### **IV. AMENDMENTS TO RFQ**

Changes, amendments, or written responses to questions received regarding this RFQ will be posted at the City’s Website at [www.westontexas.com](http://www.westontexas.com) . It is Respondent’s responsibility to review this site and determine whether any amendments to this RFQ have been made prior to submission of a Qualification Statement. A Respondent who does not have access to the Internet must notify City in accordance with Section VI, Restrictions on Communication, that Respondent wishes to receive copies of amendments to this RFQ by mail.

No oral statement of any person shall modify or otherwise change or affect the terms, conditions or specifications stated in this RFQ, and changes to this RFQ, if any, shall be made in writing only as described above.

#### **V. SUBMISSION OF QUALIFICATION STATEMENT**

- A. Qualification Statements in response to this RFQ be submitted in paper and electronic form, subject to the provisions of Sub-Section D Of this Section V. City will send an e-mail acknowledging receipt of all submitted Qualification Statements to the Contact Person listed on the Questionnaire.
- B. Submitting in paper, Respondent shall submit one (1) typewritten original, signed in ink to:

**Mailing Address:**  
 City of Weston  
 P.O. Box 248  
 Weston, Texas 75097

- C. Submitting in electronic format, Respondent should email the Qualification Statement in Microsoft Word Format to [cityhall@ci.weston.tx.us](mailto:cityhall@ci.weston.tx.us).
- D. All Qualification Statements become the property of the City upon receipt and will not be returned. Any information deemed to be confidential by Respondent should be clearly noted on the page(s) where confidential information is contained; however, the City cannot guarantee that it will not be compelled to disclose all or part of any public record under the Texas Public Information Act, since information deemed to be confidential by Respondent may not be considered confidential under Texas law, or pursuant to a Court order. Respondent will be deemed to have submitted all such information with this understanding.
- E. Any cost or expense incurred by the Respondent in the preparation of the Qualification Statement shall be paid by Respondent.

## **VI. RESTRICTIONS ON COMMUNICATION**

- A. All questions concerning this RFQ shall be submitted, in writing, to the City Secretary's Office..

If submitted by mail, send to:     City Secretary's Office  
  P.O. Box 248  
  Weston, TX 75097

If submitted by fax, send to:     Attn: City Secretary  
  (972) 382-8409

If submitted by e-mail, send to:     [Cityhall@ci.weston.tx.us](mailto:Cityhall@ci.weston.tx.us)

- B. The City reserves the right to contact any Respondent for clarification after responses are received and/or to further negotiate with any Respondent if such is deemed desirable by the City Attorney.

## **VII. QUALIFICATIONS**

The Office will conduct a comprehensive, fair and impartial evaluation of all the Qualification Statements received in response to this RFQ. Each Qualification Statement will be analyzed to determine overall responsiveness and qualifications under this RFQ. Qualifications to be evaluated may include the items listed below. The selection committee may select all, some or none of the Respondents for interviews. The Qualifications include:

- A. Being licensed to practice in Texas or Federal/State courts in which Respondent will represent the City;
- B. Being a member in good standing with Texas State Bar Association or Respondent's respective State Bar Association;
- C. Being willing to accept engagements in conformance with RFQ Attachment 1;
- D. Having no actual or potential conflicts of interest with City;

## **IX. DOCUMENTATION**

- A. **General:** Legal Counsel is responsible for maintaining a complete case file on each case. All papers obtained, created or otherwise made part of the case file shall remain the property of the City of Weston and shall be returned to the City Hall upon request at no cost to the City.
- B. **Research & Expert Reports:** Research performed by the attorney or support staff and reports prepared by outside experts should be forwarded to the City upon completion with the monthly report.

## **X. REPORTING**

- A. **Reporting Instructions:** All correspondence should be addressed to the Mayor and to the City Secretary.

## **VI. BILLING PROCEDURES**

- A. **Rates:** Billing rates are agreed upon at the time the City Attorney is selected by City Council.
- B. **Non-Compensable Fees:** Fees for the following tasks or activities will not be compensated unless specifically authorized in writing by the City Council:
1. Services that are clerical in nature, such as word processing, regardless of who performs such services or at what rate they are performed (normal, temporary or overtime);
  2. Repetitive file review;
  3. Duplicative tasks;
  4. File or document organization;
  5. Preparing and processing invoices;
  6. Responding to audit inquiries;
  7. Conferences involving attorneys, paralegals and other personnel from the firm, which involve routine administrative coordinating or assignment related matters;
  8. Time spent upon reassignment of a matter to another attorney, in familiarizing that attorney with the file;
  9. Charges for opening and/or updating files;
  10. Work performed by or attendance of multiple attorneys, including by not limited to, attendance of multiple attorneys at any meeting or conference;
  11. Research of relatively routine matters, which should be within the knowledge of experienced attorneys or research in excess of ten (10) hours;
  12. Time spent training lawyers on applicable substantive law;
  14. Time spent preparing goals and strategies statements and/or task-based budgets.
- C. **Expenses:** As a general rule, expenses will be reimbursed only at Legal Counsel's cost. Requests for expenses reimbursements should be submitted with the monthly invoice. Expenses will not be reimbursed by the City except with the regular billing cycle and when accompanied by a properly documented receipt or invoices, and for which prior approval is obtained as set forth below. Legal Counsel should not have service providers such as copy services and couriers bill the City directly.

The following expenses will not be reimbursed unless specifically authorized in writing by the City Council:

1. Meals or transportation for clerical support;
2. Intra-city fax charges;
3. Photocopy expenses of more than ten (10) cents per page;
4. In-house delivery service;
5. Computer charges for computerized research such as Westlaw or Lexis;
6. Office supplies.

**D. Auditing of Bills:** The City has the right to audit all bills presented for payment or actually paid by the City. For this purpose, the City may use in-house auditors or the services of an independent auditor. Legal Counsel shall make available in his/her/their office any and all documentation deemed necessary by City or its designated representative to conduct said audit. The City will give Legal Counsel at least seven (7) business days' notice of any such audit.

In the event Legal Counsel bills are audited, the City will not pay any costs incurred by Legal Counsel in responding to audit requests or for time spent with the auditors.

## RESPONDENT QUALIFICATIONS QUESTIONNAIRE

Name of Firm: \_\_\_\_\_  
 DBA, if Any: \_\_\_\_\_  
 Contact Person and Title: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
 Respondent Telephone #: \_\_\_\_\_ FAX #: \_\_\_\_\_  
 Contact Person's Telephone #: \_\_\_\_\_ & E-mail Address: \_\_\_\_\_

1. Give a **brief** history of Respondent Firm:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. Check each Practice Area that Respondent Firm would like to be considered for:

Bankruptcy	
Cable and Telecommunications	
Developer agreements	
Eminent Domain/Condemnation	
Employee Benefits	
Environmental Law	
Intellectual Property	
Intra City/County negotiations	
Labor/Employment	
Litigation	
Loan Transactions	
Procurement and Contracts	
Real Estate	
Small municipality law	
Tax Laws	
Utility and Administrative Law	
Water District CCN's, PID's	
Other	

3. For each Practice Area checked, provide a **brief** description of Respondent Firm's experience (place the Practice Area descriptions in alphabetic order):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

4. Complete the table below to include a list of representative matters on which Respondent Firm has worked to provide services in each Practice Area over the last three years.

Practice Area	Client Name & Telephone Number	Lead Attorney	Start/End Dates	Disposition of Matter

\* By submitting this information, Respondent Firm agrees to allow City to contact the Clients listed as references.

- Complete the information requested in the block for each attorney that Respondent Firm proposes to perform services for City, if selected.

Name: \_\_\_\_\_  
Number of Years in Practice: \_\_\_\_\_  
Number of Years with Respondent Firm: \_\_\_\_\_  
Law School Attended: \_\_\_\_\_  
Degree Conferred: \_\_\_\_\_  
TX State Bar License Number: \_\_\_\_\_  
Board Specialization Licenses: \_\_\_\_\_  
Practice Areas in which Attorney has Expertise (list alphabetically): \_\_\_\_\_  
\_\_\_\_\_  
Federal Courts Licensed to Practice Before & Frequency of Appearances: \_\_\_\_\_  
\_\_\_\_\_  
Other State(s) Bar License Number (If any, list State & #) \_\_\_\_\_

Name: \_\_\_\_\_  
Number of Years in Practice: \_\_\_\_\_  
Number of Years with Respondent Firm: \_\_\_\_\_  
Law School Attended: \_\_\_\_\_  
Degree Conferred: \_\_\_\_\_  
TX State Bar License Number: \_\_\_\_\_  
Board Specialization Licenses: \_\_\_\_\_  
Practice Areas in which Attorney has Expertise (list alphabetically): \_\_\_\_\_  
\_\_\_\_\_  
Federal Courts Licensed to Practice Before & Frequency of Appearances: \_\_\_\_\_  
\_\_\_\_\_  
Other State(s) Bar License Number (If any, list State & #) \_\_\_\_\_

Insert additional blocks here, as needed to provide information on all attorneys proposed.

- Complete the following information block for each paralegal that Respondent Firm proposes to perform services for City, if selected.

Name: \_\_\_\_\_  
Number of Years Paralegal Experience: \_\_\_\_\_  
Number of Years with Respondent Firm: \_\_\_\_\_  
School(s) Attended: \_\_\_\_\_

Degree(s) Conferred: \_\_\_\_\_  
Practice Areas in which Paralegal is Qualified (list alphabetically): \_\_\_\_\_  
\_\_\_\_\_

Copy block above and insert here for additional paralegals.

7. **Briefly** describe Respondent Firm’s diversity in terms of ownership and staff. Include percent woman owned, if any. Give percent minority owned, if any. Provide similar percents for staffing by women and minorities.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Provide a statement that addresses the existence of any possible legal conflicts of interest, which shall include, but not be limited to, any lawsuits and disputes where the Respondent Firm or any members of the Respondent Firm represented in the past five (5) years, or currently represents, interests adverse or potentially adverse to the City of Weston. If none, include an affirmative statement to that effect.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Provide a statement that addresses the Respondent’s plan for dealing with conflicts of interest which may arise during the term of any specific engagement with the City.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Has any member of the Respondent Firm been disciplined, suspended or debarred by any State or Federal Bar within the five (5) years preceding the submission of the Respondent’s Qualification Statement in response to this RFQ? Yes \_\_\_\_ No \_\_\_\_

If yes, has the individual so disciplined or suspended been proposed by the Respondent to provide services to the City? Yes \_\_\_\_ No \_\_\_\_

If yes, state the name of the individual, nature of the discipline/suspension and the reason therefor:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Note:** If there is more than one individual for which affirmative responses to the queries above apply, then copy the this question and insert separate responses for each individual here.

11. Has the Respondent or any of its principals been prohibited from contracting with any public entity?  
Yes \_\_\_ No \_\_\_

If yes, identify name of the public entity: \_\_\_\_\_  
Name and telephone number of public entity's representative familiar with the  
circumstances: \_\_\_\_\_

Length of prohibition: \_\_\_\_\_

Reason for or circumstances surrounding the prohibition:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Has any client of the Respondent Firm ever filed a claim under/against the Respondent's malpractice insurance coverage? Yes \_\_\_ No \_\_\_

If yes, state the results of the claim:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

13. Does Respondent Firm anticipate any mergers, transfer of organization ownership, management reorganization, or the departure of any key personnel within the next twelve (12) months? Yes \_\_\_ No \_\_\_

If yes, please describe:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Does the Respondent Firm have an office located in McKinney? Yes \_\_\_ No \_\_\_

If yes, state number of years/months doing business in McKinney office \_\_\_/\_\_\_

State the number of full-time employees in the McKinney office \_\_\_\_\_

15. If Respondent Firm does not have a McKinney office, does the Respondent have an office located in Collin County? Yes \_\_\_ No \_\_\_ N/A \_\_\_

If yes, state number of years/months doing business in Collin County office \_\_\_/\_\_\_

State the number of full-time employees at the Collin County office \_\_\_\_\_

16. Where is the Respondent Firm's corporate headquarters located? \_\_\_\_\_

17. Bankruptcy Information

Has Respondent Firm ever been declared bankrupt or filed for protection from creditors under state or federal proceedings? Yes \_\_\_ No \_\_\_

If yes, state the date, court, jurisdiction, cause number, amount of liabilities and amount of assets.

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18. List any other names under which Respondent Firm has operated within the last 10 years.

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19. What actions will you take to facilitate the orderly transition from the current provider to your office?

20. What will you require from the current provider?

21. What expense if any do you anticipate for this transition?

RFQ ATTACHMENT 4

City of Weston  
Discretionary Contracts Disclosure

(1) Identify any individual or business entity <sup>1</sup> that is a <b>party</b> to the discretionary contract:
(2) Identify any individual or business entity which is a <i>partner, parent</i> or <i>subsidiary</i> business entity, of any individual or business entity identified above in Box (1):
<input type="checkbox"/> No partner, parent or subsidiary; <i>or</i>  <b>List partner, parent or subsidiary of each party to the contract and identify the corresponding party:</b>   
(3) Identify any individual or business entity that would be a <i>subcontractor</i> on the discretionary contract.
<input type="checkbox"/> No subcontractor(s); <i>or</i>  <b>List subcontractors:</b>   
(4) Identify any <i>lobbyist</i> or <i>public relations firm</i> employed by any party to the discretionary contract for purposes related to seeking the discretionary contract.
<input type="checkbox"/> No lobbyist or public relations firm employed; <i>or</i>  <b>List lobbyists or public relations firms:</b>   

<sup>1</sup> A *business entity* means a sole proprietorship, partnership, firm, corporation, holding company, joint-stock company, receivership, trust, unincorporated association, or any other entity recognized by law. A sole proprietor should list the name of the individual and the d/b/a, if any.

**(5) Political Contributions**

List all political contributions totaling one hundred dollars (\$100) or more within the past twenty-four (24) months made to any *current* or *former member* of City Council, any *candidate* for City Council, or to any *political action committee* that contributes to City Council elections, by any individual or business entity whose identity must be disclosed under Box (1), (2), (3) or (4) above, or by the officers, owners of any business entity listed in Box (1), (2) or (3):

No contributions made; If contributions made, list below:

By Whom Made:	To Whom Made:	Amount:	Date of Contribution:

**(6) Disclosures in Qualification Statement**

Any individual or business entity seeking a discretionary contract with the city must disclose any known facts which, reasonably understood, raise a question<sup>2</sup> as to whether any city official or employee would violate (“conflicts of interest”) by participating in official action relating to the discretionary contract.

Party not aware of facts which would raise a “conflicts-of-interest”; or

Party aware of the following facts:

*This form is required to be supplemented in the event there is any change in the information before the discretionary contract is the subject of council action, and no later than five (5) business days after any change about which information is required to be filed, whichever occurs first.*

Signature:	Title: Company or D/B/A:	Date:
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<sup>2</sup> For purposes of this rule, facts are “reasonably understood” to “raise a question” about the appropriateness of official action if a disinterested person would conclude that the facts, if true, require recusal or require careful consideration of whether or not recusal is required.

**RFQ ATTACHMENT 6**

**PROPOSED FEE SCHEDULE**

On the table below list the name of each attorney and paralegal that Respondent Firm proposes to provide services to the City. For each person listed, indicate the following hourly rates: Standard, Government, and Proposed. Quoted hourly rates will be expected to remain in effect for three years after a Respondent has been added to the List.

<b>Name:</b>	<b>Standard Rate:</b>	<b>Government Rate:</b>	<b>Proposed Rate:</b>

## RFQ ATTACHMENT 7

### SIGNATURE PAGE

“✓” Check box that indicates business structure of Respondent

- Individual or Proprietorship
- Partnership or Joint Venture
- Corporation

The undersigned certifies that (s)he is authorized to bind the Respondent firm.

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Respondent Organization Name (DBA also required if Individual or Proprietorship)

By:

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

Title: \_\_\_\_\_

By:

(If Respondent is a Joint Venture, an authorized signature from a representative of each party is required)

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

Title: \_\_\_\_\_

By signature above, Respondent agrees to the following:

1. If selected to be Legal Counsel in response to this RFQ, Respondent will be able and willing to execute and abide by the City of Weston's Guidelines.
2. If selected to be Legal Counsel in response to this RFQ, Respondent will be able and willing to comply with all representations made by Respondent in Respondent's Qualification Statement and during RFQ process.
3. Respondent agrees to fully and truthfully submit a Respondent General Questionnaire understanding that failure to fully disclose requested information may result in disqualification of a Qualification Statement from consideration.
4. Respondent agrees to provide updated personnel information and Discretionary Contracts Disclosures to the City, as needed or required by City.