



Appendix B

EVALUATION CRITERIA

Appendix "B" – BID PAGE

EXHIBIT "B"

SELECTION/EVALUATION CRITERIA

The County will conduct a comprehensive, fair and impartial evaluation of all Proposals received in response to this RFP. Each proposal will be analyzed to determine overall responsiveness and qualification under the RFP. The evaluation criteria will include, but not be limited to the following:

- | | |
|--|-------------------|
| 1. <u>COMMISSION:</u> | <u>35%</u> |
| ➤ Percentage of Commission for each call. | |
| ➤ The providers cost of the proposed service | |
| 2. <u>EXPERIENCE, RELIABILITY AND STABILITY</u> | <u>30%</u> |
| ➤ Extensive Experience with provision of inmate telephone service | |
| ➤ Evidence of Proposers experience with similar institutions | |
| 3. <u>PROPOSED METHOD OF PERFORMANCE</u> | <u>05%</u> |
| ➤ Provide sufficient professional background (references) indicative of outstanding or exceptional services. | |
| 4. <u>EQUIPMENT</u> | <u>15%</u> |
| ➤ Furnish satisfactory evidence of their ability to furnish service/equipment | |
| 5. <u>SERVICES</u> | <u>15%</u> |
| ➤ Experience and knowledge necessary to provide and perform the required service | |
| ➤ Capability to handle calls as requested in achieving and rendering all services required. | |

TOTAL: 100 POINTS

EXHIBIT "B"
RFP EVALUATION FORM
HIDALGO COUNTY-ADULT DETENTIN FACILITY
"INMATE PAY TELEPHONE SERVICES"

<u>Selection Criteria</u>	<u>Points</u>	<u>Score</u>
1. COMMISSION (35)		
➤ Percentage of Commission for each call	0-20	
➤ The providers cost of the proposed service	0-15	
Comments/Rationale for points:	TOTAL:	_____
2. EXPERIENCE, RELIABILITY AND STABILITY (30)		
➤ Extensive Experience with provision of inmate telephone service	0-15	
➤ Evidence of Proposers experience with similar institutions	0-15	
Comments/Rationale for points:	TOTAL:	_____
3. PROPOSED METHOD OF PERFORMANCE (05)		
➤ Provide sufficient professional background (references) indicative of outstanding or exceptional services	0-5	
Comments/Rationale for points:	TOTAL:	_____
4. EQUIPMENT (15)		
➤ Furnish satisfactory evidence of their ability to furnish service/equipment	0-15	
Comments/Rationale for points:	TOTAL:	_____
5. SERVICES (15)		
➤ Experience and knowledge necessary to provide and perform the requires service	0-8	
➤ Capability to handle calls as requested in achieving and rendering all services required.	0-7	
	TOTAL:	_____
TOTAL SCORE:		_____

Provider: _____

Evaluator: _____ Date: _____

Appendix "B" – BID PAGE

BIDDER/COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIPCODE: _____

PHONE No: _____ FAX No: _____ CELL No: _____

AUTHORIZED SIGNATURE: _____

PRINTED NAME: _____

TITLE: _____ DATE: _____

EMAIL: _____