



**TP23-8021
Emergency Preparation Plan**

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.

Although CMHA is tax-exempt; TPS is not. Include taxes within the fees provided below.

NOTE: Contractor may choose to provide pricing for both scopes or only one scope.

Item	Firm Fixed Price Per Report
Emergency Preparedness Plan Preparation	\$ _____
Item	Firm Fixed Hourly Rate
Performing Fire Drills (Contractor Team Rate) If no team rate, list rates by labor title below.	\$ _____
Title:	\$ _____
Title:	\$ _____
Title:	\$ _____

Additional Services

Provide a firm fixed hourly rate for related services

Name/Position	Firm Fixed Hourly Rate
	\$ _____



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	\$ _____
	\$ _____
	\$ _____

TPS anticipates that the successful proposer may need to travel to work on site. If so, the proposer may seek approval for such arrangements and if so approved may charge TPS 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 TPS 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 QSP.



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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 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: _____