



Proposal for Demand Response Transportation Services and Cost Information, Union County, SC.

Directions: Please complete the following information and submit with your proposal.

_____ hereby submits this document to Union County pursuant to the Request for Proposal titled **Union County, SC Demand Response Public Transit Service, Solicitation Number, PT 2208102**. The undersigned agrees to comply with all certifications, assurances, rules, and regulations required by SCDOT, FTA, and Union County.

The undersigned proposes to provide demand response public transit services for Union County residents to include essential transportation requests such as travel to medical appointments, grocery stores, and pharmacies. Passenger trips will include Union County's approved/mapped service area within a (5) mile radius of the Union County Courthouse, plus the entirety of each subdivision or neighborhood with any street located inside the (5) mile radius. If desired, the undersigned may submit additional service options for residents including options for residents in the areas of Carlisle, Jonesville, and Lockhart as an attachment with this document for Union County's consideration.

The undersigned proposes to provide public transportation in Union County, Monday – Friday, 7:00 a.m. to 5:00 p.m. and accept all calls to schedule passenger trips, perform the transportation service, collect passenger fares, provide detail billing for all completed trips, provide details regarding Passenger No-Show trips, and provide a denied trip request report to Union County for each billing cycle. Operating hours may vary depending upon capacity and scheduled passenger pick-up times. Reimbursement (invoice) requests will be submitted to Union County by the (5th) day of each month.

The undersigned submits the following information for consideration:

- A passenger trip is defined as one (1) person being transported one (1) way, and billing is based on a single (1) passenger one-way trip.
- Transportation requests require a _____ hour notice prior to the desired trip date.
- A fare of \$_____ per passenger trip will be charged to the riders within the (5) mile mapped radius. If applicable, additional service options and fare rates are attached.
- A Fuel Surcharge Rate is charged when average gasoline prices in Union County rise above \$_____ per gallon. The undersigned acknowledges that Union County reserves the right to establish rate agreements with the contractor annually or as needed.
- A Passenger No-Show Trip will be charged when the passenger refuses to board the vehicle, the passenger is not present at the pickup location, the passenger cancels the trip after the cutoff time of _____, or the wait time exceeds _____ minutes.

- The undersigned acknowledges that if a contract is awarded, the undersigned shall not assign, transfer, convey, sublet, or otherwise dispose of any or all rights, duties or obligations under the contract to a subcontractor without prior written approval Union County.

The undersigned submits the following Cost Elements for Union County’s consideration. **Please provide a dollar amount in each section below.**

Service Statistics	Units
Trip Rate - Monday - Friday (0-5 miles)	\$
Passenger No-Shows (0-5 miles)	\$
Fuel Surcharge Rate (0-5 miles)	\$

Submitted By: _____

Organization: _____

Title: _____

Date: _____