## Fee Proposal

## THE SCHOOL DISTRICT OF PHILADELPHIA AHERA Program Management

Company Name: Address: Telephone: Email:

(Trade Name of Firm) Representative) (Signature of Authorized

	PERSONNEL	Rate
No.	(List your personnel positions to be used, ie. Principal, Project Manager, Building Inspector)	\$
1		\$
2		\$
3		\$
4		\$
5		\$
6		\$
7		\$
8		\$
9		\$
10		\$
11		\$
12		\$

## Key Personnel List with Hourly Rates

Equipment and Testing		Rate
No.	(List unit rates for Equipment and Laboratory Testing)	\$
1		\$
2		\$
3		\$
4		\$
5		\$
6		\$
7		\$
8		\$
9		\$
10		\$
11		\$
12		\$

	Inspections	Unit Price
No.	(Provide unit pricing to complete 6- month surveillances and 3-year inspections on a per location basis)	\$
1	6- month surveillance	\$
2	3-year inspection	\$

Inspections		Lump Sum
No.	(Provide annual lump sum cost estimate and total not to exceed cost for delivery of the scope of work within the associated RFP)	\$
1	Year 1	\$
2	Year 2	\$
3	Year 3	\$
	TOTAL	\$

(The Initial Term of this Contract shall commence on or near November 19, 2021, and, unless sooner terminated by the School District pursuant to the terms of a finalized contract, shall continue in full force and effect for a contract period of over three-(3) years through November 2024, with two one-year options to extend the contract, at which point prices will be renegotiated).