

# CMHA SOLICITATION 2023-5006 STRATEGIC PLAN CONSULTANT ATTACHMENT B 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.

Fixed fee: \_\_\_\_\_

Description of Phase and Deliverables	Percentage of Firm Fixed Fee
<ul> <li>Completion and data reporting after conducting the following meetings:</li> <li>1. Kickoff meeting</li> <li>2. One Zoom meeting with executive staff</li> <li>3. One Zoom meeting with CMHA Board of Commissioners to solicit input.</li> </ul>	
<ul> <li>Completion and data reporting after conducting additional 6 meetings:</li> <li>1. Two Zoom meetings with employees in groups of approximately 40 for each meeting</li> <li>2. One Zoom meeting with CMHA Board of Commissioners to discuss the progress on the strategic plan development and solicit input.</li> <li>3. HostThree Zoom/in person community charrettes for community stakeholders.</li> </ul>	
Initial draft to be provided to the Chief Executive Officer no later than December 15th, 2023.	\$
Final Meeting with CMHA Board of Commissioners to be completed by November 15, 2023.	\$
Final draft shall be submitted to Chief Executive Officer no later than January 31, 2024.	\$



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#### **Additional Services**

Provide a firm fixed hourly rate for related services

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

The Agency anticipates that the successful proposer may need to travel to work on site (Cincinnati Metropolitan Housing Authority). If so, the proposer may seek approval for such arrangements and if so approved may charge the Agency for reimbursement of certain travel expenses. Those expenses include: travel to and from Cincinnati, Ohio, and on-site living expenses. Out-of-pocket travel costs will be reimbursed with pre-approval of the CMHA Contracting Officer. Reimbursement is limited to the General Services Administration per diem rates. If the proposer expects to charge for travel, that must be indicated on this Fee Submission Form. Expected travel costs must be provided as an attachment to the Fee Submission Form.

Notes and Exclusions:

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



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