



Application To Provide Shelf-Stable Meals for FY2025

<u>1. Company Information</u>		<u>2. Primary Food Preparation Site (If Different)</u>	
Company:		Name:	
Street Address:		Street Address:	
City, State, Zip		City, State, Zip	
Phone:		Phone:	
Primary Contact:		FAX:	
Title:		E-mail:	
E-Mail:		Primary Contact:	
FEIN:		Title:	

3. Application Agreement

By signing this application, I certify that I am an authorized representative to sign for this Organization. I certify that I will adhere to all AgeOptions requirements and policies for provision of services, including Definitions and Standards and Request for Application. I certify that the specifications outlined in this application represent the Applicant Organization's commitments for Fiscal Year 2025 and any subsequent years of service. All costs for the preparation of this application shall be the responsibility of the Applicant Organization and not the responsibility of AgeOptions. I hereby certify that all of the information and answers provided in this application are true and accurate to the best of my knowledge.

Typed Name:		Signature:	
Title:		Date:	

Notes:

- (1) This application does not request financial information about your organization. AgeOptions reserves the right to request financial data as necessary to assess the financial viability of the organization.
- (2) This application is not a contract.

- d. How many shelf-stable meals did your company prepare and deliver for service in calendar year 2022?
- e. At what percentage of current capacity are your production facilities now operating?
- f. Have you done work similar in scope and size to this? Give examples.

Pricing

- a. Complete **Attachment F** – Shelf-Stable Vendor Pricing Grid. Pricing for Regular diets, Kosher and vegetarian meals are required. All other meal types are optional.
- b. Prices must be expressed as a per-meal price, including shipping.
- c. Pricing for general diet-meals should assume 42,000 meals shipped in a minimum of 6,000 meal boxes (based on an individual client count of 6,000. See item #4, in RFP). You may choose to use more boxes with smaller meal counts in each, or you may suggest using meal boxes with larger quantities, thereby exceeding the 42,000 meal minimum. Be sure to explain the pricing rationale thoroughly. No matter how many shipping containers you use, estimate shipping a roughly equal portion of the 42,000 meals to ~45 locations in suburban Cook County, Illinois (See **Attachment D** – Distribution Sites & Quantities). Total delivery costs should be averaged over all boxes to create a uniform per-meal price for each delivery cycle.
- d. Pricing for all other meal types should be expressed as a per-meal, assuming 500 meal boxes (35,000 individual meals), using the same average delivery cost calculated above.

General

- a. List any subcontractors or partners who will supply any or all of the products or services described in this RFP and describe the products or services that they will provide.
- b. Do you ship via common-carrier delivery service? If so, which service?
- c. What is the approximate lead time you would require for an order of approximately 6,000 seven (7)-meal boxes to be packaged and ready to ship? (Please include time required to source food items).
- d. How long would it then take for the order described above to reach approximately 45 different destinations in suburban Cook County, door to door?

Attachments

If your organization is invited by AgeOptions to provide sample meal boxes, you will be asked to submit **one set** of the attachments listed below.

Please label any attachments with your company name.

- a. Current health department inspection(s) and Certified Food Protection Manager certificate for at least one supervisor if, as part of your operation, your organization deals with the preparation of raw or cooked food items.
- b. Current fire department inspection(s) for your facility.
- c. Three client references, including client name, primary contact, phone number and e-mail address.
- d. A sample seven (7)-meal menu and nutritional analysis for each meal type that you are willing and able to provide.
- e. Written confirmation that you have read the menu standards and can provide menus that meet these standards.