



Member Checklist

Please be advised that all the information below needs to be provided when submitting costing to NYSID, if applicable. Please provide this additional information on the cost analysis itself or a separate document to be used as backup.

Labor:

- *Wages paid for each position direct and indirect.
- *Do the wages paid include supplemental benefits paid in cash?
- *Breakdown if blended wage.
- *Breakdown of how hours were calculated i.e. 2 employees 8 hour per day 5 days per week.
- *Breakdown of Days or hours for vacation, sick, personal and holiday listed.
- *Provide a breakdown of periodic work, if in hours above or a separate line item.

Employee Benefits:

- *Breakdown of supplemental benefit amount, i.e., how did you arrive at the per hour cost.
- *Percentages of Statutory benefits such as FICA, SUTA, FUTA, Workers' Compensation and Disability.

Equipment:

- *List of equipment amortized with make and model numbers and cost.

Equipment Operating costs:

- *Mileage calculation number of miles per week, or day.
- *Tolls per week or day.

Supplies and non-amortized Equipment

- *List of supplies with breakdown of item, price per, estimated quantity, and total price.
- *List of any non-amortized equipment, such as cell phones and pagers; please list item, price per, quantity, and total price.

Other:

- *Please provide item, price per, estimated quantity, and total price.

Additional Information:

- *List of any subcontractors-provide copy of invoice or quote for any service they are providing.
- *If additional supplies (i.e., pesticides, mulch, ice melt, etc.) or equipment rentals are required, please provide copy of invoice or quote.
- *Verify the annual hours on the cost analysis; match the annual hours on the application.
- *Verify the annual hours listed on the application and cost analysis, and include paid time off.