REQUEST FOR PROPOSALS (RFP) FOR
FAIRFIELD COUNTY OFFICE OF EMERGENCY MANAGEMENT
AGENCY
COMMODITY FLOW PROJECT

Issued by:
The Fairfield County Office of Emergency Management Agency and the Fairfield County Board of County Commissioners
c/o Jon Kochis
240 Baldwin Drive
Lancaster, Ohio 43130

Contact:
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Email: jon.kochis@fairfieldcountyohio.gov

Fairfield County EMA Mission
To establish, coordinate and sustain partnerships throughout Fairfield County, united in efforts to prepare for emergencies and to minimize loss of life and property and help the community to return to normalcy when they occur.
RFP INDEX

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General Overview

The Fairfield County Board of County Commissioners and the Fairfield County Office of Emergency Management Agency (referred to collectively in this document as EMA) are now accepting proposals for individuals and/or entities to perform a commodity flow project for Fairfield County, Ohio.

Hazardous materials are prevalent in all communities in the United States. They are stored, and they are transported. Regardless of the method of transport, (for this study defined as: pipeline, rail, roadway, or air) hazardous materials are generally transported without incident. However, consequences of a hazmat transportation incident can be extreme with serious repercussions to public safety, life and wellbeing, the environment, and infrastructure. To plan for and mitigate these consequences, communities choose to examine the transportation of hazardous materials through their community.

The EMA will hire a contractor to conduct a Hazardous Material Transportation Flow Study in Fairfield County in the Spring of 2020. The objectives and goals will be to identify shipments of hazardous materials that either originate or are destined to pass through the County. By using the data collected we will be able to enhance our emergency planning capabilities and continue to support our emergency response organizations.

The study will include, but not be limited to:
- Identify chemical amounts, the routes most frequently used, and the mode of that they are shipped throughout the County.
- Identify major highways, and survey the amounts and times transported.
- Reviewing and with the help of current information gathered we would be able to determine high hazard areas and incident history.
- By using the data that is gathered we will then be better able to determine possible vulnerable facilities in the Community.

When completed the completed flow information will be made available throughout the county for planning purposes and information.

The selected party shall begin operations on or about Spring, 2020, or at a time agreed upon by the EMA and the selected party. The evaluation of the proposals shall be made by EMA staff and County representatives who will comprises a proposal review team.

The awarding of the contract for services shall be determined on various factors, including but not limited to:

- the breadth and depth of services proposed to be rendered
- price of services
Minimum required services to be performed by the Commodity Flow research shall include:

**Highways**

- Determine transportation of hazardous materials. The results should include movement of extremely hazardous substances and hazardous substances across County lines.
- The survey will be comprised of a visual survey of traffic at the specific locations identified by Fairfield County LEPC and will occur during a wide sample of times (various hours, various days – including weekends) for each location; please submit recommendations for locations and timeframes for conducting surveys. The days of the week (and/or weekend) identified for conducting surveys will be selected by the vendor with input from Fairfield County Local Emergency Planning Committee (LEPC) or EMA. The vendor will make necessary contacts and arrangements with local Police, County Sheriff, State Highway Patrol, etc. to gain approval to park in locations suitable to perform the studies which may include emergency vehicle lanes in medians on highways.
- Information recorded will include the type of motor carrier, the placard and/or United Nations (UN) number, commodity name (if available), the time of day and any other applicable information.
- The vendor will contact the identified trucking companies to obtain copies of their annual hazmat report to gather the quantities being transported.

**Rail**

- Analyze rail traffic to determine points along the tracks at which rail companies store/hold hazardous substances pending final transportation.
- Information gathered will include the type of rail car (if possible), the placard and/or UN number, commodity name (if available), the time of day and any other applicable information. Specific locations will be identified and agreed upon by both parties prior to mobilization of resources.
- The vendor will contact the railroads to obtain copies of their annual hazmat report to gather the quantities being transported.

Respondents should describe a plan of action for accomplishing required services if selected as the Commodity Flow provider.

The proposed compensation for services should be clearly established in the respondent’s proposal.

Discussions and/or negotiations may be conducted with respondents who submit proposals for the purpose of clarification and/or correction, including any clarification relating to a revision that may occur during negotiation to promote full understanding of and responsiveness to the requirements, terms, conditions, and specifications of the RFP.

**Proposals must be received no later than 4:00 p.m. on March 27th, 2020.**
Dates of Importance

Date Issued: March 5th, 2020

Intent to submit deadline: March 25th, 2020

Question & Answer Period: Through 12:00pm March 26th, 2020
Questions must be e-mailed to Jon Kochis: jon.kochis@fairfieldcountyohio.gov

The e-mail subject line should be: COMMODITY FLOW RFP QUESTIONS. Questions will be answered within two business days, and responses will be made to parties who submitted an Intent to Bid.

Proposals Due: March 27th, 2020, 4:00 p.m.

Deadline for Project completion: September 4th, 2020

Vendor Disclosures

Responding vendors must provide a disclosure of any pending or threatened court actions and/or claims against the vendor. This information may not cause rejection of the proposal; but withholding the information may be cause to reject the proposal.

Conflict of Interest

No vendor will promise or give to any county or EMA employee, representative, or official anything of value that could influence the decision on awarding a contract. No vendor will try to influence an employee, representative, or official of the county or EMA to violate county procurement policies or provisions of the Ohio Revised Code.

Contractual Requirements

- As a condition of receiving a contract with the Fairfield County EMA, the contractor shall certify compliance with any court order for the withholding of child support which is issued pursuant to Section 3113.217 of the ORC. The contractor must also agree to cooperate with FCJFS and any Ohio Child Support Enforcement Agency in ensuring that the contractor or employees of the contractor meet child support obligations established under state law.

- By signing a contract with EMA, a vendor agrees that all necessary insurance is in effect.
▪ The selected vendor will indemnify and hold harmless EMA and Fairfield County against any loss, penalties, damage, settlements, costs, professional fees, and/or related expenses incurred through the provision of services.

▪ The selected vendor shall be required to comply with prevailing wage standards applicable to the state of Ohio and Fairfield County.

▪ The selected vendor agrees that as a condition to any contract, there shall be no discrimination against any client or any employee because of race, color, sex, religion, disability, national origin, or any other factor as specified in Title VI of the Civil Rights Act of 1964, Rehabilitation Act of 1973 and subsequent amendments. It is further agreed that the vendor will comply with all appropriate federal and state laws regarding such discrimination.

▪ ORC Section 9.24 prohibits awarding a contract to any entity against whom the Auditor of State has issued a finding for recovery, if the finding for recovery is “unresolved” at the time of award. By submitting a proposal, the vendor warrants that it is not now (and will not become subject to an “unresolved” finding for recovery under R.C. 9.24) prior to the award of any contract arising out of the RFP without notifying FCJFS of such finding. EMA will review the Auditor of State’s website prior to completion of evaluation of proposals submitted pursuant to this RFP. EMA will not evaluate a proposal from any vendor whose name (or the name of any subcontractors proposed by the vendor) appears on the website of the Auditor of State of Ohio as having an “unresolved” finding for recovery.

Vendor Examination of the RFP

Vendors are expected to be familiar with the entire RFP. The vendor is expected to respond to the RFP in a manner that makes it clear they understand and have responded to all sections of the RFP.

Changes to RFP

EMA may make changes to this RFP no later than March 26, 2020, at 4:00 p.m. by sending changes to all vendors who register with Intent to Bid for the RFP. Revisions and additions to any portion of the RFP will be provided to all registered vendors.

Availability of Funds

This RFP and all agency contracts are contingent on the availability of funds. If, during the RFP process, funds are not available for the proposed services, the RFP process will be canceled. The vendor will be notified at the earliest possible time. EMA is not required to compensate the vendor for any expenses incurred as a result of the RFP process.
Communication Protocol

Jon Kochis will serve as the contact person regarding this RFP. The contact information is provided below for submission of proposals or inquiries. Questions must be submitted by e-mail prior to March 19th, 2020, 12:00 p.m., to the attention of Jon Kochis, jon.kochis@fairfieldcountyohio.gov.

It is the responsibility of each vendor to provide an e-mail address so that an appropriate and timely response may be supplied.

Please reference communication protocol guidelines below:

▪ Written questions are to be presented by e-mail to the designated contact person.
▪ Questions and answers are shared with all registered vendors by e-mail.
▪ Any revisions and additions to the RFP will be provided to all registered vendors.
▪ EMA reserves the right to modify the submission process and time line, as well as to cancel any part of this RFP, without prior notice.
▪ Any error, omission, or discrepancy noted by a vendor must be communicated as soon as it is recognized to EMA during the question and answer period with a request for clarification or modification of the RFP document. Any modifications to this RFP will be issued to all registered vendors, while maintaining anonymity as to the source of the request.
▪ Vendors who are aware of errors and do not report such errors submit at their own risk. Unreported errors will not entitle the vendor to additional compensation or time.

In order to assure that the proposal review/evaluation process is conducted in a fair and competitive manner for all potential providers, any ex-parte communication between any potential contractor and EMA or any other person serving as a proposal evaluator is prohibited. Violation of this provision may disqualify the respondent from further consideration.

Preparation of Proposal

Proposals are expected to be concise and provide a clear picture of the vendor’s qualifications. The vendor should respond to the RFP instructions and requirements. The proposal must include all costs that relate to the responses submitted.

All proposals become the property of EMA. All proposals will be considered public information and will be open for inspection.

The proposal solicitation does not constitute an offer. Acceptance of bids for review does not commit EMA to award a contract. The costs of creating proposals are the responsibility of the vendor and shall not be chargeable to EMA. The vendor must guarantee the pricing listed in the proposal will remain in effect for a minimum of 150 days after the proposal submission date. EMA reserves the right to award contracts to a single applicant, multiple applicants, or to reject any and all bids received.
EMA reserves the right to negotiate services and costs on any and all bids received or to cancel in part or in its entirety this proposal solicitation.

EMA may award in whole or in part to one or multiple respondents.

Proposals containing false or misleading statements may be rejected.

The proposal must be signed by an individual who is authorized to contractually bind the vendor. The signature must indicate the title or position the individual holds in the vendor's organization. Unsigned proposals will be rejected.

The proposal, including attachments, will become part of the contract of the vendor(s) receiving awards. Interested parties should read the entire contents of this RFP since the provisions contained therein may affect your organization's decision to submit an RFP. All questions should be answered completely, honestly, and to the best of your organization's ability.

Vendors must deliver by email one original copy of the entire written proposal with completed Attachments A, B, C, D, and E, to Jon Kochis, by mail; EMA 240 Baldwin Drive, Lancaster, Ohio 43130 no later than 4:00 p.m. on March 27th, 2020

A receipt will be issued for all proposals received. Proposals received after the deadline will not be considered. “EMA/COMMODITY FLOW RFP” MUST BE CLEARLY MARKED ON THE PACKAGE.

All vendors must carefully review their final proposals. Once opened, proposals cannot be changed; however, EMA may request information or respond to inquiries for clarification purposes only.

EMA reserves the right to reject any or all proposals.

Written notification may be made to all vendors who submit a proposal. If a successful vendor fails to execute the contract, EMA may award the contract to another vendor whose proposal met the requirements of the RFP and any addenda. The period of time within which such an award of the contract may be made shall be subject to the written agreement between EMA and the vendor.

Proposal Selection

Proposal selection does not guarantee a contract for services will be awarded. Prospective vendors are advised that an offer for a contact may be initiated after a review of the proposals received by EMA and members of a proposal review team.

Bids submitted in response to this proposal solicitation must comply with the specifications stated herein.
All proposals will be evaluated based on the criteria in the RFP using the scoring guide (attachment F). All proposal evaluation criteria are established by EMA. If no response adequately addresses the services and outcomes requested, the EMA may recommend that no award be made.

The request for proposal (RFP) does not constitute an offer. Acceptance of proposals for review does not commit EMA to award a contract, nor is it liable for any costs incurred in the preparation of proposals. EMA reserves the right to award contracts to a single applicant, multiple applicants or to reject any and all proposals received. Additionally, EMA reserves the right to cancel in part or in entirety this RFP.

All organizations submitting proposals must agree to operate programs in compliance with all federal, state and local guidelines.

The successful vendor agrees to accept full responsibility for payment of all unemployment compensation, contributions or reimbursements, insurance premiums, income tax deductions, social security deductions, and any and all other employee taxes and payroll accounting required for employees.

Any additional services that the vendor includes in response to this proposal solicitation will be considered.

Any vendor responding to any EMA RFP or any other procurement opportunity is required to provide certification that the vendor has not provided material support or resources to any organization listed on the “Terrorist Exclusion List” (TEL) maintained by the U.S. Department of State.

If EMA and the vendor are unable to successfully come to terms regarding the contract, EMA reserves the right to terminate contract discussions with the bidder. If this happens, EMA reserves the right to select another bidder from the bid process, cancel the RFP, or reissue the RFP.

Confidentiality and Security

Any vendor that has access to confidential information will be required to keep that information confidential. Disclosure of information to any party beyond EMA or county personnel and/or a court of law without written consent of the party served is prohibited.

In the event of a material breach of contractor obligations under this section, EMA may at its option terminate the contract according to provisions within the contract for termination.
Required Elements of Proposal

The successful vendor will include all of the following elements in their proposal:

1. A **cover sheet and transmittal letter** must be included in the proposal. The cover sheet is attachment A. A transmittal letter must be on agency/organization letterhead and signed by the individual authorized to legally bind the vendor/organization to fulfill the agreed upon contractual obligations. The transmittal letter must incorporate the following elements:

   a) A statement indicating the legal entity tax status of the organization/vendor.
   b) A statement regarding the vendor’s qualifications and experience.
   c) A statement regarding the vendor’s knowledge of Airport management.
   d) The name, title, address, telephone, and e-mail of the individual to be contacted if necessary during the review and selection process.

2. An **overview of the proposed services** to be provided by the vendor must include a detailed response to each of the following:

   a) Proposal Table of Contents
   b) Organization Description
   c) Description of Services to be Provided

3. Vendors must complete required forms as provided in Attachments A-E.

   A. Organizational Information Cover Sheet
   B. Certification Letter from Signatory Authority
   C. OPERS Independent Contractor Acknowledgement Form
   D. Request for Taxpayer Identification Number (W-9) Form
   E. Ohio New Hire Reporting Form

4. Completion of “required forms” as contained in the **Appendix should be submitted as a separate packet of originals with a clearly defined cover sheet marked “Appendix”**. Only one (1) set is needed to accompany the one (1) original and four (4) copies of the proposal.

Protests

Any potential, or actual, vendor objecting to the award of a contract resulting from the issuance of the RFP may file a protest of the award of the contract, or any other matter relating to the process of soliciting the proposals. Such a protest must comply with the following guidelines:

1. A protest may be filed by a prospective or actual bidder objecting to the award of a contract resulting from this RFP. The protest shall be in writing and shall contain the following information:
A. The name, address, and telephone number of the protestor;
B. The name and release date of the RFP being protested;
C. A detailed statement of the legal and factual grounds for the protest, including copies of any relevant documents;
D. A request for a ruling by EMA;
E. A statement as to the form of relief requested from EMA; and
F. Any other information the protestor believes to be essential to the determination of the factual and legal questions at issue in the written protest.

2. A protest based on alleged improprieties in the issuance of the RFP or any other event preceding the closing date for receipt of proposals which are apparent or should be apparent prior to the closing date for receipt of proposals shall be filed no later than 4:00 p.m. the closing date for receipt of proposals.

3. An untimely protest may be considered by EMA if EMA determines that the protest raises issues significant to the agency's procurement system.

4. All protests must be filed at the following location:
   Fairfield County
   Attn: County Administrator
   210 East Main Street
   Lancaster, Ohio 43130

5. When a timely protest is filed, a contract shall not proceed until a decision on the protest is issued or the matter is otherwise resolved. The vendor who would have been awarded the contract shall be notified of the receipt of the protest.

6. The County Administrator shall provide the written decisions on all timely protests and shall notify any vendor who filed an untimely protest as to whether or not the protest will be considered.
ORGANIZATIONAL INFORMATION COVER SHEET
(Required for all Proposals)

Name of Organization: ______________________________________

Address of Organization: ______________________________________
_______________________________________

Contact Person: ______________________________________

Phone Number: ______________________________________

Total Number of Staff: ______________

Federal ID Number: ______________

Corporation No.______________ (if applicable)

Type of Organization: (Check the most appropriate one)

[ ] Local Government [ ] Public Post-Secondary Education
[ ] Public School System [ ] Private Post-Secondary Education
[ ] Private Non-Profit Organization [ ] Technical/Trade School
[ ] Private For-Profit Organization [ ] Private Consultant
[ ] Other (specify)__________________
CERTIFICATION LETTER FROM SIGNATORY AUTHORITY

CERTIFICATION: The information contained in this proposal fairly presents the organization and its proposed commodity flow project for Fairfield County, Ohio. I acknowledge that I have read and understand the requirements and provisions of the RFP.

I further certify that all information contained in this proposal is true and correct and shall be open to verification should EMA desire to do so.

I agree that our organization will abide by the rules, regulations, state and local policies, as applicable to law, regulations, and plans for administration.

I certify that I am authorized to sign the attached proposal and to commit this organization to the provision of services contained therein.

Finally, I do hereby certify that this organization is not currently in any stage of formal bankruptcy proceedings.

________________________________________   ____________________________
Authorizing Official’s Name                  Title

________________________________________   ____________________________
Authorizing Official’s Signature             Date

Social Security Number or Taxpayer ID Number
INDEPENDENT CONTRACTOR ACKNOWLEDGMENT

This form is to be completed if you are an individual who begins providing personal services to a public employer on or after Jan. 7, 2013 but are not considered by the public employer to be a public employee and will not have contributions made to OPERS. This form must be completed not later than 30 days after you begin providing personal services to the public employer.

STEP 1: Personal Information

Social Security Number

First Name      MI      Last Name

STEP 2: Public Employment Information

Name of Public Employer

Employer Contact

First Name      MI      Last Name

Employer Code

Employer Contact Phone Number

Service Provided to Public Employer

Start Date of Service

Month      Day      Year

End Date of Service

Month      Day      Year

PEDACKN (Revised 12/2012)
STEP 3: Acknowledgment

The public employer identified in Step 2 has identified you as an independent contractor or another classification other than a public employee. Ohio law requires that you acknowledge in writing that you have been informed that the public employer identified in Step 2 has classified you as an independent contractor or another classification other than a public employee for the services described in Step 2 and that you have been advised that contributions to OPERS will not be made on your behalf for these services.

If you disagree with the public employer’s classification, you may contact OPERS to request a determination as to whether you are a public employee eligible for OPERS contributions for these services. Ohio law provides that a request for a determination must be made within five years after you begin providing personal services to the public employer, unless you are able to demonstrate through medical records to the Board's satisfaction that at the time the five-year period ended, you were physically or mentally incapacitated and unable to request a determination.

By signing this form, you are acknowledging that the public employer for whom you are providing personal services has informed you that you have been classified as an independent contractor or another classification other than a public employee and that no contributions will be remitted to OPERS for the personal services you provide to the public employer. This acknowledgment will remain valid as long as you continue to provide the same services to the same employer with no break in service regardless of whether the initial contract period is extended by any additional agreement of the parties. You also acknowledge that you understand you have the right to request a determination of your eligibility for OPERS membership if you disagree with the public employer’s classification.

This form must be retained by the public employer and a copy sent to OPERS. The public employer’s failure to retain this acknowledgment may extend your right to request a determination beyond the five years referenced above.

Signature ____________________________ Today’s Date __/__/____

Do not print or type name

PEDACKN (Revised 12/2012)
Attachment D

Form W-9
(H.R. January 2011)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Provide Form to the requester. Do not send to the IRS.

Name (as shown on your income tax return)

Business name disregarded entity name, if different from above

Check appropriate box for federal tax classification (required):

☐ Individual/sole proprietor
☐ C Corporation
☐ S Corporation
☐ Partnership
☐ Trust/estate
☐ Limited liability company. Enter the tax classification (e.g., corporation, S corporation, partnership)
☐ Exempt payee
☐ Other (see instructions)

Address (number, street, and apt. or suite no.)

City, state, and ZIP code

List account number(s) here (optional)

Social security number

Employer Identification number

Part I
Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the “Name” line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 5. For other entities, it is your employer identification number (EIN). If you do not have a number, see How to get a TIN on page 5.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II
Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and

2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and

3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here
Signature of U.S. person
Date

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners’ share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester’s form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

• An individual who is a U.S. citizen or U.S. resident alien,

• A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,

• An estate (other than a foreign estate), or

• A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners’ share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.
The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,
- The U.S. grantor or other owner of a grantor trust and not the trust, and
- The U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person, do not use Form W-9.
Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a “saving clause.” Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exemption to claim an exemption from tax on his or her scholarship or Fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS a percentage of such payments. This is called “backup withholding.” Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),
3. The IRS tells the requester that you furnished an incorrect TIN,
4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Also see Special rules for partnerships on page 1.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are a tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account, for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty. If the requester fails to withhold, unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a $500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your income tax return. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your income tax return on the “Name” line. You may enter your business, trade, or “doing business as (DBA)” name on the “Business name/disregarded entity name” line.

Partnership, C Corporation, or S Corporation. Enter the entity’s name on the “Name” line and any business, trade, or “doing business as (DBA)” name on the “Business name/disregarded entity name” line.

Disregarded entity. Enter the owner’s name on the “Name” line. The name of the entity entered on the “Name” line should never be a disregarded entity. The name on the “Name” line must be the name shown on the income tax return on which the income will be reported.

For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a domestic owner, the domestic owner’s name is required to be provided on the “Name” line. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity’s name on the “Business name/disregarded entity name” line. If the owner of the disregarded entity is a foreign person, you must complete an appropriate Form W-8.

Note. Check the appropriate box for the federal tax classification of the person whose name is entered on the “Name” line (Individual/sole proprietor, Partnership, C Corporation, S Corporation, Estate, or Trust).

Limited Liability Company (LLC). If the person identified on the “Name” line is an LLC, check the “Limited liability company” box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter “P” for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter “C” for C corporation or “S” for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3, except for employment and excise tax, do not check the LLC box unless the owner of the LLC is required to be identified on the “Name” line.

Check the LLC box unless the owner of the LLC is required to be identified on the “Name” line.

Limited Liability Company (LLC). If the person identified on the “Name” line is an LLC, check the “Limited liability company” box only and enter the appropriate code for the tax classification in the space provided. If you are an LLC that is treated as a partnership for federal tax purposes, enter “P” for partnership. If you are an LLC that has filed a Form 8832 or a Form 2553 to be taxed as a corporation, enter “C” for C corporation or “S” for S corporation. If you are an LLC that is disregarded as an entity separate from its owner under Regulation section 301.7701-3, except for employment and excise tax, do not check the LLC box unless the owner of the LLC is required to be identified on the “Name” line.
Other entities. Enter your business name as shown on required federal tax documents on the “Name” line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the “Business name/ disregarded entity name” line.

Exempt Payee

If you are exempt from backup withholding, enter your name as described above and check the appropriate box for your status, then check the “Exempt payee” box in the line following the “Business name/ disregarded entity name,” sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following payees are exempt from backup withholding:
1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(1) if the account satisfies the requirements of section 401(f)(2).
2. The United States or any of its agencies or instrumentalities.
3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities.
4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
5. An international organization or any of its agencies or Instrumentalities.

Other payees that may be exempt from backup withholding include:
6. A corporation,
7. A foreign central bank of issue,
8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States,
9. A futures commission merchant registered with the Commodity Futures Trading Commission,
10. A real estate investment trust,
11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
12. A common trust fund operated by a bank under section 584(a),
13. A financial institution,
14. A middleman known in the investment community as a nominee or custodian, or
15. A trust exempt from tax under section 664 or described in section 4947.

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payee listed above, 1 through 15.

<table>
<thead>
<tr>
<th>IF the payment is for . . .</th>
<th>THEN the payment is exempt for . . .</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest and dividend payments</td>
<td>All exempt payees except for 9</td>
</tr>
<tr>
<td>Broker transactions</td>
<td>Exempt payees 1 through 5 and 7 through 15. Also, O corporations.</td>
</tr>
<tr>
<td>Barter exchange transactions and patronage dividends</td>
<td>Exempt payees 1 through 5</td>
</tr>
<tr>
<td>Payments over $600 required to be reported and direct sales over $5,000</td>
<td>Generally, exempt payees 1 through 7.1</td>
</tr>
</tbody>
</table>

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see How to get a TIN below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN. If you are a single-member LLC that is disregarded as an entity separate from its owner (see Limited Liability Company (LLC) on page 2), enter the owner’s SSN for EIN, if the owner has one. Do not enter the disregarded entity’s EIN. If the LLC is classified as a corporation or partnership, enter the entity’s EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write “Applied For” in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering “Applied For” means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, see Form W-9. You may be requested to sign by the withholding agent even if item 1, below, and items 4 and 5 on page 4 indicate otherwise.

For a joint account, the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on the “Name” line must sign. Exempt payees, see Exempt Payee on page 3.

Signature requirements. Complete the certification as indicated in items 1 through 3, below, and items 4 and 5 on page 4.

1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.

2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.

1 See Form 1099-MISC, Miscellaneous Income, and its instructions.
2 However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys’ fees, gross proceeds paid to an attorney, and payments for services paid by a federal executive agency.
4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. “Other payments” include payments made in the course of the requester’s trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members, fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

<table>
<thead>
<tr>
<th>For this type of account:</th>
<th>Give name and SSN of:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Individual</td>
<td>The Individual</td>
</tr>
<tr>
<td>2. Two or more individuals (joint account)</td>
<td>The actual owner of the account or, if combined funds, the first individual on the account¹</td>
</tr>
<tr>
<td>3. Custodian account of a minor (Uniform Gift to Minors Act)</td>
<td>The minor¹</td>
</tr>
<tr>
<td>4. The usual revocable savings trust (grantor is also trustee)</td>
<td>The grantor-trustee¹</td>
</tr>
<tr>
<td>5. So-called trust account that is not a legal or valid trust under state law</td>
<td>The actual owner¹</td>
</tr>
<tr>
<td>6. Self-proprietorship or disorganized entity owned by an individual</td>
<td>The owner¹</td>
</tr>
<tr>
<td>7. Disorganized entity not owned by an individual</td>
<td>The grantor²</td>
</tr>
<tr>
<td>8. A valid trust, estate, or pension trust</td>
<td>The corpus</td>
</tr>
<tr>
<td>9. Corporation or LLC stating corporate status on Form RIC or Form Schedules O</td>
<td>The corporation</td>
</tr>
<tr>
<td>10. Association, club, religious, charitable, educational, or other tax-exempt organization</td>
<td>The organization</td>
</tr>
<tr>
<td>11. Partnership or multi-member LLC</td>
<td>The partnership</td>
</tr>
<tr>
<td>12. A broker or registered nominee</td>
<td>The broker or nominee</td>
</tr>
<tr>
<td>13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments</td>
<td>The public entity</td>
</tr>
<tr>
<td>14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-1(f)(2)(i)(B))</td>
<td>The trust³</td>
</tr>
</tbody>
</table>

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person’s number must be furnished.
² Give the minor’s name and furnish the minor’s SSN.
³ You must show your individual name and you may also enter your business or “DBA” name on the “business name/disorganized entity” name line. You may use either your SSN or EIN if you have one, but the IRS encourages you to use your SSN.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, social security number (SSN), or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:
- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039.

For more information, see Publication 4365, Identity Theft Prevention and Victim Assistance.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be a legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHETF (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MDA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Hosts use of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payees must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payee. Certain penalties may also apply for providing false or fraudulent information.
Attachment E

Ohio New Hire Reporting
Ohio Revised Code section 3121.89 to 3121.8910 requires all Ohio employers, both public and private, to report all contractors and newly hired, rehired, or returning to work employees to the state of Ohio within 20 days of the contract, hire, or rehire date. Information about new hire reporting and online reporting is available on our website: www.oh-newhire.com

Send completed forms to:
Ohio New Hire Reporting Center
PO Box 15309
Columbus, OH 43215-0309
Fax: (614) 221-7088 or toll-free fax (888) 872-1611

To ensure the highest level of accuracy, please print neatly in capital letters and avoid contact with the edges of the boxes. The following will serve as an example:

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
</table>

EMPLOYER INFORMATION
Federal Employer ID Number (FEIN) (Please use the same FEIN as the listed employee’s quarterly wages will be reported under):

Employer Name:

**FAIRFIELD COUNTY**

Employer Address (Please indicate the address where the income Withholding Orders should be sent):

210 EAST MAIN STREET

Employer City: **Lancaster**
Employer State: **OH**
Zip Code (5 digit): **43130**
Employer Phone (optional): __________
Extension: __________
Employer Fax (optional): __________
Email: __________

EMPLOYEE OR CONTRACTOR INFORMATION
Social Security Number (SSN) __________
(Check here if using FEIN for the Contractor)

First Name: __________
Middle Initial:

Last Name: __________

Address: __________

City: __________
State: __________
Zip Code (5 digit): __________

Date of Hire: __________
Date of Birth: __________
Is this a Contractor? Yes [ ] No [ ]

Date payments will begin for Contractor: __________
Length of time the Contractor will be performing services: __________ months

REPORTS WILL NOT BE PROCESSED IF REQUIRED INFORMATION IS MISSING

Questions? Call us at (614) 221-5330 or toll-free (888) 872-1490
Ohio Department of Job and Services
Attachment F  

**RFP Scoring Matrix**

1. Proposed Solution for Data Collection of Hazardous Materials Routes {10 Points}
   a. Describe your organization’s solution to collect data for best results on the transportation corridors listed by the County.

2. Scope of Work {25 Points}
   a. Provide a description of the services you will provide; including, but not limited to the following information:
      i. Data capture
      ii. Data analysis
      iii. Data summary to analyze hazards

3. Project Management {10 Points}
   a. Provide description of monitoring plan as described in the RFP

4. Anticipated Work Schedule {15 Points}
   a. Indicate ability to adhere to anticipated work schedule.
   b. Include a project timeline that includes the projected time for achieving each deliverable.

5. Vendor Qualifications {10 Points}
   a. Provide a description of vendor’s qualifications to provide the required services.
   b. Provide a description of vendor’s prior experience description of the qualifications.
   c. Provide data to evidence vendor’s ability to provide the same or similar services and achieved the desired goal.
   d. Provide data to evidence the vendor’s ability to provide the same or similar services on or under budget.

6. Staff Qualifications {10 Points}
   a. Provide a description of each employee’s qualifications that will be providing services for this project. The County reserves the right to approve or disapprove any change in the successful vendor’s project team members whose participation is specifically offered in the proposal. The description is not limited to, but must include at least the following for each employee:
      i. Name
      ii. Title/Position
      iii. Role in the project
      iv. Experience with providing the services described and on similar work projects
      v. Legal relationship with prime contractor (or indicate to be hired)
   b. Provide an organizational chart including at least all individuals who will perform any services for this project.
c. Provide a narrative with the organizational chart to describe the chain of command and the individual responsible for achieving each deliverable as described in the County’s specifications.

7. Budget {10 Points}
   a. Proposed pricing. Estimates are not acceptable.
   b. Provide a proposed schedule of payments.
   c. Provide a budget and a budget narrative for the entire project term.

8. Terms and Conditions {10 Points}
   a. Provide a statement indicating your willingness to comply with all conditions set forth in the RFP.
   b. If Vendor is unwilling to agree to a proposed clause or term, then must include a statement that identifies the term vendor will not comply with and the reasoning for noncompliance.

9. Miscellaneous (No Score)
   a. References – Provide the name and phone number for at least three (3) references for similar projects your organization has completed. Fairfield County staff is limited to one (1) total reference.
   b. Contract Termination – Indicate if vendor has had a contract terminated for non-performance or poor performance in the last five (5) years. If yes, then all such incidents must be described including the party’s name, address, phone number and email address.
   c. Conflict of Interest – Each vendor shall include a statement indicating whether or not the organization or any of the individuals working on the contract has a possible conflict of interest and, if so, the nature of that conflict. The County reserves the right to cancel the award if any interest disclosed from any source could either give the appearance of a conflict or cause speculation as to the objectivity of the program to be developed by the vendor. The County’s determination regarding any questions of conflict of interest shall be final.
Attachment G: Major Transportation Routes and Rail