**BIDDER FACT SHEET**

**PLEASE COMPLETE AND PLACE AS TOP PAGE OF EACH PROPOSAL**

|  |  |
| --- | --- |
| RFP Title: | **CYF 17-05 PSYCHIATRY/NURSE PRACTITIONER SERVICES IN DSCYF FACILITIES** |
| Cost Per Hour: $ |  |

Indicate service locations proposed in this proposal (check all proposed):

DYRS Facilities

[ ]  Stevenson House

[ ]  New Castle County Detention Center, Ferris School, Mowlds Cottage, Snowden Cottage and Grace Cottage

DPBHS Facilities

[ ]  Terry Children’s Center

[ ]  Silver Lake Treatment Consortium: Middletown Manor RTC, Odessa House RTC, Silver Lake Day Trx

Bridge Psychiatry

[ ]  Bridge Psychiatry

|  |
| --- |
| Bidder Information |
| Indicate the type of business bidder is or proposes to be if yet to be formed: |
|  | Corporation |  | Partnership |  | Individual |
|  Bidder Name: |  |
|  Office Address: |  |
|  |  |
|  |  |
| Contact Person: |  |  |
| Office Phone #: |  |  |
|  Cell Number: |  |  |
|  E-mail Address: |  |  |
|  |
|  |
|  COMPANY CLASSIFICATIONS: CERT. NO.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Certification type(s) | Circle all that apply |
| Minority Business Enterprise (MBE) | Yes No |
| Woman Business Enterprise (WBE) | Yes No |
| Disadvantaged Business Enterprise (DBE) | Yes No |
| Veteran Owned Business Enterprise (VOBE) | Yes No |
| Service Disabled Veteran Owned Business Enterprise (SDVOBE) | Yes No |

|  |  |  |  |
| --- | --- | --- | --- |
|  Bidder Tax ID#: |  |  Delaware Business License#: |  |
|  |  | (Not required to bid) |  |

A Delaware Business License is not required to bid, but is required before the time of award/contract signing. This requirement is waived for documented non-profit organizations.