

EXHIBIT A.1 - COST PROPOSAL FORM FOR TIER 1 PROPOSERS

LEGAL NAME OF TIER 1 PROPOSER: _____

INSTRUCTIONS: For Items (i) through (xv), enter the Fiscal Year Hourly Rate and an Estimate of Annual Hours for each training area. For Item (xxv) enter a Fixed Fee for Annual Travel Costs for each Fiscal Year. The Agency does not guarantee a minimum or maximum of the amount of annual hours and reserves its right to purchase its requirements at the Fixed and Hourly Rates noted below.

	INITIAL THREE YEAR CONTRACT TERM									TWO-YEAR OPTIONAL RENEWAL PERIOD					
	2018-2019 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2019-2020 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2020-2021 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2021-2022 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2022-2023 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs
BUDGET - FOR TIER 1 PROPOSERS															
Tier 1 Training Areas:															
(i) National Renewable Energy Laboratory (“NREL”) Quality Control Inspector (Single Family & Multi-Family) (5 days / Maximum of 8 – 10 participants) *			\$ -			\$ -			\$ -			\$ -			\$ -
(ii) NREL Energy Auditor (Single Family & Multi-Family) (5 days / Maximum of 8 – 10 participants)			\$ -			\$ -			\$ -			\$ -			\$ -
(iii) NREL Crew Leader (Single Family & Multi-Family) (5 days / Maximum of 8 – 10 participants)			\$ -			\$ -			\$ -			\$ -			\$ -
(iv) NREL Retrofit Installer (Single Family & Multi-Family) (5 days / Maximum of 8 – 10 participants)			\$ -			\$ -			\$ -			\$ -			\$ -
(v) NREL Multi-family Retrofit Project Manager (New York City only) (5 days / Maximum of 8 – 10 participants)*			\$ -			\$ -			\$ -			\$ -			\$ -
(vi) Building Performance Institute (“BPI”) Building Analyst Professional (Single Family & Multi-Family) – WAP Auditor (5 days / Maximum of 8 – 10 participants) *			\$ -			\$ -			\$ -			\$ -			\$ -
(vii) BPI Heating Professional – WAP Auditor (Single Family Projects) (4 days / Maximum of 8 – 10 participants)*			\$ -			\$ -			\$ -			\$ -			\$ -
(viii) BPI Manufactured Housing Professional – WAP Auditor (Single Family Projects) (4 day / Maximum of 10 – 12 participants)*			\$ -			\$ -			\$ -			\$ -			\$ -

EXHIBIT A.1 - COST PROPOSAL FORM FOR TIER 1 PROPOSERS

LEGAL NAME OF TIER 1 PROPOSER: _____

INSTRUCTIONS: For Items (i) through (xv), enter the Fiscal Year Hourly Rate and an Estimate of Annual Hours for each training area. For Item (xxv) enter a Fixed Fee for Annual Travel Costs for each Fiscal Year. The Agency does not guarantee a minimum or maximum of the amount of annual hours and reserves its right to purchase its requirements at the Fixed and Hourly Rates noted below.

	INITIAL THREE YEAR CONTRACT TERM									TWO-YEAR OPTIONAL RENEWAL PERIOD					
	2018-2019 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2019-2020 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2020-2021 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2021-2022 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2022-2023 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs
BUDGET - FOR TIER 1 PROPOSERS															
Tier 1 Training Areas:															
(ix) BPI Envelope Professional – WAP auditors, crew and QCI (4 days / Maximum of 8 – 10 participants)			\$ -			\$ -			\$ -			\$ -			\$ -
(x) BPI Whole House Air Leakage Control Installer – WAP auditors, crew and QCI (3 days / Maximum of 8 – 10 participants)			\$ -			\$ -			\$ -			\$ -			\$ -
(xi) BPI Infiltration and Duct Leakage – WAP auditors, crew and QCI - (2 days / Maximum of 6 participants)			\$ -			\$ -			\$ -			\$ -			\$ -
(xii) Environment Protection Agency (“EPA”) Renovation, Repair and Painting (“RRP”) Lead Renovator Certification – all staff who may encounter lead based paint while performing their duties (1 day / Maximum of 8 participants) *			\$ -			\$ -			\$ -			\$ -			\$ -
(xiii) Occupational Safety and Health Administration (“OSHA”) 10 Hour Construction Safety Certificate – all staff who work on WAP job sites (2 days / Maximum of 20 participants) *			\$ -			\$ -			\$ -			\$ -			\$ -
(xiv) Weatherization Health & Safety – WAP Directors, auditors, QCI, all crew and heating technicians (1 day / Maximum of 16 – 20 participants) *			\$ -			\$ -			\$ -			\$ -			\$ -

EXHIBIT A.1 - COST PROPOSAL FORM FOR TIER 1 PROPOSERS

LEGAL NAME OF TIER 1 PROPOSER: _____

INSTRUCTIONS: For Items (i) through (xv), enter the Fiscal Year Hourly Rate and an Estimate of Annual Hours for each training area. For Item (xxv) enter a Fixed Fee for Annual Travel Costs for each Fiscal Year. The Agency does not guarantee a minimum or maximum of the amount of annual hours and reserves its right to purchase its requirements at the Fixed and Hourly Rates noted below.

	INITIAL THREE YEAR CONTRACT TERM									TWO-YEAR OPTIONAL RENEWAL PERIOD					
	2018-2019 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2019-2020 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2020-2021 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2021-2022 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs	2022-2023 Fiscal Year Hourly Rate	Estimate of Annual Hours	Total Annual Costs
BUDGET - FOR TIER 1 PROPOSERS															
Tier 1 Training Areas:															
(xv) Weatherization Lead Safe Work Practices – All staff who may encounter lead based paint while performing their duties (1 day / Maximum of 16–20 participants) *			\$ -			\$ -			\$ -			\$ -			\$ -
(xxv) Annual Not to Exceed Amount for Fixed Travel Costs (for travel in excess of 100 miles from the Proposer's Main Office to the Field Training Destination)	INSERT HERE>>>>		\$ -	INSERT HERE>>>>		\$ -	INSERT HERE>>>>		\$ -	INSERT HERE>>>>		\$ -	INSERT HERE>>>>		\$ -
GRAND TOTAL PER YEAR	YEAR 1 TOTAL		\$0.00	YEAR 2 TOTAL		\$0.00	YEAR 3 TOTAL		\$0.00	YEAR 4 TOTAL		\$0.00	YEAR 5 TOTAL		\$0.00
THREE YEAR GRAND TOTAL															
FIVE YEAR GRAND TOTAL															

Legal Name of Proposer:

Printed Name of Proposer’s Authorized Representative:

Original Signature:





