



# Food Services Prepared Meals *Bid Questionnaire*

Thank you for the opportunity to submit a bid to partner your organization in delivering on its services to your clients. Please answer the questions below so Salsa can respond with a bid offer:

## FOOD PREPARATION

Food to be prepared at (please check the appropriate box and fill out any details):

- Client Site: If at client site see additional questions to be asked.
- Salsa Commissary: If at Salsa commissary, are meals to be:

**Delivered.** If Delivered please specify:

1. Location \_\_\_\_\_  
 Name? \_\_\_\_\_  
 Address? \_\_\_\_\_ Floor? \_\_\_\_\_ Room? \_\_\_\_\_  
 Delivery Service Entrance? \_\_\_\_\_  
 Are there steps or a ramp to enter building? \_\_\_\_\_  
 Elevator? \_\_\_\_\_  
 Time delivery expected? \_\_\_\_\_  
 Time meals served to clients? \_\_\_\_\_
2. Parking  
 Where do deliverers park for delivery? \_\_\_\_\_
3. Equipment/Personnel  
 Does location have a Pantry, Steam Table or Full Kitchen for heating or maintaining food hot? If yes what equipment is there and operational? \_\_\_\_\_  
 Does client have food servers? \_\_\_\_\_

**Pick up:** If pick-up please specify:

- Does client have hot shot trucks or Insulated Food Carriers? \_\_\_\_\_
- What time is pick-up for all routes? \_\_\_\_\_
- How many routes? \_\_\_\_\_
- How many delivery vehicles will pick up? \_\_\_\_\_

## MENU PREFERENCES

Do you have preferences for your menu selections or cuisine given the clients you serve?

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We serve nutritionally balanced meals, however, do you have any other specific food item requirements based on any health/dietary conditions of your clients? \_\_\_\_\_

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## DAILY MEAL REQUIREMENT

Please check off which meals are required:

- Breakfast. Comment \_\_\_\_\_
- AM Snack. Comment \_\_\_\_\_
- Lunch. Comment \_\_\_\_\_
- PM Snack. Comment \_\_\_\_\_
- Dinner. Comment \_\_\_\_\_
- Evening Snack. Comment \_\_\_\_\_

## YOUR CLIENTS

Please select client base to be served:

- HIV Aids/Mental Health     Day Care
- Senior Meals                 Corporate
- School                          Other \_\_\_\_\_
- Homeless                      \_\_\_\_\_

## MEAL PACKAGING

Please specify your packaging requirements:

- Bulk
- Individually Packed. If individually packed is there a plate type specification/requirement? \_\_\_\_\_

## CONTINGENCY REQUESTS

Any requirement for stocking three days of non-perishable foods at location in case of emergencies?

- Yes     No

Comments \_\_\_\_\_

Snow or other emergency contingency requirement requests?

- Yes     No

Comments \_\_\_\_\_

## SUPPLIES/DISPOSABLE GOODS

Yes we want disposable goods supplied.

Please check which goods:

- Plates. Type? \_\_\_\_\_
- Fork, Knife, Napkin Packet
- Other \_\_\_\_\_
- No Disposable Goods

## BILLING

What are your payment terms?

- Weekly                 30 Days
- Bi-Weekly             Other \_\_\_\_\_