## STAFFING PLAN AND COST METHODOLOGY FOR CONTRACT:

	Mandatory Minimum Annual Required Hours of Janitorial Services for ALL Locations: 26013 hrs/yr*, plus 6000 hrs/yr for As-Needed Janitorial Services								
This minimum does NOT include time for the Contractor to perform the other incremental cleaning requirements (weekly, monthly, quarterly, semiannual, and annual).									

POSITION/TITLE *	e paid at applicable Living Wage rates. HOURS PER DAY							HOURS	ANNUAL	HOURLY	ANNUAL
LIST EACH EMPLOYEE SEPARATELY)	SUN	MON	TUE	WED	тни	FRI	SAT	PER WEEK	HOURS (52 x Hrs per wk)	WAGE RATE**	COST
mployee No. 1****											\$
mployee No. 2											\$
imployee No. 3								-			\$
mployee No. 4											\$
Employee No. 5											\$
Employee No. 6											\$
Employee No. 7											\$
Employee No. 8											\$
Employee No. 9											\$
Employee No. 10											\$
Employee No. 11											\$
Employee No. 12											\$
											\$
mployee No. 13											
mployee No. 14								<u> </u>			\$
mployee No. 15											\$
mployee No. 16											\$
Employee No. 17											\$
mployee No. 18											\$
mployee No. 19											\$
mployee No. 20											\$
mployee No. 21											\$
mployee No. 22											\$
mployee No. 23											\$
mployee No. 24											\$
Employee No. 25											\$
Employee No. 26											\$
Employee No. 27											\$
Employee No. 28											\$
Employee No. 29											\$
Employee No. 30											\$
											\$
											\$
											\$
											\$
											\$
											\$
											\$
As-Needed Janitorial Services									6000		\$
											\$
Comments/Notes:			(4) \/! 0! . ! !				ick I com	Total Annual Salaries			\$ \$
					<ol> <li>Vacations, Sick Leave, Holiday</li> <li>Health Insurance ***</li> </ol>						\$
					(3) Payroll Taxes & Workers' Com				ompensation		\$
					(4) Welfare and Pension         Total Annual Employee Benefits (1+2+3+4)         (5) Equipment Costs         (6) Service and Supply Costs         (7) General and Administrative Costs						\$
											\$ \$
											\$
											\$
	(8) Profit Total Annual Ot							\$			
<u> </u>								\$			
	TOTAL ANNUAL PR							AL ANNUAL PRICE	\$		

\* All employees shown must be FULL-TIME employees of the proposer, unless exemption to use Part-Time employees has been granted by the County.

\*\* Living wage rate shall be at least \$11.84 per hour.

## The above information was complied from records that are available to me at this time and I declare under penalty of perjury that the information is true and accurate within the requirements of the proposal.

<sup>\*\*\*</sup> Minimum cost for health insurance is \$2.20/hour if hourly wage rate is between \$9.64 and \$11.84, unless exemption from Living Wage requirements has been granted by the County. Note: This cost methodology is to show, in detail, how the Proposer arrived at the proposed contract price. This methodology is to reflect employee classifications to be used (e.g., landscape maintenance laborer, working supervisor, etc.); hours to be worked daily, weekly, and annually by each classification, hourly and annual wages to be paid to each classification; estimated annual payrol taxes; estimated annual annual alwarces for vacation, sick, holiday, health and welfare, and pension. Proposer's costs for insurance, supplies, equipment, overhead, and any other miscellaneous costs are to be shown as requested. These costs, plus the gross labor costs and projected profit, must match the total to the Proposer's annual price as quoted in Form PW-2, Schedule of Prices, shall prevail. \*\*\*\* The number of employees are estimate and it is Contractor discretion to provide ample number of employees to meet the requirements of this Contract including the Mandatory Minimul Annual Required Hours for all locations and As-Needed Hours.