

DEPUTY REGISTRAR
REQUEST FOR PROPOSALS

SECTION 5

(2023)

DEPUTY PROVIDED SITES

5.0 DEPUTY PROVIDED SITE CHECKLIST

Proposer's Full Legal Name _____

Location Number _____


Proposed Site Address _____

Proposer's Telephone Number (number where BMV staff can reach you) () _____

Proposal Number (*BMV use only*) _____

INSTRUCTIONS: You must submit one original of this form and all documents listed on this form **FOR EACH LOCATION YOU ARE PROPOSING**. If you fail to submit a complete set of originals **FOR EACH LOCATION**, you will not be evaluated for those locations.

ATTENTION: Incumbent deputy registrars applying for contracts at existing license agency locations designated as Deputy Provided Sites are not required to complete and submit all Section 5 forms if the site was approved under the previous RFP and if there have been no changes to the site since the last contract was approved and signed. Under this license agency site provision, form 5.0, page one (1) of form 5.1, and form 5.3 must be completed and submitted with all other required forms and documents.

FORM	DESCRIPTION		BMV
5.0	Deputy Provided Site Checklist (this form)		
5.1	Site Questionnaire (page 1 only if incumbent deputy registrar proposing existing license agency site)		
5.2	ADA Checklist (leave blank if incumbent deputy registrar proposing existing license agency site)		
5.3	Lease Option (required for all proposers, which includes incumbent deputy registrars)		
	– filled out, including complete address		
	– signed and notarized		
5.4	Proximity Attachment [for "Proximity" sites only] (leave blank if incumbent deputy registrar proposing existing license agency site)		
Proposer provided	Site Plan (leave blank if incumbent deputy registrar proposing existing license agency site)		
	– with 8½ x 11-inch formatting (SUBMITTED ELECTRONICALLY)		
	– with complete dimensions		
Proposer provided	Counter Plan (leave blank if incumbent deputy registrar proposing existing license agency site)		
	– with 8½ x 11-inch formatting (SUBMITTED ELECTRONICALLY)		
	– with complete dimensions		
Proposer provided	Map (leave blank if incumbent deputy registrar proposing existing license agency site)		
	– with site clearly marked		

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. Are you an incumbent deputy registrar applying for a contract at an existing license agency site that was approved under your last contract?
No _____ Yes _____
5. A. If you answered “No” to question number 4, skip to question number 7, and complete the information required for this form (5.1) and the remainder of Section 5 forms 5.2 through 5.4.
B. If you answered “Yes” to question number 4, have there been any changes to the site (interior and/or exterior to include parking areas, path of travel, and accessibility to individuals with disabilities, and signage)?
No _____ Yes _____
6. A. If you answered “No” to question number 5, please print and submit this along with form 5.3 for compliance with Section Five (5) requirements for this RFP and include it with the remainder of your required proposal documents.
B. If you answered “Yes” to question number 5, list the site changes in the space below and be specific with the description(s) of any changes that have been made. Include additional supporting documentation and attachments if needed, then stop here. Print and submit this page along with any other documentation and attachments for compliance with Section 5 requirements for this RFP and include it with all other required proposal documents.

7. Do you agree to comply with applicable Ohio Building Code requirements if construction or remodeling is necessary? No _____ Yes _____
8. 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 _____
9. In what county is this site located? _____
10. Is your proposed site within the geographic area specified in the Agency Specifications? No _____ Yes _____
11. If proposed location is **NOT** within the geographic area specified in the Agency Specifications, list proposed locations in preferred order of importance starting with “most” important.
12. Have you included a map, with a mark showing the precise location of the proposed site? No _____ Yes _____
13. How many parking spaces are available for this site? _____ spaces
14. How many other businesses share the parking facilities? _____ business(es)
15. 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
16. How many of the parking spaces are off-street (in a lot or garage)? _____ spaces
17. How many of the parking spaces are paved? _____ spaces
18. How many of the parking spaces are free (no charge for parking)? _____ spaces
19. How many of the parking spaces are reserved exclusively for the use of deputy registrar customers? _____ spaces

20. Do you agree to keep the agency at a reasonable temperature? No _____ Yes _____

21. 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 formatted larger than 8-½ x 11 inches, you must also provide a reduced size copy formatted at 8-½ x 11-inches. All dimensions must be indicated on the drawing. Copies of previous submissions will be accepted, provided there have not been any changes since the last proposal.

22. Have you submitted a complete floor plan of the site, showing all dimensions of all the interior areas? No _____ Yes _____

23. How much space is allocated for the customer area? _____ square feet

24. How much space is allocated for the employee service area? _____ square feet

25. How much space is allocated for the employee private area? _____ square feet

26. How much space is allocated for the storage area? _____ square feet

27. How much space is allocated for the restroom facilities? _____ square feet

28. How much space is allocated for uses not listed above? _____ square feet

29. Total square footage of agency? _____ square feet

Submission of a counter plan is mandatory. If original drawings are formatted larger than 8-½ x 11 inches, you must also provide a reduced size copy formatted at 8-½ x 11-inches. All dimensions, including those of the disability accessible counter, must be shown. Copies of previous submissions will be accepted, provided there have not been any changes since the last proposal.

30. Have you submitted a counter plan showing all dimensions of your counters? No _____ Yes _____

31. Are your counters to be in accordance with RFP counter specifications? No _____ Yes _____

32. 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

33. 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

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

No _____ Yes _____

35. 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

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

No _____ Yes _____

Actual Depth: _____ inches

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

No _____ Yes _____

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

No _____ Yes _____

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

No _____ Yes _____

40. 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: _____

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

No _____ Yes _____

42. 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 _____

43. How many signs do you propose for the location? _____ signs

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

Location of signs

Dimensions of signs

45. **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.

46. **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.

5.2 ADA CHECKLIST

AMERICANS WITH DISABILITIES ACCESSIBILITY REPORT

Answer all questions for the proposed facility as it now exists. If the site as it now exists is deficient in any respect, list in the spaces provided all improvements the landlord or you will make if you are awarded a deputy registrar contract. Be specific. You may use the possible solutions noted on this form or you may propose your own solutions. If the proposed facility is under construction, answer all questions regarding the facility after completion in accordance with the construction plans. If any question clearly does not apply, mark it "Not Applicable" or "N/A."

1. ACCESSIBLE ENTRANCE. People with disabilities should be able to arrive at a parking space accessible to persons with disabilities on the site, approach the building, and enter the building as freely as everyone else. At least one path of travel should be safe and accessible for everyone, including people with disabilities. "Accessible space" means a parking space which meets all Americans with Disabilities (ADA) requirements for disability (formerly "Handicapped") parking. "Accessible entrance" means an entrance to a building which meets ADA requirements for access by persons with disabilities, including persons who are in wheelchairs.

- A. Is there a path of travel from the disability accessible parking space to the agency entrance that does not require the use of stairs? No Yes
- B. Is the path of travel stable, firm, and slip-resistant? No Yes
- C. Except for curb cuts, is the path at least 36 inches wide? No Yes
- D. Do curbs on the pathway have curb cuts at least 32 inches wide at all necessary points? No Yes

If the answer is "no" to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to, adding a ramp, designing an alternative path of travel, repairing surfaces, widening the pathway, installing curb cuts, etc.

Improvements to be made:

- A. _____
- B. _____
- C. _____
- D. _____

2. RAMPS. Are ramps necessary to permit wheelchair access? Yes No

If "yes" complete the following information. If "no," skip forward to "Parking and Drop-Off Areas," next page.

A. Are the slopes of ramps no greater than 1:12? No Yes

Slope is given as a ratio of the height to length. 1:12 means for every 12 inches along the base of the ramp, the height increases one inch. For a 1:12 maximum slope, at least one foot of ramp length is needed for each inch of height.

B. Do all ramps longer than six (6) feet have railings on both sides? No Yes

5.2 ADA CHECKLIST

AMERICANS WITH DISABILITIES ACCESSIBILITY REPORT

- C. Are railings sturdy, and between 34 and 38 inches high? No _____ Yes _____
- D. Is the width between railings at least 36 inches? No _____ Yes _____
- E. Are ramps non-slip? No _____ Yes _____
- F. Is there a 5-foot-long level landing at the top of the ramp, at the bottom of the ramp, at switchbacks, if any, and at every 30-foot horizontal length of ramp? No _____ Yes _____

The ramp should rise no more than 30 inches between landings.

If ramps are necessary, and the answer is “no” to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to, lengthening ramp to decrease slope, relocating ramp, rebuilding ramp, adding railings, repairing or adjusting railings, adding non-slip surface materials, etc.

Improvements to be made:

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____

3. **PARKING AND DROP-OFF AREAS.** Are an adequate number of accessible parking spaces available (8 feet wide for car plus 5-foot striped access aisle)? No _____ Yes _____

For guidance in determining the appropriate number to designate, the table below gives the ADA requirements for new construction and alterations.

Total spaces	Accessible	Total spaces	Accessible	Total spaces	Accessible	Total spaces	Accessible
1 to 25	1 space	26 to 50	2 spaces	51 to 75	3 spaces	76 to 100	4 spaces

- A. Are 16-foot wide spaces, with 98 inches of vertical clearance, Available for lift-equipped vans? No _____ Yes _____
- At least one of every 8 accessible spaces must be van-accessible.*
- B. Are the accessible spaces closest to the accessible entrance? No _____ Yes _____
- C. Are the accessible spaces marked with the International Symbol of Accessibility (standard disability parking sign)? No _____ Yes _____

5.2 ADA CHECKLIST

AMERICANS WITH DISABILITIES ACCESSIBILITY REPORT

If the answer is “no” to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to, reconfiguring spaces by repainting stripes, moving the spaces, adding proper signs, etc.

Improvements to be made:

- A. _____
- B. _____
- C. _____

After improvements, if any, have been made, how far will it be between the nearest accessible parking space to the nearest accessible building or mall entrance using the most direct path a wheelchair can safely travel?

Measurement = _____ Feet

Is the nearest accessible space within two hundred (200) feet of the accessible entrance? No _____ Yes _____

Is the nearest accessible space within one hundred (100) feet of the accessible entrance? No _____ Yes _____

4. **ENTRANCE.** If there are stairs at the main entrance, is there also a ramp or lift, or is there an alternative accessible entrance? No _____ Yes _____

A. Do all inaccessible entrances have signs indicating the location of the nearest accessible entrance? No _____ Yes _____

B. Can the accessible entrance be used independently? No _____ Yes _____

C. Does entrance door have at least 32 inches clear opening (for double door, at least one 32-inch leaf)? No _____ Yes _____

D. Is there at least 18 inches of clear wall space on the pull side of the door, next to the handle? No _____ Yes _____

A person using a wheelchair needs this space to get close enough to open the door

E. Is the threshold level (less than 1/4 inch high) or beveled, up to 1/2 inch high? No _____ Yes _____

F. Are doormats 1/2 inch high or less with beveled or secured edges? No _____ Yes _____

G. Is the door handle no higher than 48 inches and operable with a closed fist? No _____ Yes _____

(The “closed fist” test for handles and controls: Try opening the door or operating the control using only one hand, held in a fist. If you can do it, so can a person who has limited use of his or her hands.)

5.2 ADA CHECKLIST
AMERICANS WITH DISABILITIES ACCESSIBILITY REPORT

If the answer is “no” to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles.

Improvements to be made:

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____
- G. _____

5. ACCESS TO ALL DEPUTY REGISTRAR SERVICES. Ideally, the layout of the building should allow people with disabilities to obtain goods or services without special assistance. Where it is not possible to provide full accessibility, assistance or alternative services should be available upon request.

- A. Does the accessible entrance provide direct access to the main floor, lobby, or elevator? No _____ Yes _____
- B. Are all public spaces on an accessible path of travel? No _____ Yes _____
- C. Is the accessible route to all public spaces and services at least 36 inches wide (except for interior doors)? No _____ Yes _____
- D. Are the aisles between chairs or tables at least 36 inches wide? No _____ Yes _____
- E. Are there spaces for wheelchair seating distributed throughout? No _____ Yes _____
- F. Do interior doors into public spaces have at least a 32-inch clear opening? No _____ Yes _____
- G. On the pull side of interior doors, next to the handle, is there at least 18 inches of clear wall space so that a person using a wheelchair can get close enough to open the door? No _____ Yes _____
- H. Can doors be opened without too much force? No _____ Yes _____
- I. Are door handles 48 inches high or less and operable with a closed fist? No _____ Yes _____
- J. Are all interior thresholds, if any, level (less than 1/4 inch high), or beveled, up to 1/2 inch high? No _____ Yes _____
- K. Is carpeting, if any, low-pile, tightly woven, and securely attached along edges? No _____ Yes _____

5.2 ADA CHECKLIST
AMERICANS WITH DISABILITIES ACCESSIBILITY REPORT

If the answer is “no” to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles.

Improvements to be made:

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____
- G. _____
- H. _____
- I. _____
- J. _____
- K. _____

SEATS, TABLES & COUNTERS

- A. Are the aisles between fixed seating (other than assembly area seating) at least 36 inches wide? No _____ Yes _____
- B. Is the top of the ADA table or counter between 28 and 34 inches high? No _____ Yes _____
- C. Are knee spaces at accessible tables at least 27 inches clearance height, 30 inches wide, and 19 inches deep? No _____ Yes _____

If the answer is “no” to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles.

Improvements to be made:

- A. _____
- B. _____
- C. _____

6. RESTROOM USAGE. Restrooms should be accessible to people with disabilities.

- A. Is there currently a restroom available for use by the customers of the agency? No _____ Yes _____
- B. Is at least one restroom (either one for each sex, or unisex) fully ADA accessible? No _____ Yes _____

5.2 ADA CHECKLIST
AMERICANS WITH DISABILITIES ACCESSIBILITY REPORT

- C. Is there adequate signage identifying the ADA restroom(s)? No _____ Yes _____
- D. Is the doorway of the ADA restroom at least 32 inches clear? No _____ Yes _____
- E. Are doors to the ADA restroom(s) equipped with accessible handles (operable with a closed fist), 48 inches high or less? No _____ Yes _____
- F. Can doors to the ADA restroom(s) be opened easily (5-pound maximum force)? No _____ Yes _____
- G. Does the entry configuration to the ADA restroom(s) provide adequate maneuvering space for a person using a wheelchair? No _____ Yes _____
- H. Is there a 36-inch-wide path to all fixtures in the ADA restroom(s)? No _____ Yes _____

If the answer is “no” to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles.

Improvements to be made:

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____
- G. _____
- H. _____

STALLS. The following questions apply to ADA restroom(s).

- A. Is the stall door operable with a closed fist, inside and out? No _____ Yes _____
- B. Is there a wheelchair-accessible stall that has an area of at least 5 feet by 5 feet, clear of the door swing, OR is there a stall that is less accessible but that provides greater access than a typical stall (either 36 by 69 inches or 48 by 69 inches)? No _____ Yes _____
- C. In the accessible stall, are there grab bars behind and on the side wall nearest to the toilet? No _____ Yes _____
- D. Is the toilet seat 17 to 19 inches high? No _____ Yes _____

If the answer is “no” to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles.

5.2 ADA CHECKLIST
AMERICANS WITH DISABILITIES ACCESSIBILITY REPORT

Improvements to be made:

- A. _____
- B. _____
- C. _____
- D. _____

LAVATORIES. The following questions apply to ADA restroom(s).

- A. Does one lavatory have a 30-inch-wide by 48-inch-deep clear space in front? No _____ Yes _____
- B. A maximum of 19 inches of the required depth may be under the lavatory. No _____ Yes _____
- C. Is the lavatory rim no higher than 34 inches? No _____ Yes _____
- D. Is there at least 29 inches from the floor to the bottom of the lavatory apron (excluding pipes)? No _____ Yes _____
- E. Can the faucet be operated with one closed fist? No _____ Yes _____
- F. Are soap and other dispensers and hand dryers within reach ranges and usable with one closed fist? No _____ Yes _____
- G. Is the mirror mounted with the bottom edge of the reflecting surface 40 inches high or lower? No _____ Yes _____

If the answer is “no” to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles.

Improvements to be made:

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____
- G. _____

5.3 LEASE OPTION

1. I (we)(owners' complete names) _____

of (owners' complete address) _____

City _____, State _____, Zip _____

HEREBY GRANT, upon due consideration, receipt of which is hereby acknowledged, this OPTION TO LEASE the following described property located in the State of Ohio, County of _____, (state whether city, village or township) _____ of _____ and commonly known as:

(property's address) _____

Suite _____ City _____, Ohio, Zip _____

to (proposer's name) _____

of (proposer's address) _____

City _____, Ohio, Zip _____

for the operation of a deputy registrar agency under contract with the Ohio Bureau of Motor Vehicles, and for no other purpose.

2. THE TERM OF THE LEASE, if executed, shall begin no later than the 25th day of June, 2023 and shall not terminate before the 24th of June, 2028.

3. THE TERM OF THIS LEASE OPTION shall begin on the date of its execution (signing) below and shall be held open until the 31st day of May, 2023.

4. THE PARTIES AGREE AS FOLLOWS:

A. The owners may, in their sole discretion, grant a similar lease option to operate a deputy registrar agency for the stated period of time to more than one proposer, provided that the premises are not subject to an existing lease for any portion of the term of lease as specified in paragraph 2, above.

B. If the owners have granted or hereafter grant an option to the same described real estate to another person or entity for the operation of a deputy registrar agency it is understood and agreed by owners and proposer that only the option granted to the person or entity awarded a contract by the Ohio Bureau of Motor Vehicles shall be entitled to exercise the relevant option.

C. Except as provided in paragraphs 4(A) and (B), above, the owners shall not grant an option, lease, or rental agreement to any other person during the term of this lease option specified in paragraph 3, above.

D. The lease under this option shall be on any terms as owners and optionee agree to contemporaneously with the granting of this option, provided that no such term shall be inconsistent with this lease option. Said terms, if any, are incorporated herein.

Owner(s)' signature(s): _____

Owner(s)' printed name(s): _____

STATE OF _____:

COUNTY OF _____:

The foregoing instrument was acknowledged before me on this _____ day of _____, 2023, by the owners, _____

Notary Public

Printed name of Notary Public: _____

My commission expires on _____

I hereby accept this option.

Date

Optionee signature, Deputy Registrar Proposer

5.4 PROXIMITY ATTACHMENT

Instructions

If the location you are submitting a proposal for is designated in the Agency Specifications as a deputy Provided **Proximity Site**, complete this form and include the original with your proposal. If it is designated as a Deputy Provided **Non-Proximity Site**, do not submit this form.

This document is for locations which the Registrar has designated for One-Stop Shopping to encourage the deputy registrar to provide a site located close to either an **existing** Driver's License Examination Station or an **existing** Clerk of Courts Title Office.

Bureau of Motor Vehicles (BMV) records indicate that a Driver's License Examination Station or a Clerk of Courts Title Office, or both, are situated within the boundaries of this location.

If there are both a Driver's License Examination Station and a Clerk of Courts Title Office within the boundaries of this location, equal consideration will be given for siting close to either one.

In evaluating the proposed deputy registrar site's proximity to either a Driver's License Examination Station (Exam Station) or a Clerk of Courts Title Office (Title Office), the Registrar intends to give the following consideration:

Highest Consideration: Highest consideration will be given to sites situated in the same building, in an adjacent building, within the same business district, or within the same shopping center as the **existing** Exam Station or Title Office.

Second Highest Consideration: Second highest consideration will be given to sites situated within approximately one-half mile, by most direct public-access route, to the **existing** Exam Station or Title Office.

Proposers shall not attempt to influence a Driver's Examination Station or a Clerk's Title Office to move to a different location at this time. No credit will be given during this RFP process to any proposer who proposes to relocate a Driver's License Examination Station or a Clerk's Title Office to be closer to the proposer's site.

QUESTIONNAIRE (SUBMIT ORIGINAL)

1. Proposer's name _____

2. Street address of proposed site _____

City _____ State _____ Zip _____

3. If the proposed site is close to an **existing** Driver's License Examination Station (Exam Station), what is the address of the Exam Station?

Is the proposed site located within the same building, an adjacent building, the same business district, or the same shopping center as the Exam Station?

No _____ Yes _____

Is it located within approximately one-half mile (0.5 miles) from the Exam Station?

No _____ Yes _____

If YES, specify distance to nearest one-tenth mile: _____

Also specify exact directions between the two facilities traveling in both directions (from the proposed site to the Exam Station and return):

4. If the proposed site is close to an **existing** Clerk of Courts Title Office (Title Office), what is the address of the Title Office?

Is it located within the same building, an adjacent building, the same business district, or the same shopping center as the Title Office?

No _____ Yes _____

Is it located within approximately one-half mile (0.5 miles) from the Title Office?

No _____ Yes _____

If YES, specify distance to nearest one-tenth mile: _____

Also specify exact directions between the two facilities traveling in both directions (from the proposed site to the Title Office and return):