



### QSP TP24-1805

## Snow Removal Services for Pinecrest, Horizon Hills and Bennett Point

### Attachment B: Contractor’s Fee Submission Form

The fees shall be a firm fixed price inclusive of all elements required to deliver the services, including but not limited to: employee costs and benefits, clerical support, supplies, materials, licensing, insurance, travel, fuel surcharges, franchise fees, etc. Please note that such cost is inclusive of all elements required to provide these services as specified herein and each fee proposed shall be fully “burdened” with profit and overhead costs.

See Section 20.4 of Attachment C-TPS General Terms and Conditions for tax information.

Location: Pinecrest	Plow only	Salt Only	Salt and Plow	Sidewalk Clearing with Ice Melt or equal
Pinecrest 3951 W 8th St (West Price Hill)	\$ _____	\$ _____	\$ _____	\$ _____

**Equipment to be utilized:**

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Location: Horizon Hills	Plow only	Salt Only	Salt and Plow	Sidewalk Clearing with Ice Melt or equal
Horizon Hills 1003 Grande – 1031 Grand 3010 Warsaw – 3020 Warsaw	\$ _____	\$ _____	\$ _____	\$ _____

**Equipment to be utilized:**

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Location: Bennett Pointe	Plow only	Salt Only	Salt and Plow	Sidewalk Clearing with Ice Melt or equal
Bennett Pointe 528 E. 12 <sup>th</sup> Street	\$ _____	\$ _____	\$ _____	\$ _____

**Equipment to be utilized:**

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**Additional Services**

Provide a firm fixed hourly rate for related services

**ADDITIONAL SERVICES:**

From time to time, CMHA may need additional services (for example for reasonable accommodations).  
Hourly rate for additional services:

\$ \_\_\_\_\_/hour/person (plow only)

\$ \_\_\_\_\_/hour/person (salt only)

\$ \_\_\_\_\_/hour/person (salt and plow)

\$ \_\_\_\_\_/hour/person (sidewalk clearing with Ice Melt or equivalent)

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**



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his/her knowledge, true and accurate, and that if TPS discovers that any information entered herein to be false, such shall entitle TPS to not consider or make award or to cancel any award with the undersigned party. Pursuant to all QSP Documents including attachments, this Fee Submission Form, and pursuant to all Documents submitted, the undersigned proposes to supply TPS with the services and/or products described herein for the fee(s) submitted pertaining to this QSP.

Date: \_\_\_\_\_

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

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

City, State, Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

By: \_\_\_\_\_  
(Signature of Offerer)

By: \_\_\_\_\_ Title: \_\_\_\_\_  
(Print Name)

Fed Tax ID: \_\_\_\_\_