

ATTACHMENT H – COST/PRICE PROPOSAL RESPONSE FORM YEAR ONE

The proposer shall complete the following pricing table(s) and provide firm, fixed pricing necessary to meet the requirements of the RFP. The quantities are estimates only and actual numbers may change. There is no guarantee for the amount of assessments needed on an annual basis.

Proposal responses submitted on any other form may be considered non-responsive and therefore rejected. The authorized person signing the bid shall initial any erasures, corrections or other changes appearing on the Proposal Cost Response Form. No written comments, modifications or interlineations to the Proposal Cost Response Form will be accepted.

PART A. COST PER ASSESSMENT/CERTIFICATION				
<i>Pricing should include all expenses necessary to perform complete assessments/certifications per RFP requirements, and should include labor, overhead (insurance, payroll, taxes, office, etc.) and profit.</i>				
ASSESSMENT/CERTIFICATION CATEGORY	EST QTY. PER YEAR	COST PER ASSESSMENT	TOTAL ESTIMATED COST	
ADA-Certifications	1248	\$	\$	
ADA-Re-Certifications	1173	\$	\$	
Non-ADA Certifications	175	\$	\$	
Non-ADA Re-Certifications	74	\$	\$	
Fixed-Route Reduced Fare Public Transportation Certifications	1000	\$	\$	
Appeal Assessments	50	\$	\$	
In-Person Assessments	15	\$	\$	
SUB-TOTAL FOR ASSESSMENTS/CERTIFICATIONS			\$	
PART B. SUBCONTRACTOR(S)/SUBCONSULTANT(S)				
SUBCONTRACT/CONSULTANT NAME	TOTAL SUB/COST	MARKUP RATE (%)	ETIMATED COST	TOTAL ESTIMATED COST
				\$
				\$
				\$
TOTAL SUBCONTRACT/SUBCONSULTANT COSTS				\$
PART C. PROJECT DIRECT COSTS/OTHER ANTICIPATED EXPENSES (INCLUDING TRAVEL, FACILITY COSTS, SUPPLIES, EQUIPMENT, START-UP COSTS)				
DESCRIPTION	QUANTITY	UNIT RATE	ESTIMATED COST	TOTAL ESTIMATED COST
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
TOTAL OTHER EXPENSES				\$
TOTAL PROJECT COST – YEAR ONE (A + B + C)				\$

**ATTACHMENT H – COST/PRICE PROPOSAL RESPONSE FORM
YEAR TWO**

PART A. COST PER ASSESSMENT/CERTIFICATION				
<i>Pricing should include all expenses necessary to perform complete assessments/certifications per RFP requirements, and should include labor, overhead (insurance, payroll, taxes, office, etc.) and profit.</i>				
ASSESSMENT/CERTIFICATION CATEGORY	EST QTY. PER YEAR	COST PER ASSESSMENT	TOTAL ESTIMATED COST	
ADA-Certifications	1273	\$	align="center">\$	
ADA Re-Certifications	1196	\$	align="center">\$	
Non-ADA Certifications	179	\$	align="center">\$	
Non-ADA Re-Certifications	75	\$	align="center">\$	
Fixed-Route Reduced Fare Public Transportation Certifications	1020	\$	align="center">\$	
Appeal Assessments	51	\$	align="center">\$	
In-Person Assessments	20			
SUB-TOTAL FOR ASSESSMENTS/CERTIFICATIONS			align="center">\$	
PART B. SUBCONTRACTOR(S)/SUBCONSULTANT(S)				
SUBCONTRACT/CONSULTANT NAME	TOTAL SUB/COST	MARKUP RATE (%)	ETIMATED COST	TOTAL ESTIMATED COST
				\$
				\$
				\$
TOTAL SUBCONTRACT/SUBCONSULTANT COSTS				\$
PART C. PROJECT DIRECT COSTS/OTHER ANTICIPATED EXPENSES (INCLUDING TRAVEL, FACILITY COSTS, SUPPLIES, EQUIPMENT, START-UP COSTS)				
DESCRIPTION	QUANTITY	UNIT RATE	ESTIMATED COST	TOTAL ESTIMATED COST
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
TOTAL OTHER EXPENSES				\$
TOTAL PROJECT COST – YEAR TWO (A + B + C)				\$

**ATTACHMENT H – COST/PRICE PROPOSAL RESPONSE FORM
YEAR THREE**

PART A. COST PER ASSESSMENT/CERTIFICATION				
<i>Pricing should include all expenses necessary to perform complete assessments/certifications per RFP requirements, and should include labor, overhead (insurance, payroll, taxes, office, etc.) and profit.</i>				
ASSESSMENT/CERTIFICATION CATEGORY	EST QTY. PER YEAR	COST PER ASSESSMENT	TOTAL ESTIMATED COST	
ADA-Certifications	1298	\$		
ADA Re-Certifications	1220	\$		
Non-ADA Certifications	183	\$		
Non-ADA Re-Certifications	76	\$		
Fixed-Route Reduced Fare Public Transportation Certifications	1040	\$		
Appeal Assessments	52	\$		
In-Person Assessments	25			
SUB-TOTAL FOR ASSESSMENTS/CERTIFICATIONS			\$	
PART B. SUBCONTRACTOR(S)/SUBCONSULTANT(S)				
SUBCONTRACT/CONSULTANT NAME	TOTAL SUB/COST	MARKUP RATE (%)	ETIMATED COST	TOTAL ESTIMATED COST
				\$
				\$
				\$
TOTAL SUBCONTRACT/SUBCONSULTANT COSTS				\$
PART C. PROJECT DIRECT COSTS/OTHER ANTICIPATED EXPENSES (INCLUDING TRAVEL, FACILITY COSTS, SUPPLIES, EQUIPMENT, START-UP COSTS)				
DESCRIPTION	QUANTITY	UNIT RATE	ESTIMATED COST	TOTAL ESTIMATED COST
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
TOTAL OTHER EXPENSES				\$
TOTAL PROJECT COST – YEAR THREE (A + B + C)				\$

**ATTACHMENT H – COST/PRICE PROPOSAL RESPONSE FORM
YEAR FOUR (OPTION YEAR ONE)**

PART A. COST PER ASSESSMENT/CERTIFICATION				
<i>Pricing should include all expenses necessary to perform complete assessments/certifications per RFP requirements, and should include labor, overhead (insurance, payroll, taxes, office, etc.) and profit.</i>				
ASSESSMENT/CERTIFICATION CATEGORY	EST QTY. PER YEAR	COST PER ASSESSMENT	TOTAL ESTIMATED COST	
ADA-Certifications	1323	\$		
ADA Re-Certifications	1244	\$		
Non-ADA Certifications	187	\$		
Non-ADA Re-Certifications	77	\$		
Fixed-Route Reduced Fare Public Transportation Certifications	1060	\$		
Appeal Assessments	53	\$		
In-Person Assessments	30			
SUB-TOTAL FOR ASSESSMENTS/CERTIFICATIONS				
PART B. SUBCONTRACTOR(S)/SUBCONSULTANT(S)				
SUBCONTRACT/CONSULTANT NAME	TOTAL SUB/COST	MARKUP RATE (%)	ETIMATED COST	TOTAL ESTIMATED COST
				\$
				\$
				\$
TOTAL SUBCONTRACT/SUBCONSULTANT COSTS				\$
PART C. PROJECT DIRECT COSTS/OTHER ANTICIPATED EXPENSES (INCLUDING TRAVEL, FACILITY COSTS, SUPPLIES, EQUIPMENT, START-UP COSTS)				
DESCRIPTION	QUANTITY	UNIT RATE	ESTIMATED COST	TOTAL ESTIMATED COST
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
TOTAL OTHER EXPENSES				\$
TOTAL PROJECT COST – YEAR FOUR (OPTION YEAR ONE (A + B + C))				\$

**ATTACHMENT H – COST/PRICE PROPOSAL RESPONSE FORM
YEAR FIVE (OPTION YEAR TWO)**

PART A. COST PER ASSESSMENT/CERTIFICATION				
<i>Pricing should include all expenses necessary to perform complete assessments/certifications per RFP requirements, and should include labor, overhead (insurance, payroll, taxes, office, etc.) and profit.</i>				
ASSESSMENT/CERTIFICATION CATEGORY	EST QTY. PER YEAR	COST PER ASSESSMENT	TOTAL ESTIMATED COST	
ADA-Certifications	1349	\$		
ADA-Re-certifications	1269	\$		
Non-ADA Certifications	191	\$		
Non-ADA Re-Certifications	78	\$		
Fixed-Route Reduced Fare Public Transportation Certifications	1080	\$		
Appeal Assessments	54	\$		
In-Person Assessments	35			
SUB-TOTAL FOR ASSESSMENTS/CERTIFICATIONS				
PART B. SUBCONTRACTOR(S)/SUBCONSULTANT(S)				
SUBCONTRACT/CONSULTANT NAME	TOTAL SUB/COST	MARKUP RATE (%)	ETIMATED COST	TOTAL ESTIMATED COST
				\$
				\$
				\$
TOTAL SUBCONTRACT/SUBCONSULTANT COSTS				\$
PART C. PROJECT DIRECT COSTS/OTHER ANTICIPATED EXPENSES (INCLUDING TRAVEL, FACILITY COSTS, SUPPLIES, EQUIPMENT, START-UP COSTS)				
DESCRIPTION	QUANTITY	UNIT RATE	ESTIMATED COST	TOTAL ESTIMATED COST
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
TOTAL OTHER EXPENSES				\$
TOTAL PROJECT COST – YEAR FIVE (OPTION YEAR TWO (A + B + C))				\$

ATTACHMENT H – COST/PRICE PROPOSAL SUMMARY OF ALL COSTS

DESCRIPTION	YEAR ONE	YEAR TWO	YEAR THREE	YEAR FOUR (OPTION YR #1)	YEAR FIVE (OPTION YR #2)	TOTALS
A. COST FOR ASSESSMENTS	\$	\$	\$	\$	\$	\$
B. SUBCONTRACTOR(S) COSTS	\$	\$	\$	\$	\$	\$
C. PROJECT DIRECT COSTS/OTHER ANTICIPATED EXPENSES	\$	\$	\$	\$	\$	\$
TOTAL PROJECT COSTS (A + B + C)	\$	\$	\$	\$	\$	\$

The undersigned, acting as an authorized agent or officer for the Offeror, does hereby agree to the following:

1. The offer submitted is complete and accurate, including all forms required for submission in accordance with the terms and conditions listed in this Request for Proposals and any subsequent Addenda. The Offeror shall immediately notify the KCATA in the event of any change.
2. The quantities specified are based upon the best available estimates and do not determine the actual amount the Authority shall order during the contract period. The quantities are subject to change. Payments will be based on actual quantities order based on the unit rates quoted.
3. The undersigned agrees to furnish and deliver the items or perform services as described herein for the consideration stated in accordance with the terms and conditions listed in the KCATA RFP. The rights and obligations of the parties to any resultant purchase order/contract shall be subject to and governed by this document and any documents attached or incorporated herein by reference.

Company Name (Type/Print) _____ Date _____

Address/City/State/Zip _____

Authorized Signature _____ Title _____

Name (Type/Print) _____ Telephone # _____ Fax # _____

E-mail address _____