Bidders: Please submit and format the first page of your proposal as follows:

**Bid Proposal for Vended Meals, 2019-20**

**To the Folk Arts-Cultural Treasures Charter School**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bidder

Hereby agrees, if awarded, to provide meals as specified

in the Invitation for Bid/Contract for Vended Meals at the

Unit Price Per Lunch Without Milk:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NSLP Compliance Questionnaire**

**FACT Charter School**

Name of Bidder:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you currently provide vended meals or FSMC services for a SFA’s National School Lunch Program?

□ No

□ Yes

If yes, how many students are served by your NSLP vended meals contract? \_\_\_\_\_\_\_\_\_

If yes, how many years have you been serving food regulated by the NSLP? \_\_\_\_\_\_\_\_\_\_

Has your company ever been found to be out of compliance with NSLP regulations?\_

□ No

□ Yes. Please explain the nature of the compliance issue and how you addressed it:

Describe your experience using PrimeroEdge:

Who is responsible for ensuring compliance with NSLP nutritional requirements?

Job Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (if known):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ A resume with relevant experience is attached

□ A resume with relevant experience is not available

**Facilities and Taste Testing Requirement Information**

Responsive and Responsible Bidders will pass a facilities inspection (pass/fail) requirement and taste test (pass/fail).

Address of Food Preparation Facility:

Name of facility:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person for the Site Visit:

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Most Recent PDE Division of Food and Nutrition Inspection:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ Bidder has not been approved by the PDE Division of Food and Nutrition, but will be approved no later than (date):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bidder will provide taste test during the week of June 3-7:

□ At the Folk Arts-Cultural Treasures Charter School, 1023 Callowhill Street

□ At the bidder’s production facility

I understand that a facilities inspection (pass/fail) and taste test (pass/fail) are required of all bidders.

Name and Title of Authorized Signatory:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_