

OFFICIAL USE ONLY
Pima County – Solicitation Number: 233910
RESTRICTED / CONFIDENTIAL / LEO SENSITIVE
LEO SENSITIVE BUT NON-CONFIDENTIAL

DIVISION OF WARRANTS AND EXTRADITIONS

U.S. CORRECTIONS

DIVISION OF WARRANTS AND EXTRADITIONS

[PART II COST PROPOSAL]

Proposal to offer Prisoner Transportation Services to the State of Nevada.

REP # 3283

Deadline: October 26th, at 2:00 PM

STATE OF NEVADA

DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION 515 E. MUSSER STREET, SUITE 300 CARSON CITY, NV 89701

U.S. CORRECTIONS

OFFICE OF BUSINESS DEVELOPMENT

15720 BRIXHAM HILL AVE, SUITE 300 CHARLOTTE, NC 28277

OFFICE: (704) 705-1425 EXT. 161

DIRECT: (727) 336 - 9430 FAX: (704) 749 - 874













RFP 3283 COST SCHEDULE

VENDOR NAME: US Corrections, LLC

All proposed costs must be for trips <u>utilizing the most direct route</u> from Point A to Point B within the continental United States.

	02/01/2017 -	02/01/2018 -	02/01/2019 -	02/01/2020 -
Vendors may expand all cells as needed	01/31/2018	01/31/2019	01/31/2020	01/31/2021
ntra-State Ground Transportation	•			
Adult Male per mile	\$1.05	\$1.05	\$1.05	\$1.05
Adult Female per mile	\$1.05	\$1.05	\$1.05	\$1.05
uvenile per mile	\$2.10	\$2.10	\$2.10	\$2.10
Mentally impaired adult per mile	case-by-case	case-by-case	case-by-case	case-by-case
Discount - extra prisoner with same pickup and drop off	50%	50%	50%	50%
Minimum trip fee	\$200.00	\$200.00	\$200.00	\$200.00
Cancellation fee after 24 hours and prior to start of service	0% of Transport	0% of Transport	0% of Transport	0% of Transport
Cancellation fee when vendor is en route	50% of Transport	50% of Transport	50% of Transport	50% of Transport
Cancellation fee after vendor attempts to p/u inmate	100% of Transport	100% of Transport	100% of Transport	100% of Transport
ntra-State Commercial Air Transportation				
Cancellation fee after 24 hours and prior to start of service	case-by-case	case-by-case	case-by-case	case-by-case
Cancellation fee when vendor is en route	case-by-case	case-by-case	case-by-case	case-by-case
Cancellation fee after vendor attempts to p/u inmate	case-by-case	case-by-case	case-by-case	case-by-case
Anticenation reconsecution accompts to p, a minute	case by case	case by case	case by case	case by case
nter-State (extraditions) Ground Transportation				
Adult Male per mile	\$1.05	\$1.05	\$1.05	\$1.05
Adult Female per mile	\$1.05	\$1.05	\$1.05	\$1.05
uvenile per mile	\$2.10	\$2.10	\$2.10	\$2.10
Mentally impaired adult per mile	case-by-case	case-by-case	case-by-case	case-by-case
Discount - extra prisoner with same pickup and drop off	50%		50%	50%
Minimum trip fee	\$350.00	\$350.00	\$350.00	\$350.00
Cancellation fee after 24 hours and prior to start of service	0% of Transport	0% of Transport	0% of Transport	0% of Transport
Cancellation fee when vendor is en route	50% of Transport	50% of Transport	50% of Transport	50% of Transport
Cancellation fee after vendor attempts to p/u inmate	100% of Transport	100% of Transport	100% of Transport	100% of Transport
nter-State Commercial Air Transportation				
Please list and describe charges)	case-by-case	case-by-case	case-by-case	case-by-case
Additional Change				
Additional Charges		1	1	1
Surcharge for Specific Day/Time pickup and dropoff, IAD,	4400.00	6400.00	6400.00	6400.00
Form VI, Governers Warrant	\$400.00	\$400.00	\$400.00	\$400.00
Transporting expenditures such as medicines, paper suits,				
ootware, etc., may be reimbursed at actual cost with	1 .] .	
ustification and receipt.	case-by-case	case-by-case	case-by-case	case-by-case
Medical Transports	case-by-case	case-by-case	case-by-case	case-by-case
Armed Agent Required				
lat Fee	\$0.00	\$0.00	\$0.00	\$0.00

ATTACHMENT I – COST PROPOSAL CERTIFICATION OF COMPLIANCE WITH TERMS AND CONDITIONS OF RFP

I have read, understand and agree to comply with *all* the terms and conditions specified in this Request for Proposal.

YES _	DW I agree to comply with the terms and conditions specified in this RFP.				
NO _		I do not agree to comply with the terms a	and conditions specified in this RFP.		
or any intables be submiss <i>Note: C</i>	ncorporated delow. If vendion, the State value of the cost exception of the cost excepti	r assumption require a change in the terms occuments, vendors <i>must</i> provide the specific ors do not specify in detail any exceptions will not consider any additional exceptions a potions and/or assumptions should be identified in and/or assumptions on this attachment.	c language that is being proposed in the and/or assumptions at time of proposal and/or assumptions during negotiations.		
US Corr	rections, LLC				
Compay	11//_				
Signatur	e				
Dave W	arden III		10/25/2016		
Print Na	Print Name Date				

Vendors MUST use the following format. Attach additional sheets if necessary.

EXCEPTION SUMMARY FORM

EXCEPTION #	RFP SECTION NUMBER	RFP PAGE NUMBER	EXCEPTION (Complete detail regarding exceptions must be identified)
N/A			

ASSUMPTION SUMMARY FORM

ASSUMPTION #	RFP SECTION NUMBER	RFP PAGE NUMBER	ASSUMPTION (Complete detail regarding assumptions must be identified)
N/A			

This document must be submitted in Tab III of vendor's cost proposal.

This form MUST NOT be included in the technical proposal.