# **CA DOT - Payment Acceptance Devices**

Start of Block: Default Question Block
U.S. General Services Administration www.gsa.gov
You can download a copy of the RFI in advance of responding here:
CA DOT - Payment Acceptance Devices - Market Research
On behalf of the California Department of Transportation, GSA is conducting market research to understand capabilities related to providing the below requirement to state and local transit agencies across the country:
Payment Acceptance Devices (PADs) and associated services intended to make fare collection more convenient and reliable, improving the rider experience. A PAD processes contactless EMV taps for transit payments. Hardware includes standalone validators, mounting poles, and embedded validators.
Responses Due: 12/21/2022
Draft Requirements Document
Exhibit a.1 performance measures

Exhibit a.2 pad specifications 1
Exhibit f fta clauses
Exhibit g definitions 1
Market Research Notices
<b>For Multiple Award Schedule (MAS) Only:</b> Based on the responses submitted to this RFI, the Government reserves the right to issue all future requests for quotes directly to identified sources via email, in accordance with FAR 8.405-3(b)(1)(ii)(B)(2) and/or FAR 8.405-2(c)(3)(iii)(B).

### **Company & POC Information:**

If you have questions about your GSA contract, you can find your company's information on the GSA eLibrary page.

PLEASE NOTE: A valid email address is required in order to receive a receipt of your

response. The requesting Agency's point of contact information will also be sent to this email once the RFI closes.

Company Name
GSA Contract Number
POC First Name
POC Last Name
POC Email
POC Phone #
Company Website (URLs only)

<b>Business S</b>	Siz	e:
-------------------	-----	----

s.	- sn	nall	bι	ısin	ess

o - other than small business

UEI #: Unique Entity Identifier

CAGE Code \_\_\_\_\_

## Please select all socio-economic categories that apply to your business.

**Note:** select as many that apply **OR** if your company does not fall under one of the categories, please select N/A. (Data is validated prior to the reports being issued)

wo - Women Owned Small business (WOSB)			
ew - Economically Disadvantaged Women Owned Small business v - Veteran Owned Small business			
	Disabled Veteran Owned Small business		
	fied Small Disadvantaged business		
	tified 8(a) Firm		
	fied HUBZone Firm		
The socio-eco	The socio-economic indicators signify the business size and business status of the contractor.		
	W		
	W		
	WO		
	WO		
	ew		
	GW		
	V		
	·		
	dv		
	av		
	d		
	8a		
	ou .		
	h		
	N/A		

**Socio-economic Indicators Key:** w - Woman Owned business.

## Technical Question(s) - Yes/No

You can further explain your response in the Capabilities Statement below.

. ,	Yes	No
1. Although the primary place of performance for this contract is listed as California, the expected usage for this contract is the entire United States. Are you able to support local transit agencies from any state?		
2. Has your organization completed any projects in the past 5 years that demonstrates the firm's capability to provide the products and services?		
3. As part of a contract with a potential buyer, would your organization agree to the default Federal Transit Administration provisions, as included in the California Master Service Agreement (Exhibit F)?		
* Tochnical Question - Short Ar	nowor.	

#### Technical Question - Short Answer

Limited to 300 characters - if more space is needed, please include with your Capabilities Statement.

Can your products and services meet the minimum specifications contained in the California Master Service Agreement for Payment Acceptance Devices (Exhibit A.2)?

Please briefly describe how the products and services meet the minimum requirements, and if your products and services do not meet the minimum specifications, explain why you do not consider that an issue.

*
<b>Technical Question - Short Answer</b> Limited to 300 characters - if more space is needed, please include with your Capabilities Statement.
Do your products and services exceed the minimum specifications contained in the California Master Service Agreement for Payment Acceptance Devices (Exhibit A.2) in any way? If yes, please briefly describe how.
*
<b>Technical Question - Short Answer</b> Limited to 300 characters - if more space is needed, please include with your Capabilities  Statement.
Can your products and services meet the default performance measures (Service Level Agreements) as defined in the California Master Service Agreement (Exhibit A.1)? Would your organization agree to these default terms in a contract with a potential buyer?

*
<b>Technical Question - Short Answer</b> Limited to 300 characters - if more space is needed, please include with your Capabilities Statement.
Are your products and services integrated with any firms providing Category B Transit Processing Services under a California Master Service Agreement (Littlepay, INIT, Enghouse, Bytemark)? If not, would you integrate with one of these firms upon request from a potential buyer?
*
<b>Technical Question - Short Answer</b> Limited to 300 characters - if more space is needed, please include with your Capabilities Statement.
Does your organization provide complete end-to-end installation services for the Payment Acceptance Devices (including electrical wiring on-board transit vehicles)?
If not, does your organization use subcontractors to perform these installation services? If yes, can you share which firms are used to subcontract these services?

Based on the provided information, would your company submit a quote if this requirement was issued under your GSA Contract? \*If you select "No", be sure to submit any questions or provide any comments to assist the requesting agency in the "Optional Feedback" section below. O Yes ○ \*No Do you provide this service or product commercially? O Yes O No If you select "Other" for any of the questions below, please provide an explanation in the "Optional Feedback" section following. Please identify all GSA contracts that your company holds and are applicable to this requirement. (Select all that apply) Multiple Award Schedule (MAS) Other

•	n the GSA contracts your company holds, which SIN(s), Pool(s), or (s) would you recommend are applicable for this requirement? (Select all that
	33411
	54151ECOM
	811212
	Other
Please select that apply)	the NAICS code(s) you determine are appropriate for this requirement. (Select all
	334112
	541519
	811212
	Other
*	
=	<b>dback</b> : Please provide any feedback or questions you may have related to this and the Draft Requirements document.
NOTE: Do no section will be	is only for questions or feedback to the Agency about this requirement. of include capabilities information here. Any capabilities information provided in this edeleted and is not included in the MRAS Market Research Report of all ovided to the Agency.

Capability Website: Please provide a URL to a capability website for your company.
The capability website may be used in lieu of or in combination with a Capabilities Statement (below).
Capabilities Statement: Please note: Only one (1) file can be uploaded. Be sure you
stack/combine all your documents into a single file prior to uploading. Capabilities
Statement should include relevant experience. Relevant experience includes projects that are
similar to the described requirements and that have occurred in the past 5 years. <b>Please do not provide general capabilities statements.</b> Please include up to 3 relevant projects and
include the following information for each: 1. Customer Name 2. Customer/Client POC Email
3. Total Contract Value 4. Period of Performance 5. Brief Description of Services Provided 6. Indicate if there is a CPARS (Contractor Performance Assessment Reporting System)
Available While optional, a capability statement relevant to this requirement is highly
recommended.



#### **AFTER YOU SUBMIT YOUR RESPONSE:**

A confirmation email will be sent to the Company POC along with a copy of your completed responses.

#### **Disclaimer**

By submitting your response, you grant the U.S. General Services Administration (GSA) the authority to share your information with other Government entities including Federal, State and Local Governments as well as the right to publish your market research response (including your company name and POC contact information) on public-facing Government websites.

**End of Block: Default Question Block**