

RFP ATTACHMENT B

3rd REVISED PRICE SCHEDULE

A. Respondent agrees to provide services described in the Scope of Services for the prices indicated below subject to the following provisions:

- **Hourly rates shall include all direct and indirect expenses.**
- Respondent shall only invoice for actual, documented hours worked, rounded to the nearest ¼ hour.
- A Work Week shall be defined as beginning at 12:00 a.m. on Saturday and ending at 11:59 p.m. on the following Friday.
- The City will not reimburse for overtime unless it is pre-approved by City. Overtime is defined as any hours worked by a single individual in excess of 40 hours within a single week.
- The City will reimburse at 1.5 times the Proposed Hourly Rate below for time worked on the following authorized holidays: New Year's Day, Martin Luther King Day, Memorial Day, Independence Day, Labor Day, Veteran's Day, and Christmas Day.
- Respondents must complete Tables 1 & 2 on the following pages.

B. Table 1 should reflect pricing for the number of FTE in the Respondent’s staffing plan as proposed in RFP Attachment A, Part Three, Item 2a.

Table 1: Pricing for Required Services

YEAR 1

Position	Estimated Annual Work Hours per FTE ^[A]	Proposed # of FTE	Proposed Hourly Rate	Estimated Annual Total Cost
On-Site Supervisor	2,080	_____	\$_____	\$_____
Access Control Officer	2,080	_____	\$_____	\$_____
TOTAL ANNUAL COST				\$_____

YEAR 2

Position	Estimated Annual Work Hours per FTE ^[A]	Proposed # of FTE	Proposed Hourly Rate	Estimated Annual Total Cost
On-Site Supervisor	2,080	_____	\$_____	\$_____
Access Control Officer	2,080	_____	\$_____	\$_____
TOTAL ANNUAL COST				\$_____

YEAR 3

Position	Estimated Annual Work Hours per FTE ^[A]	Proposed # of FTE	Proposed Hourly Rate	Estimated Annual Total Cost
On-Site Supervisor	2,080	_____	\$_____	\$_____
Access Control Officer	2,080	_____	\$_____	\$_____
TOTAL ANNUAL COST				\$_____

YEAR 4

Position	Estimated Annual Work Hours per FTE ^[A]	Proposed # of FTE	Proposed Hourly Rate	Estimated Annual Total Cost
On-Site Supervisor	2,080	_____	\$_____	\$_____
Access Control Officer	2,080	_____	\$_____	\$_____
TOTAL ANNUAL COST				\$_____

YEAR 5

Position	Estimated Annual Work Hours per FTE ^[A]	Proposed # of FTE	Proposed Hourly Rate	Estimated Annual Total Cost
On-Site Supervisor	2,080	_____	\$_____	\$_____
Access Control Officer	2,080	_____	\$_____	\$_____
TOTAL ANNUAL COST				\$_____

^[A] These numbers represent the annual number of work hours for a single full time employee (based on a 40 hour work week). These numbers will be used for evaluation purposes only.

TOTAL 5 YEAR COST	\$_____
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NOTE: Table 1 will be used for evaluation purposes.

C. Table 2 should reflect pricing for the number of FTE in the Respondent's staffing plan as proposed in RFP Attachment A, Part Three, Item 2b.

Table 2: Pricing for All Services (Required Services & Alternate Service)

YEAR 1

Position	Estimated Annual Work Hours per FTE ^[A]	Proposed # of FTE	Proposed Hourly Rate	Estimated Annual Total Cost
On-Site Supervisor	2,080	_____	\$_____	\$_____
Access Control Officer	2,080	_____	\$_____	\$_____
TOTAL ANNUAL COST				\$_____

YEAR 2

Position	Estimated Annual Work Hours per FTE ^[A]	Proposed # of FTE	Proposed Hourly Rate	Estimated Annual Total Cost
On-Site Supervisor	2,080	_____	\$_____	\$_____
Access Control Officer	2,080	_____	\$_____	\$_____
TOTAL ANNUAL COST				\$_____

YEAR 3

Position	Estimated Annual Work Hours per FTE ^[A]	Proposed # of FTE	Proposed Hourly Rate	Estimated Annual Total Cost
On-Site Supervisor	2,080	_____	\$_____	\$_____
Access Control Officer	2,080	_____	\$_____	\$_____
TOTAL ANNUAL COST				\$_____

YEAR 4

Position	Estimated Annual Work Hours per FTE ^[A]	Proposed # of FTE	Proposed Hourly Rate	Estimated Annual Total Cost
On-Site Supervisor	2,080	_____	\$_____	\$_____
Access Control Officer	2,080	_____	\$_____	\$_____
TOTAL ANNUAL COST				\$_____

YEAR 5

Position	Estimated Annual Work Hours per FTE ^[A]	Proposed # of FTE	Proposed Hourly Rate	Estimated Annual Total Cost
On-Site Supervisor	2,080	_____	\$_____	\$_____
Access Control Officer	2,080	_____	\$_____	\$_____
TOTAL ANNUAL COST				\$_____

^[A] These numbers represent the annual number of work hours for a single full time employee (based on a 40 hour work week). These numbers will be used for evaluation purposes only.

TOTAL 5 YEAR COST	\$_____
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