CITY OF MILWAUKEE DEPARTMENT OF PUBLIC WORKS

Request for Citation Processing/Collection Services and Cash Management/Information Services Appendix C – Proposed Cost Schedule (Category 1)

[Note: You must sign and return this form with your proposal.]

Our proposed schedule of costs for	the products	and services	offered in o	our response to
Official Notice # 59 and issued by I)PW on	, 2008 is	set forth bel	ow.

Note: If proposing Category 1 services, a vendor must submit costs for all costing components (1-6 below) or the Category 1 proposal will not be accepted by the City.

Costing Component 1 (Mandatory Bundled Services per RFP Section 3.4):

Cost Item	Cost Unit	Tier 1	Tier 2	Tier 3	Tier 4	Tier 5
Automated Parking	Citation					
Citation Processing						
Manual Parking,	Citation					
Traffic and Municipal						
Citation Processing						

Note: $Tier\ I = up$ to 250,000 citations per year, $Tier\ 2 = 250,000-499,999$ citations per year, $Tier\ 3 = 500,000-749,999$ tickets per year, $Tier\ 3 = 750,000-999,999$ tickets per year and $Tier\ 4 = at$ least 1,000,000 tickets per year.

Costing Components 2-6 (Mandatory Unbundled Services per RFP Section 3.4):

Costing Component	Cost Unit	Proposed Cost (Numbers)	Proposed Cost (Words)
2. Automated citation issuance & data capture (automated TIDs)	Lease per unit per month		
3. Parking permit processing of manually-issued permits	Service cost per manually-issued permit processed		
4. Automated payment center support	Service cost per kiosk per month		
5. Vehicle towing management system	Service cost per month		
6a. Secondary collections-Wisconsin TRIP-certified citation	Percent of collections per TRIP-certified citation		
6b. Secondary collections-all other citations	Percent of collections per non-TRIP citation		

While each vendor's baseline cost proposal must conform to the above format, vendors may also submit alternative pricing structures for the City's consideration.

All costs and prices provided in the above schedule shall remain fixed for at least 180 days. Any pricing options for hardware, software or services have been itemized on an attached schedule.

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Name:	Company:	
Title:	Address:	
City:	State:	Zip Code:
Phone:		
		_ Date:
(Signature)		

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