

EMERGENCY MEDICAL SERVICES AUTHORITY

10901 GOLD CENTER DR STE 400
 RANCHO CORDOVA, CA 95670-6073
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**Request for Quotation**

April 10, 2018

Quote Number	Due Date	Event Location
RFQ-March2019GardenGrove	April 30, 2019	Garden Grove, CA
Name of Event	Event Dates	
Emergency Medical Services Authority	March 17 – March 20, 2019	
Contact: Lisa Vigil, Contracts Analyst	Phone: (916)431-3694	
Email Quotes To: Lisa.Vigil@emsa.ca.gov	Websites: www.emsa.ca.gov	
Please respond to all items requested in this Request for Quotation (RFQ) and quote the cost of every item that you cannot provide on a complimentary basis. Incomplete responses may disqualify the property from consideration.		

Pricing and Overall Consideration

As with any government group, total overall cost is a key factor. This group is looking for the best value. Some of the many factors taken into account while evaluating proposals are the price of the single guest room rate (including tax), the value of incentives provided within the single guest room rate, the total cost of meeting space and the cost of individual round-trip airport transportation.

Please keep in mind that the State cannot pay deposits in advance, cancellation and attrition fees, or penalties. Final meeting requirements (A/V, Food, and Beverage) will be finalized upon execution of contract by a separate event banquet order addendum to the contract. Any agreement entered into with the State of California will have the following included by reference: General Terms and Conditions (GTC-610) which can be viewed and downloaded at the following internet site:

<http://www.documents.dgs.ca.gov/ols/GTC-610.doc>

The best proposal would include within the California State government rate:

- Complimentary A.M. coffee, tea, and decaf with unlimited replenishment
- Complimentary P.M. iced tea, coffee service, and snacks
- 30% discount on audio visual equipment rental
- Wireless internet
- Complimentary meeting space
- Complimentary parking
- One (1) comp per forty (40) cumulative guest rooms
- Courtesy hotel/airport shuttle

Event Background

Over a three day period the Emergency Medical Services Authority (EMSA) coordinates the following quarterly meetings: EMSA Commission, EMSA Data, Emergency Medical Services Administrators Association of California (EMSAAC), and the Emergency Medical Directors Association of California (EMDAC).

Hotel Information			
Property:		Address:	
Facility Brand:		Web Address:	
Property Contact:		Title:	
Email Address:	Phone Number:	Fax Number:	
Is the property ADA compliant? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is your property a union hotel? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is your property green certified? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please list the certification below.	
Are renovations planned or in process over the requested meeting dates? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Parking			
Complimentary Parking	Day Use Rate	Overnight Parking Rate	Parking Discount Offered
<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No \$

Airport Transportation			
Closest Airport	# of Miles to Hotel	Complimentary Hotel Shuttle	Estimated Cost – One Way
		<input type="checkbox"/> Yes <input type="checkbox"/> No	Airport Van \$ Taxi \$

Meeting History/Comments	
Hotel agrees to accept the Meeting Planner Account as payment.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Hotel agrees to provide total room pickup at the time of presenting the invoice with total amount charged.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Hotel agrees to disclose in the proposal ALL fees related to meeting/guest room charges.	<input type="checkbox"/> Yes <input type="checkbox"/> No

Hotel Comments:

Guest Rooms						
\$120/per night state per diem						
Guest Room Rate Offered	Single	Double	Triple	Standard Guest Room during this timeframe	Can this property waive the Transient Occupancy Tax?	Occupancy tax:
	\$	\$	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Tourism Assessment Fee		Resort Fee		Other Fees	

Room Block (paid directly by Guest, not contracting agency)			
Date(s)	March 17, 2019	March 18, 2019	March 19, 2019
# of Rooms	(5) Standard Room (2) Deluxe Rooms	(45) Standard Rooms (2) Deluxe Rooms	(50) Standard Room (2) Deluxe Rooms
Availability?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Meeting Space (Quoted room rental cost must be inclusive of set-up, taxes, and gratuities)			
Date: 3/18/2019	Name: EMS Data	Meeting Time	7:00a.m.-5:00p.m.
# of Attendees	Name of Proposed Room	Quoted Price Per Day	Standard Price
10-12			

Set-up:
Conference style skirted table with ample room. Attendees will break for lunch – no meals included.

Date: 3/19/2019	Name: EMSAAC	Meeting Time	7:00a.m.-5:00p.m.
# of Attendees	Name of Proposed Room	Quoted Price Per Day	Standard Price
85			

Set-up:

- Hollow square with skirted tables for up to (35) people.
- Theater style for (50), with space between the chairs, set up near Hollow Square.
- A single 6' banquet table set against the wall at room entrance with two chairs.
- There will be a working lunch during the meeting and food will need to be placed either in the room or hallway.

Date: 3/19/2019	Name: EMDAC	Meeting Time	7:00a.m.-5:00p.m.
# of Attendees	Name of Proposed Room	Quoted Price Per Day	Standard Price
100			

Set-up:

- Hollow square with skirted tables for up to (35) participants.
- Theater style for (65), with space between the chairs, set up near Hollow Square.
- A single 6' banquet table set against the wall at room entrance with two chairs.
- There will be a working lunch during the meeting and food will need to be placed either in the room or hallway.

Date: 3/20/2019	Name: EMSA Commission	Meeting Time 7:00a.m.-5:00p.m.
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# of Attendees	Name of Proposed Room	Quoted Price Per Day	Standard Price
130			

Set-up:

- A single 6’ banquet table with two chairs positioned outside the meeting room.
- U shape in front of room with seating for (25) participants.
- Theater style for (100), with space between the chairs, set up in front of U shape.
- One (1) skirted table with a chair for transcriptionist.
- One (1) skirted cart for A/V projector.
- One (1) skirted - 6’ banquet table set against the wall at room entrance with two (2) chairs
- U.S. flag and flagpole.

Other Associated Costs

Are there additional fees associated with the set-up/tear down of meeting rooms?

Yes No

\$ _____ If yes.

Comments:

Audio/Visual

In House Vendor	Discount Offered?	Do you charge a fee for outside vendors?	Service Charge?	Sales Tax Charge?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	_____ % if yes.	\$_____ if yes.	_____ % if yes.	_____ % if yes.

Type of Audio Visual Equipment	Quantity	Price Per Day	Standard Price
Standing lectern (podium) with light, wired, and gooseneck microphone	1		
Tabletop Microphones	13		
Extension Cords	6		
Power Strips	6		
8’ x 8’ screen	1		
Projector cart	1		
16-Channel Audio Mixer	1		
Projector	1		
If available:			
Portable Screen Package (8’x8’ screen, projector table, extension cord, and power strip)	1		
A/V Accessory Package (power strip, extension cord, cabling, and projector cart)	4		

Other Associated Costs

Are there additional fees associated with A/V rental?

Yes No

\$ _____ If yes.

Comments:

Food and Beverage

Meeting Name	Meal Function	Date(s)	Inclusive Cost Per Person Per Day	Average Inclusive Cost from Menu
EMS Data	<ul style="list-style-type: none"> Coffee and beverage Pitchers of iced water 	3/18/2019	\$	\$
EMSAAC	<ul style="list-style-type: none"> Coffee and beverage Pitchers of iced water All Inclusive Food Package with vegetarian options to billed separately to EMSAAC. 	3/19/2019	\$	\$
EMDAC	<ul style="list-style-type: none"> Coffee and beverage Pitchers of iced water All Inclusive Food Package with vegetarian options billed separately to EMDAC 	3/19/2019	\$	\$
EMS Commission	<ul style="list-style-type: none"> Coffee and beverage Pitchers of iced water 	3/20/2019	\$	\$

Other Associated Costs

Are there additional fees associated with food and beverage service?
 Yes No

\$ **If yes.**

Comments:

Will you provide complimentary items? Yes No If yes, please list below.

Complimentary Service	Complimentary Items Offered	Value
	\$	\$
	\$	\$

The above listed quote is based on an estimated volume of services to be provided by Contractor and is not binding on the contracting agency. The estimated volume of services is not a guarantee, neither expressed nor implied, on the actual volume of monthly services that shall be required for this Contract. The estimate indicated above will be used solely for the computing the cost as a fair and equitable formula to determine the low bidder and is not binding on the contracting agency. However, the actual costs quoted above by the bidder shall be binding for the term of the Agreement once executed by the Contractor and the State of California.

Company Name (Printed)	
Signature of Person Authorizing Pricing	
Printed Name and Title of Person Signing	
Date	