

Cost Proposal REV1

RFQ 111765 Z6

Transitional Living Housing, including Mental Health Programming, for Parole clients

Bidder Name: David's House

Location: 817 n. 50<sup>th</sup> Ave, 622 n. 85<sup>th</sup> st

All operating expenses associated with the transitional living services to be provided, including without limitation, service fees, mortgage or lease, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits, must be included with the per diem rate invoiced to NBOP/Division of Parole Supervision. No ancillary or auxiliary costs shall be billed.

Cost provided must coordinate with the transitional living tier and programs described in Attachment A REV1. Bidder must provide a cost per client per day, cost per client per week and cost per client per month.

<b>LICENSED HALFWAY HOUSE</b>		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$30/day)						
COST PER CLIENT	PER WEEK (Max \$210/week)						
COST PER CLIENT	PER MONTH (Max \$840/month)						

<b>TRANSITIONAL LIVING with programming</b>		Initial contract term		Renewal 1		Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$90/day)	90	90	90	90	90	90
COST PER CLIENT	PER WEEK (Max \$630/week)	630	630	630	630	630	630
COST PER CLIENT	PER MONTH (Max \$2520/month)	2520	2520	2520	2520	2520	2520

<b>TRANSITIONAL LIVING / SAFE AND SOBER LIVING</b>		Initial contract term	Renewal 1	Renewal 2
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<b>without programming</b>		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
COST PER CLIENT	PER DAY (Max \$50/day)	50	50	50	50	50	50
COST PER CLIENT	PER WEEK (Max \$350/week)	35	350	350	350	350	350
COST PER CLIENT	PER MONTH (Max \$1400/month)	1400	1400	1400	1400	1400	1400