

***TECHNICAL PROPOSAL PACKET***  
***ASU-B-23-033***

## PROPOSAL SIGNATURE PAGE

Type or Print the following information.

PROSPECTIVE CONTRACTOR'S INFORMATION			
Company:			
Address:			
City:		State:	Zip Code:
Business Designation:	<input type="checkbox"/> Individual <input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Corporation	<input type="checkbox"/> Public Service Corp <input type="checkbox"/> Nonprofit
Minority and Women-Owned Designation*:	<input type="checkbox"/> Not Applicable <input type="checkbox"/> African American <input type="checkbox"/> Asian American <input type="checkbox"/> American Indian <input type="checkbox"/> Hispanic American <input type="checkbox"/> Pacific Islander American <input type="checkbox"/> Service Disabled Veteran <input type="checkbox"/> Women-Owned		
AR Certification #: _____ * See <i>Minority and Women-Owned Business Policy</i>			
PROSPECTIVE CONTRACTOR CONTACT INFORMATION			
<i>Provide contact information to be used for RFP solicitation related matters.</i>			
Contact Person:		Title:	
Phone:		Alternate Phone:	
Email:			
CONFIRMATION OF REDACTED COPY			
<input type="checkbox"/> YES, a redacted copy of submission documents is enclosed. <input type="checkbox"/> NO, a redacted copy of submission documents is <u>not</u> enclosed. I understand a full copy of non-redacted submission documents will be released if requested. <i>Note: If a redacted copy of the submission documents is not provided with Prospective Contractor's response packet, and neither box is checked, a copy of the non-redacted documents, with the exception of financial data (other than pricing), will be released in response to any request made under the Arkansas Freedom of Information Act (FOIA). See RFP Solicitation for additional information.</i>			
ILLEGAL IMMIGRANT CONFIRMATION			
By signing and submitting a response to this <i>RFP Solicitation</i> , Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants and <b>shall not</b> employ or contract with illegal immigrants during the term of a contract awarded as a result of this RFP.			
ISRAEL BOYCOTT RESTRICTION CONFIRMATION			
By checking the box below, Prospective Contractor agrees and certifies that they do not boycott Israel and <b>shall not</b> boycott Israel during the term of a contract awarded as a result of this RFP.			
<input type="checkbox"/> Prospective Contractor does not and <b>shall not</b> boycott Israel.			

**An official authorized to bind the Prospective Contractor to a resultant contract shall sign below.**

The signature below signifies agreement that any exception that conflicts with a Requirement of this RFP *Solicitation* **may cause the Prospective Contractor's proposal to be rejected.**

Authorized Signature: \_\_\_\_\_ Title: \_\_\_\_\_  
*Use Ink Only.*

Printed/Typed Name: \_\_\_\_\_ Date: \_\_\_\_\_

## **SUBMISSION REQUIREMENTS CHECKLIST**

Per the solicitation, the following items **must** be submitted with the Prospective Contractor's proposal:

- Proposal Signature Page*
- Proposed Subcontractors Form*
- Information for Evaluation*
- Exceptions Form*, if applicable
- Financial Proposal*, sealed separately

It is strongly recommended that the following items are also included with the Prospective Contractor's proposal:

- EO 98-04: *Contract and Grant Disclosure Form*
- Copy of Prospective Contractor's *Equal Opportunity Policy*
- Voluntary Product Accessibility Template (VPAT)*, if applicable
- Signed addenda, if applicable

**PLEASE LIST ALL ACCOUNTS LOST OVER THE PAST 36 MONTHS.**

YOUR FIRM NAME: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Service Agreement began: \_\_\_\_\_ expires (if appropriate): \_\_\_\_\_

Number of vending machines installed: \_\_\_\_\_ Type: \_\_\_\_\_

\_\_\_\_\_ Type: \_\_\_\_\_

\_\_\_\_\_ Type: \_\_\_\_\_

REASON FOR LOST ACCOUNT: \_\_\_\_\_

\_\_\_\_\_

Company Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Service Agreement began: \_\_\_\_\_ expires (if appropriate): \_\_\_\_\_

Number of vending machines installed: \_\_\_\_\_ Type: \_\_\_\_\_

\_\_\_\_\_ Type: \_\_\_\_\_

\_\_\_\_\_ Type: \_\_\_\_\_

REASON FOR LOST ACCOUNT: \_\_\_\_\_

\_\_\_\_\_

Company Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Service Agreement began: \_\_\_\_\_ expires (if appropriate): \_\_\_\_\_

Number of vending machines installed: \_\_\_\_\_ Type: \_\_\_\_\_

\_\_\_\_\_ Type: \_\_\_\_\_

\_\_\_\_\_ Type: \_\_\_\_\_

REASON FOR LOST ACCOUNT: \_\_\_\_\_

\_\_\_\_\_

REFERENCES

YOUR FIRM NAME: \_\_\_\_\_

- 1. Company Name: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Service Agreement began: \_\_\_\_\_ Expires (if appropriate): \_\_\_\_\_  
Number of vending machines installed: \_\_\_\_\_ Type: \_\_\_\_\_  
\_\_\_\_\_ Type: \_\_\_\_\_  
\_\_\_\_\_ Type: \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_

- 2. Company Name: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Service Agreement began: \_\_\_\_\_ Expires (if appropriate): \_\_\_\_\_  
Number of vending machines installed: \_\_\_\_\_ Type: \_\_\_\_\_  
\_\_\_\_\_ Type: \_\_\_\_\_  
\_\_\_\_\_ Type: \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_

- 3. Company Name: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Service Agreement began: \_\_\_\_\_ Expires (if appropriate): \_\_\_\_\_  
Number of vending machines installed: \_\_\_\_\_ Type: \_\_\_\_\_  
\_\_\_\_\_ Type: \_\_\_\_\_

## PROPOSED SUBCONTRACTORS FORM

- **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.
  - Prospective Contractor **shall** complete and submit the *Proposed Subcontractors Form* included in the *Technical Proposal Packet*.
  - Additional subcontractor information may be required or requested in following sections of this *RFP Solicitation* or in the *Information for Evaluation* section provided in the *Technical Proposal Packet*. **Do not** attach any additional information to the *Proposed Subcontractors Form*.
  - The utilization of any proposed subcontractor is subject to approval by the State agency.

**PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.**

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP

**PROSPECTIVE CONTRACTOR DOES NOT PROPOSE TO USE SUBCONTRACTORS TO PERFORM SERVICES.**

## INFORMATION FOR EVALUATION

- Provide a response to each item/question in this section. Prospective Contractor may expand the space under each item/question to provide a complete response.
- **Do not** include additional information if not pertinent to the itemized request.

<u>WEIGHTING</u> Factor	Qualification	Standard
25	Proposed Services/Plan of Operation	Does the proposal show the vendor's ability to provide Dining Services for three (3) locations
25	Experience in Providing Dining Services with Universities with Similar Size	Are the company and company representatives experienced in dining services? Does the company have a proven record of providing excellent service to its customers?
10	Staffing, management, and Personnel	What are the plans listed in the RFP to staff and manage personnel?
10	References	Ability to confirm references from other like size Universities?

## EXCEPTIONS FORM

Prospective Contractor **shall** document all exceptions related to requirements in the RFP Solicitation and terms in the “Standard Commodities Contract or Standard Services Contract” and “Solicitation Terms and Conditions” located on the OSP website. See Section 1.8 RFP Solicitation.

ITEM #	REFERENCE (SECTION, PAGE, PARAGRAPH)	DESCRIPTION	PROPOSED LANGUAGE
1.			
2.			
3.			



**FINANCIAL PROPOSAL: Must be separately sealed**

Please provide a financial proposal that is constructed in such a way, which clearly communicates to the University the proposed meal prices, retail prices, any cost the University can expect to incur in providing food service, and any financial benefits the University can expect to receive for the proposed services.

Commission return to the University by source (retail, catering, etc)

Include any capital investment that the respondent would make and any return to the University on catering and retail sales.

Respondent shall propose any plans to invest in equipment upgrades and repairs.

Terms and Conditions of any investment in the University must be clearly spelled out in the proposal.