

STATE OF MISSOURI  
OFFICE OF ADMINISTRATION  
TOWER SPECIFICATIONS  
AND  
PROPOSAL FORM

for the

State of Missouri  
Department of Public Safety  
Cape Girardeau County  
Cape Girardeau, Missouri

RFP No. 01602597

This document constitutes a Request for Proposal (RFP)  
including prices from qualified individuals and organizations  
to furnish adequate talk-out and talk-back coverage within the area of Cape Girardeau County  
as defined in the attached map

Bidders are advised to contact the Division of Facilities Management, Design and Construction  
for clarification on information and specifications

All questions regarding this Request for Proposal must be directed to:  
Linda Struempf, Coordinator  
Division of Facilities Management, Design and Construction, Real Estate Services Section  
Telephone # (573) 522-2545  
Facsimile # (573) 526-4138

All Proposals must be received no later than 1:30 p.m. on March 13, 2014.

ATTACHMENT A

SUMMARY OF CRITICAL INFORMATION

1. Location: Tower sites are sought that provide adequate mobile talk-out and talk-back coverage within the area of Cape Girardeau County as defined by the attached geographical parameters.
2. Roundtrip coverage with a signal threshold Required: 108.4 dBm
3. Bid Opening Date: March 13, 2014
4. Term of Lease: 5 years (one-year, with 4 one-year renewals)
5. Tile based propagation modeling such as Longley-Rice, Anderson 2D or similar
6. Service area reliability: 97%
7. Land-use-land-clutter loss on required.
8. Trunk mounted receiver: Height required at 1.7 meters

Coverage will be evaluated based on the applicable criteria.

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ATTACHMENT B

**PROPOSAL FORM**

RFP No. 01602597

State of Missouri  
Department of Public Safety  
Cape Girardeau County  
Cape Girardeau, Missouri

Bid Opening Date: March 13, 2014

This Proposal Form must be completed, sealed and received by the Division of Facilities Management, Design and Construction no later than 1:30 p.m. on the specified date. All proposals must be mailed or hand carried to:

Division of Facilities Management, Design and Construction  
Real Estate Services  
P. O. Box 809  
301 West High Street, Room 730  
Jefferson City, Missouri 65102

All proposals will be publicly opened and read at the above time, date and location.

Submitted by: \_\_\_\_\_  
Phone Number: ( ) \_\_\_\_\_ Owner/Agent  
Facsimile Number: ( ) \_\_\_\_\_  
Address: \_\_\_\_\_

B-1. The undersigned, having examined and being familiar with local conditions including applicable model building codes, ordinances, requirements, etc., affecting the premises and with all sections and attachments of this specification package issued by the Division of Facilities Management, Design and Construction, hereby certifies that, with the exception of any appended variances, the premises meets or will meet or exceed the above conditions and proposes to furnish the indicated premises for the firm, fixed price per year:

**\* BIDDER SHOULD ENTER AN AMOUNT OR THE WORDS  
"NO BID" IN ALL BLANK AREAS PROVIDED**

B-1.1 Base Bid Rental Rate (Includes Rent Only - Mandatory Entry):

Price Per Year\* \_\_\_\_\_ Dollars  
(\$ \_\_\_\_\_ )

B-1.2 Additional Amount for Lessor Provided Utilities (Optional Entry):

Price Per Year\* \_\_\_\_\_ Dollars  
(\$ \_\_\_\_\_ )

B-2 Specific Site Information: The Bidder should provide the proposed site address. (If the state has a choice of more than one site, please submit a separate proposal form for each site.)

Address of Proposed Property: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

State Senate District: \_\_\_\_\_ State Representative District: \_\_\_\_\_

B-3 The proposed premises are currently:

- \_\_\_\_\_ (a) owned by the Bidder
- \_\_\_\_\_ (b) Bidder has a signed option to purchase contract
- \_\_\_\_\_ (c) Bidder is acquiring an option to purchase contract
- \_\_\_\_\_ (d) Bidder has a verbal agreement with the owner
- \_\_\_\_\_ (e) Bidder has no ownership rights or obligations
- \_\_\_\_\_ (f) Broker representing an individual

B-4 In order to comply with local zoning requirements, the proposed premises:

- \_\_\_\_\_ (a) are zoned correctly
- \_\_\_\_\_ (b) must be rezoned

B-5 The proposed site has a generator available:

- \_\_\_\_\_ (a) yes
- \_\_\_\_\_ (b) no

B-6 The proposed site has UPS available:

- \_\_\_\_\_ (a) yes
- \_\_\_\_\_ (b) no

B-7 The proposed has electric available:

- \_\_\_\_\_ (a) none available
- \_\_\_\_\_ (b) available with shared meter
- \_\_\_\_\_ (c) available with separate meter service

B-7.1 Identify the electrical service provider contact information if available:

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

B-8 The proposed site has Copper T1 Connectivity:

- \_\_\_\_\_ (a) yes
- \_\_\_\_\_ (b) no

B-9 In submitting this bid, it is understood that the right is reserved by the Division of Facilities Management, Design and Construction, State of Missouri, to reject any and all bids.

B-9.1 IF AN INDIVIDUAL:

_____ Name of Individual	_____ Residence Address
_____ Signature	
_____ Firm Name (if any)	_____ Federal Tax ID # or SSN
_____	_____
_____ Firm Address	_____ Address for Communications

B-9.2 IF A PARTNERSHIP:

\_\_\_\_\_ General\* \_\_\_\_\_ Limited  
(Include names of all)

Name and Residence Address of Partners:

_____ Name of Partnership	
_____ Partner	_____
_____ Signature	_____
_____ Partner	_____
_____ Signature	_____
_____ Address for Communications	_____ Federal Tax ID # or SSN

\*Include information of all partners by attaching additional pages if necessary.

B-9.3 IF A CORPORATION: (Exact Title)

\_\_\_\_\_  
Name of Corporation

1. Incorporated under the laws of the  
State of \_\_\_\_\_

\_\_\_\_\_  
Name and Title of Officer

2. Registered to do business in Missouri:  
Yes \_\_\_\_\_ No \_\_\_\_\_ (Check one)

\_\_\_\_\_  
Signature of Officer

\_\_\_\_\_  
Federal Tax ID # or SSN

(ATTEST)

\_\_\_\_\_  
Address for Communications

\_\_\_\_\_  
Secretary Signature

B-9.4 IF A BROKER REPRESENTING AN INDIVIDUAL:

\_\_\_\_\_  
Name of Broker

\_\_\_\_\_  
Signature of Broker

\_\_\_\_\_

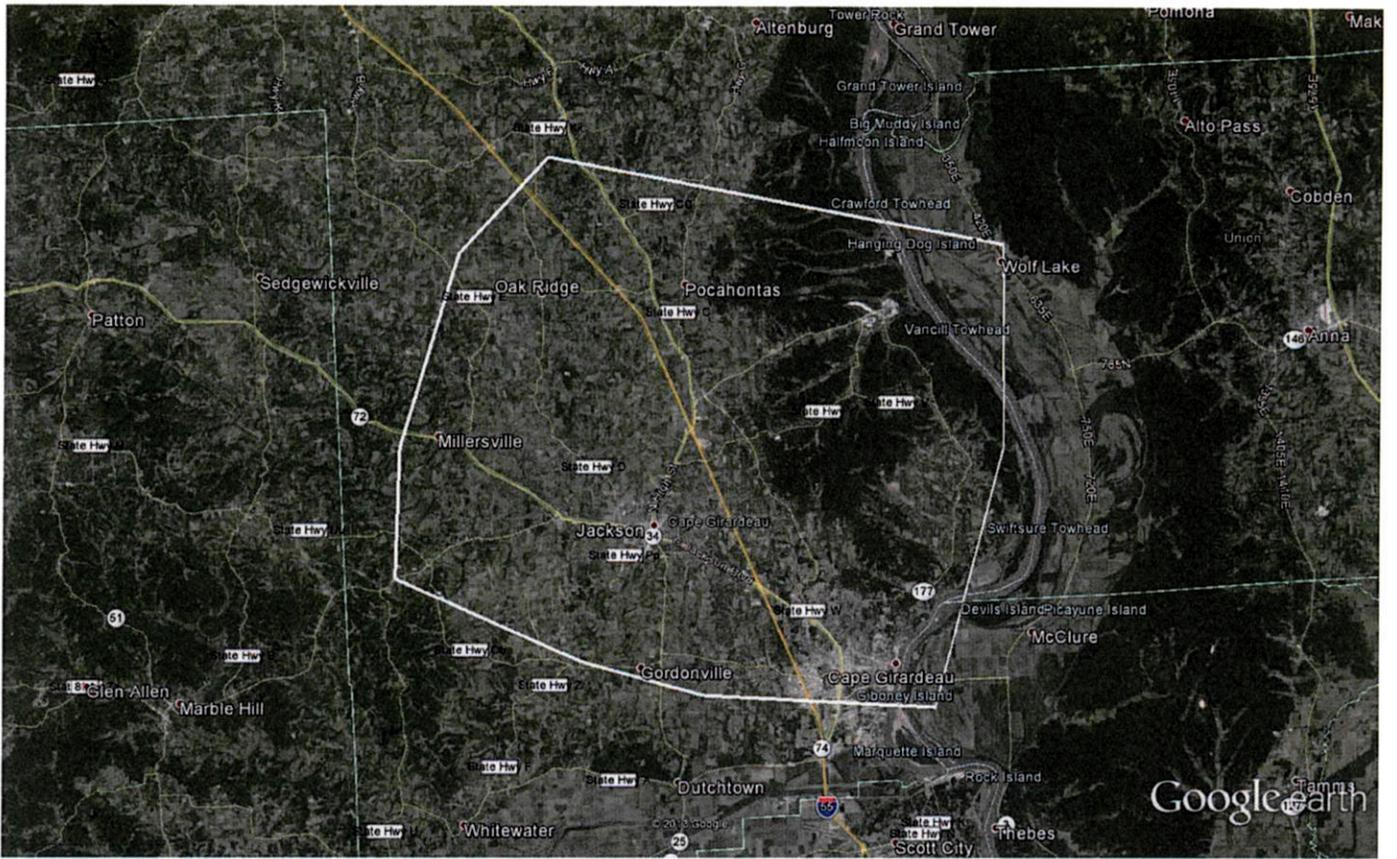
\_\_\_\_\_  
Name of Individual Represented

\_\_\_\_\_  
Residence Address

\_\_\_\_\_  
Signature of Individual Represented

\_\_\_\_\_  
Federal Tax ID # or SSN of Individual  
Represented

Each Bidder must complete the Proposal Form by signing on the proper signature line above and by supplying the required information called for in connection with the signature. Failure to properly sign the Proposal Form and to provide required information will constitute grounds for non-acceptance of bid.



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