BID RESPONSE PACKET 710-19-1023

BID SIGNATURE PAGE

Type or Print the following information.							
PROSPECTIVE CONTRACTOR'S INFORMATION							
Company:							
Address:							
City:				State:		Zip Code:	
Business Designation:	□ Individual □ Sole Proprietorship □ Public Service Corp □ Partnership □ Corporation □ Nonprofit			Corp			
Minority and	☐ Not Applicable ☐ Ame	erican Indian	☐ Asian A	merican		☐ Service Di	sabled Veteran
Women-Owned Designation*:	☐ African American ☐ Hispanic American ☐ Pacific Islander American ☐ Women-Owned						
	AR Certification #:		_ * See Mind	ority and	Women-Ov	vned Business	Policy
		CTIVE CONTRACT ct information to be use				S.	
Contact Person:			Title:				
Phone:			Alternate Pho	ne:			
Email:							
		CONFIRMATION C		COPY			
☐ NO, a redacte	ed copy of submission done of copy of submission done of submission done of the released if requesters.	ocuments is <u>not</u> end		stand a	full copy o	f non-redacte	ed submission
neither box pricing), wi	ed copy of the submission is checked, a copy of the ill be released in respons collicitation for additional ir	he non-redacted do se to any request m	cuments, with	the exce	eption of fi	nancial data (other than
333 218 3		LLEGAL IMMIGRA	ANT CONFIRM	IATION			
By signing and submitting a response to this <i>Bid Solicitation</i> , a Prospective Contractor agrees and certifies that they do not employ or contract with illegal immigrants. If selected, the Prospective Contractor certifies that they will not employ or contract with illegal immigrants during the aggregate term of a contract.							
ISRAEL BOYCOTT RESTRICTION CONFIRMATION							
By checking the box below, a Prospective Contractor agrees and certifies that they do not boycott Israel, and if selected, will not boycott Israel during the aggregate term of the contract.							
☐ Prospective Contractor does not and will not boycott Israel.							
An official authorized to bind the Prospective Contractor to a resultant contract must sign below.							
The signature below signifies agreement that any exception that conflicts with a Requirement of this <i>Bid Solicitation</i> will cause the Prospective Contractor's bid to be disqualified:							
Authorized Sign	ature: Use Ink Only.			Title:			
Printed/Typed N	ame:			Date:			

SECTION 1 - VENDOR AGREEMENT AND COMPLIANCE

Any requested exceptions to items in this section which are <u>NON-mandatory</u> **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.

Exceptions to Requirements shall cause the vendor's proposal to be disqualified.				
By signature below, ve	endor agrees to and shall fully comply with all Req	uirements as shown i	n this section of the bid	
solicitation.		,		
Vendor Name:		Date:		
Signature:		Title:		
Printed Name:				

SECTION 2 - VENDOR AGREEMENT AND COMPLIANCE

Any requested exceptions to items in this section which are <u>NON-mandatory</u> **must** be declared below or as an attachment to this page. Vendor **must** clearly explain the requested exception, and should label the request to reference the specific solicitation item number to which the exception applies.

Exceptions to Requirements **shall** cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Vendor Name:	Date:	
Signature:	Title:	
Printed Name:		

SECTION 3 - VENDOR AGREEMENT AND COMPLIANCE

Exceptions to Requirements shall cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Vendor Name:	Date:	
Signature:	Title:	
Printed Name:		

SECTION 4 - VENDOR AGREEMENT AND COMPLIANCE

Exceptions to Requirements shall cause the vendor's proposal to be disqualified.

By signature below, vendor agrees to and **shall** fully comply with all Requirements as shown in this section of the bid solicitation.

Vendor Name:	Date:	
Signature:	Title:	
Printed Name:		

PROPOSED SUBCONTRACTORS FORM

• **Do not** include additional information relating to subcontractors on this form or as an attachment to this form.

PROSPECTIVE CONTRACTOR PROPOSES TO USE THE FOLLOWING SUBCONTRACTOR(S) TO PROVIDE SERVICES.

Type or Print the following information

Subcontractor's Company Name	Street Address	City, State, ZIP
PERFORM SERVICES.	TRACTOR DOES NOT PROPOSE TO and shall fully comply with all Requirement	
Vendor Name:	Da	ite:
Signature:	Tit	tle:
Printed Name:	I	

OFFICIAL BID PRICE SHEET

Prices **must** include all costs for performing the requirements stated in the Scope of Work, which includes all reporting to DHS. All fees for the requested services **must** be disclosed in your response.

Description	Estimated Annual Volume	Unit Price Per Review	Extended Amount
Health & Safety L	icensure/Cert	ification Reviev	NS
ARChoices Providers	557		
Fee-For-Service Outpatient			
Behavioral Health Services Providers	508		
Substance Abuse Treatment	40		
Providers			
Qual	ity of Care Rev	riews	
ARChoices Providers (only Attendant			
Care and Respite providers)	362		
Fee-for-service Outpatient Behavioral			
Health Services Providers	508		
Substance Abuse Treatment	40		
Providers			
Division of Youth Services (DYS)			
Secure Residential Treatment	7		
Facilities			
DYS Specialized Residential			
Treatment Programs	5		
DYS Community-Based Youth			
Service Providers	15		
Inspection of Care Reviews			
Inpatient Psychiatric Services			
Providers for Under 21 (U21)	23		
population	(in state)		
Inpatient Psychiatric Services			
Providers for Under 21 (U21)	11		
population	(out of state)		
TOTAL \$			

The above quantities are estimates only and are subject to fluctuation. Estimated volume is intended to serve as a guide only and not a guarantee of minimum or maximum activity.

AUTHORIZATION SIGNATURE

By my signature below, I certify that the aforementioned statements are true and correct and that I accept the Terms and Conditions as presented in this bid, and that I am authorized by the respondent to submit this bid on his/her behalf.

Vendor Name:	Date:
Signature:	Title:
Printed Name:	