**WESTERN RESERVE AREA AGENCY ON AGING**

**Elderly Nutrition Program**

COMPETITIVE PROPOSAL CHECKLIST 2025

**Applicant:**

| **Application Order #** | **Description of Applicant’s qualifications and experience** | **Present** |
| --- | --- | --- |
| **01** | Completed Applicant Competitive Proposal Checklist |  |
| **02** | Older Americans Act Nutrition Program Caterer Contact Sheet |  |
| **03** | Competitive Proposal Pricing document with Cost Breakdown **See RFP Specs page 19** |  |
| **04** | Proposal bond in a sum of five percent (5%) of the amount proposed |  |
| **05** | Caterer Questionnaire |  |
| **06** | A copy of Federal and/or State, Inspection Number; or current copy of Food Preparers Ohio Food Service Operation License. |  |
| **07** | Audited financial statements of the Applicant for the last two fiscal years. |  |
| **08** | A list of food service equipment which will be used in this program. |  |
| **09** | A hierarchical organizational chart **See RFP Specs page 17-18** |  |
| **10** | A list of current and/or proposed companies to be used by the Applicant for food and/or supply item purchases. **See RFP Specs page 18** |  |
| **11** | Description of Applicant’s qualifications and experience |  |
| **12** | Copy of the site visit monitoring report |  |
| **13** | Copy of a food safety program that complies with the Hazard Analysis Critical Control Point (HACCP) based food safety program. |  |
| **14** | A copy of the most recent Enforcement Investigation Analysis Officer review performed by the Ohio Department of Agriculture. (if applicable) |  |
| **15** | A copy of the most recent “Good Manufacturing Practices Inspection Report” performed by the Ohio Department of Agriculture (ODAg), Division of Food Safety. (if applicable)  **See RFP Specs page 20-21** |  |
| **16** | A copy of the most recent Establishment Inspection Report (EIR) conducted by ODA for the Food and Drug Administration (FDA). (if applicable) **See RFP Specs page 20-21** |  |
| **17** | Assurance of Compliance with the Department of Health and Human Services Regulations under Title VI of the Civil Rights Act of 1964. |  |
| **18** | Assurance of Compliance with Section 504 of the Rehabilitation Act of 1973, As Amended. **See RFP Specs page 22-23** |  |
| **19** | Proof of the following:   * For all Applicants other than a sole owner/proprietorship, the Applicant shall provide proof that it is currently registered with the Secretary of State as a non-profit organization, association, trust, co-operative, for-profit business, Limited Liability Company, limited partnership, or partnership having limited liability.   **See RFP Specs page 23**   * A signed and notarized Non-Collusion Affidavit. **See RFP Specs page 23** * Certification Regarding Debarment, Suspension and Other Responsibility Matters. **See RFP Specs page 23** * For a corporation, a notarized certificate or Power of Attorney authorizing the person signing to bind the corporation to the proposal document or a notarized certificate of corporate resolution authorizing the person signing the proposal document to bind the corporation.   **See RFP Specs page 23**   * For a sole owner/proprietorship, a notarized statement indicating that the individual is the sole owner and is authorized to sign for and bind the Food Preparer. **See RFP Specs page 23** * For a partnership, a certificate of partnership agreement showing the names and address of all partners and authorizing the signing partner to bind the partnership to the proposal document.   **See RFP Specs page 23** |  |
| **20** | **Kosher Meals Only** –Certificate of Warranty ensuring that all Kosher meals are, indeed, Kosher. **See RFP Specs page 23** |  |
| **21** | Adequate evidence of capability to provide meals appropriate for consumption by older people, such as demonstrated by previous experience. A list of clients and the accompanying services shall be provided. **See RFP Specs page 26** |  |
| **22** | Emergency Food Protocol - **See RFP Specs page 65** |  |
| **23** | Annual plan to evaluate and improve the effectiveness of the program’s operations and services **See RFP Specs page 65** |  |
| **24** | Supply Ordering Policy **See RFP Specs page 69-73** |  |
| **25** | Asian, Hispanic and Kosher Meal Preparers only: Cycle menus for January, April, July and October **See Appendix W** |  |
| **26** | W-9 |  |