

VENDOR BACKGROUND QUESTIONNAIRE

To be completed by Implementer -

1. Name of Company: _____
2. Company's DNB (D&B) Number: _____
3. Please state the date your company started in the business of **implementing** Electronic Forms solution, digital signature and postmark system.

4. Where is your closest support facility/sales office?

5. Where is your headquarters office?

6. How many total employees does your company have?

How many support staff are available over the phone to troubleshoot problems?

How many are implementers/system integrators?

7. Please list your company's annual sales for the 3 most recent years:

\$ _____
\$ _____
\$ _____

8. Are all items quoted FOB delivered Pleasant Ridge, Michigan, freight prepaid and allowed? Yes _____ No _____
9. Do you have a toll-free support line? Yes _____ No _____
10. Do you have a User Group? Yes _____ No _____
11. Will you provide periodic enhancements to the software at no additional charge? Yes _____ No _____
12. What is your average response time (hours) for a telephone response to an initial service call?

VENDOR BACKGROUND QUESTIONNAIRE

13. What is your guaranteed maximum response time (hours)?

14. a) State how many Electronic Form solutions installations your company has completed for:

eForms without
Digital
Signature

eForms with
Digital Signature,
Electronic Postmark
and Workflow

Michigan: _____

Nationally: _____

b) What hardware platform does your proposed Electronic Forms solution, digital signature and postmark systems solution currently run on?

c) What operating system(s) does your proposed Electronic Forms solution, digital signature and postmark systems solution currently run under?

d) Are you committed to supporting the above operating system and hardware platform(s) for the foreseeable future?

Yes _____ No _____

15. State how long the current Electronic Forms solution, digital signature and postmark system release has been offered on the market.

Yrs.

16. As a *Primary* Contractor, can you provide a true Turnkey Solution, including:

- Application Software? Yes _____ No _____
- Training? Yes _____ No _____
- Conversion? Yes _____ No _____
- Modifications? Yes _____ No _____
- On-going Support? Yes _____ No _____
- Interfaces? Yes _____ No _____

VENDOR BACKGROUND QUESTIONNAIRE

17. Does your software operate with/under the Oracle relational database and Business Objects query/report write? Yes _____ No _____

If not which database brand(s) and report writer(s) do you integrate with?

18. What programming language is the proposed Electronic Forms solution, digital signature and postmark system. solution written in?

19. Will you contractually agree to:

- a. One-year warranty for software and services with annual Electronic Forms solution, digital signature and postmark system. Software support payments starting 1 year after formal acceptance of the completed solution? Yes _____ No _____
- b. Provide on-site (i.e., not at HQ) staff for training? Yes _____ No _____
- c. Knowledge transfer to the City staff regarding all implementation, integration, etc.? Yes _____ No _____
- d. Guarantee 1-2 hr. response time for critical situations? Yes _____ No _____
- e. Non-performance holdbacks? Yes _____ No _____
- f. Source code provided directly to City of Pleasant Ridge? Yes _____ No _____
- g. If "No", then will you escrow the source code? Yes _____ No _____
- h. Project manager dedicated to the City? Yes _____ No _____
- i. Allow the City to approve vendor staff that is assigned to help with implementation? Yes _____ No _____
- j. Provide system documentation for all application modules, including custom modifications and interface? Yes _____ No _____
- k. Indemnify the City for claims asserted by third parties alleged to have been caused by the acts, errors or omissions of your employees. Yes _____ No _____

30. During February 2005 please indicate three sets of two consecutive days you are available for on-site interviews for the proposed Electronic Forms solution, digital signature and postmark system solution demonstrations:

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VENDOR BACKGROUND QUESTIONNAIRE

DAY 1	DAY 2

33. Have you performed an infrastructure (LAN/WAN throughput, key servers sizing) assessment to meet the performance requirements outlined in the specifications in Section 4? Please list below any required enhancements.

34. Have you provided a Project Plan, Timeline or Gantt chart for implementation of the proposed Electronic Forms, digital signature and postmark system solution and all requirements in Section 4 you responded affirmatively to in your proposal? Include key milestones and a Pilot Program phase. You should assume that the County will provide only an estimated 10% of the labor resources required to implement the proposed Electronic Forms solution, digital signature and postmark system.

Yes _____ No _____

35. Does your project plan estimate the number of staff resources that you will require the **County** to devote to the implementation?

Yes _____ No _____

36. Does your project plan describe the qualifications that the **County** individuals will need to have (e.g., Application Development Experience, Programming Language Experience, Prior Work Experience, etc.)?

Yes _____ No _____

37. If you are a finalist, will you provide a Statement of Work that includes, in detail, all deliverables, costs, change control and project management procedures, etc.?

Yes _____ No _____

38. Have you included in your proposal job descriptions and the following qualifications of each team member assigned to the County to do the proposed Electronic Forms solution, digital signature and postmark system solution implementation?

- Longevity with firm Yes _____ No _____
- Relevant Certifications Yes _____ No _____
- Number of Prior assignments with Similarly Sized/Complex Entities Yes _____ No _____

VENDOR BACKGROUND QUESTIONNAIRE

- Educational Background Yes ___ No ___
- Brief Employment History Yes ___ No ___

39. Will you provide Electronic Forms solution, digital signature and postmark system support, remote diagnostics, and troubleshooting post-Go Live or as part of an annual service agreement? Yes ___ No ___

40. Please list the Electronic Forms solution, digital signature and postmark system implementations (i.e. clients) your firm has successfully completed. Include details of these implementations in the client reference forms later in this section.

41. Are you as a firm, and are your individual team members, certified to implement Enterprise Electronic Forms solution, digital signature and Postmark systems? Yes ___ No ___

42. Formal acceptance testing and other quality assurance tasks relating to the proposed Electronic Forms solution, digital signature and postmark system solution, how it operates on the server(s) and infrastructure, interfaces, etc., will be performed by the City and/or its consultants during the implementation. The finalist vendor will be required to cooperate in every way possible. Do you agree to this condition? Yes ___ No ___

43. Twenty percent of the total proposed Electronic Forms solution, digital signature and postmark system implementation services contract cost will be withheld by the City until formal acceptance of the fully functional and successfully operating proposed Electronic Forms solution, digital signature and postmark system. Solution occurs and the system is deemed acceptable by the City. Do you agree to this condition? Yes ___ No ___

44. Please list all Electronic Forms solution, digital signature and postmark system products (manufacturer, brand) you are certified/authorized to implement and indicate which one you are recommending for the City of Pleasant Ridge:

MATERIALS AND COSTS

The following is a form to be completed by the vendor for each solution proposed to describe required hardware, software, and services for the implementation of Electronic Forms solution, digital signature and postmark system. Capabilities described in Section 4.

Name of Company	
Software Brand Name	
Name of Preparer	
Phone Number	()
Fax Number	()
e-mail address	

HARDWARE/INFRASTRUCTURE/SUPPORTING SOFTWARE BILL OF MATERIALS

The tables that follow, identify the hardware, infrastructure, and supporting software (i.e., Electronic Forms solution, digital signature and postmark system.) required for the Electronic Forms solution, digital signature and postmark itself, Netegrity integration, administrative systems, fault tolerant components, and any other components the City will need to obtain to operate/support the proposed solution. The bill of materials, once implemented, must be capable of supporting the operational, functional, and performance specifications contained herein.

For the bill of materials, please indicate in the column marked “Equivalent” if the exact product you are specifying is required, or an equivalent product from an alternate manufacturer can be substituted. Please include an explanation for any cases where an equivalent cannot be used. The City prefers Dell equipment. Be sure to include all the required specifications in the bill of materials so the proper memory, disk, or other requirements can be planned. **Clearly indicate in each table the number of forms and users the configuration/hardware/software is designed to support.**

MATERIALS AND COSTS

ELECTRONIC FORMS SOLUTION, DIGITAL SIGNATURE AND POSTMARK SYSTEM – PILOT SOLUTION

Pilot/Prototype Solution – Proof of Concept. The general requirements of the pilot phase are listed below. Specifics regarding the actual forms and workflows are to be determined:

- Consist of four (4) forms from two (2) different departments
- At least one of the forms will require the submitter (general public) to digitally sign and postmark the form
- At least one of the forms will require a workflow and approval process that satisfies the internal business process requirements of the specific department
- Contents from at least two (2) of the forms shall have the ability to be integrated into department’s back end systems/processes.

ESTIMATED NUMBER OF CONCURRENT SUPPORTED END USERS _____

ESTIMATED NUMBER OF SUPPORTED CONCURRENT INTERNAL ADMINISTRATIVE USERS _____

Hardware				
Qty.	Manufacturer	Part Number	Description	Equivalent (Y/N)
Software				
Qty.	Manufacturer	Part Number	Description	Equivalent (Y/N)

MATERIALS AND COSTS

Please provide all hardware, application and supporting software and services pricing below to satisfy the specifications detailed for the pilot project:

Hardware ¹	[Required Quantity	X	Unit Purchase Price]	=	Extended Initial Purchase Price	Annual On-Going Support / Service
		x		=		
		x		=		
		x		=		
		x		=		
		x		=		
		x		=		
Other		x		=		
Other		x		=		
Other		x		=		
Subtotal - Hardware		x		=		

Software	[Purchase or Lease Price	+	Required Modifications]	=	Total Initial Purchase Price	Annual On-Going Software Support / Service
		+		=		
		+		=		
		+		=		
		+		=		
		+		=		
		+		=		
Other²		+		=		
Other		+		=		
Other		+		=		
Other		+		=		
Subtotal:						

² List all other Software (Application, Desktop or Supporting) that the City will be required to license and implement to achieve the specifications in Section 4 of this RFP. If Software that is **not** listed is subsequently determined by City or vendor to be required, then vendor shall provide such Software to City at no charge beyond annual support fees.

MATERIALS AND COSTS

Implementation Services	Estimated Hours	x	Hourly Rate	=	Extended Cost
Cost of Implementation		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
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		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
Total Implementation Services					

Training Costs:							
The City requires that 2-3 internal City Employees are fully trained to support, maintain, and administer the proposed system. These individuals should also be able to provide reasonable systems enhancements as well as new form and workflow development.							
Training	Est. Number of Training Sessions	x	Hours per Session	x	Hourly Rate	=	Extended Cost
1		x		x		=	\$
2		x		x		=	\$
3		x		x		=	\$
4		x		x		=	\$
Other		x		x		=	\$
Subtotal Training		x		x		=	\$

MATERIALS AND COSTS

Summary	
Pilot Descriptions	Total
Hardware	
Software	
Implementation	
Training	
Support 1 st Year	
Grand Total Pilot:	

Note - Please document all assumptions for the pilot implementation below:

MATERIALS AND COSTS

**ELECTRONIC FORMS SOLUTION, DIGITAL SIGNATURE AND POSTMARK SYSTEM
FULL DEPLOYMENT**

**BASED ON ADDITIONAL MATERIALS AND COSTS FOR ALL ESTIMATED FORMS
AND VOLUMES**

ESTIMATED NUMBER OF CONCURRENT SUPPORTED END USERS _____
 NUMBER OF INTERNAL OF CONCURRENT SUPPORTED ADMINISTRATIVE USERS

Hardware				
Qty.	Manufacturer	Part Number	Description	Equivalent (Y/N)
Software				
Qty.	Manufacturer	Part Number	Description	Equivalent (Y/N)

MATERIALS AND COSTS

Please provide all hardware, application and supporting software and services pricing below to satisfy the specifications for a full implementation project:

Hardware ³	[Required Quantity	X	Unit Purchase Price]	=	Extended Initial Purchase Price	Annual On-Going Support / Service
		x		=		
		x		=		
		x		=		
		x		=		
		x		=		
		x		=		
Other		x		=		
Other		x		=		
Other		x		=		
Subtotal - Hardware		x		=		

Software	[Purchase or Lease Price	+	Required Modifications]	=	Total Initial Purchase Price	Annual On-Going Software Support / Service
		+		=		
		+		=		
		+		=		
		+		=		
		+		=		
		+		=		
Other⁴		+		=		
Other		+		=		
Other		+		=		
Other		+		=		
Subtotal:		+		=		

⁴ List all other Software (Application, Desktop or Supporting) that the City will be required to license and implement to achieve the specifications in Section 4 of this RFP. If Software that is **not** listed is subsequently determined by City or vendor to be required, then vendor shall provide such Software to City at no charge beyond annual support fees.

MATERIALS AND COSTS

Implementation Services	Estimated Hours	x	Hourly Rate	=	Extended Cost
Cost of Implementation		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
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		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
		x		=	
Total Implementation Services					

Training Costs:							
The City requires that 2-3 internal City Employees are fully trained to support, maintain, and administer the proposed system. These individuals should also be able to provide reasonable systems enhancements as well as new form and workflow development.							
Training	Est. Number of Training Sessions	x	Hours per Session	x	Hourly Rate	=	Extended Cost
1		x		x		=	\$
2		x		x		=	\$
3		x		x		=	\$
4		x		x		=	\$
Other		x		x		=	\$
Subtotal Training		x		x		=	\$

MATERIALS AND COSTS

Summary	
Full Deployment	Total
Hardware	
Software	
Implementation	
Training	
Support 1 st Year	
Grand Total:	

Note - Please document all assumptions for the full deployment implementation below:

MATERIALS AND COSTS

Please indicate your willingness and ability to adhere to the following schedule of events:

EVENT	COMPLETION DATE DUE	AGREEMENT	
		YES	NO
Demonstrations of Software/Interviews			
Site Visit			
Vendor/Product Selection			

VENDOR REFERENCE INFORMATION

Reference 2

Vendor Name:	
Customer Name:	
Customer Contact:	
Customer Phone Number:	()

Briefly describe installation characteristics such as size, speed, applications, and capacity:

Installed application systems (briefly describe):
Number of Concurrent/Connected Users:

VENDOR REFERENCE INFORMATION

Reference 3

Vendor Name:	
Customer Name:	
Customer Contact:	
Customer Phone Number:	()

Briefly describe installation characteristics such as size, speed, applications, and capacity:

Installed application systems (briefly describe):
Number of Concurrent/Connected Users:

BID SIGNATURE FORM

The undersigned declares that he/she has carefully examined all the items of the Specifications and Instructions and that he/she fully understands the requirements of the same.

State Terms:

(Proposals shall include installation as specified, and the successful respondent shall obtain all required permits and pay fees required. Proposals to include any shipping charges F.O.B. Pleasant Ridge, Michigan.)

Exceptions: _____

PROPOSAL FOR IMPLEMENTATION OF ELECTRONIC FORMS DIGITAL SIGNATURE AND POSTMARK SYSTEM CAPABILITIES:

\$ _____ \$ _____
(Total price written) (Total figure)

\$ _____ \$ _____
(Total Pilot price written) (Total Pilot figure)

Firm Name:

Date:

Address:

Telephone:

Signature:

(Person executing response and official capacity)

(Names of principal officers:
designate official capacity)

(If partnership or assumed name,
indicate name of owners)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____