

RFP 25-8385.1 - Elevator Maintenance and Repair Re-Bid

MANDATORY PROPOSAL PAGE - DO NOT ALTER FORM

Elevator Location / Facility	Group #	Year 1 FY2026 12/01/25 - 11/30/26 Annual MCP Service		Year 2 FY2027 12/01/26 - 11/30/27 Annual MCP Service		Year 3 FY2028 12/01/27 - 11/30/28 Annual MCP Service		Year 4 FY2029 12/01/28 11/30/29 Annual MCP Service Optional	
		Service		Service		Optional		Service Optional	
Jail Staff Elevator	1	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
Jail Kitchen	1	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
Jail Prisoner Transport	1	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
MCGC C-Mod Passenger South	1	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
MCGC C-Mod Freight North	1	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
MCGC Court Holding	1	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
MCGC Court Holding	1	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
MCGC Secure Judges	1	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
MCGC West entrance (left - east)	1	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
MCGC West entrance (right - west)	1	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
Total Annual Amount Group 1		\$ 21,360.00		\$ 21,360.00		\$ 21,960.00		\$ 22,680.00	
Valley Hi Nursing Home	2	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
Valley Hi Nursing Home	2	\$2,136.00		\$2,136.00		\$2,196.00		\$2,268.00	
Total Annual Amount Group 2		\$ 4,272.00		\$ 4,272.00		\$ 4,392.00		\$ 4,536.00	
Administration Building /									
Total Annual Amount Group 3	3	\$ 2,136.00		\$ 2,136.00		\$ 2,196.00		\$ 2,268.00	
Annex Building A /									
Total Annual Amount Group 4	4	\$ 2,136.00		\$ 2,136.00		\$ 2,196.00		\$ 2,268.00	
Treasurer's Building /									
Total Annual Amount Group 5	5	\$ 1,824.00		\$ 1,824.00		\$ 1,872.00		\$ 1,932.00	
MC Joint Training Facility /									
Total Annual Amount Group 6	6	\$ 2,136.00		\$ 2,136.00		\$ 2,196.00		\$ 2,268.00	
Total Bid Annual MCP Service	1-6	\$33,864.00		\$33,864.00		\$34,812.00		\$35,952.00	

Hourly Rate for Mechanic / After Contract Service Hours \$ See Rates Tabel

Trip Charge, if any, for After Hour Service \$ 0.85/mile

Exceptions to this RFP (if there are none, write "NONE")

None

Local 15 Rockford - 2025 Rates			
Time	Nature of Call	FM Contract	
M-F, Business Hrs	Service Callback	n/a	
Fri pm / Saturday	Service Callback	\$ 179.90	
Sunday / Holiday	Service Callback	\$ 257.00	
M-F, Business Hrs	Misuse / Vandalism	\$ 257.00	
Fri pm / Saturday	Misuse / Vandalism	\$ 436.90	
Sunday / Holiday	Misuse / Vandalism	\$ 514.00	



MANDATORY PAGE – CERTIFICATIONS AND SIGNATURE

- In addition to any Work or Specification Requirements, I acknowledge there to be Five (5) **Mandatory Documents** including: References Page, Proposal Page, Certification and Signature Page, W-9 Form, **in addition to any additional specifications outlined in the Request Description.** ☒ Yes
- Submitter certifies it has not been barred from contracting with a unit of State or Local Government as a result of a violation of Section 33E-3 or 33E-4 of the Criminal Code of 1961, as amended. ☒ Yes
- Vendor certifies it is aware that all contracts for the Construction of Public Works are subject to the **Illinois Prevailing Wage Act** (820 ILCS 130/1-12) and this Bid or Request
☐ Is Subject to, ☒ NOT Subject to the Illinois Prevailing Wage Act. ☒ Yes
- Vendor acknowledges this Bid or Request ☐ Is Subject to, ☒ Is NOT Subject to the **Employment of Illinois Workers in Public Works Act** (30 ILCS 570/3) and will comply with the requirements set forth in this Act. ☒ Yes
- I acknowledge this Solicitation ☐ Requires, ☒ Does NOT Require a Bid Bond. Bid Security, if required, shall be in an amount equal to at least ten percent (10%) of the amount of the Bid except for the Division of Transportation, which should be at least five percent (5%). Bid Security shall be a bond provided by a surety company authorized to do business in the State of Illinois, or a certified check, bank draft, or cashier's check. ☒ Yes
- Vendor understands that, in submitting this bid/proposal, it waives all right to plead any misunderstandings regarding the foregoing information presented in the Solicitation Documents, including but not limited to, the McHenry County Purchasing Ordinance, Standard Terms and Conditions, and All Addendums. ☒ Yes

I have carefully examined the Bid or Request, Scope of Work, Specifications, and any other documents accompanying or made a part of this Request. I certify I am duly authorized to submit on behalf of the firm, and the firm is ready, willing, and able to perform if awarded the contract. I further certify, under oath, this proposal is made without prior understanding, agreement, connection, discussion, or collusion with any other person, firm or corporation submitting a proposal for the same product or service.

Individual/Company:

Schumacher Elevator Company

Full Address: ONE SCHUMACHER WAY, PO BOX 393, DENVER, IA 50622

Signature:  **Date:** 07/30/2025

Printed Name and Title: Jason Anderson, Service Manager

Telephone Number: 319-406-1277 **Email:** jason.anderson@schumacherelevator.com

Witness Name, Title, and Signature:

Shannon Knapp, Service Account Specialist



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