

## 5.1 SITE QUESTIONNAIRE

1. Location Number for which you are proposing (from Agency Specifications): \_\_\_\_\_  
Street address of site \_\_\_\_\_  
City \_\_\_\_\_, Ohio, Zip Code \_\_\_\_\_
2. Is the site you are proposing currently in operation as a deputy registrar agency?  
No \_\_\_\_\_ Yes \_\_\_\_\_
3. Do you intend to perform construction or remodeling to prepare this site for operation under a new deputy registrar contract?  
No \_\_\_\_\_ Yes \_\_\_\_\_
4. Do you agree to comply with applicable Ohio Building Code requirements if construction or remodeling is necessary?  
No \_\_\_\_\_ Yes \_\_\_\_\_
5. Is the site located in a city or village? \_\_\_\_\_  
If so, name of city or village \_\_\_\_\_  
If not, name of township in which it is located \_\_\_\_\_
6. In what county is this site located? \_\_\_\_\_
7. Is your proposed site within the geographic area specified in the Agency Specifications?  
No \_\_\_\_\_ Yes \_\_\_\_\_
8. Have you included a map, with a mark showing the precise location of the proposed site?  
No \_\_\_\_\_ Yes \_\_\_\_\_
9. How many parking spaces are available for this site? \_\_\_\_\_ spaces
10. How many other businesses share the parking facilities? \_\_\_\_\_ Business(es)
11. What is the distance of the nearest regular parking space from the closest public entrance of the proposed agency site using the shortest route a person could safely walk?  
\_\_\_\_\_ feet
12. How many of the parking spaces are off-street (in a lot or garage)? \_\_\_\_\_ spaces

13. How many of the parking spaces are paved? \_\_\_\_\_ spaces
14. How many of the parking spaces are free (no charge for parking)? \_\_\_\_\_ spaces
15. How many of the parking spaces are reserved exclusively for the use of deputy registrar customers?  
\_\_\_\_\_ spaces

16. Does or will the site have air conditioning and heating ability to keep the temperature at or around 70 degrees Fahrenheit, and in no case during office hours ever under 65 degrees or over 75 degrees, except in cases of unavoidable emergencies, and during non-office hours between 50 degrees and 100 degrees?

No \_\_\_\_\_ Yes \_\_\_\_\_

State whether **EXISTING** \_\_\_\_\_ or **NEW** \_\_\_\_\_ installation.

17. Will the site be safe for agency employees and patrons and will it have security available?

No \_\_\_\_\_ Yes \_\_\_\_\_

***Submission of a floor plan of the site is mandatory. If original drawings are larger than 8-1/2 x 11 inches, you must also provide a reduced size copy that will fit on one or more 8-1/2 inch by 11-inch pages. All dimensions must be indicated on the drawing.***

18. Have you submitted a complete floor plan of the site, showing all dimensions of all the interior areas?

No \_\_\_\_\_ Yes \_\_\_\_\_

19. How much space is allocated for the customer area? \_\_\_\_\_ square feet

20. How much space is allocated for the employee service area? \_\_\_\_\_ square feet

21. How much space is allocated for the employee private area? \_\_\_\_\_ square feet

22. How much space is allocated for the storage area? \_\_\_\_\_ square feet

23. How much space is allocated for the restroom facilities? \_\_\_\_\_ square feet

24. How much space is allocated for uses not listed above? \_\_\_\_\_ square feet

25. Total square footage of agency? \_\_\_\_\_ square feet

**Submission of a counter plan is mandatory. If your original drawings are larger than 8-1/2 x 11 inches you must also provide a reduced size copy that will fit on one or more 8-1/2 x 11-inch pages. All dimensions, including those of the disability accessible counter, must be shown.**

26. Have you submitted a counter plan showing all dimensions of your counters?

No \_\_\_\_\_ Yes \_\_\_\_\_

27. Are your counters to be in accordance with RFP counter specifications?

No \_\_\_\_\_ Yes \_\_\_\_\_

28. Please indicate which of the two counter options from the Counter Specifications, RFP Appendix 2.1, you are choosing:

\_\_\_\_\_ A. Operator sit-down arrangement      \_\_\_\_\_ B. Operator stand-up arrangement

29. Will your customer service counter be a minimum of 46 inches and a maximum of 48 inches (or for incumbent deputies only, a maximum of 50 inches) high?

No \_\_\_\_\_ Yes \_\_\_\_\_

Actual Measurement: \_\_\_\_\_ inches

30. Do you agree to position all computers so they are adequately protected from damage by customers?

No \_\_\_\_\_ Yes \_\_\_\_\_

31. Will the total length of your equipment support counter be at least 60 inches for each terminal?

No \_\_\_\_\_ Yes \_\_\_\_\_

Actual Total Length (all counters): \_\_\_\_\_ feet

32. Will the depth of your regular counter be a minimum of 30 inches and a maximum of 36 inches?

No \_\_\_\_\_ Yes \_\_\_\_\_

Actual Depth: \_\_\_\_\_ inches

33. Will each 60-inch section of your counter be able to support at least 100 pounds of equipment?

No \_\_\_\_\_ Yes \_\_\_\_\_

34. Will you provide space for a vision screener at a reasonable height and conveniently located to the disabled-accessible counter?

No \_\_\_\_\_ Yes \_\_\_\_\_

35. Do you agree to provide a counter, acceptable to the BMV, to accommodate the digitized driver's license production equipment?

No \_\_\_\_\_ Yes \_\_\_\_\_

36. Will the disabled-accessible section of your counter be a minimum of 36 inches wide and have a knee hole opening of at least 27 inches clearance height, 30 inches wide and 19 inches deep?

No \_\_\_\_\_ Yes \_\_\_\_\_

Height: \_\_\_\_\_ Width: \_\_\_\_\_ Depth: \_\_\_\_\_

37. Will you have at least one terminal service area which will be readily accessible for use by individuals with a disability?

No \_\_\_\_\_ Yes \_\_\_\_\_

38. Will you provide space either on the counter or on one or more separate printer stands (additional space of at least 30 inches wide) for each of the printers in the agency?

No \_\_\_\_\_ Yes \_\_\_\_\_

39. How many signs do you propose for the location? \_\_\_\_\_ signs

40. List below the location and size (all dimensions) of your signs or proposed signs:

**Location of signs**

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

**Dimensions of signs**

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

41. **Form 5.3.** You must give satisfactory evidence that the facility you have proposed will be available for the operation of a deputy registrar agency during the entire period of the contract. If you will be leasing the facility from someone else, you must submit a fully executed (signed, notarized, and accepted) Lease Option, Form 5.3. If you own the property yourself, you must submit a copy of your deed along with a Lease Option, Form 5.3, giving yourself an option or a written statement that the property is available for use as a deputy registrar agency.

42. **Form 5.4.** Is the location for which you are proposing designated a DEPUTY PROVIDED PROXIMITY SITE in the Agency Specifications for that location?

\_\_\_\_\_ Yes. You must complete and submit with your proposal a fully completed Proximity Attachment, Form 5.4.

\_\_\_\_\_ No. Please do not submit the Proximity Attachment, Form 5.4.