SIGNATURE PAGE

P-13-2023

To the Monmouth County Board of County Commissioners:

THE UNDERSIGNED HEREBY DECLARES THAT I (WE) HAVE CAREFULLY EXAMINED THE SPECIFICATIONS. I (WE) HEREBY CERTIFY PRICES QUOTED ARE IN ACCORDANCE WITH YOUR REQUIREMENTS.

Company Name:	DT SERVICE, CLC
	(PRINT)
Preparer's Name:	JOHN Ry Ans
Signature:	/ (PRINT)
Address:	ISO MOIN ST, IST FLOOR REAL
	TOMS RUER NT 08753
Telephone No.:	732-349-0848
Fax No.:	732-914-8950
E-Mail Address:	Tryan@ Dynamic testing net
	(This should be the email where Contracts would be sent)
Contact Person:	JOHN RyAN
FEIN:	
(Federal Employee ID) BRC: (Business) Registration Certificate)	

Proposal

DRUG AND ALCOHOL TESTING SERVICES FOR VARIOUS MONMOUTH COUNTY DIVISIONS AND DEPARTMENTS FOR CALENDAR YEAR 2023 AS A PROFESSIONAL SERVICE

The undersigned Consultant hereby declares that he/she has carefully examined the Request for Proposals and the specifications and that, upon issuance of a Purchase Order, he/she will perform the requested services in compliance with those requirements, at the following costs:

Group 1. Pre-placement, random selection, return-to-duty, reasonable suspicion/cause, post-accident and follow-up testing:

Per test:		
L. Drug Test (on site)	197± employees @ \$	

Group 2. Emergency Call-Out Services for reasonable suspicion/cause and post-accident drug and alcohol testing **on site** on 24/7 basis. Services are on a portal-to-portal basis (if there is an additional cost for the test, then list such cost separately; otherwise prices listed in Group # 1 will apply):

Group 3. Technician time, to accommodate shy bladder protocol:

9. Straight time, Up to 5 hours:

\$ CNCCUOED per hour

10. Overtime / Holiday Rate: \$ /wccoes per hour Up to 5 hours:

Group 4. Drug and Alcohol tests performed by an outside service center for situations when, due to circumstances beyond the reasonable control of the Consultant, the Consultant cannot provide **on-site** services listed in items #1 and #3 above in Group #1. Any additional applicable collection fees must be added, if required.

Facility Name MGRIAIAN OCCUPATIONAL HEACTH

Location 195 ROUTE 9, STE 213, MANACAPAN NJ 07726

11. Drug Test: 11 \$ 55.00 per test

12. Alcohol Test: 11 \$ 35.00 per test

Group 5. On-site General Supervisory Awareness training and provide comprehensive manual for approximately 56 employees (Drug and Alcohol program coordinators, administrators, and supervisors of CDL and non-CDL employees). Each class should be approximately 2.5 hours, with a minimum of 15 and maximum of 60 employees per class:

13. 5± classes @ \$ 299.60 per class

14. 56± manuals @ \$ 5.00 per manual

Group 6. Litigation support (if needed)

15. \$ 150.00 per hour (FOR COLLECTOLS)

A 600.00 per hour (FOR MRO)

*NOTE: The quantities listed above are estimated and may change depending on operational requirements.

Successful Consultant will only receive payments for actual number of tests performed.

VARIANCE(S), IF ANY:
NONE
The undersigned is an individual a partnership a corporation under the laws of the State of JERSEY
BUSINESS NAME: DT SERVICE, LLC. DBA! DYNAMIC TESTING SALVIN
BY: JOHN RYAN SIGNATURE:
ADDRESS: 230 MAINST, ISTROOK REAK
CITY: TOMS RIVER STATE: NO ZIP: 04753
BUSINESS PHONE #: 782-349-0848 FAX #: 732-914-8950
EMAIL ADDRESS: JOYAN @ DYNOMIC TESTING, NET