

PROPOSAL APPENDIX FORMS

This document indicates the proposal requirements for the RFP which shall be submitted by the deadline set for submission of proposals. Offeror shall complete the appropriate proposal requirements, sign all appropriate forms, and attach (upload) the completed Appendixes to their HlePRO online RFP submission.

APPENDIX CHECKLIST

THE FOLLOWING APPENDIXES IN THIS TABLE MUST BE COMPLETED AS PART OF THE RFP AND SHALL BE UPLOADED WITH THE OFFERORS HlePRO SUBMISSION.

| APPENDIX DESCRIPTION | APPENDIX |
|---|-----------------|
| Proposal Letter | Appendix A |
| Business Classification Certification Statement | Appendix B |
| Wage Certificate | Appendix C |
| Price Quotation Sheet | Appendix D |
| Project Narrative | Appendix E |
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The University is not responsible for any issues with the uploading of the Appendixes into HlePRO

APPENDIX A
PROPOSAL LETTER
UNIVERSITY OF HAWAII

We propose to provide the culinary management services named in the Request for Proposals (RFP) No. 24-7051 to Provide Culinary Management Services for University of Hawaii Maui College, Kahului, Hawaii.

It is understood that this proposal constitutes an offer.

It is understood and agreed that we have read the University of Hawaii's specifications described in the RFP and that this proposal is made in accordance with the provisions of such specifications. By signing this proposal, we guarantee and certify that all items included in this proposal meet or exceed any and all such specifications.

We agree, if awarded the contract, to deliver goods or services which meet or exceed the specifications.

Respectfully submitted,

Legal Name of Offeror

Date

Authorized Signature (original) **(Typed Name)**

Title

Street Address

Telephone No.

City, State, Zip Code

Fax No.

Social Security OR Federal Tax Payer ID No.

Email

Remittance Address (if different from street address)

Hawaii General Excise Tax License No.

City, State, Zip Code

Location of Offeror's Plant

Offeror is: Individual Partnership Corporation* Joint Venture

State of Incorporation: Hawaii Other:

Is Corporate Seal Available In Hawaii: Yes** No

* Attach to this page evidence of authority of the above officer to submit an offer on behalf of the corporation, giving also, the names and addresses of the other officers.

** If yes, affix corporate seal

APPENDIX B

BUSINESS CLASSIFICATION CERTIFICATION STATEMENT

CONTRACTORS: Please complete the information below. Terms used are taken from the U.S. Small Business Administration (SBA) Rules and Regulations (<https://www.sba.gov/>) and the U.S. Code of Federal Regulations (CFR). The term “controlled” refers to the management and daily operation of the business concern.

The company identified below (check all that apply):

- 1. _____ **IS NOT** a small business concern as defined in the regulations
(If you checked here, STOP. GO TO CERTIFICATION BELOW.)
- _____ **IS a small business concern**, defined as one that is independently owned and operated, is organized for profit, is not dominant in its field, meets the SBA size standard eligibility (see reverse side of this form for examples of size standards), is registered and has its status represented in the U.S. Government’s System for Award Management (SAM) database. See <http://www.sba.gov/content/what-sbas-definition-small-business-concern>.
- 2. _____ IS a **small disadvantaged business concern** of which at least 51% is unconditionally and directly owned and controlled by one or more socially disadvantaged and economically disadvantaged persons who are U.S. citizens. See 13 CFR 124.105 for exceptions.
- 3. _____ IS a **women-owned small business concern** of which at least 51% is unconditionally and directly owned and controlled by one or more women who are U.S. citizens. See 13 CFR 127.
- 4. _____ IS a **HUBZone small business concern** that meets the certification eligibility requirements set by the U.S. SBA. See 13 CFR 126.
- 5. _____ IS a **veteran-owned small business concern** of which at least at least 51% is unconditionally and directly owned by one or more veterans or service-disabled veterans. See 38 CFR 74.
- 6. _____ IS a **service-disabled veteran-owned small business concern** of which at least 51% is unconditionally and directly owned by one or more service-disabled veterans. In the case of any publicly owned business, not less than 51% of the stock of which is owned by one or more service-disabled veterans. The management and daily business operations of which are controlled by one or more service-disabled veterans, or in the case of a veteran with a permanent and severe disability, a spouse or permanent caregiver of such veteran. See 13 CFR 125.11 et al.

CERTIFICATION

I hereby certify the information supplied herein to be true and correct. (Any misrepresentation shall be subject to the provisions stated in item B on the next page.)

Company Name: _____

Signature of Company Officer

Company Address: _____

Print Name: _____

Title: _____

Date: _____

Type of Goods/Services: _____

North American Industry Classification System (NAICS) Code: _____

APPENDIX B

- A. A small business concern is one that is independently owned and operated, is organized for profit, is not dominant in its field, has a place of business in the U.S., and operates primarily within the U.S. or makes a significant contribution to the U.S. economy. Size standard eligibility is based on the average number of employees for the preceding 12 months or on sales volume averaged over a 3-year period. See 13 CFR 121.201 for size standards identified by NAICS codes. The size standards for a few industries are shown below and are subject to change at any time.
1. SPECIALTY TRADE CONTRACTORS – “Small” if average annual receipts for preceding 3 years do not exceed \$15 million.
 2. CONSTRUCTION, GENERAL CONTRACTORS – “Small” if average annual receipts for preceding 3 years do not exceed \$36.5 million.
 3. MANUFACTURING – “Small” if 500 employees or less, except for some specific products which will increase the complement of employees to 750 or 1,000.
 4. TRANSPORTATION – “Small” if average annual receipts for preceding 3 years do not exceed the amount shown for specific services.
\$27.5 million – general freight trucking, local.
 5. WHOLESALE TRADE, DURABLE AND NON-DURABLE GOODS – “Small” if 100 employees or less.
 6. RETAIL TRADE – “Small” if average annual receipts for preceding 3 years do not exceed the amount shown for specific products.
\$7.5 million – hardware stores.
 7. SERVICES – “Small” if average annual receipts for preceding 3 years do not exceed the amount shown for specific services:
 - a) \$27.5 million – computer systems design services, custom computer programming services
\$20.5 million – security guards and patrol services
 - b) \$18 million – janitorial services
 - c) \$38.5 million – passenger car rental
 - d) \$32.5 million – office machinery and equipment rental & leasing
 - e) \$7.5 million – general automotive repair

Annual receipts of a concern which has been in business for less than 3 complete fiscal years means the total receipts for the period the concern has been in business divided by the number of weeks in business, multiplied by 52. See 13 CFR 121.104.

- B. Notice. Under 15 U.S.C. 645(d), any person who misrepresents a firm’s status as a small business concern, a qualified HUBZone small business concern, a small business concern owned and controlled by socially and economically disadvantaged individuals, or a small business concern owned and controlled by women in order to obtain a contract to be awarded under the preference programs established pursuant to 15 U.S.C. sections 637(a), 637(d), 638, 644, or 657(a), shall:
1. Be punished by imposition of fine, imprisonment, or both;
 2. Be subject to administrative remedies including suspension and debarment; and
 3. Be ineligible for participation in a program conducted under the authority of the Small Business Investment Act of 1958.

APPENDIX C

WAGE CERTIFICATE

Description of Project: _____

(To be filled in by prospective offeror)

Pursuant to Section 103-55, HRS, I hereby certify that if awarded the contract in excess of \$25,000, the services to be performed will be performed under the following conditions:

- 1. The services to be rendered shall be performed by employees paid at wages or salaries not less than wages paid to the public officers and employees for similar work, if similar positions are listed in the classification plan of the public sector.
- 2. All applicable laws of the Federal and State governments relating to worker's compensation, unemployment compensation, payment of wages, and safety will be fully complied with.

I understand that all payments required by Federal and State laws to be made by employers for the benefit of their employees are to be paid in addition to the base wages required by Section 103-55, HRS.

Offeror: _____

Signature: _____

Title: _____

Date: _____

APPENDIX D
UNIVERSITY OF HAWAII
RFP FOR MANAGEMENT SERVICES

PRICE QUOTATION SHEET

Name of Firm _____

Name of Authorized Representative _____

Title of Authorized Representative _____

Signature of Authorized Representative _____

Date _____

Price quote shall be for fixed management fee per year over a FIVE (5)-year period as follows:

| | | | | |
|------------------------------|---|---------------------|---|-----------------------------|
| <u>Annual Management Fee</u> | | <u>No. of Years</u> | | <u>Total Management Fee</u> |
| \$ _____ | x | 5 years | = | \$ _____ |

Fee shall be inclusive of all associated costs and applicable taxes.

APPENDIX E

PROJECT NARRATIVE

- A. Provide company information regarding your core competencies and experience in the following areas:
1. Inventory purchasing/management;
 2. Financial accounting procedures and operations of foodservice programs;
 3. Facility and equipment asset management;
 4. Human resource management, particularly in the use of students and professional development opportunities;
 5. Catering and retail operations; and
 6. Meeting Health & Safety Laws
- B. Provide procedural information on how your company will handle and develop financial and operational controls to improve the efficiency of the program in the following areas:
1. Cash handling;
 2. Facility & equipment asset repair and replacement;
 3. Inventory purchase and accountability; and
 4. Meeting facility health and safety standards
- C. Provide company information regarding your unique services and opportunities for improving service to the campus, to include recommended improvement to retail concepts and formats offered through your companies branding or partnership program.
- D. Provide organizational structure of how your company will manage operations of the facility, describing corporate support services available to the campus food service program along with proposed district manager supervision, and the account load of the district manager (if applicable)
- E. Provide a statement on your corporate commitment to recycling and the promotion of proactive energy conservation efforts in your business operations .
- F. Provide innovative marketing strategies or a campaign to increase the customer based and the viability of the FOOD SERVICE OPERATIONS and CATERING OPERATIONS/PROGRAM.

APPENDIX F

PRO FORMA

Offeror shall provide financial pro forma and brief explanation on line item assumptions made on how your company envisions improving the financial position of the operations over the next FIVE (5) years. Your financial pro forma should take into consideration the growth rate of the campus and areas of retail, catering and format concepts that you anticipate to be areas of growth and opportunity for the campus and community, as well as areas in expenses where your company anticipates improvement over current operations. All financial information should be stated inclusive of your management fee proposal as a line item expense.

APPENDIX G

REFERENCES

Provide the names of companies, addresses, contact names, and phone numbers for at least THREE (3) references.

| <u>Name of Company</u> | <u>Address</u> | <u>Contact Name</u> | <u>Phone No.</u> |
|------------------------|----------------|---------------------|------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |