**Attachment 5**

**Submission Form for**

**Technical & Cost Proposal**

**(Full Service)**

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 |  |

|  |  |  |
| --- | --- | --- |
| Please indicate which date(s) Program date:  | **Yes** | **No** |
| November 14 – 17, 2021 *(the date is not flexible)* |  |  |

|  |  |  |
| --- | --- | --- |
| **Billing**  | **Yes** | **No** |
| Does the property accept direct billing (master account)?  |  |  |

|  |  |  |
| --- | --- | --- |
|  | **Daily Amount**  | **Total** |
| What is the amount held for incidentals upon check-in? |  |  |

1. Estimated Meeting and Function Room Block:

 Propose Meeting and Function Rooms schedule, including the date, time, and a description of the set is detailed below. Please add the Function room name, square footage, noting dimensions, any odd shapes, angles, pillars and other salient characteristics). Enter “n/a” for any items that are not applicable.

| **Time** | **Function** | **Set Up** | **Expected Attendance** | **Room Name****Sq. Footage** |
| --- | --- | --- | --- | --- |
| **Date 1 – Set up day: Sunday, Nov 14, 2021 The rooms on day one will be used all week and require to be held on 24 hr hold every day** |
|  |  |  |  |  |
| Day 1: set up day3:00 p.m.- 24 hr. hold through Wednesday at 3:00 p.m.  | CJER Staff Office  | 2 rounds 3 6’ft against the wall  | 4 |  |
| Day 1: set up day3:00 p.m.- 24 hr. hold through Wednesday at 3:00 p.m. | Meeting Planner & registration staff office  | Conference  | 6 |  |
| Day 1: set up day12:00 p.m.- 24 hr hold through Thursday (day 5) at 8:00 a.m. | AV Storage room  | A room that can be rekeyed w/o air-walls, preferably not a guest room. Located near the meeting space or service elevator and in the same tower/building if applicable |  |  |
| Day 1: set up day3:00 p.m.- 24 hr. hold through Wednesday at 3:00 p.m. | Faculty Room  | Provide set up based on CDC safety guidelines*\*faculty will be using the room at a flow\** | 10  |  |
| Day 1: set up day3:00 p.m.- 24 hr. hold through Wednesday at 3:00 p.m. | VIP Green Room  | 1 round 2 executive chairs \*Located near the meeting rooms\* | 1 |  |
| Day 1: set up day3:00 p.m.- 24 hr. hold through Wednesday at 3:00 p.m. | Registration  | 2 6ft tables |  4 |  |
| Day 1: set up day3:00 p.m.- 24 hr. hold through Wednesday at 6:00 p.m. | General Session  | Provide set up based on CDC safety guidelines PLUS:Riser for panel of 3- 5Podium and U.S./CA Flags on riser. ***We can reuse this room for one of the breakouts but it cannot be used for meals*****\*Provide fit to scale diagram\*** | 110 |  |
| Day 1: set up day3:00 p.m.- 24 hr. hold through Wednesday at 3:00 p.m. | CHP command center  | Provide set up based on CDC safety guidelines PLUS (3) 6ft tables on the perimeter of the room, enough space for banquets to deliver all meals, located on the same floor as the meeting rooms, no air-walls and no back of the house entrance **\*Provide fit to scale diagram\***  | 20 |  |
| Day 1: set up day3:00 p.m.- 24 hr. hold through Wednesday at 3:00 p.m. | Breakout 1 | Provide set up based on CDC safety guidelines  Plus, head table for 2 and AV cart/screen **\*Provide fit to scale diagram\***  | 15 |  |
| **Date 2 (first day of the programs): Monday Nov 15, 2021 – NO F&B on Monday** |
| 7:00 a.m. - 24 hr hold  | General Session/ Breakout  | Existing set up  | 110  |  |
| 7:00 a.m. - 24 hr hold | Breakout 1 | Existing set up  | 15 |  |
| 7:00 a.m. - 24 hr hold | Breakout 2 | Provide set up based on CDC safety guidelines  Plus, head table for 2 and AV cart/screen **\*Provide fit to scale diagram\***  | 25 |  |
| 7:00 a.m. - 24 hr hold | Breakout 3 | Provide set up based on CDC safety guidelines  Plus, head table for 2 and AV cart/screen **\*Provide fit to scale diagram\***  | 40 |  |
| 7:00 a.m. - 24 hr hold | Breakout 4 | Provide set up based on CDC safety guidelines  Plus, head table for 2 and AV cart/screen **\*Provide fit to scale diagram\***  | 15 |  |
| **Date 3 & 4: Tuesday - Wednesday, Nov 16 & 17, 2021**  |
| 7:00 a.m. - 24 hr hold  | General Session/ Breakout  | Existing set up  | 110  |  |
| 7:00 a.m. - 24 hr hold | Breakout 1 | Existing set up  | 15 |  |
| 7:00 a.m. - 24 hr hold | Breakout 2 | Provide set up based on CDC safety guidelines  Plus, head table for 2 and AV cart/screen **\*Provide fit to scale diagram\***  | 25 |  |
| 7:00 a.m. - 24 hr hold | Breakout 3 | Provide set up based on CDC safety guidelines  Plus, head table for 2 and AV cart/screen **\*Provide fit to scale diagram\***  | 40 |  |
| 7:00 a.m. - 24 hr hold | Breakout 4 | Provide set up based on CDC safety guidelines  Plus, head table for 2 and AV cart/screen **\*Provide fit to scale diagram\***  | 15 |  |
| 7 – 8:00 a.m. 12:00 – 1:30 p.m.  | Meal room: Breakfast Lunch  | Provide set up based on CDC safety guidelines Lunch will have a speaker. We will need a riser with 2 chairs **\*Provide fit to scale diagram\***  |  |  |
| 10:00 – 10:15 a.m.  | AM Coffee Service  | Meal room or meeting room foyer whichever is closest to the general session room |  |  |
| **Date 4 – Wednesday** **The program ends at 12:30 p.m.** **AV strike: 1 – 5 p.m.**  |

 Are Meeting and Function Rooms compliant with American Disabilities Act (ADA)?

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

 Can the Program use its own audio-visual equipment at no additional charge?

***\*The equipment is property of the State of California and the AV staff are***

***Judicial Council employees.***

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

In lieu of in-person site visits, is a site inspection video (***not a virtual tour***) that shows and describes the guest rooms, meeting rooms, and hotel outlets available? if so, please provide the link below.

If a video is not available, is a site selection tour through a video conferencing service available?

**Please explain:**

1. Propose Meeting and Function Room Rates. Please note the maximum $10,000.00 Meeting Room Rental as indicated on the RFP in Section 2.

| Based Upon Percentage of Block | Inclusive Meeting Room Rental Rates |
| --- | --- |
| If the total sleeping rooms occupied equals 80-100% of the total sleeping rooms blocked. |  |
| If the total sleeping rooms occupied equals 70–79% of the total sleeping rooms blocked. |  |
| If the total sleeping rooms occupied equals 60–69% of the total sleeping rooms blocked. |  |
| If the total sleeping rooms occupied equals 59% or less of the total sleeping rooms blocked. |  |

1. Propose Termination Fee and corresponding Effective Deadline Date. Please note the maximum $10,000.00 Termination Fee as indicated on the RFP in Section 2:

| Item Number | Termination  | Effective Deadline Date | Inclusive Termination Fees |
| --- | --- | --- | --- |
| a. | Effective on or before: |  |  |
| b. | Effective on or before: |  |  |
| c. | Effective on or before: |  |  |
| d. | Effective on or after: |  |  |

1. Propose Food and Beverage schedule, including specific menus provided for the unit price indicated on the Form for Submission of Cost Pricing.

\*Provide detailed customized menu description in the grid below.

\* All rates are inclusive of tax and service fee.

\*The rates are not flexible and cannot go over the maximum allowance.

\*F&B minimum is not allowed – per person unit rates only

| Type of Group Meal | Food and Beverage Menu**Provide detailed customized menus**  | Estimated Number of Meals | Inclusive Price per person |
| --- | --- | --- | --- |
| **Date 3 Tuesday**  |
| Breakfast Buffet $25.00 pp inclusive of tax and service fee  |  |  110 |  |
| AM Coffee Service ***(coffee and tea only)***$8.00 inclusive of tax and service fee  |  | 110 |  |
| Lunch: $40.00 pp inclusive of tax and service fee  |  | 110 |  |

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| --- |
| **Date 4 Wednesday**  |

|  |  |  |  |
| --- | --- | --- | --- |
| Breakfast Buffet $25.00 pp inclusive of tax and service fee  |  | 110 |  |
| AM Coffee Service ***(coffee and tea only)***$8.00 inclusive of tax and service fee  |  | 110 |  |

|  |  |
| --- | --- |
| **Does the hotel have a coffee shop?**  |  |
| **Coffee shop hours:**  |  |

1. Propose Sleeping Room schedule. Enter “n/a” for any items that are not applicable.

| Date | Type of Sleeping Room | Estimated Number of Sleeping Rooms | **Confirm number of rooms able to provide** | **Confirm daily room rate** (without taxes & surcharges) | **Confirm daily individual room rate with surcharges and/or occupancy tax (only include the occupancy tax if the State occupancy tax waiver is not applicable)** |
| --- | --- | --- | --- | --- | --- |
| Sunday, November 14, 2021 | Single/Double Occupancy | 14 |  |  |  |
| Monday, November 15, 2021 | Single/Double Occupancy | 96 |  |  |  |
| Tuesday, November 16, 2021 | Single/Double Occupancy | 96 |  |  |  |
| Wednesday, November 17, 2021 | Single/Double Occupancy | 2 |  |  |  |
| Thursday, November 18, 2021  | Check-out | Check out |  |  |  |
|  |  | 208 |  |  |  |

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

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

Propose the cut-off date for reservations (3 weeks prior to arrival): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 only |
| --- | --- | --- | --- | --- |
| a. | Hotel/motel transient occupancy tax waiver (exemption certificate for state agencies) |  |  |  |
| b. | Occupancy Tax rate: |  |  | $ |
| c. | Tourism (TID)  |  |  | $ |
| d. | Other Surcharge (add name) \_\_\_\_\_\_\_ |  |  | $ |

1. Propose Parking price schedule, number of parking passes, discounted passes and parking rate inclusive of any service charges, gratuity, and/or sales tax. 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 internet pricing.
* What are the daily charges for an individual computer connected to the Internet in meeting rooms? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* What are the daily charges for computer connection for individual guests? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Propose basic Wi-Fi package rate for 100 people for 3 days plus tax and service fee:
1. Other Program Needs (identify if included in other proposed pricing):

| Item No. | Description | Approved (please note if approved) | Alternative  |
| --- | --- | --- | --- |
| 1. | (10) Complimentary easels |  |  |
| 2. | (6) Complimentary Wireless Internet for Registration and Offices |  |  |
| 3. | (1) Complimentary white board  |  |  |
| 4. | Staff Office, AV storage area, VIP green room and CHP office on total lock out – complimentary lock out and keys for staff – 7 keys |  |  |
| 5. | Complimentary room policy – please indicate how many booked rooms will earn 1 complimentary room. |  |  |
| 6. | Complimentary risers and podiums |  |  |
| 7. | (5) access to Concierge lounge  |  |  |
| 8. | Complimentary basic Wi-Fi in meeting rooms |  |  |
| 9. | 3-week cut-off date: October 25, 2021 |  |  |
|  | **Additional concessions provided by the hotel:** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |
| --- | --- |
| **Does the hotel have a coffee shop?**  |  |
| **Coffee shop hours:**  |  |

**Please provide the following with your proposal:**

* **Floor plans and capacity charts**
* **Fit to scale diagrams as indicated in section B Meeting and Function Room Block**
* **Customized menus**
* **Sanitation protocols related to covid-19**
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.

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**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.

**L. Signature (must be completed by proposer):**

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