# **PAYROLL COMPARISON - 2025**

# Proposer Name: Mahmut Can Harmansah

Evaluator Printed Name:_	M	i	e	)	Evil	407	

Highest Rate  Lowest Rate    17/h   1			gibergin <b>l</b>	ocation N	lumber(s)		adell ou
Lowest Rate         #17/h		Loc. 1	100.2			Loc. 5 75-A	Loc.
Number of Hours Recommended         174         161         147         362         174           Number of Hours Proposed         180         152         152         396         180           Total Monthly Wages         113,392         10,928         110,928         1338         11338	Highest Rate	\$27/h	\$27/4	12714	127/6	1127/6	
Number of Hours Proposed 180  Total Monthly Wages 183,392 10,928 10,928 13 3 12 11337	Lowest Rate	\$17/4	t17/4	1/7/4	\$1716	122/h	************
Total Monthly Wages \$13,392 \$10,928 \$13 \3372	Number of Hours Recommended	174	161	147	362	174	
	Number of Hours Proposed				- 10	180	**********
	Total Monthly Wages	1973,392	10,928	#101828	13/3/2	\$1337	***************************************
	Comments						

# PERSONAL EVALUATION (2025)

Mahmut Can Harmansah 12-A / 25097 Clark County, Springfield BMV Site

Evaluation Team Number:	
Location(s) Proposed: (#1) 57 H 78 CA	75-A 36-A
Proposed as 2 <sup>nd</sup> Location	
Verify Proposer's Full Name: (#2) Multure Cun [+	all mon July
Proposer's County of Residence (NPC Operation): (#4)	+ am any
Verify Proposer's Driver's License Number: (#6)	
Proposing as Minority: (#9) Yes No	
Proposing as: (#10) Individual Clerk of Courts Co.	Auditor Nonprofit Corp.
SCORING SUBBBADA	
SCORING SUMMARY	ALLOHAND ESSAE DELL'EST
FORM 3.0, PERSONAL CHECKLIST	(Max. 16 Points): <u>[6</u>
PERSONAL EVALUATION, Page 2	(Max. 55 Points): 55
BUSINESS AND EMPLOYMENT EXPERIENCE, Page 3	(Max. 100 Points):
PERSONAL EVALUATION, Page 5	(Max. 28 Points):
PERSONAL EVALUATION, Page 6	(Max. 17 Points):
PERSONAL EVALUATION, Page 7	(Max. 27 Points): 27
PERSONAL EVALUATION, Page 8	(Max. 15 Points): 12
TOTAL BOINTS	
TOTAL POINTS	(Max. 258 Points): 255
Comments:	
	а
Evaluators' Signatures Evaluators' Pri	nted Names <u>Date</u>
(1) Mily f. Crilles Miles	J 64,14x 022625
(2)	

W.	PERSONAL EVALUATION	ОК	ИО
1.	Proposer does not and will not hold a PROHIBITED elective public office other than County Clerk of Courts or County Auditor? (#11 & 12)	6	*
2.	Proposer does not hold an overlapping deputy registrar contract? (#13)  If contract overlaps, what is the expiration date of the contract?	0	0
3.	Proposer is not a prohibited relative of a current deputy registrar? (#14, 15 & 16)	Ô	*
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	*
5.	Proposer is not a State of Ohio employee or will resign? (#19)	(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)	(5)	*
8.	Proposer owes no local, state, or federal delinquent taxes, social security payments, workers' compensation premiums or mandatory contributions? (#22)	15	*
9.	Proposer agrees to maintain acceptable business liability insurance in accordance with Ohio Revised Code section 4503.03(C)? (#23)	(5)	*
10.	Proposer can meet bond requirements? (#24 and acceptable proof)	B	*
11.	Acceptable educational information OR nonprofit corporation? (#25)	(5)	0
12.	Proposer has computer training or experience? (#26)	9	0
NO	PERSONAL EVALUATION POINTS, Page 2 (Max. 55 Points)		
Com	nments:		_   _
			_

# **BUSINESS AND EMPLOYMENT EXPERIENCE VERIFICATION** Person called: Verifie) at telephone ( Company: Truck thing Pro Che Sand Lic. 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: \_\_\_\_\_ Verified Hours \_\_\_\_\_ = Factor \_\_\_\_ x Years \_\_\_ x Points \_\_\_\_ = \_\_\_\_ Person called: \_\_\_\_\_\_ at telephone ( ) \_\_\_\_\_ Company: 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: From (date): \_\_\_\_\_ To (date): \_\_\_\_ Length: \_\_\_\_ Verified Hours = Factor x Years x Points = Person called: \_\_\_\_\_ at telephone ( 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: \_\_\_\_\_ From (date): \_\_\_\_\_ To (date): \_\_\_\_\_ Length: \_\_\_\_\_

Verified Hours \_\_\_\_\_ = Factor \_\_\_\_ x Years \_\_\_ x Points \_\_\_ = \_\_\_

#### **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. Thetalant to COL School # NA = 1.0 x > 4 50 # NA = В. 1.0 50 Χ Χ C. # NA = 1.0 50 Х Subtotal of 13-A, 13-B & 13-C = 14. OTHER BUSINESS OWNERSHIP Experience, Form 3.2

ITEM AGENCY/COMPANY	HOL	JRS = FAC	TOR X YEA	RS X F	POINTS		SCORE	VERIFIED
A.TruckThader Pro TDC 5C4001	# -	7s=	x 4	Χ	34	=	136	X
B.	#	=	X	Χ	34	=		
C.	#		Χ	Χ	34	=		
		Subtota	l of 14-A,	14-B 8	14-C	=		

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

ITEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	ARS X	POINTS	s =	SCORE	VERIFIED
Α.	#	=	X	X	25	=		
B.	#	=	Х	Х	25	=		
C.	#	=	X	X	25	Œ		
		Subtota	I of 15-A,	15-B 8	15-C	=		

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

100

AGENCY	HOU	RS = FAC	TOR X YEA	ARS X I	POINTS	5 =	SCORE	VERIFIE
	#	=	X	X	23	=		
	#	=	Х	X	23	=		
	#	=	Х	Х	23	=		
	#	=	Х	X	23	=		
	1"	= otal of 16	Χ -Δ 16-R	X 16-C 8		=	THE TANKS OF	

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

TEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	RS X	POINTS	s =	SCORE	VERIFIED
A	#	=	X	X	20	=		
B.,	#	=	X	X	20	=		
C.,	#	=	Х	Х	20	=		
D.	#	=	X	X	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.)] =

	PERSONAL EVALUATION	ОК	NO
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?	0	0
19.	Form 3.4 – Start-Up Cost Funds On Deposit (not required for Auditors or Clerks of Cou	rts)	
	A. Are funds in acceptable financial institution and verified with bank/teller stamp?	(3	*
	B. Are funds in proposer's or proposer's business name or joint with spouse?	5)	*
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)	(5)	*
21.	Form 3.6 – Personnel Policy Summary		
21.	Does proposer agree to provide/maintain a written personnel policy covering the follow	/ing	
	A. Hiring employees with deputy registrar agency experience?	119.	
	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?	41	0
	H. Dress code with list of acceptable attire?		
	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)?		
NOT	PERSONAL EVALUATION POINTS, Page 5 (Max. 28 Points) E: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract continued to contract c	Z 8	> >
Com	ments:		

		PERSONAL EVALUATION	ок	NO
22.	Fo	rm 3.7 – Security Plan Summary - Did proposer agree to provide:		
	<u>A.</u>	An electronic alarm system? (Mandatory)		
	<u>B.</u>	Alarm system monitored 24 hours, off-site? (Mandatory)		
	<u>C.</u>	Alarm system reports off-site if wires cut or tampered with? (Mandatory)		
	<u>D.</u>	Adequate alarm monitored panic/hold-up buttons? (Mandatory)		
l	<u>E</u> .	Motion detectors connected to alarm system? (Mandatory)		
l	F.	Alarm monitored contacts on all exterior doors? (Mandatory)		
	<u>G</u> ,	Alarm monitored contacts on all exterior windows? (Mandatory)		
	Н.	Video recording camera surveillance system? (Mandatory)		
l	1	Safe or secured locking cabinet? (Mandatory)	000	
	J.	Secured storage room with alarm monitored contacts on door(s) and window(s), if applicable? (Mandatory)	(13)	*
	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	(9K	NO
23.	For	m 3.8 – Facility Maintenance Plan Summary - Did proposer agree to provide:		
	<u>A.</u>	Indoor/Outdoor maintenance and cleaning?	Ą	0
	В.	Prompt snow and ice removal?	d	0
	<u>C.</u>	Carpet and/or floor cleaning (if appropriate)?	0	0
	D.	Repainting?	O	0
		PERSONAL EVALUATION POINTS, Page 6 (Max. 17 Points)	17	
NOT	E: So	core indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract conti	ngency	
Com	men	ts:		-
				_ [
-				-
				_

		PERSONAL EVALUATION	ок	NO
24.	For	m 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?	a	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?	0	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?	0	0
	5.	How will you demonstrate good leadership to your employees?	Q	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?	0	0
	8.	How will you provide a safe, clean, and friendly place to do business?	0	0
	9.	How would you deal with an irate customer?	0)	0
	10.	What training or advice do you, or will you, give to your employees for dealing with irate customers?	Ð	0
	11.	How will you meet the expectations of the Ohio Bureau of Motor Vehicles?	1	0
	12.	Why should the Ohio Bureau of Motor Vehicles consider you for a deputy registrar license agency contract?	0	0
25.	For	m 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?	a	*
		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?	ð	*
	В.	No convictions (except minor traffic) / AOI for nonprofit corporation?	(}	0
27.		I / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation	6	

PERSONAL EVALUATION POINTS, Page 7 (Max. 27 Points) 22

	PERSONAL EVALUATION	ОК	NO
28.	Credit Report (issued in 2025) / 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?	B	0
	B. No tax liens (state or federal)?	Š	0
	C. No judgments for the past 36 months?*	3)	0
	D. *No bankruptcy filed or trusteeship imposed for the past 36 months?	D	0
	E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?	2	Ø
	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)	Q	0
NOTI	E: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract conti	ngency	
Comr	ments:		_
-			-
			_
<u> </u>			-
<del>10</del>			_
			_

# **OPERATIONAL EVALUATION (2025)**

Mahmut Can Harmansah 29-B / 25098 Greene County, Beavercreek BMV Site

FORIVI	DESCRIPTION	OK	NO		
4.0	Operational Checklist – Maximum = 6 Points (enter points recorded on bottom of Form 4.0)	X			
4.1	Appointment of Agency Managers	322			
	A. Deputy to Work at Least Twenty (20) Hours Per Week				
	Proposed Work Hours Per Week >6	(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: Proposed:	4	*		
	B. Work Hours and Pay Calculated Correctly	2	0		
	C. Meets Minimum Wage Requirement (2025 Ohio Minimum Wage Rate = \$7.25 or \$10.70 Per Hour)	0	*		
4.4	Start-Up Costs Calculation				
	A. Adequate and Accurate Personnel Costs				
	B. Adequate and Accurate Site Preparation Costs				
	C. Adequate and Accurate Rental Payments	2	0		
	D. Total Required: \$ 7.086CV On Deposit (Form 3.4): \$51,4119	(5)	*		
4.5	Deputy Registrar Contract				
	A. Filled Out Completely and Properly	0	0		
	B. Signed and Properly Notarized	3	0		
NOTE: Score	OPERATIONAL EVALUATION POINTS (Max. 40 Points) e indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract	36 continge			
Comments	Below recommended hours.				
Evalu	ators' signatures Printed names	Date			
(1)	Miles J. Chillix	27.c	73.25		
(2)		9			

# **DEPUTY REGISTRAR**

# **REQUEST FOR PROPOSALS**

# **2025 FORMS**

**AND** 

**INSTRUCTIONS** 

#### 3.0 PERSONAL CHECKLIST

# Proposer's Full Legal Name MAHMUT CAN HARMANSAH

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	1	вму	COUNTY AUDITOR OR CLERK OF COURTS	1	вму	NONPROFIT CORPORATION	1	ВМУ
Form 3.0 Personal Checklist (this form)	V		Form 3.0 Personal Checklist (this form)			Form 3.0 Personal Checklist (this form)		
Form 3.1 Personal Questionnaire	V		Form 3.1 Personal Questionnaire			Form 3.1 Personal Questionnaire		
Form 3.2 Business and Employment Experience	~		Forms 3.2 Business and Employment Experience			Forms 3.2 Business and Employment Experience		
Form 3.3 Customer Service Experience	V		Form 3.3 Customer Service Experience			Form 3.3 Customer Service Experience		
Form 3.4 Start-Up Cost Funds on Deposit	V		N/A	x	1	Form 3.4 Start-Up Cost Funds on Deposit		
Form 3.5 Political Contributions Report	~		N/A	х	1	Form 3.5 Political Contributions Report Nonprofit Corporation		
N/A	x	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	~		Form 3.7 Security Plan Agreement			Form 3.7 Security Plan Agreement		
Form 3.8 Facility Maintenance Plan Agreement	V		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		
2025 Credit Report			N/A	х	1	2025 Certificate of Good Standing		
2025 Local Law Enforcement Report			2025 Local Law Enforcement Report			Articles of Incorporation		
2025 WebCheck Receipt			2025 WebCheck Receipt			N/A	х	1
Pre-approval Statement for \$25,000 Bond			Current Bond with BMV added as Additional Insured			Pre-approval Statement for \$25,000 Bond	+	
INDIVIDUAL		C	COUNTY AUDITOR OR CLERK OF COURTS			NONPROFIT CORPORATION		

## 3.1 PERSONAL QUESTIONNAIRE

List all locate Check the bo	on numbers for which was underneath if pro-	ich the applicant in posing the location	ntends to submit an as a second site	a proposal (limit six l in addition to a curre	ocations).
57-H	29-B	12-A	75-A	36-A	
Full legal nar	ne of proposer MA	AHMUT CAN	N HARMAN	SAH	
Proposer's et	reet address				
Ci		State	ОН	Zip code _	15424
County of res	sidence (nonprofit co	orporation county	of operation) M	ONTGOMER'	Y
I		,			
I					
5					
Spouse's hon	ne street address (no	onprofit corporatio	n N/A)		
City		State		Zip code	
				IBE)? No	
			iess emerprise (iv	ibe): No	res
	heck one and follow				
proposi	lividual person.  ing as individual pe  n does not apply to	ersons. Answer al	I questions as the	self-explanatory for ey apply to you perso e;	r Proposers onally. If a
The Cl	erk of Courts of		County;		
to you	ounty Auditor of _and your position as or your position, ent	s Clerk of Courts ter "N/A" or "Not	or County Audit	nswer all questions as or. If a question doe	s they apply es not apply
question itself an	ns and sign all docund not to the indivi	uments on behalf of idual officers, age	of the NPC. The nts, or employee	orized agent should answers must refer as of the NPC, unless t corporations. To	to the NPC s otherwise

Form 3.1, Personal Questionnaire, Page 1 of 6 (2025)

11. A.	Are you currently serving in elective public office Auditor, either by election or appointment (includes p	e, other	than Clerk of	Courts or (on)? (NPC N/	County (A)
			Yes	No	~
B.	If YES, in what elective office are you serving?				
C.	If YES, date that you plan to leave this office?				
12. A.	Are you currently running for any elective public offic (including precinct committee person)? (NPC N/A)	ce.	Yes	No	~
B.	If YES, what office?				
13. A.	Are you currently a deputy registrar?		Yes	No_	V
B.	If YES, on what date does your contract expire?				
C.	If YES, have you served as a deputy registrar continuous since January 1, 1992?	ously	No	Yes	
14. A.	Is your spouse currently a deputy registrar? (NPC N/A	1)		No	
B.	If YES, on what date does your spouse's contract expiration	re?			
daught	e following three questions, <b>extended family</b> include er, father-in-law, mother-in-law, brother-in-law, sister- Does any member of your extended family currentl	in-law,	son-in-law, or d	aughter-in-la	w:
	N/A)	y noid		No No	
В.	If YES, list their name, relationship to you, whether their contract expires here:	you sh		- //	
Na	me Relationship	Samo	Household	Contract Ex	xpires
2		Yes	No		
-		Yes	No		
-		Yes	No		
l6. A.	To the best of your knowledge, will any member of yo submit a proposal in response to this RFP? (NPC N/A)	ur exten	ded family		
			1 68	_ No_	8

Namo		nousehold:	
Name Relationship		Same House	
		es No	
		es No	
		es No	
	Y	es No	
A. Is any member of your extended family employed by any sub- Public Safety? (NPC N/A)			
	Yes	No_	V
B. If YES, list their name, relationship to you, and the date they	became so empl	loyed:	
Name Relationship		Employment	Dat
Ketationship		ampioyment	Dat
A. Have you completed the Political Contributions Report, Form	2.50		
(NPC must submit one for NPC itself and one for its C.E.O.)		Yes_	V
B. If "NO," are you applying as a Clerk of Courts or County Aud	litor? No	Yes	
A. Are you an employee of the State of Ohio? (NPC N/A)	Yes	No	~
B. If "YES," will you resign, if appointed?	No	Yes	
Are you an insurance company agent, writing automobile insurance	ce?		
(NPC N/A)		No_	~
Has Proposer (including NPC and proposed office many) by		- 10	
Has Proposer (including NPC and proposed office manager) been of a crime punishable by death or imprisonment in excess of involving dishonesty or false statement?	one year (feld	ony), or any	cri
involving dishonesty of faise statement:	Yes	No	
			V
A			
As of the date of this certification does Proposer owe an compensation contributions, social security payments, or workers the State of Ohio or any political subdivision thereof, or to the fed or locality within the United States?	y overdue tax	premiums ei	oyme

Form 3.1, Personal Questionnaire, Page 3 of 6 (2025)

23	e. Is Proposer willing and able, if appointed, to maintain during policy of business liability property damage, and theft insurance hold the Department of Public Safety, the Director of Public Safety and the Registrar of Motor Vehicles harmless upon claims for Revised Code 4503.03(C)? (County Auditor/Clerk of Courts N/A)	ce satisfactory fety, the Burea damages in a	to the	Registor V	strar and Vehicles,
	Revised Code 4505.05(C)? (County Auditor/Clerk of Courts N/A	No		Yes_	~
24	. Is Proposer bondable as outlined in Ohio Administrative Code 4501:1-6-01(B)?	No		Yes_	~
25	. Please provide the following information regarding your education provide educational information for the individual who will manage	tion. If apply	ing as a	NPC	C, please ness.
	High school diploma?	No		Yes_	~
	High school name YAVUZ SULTAN SELIM ANAD	OLU HIG	H SC	CHC	OL
	City NIGDE State TURKEY		Zin	51	000
	College name ANADOLU UNIVERSITY		Z.P_		
	High school name  YAVUZ SULTAN SELIM ANAD  City NIGDE  State  TURKEY  College name  ANADOLU UNIVERSITY  City ESKISEHIR  State  TURKEY  Degree awarde		Zip	260	000
	Major_BUSINESS ADMINISTRATION Degree awarde	YES			
	College name STRAYER UNIVERSITY				
	College name STRAYER UNIVERSITY  City NEWPORT NEWS State VA		Zip	236	606
	MASTER OF BUSINESS ADMINISTRATION  Major Degree awarde	YES			
26.	Computer experience. Does Proposer have any training or ecomputers? (Incumbent deputy registrars may take credit for nonprofit corporations, this question should be answered for conthe nonprofit corporation's activities.)	operating BN nputer systems	IV con s operat	nputer ted or	rs. For used in
		No		Yes_	

I possess strong foundational computer skills and am highly proficient in the use of various software and tools required for administrative and operational efficiency. My	technical expertise includes
crosoft Office Suits: Advanced proficiency in Word, Excel, PowerPoint, and Outcok. I can efficiently create and edit documents, manage spreadsheets with complex formulas, design professional presentations, and ha	ndle email correspondence and scheduling.
ata Entry and Management: Skilled in accurately inputting, organizing, and retrieving data using specialized software and databases, ensuring compliance with regulatory standard	ds and data security protocols.
ffice Equipment and Software: Experienced in using standard office equipment, including printers, scanners, and multifunctional devices, as well as software tools for task ma	anagement and collaboration.
ustomer Service Systems: Familiarity with customer-facing systems, point-of-sale (POS) software, and record-keeping platforms essential for seamless service delivery in	a high-volume environment.
roblem-Solving with Technology: Adept at troubleshooting common technical issues and quickly adapting to new systems or processes to main	tain workflow efficiency.
ly ability to navigate complex systems and utilize technology effectively allows me to provide exceptional service while maintaining accuracy an	d efficiency in all tasks.
ly ability to navigate complex systems and utilize technology effectively allows me to provide exceptional service while maintaining accuracy an	d efficiency in all tasks.
hese skills are complemented by my commitment to continuous learning and adaptation to new tools and proce	esses as needed.
daytime business hours and who will serve as a character reference for you political contacts, or employees of the Department of Public Safety (includ unable to contact at least one person or that person is unable to serve as a character reference for you.	Do not list relatives ing BMV). If we are paracter reference, vo
political contacts, or employees of the Department of Public Safety (includ	Do not list relatives ing BMV). If we are paracter reference, you
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Form 3.1, Personal Questionnaire, Page 5 of 6 (2025)

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.

Nonprofit corporations 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.

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

## 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(A) for each business owned. *Please make additional copies of this form as necessary*.

Proposer's name	MAHMUT CAN HAF	RMANSAH	Company nam	e TRUCKTRAIL	ERPRO CDL SCHOOL LLC
	1602 VALLEY STR		City	DAYTON	
State_OH	Zip_	45404	_ Telephone ( 93		
Type of business	deputy registrar, retai	l grocery, etc.			
Company's produc	cts and/or services CO	MMERCIAL	DRIVING LICENS	E EDUCAT	ION SERVICES
	ER - Form of owners			PARTNER	RSHIP
	ID Number:				
2. Percentage	of business you owned	i:25	% Hou	ırs worked v	veekly20
3. Dates you o	perated this business:	From: month	11 year 2021	To: month	1year _2025
4. Is/was this b	ousiness profitable?			No	Yes_
5. Is/was this b	ousiness your primary	source of inco	ome and support?		Yes_
6. Do/did you	directly hire, evaluate,	train, and dis	cipline employees?	No	Yes
7. Do/did you	directly manage emplo	yees on a dai	ly basis?	No	Yes
If you answ	ered yes to question n	umber 6, how	many employees d	o/did you m	anage?25
8. Have you ev	er developed a compr	ehensive busi	ness plan?	No	Yes
least one person to	erson, not a relative of o verify this experience registrar employee, ye	ce, you will r	not receive any cred	dit for it. (I	re cannot contact at

## 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	MAHMUT CA	N HAR	RMANSAH	Company na	me TRUCKTRA	AILERPRO CDL SC	CHOOL LLC
Company address	1602 VALLE	Y STR	EET	Cit			
State OH		Zip		Telephone (			}
Type of business	(deputy registra	ar, retail	grocery, etc	.) COMMERCIA	L DRIVING	SCHOOL	
Management/sup	ervisory duties	GENER	RAL MANAGE	MENT, CUSTOME	R SERVICE, S	SCHEDULE, H	R, ETC
MANAGER OR	SUPERVISOR	- Job tit	le: DIRECT	OR			
							25
				1 year 2021			
3. Do/did you	directly hire, e	valuate,	train, and di	scipline employee	es? No	Yes	~
4. Do/did you	directly manag	e/superv	vise employe	ees on a daily basis	s? No	Yes_	~
If you answ	ered yes to que	estion nu	ımber 4, hov	many employees	do/did you	manage?	25
5. Have you e	ver developed a	compre	ehensive bus	iness plan?	No	Yes_	~
List at least one p least one person t registrar or deputy	o verify this ex	kperienc	e, you will	not receive any c	redit for it.	(If you are a	ontact at 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 MAHMUT CAN HARMANSAH			Company name TRUCKTRAILERPRO LLC		
Company address 1602 \	/ALLEY STF	REET	City DA	YTON	
State_OH	Zip	45404	_ Telephone ( 937	8880888	
Type of business (deputy 1	egistrar, retai	il grocery, etc.	TRUCK PARTS WE	HOLESALE STORE	
EMPLOYEE - Job title:	SALES MAN	AGER			
Hours worked weekly	40	Job duties	SALES MANAGER, C	USTOMER RELATIONSIP	
Dates of this employment:				nth 11 year 2021	
Managed sales, custom					
Developed strategic initi					
List at least one person, no least one person to verify registrar or deputy registrar	this experien	ce, you will r	not receive any credit f	ce. If we cannot contact at for it. (If you are a deputy y that experience.)	
				_( )	
				( )	

### 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 MAHMUT CAN HARMANSAH			Company name MIDSTATE LOGISTICS LLC		
Company address 160	2 VALLEY STR	EET	City DAYTO	N	
State OH	Zip	45404	Telephone ( 614 )		
Type of business (depu	ty registrar, retail	grocery, etc.	TRUCKING COMPANY		
EMPLOYEE - Job title	TRUCK DRIV	ER			
Hours worked weekly_	40	Job duties	DELIVERING GOODS FI	ROM POINT A TO B	
Describe how and to wh	hat extent you pro	ovided high	quality customer service at	this position:	
		188-	ectations and maintaining l		
			amage claims and increasing of		
Maintained accurate le	ogs, reports, and	regulatory of	compliance, providing trans	sparency and trust.	
east one person to ver	ify this experience	ce, you will i	can verify this experience. In the receive any credit for it. MV employees to verify that	(If you are a deputy	
			(	)	

#### 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):

Implement a ticketing or appointment scheduling system to reduce wait times and manage customer flow more efficiently. Use digital displays to keep customers informed about their place in line and estimated wait times. Offer multilingual support for non-English-speaking customers through bilingual staff or translation services. Ensure ADA-compliant facilities and provide assistive technologies, such as hearing devices or screen readers, to accommodate all customers. Set up a digital and in-person feedback system to gather insights on customer experiences and suggestions for improvement. Regularly review feedback and act on common themes to enhance services. Conduct regular customer service training sessions for staff to improve communication, conflict resolution, and cultural sensitivity. Create incentive programs to reward staff for outstanding customer service, boosting morale and performance. Provide printed brochures or guides in the agency with step-by-step instructions for common services. Introduce express lanes for simple transactions like license renewals or address changes, reducing congestion for more complex services. Offer designated specialty counters for commercial driver's licenses or fleet-related services. Maintain a clean, comfortable, and welcoming environment with adequate seating, free Wi-Fi, and charging stations. Station greeters or floor staff to assist customers as soon as they enter, helping them prepare documents or navigate the agency's services. Use digital checklists or email reminders to ensure customers arrive prepared with the required documentation. Partner with local schools, businesses, and community organizations to provide educational seminars on driving laws. vehicle registration, and licensing processes. Hold occasional extended hours or weekend events for customers unable to visit during regular business hours. What I did for my business? Personalized Assistance at CDL School. Implemented a multilingual support system to address the needs of foreign language-speaking students, making the CDL process more accessible. Developed an online booking system for classes, allowing students to schedule their sessions conveniently. Trained staff at CDL School on cultural sensitivity and communication, ensuring every student felt valued and respected. Introduced pre-enrollment document checklists to minimize errors and delays, ensuring a smoother experience for students. Actively sought feedback from students and implemented changes based on their suggestions, such as flexible class times and enhanced training materials. Organized community seminars to educate potential students about the CDL licensing process. contributing to higher satisfaction and better-prepared customers.

Form 3.3, Customer Service Experience (2025)

#### 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.

<u>County Auditors and Clerks of Court are exempt</u> 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: MAH	IMUT CAN HARMANSAH	
Title (if officer o	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	JAN 1 - DEC 31 2022		JAN 1 - DEC 31 2023		JAN 1 - DEC 31 2024		2025 To Date	
	Yes	No	Yes	No	Yes	No	Yes	No
Democratic Party including PACs and Associations		V		~		V		V
Republican Party including PACs and Associations		V		~		V		V
Any other Party including PACs and Associations		V		~		~		V
Governor, Candidate and Committee		V		V		~		V
Attorney General, Candidate and Committee		V		V		~		V
Secretary of State, Candidate and Committee		~		V		V		V
Treasurer of State, Candidate and Committee		V		V		V		V
Auditor of State, Candidate and Committee		V		V		~		V
State Senator, Candidate and Committee		V		V		~		V
State Representative, Candidate and Committee		~		~		V		V

Form 3.5, Political Contributions Report (2025)

#### 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

## COMPREHENSIVE PERSONNEL POLICY MUST INCLUDE PROVISIONS FOR:

TOTAL ELEMENT OF CORRESPONDENCE				
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 \_\_\_\_

OUTDO	OR BUILDING MAINTENANCE	
KEEP OU	JTDOOR AREA FREE OF TRASH AND DEBRIS	
PROVISI	ON TO ASSURE PROMP SNOW AND ICE REMOVAL	
CLEANI	NG INSIDE OF AGENCY INCLUDING EQUIPMENT	
PROVISI	ON FOR INSIDE/OUTSIDE MAINTENANCE	
PROVISI	ON FOR PROFESSIONAL CARPET/FLOOR CLEANING (MIN. OF ONCE A YEAR	AR)
	ON 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 manage the agency by maintaining clear policies, ensuring compliance with all regulations, and fostering a professional work environment. I will oversee daily operations, train and support staff, and use technology to track performance and address issues promptly. By staying accessible to both staff and customers, I will ensure accountability and uphold high service standards while addressing any challenges swiftly and effectively.

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 will ensure strict compliance by training staff thoroughly on all laws, rules, and procedures, regularly updating them on changes. I will implement quality control measures, conduct audits, and use system checks to prevent errors. Clear, step-by-step guidelines will be provided, and staff will have access to resources for clarification. My leadership will emphasize accountability, accuracy, and adherence to state policies to maintain integrity in all transactions.

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

I will implement strict document verification protocols, regularly train staff on fraud detection, and utilize state-approved authentication tools. Routine audits and transaction reviews will ensure compliance and identify anomalies. Clear policies for reporting suspicious activity will be established, and surveillance systems will monitor transactions. By fostering a culture of vigilance and accountability, I will minimize fraud risks and maintain the integrity of all operations.

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?

I will establish a system to promptly review BMV email updates, hold regular staff meetings to communicate changes, and provide written summaries for reference. Staff will undergo immediate training on new procedures, and compliance will be monitored through daily oversight and periodic audits. Open communication will encourage questions to ensure full understanding and adherence to all updates.

	I will lead by example, maintaining professionalism, integrity, and accountability in all actions. I will provide clear guidance, foster open communication, and ensure employees feel supported through regular training and feedback. By recognizing achievements, addressing concerns promptly and creating a positive work environment, I will motivate staff to perform their best and uphold high service standards.
6.	How will you maintain a high level of professionalism each day in this business?
	I will maintain professionalism by adhering to all BMV regulations, ensuring excellent customer service, and fostering a respectful and inclusive environment. I will lead by example, dressing appropriately, communicating clearly, and resolving issues promptly and calmly. Continuous training for myself and staff will reinforce professional standards, and I will consistently monitor operations to ensure quality and efficiency in all interactions.
7.	How do you intend to recruit and retain high quality employees?
	I will recruit high-quality employees through targeted job postings, competitive compensation, and a thorough interview process focused on skills, professionalism, and customer service aptitude. To retain employees, I will foster a positive work environment, provide ongoing training and development, recognize achievements, and offer clear growth opportunities. Regular communication and addressing employee needs will ensure job satisfaction and long-term commitment.
8.	How will you provide a safe, clean and friendly place to do business?
	I will ensure a safe, clean, and friendly environment by maintaining strict cleaning protocols, adhering to safety regulations, and regularly inspecting the facility. Staff will be trained in workplace safety and customer service to create a welcoming atmosphere. Clear signage, organized workspaces, and accessible facilities will enhance the customer experience, while addressing any concerns promptly ensures a positive and secure environment for all.
9.	How would you deal with an irate customer?
	I would remain calm, listen attentively to the customer's concerns, and acknowledge their frustration. Using a respectful and empathetic tone, I would work to resolve the issue by providing clear explanations or offering solutions. If necessary, I would involve a supervisor or follow established protocols to address the situation. My goal is to de-escalate the situation and ensure the customer feels heard and valued.

What train	ing or advice do you, or will you, give to your employees for dealing with irate cu	stomer
They will I solutions. supervisor.	employees to stay calm, listen actively, and respond empathetically to irate custo earn to maintain a professional tone, avoid escalating the situation, and focus on Fraining will include role-playing scenarios and clear protocols for when to invole Employees will be encouraged to treat every customer with patience and respect positive resolution and maintaining the agency's professionalism.	finding ve a
How will y	ou meet the expectations of the Bureau of Motor Vehicles?	
procedures maintaining operational	the Bureau of Motor Vehicles' expectations by ensuring full compliance with all s, and regulations. Regular staff training, prompt implementation of updates, and g accurate records will uphold standards. I will prioritize excellent customer service efficiency, and accountability. Open communication with the BMV, timely report audits will further demonstrate my commitment to meeting and exceeding their is.	ice.
Why should	the Bureau of Motor Vehicles consider you for a deputy registrar license agency	contr
owner. I an service, and and operati	of Motor Vehicles should consider me for a deputy registrar license agency commy proven leadership, management, and customer service experience as a busine a dedicated to maintaining compliance with all BMV regulations, providing excell fostering a professional environment. My skills in team management, problem-onal efficiency ensure I can effectively run the agency while meeting the BMV's and expectations.	ess ptional solving

Form 3.9, Involved and Invested in Your Business, Page 3 of 3 (2025)

#### 3.10(A) AFFIDAVIT OF INDIVIDUAL

(Not to be used by County Auditors, Clerks of Courts or Nonprofit Corporations)

County of Montgomery	1		
State of Ohio	:		
$_{ m I,}$ Mahmut can haf	RMANSAH	_, being first duly swor	m, 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:
- 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: MAHMUT CAN HARMANSAH	
Sworn to and subscribed in my presence by the above named Mahmut Can	Harmansah
on this 25 day of January	, 2025
on this 25 day of January  Warle Howell  Notary Public  Printed name of Notary Public: Karla Howell  My commission expires:	KARLA HOWELL Notary Public, State of Ohio My Commission Expires: July 12, 2025
Form 3.10(A), Affidavit of Individual (2025)	

# DEPUTY REGISTRAR REQUEST FOR PROPOSALS

**SECTION 4** 

(2025)

**OPERATIONAL FORMS** 

#### 4.0 OPERATIONAL CHECKLIST

Proposer's Full Legal Name	MAHMUT CAN HARMANSAH		
Location Number			
Proposer Number ( <i>BMV use</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	V	
4.2	Experienced Employees Summary	V	
4.3	Staffing and Personnel Costs Calculation	~	
4.4	Start-Up Costs Calculation Amount: \$		
4.5	Deputy Registrar Contract (2 pages only)	V	

### 4.1 APPOINTMENT OF AGENCY MANAGERS

Proposer's name: MAHMUT CAN HARMANSAH	Location number: 29-B
(A) <u>DEPUTY REGISTRAR</u> : As deputy registrar, I agree to whours per week during the hours the agency is open to the entire term of the contract. I understand that the minimulis twenty (20) hours per week during the hours the agency twenty-hour requirement does not apply to County A nonprofit corps., or deputy registrars operating multiple I	ne public for business throughout the um requirement for deputy registrars cy is open for business. This auditors/Clerks of Courts,
(B) OFFICE MANAGER: I understand and agree that I manager must be scheduled to work at the agency at leduring the hours the agency is open to the public for busing the hours the agency is open to the public for busing the hours the agency is open to the public for busing the hours the agency is open to the public for busing the hours the agency is open to the public for busing the hours the agency is open to the public for busing the hours the agency is open to the public for busing the hours the agency is open to the public for busing the hours the agency is open to the public for busing the hours the agency is open to the public for busing the hours.	for the agency, and that the office ast thirty-six (36) hours per week iness. It is my intention to: k at least thirty-six hours per week for business.
Appoint another reliable person to serve as the of six hours per week during the hours the agency is	open to the public for business.
(C) <u>ASSISTANT OFFICE MANAGER</u> : I understand and a person to be responsible for the management of the agency office manager during the hours the agency is open.	ncy in the absence of myself and the
(D) OTHER EMPLOYEES: I agree to maintain an accurate manager, assistant office manager, and all other employer as my own work schedule, on file and available for in times. I also agree to notify the BMV in writing in appointment of the office manager or assistant office roster complete and current.	ees and their work schedules, as well aspection by BMV employees at all mmediately of any changes in the
Deputy registrar (proposer) signature	1/25/2025 Date:

## 4.2 EXPERIENCED EMPLOYEES SUMMARY

Proposer's name:	Location number: 29-B
(A) HIRING EXPERIENCED EMPLOYEES. I certify that registrar under contract with the Registrar of Motor Vehicle effort to hire and retain qualified employees who have redeputy registrar agency. I agree to make bona fide offer wages and under comparable conditions to their most receive experience.	les, I will make every good faith elevant experience working in a s of employment at comparable
I HAVE NOT BEEN A DEPUTY REGISTRA EMPLOYEE. I have not yet identified any prelevant deputy registrar experience. However, if every reasonable effort to identify and hire, if possible and have relevant experience working in a deputy recontact any deputy registrar employees until a contract.  I AM OR HAVE BEEN A DEPUTY REGISTRA EMPLOYEE. I have identified the following personate of their present employment. (A deputy registrar registrar employment experience may list himself.  Name of Experienced Employee.	ospective employees who have awarded a contract, I will make essible, qualified employees who registrar agency. Please do not after you have been awarded a AR OR DEPUTY REGISTRAR sons to whom I will make a bona and under comparable conditions or a proposer who has deputy
(C) I understand that failure to hire properly qualified and employees is grounds to withhold or terminate my deputy r	
Deputy registrar (proposer) signature	Date:

Form 4.2, Experienced Employees Summary (2025)

#### 4.3 STAFFING AND PERSONNEL CALCULATION

Proposer's name:	MAHMUT CAN HARMANSAH	Location number:	29-B	

<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 \$394,000 per year and \$10.70 per hour by businesses with gross receipts of \$394,000 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	PROJECTED HOURS PER WEEK	PROJECTED HOURLY RATE	PROJECTED WEEKLY PAY	PROJECTED MONTHLY PAY (weekly x 4)
Deputy Registrar	36.00	N/A	N/A	N/A
Office Manager (leave blank if the Deputy Registrar is also the Office Manager)	36.00	\$ 27.00	\$ 972.00	\$ 3,888.00
Assistant Office Manager	0.00	\$ 25.00	\$ 0.00	\$ 0.00
Experienced Employees Total Number (combine Full-time & Part-time) =2	80.00	\$ 22.00	\$ 1,760.00	\$ 7,040.00
New Hire Employees Total Number (combine Full-time & Part-time) =0	0.00	\$ 17.00	\$ 0.00	\$ 0.00
TOTALS	152.00	N/A	\$ 2,732.00	\$ 10,928.00

## 4.4 START-UP COSTS CALCULATION

Prop	ooser's 1	name:	MAHMUT CAN HARMA	NSAH Location	on number:	29-B
cost	s of be	ginning	nis form is to assure the BN g a deputy registrar busines s to cover your personnel, s	ss. We need to kno	w that you	have enough
1.	PE	RSO	NNEL COSTS (FOUR	WEEKS)		
	Use	Form	4.3 to calculate four (4) we	eks' personnel costs	for this loc	eation.
					\$ 1092	B 
2.	SIT	E PF	REPARATION COSTS	S (AMORTIZEI	D)	
	A.	costs	is is a Deputy Provided S you will need to spend trar agency in each of the fo	to prepare the build sllowing categories:	ding for us	
		1.	<b>Building Modifications</b>	\$ N/A		
		2.	Counter Costs	\$ <u>N/A</u>		
		3.	Other Costs	§ N/A		
		4.	Total	\$ N/A		
			l amortized over 60 month ide line 4 by 60)	contract period =	\$ N/A	
	В.	Ager	is is a BMV Controlled Start Specifications for this is the Agency Specifications	location. Do not o		
3.	AG	ENC	Y RENTAL PAYMEN	NTS (3 MONTH	(S)	
	A.		is is a Deputy Provided S or lease this site.	ite, enter the actual	amount yo	ou will pay to
	В	Ager	nis is a BMV Controlled ncy Specifications for this semonth's rent:		the amou	nt listed.
то	[fou site	r week prepa	RT-UP COSTS  as' personnel costs, plus one ration costs (2.A total am l Site amount), plus three mo	ount or 2.B BMV		8.68

# STATE OF OHIO DEPARTMENT OF PUBLIC SAFETY BUREAU OF MOTOR VEHICLES DEPUTY REGISTRAR CONTRACT - 2025

This Agreement is made by and between	veen the Registra	r of Motor Vehicles, (Registrar,
herein), located at 1970 West Broad		mbus, Ohio 43223-1102 and (deputy registrar, herein) whose
home mailing address is		
(City)	, Ohio (Zip) 454	, to operate a deputy
registrar agency, Location No. 29-B		, to be located as follows: in the
State of Ohio, County of GREEN		
City/Village/Township (indicate which)	CITY	of BEAVERCREEK
Street address: 1221 Meadow Bridge D	Prive, Suite B	
(City) BEAVERCREEK	, Ohio (Zip)	45434

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 2025 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 2025 Deputy Registrar Contract Terms and Conditions incorporated herein by reference;
- 3. The term of this appointment and contract shall begin on the 29<sup>th</sup> day of June, 2025, and shall end on the 29<sup>th</sup> day of June, 2030, unless otherwise terminated as provided herein;

Form 4.5, Deputy Registrar Contract (2025)

	that he or she has read, understands, and hereby agrees strar Contract Terms and Conditions incorporated herein.
126	1/25/2025
Deputy Registrar signature	Date
STATE OF OHIO	
COUNTY OF MONTGOMERY	:
Before me, a notary public in and for named MAHMUT CAN HARMANSA	r said county and state, personally appeared the above  AH  , who acknowledged that he or she did
	at the same is his or her free act and deed.
sign the foregoing instrument and the IN WITNESS WHEREOF I have he of JANUARY , 2025	at the same is his or her free act and deed.  reunto set my hand and official seal, this day
IN WITNESS WHEREOF I have he of JANUARY , 2025  WOLL HOWELL  NOTARY PUBLIC  Printed name of Notary Public: Kar	reunto set my hand and official seal, this day .
sign the foregoing instrument and the IN WITNESS WHEREOF I have he of JANUARY , 2025  Wale Houll NOTARY PUBLIC	reunto set my hand and official seal, this day .
IN WITNESS WHEREOF I have he of JANUARY , 2025  WOLL HOUSE  NOTARY PUBLIC  Printed name of Notary Public: Kar	reunto set my hand and official seal, this
IN WITNESS WHEREOF I have he of JANUARY , 2025  WOLL HOWELL , 2025  NOTARY PUBLIC  Printed name of Notary Public: Kan My commission Expires: 1/12  STATE OF OHIO DEPARTMENT OF PUBLIC SAFE	reunto set my hand and official seal, this