## **PAYROLL COMPARISON - 2025**

## Proposer Name: Michelle Tranor

	Sept Fag E met n. Y	Location Number(s)									
	<u>Loc. 1</u>	Loc. 2	Loc. 3	Loc. 4	<u>Loc. 5</u>	Loc. 6					
	71-A										
Highest Rate	\$126										
Lowest Rate	\$74/6										
Number of Hours Recommended	188	***************************************	***************************************								
Number of Hours Proposed	736		1000000								
Total Monthly Wages	\$11680		***************************************	***************************************							

Comments:		
-		

# PERSONAL EVALUATION (2025)

Michelle Tranor 71-A / 25048 Ross County, Chillicothe BMV Site

Evaluation Team Number:	
Location(s) Proposed: (#1) 71-H	
Proposed as 2 <sup>nd</sup> Location	
Verify Proposer's Full Name: (#2) Michelle Trans	r
Proposer's County of Residence (NPC Operation): (#4)	
Verify Proposer's Driver's License Number: (#6)	
Proposing as Minority: (#9) Yes No	
Proposing as: (#10) Individual Clerk of Courts Courts Courts	o. Auditor Nonprofit Corp
SCORING SUMMAR	₹Y
FORM 3.0, PERSONAL CHECKLIST	(Max. 16 Points):
PERSONAL EVALUATION, Page 2	(Max. 55 Points): 55
BUSINESS AND EMPLOYMENT EXPERIENCE, Page 3	(Max. 100 Points): 100
PERSONAL EVALUATION, Page 5	(Max. 28 Points):
PERSONAL EVALUATION, Page 6	(Max. 17 Points):
PERSONAL EVALUATION, Page 7	(Max. 27 Points):
PERSONAL EVALUATION, Page 8	(Max. 15 Points):
TOTAL POINTS	(May 252 Paints): 7 SX
TOTAL POINTS	(Max. 258 Points):
Comments:	
Evaluators' Signatures Evaluators' F	Printed Names Date
mulas Zilles	J. Tavillot 030325
	0 0 11
(2)	

	PERSONAL EVALUATION	ок	NO
1	Proposer does not and will not hold a PROHIBITED elective public office other than County Clerk of Courts or County Auditor? (#11 & 12)	(5)	*
2.	Proposer does not hold an overlapping deputy registrar contract? (#13)  If contract overlaps, what is the expiration date of the contract?	0	0
3.	Proposer is not a prohibited relative of a current deputy registrar? (#14, 15 & 16)	(5)	*
4.	Proposer is not a prohibited relative of an ODPS employee, or (if a relative) proposer has either been a deputy registrar continuously since January 1, 1992, or the ODPS employee became employed after the proposer was first appointed deputy registrar? (#17)	(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)	(3)	*
7.	Proposer states no criminal conviction within the last 10 years? (#21)	6	*
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)	(F)	*
10.	Proposer can meet bond requirements? (#24 and acceptable proof)	16	*
11.	Acceptable educational information OR nonprofit corporation? (#25)	Ø	0
12.	Proposer has computer training or experience? (#26)	B	0
NOT	PERSONAL EVALUATION POINTS, Page 2 (Max. 55 Points)		
Com	iments;		- - -
×			=

# BUSINESS AND EMPLOYMENT EXPERIENCE VERIFICATION Person called: Usrified at telephone ( Company: Marty on Cy BAV Relationship: Office Manager 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): 7075 To (date): 7075 Length: 5 Years Verified Hours = Factor x Years 5. x Points 25 = 25 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) \_\_\_\_\_ From (date): \_\_\_\_\_\_ To (date): \_\_\_\_\_ Length: \_\_\_\_\_ 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 \_\_\_ = \_\_\_\_

#### **BUSINESS AND EMPLOYMENT EXPERIENCE CALCULATION**

13. DEPUTY REGISTRAR AGENC	OWNER Experience, Form 3.2
----------------------------	----------------------------

ITEM AGENCY/COMPANY	H	OURS		FACTO	R X YE	ARS X P	OINTS	=	SCORE	VERIFIED
A.:	#	NA	=	1.0	Χ	Х	50	=		
B.	#	NA	=	1.0	Χ	Х	50	=		
C.	#	NA	=	1.0	Χ	X	50	=		
		S	ubt	otal of	13-A	, 13-B &	13-C	=		

14. OTHER BUSINESS OWNERSHIP Experience, Form 3.2

ITEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	RS X F	POINTS	; =	SCORE	VERIFIED
A.	#	=	Χ	X	34	=		
B.	#	=	Χ	Х	34	=		
C.,	#	2=	Х	Х	34	=		
		Subtota	I of 14-A,	14-B &	14-C	=		

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

ITEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	RS X I	POINTS	s =	SCORE	VERIFIED
A. Montgomary BMV	#	= 1	x J	Χ	25	=	125	X
B.	#	=	X	Х	25	=		
C.	#	=	X	Х	25	=		
		Subtota	l of 15-A,	15-B 8	15-C	=		

Total DR, Ownership and/or Management #13-15 (Max. 100 Points) = / NO

16. DEPUTY REGISTRAR EMPLOYMENT (NON-MANAGEMENT) Experience, Form 3.2

ITEM AGENCY	HOU	RS = FAC	TOR X YEA	RS X F	POINTS	; =	SCORE	VERIFIED
Α.	#	=	Χ	Х	23	=		
B.	#	-	Χ	Х	23	=		
C.	#	-	Х	Х	23	=		
D.	#	=	Х	Х	23	=		
	Subto	otal of 16	S-A, 16-B,	16-C &	16-D	=		

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

#### 17. OTHER EMPLOYMENT Experience, Form 3.2

ITEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	ARS X I	POINTS	s =	SCORE	VERIFIED
A.	#	=	Х	Х	20	=		
B.	#	=	X	Х	20	=		
C.	#	=	X	X	20	=		
D.	#	=	Χ	Х	20	=		
Su	btotal of	Lines 17	'-A, 17-B,	17-C &	17-D	=		

Total Other Employment Experience #17 (Max. 80 Points) =

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

100

	PERSONAL EVALUATION	OK	МО
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?	<b>(2)</b>	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?	À	*
	B. Are funds in proposer's or proposer's business name or joint with spouse?	(£3)	*
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 2.6. Dereamed Believ Supernous		
۷١.	Form 3.6 – Personnel Policy Summary  Does proposer agree to provide/maintain a written personnel policy covering the follow	dina:	
	A. Hiring employees with deputy registrar agency experience?	/irig.	
	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?	1	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 continuous.	Z	
Com	ments:		

Comments				
-				-

		PERSONAL EVALUATION	ок	NO
22.	For	m 3.7 – Security Plan Summary - Did proposer agree to provide:		
	Α.	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)		
	<u>E.</u>	Motion detectors connected to alarm system? (Mandatory)		
	F.	Alarm monitored contacts on all exterior doors? (Mandatory)		
	G.	Alarm monitored contacts on all exterior windows? (Mandatory)		
	Н.	Video recording camera surveillance system? (Mandatory)		
	I.	Safe or secured locking cabinet? (Mandatory)	1	*
	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	QK/	NO
23.	For	m 3.8 – Facility Maintenance Plan Summary - Did proposer agree to provide:	- 0	
	Α.	Indoor/Outdoor maintenance and cleaning?	7	0
	B.	Prompt snow and ice removal?	8	0
	C.	Carpet and/or floor cleaning (if appropriate)?	9	0
	D.	Repainting?	(1)	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	Ķ.
Com	men	ts:		

Ä.	18	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?	0	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?	(3)	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?	1	0
	5.	How will you demonstrate good leadership to your employees?	(1)	0
	6.	How will you maintain a high level of professionalism each day in this business?	(i)	0
	7.	How do you intend to recruit and retain high quality employees?	(1)	0
	8.	How will you provide a safe, clean, and friendly place to do business?	1	0
	9.	How would you deal with an irate customer?	(1)	0
	10.	What training or advice do you, or will you, give to your employees for dealing with irate customers?	8	0
	11.	How will you meet the expectations of the Ohio Bureau of Motor Vehicles?	À	0
	12.	Why should the Ohio Bureau of Motor Vehicles consider you for a deputy registrar license agency contract?	V	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?	B	*
		Is it the affidavit duly signed and notarized?	(2)	*
26.	Lo	cal Law Enforcement Report / Articles of Incorporation (AOI)		
	Α.	No disqualifying convictions for individual / AOI for nonprofit corporation?	(3)	*
	В.	No convictions (except minor traffic) / AOI for nonprofit corporation?	B	0
27.		CI / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation	(5)	*

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



B. No tax liens (state or federal)?  C. No judgments for the past 36 months?*  D. *No bankruptcy filed or trusteeship imposed for the past 36 months?  E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?
B. No tax liens (state or federal)?  C. No judgments for the past 36 months?*  D. *No bankruptcy filed or trusteeship imposed for the past 36 months?  E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?  F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * Exclude minor medical judgments and disputed items with good cause explanation.
C. No judgments for the past 36 months?*  D. *No bankruptcy filed or trusteeship imposed for the past 36 months?  E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?  F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * Exclude minor medical judgments and disputed items with good cause explanation.
D. *No bankruptcy filed or trusteeship imposed for the past 36 months?  E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?  F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * 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
E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?  F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * 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
F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * 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
* 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
29. The overall quality of this proposal is deemed to be of satisfactory or higher overall
NOTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.
Comments:
*Credit Reports are not required for County Auditors and County Clerks of Courts  A. Credit report submitted contains credit score?  B. No tax liens (state or federal)?  C. No judgments for the past 36 months?*  D. *No bankruptcy filed or trusteeship imposed for the past 36 months?  E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?  F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?  * Exclude minor medical judgments and disputed items with good cause explanation.  9. The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)  PERSONAL EVALUATION POINTS, Page 8 (Max. 15 Points)  OTE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract contingency.

## **OPERATIONAL EVALUATION (2025)**

FORM DESCRIPTION

Michelle Tranor 71-A / 25048 Ross County, Chillicothe **BMV Site** 

FORM	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		
	A. Deputy to Work at Least Twenty (20) Hours Per Week		
	Proposed Work Hours Per Week	(5)	*
	B. Appointment of Manager and Assistant OR Acceptable Statement	3	0
4.2	Experienced Employees Summary		
	Gave Acceptable Statement OR Provided Names	2	0
4.3	Staffing and Personnel Calculation		
	A. Hours Recommended: Proposed: 236	<b>4</b>	*
	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)	1	*
4.4	Start-Up Costs Calculation		
	A. Adequate and Accurate Personnel Costs	(3	0
	B. Adequate and Accurate Site Preparation Costs	2	0
	C. Adequate and Accurate Rental Payments	(2)	0
	D. Total Required: \$ 19/691.98 On Deposit (Form 3.4): \$ 21/253.22	5	*
4.5	Deputy Registrar Contract		
	A. Filled Out Completely and Properly	2	0
	B. Signed and Properly Notarized	3	0
NOTE: Scor	OPERATIONAL EVALUATION POINTS (Max. 40 Points) e indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract	38	
Comments	s. Projeted harry rate should not com	one	
hour	in the second second		
Evalu	ators' signatures Printed names	Date	
(1) Mi	les J. Trilliot	030	325
(2)		5	

## **DEPUTY REGISTRAR**

# REQUEST FOR PROPOSALS

# **2025 FORMS**

**AND** 

**INSTRUCTIONS** 

#### 3.0 PERSONAL CHECKLIST

Proposer's Full Legal Name

## Michelle Tranor

Proposer Nu	mber (BMV	use only)	
r oposer ria	(221.27	,,,	

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	BMV	COUNTY AUDITOR OR CLERK OF COURTS	J	BMV	NONPROFIT CORPORATION	1	вму
Form 3.0	V		Form 3.0			Form 3.0		
Personal Checklist (this form)	•		Personal Checklist (this form)			Personal Checklist (this form)		
Form 3.1 Personal Questionnaire	~		Form 3.1 Personal Questionnaire		E-ACT REL DATE COM	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	х	1	Form 3.4 Start-Up Cost Funds on Deposit		
Form 3.5 Political Contributions Report	V		N/A	x	1	Form 3.5 Political Contributions Report Nonprofit Corporation		
N/A	х	1	N/A	х	1	Form 3.5 Political Contributions Report Chief Executive Officer		
Form 3.6 Comprehensive Personnel Policy Agreement	V		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	1		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	~	ì	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	V		Current Bond with BMV added as Additional Insured			Pre-approval Statement for \$25,000 Bond		
INDIVIDUAL			COUNTY AUDITOR OR CLERK OF COURTS			NONPROFIT CORPORATION		

## 3.1 PERSONAL QUESTIONNAIRE

1.	List all location numbers for which the applicant intends to submit a proposal (limit six locations). Check the box underneath if proposing the location as a second site in addition to a current agency:
	71-A
2.	Full legal name of proposer Michelle Tranor
3.	Proposer's street addre
	City Ohio Zip code 45693
4.	County of residence (nonprofit corporation county of operation) Adams
	Daytime telephone
6.	Proposer's driver's
7.	Spouse's name (nonprofit corporation N/A) N/A
8.	Spouse's home street address (nonprofit corporation N/A) N/A
	City State Zip code
9.	Are you proposing as the owner of a minority business enterprise (MBE)? No Yes
10	Proposer is (check one and follow instructions):
	An individual person. These forms are designed to be self-explanatory for Proposers proposing as individual persons. Answer all questions as they apply to you personally. If a question does not apply to you, enter "N/A" or "Not applicable;
	The Clerk of Courts of County;
	The County Auditor of County. Answer all questions as they apply to you and your position as Clerk of Courts or County Auditor. If a question does not apply to you or your position, enter "N/Λ" or "Not applicable;
	A nonprofit corporation (NPC). An officer or an authorized agent should answer all questions and sign all documents on behalf of the NPC. The answers must refer to the NPC itself and not to the individual officers, agents, or employees of the NPC, unless otherwise specified. Many questions are not applicable to nonprofit corporations. To assist your responses, we have marked those questions "NPC N/A" meaning we believe the marked question is not applicable to most nonprofit corporations. Please answer all other questions unless clearly inapplicable.

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

11. A.	Are you currently serving in elective public office Auditor, either by election or appointment (includes pr	, other tha	n Clerk of ( mittee person)	Courts or )? (NPC N	County J/A)
			Yes		820
В.	If YES, in what elective office are you serving?		and the second s	A company of the comp	
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)	e.	Yes	No_	~
В.	If YES, what office?				~~~
13. Λ.	Are you currently a deputy registrar?		Yes	No_	<u> </u>
B.	If YES, on what date does your contract expire?				
C.	If YES, have you served as a deputy registrar continuo since January 1, 1992?	usly	No	Yes_	Marian barranga managa man
14. Λ.	Is your spouse currently a deputy registrar? (NPC N/A	)	Yes		
В.	If YES, on what date does your spouse's contract expir	re?	100000000000000000000000000000000000000		
	ter, father-in-law, mother-in-law, brother-in-law, sister-				
15. A.	Does any member of your extended family currently N/A)	y hold a d	eputy registra	r contract	? (NPC
			Yes	No_	~
В.	If YES, list their name, relationship to you, whether their contract expires here:	you share	the same hor	uschold, a	and date
N	ame Relationship	Same H	ousehold (	Contract 1	Expires
36000		Yes	No		
		Yes	No		*****************
200		Yes Yes	No	niene wa	
16. Λ.	To the best of your knowledge, will any member of yo submit a proposal in response to this RFP? (NPC N/A)	ur extended			***************************************
			Yes	No_	<u> </u>

Form 3.1, Personal Questionnaire, Page 2 of 6 (2025)

B. If YES, list their name, relationship to you, and who	ther you share the same l	nousehold:
	Y Y Y	Same Household           cs         No           cs         No           cs         No           cs         No
7. Λ. Is any member of your extended family employed b Public Safety? (NPC N/Λ)		Ohio Department of
B. If YES, list their name, relationship to you, and the	date they became so emp	loyed:
Name	ationship	<b>Employment Date</b>
8. A. Have you completed the Political Contributions Rep (NPC must submit one for NPC itself and one for its		Ycs
B. If "NO," are you applying as a Clerk of Courts or Co	ounty Auditor? No	Yes
9. A. Are you an employee of the State of Ohio? (NPC N/	/Λ) Yes	No
B. If "YES," will you resign, if appointed?	No	Ycs
<ol> <li>Λre you an insurance company agent, writing automobil (NPC N/Λ)</li> </ol>		No
1. Has Proposer (including NPC and proposed office mana of a crime punishable by death or imprisonment in	ager) been convicted with excess of one year (fel	in the past ten years ony), or any crime
involving dishonesty or false statement?	Yes	No
2. As of the date of this certification does Proposer compensation contributions, social security payments, of the State of Ohio or any political subdivision thereof, or or locality within the United States?	owe any overdue tan	kes, unemployment
Commence of the commence of th	Yes	No 🗸

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

23	Is Proposer willing and able, if appoint policy of business liability property defended the Department of Public Safety, and the Registrar of Motor Vehicles 1 Revised Code 4503.03(C)? (County August 2015)	amage, a the Direc harmless	nd theft insurance sa- etor of Public Safety, upon claims for dam	tisfactory to the the Bureau of N	e Regis Aotor V	trar and ehicles,
	Revised Code 1505.05(C). (County 110	anton Ore	or course 1,111,	No	Yes_	
24	Is Proposer bondable as outlined in Oh 4501:1-6-01(B)?	io Admin	nistrative Code	No	Yes_	
25	Please provide the following informat provide educational information for the	ion regar individu	ding your education. al who will manage th	If applying as ne license agenc	a NPC y busin	c, please
	High school diploma?			No	Yes_	V
	High school name Deer Park	Jr/Sr	High Schoo	I		
	<sub>City</sub> Cincinnati	State (	Ohio	Zin	452	236
	College name University of	Cinci	nnati	F		
	City Cincinnati	State (	Ohio	Zip	452	221
	Major Information Technol	logy	Degree awarded B	achelors		
	College name					
	City	State		Zip		
	Major		Degree awarded			
26	Computer experience. Does Propose computers? (Incumbent deputy regist nonprofit corporations, this question sl the nonprofit corporation's activities.)	rars may	take credit for open	rating BMV co	mputer ated or	rs. For used in
				OF THE PARTY OF TH	11/2	

	f experience as an office manager at a BMV I am well versed in BASS, Qflow, and my educational background in technology I am fluent in multiple programming
	, HTML, SQL, Ruby and C++. I have an advanced knowledge of Microsoft office
	rpoint, Teams, Excel, and Outlook.
	s hours and who will serve as a character reference for you. Do not list relatives,
unable to contac may be evaluate	s, or employees of the Department of Public Safety (including BMV). If we are that least one person or that person is unable to serve as a character reference, you dunfavorably. Nonprofit corporations should list references who are familiar with poration's activities
unable to contact may be evaluate the nonprofit con	s, or employees of the Department of Public Safety (including BMV). If we are at least one person or that person is unable to serve as a character reference, you unfavorably. Nonprofit corporations should list references who are familiar with

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(Λ) 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(Λ) Business Ownership Experience. Any other business activities (fundraising, charitable activities, etc.) should also be entered and submitted on a separate 3.2(Λ) Business Ownership Experience. Use a separate Form 3.2 for each separate business activity performed by the NPC and a separate Form 3.2(Λ) for each separate business activity performed by the NPC.

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

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

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

## 3.2(B) MANAGEMENT AND/OR SUPERVISORY EXPERIENCE

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

Proposer's name Michelle Tranor	Company name Montgomery BMV				
Company address 9997 Montgomery Rd	City Montgomery				
State Ohio Zip 45242	Telephone ( 513 )891-2284				
Type of business (deputy registrar, retail grocery, o	License Bureau				
wanagement/supervisory duties	and closing procedures, ensure banking is completed,  Is, and processing ID/DLs, VRs, abstracts, ect				
MANAGER OR SUPERVISOR - Job title: Mana					
1. Title of position Office Manager	Hours worked weekly? 40				
2. Dates this position was held: From: month	6 year 2020 To: monthyear Current				
3. Do/did you directly hire, evaluate, train, and	discipline employees? No Yes 🗸				
4. Do/did you directly manage/supervise emplo	oyees on a daily basis? No Yes ✓				
If you answered yes to question number 4, h	ow many employees do/did you manage?5				
5. Have you ever developed a comprehensive b	ousiness plan? No Yes ✓				
	no can verify this experience. If we cannot contact at all not receive any credit for it. (If you are a deputy that experience.)				
	( )				

## 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 Michel	le Tranor	Company name	Texas	Roadhous	se
Company address 7860	Montgomery Rd	City	Kenwood	k	
State Ohio	45236	Telephone ( 51	3 )	791-742	7
Type of business (deputy	registrar, retail grocery, etc	:.) Restaurant			
Management/supervisory	duties Resolve problem	s and concerns of	customers	s, Lead fron	t of
house opperations,	inventory manageme	nt, bank deposit	s, staff t	raining	
MANAGER OR SUPERV	VISOR - Job title: Manag	er			
1. Title of position K	ey Hourly Manager	Но	ours worke	d weekly?	50
2. Dates this position	was held: From: month	une year 2017 T	o: month	March year	2020
3. Do/did you directly	hire, evaluate, train, and di	iscipline employees?	No	Yes.	~
4. Do/did you directly	manage/supervise employe	ces on a daily basis?	No	Yes	~
If you answered yes	s to question number 4, how	w many employees de	o/did you r	nanage?	40
5. Have you ever deve	eloped a comprehensive bus	siness plan?	No	Yes	<b>'</b>
least one person to verify	ot a relative of yours, who this experience, you will ar employee, you may list I	not receive any cree	dit 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 Michelle Tranor		Company name lexas	s Roadhouse		
Company address 7860 Mongtome	ry Rd	City Kenwood			
State Ohio Zip_	45236	Telephone ( 513 )	791-7427		
Type of business (deputy registrar, retai	l grocery, etc.	Restaurant			
EMPLOYEE - Job title: Hostess Tra	ainer				
Hours worked weekly40	Job duties	Create training progra	ım for hosts and		
bussers, hold classes to ensure	e TXRH kn	owledge, take and pac	ck to-go orders,		
maintain a professional attitude	and clear	resturant to welcome	in guests		
Dates of this employment: From: month	Nov y	ear 2015 To: month	June year 2017		
Describe how and to what extent you pr	ovided high	quality customer service at	this position:		
Greeting guests as they entere	d, keeping	conversation while wa	alking guests to		
their tables, staying up to date	with menu	changes to be able to	help with any		
questions					
List at least one person, not a relative o least one person to verify this experien registrar or deputy registrar employee, y	ce, you will	not receive any credit for it.	. (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):
- 1. Check In Desk:
  - Immediatly greet customers who enter the office
- Verfiy customers have correct documents for transactions to cut down on wait times and ensure no one is waiting to be sent away for missing documents
  - Customers won't need to wait in line just to ask a question
- 2. Monthly Customer Service Training for Employees
  - Each month will have a main focus and each week will be broken down
    - \*January: VRs\*
      - Week 1: Non-commercial issuances and renewals
      - Week 2: Commercial issuances and renewals and HVUT
      - Week 3: Military and Gratis
      - Week 4: All other Special plates
- 3. Office Bulletin
- -Post opperator productivity, comment cards and google reviews for everyone to see how customers are viewing our customer service skills
  - \*Allowing everyone to see who is doing awesome
  - \*Shows room for improvment and allows for the space to give feedback

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.

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

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

Name:	e #	 	 		-	 	CHARLES AND ARCHITICAL	
Title (if officer of nonprof							*** ** ** *** *** *** **** **** ***	

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

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

RECIPIENT	JAN 1 - DEC 31 2022		JAN 1 - DEC 31 2023		JAN 1 - DEC 31 2024		2025 To Date	
	Yes	No	Yes	No	Yes	No	Yes	No
Democratic Party including PACs and Associations		V		V	A CONTRACTOR OF THE PARTY OF TH	~		V
Republican Party including PACs and Associations		1		~		V	description of the second	~
Any other Party including PACs and Associations		~		~	- 10113-37	~		V
Governor, Candidate and Committee		V		V		V		~
Attorney General, Candidate and Committee		V		V		V		~
Secretary of State, Candidate and Committee		V	Service Code	V		V		V
Treasurer of State, Candidate and Committee		V		~		1		V
Auditor of State, Candidate and Committee		~		~		~		-
State Senator, Candidate and Committee		V		~		V		V
State Representative, Candidate and Committee		~		~		~		~

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:

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

#### 3.7 SECURITY PLAN SUMMARY

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

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

	1		
Yes	~	No	

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

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

#### 3.8 FACILITY MAINTENANCE PLAN SUMMARY

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

If you are awarded a contract, do you agree to be responsible for the following either on your own, through your lease or sublease, or by separate contract:

No \_\_\_\_\_Yes \_\_\_\_\_

OUTDOOR BUILDING MAINTENANCE	
KEEP OUTDOOR AREA FREE OF TRASH AND DEBRIS	
PROVISION TO ASSURE PROMP SNOW AND ICE REMOVAL	
CLEANING INSIDE OF AGENCY INCLUDING EQUIPMENT	
PROVISION FOR INSIDE/OUTSIDE MAINTENANCE	
PROVISION FOR PROFESSIONAL CARPET/FLOOR CLEANING	(MIN. OF ONCE A YEAR)
PROVISION FOR REPAINTING AND/OR COSMETIC UPDATES	

#### 3.9 INVOLVED AND INVESTED IN YOUR BUSINESS

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

1.	How do you plan to manage, be responsible, and be accountable for this business at all times?
	Being present and overseeing that all updates are being followed by staff. Having proper security systems to keep an eye whenever I am out of office.
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?
	Keep staff aware of any new policies and manual changes and provide proper training for any updates.
3.	What measures will you put in place to detect, deter, and prevent fraud?
	Having a proper security system covering all areas of the office and proper signage to inform those entering. Keeping fraud tools easily accessable and using when needed or reaching out to our investigator when necessary.
4.	The Burcau 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?
	Maintaining a broadcast binder that all employees must sign along with a sign sheet for the broadcasts for field staff can easily verify that all staff members have read and signed.

5.	How will you demonstrate good leadership to your employees?
	I will create a work environment where each team member feels valued and empowered. I will lead by example, maintaining professionalism, accountability, and a strong commitment to providing excellent customer service. I will also prioritize clear communication, regular training and opportunities for growth.
6.	How will you maintain a high level of professionalism each day in this business?
	Keeping a positive attitude and leading by example. Ensuring that clear expectations are set for the staff and making great customer service a top priority.
7.	How do you intend to recruit and retain high quality employees?
	Providing competitive wages. Allowing a safe relationship with employees to be able to discuss any situations. Keeping an up to date job lising and quickly contacting applicants.
8.	How will you provide a safe, clean and friendly place to do business?
	Maintain a cleaning schedule of both staff and customers areas. Keeping an up to date security system that is tested regularly and making sure all staff knows where panic buttons are located.
9.	How would you deal with an irate customer?
	Listen to their situation. Empathize with their frustrations and be patient. Sincerely appologize and help them with the proper solution.

Form 3.9, Involved and Invested in Your Business, Page 2 of 3 (2025)

	Be patient and avoid arguing with the customer. Staying positive will help deescalate the situation.
	Do not hesitate to grab a manager to assist in helping the customer.
L	How will you meet the expectations of the Bureau of Motor Vehicles?
	Keeping staff trained with all updates. Following all standards put in place by the BMV.
1	excepting start trained with an updates. Following an standards put in place by the BMV.
1	
L	
2. N	Why should the Bureau of Motor Vehicles consider you for a deputy registrar license agency contrac
K	
,	With years of management experience I have a proven track record of creating in depth training programs and boosting team morale. I am heavly centered on customer service and giving the
	customer the best experience possible. Over four years of office manager experience in a BMV has
	allowed a thorough knowledge of daily tasks and proper steps to take in situations. Having
1	previously attended New Deputy Registrar Training as an office manager has given me a further
ι	understanding of the expectations set by the BMV and why what we do on a day to day basis in an
E	agency is so important.
1	
- 11	

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)

Co	unty of Hamilton :
	tte of Ohio :  Wichelle Tranor, being first duly sworn, depose and say that:
1)	I am submitting my proposal for appointment as deputy registrar in my own individual capacity, and not as an agent, representative, partner, or business associate of any kind whatsoever of any other person or persons;
2)	If appointed, I will serve as a deputy registrar in my own individual capacity, and will not act as an agent, representative, partner, or business associate of any kind whatsoever of any other person or persons;
3)	If appointed as deputy registrar, I will not assign my deputy registrar contract, in whole or in part, nor any of my deputy registrar's responsibilities to any other person or persons without the advance written consent of the Registrar;
4)	If appointed as a deputy registrar, I will fully comply with all requirements set forth by the Registrar. I will not serve as an office manager of any deputy registrar agency other than my own; nor will I permit any other deputy registrar, the spouse of any deputy registrar, or the parent, child, brother, or sister of any deputy registrar living in the same household as the deputy registrar to operate my deputy registrar agency, directly or indirectly. I understand that I may hire the spouse, parent, child, brother, or sister of any deputy registrar as an employee, provided that I maintain control of my deputy registrar agency;
5)	To the best of my knowledge and belief, I am fully qualified to serve as a deputy registrar, and there is no provision of the Ohio Revised Code or the Ohio Administrative Code which would make me ineligible to serve as a deputy registrar; and,
6)	I have caused to be prepared, have read, and take full responsibility for, all forms and documents submitted with this proposal. All information is true, accurate, and complete to the best of my knowledge and belief. This affidavit is submitted by me for the purpose of obtaining a deputy registrar contract.
Sig	nature of proposer: Middle Tramor
Pri	nted/typed name of proposer: Michelle Tranor
Sw	forn to and subscribed in my presence by the above named Michelle Trainer
	this 25th day of Notary Public State of Ohio My Comm. Expires
Pri	nted name of Notary Public: Adam & Hall
Му	commission expires: Oct 19th 2021

# DEPUTY REGISTRAR REQUEST FOR PROPOSALS

# **SECTION 4**

(2025)

**OPERATIONAL FORMS** 

#### 4.0 OPERATIONAL CHECKLIST

Proposer's Full Legal Name	Michelle Tranor	
Location Number 71-A		
Proposer Number (BMV use	only)	

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

FORM	DESCRIPTION	X	BMV
4.0	Operational Checklist (this form)	~	
4.1	Appointment of Agency Managers	V	
4.2	Experienced Employees Summary	~	
4.3	Staffing and Personnel Costs Calculation	V	
4.4	Start-Up Costs Calculation Amount: \$ 19,531.98		
4.5	Deputy Registrar Contract (2 pages only)	~	

Form 4.0, Operational Checklist (2025)

### 4.1 APPOINTMENT OF AGENCY MANAGERS

Proposer's name:	Location number: 71-A
(A) DEPUTY REGISTRAR: As deputy registrar, I agree hours per week during the hours the agency is open t entire term of the contract. I understand that the min is twenty (20) hours per week during the hours the agtwenty-hour requirement does not apply to Countral nonprofit corps., or deputy registrars operating multip	to the public for business throughout the name requirement for deputy registrars gency is open for business. This y Auditors/Clerks of Courts,
(B) OFFICE MANAGER: I understand and agree that I another reliable person to serve as the office manage manager must be scheduled to work at the agency a during the hours the agency is open to the public for I Appoint myself as the office manager and viduring the hours the agency is open to the public for the public form.	ger for the agency, and that the office at least thirty-six (36) hours per week business. It is my intention to:  work at least thirty-six hours per week the for business.
Appoint another reliable person to serve as the six hours per week during the hours the agence	
(C) ASSISTANT OFFICE MANAGER: I understand as person to be responsible for the management of the agency office manager during the hours the agency is	agency in the absence of myself and the
(D) OTHER EMPLOYEES: I agree to maintain an accommanager, assistant office manager, and all other emplas my own work schedule, on file and available for times. I also agree to notify the BMV in writin appointment of the office manager or assistant office roster complete and current.	loyees and their work schedules, as well r inspection by BMV employees at all g immediately of any changes in the
Mahul Tramon  Deputy registrar (proposer) signature	1/25/2025 Date:

### 4.2 EXPERIENCED EMPLOYEES SUMMARY

Propo	ser's nai	Michelle Tranor	Zocation number:
(A)	HIRING registrar effort to deputy 1	EXPERIENCED EMPLOYEES. I certify that is under contract with the Registrar of Motor Vehicles hire and retain qualified employees who have related registrar agency. I agree to make bona fide offers and under comparable conditions to their most received.	es, I will make every good faith evant experience working in a of employment at comparable
(B)	CHECK	I HAVE NOT BEEN A DEPUTY REGISTRAL EMPLOYEE. I have not yet identified any pro-relevant deputy registrar experience. However, if a every reasonable effort to identify and hire, if pos-have relevant experience working in a deputy recontact any deputy registrar employees until at contract.  I AM OR HAVE BEEN A DEPUTY REGISTRAL EMPLOYEE. I have identified the following personate of their present employment. (A deputy registrar registrar employment experience may list himself of the state of the st	spective employees who have awarded a contract, I will make sible, qualified employees who egistrar agency. Please do not feer you have been awarded a see to whom I will make a bona d under comparable conditions or a proposer who has deputy
(C)	I unders	stand that failure to hire properly qualified and es is grounds to withhold or terminate my deputy re	experienced deputy registrar gistrar contract.
Deput	Muca ty registr	rar (proposer) signature	1/25/2025 atc:

Form 4.2, Experienced Employees Summary (2025)

#### 4.3 STAFFING AND PERSONNEL CALCULATION

Proposer's name:	Michelle Tranor	Location number:	71-A
	The state of the s		

<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)				
Assistant Office Manager	40.00	\$ 17.00	\$ 680.00	\$ 2,720.00
Experienced Employees Total Number (combine Full-time & Part-time) =				
New Hire Employees Total Number (combine Full-time & Part-time) 4	160.00	\$ 56.00	\$ 2,240.00	\$ 8,960.00
TOTALS	236.00	N/A	\$ 2,920.00	\$ 11,680.00

#### 4.4 START-UP COSTS CALCULATION

Propos	ser's r	name:	Michelle Tranor	Location number	71-A :
costs	of beg	ginnin	nis form is to assure the BMV g a deputy registrar business. ss to cover your personnel, site	We need to know that you	u have enough
1.	PE	RSO.	NNEL COSTS (FOUR V	WEEKS)	
	Usc	Form	4.3 to calculate four (4) week	s' personnel costs for this lo	cation.
				\$ <u>11,68</u>	30
2.	SIT	E PI	REPARATION COSTS	(AMORTIZED)	
	A.	costs	nis is a Deputy Provided Sits you will need to spend to strar agency in each of the followers.	prepare the building for us	ctual projected se as a deputy
		1.	<b>Building Modifications</b>	\$	
		2.	Counter Costs	\$	
		3.	Other Costs	\$	
		4.	Total	\$	
			d amortized over 60 month co		
	B.	Age	nis is a BMV Controlled Sit ney Specifications for this loon the Agency Specifications.		
3.	ΛG	ENC	Y RENTAL PAYMENT	TS (3 MONTHS)	
	۸.		nis is a Deputy Provided Site or lease this site.	e, enter the actual amount y	ou will pay to
	В		nis is a BMV Controlled Sincy Specifications for this site		
		One	month's rent: \$\\\2,670	$\frac{0.66}{}$ x 3 = \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1.98
ТОТ	[four	r weel prepa	RT-UP COSTS  cs' personnel costs, plus one restration costs (2.A total amount) glus three months.	month's amortized ant or 2.B BMV	91.98

#### STATE OF OHIO

#### DEPARTMENT OF PUBLIC SAFETY

#### BUREAU OF MOTOR VEHICLES

#### **DEPUTY REGISTRAR CONTRACT - 2025**

This Agreement is made by and hetween the Degistrer of Motor Vehicles (Pegistrer

This Agreement is made by and between	reen the Registra	of Motor venteres, (Registrar,
herein), located at 1970 West Broadlichelle Tranor		mbus, Ohio 43223-1102 and (deputy registrar, herein) whose
home mailing address is		
(City)	, Ohio (Zip) 456	93 , to operate a deputy
registrar agency, Location No. 71-A		, to be located as follows: in the
State of Ohio, County of Ross		
City/Village/Township (indicate which)	City	of Chillicothe
Street address: 475 Western Ave, Suite	N	
(City) Chillicothe	, Ohio (Zip)	45601

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)

4. The deputy registrar is appointed and accepts app "an individual," "County Auditor for (specify county)," or "a nonprofit corporation"]:  an individual	
5. The Deputy Registrar certifies that he or she had to all of the 2025 Deputy Registrar Contract Ter	
Deputy Registrar signature	Date
STATE OF OHIO :	
COUNTY OF Hamilton	
Before me, a notary public in and for said county and named Michelle Tranor, we sign the foregoing instrument and that the same is his	ho acknowledged that he or she did
IN WITNESS WHEREOF I have hereunto set my han of January, 2025.  NOTARY PUBLIC	d and official seal, this day  Notary Public State of Ohio My Comm. Expires
Printed name of Notary Public: Adam & Hall	
My commission Expires: Oct 19th Lott	
STATE OF OHIO DEPARTMENT OF PUBLIC SAFETY BUREAU OF MOTOR VEHICLES	
BY: REGISTRAR OF MOTOR VEHICLES	
Done at Columbus, Ohio, on	

# DEPUTY REGISTRAR REQUEST FOR PROPOSALS

# **SECTION 5**

(2025)

# **DEPUTY PROVIDED SITES**

#### 5.0 DEPUTY PROVIDED SITE CHECKLIST

roposer's Full Legal Name   IVIICHEIIE   I TANOT
ocation Number 71-A
roposed Site Address 475 Western Ave, Suite N, Chillicothe, Ohio 45601
roposer's Telephone Number (number where BMV staff can reach you) (513) 503-0326
roposal Number (BMV use only)

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

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

FORM	DESCRIPTION	1	BMV	
5.0	Deputy Provided Site Checklist (this form)	V		
5.1	Site Questionnaire (page 1 only if proposing existing license agency site)	V		
5.2				
5.3	Lease Option (required for all proposers, which includes incumbent deputy registrars)	V		
	- 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)			
	<ul> <li>with 8½ x 11-inch formatting (SUBMITTED ELECTRONICALLY)</li> <li>with complete dimensions</li> </ul>			
Proposer provided	Counter Plan (leave blank if proposing existing license agency site)  - with 8½ x 11-inch formatting (SUBMITTED ELECTRONICALLY)  - with complete dimensions			
Proposer provided	Map (leave blank if proposing existing license agency site)			
	with site clearly marked			

Form 5.0, Deputy Provided Site Checklist (2025)

## 5.1 SITE QUESTIONNAIRE

1.	Loc	eation Number for which you are proposing (from Agency Spo	ecifications): 71	-A			
	Street address of site 475 Western Ave, Suite N						
		Chillicothe	_, Ohio, Zip Code	45601			
2.	Is th	he site you are proposing currently in operation as a deputy re	gistrar agency?				
			No	Yes_			
3.	Do	you intend to perform construction or remodeling to prepare uty registrar contract?	this site for operat	ion under a new			
	цер	aty logistral contract:	No	Yes			
4.	Are you applying for a contract at an existing license agency site that was approved under a previous contract?						
			No	Yes			
5.	Λ.	If you answered "No" to question number 4, skip to question information required for this form (5.1) and the remainder of	number 7, and cor Section 5 forms 5.	nplete the 2 through 5.4.			
	В.	(interior and/or exterior to include parking areas, path of travel, and accessibility to individuals					
		with disabilities, and signage)?	No 🗸	Yes			
6.	A. If you answered "No" to question number 5, please print and submit this along wit for compliance with Section Five (5) requirements for this RFP and include it with t remainder of your required proposal documents.						
	B.	B. If you answered "Yes" to question number 5, list the site changes in the space below and be specific with the description(s) of any changes that have been made. Include additional supporting documentation and attachments if needed, then stop here. Print and submit this page along with any other documentation and attachments for compliance with Section 5 requirements for this RFP and include it with all other required proposal documents.					

#### 5.3 LEASE OPTION

I (we)(owners' co	mplete names)					
of (owners' comp	lete address) 475	Western Ave	, Suite N			
City Chillico	the	, <sub>State</sub> Ohic	),z	<sub>iip</sub> 45601		
HEREBY GRAN	HEREBY GRANT, upon due consideration, receipt of which is hereby acknowledged, this OPTION					
TO LEASE the	following descri	ibed property located	I in the State of hether city, villa			
City	of	Chilliantha	~ .	monly known as:		
(property's address	<sub>s)</sub> 475 West	ern Ave				
Suite N		llicothe	. Ohio. 2	Zip 45601		
to (proposer's nan	Michelle		, , , , , , , , , , , , , , , , , , , ,			
of (proposer's add						
City			, Ohio, 2	Zip 45693		
for the operation of a deputy registrar agency under contract with the Ohio Bureau of Motor						
Vehicles, and for	no other purpose.					
	THE LEASE, if exc c before the <u>29<sup>th</sup></u> of	ecuted, shall begin no l June, 2030.	later than the $29^{th}$ da	y of <u>June</u> , 20 <u>25</u> and		
	THIS LEASE OPTI until the $31^{st}$ day o	ON shall begin on the of May, 2025.	date of its execution	(signing) below and		
THE PARTIES A	GREE AS FOLLO	WS:				
A. The owners m	av. in their sole dis	erction grant a similar	lease ontion to opera	ate a denuty registrar		

#### 4.

- heir sole discretion, grant a similar lease option to operate a deputy registrar agency for the stated period of time to more than one proposer, provided that the premises are not subject to an existing lease for any portion of the term of lease as specified in paragraph 2, above.
- B. If the owners have granted or hereafter grant an option to the same described real estate to another person or entity for the operation of a deputy registrar agency it is understood and agreed by owners and proposer that only the option granted to the person or entity awarded a contract by the Ohio Bureau of Motor Vehicles shall be entitled to exercise the relevant option.

- C. Except as provided in paragraphs 4(A) and (B), above, the owners shall not grant an option, lease, or rental agreement to any other person during the term of this lease option specified in paragraph 3, above.
- D. The lease under this option shall be on any terms as owners and optionee agree to contemporaneously with the granting of this option, provided that no such term shall be inconsistent with this lease option. Said terms, if any, are incorporated herein.

Owner(s)' signature(s):	***************************************
Owner(s)' printed name(s):	
TATE OF:	
COUNTY OF:	
he foregoing instrument was acknowledged before me on this	_ day of
, 2025, by the owners,	
Notary Public	
Printed name of Notary Public:	
My commission expires on	
hereby accept this option.	

1/25/25 Date

Optionee signature, Deputy Registrar Proposer

Form 5.3, Lease Option, Page 2 of 2 (2025)