

**EVALUATION SCORE SHEET
TRANSPORTATION OF INMATES
ANNUAL RFP # 1890**

DATE EVALUATED: 2/6/2023	
PROPOSER	US CORRECTIONS LLC
	517 HICKORY HILLS BLVD
	WHITES CREEKS, TN 37189
	615-352-9798
EVALUATOR:	TOTAL SCORE
E1	275
E2	165
E3	230
E4	150
E5	225
E6	225
TOTAL SCORE	1270
AVERAGE	→ 211.67

RECOMMENDATION →

Per Evaluation Committee as approved by Commissioner's Court:

Anthony Lopez, Xavier Villarreal, Rick Camarillo, Juan Saldaña, Mark Yates, Rick Cornejo

I HEREBY CERTIFY THE ABOVE TO BE THE CORRECT TABULATED SCORES:

SIGNATURE:


 Ignacio Amezcua, Purchasing Agent

 2/7/2023
 Date

**Awarded by Commissioners' Court
on 02/14/2023**

PRICING/COSTS

Proposal Information

Please see attached pricing proposal for complete pricing.

Costs	<u>MALE</u>	<u>FEMALE</u>
Ground Cost per mile per prisoner	\$ <u>1.50</u>	\$ <u>1.50</u>
Air Cost per mile per prisoner	\$ <u>case-by-case</u>	\$ <u>case-by-case</u>
In State cost per mile per prisoner	\$ <u>1.50</u>	\$ <u>1.50</u>

Minimum costs per inmate \$ 600.00 less 25 % discount for additional prisoners traveling with same embark / disembark (out of state transportation only).

Minimum costs per inmate \$ 600.00 less 25 % discount for additional prisoners traveling with same embark / disembark (in state transportation only).

Surcharge for court appearances and release dates \$ 650.00

Formula to Pricing:

Costs	<u>MALE</u>	<u>FEMALE</u>
Ground Cost per mile per prisoner	<u>unit</u>	<u>unit</u>
Air Cost per mile per prisoner	<u>unit</u>	<u>unit</u>
In State cost per mile per prisoner	<u>unit</u>	<u>unit</u>

Lowest Unit total = Max Total Points

Second lowest Unit total: Pro Rata calculation of points based on ratio to Lowest unit total.

Date: 12/23/2022

Authorized Signature: 

Print or Type Names: Joel Brasfield

Firm's Name: US Corrections LLC

Address: 517 Hickory Hills Blvd, Whites Creek, TN 37189

Telephone: 615-352-9798 x 156

FAX: 615-352-9737

Email Address: dwarden@prisonertransport.net



U.S. CORRECTIONS
YOUR #1 CHOICE FOR INMATE TRANSPORTATION

PO BOX 171078
NASHVILLE, TN 37217
PH: 615.352.9798
FAX: 615.352.9737
info@prisonertransport.net

December 28th, 2022

Cameron County

RFP# 1890

Transportation/Extradition Services

RE: Fee Proposal

Rate Per Mile: \$1.50/mile

Minimum Trip Fee: \$600.00

Special Requests*: \$650.00 per occurrence

Medical and Custom Transports: case-by-case**

Limited Service Areas*: case-by-case**

Medical Conditions that exclude persons from ground transport eligibility include, but are not limited to, the following:

1. Cardiovascular problems requiring medication or prescribed procedures;
2. Diabetics whereby prescribed medication must be injected and/or refrigerated;
3. Epilepsy whereby seizure activity is not adequately controlled;
4. Pregnancy;
5. Fractured bones requiring casts or braces designed to immobilize injured areas;
6. Critical wounds;
7. Communicable diseases or any other medical condition that may place the passenger, transport personnel and other passengers at risk;
8. HIV positive or AIDS;
9. Inmates in excess of 280lbs will require additional charge for transport;
10. Offenders over the age of 65.

***Special Requests** - Release Dates, Court Dates, Specific Pick-up/Drop-off, IAD

****Custom Transport:** Any non-standard transport that would require special concessions to be made to safely transport the offender.

**Awarded by Commissioners' Court
02/14/2023**

*****Limited Service Areas** – Areas of the Country that are not within our normal routes and are transported by Flight only: WA, OR, NE, ND, SD, MT, ID, WY, HI, AK, ME (US Territories Included)

Please note that US Corrections reserves the right to refuse any transport.

CURRENTLY US CORRECTIONS IS STILL UNDER PANDEMIC PRICING AND PRICING ALL TRANSPORTS ON A CASE-BY-CASE BASIS. PROPOSED PRICING IS POST-PANDEMIC PRICING.

Thank you again for your consideration.

Best,

Dave Warden III

Director of Sales & Contracts

U.S. Corrections

Phone: 615-352-9798 Ext:156

Fax: 615-352-9737

dwarden@prisonertransport.net



**Awarded by Commissioners' Court
02/14/2023**

Dalia Loera

From: Trista Lorraine Valdez
Sent: Monday, February 26, 2024 9:24 AM
To: Dalia Loera
Subject: FW: RFP #1890 Transportation of Inmates -Certificate of Insurance
Attachments: Certificate.pdf; US Corrections-Cameron County-02.21.24.pdf

Good Morning,

Please see below.

Thank you,

Lorraine Valdez

Cameron County Courthouse
Civil Legal Division

From: Dylbia Jefferies <djefferi@co.cameron.tx.us>
Sent: Monday, February 26, 2024 8:58 AM
To: Trista Lorraine Valdez <TLValdez@co.cameron.tx.us>
Subject: RE: RFP #1890 Transportation of Inmates -Certificate of Insurance

That is fine.

Dylbia Jefferies Vega

Legal Counsel
Cameron County Commissioners Court
1100 E. Monroe Street
Brownsville, Texas 78520
(956) 550-1345 office
(956) 550-1348 fax
djefferi@co.cameron.tx.us

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From: Trista Lorraine Valdez <TLValdez@co.cameron.tx.us>
Sent: Monday, February 26, 2024 8:43 AM
To: Dylbia Jefferies <djefferi@co.cameron.tx.us>
Subject: FW: RFP #1890 Transportation of Inmates -Certificate of Insurance



USCORRE-01

SUZI

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/21/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Earl Bacon Agency, Inc. Post Office Box 12039 Tallahassee, FL 32317	CONTACT NAME: PHONE (A/C, No, Ext): (850) 878-2121 E-MAIL ADDRESS: FAX (A/C, No): (850) 878-2128
INSURED U.S. Corrections, LLC 4150 Dow Road Ste. 1 Melbourne, FL 32934	INSURER(S) AFFORDING COVERAGE INSURER A: Upland Specialty Insurance Company 16988 INSURER B: Florida Automobile JUA 99999 INSURER C: James River Insurance Company 12203 INSURER D: INSURER E: INSURER F:

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A X	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR		USPGL0010423	8/3/2023	8/3/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 0 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PRO-JECT LOC OTHER:						
B	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY X SCHEDULED AUTOS HIRED AUTOS ONLY NON-OWNED AUTOS ONLY		FCA0900000429	3/10/2023	3/10/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	UMBRELLA LIAB X OCCUR X EXCESS LIAB CLAIMS-MADE		USXGL0002123	8/3/2023	8/3/2024	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 DED RETENTION \$
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) N/A If yes, describe under DESCRIPTION OF OPERATIONS below						PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	HIRED AUTO LIABILITY		CA4360123103	3/10/2023	3/10/2024	PER OCCURENCE 1,000,000
C	EXCESS OVER HIRED AL		001008163	3/10/2023	3/10/2024	PER OCCURENCE 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Professional Liability: \$3,000,000 limit/8/3/23-8/3/24/Pol #VNPL013788/Gemini Insurance Co.

CERTIFICATE HOLDER

CANCELLATION

Cameron County
Sheriff Department
1100 E Monroe
Brownsville, TX 78520

AUTHORIZED REPRESENTATIVE