**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 |  |

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

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

|  |  |  |
| --- | --- | --- |
| **Guest room desk** | **Traditional Desk** | **Modern space** |
| Is there a traditional desk or modern working space in the guest rooms? |  |  |

|  |  |  |
| --- | --- | --- |
| **Guest room dressers** | **Yes** | **No** |
| Are there traditional dressers in the guest rooms? |  |  |

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

Please indicate which date(s) you are offering and the rates for each room block

**\*\*It is not necessary to bid on all of the listed dates\*\***

**10 of the 12 sets of dates are expected to be contracted**

**The guest room rate maximum is $200.00**

| Block | Yes/No you can provide the room block | Date | Type of Sleeping Room | Estimated Number of Sleeping Rooms nightly | Confirm number of rooms able to provide nightly | Confirm daily room rate (w/o taxes & surcharges) nightly | Confirm daily individual room rate w/ surcharges only |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Block #1 |  | Check-In 9/11/2022, Check-Out 9/16/2022 | Single Occupancy | 16 nightly |  |  |  |
|  |  |  |  |  |  |  |  |
| Block #2 |  | Check-In 10/23/2022, Check-Out 10/28/2022 | Single  Occupancy | 16 nightly |  |  |  |
|  |  |  |  |  |  |  |  |
| Block #3 |  | Check-In 11/13/2022 Check-Out 11/18/2022 | Single  Occupancy | 16 nightly |  |  |  |
|  |  |  |  |  |  |  |  |
| Block #4 |  | Check-In 12/11/2022, Check-Out 12/16/2022 | Single  Occupancy | 16 nightly |  |  |  |
|  |  |  |  |  |  |  |  |
| Block #5 |  | Check-In 1/22/2023, Check-Out 1/27/2023 | Single  Occupancy | 16 nightly |  |  |  |
|  |  |  |  |  |  |  |  |
| Block #6 |  | Check-In 2/5/2023 Check-Out 2/10/2023 | Single Occupancy | 16 nightly |  |  |  |
|  |  |  |  |  |  |  |  |
| Block #7 |  | Check-In 3/5/2023 Check-Out 3/10/2023 | Single Occupancy | 16 nightly |  |  |  |
|  |  |  |  |  |  |  |  |
| Block #8 |  | Check-In 3/19/2023 Check-Out 3/24/2023 | Single Occupancy | 16 nightly |  |  |  |
|  |  |  |  |  |  |  |  |
| Block #9 |  | Check-In 4/2/2023 Check-Out 4/7/2023 | Single Occupancy | 16 nightly |  |  |  |
|  |  |  |  |  |  |  |  |
| Block #10 |  | Check-In 4/23/2023, Check-Out 4/28/2023 | Single Occupancy | 16 nightly |  |  |  |
|  |  |  |  |  |  |  |  |
| Block #11 |  | Check-In 5/21/2023 Check-Out 5/26/2023 | Single Occupancy | 16 nightly |  |  |  |
|  |  |  |  |  |  |  |  |
| Block #12 |  | Check-In 6/11/2023 Check-Out 6/16/2023 | Single Occupancy | 16 nightly |  |  |  |

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

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

**Estimated Meeting Room Block:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Date** | **Time** | **Preferred Set Up** | **Meeting Room Name** | **Complimentary (Yes/No)** | **Room Rental Rate**  \*Sales Tax  \*Service Charge Tax  **(include inclusive rate)** |
| 1 | Sunday, September 11, 2022 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |
| 2 | Sunday, October 23, 2022 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |
| 3 | Sunday, November 13, 2022 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |
| 4 | Sunday, December 11, 2022 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |
| 5 | Sunday, January 22, 2023 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |
| 6 | Sunday, February 5, 2023 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |
| 7 | Sunday, March 5, 2023 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |
| 8 | Sunday, March 19, 2023 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |
| 9 | Sunday, April 2, 2023 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |
| 10 | Sunday, April 23, 2023 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |
| 11 | Sunday, May 21, 2023 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |
| 12 | Sunday, June 11, 2023 | 2:00 – 9:00 p.m. | Conference for 10 people |  |  |  |

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 **do not add percentage** |
| --- | --- | --- | --- | --- |
| a. | Hotel/motel transient occupancy tax waiver (exemption certificate for state agencies) |  |  |  |
| b. | Occupancy Tax rate: add only if not waived |  |  | $Add dollar amount ***only if tax isn’t waived*** |
| c. | Surcharge (TID) |  |  | $Add dollar amount |
| d. | MED |  |  | $Add dollar amount |

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 | Valet Parking Rate | Self- Parking Rate | Oversize vehicles/SUV | In/Out Privileges |
| --- | --- | --- | --- | --- |
| Discounted Parking Group Rate |  |  |  |  |

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 meeting room rental |  |  |
| 3. | Complimentary internet in guest rooms |  |  |
| 4. | 3-week cut-off |  |  |
|  | **Additional concessions:** |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**OFFER PERIOD**

A Proposer's submission is an irrevocable offer for nintey (90) days following the proposal due date. In the event a final contract has not been awarded within this nintey (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: |  |  |  |