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

All operating expenses associated with the Intensive Outpatient Programming for Adult Substance Abuse (IOP) 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 hour rate invoiced to NBOP/Division of Parole Supervision.

No ancillary or auxiliary costs shall be billed.

**Bidder must provide a cost per hour.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Estimated Quantity per year | Unit of Measure | Initial contract term | | Renewal 1 | | Renewal 2 | |
| Year 1 | Year 2 | Year 3 | Year 4 | Year 5 | Year 6 |
|  | | | | | | | | |
| Intensive Outpatient Programming for Adult Substance Abuse (IOP) | 100 | Hour |  |  |  |  |  |  |