

Attachment B: Contractor's Fee Submission Form

The proposed fees are all-inclusive of all related costs that the successful proposer will incur to provide the noted services. The Proposer is responsible for providing firm, fixed costs as specified below. In addition, the proposer must provide a fixed, firm cost for additional services.

If Contractor is awarded the contract for this solicitation, this Fee Submission Form may be used as Exhibit B to the Contract. The completion of the form is no guarantee of a contract or the award of any services.

The fees entered in this table are for routine services.

АМР	Community	Address	# of Units	Quarterly Cost (1 service- every 4 months) (<u>Price for 1</u> <u>service</u>)	Bi-Monthly Cost (2 services per month) (Total p <u>rice for 2</u> <u>services</u> <u>per</u> <u>month</u>)	Monthly Cost (4 services per month) (<u>Total price</u> <u>for 4</u> <u>services</u> <u>per month</u>)
201	Hartwell	76 E Galbraith Rd	8			
201	Mt. Auburn	7 E McMillan St	4			
201	Norwood	5492/5496 Bosworth	8			
201	OTR	1708, 1716, 1726 Race St	20			
201	OTR	130 E. McMicken	3			
201	Redding	76 E Galbraith Rd	8			
201	Walnut Hills	3471 Fernside Place	11			
202	Anderson	1341 Crotty Ct/ 1332 Plazaview Ct.	14			
202	Mt. Washington	6347/6351 Beechmont Ave	120			
203	Hyde Park	2377/2379/2381 Madison Road	24			
203	Madeira	7370/7380 Shawnee Run	8			
203	Madisonville	5012/5016/5020 Ebersole	12			
203	Mt. Lookout	3304/3308 Mowbray	8			
203	Mt. Washington	1817/1819 Mears	12			
203	Reading	2455 E Galbraith Rd	8			
204	Marianna Terrace	10101-10136 Hunter Ct, 10101 - 10136 Able, 10101 - 10144 Love, 10101-10144 Shivers Ct 6312/6318/6324 Montgomery	76			
204	Pleasant Ridge	Rd	24			
204	Sharonville	3318 Fortney Lane	4			
204	Sycamore Township	8946 Blue Ash Rd	1			
204	Wyoming	437 Springfield Pike	4			
205	Delhi	586 and 598 Claymore Terr	10			



АМР	Community	Address	# of Units	Quarterly Cost (1 service- every 4 months) (Price for 1 service)	Bi-Monthly Cost (2 services per month) (Total price for 2 services per month)	Monthly Cost (4 services per month) (Total price for 4 services per month)
205	Delhi	4605 Foley Rd	5			
205	E. Price Hill	2012-2140 Quebec, 1783- 1885 Provincial Ct, Horizon Hills (1031, 1027,	30			
205	E. Price Hill	1023, 1011, 1007 Grand Ave, 3010, 3020 Warsaw Ave	24			
205	Miami Township	7715 Jandaracres Dr	3			
205	Clifton	3345 Sherlock	4			
206	Westwood	2329 Harrison Ave	4			
200	Westwood		12			
206	Westwood	2554 Westwood Northern Blvd	4			
206	Westwood	3110 Bracken Woods	4			
206	Westwood	3206 Gobel Ave	4			
207	Colerain Township	7273 Boleyn Dr	4			
207	Colerain Township	3271 Gayway Ct	4			
207	Colerain Township	6614 Cheviot Rd	5			
207	Colerain Township	2829 Jessup Rd	2			
207	College Hill	6090 and 6092 Belmont Ave	8			
207	Deer Park	2750 Losantiville Ave	4			
207	Mt. Airy	2547 W North Bend Rd	4			
207	Mt. Airy	2508 Flanigan Ct	4			
207	Mt. Airy	5142, 5144, 5146 and 5148 Hawaiian Ter	5			
207	Norwood	2747 Cypress Way	4			
207	River Rd/Saylor Park	36 Anderson Ferry	12			
208	Avondale	420 Glenwood	20			
208	Avondale	4048 Ledgewood	12			
208	Avondale	519/521/523 Hickory St	3			
208	Avondale	520-540 Prospect	10			
208	Avondale	415-437 Rockdale	12			
208	Avondale	3465 Knott St	6			
208	Avondale	418 Kasota St	7			
208	Avondale	415-417 Catherine	4			
208	Avondale	3543-3545 Dick St	2			
208	Avondale	100-139 Rion Lane	40			
208	Avondale	3538 - 3546 Purdue St	6			
208	Walnut Hills	2106 Sinton Ave	16			
208	Walnut Hills	918-922 Nassau	10			



AMP	Community	Address Setty Kuhn (Walters Altoona	# of Units	Quarterly Cost (1 service- every 4 months) (Price for 1 service)	Bi-Monthly Cost (2 services per month) (Total price for 2 services per month)	Monthly Cost (4 services per month) (Total price for 4 services per month)
208	Walnut Hills	and Mathers)	64			
211	Avondale	Beechwood, 330 Forest Ave	149			
211	Avondale	Maple Towers, 601 Maple Towers President, 784 Greenwood	120			
213	Avondale	Ave	95			
213	Avondale	Redding, 3700 Madison Rd	99			
214	West End	Stanley Rowe A (835 Poplar)	149			
214	West End	Stanley Rowe B (1621 Linn Street)	212			
215	Stanley Rowe A&B	1621 Linn and 835 Poplar	354			
215	West End	Liberty Street	144			
215	West End	Stanley Rowehouses	52			
218	English Woods	Marquette Manor, 1999 Sutter Ave	139			

One-time exterminations or follow-up services:

Type of Unit	Initial Inspection/ Extermination	Routine Inspection /Extermination	Emergency Inspection / Extermination	Unit Turnover
Family Development Units (price per unit)	\$	\$	\$	\$
High-Rise Units (price per unit)	\$	\$	\$	\$
High-Rise Units (over X units volume discount)	\$	\$	\$	\$
Scattered Sites (price per unit)	\$	\$	\$	\$
Common areas**	\$	\$	\$	\$
Price per linear foot	\$	\$	\$	\$



** Common areas include all public-accessible areas other than CMHA offices and Administrative Offices (e.g. public bathrooms, kitchens, hallways, recreation areas, lobbies, etc.)

Fees above include all materials costs. Materials costs include those that are industry-standard for pest control services and include items such as traps, pesticide, bait boxes, gloves, etc.

Additional Services

Provide a firm fixed hourly rate for related services

Name/Position	Firm Fixed Hourly Rate
	\$
	\$
	\$
	\$

Any unforeseen material costs not covered will be negotiated with the Property Manager before services begin.

Notes and Exclusions:

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

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 RFP 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 RFP.

Date: , 2023

Company: _____



Address:		
City, State, Zip		
Phone(s):		
Email:		
By: (Signature of Offerer)		
By:(Print Name)	Title:	
Fed Tax ID:		