



**CMHA SOLICITATION 2023-8004
Vacancy Prep Unit Turnover (Make Ready)
ATTACHMENT B FEE SUBMISSION FORM**

TOTAL UNIT TURNOVER

Proposed Fees: Offeror shall provide firm fixed costs to provide the services described in the QSP

TOTAL UNIT TURNOVER INCLUDES JANITORIAL SERVICES, MAINTENANCE, FINISHING THE PERIMETER, AND PAINTING (See Attachment A) ALSO SEE ATTACHMENT J FOR MAXIMUM RATES ACCEPTED TO POTENTIALLY BE AWARDED A CONTRACT.

	Firm, Fixed Rate Per Unit
HIGH RISES	
0 Bedroom/Studio	\$ _____
1 Bedroom	\$ _____
2 Bedroom	\$ _____
0 Bedroom/Studio (with carpet cleaning)	\$ _____
1 Bedroom (with carpet cleaning)	\$ _____
2 Bedroom (with carpet cleaning)	\$ _____
TOWNHOMES AND FLATS	
1 Bedroom	\$ _____
2 Bedroom	\$ _____
3 Bedroom	\$ _____
4 Bedroom	\$ _____
5 Bedroom	\$ _____
6 Bedroom	\$ _____
7 Bedroom	\$ _____
SINGLE FAMILY HOMES	
1 Bedroom	\$ _____
2 Bedroom	\$ _____
3 Bedroom	\$ _____
4 Bedroom	\$ _____
5 Bedroom	\$ _____
6 Bedroom	\$ _____



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TRASHOUT PRICING

Proposed Fees: Offeror shall provide firm fixed costs to provide the services described in the QSP

TRASHOUT SERVICES ARE EXPLAINED IN ATTACHMENT A. ALSO SEE ATTACHMENT J FOR MAXIMUM RATES ACCEPTED TO POTENTIALLY BE AWARDED A CONTRACT.

	Firm, Fixed Rate Per Trashout
HIGH RISES	
0 Bedroom/Studio	\$ _____
1 Bedroom	\$ _____
2 Bedroom	\$ _____
TOWNHOMES AND FLATS	
1 Bedroom	\$ _____
2 Bedroom	\$ _____
3 Bedroom	\$ _____
4 Bedroom	\$ _____
5 Bedroom	\$ _____
6 Bedroom	\$ _____
7 Bedroom	\$ _____
SINGLE FAMILY HOMES	
1 Bedroom	\$ _____
2 Bedroom	\$ _____
3 Bedroom	\$ _____
4 Bedroom	\$ _____
5 Bedroom	\$ _____
6 Bedroom	\$ _____



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Other Additional Services (unique to your company if any)

Provide a firm fixed hourly rate for any related services

Position	Firm Fixed Hourly Rate
	\$ _____
	\$ _____
	\$ _____
	\$ _____

Notes and Exclusions:

DISCOUNT OFFERED FOR EARLY PAYMENT: _____ % if invoice paid within _____ days of properly submitted invoice as stated in the QSP.

PROPOSER'S STATEMENT

The undersigned proposer hereby states that by completing and submitting this Form and all other documents within this submittal, he/she is verifying that all information provided herein is, to the best of his/her knowledge, true and accurate, and that if the Authority discovers that any information entered herein to be false, such shall entitle the Authority to not consider or make award or to cancel any award with the undersigned party. Pursuant to all QSP Document including attachments, this Fee Submission Form, and pursuant to all documents submitted, the undersigned proposes to supply the Authority with the services and/or products described herein for the fee(s) submitted pertaining to this QSP.

Date: _____

Company: _____

Address: _____

City, State, Zip _____

Phone(s): _____

Email: _____



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By: _____
(Signature of Offerer)

By: _____ Title: _____
(Print Name)

Fed Tax ID: _____