



Request for Price Concurrence

Date Sent: December 10, 2025

Contracting Agency: Albany County

Customer Contact: Pam O'Neill

Job Title: Deputy Purchasing Agent

Street Address: 112 State St.

City, State Zip: Albany, NY 12207

Phone: 518-447-7139 Fax# _____ E-Mail: Pamela.O'Neill@albanycountyny.go

PLEASE UPDATE INFORMATION IF NEEDED

Member Agency: Second Chance Opportunities, Inc.

Service: Janitorial

Location: Family Court, 30 Clinton Ave. Albany NY 12207/Judicial Center 6 Lodge St Albany NY 12207

Family Court: \$193,143.26/annual; \$16,095.27/monthly
Judicial Center: \$156,925.73/annual; \$13,077.14/monthly

Proposed Price: *Price is subject to prevailing wage as mandated by the NYS DOL

If a Renewal, Current Contract # Resolution No. 515 for 2022

Proposed Term: 1/01/2026- 12/31/2026 with 1, 1 year options to renew

This form is not a contract; it is only an acknowledgment of your concurrence to the above proposed price. If requested, a cost analysis can be provided for your review documenting proposed cost of service.

Please Note: All contracts with NYS Prevailing Wage Schedules issued on or after 8/1/2010 must contain escalation clauses for wages and supplemental benefits and other related costs dependent upon the annual NYS Department of Labor Published Prevailing Wage Schedules. All contracts with NYC Prevailing Wage Schedules must contain escalation clauses for wages and supplemental benefits and other related costs dependent upon the NYC Comptrollers Published Prevailing Wage Schedule.

Contract Notes: [Contract Notes]

If you are in agreement with the proposed price, please sign this form as soon as possible and return by mail or fax. Upon receipt, NYSID will apply to the NYS Office of General Services for price approval if necessary. If you have any questions, please call NYSID Contract Administration at the number below. Please fax or mail to:

New York State Industries for the Disabled, Inc. E-mail: DFallati@nysid.org
 ATTN: Fallati, Dee Phone: 518-463-9706
 11 Columbia Circle Drive Ext.: 239
 Albany, NY 12203-5156

NYSID Account Representative: Durham, Ethan

Authorized Signature: *Thomas A. Stover*
 Printed Name: Thomas A. Stover
 Job Title: Spec. Asst.
 Date: 12/11/25

See attached documents in lieu of signed form