



Attachment B

Application To Provide Catering Services
Title III-C1 Congregate Meals and Title III-C2 Home Delivered Meals

<u>1. Company Information</u>		<u>2. Primary Food Preparation Site (If Different)</u>	
Organization Legal Name	Thyme 2 Eat catering	Organization Legal Name:	Thyme 2 Eat catering
Address:	162 Heathgate RD, Montgomery IL 60538	Address:	111 S. Lake Street Montgomery IL 60538
Main phone number:	708-265-9840	Main phone number:	708-265-9840
County:	Kendall	County:	Kane
Primary Contact:	Tiffany Jones	Primary Contact:	Tiffany Jones
Title:	owner / chef	Title:	owner / chef
E-mail:	thyme2eatcater@gmail.com	E-mail:	thyme2eatcater@gmail.com

3. Days/Hours/Type of Service

Please indicate your capabilities in each of these categories. See application instructions- Attachment A for more details about meal types and delivery options.

<u>Days of the week you are able to deliver meals to sites</u>	<u>Types of meals (check all that apply)</u>	<u>Delivery Options</u>
<input checked="" type="checkbox"/> Monday <input checked="" type="checkbox"/> Tuesday <input checked="" type="checkbox"/> Wednesday <input checked="" type="checkbox"/> Thursday <input checked="" type="checkbox"/> Friday Delivery Hours Between: 9 A.M. & 10 P.M.	<input checked="" type="checkbox"/> Regular/General <input type="checkbox"/> Hispanic cuisine <input type="checkbox"/> Chinese cuisine <input type="checkbox"/> Southeast Asian/Indian <input type="checkbox"/> Korean cuisine <input type="checkbox"/> Ethnic <input type="checkbox"/> Ethnic	Congregate Meals delivered to sites: <input checked="" type="checkbox"/> Hot <input checked="" type="checkbox"/> Cold <input checked="" type="checkbox"/> Pre-Portioned "Deli-Bar" Items Individually packaged HDMs delivered to sites: <input checked="" type="checkbox"/> Hot <input checked="" type="checkbox"/> Cold <input checked="" type="checkbox"/> Frozen



<p>Are you willing to provide equipment to meal sites? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>I can't at the moment, but when I get more equipment I definitely can.</p>	<p><input type="checkbox"/> Kosher <input checked="" type="checkbox"/> Deli or Salad Bar <input type="checkbox"/> Fresh Grocery Box <input type="checkbox"/> Shelf stable meals <input checked="" type="checkbox"/> Holiday or special event meals <input type="checkbox"/> Other _____</p> <p>Special Therapeutic Diets (check all that apply) <input type="checkbox"/> Diabetic Friendly <input type="checkbox"/> Renal Friendly for those receiving dialysis <input type="checkbox"/> Heart Healthy <input type="checkbox"/> Vegetarian <input type="checkbox"/> Gluten Free <input type="checkbox"/> Pureed</p>	<p>Individually packaged HDMs delivered to homes: <input checked="" type="checkbox"/> Hot <input checked="" type="checkbox"/> Cold <input checked="" type="checkbox"/> Frozen</p> <p>will add this service once I get the proper equipment</p>
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4. Application Agreement

By signing this application, I certify that I am an authorized representative to sign for this Agency. I certify that I will adhere to all AgeGuide requirements and policies for provision of services, including Definitions and Standards and Request for Application. I certify that the specifications outlined in this application represent the Applicant Agency's commitments from **October 1, 2025 - September 30, 2028**. All costs for the preparation of this application shall be the responsibility of the Applicant Agency and not the responsibility of AgeGuide. I hereby certify that all the information and answers provided in this application are true and accurate to the best of my knowledge.

<p>Typed Name:</p>	<p>Tiffany Jones</p>	<p>Signature:</p>	<p><i>Tiffany Jones</i></p>
<p>Title:</p>	<p>owner / chef</p>	<p>Date:</p>	<p>04/01/2025 3/11/2025</p>



5. Application Instructions

- Please answer all questions as thoroughly as possible.
- Submit both the narrative and pricing matrix.
- AgeGuide accepts applications to provide catering services throughout the year.
- Submit the application to Lchew@AgeGuide.org.
- Questions should be e-mailed to Lchew@AgeGuide.org.

Notes:

- (1) This application does not request financial information about your organization, however, AgeGuide does reserve the right to request financial data as necessary to assess the financial viability of the organization.
- (2) This application is not a contract. If a contract is offered by a Nutrition Provider, this application becomes part of the contract.
- (3) Contracts will not vary from the information included in the Caterer Request for Application unless specifically approved by the Nutrition Provider.
- (4) See **Attachment D** for FY24 Estimated Meal Volumes by Delivery Location (reference only).

6. Application

A. General

Are you applying for

- Caterer**
- On-Site Caterer**
- Shelf-stable meal vendor**
- Fresh grocery box provider**

B. Performance History

1. When was your company established? Who are the owners of the company?

My company was established in 2018. I, Tiffany Jones, am the owner of this company.

2. How many meals did your company prepare and deliver for service in 2024? Please report which category of meals: home delivered meals, Congregate meals, shelf-stable meals and or fresh grocery boxes.

I've never done a service with you all. However, I have catered Congregate meals & individual meals for corporate offices, weddings & social gatherings. Also, Daily, I prepared Congregate



and individual meals for major warehouses and Big companies / hospitals through a platform called Fooda. An estimate I could give would be about over 9,000. I know it's well above that.

3. What volume of daily meals can your operation produce on the first day of contract service on October 1, 2025? Please explain (e.g., expansion plans or other changes to production).

If we are talking about per person, I would say 500-600. My team is growing, so we can handle more.

4. Have you done work similar in scope and size to the Senior Nutrition program? Give examples of the number of meals served.

Yes! I've had to prep & serve meals at Rush Hospital, Exxon mobile refinery, a few companies in the Willis tower, etc. There were a mixture between congregate meals & individual packaged salads. I also had my own grab & go station at the refinery. Daily I served over 1000 meals

c. Quality

1. What is the maximum number of hours between preparation of the entrées, and arrival at the designated nutrition site?

I go strictly by the book. My meals are prepared and consumed within 4 hours of preparation. During travel, meals are placed in insulated boxes to ensure proper temp.

2. How will you document food temperatures at the time of leaving your facility and the time of delivery?

I keep thermometers at the kitchen & in my culinary kit during deliveries. I also have temp logs where we take temp hourly during service.

D. Capacity

1. Please describe how you will respond to special meal requests (holiday-related meals, occasional themed meals, etc.) and accommodate menu changes (e.g. when meals do not meet client satisfaction?)

I love special requests and I am huge on holiday menus! menu changes ^{is}, menu changes does not scare me one bit!

2. Please describe how you will provide meals on days that service is required but your kitchen is closed due to your organization's or the Nutrition providers' holiday policy.

A contract is a contract must be done! there are 24 hours in a day. I'll find time to celebrate once my work is done.

3. Please describe your company's ability to provide a Fresh-served deli or salad bars at a congregate site.

- a. Do you have the additional capacity to do the Fresh-served deli portioning work? If yes, what is the effect on the per meal price?

Yes, I actually do that now.

8" x 8" garden salad = \$9.00
 ↑ with chicken = \$10.00

- b. Are you able to provide the salad bar equipment? If yes, what is the effect on the per meal price?

Not at the moment, I can only do prepackaged salads.

4. Do you have the capacity to pack Home Delivered Meals in delivery carriers according to the routes set by the Nutrition providers? If yes, what is the effect on the per meal price?

That's the goal for the future. Right now I can only do congregate meals ^{is}, individual salads.



5. What packaging system do you use for individually packing home delivered meals?
(List brand.)
I'm looking to purchase from: Oliver Packaging and Equipment Co.
- E. Pricing
1. Please complete Attachment C - "Caterer Pricing Matrix" Remember to enter information for each County you are able to cater.

F. Attachments

If your organization is invited by AgeGuide to provide a taste test, you will be asked to submit one set of the attachments listed below. Please label any attachments with your company name.

1. Current health department inspection(s)
2. Current fire department inspection(s)
3. Current sanitation certificate (CFPM) for the supervisor of meal preparation
4. Three client references, including client's name, primary contact's phone number and e-mail address
5. Current caterers must submit a sample menu for any home delivered meals, congregate dining meals, shelf-stable meals and/or fresh grocery boxes that will be approved by a licensed Registered dietitian for AgeGuide's review.

NEW CATERERS must submit a cycle menu for any home-delivered meals, congregate dining meals, shelf-stable meals and or fresh grocery boxes that will be approved by a licensed Registered dietitian indicating the menus meet 1/3 of the daily nutritional requirements for older adults.

- A one-month sample menu and nutritional analysis or meal pattern using the IDOA approval sheet. AgeGuide will provide approval sheets.

6. Written confirmation that the caterer has read the menu standards and can provide menus that meet these standards (Attachment D.)