# **PAYROLL COMPARISON - 2025**

# Proposer Name: Tim Nehez

Evaluator Printed Name:_	Jeft	Payne	

	al Form 4.3 Staffing and Personnel Calculation  Location Number(s)											
	Loc. 1 77-A	<u>Loc. 2</u>	<u>Loc. 3</u>	<u>Loc. 4</u>	<u>Loc. 5</u>	Loc. 6						
Highest Rate	23.00			Teams in devicable control	21 Milyanina a vy							
Lowest Rate	15.00					***************************************						
Number of Hours Recommended	295											
Number of Hours Proposed	301					*************						
Total Monthly Wages	\$9.640											

Comments:		

# PERSONAL EVALUATION (2025)

Tim Nehez 77-A / 25076 Summit County, Northfield BMV Site

Evaluation Team Number:		
Location(s) Proposed: (#1)A		_
Proposed as 2 <sup>nd</sup> Location		
Verify Proposer's Full Name: (#2)	Robert Nekez	
Proposer's County of Residence (NPC Operation): (#4)	Summit	
Verify Proposer's Driver's License Number: (#6)		
Proposing as Minority: (#9) Yes No		
Proposing as: (#10) Individual Clerk of Courts C	Co. Auditor Nonprofit	Corp
SCORING SUMMA	RY	
FORM 3.0, PERSONAL CHECKLIST	(Max. 16 Points);	16
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):	<u> </u>
PERSONAL EVALUATION, Page 6	(Max. 17 Points):	17
PERSONAL EVALUATION, Page 7	(Max. 27 Points):	27
PERSONAL EVALUATION, Page 8	(Max. 15 Points):	15
TOTAL POINTS	(Max. 258 Points):	258
TOTAL FORTO	(WAX. 250 POINTS).	0.30
Comments:		
Evaluators' Signatures Evaluators'	Printed Names	Date
(1) Stay Jeff	Payre	2/25/25
(2)		

	PERSONAL EVALUATION	OK	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)	(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)	(5)	*
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)	(5)	*
11.	Acceptable educational information OR nonprofit corporation? (#25)	(5)	0
12.	Proposer has computer training or experience? (#26)	(5)	0
NO.	PERSONAL EVALUATION POINTS, Page 2 (Max. 55 Points) TE: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract continuous contract		<u></u>
Com	nments:		

# BUSINESS AND EMPLOYMENT EXPERIENCE VERIFICATION Person called: Rob Fragale at telephone ( ) A

Company:	BMV	
Relationship:		
Verified experience as: Deputy Registra	r Agency Owner (50)	Other Business Owner (34)
Manager or Supervisor (25)	Deputy Registrar Employee (23)	Other Employee (20)
Hours per week:	50	
From (date): 7/98	To (date):	Length: 27
Verified Hours $\underline{50}$ = Factor	1.0 x Years 27.	_ x Points <u>50</u> = <u>13 96</u>
	****************************	
Person called:	at	telephone ( )
Company:		
Relationship:		
Verified experience as: Deputy Registra	r 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 ( )
Company:		
Relationship:		
Verified experience as: Deputy Registra	r 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**

ITEM AGENCY/COMPANY	Н	OURS		FACTO	Rxi	/EARS	x I	POINTS	=	SCORE	VERIFIED
A. Northfield BMV	#	NA	=	1.0	Χ	27	Χ	50	=	1,350	/
В.	#	NA	=	1.0	Χ		Χ	50	=		
C.	#	NA	=	1.0	Х		Χ	50	=		
		S	ubt	otal of	13-	A, 13	-B 8	13-C	=	1350	

#### 14. OTHER BUSINESS OWNERSHIP Experience, Form 3.2

ITEM AGENCY/COMPANY	HOU	RS = FAC	TOR X YEA	RS X F	POINTS	<b>;</b> =	SCORE	VERIFIED
A.	#	=	X	X	34	=		
В.	#	=	Х	Х	34	=		
C.	#	=	Х	X	34	1=1		
		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	RS X	POINTS	s =	SCORE	VERIFIED
Α.	#	=	X	X	25	=		
B.	#	=	X	Х	25	=		
C.	#	=	X	X	25	=		
		Subtota	l of 15-A,	15-B 8	15-C			

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

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

ITEM AGENCY	HOU	RS = FAC	TOR X YEA	RS X F	POINTS	5 =	SCORE	VERIFIED
Α.	#	=	X	Х	23	=		
B.,	#	=	X	Х	23	=		
C.	#	=	X	Х	23	=		
D,	#	=	X	×	23	=		
	Subte	otal of 16	6-A, 16-B,	16-C 8	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 F	POINTS	=	SCORE	VERIFIED
A.	#	=	X	Х	20	=		
B.	#	=	X	X	20	=		
C.	#	=	X	X	20	=		
D,	#	=	Х	Х	20	=		
Subt	total 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.)] = 10

45		PERSONAL EVALUATION	OK	NO
18.	Fo	rm 3.3 – Customer Service Experience		
	reg	d proposer provide acceptable list of ideas to improve customer service at a deputy pistrar agency or provide an example of something done as part of a job or business improve services for customers?	(2)	0
19.	For	m 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?	(5)	*
	В.	Are funds in proposer's or proposer's business name or joint with spouse?	(5)	*
20.	For	m 3.5 – Political Contributions Report (not required for Auditors or Clerks of Courts)		
		proposer mark "NO" for every category, every year? r Nonprofit Corporations, evaluate both Corporation's and CEO's Form 3.5)	5	*
	_			
21.	_	m 3.6 – Personnel Policy Summary		
	_	es proposer agree to provide/maintain a written personnel policy covering the follow	/ing:	
	A.	Hiring employees with deputy registrar agency experience?		
	B.	Equal Employment Opportunity?		
	<u>C</u> .	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?	<u></u>	
	G.	Progressive disciplinary steps?	(11)	0
	H.	Dress code with list of acceptable attire?		
	Ī.	Dress code with list of unacceptable attire?	1	
	J.	A policy for maintaining the professional appearance of all staff at all times?	1	
	K.	Fringe benefits (beyond those required by law or contract)?		
	_			
NO	ΓE: S	PERSONAL EVALUATION POINTS, Page 5 (Max. 28 Points)core indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract continuous core indicated "" may lead to contract continuous core "" may lead to contract contract continuous core "" may lead to contract contract continuous core "" may lead to contract cont	28	

	4	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)		
	D.	Adequate alarm monitored panic/hold-up buttons? (Mandatory)		
	E.	Motion detectors connected to alarm system? (Mandatory)		
	F.	Alarm monitored contacts on all exterior doors? (Mandatory)		
	<u>G.</u>	Alarm monitored contacts on all exterior windows? (Mandatory)		
	Н.	Video recording camera surveillance system? (Mandatory)		
	<u>l.</u>	Safe or secured locking cabinet? (Mandatory)	(13)	*
	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)?	0	
	N.	Interior/Exterior motion activated security lights? (Suggested) – Check OK or NO	(ок)	NO
23.	For	m 3.8 – Facility Maintenance Plan Summary - Did proposer agree to provide:	_	
	Α.	Indoor/Outdoor maintenance and cleaning?	(1)	0
	В.	Prompt snow and ice removal?	1	0
	C.	Carpet and/or floor cleaning (if appropriate)?	9	0
	D.	Repainting?	$\bigcirc$	0
NOT	E: S	PERSONAL EVALUATION POINTS, Page 6 (Max. 17 Points)core indicated "*" may lead to contract cont	17 ingency	
	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?	1	0
	2.	How will you ensure that all laws, rules, guidelines and procedures are followed, at all times, specifically with regard to issuing and renewing driver licenses, identification cards, and vehicle registrations?	1	0
	3.	What measures will you put in place to detect, deter, and prevent fraud?	1	0
	4.	The Ohio Bureau of Motor Vehicles routinely issues new and/or revised policy and procedural changes through email broadcasts to the deputy registrars. How will you ensure that policies and procedures are communicated to the staff and followed on a daily basis?	1	0
	5.	How will you demonstrate good leadership to your employees?	0	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?	(1)	0
	10.	What training or advice do you, or will you, give to your employees for dealing with irate customers?	0	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?	(3)	*
	B.	Is it the affidavit duly signed and notarized?	2)	*
26.	Lo	cal Law Enforcement Report / Articles of Incorporation (AOI)		
	Α.	No disqualifying convictions for individual / AOI for nonprofit corporation?	(3)	*
	B.	No convictions (except minor traffic) / AOI for nonprofit corporation?	(2)	0
27.		I / FBI Criminal Background (WebCheck) Report / AOI for Nonprofit Corporation disqualifying convictions for individual / AOI for nonprofit corporation?	(5)	*

W.E	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?	(2)	0
	B. No tax liens (state or federal)?	(3)	0
	C. No judgments for the past 36 months?*	(3)	0
	D. *No bankruptcy filed or trusteeship imposed for the past 36 months?	(2)	0
	E. *No other negative items (charge-offs, collections, etc.) for the past 36 months?	0	0
	F. *No negative items (pattern of delinquencies, etc.) for the past 60 months?	(1)	0
	* Exclude minor medical judgments and disputed items with good cause explanation.		
29.	The overall quality of this proposal is deemed to be of satisfactory or higher overall quality? (Note any deficiencies in comments area below or on page 1)	(2)	0
NOT	E: Score indicated "*" may lead to disqualification OR contract contingency. Score "0" may lead to contract conti	ngency	<u>.</u>
Comi	ments:		
			_
			= 0
			_
			_

# **OPERATIONAL EVALUATION (2025)**

Tim Nehez 77-A / 25076 Summit County, Northfield BMV Site

FORM	DESCRIPTION	ок	NO
4.0	Operational Checklist – Maximum = 6 Points (enter points recorded on bottom of Form 4.0)	6	
4.1	Appointment of Agency Managers	· ·	
	A. Deputy to Work at Least Twenty (20) Hours Per Week	0	
	Proposed Work Hours Per Week3 \( \oscilon \)	(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: 295 Proposed: 301	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)	(1)	*
4.4	Start-Up Costs Calculation		$\neg \neg$
	A. Adequate and Accurate Personnel Costs	(3)	0
	B. Adequate and Accurate Site Preparation Costs	(2)	0
	C. Adequate and Accurate Rental Payments	6	0
	D. Total Required: \$25,361,360n Deposit (Form 3.4): \$142,758.32	(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		ncy.
Comments	B.'		
Evalu	ators' signatures Printed names	Date	
(1)	Jeff Payne	2/25	25
(2)			20

# DEPUTY REGISTRAR

# **REQUEST FOR PROPOSALS**

# **2025 FORMS**

AND

**INSTRUCTIONS** 

#### 3.0 PERSONAL CHECKLIST

## TIMOTHY ROBERT NEHEZ

Proposer's Full Legal Name	TINOTTT	NODENT NE

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)	~		Form 3.0 Personal Checklist (this form)			Form 3.0 Personal Checklist (this form)		
Form 3.1 Personal Questionnaire	~		Form 3.1 Personal Questionnaire			Form 3.1 Personal Questionnaire		
Form 3.2 Business and Employment Experience	V		Forms 3.2 Business and Employment Experience			Forms 3.2 Business and Employment Experience		
Form 3.3 Customer Service Experience	~		Form 3.3 Customer Service Experience			Form 3.3 Customer Service Experience		
Form 3.4 Start-Up Cost Funds on Deposit	~		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	х	1	N/A	х	1	Form 3.5 Political Contributions Report Chief Executive Officer		
Form 3.6 Comprehensive Personnel Policy Agreement	~		Form 3.6 Comprehensive Personnel Policy Agreement			Form 3.6 Comprehensive Personnel Policy Agreement		
Form 3.7 Security Plan Agreement	~		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	V		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:  77-A
2.	Full legal name of proposer TIMOTHY ROBERT NEHEZ
3.	Proposer's street address
	City NORTHFIELD State OHIO Zip code 44067
4.	County of residence (nonprofit corporation county of operation)
5.	Daytime telephone ( 330) 468-1780 Home telephone ( 330 ) 289-1465
	Proposer's driver's license number (nonprofit corporation N/A
7.	Spouse's name (nonprofit corporation N/A)
	Spouse's home street address (nonprofit corporation N/A)
	NORTHFIELD State OHIO Zip code 44067
9.	Are you proposing as the owner of a minority business enterprise (MBE)? No Yes
10	Proposer is (check one and follow instructions):
	An <b>individual person</b> . These forms are designed to be self-explanatory for Proposers proposing as individual persons. Answer all questions as they apply to you personally. If a question does not apply to you, enter "N/A" or "Not applicable;
	The Clerk of Courts of County;
	The County Auditor of County. Answer all questions as they apply to you and your position as Clerk of Courts or County Auditor. If a question does not apply to you or your position, enter "N/A" or "Not applicable;
	A nonprofit corporation (NPC). An officer or an authorized agent should answer all questions and sign all documents on behalf of the NPC. The answers must refer to the NPC itself and not to the individual officers, agents, or employees of the NPC, unless otherwise specified. Many questions are not applicable to nonprofit corporations. To assist your responses, we have marked those questions "NPC N/A" meaning we believe the marked question is not applicable to most nonprofit corporations. Please answer all other questions unless clearly inapplicable.

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

11. A.	Are you currently serving in elective public office Auditor, either by election or appointment (includes p	e, other recinct c	than Clerk of ommittee person	Courts or i)? (NPC N	County J/A)
			Yes	_ No_	V
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 office (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_	
B.	If YES, on what date does your contract expire? JUNE	28, 2025			
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	.)	Yes		
B.	If YES, on what date does your spouse's contract expir	re?			
For the	e following three questions, extended family included er, father-in-law, mother-in-law, brother-in-law, sister-	s your s in-law, s	pouse, parent, be on-in-law, or da	rother, sis	ter, son, law:
15. A.	Does any member of your extended family currentle N/A)	y hold a	deputy registra	ar contract	? (NPC
			Yes	_ No_	~
B.	If YES, list their name, relationship to you, whether their contract expires here:	you sh	are the same ho	usehold, a	nd date
Na	me Relationship	Same	Household	Contract	Expires
_		Yes			
-		Yes	_ No		
G-1-00		Yes	No No		
 16. A.	To the best of your knowledge, will any member of your submit a proposal in response to this RFP? (NPC N/A)	ur exten			
			103	_ 110_	

B. If YES, list their	name, relationship to yo	ou, and whether you share	the same hou	sehold:	
Name		Relationship	Sa	me House	hold
			Yes	No	
		Market and the second s	Yes	No	
			Vac	No	
			Vec	No	
17. A. Is any member of Public Safety? (1	마기 기투 시기 위기 이 가지 않는 그 없이 그리고 하는 것이 없는 것이 없는 것이 없는 것이 없다.	employed by any subdivis	ion of the Oh	_	
B. If YES, list their	name, relationship to yo	ou, and the date they becar	me so employ	red:	
Name		Relationship	Em	ployment	t Date
					· · · · · · · · · · · · · · · · · · ·
	****	The second second second	· · · · · · · · · · · · · · · · · · ·	**************************************	
	eted the Political Contribution one for NPC itself and	butions Report, Form 3.5? d one for its C.E.O.)	No	Yes_	<b>V</b>
B. If "NO," are you	ı applying as a Clerk of (	Courts or County Auditor	? No	Yes_	
19. A. Are you an empl	loyee of the State of Ohio	o? (NPC N/A)	Yes	No_	<b>/</b>
B. If "YES," will ye	ou resign, if appointed?		No	Yes_	
20. Are you an insuranc (NPC N/A)	e company agent, writin	g automobile insurance?	Yes	No_	~
of a crime punisha	able by death or impris	office manager) been consonment in excess of one	victed within e year (felon	the past to y), or an	en years y crime
involving dishonest	y or false statement?		Yes	No_	<b>V</b>
compensation contr	ibutions, social security	es Proposer owe any of payments, or workers' con the thereof, or to the federal	mpensation p	remiums o	either to
or locality within th			Vec	No	

	Is Proposer willing and able, if appoin policy of business liability property day hold the Department of Public Safety, thand the Registrar of Motor Vehicles has	mage, a ne Dire armless	and theft insurance sate ector of Public Safety, upon claims for dam	tisfactory to the Bureau	the lof Mo	Registor V	trar and ehicles,
	Revised Code 4503.03(C)? (County Aud	litor/Cl	erk of Courts N/A)	No	_ `	Yes_	<b>V</b>
	Is Proposer bondable as outlined in Ohio 4501:1-6-01(B)?	o Admi	nistrative Code	No	_ ,	Yes_	V
25.	Please provide the following information provide educational information for the	on rega individ	rding your education. ual who will manage th	If applying ne license ag	g as a gency	NPC busin	c, please less.
	High school diploma?			No	_ ,	Yes_	~
	Wich school name NORDONIA	HIGH	H SCHOOL				
	City MACEDONIA	State	OHIO		Zip	44(	056
	City MACEDONIA  College name AKRON UNIVE	RSI	TY				
	City AKRON	State	OHIO		Zip_	44:	311
	City AKRON  Major ACCOUNTING		Degree awarded _	IONE			rar and ehicles, th Ohio th Ohio please ess. th Ohio trusing rs. For used in
	College name						
	City	State			Zip_		
	Major		Degree awarded				
26.	Computer experience. Does Proposed computers? (Incumbent deputy registry nonprofit corporations, this question shall the nonprofit corporation's activities.)	ars ma	ay take credit for ope	erating BM	V cor opera	mpute ted or	ers. For r used in

ME AND OFFICE COMPUTERS I USE MICROSOFT WORD, EXCEL AND QUICKBOOKS FOR DAILY TASKS.	Inter-Production St.
	<u> </u>
and the second s	
the nonneafit comparation's activities	

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.

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.

#### 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 TIMC	THY ROBERT NEHEZ	Company name	NORTHFIEL	D BMV-	7742
Company address 103	33 NORTHFIELD RD - I	UNIT 156 City	NORTHFIELD		
	Zip44067	- CONTROL OF CONTROL O	The second secon		
	y registrar, retail grocery,				
Company's products and	d/or services VEHICLE R	EGISTRATION-DRIV	ERS LICENSI	E	
STATE ID'S					
BUSINESS OWNER -	Form of ownership (sole p	proprietor, partner, etc.):	SOLE PROPI	RIETOR	
1. Federal Tax ID N	umber:				
2. Percentage of bus	siness you owned:	00 % Hou	rs worked week	dy5	50
3. Dates you operate	ed this business: From: mo	onth 07 year 1998	To: month _0	6 year	2025
4. Is/was this busine	ss profitable?		No	Yes_	<b>/</b>
5. Is/was this busine	ess your primary source of	income and support?	No	Yes_	V
6. Do/did you direct	ly hire, evaluate, train, and	d discipline employees?	No	Yes_	~
7. Do/did you direct	ly manage employees on a	a daily basis?	No	Yes_	V
If you answered y	yes to question number 6, l	how many employees de	o/did you mana	ge?1	12
	veloped a comprehensive		No		100
least one person to veri	not a relative of yours, wify this experience, you watrar employee, you may list	rill not receive any cred	lit for it. (If yo	ou are a	

#### 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	TIMOTHY RO	BERT	NEHEZ	Compa	any nam	e CHARDO	ON BMV	
Company address	425 WATER	STREE	ET		City	CHARDON	l	
State_OHIO				Telepho	one ( 44	40 )	285-2077	
Type of business	(deputy registra	r, retail	grocery, etc.)	DEPUTY	/ REGI	STRAR AG	ENCY	
Company's produ	cts and/or service	es_VEH	IICLE REGI	STRATIO	N-DRI\	/ERS LICE	NSE-	
BUSINESS OWN	NER - Form of o	wnersh	ip (sole propr	ietor, partr	ner, etc.)	SOLE PR	OPRIETO	₹
1. Federal Tax	x ID Number:							
2. Percentage	of business you	owned	100	_%	Ho	urs worked v	veekly	45
3. Dates you	operated this bus	siness: I	From: month	year	1994	To: month	_06_ yes	ır 1998
4. Is/was this	business profita	ble?				No	Yes	~
5. Is/was this	business your p	rimary s	source of inco	me and su	pport?	No	Yes_	~
6. Do/did you	directly hire, ev	valuate,	train, and dis	cipline em	ployees	? No	Yes	~
7. Do/did you	directly manage	e emplo	yees on a dai	ly basis?		No	Yes	V
If you answ	wered yes to que	stion nu	ımber 6, how	many emp	oloyees o	do/did you m	nanage?	6
	ever developed a						Yes	
List at least one pleast one person registrar or deput	to verify this ex	xperienc	e, you will r	not receive	any cre	edit for it. (	If you are a	

# 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 TIMOTHY R	OBER	TNEHEZ	Company na	me GARF	IELD HTS	-BMV
Company address 14000 BRO			Cit	y GARFIE	LD HTS	
State_OHIO			_ Telephone (	216 )	662-30	004
Type of business (deputy regist				GISTRAR A	AGENCY	
Management/supervisory dutie	s HIRI	NG-TRANIN	ING-SCHEDULI	ING-PAYR	OLL-	
INVENTORIES-ENFORCIN						
MANAGER OR SUPERVISO	R - Job	title: MANAG	ER			
1. Title of position PERS	ONNEL	L/MANAGEF	۶	Hours work	ked weekly	?40
2. Dates this position was l	neld: Fro	om: month _	03 year 1990	_To: month		ar
3. Do/did you directly hire,	evaluat	e, train, and di	scipline employe	es? No _	Y	res
4. Do/did you directly man	age/supe	ervise employe	ees on a daily bas	is? No _	Y	res
If you answered yes to q	uestion	number 4, hov	v many employee	s do/did you	u manage?_	8
5. Have you ever develope	d a comp	prehensive bus	siness plan?	No _	<u> </u>	es
List at least one person, not a least one person to verify this registrar or deputy registrar em	experie	nce, you will	not receive any	credit for it	. (If you a	re 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):

I WILL CONTINUE TO HIRE AND TRAIN EMPLOYEES THAT ARE COURTEOUS, EFFICIENT AND UNDERSTAND ALL BMV PROCEDURES SO THAT ARE CUSTOMERS UNDERSTANTD WE VALUE THEIR BUSINESS.

WHEN THE BASS SYSTEM GOES DOWN FOR LONG PERIODS OF TIME. I DO EVERYTHING TO HELP CUSTOMERS THAT ARE AFFECTED. I GIVE THE CUSTOMER THE OPTION TO LEAVE THEIR PHONE NUMBER WITH US AND WE WILL CALL THEM BACK WHEN IT COMES UP. WE ALSO GIVE FRONT OF THE LINE PASSES TO HELP EXPEDITE THEIR INCONVENIENCE.

WE TAKE THE TIME WITH EVERY CUSTOMER THAT COMES THROUGH THE AGENCY OR MAY CALL ON THE PHONE WHAT THE REQUIREMENT FOR THE COMPLIANT DRIVERS LICENSE OR STATE ID ARE. WE HIGHLIGHT ALL REQUIREMENTS FROM THE ACCEPTABLE DOCUMENT LIST AND GIVE TO CUSTOMER. I HAVE ALSO BEEN THE GUEST SPEAKER AT THE LOCAL ROTARY CLUB AND KIWANIS CLUB.

WE CONTINUE TO PROVIDE INFORMATION HANDOUTS TO VITALE STATISTICS OFFICE AND SOCIAL SECURITY OFFICE AND PROBATE COURT.

I IMPLEMENTED AN EXPRESS LINE FOR VEHICLE REGISTRATIONS RENEWAL ONLY.

WITH THE MAY 7TH 2025 COMPLIANT DL/ID DEADLINE APPROACHING I HAVE RE-IMPLEMENTED A DOOR PERSON.

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:	TIMOTHY ROBERT NEHEZ					
Title (if	officer of nonprofit corporation):					
(A nonj	profit corporation must submit two separate reports: one for the nonprofit corporation itself, and one for its					

(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		~		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		V
Attorney General, Candidate and Committee		V		~		V		V
Secretary of State, Candidate and Committee		V		V		V		V
Treasurer of State, Candidate and Committee		~		V		~		V
Auditor of State, Candidate and Committee		V		V		~		V
State Senator, Candidate and Committee		~		~		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:

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

#### 3.7 SECURITY PLAN SUMMARY

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

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



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

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

#### 3.8 FACILITY MAINTENANCE PLAN SUMMARY

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

If you are awarded a contract, do you agree to be responsible for the following either on your own,

through your lease or sublease, or by separate contract:

No Yes

OUTDOOR BUILDING MAINTENANCE

KEEP OUTDOOR AREA FREE OF TRASH AND DEBRIS

PROVISION TO ASSURE PROMP SNOW AND ICE REMOVAL

CLEANING INSIDE OF AGENCY INCLUDING EQUIPMENT

PROVISION FOR INSIDE/OUTSIDE MAINTENANCE

PROVISION FOR PROFESSIONAL CARPET/FLOOR CLEANING (MIN. OF ONCE A YEAR)

PROVISION FOR REPAINTING AND/OR COSMETIC UPDATES

#### 3.9 INVOLVED AND INVESTED IN YOUR BUSINESS

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

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

I will be a full time Deputy Registrar who pays attention to all details on operating an agency. I will also have an assistant manager and a supervisor to assist in the daily operations to make sure all procedures are being followed. I will continue to hire quality employees that understand policy and procedures of the BMV. With a knowledgeable and quality team in place this allows me to manage, be responsible and accountable for my agency at all times.

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

Working diligently to stay up to date on all policies and immediately educating the entire staff on any changes. All staff must go through a thorough training period which includes reading and understanding all manuals, shadowing with a senior staff member before any transaction can be issued. I and/or manager are always present on the sales floor to assist and ensure all procedures are followed properly. We are to always continue to read the manuals, during slow times and system outages. Driver's license and State Id's cards go through a screening process. First the clerk verifies all documents then management verifies the documents. DL/ID and VR applications are reviewed by management to make sure all supporting documents are present.

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

We follow all procedures from the BMV fraudulent training program. All employees are trained to scrutinize all documents for authenticity. Employees are also provided with tools to help in identifying fraudulent documents. The agency is equipped with a 12 camera surveillance system which deters employees and customer. I have a crossed cut shredder, locked shred bin and a locked dumpster to ensure sensitive documents are destroyed securely and appropriately.

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?

When a new broadcast on any type of change is issued the first thing I do is print it and make a verbal announcement. Once that is completed I pass the broadcast along to the staff so they can read it also. All staff are to initial the broadcast stating that they read it and understand it. Any employee that does not understand it will come to me so I can explain it. All broadcast are saved and filed. Management while checking applications will verify if the new procedure is being followed. Periodic employee meetings will be held to review changes and policies.

5.	How will you demonstrate good leadership to your employees?
	I will communicate openly and regularly and listen to employees. By being confident in all policies of the BMV and understanding all transactions will instill confidence in all employees. I am a team player which inspires staff members and brings out the trust and best efforts of the staff daily. I will delegate certain duties, resolve conflicts, demonstrate empathy and set goals for the agency.
6	How will you maintain a high level of professionalism each day in this business?
6.	I will strive to maintain a highly skilled and motivated work force in order to provide my customers with excellent service. My staff will be trained to perform their duties in a competent, professional, efficient and friendly manner. While working side-by-side with my staff they understand my philosophy for being professional at all times and the value this creates for the agency and the State of Ohio. All staff will be groomed and dressed appropriately and wear name badges.
7.	How do you intend to recruit and retain high quality employees?
	I will always take interest in any employee that has agency experience that maybe available for hire. I also give a cash incentive for any employee that refers an applicant that I hire. I am utilizing online recruitment companies - Indeed and ZipRecruiter. Retaining employees starts with effective hiring, selecting the right candidate for an interview. Offering a competitive wage, benefits and flexible work schedule. Creating a pleasant work atmosphere where we all work as a team but still recognize and reward individual achievements. Promoting from within when possible.
8.	How will you provide a safe, clean and friendly place to do business?
	Agency is equipped with a Fire Alarm system and Surveillance camera and panic buttons at each terminal, 3 fire extinguishers and all phones are programmed with 911. Customer area is free of any obstructions, rubber back rugs to prevent slipping. Agency rugs and floors are vacuumed or swept daily. Doors and windows are checked daily for fingerprints. Keeping the employee work area neat and organized is also daily routine. Having employees dress in appropriate manner, greeting each customer, providing great customer service in a pleasant atmosphere creates a friendly place to do business. I also provide kid stickers or suckers to children.
9.	How would you deal with an irate customer?
у.	The first thing I do is remain calm and greet the customer in a pleasant manner. Then I will ask what I can help you with. From there I will listen to the situation without interrupting them. Listening to an irate customer is extremely important. Once I understand the situation I show empathy for the situation, then I find a solution to help solve the problem. Showing a customer that you are concerned and want to help normally settles them down. We also offer a front of the line pass if the customer will be returning the same day. As I finish up with the customer I will apologize for any inconvenience.
	I and the second

10.	What training or advice do you, or will you, give to your employees for dealing with irate customers?
	I have a separate customer service policy that all employees must read and follow also YouTube videos. Employees are to attempt to handle the customer by explaining BMV policy and letting them know they are there to help them, at the same time they must stay calm, be patient, sincere, understanding and respectful. If the employee cannot resolve the issue they are to excuse themselves from the customer and inform them they will get a manager or myself to help with the situation.
11.	How will you meet the expectations of the Bureau of Motor Vehicles?
	I will consistently follow procedures set forth by the BMV and Ohio Revised Code and all directives from the Registrar. My staff and I will continue to provide excellent customer service in a professional and friendly manner. I will ensure staffing is appropriate for minimum wait times, all the while maintaining a safe, clean, courteous, comfortable and professional atmosphere for both my customers and employees.
12.	Why should the Bureau of Motor Vehicles consider you for a deputy registrar license agency contract
	Being involved with the BMV for 35 years, 31 as Deputy Registrar, I believe I have demonstrated my commitment to perform my job as outlined by the Bureau of Motor Vehicles. I still have the same passion for the job as when I first started. I am a full time Deputy. I am honest, dependable and accountable for running an efficient agency. I continue to perform well on evaluations. I have excellent customer retention. I have always stayed on top of all taxes, unemployment compensation, social security payments, workers compensation and all agency expenses, my agency is solvent.

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 SUMMIT :				
State of Ohio :  I, TIMOTHY ROBERT NEHEZ , being first duly sworn, depose and say that:				
<ol> <li>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;</li> </ol>				
<ol> <li>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;</li> </ol>				
<ol> <li>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;</li> </ol>				
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: TWOTHY ROBERT NEHEZ  Printed/typed name of proposer: TWOTHY ROBERT NEHEZ				
Sworn to and subscribed in my presence by the above named Timothy robert Nehez				
on this 38 day of January, 2025				
Notary Public State of Ohio				
Printed name of Notary Public: Tonya Burker & My Comm. Expires  July 24, 2027				
My commission expires: July 24,2027				

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		
77-A Location Number		
Proposer Number (BMV use	only)	

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

FORM	DESCRIPTION	X	BMV	
4.0	Operational Checklist (this form)			
4.1	Appointment of Agency Managers			
4.2	Experienced Employees Summary	~		
4.3	Staffing and Personnel Costs Calculation	~		
4.4	Start-Up Costs Calculation Amount: 25,361.36	~		
4.5	Deputy Registrar Contract (2 pages only)	~		

#### 4.1 APPOINTMENT OF AGENCY MANAGERS

Dece	TIMOTHY ROBERT NEHEZ	77-A Location number:
Prop	oser's name:	Location number.
(A)	DEPUTY REGISTRAR: As deputy registrar, I agree to work hours per week during the hours the agency is open to the pentire term of the contract. I understand that the minimum is twenty (20) hours per week during the hours the agency twenty-hour requirement does not apply to County Audinonprofit corps., or deputy registrars operating multiple loc	requirement for deputy registrars is open for business. This itors/Clerks of Courts,
(B)	OFFICE MANAGER: I understand and agree that I must another reliable person to serve as the office manager for manager must be scheduled to work at the agency at least during the hours the agency is open to the public for busine during the hours the agency is open to the public for during the hours the agency is open to the public for	the agency, and that the office thirty-six (36) hours per week ss. It is my intention to: at least thirty-six hours per week
	Appoint another reliable person to serve as the office six hours per week during the hours the agency is on	e manager to work at least thirty- en to the public for business.
(C)	ASSISTANT OFFICE MANAGER: I understand and agreement of the agency agency office manager during the hours the agency is open	in the absence of myself and the
(D)	OTHER EMPLOYEES: I agree to maintain an accurate manager, assistant office manager, and all other employees as my own work schedule, on file and available for insptimes. I also agree to notify the BMV in writing improprintment of the office manager or assistant office manager complete and current.	and their work schedules, as well ection by BMV employees at all nediately of any changes in the
Dep	Duty registrar (proposer) signature	01/08/2025 Date:

Form 4.1, Appointment of Agency Managers (2025)

## 4.2 EXPERIENCED EMPLOYEES SUMMARY

Proposer's nar	TIMOTHY ROBERT NEHEZ me:	Location number:
registrar effort to deputy	EXPERIENCED EMPLOYEES. I certify under contract with the Registrar of Motor Volume and retain qualified employees who have registrar agency. I agree to make bona fide and under comparable conditions to their most nee.	Vehicles, I will make every good faith ave relevant experience working in a offers of employment at comparable
(B) <u>CHECK</u>	WHICHEVER APPLIES:	
	I HAVE NOT BEEN A DEPUTY REGISEMPLOYEE. I have not yet identified an relevant deputy registrar experience. However every reasonable effort to identify and hire, have relevant experience working in a deposit contact any deputy registrar employees utcontract.	ry prospective employees who have ver, if awarded a contract, I will make if possible, qualified employees who buty registrar agency. Please do <u>not</u>
	I AM OR HAVE BEEN A DEPUTY REGISTRATE IN THE PROPERTY IN THE P	g persons to whom I will make a bona iges and under comparable conditions gistrar or a proposer who has deputy
	estand that failure to hire properly qualified	
employ	ees is grounds to withhold or terminate my de	puty registrar contract.
I mill	To R. Meles	01/08/2025 Date:
Deputy regis	tyar (proposer) signature	
	0	

Form 4.2, Experienced Employees Summary (2025)

# 4.2 EXPERIENCED EMPLOYEES SUMMARY

Propo	oser's nam	TIMOTHY ROBERT NEHEZ	Location number:
(A)	registrar effort to deputy re	EXPERIENCED EMPLOYEES. I certify that is under contract with the Registrar of Motor Vehicle hire and retain qualified employees who have relegistrar agency. I agree to make bona fide offers and under comparable conditions to their most receive.	es, I will make every good faith levant experience working in a of employment at comparable
(B)	CHECK	WHICHEVER APPLIES:	
		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 personal fide offer of employment at comparable wages are to their present employment. (A deputy registrar registrar employment experience may list himself.)	awarded a contract, I will make awarded a contract, I will make asible, qualified employees who egistrar agency. Please do not fter you have been awarded a AR OR DEPUTY REGISTRAR ons to whom I will make a bona and under comparable conditions or a proposer who has deputy
(C)	I unders	stand that failure to hire properly qualified and ses is grounds to withhold or terminate my deputy re	d experienced deputy registrar egistrar contract.
Dep	Two uty registe	af (proposer) signature	01/08/2025 Date:

Form 4.2, Experienced Employees Summary (2025)

#### 4.3 STAFFING AND PERSONNEL CALCULATION

Proposer's name:	TIMOTHY ROBERT NEHEZ	Location number:	77-A
		:	

<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	\$ 23.00	\$ 920.00	\$ 3,680.00
Experienced Employees Total Number (combine Full-time & Part-time) =8	205.00	\$ 18.00	\$ 3,690.00	\$ 14,760.00
New Hire Employees Total Number (combine Full-time & Part-time) =1	20.00	\$ 15.00	\$ 300.00	\$ 1,200.00
TOTALS	301.00	N/A	\$ 4,910.00	\$ 19,640.00

#### 4.4 START-UP COSTS CALCULATION

Propos	ser's n	ame:	TIMOTHY ROBERT NEH	EZ Location r	77-A number:
The purpose of this form is to assure the BMV that you are financially able to cover the costs of beginning a deputy registrar business. We need to know that you have enough financial resources to cover your personnel, site preparation, and site rental costs.					
1.	PEI	RSO	NNEL COSTS (FOUR V	WEEKS)	
	Use	Form	4.3 to calculate four (4) week	s' personnel costs for	this location.
				9	19,640.00
2.	SIT	E PI	REPARATION COSTS	(AMORTIZED)	
	A. If this is a Deputy Provided Site, calculate and enter the actual projected costs you will need to spend to prepare the building for use as a deputy registrar agency in each of the following categories:				
		1.	<b>Building Modifications</b>	\$	_
		2.	Counter Costs	\$	_
		3.	Other Costs	\$	_
		4.	Total	\$	_
			al amortized over 60 month c vide line 4 by 60)	ontract period = :	\$
	B.	Age	nis is a BMV Controlled Sincy Specifications for this long the Agency Specifications.	cation. Do not cha	ation contained in the nge the information
3.	AG	ENC	CY RENTAL PAYMEN	TS (3 MONTHS)	
	A.		nis is a Deputy Provided Sit or lease this site.	e, enter the actual ar	nount you will pay to
	B If this is a BMV Controlled Site, enter the estimated rent listed in the Agency Specifications for this site. Do not change the amount listed.				
		One	month's rent: \$\frac{190}{}	7.12 x 3 =	\$ 5,721.36 ====================================
TOTAL START-UP COSTS					
	site	prepa	ks' personnel costs, plus one aration costs (2.A total amount), plus three mo	unt or 2.B BMV	§ 25,361.36

#### STATE OF OHIO

#### DEPARTMENT OF PUBLIC SAFETY

#### **BUREAU OF MOTOR VEHICLES**

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

This Agreement is made by and bet	ween the Registr	ar of Motor Vehicles, (Registrar,
herein), located at 1970 West Brown TIMOTHY ROBERT NEHEZ		umbus, Ohio 43223-1102 and , (deputy registrar, herein) whose
home mailing address i		
(City) NORTHFIELD	, Ohio (Zip) _	HO , to operate a deputy
registrar agency, Location No. 77-A		_, to be located as follows: in the
State of Ohio, County of SUMMIT		
City/Village/Township (indicate which	VILLAGE	of NORTHFIELD
Street address: 10333 NORTHFIELD	RD UNIT 156	
(City) NORTHFIELD	, Ohio (Zip	44067

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:

- 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 "an individual," "County Auditor for (spe county)," or "a nonprofit corporation"]:  AN INDIVIDUAL	s appointment in the capacity of [state whether cify county)," "Clerk of Courts for (specify
5. The Deputy Registrar certifies that he or sto all of the 2025 Deputy Registrar Contract	he has read, understands, and hereby agrees t Terms and Conditions incorporated herein.
Inother K. Nehen	01/28/2025
Deputy Registrar signature	Date
STATE OF OHIO :	
COUNTY OF SUMMIT :	
Before me, a notary public in and for said county named TIMOTHY ROBERT NEHEZ sign the foregoing instrument and that the same	, who acknowledged that he or she did
of, 2025.	y hand and official seal, this day
NETARY PUBLIC	TONYA BARKER Notary Public
Printed name of Notary Public:	State of Ohio My Comm. Expires
My commission Expires:	July 24, 2027
STATE OF OHIO DEPARTMENT OF PUBLIC SAFETY BUREAU OF MOTOR VEHICLES	
BY: REGISTRAR OF MOTOR VEHICLES	
Done at Columbus, Ohio, on	