# Cost Proposal
# Request for Proposal Number 5947 Z1

Firm Name: _____

The bidder shall provide a flat fee for assessment stages listed below. Each individual assessment will contain all three stages. Total cost is scored on an estimate of four (4) full assessments per year.

| **PER ASSESSMENT**<br>Full assessment to include all three stages listed in Section V of the RFP. | **UOM** | **Initial Award Year 1** | **Initial Award Year 2** | **Initial Award Year 3** | **Optional Renewal One Year 4** | **Optional Renewal One Year 5** | **Optional Renewal Two Year 6** | **Optional Renewal Two Year 7** |
|---|---|---|---|---|---|---|---|---|
| **Stage 1** | EA | $ | $ | $ | $ | $ | $ | $ |
| **Stage 2** | EA | | | | | | | |
| **Stage 3** | EA | | | | | | | |

**Optional Pricing:**
Per Section V.C.8 of the RFP, DHHS may request additional items to be included with assessment. Indicate below the rate for optional items.

| **Deliverable** | **UOM** | **Initial Award Rate Year 1** | **Initial Award Rate Year 2** | **Initial Award Rate Year 3** | **Optional Renewal One Rate Year 4** | **Optional Renewal One Rate Year 5** | **Optional Renewal Two Rate Year 6** | **Optional Renewal Two Rate Year 7** |
|---|---|---|---|---|---|---|---|---|
| Additional written reports | EA | $ | $ | $ | $ | $ | $ | $ |
| Upon request of DHHS, additional site visits or consulting for EMS agency being evaluated. | EA | $ | $ | $ | $ | $ | $ | $ |
| Targeted assessment:<br>To include Stage 1, two of the focus areas listed in sections V.C.4.a. - h. from Stage 2, and all of Stage 3: | EA | $ | $ | $ | $ | $ | $ | $ |