Star Sanitation

	ed to County-Owned and tractor Units ¹	
Scheduled	\$9.50/Unit	
Service		
Continual On-	\$93.75/hour	
Site Service	\$750.00/Day	
Transport	\$10/Unit	
Units ²		
¹ Trailers with m	ultiple units (1,2,3 unit	
trailers) are charged per unit.(2 unit trailer		
would be \$9.50 x 2)		
² No fee charged to deliver vendor units.		
Transport fee is for relocation of County		
units.		

Contractor	Number of	Monthly
Units	Units	Rental Rate ³
Standard Unit –	Per/Unit	45
No Hand Wash		
Handicapped	Per/Unit	100
Unit – No Hand		
Wash		
Hand Wash Unit	Per/Unit	45
Trailer Unit(s) –	1	85
Indicate number		
of units on		
trailer. (1,2,3,		
ect)		
Trailer Unit(s) –	2	150
Indicate number		
of units on		
trailer. (1,2,3,		
ect)		
Trailer Unit(s) –	3	210
Indicate number		
of units on		
trailer. (1,2,3,		
ect)		
³ Rental is charged	on a monthly b	oilling cycle,
regardless of time rented for that month.		

A & G Pumping, Inc.

Service Provided to County-Owned and Contractor Units ¹		
Scheduled	\$15.00/ Unit	
Service		
Continual On-	\$100/ Hour standby,	
Site Service	\$15.00/ Unit Serviced	
Transport \$5/Unit		
Units		
¹ Trailers with multiple units (1,2,3 unit		
trailers) are charged per unit.(2 unit trailer		
would be \$15.00 x 2)		

Contractor Unit	Number of Units	Damage Waiver	Monthly Rental Rate ^{2,3}
Standard Unit – No Hand Wash	Per/Unit	650	10
Handicapped Unit – No Hand Wash	Per/Unit	2700	100
Hand Wash Unit	Per/Unit	550	40
Trailer Unit(s) – Indicate number of units on trailer. (1,2,3, ect)	1	3000	80
Trailer Unit(s) – Indicate number of units on trailer. (1,2,3, ect)	2	5000	110
Trailer Unit(s) – Indicate number of units on trailer. (1,2,3, ect)	3	7500	150

 ² Rental is charged on a monthly billing cycle, regardless of time rented for that month.
³ All units rented will be charged for one cleaning if units were used, and a scheduled cleaning did not occur to return the unit to a ready condition.

ATTACHMENT A2- PRICE SCHEDULE

COST PROPOSAL Revised for Amendment #2

CONTRACTOR(s) should provide rates in the format below.

<u>Supervisor</u>	<u>Armed Cost</u>	Unarmed Cost
Pay Rate	\$_19.05/hr	.\$_17.00_/hr
Billing Rate	\$_32.50/hr	.\$_ 26.00 _/hr
Overtime Rate	\$_48.75/hr	.\$_ 39.00 _/hr

Security Officer

Pay Rate	\$_16.80/hr	\$	_15.00_	_/hr	
Billing Rate	\$_27.50/hr	\$_	_23.00_	_/hr	
Overtime Rate	\$_41.25 _/hr	\$	34.50	/hr	

Patrol Rate (including vehicle)

Pay Rate	\$_20.00_/hr\$_16.80_/hr
Billing Rate	\$_45.50_/hr\$_42.50_/hr
Overtime Rate	\$_68.25_/hr\$_63.75_/hr

Alarm Response

Response Rate	\$_50.00	_/hr\$	47.00	/hr
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Armed Guard Hospital Coverage

	<u>Supervisor</u>	Security Officer
Pay Rate	\$_21.00/hr	\$_18.00/hr
Billing Rate	\$_34.50_/hr	\$_31.50_/hr
Overtime Rate	\$_51.75/hr	\$_ 47.25 _/hr

ATTACHMENT A2- PRICE SCHEDULE

COST PROPOSAL Revised for Amendment #2

CONTRACTOR(s) should provide rates in the format below.

Supervisor	Armed Cost	<u>Unarmed Cost</u>
Pay Rate	\$_19.00-20.00_/hr	\$_17.00_/hr
Billing Rate	\$_34.26_/hr	\$_ 29.94_ /hr
Overtime Rate	\$_51.39_/hr	\$ 44.91_/hr

Security Officer

Pay Rate	\$_18.00/hr\$_16.00/hr
Billing Rate	\$_32.59_/hr\$_27.27_/hr
Overtime Rate	\$_48.89_/hr\$_40.91_/hr

Patrol Rate (including vehicle)

Pay Rate	\$_18.00_/hr\$_16.00_/hr
Billing Rate	\$_40.00_/hr\$_35.00_/hr
Overtime Rate	\$_60.00_/hr\$_52.50_/hr

Alarm Response

Response Rate \$_75.00_/hr.....\$_50.00_/hr

Armed Guard Hospital Coverage

Security Officer

Pay Rate	\$_20.00-25.00_/hr
Billing Rate	\$_50.00_/hr
Overtime Rate	\$_75.00_/hr
	~End of Attachment A2~

Prepared by Tom Skinner

ATTACHMENT B-3 NON-NMC DEPARTMENTS PRICE SCHEDULE

(Pricing Effective April 30, 2018 by way of Amendment No.2)

CONTRACTOR(s) should provide rates in the format below.

Supervisor	Armed Cost	Unarmed Cost	
Pay Rate	\$ <u>20.50</u> /hr	\$ <u>20.50</u> /hr.	
Billing Rate	\$ <u>37.58</u> /hr	\$ <u>30.60</u> /hr.	
*Overtime Rate	\$ <u>39.90</u> /hr	\$ <u>42.23</u> /hr.	
\$37.62 first 24 hours, \$35 th Security Officer	creatter (anned supervisory prisoner watch)		
Pay Rate	\$ <u>17.50</u> /hr	\$ <u>13.50</u> /hr.	
Billing Rate	\$ <u>27.89</u> /hr	\$ <u>21.69</u> /hr.	
Overtime Rate	\$ <u>38.49</u> /hr	\$ <u>29.93</u> /hr.	
Patrol Rate (inclu			
Pay Rate	\$ <u>17.50</u> /hr	\$ <u>15,50</u> /hr.	
Billing Rate	\$ <u>35.01</u> /hr	\$ <u>35.78</u> /hr.	
Overtime Rate	\$ <u>49.38</u> /hr	\$ <u>49.38</u> /hr.	
Alarm Response Response Rate	\$ <u>30.00</u> /hr	\$ <u>30.00</u> /hr.	
COMMUNICATI	ON EOUIPMENT		
2-Way Radio Rate	\$ <u>included</u> /hr	\$ included /hr.	
Cellular Phone Rate	\$ <u>included</u> /hr	\$ <u>included</u> /hr.	
Pager Rate	<u>\$ included</u> /hr	\$ <u>included</u> /hr.	
Cell/Radio	\$ <u>included</u> /hr	\$ <u>included</u> /hr.	

~End of Attachment A3~

ATTACHMENT A2- PRICE SCHEDULE

COST PROPOSAL Revised for Amendment #2

CONTRACTOR(s) should provide rates in the format below.

SUPERVISOR	ARMED COST		UNARMED	UNARMED COST		
Pay Rate	\$ <u>19.50</u>	/hr	\$ <u>17.00</u>	_/hr.		
Billing Rate	\$ <u>31.75</u>	/hr	\$ <u>27.20</u>	_/hr.		
Overtime Rate	\$ <u>47.63</u>	/hr	\$40.8	/hr.		

SECURITY OFFICER

Pay Rate	\$ <u>18.00</u>	_/hr\$ <u>15.0</u>	<u>0</u> /hr.
Billing Rate	\$ <u>29.75</u>	/hr\$ <u>24.0</u>	0/hr.
Overtime Rate	\$ <u>44.63</u>	/hr\$ <u>36.0</u>	<u>0</u> /hr.

PATROL RATE (INCLUDING VEHICLE)

Pay Rate	\$ <u>18.50</u>	_/hr\$ <u>15.00</u>	_/hr.
Billing Rate	\$ <u>31.75</u>	_/hr\$ <u>27.00</u>	/hr.
Overtime Rate	\$ <u>47.63</u>	_/hr\$ <u>39.50</u>	_/hr.

ALARM RESPONSE Response Rate	\$ <u>31.75</u>	_/hr	\$ <u>27.00</u>	_/hr.
INMATE GUARD				
Pay Rate	\$ <u>21.00</u>	_⁄hr	\$ <u>18.00</u>	_/hr.
Billing Rate	\$ <u>36.22</u>	_/hr	.\$ <u>30.50</u>	/hr.
Overtime Rate	\$ <u>54.18</u>	/hr	.\$ <u>45.75</u>	/hr.

~End of Attachment A2~