DEPUTY REGISTRAR REQUEST FOR PROPOSALS

SECTION 5

(2026)

DEPUTY PROVIDED SITES

5.0 DEPUTY PROVIDED SITE CHECKLIST

| Proposer's Full Legal Name | |
|--|---|
| | |
| Location Number | |
| D | |
| Proposed Site Address | |
| Proposer's Telephone Number (number where BMV staff can reach you) (|) |
| | , |
| Proposal Number (BMV use only) | _ |

<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 | / | BMV |
|-------------------|---|----------|-----|
| 5.0 | Deputy Provided Site Checklist (this form) | | |
| 5.1 | Site Questionnaire (page 1 only if proposing existing license agency site) | | |
| 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 | | |
| | signed and notarized | | |
| 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) - with 8½ x 11-inch formatting (SUBMITTED ELECTRONICALLY) | | |
| Proposer provided | with complete dimensions Map (leave blank if proposing existing license agency site) | | |
| | - with site clearly marked | | |

Form 5.0, Deputy Provided Site Checklist (2026)

5.1 SITE QUESTIONNAIRE

| 1. | Loc | cation Number for which you are proposing (from Agency Spec | ifications): _ | |
|---------------------------------------|--|--|-----------------|---------------------|
| | Stre | eet address of site | | |
| | Cit | y | Ohio, Zip C | ode |
| 2. | Is t | he site you are proposing currently in operation as a deputy regi | strar agency? | |
| | | | No | Yes |
| 3. | | you intend to perform construction or remodeling to prepare thouty registrar contract? | nis site for op | eration under a new |
| | 1 | , , | No | Yes |
| 4. | | e you applying for a contract at an existing license agency site the sapproved under a previous contract? | nat | |
| | | | No | Yes |
| · · · · · · · · · · · · · · · · · · · | | If you answered "No" to question number 4, skip to question reinformation required for this form (5.1) and the remainder of S | | - |
| | B. If you answered "Yes" to question number 4, have there been any changes to the site (interior and/or exterior to include parking areas, path of travel, and accessibility to individuals with disabilities, and signage)? | | | |
| | | with disabilities, and signage). | No | Yes |
| | | If you answered "No" to question number 5, please print and for compliance with Section Five (5) requirements for this RF remainder of your required proposal documents. | | _ |
| | В. | If you answered "Yes" to question number 5, list the site changes in the space below and be specific with the description(s) of any changes that have been made. Include additional supporting documentation and attachments if needed, then stop here. Print and submit this page along with any other documentation and attachments for compliance with Section 5 requirements for this RFP and include it with all other required proposal documents. | | |

| 7. | Do you agree to comply with applicable Ohio Building Code remodeling is necessary? | equiremen | ts if construction or |
|-----|--|-------------|----------------------------|
| | | No | Yes |
| 8. | Is the site located in a city or village? | | |
| | If so, name of city or village | | |
| | If not, name of township in which it is located | | |
| 9. | In what county is this site located? | | |
| 10. | Is your proposed site within the geographic area specified in the Age | ncy Specia | fications? |
| | | No | Yes |
| 12. | Have you included a map, with a mark showing the precise location | of the prop | posed site? |
| | | No | Yes |
| 13. | How many parking spaces are available for this site? | _ | spaces |
| 14. | How many other businesses share the parking facilities? | | business(es) |
| 15. | What is the distance of the nearest regular parking space from the proposed agency site using the shortest route a person could safely w | | ublic entrance of the feet |
| 16. | How many of the parking spaces are off-street (in a lot or garage)? | | spaces |
| 17. | How many of the parking spaces are paved? | | spaces |
| 18. | How many of the parking spaces are free (no charge for parking)? | | spaces |
| 19. | How many of the parking spaces are reserved exclusively for the use deputy registrar customers? | of | spaces |

| 20. | Do you agree to keep the agency at a reasonable temperature? | | • |
|------------------|---|-------------------------|--|
| | | No | Yes |
| 21. | Will the site be safe for agency employees and patrons and will it has | ave security | available? |
| | | No | Yes |
| tha dim | omission of a floor plan of the site is mandatory. If original $8-\frac{1}{2} \times 11$ inches, you must also provide a reduced size copy for tensions must be indicated on the drawing. Copies of previous vided there have not been any changes since the last proposal. | rmatted at | 8-½ x 11-inches. All |
| 22. | Have you submitted a complete floor plan of the site, showing all dimensions of all the interior areas? | No | Yes |
| 23. | How much space is allocated for the customer area? | | square feet |
| 24. | How much space is allocated for the employee service area? | | square feet |
| 25. | How much space is allocated for the employee private area? | | square feet |
| 26. | How much space is allocated for the storage area? | | square feet |
| 27. | How much space is allocated for the restroom facilities? | | square feet |
| 28. | How much space is allocated for uses not listed above? | | square feet |
| 29. | Total square footage of agency? | | square feet |
| 11 dim pre | omission of a counter plan is mandatory. If original drawings are inches, you must also provide a reduced size copy formations, including those of the disability accessible countervious submissions will be accepted, provided there have not be posal. | ted at 8-2 , must be | / ₂ x 11-inches. All shown. Copies of |
| 30. | Have you submitted a counter plan showing all dimensions of your | counters? | |
| | | No | Yes |
| 31. | Are your counters to be in accordance with RFP counter specification | ons? No | Yes |

| 32. | Please indicate which of the two counter options from the you are choosing: | e Counter Specifications, R | FP Appendix 2.1, |
|-----|--|------------------------------|---------------------|
| | A. Operator sit-down arrangement | B. Operator stand-u | ıp arrangement |
| 33. | Will your customer service counter be a minimum of 46 incumbent deputies only, a maximum of 50 inches) high | | f 48 inches (or for |
| | mediate deputies only, a maximum of 50 menes) ingi | | Yes |
| | | Actual Measurement: | inches |
| 34. | Do you agree to position all computers so they are adequ | nately protected from dama | age by customers? |
| | | No | Yes |
| 35. | Will the total length of your equipment support counter | be at least 60 inches for ea | ch terminal? |
| | | No | Yes |
| | Actual Total | Length (all counters): | feet |
| 36. | Will the depth of your regular counter be a minimum of | 30 inches and a maximum | of 36 inches? |
| | | No | Yes |
| | | Actual Depth: | inches |
| 37. | Will each 60-inch section of your counter be able to supp | port at least 100 pounds of | equipment? |
| | | No | Yes |
| 38. | Will you provide space for a vision screener at a reason disabled-accessible counter? | nable height and convenier | ntly located to the |
| | | No | Yes |
| 39. | Do you agree to provide a counter, acceptable to the B license production equipment? | MV, to accommodate the | digitized driver's |
| | | No | Yes |
| 40. | Will the disabled-accessible section of your counter be a hole opening of at least 27 inches clearance height, 30 in | | |
| | | No | Yes |
| | Height: Width: | Depth: | |

| 41. | Will you have at least one terminal service area which will be readily accessible for use by individua with a disability? |
|-----|---|
| | No Yes |
| 42. | Will you provide space either on the counter or on one or more separate printer stands (additions space of at least 30 inches wide) for each of the printers in the agency? |
| | No Yes |
| 43. | How many signs do you propose for the location? sign |
| 44. | List below the location and size (all dimensions) of your signs or proposed signs: |
| | Location of signs Dimensions of signs |
| | |
| 45. | Form 5.3. You must give satisfactory evidence that the facility you have proposed will be available for the operation of a deputy registrar agency during the entire period of the contract. If you will be leasing the facility from someone else, you must submit a fully executed (signed, notarized, an accepted) Lease Option, Form 5.3. If you own the property yourself, you must submit a copy of you deed along with a Lease Option, Form 5.3, giving yourself an option or a written statement that the property is available for use as a deputy registrar agency. |
| | Form 5.4. Is the location for which you are proposing designated a DEPUTY PROVIDE PROXIMITY SITE in the Agency Specifications for that location? |
| | Yes. You must complete and submit with your proposal a fully completed Proximit Attachment, Form 5.4. |
| | No. Please do not submit the Proximity Attachment, Form 5.4. |

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

1. ACCESSIBLE ENTRANCE. People with disabilities should be able to arrive at a parking space accessible to persons with disabilities on the site, approach the building, and enter the building as

| | freely as everyone else. At least one path of travel should be safe and including people with disabilities. "Accessible space" means a parkin Americans with Disabilities (ADA) requirements for disability (formerly "Accessible entrance" means an entrance to a building which meets AD by persons with disabilities, including persons who are in wheelchairs. | ng space w "Handicap | hich meets a ped") parking | 11 g. |
|----|--|-------------------------|----------------------------|----------|
| | A. Is there a path of travel from the disability accessible parking space to the agency entrance that does not require the use of stairs? | No | Yes | |
| | B. Is the path of travel stable, firm, and slip-resistant? | No | Yes | |
| | C. Except for curb cuts, is the path at least 36 inches wide? | No | Yes | |
| | D. Do curbs on the pathway have curb cuts at least 32 inches wide at all necessary points? | No | Yes | |
| | If the answer is "no" to any of these questions, list specific improvements are awarded a contract. Possible solutions include, but are not limited to an alternative path of travel, repairing surfaces, widening the pathway, instances. | , adding a ra | amp, designin | |
| | Improvements to be made: | | | |
| | A | | | |
| | В | | | |
| | C | | | |
| | D | | | |
| 2. | RAMPS . Are ramps necessary to permit wheelchair access? | Yes | No | |
| | If "yes" complete the following information. If "no," skip forward a Areas," next page. | to "Parking | and Drop-O | ŊĴ |
| | A. Are the slopes of ramps no greater than 1:12? | No | Yes | |
| | Slope is given as a ratio of the height to length. 1:12 means for every of the ramp, the height increases one inch. For a 1:12 maximum slope length is needed for each inch of height. | | | |
| | B. Do all ramps longer than six (6) feet have railings on both sides? | No | Yes | |

| C. | Are railings sturdy, and between 34 and 38 inches high? | No | _ Yes |
|-----------|--|------------------------|----------------------|
| D. | Is the width between railings at least 36 inches? | No | _ Yes |
| E. | Are ramps non-slip? | No | Yes |
| F. | Is there a 5-foot-long level landing at the top of the ramp, at the bottom of the ramp, at switchbacks, if any, and at every 30-foot horizontal length of ramp? | No | _ Yes |
| | The ramp should rise no more than 30 inches between landings. | | |
| wh len | ramps are necessary, and the answer is "no" to any of these questions, list ich will be made if you are awarded a contract. Possible solutions including thening ramp to decrease slope, relocating ramp, rebuilding ramp, additusting railings, adding non-slip surface materials, etc. | e, but are | not limited to, |
| | Improvements to be made: | | |
| Α. | | | |
| В | | | |
| C | | | |
| | | | |
| E | | | |
| F | | | |
| acc | ARKING AND DROP-OFF AREAS . Are an adequate number of cessible parking spaces available (8 feet wide for car plus 5-foot striped cess aisle)? | No | _ Yes |
| | r guidance in determining the appropriate number to designate, the tabluirements for new construction and alterations. | e below g | ives the ADA |
| | Total spacesAccessible spacesTotal spacesAccessible | Total spaces 76 to 100 | Accessible 4 spaces |
| A. | Are 16-foot wide spaces, with 98 inches of vertical clearance, Available for lift-equipped vans? | No | _ Yes |
| | At least one of every 8 accessible spaces must be van-accessible. | | |
| В. | Are the accessible spaces closest to the accessible entrance? | No | Yes |
| C. | Are the accessible spaces marked with the International Symbol of Accessibility (standard disability parking sign)? | No | Yes |

3.

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

| | Improvements to be made: | | |
|----|--|------------------|---------------|
| | A B | | |
| | C | | |
| | After improvements, if any, have been made, how far will it be by parking space to the nearest accessible building or mall entrance wheelchair can safely travel? Measurements. | | direct path a |
| | Is the nearest accessible space within two hundred (200) feet of the accessible entrance? | | Yes |
| | Is the nearest accessible space within one hundred (100) feet of the accessible entrance? | No | Yes |
| 4. | ENTRANCE . If there are stairs at the main entrance, is there also a ramp or lift, or is there an alternative accessible entrance? | No | Yes |
| | A. Do all inaccessible entrances have signs indicating the location of the nearest accessible entrance? | | Yes |
| | B. Can the accessible entrance be used independently? | No | Yes |
| | C. Does entrance door have at least 32 inches clear opening (for double door, at least one 32-inch leaf)? | No | Yes |
| | D. Is there at least 18 inches of clear wall space on the pull side of the door, next to the handle? | No | Yes |
| | A person using a wheelchair needs this space to get close enough | to open the door | |
| | E. Is the threshold level (less than 1/4 inch high) or beveled, up to 1/2 inch high? | No | Yes |
| | F. Are doormats 1/2 inch high or less with beveled or secured edges? | No | Yes |
| | G. Is the door handle no higher than 48 inches and operable with a closed fist? | No | Yes |
| | (The "closed fist" test for handles and controls: Try opening the using only one hand, held in a fist. If you can do it, so can a personer hands.) | - | _ |

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

| | | Improvements to be made: | | |
|----|-----------|--|------------|----------------|
| | A. | | | |
| | B. | | | |
| | C. | | | |
| | D. | | | |
| | E. | | | |
| | | | | |
| | G. | | | |
| 5. | sho is | CCESS TO ALL DEPUTY REGISTRAR SERVICES. Ideally, the buld allow people with disabilities to obtain goods or services without speciment possible to provide full accessibility, assistance or alternative services request. | al assista | ince. Where it |
| | A. | Does the accessible entrance provide direct access to the main floor, lobby, or elevator? | No | Yes |
| | B. | Are all public spaces on an accessible path of travel? | No | Yes |
| | C. | Is the accessible route to all public spaces and services at least 36 inches wide (except for interior doors)? | No | Yes |
| | D. | Are the aisles between chairs or tables at least 36 inches wide? | No | Yes |
| | E. | Are there spaces for wheelchair seating distributed throughout? | No | Yes |
| | F. | Do interior doors into public spaces have at least a 32-inch clear opening? | No | Yes |
| | G. | On the pull side of interior doors, next to the handle, is there at least 18 inches of clear wall space so that a person using a wheelchair can get close enough to open the door? | No | Yes |
| | Н. | Can doors be opened without too much force? | No | Yes |
| | I. | Are door handles 48 inches high or less and operable with a closed fist? | No | Yes |
| | J. | Are all interior thresholds, if any, level (less than 1/4 inch high), or beveled, up to 1/2 inch high? | No | Yes |
| | K. | Is carpeting, if any, low-pile, tightly woven, and securely attached along edges? | No | Yes |

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

| | Improvements to be made: | | |
|-----|---|-----------|-----|
| Α. | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| J. | | | |
| | | | |
| SE | ATS, TABLES & COUNTERS | | |
| A. | Are the aisles between fixed seating (other than assembly area seating) at least 36 inches wide? | No | Yes |
| В. | Is the top of the ADA table or counter between 28 and 34 inches high? | No | Yes |
| C. | Are knee spaces at accessible tables at least 27 inches clearance height, 30 inches wide, and 19 inches deep? | No | Yes |
| are | the answer is "no" to any of these questions, list specific improvements we awarded a contract. Possible solutions include, but are not limited to noval of any fixtures or materials creating obstacles. | | • |
| | Improvements to be made: | | |
| A. | | | |
| | | | |
| | | | |
| RI | ESTROOM USAGE. Restrooms should be accessible to people with disa | bilities. | |
| A. | Is there currently a restroom available for use by the customers of the agency? | No | Yes |
| В. | Is at least one restroom (either one for each sex, or unisex) fully ADA accessible? | No | Ves |

6.

| C. | Is there adequate signage identifying the ADA restroom(s)? | No | Yes | |
|-----------------|---|----|-----|--|
| D. | Is the doorway of the ADA restroom at least 32 inches clear? | No | Yes | |
| E. | Are doors to the ADA restroom(s) equipped with accessible handles (operable with a closed fist), 48 inches high or less? | No | Yes | |
| F. | Can doors to the ADA restroom(s) be opened easily (5-pound maximum force)? | No | Yes | |
| G. | Does the entry configuration to the ADA restroom(s) provide adequate maneuvering space for a person using a wheelchair? | No | Yes | |
| Η. | Is there a 36-inch-wide path to all fixtures in the ADA restroom(s)? | No | Yes | |
| are | the answer is "no" to any of these questions, list specific improvements awarded a contract. Possible solutions include, but are not limited noval of any fixtures or materials creating obstacles. | | - | |
| | Improvements to be made: | | | |
| A. | | | | |
| | | | | |
| C | | | | |
| | | | | |
| | | | | |
| F. ₋ | | | | |
| | | | | |
| | | | | |
| ST | CALLS. The following questions apply to ADA restroom(s). | | | |
| A. | Is the stall door operable with a closed fist, inside and out? | No | Yes | |
| В. | Is there a wheelchair-accessible stall that has an area of at least 5 feet by 5 feet, clear of the door swing, OR is there a stall that is less accessible but that provides greater access than a typical stall (either 36 by 69 inches or 48 by 69 inches)? | No | Yes | |
| C. | In the accessible stall, are there grab bars behind and on the side wall nearest to the toilet? | No | Yes | |
| D. | Is the toilet seat 17 to 19 inches high? | No | Yes | |
| | | | | |

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

| A | Im | provements to be made: | | |
|---|-----|---|----|-----|
| B | Α. | | | |
| D | | | | |
| D | C. | | | |
| A. Does one lavatory have a 30-inch-wide by 48-inch-deep clear space in front? No Yes | | | | |
| space in front? No Yes B. A maximum of 19 inches of the required depth may be under the lavatory. No Yes C. Is the lavatory rim no higher than 34 inches? No Yes D. Is there at least 29 inches from the floor to the bottom of the lavatory apron (excluding pipes)? No Yes E. Can the faucet be operated with one closed fist? No Yes F. Are soap and other dispensers and hand dryers within reach ranges and usable with one closed fist? No Yes G. Is the mirror mounted with the bottom edge of the reflecting surface 40 inches high or lower? No Yes If the answer is "no" to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles. Improvements to be made: A B C D | LA | VATORIES. The following questions apply to ADA restroom(s). | | |
| C. Is the lavatory rim no higher than 34 inches? No Yes D. Is there at least 29 inches from the floor to the bottom of the lavatory apron (excluding pipes)? No Yes E. Can the faucet be operated with one closed fist? No Yes F. Are soap and other dispensers and hand dryers within reach ranges and usable with one closed fist? No Yes G. Is the mirror mounted with the bottom edge of the reflecting surface 40 inches high or lower? No Yes If the answer is "no" to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles. Improvements to be made: A B C D | A. | | No | Yes |
| D. Is there at least 29 inches from the floor to the bottom of the lavatory apron (excluding pipes)? NoYes E. Can the faucet be operated with one closed fist? NoYes F. Are soap and other dispensers and hand dryers within reach ranges and usable with one closed fist? NoYes G. Is the mirror mounted with the bottom edge of the reflecting surface 40 inches high or lower? NoYes If the answer is "no" to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles. Improvements to be made: A B C D | В. | A maximum of 19 inches of the required depth may be under the lavatory. | No | Yes |
| lavatory apron (excluding pipes)? E. Can the faucet be operated with one closed fist? No Yes F. Are soap and other dispensers and hand dryers within reach ranges and usable with one closed fist? No Yes G. Is the mirror mounted with the bottom edge of the reflecting surface 40 inches high or lower? No Yes If the answer is "no" to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles. Improvements to be made: A B C D | C. | Is the lavatory rim no higher than 34 inches? | No | Yes |
| F. Are soap and other dispensers and hand dryers within reach ranges and usable with one closed fist? No Yes G. Is the mirror mounted with the bottom edge of the reflecting surface 40 inches high or lower? No Yes If the answer is "no" to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles. Improvements to be made: A B C D | D. | | No | Yes |
| and usable with one closed fist? No Yes G. Is the mirror mounted with the bottom edge of the reflecting surface 40 inches high or lower? No Yes If the answer is "no" to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles. Improvements to be made: A B C D | E. | Can the faucet be operated with one closed fist? | No | Yes |
| 40 inches high or lower? No Yes If the answer is "no" to any of these questions, list specific improvements which will be made if you are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles. Improvements to be made: A B C D | F. | | No | Yes |
| are awarded a contract. Possible solutions include, but are not limited to repair, replacement, or removal of any fixtures or materials creating obstacles. Improvements to be made: A. B. C. D. | G. | <u> </u> | No | Yes |
| A | are | awarded a contract. Possible solutions include, but are not limited to | | |
| B | | Improvements to be made: | | |
| C | Α. | | | |
| D | - | | | |
| | | | | |
| E | | | | |
| | | | | |
| F G. | | | | |

5.3 LEASE OPTION

| I (we)(owners' complete names) _ | | |
|-------------------------------------|--------------------------------|----------------------------------|
| of (owners' complete address) | | , |
| | | , Zip |
| HEREBY GRANT, upon due cons | ideration, receipt of which is | hereby acknowledged, this OPTION |
| TO LEASE the following des | cribed property located in | the State of Ohio, County of |
| | , (state whether | er city, village or township) |
| | of | and commonly known as: |
| (property's address) | | |
| Suite City | | , Ohio, Zip |
| to (proposer's name) | | |
| of (proposer's address) | | |
| | | , Ohio, Zip |
| | | et with the Ohio Bureau of Motor |
| Vehicles, and for no other purpose. | | |

- 2. THE TERM OF THE LEASE, if executed, shall begin no later than the $\underline{28}^{\underline{th}}$ day of \underline{June} , $20\underline{26}$ and shall not terminate before the $\underline{28}^{\underline{th}}$ of \underline{June} , $\underline{2031}$.
- 3. THE TERM OF THIS LEASE OPTION shall begin on the date of its execution (signing) below and shall be held open until the $31^{\underline{s}t}$ day of May, 2026.
- 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.

| Owner(s)' signature(s): | | |
|------------------------------|---|--------|
| | | |
| STATE OF | : | |
| COUNTY OF | : | |
| The foregoing instrument | was acknowledged before me on this | day of |
| | , 2026, by the owners, | |
| Notary Public | ıblic: | |
| | | |
| I hereby accept this option. | | |
| | | |
| | | |
| | | |
| | | |
| Date | Optionee signature, Deputy Registrar Proposer | |

5.4 PROXIMITY ATTACHMENT

Instructions

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

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

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

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

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

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

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

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

QUESTIONNAIRE (SUBMIT ORIGINAL)

| 1. | Proposer's name | | |
|----|---------------------------------|-------|-----|
| 2. | Street address of proposed site | | |
| | City | State | Zip |

| 3. | what is the address of the Exam Station? |
|----|---|
| | Is the proposed site located within the same building, an adjacent building, the same business district, or the same shopping center as the Exam Station? |
| | No Yes |
| | Is it located within approximately one-half mile (0.5 miles) from the Exam Station? |
| | No Yes |
| | If YES, specify distance to nearest one-tenth mile: |
| | Also specify exact directions between the two facilities traveling in both directions (from the proposed site to the Exam Station and return): |
| | |
| 1. | If the proposed site is close to an existing Clerk of Courts Title Office (Title Office), what is the address of the Title Office? |
| | |
| | Is it located within the same building, an adjacent building, the same business district, or the same shopping center as the Title Office? |
| | No Yes |
| | Is it located within approximately one-half mile (0.5 miles) from the Title Office? |
| | No Yes |
| | If YES, specify distance to nearest one-tenth mile: |
| | Also specify exact directions between the two facilities traveling in both directions (from the proposed site to the Title Office and return): |