# **OPERATIONAL EVALUATION (2024)**

Michael Roesch 47-E / 24047 Lorain County, Lorain 4340 Leavitt Rd., Unit K

FORM	DESCRIPTION	ок	NO
4.0	Operational Checklist – Maximum = 6 Points (enter points recorded on bottom of Form 4.0)	G	
4.1	Appointment of Agency Managers		
	A. Deputy to Work at Least Twenty (20) Hours Per Week	6	
	Proposed Work Hours Per Week	(5)	*
	B. Appointment of Manager and Assistant OR Acceptable Statement	3	0
4.2	Experienced Employees Summary		
	Gave Acceptable Statement OR Provided Names	(2)	0
4.3	Staffing and Personnel Calculation		
	A. Hours Recommended: 368 Proposed: 380	4	*
	B. Work Hours and Pay Calculated Correctly	(2)	0
	C. Meets Minimum Wage Requirement	00	
	(2024 Ohio Minimum Wage Rate = \$7.25 or \$10.45 Per Hour)	U	*
4.4	Start-Up Costs Calculation		
	A. Adequate and Accurate Personnel Costs	(3)	0
	B. Adequate and Accurate Site Preparation Costs	<b>(2)</b>	0
	C. Adequate and Accurate Rental Payments	0	0
	D. Total Required: \$24,738.00 Deposit (Form 3.4): \$40,086.68	6	*
4.5	Deputy Registrar Contract	-	
	A. Filled Out Completely and Properly	9	0
	B. Signed and Properly Notarized	(3)	0
NOTE: Scor	OPERATIONAL EVALUATION POINTS (Max. 40 Points) e indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract	40 continge	ncy.
Comments	S.'		
Evalu	ators' signatures Printed names	Date	
			-
(1)	What a. Jungle Robert A. Fragale	3/3	8/24
(2)	•		
\_/			

# **PAYROLL COMPARISON - 2024**

# **Proposer Name: Michael Roesch**

Evaluator Printed Name:	Evaluator Printed Name:	Robert	A.	Fragale	
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	Loc. 1 47-E	Loc. 2	ocation N Loc. 3	Loc. 4	Loc. 5	Loc. 6
Highest Rate	#15					
Lowest Rate	414				-	
Number of Hours Recommended	268		·*************************************	***************************************		
Number of Hours Proposed	360			*************		5-100 / Strands
Total Monthly Wages	13,988	-XX111810	22 N 14 N 73 N 2 N 2 N 2 N 2 N 2 N 2 N 2 N 2 N 2 N	************		

# PERSONAL EVALUATION (2024)

Michael Roesch 47-E / 24047 Lorain County, Lorain 4340 Leavitt Rd., Unit K

Evaluation Team Number:  Location(s) Proposed: (#1) 47-E  Proposed as 2 <sup>nd</sup> Location  Verify Proposer's Full Name: (#2) Michael Roesch  Proposer's County of Residence (NPC Operation): (#4)  Verify Proposer's Driver's License Number: (#6)  Proposing as Minority: (#9) Yes No
Proposing as: (#10) Individual K Clerk of Courts Co. Auditor Nonprofit Corp.
SCORING SUMMARY
FORM 3.0, PERSONAL CHECKLIST  PERSONAL EVALUATION, Page 2  BUSINESS AND EMPLOYMENT EXPERIENCE, Page 3  PERSONAL EVALUATION, Page 5  PERSONAL EVALUATION, Page 6  PERSONAL EVALUATION, Page 7  PERSONAL EVALUATION, Page 8  (Max. 16 Points): 55  (Max. 55 Points): 100  (Max. 100 Points): 100  (Max. 28 Points): 17  (Max. 17 Points): 17  (Max. 27 Points): 17  (Max. 15 Points): 15
TOTAL POINTS (Max. 258 Points): 350
Comments:
Evaluators' Signatures  (1) Robert A. Fragale  (2)

	PERSONAL EVALUATION	ок	NO
1.	Proposer does not and will not hold a PROHIBITED elective public office other than County Clerk of Courts or County Auditor? (#11 & 12)	(5)	*
2.	Proposer does not hold an overlapping deputy registrar contract? (#13)  If contract overlaps, what is the expiration date of the contract?	60	0
3.	Proposer is not a prohibited relative of a current deputy registrar? (#14, 15 & 16)	(5)	*
4.	Proposer is not a prohibited relative of an ODPS employee, or (if a relative) proposer has either been a deputy registrar continuously since January 1, 1992, or the ODPS employee became employed after the proposer was first appointed deputy registrar? (#17)	<b>(5)</b>	*
5.	Proposer is not a State of Ohio employee or will resign? (#19)	<b>(5)</b>	*
6.	Proposer is not an active insurance agent or is nonprofit? (#20)	(5)	*
7.	Proposer states no criminal conviction within the last 10 years? (#21)	(5)	*
8.	Proposer owes no local, state, or federal delinquent taxes, social security payments, workers' compensation premiums or mandatory contributions? (#22)	<b>(5)</b>	*
9.	Proposer agrees to maintain acceptable business liability insurance in accordance with Ohio Revised Code section 4503.03(C)? (#23)	<b>(5)</b>	*
10.	Proposer can meet bond requirements? (#24 and acceptable proof)	(5)	*
11.	Acceptable educational information OR nonprofit corporation? (#25)	6	0
12.	Proposer has computer training or experience? (#26)	5	0
NO	PERSONAL EVALUATION POINTS, Page 2 (Max. 55 Points).  TE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract continue to the contract contract contract continue to the contract		<u>)</u>
Com	nments:		_

# BUSINESS AND EMPLOYMENT EXPERIENCE VERIFICATION Verified Person called: at telephone ( Amherst Deputy Registrar LLC Relationship: Verified experience as: Deputy Registrar Agency Owner (50) \_\_\_\_\_ Other Business Owner (34) \_\_\_\_\_ Manager or Supervisor (25) \_\_\_\_\_ Deputy Registrar Employee (23) \_\_\_\_\_ Other Employee (20) \_\_\_\_\_ Hours per week: 36 From (date): 9/13 To (date): Present Length: 10.5 years Verified Hours 36 = Factor 1 x Years 10.5 x Points 25 = 262.5 Person called: \_\_\_\_\_\_ at telephone ( ) \_\_\_\_\_ Verified experience as: Deputy Registrar Agency Owner (50) \_\_\_\_\_ Other Business Owner (34) \_\_\_\_\_ Manager or Supervisor (25) \_\_\_\_\_ Deputy Registrar Employee (23) \_\_\_\_\_ Other Employee (20) \_\_\_\_\_ Hours per week: \_\_\_\_\_ From (date): \_\_\_\_\_\_ Length: \_\_\_\_\_\_ Verified Hours \_\_\_\_\_ = Factor \_\_\_\_ x Years \_\_\_ x Points \_\_\_ = Person called: \_\_\_\_\_\_ at telephone ( ) \_\_\_\_\_\_ Verified experience as: Deputy Registrar Agency Owner (50) \_\_\_\_\_ Other Business Owner (34) \_\_\_\_\_ Manager or Supervisor (25) \_\_\_\_\_ Deputy Registrar Employee (23) \_\_\_\_\_ Other Employee (20) \_\_\_\_\_ Hours per week: From (date): \_\_\_\_\_ Length: \_\_\_\_\_ Verified Hours \_\_\_\_\_ = Factor \_\_\_\_ x Years \_\_\_ x Points \_\_\_ = \_\_\_\_

## **BUSINESS AND EMPLOYMENT EXPERIENCE CALCULATION**

1.0 x

50

13. DEPUTY	REGISTRAR AGEN	CY OWN	EK	=xpe	erience	e, Form 3	3.2				
ITEM AGENO	Y/COMPANY	НО	URS	= F/	ACTOF	X YEARS	х	POINTS	HS.	SCORE	VERIFIED
Α.		#	NA	=	1.0	Χ	Х	50	=		

# NA =

C. Subtotal of 13-A, 13-B & 13-C =

14. OTHER BUSINESS OWNERSHIP Experience, Form 3.2

ITEM	AGENCY/COMPANY	нои	RS = FAC	TOR X YEA	RS X F	POINTS	=	SCORE	VERIFIED
Α.		#	=	Х	Х	34	=		
В.		#	=	Х	X	34	=		
C.		#	=	Х	×	34	==		
		H TANII	Subtota	of 14-A,	14-B &	14-C	=	manual frask	

15. SUPERVISORY / MANAGEMENT (ANY BUSINESS - INCLUDING DR) Experience, Form 3.2

ITEM AGENCY/COMPANY	HOURS		FACTOR X	YEARS	x	POINTS	=	SCORE	VERIFIED
A. Amherst Deputy Registrar LLC	#36	=	X	10.5	Х	25	=	262.5	
В.	#	=	×		Х	25	=		
C.	#	=	×		Х	25	=		
	S	ubt	otal of 1	5-A, 15	-B	& 15-C	= [	261.5	

Total DR, Ownership and/or Management #13-15 (Max. 100 Points) = Joo

16. DEPUTY REGISTRAR EMPL ITEM AGENCY		AND THE RESERVE	TOR X YEA	THE REAL PROPERTY.			SCORE	VERIFIED
A.	#	=	X	X	23	=		
B.	#	=	Х	X	23	=		
C.	#	=	X	X	23	=		
D.	#	=	X	×	23	=		
	Subt	otal of 16	-A, 16-B,	16-C 8	16-D	=		

lotal DR Employment Experience #16 (Max. 90 Points) =

TEM AGENCY/COMPANY	HOUF	RS = FAC	TOR X YEA	RS X	POINTS	\$ =	SCORE	VERIFIED
A.	#	=	Х	X	20	=		
B.	#	=	Х	х	20	=		
C.	#	=	Х	X	20	=		
D.	#	=	Х	Х	20	=		
	Subtotal of	Lines 17	'-A, 17-B,	17-C &	17-D	=		

ENTER LARGEST OF TOTALS [13-15 (100 pts.), 16 (90 pts.), or 17 (80 pts.)] = 100

		PERSONAL EVALUATION	ОК	NO
18.	Fo	rm 3.3 – Customer Service Experience		
	reg	d proposer provide acceptable list of ideas to improve customer service at a deputy gistrar agency or provide an example of something done as part of a job or business improve services for customers?	0	0
19.	For	m 3.4 – Start-Up Cost Funds On Deposit (not required for Auditors or Clerks of Cou	ırts)	
	A.	Are funds in acceptable financial institution and verified with bank/teller stamp?	(5)	*
	В.	Are funds in proposer's or proposer's business name or joint with spouse?	(3)	*
20.	For	m 3.5 – Political Contributions Report (not required for Auditors or Clerks of Courts)		
	Did (Fo	proposer mark "NO" for every category, every year? r Nonprofit Corporations, evaluate both Corporation's and CEO's Form 3.5)	<b>⑤</b>	*
21.	Fa	rm 2.6. Dorgonnal Policy Cymrae		
21.		rm 3.6 – Personnel Policy Summary	ina:	
	<u>A.</u>	es proposer agree to provide/maintain a written personnel policy covering the follow Hiring employees with deputy registrar agency experience?	ring. T	
	B.	Equal Employment Opportunity?	1	
	C.	Employee training by the deputy registrar?		
	D.	Participation in BMV provided training?	-	
	Ē.	Evaluation of employee performance?	1	
	F.	Grounds for discipline or dismissal/termination (list) which shall include drug and alcohol use?		
	G.	Progressive disciplinary steps?	(11)	0
	H.	Dress code with list of acceptable attire?		
	Ī.	Dress code with list of unacceptable attire?		
	J.	A policy for maintaining the professional appearance of all staff at all times?		
	K.	Fringe benefits (beyond those required by law or contract)?		
			-	
		PERSONAL EVALUATION POINTS, Page 5 (Max. 28 Points)	28	)
мот	E: S	core indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract cont	ingency	

Comments:	

ŢŒ	PERSONAL EVALUATION	ОК	NO
22.	Form 3.7 – Security Plan Summary - Did proposer agree to provide:		
	A. An electronic alarm system? (Mandatory)		
	B. Alarm system monitored 24 hours, off-site? (Mandatory)		
	C. Alarm system reports off-site if wires cut or tampered with? (Mandatory)		
	D. Adequate alarm monitored panic/hold-up buttons? (Mandatory)	_	
	E. Motion detectors connected to alarm system? (Mandatory)		
	F. Alarm monitored contacts on all exterior doors? (Mandatory)		
	G. Alarm monitored contacts on all exterior windows? (Mandatory)		
	H. Video recording camera surveillance system? (Mandatory)		
1	Safe or secured locking cabinet? (Mandatory)	(13)	*
	<ul> <li>J. Secured storage room with alarm monitored contacts on door(s) and window(s), applicable? (Mandatory)</li> </ul>	if	
	<ul> <li>K. Cross cut shredder to be made available to destroy customer copy records? (Mandatory)</li> </ul>		
	<ul> <li>All doors and all windows will be securely locked when license agency is closed (Mandatory)</li> </ul>	?	
	M. Smoke, fire, and carbon monoxide detection devices (Mandatory)?		
	N. Interior/Exterior motion activated security lights? (Suggested) - Check OK or NO	(G)	NO
23.	Form 3.8 - Facility Maintenance Plan Summary - Did proposer agree to provide:		
	A. Indoor/Outdoor maintenance and cleaning?	(0)	0
	B. Prompt snow and ice removal?	(1)	0
	C. Carpet and/or floor cleaning (if appropriate)?	(1)	0
	D. Repainting?	0	0
Nor	PERSONAL EVALUATION POINTS, Page 6 (Max. 17 Points)	17	
NOT	E: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract co	ontingency	
Com	ments:		
00111			_
			-
-			_

7		PERSONAL EVALUATION	ок	NO	
24.	24. Form 3.9 – Involved and Invested in Your Business				
	1.	How do you plan to manage, be responsible, and be accountable for this business at all times?	1	0	
	2.	How will you ensure that all laws, rules, guidelines and procedures are followed, at all times, specifically with regard to issuing and renewing driver licenses, identification cards, and vehicle registrations?	0	0	
	3.	What measures will you put in place to detect, deter, and prevent fraud?	(1)	0	
	4.	The Ohio Bureau of Motor Vehicles routinely issues new and/or revised policy and procedural changes through email broadcasts to the deputy registrars. How will you ensure that policies and procedures are communicated to the staff and followed on a daily basis?	1	0	
	5.	How will you demonstrate good leadership to your employees?	1	0	
	6.	How will you maintain a high level of professionalism each day in this business?	0	0	
	7.	How do you intend to recruit and retain high quality employees?	1	0	
	8.	How will you provide a safe, clean, and friendly place to do business?	1	0	
	9.	How would you deal with an irate customer?	1	0	
	10.	What training or advice do you, or will you, give to your employees for dealing with irate customers?	1	0	
	11.	How will you meet the expectations of the Ohio Bureau of Motor Vehicles?	0	0	
	12.	Why should the Ohio Bureau of Motor Vehicles consider you for a deputy registrar license agency contract?	1	0	
25.	For	rm 3.10(A) (B) or (C) – Affidavit of Individual, Auditor/Clerk of Courts or Nonprofit Co	rpora	tion	
		Did proposer submit proper affidavit without alteration and does it appear to be complete, accurate, and truthful?	3	*	
	B.	Is it the affidavit duly signed and notarized?	2	*	
26.	Lo	cal Law Enforcement Report / Articles of Incorporation (AOI)			
	Α.	No disqualifying convictions for individual / AOI for nonprofit corporation?	3	*	
	B.	No convictions (except minor traffic) / AOI for nonprofit corporation?	2	0	
27.		CI / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation	<b>(5)</b>	*	

PERSONAL EVALUATION POINTS, Page 7 (Max. 27 Points) <u>37</u>

	PERSONAL EVALUATION	ОК	NO
28.	Credit Report (issued in 2024) / Certificate of Good Standing for Nonprofit Corporation *Credit Reports are not required for County Auditors and County Clerks of Courts	1	
	A. Credit report submitted contains credit score?	0	0
	B. No tax liens (state or federal)?	3	0
	C. No judgments for the past 36 months?*	3	0
	D. *No bankruptcy filed or trusteeship imposed for the past 36 months?	<b>②</b>	0
	E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?	2	0
	F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?	(1)	0
	* Exclude minor medical judgments and disputed items with good cause explanation.		
29.	The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)	2	0
	PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)	15	•(
NOT	E: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract conti	ingency	*
Comr	ments:		<u> </u>
			_
			_
-			_
# 2			_

#### 3.0 PERSONAL CHECKLIST

Proposer's Full Legal Name IVIICITAET

Michael Roesch

<b>Proposer Nun</b>	nber ( <i>BMV use only</i> )	
Troposer riun	noci (DMI noc omy)	

<u>INSTRUCTIONS:</u> You must submit one original of this form and all documents listed on this form as appropriate based on your status as a proposer (individual, county auditor, clerk of courts or nonprofit corporation). Even if you are submitting more than one proposal, only one original of these forms are required. Please submit via email in accordance with the RFP instructions.

INDIVIDUAL	1	BMV	COUNTY AUDITOR OR CLERK OF COURTS	•	вил	NONPROFIT CORPORATION	1	BMV
Form 3.0 Personal Checklist (this form)	<b>√</b>		Form 3.0 Personal Checklist (this form)			Form 3.0 Personal Checklist (this form)		
Form 3.1 Personal Questionnaire	<b>√</b>		Form 3.1 Personal Questionnaire			Form 3.1 Personal Questionnaire		
Form 3.2 Business and Employment Experience	<b>√</b>		Forms 3.2 Business and Employment Experience			Forms 3.2 Business and Employment Experience		
Form 3.3 Customer Service Experience	<b>√</b>		Form 3.3 Customer Service Experience			Form 3.3 Customer Service Experience		
Form 3.4 Start-Up Cost Funds on Deposit	1		N/A	х	1	Form 3.4 Start-Up Cost Funds on Deposit		
Form 3.5 Political Contributions Report	✓		N/A	X	1	Form 3.5 Political Contributions Report Nonprofit Corporation		
N/A	х	1	N/A	Х	1	Form 3.5 Political Contributions Report Chief Executive Officer		
Form 3.6 Comprehensive Personnel Policy Agreement	✓		Form 3.6 Comprehensive Personnel Policy Agreement			Form 3.6 Comprehensive Personnel Policy Agreement		
Form 3.7 Security Plan Agreement	<b>√</b>		Form 3.7 Security Plan Agreement			Form 3.7 Security Plan Agreement		
Form 3.8 Facility Maintenance Plan Agreement	<b>√</b>		Form 3.8 Facility Maintenance Plan Agreement			Form 3.8 Facility Maintenance Plan Agreement		
Form 3.9 Involved and Invested in Your Business	✓		Form 3.9 Involved and Invested in Your Business			Form 3.9 Involved and Invested in Your Business		
Form 3.10(A) Affidavit of Individual	✓		Form 3.10(B) Affidavit of Auditor or Clerk of Courts			Form 3.10(C) Affidavit of Nonprofit Corporation		
2024 Credit Report	<b>V</b>		N/A	х	1	2024 Certificate of Good Standing		
2024 Local Law Enforcement Report	1		2024 Local Law Enforcement Report			Articles of Incorporation		
2024 WebCheck Receipt	1		2024 WebCheck Receipt			N/A	х	1
Pre-approval Statement	Ż		Current Bond with BMV added as Additional Insured			Pre-approval Statement for \$25,000 Bond		
for \$25,000 Bond	<b>, v</b>	<u> </u>	COUNTY AUDITOR OR CLERK OF COURTS		<u> </u>	NONPROFIT CORPORATION		

# 3.1 PERSONAL QUESTIONNAIRE

1.	Check the box underneath if proposing the location as a second site in addition to a current agency:  47-E
2.	Full legal name of proposer Michael Roesch
3.	Proposer's street address_
	City Rocky River State Ohio Zip code 44116
4.	County of residence (nonprofit corporation county of operation) Cuyahoga
5.	Daytime telephone (
6.	Proposer's driver's l
7.	Spouse's name (nonprofit corporation N/A) N/A
8.	Spouse's home street address (nonprofit corporation N/A) N/A
	City N/A State N/A Zip code N/A
9.	Are you proposing as the owner of a minority business enterprise (MBE)? No Yes
	. Proposer is (check one and follow instructions):
	An individual person. These forms are designed to be self-explanatory for Proposers proposing as individual persons. Answer all questions as they apply to you personally. If a question does not apply to you, enter "N/A" or "Not applicable;
	The Clerk of Courts of County;
	The County Auditor of County. Answer all questions as they apply to you and your position as Clerk of Courts or County Auditor. If a question does not apply to you or your position, enter "N/A" or "Not applicable;
	A nonprofit corporation (NPC). An officer or an authorized agent should answer all questions and sign all documents on behalf of the NPC. The answers must refer to the NPC itself and not to the individual officers, agents, or employees of the NPC, unless otherwise specified. Many questions are not applicable to nonprofit corporations. To assist your responses, we have marked those questions "NPC N/A" meaning we believe the marked question is not applicable to most nonprofit corporations. Please answer all other questions unless clearly inapplicable.

Form 3.1, Personal Questionnaire, Page 1 of 6 (2024)

11.	A.	Are you currently serving in Auditor, either by election or ap	than Clerk of Courts or Councommittee person)? (NPC N/A)					
					Yes		No_	$\checkmark$
	В.	If YES, in what elective office a	re you serving? _					
	C.	If YES, date that you plan to lear	ve this office? _					
12.	A.	Are you currently running for ar (including precinct committee pe	•		Yes	AMANAGA PARA PARA PARA PARA PARA PARA PARA P	No_	✓
	В.	If YES, what office?						
13.	A.	Are you currently a deputy regis	trar?		Yes	***************************************	No_	<b>✓</b>
	В.	If YES, on what date does your	contract expire?_					
	C.	If YES, have you served as a depsince January 1, 1992?	puty registrar con	tinuously	No		Yes_	
14.	A.	Is your spouse currently a deput	y registrar? (NPC	CN/A)	Yes		No_	$\checkmark$
	В.	If YES, on what date does your	spouse's contract	expire?				
		e following three questions, externing externing er, father-in-law, mother-in-law,						
15.	A.	Does any member of your extension N/A)	rently hold a					
		1772)			Yes	<b>√</b>	No_	
	B.	If YES, list their name, relation their contract expires here:	nship to you, wh	nether you sha	are the same	e house	hold, a	ınd date
	N:	ime	Relationship	Same	Household	Cor	itract	Expires
	KΑ	THLEEN ROESCH	MOTHER	Yes	No <b>v</b>		6-29-2	024
				Yes				
				Yes	No	···········		
				Yes	No	<u></u>		
16.	A.	To the best of your knowledge, submit a proposal in response to			ded family			
					Yes	<u> </u>	No_	

	B. If YES, list their name, relationship to ye	ou, and whether you share	e the same	household:
	Name KATHLEEN ROESCH	Relationship MOTHER	Y	Same Household es No _
			Y	es No es No
17	A. Is any member of your extended family Public Safety? (NPC N/A)	employed by any subdivi	sion of the	es No Ohio Department of No
	B. If YES, list their name, relationship to ye	ou, and the date they beca		
ļ	Name	Relationship		Employment Date
18.	A. Have you completed the Political Contri (NPC must submit one for NPC itself an	<del>-</del>		Yes <b>√</b>
	B. If "NO," are you applying as a Clerk of	Courts or County Auditor	r? No	Yes
	A. Are you an employee of the State of Ohi			No
	B. If "YES," will you resign, if appointed?		No	Yes
	Are you an insurance company agent, writin	ng automobile insurance?	Yes	No <b>✓</b>
	Has Proposer (including NPC and proposed of a crime punishable by death or impris			
	involving dishonesty or false statement?		Yes	
	As of the date of this certification do compensation contributions, social security the State of Ohio or any political subdivisio or locality within the United States?	payments, or workers' co	overdue ta ompensatio	ixes, unemployment n premiums either to
	or roundy within the Onton Duties.		Yes	No <b>/</b>

23. Is Proposer willing and able, if appolicy of business liability property hold the Department of Public Safe and the Registrar of Motor Vehicle Revised Code 4503.03(C)? (County)	y damage, a ty, the Directory es harmless	and theft insuranctor of Public Sa upon claims for	nce satisfactory to afety, the Bureau r damages in acc	o the Registrar and of Motor Vehicles,
Revised Code 4505.05(C): (County	Auditoi/CR	cik of Courts 14/2	No	Yes_
24. Is Proposer bondable as outlined in 4501:1-6-01(B)?	Ohio Admir	nistrative Code	No	Yes <b>✓</b>
25. Please provide the following information for				
High school diploma?			No	Yes
High school name ST. EDWA	ARD HI	GH SCHO	DOL	
City LAKEWOOD	State	OHIO		Zip 44107
City LAKEWOOD  College name OHIO UNIV	ERSIT	Y		
City ATHENS	State	OHIO		Zip 45701
City ATHENS  Major Business		Degree award	<sub>led</sub> Bachelor	Associates
College name			······································	
City	State		1	Zip
Major		Degree award	led	
26. Computer experience. Does Propcomputers? (Incumbent deputy renonprofit corporations, this question the nonprofit corporation's activities	gistrars may n should be	y take credit fo	r operating BMV omputer systems	V computers. For

If "YES" please explain all computer experience in detail.
BMV BASS SYSTEM all work related tasks that occur during the business day.
All reports needed in regards to the business day/Inventory, Agency Reports, End of Day Reports, Deposit Reports etc.
Online time clock I monitor and enter information into the program for the payroll department and post 401K
Quickbooks bookkeeping/monthly entries
MICROSOFT OUTLOOK GMAIL email business/personal, pay utility bills, Ohio Turnpike audits, zoom calls
MICROSOFT EXCEL Spreadsheets for biweekly schedules
MICROSOFT WORD All correspondence business related

27. Please provide the requested information for three persons we can contact by telephone during daytime business hours and who will serve as a character reference for you. Do not list relatives, political contacts, or employees of the Department of Public Safety (including BMV). If we are unable to contact at least one person or that person is unable to serve as a character reference, you may be evaluated unfavorably. Nonprofit corporations should list references who are familiar with the nonprofit corporation's activities.



Form 3.1, Personal Questionnaire, Page 5 of 6 (2024)

28. Employment, management, supervisory, and business experience. Each Proposer's experience is one of the most important factors to be considered in the award of deputy registrar contracts. For the purposes of this RFP, experience gained prior to the year 1990 will not be evaluated or considered. Please provide a professional resume, in chronological order (no earlier than 1990), the positions you have held. If the position you held in 1990 was one you started before 1990, you may list that position and the date you actually started on your submitted resume. If you did not hold any position in 1990, please begin with the first position you held after 1990. If applying as a NPC, please provide a description of the fundraising, program, and charitable functions of the nonprofit corporation.

# FORM 3.2(A) BUSINESS OWNERSHIP EXPERIENCE FORM 3.2(B) MANAGEMENT AND/OR SUPERVISORY EXPERIENCE FORM 3.2(C) EMPLOYEE EXPERIENCE

#### **Instructions**

It is important that you supply complete and accurate information about all relevant business ownership, management, supervisory, and employment experience so that the BMV will be able to verify that experience from independent sources. Generally, proposers receive the most consideration for service as a deputy registrar, second most consideration for service as a business owner, third most consideration for service as a manager or supervisor, fourth most consideration as a deputy registrar employee without management experience, and least consideration for other employment experience without any supervisory or management experience. Be sure to include as much detailed experience possible within the submitted professional resume.

<u>Nonprofit corporations</u> must report only the businesses and activities conducted by the nonprofit corporation itself on Form 3.2(A) Business Ownership Experience. If the nonprofit corporation has operated a deputy registrar agency, that information should be entered and submitted on one Form 3.2(A) Business Ownership Experience. Any other business activities (fundraising, charitable activities, etc.) should also be entered and submitted on a separate 3.2(A) Business Ownership Experience. Use a separate Form 3.2 for each separate business activity performed by the NPC and a separate Form 3.2(A) for each separate business activity performed by the NPC.

Form 3.2(A) Business Ownership Experience. Deputy registrars, nonprofit corporations, county auditors, clerks of courts, and individuals should use this form to report on businesses actually owned and operated by them.

Form 3.2(B) Management and/or Supervisory Experience. Individuals, county auditors, and clerks of courts should use this form to report management and supervisory experience performed by them. Service as a county auditor or clerk of court qualifies as management and supervisory experience.

Form 3.2(C) Employee Experience. Individuals, county auditors, and clerks of courts should use this form to report all other employment that did not include management or supervisory authority.

# 3.2(B) MANAGEMENT AND/OR SUPERVISORY EXPERIENCE

**Instructions.** Please fill out one of these forms 3.2(B) for each separate management or supervisory job you have held. Do not use this form 3.2(B) for business ownership or regular employee positions. Use a separate form 3.2(B) for each management or supervisory position that you have held. **Please make additional copies of this form as necessary**.

Proposer's name Mich	ael Roesch	Company name Amhers	st Deputy Registrar LLC
Company address 434	0 Leavitt Rd. Unit K	City Lorain	
State Ohio	Zip 44053	Telephone ( 440 )	244-5445
Type of business (deput	ty registrar, retail grocery, etc	e.) Deputy Registrar	
Management/supervisor	ty duties	e. staff, employee hours, inventory for lice	
MANAGER OR SUPE	RVISOR - Job title: Manag	er	
<ul><li>2. Dates this position</li><li>3. Do/did you direct</li><li>4. Do/did you direct</li><li>If you answered to</li></ul>	on was held: From: month tly hire, evaluate, train, and d tly manage/supervise employ yes to question number 4, ho	Hours work  9 year 2013 To: month liscipline employees? No  ees on a daily basis? No  w many employees do/did you siness plan? No	
least one person to ver	ify this experience, you will strar employee, you may list	o can verify this experience. It not receive any credit for it.  BMV employees to verify that  State  Zip	(If you are a deputy

### 3.2(C) EMPLOYEE EXPERIENCE

**Instructions.** Please fill out one of these forms 3.2(C) for each and every separate job you have held as an employee. Do not use this form 3.2(C) for business ownership or jobs in which you had management or supervisory duties. Use a separate form 3.2(C) for each non-management and/or non-supervisory job held. *Please make additional copies of this form as necessary*.

Proposer's name Michael Roesch	Company name Harborside
Company address 27601 Westchester Pkwy.	City Westlake
State Ohio Zip 44145	Telephone ( 440 ) 871-5900
Type of business (deputy registrar, retail grocery, etc.	Retirement community, nursing care
and rehabilitation facility	
EMPLOYEE - Job title: Food service	
Hours worked weekly Job duties	food preparation and delivery
Dates of this employment: From: month 06 ye	ear 2007 To: month 08 year 2008
Describe how and to what extent you provided high	quality customer service at this position:
Helped with the preparation of the food and the delive	ry in a timely fashion. The residents looked forward
to seeing me and getting to talk to me if only f	or a few minutes.
List at least one person, not a relative of yours, who least one person to verify this experience, you will registrar or deputy registrar employee, you may list B	not receive any credit for it. (If you are a deput
Name City	State Zip Daytime Phone
	( )

#### 3.3 CUSTOMER SERVICE EXPERIENCE

**Instructions**. Please give us a list of ideas you have to improve customer service at your deputy registrar agency. You will only receive full credit if you demonstrate sufficient customer service awareness.

A. This is a list of ideas I have to improve customer service at my deputy registrar agency if I am awarded a contract (Please be specific) and/or this is an example of something I have done as part of my job or business to improve services for my customers (Please be specific):

As a full time manager, I recognize the importance of good customer service. At our agency it is our mission to go the extra mile for our customers while promoting prompt, courteous and professional customer service. A doorbell has been installed for customers in need of assistance in entering the building. Handicapped customers are given the opportunity to move to the front of the line. Our agency has a front of the line pass which allows a customer to leave to retrieve the necessary documents needed for a transaction to be accomplished and not loose their place in line, all to be done within the same business day. When the agency has a wait time longer than 15 minutes, I assist the customers who are waiting inside the building to help determine if they have the necessary documents to complete their transaction. Our agency has an Express Lane counter for customers who have three or less vehicle registrations. All transactions are reviewed throughout the day. When we leave at the close of business we are confident that any and all issues have been addressed i.e. phone call to a customer or a letter being sent to a customer. All of these examples I would continue along with any new and improved ideas. I am a forward thinker and I am always looking for ways to improve our customer service and shorter customer wait time.

Form 3.3, Customer Service Experience (2024)

#### 3.5 POLITICAL CONTRIBUTIONS REPORT

#### **Instructions**

<u>Instructions</u> You must report on the following page whether you and your immediate family together gave more than \$100.00 to any political party or to certain individual candidates during any one of the last three calendar years and so far this year.

"Immediate family" means you, a spouse residing with you, and any dependent children. You must add together all contributions you, your spouse, and your dependent children made to each separate party or each separate candidate during each calendar year.

"Political party" means each separate political party and includes any political action committee (PAC) and any "continuing association" which are connected to that political party. "Political party" includes all levels of that party, federal, state, county, and local.

"Candidate" includes both the candidate and any of that candidate's campaign committees. You must report only for candidates for the following offices: Ohio governor, attorney general, secretary of state, treasurer of state, auditor of state, state senator or state representative. You are not required to report any contributions to federal, county, local, or judicial candidates.

"More than \$100.00" means any amount exceeding \$100.00, starting with \$100.01. A contribution of exactly \$100.00 or less is acceptable. Contributions include the value of any "in-kind" contributions.

County Auditors and Clerks of Court are exempt from this requirement and need not file this Report of Political Contributions.

Nonprofit Corporations must submit one report for the nonprofit corporation itself and one report for the chief executive officer (C.E.O.) who has, or will have, primary responsibility for the nonprofit corporation's operation of the deputy registrar agency. There is only one copy of this report in this package. Nonprofit corporations must make a second copy and submit one copy for the nonprofit corporation itself and one for the C.E.O. who will be responsible for the operation of the deputy registrar agency.

Name: VI	Michael Roesch		
Title (if offic	er of nonprofit corporation):		

(A nonprofit corporation must submit two separate reports: one for the nonprofit corporation itself, and one for its chief executive officer)

Did you and your immediate family together give more than \$100.00 to any of the following during any one of the years listed? You must place a check mark "\sqrt{"}" in the appropriate box, "yes" or "no" for each category and year separately.

RECIPIENT		JAN 1 - DEC 31 2022	JAN 1 - DEC 31 2023	2024 To Date
	Yes No	Yes No	Yes No	Yes No
Democratic Party including PACs and Associations	✓	<b>✓</b>	<b>✓</b>	<b>✓</b>
Republican Party including PACs and Associations	<b>✓</b>	✓	<b>✓</b>	<b>✓</b>
Any other Party including PACs and Associations	✓	✓	<b>✓</b>	<b>✓</b>
Governor, Candidate and Committee	1	<b>√</b>	<b>/</b>	<b>/</b>
Attorney General, Candidate and Committee	✓	1	<b>✓</b>	<b>1</b>
Secretary of State, Candidate and Committee	✓	✓	✓	<b>/</b>
Treasurer of State, Candidate and Committee	✓	✓	<b>4</b>	<b>✓</b>
Auditor of State, Candidate and Committee	✓	/	<b>/</b>	<b>\</b>
State Senator, Candidate and Committee	<b> </b>	<b>√</b>	<b>✓</b>	<b>✓</b>
State Representative, Candidate and Committee	1	<b>1</b>	<b>✓</b>	✓

Form 3.5, Political Contributions Report (2024)

#### 3.6 PERSONNEL POLICY

A comprehensive personnel policy must be readily available and presented upon request. Items needing covered within the agency's comprehensive personnel policy are listed below.

Do you agree to provide a comprehensive personnel policy, if requested, that covers the listed items?

No	Yes	V

### COMPREHENSIVE PERSONNEL POLICY MUST INCLUDE PROVISIONS FOR:

HIRING EMPLOYEES WITH DEPUTY REGISTRAR AGENCY EXPERIENCE				
EQUAL EMPLOYMENT OPPORTUNITY				
EMPLOYEE TRAINING BY THE DEPUTY REGISTRAR				
PARTICIPATION IN BMV PROVIDED TRAINING				
DOCUMENTED PERIODIC EMPLOYEE PERFORMANCE EVALUATIONS				
(ANNUAL AT A MINIMUM)				
LIST OF GROUNDS FOR DISCIPLINE OR DISMISSAL				
PROGRESSIVE DISCIPLINARY ACTION				
DRESS CODE WITH LISTS OF ACCEPTABLE AND UNACCEPTABLE ATTIRE				
POLICY FOR MAINTAINING PROFESSIONAL APPEARANCE				
FRINGE BENEFITS				

#### 3.7 SECURITY PLAN SUMMARY

If you are awarded a contract, you will be required to adopt a security plan to assure that agency employees, patrons, other citizens, equipment, and consigned inventory will be protected from harm (your plan should detail how you intend to address the items listed below).

If you are awarded a contract, do you agree to provide all of the following?



ELECTRONIC ALARM SYSTEM
ALARM SYSTEM MONITORED 24 HOURS, OFF-SITE
ALARM SYSTEM REPORTS OFF-SITE IF WIRES ARE CUT OR TAMPERED
ADEQUATE ALARM MONITORED PANIC/HOLD BUTTONS
MOTION DETECTORS CONNECTED TO ALARM SYSTEM
ALARM MONITORED DOOR CONTACT ON ALL EXTERIOR DOORS
ALARM MONITORED CONTACTS ON ALL EXTERIOR WINDOWS
VIDEO RECORDING CAMERA SURVEILLANCE SYSTEM
A SAFE OR SECURE LOCKING CABINET
A SECURED STORAGE ROOM WITH ALARM MONITORED CONTACTS ON DOOR(S) AND
WINDOW(S)
A CROSS CUT SHREDDER
SECURELY LOCK ALL DOORS AND WINDOWS WHEN OUTSIDE BUSINESS HOURS
SMOKE, FIRED, AND CARBON MONOXIDE DETECTION DEVICES
INTERIOR/EXTERIOR MOTION ACTIVATED SECURITY LIGHTS

Note: For Deputy Provided Sites, the deputy registrar shall install and maintain an approved alarm system. At BMV Controlled Sites, either the BMV or the deputy registrar will install an approved alarm system, which will be maintained by the deputy registrar.

#### 3.8 FACILITY MAINTENANCE PLAN SUMMARY

If you are awarded a contract you will be required to adopt a facility maintenance plan, including provisions for maintaining the deputy registrar agency premises. Your plan should detail how you intend to address the items listed below.

If you are awarded a contract, do you agree to be responsible for the following either on your own through your lease or sublease, or by separate contract:			
No Yes			
OUTDOOR BUILDING MAINTENANCE			
KEEP OUTDOOR AREA FREE OF TRASH AND DEBRIS			
PROVISION TO ASSURE PROMP SNOW AND ICE REMOVAL			
CLEANING INSIDE OF AGENCY INCLUDING EQUIPMENT			
PROVISION FOR INSIDE/OUTSIDE MAINTENANCE			
PROVISION FOR PROFESSIONAL CARPET/FLOOR CLEANING (MIN. OF ONCE A YEAR)			
PROVISION FOR REPAINTING AND/OR COSMETIC UPDATES			

#### 3.9 INVOLVED AND INVESTED IN YOUR BUSINESS

**Instructions:** Answer all of the following questions to the best of your ability. Please be concise and attempt to limit each answer to seventy-five (75) words or less. Include attachment(s) if more space is needed to answer any of the questions.

1. How do you plan to manage, be responsible, and be accountable for this business at all times?

I will be managing the agency on a full-time basis, but I also believe it is important to have other management staff on site. I would hire a manager, appoint an assistant manager, and I would also have two supervisors to assist the agency. At the close of the business day, all DL/ID and VR transactions will have been checked and reviewed. I have and will continue to do the end of day close of business which includes but is not limited to balancing of checks and monies, print reports and prepare state deposit. Having been working at this agency, I am confident in the way it is managed and would continue with the same format.

2. How will you ensure that all laws, rules, guidelines and procedures are followed, at all times, specifically with regard to issuing and renewing driver's licenses, identification cards, and vehicle registrations?

All DL/ID paperwork is verified and reviewed by the clerk and signed off by the Deputy/Manager and/or Supervisor. During the business day the Deputy/Manager and/or Supervisor reviews the DL/ID paperwork in order to make sure all laws, rules, and procedures were followed in accordance with the guidelines outlined by the Ohio Bureau of Motor Vehicles. Once this is done it is again reviewed in BASS. Vehicle registrations are reviewed by a supervisor daily. There is a daily audit of all transactions to make sure all guidelines and procedures are being followed.

3. What measures will you put in place to detect, deter, and prevent fraud?

Educating employees in fraud detection is essential and extremely important. Employees will stay current with fraud training. Our agency has been recognized for our exemplary work in this area. A security system has been installed at the agency with remote capabilities. Employees are aware of this feature and recognize that the agency can be viewed remotely, as well as have the ability to view archived video which is date stamped and times.

4. The Bureau of Motor Vehicles routinely issues new and/or revised policy and procedural changes through email broadcasts to the deputy registrars. How will you ensure that policies and procedures are communicated to the staff and followed on a daily basis?

Procedures, rules and laws are continuously changing within the Ohio Bureau of Motor Vehicles. Broadcasts are printed on a daily basis for all employees to read, sign and place in the Broadcast Book which remains on the employee counter for their use. If an email is received at the agency from the district office in regards to clarification on a procedure, it is printed and all employees are asked to read and sign. I would continue with these procedures.

5. How will you demonstrate good leadership to your employees?

Good leadership is listening, creativity, critical thinking, delegation, problem solving, decision making, relationship building, time management, adaptability, communication skills, empathy and team building. I will demonstrate good leadership by providing an atmosphere in which the employees know that I am available and approachable at all times. At our agency we encourage team work. If the staff needs help on the counter I will assist them in that regard. I will not ask them to do something that I am also not willing to do. I will show them respect, and in doing so will gain theirs. At the end of the day, I will thank them and let them know they are appreciated.

6. How will you maintain a high level of professionalism each day in this business?

Professionalism starts at the top which begins with me. I will lead by example and show my staff and customers that I have integrity; I have a positive attitude; I am accountable for my actions; I am a good communicator; I will follow all guidelines and procedures outlined by the Department of Public Safety and the Ohio Bureau of Motor Vehicles; I will meet deadlines and be empathetic; and I will show respect to my staff and customers.

7. How do you intend to recruit and retain high quality employees?

Retaining employees is accomplished by appreciation. Our agency is one of a positive atmosphere. We are a team and that shows on a daily basis from open to close. I will value my employees by providing them an atmosphere that allows them to succeed. Always acknowledging them at the end of the day with a thank you or I appreciate you goes a long way. On busy days, providing lunches outwardly shows appreciation for their hard work. A friendly work environment provides for better staff retention. Our staff is our best recruitment tool. They enjoy their job and do not have a problem letting people know. Posting positions has been another tool that has brought about positive results. Again, I would continue current work policies.

8. How will you provide a safe, clean and friendly place to do business?

Our staff maintains on a daily basis a clean, comfortable and well maintained agency for our customers. When there are slower business periods, the staff cleans the customer area along with the employee area. In doing so, if there is any equipment that needs to be addressed it would be brought to the attention of the deputy or myself so that we can secure the proper person to repair such item. We will make sure that each customer receives prompt, professional, friendly and courteous service. Taking the time to thank the customer is an important aspect of their experience. This agency is run very well and I would continue with current work policies.

9. How would you deal with an irate customer?

Irate customers are frustrated customers and can be challenging at times. Allow them to be heard. The employee must remain calm and professional at all times. Offer a solution to the situation if the policies and/or laws do not permit going forward with the transaction. If the situation is not resolved to the customer's satisfaction, ask if they would like to speak to the Deputy/Manager.

10.	What training or advice do you, or will you, give to your employees for dealing with irate customers?
	The advice I would give my employees is that they are to remain calm and professional. If the employee is unable to resolve the situation, they are to immediately excuse themselves and get management i.e. Deputy/Manager or Supervisor. More often than not, all the customer wants is to be heard and acknowledged. Work with them to problem solve the situation. Show them that you are trying to help them and that you care, in doing so that will usually defuse the situation.
11.	How will you meet the expectations of the Bureau of Motor Vehicles?
	I will follow all procedures and regulations as set forth by the Department of Public Safety, Bureau of Motor Vehicles and the Ohio Revised Code. I will strive to provide friendly and efficient service to our customers. I will meet deadlines in regards to deposits, inventory, Morphotrust, etc. I will keep my skills and knowledge up-to-date. As a Manager I have attended the Roundtables, and each year I attend a seminar that relates to the management of an office i.e. discussing current laws in regards to any and all aspects of running a business, tax laws, state laws and federal laws, employee/employer rights in the workplace. I will continually make efforts to have the agency be as progressive as possible in all aspects.
12.	Why should the Bureau of Motor Vehicles consider you for a deputy registrar license agency contract
	I believe I have demonstrated over the last 10.5 years that I can and will take on any job and see it to completion with positive results. I am a multi-tasker and team player. When the current deputy is not there I am in charge and run the agency. If there are reports, inventory, Morphotrust, employee issues that need to be addressed I am charged with that duty. On the business side I have done payroll, paid utility bills, employee schedule, online time clock hours. I have the temperament and personality to deal with difficult customers which I have proven time and time again. I have involved myself within the community. I workout at the local gym, I have joined a golf league in Lorain, and a bowling league in Amherst. I believe supporting the City of Lorain and surrounding communities is important. I have a strong work ethic, and I am proud of the work that I have done to date.

Form 3.9, Involved and Invested in Your Business, Page 3 of 3 (2024)

3.10(A) AFFIDAVIT OF INDIVIDUAL (Not to be used by County Auditors, Clerks of Courts or Nonprofit Corporations)

Co	unty of :		
	ate of Ohio :		
I, _	Michael Roesch , being first duly sworn, depose and say that:		
1)	I am submitting my proposal for appointment as deputy registrar in my own individual capacity, and not as an agent, representative, partner, or business associate of any kind whatsoever of any other person or persons;		
2)	If appointed, I will serve as a deputy registrar in my own individual capacity, and will not act as an agent, representative, partner, or business associate of any kind whatsoever of any other person or persons;		
3)	If appointed as deputy registrar, I will not assign my deputy registrar contract, in whole or in part, nor any of my deputy registrar's responsibilities to any other person or persons without the advance written consent of the Registrar;		
4)	If appointed as a deputy registrar, I will fully comply with all requirements set forth by the Registrar. I will not serve as an office manager of any deputy registrar agency other than my own; nor will I permit any other deputy registrar, the spouse of any deputy registrar, or the parent, child, brother, or sister of any deputy registrar living in the same household as the deputy registrar to operate my deputy registrar agency, directly or indirectly. I understand that I may hire the spouse, parent, child, brother, or sister of any deputy registrar as an employee, provided that I maintain control of my deputy registrar agency;		
5)	To the best of my knowledge and belief, I am fully qualified to serve as a deputy registrar, and there is no provision of the Ohio Revised Code or the Ohio Administrative Code which would make me ineligible to serve as a deputy registrar; and,		
6)	I have caused to be prepared, have read, and take full responsibility for, all forms and documents submitted with this proposal. All information is true, accurate, and complete to the best of my knowledge and belief. This affidavit is submitted by me for the purpose of obtaining a deputy registrar contract.		
	gnature of proposer:		
Pri	nted/typed name of proposer: Michael Roesch .		
	vorn to and subscribed in my presence by the above namedMICHAEL_ ROESCH_		
on	this 17th day of January, 2024		
Nc	otary Public CARRIE L COVENDER		
Pri	nted name of Notary Public: Oricle Ovencler State of Ohio		
	v commission expires: Feb 25 2028 February 25, 2028		

## 4.0 OPERATIONAL CHECKLIST

Proposer's Full Legal Name	Michael Roesch
Location Number	
Proposer Number ( <i>BMV use d</i>	only)

<u>INSTRUCTIONS</u>: You must submit one original of this form and all documents listed on this form **FOR EACH SITE YOU ARE PROPOSING**.

FORM	DESCRIPTION	X BMV
4.0	Operational Checklist (this form)	✓
4.1	Appointment of Agency Managers	✓
4.2	Experienced Employees Summary	✓
4.3	Staffing and Personnel Costs Calculation	✓
4.4	Start-Up Costs Calculation Amount: \$24,738.00	_
4.5	Deputy Registrar Contract (2 pages only)	✓

## 4.1 APPOINTMENT OF AGENCY MANAGERS

Michael Roesch Proposer's name:	_ Location number: 47-E
(A) <u>DEPUTY REGISTRAR</u> : As deputy registrar, I agree to wo hours per week during the hours the agency is open to the entire term of the contract. I understand that the minimum is twenty (20) hours per week during the hours the agency twenty-hour requirement does not apply to County Aud nonprofit corps., or deputy registrars operating multiple loc	requirement for deputy registrars is open for business. This ditors/Clerks of Courts,
(B) OFFICE MANAGER: I understand and agree that I must another reliable person to serve as the office manager for manager must be scheduled to work at the agency at least during the hours the agency is open to the public for busine.  Appoint myself as the office manager and work during the hours the agency is open to the public for th	or the agency, and that the office st thirty-six (36) hours per week ess. It is my intention to: at least thirty-six hours per week or business.
six hours per week during the hours the agency is o	pen to the public for business.
(C) <u>ASSISTANT OFFICE MANAGER</u> : I understand and ag person to be responsible for the management of the agency agency office manager during the hours the agency is open	y in the absence of myself and the
(D) OTHER EMPLOYEES: I agree to maintain an accurate manager, assistant office manager, and all other employees as my own work schedule, on file and available for insp times. I also agree to notify the BMV in writing im- appointment of the office manager or assistant office ma- roster complete and current.	s and their work schedules, as well pection by BMV employees at all mediately of any changes in the
Deputy registrar (proposer) signature	Date: 1-19-24

## 4.2 EXPERIENCED EMPLOYEES SUMMARY

Prop	oser's nar	Michael Roesch	Location number: 47-E	
(A)	A) <u>HIRING EXPERIENCED EMPLOYEES</u> . I certify that if I am appointed as a deputy registrar under contract with the Registrar of Motor Vehicles, I will make every good faith effort to hire and retain qualified employees who have relevant experience working in a deputy registrar agency. I agree to make bona fide offers of employment at comparable wages and under comparable conditions to their most recent deputy registrar employment experience.			
(B)	B) CHECK WHICHEVER APPLIES:			
	I HAVE NOT BEEN A DEPUTY REGISTRAR OR DEPUTY REGISTRAR  EMPLOYEE. I have not yet identified any prospective employees who have relevant deputy registrar experience. However, if awarded a contract, I will make every reasonable effort to identify and hire, if possible, qualified employees who have relevant experience working in a deputy registrar agency. Please do not contact any deputy registrar employees until after you have been awarded a contract.  I AM OR HAVE BEEN A DEPUTY REGISTRAR OR DEPUTY REGISTRAR EMPLOYEE. I have identified the following persons to whom I will make a bona fide offer of employment at comparable wages and under comparable conditions to their present employment. (A deputy registrar or a proposer who has deputy registrar employment experience may list himself or herself here):			
		Name of Experienced Employee	Length of Experience	
		Michael Roesch	10.5 years	
		Kelly Flash	9 years	
		Kizzie Bellamy	20 years	
		Carrie Covender	16 years	
		see attached		
(C)	employe	stand that failure to hire properly qualified and these is grounds to withhold or terminate my deputy repeated and the property of the propert		
Doble	, .ve.st	Throbonary provincera		

Form 4.2, Experienced Employees Summary (2024)

# **4.2 EXPERIENCED EMPLOYEE SUMMARY (ATTACHMENT)**

Kathleen Roesch 11 years

Marjory Heidrich 16 years (sign language)

Melissa Latorre 12 years (bilingual)

Sherri McElheny 8 years

Sharon Smith 3 years

Velma Inman 5 years

Timothy Barth 1.5 years

#### 4.3 STAFFING AND PERSONNEL CALCULATION

Proposer's name:	Michael Roesch	Location number:	47-E
•		<del></del>	

<u>Instructions</u>. Use this form to project the number of hours the deputy registrar, office manager, assistant office manager, and all other experienced (if known) and/or new hire employees will work, the projected hourly wages paid, and the weekly and monthly payroll costs.

The deputy registrar shall be regularly scheduled and on duty at the license agency at least twenty (20) hours per week, during regular business hours. This twenty-hour requirement does not apply to nonprofit corps., county auditors/clerks of court, or deputy registrars operating multiple locations (assessed as received). The deputy registrar shall appoint a full-time office manager, who shall be either the deputy registrar or a full-time employee with responsibility for management of the agency. The office manager shall be regularly scheduled, and shall work at least thirty-six (36) hours per week during regular business hours. The deputy registrar shall also designate an assistant office manager who shall supervise the agency in the absence of the deputy registrar and the full-time office manager.

The projected total weekly work hours for the deputy registrar and all employees should equal or exceed the minimum staffing recommended for the Class Size Agency as prescribed in the Agency Specifications.

In accordance with the standards established by the Unites States Department of Labor, Wage and Hour Division; Ohio Constitution; and Ohio Department of Commerce; all license agency employees must be paid at least the current minimum wage rate of \$7.25 per hour by businesses with gross receipts of less than \$385,000 per year and \$10.45 per hour by businesses with gross receipts of \$385,000 or more per year.

The deputy registrar need not list any salary or wages for the deputy's own service as deputy registrar or as the office manager.

Caution. For deputy registrars who also serve as the office manager, be careful not to duplicate hours worked.

EMPLOYMENT POSITION	PROJECTEI HOURS PER WEEK	PROJECTED HOURLY RATE	PROJECTED WEEKLY PAY	PROJECTED MONTHLY PAY (weekly x 4)
Deputy Registrar	36	N/A	N/A	N/A
Office Manager (leave blank if the Deputy Registrar is also the Office Manager)	36	15.00	\$540.00	\$2,160.00
Assistant Office Manager	20	15.00	\$300.00	\$1,200.00
Experienced Employees  Total Number (combine Full-time & Part-time) = 8	188	14.00	\$2,632.00	\$10,528.00
New Hire Employees Total Number (combine Full-time & Part-time) =0	***************************************			
TOTA	LS 280	N/A	\$3,472.00	\$13,888.00

## 4.4 START-UP COSTS CALCULATION

Propo	ser's name:	Michael Roesch	Location number	47-E ::
costs	of beginning	g a deputy registrar business	V that you are financially abs. We need to know that yo te preparation, and site rental	u have enough
1.	PERSO	NNEL COSTS (FOUR	WEEKS)	
	Use Form	4.3 to calculate four (4) wee	ks' personnel costs for this lo	888.00
2.	SITE PE	REPARATION COSTS	S (AMORTIZED)	
	costs		ite, calculate and enter the a prepare the building for u llowing categories:	
	1.	<b>Building Modifications</b>	\$	
	2.	Counter Costs	\$	
	3.	Other Costs	\$ 3,000.00	
	4.	Total	\$ 3,000.00	
		l amortized over 60 month of ide line 4 by 60)	contract period = \$ 50.0	00
	Agei		Site, enter the information coocation. Do not change the	
3.	AGENC	Y RENTAL PAYMEN	TTS (3 MONTHS)	
		is is a Deputy Provided Stor lease this site.	ite, enter the actual amount	you will pay to
			Site, enter the estimated relite. Do not change the amount	
	One	month's rent: \$\\\_3,6	$\frac{00.00}{100.00} \times 3 = $ \$	300.00
тот	TAL STAI	RT-UP COSTS		
	[four weel site prepa	cs' personnel costs, plus one ration costs (2.A total amil Site amount), plus three mo	ount or 2.B BMV	738.00

# STATE OF OHIO DEPARTMENT OF PUBLIC SAFETY BUREAU OF MOTOR VEHICLES DEPUTY REGISTRAR CONTRACT – 2024

This Agreement	is made by a	nd betwe	een the Regis	strar of	Motor venicles, (Registrar,
herein), located Michael Roesch	l at 1970 We	est Broa	d Street, C		s, Ohio 43223-1102 and outy registrar, herein) whose
home mailing ad					
(City) Rocky Ri	ver		, Ohio (Zip)	44116	, to operate a deputy
registrar agency	, Location No.	47-E		, to l	be located as follows: in the
State of Ohio, C	ounty of Lora	in			
City/Village/Tov	vnship (indicate	which)	City	(	of Lorain
Street address:	4340 Leavitt R	d. Unit K			
(City) Lorain			, Ohio (Z	(ip) 440	053

WHEREAS, the Registrar of Motor Vehicles, pursuant to section 4503.03, section 4507.01, and other applicable sections of the Ohio Revised Code, wishes to appoint and contract the above named person as deputy registrar for the above referenced location;

WHEREAS, the above named deputy registrar wishes to accept this appointment and contract as deputy registrar;

# NOW, THEREFORE, IT IS AGREED AS FOLLOWS:

- 1. The Registrar hereby appoints the above named person as a deputy registrar subject to the 2024 Deputy Registrar Contract Terms and Conditions which are incorporated herein by reference;
- The above named person hereby accepts appointment as a deputy registrar subject to the 2024 Deputy Registrar Contract Terms and Conditions incorporated herein by reference;
- 3. The term of this appointment and contract shall begin on the 30<sup>th</sup> day of June, 2024, and shall end on the 30<sup>th</sup> day of June, 2029, unless otherwise terminated as provided herein;

# Form 4.5, Deputy Registrar Contract (2024)

4. The deputy registrar is appointed and accepts appointment in the capacity of [state whether: "an individual," "County Auditor for (specify county)," "Clerk of Courts for (specify county)," or "a nonprofit corporation"]:  INDIVIDUAL
5. The Deputy Registrar certifies that he or she has read, understands, and hereby agrees to all of the 2024 Deputy Registrar Contract Terms and Conditions incorporated herein.  Deputy Registrar signature  1-19-24  Date
STATE OF OHIO :
COUNTY OF LOWAIN :
Before me, a notary public in and for said county and state, personally appeared the above
named MICHAEL ROESCH, who acknowledged that he or she did
sign the foregoing instrument and that the same is his or her free act and deed.
IN WITNESS WHEREOF I have hereunto set my hand and official seal, this
BY: REGISTRAR OF MOTOR VEHICLES
Done at Columbus, Ohio, on

# DEPUTY REGISTRAR REQUEST FOR PROPOSALS

**SECTION 5** 

(2024)

**DEPUTY PROVIDED SITES** 

#### 5.0 DEPUTY PROVIDED SITE CHECKLIST

Proposer's Full Legal Name	Michael Roesch	_
Location Number 47-E		
Proposed Site Address 434	0 Leavitt Road Unit K	
Proposer's Telephone Numbe	r (number where BMV staff can reach you) (	
Proposal Number (BMV use o	nly)	

<u>INSTRUCTIONS:</u> 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.

<u>ATTENTION:</u> Proposers 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 a 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	1	BMV
5.0	Deputy Provided Site Checklist (this form)	<b>\</b>	
5.1	Site Questionnaire (page 1 only if proposing existing license agency site)	1	
5.2	ADA Checklist (leave blank if proposing existing license agency site)		
5.3	Lease Option (required for all proposers, which includes incumbent deputy registrars)	✓	
	filled out, including complete address	<b>√</b>	:
	signed and notarized	1	
5.4	Proximity Attachment [for "Proximity" sites only] (leave blank if proposing existing license agency site)		
Proposer provided	Site Plan (leave blank if proposing existing license agency site)		
	with 8½ x 11-inch formatting (SUBMITTED ELECTRONICALLY)     with complete dimensions		
Proposer provided	Counter Plan (leave blank if proposing existing license agency site)		
•	<ul> <li>with 8½ x 11-inch formatting (SUBMITTED ELECTRONICALLY)</li> <li>with complete dimensions</li> </ul>		
Proposer provided	Map (leave blank if proposing existing license agency site)		
	with site clearly marked		

Form 5.0, Deputy Provided Site Checklist (2024)

# 5.1 SITE QUESTIONNAIRE

1. Location Number for which you are proposing (from Agency Specifications): 47-E						·····
	Stre	et address of site 4340 Leavitt Road Unit K				
			, Ohio, Zip (	Code _	4405	53
2.	Is th	ne site you are proposing currently in operation as a deputy reg				
			No		Yes	<b>✓</b>
3.		you intend to perform construction or remodeling to prepare t	his site for op	peratio	n under	a new
	dep	uty registrar contract?	No 🗸		Yes_	
4.	, , , , , , , , , , , , , , , , , , ,					
	was approved under a previous contract?		No		Yes_	
5.	A.	If you answered "No" to question number 4, skip to question information required for this form (5.1) and the remainder of				
	B.	If you answered "Yes" to question number 4, have there been (interior and/or exterior to include parking areas, path of travely the distribution and rimage)?				riduals
		with disabilities, and signage)?	No <u></u> ✓		Yes_	
6.	A.	If you answered "No" to question number 5, please print and for compliance with Section Five (5) requirements for this R remainder of your required proposal documents.				orm 5.3
	В.	If you answered "Yes" to question number 5, list the site charspecific with the description(s) of any changes that have been supporting documentation and attachments if needed, then sto along with any other documentation and attachments for comrequirements for this RFP and include it with all other require	made. Included the made. Print pliance with the made.	de addi and su Section	itional ıbmit th n 5	

#### 5.3 LEASE OPTION

I (we)(owners' comple	te names) Victor	Nardini	
of (owners' complete a	ddress)		
City Lorain		, State Ohio	Zip 44053
HEREBY GRANT, up	on due consideration	n, receipt of which is he	ereby acknowledged, this OPTION
TO LEASE the fol	lowing described		the State of Ohio, County of city, village or township)
City		rain	and commonly known as:
(property's address)	340 Leavitt Ro	oad	
<sub>Suite</sub> K	<sub>City</sub> Lorain		, Ohio, Zip 44053
to (proposer's name)	<i>I</i> lichael Roescl	h	
of (proposer's address)			
City Rocky River			, Ohio, Zip 44116
for the operation of	a deputy registrar a	ngency under contract	with the Ohio Bureau of Motor
Vehicles, and for no of	her purpose.		

- 2. THE TERM OF THE LEASE, if executed, shall begin no later than the 30th day of June, 2024 and shall not terminate before the 30th of June, 2029.
- 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, 2024.

#### 4. THE PARTIES AGREE AS FOLLOWS:

1.

- 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.

1

1

Owner(s)' signature(s):
Owner(s)' printed name(s): Victor Nardini
STATE OF OHIO:  COUNTY OF LOCAIN:
The foregoing instrument was acknowledged before me on this day of
The foregoing instrument was acknowledged before me on this
Mal
Notary Public  Printed name of Notary Public: Carrie Covender  CARRIE L COVENDER  Notary Public State of Ohio
My commission expires on Feb 25 2028  State of Ohio My Comm. Expires February 25, 2028
I hereby accept this option.

Form 5.3, Lease Option, Page 2 of 2 (2024)

Optionee signature, Deputy Registrar Proposer