**Attachment 5**

**Submission Form for**

**Technical & Cost Proposal**

**(Room Block)**

1. Proposer’s name, address, telephone and fax numbers, email and federal tax identification number.

|  |  |
| --- | --- |
| Firm (Legal Name): |  |
| Address: |  |
| Address Line 2: |  |
| City, State, Zip code |  |
| Contact: |  |
| Title: |  |
| Phone Number: |  |
| Email Address: |  |
| Federal Tax ID Number: |  |
| Web Site: |  |
| Hotel Check-in and Check-out Time |  |
| Guest Room Reservation Cancellation Policy |  |
|  |  |
| Will the property accept direct billing (master account)?  | Yes\_\_\_ No\_\_\_ |
| What is the amount held for incidentals upon check-in |  |

Please indicate which date(s) you are offering for the program.

|  |  |  |
| --- | --- | --- |
| **Dates** | **Yes** | **No** |
| March 16-21, 2025 |  |  |
| April 6-11, 2025 |  |  |
| May 11-16, 2025 |  |  |

1. Propose Sleeping Room schedule. Enter “n/a” for any items that are not applicable. Please note the Judicial Council’s maximum sleeping room unit rate as indicated on the RFP in Section 2.

Maximum Rates and Fees. Preference will be given for costs proposed within the maximum rates and fees established by the Judicial Council of California, as set forth below. However please submit the hotel’s best available rate if the county maximum listed below cannot be accommodated.

Room Block #1

| Date | Type of Sleeping Room | Estimated Number of Sleeping Rooms | Confirm number of rooms able to provide | Confirm daily room rate (w/o taxes & surcharges) | Confirm daily individual room rate w/ surcharges and/or tax (if applicable |
| --- | --- | --- | --- | --- | --- |
| March 16, 2025 | Single Occupancy | 9 |  |  |  |
| March 17, 2025 | SingleOccupancy |  63 |  |  |  |
| March 18, 2025 | Single Occupancy | 63 |  |  |  |
| March 19, 2025 | SingleOccupancy | 63 |  |  |  |
| March 20, 2025 | Single Occupancy | 63 |  |  |  |
| March 21, 2025 | Check-out  |  Check Out |  |  |  |
|  |  |  261 |  |  |  |

Propose the reservation cut-off date for reservations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Room Block #2

| Date | Type of Sleeping Room | Estimated Number of Sleeping Rooms | Confirm number of rooms able to provide | Confirm daily room rate (w/o taxes & surcharges) | Confirm daily individual room rate w/ surcharges and/or tax (if applicable |
| --- | --- | --- | --- | --- | --- |
| April 6, 2025 | Single Occupancy | 9 |  |  |  |
| April 7, 2025 | SingleOccupancy |  63 |  |  |  |
| April 8, 2025 | Single Occupancy | 63 |  |  |  |
| April 9, 2025 | SingleOccupancy | 63 |  |  |  |
| April 10, 2025 | Single Occupancy | 63 |  |  |  |
| April 11, 2025 | Check-out  |  Check Out |  |  |  |
|  |  |  261 |  |  |  |

Propose the reservation cut-off date for reservations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Room Block #3

| Date | Type of Sleeping Room | Estimated Number of Sleeping Rooms | Confirm number of rooms able to provide | Confirm daily room rate (w/o taxes & surcharges) | Confirm daily individual room rate w/ surcharges and/or tax (if applicable |
| --- | --- | --- | --- | --- | --- |
| May 11, 2025 | Single Occupancy | 9 |  |  |  |
| May 12, 2025 | SingleOccupancy |  63 |  |  |  |
| May 13, 2025 | Single Occupancy | 63 |  |  |  |
| May 14, 2025 | SingleOccupancy | 63 |  |  |  |
| May 15, 2025 | Single Occupancy | 63 |  |  |  |
| May 16, 2025 | Check-out  |  Check Out |  |  |  |
|  |  |  261 |  |  |  |

Propose the reservation cut-off date for reservations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Are Sleeping rooms compliant with American Disabilities Act (ADA)?

|  |  |
| --- | --- |
| Yes |  |
| No |  |

1. Check either “yes” or “no” beside each of the items listed below. If applicable, propose the rate(s) for tax and/or surcharge below:

| Item Number | Type | Yes | No | Dollar Amount |
| --- | --- | --- | --- | --- |
| a. | Hotel/motel transient occupancy tax waiver (exemption certificate for state agencies) |  |  |  |
| b. | Occupancy Tax rate: |  |  | March $April $May $ |
| c. | Tourism, State Tax or Surcharge: |  |  | March $April $May $ |
| d. | Tourism, State Tax or Surcharge: |  |  | March $April $May $ |

1. Propose Parking price schedule, number of parking, discounted parking and regular parking rate. Enter “n/a” for any items that are not applicable.

| Parking Rate | Number of Complimentary parking | Valet Parking Rate  | Self-Parking Rate  | Oversize vehicles/SUV  | In/Out Privileges |
| --- | --- | --- | --- | --- | --- |
| Complimentary parking |  |  |  |  |  |
| Discounted Parking Group Rate |  |  |  |  |  |
| Normal Hotel Parking Rate |  |  |  |  |  |

1. Propose High speed internet connection pricing in the individual guest rooms\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Other Program Needs (identify if included in other proposed pricing):

| Item No. | Description | Approved (please note if approved) | Alternative  |
| --- | --- | --- | --- |
| 1. | Complimentary room policy – please indicate how many booked rooms will earn 1 complimentary room. |  |  |
| 2. | Complimentary Guest Room Internet |  |  |
| 3. | Waive Urban or Resort Fees |  |  |
| 4. | 2 Complimentary parking for event staff, daily |  |  |
| 5. | Airport shuttle |  |  |
| 6. | 2-week cut-off |  |  |
|  |  |  |  |
|  | **Additional concessions:**  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Propose options for transportation to the hotel on public transportation

Discuss the various means of transportation to local airports.

Discuss the approximate distance from major freeways.

|  |
| --- |
|  |
|  |
|  |

**OFFER PERIOD**

A Proposer's submission is an irrevocable offer for ninety (90) days following the proposal due date. In the event a final contract has not been awarded within this ninety (90) day period, the Judicial Council of California reserves the right to negotiate extensions to this period.

H. Signature (must be completed by proposer):

|  |
| --- |
| Signed this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_\_. |
| By: |  |  |  |
|  | Signature |  | Print Name |
| Title: |  |  |  |