## OPERATIONAL EVALUATION (2024)



OPERATIONAL EVALUATION POINTS (Max. 40 Points) 40
NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.
Comments:ㄴ. 3 B - listed molal hours is 276, cialcodated actual hours 272

| Evaluators' signatures | Printed names | Date |
| :--- | :--- | :--- |
| (1) Jeff Payne |  |  |

## PAYROLL COMPARISON - 2024

## Proposer Name: Mahmoud Aboumerhi

Evaluator Printed Name:


PAYROLL from Operational Form 4.3 Staffing and Personnel Calculation

|  | Loc.1 | Loc. 2 | Location Number.3 | Loc.4 | Loc. 5 | Loc. 6 |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: |
|  | $18-\beta$ | $28-A$ | $43-A$ | $43-C$ |  |  |
| Highest Rate | 18.00 | 18.00 | 18.00 | 18.00 |  |  |
| Lowest Rate | 15.00 | 14.00 | 15.00 | 15.00 |  |  |
| Number of Hours Recommended | 268 | 174 | 214 | 228 |  |  |
| Number of Hours Proposed | 272 | 190 | 224 | 230 |  |  |
| Total Monthly Wages | 15,840 | 10.856 | 12960 | 12.120 |  |  |

Comments:


## 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. 258 Points):

## 258

TOTAL POINTS

Comments: $\qquad$

Evaluators' Signatures
Evaluators' Printed Names
Date
(1)

$\square$ $2|26| 24$
(2)

1. Proposer does not and will not hold a PROHIBITED elective public office other than County Clerk of Courts or County Auditor? (\#11 \& 12)
2. Proposer does not hold an overlapping deputy registrar contract? (\#13) If contract overlaps, what is the expiration date of the contract?

3. Proposer is not a prohibited relative of a current deputy registrar? (\#14, 15 \& 16)
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)
5. Proposer is not a State of Ohio employee or will resign? (\#49) (5) *
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) $\quad(5) \mid$ *

| 8. $\begin{array}{l}\text { Proposer owes no local, state, or federal delinquent taxes, social security payments, } \\ \text { workers' compensation premiums or mandatory contributions? (\#22) }\end{array}$ | 5 * |
| :--- | :--- | :--- | :--- |

9. Proposer agrees to maintain acceptable business liability insurance in accordance
with Ohio Revised Code section $4503.03(\mathrm{C})$ ? (\#23)
10. Proposer can meet bond requirements? (\#24 and acceptable proof)

| 11. Acceptable educational information OR nonprofit corporation? (\#25) | (5) | 0 |
| :--- | :--- | :--- |

12. Proposer has computer training or experience? (\#26) $\quad(5) \mid 0$

PERSONAL EVALUATION POINTS, Page 2 (Max. 55 Points) $\qquad$
NOTE: Score indicated " " may lead to disqualification OR contract contingency. Score " 0 " may lead to contract contingency.
$\qquad$

## BUSINESS AND EMPLOYMENT EXPERIENCE CALCULATION

| 13. DEPUTY REGISTRAR AGENCY OWNER Experience, Form 3.2 |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ITEM AGENCY/COMPANY | HOURS | = FACTOR | x YEARS x | POINTS |  | SCORE | VERIFIED |
| A. Mentur BMV | \# NA | $=1.0$ | $\times 17.0 \times$ | 50 | = | 850 | $\checkmark$ |
| B. | \# NA | $=1.0$ | $x \quad x$ | 50 | $=$ |  |  |
| C. | \# NA | $=1.0$ | $x \quad x$ | 50 | $=$ |  |  |
| Subtotal of 13-A, 13-B \& 13-C = |  |  |  |  |  |  |  |

14. OTHER BUSINESS OWNERSHIP Experience, Form 3.2

| ITEM AGENCYICOMPANY | HOURS $=$ | = FACTOR x YEARS x | POINTS |  | SCORE | VERIFIED |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| A. | \# | $=\quad x \quad x$ | 34 | $=$ |  |  |
| B. | \# | $=\quad x \quad x$ | 34 | $=$ |  |  |
| C. | \# = | $=\quad x \quad x$ | 34 |  |  |  |
| Subtotal of 14-A, 14-B \& 14-C = |  |  |  |  |  |  |
| 15. SUPERVISORY / MANAGEMENT (ANY BUSINESS - INCLUDING DR) Experience, Form 3.2 |  |  |  |  |  |  |
| ITEM AGENCYICOMPANY | HOURS = | $=$ FACTOR x YEARS x | POINTS |  | SCORE | VERIFIED |
| A. | \# = | $=\quad x \quad x$ | 25 |  |  |  |
| B. | \# = | $=\quad x \quad x$ | 25 |  |  |  |
| C. | \# = | $=\quad x \quad x$ | - 25 |  |  |  |
| Subtotal of 15-A, 15-B \& 15-C = |  |  |  |  |  |  |

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


Total DR Employment Experience \#16 (Max. 90 Points) =
17. OTHER EMPLOYMENT Experience, Form 3.2

| ITEM | AGENCY/COMPANY | HOURS $=$ | = | x | $x$ | POINTS |  | SCORE | VERIFIED |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| A. |  | \# = | $=$ | x | $x$ | 20 | $=$ |  |  |
| B. |  | \# = | = | x | x | 20 | = |  |  |
| C. |  | \# = | $=$ | $x$ | X | 20 | $=$ |  |  |
| D. |  | \# = | = | X | X | 20 |  |  |  |
| Subtotal of Lines 17-A, 17-B, 17-C \& 17-D = |  |  |  |  |  |  |  |  |  |
| Total Other Employment Experience \#17 (Max. 80 Points) = |  |  |  |  |  |  |  |  |  |

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

## BUSINESS AND EMPLOYMENT EXPERIENCE VERIFICATION

| Person called:_Rob Fragale |
| :--- |
| company: $\quad$ an telephone ( 614 ) $252-2090$ |

Relationship: $\qquad$
Verified experience as: Deputy Registrar Agency Owner (50)


Other Business Owner (34) $\qquad$

| Manager or Supervisor (25) | Deputy Registrar Employee (23) | Other Employee (20) |
| :---: | :---: | :---: |
| Hours per week: |  |  |



Length: -17.0
Verified Hours $36=$ Factor $1 \quad \times$ Years $170 \times$ Points $50=850$

Person called: $\qquad$ at telephone ( ) $\qquad$
Company: $\qquad$
Relationship: $\qquad$
Verified experience as: Deputy Registrar Agency Owner (50) $\qquad$ Other Business Owner (34) $\qquad$
Manager or Supervisor (25) ___ Deputy Registrar Employee (23) ___ Other Employee (20) ___
Hours per week: $\qquad$
From (date): $\qquad$ To (date): $\qquad$ Length: $\qquad$
Verified Hours $\qquad$ = Factor $\qquad$ $x$ Years $\qquad$ $x$ Points $\qquad$ $=$ $\qquad$

Person called: $\qquad$ at telephone ( ) $\qquad$
Company: $\qquad$
Relationship: $\qquad$
Verified experience as: Deputy Registrar Agency Owner (50) $\qquad$ Other Business Owner (34) $\qquad$
Manager or Supervisor (25) $\qquad$ Deputy Registrar Employee (23) $\qquad$ Other Employee (20) $\qquad$
Hours per week: $\qquad$
From (date): $\qquad$ To (date): $\qquad$ Length: $\qquad$
Verified Hours $\qquad$ = Factor $\qquad$ $x$ Years $\qquad$ $x$ Points $\qquad$ $=$ $\qquad$

## Personal Evaluation, Page 3 of 8 (2024)

18. Form 3.3 - Customer Service Experience

Did proposer provide acceptable list of ideas to improve customer service at a deputy registrar agency or provide an example of something done as part of a job or business
 to improve services for customers?
19. Form 3.4 - Start-Up Cost Funds On Deposit (not required for Auditors or Clerks of Courts)
A. Are funds in acceptable financial institution and verified with bank/teller stamp?
B. Are funds in proposer's or proposer's business name or joint with spouse?
20. Form 3.5 - Political Contributions Report (not required for Auditors or Clerks of Courts)

Did proposer mark "NO" for every category, every year?
(For Nonprofit Corporations, evaluate both Corporation's and CEO's Form 3.5)

21. Form 3.6 - Personnel Policy Summary

Does proposer agree to provide/maintain a written personnel policy covering the following:
A. Hiring employees with deputy registrar agency experience?
B. Equal Employment Opportunity?
C. Employee training by the deputy registrar?
D. Participation in BMV provided training?
E. Evaluation of employee performance?
F. Grounds for discipline or dismissal/termination (list) which shall include drug and alcohol use?
G. Progressive disciplinary steps?
H. Dress code with list of acceptable attire?
I. 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)?

NOTE: Score indicated " $*$ " may lead to disqualification OR contract contingency. Score " 0 " may lead to contract contingency.

Comments: $\qquad$
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)
J. Secured storage room with alarm monitored contacts on door(s) and window(s), if applicable? (Mandatory)
K. Cross cut shredder to be made available to destroy customer copy records? (Mandatory)
L. All doors and all windows will be securely locked when license agency is closed? (Mandatory)
M. Smoke, fire, and carbon monoxide detection devices (Mandatory)?
N. Interior/Exterior motion activated security lights? (Suggested) - Check OK or NO

2. Form 3.8 - Facility Maintenance Plan Summary - Did proposer agree to provide: A. Indoor/Outdoor maintenance and cleaning?
B. Prompt snow and ice removal?
C. Carpet and/or floor cleaning (if appropriate)?
D. Repainting?

PERSONAL EVALUATION POINTS, Page 6 (Max. 17 Points) 17
NOTE: Score indicated " $\star$ " may lead to disqualification OR contract contingency. Score " 0 " may lead to contract contingency.
Comments: $\qquad$
$\qquad$
$\qquad$
$\qquad$
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?
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?
3. What measures will you put in place to detect, deter, and prevent fraud?
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?
5. How will you demonstrate good leadership to your employees?
6. How will you maintain a high level of professionalism each day in this business?
7. How do you intend to recruit and retain high quality employees?
8. How will you provide a safe, clean, and friendly place to do business?
9. How would you deal with an irate customer?
10. What training or advice do you, or will you, give to your employees for dealing with irate customers?
11. How will you meet the expectations of the Ohio Bureau of Motor Vehicles?
12. Why should the Ohio Bureau of Motor Vehicles consider you for a deputy registrar license agency contract?

| 1 | 0 |
| :---: | :---: |
| 1 | 0 |
| 1 | 0 |
|  |  |
| 1 | 0 |
| 1 | 0 |
| 1 | 0 |
| 1 | 0 |
| 1 | 0 |
| $(1)$ | 0 |
| $(1)$ | 0 |
| $(1)$ | 0 |
| $(1)$ | 0 |

25. Form 3.10(A) (B) or (C) - Affidavit of Individual, Auditor/Clerk of Courts or Nonprofit Corporation
A. Did proposer submit proper affidavit without alteration and does it appear to be complete, accurate, and truthful?
B. Is it the affidavit duly signed and notarized?

26. Local Law Enforcement Report / Articles of Incorporation (AOI)
A. No disqualifying convictions for individual / AOI for nonprofit corporation?
B. No convictions (except minor traffic) / AOI for nonprofit corporation?

27. $\mathrm{BCl} / \mathrm{FBI}$ Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation No disqualifying convictions for individual / AOI for nonprofit corporation?



Personal Evaluation, Page 7 of 8 (2024)
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

| A. Credit report submitted contains credit score? | 2 | 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? | $(2)$ | 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)


PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)


NOTE: Score indicated " $\star$ " may lead to disqualification OR contract contingency. Score " 0 " may lead to contract contingency.

Comments: $\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$

### 3.0 PERSONAL CHECKLIST

## Proposer's Full Legal Name

## MAHMOUD ABOUMERHI

## Proposer Number (BMV use only)

INSTRUCTIONS: 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 |  | BMV | COUNTY AUDITOR OR CLERK OF COURTS |  | BMV | NONPROFIT CORPORATION |  | 3MV |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Form 3.0 Personal Checklist (this form) | $\checkmark$ | $V$ | Form 3.0 Personal Checklist (this form) |  |  | Form 3.0 Personal Checklist (this form) |  |  |
| Form 3.1 Personal Questionnaire | $\checkmark$ | $\checkmark$ | Form 3.1 Personal Questionnaire |  |  | Form 3.1 <br> Personal Questionnaire |  |  |
| Form 3.2 Business and Employment Experience | $\checkmark$ | $\checkmark$ | Forms 3.2 Business and Employment Experience |  |  | Forms 3.2 Business and Employment Experience |  |  |
| Form 3.3 Customer Service Experience | $\sqrt{ }$ | $\checkmark$ | Form 3.3 Customer Service Experience |  |  | Form 3.3 Customer Service Experience |  |  |
| Form 3.4 Start-Up Cost Funds on Deposit | $\checkmark$ | $\checkmark$ | N/A | X | 1 | Form 3.4 <br> Start-Up Cost Funds on Deposit |  |  |
| Form 3.5 <br> Political Contributions Report | $\checkmark$ | $\checkmark$ | N/A | X | 1 | Form 3.5 <br> Political Contributions Report Nonprofit Corporation |  |  |
| N/A | X | 1 | N/A | X | 1 | Form 3.5 <br> Political Contributions Report Chief Executive Officer |  |  |
| Form 3.6 <br> Comprehensive Personnel Policy <br> Agreement | $\checkmark$ | $\checkmark$ | Form 3.6 Comprehensive Personnel Policy Agreement |  |  | Form 3.6 <br> Comprehensive Personnel Policy <br> Agreement |  |  |
| Form 3.7 Security Plan Agreement | $\sqrt{ }$ | $\checkmark$ | Form 3.7 Security Plan Agreement |  |  | Form 3.7 Security Plan Agreement |  |  |
| Form 3.8 <br> Facility Maintenance Plan Agreement | $\checkmark$ | $\checkmark$ | Form 3.8 <br> Facility Maintenance Plan Agreement |  |  | Form 3.8 <br> Facility Maintenance Plan Agreement |  |  |
| Form 3.9 Involved and Invested in Your Business | $\checkmark$ | $\checkmark$ | 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 | $\checkmark$ | $V$ | Form 3.10(B) Affidavit of Auditor or Clerk of Courts |  |  | Form 3.10(C) Affidavit of Nonprofit Corporation |  |  |
| 2024 Credit Report | $\checkmark$ | $\checkmark$ | N/A | X | 1 | 2024 Certificate of Good Standing |  |  |
| 2024 Local Law Enforcement Report | $\checkmark$ | $\checkmark$ | 2024 Local Law Enforcement Report |  |  | Articles of Incorporation |  |  |
| 2024 WebCheck Receipt | $\checkmark$ | $\checkmark$ | $2024$ <br> WebCheck Receipt |  |  | N/A | X | 1 |
| Pre-approval Statement for $\$ 25,000$ Bond | $\sqrt{ }$ | $\checkmark$ | Current Bond with BMV added as Additional Insured |  |  | Pre-approval Statement for $\$ 25,000$ Bond |  |  |
| INDIVIDUAL |  |  | COUNTY AUDITOR OR CLERK OF COURTS |  |  | NONPROFIT CORPORATION |  |  |

Form 3.0, Personal Checklist (2024)

### 3.1 PERSONAL QUESTIONNAIRE

1. List all location numbers for which the applicant intends to submit a proposal (limit six locations). Check the box underneath if proposing the location as a second site in addition to a current agency:

2. Full legal name of proposer
3. Proposer's street address


City

## Mentor

 StateZip code
4. County of residence (nonprofit corporation county of operation)
5. Daytime telephone
6. Proposer's driver's $\qquad$
7. Spouse's name (nonprofit corporation N/A)
8. Spouse's home street address (nonprofit corporation N/A)
$\qquad$ City State
9. Are you proposing as the owner of a minority business enterprise (MBE)? No $\qquad$ Yes $\qquad$
10. Proposer is (check one and follow instructions):

$\checkmark$
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;
$\qquad$ The Clerk of Courts of $\qquad$ County;
$\qquad$ The County Auditor of $\qquad$ 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;
$\qquad$ 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.
11. A. Are you currently serving in elective public office, other than Clerk of Courts or County Auditor, either by election or appointment (includes precinct committee person)? (NPC N/A)
Yes
$\qquad$
$\qquad$
B. If YES, in what elective office are you serving? $\qquad$
C. If YES, date that you plan to leave this office? $\qquad$
12. A. Are you currently running for any elective public office. (including precinct committee person)? (NPC N/A)
Yes
$\qquad$ No $\boldsymbol{\checkmark}$
B. If YES, what office? $\qquad$
13. A. Are you currently a deputy registrar?

Yes
 No $\qquad$
B. If YES, on what date does your contract expire? 06/29/2024
C. If YES, have you served as a deputy registrar continuously since January 1, 1992?


Yes $\qquad$
14. A. Is your spouse currently a deputy registrar? (NPC N/A)

Yes $\qquad$
No $\qquad$
B. If YES, on what date does your spouse's contract expire? $\qquad$
For the following three questions, extended family includes your spouse, parent, brother, sister, son, daughter, father-in-law, mother-in-law, brother-in-law, sister-in-law, son-in-law, or daughter-in-law:
15. A. Does any member of your extended family currently hold a deputy registrar contract? (NPC NRA)
$\qquad$
B. If YES, list their name, relationship to you, whether you share the same household, and date their contract expires here:

16. A. To the best of your knowledge, will any member of your extended family submit a proposal in response to this RFP? (NPC N/A)

Yes $\qquad$ No $\qquad$
B. If YES, list their name, relationship to you, and whether you share the same household:

17. A. Is any member of your extended family employed by any subdivision of the Ohio Department of Public Safety? (NPC N/A)

Yes $\qquad$
$\qquad$
B. If YES, list their name, relationship to you, and the date they became so employed:

| Name | Relationship | Employment Date |
| :--- | :--- | :--- | :--- | :--- |
|  |  |  |
|  | $\square$ |  |
|  | $\square$ |  |
|  |  |  |

18. A. Have you completed the Political Contributions Report, Form 3.5? (NPC must submit one for NPC itself and one for its C.E.O.)

No $\qquad$
$\qquad$
B. If "NO," are you applying as a Clerk of Courts or County Auditor? No $\qquad$
19. A. Are you an employee of the State of Ohio? (NPC N/A)

Yes $\qquad$
Yes $\qquad$
B. If "YES," will you resign, if appointed?

No $\qquad$
Yes $\qquad$
20. Are you an insurance company agent, writing automobile insurance? (NPC N/A)

Yes $\qquad$
No $\qquad$
21. Has Proposer (including NPC and proposed office manager) been convicted within the past ten years of a crime punishable by death or imprisonment in excess of one year (felony), or any crime involving dishonesty or false statement?

Yes $\qquad$

22. As of the date of this certification does Proposer owe any overdue taxes, unemployment compensation contributions, social security payments, or workers' compensation premiums either to the State of Ohio or any political subdivision thereof, or to the federal government, or any other state or locality within the United States?

Yes $\qquad$
23. Is Proposer willing and able, if appointed, to maintain during the entire term of your contract a policy of business liability property damage, and theft insurance satisfactory to the Registrar and hold the Department of Public Safety, the Director of Public Safety, the Bureau of Motor Vehicles, and the Registrar of Motor Vehicles harmless upon claims for damages in accordance with Ohio Revised Code 4503.03(C)? (County Auditor/Clerk of Courts N/A)
No $\qquad$ Yes $\qquad$
24. Is Proposer bendable as outlined in Ohio Administrative Code 4501:1-6-01(B)?

No $\qquad$ Yes $\quad \checkmark$
25. Please provide the following information regarding your education. If applying as a NPC, please provide educational information for the individual who will manage the license agency business.

## High school diploma?

No $\qquad$ Yes $\quad \checkmark$
Tripoli Official Secondary School
High school name
${ }_{\text {City }}^{\text {College name Cu y }}$ Cuyahoga Community College
26. Computer experience. Does Proposer have any training or experience working with or using computers? (Incumbent deputy registrars may take credit for operating BMV computers. For nonprofit corporations, this question should be answered for computer systems operated or used in the nonprofit corporation's activities.)
$\qquad$ Yes $\sqrt{ }$

If "YES" please explain all computer experience in detail.
While in college, I took courses in computer such Fortran, Basic and Cobol.
In my life time experience, I took trainning in how to operate and understand computer.
Presently, I do my own payroll taxes using quickbook.
I know how to operate computer, using microsoft, excel, BASS, emails and smart cell phone.
$\qquad$
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$\qquad$
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

Instructions. Please fill out one of these forms 3.2(A) for each business you have owned. Do not use this form 3.2(A) for management, supervisory, or employee experience. If you have owned more than one business, submit a separate for $3.2(\mathrm{~A})$ for each business owned. Please make additional copies of this form as necessary.


Type of business (deputy registrar, retail grocery, etc.) $\qquad$


List at least one person, not a relative of yours, who can verify this experience. If we cannot contact at least one person to verify this experience, you will not receive any credit for it. (If you are a deputy registrar or deputy registrar employee, you may list BMV employees to verify that experience.)

### 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):

## Seeking Excellence in customer service:

By providing constant and continues training, daily briefing, quizzing employees on BMV procedure, rules and to provide accurate information to our customers.

Continue to provide consistent friendly service with a smile.
This some examples on how to improve customer service:
1- In order to minimize waiting time and ensure prompt, fast service, we pre-screen customers for proper/accurate documentation and direction by signing in at the Kiosk, utilizing a Door Person.

2- We give extra assistance to our senior citizen and disabled customers.
3- If needed, we offer and install license plates for customers (i.e. seniors and disabled).
4- Show DL/ID picture to customer before finalizing.
5- In case, customer have a prescription for a placard, and it is missing information needed, we offer to call the doctor, so he can fax us a new one.

6- We offer a front of the line pass for customer with missing information, so they can come back and serviced without waiting.

7- My employees must be good listeners, friendly, fact finding and problem solvers.

Form 3.3, Customer Service Experience (2024)

### 3.5 POLITICAL CONTRIBUTIONS REPORT

## Instructions

Instructions 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:

## Mahmoud Aboumerhi

Title (if officer 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 " $\checkmark$ " in the appropriate box, "yes" or "no" for each category and year separately.

| RECIPIENT | $\begin{gathered} \text { JAN I - DEC } 31 \\ 2021 \end{gathered}$ |  | $\begin{gathered} \text { JAN } 1 \text { - DEC } 31 \\ 2022 \end{gathered}$ |  | $\begin{gathered} \text { JAN } 1 \text { - DEC } 31 \\ 2023 \end{gathered}$ |  | $\begin{gathered} 2024 \\ \text { To Date } \end{gathered}$ |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Jes | No | Yes | No | les | No | Yes | No |
| Democratic Party including PACs and Associations |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |
| Republican Party including PACs and Associations |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |
| Any other Party including PACs and Associations |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |
| Governor, Candidate and Committee |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |
| Attorney General, Candidate and Committee |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |
| Secretary of State, Candidate and Committee |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |
| Treasurer of State, Candidate and Committee |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |
| Auditor of State, Candidate and Committee |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |
| State Senator, Candidate and Committee |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |
| State Representative, Candidate and Committee |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |  | $\checkmark$ |

### 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 $\qquad$ Yes


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 <br> (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 $\qquad$ 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 am involved in every aspect of the daily operation by:

Managing by objective, hiring, training, delegating, budgeting, follow-up and auditing, maintaining accounting control, and implementing rules/regulations.
I am responsible and accountable as truthful, respectful Deputy registrar who is consistent in achieving objectives, creating a good positive environment for my employees and customers, and meeting my obligations as set by the Ohio Revised Code.
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?
I have set rules and regulations to ensure that all laws, rules, guidelines and procedure are followed at all times.

At my agency, upon customer arrival, he/she is greeted by an employee (Door person), who will screen and review the customers documents, then the documents will be reviewed in details by the processing clerk/mgr.
Vehicle registration will be processed Express Service. 5745 and documents will be reviewed by the clerk/mgr. As deputy Registrar, I am continuously monitoring/reviewing/auditing/approving or disapproving documents in order to follow the Ohio BMV Laws.
3. What measures will you put in place to detect, deter, and prevent fraud?

I have well trained staff who continuously get training, they are certified by the BMV to detect fraudulent documents. My managers and I continuously monitor, check/audit customers transactions by listening, reviewing customer's document and approving or disapproving.
Daily auditing for voids/reversals and refunds (a receipt my be signed by the customers with a phone number, clerk and mgr. signature too).

My visible audiovisual security system is a deterrent tool to prevent fraud. We carefully examine all documents (i.e. BMV 4745 and strictly implement BMV rules and laws.
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?

1- As soon we have a broadcast, it is printed and inserted in an office binder in sequential order.
2- All employees must read the broadcast and initial them on a daily basis.
3- My staff are instructed to open and read all broadcast upon receipt.
4- My managers and I inform/teach/explain every broadcast.
5- we consistently check for new broadcast several times a day.

Form 3.9, Involved and Invested in Your Business, Page 1 of 3 (2024)
5. How will you demonstrate good leadership to your employees?

I will demonstrate good leadership by :
1- Being a role model to my staff in good work ethic and practice.
2- Being truthful, honest, respectful, consistent, fair, accurate and firm
3- Meeting my obligations on time and staying accountable.
4- Being informative with good communication.
5- Having an open door policy to all.
6- Maintaining good highly efficient work environment.
6. How will you maintain a high level of professionalism each day in this business?

By having the following:
1- A nice, clean agency organized \& decorated with an appealing layout.
2- Printed signs with the BMV logo (Nothing hand written).
3- Uniformed employees with BMV logo and wearing name tags.
4- A pleasant greeting and smile for every customer, employees are here to listen, taking care of business and solve problems according to Ohio BMV laws.
5- Patience, respect, sincerity and strictness in implementing Ohio BMV laws.
7. How do you intend to recruit and retain high quality employees?

By implementing the following:
1- An accurate job description.
2- Advertise help wanted at agency/colleges and online.
3- Review an identity for the best candidates.
4- Screen, Interview, check references, web check and hire.
5- Retain good employees by offering a good work environment, flexible hours, competitive wages, and incentives for good employees with paid sick days off/ paid holidays and vacation.
8. How will you provide a safe, clean and friendly place to do business?
we have the following:
1- Rear door locked at all times, our audiovisual security system deters criminals.
2- Sensitive documents are always stored and locked.
3- No one allowed behind the counters, except employees.
4- Agency is kept clean by daily vacuuming/moping/dusting and window cleaning.
5- Have a friendly door person customer service to greet customers and answers their questions.
5-Greet customers with a smile, minimize waiting time and take good care of seniors, disabled and the military.
9. How would you deal with an irate customer?

By following steps:
1- Remain calm and be a good listener.
2- Never take it personally.
3- Listen to the customer (first, the customer wants to vent; they need someone to listen).
4- Actively empathize (after the customer vents, he wants to know you understand).
5- Apologize gracefully.
6- Find a solution in a caring and helpful manner by taking an extra step to please within the extent of the Law.

## Form 3.9, Involved and Invested in Your Business, Page 2 of 3 (2024)

10. What training or advice do you, or will you, give to your employees for dealing with irate customers?

I trained my employees not to argue with the customers and to follow procedure as stated in question \# 9 above.

Also, if an employee cannot handle the customer, I or my manager will recover the situation and help the customer with satisfactory solution.

Our slogan is : " the customer is always right" as long the rules and regulations of the Ohio BMV laws are followed.
11. How will you meet the expectations of the Bureau of Motor Vehicles?

1- I am committed and involved on a daily basis in my agency's operation.
2- I maintain a comprehensive understanding of customer's needs in order to attain the skills and knowledge necessary to design, propose, and deliver exceptional value to our customers.

3- I manage by objective, maintain a well-trained staff, keep a good and safe work environment, and offer excellence in customer service to all, while strictly implementing all BMV laws and regulations.

4- I am a responsible deputy registrar, I meet deadliness, follow protocol, and exhibit good business acumen.
12. Why should the Bureau of Motor Vehicles consider you for a deputy registrar license agency contract?

Prior to being a deputy registrar, I operated and owned a successful clothing business for over 21 years.

My business philosophy is to offer prompt, courteous, and very personalized service.
The customer always come first, I go the extra mile, listen to our customers and provide excellence in customer service.

I will provide a good organized business, friendly employees and a good operation meeting all business obligations.

In the mean time, my organization will follow and implement all the rules and regulations of a good business as well Ohio BMV laws.

I demonstrated my capabilities as dependable / responsible deputy registrar for the last 16.50 years.

## 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)

## County of LAKE <br> $\boldsymbol{\Psi}$ :

## State of Ohio

I, Mahmoud Aboumerhi

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.

Signature of proposer:


Printed/typed name of proposer:
Mahmoud Aboumerhi
Sworn to and subscribed in my presence by the above named MAHMOVN ABOUmeric on this 25 day of January_ 202 A


Printed name of Notary Public: 1 Tammy soy Bowers
My commission expires: $9-13-29$

### 4.0 OPERATIONAL CHECKLIST

## Mahmoud Aboumerhi

## Proposer's Full Legal Name

$\qquad$
$\qquad$
18-B
Location Number

Proposer Number (BMV use only) $\qquad$

INSTRUCTIONS: 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) | $\checkmark$ | $\checkmark$ |
| 4.1 | Appointment of Agency Managers | $\checkmark$ | $\checkmark$ |
| 4.2 | Experienced Employees Summary | $\checkmark$ | $\checkmark$ |
| 4.3 | Staffing and Personnel Costs Calculation | $\checkmark$ | $\checkmark$ |
| 4.4 | Start-Up Costs Calculation Amount: | $\$ 24848.94$ | $\checkmark$ |
| 4.5 | Deputy Registrar Contract (2 pages only) | $\checkmark$ |  |

### 4.1 APPOINTMENT OF AGENCY MANAGERS

## Mahmoud Aboumerhi

Proposer's name: $\qquad$ Location number:
18-B
(A) DEPUTY REGISTRAR: As deputy registrar, I agree to work in the agency at least 20 hours per week during the hours the agency is open to the public for business throughout the entire term of the contract. I understand that the minimum requirement for deputy registrars is twenty (20) hours per week during the hours the agency is open for business. This twenty-hour requirement does not apply to County Auditors/Clerks of Courts, nonprofit corps., or deputy registrars operating multiple locations (assessed as received).
(B) OFFICE MANAGER: I understand and agree that I must appoint either myself or another reliable person to serve as the office manager for the agency, and that the office manager must be scheduled to work at the agency at least thirty-six (36) hours per week during the hours the agency is open to the public for business. It is my intention to:
$\qquad$ Appoint myself as the office manager and work at least thirty-six hours per week during the hours the agency is open to the public for business.


Appoint another reliable person to serve as the office manager to work at least thirtysix hours per week during the hours the agency is open to the public for business.
(C) ASSISTANT OFFICE MANAGER: I understand and agree that I must appoint a reliable person to be responsible for the management of the agency in the absence of myself and the agency office manager during the hours the agency is open to the public for business.
(D) OTHER EMPLOYEES: I agree to maintain an accurate and current roster of my office manager, assistant office manager, and all other employees and their work schedules, as well as my own work schedule, on file and available for inspection by BMV employees at all times. I also agree to notify the BMV in writing immediately of any changes in the appointment of the office manager or assistant office manager, and to keep the employee roster complete and current.


Deputy registrar (proposer) signature

Date: 01/25/2024
Date: $\qquad$

## Form 4.1, Appointment of Agency Managers (2024)

### 4.2 EXPERIENCED EMPLOYEES SUMMARY

Proposer's name:
Mahmoud Aboumerhi
Location number:
18-B
$\qquad$
$\qquad$
(A) HIRING EXPERIENCED EMPLOYEES. 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) 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 |
| :--- | :--- |
| Mahmoud Aboumerhi | 16.5 years |
|  |  |
|  |  |
|  |  |
|  |  |

(C) I understand that failure to hire properly qualified and experienced deputy registrar employees is grounds to withhold or terminate my deputy registrar contract.


Form 4.2, Experienced Employees Summary (2024)

### 4.3 STAFFING AND PERSONNEL CALCULATION

Proposer's name: $\qquad$ Location number:

Instructions. 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.

| EMPLOY MENT POSITION | $\begin{aligned} & \text { Pronet Tid } \\ & \text { HORR } \\ & \text { WERKR } \end{aligned}$ | PROJE (TED hot RI.) RUTE: | $\begin{aligned} & \text { PRONETED } \\ & \text { WEEKI!. } \\ & \text { P:M } \end{aligned}$ |  |
| :---: | :---: | :---: | :---: | :---: |
| Deputy Registrar | 20.00 | N/A | N/A | N/A |
| Office Manager (leave blank if the Deputy Registrar is also the Office Manager) | 36.00 | \$ 18.00 | \$ 648.00 | \$ 2,592.00 |
| Assistant Office Manager | 36.00 | \$ 17.00 | \$ 612.00 | \$ 2,448.00 |
| Experienced Employees <br> Total Number (combine Full-time \& Part-time) $=$ $\qquad$ | 180.00 | \$ 15.00 | \$ 2,700.00 | \$ 10,800.00 |
| New Hire Employees <br> Total Number (combine Full-time \& Part-time) $=$ |  |  |  |  |
| TOTALS | 276.00 | N/A | \$ 3,960.00 | \$ 15,840.00 |

Form 4.3, Staffing and Personnel Calculation (2024)

### 4.4 START-UP COSTS CALCULATION

Proposer's name: $\qquad$ Location number

18-B

The purpose of this form is to assure the BMV that you are financially able to cover the costs of beginning a deputy registrar business. We need to know that you have enough financial resources to cover your personnel, site preparation, and site rental costs.

## 1. PERSONNEL COSTS (FOUR WEEKS)

Use Form 4.3 to calculate four (4) weeks' personnel costs for this location.

$$
\$ 15840.00
$$

## 2. SITE PREPARATION COSTS (AMORTIZED)

A. If this is a Deputy Provided Site, calculate and enter the actual projected costs you will need to spend to prepare the building for use as a deputy registrar agency in each of the following categories:

1. Building Modifications
\$ $\qquad$
2. Counter Costs
\$ $\qquad$
3. Other Costs
\$ $\qquad$
4. Total
\$ $\qquad$
Total amortized over 60 month contract period
(Divide line 4 by 60)
$=\$$
B. If this is a BMV Controlled Site, enter the information contained in the Agency Specifications for this location. Do not change the information from the Agency Specifications.
\$

## 3. AGENCY RENTAL PAYMENTS (3 MONTHS)

A. If this is a Deputy Provided Site, enter the actual amount you will pay to rent or lease this site.

B If this is a BMV Controlled Site, enter the estimated rent listed in the Agency Specifications for this site. Do not change the amount listed.
One month's rent:

$$
\$ \underline{3002.98} \times 3=\$
$$

9008.94

## TOTAL START-UP COSTS

[four weeks' personnel costs, plus one month's amortized site preparation costs (2.A total amount or 2.B BMV Controlled Site amount), plus three months' rent]
\$ 24848.94

# STATE OF OHIO <br> DEPARTMENT OF PUBLIC SAFETY <br> BUREAU OF MOTOR VEHICLES <br> DEPUTY REGISTRAR CONTRACT - 2024 

This Agreement is made by and between the Registrar of Motor Vehicles, (Registrar, herein), located at 1970 West Broad Street, Columbus, Ohio 43223-1102 and Mahmoud Aboumerhi , (deputy registrar, herein) whose
home mailing address is
(City) Mentor $\underline{\longrightarrow}$, Ohio (Zip) 44060 , to operate a deputy registrar agency, Location No. 18-B State of Ohio, County of Cuyahoga
City/Village/Township (indicate which) City $\qquad$ of Mayfield Hts

Street address: 1593 Golden Gate Plaza
(City) $\qquad$ , Ohio (Zip) ${ }^{44124}$

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;
2. 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 $\mathbf{3 0}{ }^{\text {th }}$ day of June, 2024, and shall end on the $\mathbf{3 0}{ }^{\text {th }}$ day of June, 2029, unless otherwise terminated as provided herein;
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"]:
" an 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.

## 01/25/2024

Deputy Registrar signature

## STATE OF OHIO

COUNTY OF Lake

## Date

 $:$$:$
$:$

Before me, a notary public in and for said county and state, personally appeared the above named Mahmoud Aboumerhi 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 25 Th day of Jan, 2024.


Printed name of Notary Public: Tammy Joy Bowers My commission Expires: 9-13-28

STATE OF OHIO
DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

## BY:

REGISTRAR OF MOTOR VEHICLES

Done at Columbus, Ohio, on

