



## **REQUEST FOR PROPOSAL**

**#21364**

**For**

### **REFRIGERATION SERVICES PROVIDERS**

FOR THE CLEVELAND MUNICIPAL SCHOOL DISTRICT  
DBA: CLEVELAND METROPOLITAN SCHOOL DISTRICT  
BOARD OF EDUCATION, 1111 SUPERIOR AVENUE E, SUITE 1800  
CLEVELAND, OHIO 44114

UNDER THE DIRECTION OF OPERATIONS DIVISION OF THE BOARD OF EDUCATION OF THE CLEVELAND  
METROPOLITAN SCHOOL DISTRICT - CUYAHOGA COUNTY, OHIO

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## **Part I: OVERVIEW, BACKGROUND & SCOPE OF WORK**

### **Section A: Overview**

The Cleveland Metropolitan School District (hereafter the “District”) under RFP #21364 is seeking service providers to provide services to the kitchens and central kitchen warehouse.

The District intends to contract with qualified service providers to provide services in the categories outlined in Part I Section C in support of the needs of the District.

### **Section B: Background**

The District is a large urban school system with over 100 instructional and non-instructional sites, approximately 6,000 teachers and administrative staff, 36,000 District students, and 3,500 classrooms.

The kitchen locations are devoted to ensure each scholar received prompt, professional and courteous service, a nutritious meal or snack, and practical nutrition education.

### **Section C: Specific Requirements**

The District is seeking proposals from service providers to perform work in the following categories of work required for the refrigeration services of approximately 90 school and administrative buildings in the District. All services are expected to be completed during normal business hours unless overtime hours are approved. Pricing to include unit measure = each site visit; unit price = hourly rate regular time, overtime, holiday rate, and truck or service charge.

- i. Refrigeration Services**
  - a. Walk-in coolers/freezers
  - b. Reach-in coolers/freezers
  - c. Milk coolers
  - d. Cold tables
  - e. Cold cabinets
  - f. Open air coolers
  - g. Ice machines
  - h. Any other cold equipment
    - i. Provide Quotes for Parts and Repairs
      - 1. Evaporators
      - 2. Condensers
      - 3. Coils
      - 4. Refrigerant
      - 5. Fan motors
      - 6. Defrost timers
      - 7. Door heaters
      - 8. Drain pans
      - 9. Gaskets
      - 10. Lock sets and keys

- 11. Door handles
- 12. Parts as needed

**ii. Preventative Maintenance**

- a. Cleaning of condenser coils and louvers
- b. Verify evaporators and thermostats are in good working condition
- c. Verify door alignment
- d. Check door gaskets
- e. Verify door closures are operational
- f. Verify electrical connections are secure and free of arcing
- g. Record manufacturer make, model and serial number at each site visit

**iii.** The Vendor shall provide maintenance within six (6) hours of notification during normal business hours. Overtime hours must be approved.

**iv.** Maintenance on the equipment shall be performed on-site at the school/building where they are currently located.

**v.** Building Locations

Site Name	Address	Zip Code
ADLAI E.STEVENSON	3938 JoAnn Dr. Cleveland, OH	44122
ALBERT BUSHNELL HART	3900 E. 75 <sup>th</sup> St. Cleveland, OH	44105
ALFRED A. BENESCH	5393 Quincy Ave. Cleveland, OH	44104
ALMIRA	3380 W. 98th St. Cleveland, OH	44102
ANDREW J. RICKOFF	11617 Union Ave. Cleveland, OH	44105
ANTON GRDINA	3050 E. 77th St. Cleveland, OH	44104
ARTEMUS WARD	4315 W. 140th St. Cleveland, OH	44135
BARD WEST	13501 Terminal Ave. Cleveland, OH	44135
BENJAMIN FRANKLIN	1905 Spring Rd. Cleveland, OH	44109
BOLTON	9803 Quebec Ave. Cleveland, OH	44106
BUHRER	1600 Buhrer Ave. Cleveland, OH	44109
CAMPUS INTERNATIONAL	3000 Payne Ave. Cleveland, OH	44115
CAMPUS INTERNATIONAL HS	3100 Chester Ave. Cleveland, OH	44115
CHARLES A. MOONEY	3213 Montclair Ave. Cleveland, OH	44109
CHARLES DICKENS	3552 E. 131st St. Cleveland, OH	44120
CLARA E. WESTROPP	19101 Puritas Ave. Cleveland, OH	44135
CLARK	5550 Clark Ave. Cleveland, OH	44120
CLEVELAND EARLY COLLEGE HIGH SCHOOL	2075 Stokes Blvd. Cleveland, OH	44106
CLEVELAND HIGH SCHOOL FOR DIGITAL ARTS	1440 Lakeside Ave. Cleveland, OH	44114
CLEVELAND SCHOOL OF ARTS	2064 Stearns Rd. Cleveland, OH	44106
COLLINWOOD	15210 St. Clair Ave. Cleveland, OH	44110
DANIEL E. MORGAN	1440 E. 92nd St. Cleveland, OH	44106
DENISON	3799 W. 33rd St. Cleveland, OH	44109
DESIGN LAB	1740 E. 32nd St. Cleveland, OH	44114
DIKE SCHOOL OF ARTS	2501 E 61 <sup>st</sup> St. Cleveland, OH	44104
DOUGLAS MACARTHUR	4401 Valleyside Rd. Cleveland, OH	44135
EAST CLARK	885 E. 146th St. Cleveland, OH	44110
EAST TECHNICAL	2439 East 55 St. Cleveland, OH	44104
EUCLID PARK	17914 Euclid Ave. Cleveland, OH	44122
FRANKLIN D. ROOSEVELT	800 Linn Dr. Cleveland, OH	44108
GARFIELD	3800 W. 140th St. Cleveland, OH	44111

GARRETT MORGAN	4016 Woodbine Ave. Cleveland, OH	44113
GEORGE WASHINGTON CARVER	2201 E. 49th St. Cleveland, OH	44103
GINN	655 E. 162nd St. Cleveland, OH	44110
GLENVILLE	650 E. 113 St. Cleveland, OH	44108
HALLE	7901 Halle Avenue Cleveland, OH	44102
HANNAH GIBBONS	1378 Clearaire Rd. Cleveland, OH	44110
HARVEY RICE	2730 East 116th St. Cleveland OH	44120
JAMES FORD RHODES	5100 Biddulph Rd. Cleveland, OH	44144
JOHN ADAMS	3817 Martin Luther King Blvd. Cleveland, OH	44105
JOHN F. KENNEDY	15111 Miles Avenue	44128
JOHN HAY	2075 Stokes Blvd. Cleveland, OH	44106
JOHN MARSHALL	3952 W. 140th St. Cleveland, OH	44111
JOSEPH M. GALLAGHER	6601 Franklin Blvd. Cleveland, OH	44102
KENNETH W. CLEMENT	14311 Woodworth Ave. Cleveland, OH	44112
LINCOLN WEST	3202 West 30th St. Cleveland, OH	44109
LOUISA MAY ALCOTT	10308 Baltic Road Cleveland, OH	44102
LUIS MUNOZ MARIN	1701 Castle Ave. Cleveland, OH	44113
MARION C. SELTZER	1468 W. 98 St. Cleveland, OH	44102
MARION STERLING	3033 Central Ave. Cleveland, OH	44115
MARY CHURCH TERRELL SCHOOL	3595 Bosworth Rd. Cleveland, OH	44111
MARY M. BETHUNE	11815 Moulton Ave. Cleveland, OH	44106
MARY B. MARTIN	8200 Brookline Ave. Cleveland, OH	44103
MAX S HAYES	2211 W. 65th Street Cleveland, OH	44102
MC2 STEM @ GLSC	601 Erieside Street Cleveland, OH	44114
MEMORIAL	410 E. 152nd St. Cleveland, OH	44110
MICHAEL R. WHITE	1000 E. 92nd St. Cleveland, OH	44108
MILES	11918 Miles Ave. Cleveland, OH	44105
MILES PARK	4090 E. 93rd St. Cleveland, OH	44108
MOUND	5405 Mound Ave. Cleveland, OH	44105
NATHAN HALE	3588 Martin Luther King Jr. Blvd. Cleveland, OH	44105
NATIVIDAD PAGAN INTERNATIONAL NEWCOMERS ACADEMY-HIGH SCHOOL	3145 West 46 <sup>th</sup> ST. Cleveland, OH	44102
NEW TECH WEST	11801 Worthington Ave. Cleveland, OH	44111
NEWTON D. BAKER	3690 W. 159th St. Cleveland, OH	44111
OLIVER H. PERRY	18400 Schenely Ave. Cleveland, OH	44119
ORCHARD	4200 Bailey Ave. Cleveland, OH	44113
PAUL L. DUNBAR	11801 Worthington Ave. Cleveland, OH	44111
RHODES COLLEGE AND CAREER ACADEMY	5100 Biddulph Ave. Cleveland, OH	44144
RIVERSIDE	14601 Montrose Ave. Cleveland, OH	44111
ROBERT H. JAMISON	13905 Harvard Ave. Cleveland, OH	44105
ROBINSON G. JONES	4550 W. 150th St. Cleveland, OH	44135
SCRANTON	1991 Barber Ave. Cleveland, OH	44113
STEPHANIE TUBBS JONES SCHOOLS	11901 Durant Ave. Cleveland, OH	44108
SUNBEAM	11731 Mt. Overlook Ave. Cleveland, OH	44120
TREMONT	2409 W. 10th St. Cleveland, OH	44113
VALLEY VIEW BOYS LDRSHP	17200 Valley View Ave. Cleveland, OH	44135
WADE PARK	7600 Wade Park Ave. Cleveland, OH	44103
WALTON	3409 Walton Ave. Cleveland, OH	44113
WARNER	8315 Jeffries Ave. Cleveland, OH	44105
WAVERLY	1805 W. 57th St. Cleveland, OH	44102
WHITNEY M. YOUNG	17900 Harvard Ave. Cleveland, OH	44128
WILBUR WRIGHT	11005 Parkhurst Dr. Cleveland, OH	44111
WILLIAM C. BRYANT	3121 Oak Park Ave. Cleveland, OH	44109

WILLIAM RAINEY HARPER	5515 Ira Avenue Cleveland, OH	44122
WILLSON	1126 Ansel Rd. Cleveland, OH	44106
Central Kitchen	16807 St Clair Ave. Cleveland, OH	44110

With the development of the Master Plan for Facilities Renovation & Construction and the Cleveland Plan, addresses may be updated. As these changes occur, we will provide you with location names and addresses.

## Part II: RFP SUBMISSION & PROCESS REQUIREMENTS

Part II of the RFP provides a detailed set of directions which the service provider will use to prepare the response.

Schedule for Posting and Service Provider(s) Selection for the Refrigeration Services Providers RFP #21364:

Step	Date*
RFP Posted	10/13/2022
Pre-Proposal Meeting	10/20/2022
All final questions from service providers to the District	10/24/2022
Answers to service providers from the District and all addenda issued (if necessary)	11/07/2022
RFP Responses Due	11/15/2022
Service Provider(s) selection	11/28/2022
Contract negotiation	11-28 to 12-9/2022
Contract Start	12/19/2022

\*Dates listed are subject to change at the discretion of the District. Service providers will be notified of changes to the schedule, as appropriate

### Section A: Proposal Submission & Format Requirements

#### i. Proposal Submission Requirements

- a. In order for the District to evaluate proposals fairly and completely, service providers should follow the format set forth herein and provide all of the information requested. The District discourages overly lengthy and costly proposals.
- b. All proposals shall include all proposal format requirements found below. All information requested in the district related forms must be filled in legibly and completely with blue ink signatures, or the proposal may be considered non-responsive. **Proposal Name: Refrigeration Services Providers and #21364 must be on the outside of the envelope of submittals including shipping labels.**
- c. Proposals are due at the Cashier’s Office of the Cleveland Metropolitan School District, 1111 Superior Ave E. Cleveland, Ohio 44114 on or before **1:00 pm** current local time on **November 15, 2022**. **Mailing of Proposals are encouraged. However, hand deliveries will be accepted from 12:00 pm to 1:00 pm on November 15, 2022.**
- d. All submissions must include **one (1) original with blue signatures, one (1) copy, and one (1) electronic proposal on a USB B Flash Drive**. Service providers not complying with this requirement will be notified that they have twenty-four (24) hours in which to comply with this requirement or their proposal may be disqualified. This applies to **copies only**. All materials submitted are as is.
- e. There will be a Pre-Proposal Meeting at **11:00 AM on October 20, 2022**. The meeting will be held Via Zoom. The Zoom link is as follows:  
<https://zoom.us/j/93148467292?pwd=eURTUml6cnFNTU5BUGV5WVdq3h4QT09>

Suppliers are encouraged to submit questions prior to the Pre-Proposal Meeting so that they may be addressed.

- f. All written questions shall be directed to the Purchasing Division via email to: [seletha.thompson@clevelandmetroschools.org](mailto:seletha.thompson@clevelandmetroschools.org). Written questions will be accepted via email until **12:00 pm on October 24, 2022**. Under no circumstances should any firm interested in providing the services identified in the RFP, their designees, or anyone affiliated with their firm, contact any other District employee or official during the RFP process, in an attempt to lobby or influence the selection of a service provider pursuant to this RFP.
- g. The District reserves the right to reject any and all proposals, to waive any and all informalities or irregularities, and to disregard all non-conforming responsive conditional proposals. Each Proposer is liable for all proposal errors or omissions. A proposer shall not be permitted to alter or amend any proposal documents after the Proposal deadline time and date detailed in the RFP unless such is formally requested, in writing, by the District.
- h. Proposals must remain open and valid for ninety (90) days from the opening date, unless the time for awarding the contract is extended by mutual consent of the District and service provider. Service providers may withdraw their proposals any time before proposal opening date by providing written notice to the Purchasing Department before the time and date set for the proposal opening.

**ii. Proposal Format Requirements**

- a. The Refrigeration Services Providers scope of work for RFP #21364 is described in Part I. Service Providers are required to provide the information below as well as complete the District Related Forms in Appendix A. The narrative part of the proposals must present the following information, be organized with the following headings and respond to the requested information and questions presented in the RFP scope of work. For evaluation purposes, each heading should be clearly marked in the proposal response.
- b. Proposal responses are to be divided into sections as follows:
  - i. **Transmittal Cover Letter:** Prepare a letter transmitting the proposal on business letterhead. The letter should identify the business name, phone number, and business web address along with the name, phone number and email address of the key contact person. The letter must have the signature of a person with authority to obligate the business. The transmittal letter shall also contain a statement that the proposal is a firm offer for a ninety (90) day period.
  - ii. **General Information Section**
    - 1. **Service Provider History and Background:** A brief history of the service provider including years in business, general description of client base and approach to servicing clients as a term service provider
    - 2. **Service Provider Qualifications:** Summary Qualifications Statement that includes:
      - a. Brief staff biographies/resumes(Owner(s) and/or company officers, project managers, and on-site project leaders)
      - b. If applicable, copies of professional licenses which are required by local, state or federal laws to perform the services presented in the qualifications statement
      - c. If applicable, copies of industry credentials, proprietary training and/or OEM certifications that demonstrate a service provider’s qualifications to service/repair equipment using in-depth product knowledge, or other exceptional competencies/experience



- d. Industry awards
  - e. Membership/participation in cooperative purchasing programs
  - f. Community involvement
3. **Security and Risks: Overview of Service Provider's:**
- a. Policies, practices, and standards for maintaining the confidentiality and integrity of client information;
  - b. Approach to managing challenges and risks associated with specified services and suggestions for mitigating risk including, but not limited to, managing procurement of equipment, supplies, labor supply, accounts receivables, etc. and
  - c. Inventory control practices for protecting delivery of parts and equipment
4. **Statement of Acceptance of General Requirements:**
- a. Equipment: The service provider shall be responsible for providing all customary equipment necessary to fulfill work requests. In no event shall the District be responsible for any damages to the service provider's equipment either damaged, destroyed, lost or stolen
  - b. On-Site Lead Person: The service provider shall always provide a working lead person or project manager who shall be responsible to accept and execute such instructions as are conveyed by the District's designated representative during the contract period. Instructions conveyed verbally or in writing shall be binding upon the service provider.
  - c. Apparel: The service provider's employees engaged on site shall wear company uniforms readily identifiable to all District employees and the public. In the event, the company does not require employees to wear uniforms, the employees shall have displayed on them at all times a company-issued name tag/credential (see Background Checks)
  - d. Damage to Property: The service provider shall preserve from damage to all property along the line of work, or which is in the vicinity of or is in any way affected by the work. This applies to, but not limited to, public and private property, vehicles, utilities, trees, shrubs, grass, signs, grounds including sprinkler systems, etc. Whatever such property is damaged due to the activities of the service provider, it shall be immediately restored, at the service provider's expense, to a condition equal to or better than the existing condition before such damage was done.
  - e. Work Deficiencies: If at any time before the commencement or during the progress of the work, the personnel, equipment or supervision of the project appear to the District-designated representative(s) to be insufficient, inefficient, or inappropriate to perform the quality of work required, meet project milestones and/or completion dates, the District's designated representative may order the service provider to correct such deficiencies in a punctual manner to the satisfaction of the District. Failure of the District-designated representative to require such correction shall not relieve the service provider of the obligation to provide the quality and quantity of work required within the time required by the contract.

iii. **Cost Proposal Form(s)**

iv. **Completed District Related Forms** set forth in Appendix A of this RFP.

**Section B: Proposal Constraints**

- i. The service provider must comply with all laws, rules and regulations dictated by the Board of Education of the Cleveland Metropolitan School District, City of Cleveland, the State of Ohio and the United States Federal Government.
- ii. Purchases funded by federal grant funds must adhere to regulations found in Uniform Guidance “Super Circular”, 2 CFR 200 (UGG), as a condition of receiving funds and to meet annual audit compliance. In an effort to keep policy for all grants consistent, the District implemented the new federal guidelines regarding procurement utilized with federal grants immediately.
- iii. The District will only accept proposals that cover all of the major components requested in the RFP.
- iv. Service provider shall not include Ohio Sales Tax in the price quoted. The District will provide tax exempt certificate to the successful Proposer.
- v. Service provider’s personnel and subcontractors on the District site will be required to meet security requirements. Service provider agrees to successfully complete background checks on all of its employees, agents and subcontracts, if necessary, who provide services on site under this scope of work. Each person on site must wear an identification badge that clearly identifies and makes visible the person’s name and company.
- vi. The successful Service provider and their subcontractor(s), including organizations having personnel, equipment and vehicles on District property, shall provide evidence of insurance as follows:
  - a. Commercial General Liability Including limited contractual liability  
\$2,000,000.00 Limit of Liability  
(Per occurrence)
  - b. Automobile Liability Including non-owned and hired  
\$2,000,000.00 Limit of Liability  
(Per occurrence)
  - c. Worker’s Compensation Worker’s compensation and employer’s insurance  
to full extent required by applicable law
- vii. This requirement must be fulfilled by the successful service provider providing the District with a current Certificate of Insurance (standard ACORD form), showing the Board of Education of the Cleveland Municipal School District as an additional insured (Certificate Holder does not constitute being an additional insured), within five (5) days of Notice of Intent to Award Agreement. The certificates of insurance shall contain a provision that the policy or policies shall not be canceled without thirty (30) days' prior written notice to the District.
- viii. The required insurance must be provided by a company licensed by the State of Ohio and be financially acceptable to the District.
- ix. In submitting a proposal, service providers agree, unless specifically authorized in writing by an authorized representative of the District on a case-by-case basis, that it shall have no right to use, and shall not use, the name of Cleveland Metropolitan School District, its officials or employees, in any advertising, publicity, promotion, nor to express or imply any endorsement of service provider’s services.
- x. The District has a Diversity Business Enterprise and Affirmative Action Program in effect. Information about this program is set forth at <https://bit.ly/3wvVApK>. Forms related to this program are set forth in Appendix A. Service providers submitting a proposal must complete the appropriate forms and submit same with their proposal.

## Section C: Evaluation Process

- i. **Responsiveness:** Proposals will be evaluated, first, as responsive or non-responsive to the RFP’s instructions. A preliminary review will be conducted of all proposals submitted on time to ensure the proposal adheres to the material submission requirements specified in the RFP. Proposals that do not meet the material submission requirements may be deemed non-responsive and rejected. In the event that all proposers do not meet one or more of the submission requirements, the District reserves the right to continue the qualitative evaluation of the proposals and select proposal(s) which most closely meets the scope of work specified in the RFP. Proposal responses must include, or meet, the following submission requirements:
  - a. Timely Submission
  - b. Transmittal Cover Letter
  - c. General Information Section
  - d. Cost proposal form(s)
  - e. District Related Forms
- ii. **Qualitative Evaluation-** proposals will next be evaluated based on the information presented in the proposal and on additional information obtained during the evaluation process. Responses will be evaluated based on the following weighted criteria:
  - a. Demonstrated Experience and Success of Service Provider providing services **(20%)**
  - b. Availability and Flexibility to meet District Needs, Ability to utilize local resources to meet the need **(25%)**
  - c. Firm capacity and other resources necessary to perform the services **(25%)**
  - d. Understanding the District needs **(15%)**
  - e. Consistent and Competitive pricing structure for work to be performed **(15%)**
- iii. Evaluations are based on the submitted proposal. Follow-up discussions with the proposer’s best suited to complete the work may be requested. The District reserves the right to interview or to seek additional information related to criteria already specified in the RFP after opening the proposals and prior to entering into a contract, to reject any or all proposals, and to award a contract to one or multiple service providers as the District deems necessary. The District also reserves the right to check references identified by any proposer from any service provider that submitted a proposal. The evaluation process is designed to identify the service provider that is the “best value,” which is the best combination of attributes based upon the evaluation criteria, not necessarily to the service provider with the lowest cost.

## Section D: All District Related Forms

There are a number of REQUIRED forms in Appendix A of the RFP that must be completed and submitted with the proposal response. These forms include:

- a. Addendum Acknowledgement
- b. Certificate of Debarment
- c. Conflict of Interest
- d. Proposer Qualification Form
- e. Non-Collusion Affidavit
- f. DBE Forms – A, B, C, D, E F, G & H
- g. EOA Contractual Declaration Forms
- h. References

## **Section E: Award of Contract**

- i.** The contents of the RFP, including all appendices and addenda thereto, and the commitments set forth in the proposals shall be considered contractual obligations. Failure to accept these obligations may result in cancellation of the award.
- ii.** The contract award will not be final until the District and the selected Service Provider execute a mutually satisfactory contractual agreement.
- iii.** The Contract Documents consist of the following:
  - a.** District Contract
  - b.** RFP Submission Requirements
  - c.** Cost Proposal Form(s)
  - d.** All Required District related forms set forth in Appendix A
  - e.** All applicable addenda
- iv.** The service provider shall perform all work described in the Contract Documents, including without limitation, all terms and conditions of the scope of work and specifications contained herein or otherwise stated in the Contract Documents reasonably inferable there from by the service provider as necessary to produce the results intended therein

## **Part III: COST PROPOSAL**

The undersigned proposes to provide Refrigeration Services for the District in accordance with the Proposal response, Scope of Work, and Requirements to the entire satisfaction and acceptance of the District for the period December 19, 2022 through June 30, 2023 with two (2) renewal options. The first renewal option is from July 1, 2023 through June 30, 2024. The second renewal option is July 1, 2024 through June 30, 2025. These renewal options will be under the same terms and conditions as the initial contract and the following cost(s). Undersigned also agrees to hold their cost firm for ninety (90) days from date of submission.

The District reserves the right to request additional pricing from the awarded service providers for services not identified herein. Service Provider shall provide the best rates for services later identified by the District based on the request and in accordance with the specifications and requirements outlined herein. The District does not guarantee utilization of services or make any commitment as to minimum amount of services through the term of any awarded agreement

Service providers should use the following template to ensure details are provided and may be fully executed by the District.

## Cost Proposal Forms

**Refrigeration Services Cost Form** – Check off all services that apply. Submit a separate sheet for services where cost structures are different.

- |   |   |
|---|---|
| <input type="checkbox"/> Walk-in coolers/freezers<br><input type="checkbox"/> Reach-in coolers/freezers<br><input type="checkbox"/> Milk Coolers<br><input type="checkbox"/> Cold Tables<br><input type="checkbox"/> Provide competitive pricing and quotes for parts and repairs of evaporators, condensers, coils, refrigerant, fan motors, defrost timers, door heaters, drain pans, gaskets, lock sets and keys, door handles and other parts as needed | <input type="checkbox"/> Cold Cabinets<br><input type="checkbox"/> Open air coolers<br><input type="checkbox"/> Ice machines<br><input type="checkbox"/> Any other cold equipment |
|---|---|

<b>COST STRUCTURE – Per Site Visit</b> (Complete all that apply. Attach additional company documents if necessary.)	FY 2022-2023	FY 2023-2024	FY 2024-2025
<b>Hourly Rate – Regular Business Hours</b> Inclusive of all labor, call-out, and admin. fees			
<b>Hourly Rate – Overtime Rate</b> Inclusive of all labor, call-out, and admin. fees			
<b>Hourly Rate – Holiday Rate</b> Inclusive of all labor, call-out, and admin. fees			
<b>Daily Rate – Truck/Equipment Rate</b> Inclusive of all transportation costs			
<b>Service Charge</b> Inclusive of all labor, call-out, and admin. fees			
<b>Response Time (Terms and Conditions)</b>			
<b>Optional Pricing Structure(s)</b>			
<b>Policy(ies) on Contingencies and Special Circumstances</b>			

*Service providers must complete the signatory requirement below*

COMPANY NAME: \_\_\_\_\_

REPRESENTATIVE: \_\_\_\_\_  
PRINT (TITLE)

SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

TELEPHONE: (    ) \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

DATE: \_\_\_\_\_

**Preventative Maintenance Plan Cost Form** – Check off all services that apply. Submit a separate sheet for services where cost structures are different.

- Cleaning of condenser coils and louvers
- Verify evaporators and thermostats are in good working condition
- Verify door alignment is correct
- Check door gaskets
- Verify door closures are operations
- Verify electrical connections are secure and free of arcing
- Record manufacturer make, model and serial number at each site visit

<b>COST STRUCTURE – Per Site Visit</b> (Complete all that apply. Attach additional company documents if necessary.)	FY 2022-2023	FY 2023-2024	FY 2024-2025
<b>Hourly Rate – Regular Business Hours</b> Inclusive of all labor, call-out, and admin. fees			
<b>Hourly Rate – Overtime Rate</b> Inclusive of all labor, call-out, and admin. fees			
<b>Hourly Rate – Holiday Rate</b> Inclusive of all labor, call-out, and admin. fees			
<b>Daily Rate – Truck/Equipment Rate</b> Inclusive of all transportation costs			
<b>Service Charge</b> Inclusive of all labor, call-out, and admin. fees			
<b>Response Time (Terms and Conditions)</b>			
<b>Optional Pricing Structure(s)</b>			
<b>Policy(ies) on Contingencies and Special Circumstances</b>			

*Service providers must complete the signatory requirement below*

COMPANY NAME: \_\_\_\_\_

REPRESENTATIVE: \_\_\_\_\_  
PRINT (TITLE)

SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

DATE: \_\_\_\_\_

**Appendix A: District Related Forms**

**Addendum Acknowledgement Form for RFP #21364**

Having read and examined the Request for Proposal Documents, including the specifications, prepared by the Cleveland Metropolitan School District for the above-referenced Project, and the following Addenda:

Addendum Number	Date of Receipt
_____	_____
_____	_____
_____	_____
_____	_____

Proposer: \_\_\_\_\_

The undersigned Service provider proposes to perform all work for the applicable contract, in accordance with the contract document for the proposed sums.

***\*Failing to acknowledge a published Addendum may cause your response to be rejected***

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

# Certificate of Debarment



## Certification Regarding Debarment, Suspension, and Other Responsibility Matters Primary Covered Transactions

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 13 CFR Part 145. The regulations were published as Part VII of the May 26, 1988 *Federal Register* (pages 19160-19211). Copies of the regulations are available from local offices of the U.S. Small Business Administration.

### (BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS ON REVERSE)

- (1) The prospective primary participant certifies to the best of its knowledge and belief that it and its principals:
  - (a) Are not presently debarred, suspended, proposed for disbarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
  - (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
  - (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective primary participant shall attach an explanation to this proposal.

Business Name \_\_\_\_\_

Date \_\_\_\_\_

By \_\_\_\_\_  
Name and Title of Authorized Representative

\_\_\_\_\_  
Signature of Authorized Representative



# Certificate of Debarment Continued

- 2 -

## INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is submitted for assistance in obtaining a copy of those regulations (13 CFR Part 145).
6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.
7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion--Lower Tier Covered Transactions," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the ineligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

## Conflict of Interest Form

### Statement of Potential Conflicts of Interest

Cleveland Metropolitan School District (CMSD) adheres to Ohio Ethics Law and strictly follows the opinion of the Ohio Ethics Commission. As such, each service provider is requested to submit this statement declaring any potential conflicts of interest in doing business with the District. Please answer the following two questions providing all requested information.

1. Are any current Cleveland Metropolitan School District (CMSD) employees, Cleveland Board of Education members, or any of their immediate family members, also members of the service provider's board of directors, hold any officer position with the service provider, or own any shares of any stock issued by the service provider?

Yes \_\_\_\_\_ No \_\_\_\_\_

If **yes**, and if the CMSD employee, CMSD board member, or immediately family member is a member of the service provider's board of directors or holds an office with the service provider, please state the person's name and position with the service provider.

Name: \_\_\_\_\_

Position: \_\_\_\_\_

If **yes**, and if the CMSD employee, CMSD board member, or immediate family member owns share of any stock in the service provider organization or company, state the percentage of all outstanding company shares owned by the CMSD employee or board member.

\_\_\_\_\_ %

2. Are any current CMSD employees, CMSD board members, or any immediate family members also employees of the service provider?

Yes \_\_\_\_\_ No \_\_\_\_\_

If **yes**, please state the person's name and provide a description of their job duties for the provider:

Name: \_\_\_\_\_

Job Duties: \_\_\_\_\_

If **Yes**, please describe the contact that the service provider will have with the CMSD employee or CMSD board member in the course of providing services to the District:

---

**CERTIFICATION**

I do hereby certify that the foregoing statements are true and accurate, and that my signature below attests to the authenticity of my identity as the person actually signing this form. This document is not a contract. In order for a binding Agreement to exist, a signed Agreement will be required prior to any legally binding commitment by the District.

**NOTARIZED STATEMENT**

\_\_\_\_\_ being duly sworn and deposes says

That he/she is the \_\_\_\_\_ of  
(title)

\_\_\_\_\_, and answers to all the  
(organization)

foregoing questions and all statements therein contained are true and correct.

\_\_\_\_\_  
(signature)

Subscribed and sworn before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Notary Public: \_\_\_\_\_

My commission expires: \_\_\_\_\_

## Proposer Qualifications Form

Proposer must answer all questions or attach a written explanation for each question.

1. What is the name of the organization?

---

2. What type of organization? (i.e. corporation, partnership, etc.)

---

3. How many years has your organization been in business?

---

4. How many years has your organization been in business under its current name?

---

5. List any other aliases your organization has utilized in the last two years and the form of Business

---

6. If you are currently a corporation, list the following:

a. State of incorporation

---

b. Date of incorporation

---

c. President's name

---

d. Secretary's name

---

e. Treasurer's name

---

f. Statutory agent's name

---

g. Name of shareholders, if less than 10

---

h. Principal place of doing business

---

7. If you are currently in a partnership, list the following:

a. Name and address of all general and limited partners.

---

b. Original name and date of organization's inception

8. If you are neither a corporation nor a partnership, please describe your organization and list principals.

9. Are you legally qualified to do business in the State of Ohio?

10. Are you legally qualified to do business in Cuyahoga County and licensed by the City of Cleveland?

11. Has your organization ever been (i) declared by a customer to be in default under a contractor and/or (ii) sued by a customer for failure to completely a contract or properly perform services in a timely manner? If yes, please state where, when, and why.

12. Has your organization ever been cited by a local, county, state, or federal authority for violation of a regulation or statute or failing to timely complete a contract in accordance with specifications? If yes, please state date, agency, and final disposition.

13. Has your organization ever filed for bankruptcy? If yes, please state where, when and why?

14. On a separate sheet, list the major customers for whom your organization has provided this type of equipment or service in the past five years. Include owner's name and type of work performed.

15. Has your organization ever been sued by a supplier for failure to timely pay for materials or equipment provided? If yes, please provide details.

16. What is the dollar limit of your firm's General (CLS) Liability Insurance?

Name of insuring company: \_\_\_\_\_

Policy number: \_\_\_\_\_

17. What is the dollar limit of your firm's Automotive Liability Insurance?

Owned vehicles \_\_\_\_\_

Non-Owned vehicles \_\_\_\_\_

Name of insuring company \_\_\_\_\_

Policy number \_\_\_\_\_

18. List the name and address of every person having an interest in this RFP.

\_\_\_\_\_  
19. Has any federal, state or local government entity ever cited or taken any action against your organization or any of its principals for failure to pay or remit any taxes including but not limited to income, withholding, sales, franchise, or personal property taxes? If yes, please give name of agency, date and amount of taxes overdue and resolution of the issue.

\_\_\_\_\_  
20. Is your organization and its' principals current in payment of personal property taxes?

\_\_\_\_\_  
21. The prospective lower tier participant certifies, by submission of this RFP, that neither it nor its principals is presently debarred, suspended, proposed, for debarment or suspension, declared ineligible, or voluntarily excluded from participation in this transaction by any State and/or Federal Department or Agency.

\_\_\_\_\_  
22. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participants shall attach an explanation to this RFP.

\_\_\_\_\_  
**Notarized Statement**

\_\_\_\_\_ being duly sworn and deposes says

that he/she is the \_\_\_\_\_ of  
(title)

\_\_\_\_\_, and answers to all the  
(organization)

foregoing questions and all statements therein contained are true and correct.

\_\_\_\_\_  
(signature)

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Notary Public: \_\_\_\_\_

My commission expires: \_\_\_\_\_

**Non-Collusion Affidavit**

This Affidavit must be executed and shall accompany the proposal in order for the proposal to be considered.

NON-COLLUSION AFFIDAVIT  
State of Ohio, Cuyahoga County

\_\_\_\_\_, being first duly sworn, deposes and says that

he/she is \_\_\_\_\_ of \_\_\_\_\_

of the party making the foregoing proposal; that such proposal is genuine and not collusive or sham; that said proposer has not colluded, conspired, connived, or agreed, directly or indirectly, with any proposer or person, to put in a sham proposal, or that such other person shall refrain from proposing, and has not in any manner, directly or indirectly sought by agreement or collusion, or communication or conference, with any person, to fix the proposal price of affiant or any other proposer, to fix any overhead, profit or cost element of said proposal price, or of that of any proposer, or to secure any advantage against the Board of Education of the Cleveland Metropolitan School District, or any person or persons interested in the proposal; and that all statements contained in said proposal are true; and further that such proposer has not, directly or indirectly, submitted this proposal, or the contents thereof, or divulged information or data relative thereto to any Association or to any member or agent thereof.

\_\_\_\_\_  
Affiant

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public in and for Cuyahoga County, Ohio

My commission expires: \_\_\_\_\_

**Diversity Business Enterprise Forms  
DBE Form A**

Name of Firm: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Type of Business (Product or Service): \_\_\_\_\_

Date of Proposed Contract Award: \_\_\_\_\_

Amount of Proposed Contract Award: \_\_\_\_\_

Diversity Business Enterprise Subcontractor(s): \_\_\_\_\_

Dollar Amount Subcontract Award: \_\_\_\_\_

Percent of Subcontract Award: \_\_\_\_\_

D.B.E. Participation: \_\_\_\_\_ \$ \_\_\_\_\_

F.B.E. Participation: \_\_\_\_\_ \$ \_\_\_\_\_

Name of EEO Officer: \_\_\_\_\_

\_\_\_\_\_  
(Signature of owner, partner, or authorized officer)

Name: \_\_\_\_\_ Dated: \_\_\_\_\_  
(printed)

Title: \_\_\_\_\_

DO NOT COMPLETE BELOW THIS LINE

\_\_\_ Compliant    \_\_\_ Compliance Pending    \_\_\_ Non-Compliant

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

\_\_\_\_\_  
(signature, DBE Department)

\_\_\_\_\_  
(date)



**DBE Form B**  
**NOTICE OF REQUIREMENT TO ENSURE**  
**DIVERSITY BUSINESS ENTERPRISE (DBE) OPPORTUNITY**

Note: All eligible proposers for award of the contract should comply with the Requirements, Terms, and Conditions of this Notice.

The undersigned proposer hereby agrees that the goal it has established for DBE participation in this project through either subcontracting or entering into a joint Venture with DBEs in conformity with the Requirements, Terms and Conditions of this Notice is a goal of thirty (30%) percent for a construction/repair/ maintenance contract, twenty (20%) percent for a supply contract, and fifteen (15%) for a service contract of the total contract amount of this project. In no event will the absence of goals as stated above be deemed as compliance with the requirements, terms and conditions of this notice.

In addition, the undersigned will complete and attach hereto the DBE (Form C) Schedule for DBE participation, showing all DBE/FBE that will participate as subcontractors or joint ventures in this contract and a DBE (Form D), DBE Letter of Intent form for each DBE/FBE listed on the Schedule.

Proposer: \_\_\_\_\_

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

By: \_\_\_\_\_

Title: \_\_\_\_\_

Definition of DBE: A Diversity Business Enterprise (DBE)

"Small Diversity business concern" means a small business concern that is at least (51) percent unconditionally owned by one or more individuals who are both socially and economically diverse, or a publicly owned business that has at least (51) percent of its stock unconditionally owned by one or more socially and economically diverse individuals and that has its management and daily business controlled by one or more such individuals. This term also means a small business concern that is at least (51) percent unconditionally owned by an economically diverse Indian tribe or Native Hawaiian Organization, or a publicly owned business that has least (51) percent of its stock unconditionally owned by one of these entities, that has its management and daily business controlled by members of an economically diverse Indian tribe or Native Hawaiian Organization.

**DBE Form C**  
**SCHEDULE MBE/FBE PARTICIPATION**

Project Name: \_\_\_\_\_

Name of Non-DBE Contractor: \_\_\_\_\_

Identification Number: \_\_\_\_\_

Location: \_\_\_\_\_

Name of Minority Contractor: \_\_\_\_\_

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

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

Type of work to be performed and work hours involved:

\_\_\_\_\_

Projected commencement and completion dates for work:

\_\_\_\_\_

Agreed price in dollars or percentage:

\_\_\_\_\_

The undersigned will enter into a formal agreement with DBE for work listed in this schedule conditioned upon execution for a contract with the Cleveland Municipal School District

**TO BE RETURNED WITH THE PROPOSAL**

\_\_\_\_\_  
Signature of Non-DBE Prime Contractor

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

**DBE Form D**  
**DBE LETTER OF INTENT**

To: \_\_\_\_\_  
*Non-DBE Prime or General Proposer*

Project: \_\_\_\_\_

**NON-DBE PRIME OR GENERAL PROPOSER**

The Undersigned intends to perform work in connection with the above-referenced project as (check one):

an individual     a corporation     a partnership     a joint venture

DBE status of the undersigned is confirmed in the Cleveland Municipal School District's DBE file of bona fide enterprises with a certification date of: \_\_\_\_\_

The Undersigned is prepared to perform the following described work in connection with the above referenced project. Specify in detail particular work items or parts thereof to be performed:

\_\_\_\_\_  
\_\_\_\_\_

at the following price or percent of contract: \$ \_\_\_\_\_

You have projected the following commencement date of such work, and the undersigned is projecting completion of such work as follows:

**Items** \_\_\_\_\_

**Projected Commencement Date** \_\_\_\_\_

**Projected Completion Date** \_\_\_\_\_

\_\_\_\_\_ % (percent) of the dollar value of the subcontract will be sublet and/or awarded to NON-DBE contractor (s) and/or NON-FBE SUPPLIERS. The undersigned will enter into a formal agreement for the above work with you conditioned upon your execution of a contract with the Cleveland Municipal School District.

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Name of DBE Firm (where applicable)**

\_\_\_\_\_  
Signature of DBE (where applicable)

\_\_\_\_\_  
Signature of MBE Firm

(TO BE RETURNED WITH RFP)

\_\_\_\_\_  
**Name of FBE Firm**

\_\_\_\_\_  
**Signature of FBE Firm**

**DBE Form E**  
**DBE Unavailability Certification**

I, \_\_\_\_\_,  
*Name* *Title*

Of \_\_\_\_\_, certify that on \_\_\_\_\_  
*Date*

I contacted the following DBE to obtain a Proposal for work items to be performed on:

Board Project: \_\_\_\_\_

Minority Contractor: \_\_\_\_\_

Work Items Sought: \_\_\_\_\_

Form of Proposal Sought: \_\_\_\_\_

Female Contractor: \_\_\_\_\_

Work Items Sought: \_\_\_\_\_

Form of Proposal Sought: \_\_\_\_\_

To the best of my knowledge and belief said minority business enterprise was unavailable (exclusive of the unavailability due to lack of agreement on price) for work on this project or unable to prepare a proposal for the following reason (s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Signature, Non-DBE prime Proposer* *Date*

\_\_\_\_\_ was offered an opportunity to proposal on the above-referenced work on  
\_\_\_\_\_ by \_\_\_\_\_  
*Date* *Non-DBE Prime Proposer*

\_\_\_\_\_  
*Signature, Non-DBE Prime Proposer*

The above statement is a true and accurate account of why I did not submit a Proposal on this project.

\_\_\_\_\_  
*Signature, Non-DBE prime Proposer*

**DBE Form F**  
**Non-Minority Prime Affidavit For DBE**

STATE OF            }  
COUNTY OF        } SS.

**AFFIDAVIT**

The undersigned swear that the foregoing statements are correct and include all material information necessary to identify and explain the items and operation of our subcontract and the intended participation by each party in the undertaking. Further, the undersigned covenant and agree to provide to the Cleveland Municipal School District current, complete, and accurate information regarding actual subcontract work and the payments thereof, and any proposed changes in any of the subcontract arrangements and to permit the audit and examination of the books, records and files of the subcontract or those of each party relevant to the subcontract, by authorized representatives of the Cleveland Municipal School District. Any material misrepresentation will be grounds for terminating any contract which may be awarded and for initiating action under federal and state laws concerning false statements.

Name of Firm: \_\_\_\_\_

Signature: \_\_\_\_\_

Name and Title: \_\_\_\_\_

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

STATE OF            }  
COUNTY OF } SS.

On this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, before me appeared \_\_\_\_\_

\_\_\_\_\_, to me personally known, who being duly sworn,

did execute the foregoing affidavit, and did state that they were properly authorized by \_\_\_\_\_

\_\_\_\_\_ to execute the affidavit and did so as their free act and deed.

(Seal)

Notary Public \_\_\_\_\_

Commission expires \_\_\_\_\_

**DBE Form G**

**This form need not be completed if all joint venture firms are diversity business enterprises**

- 1. Name of Joint Venture: \_\_\_\_\_
- 2. Address of Joint Venture: \_\_\_\_\_
- 3. Phone Number of Joint Venture: \_\_\_\_\_
- 4. Identify the firms which comprise this joint venture. (The DBE partner must complete DBE Form A or have current DBE Certification)

---

---

a. Describe the roll of the DBE firm in the joint venture: \_\_\_\_\_

---

b. Describe briefly the experience and business qualifications of each non-DBE Joint Venture: \_\_\_\_\_

---

5. Nature of Joint Venture's Business: \_\_\_\_\_

---

6. Provide a copy of the Joint Venture Agreement.

7. What is the percentage of DBE Ownership? DBE \_\_\_\_\_% FBE \_\_\_\_\_%

8. Ownership of Joint Venture: (This need not be completed if described in the Joint Venture agreement provided in response to question 6).

a. Profit and loss sharing: \_\_\_\_\_

---

b. Capital contributions, including equipment: \_\_\_\_\_

---

c. Other applicable ownership interest: \_\_\_\_\_

---

9. Control of and participation in this contract. Identify by name, race, and "firm" those individuals and their titles who are responsible for day-to-day management and policy decision making, including, but not limited to, those prime responsibility form:

a. Financial decisions: \_\_\_\_\_  
\_\_\_\_\_

b. Management decisions, such as:

i. Estimating: \_\_\_\_\_

ii. Marketing and Sales: \_\_\_\_\_

iii. Hiring and firing of management personnel: \_\_\_\_\_  
\_\_\_\_\_

iv. Purchasing of major items or supplies: \_\_\_\_\_  
\_\_\_\_\_

c. Supervision of field operations: \_\_\_\_\_  
\_\_\_\_\_

Note: If after complete the DBE Form B and before the completion of the joint venture's work on any contract awarded, there is any significant change in the information submitted, the joint venture must inform the Cleveland Municipal School District, either directly or through the non-DBE prime subcontractor if the joint service provider is a subcontractor.

**DBE Form H**

**Non-Minority Prime Affidavit (Joint Venture)**

**STATE OF OHIO**

**CUYAHOGA COUNTY**

**AFFIDAVIT**

The undersigned swear that the forgoing statements are correct and include all material information necessary to identify and explain the items and operation of our subcontract and the intended participation by each joint venture in the undertaking. Further, the undersigned covenant and agree to provide to the Cleveland Municipal School District current, complete, and accurate information regarding actual joint venture work and the payments thereof and any proposed changes in any of the subcontract arrangements and to permit the audit and examination of the books, records and files of the joint venture or those of each party relevant to the joint venture, by authorized representatives of the Cleveland Municipal School District. Any material misrepresentation will be grounds for terminating any contract which may be awarded and for initiating action under federal and state laws concerning false statements.

\_\_\_\_\_  
**Name of Firm (Prime)**

\_\_\_\_\_  
**Name of Firm (DBE)**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Name and Title**

\_\_\_\_\_  
**Name and Title**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**

STATE OF \_\_\_\_\_ ] COUNTY OF \_\_\_\_\_ JSS.

On this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_, before me appeared \_\_\_\_\_, to me personally known, who being duly sworn, did execute the foregoing affidavit, and did state that they were properly authorized by \_\_\_\_\_ to execute the affidavit and did so as their free act and deed.

*(Seal)*

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
*Commission expires*



## EOA Contractual Declaration Forms

Information about the District's Affirmative Action Program can be found at <https://bit.ly/3wvVApK>.

### Service Provider Contract Compliance Form

Name of Firm: \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Standard Metropolitan Statistical Area: \_\_\_\_\_

Recruitment Area: \_\_\_\_\_

Type of Business (product or service): \_\_\_\_\_

Name of EEO Officer: \_\_\_\_\_

Signature of Owner, Partner, or Authorized Officer: \_\_\_\_\_

Name (type or print): \_\_\_\_\_

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

Do not complete below this line

---

Status of Service provider:

Compliance                       Conditional Compliance

Non-Compliance                   Compliance Pending

Comments: \_\_\_\_\_

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



## Employee Data Form

Please note this data may be obtained by visual survey or post-employment record. Neither visual surveys nor post-employment records are prohibited by any federal, state or local law. All specified data is required to be filled in by District policy. Descriptions of the job categories below can be found at <https://bit.ly/3wvVApK>

Job Categories	All EMPLOYEES			MALES					FEMALES				
	TOALS MALES & FEMALES	MALES	FEMALES	WHITE (NOT OF HISPANIC ORIGIN)	BLACK (NOT OF HISPANIC ORIGIN)	ASIAN AMERICAN OR PACIFIC ISLANDER	INDIGENOUS OR ALSKAN NATIVE	HISPANIC	WHITE (NOT OF HISPANIC ORIGIN)	BLACK (NOT OF HISPANIC ORIGIN)	ASIAN AMERICAN OR PACIFIC ISLANDE	INDIGENOUS OR ALSKAN NATIVE	HISPANIC
OFFICIALS, MGRS & SUPERVISORS													
PROFESSIONALS													
TECHNICIANS													
SALES WORKERS													
OFFICE/CLERICAL													
CRAFTWORKERS (SKILLED)													
OPERATIONS (SEMI-SKILLED)													
LABORERS (UNSKILLED)													
SERVICE WORKERS													
APPRENTICES													
TOTAL													

Additional information (optional):

Describe any other actions taken which show that all employees are recruited, hired, or trained or promoted without regard to their race, religion, color, sex, handicap, age or national origin. Use second sheet if additional space is needed:

The undersigned certifies that they are legally authorized by the proposer to make the statements and representations contained in this report, and that they have read all of the foregoing statements and representations which are true and correct to the best of their knowledge and belief.

FIRM OR CORPORATE NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

TITLE: \_\_\_\_\_

## References

Include below three references of equal or larger size to this current RFP project. Public sector experience is preferred, but not required. Please attach relevant supporting documentation, such as project plans, scope of work.

### **Reference #1:**

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

Contact Person: \_\_\_\_\_

Phone Number(Mobile): \_\_\_\_\_ Email Address: \_\_\_\_\_

Brief summary of customer engagement, length of relationship, typical work performed, average cost(s) per service call, etc. :

---

---

---

### **Reference #2:**

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

Contact Person: \_\_\_\_\_

Phone Number(Mobile): \_\_\_\_\_ Email Address: \_\_\_\_\_

Brief summary of customer engagement, length of relationship, typical work performed, average cost(s) per service call, etc. :

---

---

---

### **Reference #3:**

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

Contact Person: \_\_\_\_\_

Phone Number(Mobile): \_\_\_\_\_ Email Address: \_\_\_\_\_

Brief summary of customer engagement, length of relationship, typical work performed, average cost(s) per service call, etc. :

---

---

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## Service Provider Checklist

To assist service providers in the preparation of their proposals to ensure compliance with all document requirements

- Cover Page
- Transmittal Cover Letter, signed
- Table of Contents
- General Information Section
  - Service Provider History and Background
  - Service Provider Qualifications
  - Securities and Risks
- Statement of Acceptance of General Requirements
  - Equipment
  - On-Site Lead Person
  - Apparel
  - Damage to Property
  - Work Deficiencies
- Cost Proposal Form(s)
  - Signatory
- District Related Forms
  - Addendum Acknowledgement, checked: <https://www.clevelandmetroschools.org/purchasing> for any addendums
  - Certificate of Debarment
  - Conflict of Interest
  - Proposer Qualification Form
  - Non-Collusion Affidavit
  - DBE Forms- A, B, C, D, E, F, G, & H, for more information: <https://bit.ly/3wvVApK>
  - EOA Contractual Declaration Forms 1 &2, for more information: <https://bit.ly/3wvVApK>
  - Employment Data Form
  - References

### Copies

- Original, marked
- Copies (1), marked
- USB B/Flashdrive