### SUGGESTED AGENDA

#### AMENDED

### TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS PERRY, FLORIDA

### FEBRUARY 18, 2014 6:00 P.M.

### 201 E. GREEN STREET TAYLOR COUNTY ADMINISTRATIVE COMPLEX OLD POST OFFICE

NOTICE IS HEREBY GIVEN, PURSUANT TO FLORIDA STATUTES 286.0105, THAT ANY PERSONS DECIDING TO APPEAL ANY MATTER CONSIDERED AT THIS MEETING WILL NEED A RECORD OF THE MEETING AND MAY NEED TO ENSURE THAT A VERBATIM RECORD OF THE PROCEEDINGS IS MADE, WHICH RECORD INCLUDES THE TESTIMONY AND EVIDENCE UPON WHICH THE APPEAL IS TO BE BASED.

ANY PERSON WISHING TO ADDRESS THE BOARD REGARDING AN AGENDAED ITEM WILL BE GIVEN THREE (3) MINUTES FOR COMMENT. A COMMENTER MAY ONLY SPEAK ONE (1) TIME FOR EACH AGENDAED ITEM.

- 1. Prayer
- 2. Pledge of Allegiance
- 3. Approval of Agenda

### BIDS/PUBLIC HEARINGS:

- 4. THE BOARD TO HOLD A PUBLIC HEARING TO RECEIVE INPUT AND NOTIFY THE PUBLIC OF THE POSSIBLE GRANT APPLICATION TO THE FLORIDA FISH & WILDLIFE CONSERVATION COMMISSION 2014 FUNDING CYCLE, FOR ARTIFICIAL REEF CONSTRUCTION AT THE PERMITTED BUCKEYE REEF SITE, SET FOR THIS DATE AT 6:00 P.M., OR AS SOON THEREAFTER AS POSSIBLE.
- 5. THE BOARD TO HOLD A PUBLIC HEARING TO HEAR AN APPLICATION FOR A SPECIAL EVENTS PERMIT (MUD-BOG), TO BE HELD ON MARCH 7 - 9, 2014, AS SUBMITTED BY IRON

HORSE MUD RANCH, SET FOR THIS DATE AT 6:05 P.M., OR AS SOON THEREAFTER AS POSSIBLE.

AWARDS/RECOGNITION:

- 6. THE BOARD TO AWARD A CERTIFICATE OF VALOR TO SHERIFF'S DEPUTY, ROBERT LUNDY, FOR HIS COURAGEOUS ACTIONS IN SUBDUING AN ACTIVE SHOOTER AT TIMBERLAND FORD ON FEBRUARY 5, 2014, AS AGENDAED BY JACK BROWN, COUNTY ADMINISTRATOR.
- 7. THE BOARD TO CONSIDER ADOPTION OF A PROCLAMATION RECOGNIZING THE 125<sup>TH</sup> ANNIVERSARY OF FLORIDA PUBLIC HEALTH AND THE 84<sup>TH</sup> ANNIVERSARY OF THE FLORIDA DEPARTMENT OF HEALTH IN TAYLOR COUNTY, AS AGENDAED BY DAWN GUNTER, TAYLOR COUNTY HEALTH DEPARTMENT.

COMMENTS AND CONCERNS FROM THE PUBLIC FOR NON-AGENDAED AND CONSENT AGENDA ITEMS:

CONSENT ITEMS:

- 8. APPROVAL OF MINUTES OF JANUARY 21 AND FEBRUARY 3, 2014 REGULAR MEETINGS AND JANUARY 28, 2014 WORKSHOP. (COPIES PROVIDED BY E-MAIL)
- 9. EXAMINATION AND APPROVAL OF INVOICES.
- 10. THE BOARD TO CONSIDER ADOPTION OF RESOLUTION TO REFLECT UNANTICIPATED MONIES IN THE GENERAL FUND, THE AFFORDABLE FUND AND THE SCRAP ROAD PROJECT FUND, AS SUBMITTED BY COUNTY FINANCE.
- 11. THE BOARD TO CONSIDER RATIFICATION OF THE COUNTY ADMINISTRATOR'S SIGNATURE APPROVING THE FDEP SMALL COUNTY SOLID WASTE MANAGEMENT GRANT AGREEMENT FOR FY 2013-2014, AS AGENDAED BY MELODY COX, GRANTS COORDINATOR.
- 12. THE BOARD TO CONSIDER APPROVAL OF SATISFACTION OF REPAYMENT AGREEMENT FOR GLENDA SMITH, WHO RECEIVED REHABILITATION ASSISTANCE THROUGH THE SHIP PROGRAM ON

JANUARY 15, 2009, AS AGENDAED BY THE GRANTS COORDINATOR.

- 13. THE BOARD TO CONSIDER APPROVAL OF SATISFACTION OF REPAYMENT AGREEMENT FOR DEVARN MCMILLER, WHO RECEIVED REHABILITATION ASSISTANCE THROUGH THE SHIP PROGRAM ON JANUARY 15, 2009, AS AGENDAED BY THE GRANTS COORDINATOR.
- 14. THE BOARD TO REVIEW AND CONSIDER APPROVAL OF FIRST QUARTER AMENDMENTS TO THE FY 2013-2014 COUNTY CORE CONTRACT WITH THE FLORIDA DEPARTMENT OF HEALTH, AS AGENDAED BY DAWN GUNTER, TAYLOR COUNTY HEALTH DEPARTMENT.
- 15. THE BOARD TO CONSIDER RELEASE OF FY 2013-2014 BUDGETED FUNDS FOR THE HUMAN SERVICES GRANT PROGRAM, IN THE AMOUNT OF \$20,384, AS REQUESTED BY UNITED WAY OF THE BIG BEND, AND AGENDAED BY JACK BROWN, COUNTY ADMINISTRATOR.

### PUBLIC REQUESTS:

16. THE BOARD TO RECEIVE A QUARTERLY UPDATE FROM THE TAYLOR COUNTY DEVELOPMENT AUTHORITY (TCDA), AS AGENDAED BY SCOTT FREDERICK.

### COUNTY STAFF ITEMS:

- 17. THE BOARD TO DISCUSS BID RESULTS FOR THE CONSTRUCTION OF AGNER ACRES, AUCILLA LANDING, AND FREEMAN ROADS, UNDER THE SECONDARY ROADS IMPROVEMENT PLAN, AND ROADS WITHIN THE STEINHATCHEE ACRES SUBDIVISION, UNDER THE MSBU IMPROVEMENT PLAN, AS AGENDAED BY KENNETH DUDLEY, COUNTY ENGINEER.
- 18. THE BOARD TO CONSIDER BID COMMITTEE RECOMMENDATION TO AWARD TAYLOR COUNTY CLOSED LANDFILL MOWING & FERTILIZING SERVICES TO PADGETT LAWN CARE, LLC., AS AGENDAED BY THE COUNTY ENGINEER.
- 19. THE BOARD TO CONSIDER APPROVAL OF A GRANT APPLICATION AND ADOPTION OF AUTHORIZING RESOLUTION TO THE FLORIDA DEPARTMENT OF HEALTH (FDOH), EMS SERVICES PROGRAM, DIVISION OF EMERGENCY PREPAREDNESS AND COMMUNITY SUPPORT GRANT PROGRAM, FOR AUTOMATIC EXTERNAL

DEFIBRILLATORS (AEDS) FOR ELEVEN (11) UNEQUIPPED COUNTY FIRE RESCUE VEHICLES, AS AGENDAED BY THE GRANTS COORDINATOR.

- 20. THE BOARD CONSIDER APPROVAL OF BID COMMITTEE RECOMMENDATIONS FOR THE REHABILITATION OF FOUR (4) HOMES, AND THE DEMOLITION/RECONSTRUCTION OF ONE (1) HOME, THROUGH THE SHIP PROGRAM, AS AGENDAED BY THE GRANTS COORDINATOR.
- 21. THE BOARD TO CONTINUE ITS' DISCUSSION OF THE UPCOMING FUNDING CYCLE FOR THE FLORIDA BOATING IMPROVEMENT PROGRAM (FBIP), AS AGENDAED BY THE GRANTS COORDINATOR.
- 22. THE BOARD TO CONSIDER ADOPTION OF A RESOLUTION AND AN ADDITIONAL LETTER COMMITTING \$125,000 IN SHIP FUNDS AS A MATCH FOR THE GRANT APPLICATION TO THE FLORIDA DEPARTMENT OF ECONOMIC DEVELOPMENT SMALL CITIES COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM (CDBG), REQUESTING FUNDING TO BE USED TO REHABILITATE VERY LOW, LOW, AND MODERATE INCOME HOMES OF QUALIFIED APPLICANTS, AS AGENDAED BY THE GRANTS COORDINATOR.
- 22A. THE BOARD CONSIDER REAPPOINTING ALAN HALL AND YANCIE BRANNEN TO THE TAYLOR COUNTY RECREATION ADVISORY BOARD (TCRAB) AND TASK STAFF TO ADVERTISE TO FILL THE REMAINING ONE VACANCY ON THE TCRAB, AS AGENDAED BY THE ASSISTANT COUNTY ADMINISTRATOR.
- 22B. THE BOARD TO CONSIDER PROVIDING A LETTER OF SUPPORT FOR THE BOYS AND GIRLS OF TAYLOR COUNTY SUPPORTING ITS 21ST CENTURY LEARNING CENTER GRANT, AS REQUESTED BY EMILY KETRING, EXECUTIVE DIRECTOR, BOYS AND GIRLS CLUBS OF TAYLOR COUNTY.

COUNTY ADMINISTRATOR ITEMS:

- 23. THE BOARD TO DISCUSS THE STATUS OF HELEN STREET AND PROVIDE GUIDANCE.
- 24. THE COUNTY ADMINISTRATOR TO DISCUSS INFORMATIONAL ITEMS.

ADDITIONAL COMMENTS AND CONCERNS FROM THE PUBLIC FOR NON-AGENDAED ITEMS:

BOARD INFORMATIONAL ITEMS:

### Motion to Adjourn

### FOR YOUR INFORMATION:

• THE AGENDA AND ASSOCIATED DOCUMENTATION, <u>IF APPLICABLE</u>, IS AVAILABLE TO THE PUBLIC ON THE FOLLOWING WEBSITE:

#### www.taylorcountygov.com

- IF YOU ARE A PERSON WITH A DISABILITY WHO NEEDS ANY ACCOMODATION IN ORDER TO PARTICIPATE IN THIS PROCEEDING, YOU ARE ENTITLED, AT NO COST TO YOU, TO THE PROVISION OF CERTAIN ASSISTANCE. PLEASE CONTACT DUSTIN HINKEL, ASSISTANT COUNTY ADMINISTRATOR, 201 E. GREEN STREET, PERRY, FLORIDA, 850-838-3500, EXT. 7, WITHIN TWO (2) WORKING DAYS OF THIS PROCEEDING.
- ANY PERSON WISHING TO ADDRESS THE BOARD REGARDING AN AGENDAED OR NON-AGENDAED ITEM WILL BE GIVEN THREE (3) MINUTES FOR COMMENT.
- BALLOTS USED TO APPOINT CITIZENS TO ADVISORY COMMITTEES AND ADVISORY BOARDS ARE AVAILABLE FOR PUBLIC INSPECTION AFTER THE MEETING AND ARE RETAINED AS PART OF THE PUBLIC RECORD.

TA	YLOR COUNTY BOARD OF COMMISSIONERS			
	County Commission Agenda Item			
SUBJECT/TITLE:	Public Hearing for Iron Horse Mud Ranch Mud Bog Special Event			
MEETING DATE RE	QUESTED: February 18, 2014			
Statement of Issue:	Board to hold public hearing to consider approval of a Mud Bog Special Event application.			
Recommendation:	Hold public hearing			
Fiscal Impact:	Increase in tourism			
Budgeted Expense	: Yes No N/A x			
Submitted By:	Danny Griner			
Contact:	building.director@taylorcountygov.com			
	SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS			
Ranch to hold a Mud place at the Iron Hors Ordinances requires by the County Comm	<b>Sues:</b> The Planning Staff received an application from the Iron Horse Mud Bog Special Event on March 7-9, 2014. The event is scheduled to take se Mud Ranch site located at 8999 S. US 19. Section 10-65 of the Code of that special events with attendance greater than 1,000 must be approved hission at a public hearing. The application reflects that attendance is he public hearing criteria.			

Options:	

- Approve the application. 1.
  - Deny the application. 2.

Attachments:

- Copy of application and associated documents. Copy of legal public hearing notice. 1.
  - 2.

### NOTICE OF PUBLIC HEARING PURSUANT TO SECTION 10-65, TAYLOR COUNTY CODE OF ORDINANCES (ORDINANCE NO. 2001-12)

Notice is hereby given that the Taylor County Board of County Commissioners will hold a public hearing on Tuesday, February 18, 2014 at 6:05 p.m., or as soon thereafter as possible, in the Taylor County Administrative Complex, 201 East Green Street, Perry, Florida 32347, to hear an application for a SPECIAL EVENTS PERMIT (MUD-BOG) to be held on March 7-9, 2014 from 7:00 a.m. to 7:00 p.m. The event will be held at the Iron Horse Mud Ranch site located at 8999 S. US 19, Perry, Florida.

The application is available to the public and may be inspected at the Taylor County Planning Department, located at the Administrative Complex (Old Post Office), 201 E. Green Street, Perry, Florida 32347.

Notice is further given, pursuant to Florida Statutes 286.0105, that any persons deciding to appeal any matter considered at this hearing will need a record of the hearing and may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

BY ORDER OF THE BOARD OF COUNTY COMMISSIONERS, Taylor County, Florida.

## MUD BOG CHECKLIST

### EVENT NAME: IRON HORSE MUD RANCH MUD BOG

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1.	APPLICANTS NAME	x
2.	PHYSICAL LOCATION	x
3.	LEGAL DESCRIPTION	x
4.	WAIVER FROM ADJOINING PROPERTY OWNERS	x
5.	DATE & HOURS OF EVENT	x
6.	MAXIMUM ATTENDANCE	x
7.	SECURITY STATEMENT	x
8.	AMBULANCE STATEMENT (DMH-EMS with hospital CEO signature)	x
9.	MAP OF PROPERTY	x
10.	PROPERTY WITHIN 660 FEET OF EVENT	x
11.	LOCATION OF PARKING	X
12.	LIST OF OWNERS WITHIN 660 FEET	X
13.	OWNER STATEMENT	X
14.	HOLD HARMLESS & ENTRY CONSENT STATEMENT	X
15.	WASTE HAULER STATEMENT	X
16.	INSURANCE STATEMENT	X
	SANITARY FACILITY PROVIDER STATEMENT	X

DATE: 2/10/14

William D. (Danny) Griner

MALCOLM PAGE	MARK WIGGINS	LONNIE HOUCK	PAM FEAGLE	PATRICIA PATTERSON
District 1	District 2	District 3	District 4	District 5



# **TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS**

ANNIE MAE MURPHY, Clerk P. O. Box 620, Perry, FL 32348 (850) 838-3506 Phone (850) 838-3549 Fax

JACK BROWN, County Administrator 201 E. Green Street, Perry, FL 32347 (850) 838-3500, extension 6 Phone (850) 838-3501 Fax

CONRAD C. BISHOP, JR. County Attorney P.O. Box 167, Perry, FL 32348 (850) 584-6113 Phone (850) 584-2433 Fax

APP	LICATION FO	OR SPECIAL EVEN		FEE:	\$250.00
PERMIT TYPE: <u>MUD</u>	BOG		DATE:	1/	27/14
APPLICANT NAME:	We	ells Mud Ranch DBA	Iron Horse Mud R	anch	
MAILING ADDRESS:					
PROPERTY OWNER:					
PROPERTY ADDRESS:					
PHONE#: 850-5			PARCEL #: 08		08743-060
		S WITHIN 660 FEET		////000,	00710 000
PROPE		S WITHIN OOU FEET	OF ACTIVITY		
1. <u>Rt. 207 Prop</u>	<u>perties</u>	2	Andyland,	LLC	
3. <u>Sandra Lau</u>	ra Lee	4	Jack Ferna	ndez	
5. <u>Martin Ell</u>	ison	6.			
7					
		0.			
EVENT DATE(S): 03/7- 03/9	START:	Friday	END:	Sun	day
EVENT DATE(S):	START:		END:		
EVENT DATE(S):	START:		END:		
EVENT DATE(S):	START:				
HOURS OF OPERATION:	START:	7:00a.m.	END:	7:00	p.m.
EXPECTED ATTENDANCE:	1000+	MAXI	MUM ATTENDA		No way to determine
SECURITY PROVIDER: (Attach statement from provider)	SHERIFI	TS OFFICE	PRIVA	TE SECU	RITY X
SANITARY FACILITIES PRO	OVIDER:	Murray	y's Septic 850-672-	0103	

### ATTACH THE FOLLOWING

- 1. Exact location, legal description, area and shape of all lands used for parking or other incidental uses.
- 2. Exact location, legal description, area and shape of the land on which the event will take place.
- 3. Sworn statement from security provided, if other than Taylor County Sheriff's Department.
- 4. Statement as to what medical / ambulance services will be provided. (Agreement with DMH-EMS must contain signature of hospital CEO).
- 5. Copy of, or Statement of intent to issue, \$1,000,000.00 Insurance Policy.
- 6. Copy of Contract for Solid Waste Disposal.
- 7. Copy of Contract for Sanitary Waste Disposal.
- 8. Written consent allowing entry at any time during the event by any County or State Officer in the performance of his or her duties.
- 9. Four copies of a map drawn to scale of at least 1'' = 400', showing:
  - a. Property location;
  - b. Location of highways, roads, lots and lands within 660 feet activity;
  - c. Location of parking area and all incidental uses;
  - d. All interior access ways;
  - e. Access to the property;
  - f. Location of toilet, medical, and drinking facilities.
- 10. Proof of ownership of the property, or an agreement signed by the property owner permitting such use of the property.
- 11. Signed waiver from all property owners within 660 feet of the activity.

SEC TWP RGE SUBD BLK LOT LEGAL: LEG 0040.00 ACRES 03-06-08-08743-000 SE 1/4 OF NW 1/4 NAME:RT 207 PROPERTIES LLC OR 665-912 SUBJ TO & TOGETHER WITH ESMTS IN ADD : OR 233-683 & 665-880 & 665-897 ADD :1932 CARTER AVENUE ADD : . KY 41101 CSZ :ASHLAND 911 : 911 CITY: TD :CO DOR : 5600 ZONE : 015092 LAND \$51,000 : AGR-VAL : \$6,600 EX-FEAT \$ : LAND UNITS COND BUILDING \$ LAND : 40.00 100 5600-ACRE \_\_\_\_\_ 100 \$6,600 9900-ACRE 40.00 TOT-MKT-->:

SEC TWP RGE SUBD BLK LOT	
03-06-08-08743-060	LEGAL: LEG 0030.00 ACRES
	NW 1/4 OF SW 1/4 OF NW 1/4 &
NAME: RT 207 PROPERTIES LLC	S 1/2 OF SW 1/4 OF NW 1/4
ADD :	OR 665-912
ADD :1932 CARTER AVENUE	SUBJ TO & TOGETHER WITH ESMTS IN
ADD :	OR 233-683 & 665-880
CSZ :ASHLAND KY 41101	
911 :	
911 CITY:	
LAND : \$38,250	TD :CO DOR : 5700 ZONE : 015094
AGR-VAL : \$3,390	
EX-FEAT : \$	
BUILDING : \$	LAND LAND UNITS COND
	5700-ACRE 30.00 100
TOT-MKT>: \$3,390	9900-ACRE 30.00 100

\*\* 0-Nxt, 1-Prv, 3-Rekey, 4-Menu, 5-Building Info F1-LOC F2-AUTO F3-RCD F4-FLD F5-FMT F6-DUP F7-OVS F8-COR F9-HELP F10-REL

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SEC TWP RGE SUBD BLK LOT LEGAL: LEG 0040.00 ACRES 03-06-08-08743-100 SE 1/4 OF SW 1/4 OR 665-912 NAME:RT 207 PROPERTIES LLC SUBJ TO & TOGETHER WITH ESMTS IN ADD : OR 233-683 & 665-880 ADD :1932 CARTER AVENUE ADD : CSZ :ASHLAND KY 41101 911 : 911 CITY: TD :CO DOR : 5700 ZONE : 015095 LAND \$51,000 : \$4,520 AGR-VAL : EX-FEAT \$ : LAND UNITS COND \$ LAND BUILDING : 100 5700-ACRE 40.00 \_\_\_\_ \_ -- -- --100 40.00 TOT-MKT-->: \$4,520 9900-ACRE

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SEC TWP RGE SUBD BLK LOT LEGAL: LEG 0040.00 ACRES 03-06-08-08743-150 NW 1/4 OF NW 1/4 NAME:RT 207 PROPERTIES LLC OR 665-912 SUBJ TO & TOGETHER WITH ESMTS IN ADD : OR 233-683 & 665-880 ADD :1932 CARTER AVENUE ADD : KY 41101 CSZ :ASHLAND 911 : 8999 US 19 S 911 CITY: TD :CO DOR : 5002 ZONE : 015096 \$93,500 LAND : : \$9,835 AGR-VAL \$5,115 EX-FEAT EX-FEAT : BUILDING : LAND UNITS COND \$37,056 LAND 100 9910-ACRE 1.00 100 39.00 TOT-MKT-->: \$52,006 5600-ACRE 20.00 100 9900-ACRE 100 9900-ACRE 20.00

\*\* 0-Nxt, 1-Prv, 3-Rekey, 4-Menu, 5-Building Info F1-LOC F2-AUTO F3-RCD F4-FLD F5-FMT F6-DUP F7-OVS F8-COR F9-HELP F10-REL

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SEC TWP RGE SUBD BLK LOT 03-06-08-08743-200	LEGAL: LEG 0040.00 ACRES NE 1/4 OF SW 1/4
NAME:RT 207 PROPERTIES LLC	OR 665-912
ADD :	SUBJ TO & TOGETHER WITH ESMTS IN
ADD :1932 CARTER AVENUE	OR 233-683 & 665-880 & 665-897
ADD :	
CSZ :ASHLAND KY 41101	
911 :	
911 CITY:	
LAND : \$136,000	TD :CO DOR : 5600 ZONE : 015097
AGR-VAL : \$6,600	
EX-FEAT : \$	
BUILDING : \$	LAND LAND UNITS COND 5600-ACRE 40.00 100
TOT-MKT>: \$6,600	9900-ACRE 40.00 100

\*\* 0-Nxt, 1-Prv, 3-Rekey, 4-Menu, 5-Building Info F1-LOC F2-AUTO F3-RCD F4-FLD F5-FMT F6-DUP F7-OVS F8-COR F9-HELP F10-REL

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SEC TWP RGE SUBD BLK LOT	
03-06-08-08743-220	LEGAL: LEG 0080.00 ACRES
	W 1/2 OF SW 1/4
NAME:RT 207 PROPERTIES LLC	OR 665-908
ADD :	SUBJ TO & TOGETHER WITH ESMTS
ADD :1932 CARTER AVENUE	
ADD :	
CSZ ASHLAND KY 41101	
911 :	
911 CITY:	
LAND : \$272,000	TD :CO DOR : 5600 ZONE : 015098
AGR-VAL : \$13,200	
EX-FEAT : \$	
BUILDING : \$	LAND LAND UNITS COND
BOILDING : •	5600-ACRE 80.00 100
TOT-MKT>: \$13,200	9900-ACRE 80.00 100
$101 - M(1 - 2), \qquad 010, 2,00$	

\*\* 0-Nxt, 1-Prv, 3-Rekey, 4-Menu, 5-Building Info F1-LOC F2-AUTO F3-RCD F4-FLD F5-FMT F6-DUP F7-OVS F8-COR F9-HEI

F9-HELP F10-REL

SEC TWP RGE SUBD BLK LOT 03-06-08-08743-250	LEGAL: LEG 0040.00 ACRES NE 1/4 OF NW 1/4
NAME:RT 207 PROPERTIES LLC	OR 665-926
ADD :	SUBJ TO & TOGETHER WITH ESMTS IN
ADD :1932 CARTER AVENUE	OR 234-388 & 665-880 & 665-890 &
ADD :	665-897
CSZ :ASHLAND KY 41101	
911 :	
911 CITY:	
LAND : \$40,000	TD :CO DOR : 5600 ZONE : 015099
AGR-VAL : \$6,600	
EX-FEAT : \$	
BUILDING : \$	LAND LAND UNITS COND
	5600-ACRE 40.00 100
TOT-MKT>: \$6,600	9900-ACRE 40.00 100

SEC TWP RGE SUBD BLK LOT 04-06-08-08744-050	LEGAL: LEG 0040.00 ACRES SE 1/4 OF NE 1/4
NAME:RT 207 PROPERTIES LLC ADD :	OR 665-912 SUBJ TO & TOGETHER WITH ESMTS IN
ADD :1932 CARTER AVENUE	OR 233-683 & 665-880
ADD :	
CSZ :ASHLAND KY 41101	
911 :	
911 CITY:	
LAND : \$136,000	TD :CO DOR : 5600 ZONE : 015102
AGR-VAL : \$6,600	
EX-FEAT : \$	
BUILDING : \$	LAND LAND UNITS COND
	5600-ACRE 40.00 100
TOT-MKT>: \$6,600	9900-ACRE 40.00 100

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SEC TWP RGE SUBD BLK LOT LEGAL: LEG 0120.00 ACRES 04-06-08-08744-200 N 1/2 OF SE 1/4 & SW 1/4 OF SE 1/4 NAME:RT 207 PROPERTIES LLC OR 665-908 SUBJ TO & TOGETHER WITH ESMTS ADD : ADD :1932 CARTER AVENUE ADD : CSZ :ASHLAND KY 41101 911 : 911 CITY: TD :CO DOR : 5600 ZONE : 015105 LAND \$408,000 : AGR-VAL : \$19,800 EX-FEAT \$ : LAND BUILDING : LAND UNITS COND \$ 120.00 100 \_\_\_\_\_ 5600-ACRE 120.00 100 9900-ACRE TOT-MKT-->: \$19,800

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SEC TWP RGE SUBD BLK LOT LEGAL: LEG 0040.00 ACRES 04-06-08-08744-350 NE 1/4 OF NE 1/4 OR 665-912 NAME:RT 207 PROPERTIES LLC SUBJ TO & TOGETHER WITH ESMTS IN OR 233-683 & 665-880 ADD : ADD :1932 CARTER AVENUE ADD : CSZ :ASHLAND KY 41101 911 : 911 CITY: TD :CO DOR : 5700 ZONE : 015108 : LAND \$51,000 EX-FEAT \$6,600 \$ LAND COND BUILDING : \$ LAND UNITS 40.00 100 5600-ACRE \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ 100 40.00 9900-ACRE TOT-MKT-->: \$6,600

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SPE	CIAL EVENT WAIVER
DATE: 8/8/1/	
I give my consent to have Special Events	(Mudd Bogg) within 660 feet of my property during the three , 20 // through $S$ $14$ , 20
year time period from	, 20 <u>//</u> unougn <u></u> , 20 <u></u> , 20 <u></u> , 20 <u></u> .
Print Name	Signature
*******	***************************************
SPE	CIAL EVENT WAIVER
DATE:	
I give my consent to have Special Events year time period from	(Mudd Bogg) within 660 feet of my property during the three, 20, 20, 20
Print Name	Signature
*****	******
SPE	CIAL EVENT WAIVER
	CIAL EVENT WAIVER
DATE:	
DATE: I give my consent to have Special Events	CIAL EVENT WAIVER (Mudd Bogg) within 660 feet of my property during the three , 20 through, 20
DATE: I give my consent to have Special Events year time period from	(Mudd Bogg) within 660 feet of my property during the three , 20 through, 20
DATE: I give my consent to have Special Events year time period from Print Name	(Mudd Bogg) within 660 feet of my property during the three , 20 through, 20, 20 Signature
DATE: I give my consent to have Special Events year time period from Print Name	(Mudd Bogg) within 660 feet of my property during the three , 20 through, 20
DATE: I give my consent to have Special Events year time period from Print Name ************************************	(Mudd Bogg) within 660 feet of my property during the three , 20 through, 20, 20 Signature
DATE: I give my consent to have Special Events year time period from Print Name ************************************	(Mudd Bogg) within 660 feet of my property during the three, 20, 20, 20
DATE: I give my consent to have Special Events year time period from Print Name ************************************	(Mudd Bogg) within 660 feet of my property during the three, 20, 20, 20

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	SPECIAL EVEN	NT WAIVER	
DATE:	_		
I give my consent to have Special year time period from $3-4-$	al Events (Mudd Bog - //, 2	g) within 660 feet o 0 <u>11</u> through <b>12</b>	of my property during the three - 3 <u>1-14</u> , 20 <u>14</u>
Jack Ena	To	JACK	Feendaw DE 2 Signature
Print Name	<u> </u>		Signature
			******
	SPECIAL EVEN	IT WAIVER	
DATE:	_		
I give my consent to have Specia year time period from	l Events (Mudd Bog	g) within 660 feet o	of my property during the three , 20,
Print Name			Signature
*****	*****	*****	*****
	SPECIAL EVEN	IT WAIVER	
DATE:	_		
I give my consent to have Specia year time period from			
Print Name		<b></b>	Signature
		****	-
Print Name ************************************	SPECIAL EVEN		-
*****	SPECIAL EVEN		-
	SPECIAL EVEN  1 Events (Mudd Bogg	IT WAIVER g) within 660 feet o	**************************************

Print Name

,

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Signature

SPECIA	L EVENT WAIVER
DATE:	
I give my consent to have a Special E	vent (Mudd Bogg) within 660 feet of my property.
Rt 207 PRUPERTIES Print Name	She Well
Print Name	Signature
*******	******
SPECIA	L EVENT WAIVER
DATE:	
I give my consent to have a Special E	vent (Mudd Bogg) within 660 feet of my property.
SANDRA LAURA LEE	S. Lan Le
D: ()]	Signature
SPECIA	**************************************
SPECIA DATE:	**************************************
DATE:	L EVENT WAIVER vent (Mudd Bogg) within 660 feet of my property.
DATE:	<u> </u>
DATE:	vent (Mudd Bogg) within 660 feet of my property.
DATE: I give my consent to have a Special By	vent (Mudd Bogg) within 660 feet of my property.
DATE:I give my consent to have a Special By Print Name *****	vent (Mudd Bogg) within 660 feet of my property.
DATE:I give my consent to have a Special By Print Name *****	vent (Mudd Bogg) within 660 feet of my property. Signature
DATE:I give my consent to have a Special Ev Print Name ************************************	vent (Mudd Bogg) within 660 feet of my property. Signature

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ATTERFION GARY Wells \*\*\*\*\*\*\*\* SPECIAL EVENT WAIVER Event must bea minimu of 450 feet. (Four hundred fifty feet) away from my property. ve my consent to have a Special Event (Mudd Bogg) with 660 feet of inv pp OTSAFTIS \*\*\*\*\*\*\*\*\*\* SPECIAL EVENT WAIVER DATE: I give my consent to have a Special Event (Mudd Bogg) within 660 feet of my property. Print Name Signature \*\*\*\*\*\* \*\*\*\*\* SPECIAL EVENT WAIVER DATE: I give my consent to have a Special Event (Mudd Bogg) within 660 feet of my property. Print Name Signature \*\*\*\*\*\*\*\*\*\* SPECIAL EVENT WAIVER DATE: I give my consent to have a Special Event (Mudd Bogg) within 660 feet of my property. Signature Print Name 606 9280093

### 3-28 2011

Re: Wells Mud Ranch LLC; D.B.A. Iron horse Mud Ranch

Letter of consent for county or state officer

This letter is to provide written consent that Iron Horse mud Ranch will allow entrance to any county or state officer to the Iron horse mud ranch to perform his or her Duties.

Iron horse mud Ranch Shannon Wells AS MMOF DROOPT 207 prof

llug



L.E. "BUMMY" WILLIAMS - TAYLOR COUNTY

108 N. Jefferson St, Suite 103 • Perry, Florida 32347 850-584-4225 • 1-800-800-4740 Dispatch 1-800-669-7123

January 27, 2014

To Whom It May Concern:

The Taylor County Sheriff's Office will provide security on March 07, 08 and 09, 2014 as requested by Trey Howard for the Iron Horse Mud Ranch Mud Bog.

Thank you,

Capt. Richard Johnson Taylor County Sheriff's Office



**EMERGENCY MEDICAL SERVICES** 

Date: 01/31/2014

Re: Iron Horse Mud Ranch Mud Bogs

Mr. Wells,

This letter is to verify that Doctors' Memorial Hospital Emergency Medical Services will provide Advanced Life Support ambulance coverage to Iron Horse Mud Ranch Mud Bogs on the dates of March 7<sup>th</sup>, 8<sup>th</sup> and 9<sup>th</sup>, 2014. We will also provide coverage for the event being held October 24<sup>th</sup>, 25<sup>th</sup> and 26<sup>th</sup>, 2014. This coverage will include a dedicated unit for the duration of each event.

Please feel free to call me at (850)584-2227 if you have any questions.

Sincerely Marty Tompkins

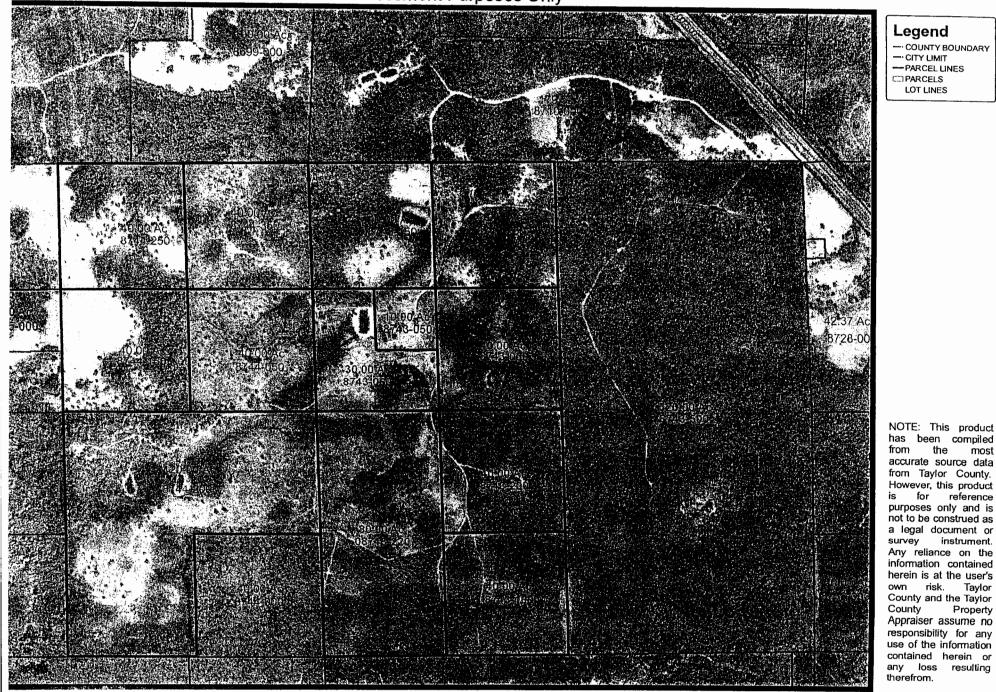
EMS Director

**Doctors Memorial Hospital** 



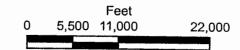
## Bruce A. Ratliff Taylor County Property Appraiser For Assessment Purposes Only





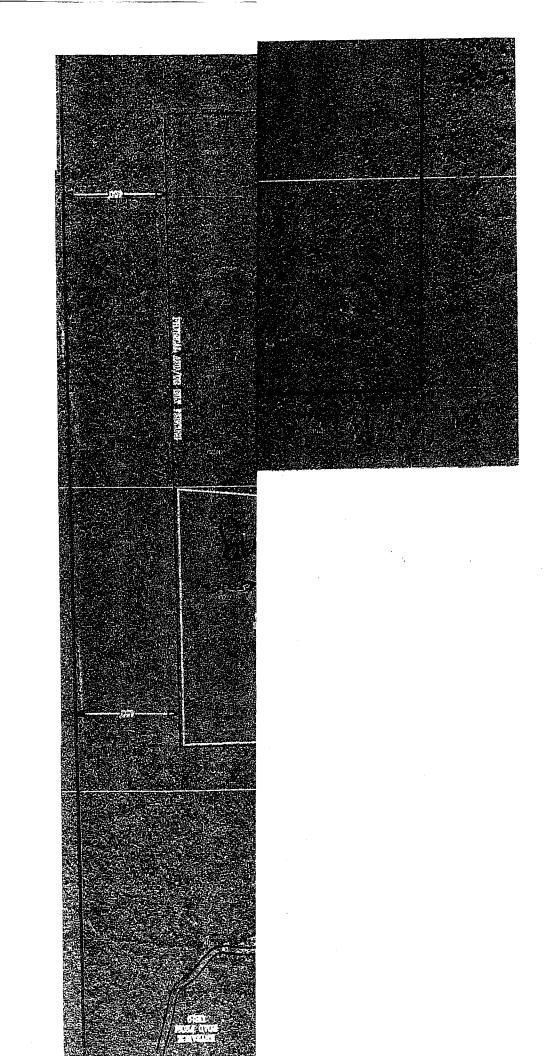


## Bruce A. Ratliff **Taylor County Property Appraiser** For Assessment Purposes Only



1. -----1 : + 7 Legend 25 + 9¦0- ' --- COUNTY BOUNDARY 1 29--28-1 -ao-+28-1-27--29-127 26 26-- 25 -28+ 726 27 -30-- 27 25-- CITY LIMIT 1.1 -1-1 ----· +· \_\_\_\_\_ 记录 1-1 • + []]PARCELS PLSS LINES 1 ..... \_\_\_\_\_ E \_ 1 . 1 31 -34 -1.32 38 -i-3‡-i 1-33 + TYPE 1-56 36 --134-<del>3</del>5-51 -1 35 31 -132 34 33 - FORTY - QUARTER \_\_\_\_ 1. L -SECTION . i., 1. . . . . . . . . - 04 05 03. TWNRNG 007 -104 +02 -05 06 -- 1- 0h - i--1-08-1--03-- 02 -01 - - - -11 · • • • Γì gjj. 1 \_1\_ <u>\_</u>\_\_\_ -1-09-1 110 - 11 -12 1-08--- og-1-08-1 -07 <u>+</u> 1þ 42 -07-10 1 ΓT 7 SHEEP. +-18 -1-17 18 13 Đ --- + --23 20-- -1'9 24 20 1 TTT . t. -1-29. 25 30 -25 -29 -27 - 26 4 30 -1ī 1185 - 1- ---32 ÷2. -39. -34--35-1 -36-1 34--31 39 33 +---+ . 1 1 \_ 05 1 -04 -03 68-03 ·011-03 --04 đĨ 01 - 06 1.02 七日 - )--4-57 L. i. 2 ÷. . . -1-₽-67 -10--09 09 Ð ස්ප 718 10 11 12-07 -03 -1 1 TT from . HTH de . 1-12 42 -48 - 17-. . . . . 111 23- !--24 10 19 -1-17 1. 27i 30-<del>2</del>9-128-2<del>5</del> 27 25 1-26 - 29 -27. ... 26-1 25 -30----25 ÷ · T FALL tr t 1 1.1 4. 1. 34-31 - 32 -36--34-36--38 1 35 -3¦6 ±β5 131 -9<u>1</u>4----36 1 32 - 1-177 61 -+ 04--+03-+ -06 85-<del>65</del> dэ + 02 -99 + 02 0'n -03 -:06 fl/S 1-1-1 1.7 · |---1- -1 - 1~ **T** therefrom. . . . . 

NOTE: This product has been compiled the most accurate source data from Taylor County. However, this product is for reference purposes only and is not to be construed as a legal document or survey instrument. Any reliance on the information contained herein is at the user's own risk. Taylor County and the Taylor County Property Appraiser assume no responsibility for any use of the information contained herein or any loss resulting



NAME	ADDRESS	CITY
SANDRA LAURA TYLER	8849 S US 19	PERRY , FL 32348
JOHN ZIELENBACH	15802 AMBERLY DR	TAMPA , FL 33647
RT 207 PROPERTIES LLC	1932 CARTER AVENUE	ASHLAND , KY 41101
JACK J & LINDA L FERNANDEZ	12208 FOUR OAKS RD	TAMPA , FL 33624
ANDYLAND LLC	13001 BOCA CIEGA AVE	MEDIERA BEACH , FL 33708
MARTIN ELLISON	7230 PRETTY POND LN	PERRY , FL 32348

### ADJOINING PROPERTY PROTECTION AGREEMENT

I, Shannon Wells, as managing member of Rt. 207 Properties, owner of the property described as follows:

Address:	8999 US Hwy. 19 South, Perry, FL 32348								
Section:	3	Township:	6S	Range:	8E	Parcel#:	8744-350, 8744- 200, 8744-050, 8743-200	-	

I agree to reimburse all owners and occupants of property adjoining the subject premises for all damages of any kind to such owners or occupants or to their property caused by the applicant/owner of the subject premises, or by any person attending the event with knowledge of the applicant, which damage would not have occurred had the event on the 25-27th day of October, 2013, not been held.

The owner of the property and the applicant for the event must sign this agreement, and by signing same I warrant ownership of said property.

DATED this 13+14 day of FEB	, 20/14
De	the
WITNESS	OWNERS NAME
WITNESS	APPLICANT'S NAME

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgement, personally appeared <u>Strewer</u>, to me known the person described in and who executed the foregoing instrument and acknowledge before me that he/she executed the same.

WITNESS my hand and official seal in the County of and State last aforesaid this 20/7.



NOTARY PUBLIC My Commission Expires:

### RELEASE AND HOLD HARMLESS AGREEMENT

I, Shannon Wells, as managing member of Rt. 207 Properties, owner of the property described as follows:

Address:	8999 US Hwy. 19 South, Perry, FL 32348									
Section:	3	Township:	6S	Range:	8E	Parcel#:	8744-350, 8744- 200, 8744-050, 8743-200	-		

Agree to hold harmless and indemnify Taylor County and the Sheriff, as well as the Board of County Commissioners, all County employees, agents, appointees, and designees from any and all manner action or actions, cause and causes of action, suits, damages, judgments, and claims of any kind whatsoever, which may result from or be in any way connected or related to the event on the 25-27th day of October, 2013.

This right of ingress and hold harmless must be signed by the owner(s) of the property and by signing same I warrant ownership of said property.

DATED this 10+H day of John F	EB
$\langle \rho \rangle / \langle \rho \rangle$	
K/n Chit	Alme
WITNESS	OWNERS NAME
the est	
WITNESS	OWNERS NAME

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgement, personally appeared <u>SHANDAUKCS</u>, to me known the person described in and who executed the foregoing instrument and acknowledge before me that he/she executed the same.

	WITNESS my	hand and officia	l seal in the C	County of and Stat	e last aforesaid this	<u> </u>
day of	FEB		.20/4.	•		•

O M HOWARD III Notary Public - State of Florida My Comm. Expires Oct 9, 2015 Commission # EE 106694 Bonded Through National Notary Assn.

NOTARY PUBLIC

NOTARY PUBLIC My Commission Expires:

## PLACE BUSINESS CARD HERE

•



# Service Agreement

_	Ino	nA	orsel	Judr	land	FL			5 3011	0262	90
	ce Address: 8990	2/151	+	95	•••			Service /		Salesperson:	
City/S		1051	Jund I	45		Zip	Code:	Contact	ylor:	l	<del>.</del>
	'de	ny	FL			· 3	2348	R	usty		
Email:	;			Te	elephone: 8139	11.5 0	011	Fax		Mobile:	
					815 9	75 1	814				
		NFORMAT	ION								
Billing	Name:			·				P.O.# fled	uired? Y / N		
Billing	Address:	$\Lambda$ $\Lambda$			_	· · ·		Billing Cy	cle:	Customer Depo	sit:
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City/St		ush	N	Y i		Zip C	Code:	Contact	lame:		
imail:		wn	5	Te	lephone:	14	1168	Faxc		Mobile:	
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с. <u>е</u>	QUIPME	NT / SERV	ICE SPE	CIFICATIO	DNS						
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EUND	ERSIGNED	INDIVIDUAL	SIGNING T	HIS AGREEM	ENT ON BEH	ALF OF TH	E CUSTOMER	ACKNOWL	DGES THAT HE/SHE H	AS READ AND L	INDERSTA
									AUTHORITY TO SIGN C		
							42	AL)	annronl	9/12/	201
tome	r Signature	}		Date			Waste Pr	o Represent	ative	Date	<u>e ~ /</u>

WASTE PRO TEMPORARY ROLL OFF SERVICE AGREEMENT P.O. Box 380 Midway, FL 32343 www.wasteprousa.com							
Company laste Pro 110	Service Area	Taylor	Terms	30 days			
Salesperson <u>Franchisod</u>	Effective Date	9/14/2011	P.O. #	·			
Class X all By	Bill Cycle		Acct #	026298			
	CUSTOMER INFORI	MATION					
Site Name Thon Horse Che	id Ranch	Billing Name					
Contact Questy		Contact					
email		email					
Address 8 999 45 Au	4195	Address PC	Box	(203			
Address 2	·	Address 2					
City. Zip Clency FL 30	2348	_City, Zip Rux	th.	KY 4	168		
Phone # 8/3 943 781	1	Phone #					
Fax #		Fax #					
Mobile #		Mobile #					

Quantity	Delivery Charge	C.O.D./Charge
Size 20	Haul Charge \$ 30,00	Maintenance Charge
Material 5W	Disposal Charge 58, 95/70/	Deodonzing Charge
Est. # Loads	Flat haul Charge	Fuel Surcharge
Length of Job	Trip Charge	Inactivity Fee \$100 PER 30 DAYS NON US
Closest intersection or landmark:	······	
Other Instructions:		

THE UNDERSIGNED INDIVIDUAL SIGNING THIS AGREEMENT ON BEHALF OF THE CUSTOMER ACKNOWLEDGES THAT HE/SHE HAS READ AND UNDERSTANDS THE TERMS AND CONDITIONS OF THIS AGREEMENT , ON THE REVERSE SIDE, AND THAT HE/SHE HAS THE AUTHORITY TO SIGN ON BEHALF OF THE CUSTOMER

Est Vagoner 9/12/2013

Authorized Signature

Date

Representative Signature

Name ( Print or Type)

Contractor Approval

							IRONH-		OP ID: DH
A	C	CERTI		ATE OF LIAE	BILITY IN	SURA	NCE		(MM/DD/YYYY) 0/14/13
		CERTIFICATE IS ISSUED AS A M							
		TIFICATE DOES NOT AFFIRMATIV							
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t	he te	erms and conditions of the policy, o icate holder in lieu of such endorse	ertain	policies may require an e					
	DUC		noniqu	Phone: 502-415-7000	CONTACT NAME:				
		Stotz Company liant Avenue		Fax: 502-415-7001			FAX (A/C, No)		
Lou	isvi	lle, KY 40299			E-MAIL ADDRESS:		(A/C, NO)		
Chr	is v	on Allmen					DING COVERAGE		NAIC #
					INSURER A : The BU				23620
INSU	JRED	Iron Horse Mud Ranch, LL	>		INSURER B : James				
1		PO Box 203			INSURER C :				
		Rush, KY 41168			INSURER D :				
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							GENERAL AGGREGATE	\$	2,000,000
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	DES	s, describe under SCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	\$	
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CE	RTIF	ICATE HOLDER			CANCELLATION				
							ESCRIBED POLICIES BE C		ED BEFORE
		Iron Horse Mud Ranch			THE EXPIRATION	DATE THE	EREOF, NOTICE WILL		
		8999 US Hwy 19 S			ACCORDANCE W	TH THE POLIC	Y PROVISIONS.		
		Perry, FL 32348				NTATRE			
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					© 1988	-2010 ACOR	D CORPORATION. AI	i rights	reserved.

The ACORD name and logo are registered marks of ACORD

"THIS INSURANCE IS ISSUED PURSUANT TO THE FLORIDA SURPLUS LINES LAW. PERSONS INSURED BY SURPLUS LINES CARRIERS DO NOT HAVE THE PROTECTION OF THE FLORIDA INSURANCE GUARANTY ACT TO THE EXTENT OF ANY RIGHT OF RECOVERY FOR THE OBLIGATION OF AN INSOLVENT UNLICENSED INSURER."

# SURPLUS LINES INSURERS' POLICY RATES AND FORMS ARE NOT APPROVED BY ANY FLORIDA REGULATORY AGENCY.

# **BINDER – PAGE 1A**

James River Insurance		DANIEL P MCDONNELL		
CompanySURPLUS LINES AGENT'S NAME		PARTNERS SPECIALTY GROUP LLC		
SURPLUS LINES AGENT'S ADDRESS		100 Tournament Drive, Suite 214 Horsham, PA 19044		
SURPLUS LINES AGENT	'S LICENSE	D051948		
PRODUCING AGENT'S N	AME	William A Ka	ntlehner III A136692	
PRODUCING AGENT'S ADDRESS		Garrett-Stotz Company 1601 Alliant Avenue Louisville, KY 40299-6338		
NAME OF RISK		Iron Horse Mud Ranch		
INSURER		James River Insurance Company		
LLOYDS UNIQUE MARK	ET #:			
POLICY NUMBER	EFFECTIVE	DATE	EXPIRATION DATE	
00059523-0	10/1/13		10/1/14	
TOTAL PREMIUM	TAX		SERVICE FEE	
15,869.00	795.20	31.81		
CITIZEN'S EMERGENCY		EMPA SURCHARGE		
CATASTROPHE ASSESSMENT		OTHER FEES		
206.75		Pol Fee 35.00		

SURPLUS LINES AGENT'S COUNTERSIGNATURE

Jean Mr. Mc Somell DXS

DANIEL P'MCDONNELL

8Th Revision - Revised 10/05

F.W. MURRAY'S SEPTIC P.O. BOX 1328 PERRY, FLORIDA 32348 850-672-0103 January 28, 2014

#### TO WHOM IT MAY CONCERN:

We propose to provide any and all sanitation needs for Iron Horse Mud Ranch, located on South Highway 19 during the following events March 7, 8 & 9, 2014. This will include any and all portable toilets and service that is required.

If you have any questions, feel free to contact me directly.

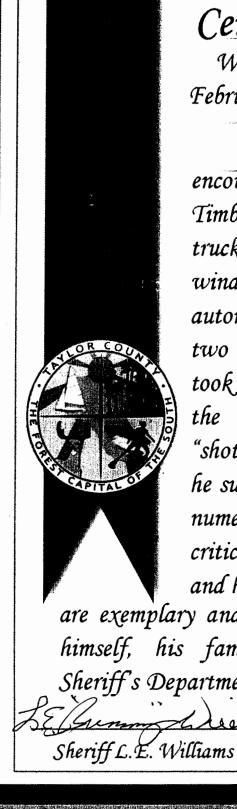
Sincerely, F.W. Murray Owner

TAY	LOR COUNTY BOARD OF COMMISSIONERS
	County Commission Agenda Item
SUBJECT/TITLE:	THE BOARD TO AWARD A CERTIFICATE OF VALOR TO SHERIFF'S DEPUTY ROBERT LUNDY FOR HIS COURAGEOUS ACTIONS IN SUBDUING AN ACTIVE SHOOTER AT TIMBERLAND FORD ON FEBRUARY 5, 2014, AS AGENDAED BY JACK BROWN, COUNTY ADMINISTRATOR.
MEETING DATE RE	QUESTED: FEBRUARY 18, 2014
	THE BOARD TO AWARD A CERTIFICATE OF VALOR ion: AWARD
Statement of Issue: Recommended Act Fiscal Impact:	
Recommended Act	ion: AWARD N/A
Recommended Act Fiscal Impact:	ion: AWARD N/A
Recommended Act Fiscal Impact: Budgeted Expense	ion: AWARD N/A : N/A

History, Facts & Issues: ON THE MORNING OF WEDNESDAY, FEBRUARY 5, DEPUTY LUNDY ENCOUNTERED AN ACTIVE SHOOTER WHILE AT TIMBERLAND FORD. THE SHOOTER HAD WOUNDED TWO EMPLOYEES BEFORE DEPUTY LUNDY COULD SUBDUE HIM. DEPUTY LUNDY WAS CRITICALLY WOUNDED DURING HIS RESPONSE TO THE SHOOTER.

**Options:** 

Attachments: CERTIFICATE OF VALOR



Certificate of Valor

Whereas, on the morning of February 5, 2014, Sheriff Deputy

# **Robert Lundy**

encountered an employee of Timberland Ford, who drove his truck through the showroom window and began firing a semiautomatic shotgun wounding two employees. Deputy Lundy took immediate action engaging the shooter while reporting "shots fired." Within 60 seconds he subdued the suspect saving numerous lives while being critically wounded. His unselfish and heroic action

are exemplary and reflect great credit upon himself, his family, the Taylor County Sheriff's Department, and Taylor County.

Chair Malcolm V. Page

		Ð
	TAYLOR COU	INTY BOARD OF COMMISSIONERS
		nty Commission Agenda Item
SUBJECT/TITI		ez, Interim Administrator of the Florida Department of Health inty, to request a proclamation for February 20, 2014 in
Meeting Date:	2/3/14	
Statement of Is	Anniversary	ne 125 <sup>th</sup> Anniversary of Florida Public Health and the 84 <sup>th</sup> y of Florida Department of Health in Taylor County
Recommendat	ion: Issuance o	of Proclamation
Fiscal Impact:	\$_0	Budgeted Expense: Yes No X N/A
Submitted By:	Dawn Gun	ter, Business Manager for Padraic Juarez, Administrator
Contact:	Dawn Gun	ter 584-5087, press #, ext. 131 or Padraic Juarez, ext. 142
History, Facts		INTAL MATERIAL / ISSUE ANALYSIS
Options: Attachments:	2 Draft proclamati	on

### PROCLAMATION

WHEREAS, the yellow fever epidemic that occurred in Florida during 1887-1888 brought to light the need for control of this and other diseases in Florida to prevent future epidemics; and

WHEREAS, in response to this need, the Florida Legislature created the State Board of Health on February 20, 1889; and

WHEREAS, the State Board of Health, now named the Florida Department of Health, has a presence in all Florida counties to protect, promote, and improve the health of all people in Florida; and

WHEREAS, the Taylor County Board of County Commissioners in 1930 voted to request that the State Board of Health send staff to create a County Public Health Unit, now named Florida Department of Health in Taylor County. Thereby creating the first branch of the statewide program; and

WHEREAS, the efforts of the Florida Department of Health have helped create healthier living environments and a better quality of life for the residents and visitors in Taylor County; and

WHERAS, the dedicated public health professionals who work for the Florida Department of Health in Taylor County continue to serve the needs of our community by providing health services, monitoring and responding to emerging health threats, and promoting healthy choices for all who live, work, and play in Taylor County;

NOW, THEREFORE, we, the Board of County Commissioners of Taylor County do hereby recognize the 125<sup>th</sup> Anniversary of Florida Public Health and the 84<sup>th</sup> Anniversary of Florida Department of Health in Taylor County, and ask that all residents join us in extending our sincere gratitude to the staff, past and present, of the Florida Department of Health in Taylor County for their commitment to the people of our communities during these one hundred and twenty-five years. be it proclaimed by the Board of County Commissioners of Taylor County, Florida, that February 20, 2014 be designated as

THE 125TH ANNIVERSARY OF FLORIDA PUBLIC HEALTH.

DONE AND ORDERED THIS 18th Day of February, 2014.

BOARD OF COUNTY COMMISSIONERS TAYLOR COUNTY, FLORIDA

MALCOLM PAGE, CHAIRMAN

ATTEST:

ANNIE MAE MURPHY, CLERK

IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the GENERAL FUND for the fiscal period ending September 30, 2014, to be in excess of the advertised budget.

BE IT RESOLVED that the listed receipts and appropriations be added to, included in and transferred to the GENERAL FUND budget for the fiscal year ending September 30, 2014.

Amount Account Account Name Revenue: \$10,900 001-3312013 Homeland Security Grant

Expenditures: 0248-53401 \$10,900 Contractual Services

NOW THEREFORE BE IT RESOLVED by the Board of County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18th day of February, 2014 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner seconded by Commissioner , and carried unanimously.



Annie Mae Murphy, Clerk-Auditor Chairman

(New Homeland Security Grant FY 2014 )

### Tammy Taylor

From: Sent: Tammy Taylor Stephen Spradley Subject: Attachments: SKMBT\_36314021014180.pdf

Dustin Hinkel <dustin.hinkel@taylorcountygov.com> Monday, February 10, 2014 1:49 PM FW: FY2013, SHSGP, Agreement #14-DS-L5-03-72-01-309

Hi Tammy!

To:

Cc:

Attached is a new DHS Exercise contract that has been fully executed. We will need a new cost center for this grant with averagent averagent all \$10,900 budgeted in 53401.

53401 \$10,900

Thanks!

### **Dustin Hinkel, FAEM**

Assistant County Administrator **Emergency Management Director Taylor County Board of County Commissioners** 

Click here to sign up for instant severe weather alerts and updates via email and text message!

201 E Green Street Perry, FL 32347 850-838-3500 ext 7 Office 850-838-3501 Fax 850-672-0830 Cell

dustin.hinkel@taylorcountygov.com http://www.taylorcountygov.com

Please note: Florida has a very broad public records law. Most written communications to or from public officials regarding public business are available to the media and public upon request. Your e-mail communications may be subject to public disclosure.

From: Joseph, Alonzo [mailto:Alonzo.Joseph@em.myflorida.com] Sent: Monday, February 10, 2014 12:38 PM To: Dustin Hinkel Cc: Beagle, Laura Subject: FY2013, SHSGP, Agreement #14-DS-L5-03-72-01-309

Good Afternoon,

On Ms. Carolyn Coleman behalf: Please see attach a copy of your fully executed agreement between Taylor County Emergency Management and the Florida Division of Emergency Management. In addition to the fully executed agreement, I have attached the necessary reporting forms. You should be receiving your original copy of the agreement sometime this week, it was mailed off last Friday.

#### EXHIBIT - 1

THE FOLLOWING FEDERAL RESOURCES ARE AWARDED TO THE RECIPIENT UNDER THIS AGREEMENT:

NOTE: If the resources awarded to the Recipient are from more than one Federal program, provide the same information shown below for each Federal program and show total Federal resources awarded.

Federal Program

Federal agency: U.S. Department of Homeland Security/Federal Emergency Management Agency

Catalog of Federal Domestic Assistance title and number: 97.067

Award amount: \$10,900.00

THE FOLLOWING COMPLIANCE REQUIREMENTS APPLY TO THE FEDERAL RESOURCES AWARDED UNDER THIS AGREEMENT:

44 CFR, (Code of Federal Regulations) Part 13 (Common Rule) OMB Circular A-21, A-102, A-110, A-122, A-128, A-87 and A-133

NOTE: If the resources awarded to the Recipient represent more than one Federal program, list applicable compliance requirements for each Federal program in the same manner as shown below.

Federal Program:

List applicable compliance requirements as follows:

- 1. Recipient is to use funding to perform the following eligible activities as identified in the United States Department of Homeland Security, Federal Emergency Management Agency, National Preparedness Directorate Fiscal Year 2013 Homeland Security Grant Program (HSGP), consistent with the Department of Homeland Security State Strategy.
- Recipient is subject to all administrative and financial requirements as set forth in this Agreement, or will be in violation of the terms of the Agreement.

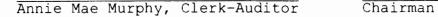
NOTE: Section .400(d) of OMB Circular A-133, as revised, and Section 215.97(5)(a), Florida Statutes, require that the information about Federal Programs and State Projects included in Exhibit 1 be provided to the Recipient.

IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the GENERAL FUND for the fiscal period ending September 30, 2014, to be in excess of the advertised budget.

**BE IT RESOLVED** that the listed receipts and appropriations be added to, included in and transferred to the GENERAL FUND budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$1,407	001-3899010	General Fund-Cash Brought Forward
\$1,407	0281-51200	State Mosquito Control- Salaries & Wages

NOW THEREFORE BE IT RESOLVED by the Board of County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18th day of February, 2014 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_ seconded by Commissioner \_\_\_\_\_, and carried unanimously.



(Represents "State Mosquito Control" FYE'13 funds in excess of 2014 budget)

Tammy Taylor	
From:	Gary Wambolt <gary.wambolt@taylorcountygov.com></gary.wambolt@taylorcountygov.com>
Sent:	Friday, December 20, 2013 11:15 AM
To:	Tammy Taylor
Subject:	RE: State Mosq Control Balance 2013to Amend 2014 budget
Tammy: We are not s	sure the amount is right, we will address this later, for now please put it in 51200. Thanks Gary
From: Tammy Taylor	[mailto:ttaylor@taylorclerk.com]
Sent: Wednesday, No	ovember 20, 2013 4:54 PM
To: Gary Wambolt	
Cc: Dustin Hinkel; Jac	:k Brown

Hey Gary-

Subject: State Mosq Control Balance 2013--to Amend 2014 budget

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Attached is my FYE analysis of State Mosquito Control Funds, and the 2014 Budget. As you can see, the actual cash balance at FYE 2013 (\$2,582) exceeds the budgeted cash balance (\$1,175) by \$1,407. Therefore, the 2014 Department #0281 will require an amendment. Please make certain that you agree, and please respond and let me know which account(s) to place the funds. Thanks!! Jerov Tammy toCO

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FR 1407 R 1407 add to # 0281-51200,

Tammy Taylor County Finance Director P.O. Box 620 Perry, FL 32348 (850) 838-3506, ext.122 (850) 838-3540 (fax) ttaylor@taylorclerk.com

# DETAIL BUDGET REQUEST 2013/2014 FISCAL YEAR

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DEPARTMENT: MOSQUITO CONTROL (STATE) DEPARTMENT #: 0281 PREPARED BY: DU Wand 4-19-2013 (department head signature & date)				
Expenditure <u>Acccount #</u>	Account Description	Ar	nount	
51200	<b>REGULAR SALARIES &amp; WAGES</b>	\$ 2	20,090	
51400	<b>OVERTIME</b> Use of full-time employees from other divisions	\$	108	
52110	FICA/MECIDARE	\$	1,545	
52200	<b>RETIREMENT CONTRIBUTIONS</b>	\$	1,284	
52300	HEALTH INSURANCE	\$	4,646	
52320	LIFE INSURANCE	\$	30	
52400	WORKERS COMPENSATION INSURANCE	\$	1,753	
54000	TRAVEL & PER DIEM	\$	<b>58</b> 7	
54907	LICENSE/PERMIT/REGISTRAT	\$	588	

<u>\$ 30,631</u> F TOTAL BUDGET 10-13 Carry-forward (projected) (designature LF) 2014 State Funding (001-3356300) X 1.175 \$ \$ 29,456 417 3 1 6/19/13

## STATE MOSQUITO CONTROL FUNDS (#0281)

**BEGINNING BALANCE 10/1/12** 

FY 2012/13 RECEIPTS

\$12,135.33

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\$18,500.00 001-3356300

FY 2012/13 EXPENDITURES

ENDING BALANCE 9/30/2013

<u>(\$28,053.27)</u> #0281

(actual Casus Balance 9/30/13 **\$2,582.06** (\*)

(\*) This amount is reserved on the balance sheet (001-2470021). Remaining funds are carried forward to the following years' budget.

Prepared By: Tammy Taylor County Finance Director (11/20/13)

2012/2013

IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the GENERAL FUND for the fiscal period ending September 30, 2014, to be in excess of the advertised budget.

BE IT RESOLVED that the listed receipts and appropriations be added to, included in and transferred to the GENERAL FUND budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$8,197	001-3899010	General Fund-Cash Brought Forward
		E911 Funds -
\$8,197	0227-59922	Sinking Fund

#### NOW THEREFORE BE IT RESOLVED by the Board of

County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18th day of February 2014, at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner seconded by Commissioner , and carried unanimously.

#### Annie Mae Murphy, Clerk-Auditor Chairman

(Represents balance of E911 Funds @ 9/30/13 - not included in the 2014 FY budget)

EMERGENCY 911 FUND

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•

BEGINNING BALANCE 10/1/12		\$ 48,992.30
RECEIPTS 911 ACCESS FEE/LOCAL EXCH	(12 months posted)	<b>43</b> ,036.02 001-3631150
EXPENDITURES OPERATING EXPENSE CAPITAL OUTLAY subtotal TRANSFER TO SHERIFF - Expenditures incurred by Sheriff for 911 Coordinator (salaries & benefits)	\$ (2,369.68) <u>\$ -</u> \$ (2,369.68) \$ (32,469.00)	يو م ا
ENDING BALANCE 9/30/2013		<u>\$ 57,189.64</u> (*) −) 2.013/20/f s/State funds. ★ 48,992
(This balance does not include 911 Wireless/State or 911 s which are reported separately) (*) This amount is reserved on the balance shee Prepared By: Tammy Taylor, Finance Direct 11/25/2013	et (001-2470009).	s/State funds, # 90, # 90, 40, 40, 40, 40, 40, 40, 40, 4

IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the **GENERAL FUND** for the fiscal period ending September 30, 2014, to be in excess of the advertised budget.

**BE IT RESOLVED** that the listed receipts and appropriations be added to, included in and transferred to the **GENERAL FUND** budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$32,170	001-3899010	General Fund-Cash Brought Forward
\$32,170	0237-59922	911 Supplemental Wireless Funds - Sinking Fund

#### NOW THEREFORE BE IT RESOLVED by the Board of

County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18th day of February 2014, at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_, seconded by Commissioner \_\_\_\_\_, and carried unanimously.

#### Annie Mae Murphy, Clerk-Auditor

Chairman

(Represents balance of 911 Funds @ 9/30/13 - not included in the 2014 FY budget)

911 WIRELESS SUPPLEMENTAL GRANT FUNDS **BEGINNING BALANCE 10/1/12** 155,799.51 \$ RECEIPTS 59,624.09 001-36311: (12 months posted) \$ monthly supplemental (12months) \$ 49,624.09 \$ special disbursement 10,000.00 **EXPENDITURES** (14, 469.67)OPERATING \$ \$ (7, 425.00)TRANSFER TO SHERIFF (15,559.34) \$ (37,454.01) \$ CAPITAL OUTLAY ENDING BALANCE 9/30/2013 177,969.59 \$ (\*) This amount is reserved on the balance sheet (001-2470019) at FYE. Budgeted excess cash CF/Roversur Ali 2013 Prepared By: Tammy Taylor, Finance Director (11/25/13) lacsured Annead 2014 Budget A

IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the **GENERAL FUND** for the fiscal period ending September 30, 2014, to be in excess of the advertised budget.

**BE IT RESOLVED** that the listed receipts and appropriations be added to, included in and transferred to the **GENERAL FUND** budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$1,887	001-3899010	General Fund-Cash Brought Forward
\$1,887	0239-59922	911 Wireless State Funds - Sinking Fund

NOW THEREFORE BE IT RESOLVED by the Board of County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18th day of February 2014, at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_\_, seconded by Commissioner \_\_\_\_\_\_, and carried unanimously.

#### Annie Mae Murphy, Clerk-Auditor

Chairman

(Represents balance of 911 Funds @ 9/30/13 - not included in the 2014 FY budget)

911 WIRELESS STATE FUNDS			
BEGINNING BALANCE 10/1/12		\$ 37,1	69.48
RECEIPTS (12 r	months posted)	\$ 34,3	75.91 001-3631152
EXPENDITURES OPERATING CAPITAL OUTLAY	\$ (34,6 \$	657.73) - <u>\$ (</u> 34,6	57.78 #0239
ENDING BALANCE 9/30/2013		\$ 36,8	87.66
Prepared By: Tammy Taylor, Finance Dir	rector (11/25/2013)		Estivated Budgeted Carry Jore to 25,0
	And	×-	- #1997

IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the AFFORDABLE HOUSING FUND (2006-2007 GRANT) for the fiscal period ending September 30, 2014, to be more than the advertised budget.

BE IT RESOLVED that the listed receipts and appropriations be added to, included in and transferred to the AFFORDABLE HOUSING FUND budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$71 <b>,</b> 085	146-3899010	Cash Brought Forward 2006/2007 SHIP Grant
\$71 <b>,</b> 085	0413-59101	Transfer to Other Funds (Transfer to 2009 grant fund)

NOW THEREFORE BE IT RESOLVED by the Board of County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18th day of February, 2014 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_ seconded by Commissioner \_\_\_\_\_, and carried unanimously.

Annie Mae Murphy, Clerk-Auditor Chairman

(To close out this SHIP Grant Fund - Roll funding into 2008/2009 Ship Grant Fund)

**AFFORDABLE HOUSING FUND - GRANT** ANALYSIS OF FUNDS @ FISCAL YEAR END (Dupt #0413) 2006/2007 SHIP GRANT (FD 146) **BEGINNING BALANCE 10/1/12** \$ 80,198.52 REVENUE \$ Interest Earnings 30.17 **Recapture Ship Funds** \$ Interfund Transfer from other funds \$ **EXPENDITURES** \$ (10, 481.71)SUBTOTAL-BALANCE \$ 69,746.98 AUDIT AJE 1337.27 (increase pool B value) Fud (includes Salaul + 6,205.05 - 3BA Pool 1/30/13 Balan / Restricted 71,084.25 🤊 ENDING BALANCE 9/30/13 \$ Prepared by: Tammy Taylor, Finance Director 2/6/14 2010 201 irrid Balance (71,084.25 (2008 0

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IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the AFFORDABLE HOUSING FUND (2007-2008 GRANT) for the fiscal period ending September 30, 2014, to be more than the advertised budget.

BE IT RESOLVED that the listed receipts and appropriations be added to, included in and transferred to the AFFORDABLE HOUSING FUND budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$9,319	147-3899010	Cash Brought Forward 2009/2010 SHIP Grant
\$9,319	0414-59101	Transfer to Other Funds (Transfer to 2013 grant fund)

NOW THEREFORE BE IT RESOLVED by the Board of County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18th day of February, 2014 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_ seconded by Commissioner \_\_\_\_\_, and carried unanimously.

Annie Mae Murphy, Clerk-Auditor Chairman

(To close out this SHIP Grant Fund - Roll funding into 2012/2013 Ship Grant Fund)

AFFORDABLE HOUSING FUND - GRANT ANALYSIS OF FUNDS @ FISCAL YEAR END

(

2007/2008 SHIP GRANT		(Fl	<u>D 147</u>	
BEGINNING BALANCE 10/	1/12		\$	1,523.32
REVENUE Interest Transfer from Fund 144 Transfer from Fund 145	\$ \$ \$	2.96 1,128.13 9,619.52	\$	10,750.61

ENDING BALANCE 9/30/13 9/30/13 9/30/13 \$ 9,318.64

Prepared by: Tammy Taylor, Finance Director 12/13/13

2013/2014 FY -Drawfer His remaining Balacel to the 2013 Ship gract Frid



IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the AFFORDABLE HOUSING FUND (2008-2009 **GRANT)** for the fiscal period ending September 30, 2014, to be more than the advertised budget.

BE IT RESOLVED that the listed receipts and appropriations be added to, included in and transferred to the AFFORDABLE HOUSING FUND budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$71,085	140-3811010	Interfund Transfer (From 2006/2007 SHIP Grant FD)
\$ 1,200 \$ 369 <u>\$69,516</u> \$71,085	0406-52200 0406-55101 0406-53401 Total Expendi	Retirement Office Supplies Contractual Services tures

NOW THEREFORE BE IT RESOLVED by the Board of County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18th day of February, 2014 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_ seconded by Commissioner \_\_\_\_\_, and carried unanimously.

Annie Mae Murphy, Clerk-Auditor Chairman

(Fund Balance in Fund 146/2007 Grant- Rolled Into this Fund)

## BUDGET AMENDMENT REQUEST 2013-2014 FISCAL YEAR

0406 DEPARTMENT: Acct. 0413 SHIP Grant 2006/2007 2008 2009 AMENDMENT REQUEST JANUARY 6, 2014

Expenditure <u>Account #</u>	Account Description B	Budgeted 10/01/13	Amended Amount	Amendment
52200	Retirement Contribution	ons O	\$1,200.00	\$1,200.00
55101	Office Supplies	0	\$369.00	\$369.00

Total Amendment Requested \$1,569.00

ested \$1,569.00 + 69,514.00 (53401-Contractual) # 71,035 Aptal dut 1,035 Aptal dut 2,10-14

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Total Budget carried forward FY 2013-2014-\$1,569.00

"Thelendy Cos 1-8-2014

Eycen CF

# **Taylor County Administrative Complex**

201 East Green Street, Perry, Florida 32347

Melody Cox Administrative Services 850-838-3553 850-838-3501 Fax

Fol 140 - Wopan 0406

grants.coordinator@taylorcountygov.com

# MEMORANDUM

DATE: January 8, 2014

TO: Tammy

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FROM: Melody

RE: Budget Amendment Request Account #0413 SHIP 2006/2007 (Jud

Tammy, please prepare a budget amendment for the above referenced grant. I have attached a budget amendment request in the format you had previously requested. I determined the carry forward budget from the Expenditure Status Report for Period 13 of FY 2012/2013 which I have also attached.

Thank you.

Alida Melody /)

c.c. Dustin Hinkle

IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the AFFORDABLE HOUSING FUND (2009-2010 GRANT) for the fiscal period ending September 30, 2014, to be more than the advertised budget.

**BE IT RESOLVED** that the listed receipts and appropriations be added to, included in and transferred to the **AFFORDABLE HOUSING FUND** budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$5,582	148-3899010	Cash Brought Forward 2009/2010 SHIP Grant
\$5,582	0415-59101	Transfer to Other Funds (Transfer to 2013 grant fund)

NOW THEREFORE BE IT RESOLVED by the Board of County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18th day of February, 2014 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_, seconded by Commissioner \_\_\_\_\_, and carried unanimously.

Annie Mae Murphy, Clerk-Auditor

Chairman

(To close out this SHIP Grant Fund - Roll funding into 2012/2013 Ship Grant Fund)

AFFORDABLE HOUSING FUND - GRANT ANALYSIS OF FUNDS @ FISCAL YEAR END

ENDING BA	LANCE	9/30/1 <b>3</b>	9/30/13 Balai	<u>(</u> \$	5,581.23 ¥	2013/2014 FY ) Dranofer th remaining Polone to
EXPENDITU	JRES			\$	(51.50)	2013/2014 EV
Grant Interest Recapture	\$ \$ \$	- 1.88 -		Ψ	1.00	
REVENUE				\$	1.88	
BEGINNING	BALAN	ICE 10/1/12		\$	5,630.85	

Prepared by: Tammy Taylor, Finance Director (14/13)

Ollarce to Jac 2013 Shy grant Fund (Fund 149 -# 0416 Dat

IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the AFFORDABLE HOUSING FUND (2011-2012 GRANT) for the fiscal period ending September 30, 2014, to be in excess of the advertised budget.

**BE IT RESOLVED** that the listed receipts and appropriations be added to, included in and transferred to the **AFFORDABLE HOUSING FUND** budget for the fiscal

year ending September 30, 2014.

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Amount	Account	Account Name
\$23,916	141-3899010	) Cash Brought Forward- 2011/2012 SHIP Grant
\$22,100 \$ 100 \$ 200 \$ 716 \$ 800 \$23,916	0407-53401 0407-54902 0407-54977 0407-55102 0407-55101 Total	Contractual Services Legal Advertising Recording Fees Office Equip. < \$1,000 Office Supplies Expenditures

NOW THEREFORE BE IT RESOLVED by the Board of

County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18th day of February, 2014 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_\_, seconded by Commissioner \_\_\_\_\_\_, and carried unanimously.



Annie Mae Murphy, Clerk-Auditor

Chairman

(2014 Budget was understated)

# **Taylor County Administrative Complex**

201 East Green Street, Perry, Florida 32347

Melody Cox Administrative Services

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850-838-3553 850-838-3501 Fax

grants.coordinator@taylorcountygov.com

# MEMORANDUM

DATE: January 8, 2014

TO: Tammy

FROM: Melody

#23.916 Am

RE: Budget Amendment Request Account #0407 SHIP 2011/2012

Tammy, please prepare a budget amendment for the above referenced grant. I have attached a budget amendment request in the format you had previously requested. I determined the carry forward budget from the Expenditure Status Report for Period 13 of FY 2012/2013 which I have also attached.

Thank you.

nel v Melody

c.c. Dustin Hinkle

## BUDGET AMENDMENT REQUEST 2013-2014 FISCAL YEAR

DEPARTMENT: Dept. 0407 SHIP Grant 2011/2012 AMENDMENT REQUEST :JANUARY 6, 2014 CHANGES MADE FEBRUARY 7, 2014

Expenditur	e <u>Account Description</u> B	udgeted 10/	01/13 Amondod Amou	1 2/18/14	
<u>Account #</u>	Account Description b	uugeteu 10/	offis Amendeu Amou		$\angle$
53401	Contractual Services '	\$4,200.00	\$26,200.00	\$22,100.00	
54902	Legal Advertising /	\$200.00	\$300.00	\$100.00 /	
54977	Recording Fees 1	<b>\$0</b>	\$200.00	\$200.00 <	
55101	Office Supplies 🖌	\$200.00	\$1,000.00	\$800.00	
55102	Office Equip<\$1,000 /	<b>\$0</b>	\$716.00	\$716.00 /	

BUDGET AMENDMENT REQUEST \$23,916.00

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Total Excess Budget carried forward FY 2013-2014 \$23,916.00\*

Netoly Cur 2-7-20, 4

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IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the AFFORDABLE HOUSING FUND (2012-2013 GRANT) for the fiscal period ending September 30, 2014, to be in excess of the advertised budget.

**BE IT RESOLVED** that the listed receipts and appropriations be added to, included in and transferred to the **AFFORDABLE HOUSING FUND** budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$ 9,319	149-3811010	Interfund Transfer-2008 Grant
\$ 5,582	149-3811010	Interfund Transfer-2010 Grant
\$14,901	Total Revenue	
	0416 50401	
\$ 5 <b>,</b> 000	0416- 53401	Contractual Services
\$ 582	0416- 55101	Office Supplies
\$ 319	0416- 54977	Recording Fees
\$ 9,000	0416- 58310	Homebuyers Assistance
\$14,901	Total Expendi	

NOW THEREFORE BE IT RESOLVED by the Board of

County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18th day of February, 2014 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_\_, seconded by Commissioner \_\_\_\_\_\_, and carried unanimously.

Annie Mae Murphy, Clerk-Auditor

Chairman

(Close-out of 2007/08 and 2009/10 Ship Grant Funds - Roll balances into the 2012/2013 Ship Grant Fund)

			2014 FISC. Grant 2009/2	T.	(2012/2013 SL4	p grant)
	Expenditure					
	Account #	Account Description B	udgeted 10/	01/13 Amended Ame	unt Amendment	-
0416-	53401	Contractual Services	0	\$5,000.00	\$5,000.00	
646	55101	Office Supplies	0	\$579.00	582.00 \$ <del>579</del> .00	
<u> </u>						^
	Total Amend	Iment Requested \$ <del>5,579</del> #5,58	 2.00 S	- 1-14 L- 1-14		

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Total Budget carried forward FY 2013-2014 \$5,579:00

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			<u>4 FISCA</u> nt 2007/20	NT REQUEST <u>L YEAR</u> To HB > Digt #041	16 (2012/13 Ship grant)
	Expenditure Account #	Account Description Budg	geted 10/0	1/13 Amended Amo	unt Amendment
Julo -	58310	Homebuyers Assistance	0	\$9,000.00	\$9,000.00
5416 -	54977	Recording Fees	0	\$315.00	319.06,00 \$315.00
	/				
	Total Amen	dment Requested \$9,315.00	2 - 61 2 - 61	J14	

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Total Budget carried forward FY 2013-2014 \$9,315.00

- Theledy Cer 1-8-2114

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IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the SCRAP ROAD PROJECT (Osteen Road) FUND for the fiscal period ending September 30, 2014, to be in excess of the advertised budget.

**BE IT RESOLVED** that the listed receipts and appropriations be added to, included in and transferred to the **SCRAP ROAD PROJECT FUND** budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$752 <b>,</b> 417	169-3344906	SCRAP Grant - Revenue
\$108,000 \$644,117 \$300 \$752,417	0329-53101 0329-53401 0329-54902 Total Expend	SCRAP Project/Osteen Road Professional Services Contractual Services Legal Advertising itures

#### NOW THEREFORE BE IT RESOLVED by the Board of

County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18<sup>h</sup> day of February, 2014 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_\_, seconded by Commissioner\_\_\_\_\_\_, and carried unanimously.



Annie Mae Murphy, Clerk-Auditor

Chairman

(New SCRAP Paving Grant 2014 FY)

### **Tammy Taylor**

From:	Kenneth Dudley <county.engineer@taylorcountygov.com></county.engineer@taylorcountygov.com>				
Sent:	Wednesday, January 29, 2014 11:24 AM				
То:	'Tammy Taylor'				
Cc:	Jack Brown; Dustin Hinkel				
Subject:	Budget Cost Center				
Attachments:	Osteen RD FDOT SCRAP Supplemental Agreement 1.pdf; FDOT SCRAP Interlocal				
	Agreement_East Ellison RD.pdf; FDOT SCRAP Agreement_North Ellison Road.pdf				

Osteen Road	SCRAP project	\$752,417.00 \$108.000.00	And	169	- Des	toz
rofessional Services		\$108,000.00	Junes	•••		- 07
Contractual Services		\$644,117.00				
Legal Advertising		\$300.00				
		<u></u>				
East Ellison Road	SCRAP project					
Professional Services		\$72,000.00				
Contractual Services		\$91,619.00				
Legal Advertising		\$300.00				
North Ellison Road	SCRAP Project					
Professional Services		\$54,000.00				
Contractual Services		\$184,768.0				
Legal Advertising		\$300.00				
Kenneth Dudley, P.E.						
Kenneth Dudley, P.E.						

201 East Green St. Perry, FL 32347 Phone: 850.838.3500 x104 Fax: 850.838.3501 county.engineer@taylorcountygov.com<mailto:county.engineer@taylorcountygov.com>

Please note: Florida has a very broad public records law. Most written communications to or from public officials regarding public business are available to the media and public upon request. Your e-mail communications may be subject to public disclosure.



## Florida Department of Transportation

RICK SCOTT GOVERNOR 1109 South Marion Avenue Lake City, FL 32025-5874

ANANTH PRASAD, P.E. SECRETARY

September 17, 2013

The Honorable Pam Feagle, Chair Taylor County Board of County Commissioners 201 E. Green Street Post Office Box 620 Perry, Florida 32348

Still

Subject: Small County Road Assistance Program- Supplemental # 1 Resurfacing of Osteen Road from SR 30 / US 98 to CR 361A Financial Project ID: 430725-1-58-01

Dear Chair Feagle:

Enclosed for your files is a fully executed copy of the Supplemental Agreement # 1 for the subject project. This Agreement details the work that the Taylor County will undertake. Construction funds in the amount of \$507,159.00 have been added for FY 2014.

Thank you for your assistance in securing approval and execution of this agreement. Should you have questions or need additional information, I can be reached at 1-800-749-2967, Extension 7533.

Sincerely,

Kally O. Thomas

Kathy Thomas, P.E. District Two Program Management Engineer

KS:ke Enclosures

cc: Mr. Kenneth Dudley, P.E., Taylor County Engineer Mr. Jack Brown, Taylor County Administrator

www.dot.state.fl.us

The Honorable Pam Feagle, Chair Taylor County BOCC 201 E. Green Street		STATE OF FLORIDA DEPARTMENT OF		Financial Project ID: 430725-1-58	
		TRANSPORTAT			
Post Office Box 620	SMAL	L COUNTY ROAD ASSIS	STANCE PROGRAM		
Perry, Florida 32348		(SCRAP)			
reny, Fionda 32340		SUPPLEMENT	TAL	Contract Number: AQX82	
		AGREEMENT	#1		
		PROJECT DESCRIPT	NON		
er Florida Statutes 339.2816, the F					
ssistance Program Agreement (SC odified by this Supplement. The ch				t remain in effect except as expres	
ame: Osteen Road				Length N/A	
				-	
ermini: <u>from SR 30 / US 98 to CF</u>	R 361A				
escription of Work: resurfacing					
eason for Supplement: add constru	ction funds in the a	mount of \$507,159.00	for Fiscal Year 2014		
r	T		T		
		(3)	(2)		
TYPE OF WO	DK	TOTAL	(2) AGENCY	. (1) STATE &	
		PROJECT ESTIMATE	FUNDS	FEDERAL FUNDS	
By Fiscal Ye		FUNDS (100%)	(0%)	(100%)	
Design					
2007-2008	-				
<u>2008-2009</u> 2009-2010	-				
	-				
Total Design C	20st				
Right of Way					
	_				
2008-2009					
<u>2009-2010</u> 2010-2011	-				
	Way Cost				
Total Right of	TTAY COBL				
Construction					
2011-2012	-	245.258.00		\$ 245,258.00	
<u>2012-2013</u> 2013-2014		507.159.00		\$ 507,159,00	
<u>2013-2014</u> 2014-2015					
20172010					
Total Contract	Costs	752,417.00		\$ 752,417.00	
Construction Engineering a 2012-2013	na inspection				
2013-2014	-				
2014-2015			······································		
2015-2016	=				
Total Construc	tion Engineering				
			1		

"\* ·

The Department's fiscal year begins on July 1. For this project, funds are not projected to be available until after July 1st each fiscal year. The Department will notify the Agency, in writing, when funds are available.

#### RESOLUTION

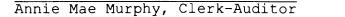
IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the SCRAP ROAD PROJECT (North Ellison Road) FUND for the fiscal period ending September 30, 2014, to be in excess of the advertised budget.

**BE IT RESOLVED** that the listed receipts and appropriations be added to, included in and transferred to the **SCRAP ROAD PROJECT FUND** budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$239,068	171-3344906	SCRAP Grant - Revenue
\$ 54,000 \$184,768 \$ 300 \$239,068	0333-53101 0333-53401 0333-54902 Total Expend:	SCRAP Project/N. Ellison Road Professional Services Contractual Services Legal Advertising itures

#### NOW THEREFORE BE IT RESOLVED by the Board of

County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18<sup>h</sup> day of February, 2014 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_\_, seconded by Commissioner \_\_\_\_\_\_, and carried unanimously.



Chairman

(New SCRAP Paving Grant 2014 FY)

## **Tammy Taylor**

From:	Kenneth Dudley <county.engineer@taylorcountygov.com></county.engineer@taylorcountygov.com>	
Sent:	Wednesday, January 29, 2014 11:24 AM	
То:	'Tammy Taylor'	
Cc:	Jack Brown; Dustin Hinkel	
Subject:	Budget Cost Center	
Attachments:	Osteen RD FDOT SCRAP Supplemental Agreement 1.pdf; FDOT SCRAP Interlocal	
	Agreement_East Ellison RD.pdf; FDOT SCRAP Agreement_North Ellison Road.pdf	

Good morning Tammy.

## i will need cost centers for the following projects:

Osteen Road	SCRAP project	\$752,417.00			
Professional Services		\$108,000.00			
Contractual Services		\$644,117.00			
Legal Advertising		\$300.00			
East Ellison Road	SCRAP project	\$163,919.00			
Professional Services		\$72,000.00			
<b>Contractual Services</b>		\$91,619.00			11 A.
Legal Advertising		\$300.00			
			^		+
North Ellison Road	SCRAP Project	\$239,068.00	Jua	171-04	pt=0333
Professional Services		\$54,000.00			•
Contractual Services		\$184,768.0			
Legal Advertising		\$300.00			/

Kenneth Dudley, P.E. County Engineer Taylor County Board of County Commissioners 201 East Green St. Perry, FL 32347 Phone: 850.838.3500 x104 Fax: 850.838.3501 county.engineer@taylorcountygov.com<mailto:county.engineer@taylorcountygov.com>

Please note: Florida has a very broad public records law. Most written communications to or from public officials regarding public business are available to the media and public upon request. Your e-mail communications may be subject to public disclosure.



Florida Department of Transportation

RICK SCOTT GOVERNOR 1109 South Marion Avenue Lake City, FL 32025-5874 ANANTH PRASAD, P.E. SECRETARY

October 29, 2013

The Honorable Pam Feagle, Chair Taylor County Board of County Commissioners 201 E. Green Street Post Office Box 620 Perry, Florida 32348

Subject:

Small County Road Assistance Program Resurfacing and Reconstruction of CR 252 (N. Ellison) from CR 356/Green St. to CR 255A/E. Ellison Rd. Financial Project ID: 431643-1-58-01

Dear Chair Feagle:

Enclosed for execution are three (3) copies of the Small County Road Assistance Program Agreement for the resurfacing and reconstruction of CR 252 (N. Ellison) from CR 356/Green St. to CR 255A/E. Ellison Rd. in Taylor County, Florida. This Agreement details the terms and conditions for construction of the subject improvements which Taylor County will undertake. Please do not date the Agreement as other approvals must be secured prior to establishing the execution date.

In addition to executing the attached Agreement, a resolution must be adopted and a certified copy attached to each copy of the Agreement.

Taylor County is responsible for bearing all expenses in excess of the amount the Department agrees to participate (\$239,068.00). A final copy of the design plans must also be provided for our files.

Your assistance in securing execution is appreciated. Should you have questions or need additional information, I can be reached at 1-800-749-2967, Extension 7533.

Sincerely,

4 Q. Thous

Kathy Thomas, P.E. District Two Program Management Engineer

KT:KE:mm Enclosures

cc: Mr. Jack R. Brown, County Manager Mr. Kenneth Dudley, P.E., County Engineer

www.dot.state.fl.us

#### RESOLUTION

IN COMPLIANCE to the laws of the State of Florida, as per Florida Statute 129.06(b), the undersigned Clerk and Auditor for the Board of County Commissioners of Taylor County, Florida, made and prepared the following budget changes to reflect unanticipated monies for a particular purpose which caused the SCRAP ROAD PROJECT (East Ellison Road) FUND for the fiscal period ending September 30, 2014, to be in excess of the advertised budget.

**BE IT RESOLVED** that the listed receipts and appropriations be added to, included in and transferred to the **SCRAP ROAD PROJECT FUND** budget for the fiscal year ending September 30, 2014.

Amount	Account	Account Name
\$163 <b>,</b> 919	170-3344906	SCRAP Grant - Revenue
\$ 72,000 \$ 91,619 <u>\$ 300</u> \$163,919	0332-53101 0332-53401 0332-54902 Total Expend:	SCRAP Project/E. Ellison Road Professional Services Contractual Services Legal Advertising itures

#### NOW THEREFORE BE IT RESOLVED by the Board of

County Commissioners of Taylor County, Florida, that they do approve as provided by law this resolution this 18<sup>h</sup> day of February, 2014 at Perry, Taylor County, Florida, to amend the budget for the fiscal period ending September 30, 2014 with a motion by Commissioner\_\_\_\_\_\_, seconded by Commissioner \_\_\_\_\_\_, and carried unanimously.



Annie Mae Murphy, Clerk-Auditor

Chairman

(New SCRAP Paving Grant 2014 FY)

# Tammy Taylor

From:	Kenneth Dudley <county.engineer@taylorcountygov.com></county.engineer@taylorcountygov.com>	
Sent:	Wednesday, January 29, 2014 11:24 AM	
To:	'Tammy Taylor'	
Cc:	Jack Brown; Dustin Hinkel	
Subject:	Budget Cost Center	
Attachments:	Osteen RD FDOT SCRAP Supplemental Agreement 1.pdf; FDOT SCRAP Interlo	
	Agreement_East Ellison RD.pdf; FDOT SCRAP Agreement_North Ellison Road.pdf	

### Good morning Tammy.

#### I will need cost centers for the following projects:

Osteen Road	SCRAP project	\$752,417.00
Professional Services		\$108,000.00
Contractual Services		\$644,117.00
Legal Advertising		\$300.00

And 170 - Del #0732 SCRAP project \$163,919.00 East Ellison Road Professional Services \$72,000.00 \$91,619.00 Contractual Services \$300.00 Legal Advertising

North Ellison Road	SCRAP Project \$239,068.00
Professional Services	\$54,000.00
Contractual Services	\$184,768.0
Legal Advertising	\$300.00

Kenneth Dudley, P.E. County Engineer Taylor County Board of County Commissioners 201 East Green St. Perry, FL 32347 Phone: 850.838.3500 x104 Fax: 850.838.3501 county.engineer@taylorcountygov.com<mailto:county.engineer@taylorcountygov.com>

Please note: Florida has a very broad public records law. Most written communications to or from public officials regarding public business are available to the media and public upon request. Your e-mail communications may be subject to public disclosure.



Florida Department of Transportation

RICK SCOTT GOVERNOR 1109 South Marion Avenue Lake City, FL 32025-5874

ANANTH PRASAD, P.E. SECRETARY

March 18, 2013

The Honorable Pam Feagle, Chair Taylor County Board of County Commissioners 201 E. Green Street Post Office Box 620 Perry, Florida 32348

Subject: Small County Road Assistance Program Resurfacing of East Ellison Road from CR 252 to CR 225A Financial Project ID: 430741-1-58-01

Dear Chair Feagle:

Enclosed for your files is a fully executed copy of the Small County Road Assistance Program Agreement to resurfacing East Ellison Road from CR 252 to CR 225A in Taylor County, Florida. This Agreement details the terms and conditions for construction of the subject improvements which Taylor County will undertake. This letter serves as your Notice to Proceed. The contract beginning date is March 21, 2013 with an ending date of December 31, 2014. Any work performed prior to March 21, 2013 is not eligible for reimbursement.

Please submit a set of plans and proposed advertisement to the Department for approval prior to advertising for construction services. After bids are opened submit the Engineer's Estimate and the Bid of the Apparent Lowest, Responsive Bidder for the Department's concurrence and recommendation of award.

To expedite reimbursement, invoices should be sent directly to Ms. Kim Evans at 1109 South Marion Avenue, Lake City, Florida, 32025-5874. Invoices should be submitted in detail sufficient for a proper pre-audit and post-audit. Please remember that Taylor County is responsible for bearing all expenses in excess of the amount the Department agrees to participate (\$163,919.00).

Should you have questions or need additional information, I can be reached at 1-800-749-2967, Extension 7745.

Sincerely Saden

Katrina Sadler District Programs Administrator

KS:ke Enclosures

cc: Mr. Jack Brown, County Administrator Mr. Kenneth Dudley, P.E., Director of Engineering

www.dot.state.fl.us

TAY	LOR COUNTY BOARD OF COMMISSIONERS		
	County Commission Agenda Item		
SUBJECT/TITLE:	E: Board to ratify County's Administrator's signature on the FDEP Small County Solid Waste Management Grant Agreement for FY 2013-2014		
MEETING DATE RE	QUESTED: February 18, 2014		
Statement of Issue: Board to ratify the County Administrator's signature on the Small County Solid Waste Management Grant Agreement for FY 2013-2014.			
Recommended Act	ion: Ratify the County Administrator's signature on the Grant Agreement.		
Fiscal Impact: The County received a grant in the amount of \$90,909 from the DEP Solid Waste Management Grant Program with no match required from the County.			
Budgeted Expense	: Y/N		
Submitted By: Melo	ody Cox		
Contact: Melody C	οχ		
<u>s</u>	SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS		
History, Facts & Iss	sues: The County received \$90,909 in grant funds to be used to fund operating costs for the local solid waste management program including salaries of the recycling employees and waste tire disposal. The Board approved the grant application at the July 16, 2013 meeting.		

Attachments: Small County Consolidated Grant Agreement



## FLORIDA DEPARTMENT OF

**ENVIRONMENTAL PROTECTION** 

BOB MARTINEZ CENTER 2600 BLAIRSTONE ROAD TALLAHASSEE, FLORIDA 32399-2400 GOVERNOR CARLOS LOPEZ-CANTERA

RICK SCOTT

LT. GÖVERNOR

HERSCHEL T. VINYARD JR. SECRETARY

2013-2014 SMALL COUNTY CONSOLIDATED GRANT AGREEMENT FOR STATE ASSISTANCE UNDER SECTION 403.7095(3), FLORIDA STATUTES PART I - GRANT NOTIFICATION INFORMATION

- 1. Grant Agreement Number: 429SC 2. Date of Award: 10/1/13
- 3. Grant Title: SMALL COUNTY CONSOLIDATED GRANT
- 4. Grant Period: October 1, 2013 September 30, 2014
- 5. Grant Amount: \$ 90,909.00
- 6. CSFA # and Project Name: 37.012/Small County Consolidated Grants
- 7. Grantee(s): TAYLOR COUNTY

Address: 201 East Green Street Perry, FL , 32347

- 8. Grantee Fiscal Year End: September 30, 2014
- 9. Federal Employer Identification Number: 59-6000879
- 10. Grantee's Authorized Representative:

Name:	Jack R. Brown
Title:	County Administrator
Phone:	(850) 838-3553

If there is a change in the authorized representative during the Grant period, the Department must be notified of the new representative by resolution or minutes of a commission meeting.

11. Grantee's Contact Person:

Name:	Melody Cox
Title:	Grants Director
Address: Phone:	201 East Green Street, Perry, FL , 32347 (850) 838-3553

Any changes to the contact information shown above must be reduced to writing in the form of a letter sent to the Department's Grant Manager identified in paragraph 13.

- 12. Total county population from official April 1, 2012 population estimates: 22,898
- 13. Issuing Office:

Mr. Tony Partin, Grant Manager Florida Department of Environmental Protection Division of Waste Management – Financial Management & Procurement 2600 Blair Stone Road - MS # 4555 Tallahassee, Florida 32399-2400 (850) 245-8737

Any changes to the contact information shown above must be reduced to writing in the form of a letter sent to the contact person identified in paragraph 11.

#### PART II - GRANT CONDITIONS

#### GENERAL CONDITIONS:

- 1. As consideration for the services rendered by the Grantee under the terms of this Agreement, the Department shall pay the Grantee on a cost reimbursement basis in an amount not to exceed \$90,909.00 for all eligible direct project costs, upon the completion, submittal and approval of deliverables identified in Attachment A, Grant Work Plan, for direct costs only. Prior written approval from the Department's Grant Manager shall be required for changes in deliverable budgets between approved budget categories of up to 10% of the total budget amount for the deliverable. The DEP Grant Manager will transmit a copy of the written approval and revised deliverable budget to the DEP Contracts Disbursements Office for inclusion in the Agreement file. Changes greater than 10% will require a formal Change Order to the Agreement. Changes that transfer funds from one deliverable to another or that increase or decrease the total funding amount of the Agreement will require a formal amendment to the Agreement. The Grantee shall be eligible for reimbursement for work performed on or after October 1, 2013 until September 30, 2014.
- 2. A. The Grantee, using Attachment B, Reimbursement Request Form, shall submit reimbursement requests upon the completion and submission of deliverables as identified in Attachment A. The Grantee shall submit a final invoice to the Department no later than October 31, 2014, to assure the availability of funds for final payment. An original of the Reimbursement Request Form, with summaries and appropriate contracts attached must be submitted. Reimbursement Request Forms must be signed by the designated authorized representative. This should be the same person who signed the Grant Agreement.
  - B. As an attachment to the Reimbursement Request Form, the Grantee must provide from its accounting system a listing of expenditures made under this Agreement. The listing shall include, at a minimum, a description of the goods or services purchased, date of the transaction (check date), voucher number (if available), check number, amount paid, and vendor name and must be broken down by task. The Grantee shall comply with the minimum requirements set forth in Attachment C, Contract Payment Requirements. Authorized travel expenses are included in the amount of this Agreement and no additional travel expenses above those included in the allowable items described in paragraph 4 will be authorized. Any requests for reimbursement of authorized travel expenses must be submitted in accordance with Section 112.061, Florida Statutes.
  - C. The Grantee shall utilize **Attachment D**, **Progress Report Form**, to describe the work performed, problems encountered, problem resolution, schedule updates and proposed work for the next reporting period. Quarterly reports shall be submitted to the Department's Grant Manager no later than twenty (20) days following the completion of the quarterly reporting period. It is hereby understood and agreed by the parties that the term "quarterly" shall reflect the calendar quarters ending March 31, June 30, September 30 and December 31. The Department's Grant Manager shall have ten (10) calendar days to review the required reports and deliverables submitted by the Grantee.
- 3. In addition to the requirements in the paragraph above, the Department will periodically request proof of a transaction (invoice, payroll register, etc.) to evaluate the appropriateness of costs to the Grant Agreement pursuant to State and Federal guidelines (including cost allocation guidelines), as appropriate. This information, when requested, must be provided within thirty (30) calendar days of such request. The Grantee may also be required to submit a cost allocation plan to the Department in support of its multipliers for fringe benefits. All bills for amounts due under this Grant Agreement shall be submitted in detail sufficient for a proper pre-audit and post-audit thereof. State guidelines for allowable costs can be found in the Department of Financial

Services' Reference Guide for State Expenditures at http://www.fldfs.com/aadir/reference%5Fguide.

- 4. Expenditures shall be limited to the following items:
  - A. Allowable costs for reimbursement under this Agreement include:
    - i. Annual solid waste management program operating costs;
    - ii. Purchasing or repairing solid waste scales;
    - iii. Planning;

, '

- iv. Construction and maintenance of solid waste facilities;
- v. Recycling and education programs, which may include solid waste management education for employees or the public and recycling demonstration projects;
- vi. Litter prevention and control; and
- vii. Waste tire collection and disposal.
- B. Unallowable costs for reimbursement under this Agreement include:
  - i. Cell phone expenditures;
  - ii. Indirect, overhead or administrative costs;
  - iii. Promotional items such as T-shirts and other items promoting the program; and
  - iv. Vehicles, unless authorized by this Agreement or an executed amendment to this Agreement.
- C. Specific costs authorized for this Agreement are identified in Attachment A.
- D. Contractual (Subcontractors) - Reimbursement requests for payments to subcontractors must be substantiated by copies of invoices with backup documentation identical to that required from the Grantee. Subcontracts which involve payments for direct salaries shall clearly identify the personnel involved, salary rate per hour, and hours/time spent on the All multipliers used (i.e. fringe benefits, overhead, and/or general and project. administrative rates) shall be supported by audit. If the Department determines that multipliers charged by any subcontractor exceeded the rates supported by audit, the Grantee shall be required to reimburse such funds to the Department within thirty (30) days of written notification. Interest on the excessive charges shall be calculated based on the prevailing rate used by the State Board of Administration. Additionally, independent of the Grantee's contract obligations to the subcontractor, the Department shall not reimburse any of the following types of charges: cell phone usage, attorneys' fees, civil or administrative penalties, handling fees, such as set percent overages associated with purchasing supplies or equipment.
- E. For fixed price (vendor) subcontracts, the following provisions shall apply:
  - The Grantee may award, on a competitive basis, fixed price subcontracts to consultants/contractors in performing the work described in Attachment A. Invoices submitted to the Department for fixed price subcontracted activities shall be supported with a copy of the subcontractor's invoice and a copy of the

tabulation form for the competitive procurement process (Invitation to Bid or Request for Proposals) resulting in the fixed price subcontract.

- ii. The Grantee may request approval from the Department to award a fixed price subcontract resulting from procurement methods other than those identified in the paragraph above. In this instance, the Grantee shall request the advance written approval from the Department's Grant Manager of the fixed price negotiated by the Grantee. The letter of request shall be supported by a detailed budget and Scope of Services to be performed by the subcontractor. Upon receipt of the Department Grant Manager's approval of the fixed price amount, the Grantee may proceed in finalizing the fixed price subcontract.
- iii. All subcontracts are subject to the provisions of paragraph 20 and any other appropriate provisions of this Agreement which affect subcontracting activities.
- 5. A. The accounting systems for all Grantees must ensure that these funds are not commingled with funds from other agencies. Funds from each agency must be accounted for separately. Grantees are prohibited from commingling funds on either a program-by-program or a project-by-project basis. Funds specifically budgeted and/or received for one project may not be used to support another project. Where a Grantee's, or subrecipient's, accounting system cannot comply with this requirement, the Grantee, or subrecipient, shall establish a system to provide adequate fund accountability for each project it has been awarded.
  - B. If the Department finds that these funds have been commingled, the Department shall have the right to demand a refund, either in whole or in part, of the funds provided to the Grantee under this Agreement for non-compliance with the material terms of this Agreement. The Grantee, upon such written notification from the Department shall refund, and shall forthwith pay to the Department, the amount of money demanded by the Department. Interest on any refund shall be calculated based on the prevailing rate used by the State Board of Administration. Interest shall be calculated from the date(s) the original payment(s) are received from the Department by the Grantee to the date repayment is made by the Grantee to the Department.
  - C. In the event that the Grantee recovers costs, incurred under this Agreement and reimbursed by the Department, from another source(s), the Grantee shall reimburse the Department for all recovered funds originally provided under this Agreement. Interest on any refund shall be calculated based on the prevailing rate used by the State Board of Administration. Interest shall be calculated from the date(s) the payment(s) are recovered by the Grantee to the date repayment is made to the Department by the Grantee.
- 6. The Grantee shall maintain books, records and documents directly pertinent to performance under this Agreement in accordance with generally accepted accounting principles consistently applied. The Department, the State, or their authorized representatives shall have access to such records for audit purposes during the term of this Agreement and for five (5) years following Agreement completion. The Grantee agrees that it will expeditiously initiate and complete the program work for which assistance has been awarded under this Grant Agreement in accordance with all applicable provisions of Florida Statutes and the Florida Administrative Code. In the event any work is subcontracted, the Grantee shall similarly require each subcontractor to maintain and allow access to such records for audit purposes.
- 7. A. In addition to the requirements of the preceding paragraph, the Grantee shall comply with the applicable provisions contained in Attachment E (Special Audit Requirements), attached hereto and made a part hereof. Exhibit 1 to Attachment E summarizes the funding sources supporting the Agreement for purposes of assisting the Grantee in complying with the requirements of Attachment E. A revised copy of Exhibit 1 must be

Revised 6/13 DEP Agreement No. 429SC, Page 4 of 9 provided to the Grantee for each amendment which authorizes a funding increase or decrease. If the Grantee fails to receive a revised copy of **Exhibit 1**, the Grantee shall notify the Department's Grants Manager to request a copy of the updated information.

B. The Grantee is hereby advised that the Federal and/or Florida Single Audit Act Requirements may further apply to lower tier transactions that may be a result of this Agreement. The Grantee shall consider the type of financial assistance (federal and/or state) identified in Attachment E, Exhibit 1 when making its determination. For federal financial assistance, the Grantee shall utilize the guidance provided under OMB Circular A-133, Subpart B, Section \_\_\_\_\_210 for determining whether the relationship represents that of a subrecipient or vendor. For state financial assistance, the Grantee shall utilize the form entitled "Checklist for Nonstate Organizations Recipient/Subrecipient vs Vendor Determination" (form number DFS-A2-NS) that can be found under the "Links/Forms" section appearing at the following website:

#### https://apps.fldfs.com/fsaa

The Grantee should confer with its chief financial officer, audit director or contact the Department for assistance with questions pertaining to the applicability of these requirements.

- 8. A. The Department has the right to terminate a Grant award and demand refund of Grant funds for non-compliance with the terms of the award, Section 403.7095, Florida Statutes, or the Solid Waste Grants Program Rule, Chapter 62-716, Florida Administrative Code. Such action may also result in the Department declaring the local government ineligible for further participation in the program until the local government complies with the terms of the Grant award. Prior to termination, the Department shall provide thirty (30) calendar days written notice of its intent to terminate and shall provide the Grantee an opportunity to consult with the Department regarding the reason(s) for termination.
  - B. The Department may terminate this Agreement for convenience by providing the Grantee with thirty (30) calendar days written notice.
- 9. No payment will be made for unsatisfactory deliverables. In the event that a deliverable is deemed unsatisfactory by the Department, the Grantee shall re-perform the services needed for submittal of a satisfactory deliverable, at no additional cost to the Department, within ten (10) days of being notified of the unsatisfactory deliverable. If a satisfactory deliverable is not submitted within the specified timeframe, the Department may, in its sole discretion, either: 1) terminate this Agreement for failure to perform, or 2) the Department Grant Manager may, by letter specifying the failure of performance under this Agreement, request that a proposed Corrective Action Plan (CAP) be submitted by the Grantee to the Department. All CAPs must be able to be implemented and performed in no more than sixty (60) days.
  - A. A CAP shall be submitted within ten (10) calendar days of the date of the letter request from the Department. The CAP shall be sent to the Department Grant Manager for review and approval. Within ten (10) calendar days of receipt of a CAP, the Department shall notify the Grantee in writing whether the CAP proposed has been accepted. If the CAP is not accepted, the Grantee shall have ten (10) calendar days from receipt of the Department letter rejecting the proposal to submit a revised proposed CAP. Failure to obtain the Department approval of a CAP as specified above shall result in the Department's termination of this Agreement for cause as authorized in this Agreement.
  - B. Upon the Department's notice of acceptance of a proposed CAP, the Grantee shall have ten (10) calendar days to commence implementation of the accepted plan. Acceptance of the proposed CAP by the Department does not relieve the Grantee of any of its obligations under the Agreement. In the event the CAP fails to correct or eliminate

Revised 6/13 DEP Agreement No. 429SC, Page 5 of 9 performance deficiencies by Grantee, the Department shall retain the right to require additional or further remedial steps, or to terminate this Agreement for failure to perform. No actions approved by the Department or steps taken by the Grantee shall preclude the Department from subsequently asserting any deficiencies in performance. The Grantee shall continue to implement the CAP until all deficiencies are corrected. Reports on the progress of the CAP will be made to the Department as requested by the Department Grant Manager.

C. Failure to respond to a Department request for a CAP or failure to correct a deficiency in the performance of the Agreement as specified by the Department may result in termination of the Agreement

The remedies set forth above are not exclusive and the Department reserves the right to exercise other remedies in addition to or in lieu of those set forth above, as permitted by the Agreement.

- 10. The Grantee shall obtain all necessary construction-related permits before initiating construction.
- 11. The State of Florida's performance and obligation to pay under this Grant Agreement is contingent upon an annual appropriation by the Legislature.
- 12. This Agreement may be unilaterally canceled by the Department for refusal by the Grantee to allow public access to all documents, papers, letters, or other material made or received by the Grantee in conjunction with this Agreement, unless the records are exempt from Section 24(a) of Article I of the State Constitution and Section 119.07(1)(a), Florida Statutes.
- 13. Pursuant to Section 216.347, Florida Statutes, the Grantee is prohibited from using Grant funds for the purpose of lobbying the Legislature, the judicial branch, or a State Agency.
- 14. To the extent required by law, the Grantee will be self-insured against, or will secure and maintain during the life of this Grant Agreement, Workers' Compensation Insurance for all of its employees connected with the work of this project and, in case any work is subcontracted, the Grantee shall require the subcontractor similarly to provide Workers' Compensation Insurance for all of the latter's employees unless such employees are covered by the protection afforded by the Grantee. Such self-insurance program or insurance coverage shall comply fully with the Florida Workers' Compensation law. In case any class of employees engaged in hazardous work under this Grant Agreement is not protected under Workers' Compensation statutes, the Grantee shall provide, and cause each subcontractor to provide, adequate insurance satisfactory to the Department, for the protection of his employees not otherwise protected.

# 15. For agreements with State of Florida governmental entities that are not self-insured, the following provision may be used:

The Grantee, as an independent contractor and not an agent, representative, or employee of the Department, agrees to carry adequate liability and other appropriate forms of insurance. The Department shall have no liability except as specifically provided in this Agreement.

- 16. Each party hereto agrees that it shall be solely responsible for the negligent or wrongful acts of its employees and agents. However, nothing contained herein shall constitute a waiver by either party of its sovereign immunity or the provisions of Section 768.28, Florida Statutes.
- 17. The Grantee covenants that it presently has no interest and shall not acquire any interest, which would conflict in any manner or degree with the performance of services required.

# 18. If equipment or a vehicle is not authorized for purchase with funds from this Agreement, use the following language:

Reimbursement for equipment or vehicle purchases costing \$1,000 or more is not authorized under the terms and conditions of this Project Agreement.

- 19. A. The Grantee may subcontract work under this Agreement without the prior written consent of the Department's Grant Manager. The Grantee shall submit a copy of the executed subcontract to the Department within ten (10) days after execution. The Grantee agrees to be responsible for the fulfillment of all work elements included in any subcontract and agrees to be responsible for the payment of all monies due under any subcontract. It is understood and agreed by the Grantee that the Department shall not be liable to any subcontractor for any expenses or liabilities incurred under the subcontract and that the Grantee shall be solely liable to the subcontractor for all expenses and liabilities incurred under the subcontract.
  - B. The Department of Environmental Protection supports diversity in its procurement program and requests that all subcontracting opportunities afforded by this Agreement embrace diversity enthusiastically. The award of subcontracts should reflect the full diversity of the citizens of the State of Florida. A list of minority owned firms that could be offered subcontracting opportunities may be obtained by contacting the Office of Supplier Diversity at (850) 487-0915.
- 20. A. No person, on the grounds of race, creed, color, national origin, age, sex, or disability, shall be excluded from participation in; be denied the proceeds or benefits of; or be otherwise subjected to discrimination in performance of this Agreement.
  - B. An entity or affiliate who has been placed on the discriminatory vendor list may not submit a bid on a contract to provide goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not award or perform work as a contractor, supplier, subcontractor, or consultant under contract with any public entity, and may not transact business with any public entity. The Florida Department of Management Services is responsible for maintaining the discriminatory vendor list and intends to post the list on its website. Questions regarding the discriminatory vendor list may be directed to the Florida Department of Management Services, Office of Supplier Diversity, at (850) 487-0915.
- 21. A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not perform work as a Grantee, contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, Florida Statutes, for Category Two, for a period of thirty-six (36) months from the date of being placed on the convicted vendor list.
- 22. The Grantee shall comply with all applicable federal, state and local rules and regulations in conducting the project funded under this Agreement. The Grantee acknowledges that this requirement includes, but is not limited to, compliance with all applicable federal, state and local health and safety rules and regulations. The Grantee further agrees to include this provision in all subcontracts issued as a result of this Grant Agreement.
- 23. The Department may at any time, by written order designated to be a change order, make any change in the contact information identified in Part I of this Agreement. All change orders are subject to the mutual agreement of both parties as evidenced in writing. Any change, which causes an increase or decrease in the Grantee's cost or time, shall require formal amendment to this Agreement.

- 24. Land acquisition is not allowed under the terms of this Agreement.
- 25. This Agreement has been delivered in the State of Florida and shall be construed in accordance with the laws of Florida. Wherever possible, each provision of this Agreement shall be interpreted in such manner as to be effective and valid under applicable law, but if any provision of this Agreement shall be prohibited or invalid under applicable law, such provision shall be ineffective to the extent of such prohibition or invalidity, without invalidating the remainder of such provision or the remaining provisions of this Agreement. Any action hereon or in connection herewith shall be brought in Leon County, Florida.
- 26. This Agreement represents the entire Agreement of the parties. Any alterations, variations, changes, modifications or waivers of provisions of this Agreement shall only be valid when they have been reduced to writing, duly signed by each of the parties hereto, and attached to the original of this Agreement, unless otherwise provided herein.

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#### PART III - OFFER AND ACCEPTANCE

The State of Florida, acting by and through the Department of Environmental Protection, hereby offers assistance to the county of TAYLOR for all allowable costs incurred up to and not exceeding \$90,909.00.

THE STATE OF FLORIDA BY THE DEPARTMENT OF ENVIRONMENTAL PROTECTION:

Secretary or designee

Date

Approved as to form and legality:

This form has been pr-approved as to Form and Leagality by Randy J. Miller II, Senior Attorney, DEP Office of General Counsel, on July 1, 2013 for use for one year.

In accepting this award and any payments made pursuant thereto, (1) the undersigned represents that they are duly authorized to act on behalf of the recipient county, and (2) the Grantee does hereby agree to perform in accordance with the terms and conditions set forth in this Agreement, Attachment A, Grant Work Plan, and all attachments and exhibits named herein which are attached hereto and incorporated by reference. For purposes of this Agreement, the terms "Contract" and "Agreement" and the terms "Grantee", "Recipient" and "Contractor", are used interchangeably.

BY AND ON BEHALF OF THE DESIGNATED RECIPIENT COUNTY:

nature of Authorized Representative ack R. Brown County Administrator

Please return to:

2600 Blair Stone Road

Tallahassee, Florida 32399-2400

JACK R. BROWN COUNTY ADMINISTRATOR TAYLOR COUNTY. FL 201 E. GREEN ST. PERRY, FL 32347 Department of Environmental Protection **Division of Waste Management** Financial Management & Procurement Section - M.S. # 4555

2/11/2014

List of attachments/exhibits included as part of this Agreement:

Specify	Letter/	
Туре	Number	Description (include number of pages)
Attachment	A	Grant Work Plan (4 Pages)
Attachment	В	Reimbursement Request Form and Instructions (2 Pages)
Attachment	С	Contract Payment Requirements (1 Page)
Attachment	D	Progress Report Form (2 Pages)
Attachment	Е	Special Audit Requirements (5 Pages)

## ATTACHMENT A GRANT WORK PLAN

**Project Title**: *Provide a brief title for the project proposed* 429SC-TAYLOR -Small County Consolidated Solid Waste Grant

**Project Location**: Identify the location of the project and include the county/counties involved in the project area. If this project affects water, include the watershed and hydrologic unit code. **Taylor County, Florida** 

**Project Background**: Provide a summary of the site/project area and the justification supporting the need for the Florida Department of Environmental Protection to fund the proposed project.

The Taylor County Board of County Commissioners provides recycling services and waste tire disposal for residents and businesses in the City of Perry and for the unincorporated areas of Taylor County. The Small County Solid Waste Management Grant, administered by the Florida Department of Environmental Protection provides partial funding of these programs. Both programs are necessitated by Legislative action (Solid Waste Management Act of 1988). The legislature budgeted and the Governor approved \$3,000,000 for FY 2013 – 2014 which is divided by 33 counties with populations less than 100,000.

**Project Description:** Provide a detailed description of the work to be performed for the project. Project descriptions should include specific tasks for accomplishing the completion of the project.

The Taylor County Recycling program provides recycling services for county residents and small businesses. Materials such as old newspaper (ONP), corrugated cardboard (OCC), plastic (PETE, HDPE), aluminum cans and metal (ferrous and non-ferrous) are collected throughout the county and brought to a central facility for processing. The materials are either bulked or baled and shipped to a large processor (Newark Recycled Fibers) for final disposition. The County anticipates disposing of 129.53 tons of waste tires FY 2013 – 2014.

Task 1 will provide recycling services for residents and small businesses by funding 3 full time personnel positions for the operation of a recycling and collection facility.

Task 2 will provide for the disposal of waste tires.

**Project Tasks/Deliverables**: Provide a clear, detailed description of the task that is to be completed. Identify deliverables to result from the task. (Examples include: operations logs, sampling reports, hauling and disposal logs, something as proof that the task was completed, etc.) Identify dates for providing the deliverables on a schedule after the date of agreement execution. Payment will only be made upon submittal and approval of deliverable identified for the task. (If the Grantee wants to be reimbursed quarterly then a quarterly deliverable and budget must be provided). Format should appear as follows:

Task # 1

Task Title: Recycling Services for Residents and Small Businesses Task Description: Operation of recycling and collection facility Deliverable Description: Documentation of staff salary and benefit expenditures - Payroll

Reports

## Deliverable Budget: \$65,002.95

**Project Budget Detail:** *Provide budget detail for each deliverable being funded under this* Agreement.

**Salaries:** Provide the positions that will be paid under this Agreement, what their hourly rate is and how many hours it is anticipated they will work on the project. See below

Position	Hours	Hourly	Annual	Fringe Benefits	Total	
		Rate	Salary	,		
Recycling	2080	\$8.28	\$17,222.40	14.6%	\$19,736.87	
Technician				(7.65% FICA		
				6.95%		
				Retirement)=\$2,514.47		
Utilities	2080	\$9.40	\$19,552.00	14.6%	\$22,406.59	
Mechanic				(7.65% FICA		
				6.95%		
				Retirement)=\$2,854.59		
Heavy	2080	\$9.59	\$19,947.20	14.6%	\$22,859.49	
Equipment				(7.65% FICA		
Operator				6.95%		
Operator				Retirement)=\$2,912.29		
Total Salary& Fringe Benefits =					\$65,002.95	

Fringe Benefits: Provide the fringe benefit rate and the benefits included in the rate. 14.6% -See Above

Total Salaries: = \$56,721.60 / 4 Qtrs. = \$14,180.40 Total Fringe := \$ 8,281.35 / 4 Otrs. = \$ 2,070.34 Tot. Sal. & Fr:= \$ 65,002.95/4 Qtrs. = \$16,250.74

Travel: Who is traveling and to where and what task is it under?N/A Contractual: What services will be subcontracted? N/A Equipment: What equipment will be purchased? Equipment is \$1,000 or more per unit cost. This includes vehicles if approved by the Department. N/A Supplies/Other Expenses: What supplies will be purchased? What are the other costs? (rental, postage, copying, any costs other than salaries, fringe benefits, travel, contracted services). N/A

**Performance Measure:** (What criteria will the DEP Grant Manager use to evaluate the deliverable to determine if it is acceptable, receipt is not a performance measure, it should be in compliance with a particular statute or rule)

Task 1: This task fulfills the goals of FS Chapter 62 – 716 with the operation of the County collection and recycling facility. The County recycling rates (21% to 24%) will be maintained and/or increased. As per FS Chapter 62 – 716, the County recycling program serves both the public sector and small private businesses. NOTE: THIS INFORMATION MUST BE PROVIDED FOR EACH TASK.

#### Task # 2

Company	Price per ton	Tonnage	Total Cost
D.E. Barnes	\$200.00	122.53	\$24,506
Aucilla Area Regional Landfill	\$200.00	7	\$1,400
Total Costs			\$25,906

## Task Title: Disposal Waste Tires

## Task Description: Disposal of 129.53 tons of Waste Tires Deliverable Description: Copy of invoices and proof of payment Deliverable Budget: \$25,906.00

**Project Budget Detail:** Provide budget detail for each deliverable being funded under this Agreement. See above.

Salaries: Provide the positions that will be paid under this Agreement, what their hourly rate is and how many hours it is anticipated they will work on the project. N/A

*Fringe Benefits*: Provide the fringe benefit rate and the benefits included in the rate. N/A *Travel:* Who is traveling and to where and what task is it under? N/A

Contractual: What services will be subcontracted?

**Equipment:** What equipment will be purchased? Equipment is \$1,000 or more per unit cost. This includes vehicles if approved by the Department. N/A

Supplies/Other Expenses: What supplies will be purchased? What are the other costs? (rental, postage, copying, any costs other than salaries, fringe benefits, travel, contracted services). N/A

**Performance Measure: :** (What criteria will the DEP Grant Manager use to evaluate the deliverable to determine if it is acceptable, receipt is not a performance measure, it should be in compliance with a particular statute or rule)

Task 2: Will provide for the disposal of 129.53 tons of waste tires in compliance with FS Chapter 62 – 716.620 (b) and (c). The County has no other means of waste disposal other than the collection of tires to be sent to an out-of-county disposal / processing center.

NOTE: THIS INFORMATION MUST BE PROVIDED FOR EACH TASK.

Task No.	Task Title	Start	Complete	Deliverable	Deliverable Due Dates
1	Recycling Service	10/01/2013	09/30/2014	Qtrly Reports with support doc.	Jan. 31 <sup>st</sup> , April 30 <sup>th</sup> , July 31 <sup>st</sup> , Oct. 31 <sup>st</sup> .
2	Waste Tire Dis.	10/01/2013	09/30/2014	Qtrly Reports with support doc.	Jan. 31 <sup>st</sup> , April 30 <sup>th</sup> , July 31 <sup>st</sup> , Oct. 31 <sup>st</sup> .

<b>Total Project Budget:</b>
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...

Budget Category	
	<b>DEP Funding Amount</b>
Salaries:	\$56,721.60
Fringe Benefits:	\$8,281.35
Travel:	
Contractual Services:	
Equipment Purchases	
Supplies/Other Expenses	\$25,906
Land	N/A
Indirect:	N/A
Total Funding Amount:	\$90,908.95 (\$90,909.00)

**Total Budget by Task**: *The tasks identified here should agree with the tasks identified and described above.* 

Task		<b>DEP Funding Amount</b>	
1	Recycling Services	\$65,002.95	
2	Waste Tire Disposal	\$25,906.00	
3			
4			
5			
6			
	Total Funding Amount:	\$90,908.95 (\$90,909.00)	

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## ATTACHMENT B PAYMENT REQUEST SUMMARY FORM

Grantee: TAYLOR COUNTY Mailing Address: 201 East Green St. Perry, FL 32347 DEP Agreement No.: 429SC Date Of Request: Grantee's Grant Manager: Melody Cox Payment Request No.: \_\_\_\_\_

Performance

Task/Deliverable Amount Requested:\$\_\_\_\_\_

•••

rentormance	
Period:	

Task

No.:\_\_\_\_\_

## **GRANT EXPENDITURES SUMMARY SECTION**

[Effective Date of Grant through End-of-Grant Period]					
CATEGORY OF EXPENDITURE	AMOUNT OF THIS REQUEST	TOTAL CUMULATIVE PAYMENTS			
Salaries	\$	\$			
Fringe Benefits	\$	\$			
Travel (if authorized)	\$ N/A	\$ N/A			
Subcontracting:	\$	\$			
	\$	\$			
Waste Tire Disposal – D.E. Barnes	\$	\$			
Waste Tire Disposal – Aucilla	\$	\$			
Supplies/Other Expenses	\$	\$			
	\$	\$			
	\$	\$			
TOTAL AMOUNT	\$	\$			
TOTAL TASK BUDGET AMOUNT	\$ 90,909.00				
Less Total Cumulative Payments of:	\$				
TOTAL REMAINING IN TASK	\$	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			

## **GRANTEE CERTIFICATION**

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The undersigned certifies that the amount being requested for reimbursement above was for items that were charged to and utilized only for the above cited grant activities.

Grantee's Grant Manager's Signature	Grantee's Fiscal Agent		
Print Name	Print Name		
Telephone Number	Telephone Number		

#### INSTRUCTIONS FOR COMPLETING PAYMENT REQUEST SUMMARY FORM

**GRANTEE:** This is the name of the grantee's agency.

MAILING ADDRESS: This is the address that you want the state warrant sent to.

**DEP AGREEMENT NO.:** This is the number on your grant agreement.

DATE OF REQUEST: This is the date you are submitting the request.

**TASK AMOUNT REQUESTED:** This should match the amount on the "TOTAL TASK BUDGET AMOUNT" line for the "AMOUNT OF THIS REQUEST" column.

GRANTEE'S GRANT MANAGER: This should be the person identified as grant manager in the grant Agreement.

**PAYMENT REQUEST NO.:** This is the number of your payment request, not the quarter number.

PERFORMANCE PERIOD: This is the beginning and ending date of the invoice period.

TASK NO.: This is the number of the task that you are requesting payment for.

#### **GRANT EXPENDITURES SUMMARY SECTION:**

"AMOUNT OF THIS REQUEST" COLUMN: Enter the amount that was paid out for this task during the invoice period for which you are requesting reimbursement. This must agree with the budget category as in the currently approved budget in the current Grant Work Plan of your grant Agreement. Do not claim expenses in a budget category that does not have an approved budget. Do not claim items that are not specifically identified in the current Budget Narrative section of the current Grant Work Plan. Enter the column total on the "TOTAL AMOUNT" line. Enter the amount of the task on the "TOTAL TASK BUDGET AMOUNT" line. Enter the total cumulative amount of this request and all previous payments on the "LESS TOTAL CUMULATIVE PAYMENTS OF" line. Deduct the "LESS TOTAL CUMULATIVE PAYMENTS OF" from the "TOTAL TASK BUDGET AMOUNT" for the amount to enter on the "TOTAL REMAINING IN TASK" line.

<u>"TOTAL CUMULATIVE PAYMENTS" COLUMN</u>: Enter the cumulative amounts that have been claimed to date for reimbursement by budget category. The final report should show the total of all payments; first through the final payment (this amount cannot exceed the approved budget amount for that budget category for the task you are reporting on). Enter the column total on the "TOTALS" line. Do not enter anything in the shaded areas.

<u>GRANTEE CERTIFICATION</u>: Must be signed by both the Grantee's Grant Manager as identified in the grant agreement and the Grantee's Fiscal Agent.

NOTE: If claiming reimbursement for travel, you must include copies of receipts and a copy of the travel reimbursement form approved by the Department of Financial Services, Chief Financial Officer.

## ATTACHMENT C

#### Contract Payment Requirements Florida Department of Financial Services, Reference Guide for State Expenditures Cost Reimbursement Contracts

Invoices for cost reimbursement contracts must be supported by an itemized listing of expenditures by category (salary, travel, expenses, etc.) Supporting documentation must be provided for each amount for which reimbursement is being claimed indicating that the item has been paid. Check numbers may be provided in lieu of copies of actual checks. Each piece of documentation should clearly reflect the dates of service. Only expenditures for categories in the approved contract budget should be reimbursed.

Listed below are examples of the types of documentation representing the minimum requirements:

(1) Salaries:	A payroll register or similar documentation should be submitted. The payroll register should show gross salary charges, fringe benefits, other deductions and net pay. If an individual for whom reimbursement is being claimed is paid by the hour, a document reflecting the hours worked times the rate of pay will be acceptable.
(2) Fringe Benefits:	Fringe Benefits should be supported by invoices showing the amount paid on behalf of the employee (e.g., insurance premiums paid). If the contract specifically states that fringe benefits will be based on a specified percentage rather than the actual cost of fringe benefits, then the calculation for the fringe benefits amount must be shown.
	Exception: Governmental entities are not required to provide check numbers or copies of checks for fringe benefits.
(3) Travel:	Reimbursement for travel must be in accordance with Section 112.061, Florida Statutes, which includes submission of the claim on the approved State travel voucher or electronic means.
(4) Other direct costs:	Reimbursement will be made based on paid invoices/receipts. If nonexpendable property is purchased using State funds, the contract should include a provision for the transfer of the property to the State when services are terminated. Documentation must be provided to show compliance with Department of Management Services Rule 60A-1.017, Florida Administrative Code, regarding the requirements for contracts which include services and that provide for the contractor to purchase tangible personal property as defined in Section 273.02, Florida Statutes, for subsequent transfer to the State.
(5) In-house charges:	Charges which may be of an internal nature (e.g., postage, copies, etc.) may be reimbursed on a usage log which shows the units times the rate being charged. The rates must be reasonable.

For contracts between state agencies, and for contracts between universities, alternative documentation may be submitted to substantiate the reimbursement request. This may be in the form of FLAIR reports or other similarly detailed reports.

The Florida Department of Financial Services, online Reference Guide for State Expenditures can be found at this web address: <u>http://www.fldfs.com/aadir/reference\_guide.htm</u>

## ATTACHMENT D

### **PROGRESS REPORT FORM**

<b>DEP Agreement No.:</b>	429SC
Grantee Name:	TAYLOR COUNTY
Grantee Address:	
Grantee's Grant Manager:	Telephone No.:
Reporting Period:	
<b>Project Number and Title:</b>	
	ation for all tasks and deliverables identified in the Grant
	oject accomplishments for the reporting period; a comparison
	goals for the period; if goals were not met, provide reasons
	the estimated time for completion of the task and an
explanation for any anticipate	
NOTE: Use as many pages as	necessary to cover all tasks in the Grant Work Plan.
The following format should b	e followed:
Task 1:	ato da
Progress for this reporting per Identify any delays or problem	
Identity any delays or problem	is encountered:

This report is submitted in accordance with the reporting requirements of DEP Agreement No. 429SC and accurately reflects the activities associated with the project.

Signature of Grantee's Grant Manager

Date

#### ATTACHMENT E

#### SPECIAL AUDIT REQUIREMENTS

The administration of resources awarded by the Department of Environmental Protection (which may be referred to as the "Department", "DEP", "FDEP" or "Grantor", or other name in the contract/agreement) to the recipient (which may be referred to as the "Contractor", Grantee" or other name in the contract/agreement) may be subject to audits and/or monitoring by the Department of Environmental Protection, as described in this attachment.

#### MONITORING

In addition to reviews of audits conducted in accordance with OMB Circular A-133 and Section 215.97, F.S., as revised (see "AUDITS" below), monitoring procedures may include, but not be limited to, on-site visits by Department staff, limited scope audits as defined by OMB Circular A-133, as revised, and/or other procedures. By entering into this Agreement, the recipient agrees to comply and cooperate with any monitoring procedures/processes deemed appropriate by the Department of Environmental Protection. In the event the Department of Environmental Protection determines that a limited scope audit of the recipient is appropriate, the recipient agrees to comply and ditional instructions provided by the Department to the recipient regarding such audit. The recipient further agrees to comply and cooperate with any inspections, reviews, investigations, or audits deemed necessary by the Chief Financial Officer or Auditor General.

#### AUDITS

#### PART I: FEDERALLY FUNDED

This part is applicable if the recipient is a State or local government or a non-profit organization as defined in OMB Circular A-133, as revised.

- 1. In the event that the recipient expends \$500,000 or more in Federal awards in its fiscal year, the recipient must have a single or program-specific audit conducted in accordance with the provisions of OMB Circular A-133, as revised. EXHIBIT 1 to this Agreement indicates Federal funds awarded through the Department of Environmental Protection by this Agreement. In determining the Federal awards expended in its fiscal year, the recipient shall consider all sources of Federal awards, including Federal resources received from the Department of Environmental Protection. The determination of amounts of Federal awards expended should be in accordance with the guidelines established by OMB Circular A-133, as revised. An audit of the recipient conducted by the Auditor General in accordance with the provisions of OMB Circular A-133, as revised, will meet the requirements of this part.
- 2. In connection with the audit requirements addressed in Part I, paragraph 1, the recipient shall fulfill the requirements relative to auditee responsibilities as provided in Subpart C of OMB Circular A-133, as revised.
- 3. If the recipient expends less than \$500,000 in Federal awards in its fiscal year, an audit conducted in accordance with the provisions of OMB Circular A-133, as revised, is not required. In the event that the recipient expends less than \$500,000 in Federal awards in its fiscal year and elects to have an audit conducted in accordance with the provisions of OMB Circular A-133, as revised, the cost of the audit must be paid from non-Federal resources (i.e., the cost of such an audit must be paid from recipient resources obtained from other than Federal entities).
- 4. The recipient may access information regarding the Catalog of Federal Domestic Assistance (CFDA) via the internet at <u>http://12.46.245.173/cfda/cfda.html.</u>

#### PART II: STATE FUNDED

This part is applicable if the recipient is a nonstate entity as defined by Section 215.97(2)(m), Florida Statutes.

- 1. In the event that the recipient expends a total amount of state financial assistance equal to or in excess of \$500,000 in any fiscal year of such recipient, the recipient must have a State single or project-specific audit for such fiscal year in accordance with Section 215.97, Florida Statutes; applicable rules of the Department of Financial Services; and Chapters 10.550 (local governmental entities) or 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General. EXHIBIT 1 to this Agreement indicates state financial assistance awarded through the Department of Environmental Protection by this Agreement. In determining the state financial assistance expended in its fiscal year, the recipient shall consider all sources of state financial assistance, including state financial assistance received from the Department of Environmental Protection, other state agencies, and other nonstate entities. State financial assistance does not include Federal direct or pass-through awards and resources received by a nonstate entity for Federal program matching requirements.
- 2. In connection with the audit requirements addressed in Part II, paragraph 1; the recipient shall ensure that the audit complies with the requirements of Section 215.97(7), Florida Statutes. This includes submission of a financial reporting package as defined by Section 215.97(2), Florida Statutes, and Chapters 10.550 (local governmental entities) or 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General.
- 3. If the recipient expends less than \$500,000 in state financial assistance in its fiscal year, an audit conducted in accordance with the provisions of Section 215.97, Florida Statutes, is not required. In the event that the recipient expends less than \$500,000 in state financial assistance in its fiscal year, and elects to have an audit conducted in accordance with the provisions of Section 215.97, Florida Statutes, the cost of the audit must be paid from the non-state entity's resources (i.e., the cost of such an audit must be paid from the recipient's resources obtained from other than State entities).
- 4. For information regarding the Florida Catalog of State Financial Assistance (CSFA), a recipient should access the Florida Single Audit Act website located at <u>https://apps.fldfs.com/fsaa</u> for assistance. In addition to the above websites, the following websites may be accessed for information: Legislature's Website at <u>http://www.leg.state.fl.us/Welcome/index.cfm</u>, State of Florida's website at <u>http://www.myflorida.com/</u>, Department of Financial Services' Website at <u>http://www.fldfs.com/</u> and the Auditor General's Website at <u>http://www.state.fl.us/audgen</u>.

#### PART III: OTHER AUDIT REQUIREMENTS

(NOTE: This part would be used to specify any additional audit requirements imposed by the State awarding entity that are solely a matter of that State awarding entity's policy (i.e., the audit is not required by Federal or State laws and is not in conflict with other Federal or State audit requirements). Pursuant to Section 215.97(8), Florida Statutes, State agencies may conduct or arrange for audits of State financial assistance that are in addition to audits conducted in accordance with Section 215.97, Florida Statutes. In such an event, the State awarding agency must arrange for funding the full cost of such additional audits.)

#### PART IV: REPORT SUBMISSION

1. Copies of reporting packages for audits conducted in accordance with OMB Circular A-133, as revised, and required by PART I of this Attachment shall be submitted, when required by Section .320 (d), OMB Circular A-133, as revised, by or on behalf of the recipient <u>directly</u> to each of the following:

A. The Department of Environmental Protection at the following address:

Audit Director Florida Department of Environmental Protection Office of the Inspector General, MS 40 3900 Commonwealth Boulevard Tallahassee, Florida 32399-3000

B. The Federal Audit Clearinghouse designated in OMB Circular A-133, as revised (the number of copies required by Sections .320 (d)(1) and (2), OMB Circular A-133, as revised, should be submitted to the Federal Audit Clearinghouse), at the following address:

Federal Audit Clearinghouse Bureau of the Census 1201 East 10th Street Jeffersonville, IN 47132

Submissions of the Single Audit reporting package for fiscal periods ending on or after January 1, 2008, must be submitted using the Federal Clearinghouse's Internet Data Entry System which can be found at <u>http://harvester.census.gov/fac/</u>

- C. Other Federal agencies and pass-through entities in accordance with Sections .320 (e) and (f), OMB Circular A-133, as revised.
- 2. Pursuant to Section .320(f), OMB Circular A-133, as revised, the recipient shall submit a copy of the reporting package described in Section .320(c), OMB Circular A-133, as revised, and any management letters issued by the auditor, to the Department of Environmental Protection at the following address:

Audit Director Florida Department of Environmental Protection Office of the Inspector General, MS 40 3900 Commonwealth Boulevard Tallahassee, Florida 32399-3000

- 3. Copies of financial reporting packages required by PART II of this Attachment shall be submitted by or on behalf of the recipient <u>directly</u> to each of the following:
  - A. The Department of Environmental Protection at the following address:

Audit Director Florida Department of Environmental Protection Office of the Inspector General, MS 40 3900 Commonwealth Boulevard Tallahassee, Florida 32399-3000

B. The Auditor General's Office at the following address:

State of Florida Auditor General Room 401, Claude Pepper Building 111 West Madison Street Tallahassee, Florida 32399-1450

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DEP 55-215 (03/09) DEP Agreement No. 429SC, Attachment E, Page 3 of 5 4. Copies of reports or management letters required by PART III of this Attachment shall be submitted by or on behalf of the recipient <u>directly</u> to the Department of Environmental Protection at the following address:

Audit Director Florida Department of Environmental Protection Office of the Inspector General, MS 40 3900 Commonwealth Boulevard Tallahassee, Florida 32399-3000

- 5. Any reports, management letters, or other information required to be submitted to the Department of Environmental Protection pursuant to this Agreement shall be submitted timely in accordance with OMB Circular A-133, Florida Statutes, or Chapters 10.550 (local governmental entities) or 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General, as applicable.
- 6. Recipients, when submitting financial reporting packages to the Department of Environmental Protection for audits done in accordance with OMB Circular A-133, or Chapters 10.550 (local governmental entities) or 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General, should indicate the date that the reporting package was delivered to the recipient in correspondence accompanying the reporting package.

#### PART V: RECORD RETENTION

The recipient shall retain sufficient records demonstrating its compliance with the terms of this Agreement for a period of **5** years from the date the audit report is issued, and shall allow the Department of Environmental Protection, or its designee, Chief Financial Officer, or Auditor General access to such records upon request. The recipient shall ensure that audit working papers are made available to the Department of Environmental Protection, or its designee, Chief Financial Officer, or Auditor General upon request for a period of **3** years from the date the audit report is issued, unless extended in writing by the Department of Environmental Protection.

#### REMAINDER OF PAGE INTENTIONALLY LEFT BLANK

#### EXHIBIT – 1

## FUNDS AWARDED TO THE RECIPIENT PURSUANT TO THIS AGREEMENT CONSIST OF THE FOLLOWING:

Federal Resou	Federal Resources Awarded to the Recipient Pursuant to this Agreement Consist of the Following:							
Federal					State			
Program		CFDA			Appropriation			
Number	Federal Agency	Number	CFDA Title	Funding Amount	Category			

State Resourc	es Awarded to the Recipient	Pursuant to this A	Agreement Consist of the Following Matching Resourc	es for Federal Progra	ims:
Federal					State
Program					Appropriation
Number	Federal Agency	CFDA	CFDA Title	Funding Amount	Category

State Resourc	es Awarded to the Recipient I	Pursuant to this A	Agreement Co	nsist of the Following Resources Subject	to Section 215.97, F.S.	S.:
State				CSFA Title		State
Program		State	CSFA	or		Appropriation
Number	Funding Source	Fiscal Year	Number	Funding Source Description	Funding Amount	Category
Original	Solid Waste Management	2013-2014	37.012	Small County Consolidated Grants	\$90,909.00	140134
Agreement	Trust Fund, Line Item 1671					

Total Award \$90,909.00

For each program identified above, the recipient shall comply with the program requirements described in the Catalog of Federal Domestic Assistance (CFDA) [http://12.46.245.173/cfda/cfda.html] and/or the Florida Catalog of State Financial Assistance (CSFA) [https://apps.fldfs.com/fsaa/searchCatalog.aspx]. The services/purposes for which the funds are to be used are included in the Contract scope of services/work. Any match required by the recipient is clearly indicated in the Contract.

DEP 55-215 (03/09) DEP Agreement No. 429SC, Attachment E, Page 5 of 5

<b>—</b> • • •	
	YLOR COUNTY BOARD OF COMMISSIONERS County Commission Agenda Item
SUBJECT/TITLE:	Board to approve Satisfaction of Repayment Agreement for Glenda Smith who received rehabilitation assistance through the SHIP
	Program January 15, 2009.
MEETING DATE R	EQUESTED: February 18, 2014
	Board to approve Satisfaction of Repayment Agreement for
	Glenda Smith who received rehabilitation assistance through the SHIP Program, January 15, 2009 in the amount of \$12,637.00 All terms of the Agreement have been satisfied.
	<ul> <li>through the SHIP Program, January 15, 2009 in the amount of \$12,637.00 All terms of the Agreement have been satisfied.</li> <li>tion: Approve Satisfaction of Repayment Agreement</li> </ul>
Fiscal Impact: Not	<ul> <li>through the SHIP Program, January 15, 2009 in the amount of \$12,637.00 All terms of the Agreement have been satisfied.</li> <li>tion: Approve Satisfaction of Repayment Agreement</li> <li>Applicable</li> </ul>
Fiscal Impact: Not Submitted By: Mel	through the SHIP Program, January 15, 2009 in the amount of \$12,637.00 All terms of the Agreement have been satisfied. tion: Approve Satisfaction of Repayment Agreement Applicable ody Cox
Recommended Ac Fiscal Impact: Not Submitted By: Mel Contact: Melody C	through the SHIP Program, January 15, 2009 in the amount of \$12,637.00 All terms of the Agreement have been satisfied. tion: Approve Satisfaction of Repayment Agreement Applicable ody Cox
Fiscal Impact: Not Submitted By: Melo Contact: Melody C	through the SHIP Program, January 15, 2009 in the amount of \$12,637.00 All terms of the Agreement have been satisfied. tion: Approve Satisfaction of Repayment Agreement Applicable ody Cox
Fiscal Impact: Not Submitted By: Melo Contact: Melody C	through the SHIP Program, January 15, 2009 in the amount of \$12,637.00 All terms of the Agreement have been satisfied. tion: Approve Satisfaction of Repayment Agreement Applicable ody Cox Cox SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS sues: Ms. Smith received rehabilitation assistance through the SHIP Program in the amount of \$12.637.00 January 15, 2009. All terms of the Repayment Agreement have beer satisfied.
Fiscal Impact: Not Submitted By: Melo Contact: Melody C	through the SHIP Program, January 15, 2009 in the amount of \$12,637.00 All terms of the Agreement have been satisfied. tion: Approve Satisfaction of Repayment Agreement t Applicable ody Cox Cox SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS sues: Ms. Smith received rehabilitation assistance through the SHIP Program in the amount of \$12.637.00 January 15, 2009. All terms of the Repayment Agreement have beer
Fiscal Impact: Not Submitted By: Melo Contact: Melody C	through the SHIP Program, January 15, 2009 in the amount of \$12,637.00 All terms of the Agreement have been satisfied. tion: Approve Satisfaction of Repayment Agreement Applicable ody Cox Cox SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS sues: Ms. Smith received rehabilitation assistance through the SHIP Program in the amount of \$12.637.00 January 15, 2009. All terms of the Repayment Agreement have beer satisfied.

#### SATISFACTION OF REPAYMENT AGREEMENT

**KNOW ALL MEN BY THESE PRESENTS:** That We, **TAYLOR COUNTY, FLORIDA**, the owners and holders of a certain Taylor County Rehabilitation Program Ship Program Repayment Agreement executed by **GLENDA SMITH** bearing date the 15th day of January, A. D. 2009, recorded in Official Records Book 645, page 828, in the office of the Clerk of the Circuit Court of Taylor County, State of Florida, securing a sum of \$12,637.00, and certain promises and obligations set forth in said Repayment Agreement, upon the property situate in said State and County described as follows, to-wit:

106 El Rancho Drive, Perry, Florida 32347

hereby acknowledge full payment and satisfaction of said note and mortgage deed, and surrender the same as cancelled, and hereby direct the Clerk of the said Circuit Court to cancel the same of record.

WITNESS my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, 2014.

Signed, Sealed and Delivered in Presence of:

(SEAL)

MALCOLM PAGE, Chairperson BOARD OF COUNTY COMMISSION TAYLOR COUNTY, FLORIDA

ATTEST:

ANNIE MAE MURPHY, Clerk

STATE OF FLORIDA COUNTY OF TAYLOR

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid, to take acknowledgments, personally appeared MALCOLM PAGE, to me known to be the person described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this \_\_\_\_\_ day of \_\_\_\_\_, 2014.

#### NOTARY PUBLIC

My Commission Expires:

PREPARED BY: Conrad C. Bishop, Jr. Attorney at Law Post Office Box 167 Perry, Florida 32348

TAY	LOR COUNTY BOARD OF COMMISSIONERS
	County Commission Agenda Item
SUBJECT/TITLE:	Board to approve Satisfaction of Repayment Agreement for DeVarn McMiller who received rehabilitation assistance through the SHIP Program January 15, 2009.
MEETING DATE RE	EQUESTED: February 18, 2014
Statement of Issue:	: Board to approve Satisfaction of Repayment Agreement for DeVarn McMiller who received rehabilitation assistance through the SHIP Program, January 15, 2009 in the amount of \$22,400.00 All terms of the Agreement have been satisfied.
Recommended Act Fiscal Impact: Not	
Submitted By: Melo	ody Cox
Contact: Melody C	οχ
ę	
-	SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS
- History, Facts & Iss	
	sues: Mr. McMiller received rehabilitation assistance through the SHIP Program in the amount of \$22,400.00, January 15, 2009. All terms of the Repayment Agreement have been
	sues: Mr. McMiller received rehabilitation assistance through the SHIP Program in the amount of \$22,400.00, January 15, 2009. All terms of the Repayment Agreement have been satisfied.
	sues: Mr. McMiller received rehabilitation assistance through the SHIP Program in the amount of \$22,400.00, January 15, 2009. All terms of the Repayment Agreement have been satisfied.
	sues: Mr. McMiller received rehabilitation assistance through the SHIP Program in the amount of \$22,400.00, January 15, 2009. All terms of the Repayment Agreement have been satisfied.
	sues: Mr. McMiller received rehabilitation assistance through the SHIP Program in the amount of \$22,400.00, January 15, 2009. All terms of the Repayment Agreement have been satisfied.
	sues: Mr. McMiller received rehabilitation assistance through the SHIP Program in the amount of \$22,400.00, January 15, 2009. All terms of the Repayment Agreement have been satisfied.

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#### SATISFACTION OF REPAYMENT AGREEMENT

**KNOW ALL MEN BY THESE PRESENTS:** That We, **TAYLOR COUNTY, FLORIDA**, the owners and holders of a certain Taylor County Rehabilitation Program Ship Program Repayment Agreement executed by **DEVARN McMILLER** bearing date the 15th day of January, A. D. 2009, recorded in Official Records Book 645, page 827, in the office of the Clerk of the Circuit Court of Taylor County, State of Florida, securing a sum of \$22,400.00, and certain promises and obligations set forth in said Repayment Agreement, upon the property situate in said State and County described as follows, to-wit:

1009 East Bay Street, Perry, Florida 32347

hereby acknowledge full payment and satisfaction of said note and mortgage deed, and surrender the same as cancelled, and hereby direct the Clerk of the said Circuit Court to cancel the same of record.

WITNESS my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, 2014.

Signed, Sealed and Delivered in Presence of:

\_(SEAL)

MALCOLM PAGE, Chairperson BOARD OF COUNTY COMMISSION TAYLOR COUNTY, FLORIDA

ATTEST:

ANNIE MAE MURPHY, Clerk

STATE OF FLORIDA COUNTY OF TAYLOR

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid, to take acknowledgments, personally appeared MALCOLM PAGE, to me known to be the person described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this \_\_\_\_\_ day of \_\_\_\_\_, 2014.

#### NOTARY PUBLIC

My Commission Expires:

PREPARED BY: Conrad C. Bishop, Jr. Attorney at Law Post Office Box 167 Perry, Florida 32348

	(14)
	TAYLOR COUNTY BOARD OF COMMISSIONERS
	County Commission Agenda Item
SUBJECT/TITL	
Meeting Date:	2/3/14
Statement of Is financial data reporte	
Recommendati	on: Approval of Contract Amendments via consent agenda
Fiscal Impact:	\$ _0       Budgeted Expense: Yes X       No        N/A
Submitted By:	Dawn Gunter, Business Manager for Padraic Juarez, Administrator
Contact:	Dawn Gunter 584-5087, press #, ext. 131 or Padraic Juarez, ext. 142
	SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS
History, Facts 8	
	& Issues:
	1.
Options:	1.
Options:	
Options: Attachments:	1.
Options:	1.

## Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Rick Scott Governor

John H. Armstrong, MD, FACS State Surgeon General & Secretary

Vision: To be the Healthiest State in the Nation

January 21, 2014

The Honorable Malcolm Page, Chairman Taylor County Board of County Commissioners Post Office Box 620 Perry, FL 32348

RE: FY 2012-13 Contract between the Taylor Board of County Commissioners and the Department of Health for operation of the Taylor County Health Department

Dear Chairman Page:

As specified in paragraph 4, section d, of the above referenced contract, either party may increase or decrease funds to the contract upon written notification to the other party. Please find the following:

- An updated summary of funding revisions
- Page 2 of the contract reflecting updated funding adjustments
- Revised Attachment II, Parts II and III, incorporating the changes indicated in the summary and covering the period subsequent to the contract amendment
- A revised Attachment II, Part I, and Attachment V updating planned special projects

If you have any questions, please feel free to contact me at (850) 584-5087, extension 142.

Sincerely,

Padraic Juarez, Interim Administrator Taylor County Health Department

Enclosures

Cc: Beth Benton, Bureau of Budget Management

funds and shall include those services mandated on a state or federal level. Examples of environmental health services include, but are not limited to, food hygiene, safe drinking water supply, sewage and solid waste disposal, swimming pools, group care facilities, migrant labor camps, toxic material control, radiological health, occupational health.

b. "Communicable disease control services" are those services which protect the health of the general public through the detection, control, and eradication of diseases which are transmitted primarily by human beings. Communicable disease services shall be supported by available federal, state, and local funds and shall include those services mandated on a state or federal level. Such services include, but are not limited to, epidemiology, sexually transmissible disease detection and control, HIV/AIDS, immunization, tuberculosis control and maintenance of vital statistics.

c. "Primary care services" are acute care and preventive services that are made available to well and sick persons who are unable to obtain such services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services shall be supported by available federal, state, and local funds and shall include services mandated on a state or federal level. Examples of primary health care services include, but are not limited to: first contact acute care services; chronic disease detection and treatment; maternal and child health services; family planning; nutrition; school health; supplemental food assistance for women, infants, and children; home health; and dental services.

4. <u>FUNDING</u>. The parties further agree that funding for the CHD will be handled as follows:

a. The funding to be provided by the parties and any other sources are set forth in Part II of Attachment II hereof. This funding will be used as shown in Part I of Attachment II.

*i.* The State's appropriated responsibility (direct contribution excluding any state fees, Medicaid contributions or any other funds not listed on the Schedule C) as provided in Attachment II, Part II is an amount not to exceed \$1,175,662.00 (State General Revenue, Other State Funds and Federal Funds listed on the Schedule C). The State's obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.

*ii.* The County's appropriated responsibility (direct contribution excluding any fees, other cash or local contributions) as provided in Attachment II, Part II is an amount not to exceed \$50,000.00 (amount listed under the "Board of County Commissioners Annual Appropriations section of the revenue attachment).

Summary of Funding Revisions The Florida Department of Health in Taylor County Funding Revisions for Contract Year 2013-2014

# As of December 31, 2013

		Previous	Updated		
Program		10/1/2013	12/31/2013	In	crease/Decrease
County Drawdown	400	\$ -	\$ 203,256.00	\$	203,256.00
Medicaid		\$ 475,978.00	\$ 438,046.00	\$	(37,932.00)
State Drawdown	400	\$ -	\$ (203, 256.00)	\$	(203, 256.00)
Community Needs Assessment	238	\$ 46,398.00	\$ 55,603.00	\$	9,205.00
Dental Special Projects	240			\$	•
Non-Categorical	400	\$ 347,091.00	\$ 370,104.00	\$	23,013.00
Tobacco Prevention	212	\$ 116,830.00	\$ 113,861.00	\$	(2,969.00)
Chronic Disease	210	\$ 8,000.00	\$ 20,505.00	\$	12,505.00
County Fees		\$ 63,990.00	\$ 53,722.00	\$	(10, 268.00)
Total		\$ 1,058,287.00	\$ 1,051,841.00	\$	(6,446.00)

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# TAYLOR COUNTY HEALTH DEPARTMENT

# PART I. PLANNED USE OF COUNTY HEALTH DEPARTMENT TRUST FUND BALANCES

	Estimated State Share of CHD Trust Fund Balance	Estimated County Share of CHD Trust Fund Balance	Total
1. CHD Trust Fund Ending Balance 09/30/13	28,656	167,505	196,161
<ol> <li>Drawdown for Contract Year October 1, 2013 to September 30, 2014</li> </ol>	-203256	203256	0
<ol> <li>Special Capital Project use for Contract Year October 1, 2013 to September 30, 2014</li> </ol>			
4. Balance Reserved for Contingency Fund October 1, 2013 to September 30, 2014	-174,600	370,761	196,161

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects, and mobile health vans.

# TAYLOR COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

# October 1, 2013 to September 30, 2014

		State CHD Trust Fund	County CHD	Total CHD Trust Fund	Other	
1 CENER	AL REVENUE - STATE	(cash)	Trust Fund	(cash)	Contribution	Total
I. GENEN	AL REVENUE - STATE					
015040	AIDS PREVENTION	0	0	0	0	0
015040	ALG/CESSPOOL IDENTIFICATION AND ELIMINATION	0	0	0	0	0
015040	ALG/CONTR TO CHDS-AIDS PATIENT CARE NETWORK	0	0	0	0	0
015040	ALG/IPO HEALTHY START/IPO	0	0	0	0	0
015040	COMMUNITY SMILES - MIAMI-DADE	0	0	0	0	0
015040	COUNTY SPECIFIC DENTAL PROJECTS - ESCAMBIA	0	0	0	0	0
015040	DUVAL TEEN PREGANCY PREVENTION - DUVAL	0	0	0	0	0
015040	FL CLPPP SCREENING & CASE MANAGEMENT	0	0	0	0	0
015040	HEALTHY START GENERAL REVENUE CHD	0	0	0	0	0
015040	HEALTHY START MED-WAIVER - CLIENT SERVICES	0	0	0	0	0
015040	LA LIGA-LEAGUE AGAINST CANCER - MIAMI-DADE	0	0	0	0	0
015040	METRO ORLANDO URBAN LEAGUE - ORANGE	0	0	0	0	0
015040	MINORITY OUTREACH-PENALVER CLINIC - MIAMI-DADE	0	0	0	0	0
015040	PREPAREDNESS GRANT MATCH	0	0	0	0	0
015040	SCHOOL HEALTH GENERAL REVENUE	54,941	0	54,941	0	54,941
015040	STATEWIDE DENTISTRY NETWORK - ESCAMBIA	0	0	0	0	0
015040	STD GENERAL REVENUE	0	0	0	0	0
015040	TREASURE COAST MIDWIFERY - MARTIN	0	0	0	0	0
015040	AIDS SURVEILLANCE	0	0	0	0	0
015040	ALG/CONTR TO CHDS-AIDS PATIENT CARE	0	0	0	0	0
015040	ALG/CONTR TO CHDS-SOVEREIGN IMMUNITY	0	0	0	0	0
015040	ALG/PRIMARY CARE	112,960	0	112,960	0	112,960
015040	COMMUNITY TB PROGRAM	3,000	0	3,000	0	3,000
015040	DENTAL SPECIAL INITIATIVES	6,542	0	6,542	0	6,542
015040	FAMILY PLANNING GENERAL REVENUE	26,953	0	26,953	0	26,953
015040	FL HEPATITIS & LIVER FAILURE PREVENTION/CONTROL	0	0	0	0	0
015040	HEALTHY START MED WAIVER - SOBRA	0	0	0	0	0
015040	JESSIE TRICE CANCER CTR/HEALTH CHOICE - MIAMI-DADE	0	0	0	0	0
015040	MANATEE COUNTY RURAL HEALTH SERVICES	0	0	0	0	0
015040	MIGRANT LABOR CAMP SANITATION	0	0	0	0	0
015050	NON-CATEGORICAL GENERAL REVENUE	370,104	0	370,104	0	370,104
GENERAL I	REVENUE TOTAL	574,500	0	574,500	0	574,500
2 NON GE	NERAL REVENUE - STATE			·		
2. NON GE						
015010	ALG/CONTR. TO CHDS-BIOMEDICAL WASTE	1,580	0	1,580	0	1,580
015010	FOOD AND WATERBORNE DISEASE PROGRAM ADM TF/DACS	0	0	0	0	0
015010	PREPAREDNESS GRANT MATCH	0	0	0	0	0
015010	SCHOOL HEALTH TOBACCO TF	17,573	0	17,573	0	17,573
015010	TOBACCO COMMUNITY INTERVENTION	113,861	0	113,861	0	113,861
015010	ALG/CONTR. TO CHDS-SAFE DRINKING WATER PRG	0	0	0	0	0
015010	MEDICAID INCENTIVE FOR ELECTRONIC HEALTH RECORDS	55,603	0	55,603	0	55.603
015010	PUBLIC SWIMMING POOL PROGRAM	0	0	0	0	0
015010	DOH INDIRECT	23,491	0	23,491	0	23,491
015020	TRANSFER FROM ANOTHER STATE AGENCY	0	0	0	0	0
015020	TRANSFER FROM ANOTHER STATE AGENCY	0	0	0	0	0
015020	TRANSFER FROM ANOTHER STATE AGENCY	0	0	0	0	0
015060	NON-CATEGORICAL TOBACCO REBASING	3.711	0	3,711	0	3,711

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# TAYLOR COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

# October 1, 2013 to September 30, 2014

		State CHD Trust Fund (cash)	County CHD Trust Fund	Totai CHD Trust Fund (cash)	Other Contribution	Total
NON GENE	CRAL REVENUE TOTAL	215,819	0	215,819	0	215,819
	AL FUNDS - State			210,017		
007000	ABSTINENCE EDUCATION GRANT PROGRAM	0	0	0	0	0
007000	AIDS PREVENTION	0	0	0	0	0
007000	BIOTERRORISM HOSPITAL PREPAREDNESS	0	0	0	0	0
007000	COASTAL BEACH MONITORING PROGRAM	0	0	0	0	0
007000	DENTAL SERVICES	0	0	0	0	0
007000	EPIDEMIOLOGY & LABORATORY CAPACITY FOR INFECTIOUS	0	0	0	0	0
007000	EXPANDED TESTING INITIATIVE (ETI)	0	0	0	0	0
007000	FGTF/BREAST & CERVICAL CANCER-ADMIN/CASE MAN	0	0	0	0	0
007000	HEPATITIS B VACCINATION PILOT PROJECT	0	0	0	0	0
007000	IMMUNIZATION AFIX	0	0	0	0	0
007000	IMMUNIZATION FIELD STAFF EXPENSE	0	0	0	0	0
007000	MCH BGTF-HEALTHY START COALITIONS	0	0	0	0	0
007000	MINORITY AIDS INITIATIVE	0	0	0	0	0
007000	MINORITY INVOLVEMENT IN HIV/AIDS PROGRAM	0	0	0	0	0
007000	PREGNANCY ASSOCIATED MORTALITY PREVENTION	0	0	0	0	0
007000	PUBLIC HEALTH PREPAREDNESS BASE	0	0	0	0	0
007000	RYAN WHITE	0	0	0	0	0
007000	RYAN WHITE-AIDS DRUG ASSIST PROG-ADMIN	13,571	0	13,571	0	13,571
007000	STATE OFFICE OF RURAL HEALTH	0	0	0	0	0
007000	STD FEDERAL GRANT - CSPS	0	0	0	0	0
007000	SYPHILIS ELIMINATION	0	0	0	0	0
007000	TOBACCO FAITH BASED PROJECT	0	0	. • 0	0	0
007000	UNINTENDED/UNWANTED PREG-TEEN PREGNANCY PREV	17,167	0	17,167	0	17,167
007000	WIC BREASTFEEDING PEER COUNSELING	0	0	0	0	0
007000	ADULT VIRAL HEPATITIS PREVENTION & SURVEILLANCE	0	0	0	0	0
007000	AIDS SURVEILLANCE	0	0	0	0	0
007000	CHRONIC DISEASE PREVENTION & HEALTH PROMOTION	20,505	0	20,505	0	20,505
007000	COLORECTAL CANCER SCREENING	0	0	0	0	0
007000	ENHANCE COMPREHENSIVE PREVENTION PLANNING AND IMP	L 0	0	0	0	0
007000	EPIDEMIOLOGY & LABORATORY CAPACITY HAI	0	0	0	0	0
007000	FGTF/AIDS MORBIDITY	0	0	0	0	0
007000	FGTF/FAMILY PLANNING-TITLE X	51,319	0	51,319	0	51,319
007000	HIV HOUSING FOR PEOPLE LIVING WITH AIDS	0	0	0	0	0
007000	IMMUNIZATION FEDERAL GRANT ACTIVITY SUPPORT	2,433	0	2,433	0	2,433
007000	MCH BGTF-GADSDEN SCHOOL CLINIC	0	0	0	0	0
007000	MEDICARE RURAL HOSPITAL FLEXIBILITY PROGRAM	0	0	0	0	0
007000	MINORITY AIDS INITIATIVE TCE COLLABORATIVE	0	0	0	0	0
007000	PHP - CITIES READINESS INITIATIVE	0	0	0	0	0
007000	PUBLIC HEALTH INFRASTRUCTURE	0	0	0	0	0
007000	RAPE PREVENTION & EDUCATION	0	0	0	0	0
007000	RYAN WHITE - EMERGING COMMUNITIES	0	0	0	0	0
007000	RYAN WHITE-CONSORTIA	0	0	0	0	0
007000	STATEWIDE ASTHMA PROGRAM	0	0	0	0	0
007000	STD PROGRAM INFERTILITY PREVENTION PROJECT (IPP)	0	0	0	0	0
007000	TEENAGE PREGNANCY PREVENTION REPLICATION	67,103	0	67,103	0	67,103
007000	TUBERCULOSIS CONTROL - FEDERAL GRANT	0	0	0	0	0

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# TAYLOR COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

# October 1, 2013 to September 30, 2014

015075       SCHOOL HEALTH       0       0       0         015075       SCHOOL HEALTH       0       0       0         015075       SCHOOL HEALTH       0       0       0         915075       SCHOOL HEALTH       0       0       0       0         91020       PUBLIC WATER ANNUAL OPER PERMIT       0       0       0       0         901020       BODY PIERCING       135       0       135       0       135       0         901020       BODY PIERCING       135       0       135       0       0       0       0       0       0         901020       MOBLE HOME AND PARKS       3146       0       34,600       0 <t< th=""><th></th><th></th><th>State CHD Trust Fund (cash)</th><th>County CHD Trust Fund</th><th>Total CHD Trust Fund (cash)</th><th>Other Contribution</th><th>Total</th></t<>			State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
01509 MEDPASS WAVER-HLTHY STRT CLIENT SERVICES 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	3. FEDE	RAL FUNDS - State					
015009       MEDPASS WAVER-HUTHY STRT CLENT SERVICES       0       0       0         01509       MEDPASS WAVER-SOBRA       0       0       0         015075       SCHOOL HEALTH TITLE XN       213,245       0       213,245       0       213,245       0 <t< th=""><th>007000</th><th>WIC ADMINISTRATION</th><th>0</th><th>0</th><th>0</th><th>0</th><th>0</th></t<>	007000	WIC ADMINISTRATION	0	0	0	0	0
015000       MEDIPASS WAVER SOBRA       0       0       0       0         007053       ARRA FEDERAL GRANT - SCHEDULE C       0 <td< td=""><td>015009</td><td>MEDIPASS WAIVER-HLTHY STRT CLIENT SERVICES</td><td>0</td><td></td><td></td><td></td><td>0</td></td<>	015009	MEDIPASS WAIVER-HLTHY STRT CLIENT SERVICES	0				0
007035       ARA FEDERAL GRANT - SCHEDULE C       0       0       0       0         015075       SCHOOL HEALTH TITLE XXI       213,245       0       213,245       0       0         015075       SCHOOL HEALTH       0       0       0       0         4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE       0       0       0       0         001020       DUDY ART FACILITIES       288       0       288       0         001020       BODY PERCINO       135       0       135       0         001020       BODY PERCINO       135       0       135       0         001020       BODY PERCINO       135       0       0       0       0         001020       MORE HOME AND PARKS       3.146       0       3.600       0       0       0         001020       ROBIN HOMSING WATE       3.600       0       0       0       0       0       0       0       0	015009	MEDIPASS WAIVER-SOBRA	0	0	-	0	0
015075       SCHOOL HEALTH TITLE XXI       213,245       0       213,245       0       213,245       0       213,245       0       0       0         015075       SCHOOL HEALTH       0	007055	ARRA FEDERAL GRANT - SCHEDULE C	0	0	-	0	0
015075       SCHOOL HEALTH       0       0       0         015075       SCHOOL HEALTH       0       0       0         015075       SCHOOL HEALTH       0       0       0       0         FEDERAL FUNDS TOTAL       385.343       0       36.30       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0       0	015075	SCHOOL HEALTH TITLE XXI	213,245	0	-	-	213,245
015075       SCHOOL HEALTH       0       0       0         015075       SCHOOL HEALTH       0       0       0       0         FEDERAL FUNDS TOTAL       385,343       0       3	015075	SCHOOL HEALTH		0		0	0
015073       SCHOOL HEALTH       0       0       0         FEDERAL FUNDS TOTAL       385,343       0       385,343       0       385,343       0       385         4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE       0 </td <td>015075</td> <td>SCHOOL HEALTH</td> <td>0</td> <td>0</td> <td>-</td> <td>0</td> <td>0</td>	015075	SCHOOL HEALTH	0	0	-	0	0
A FEES ASSESSED BY STATE OR FEDERAL RULES - STATE 001020 PUBLIC WATER ANNUAL OPER PERMIT 0 0 0 0 0 001020 BODY ART FACILITIES 288 0 288 0 001020 BODY PERCING 135 0 135 0 001020 MOBILE HOME AND PARKS 3,146 0 3,146 0 001020 BIOHAZARD WASTE PERMIT 680 0 680 0 001020 BIOHAZARD WASTE PERMIT 680 0 0 001020 PINATE WATER CONSTR PERMIT 0 0 0 0 001020 PINATE WATER CONSTR PERMIT 0 0 0 0 001020 PINATE WATER CONSTR PERMIT 0 0 0 0 001020 SAFE DEINKING WATER 891 0 001020 SAFE DEINKING WATER 891 0 001020 OSIS PERMIT 9 0 0 0 001020 PINATE WATER CONSTR PERMIT 0 0 0 0 001020 SAFE DEINKING WATER 891 0 001020 SAFE DEINKING WATER 891 0 001020 SAFE DEINKING WATER 991 0 001020 SAFE DEINKING WATER 991 0 001022 ALEO DEINATING FERMIT 0 0 0 0 0 001092 ALEO DEINATING FERMIT 0 0 0 0 001092 ALEO DEINATING FERMIT 0 0 0 0 001092 ILE WATER CONSTR PERMIT 0 0 0 001092 ILE WATER ANALYSIS 0 0 0 0 0 001092 OSIS VARIANCE FEE 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	015075	SCHOOL HEALTH	0	0	-	0	0
001020         PUBLIC WATER ANNUAL OPER PERMIT         0         0         0           001020         BODY ART FACILITIES         288         0         2475         0           001020         BODY PERCING         135         0         135         0           001020         BODY PERCING         135         0         135         0           001020         BODY ART FACILITIES         3146         0         3,146         0           001020         BIOHAZARD WASTE PERMIT         680         0         680         0           001020         TANING FACILITIES         567         0         567         0           001020         FORD HYGENC PERMIT         0         0         0         0         0           001020         FORD HYGENC PERMIT         0 <td>FEDERAI</td> <td>FUNDS TOTAL</td> <td>385,343</td> <td>0</td> <td>385,343</td> <td>0</td> <td>385,343</td>	FEDERAI	FUNDS TOTAL	385,343	0	385,343	0	385,343
001020       BODY ART FACILITIES       288       0       288       0       288       0       00         001020       SWIMMING POOLS       2,475       0       2,475       0<	4. FEES A	ASSESSED BY STATE OR FEDERAL RULES - STATE					
001020         SWIMMING POOLS         2,475         0         2,475         0           001020         BODY PIERCING         135         0         135         0           001020         MOBILE HOME AND PARKS         3,146         0         3,146         0           001020         BIOHAZARD WASTE PERMIT         680         0         680         0           001020         TANNING FACILITIES         567         0         567         0           001020         MIGRANT HOUSING PERMIT         0         0         0         0         0           001020         PODY HYGEN PERMIT         0         <	001020	PUBLIC WATER ANNUAL OPER PERMIT	0	0	0	0	0
001020       BODY PIERCING       135       0       135       0         001020       MOBILE HOME AND PARKS       3,146       0       3,146       0         001020       BIOHAZARD WASTE PERMIT       680       0       660       0         001020       TANNING FACLITIES       567       0       557       0         001020       TANNING FACLITIES       567       0       0       0       0         001020       FOOD HYGIENE PERMIT       0       <	001020	BODY ART FACILITIES	288	0	288	0	288
001020         MOBILE HOME AND PARKS         3,146         0         3,146         0           001020         BICHAZARD WASTE PERMIT         680         0         680         0           001020         TANNING FACILITES         567         0         567         0           001020         MIGRANT HOUSING PERMIT         0         0         0         0           001020         PRIVATE WATER CONSTR PERMIT         0         0         0         0           001020         PRIVATE WATER CONSTR PERMIT         0         0         0         0           001020         PRIVATE WATER CONSTR PERMIT         0         0         0         0           001020         SAFE DRINKING WATER         891         0         0         0           001020         SAFE DRINKING WATER         891         0         0         0           001022         OSDS PERMIT FEE         0         0         0         0         0           001092         INON SDWA LAB SAMPLE         0         0         0         0         0         0           001092         ISDS PERATING PERMIT         0         0         0         0         0         0           001092 </td <td>001020</td> <td>SWIMMING POOLS</td> <td>2,475</td> <td>0</td> <td>2,475</td> <td>0</td> <td>2,475</td>	001020	SWIMMING POOLS	2,475	0	2,475	0	2,475
001020         BICHAZARD WASTE PERMIT         680         0           001020         TANNING FACILITIES         567         0         567         0           001020         MIGRANT HOUSING PERMIT         0         0         0         0         0           001020         PODD HYGIENE PERMIT         3.600         0         0         0         0           001020         PRIVATE WATER CONSTR PERMIT         0         0         0         0         0           001020         PUBLIC WATER CONSTR PERMIT         0         0         0         0         0           001020         SAFE DRINKING WATER         891         0         891         0         0           001022         OSDS PERMIT FEE         0         0         0         0         0           001022         ONS DWA LAB SAMPLE         0         0         0         0         0           001092         ENVIRONMENTAL HEALTH FEES         43.212         0         0         0         0           001092         OSDS VARIANCE FEE         0         0         0         0         0           001092         OSDS REPAIR PERMIT         0         0         0         0	001020	BODY PIERCING	135	0	135	0	135
001020       TANNING FACILITES       567       0       567       0         001020       MIGRANT HOUSING PERMIT       0       0       0       0         001020       FOOD HYGIENE PERMIT       3.600       0       0       0         001020       PRIVATE WATER CONSTR PERMIT       0       0       0       0         001020       PUBLIC WATER CONSTR PERMIT       0       0       0       0         001020       SAFE DENNKING WATER       891       0       0       0         001020       SAFE DENNKING WATER       891       0       0       0       0         001022       SAFE DENNKING WATER       0 <td>001020</td> <td>MOBILE HOME AND PARKS</td> <td>3,146</td> <td>0</td> <td>3,146</td> <td>0</td> <td>3,146</td>	001020	MOBILE HOME AND PARKS	3,146	0	3,146	0	3,146
001020       MIGRANT HOUSING PERMIT       0       0       0         001020       FOOD HYGENE PERMIT       3.600       0       3,600       0         001020       PRIVATE WATER CONSTR PERMIT       0       0       0       0         001020       PRIVATE WATER CONSTR PERMIT       0       0       0       0         001020       SAFE DRINKING WATER       891       0       0       0         001020       SAFE DRINKING WATER       891       0       0       0       0         001022       OSDS PERMIT FEE       0       0       0       0       0       0         001092       AEROBIC OPERATING PERMIT       0	001020	BIOHAZARD WASTE PERMIT	680	0	680	0	680
001020       FOOD HYGIENE PERMIT       3.600       0       3.600       0         001020       PRIVATE WATER CONSTR PERMIT       0       0       0       0         001020       PUBLIC WATER CONSTR PERMIT       0       0       0       0         001020       SAFE DRINKING WATER       891       0       891       0         001020       OSDS PERMIT FEE       0       0       0       0         001092       OSDS PERMIT FEE       0       0       0       0         001092       ONN SDWA LAB SAMPLE       0       0       0       0         001092       ENVIRONMENTAL HEALTH FEES       43,212       0       0       0         001092       ENVIRONMENTAL HEALTH FEES       43,212       0       0       0       0         001092       SEPTIC TANK SITE EVALUATION       0	001020	TANNING FACILITIES	567	0	567	0	567
001020       PRIVATE WATER CONSTR PERMIT       0       0       0         001020       PUBLIC WATER CONSTR PERMIT       0       0       0         001020       SAFE DRINKING WATER       891       0       0         001020       SAFE DRINKING WATER       891       0       00         001020       SAFE DRINKING WATER       891       0       0         001021       SAFE DRINKING WATER       891       0       0       0         001022       OSDS PERMIT FEE       0       0       0       0         001092       AEROBIC OPERATING PERMIT       0       0       0       0         001092       INVIRONMENTAL HEALTH FEES       43,212       0       43,212       0         001092       SEPTIC TANK SITE EVALUATION       0       0       0       0       0         001092       OSDS VARIANCE FEE       0       0       0       0       0       0         001170       LAB FEE CHEMICAL ANALYSIS       0       0       0       0       0       0         001170       NONPOTABLE WATER ANALYSIS       0       0       0       0       0       0         001170       WATER ANALYSIS-POTABLE	001020	MIGRANT HOUSING PERMIT	0	0	0	0	0
001020       PUBLIC WATER CONSTR PERMIT       0       0       0         001020       SAFE DRINKING WATER       891       0       891       0         001092       OSDS PERMIT FEE       0       0       0       0         001092       OSDS PERMIT FEE       0       0       0       0         001092       AEROBIC OPERATING PERMIT       0       0       0       0         001092       ENVIRONMENTAL HEALTH FEES       43,212       0       43,212       0         001092       ENVIRONMENTAL HEALTH FEES       43,212       0       0       0       0         001092       OSDS VARIANCE FEE       0       0       0       0       0       0         001092       OSDS VARIANCE FEE       0       0       0       0       0       0         001170       LAB FEE CHEMICAL ANALYSIS       0	001020	FOOD HYGIENE PERMIT	3,600	0	3,600	0	3,600
001020       SAFE DRINKING WATER       891       0       891       0         001092       OSDS PERMIT FEE       0       0       0       0         001092       OSDS PERMIT FEE       0       0       0       0         001092       AEROBIC OPERATING PERMIT       0       0       0       0         001092       ENVIRONMENTAL HEALTH FEES       43,212       0       43,212       0         001092       ENVIRONMENTAL HEALTH FEES       43,212       0       0       0       0         001092       SEPTIC TANK SITE EVALUATION       0       0       0       0       0         001092       OSDS VARIANCE FEE       0       0       0       0       0       0         001092       OSDS VARIANCE FEE       0	001020	PRIVATE WATER CONSTR PERMIT	0	0	-	0	0
001092       OSDS PERMIT FEE       0       0       0         001092       AEROBIC OPERATING PERMIT       0       0       0         001092       NON SDWA LAB SAMPLE       0       0       0         001092       INVIRONMENTAL HEALTH FEES       43,212       0       43,212       0         001092       I & M ZONED OPERATING PERMIT       0       0       0       0         001092       SEPTIC TANK SITE EVALUATION       0       0       0       0         001092       OSDS VARIANCE FEE       0       0       0       0       0         001092       OSDS VARIANCE FEE       0<	001020	PUBLIC WATER CONSTR PERMIT	0	0	0	0	0
001092       AEROBIC OPERATING PERMIT       0       0       0         001092       NON SDWA LAB SAMPLE       0       0       0         001092       ENVIRONMENTAL HEALTH FEES       43,212       0       43,212       0         001092       I&M ZONED OPERATING PERMIT       0       0       0       0       0         001092       SEPTIC TANK SITE EVALUATION       0       0       0       0       0         001092       OSDS VARIANCE FEE       0       0       0       0       0         001092       OSDS VARIANCE FEE       0       0       0       0       0         001170       LAB FEE CHEMICAL ANALYSIS       0       0       0       0       0         001170       NONPOTABLE WATER ANALYSIS       0       0       0       0       0         001170       WATER ANALYSIS-POTABLE       0 </td <td>001020</td> <td>SAFE DRINKING WATER</td> <td>891</td> <td>0</td> <td>891</td> <td>0</td> <td>891</td>	001020	SAFE DRINKING WATER	891	0	891	0	891
001092       NON SDWA LAB SAMPLE       0       0       0         001092       ENVIRONMENTAL HEALTH FEES       43,212       0       43,212       0         001092       1 & M ZONED OPERATING PERMIT       0       0       0       0       0         001092       SEPTIC TANK SITE EVALUATION       0       0       0       0       0         001092       OSDS VARIANCE FEE       0       0       0       0       0         001092       OSDS REPAIR PERMIT       0       0       0       0       0         001092       OSDS REPAIR PERMIT       0       0       0       0       0       0         001170       LAB FEE CHEMICAL ANALYSIS       0       <	001092	OSDS PERMIT FEE	0	0	0	0	0
001092       ENVIRONMENTAL HEALTH FEES       43,212       0       43,212       0         001092       I & M ZONED OPERATING PERMIT       0       0       0       0       0         001092       SEPTIC TANK SITE EVALUATION       0       0       0       0       0         001092       OSDS VARIANCE FEE       0       0       0       0       0       0         001092       OSDS REPAIR PERMIT       0       0       0       0       0       0         001170       LAB FEE CHEMICAL ANALYSIS       0       0       0       0       0       0         001170       NONPOTABLE WATER ANALYSIS       0 <t< td=""><td>001092</td><td>AEROBIC OPERATING PERMIT</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></t<>	001092	AEROBIC OPERATING PERMIT	0	0	0	0	0
001092       1 & M ZONED OPERATING PERMIT       0       0       0       0         001092       SEPTIC TANK SITE EVALUATION       0       0       0       0         001092       OSDS VARIANCE FEE       0       0       0       0         001092       OSDS REPAIR PERMIT       0       0       0       0         001170       LAB FEE CHEMICAL ANALYSIS       0       0       0       0       0         001170       NONPOTABLE WATER ANALYSIS       0       0       0       0       0       0         001170       WATER ANALYSIS-POTABLE       0	001092	NON SDWA LAB SAMPLE	0	0	0	0	0
001092       SEPTIC TANK SITE EVALUATION       0       0       0         001092       OSDS VARIANCE FEE       0       0       0       0         001092       OSDS REPAIR PERMIT       0       0       0       0         001092       OSDS REPAIR PERMIT       0       0       0       0         001092       OSDS REPAIR PERMIT       0       0       0       0         001170       LAB FEE CHEMICAL ANALYSIS       0       0       0       0         001170       NONPOTABLE WATER ANALYSIS       0       0       0       0         001170       WATER ANALYSIS-POTABLE       0       0       0       0       0         001170       WATER ANALYSIS-POTABLE       0       0       0       0       0       0         0011206       CENTRAL OFFICE SURCHARGE       5,830       0       5,830       0       0       0       0         01093       CHO ON-LINE BILLING FEE       0 <td>001092</td> <td>ENVIRONMENTAL HEALTH FEES</td> <td>43,212</td> <td>0</td> <td>43,212</td> <td>0</td> <td>43,212</td>	001092	ENVIRONMENTAL HEALTH FEES	43,212	0	43,212	0	43,212
001092       OSDS VARIANCE FEE       0       0       0         001092       OSDS REPAIR PERMIT       0       0       0         001170       LAB FEE CHEMICAL ANALYSIS       0       0       0         001170       NONPOTABLE WATER ANALYSIS       0       0       0         001170       NONPOTABLE WATER ANALYSIS       0       0       0         001170       WATER ANALYSIS-POTABLE       0       0       0         0011206       CENTRAL OFFICE SURCHARGE       5.830       0       5.830       0         001093       CHD ON-LINE BILLING FEE       0       0       0       0         7EES ASSESSED BY STATE OR FEDERAL RULES TOTAL       60.824       0       60.824       0         7EES ASSESSED BY STATE OR FEDERAL RULES TOTAL       60.824       0       0       0         010304       STATIONARY POLLUTANT STORAGE TANKS       0       0       0       0         010304       STATIONARY POLLUTANT STORAGE TANKS       0       0       0       0         010305       CHDIF CASH TRANSFER       0       0       0       0       0         010306       DOH/DOC INTERAGENCY AGREEMENT       0       0       0       -203.256       <	001092	1 & M ZONED OPERATING PERMIT	0	0	0	0	0
001092       OSDS REPAIR PERMIT       0       0       0         001170       LAB FEE CHEMICAL ANALYSIS       0       0       0         001170       NONPOTABLE WATER ANALYSIS       0       0       0         001170       WATER ANALYSIS-POTABLE       0       0       0         001170       WATER ANALYSIS-POTABLE       0       0       0         001170       WATER ANALYSIS-POTABLE       0       0       0         0011206       CENTRAL OFFICE SURCHARGE       5.830       0       0         001093       CHD ON-LINE BILLING FEE       0       0       0         001093       CHD ON-LINE BILLING FEE       0       0       0         010304       STATE OR FEDERAL RULES TOTAL       60.824       0       0         5. OTHER CASH CONTRIBUTIONS - STATE       0       0       0       0         010304       STATIONARY POLLUTANT STORAGE TANKS       0       0       0       0         031005       CHDIF CASH TRANSFER       0       0       0       0       0         010306       DOH/DOC INTERAGENCY AGREEMENT       0       0       0       -203,256       0       -203,256       -203,256       -203,256	001092	SEPTIC TANK SITE EVALUATION	0	0	0	0	0
001170       LAB FEE CHEMICAL ANALYSIS       0       0       0         001170       NONPOTABLE WATER ANALYSIS       0       0       0         001170       NONPOTABLE WATER ANALYSIS       0       0       0         001170       WATER ANALYSIS-POTABLE       0       0       0       0         001170       WATER ANALYSIS-POTABLE       0       0       0       0         001206       CENTRAL OFFICE SURCHARGE       5.830       0       5.830       0         001093       CHD ON-LINE BILLING FEE       0       0       0       0         FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL       60.824       0       60.824       0         S. OTHER CASH CONTRIBUTIONS - STATE         010304       STATIONARY POLLUTANT STORAGE TANKS       0       0       0       0         090001       DRAW DOWN FROM PUBLIC HEALTH UNIT       -203.256       0       -203.256       0       -203.256       0       -203.256       0       -203.256       0       -203.256       0       -203.256       0       -203.256       0       -203.256       0       -203.256       0       -203.256       0       -203.256       0       -203.256       0	001092	OSDS VARIANCE FEE	0	0	0	0	0
001170       NONPOTABLE WATER ANALYSIS       0       0       0         001170       WATER ANALYSIS-POTABLE       0       0       0         001206       CENTRAL OFFICE SURCHARGE       5,830       0       5,830       0         001093       CHD ON-LINE BILLING FEE       0       0       0       0         FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL       60,824       0       60,824       0         S. OTHER CASH CONTRIBUTIONS - STATE         010304       STATIONARY POLLUTANT STORAGE TANKS       0       0       0       0         090001       DRAW DOWN FROM PUBLIC HEALTH UNIT       -203,256       0       -20       0       0       0         010306       DOH/DOC INTERAGENCY AGREEMENT       0       0       0       0       0       0         OTHER CASH CONTRIBUTIONS TOTAL       -203,256       0       -203,256       0       -20         OTHER CASH CONTRIBUTIONS TOTAL	001092	OSDS REPAIR PERMIT	0	0	0	0	0
001170WATER ANALYSIS-POTABLE000001206CENTRAL OFFICE SURCHARGE5,83000001093CHD ON-LINE BILLING FEE00000000000 <b>FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL</b> 60,824060,8240 <b>S. OTHER CASH CONTRIBUTIONS - STATE</b> 010304STATIONARY POLLUTANT STORAGE TANKS0000090001DRAW DOWN FROM PUBLIC HEALTH UNIT-203,2560-203,2560-20031005CHDTF CASH TRANSFER00000010306DOH/DOC INTERAGENCY AGREEMENT00000OTHER CASH CONTRIBUTIONS TOTAL-203,2560-203,2560-20 <b>S. MEDICAID - STATE/COUNTY</b>	001170	LAB FEE CHEMICAL ANALYSIS	0	0	0	0	0
001206       CENTRAL OFFICE SURCHARGE       5.830       0       5.830       0         001093       CHD ON-LINE BILLING FEE       0       0       0       0         7EES ASSESSED BY STATE OR FEDERAL RULES TOTAL       60.824       0       60.824       0         7EES ASSESSED BY STATE OR FEDERAL RULES TOTAL       60.824       0       60.824       0         8. OTHER CASH CONTRIBUTIONS - STATE       0       0       0       0         010304       STATIONARY POLLUTANT STORAGE TANKS       0       0       0       0         090001       DRAW DOWN FROM PUBLIC HEALTH UNIT       -203.256       0       -203.256       0       -203.256       0       -203.256       0	001170	NONPOTABLE WATER ANALYSIS	0	0	0	0	0
001093CHD ON-LINE BILLING FEE0000FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL60,824060,8240S. OTHER CASH CONTRIBUTIONS - STATE00000010304STATIONARY POLLUTANT STORAGE TANKS00000090001DRAW DOWN FROM PUBLIC HEALTH UNIT-203,2560-203,2560-20031005CHDTF CASH TRANSFER00000010306DOH/DOC INTERAGENCY AGREEMENT0000OTHER CASH CONTRIBUTIONS TOTAL-203,2560-203,2560-206. MEDICAID - STATE/COUNTY	001170	WATER ANALYSIS-POTABLE	0	0	0	0	0
001093CHD ON-LINE BILLING FEE0000FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL60,824060,8240S. OTHER CASH CONTRIBUTIONS - STATE010304STATIONARY POLLUTANT STORAGE TANKS0000090001DRAW DOWN FROM PUBLIC HEALTH UNIT-203,2560-203,2560-20031005CHDTF CASH TRANSFER00000010306DOH/DOC INTERAGENCY AGREEMENT00000OTHER CASH CONTRIBUTIONS TOTAL-203,2560-203,2560-20S. MEDICAID - STATE/COUNTY	001206	CENTRAL OFFICE SURCHARGE	5,830	0	5.830	0	5,830
5. OTHER CASH CONTRIBUTIONS - STATE       0       0       0         010304       STATIONARY POLLUTANT STORAGE TANKS       0       0       0         090001       DRAW DOWN FROM PUBLIC HEALTH UNIT       -203,256       0       -20         031005       CHDTF CASH TRANSFER       0       0       0       0         010306       DOH/DOC INTERAGENCY AGREEMENT       0       0       0       0         OTHER CASH CONTRIBUTIONS TOTAL       -203,256       0       -203,256       0       -20         6. MEDICAID - STATE/COUNTY       0       0       0       -20       -20       -20	001093	CHD ON-LINE BILLING FEE	0	0		0	0
010304       STATIONARY POLLUTANT STORAGE TANKS       0       0       0       0         090001       DRAW DOWN FROM PUBLIC HEALTH UNIT       -203,256       0       -203,256       0       -203,256       0       -203,256       0       -203,256       0       -203,256       0       -203,256       0<	EES ASS	ESSED BY STATE OR FEDERAL RULES TOTAL	60,824	0	60,824	0	60,824
090001       DRAW DOWN FROM PUBLIC HEALTH UNIT       -203,256       0       -203,256       0       -203,256       0       -203,256       0       -203,256       0       -203,256       0 <t< td=""><td>5. OTHER</td><td>R CASH CONTRIBUTIONS - STATE</td><td></td><td></td><td></td><td></td><td></td></t<>	5. OTHER	R CASH CONTRIBUTIONS - STATE					
031005       CHDTF CASH TRANSFER       0       0       0       0         010306       DOH/DOC INTERAGENCY AGREEMENT       0       0       0       0         DTHER CASH CONTRIBUTIONS TOTAL       -203,256       0       -203,256       0       -203,256         6. MEDICAID - STATE/COUNTY	010304	STATIONARY POLLUTANT STORAGE TANKS	0	0	0	0	0
010306       DOH/DOC INTERAGENCY AGREEMENT       0       0       0       0         OTHER CASH CONTRIBUTIONS TOTAL       -203,256       0       -203,256       0       -203,256         5. MEDICAID - STATE/COUNTY       - <td< td=""><td>090001</td><td>DRAW DOWN FROM PUBLIC HEALTH UNIT</td><td>-203,256</td><td>0</td><td>-203,256</td><td>0</td><td>-203,256</td></td<>	090001	DRAW DOWN FROM PUBLIC HEALTH UNIT	-203,256	0	-203,256	0	-203,256
OTHER CASH CONTRIBUTIONS TOTAL       -203,256       0       -203,256       0       -203,256         6. MEDICAID - STATE/COUNTY	031005	CHDTF CASH TRANSFER	0	0	0	0	0
5. MEDICAID - STATE/COUNTY	010306	DOH/DOC INTERAGENCY AGREEMENT	0	0	0	0	0
	OTHER C	ASH CONTRIBUTIONS TOTAL	-203,256	0	-203,256	0	-203.256
	6. MEDIC	CAID - STATE/COUNTY					
	001056	MEDICAID PHARMACY	0	0	0	0	0
ersion: 3 Pag	ersion:	3					Page 3 of

# TAYLOR COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

# October 1, 2013 to September 30, 2014

		State CHD Trust Fund (casb)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
6. MEDIC	AID - STATE/COUNTY					
001076	MEDICAID TB	0	0	0	0	0
001078	MEDICAID ADMINISTRATION OF VACCINE	0	1,200	1,200	0	1,200
001079	MEDICAID CASE MANAGEMENT	0	0	1,200	0	0
001081	MEDICAID CHILD HEALTH CHECK UP	0	0	0	0	0
001082	MEDICAID DENTAL	0	0	0	0	0
001083	MEDICAID FAMILY PLANNING	0	78,154	78,154	0	78,154
001087	MEDICAID STD	0	6,900	6,900	0	6,900
001089	MEDICAID AIDS	0	0	0	0	0
001147	MEDICAID HMO CAPITATION	0	0	0	0	0
001191	MEDICAID MATERNITY	0	53,064	53,064	0	53,064
001192	MEDICAID COMPREHENSIVE CHILD	0	0	0	0	0
001193	MEDICAID COMPREHENSIVE ADULT	0	0	0	0	0
001194	MEDICAID LABORATORY	0	0	0	0	0
001208	MEDIPASS \$3.00 ADM. FEE	0	0	0	0	0
001059	MEDICAID LOW INCOME POOL	0	0	0	0	0
001051	EMERGENCY MEDICAID	0	0	0	0	0
001058	MEDICAID - BEHAVIORAL HEALTH	0	0	0	0	0
001071	MEDICAID - ORTHOPEDIC	0	0	0	0	0
001072	MEDICAID - DERMATOLOGY	0	0	0	0	0
001075	MEDICAID - SCHOOL HEALTH CERTIFIED MATCH	0	14,000	14,000	0	14,000
001069	MEDICAID - REFUGEE HEALTH	0	0	0	0	0
001055	MEDICAID - HOSPITAL	0	0	0	0	0
001148	MEDICAID HMO NON-CAPITATION	0	284,728	284,728	0	284,728
001074	MEDICAID - NEWBORN SCREENING	0	0	0	0	0
001180	DENTAL MEDICAID HMO	0	0	0	0	0
MEDICAL	D TOTAL	0	438,046	438,046	0	438,046
7. ALLOC	ABLE REVENUE - STATE					
018000	REFUNDS	5,519	0	5,519	0	5,519
037000	PRIOR YEAR WARRANT	0	0	0	0	0
038000	12 MONTH OLD WARRANT	0	. 0	0	0	0
ALLOCAE	BLE REVENUE TOTAL	5,519	0	5,519	0	5,519
8. OTHER	STATE CONTRIBUTIONS NOT IN CHD TRUST FUN	ID - STATE				
	ADAP	0	0	0	11,786	11,786
	OTHER (SPECIFY)	0	0	0	0	0
	PHARMACY SERVICES	0	0	0	34,950	34,950
	TB SERVICES	0	0	0	0	0
	STD SERVICES	0	0	0	0	0
	WIC FOOD	0	0	0	518,851	518,851
	DENTAL SERVICES	0	0	0	0	0
	OTHER (SPECIFY)	0	0	0	0	0
	LABORATORY SERVICES	0	0	0	6,707	6,707
	IMMUNIZATION SERVICES	0	0	0	22,604	22,604
	CONSTRUCTION/RENOVATION	0	0	0	0	0
OTHER ST	TATE CONTRIBUTIONS TOTAL	0	0	0	594,898	594,898

# TAYLOR COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

# October 1, 2013 to September 30, 2014

		State CHD Trust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
9. DIRECT	F LOCAL CONTRIBUTIONS - BCC/TAX DISTRICT					
008010	CONTRIBUTION FROM CITY GOVERNMENT	0	0	0	0	0
008020	CONTRIBUTION FROM HEALTH CARE TAX NOT THRU BCC	0	0	0	0	0
008040	BCC GRANT/CONTRACT	0	0	0	0	0
008030	CONTRIBUTION FROM HEALTH CARE TAX	0	0	0	0	0
008034	BCC CONTRIBUTION FROM GENERAL FUND	0	50,000	50,000	0	50,000
DIRECT C	COUNTY CONTRIBUTION TOTAL	0	50,000	50,000	0	50,000
10. FEES A	AUTHORIZED BY COUNTY ORDINANCE OR RESOLUT	ION - COUNT	Y			
001060	CHD SUPPORT POSITION	0	0	0	0	0
001077	RABIES VACCINE	0	0	0	0	0
001077	PERSONAL HEALTH FEES	0	22,032	22,032	0	22,032
001077	CHILD CAR SEAT PROG	0	200	200	0	200
001077	AIDS CO-PAYS	0	0	0	0	0
001094	ADULT ENTER. PERMIT FEES	0	0	0	0	0
001094	LOCAL ORDINANCE FEES	0	4,410	4,410	0	4,410
001114	NEW BIRTH CERTIFICATES	0	13,000	13,000	0	13,000
001115	VITAL STATISTICS - DEATH CERTIFICATE	0	14,000	14,000	0	14,000
001117	VITAL STATS-ADM, FEE 50 CENTS	0	0	0	0	0
001073	CO-PAY FOR THE AIDS CARE PROGRAM	0	0	0	0	0
001025	CLIENT REVENUE FROM GRC	0	80	80	0	80
001040	CELL PHONE ADMINISTRATIVE FEE	0	0	0	0	0
FEES AUT	HORIZED BY COUNTY TOTAL	0	53,722	53,722	0	53,722
11. OTHE	R CASH AND LOCAL CONTRIBUTIONS - COUNTY					
001009	RETURNED CHECK ITEM	0	0	0	0	0
001029	THIRD PARTY REIMBURSEMENT	0	40,500	40,500	0	40,500
001029	HEALTH MAINTENANCE ORGAN. (HMO)	0	0	0	0	0
001054	MEDICARE PART D	0	0	0	0	0
001077	RYAN WHITE TITLE II	0	0	0	0	0
001090	MEDICARE PART B	0	0	0	0	0
001190	HEALTH MAINTENANCE ORGANIZATION	0	0	0	0	0
005040	INTEREST EARNED	0	0	0	0	0
005041	INTEREST EARNED-STATE INVESTMENT ACCOUNT	0	4,300	4,300	0	4,300
007010	U.S. GRANTS DIRECT	0	0	0	0	0
008050	SCHOOL BOARD CONTRIBUTION	0	26,600	26,600	0	26,600
008060	SPECIAL PROJECT CONTRIBUTION	0	0	0	0	0
010300	SALE OF GOODS AND SERVICES TO STATE AGENCIES	0	0	0	0	0
010301	EXP WITNESS FEE CONSULTNT CHARGES	0	0	0	0	0
010405	SALE OF PHARMACEUTICALS	0	0	0	0	0
010409	SALE OF GOODS OUTSIDE STATE GOVERNMENT	0	0	0	0	0
011001	HEALTHY START COALITION CONTRIBUTIONS	0	149,436	149,436	0	149,436
011007	CASH DONATIONS PRIVATE	0	0	0	0	0
012020	FINES AND FORFEITURES	0	0	0	0	0
012021	RETURN CHECK CHARGE	0	20	20	0	20
028020	INSURANCE RECOVERIES-OTHER	0	0	0	0	0
090002	DRAW DOWN FROM PUBLIC HEALTH UNIT	0	203,256	203,256	0	203,256
011000	GRANT-DIRECT	0	0	0	0	0

# **TAYLOR COUNTY HEALTH DEPARTMENT** Part II. Sources of Contributions to County Health Department

October 1, 2013 to September 30, 2014

		State CHD Frust Fund (cash)	County CHD Trust Fund	Total CHD Trust Fund	Other Contribution	
II. OTHE	ER CASH AND LOCAL CONTRIBUTIONS - COUNTY	(Cash)	i rust rung	(cash)	Contribution	Total
011000	DIRECT-ARROW	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT DIRECT-ARROW	0	0	0	0	0
011000	GRANT DIRECT-HEALTH CARE DISTRICT PAHOKEE	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT DIRECT-NOVA UNIVERSITY CHD TRAINING	0	0	0	0	0
011000	GRANT DIRECT-COUNTY HEALTH DEPARTMENT DIRECT SERVIC	CES 0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT DIRECT-QUANTUM DENTAL	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
011000	GRANT-DIRECT	0	0	0	0	0
010402	RECYCLED MATERIAL SALES	0	0	0	0	0
010303	FDLE FINGERPRINTING	0	0	0	0	0
007050	ARRA FEDERAL GRANT	0	0	0	0	0
001010	RECOVERY OF BAD CHECKS	0	0	0	0	0
008065	FCO CONTRIBUTION	0	0	0	0	0
011006	RESTRICTED CASH DONATION	0	0	0	0	0
028000	INSURANCE RECOVERIES	0	0	0	0	0
001033	CMS MANAGEMENT FEE - PMPMPC	0	0	0	0	ů 0
010400	SALE OF GOODS OUTSIDE STATE GOVERNMENT	0	0	0	0	ů 0
010500	REFUGEE HEALTH	0	0	0	0	0
005045	INTEREST EARNED-THIRD PARTY PROVIDER	0	0	0	0	ů 0
005043	INTEREST EARNED-CONTRACT/GRANT	0	0	0	0	ů 0
001053	MEDICARE - PART A	0	0	0	0	0
011002	ARRA FEDERAL GRANT - SUB-RECIPIENT	0	0	0	0	ů 0
011004	LOW INCOME POOL - SUBRECIPIENT	0	0	0	0	0
001003	WIRE TRANSFER FEE	0	0	0	0	0
OTHER C	ASH AND LOCAL CONTRIBUTIONS TOTAL	0	424,112	424,112	0	424,112
12. ALLO	CABLE REVENUE - COUNTY					
018000	REFUNDS	0	0	0	0	0
037000	PRIOR YEAR WARRANT	0	0	0	0	0
038000	12 MONTH OLD WARRANT	0	0	0	0	0
001053	CLIENT REVENUE FROM NCO	0	0	0	0	0
COUNTY	ALLOCABLE REVENUE TOTAL	0	0	0	0	0
13. BUILI	DINGS - COUNTY					
	ANNUAL RENTAL EQUIVALENT VALUE	0	0	0	172,050	172,050
	OTHER (SPECIFY)	0	0	0	0	0
	UTILITIES	0	0	0	0	0
	BUILDING MAINTENANCE	0	0	0	0	0
	GROUNDS MAINTENANCE	0	0	0	3,000	3.000
	INSURANCE	0	0	0	0	0
	OTHER (SPECIFY)	0	0	0	0	0
BUILDING	GS TOTAL	0	0	0	175,050	175,050

# TAYLOR COUNTY HEALTH DEPARTMENT Part II. Sources of Contributions to County Health Department

October 1, 2013 to September 30, 2014

14. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST	State CHD Trust Fund (cash) FUND - COUNTY	County CHD Trust Fund	Total CHD Trust Fund (cash)	Other Contribution	Total
EQUIPMENT/VEHICLE PURCHASES	0	0	0	0	0
VEHICLE INSURANCE	0	0	0	0	0
VEHICLE MAINTENANCE	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTION (SPECIFY)	0	0	0	0	0
OTHER COUNTY CONTRIBUTIONS TOTAL	0	0	0	0	0
GRAND TOTAL CHD PROGRAM	1,038,749	965,880	2,004,629	769,948	2,774,577

# **ATTACHMENT IL**

# **TAYLOR COUNTY HEALTH DEPARTMENT**

# Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service

# October 1, 2013 to September 30, 2014

					uarterly Expe					
	FTE's (0.00)	Clients Units	Services/ Visits	lst	2nd (Whole dolla	3rd ars only)	4th	State	County	Gran Tota
A. COMMUNICABLE DISEASE CONTRO	Ŀ									
IMMUNIZATION (101)	0.51	399	455	12,484	8,118	4,474	9,470	6,511	28,035	34,54
STD (102)	0.51	190	277	11,314	3,302	3,854	3,852	0,511	28,033	22,32
HIV/AIDS PREVENTION (03A1)	0.00	0	0	0	0	9,854 0	5,052 0	0	0	22,32
HIV/AIDS VIEVENTION (03A1)	0.00	0	0	0	0	0	0	0	0	
HIV/AIDS SORVEILLANCE (03A2)	0.00	0	0	0	0	0	0	0	0	
ADAP (03A4)	0.00	2	5	1,223	3,161	3,689	3,252	11,321	4	11,32
TB CONTROL SERVICES (104)	0.08	82	139	586	1,042	1,216	1,217	2,549	1,512	4,06
. ,	0.08	82 0	0	7,092	1,042	2,034		7,845		
COMM. DISEASE SURV. (106)				-	1,743		2,034		5,058	12,90
HEPATITIS PREVENTION (109)	0.00	0	0	0	-	0	-	0	0	10
PUBLIC HEALTH PREP AND RESP (116)	0.01	0	0	162	0	0	0	0	162	16
REFUGEE HEALTH (118)	0.00	0	0	0	0	0	0	0	0	( 20
VITAL STATISTICS (180)	0.27	1,915	3,310	2,663	1,099	1,282	1,283	0	6,327	6,32
COMMUNICABLE DISEASE SUBTOTAL	1.79	2,588	4,186	35,524	18,465	16,549	21,108	28,226	63,420	91,64
B. PRIMARY CARE:										
CHRONIC DISEASE SERVICES (210)	0.47	0	0	3,149	4,339	8,678	4,339	20,505	0	20,50
TOBACCO PREVENTION (212)	2.29	0	15	34,548	31,533	36,798	39,035	141,914	0	141,91
WIC (21W1)	0.00	0	0	0	0	0	0	0	0	
WIC BREASTFEEDING PEER COUNSELING (21W	(2) 0.00	0	0	0	0	0	0	0	0	(
FAMILY PLANNING (223)	. 4.13	687	1,610	68,114	49,823	58,142	58,119	64,303	169,895	234,19
IMPROVED PREGNANCY OUTCOME (225)	1.33	98	621	27,511	16,705	19,494	19,471	0	83,181	83,18
HEALTHY START PRENATAL (227)	1.95	185	2,323	27,189	27,918	32,579	32,567	0	120,253	120,25
COMPREHENSIVE CHILD HEALTH (229)	0.08	95	153	-102	1,844	2,152	2,254	2,918	3,230	6,14
HEALTHY START INFANT (231)	1.61	208	2,415	19,259	18,765	21,098	21,889	41,158	39,853	81,01
SCHOOL HEALTH (234)	8.14	0	67,457	127,419	123,142	140,566	116,086	423,864	83,349	507,21
COMPREHENSIVE ADULT HEALTH (237)	2.33	543	1,462	4,295	50,702	39,669	59,197	102,323	51,540	153,86
COMMUNITY HEALTH DEVELOPMENT (238)	0.08	0	0	20,268	23,347	11,988	0	55,603	0	55,60
DENTAL HEALTH (240)	5.09	1,444	3,203	103,234	94,494	107,271	110,229	78,381	336,847	415,223
PRIMARY CARE SUBTOTAL	27.50	3,260	79,259	434,884	442,612	478,435	463,186	930,969	888,148	1,819,11
C. ENVIRONMENTAL HEALTH:										
Water and Onsite Sewage Programs										
	0.00	0	0	0	٥	0	0	0	0	(
COASTAL BEACH MONITORING (347)	0.00	0	0	0	0	0	0			
LIMITED USE PUBLIC WATER SYSTEMS (357)	0.12	30	69	4,888	800	933	934	2,900	4,655	7.55
PUBLIC WATER SYSTEM (358)	0.00	0	0	0	58	67	68	0	193	193
PRIVATE WATER SYSTEM (359)	0.00	0	0	58	92	108	107	101	264	36:
INDIVIDUAL SEWAGE DISP. (361)	0.93	51	129	16,686	13,230	15,439	15,434	51,589	9,200	60.789
Group Total Facility Programs	1.05	81	198	21,632	14,180	16,547	16,543	54,590	14,312	68,902
FOOD HYGIENE (348)	0.10	32	131	1,377	1,563	1,824	1,825	6,589	0	6,589
BODY PIERCING FACILITIES SERVICES (349)	0.01	0	0	0	249	290	291	830	0	830
GROUP CARE FACILITY (351)	0.01	45	66	144	411	479	480	1,514	0	1.514

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# **TAYLOR COUNTY HEALTH DEPARTMENT**

# Part III. Planned Staffing, Clients, Services, And Expenditures By Program Service Area Within Each Level Of Service

October 1, 2013 to September 30, 2014

				Qu	uarterly Expe	nditure Plan				
	FTE's	Clients	Services/	lst	2nd	3rd	4th			Grand
	(0.00)	Units	Visits		(Whole dolla	rs only)		State	County	Total
C. ENVIRONMENTAL HEALTH:										
Facility Programs										
HOUSING, PUBLIC BLDG SAFETY, SANITATION	(353)0.00	0	0	0	0	0	0	0	0	0
MOBILE HOME AND PARKS SERVICES (354)	0.06	8	26	1,269	311	363	362	2,305	0	2,305
SWIMMING POOLS/BATHING (360)	0.05	13	26	973	0	2,023	2,024	5,020	0	5,020
<b>BIOMEDICAL WASTE SERVICES (364)</b>	0.10	19	19	-742	1,399	1,633	1,633	3,923	0	3,923
TANNING FACILITY SERVICES (369)	0.00	0	0	-34	70	41	42	119	0	119
Group Total	0.33	117	268	2,987	4,003	6,653	6,657	20,300	0	20,300
Groundwater Contamination										
STORAGE TANK COMPLIANCE (355)	0.00	0	0	0	0	0	0	0	0	0
SUPER ACT SERVICE (356)	0.00	0	0	0	0	0	0	0	0	0
Group Total	0.00	0	0	0	0	0	0	0	0	0
Community Hygiene										
TATTOO FACILITIES SERVICES	0.00	0	0	57	250	292	291	890	0	890
COMMUNITY ENVIR. HEALTH (345)	0.00	0	0	0	0	0	0	0	0	0
INJURY PREVENTION (346)	0.00	0	0	0	0	0	0	0	0	0
LEAD MONITORING SERVICES (350)	0.00	0	0	0	0	0	0	0	0	0
PUBLIC SEWAGE (362)	0.00	0	0	0	0	0	0	0	0	0
SOLID WASTE DISPOSAL (363)	0.00	0	0	0	0	0	0	0	0	0
SANITARY NUISANCE (365)	0.03	30	73	363	930	1,086	1,085	3,464	0	3,464
RABIES SURVEILLANCE/CONTROL SERVICES (	366)0.01	0	0	-67	8	9	50	0	0	0
ARBOVIRUS SURVEILLANCE (367)	0.00	0	0	0	93	108	109	310	0	310
RODENT/ARTHROPOD CONTROL (368)	0.00	0	0	0	0	0	0	0	0	0
WATER POLLUTION (370)	0.00	0	0	0	0	0	0	0	0	0
INDOOR AIR (371)	0.00	0	0	0	0	0	0	0	0	0
RADIOLOGICAL HEALTH (372)	0.00	0	0	0	0	0	0	0	0	0
TOXIC SUBSTANCES (373)	0.00	0	0	0	0	0	0	0	0	0
Group Total	0.04	30	73	353	1,281	1,495	1,535	4,664	0	4,664
ENVIRONMENTAL HEALTH SUBTOTAL	1.42	228	539	24,972	19,464	24,695	24,735	79,554	14,312	93,866
D. NON-OPERATIONAL COSTS:										
NON-OPERATIONAL COSTS (599)	0.00	0	0	. 0	0	0	0	0	0	0
ENVIRONMENTAL HEALTH SURCHARGE (399)	0.00	0	0	0	0	0	0	0	0	0
MEDICAID BUYBACK (611)	0.00	0	0	0	0	0	0	0	0	0
NON-OPERATIONAL COSTS SUBTOTAL	0.00	0	0	0	0	0	0	0	0	0
TOTAL CONTRACT	30.71	6,076	83,984	495,380	480,541	519,679	509,029	1,038,749	965,880	2,004,629
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Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Rick Scott Governor

John H. Armstrong, MD, FACS State Surgeon General & Secretary

Vision: To be the Healthiest State in the Nation

January 17, 2014

The Honorable Malcolm Page, Chairman Taylor County Board of County Commissioners Post Office Box 620 Perry, FL 32348

Dear Chairman Page:

Enclosed is the report of activities and expenditures of the Taylor County Health Department for the period October 1, 2013 through September 30, 2014. Chapter 154, F.S., and the contract between the Department of Health and Taylor County require this report be submitted on a quarterly basis.

The reports are comprised of the following sub-reports produced by the Department's Contract Management System.

- 1. DE 385 "Contract Management Variance Report" which compares the planned services, clients/units, FTEs, and expenditures with actual figures.
- DE 580 "Analysis of Fund Equities" shows total CHD year-to-date revenues, expenditures, beginning cash balance, and year-to-date equity. In accordance with Chapter 154, this report also splits cash balances/equity into state and county components.

If you have any questions, please feel free to contact me at (850) 584-5087, extension 142.

Sincerely a

Padraic Juarez, Interim Administrator Taylor County Health Department

Enclosure(s)

Cc: Beth Benton, Bureau of Budget Management

# generil Unipendit System -

Vygpelikk Gribban

THE REPORT DESIGN WATER OF THE PARTY

Health Decarmen

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	1. Contraction of the last		and the second second			and entry	18.5
merchanic proceeding and the second	THE PROPERTY.	President and the story	and the second second	international second	and the state of t		(End)

	1.	N LIDER	CALIFORNIA CONTRACTOR	and the second second	and the second s	Constanting in the		Westmann (	A STREET AND A	CITED NEW PROPERTY	Sector Construction	A BUBLICH	ुलान् :
1 Immunization	0.51	0,40	27.50	176	100	76.00	202	114	77.19	\$12,484	\$14,474	-13.75	
2 Sexually Trans. Dis.	0.54	0.23	134.78	27	48	-43.75	46	69	-33.33	\$11,314	\$9,854	14.81	
3 AIDS	0.08	0.02	300.00	2	0		4	1	300.00	\$1,223	\$789	54.98	
4 Tuberculosis	0.08	0.06	33.33	13	20	-35.00	22	35	-37.14	\$586	\$1,216	-51.81	
6 Comm. Dis. Surv.	0.30	0.10	200.00	0	0		0	0		\$7,092	\$7,034	0.82	
9 Hepatitis	0.00	0.00		0	0		0	0		\$O	\$0		
16 Preparedness and Response	0.01	0.02	-50.00	0	0		0	0		\$162	\$184	-11.75	
18 Refugee Health	0.00	0.00		0	0		0	0		\$0	\$0		
80 Vital Records	0.27	0.09	200.00	103	479	-78.50	189	828	-77.17	\$2,663	\$3,282	-18.85	
Communicable Disease Total	1.79	0.92	94.57	321	647	-50.39	463	1,047	-55:78	\$35,524	\$36,833.	-3.55	
10 Chronic Disease Prevention Pro	0.47	0.37	27.03	0	0	an na servició de la casa a	0	0		\$3,149	\$5 6	2,879.49	
12 Tobacco Use Intervention	2.29	2.50	-8.40	0	0		0	4	-100.00	\$34,548	\$36,798	-6.11	
21 WIC	0.00	0.00		0	0		0	0		\$0	\$0		
23 Family Planning	4.13	3.36	22.92	130	172	-24.42	367	402	-8.71	\$68,114	\$68,142	-0.04	
25 Improved Pregnancy Outcome	1.33	1.08	23.15	27	24	12.50	153	155	-1.29	\$27,511	\$27,494	0.06	
27 Healthy Start Prenatal	1.95	2.42	-19.42	29	46	-36.96	500	581	-13.94	\$27,189	\$27,879	-2.47	
29 Comprehensive Child Health	0.08	0.14	-42.86	2	24	-91.67	2	38	-94.74	(\$104)	\$0		
31 Healthy Start Child	1.61	2.00	-19.50	29	52	-44.23	298	604	-50.66	\$19,259	\$22,698	-15.15	
34 School Health	7.14	8.60	-16.98	0	0		19,520	16,864	15.75	\$127,419	\$133,776	-4.75	
37 Comprehensive Adult Health	2.33	1.92	21.35	48	136	-64.71	70	366	-80.87	\$4,295	\$4,200	2.27	
38 Community Health Development	0.08	0.08	0.00	0	0		0	0		\$20,268	\$18,198	11.38	
40 Dental Health	5.09	5.27	-3.42	403	361	11.63	774	801	-3.37	\$103,234	\$113,271	-8.86	
Primary Care Total	26.50	27.74	5-4.47	668	815	-18.04	21,684	19,815	9.43	\$434;884	\$452,461.	3.88	
Water & Onsite Sewage	1.05	0.84	25.00	27	21	28.57	87	49	77.55	\$21,633	\$19,238	12.45	
Facility Programs	0.32	0.19	68.42	14	29	-51.72	29	66	-56.06	\$2,987	\$3,700	-19.26	
Groundwater Contamination Program	0.00	0.00		0	0		0	0		\$0	\$0		
Community Hygiene	0.04	0.05	-20.00	2	8	-75.00	4	18	-77.78	\$352	\$518	-32.04	
Environmental Health Total	1.41	1.08	30.56	43	58	-25.86		.133	-9.77, 55, 7	\$24,972	\$23,456	6.46	1995. 1995.
Grand Total	29.70	29.74	-0.13	1,032	1,520	-32.11	22,267	20,995	6.06	\$495,380	\$512,750	-3.39	

NOTE: Expenditures above exclude non-operational expenditures such as fixed capital outlays

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Contract Warsgament System.

Analysis of Fine Equips

Taylor Conney for Report Parlor 7/2018 (p 1/2/2013

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Fund Balance 07/1	3	\$38,977.09	(\$147,351.49)	(\$108,374.40)
Revenue Contract	- YTD			
Communicable I	Disease			
001009	Debit Memo - Bad Checks	\$0.00	\$37.57	\$37.57
001029	3rd Party Reimbursements	\$0.00	(\$2,473.30)	(\$2,473.30)
001077	Clinic Fee - County	\$0.00	(\$3,854.82)	(\$3,854.82)
001078	MEDICAID ADMINISTRATION OF VACCINE	\$0.00	(\$849.69)	(\$849.69)
001087	MEDICAID STD	\$0.00	(\$3,471.48)	(\$3,471.48)
001114	Vital Statistics - Birth Certificate	\$0.00	(\$4,955.00)	(\$4,955.00)
001115	Vital Statistics - Death Certificate	\$0.00	(\$7,448.00)	(\$7,448.00)
005041	Interest Earned - State Investment Account	\$0.00	(\$242.62)	(\$242.62)
007000	Federal Grants	(\$2,747.32)	\$0.00	(\$2,747.32)
008034	BCC Contribution from General Fund	\$0.00	(\$4,744.16)	(\$4,744.16)
012021	Service Charge on Returned Check	\$0.00	(\$3.80)	(\$3.80)
015010	Transfers Within Agency	(\$1,366.17)	\$0.00	(\$1,366.17)
015040	CATEGORICAL GENERAL REVENUE	(\$1,500.00)	\$0.00	(\$1,500.00)
015050	NON CATEGORICAL GENERAL REVENUE	(\$10,539.04)	\$0.00	(\$10,539.04)
015060	Non-Categorical Tobacco Rebasing	(\$107.94)	\$0.00	(\$107.94)
018000	Refunds	(\$136.06)	(\$605.64)	(\$741.70)
Communicable [	Disease Subtotal	(\$16,396.52)	(\$28,610.94)	(\$45,007.46)
Primary Care				
001009	Debit Memo - Bad Checks	\$0.00	\$59.69	\$59.69
001029	3rd Party Reimbursements	\$0.00	(\$17,566.92)	(\$17,566.92)
001077	Clinic Fee - County	\$0.00	(\$7,161.60)	(\$7,161.60)
001082	MEDICAID DENTAL	\$0.00	(\$12,458.70)	(\$12,458.70)
001083	Medicaid-Family Planning	\$0.00	(\$39,076.70)	(\$39,076.70)
001090	Medicare - Part B	\$0.00	(\$10,471.26)	(\$10,471.26)
001148	Medicaid HMO Non-Capitation	\$0.00	(\$172,507.25)	(\$172,507.25)
001191	MEDICAID MATERNITY	\$0.00	(\$26,532.15)	(\$26,532.15)
001192	MEDICAID COMPREHENSIVE CHILD	\$0.00	(\$1,250.82)	(\$1,250.82)
001193	MEDICAID COMPREHENSIVE ADULT	\$0.00	(\$10,486.56)	(\$10,486.56)
001208	Medipass Case Management Fee	\$0.00	(\$416.00)	(\$416.00)
005041	Interest Earned - State Investment Account	\$0.00	(\$385.40)	(\$385.40)
007000	Federal Grants	(\$127,655.48)	\$0.00	(\$127,655.48)
008034	BCC Contribution from General Fund	\$0.00	(\$7,535.98)	(\$7,535.98)
008050	School Board Contribution	\$0.00	(\$12,211.35)	(\$12,211.35)
010300	SALE OF GOODS AND SERVICES TO STATE AGENCIES	\$0.00	(\$4.00)	(\$4.00)
011001	Healthy Start Coalition	\$0.00	(\$126,228.14)	(\$126,228.14)
012021	Service Charge on Returned Check	\$0.00	(\$6.03)	(\$6.03)
015010	Transfers Within Agency	(\$140,362.87)	\$0.00	(\$140,362.87)
015040	CATEGORICAL GENERAL REVENUE	(\$100,700.00)	\$0.00	(\$100,700.00)
015050	NON CATEGORICAL GENERAL REVENUE	(\$135,446.99)	\$0.00	(\$135,446.99)
015060	Non-Categorical Tobacco Rebasing	(\$1,387.23)	\$0.00	(\$1,387.23)
015075	Transfer of Federal Grant from Another Agency	(\$79,809.08)	\$0.00	(\$79,809.08)
018000	Refunds	(\$1,748.58)	(\$962.05)	(\$2,710.63)
038000	Twelve Mth Warrant Cancellation	(\$1,748.38)	(\$302.05)	(\$23.20)
Primary Care Sul		(\$587,131.17)	(\$445,203.49)	(\$1,032,334.66)

**Environmental Health** 

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Analysis of Fund Equilities

Taylor County for Rosant Partice 7/2043 (@ 12/2013)

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Environmental	Health		(ອາດາກປາງ	(i));;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
001009	Debit Merno - Bad Checks	\$0.00	\$1,74	\$1.74
001020	Environmental Health Permits	(\$10,845.00)	\$0.00	(\$10,845.00)
001092	Environmental Health Fee - State	(\$21,474.00)	\$0.00	(\$21,474.00)
001093	CHD On-line Billing Fee	(\$171.00)	\$0.00	(\$171.00)
001094	Environmental Health Fee - County	\$0.00	(\$1,790.00)	(\$1,790.00)
005041	Interest Earned - State Investment Account	\$0.00	(\$11.24)	(\$11.24)
008034	BCC Contribution from General Fund	\$0.00	(\$219.86)	(\$219.86)
012021	Service Charge on Returned Check	\$0.00	(\$0.18)	(\$0.18)
015010	Transfers Within Agency	(\$2,482.03)	\$0.00	(\$2,482.03)
015050	NON CATEGORICAL GENERAL REVENUE	(\$13,052.83)	\$0.00	(\$13,052.83)
015060	Non-Categorical Tobacco Rebasing	(\$133.69)	\$0.00	(\$133.69)
018000	Refunds	(\$168.51)	(\$28.07)	(\$196.58)
Environmental	Health Subtotal	(\$48,327.05)	(\$2,047.60)	(\$50,374.66)
Unallocated Re	venue			
015010	Transfers Within Agency	(\$2,874.93)	\$0.00	(\$2,874.93)
015050	NON CATEGORICAL GENERAL REVENUE	(\$22,178.13)	\$0.00	(\$22,178.13)
015060	Non-Categorical Tobacco Rebasing	(\$227.15)	\$0.00	(\$227.15)
018000	Refunds	(\$286.31)	\$0.00	(\$286.31)
Unallocated Re	venue Subtotal	(\$25,566.52)	\$0.00	(\$25,566.52)
Non-Operating				
001206	Central Office Surcharge	(\$3,440.00)	\$0.00	(\$3,440.00)
Non-Operating	Subtotal	(\$3,440.00)	\$0.00	(\$3,440.00)
Total Revenue		(\$680,861.27)	(\$475,862.03)	(\$1,156,723.30)
Expenditures Con	tract - YTD			
Communicable	Disease	\$16,299.61	\$53,693.92	\$69,993.54
Primary Care		\$527,202.99	\$357,977.91	\$885,180.89
Environmental	Health	\$46,227.28	\$3,283.50	\$49,510.79
Non-Operating		\$17,710.40	\$0.00	\$17,710.40
Total Expenditure	es	\$607,440.29	\$414,955.34	\$1,022,395.62
Change in Fund	Ralance	(\$73,421)	(\$60,907)	(\$134,328)
Ending Equity Ba		(\$34,444)	(\$208,258)	(\$242,702)
				(

# SUBJECT/TITLE: Image: County Commission Agenda Item SUBJECT/TITLE: THE BOARD TO REVIEW AND CONSIDER APPROVAL OF A REQUEST TO RELEASE BUDGETED FUNDS FOR THE HUMAN SERVICES GRANT PROGRAM TO THE UNITED WAY OF THE BIG BEND, AS AGENDAED BY JACK BROWN, COUNTY ADMINISTRATOR. MEETING DATE REQUESTED:

Statement of Issue: THE BOARD TO RELEASE BUDGETED FUNDS

Recommended Action: RELEASE

Fiscal Impact: \$20,384

Budgeted Expense: YES

Submitted By: JACK BROWN, COUNTY ADMINISTRATOR

Contact: 838-3500x7

# SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: THE UNITED WAY OF THE BIG BEND IS THE ADMINISTRATOR OF THE BOARD'S HUMAN SERVICES GRANT PROGRAM. DETAILS OF AWARDS ARE PROVIDED IN THE ATTACHED REQUEST.

Options:

Attachments: LETTER OF REQUEST

# United Way of the Big Bend



January 26, 2014

Jack Brown, County Administrator Taylor County Board of County Commissioners 201 East Green Street Perry, Florida 32347

30 26

Dear Jack:

United Way of the Big Bend is pleased to continue serving as the administrator of your Human Services Grant Program. Your vote of confidence is deeply appreciated. We recognize that our economy has not improved and continues to place tremendous stress on many county budgets. Although we understand your need to reduce funding for your Human Services Grants program, we sincerely hope you will restore this cut in your 2014-15 Budget.

Because of the loss of \$50,000 in the current budget, members of your Community Investment Team chose to fund those agencies providing essential life services such as food, shelter and early childhood services, first. They allocated the available \$20, 384 as listed below:

Taylor County Senior Citizens Center - \$4,384 Taylor County Leadership Council - \$1,150 Taylor County Refuge House - \$5575 Early Learning Coalition - \$2,000 Taylor County Special Olympics - \$4,425 Taylor County Boys and Girls Club - \$2850

These funds will be distributed on a quarterly basis beginning with February 2014. In previous years, you have rendered payment in one check. Please consider this letter a request for \$20,384 to fund the agencies as listed above for fiscal year 2011-12. A copy of this letter is also being forwarded to Tammy Taylor, the County's Chief Financial Officer.

Again, we encourage members of your County Commission to restore the \$50,000 that it had to cut this year. The services provided by the agencies listed above are essential to many. Again, permit me to thank you for the confidence you have placed in United Way of the Big Bend to administer your Human Services Grant Program. Should you have any questions, please contact Glenda Hamby at 850-545-1344 or Glenda@UWBB.org

Sincerely, ther R. Mitchell President

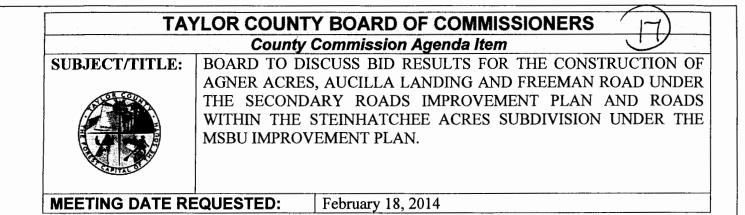
APPROVED FOR PAYMENT \$ 20,384 ACCT#: 0143-ACCT NAME:

C: Tammy Taylor

307 East Seventh Avenue, Tallahassee, FL 32303

Telephone 850-414-0844 Fax 850-414-0852 Visit us online at www.uwbb.org Email uwbb@uwbb.org Your community partner in Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, and Wakulla counties

	TAYLOR COUNTY BOARD OF COMMISSIONERS				
County Commission Agenda Item					
SUBJECT/TITI					
Meeting Date:	2/18/2014				
Statement of Is	ssue: Scott Frederick to present the TCDA quarterly update				
Recommendat					
Fiscal Impact:	\$_n/aBudgeted Expense: Yes No N/A _x				
Submitted By:	TCDA				
Contact:	Scott Frederick				
	SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS				
History, Facts	& Issues:				
Options:	12.				



# Statement of Issue:

The Board of County Commissioners received bids on February 3, 2014, for improvements to Agner Acres, Aucilla Landing and Freeman Road Drive under the Secondary Roads Improvement Plan as well as the roads within the Steinhatchee Acres Subdivision under the MSBU Improvement Plan.

# **Recommended Action:**

Review bid tabulation amounts with the apparent low bidder, Anderson Columbia, to determine if an acceptable opportunity is available to move forward with a Value Engineered option or whether the project(s) will require additional funding or delay.

Fiscal Impact:	FISCAL YR 2013/14 - TBD
Budgeted Expense:	YES
Submitted By:	ENGINEERING DIVISION
Contact:	COUNTY ENGINEER

# SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

# History, Facts & Issues:

The Board of County Commissioners received bids on February 3, 2014, for improvements to Agner Acres, Aucilla Landing and Freeman Road Drive under the Secondary Roads Improvement Plan as well as the roads within the Steinhatchee Acres Subdivision under the MSBU Improvement Plan. Bid information is as follows:

	Company Name								
Project	Anderson Columbia Co. Inc.	Capital Asphalt, Inc.	Curt's Construction Inc.	Oldcastle Southern Group, Inc.	SANDCO, Inc.				
Agner Acres	\$215,000	\$233,291	\$215,300	\$238,202.67	\$200,914.00				
Aucilla Landing	179,000	\$217,157	214,100	259,291.13	181,683.80				
Freeman Rd	266,000	\$327,991	297,100	335,169.82	330,218.70				
Steinhatchee Acres	424,000		594,000	539,571.46	697,289.40				
Total	\$1,084,000	\$778,439	\$1,320,500	\$1,372,235,08	\$1,410,105.90				

Note: Capital Asphalt's total is lower solely due to a no-bid on the Steinhatchee Acres Project.

	Funding Sources						
Project	Secondary Road Paving Dept. 0308	Steinhatchee Acres MSBU Dept. 0515					
Agner Acres	\$122,000 – 11/5/2012 Meeting <sup>1</sup> / <sub>2</sub> Common (0308-56310) & <sup>1</sup> / <sub>2</sub> Dist. 1 (0308-56311)						
Aucilla Landing	\$87,480.00 (0308-56308)						
Freeman Rd	\$262,132 (0308-56312)						
Steinhatchee Acres	\$54,272 (0308-56313)	\$227,112 (0515-59922)					

Note: District 1 Fund balance is \$14,292 vs. the \$61,000 11/5/2012 pledged amount.

Based on the above information, Anderson Columbia is the lowest project bid received. However, the construction cost bids received for all four projects exceed the available funding even without including any inspection costs (CEI). Therefore, Staff recommends BOCC approval to request bid tabulation amounts with the apparent low bidder, Anderson Columbia, to determine if an acceptable opportunity is available to move forward with a Notice of Award and a Value Engineered option or whether the project(s) will require additional funding or delay. Staff will return to discuss the findings with the Board once those discussions are completed.

# **Options:**

- 1) Approve the request to discuss project bid amounts with the lowest apparent bidder, Anderson Columbia and present such findings with the Board at a later date.
- 2) Deny the request and state such reasons for denial.

# Attachments:

Expenditure Status Reports

SUNGARD PENTAMATION, INC. DATE: 02/12/2014 TIME: 11:38:11

### TAYLOR COUNTY BOARD OF COMMISSIONERS EXPENDITURE STATUS REPORT

PAGE NUMBER: EXPSTA11

1

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SELECTION CRITERIA: expledgr.key\_orgn='0308' ACCOUNTING PERIOD: 5/14

SORTED BY: FUND, FUNCTION, ACTIVITY, TOTL/DEPT, ACCOUNT TOTALED ON: FUND, TOTL/DEPT PAGE BREAKS ON: FUND, TOTL/DEPT

FUND-106 SECONDARY ROAD PROJECT FD FUNCTION-540 TRANSPORTATION ACTIVITY-541 ROAD & STREET FACILITIES TOTL/DEPT-0308 SECONDARY-ROAD PAVING

			PERIOD	ENCUMBRANCES	YEAR TO DATE	AVAILABLE	YTD/	
ACCOUN	T TITLE	BUDGET	EXPENDITURES	OUTSTANDING	EXP	BALANCE	BUD	
56308	AUCILLA LANDING PAVING	87,480.00	.00	.00	.00	87,480.00	.00	
56310	COUNTY-WIDE ROAD PAVING	660,828.00	128.82	.00	128.82	660,699.18	.02	
56311	DISTRICT 1 - ROAD PAVING	33,667.00	19,375.00	.00	19,375.00	14,292.00	57.55	
56312	DISTRICT 2 - ROAD PAVING	262,132.00	.00	.00	.00	262,132.00	.00	
56313	DISTRICT 3 - ROAD PAVING	144,441.00	7,000.00	12,375.00	7,000.00	125,066.00	13.41	
56314	DISTRICT 4 - ROAD PAVING	66,016.00	.00	.00	.00	66,016.00	.00	
56315	DISTRICT 5 - ROAD PAVING	21,545.00	.00	.00	.00	21,545.00	.00	
	TOTAL SECONDARY-ROAD PAVING	1,276,109.00	26,503.82	12,375.00	26,503.82	1,237,230.18	3.05	
	TOTAL SECONDARY ROAD PROJECT	1,276,109.00	26,503.82	12,375.00	26,503.82	1,237,230.18	3.05	
TOTAL	REPORT	1,276,109.00	26,503.82	12,375.00	26,503.82	1,237,230.18	3.05	

SUNGARD PENTAMATION, INC. DATE: 02/12/2014 TIME: 11:39:01

### TAYLOR COUNTY BOARD OF COMMISSIONERS EXPENDITURE STATUS REPORT

PAGE NUMBER: 1 EXPSTA11

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SELECTION CRITERIA: expledgr.key\_orgn='0515' ACCOUNTING PERIOD: 5/14

SORTED BY: FUND, FUNCTION, ACTIVITY, TOTL/DEPT, ACCOUNT TOTALED ON: FUND, TOTL/DEPT PAGE BREAKS ON: FUND, TOTL/DEPT

### FUND-125 MSBU FD-STEINHATCHEE ACRE FUNCTION-540 TRANSPORTATION ACTIVITY-541 ROAD & STREET FACILITIES TOTL/DEPT-0515 STEINHATCHEE ACRES SUBDIV

ACCOUNT 53401 53402 53403 55300 59922	CONTRACTUAL SERVICES CONTRACTUAL-ROAD GRADING CONTRACTUAL-ROWING ROAD MATERIALS & SUPPLIE SINKING FUND/RESERVE AL STEINHATCHEE ACRES SUBD	BUDGET 150.00 1,000.00 1,500.00 1,000.00 227,112.00 230,762.00	PERIOD EXPENDITURES .00 .00 .00 .00 .00 .00	ENCUMBRANCES OUTSTANDING .00 .00 .00 .00 .00	YEAR TO DATE EXP 150.00 .00 254.86 .00 .00 404.86	AVAILABLE BALANCE .00 1,000.00 1,245.14 1,000.00 227,112.00 230,357.14	YTD/ BUD 100.00 .00 16.99 .00 .00 .18
TOTA	AL MSBU FD-STEINHATCHEE AC	230,762.00	.00	.00	404.86	230,357.14	.18
TOTAL REPO	ORT	230,762.00	.00	.00	404.86	230,357.14	.18

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MERCEL COMPAREMENTS

	LOR COUNT	Y BOARD OF COMMISSIONERS
	County	Commission Agenda Item
SUBJECT/TITLE:		PROVE AND AWARD THE CONTRACT FOR THE NTY CLOSED LANDFILL MOWING AND FERTILIZING
MEETING DATE RE	EQUESTED:	February 18, 2014

# Statement of Issue:

As part of its long-term care requirements for the Taylor County Closed Landfill, the Board of County Commissioners periodically enters into a contract for mowing and fertilizing the maintained areas of the landfill site. This maintenance activity ensures that a healthy vegetative protective cover will be available during the 20-year oversight term due to expire in April 2016.

The Board received proposals for the Taylor County Closed Landfill Mowing and Fertilizing Services Request For Proposals (RFP) on February 3, 2014. The Board appointed Brent Burford, Melody Cox and Kenneth Dudley as the RFP Review Committee.

Three proposals were submitted:

Padgett Lawn Care, LLC.	\$ 7,566.43/year
Unlimited Dirt Works, LLC.	\$10,057.81/year
Elixson Enterprises, LLC.	\$13,203.32/year

# **Recommended Action:**

Board to approve and award the contract to Padgett Lawn Care, LLC as the lowest responsive bidder as determined by the Board.

Fiscal Impact:	FISCAL YR 2013/14 & 2014/15 - \$8,642.26 INCLUDING ONE (1) EXTRA MOWING CYCLE
Budgeted Expense	e: YES (FY 13/14)
Submitted By:	COUNTY ENGINEER
Contact:	COUNTY ENGINEER

# SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

# History, Facts & Issues:

The current Landfill Mowing and Fertilizing contract was awarded to Padgett Lawn Care, LLC. at the November 1, 2010, County Commission Meeting. Padgett Lawn Care has had the Landfill Mowing and Fertilizing contract since 2010.

The current Landfill Mowing and Fertilizing contract expired on September 30, 2013. After readvertising, the Board received three proposals at the February 3, 2014 meeting. They are as follows:

Bidder	Mowing	Fertilizing	Total
Padgett Lawn Care, LLC.	\$4,303.32	\$3,263.11	\$ 7,566.43/year
Unlimited Dirt Works, LLC.	\$7,000.00	\$3,057.81	\$10,057.81/year
Elixson Enterprises, LLC.	\$8,881.32	\$4,322.00	\$13,203.32/year
•	(Amounts exclusive of any extra mowing cycles)		

Padgett Lawn Care's bid package was found to be complete and the lowest responsive bid submitted. Therefore, Staff recommeds that Board approve and award the Landfill Mowing and Fertilizing contract to Padgett Lawn Care, LLC.

# **Options:**

- 1) Award the contract to Padgett Lawn Care, LLC. based on being the lowest responsive bidder.
- 2) Reject all bids and readvertise.

# Attachments:

Bid Review Committee and Results.

# TAYLOR COUNTY CLOSED LANDFILL MOWING & FERTILIZING CONTRACT **BID REVIEW COMMITTEE RESULTS**

		Company Name	
Required Items	Padgett Lawn Care, LLC	Unlimited Dirt Works, LLC	Elixson Enterprises, LLC
Addenda #1	$\checkmark$		
Liability/Insurance Statement	$\checkmark$		
Workers Comp or Exemption	$\checkmark$		
Hold Harmless Release/Insurance			
Non-Collusion Affidavit			
Public Entity and Crimes	$\checkmark$		
Business/Contractor License/Registration			
Location of Office Serving Taylor County	Perry, FL	Lamont, FL	Raiford, FL
Proposal Amount	7.56643	10,057 81	#4322ª
Proposal Amount \$7,56643 10,057 81 \$4,322 13,203 3 Kenneth Dudley, County Engineer			
Brent Burford Engineer			
Melody Cox, Director of Grants Administration			

TA	LOR COUNT	Y BOARD OF COMMISSIONERS
	County	Commission Agenda Item
SUBJECT/TITLE:		v and approve grant application and resolution to the nent of Health (FDOH) , EMS Services Program,
	program for Au	rgency Preparedness and Community Support grant tomatic External Defibrillator's (AED's) for eleven unty Fire Rescue vehicles.
MEETING DATE R	QUESTED:	February 18, 2014

# Statement of Issue: Board to review and approve grant application and resolution for the above referenced project.

**Recommended Action:** Approve grant application

- Fiscal Impact: The project has a total cost of \$14,245. If funded, the County would have a maximum match of \$3,561.25. The County will be notified in July 2014 as to the status of the grant application. If necessary, the match could be budgeted for FY 2014-2015 as the County will have one year to expend the funds.
- Budgeted Expense: Not budgeted at this time, however the Board approved the match at the January 21, 2014 meeting.

Submitted By: Melody Cox

Contact: Melody Cox

# SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: Taylor County Fire Rescue is the secondary responder to medical calls if DMH EMS is responding to other calls. Over the past three years Fire Rescue has responded to 404 medical calls which were non-fire related. Fire Rescue currently only has two AED's which are more than six years old. Per the National Fire Protection Agency Standards (NFPA) each Engine and Tanker Truck are required to have one AED. Though this grant program is targeted to Emergency Medical Services, Fire Departments are eligible to apply.

Attachments: EMS Matching Grant Application and Resolution

MALCOLM PAGE District 1 JIM MOODY District 2 JODY DEVANE District 3 PAM FEAGLE District 4 PATRICIA PATTERSON District 5

# TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

ANNIE MAE MURPHY, Clerk Post Office Box 620 Perry, Florida 32348 (850) 838-3506 Phone (850) 838-3549 Fax JACK R. BROWN, County Administrator 201 East Green Street Perry, Florida 32347 (850) 838-3500, extension 7 Phone (850) 838-3501 Fax CONRAD C. BISHOP, JR., County Attorney Post Office Box 167 Perry, Florida 32348 (850) 544-6113 Phone (850) 584-2433 Fax

Upon motion of Commissioner with second by Commissioner and a vote of the Board of Taylor County Board of County Commissioners, adopt the following resolution:

# RESOLUTION

WHEREAS, THE STATE OF FLORIDA, DEPARTMENT OF HEALTH HAS ESTABLISHED THE EMERGENCY MEDICAL SERVICES GRANT PROGRAM AS PER 401.113 (2) (6) FLORIDA STATUTES, AND;

WHEREAS, TAYLOR COUNTY BOARD OF COMMISSIONERS IS ELIGIBLE TO SUBMIT GRANT APPLICATION AND RECEIVE AN AWARD UNDER THIS PROGRAM FOR THE IMPROVEMENT OF THE COUNTY'S PREHOSPITAL EMERGENCY MEDICAL SERVICES;

THEREFORE BE IT RESOLVED, THAT THE TAYLOR COUNTY BOARD OF COMMISSIONERS CERTIFIES THAT IF GRANT FUNDS ARE AWARDED FROM THE EMERGENCY MEDICAL SERVICES RURAL AND MATCHING GRANT PROGRAM THE AWARDED FUNDS WILL BE USED TO IMPROVE THE COUNTY PREHOSPITAL EMERGENCY MEDICAL SERVICES. THE TAYLOR COUNTY BOARD OF COMMISSIONERS CERTIFIES MATCHING FUNDS ARE AVAILABLE FOR THE GENERAL MATCH GRANT AT 75% FUNDING OR THE RURAL MATCH GRANT AT 90% FUNDING IF SO AWARDED.

DONE AND ORDERED IN REGULAR SESSION AT PERRY, FLORIDA THIS 18TH DAY OF FEBRUARY 2014, A. D.

Board of County Commissioners Taylor County, Florida

Ву:\_\_\_\_\_

Malcolm Page, Chairman

Attest: \_\_\_\_\_

Annie Mae Murphy, Clerk



# EMS MATCHING GRANT APPLICATION

# FLORIDA DEPARTMENT OF HEALTH Emergency Medical Services Program



Complete all items unless instructed differently within the application

Type of Grant Requested: 🛛 Rural 📃 Matching

ID. Code (The State Bureau of EMS will assign the ID Code – leave this blank)

1. Organization Name: Taylor County - EMS			
2. <u>Grant Signer</u> : (The applicant signatory who has a documents. This individual must also sign this appli Name: Malcolm Page			
Position Title: Chairman			
Address: 201 East Green Street			
City: Perry	County: Taylor		
State: Florida	Zip Code: 32347		
Telephone: 850-838-3500	Fax Number: 850-838-3501		
E-Mail Address: mpage@taylorcountygov.co	m		
3. <u>Contact Person</u> : (The individual with direct knowledge of the project on a day-to-day basis and responsibility for the implementation of the grant activities. This person may sign project reports and may request project changes. The signer and the contact person may be the same.) Name: Melody Cox			
Position Title: Grants Director Address: 201 East Green Street			
City: Perry	County: Taylor		
State: Florida	Zip Code: 32347		
Telephone: 850-838-3553	Fax Number: 850-838-3563		

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64J-1.015, F.A.C.

E-Mail Address: melody.cox@taylorcountygov.com

<ul> <li>4. Legal Status of Applicant Organization (Check only one response): <ul> <li>(1)</li> <li>Private Not for Profit [Attach documentation-501 (3) ©]</li> <li>(2)</li> <li>Private For Profit</li> <li>(3)</li> <li>City/Municipality/Town/Village</li> <li>(4)</li> <li>County</li> <li>(5)</li> <li>State</li> <li>(6)</li> <li>Other (specify):</li> </ul></li></ul>			
5. Federal Tax ID Number (Nine Digit Number). VF <u>596000879</u>			
6. EMS License Number: <u>6202</u> Type: ITransport INon-transport Both			
7. Number of permitted vehicles by type: BLS; ALS Transport; ALS non-transport.			
8. Type of Service (check one): Rescue; Fire; Third Service (County or City Government, nonfire); Air ambulance; Fixed wing; Rotowing; Both; Other (specify)			
9. <u>Medical Director of licensed EMS provider</u> : If this project is approved, I agree by signing below that I will affirm my authority and responsibility for the use of all medical equipment and/or the provision of all <u>continuing</u> EMS education in this project. <b>[No signature is needed if medical equipment and professional EMS education are</b> <u>not</u> in this project.]			
Signature: Date:			
Print/Type: Name of Director Miles V. Nelson, M.D.			
FL Med. Lic. No. <u>ME 55617</u>			
Note: <u>All</u> organizations that are not licensed EMS providers must obtain the signature of the medical director of the licensed EMS provider responsible for EMS services in their area of operation for projects that involve medical equipment and/or continuing EMS education.			
<u>If</u> your activity is a research or evaluation project, omit Items 10, 11, 12, 13, and skip to Item Number 14. <u>Otherwise</u> , proceed to Item 10 and the following items.			
10. <u>Justification Summary</u> : Provide on no more than <u>three</u> one sided, double spaced pages a summary addressing this project, covering each topic listed below.			
<ul> <li>A) Problem description (Provide a narrative of the problem or need);</li> <li>B) Present situation (Describe how the situation is being handled now);</li> <li>C) The proposed solution (Present your proposed solution);</li> <li>D) Consequences if not funded (Explain what will happen if this project is not funded);</li> <li>E) The geographic area to be addressed (Provide a narrative description of the geographic area);</li> <li>F) The proposed time frames (Provide a list of the time frame(s) for completing this project);</li> <li>G) Data Sources (Provide a complete description of data source(s) you cite);</li> <li>H) Statement attesting that the proposal is not a duplication of a previous effort (State that this project doesn't duplicate what you've done on other grant projects under this grant program).</li> </ul>			
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Next, only complete <u>one</u> of the following: Items 11, 12, <u>or</u> 13. Read all three and then select and complete the one that pertains the most to the preceding Justification Summary. Note that on all three, that before-after differences for emergency victim data are the highest scoring items on the Matching Grants Evaluation Worksheet used by reviewers to evaluate your application form.

11. <u>Outcome For Projects That Provide or Effect Direct Services To Emergency Victims:</u> This may include vehicles, medical and rescue equipment, communications, navigation, dispatch, and all other things that impact upon on-site treatment, rescue, and benefit of emergency victims at the emergency scene. Use no more than two additional one sided, double-spaced pages for your response. Include the following.

- A) Quantify what the situation has been in the most recent 12 months for which you have data (include the dates). The strongest data will include numbers of deaths and injuries during this time.
- B) In the 12 months <u>after</u> this project's resources are on-line, estimate what the numbers you provided under the preceding "(A)" should become.
- C) Justify and explain how you derived the numbers in (A) and (B), above.
- D) What other outcome of this project do you expect? Be quantitative and explain the derivation of your figures.
- E) How does this integrate into your agency's five year plan?

12. <u>Outcome For Training Projects</u>: This includes training of all types for the public, first responders, law enforcement personnel, EMS and other healthcare staff. Use no more than two additional one sided, double-spaced pages for your response. Include the following:

- A) How many people received the training this project proposes in the most recent 12 month time period for which you have data (include the dates).
- B) How many people do you estimate will successfully complete this training in the 12 months <u>after</u> training begins?
- C) If this training is designed to have an impact on injuries, deaths, or other emergency victim data, provide the impact data for the 12 months <u>before</u> the training and project what the data should be in the 12 months <u>after</u> the training.
- D) Explain the derivation of all figures.
- E) How does this integrate into your agency's five year plan?

13. <u>Outcome For Other Projects</u>: This includes quality assurance, management, administrative, and other. Provide numeric data in your responses, if possible, that bear directly upon the project and emergency victim deaths, injuries, and/or other data. Use no more than two additional one sided, double-spaced pages for your response. Include the following.

- A) What has the situation been in the most recent 12 months for which you have data (include the dates)?
- B) What will the situation be in the 12 months after the project services are on-line?
- C) If this project is designed to have an impact on injuries, deaths, or other emergency victim data, provide the impact data for the 12 months <u>before</u> the project and what the data should be in the 12 months <u>after</u> the project.
- D) Explain the derivation of all numbers.
- E) How does this integrate into your agency's five year plan?

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Skip Item 14 and go to Item 15, unless your project is research and evaluation and you have not completed the preceding Justification Summary and one outcome item.

14. <u>Research and Evaluation Justification Summary, and Outcome:</u> You may use no more than <u>three</u> additional one sided, double spaced pages for this item.

- A) Justify the need for this project as it relates to EMS.
- B) Identify (1) location and (2) population to which this research pertains.
- C) Among population identified in 14(B) above, specify a past time frame, and provide the number of deaths, injuries, or other adverse conditions during this time that you estimate the practical application of this research will reduce (or positive effect that it will increase).
- D) (1) Provide the expected numeric change when the anticipated findings of this project are placed into practical use.
  - (2) Explain the basis for your estimates.
- E) State your hypothesis.
- F) Provide the method and design for this project.
- G) Attach any questionnaires or involved documents that will be used.
- H) If human or other living subjects are involved in this research, provide documentation that you will comply with all applicable federal and state laws regarding research subjects.
- I) Describe how you will collect and analyze the data.

# ALL APPLICANTS MUST COMPLETE ITEM 15.

15. <u>Statutory Considerations and Criteria:</u> The following are based on s. 401.113(2)(b) and 401.117, F.S. Use no more than <u>one</u> additional double spaced page to complete this item. Write N/A for those things in this section that do not pertain to this project. Respond to all others.

Justify that this project will:

- A) Serve the requirements of the population upon which it will impact.
- B) Enable emergency vehicles and their staff to conform to state standards established by law or rule of the department.
- C) Enable the vehicles of your organization to contain at least the minimum equipment and supplies as required by law, rule or regulation of the department.
- D) Enable the vehicles of your organization to have, at a minimum, a direct communications linkup with the operating base and hospital designated as the primary receiving facility.
- E) Enable your organization to improve or expand the provision of:
  - 1) EMS services on a county, multi county, or area wide basis.
  - 2) Single EMS provider or coordinated methods of delivering services.
  - Coordination of all EMS communication links, with police, fire, emergency vehicles, and other related services.

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16. <u>Work activities and time frames</u>: Indicate the major activities for completing the project (use only the space provided). Be reasonable, most projects cannot be completed in less than six months and if it is a communications project, it will take about a year. Also, if you are purchasing certain makes of ambulances, it takes at least nine months for them to be delivered after the bid is let.

Work Activity	Number of Months After Grant Starts Begin End
Obtain final quotes from vendors	1 - 14 days
Order AEDs	14 - 30 days
Receive AEDs	31 - 90 days
Train Fire Rescue staff on AEDs	90 - 95 days
Place new AEDs in service	95 - 97 days
Close out grant	97 - 100 days
Upon receipt of grant, project	
will be complete within 100 days.	

17. <u>County Governments</u>: If this application is being submitted by a county agency, describe in the space below why this request cannot be paid for out of funds awarded under the state EMS county grant program. Include in the explanation why any unspent county grant funds, which are now in your county accounts, cannot be allocated in whole or part for the costs herein.

The state EMS county grant is used to provide equipment to the Taylor County EMS Service which is operated under the auspices of Doctors' Memorial Hospital, Inc. (DMH). DMH has stuggled financially over the past several years and had anticipated a reduction in EMS services, particulary in the south end of the County which is up to 45 miles from a medical facility. The Board of Commissioners has a commitment to ensuring adequate EMS services to all of our citizens and stepped up to assist DMH with the cost of EMS services. The County provides funding assistance to EMS in the amount of \$450,000 annually. With providing funding assistance to the primary EMS responder, there is a budget shortfall to provide additional critically needed equipment to the secondary responder which is Taylor County Fire Rescue Services. It is important to note, Taylor County is designated as one of "critical economic" concern by the State.

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18. Budget:		
Salaries and Benefits: For each position title, provide the amount of salary per hour, FICA per hour, fringe benefits, and the total number of hours.	Costs	<b>Justification:</b> Provide a brief justification why each of the positions and the numbers of hours are necessary for this project.
TOTAL:	<u>\$ 0.00</u>	Right click on 0.00 then left click on
		"Update Field" to calculate Total

<b>Expenses:</b> These are travel costs and the usual, ordinary, and incidental expenditures by an agency, such as, commodities and supplies of a consumable nature, <u>excluding</u> expenditures classified as operating capital outlay (see next category).	<b>Costs:</b> List the price and source(s) of the price identified.	Justification: Justify why each of the expense items and quantities are necessary to this project.
TOTAL:	£ 0.00	Pight plick on 0.00 then left plick on
TOTAL.	<u>\$ 0.00</u>	Right click on 0.00 then left click on "Update Field" to calculate Total

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Vehicles, equipment, and other operating capital outlay means equipment, fixtures, and other tangible personal property of a non consumable and non expendable nature, <u>and</u> the normal expected life of which is 1 year or more.	<b>Costs:</b> List the price of the item and the source(s) used to identify the price.	<b>Justification:</b> State why each of the items and quantities listed is a necessary component of this project.
11 Automatic External Defibillators (AED's) at a cost of \$1,295.00 each. A	\$14,245.00	11 County Fire Rescue vehicles are not equipped with AED's
guote from Defibtech Lifeline Auto AED are included in the attachments. Four quotes have been		
obtained to ensure cost efficiency and		
quality with a long term warranty.		
TOTAL:	<u>\$14,245.00</u>	Right click on 0.00 then left click on "Update Field" to calculate Total

State Amount (Check applicable program)		Pight click on 0.00 than left click on
X Matching: 75 Percent	\$10,683.75	Right click on 0.00 then left click on "Update Field" to calculate Total
Rural: 90 Percent		Right click on 0.00 then left click on
	<u>\$0.00</u>	"Update Field" to calculate Total
Local Match Amount (Check applicable program)		
		Right click on 0.00 then left click on
X Matching: 25 Percent	\$3,561.25	"Update Field" to calculate Total
Burgh 10 Percent		Right click on 0.00 then left click on
Rural: 10 Percent	<u>\$ 0.00</u>	"Update Field" to calculate Total
Grand Total	<u>\$14,245.00</u>	Right click on 0.00 then left click on

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19. Certification:

My signature below certifies the following.

I am aware that any omissions, falsifications, misstatements, or misrepresentations in this application may disqualify me for this grant and, if funded, may be grounds for termination at a later date. I understand that any information I give may be investigated as allowed by law. I certify that to the best of my knowledge and belief all of the statements contained herein and on any attachments are true, correct, complete, and made in good faith.

I agree that any and all information submitted in this application will become a public document pursuant to Section 119.07, F.S. when received by the Florida Bureau of EMS. This includes material which the applicant might consider to be confidential or a trade secret. Any claim of confidentiality is waived by the applicant upon submission of this application pursuant to Section 119.07, F.S., effective after opening by the Florida Bureau of EMS.

I accept that in the best interests of the State, the Florida Bureau of EMS reserves the right to reject or revise any and all grant proposals or waive any minor irregularity or technicality in proposals received, and can exercise that right.

I, the undersigned, understand and accept that the Notice of Matching Grant Awards will be advertised in the *Florida Administrative Weekly*, and that 21 days after this advertisement is published I waive any right to challenge or protest the awards pursuant to Chapter 120, F.S.

I certify that the cash match will be expended between the beginning and ending dates of the grant and will be used in strict accordance with the content of the application and approved budget for the activities identified. In addition, the budget shall not exceed, the department, approved funds for those activities identified in the notification letter. No funds count towards satisfying this grant if the funds were also used to satisfy a matching requirement of another state grant. All cash, salaries, fringe benefits, expenses, equipment, and other expenses as listed in this application shall be committed and used for the activities approved as a part of this grant.

Acceptance of Terms and Conditions: If awarded a grant, I certify that I will comply with all of the above and also accept the attached grant terms and conditions and acknowledge this by signing below.

Signature of Authorized Grant Signer (Individual Identified in Item 2) / / MM / DD / YY

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THE TOP PART OF THE FOLLOWING PAGE MUST ALSO BE COMPLETED AND SIGNED.

FLORIDA DEPARTMENT OF HEALTH EMS GRANT PROGRAM
REQUEST FOR GRANT FUND DISTRIBUTION
In accordance with the provisions of Section 401.113(2)(b), F. S., the undersigned hereby requests an EMS grant fund distribution for the improvement and expansion or continuation of pre-hospital EMS.
DOH Remit Payment To: Name of Agency:Taylor County Board of Commissioners
Mailing Address: 201 East Green Street
Perry, FI 32348
Federal Identification Number <u>59-6000879</u>
Authorized Agency Official:
Signature Date
Malcolm Page, Chairman Type Name and Title
Sign and return this page with your application to:
Sign and return this page with your application to.
Florida Department of Health EMS Program Grants
4052 Bald Cypress Way, A-22
Tallahassee, Florida 32399-1722
Do not write below this line. For use by Bureau of Emergency Medical Services personnel only
Grant Amount For State To Pay: \$ Grant ID Code:
Approved By: Signature of State EMS Grant Officer Date
Signature of State EMS Grant Officer Date
State Fiscal Year: 2013 - 2014
Organization Code         E.O.         OCA         Object Code           64-61-70-30-000         03         SF003         750000
Federal Tax ID: VF
Grant Beginning Date: Grant Ending Date:
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TA	LOR COUNT	Y BOARD OF COMMISSIONERS
	County	Commission Agenda Item
SUBJECT/TITLE:	the rehabilitati	ove bid award recommendations for bids received for on of four homes and the demolition and
		of one home through the SHIP program. The bids and opened at the February 3, 2014 Board meeting.
MEETING DATE RE	QUESTED:	February 18, 2014

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Statement of Issue: Board to approve bid committee recommendations for the rehabilitation of four homes and the demolition and reconstruction of one home through the SHIP Program.

Recommended Action: Approve bid committee recommendations

Fiscal Impact: Not applicable. The projects are 100% funded through the SHIP Program.

Submitted By: Melody Cox

Contact: Melody Cox

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# SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The Board received bids for four rehabilitation projects and one demolition and reconstruction February 3, 2014. The bid committee recommendations are as follows: REHABS Sharon Monroe 101 Joann Street

Certified Roofing and Construction \$15,025.00

Norma Wells 305 First Street Haggia Construction \$15,740.00

Stanley Smith 904 W. Wilcox Certified Roofing & Construction \$24,750.00

Barbara Gent 117 E. Pace Drive Certified Roofing and Construction \$7,725.00

DEMO AND RECONSTRUCTION Michelle Freeman 1146 N. Miller Road Weiss Construction \$63,400.00\*\* \*\*The lowest bidder was Florida Homes, Inc. at \$61,828.00 but with the local vendor preference option of 5 % the bid committee is recommending Weiss Construction be awarded the bid.

Attachments: Bid Tabulation Sheet and Bid Recommendations from Meridian

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## Taylor County SHIP Bid Tab

### Monday February 3 2014

Sharon Monroe		Norma Wells	Norma Wells Stanley an		Barbara Gent	Michelle Freeman		
Contractor	101 Joann Street (Rehab)		305 First Street (Rehab)	904	W. Wilcox (Rehab)	117 E. Pace Drive (Rehab)	1146 N. Miller Road (Demo)	
Weiss	\$	20,600.00	\$ 21,050.00	\$	34,450.00	\$ 10,900.00	\$ 63,400.00	
Certified Roofing and Construction	\$	15,025.00	\$ 17,755.00	s	26,750.00	\$ 7,725.00	\$ 71,920.00	
Florida Homes, Inc.							\$ 61,828.00	
Michael Lynn, Inc	\$	20,314.00	\$ 20,702.00	\$	41,717.00	\$ 13,062.00	\$ 64,699.00	
CB Construction (Chad Banks)	s	20,414.00	\$ 18,313.00			\$ 8,454.00		
Haggia Construction (Taite)	\$	16,140.00	\$ 15,740.00			\$ 8,616.00		
Recommended Contractor								

Bid Opening:

Signatures

Print Name

and with printing to an an and the second second

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Openend By:

Melody Cox

Monday February 3 2014

# MERIDIAN

# MEMORANDUM

TO:	Taylor County Board of County Commissioners
FROM:	Jay Moseley, Senior Consultant
SUBJECT:	Bid Award Recommendations
DATE:	February 7, 2014

#### **BID AWARD**

On February 3, 2014 sealed bids were received and opened for five houses in the Taylor County SHIP Program for Housing Rehabilitation. The bids received were opened at a regular commission meeting. These bids were reviewed and recommendations are made in accordance with the Local Housing Assistance Plan. The applicants, recommended bidders and the amounts for these houses are listed below:

### HOUSING REHABILITATION SHIP GRANT

APPLICANT	RECOMMENDED BIDDER	AMOUNT
Stanley Smith	Certified Roofing and Const.	\$24,750*
Sharon Monroe	Certified Roofing and Const.	\$15,025
Barbara Gent	Certified Roofing and Const.	\$ 7,725
Norma Wells	Haggai Construction, Inc.	\$15,740
Michelle Freeman	Weiss Construction, Inc.	\$63,400**

\*The low bid received for this house exceeded the maximum limit of \$25,000 allowed by the Housing Assistance Plan. The homeowner and contractor that submitted the lowest bid were contacted and agreed to accept the amount listed of \$24,750 by reducing the scope of work as per the attached bid documents.

\*\* While this was not the lowest bid received, the 5% local preference ordinance is allowable for the SHIP program. This bid is within the 5% parameter set by that ordinance. Recommended Action # 1: Award the houses as identified above.

Attachments: Bid Documents Bid Tabulation with Recommendations

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### TAYLOR COUNTY HOUSING REHABILITATION PROGRAM <u>WORK WRITE-UP/BID FORM</u>

**Owner:** Stanley and Tammy Smith

Address: 904 W. Wilcox St. - Perry

Mailing Address: Same

**Phone #:** <u>850-584-5585</u>

Parcel # 02995-000

### Date: 11/11/2013

The work write-up/bid form is a general outline of the work to be performed. Please refer to the project specification booklet for detailed instructions for each item noted below.

Item #	System	Description of Work	Location	Price
de de	lete 55	Replace shingles for front room, including all deteriorated roof decking and support members.	Front Room	1000
002	Siding	Install new hardiplank siding and trim for exterior walls. Paint siding and trim.	All	1000 1350
003	Electrical and Appliances	Replace panel and service with new minimum 150 amp panel and service. Replace all wiring in house with new wiring to meet current codes, including GFIC receptacles in kitchen, bathrooms and exterior, and including new smoke detectors / carbon monoxide detectors. Replace gas stove with new gas stove	All	6400
004	Plumbing	Replace kitchen sink. Celele	Kitchen	475
005	HVAC	Install new electric HVAC package system. New system shall be new central electric heating system (minimum 15 SEER) with service to all habitable rooms. Include all ductwork, piping, electrical, and other items necessary for a complete system.	All	5300
006	Steps	Replace rear steps with new PT wood steps and handrails.	∖ Rear	525

**Owner Signature** 

**Co-Owner** Signature

Contractor's Signature <u>Taylor County HR/WWU-Bid Form</u>

007	Cabinets	Replace kitchen cabinets with same footage	
		(base) and approximately 14' of upper	
		cabinets, including new countertops.	5700

26750

The Homeowners + the Contractor agree to delete itema # 001. Revol, \$004 flumberg + # 006 Steps to meet the \$25,000 Iptal Amoent of Bid is how # 24750

Owner Signature

Co-Owner Signature

Contractor's Signature <u>Taylor County HR/WWU-Bid Form</u>

Page 2 of 3

#### Taylor County SHIP Bid Tab

#### Monday February 3 2014

	Sharon Monroe			Norma Wells Stanley and Tammy Smith			Barbara Gent		Michelle Freeman		
Contractor		101 Joann Street (Rehab)		305 First Street (Rehab)		904 W. Wilcox (Rehab)		117 E. Pace Drive (Rehab)		6 N. Miller Road (Demo)	
Weiss Construction, Inc.	s	20,600.00	\$	21.050.00	s	34,450.00	s	10,900.00	5	63,400.00	
Certified Roofing and Construction	5	15.025.00	\$	17.755.00	\$	24,750.00	\$	7,725.00	s	71,920.00	
Florida Homes, Inc.									5	61,828.00	
Michael Lynn, Inc	s	20.314.00	\$	20,702.00	s	41,717.00	s	13,062.00	5	64,699.00	
CB Construction (Chad Banks)	s	20.414.00	s	18,313.00			s	8,454.00			
Haggai Construction (Taite)	5	16.140 00	5	15.740.00			s	8,616.00			
Recommended Contractor		Certified		Haggai		Certified*		Certified		Weiss Construction**	

Revised Bid Amount

5% Local Preference

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Bid Opening:
Signatures

Openend By:

Melody Cox

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Monday February 3 2014

# TAYLOR COUNTY BOARD OF COMMISSIONERS County Commission Agenda Item

# SUBJECT/TITLE:



Board to discuss the upcoming funding cycle for the Florida Boating Improvement Program (FBIP) as requested by the Board at the February 3, 2014 meeting.

MEETING DATE REQUESTED: February 18, 2014

Statement of Issue: The 2014 funding cycle for the FBIP grant program is currently open. Board to discuss if the County wishes to pursue a grant, and if so approve holding one public hearing at the March 3, 2014 Board meeting.

**Recommended Action:** Not applicable

Fiscal Impact: Not applicable at this time. A cash match of a minimum of 25% of the project cost would be required for the application to be competitive.

Budgeted Expense: Y/N Not applicable at this time.

Submitted By: Melody Cox

Contact: Melody Cox

# SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The 2014 funding cycle is now open for the FBIP grant program. Eligible use of grant funds include: Boat ramps, piers, docks, recreational channel markers, derelict vessel removal, boating education, and other boating-related activities that enhance boating access for recreational boating.

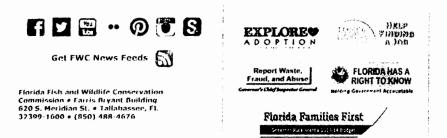
> It is important to note these grant funds can only be used for recreational boating enhancements and improvements not commercial activities and use. The County was awarded a grant FY 2013 for improvements to the Williams Fish Camp Landing (Mandalay) boat ramp and is currently waiting for the contract to move forward with the project.

Attachments: Information on the FBIP Program

			d Wildlife ommissior	)			Sign up for up	dates 🖗
Fishing Bo	ating	Hunting	Licenses & Permits	Wildlife Viewing	Wildlife & Habitats	Research	Education	Conservatio
Home Boating Florida I		e.	rovement	Progra	m (FBIF	<b>?</b> )		
Boating Regula Safety & Educa	tion	<u>, , , , , , , , , , , , , , , , , , , </u>	Application P February 3 thro		014			
Anchoring & Mo Waterway Mana	-	t	Related Docu	ments				
Boat Ramps & A Boating Grant F FBIP		5	<ul> <li>Program Gui</li> <li>Annual Repo</li> <li>Funded Proje</li> </ul>	rt 📆				
Funded Projects			Application F	orms				
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Safety & Educat			<ul> <li>Application F</li> <li>Application F</li> </ul>					
Advisory Counc	1		<ul> <li>Application F Related Activ</li> </ul>	orm E: Econo			and Other Loca	l Boating-
			The Florida Boa boating access of Florida. Eligit other governme	projects and o ble program pa	ther boating-re	lated activities de county gov	s on coastal and	d/or inland wate
			Eligible uses of	program funds	include:			
			<ul> <li>Boat ramps;</li> <li>Piers, docks</li> <li>Recreational</li> <li>Derelict vess</li> <li>Boating eduction</li> <li>Economic determine</li> <li>Other local boaters</li> </ul>	and other moo channel marki el removal ation velopment init	ring facilities ng and other u atives that pro	niform waterw	vay markers	-
			If you have any	avertions co	d amail to ED1	DOM FWG		400 5000

Documented vessels without a valid state registration must obtain a Florida registration and display the decal on the port side of the vessel when using Florida waters.

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ΙΔΥ	LOR COUNTY BOARD OF COMMISSIONERS
	County Commission Agenda Item
SUBJECT/TITLE:	Board to approve a resolution and an additional letter committing \$125,000 in SHIP funds as a match for the grant application to the Florida Department of Economic Development Small Cities Community Development Block Grant Program (CDBG) requesting funding to be used to rehabilitate very low, low, and moderate income homes of qualified applicants.
MEETING DATE RE	QUESTED: February 18, 2014
Statement of Issue: Recommended Acti	<ul> <li>Board to review and approve resolution and letter committing \$125,000 in SHIP funds for the upcoming CDBG grant application submission.</li> <li>ion: Approval of resolution and letter committing of a match of \$125,000 through SHIP funds for the CDBG housing</li> </ul>
	rehabilitation grant application.
\$750,000. Th are state fund	County will be requesting funding assistance in the amount of e County has set aside \$125,000 in SHIP housing funds. These ds and can be used for a match for CDBG funds which are federal dditional match will be required from the County
	dditional match will be required from the County.
Budgeted Expense:	: Y/N
Budgeted Expense: Submitted By: Mel	: Y/N lody Cox
Budgeted Expense: Submitted By: Mel Contact: Melod	: Y/N lody Cox
Budgeted Expense: Submitted By: Mel Contact: Melod <u>S</u>	: Y/N lody Cox y Cox
Budgeted Expense: Submitted By: Mel Contact: Melod <u>S</u>	: Y/N lody Cox y Cox <u>SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS</u> sues: The County is in the process of submitting grant application to the Florida Department of Economic Opportunity, Community Development Block Grant Program requesting funding for housing rehabilitation for very low, low, and moderate income homeowners. The resolution and the letter committing to the match are a requirement to receive the points for a match on the grant application.

JIM MOODY District 2 JODY DEVANE District 3 PAM FEAGLE District 4 PATRICIA PATTERSON District 5



# TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

ANNIE MAE MURPHY, Clerk Post Office Box 620 Perry, Florida 32348 (850) 838-3506 Phone (850) 838-3549 Fax JACK R. BROWN, County Administrator 201 East Green Street Perry, Florida 32347 (850) 838-3500, extension 7 Phone (850) 838-3501 Fax CONRAD C. BISHOP, JR., County Attorney Post Office Box 167 Peny, Florida 32348 (850) 584-6113 Phone (850) 584-2433 Fax

RESOLUTION 2014-01-

A RESOLUTION AUTHORIZING THE TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS TO MAKE APPLICATION TO THE STATE OF FLORIDA, DEPARTMENT OF ECONOMIC OPPORTUNITY, SMALL CITIES COMMUNITY DEVELOPMENT BLOCK GRANT, FFY 2013; PROVIDING AN EFFECTIVE DATE; AND FOR OTHER PURPOSES.

WHEREAS, Taylor County is experiencing a need for physical improvements in one or more neighborhoods; and

WHEREAS, Taylor County is experiencing a need for economic improvement and sustainability; and

WHEREAS, it is the desire of the Taylor County Board of County Commissioners that local residents be assisted in creating an improved living and working environment in these areas.

NOW THEREFORE BE IT RESOLVED THAT THE TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS, PERRY, FLORIDA authorizes the CHAIRMAN, COUNTY ADMINISTRATOR to act in connection with the grant and is authorized to sign correspondence and documents on behalf of the County;

SECTION 1. That the Small Cities Community Development Block Grant (CDBG) program is declared to be a workable program for providing needed physical improvements to benefit the low-to-moderate income residents indicated in the FY 2013 CDBG application.

SECTION 2. The Taylor County Board of County Commissioners herby directs the Chairman to sign all necessary certifications of the CDBG application.

SECTION 3. The Taylor County Board of County Commissioners directs the Chairman to execute and submit the CDBG application to the State of Florida, Department of Economic Opportunity for approval and in their absence directs the Vice Chairman to execute the application and all subsequent documents.

SECTION 4. That the County Chief Administrator or the Vice Chairman in his/her absence, is authorized and directed to submit additional information in a timely manner as may be required by the State of Florida, Department of Economic Opportunity.

SECTION 5. The proposed CDBG application is consistent with the local comprehensive plan.

SECTION 6. The Taylor County Board of County Commissioners commits \$125,000.00 in County SHIP funds as leverage to the FFY 2013 CDBG project contingent upon receiving an award from the Department of Economic Opportunity. These funds will be expended in an addressed needs service area after the date of the site visit and prior to administrative closeout. These funds being committed as leverage within the FFY 2013 CDBG application are currently available.

SECTION 7. This resolution shall take effect immediately upon its passage.

DULY ADOPTED in regular session this \_\_\_\_ day of February, 2014\_.

BOARD OF COUNTY COMMISSIONERS TAYLOR COUNTY

ATTEST:

Malcolm Page, Chairman

Annie Mae Murphy, Clerk

MALCOLM PAGE District 1

MARK WIGGINS District 2 LONNIE HOUCK District 3 PAM FEAGLE District 4 PATRICIA PATTERSON District 5



# TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

ANNIE MAE MURPHY, Clerk Post Office Box 620 Perry, Florida 32348 (850) 838-3506 Phone (850) 838-3549 Fax JACK R. BROWN, County Administrator 201 East Green Street Perry, Florida 32347 (850) 838-3500, extension 7 Phone (850) 838-3501 Fax CONRAD C. BISHOP, J.R., County Attorney Post Office Box 167 Perry, Florida 32348 (850) 584-6113 Phone (850) 584-2433 Fax

February 18, 2014

Mr. Bob Dennis Community Program Manager Department of Economic Opportunity Florida Small Cities CDBG Program 107 East Madison Street Tallahassee, Florida 32399-4120

Re: Florida Small Cities Community Development Block Grant (CDBG) FFY 2013 Application Taylor County, FL

Mr. Dennis:

The Taylor County Board of County Commissioners is pleased to commit \$125,000 from the County's SHIP funds to the CDBG Housing Rehabilitation project contingent upon funding from the Department. These funds will be spent in an area of addressed needs after the date of the site visit and prior to administrative closeout.

We look forward to working with your department on this project.

Sincerely,

Malcolm Page Chairperson Taylor County Board of County Commissioners

TAYLOR COUNTY BOARD OF COMMISSIONERS								
County Commission Agenda Item								
SUBJECT/TITLE:	22A.	. THE BOARD CONSIDER REAPPOINTING ALAN HALL AND YANCIE BRANNEN TO THE TAYLOR COUNTY RECREATION ADVISORY BOARD (TCRAB) AND TASK STAFF TO ADVERTISE TO FILL ONE VACANCY ON THE BOARD, AS AGENDAED BY THE ASSISTANT COUNTY ADMINISTRATOR.						
MEETING DATE REC	QUE	STED: February 18, 2014						
Statement of Issue:		The Board to reappoint to members and solicit to fill one vacancy						
Recommended Action:		Reappoint and task staff to fill the vacancy						
Fiscal Impact:		Approximately \$100.00						
Budgeted Expense:		YES						
Submitted By:		Dustin Hinkel, Assistant County Administrator						
Contact:		838-3500x7						

# SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The terms for three board members on the TCRAB will expire on March 3, 2014. Mr. Brannen and Mr. Hall have contacted staff to request the Board to reappoint them to the Board. Mr. Newberry has requested to allow his term to expire. Board members serve terms of 3 years.

Options: Appoint Mr. Brannen and Mr. Hall and advertise for 1 vacancy Decline appointment and advertise for 3 vacancies

Attachments: Draft notice

# Taylor County Board of County Commissioners is Accepting Applications for TAYLOR COUNTY RECREATION ADVISORY BOARD (TCRAB) MEMBER

This is a demanding volunteer position that meets regularly to discuss operations of the Taylor County Sports Complex. TCRAB will consist of 7 members, each of whom must be a registered voter of Taylor County as well as being a current resident of the County. Appointees are representatives of all sports played at the County Sports Complex including but not limited to soccer, football, baseball, softball, basketball, tennis, and users of the trail. Three (3) positions are available.

For more information or to request an application please call 838-3500 extension 7 or come by the Taylor County Administrative Complex located at 201 East Green Street or visit <u>www.taylorcountygov.com</u>.

**Deadline for submission of applications is April 2, 2014 at 10:00 AM**. Applications may be delivered to the County Administrator's Office at 201 East Green Street. Applications may also be faxed to 838-3501 or emailed to <u>admin.assist@taylorcountygov.com</u>.

Member selection will be made during the Board of County Commissioners' meeting scheduled for April 7, 2014.

JIM MOODY District 2 JODY DEVANE District 3 PAM FEAGLE District 4

CONRAD C. BISHOP, JR.,



# TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

ANNIE MAE MURPHY, Clerk

Post Office Box 620 Perry, Florida 32348 (850) 838-3506 Phone (850) 838-3549 Fax JACK R. BROWN, County Administrator

201 East Green Street Perry, Florida 32347 (850) 838-3500, extension 7 Phone (850) 838-3501 Fax County Attorney Post Office Box 167 Perry, Florida 32348 (850) 584-6113 Phone (850) 584-2433 Fax

February 18, 2014

To Whom It May Concern,

The Taylor County Board of County Commissioners strongly supports the efforts of The Boys & Girls Club of Taylor County's 21st Century Learning Center. Taylor County is designated by the Governor as a Rural Area of Critical Economic Concern. Without the support of the 21st Century Learning Center, the club would not be able to serve the youth in our community with all the free educational programs.

Sincerely,

Malcolm V. Page Chairman

	(23)
TAY	LOR COUNTY BOARD OF COMMISSIONERS
	County Commission Agenda Item
SUBJECT/TITLE:	The Board to discuss the status of Helen Street and provide guidance as agendaed by Jack Brown, County Administrator.
MEETING DATE RE	QUESTED: February 18, 2014
Statement of Issue	On April 5, 1999, the Board of County Commissioners voted to have the Road Department start grading Helen Street. This street is in the City Limits located between the City's portion of Ash Street and the County Road – Pharo Morgan. The Board did not adopt the street but just directed maintenance. This leads to an uncertainty on the part of the staff as to the status of this street, which needs to be resolved.
Recommended Act Budgeted Item: Submitted By: Contact:	ion: Adopt or Quit Maintaining Fiscal Impact: None N/A Jack R. Brown, County Administrator (850) 838-3500, Ext 7. County.admin@taylorcountygov.com

# SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

**History, Facts & Issues:** As stated above the Board in 1999 directed the Board to start maintaining Helen Street. Mr. Ter Maat an owner of a piece of property wants to block off Helen Street. As the County Administrator, I would be responsible to notify to the Sheriff to have the owner remove the obstacle if it was a county road. I need the Board to take action to clarify the status of Helen Street. Is it a County Road of Not? If it is, we will continue to maintain it as we have over the past 14 years. If it isn't, then Counsel should advise the Board on how to proceed. The road at best is a narrow, one lane, prescriptive easement road. There isn't sufficient right of way for adequate ditches or to improve the road. The sides of the road are in most areas much higher than the road. It would take significant money to make improvements to the road.

**Options:** Listen to the overview and provide guidance.

**Attachments:** Minutes from the April 5, 1999 BOCC Meeting along with various emails and letters in regards to the issue.

Book Type BOCC Date 04/05/1999 Time 06:00 P.M.

Book# 41 Minutes# 1 Meeting-Type REGULAR

BOARD OF COUNTY COMMISSIONERS TAYLOR COUNTY, FLORIDA COURTHOUSE ANNEX M I N U T E S MONDAY, APRIL 5, 1999 6:00 P.M. 4

THE BOARD OF COUNTY COMMISSIONERS OF TAYLOR COUNTY, FLORIDA, MET IN REGULAR SESSION ON THE ABOVE DATE.

PRESENT WERE FRANK RUSSELL, CHAIRMAN, WALTER ROWELL, EDD SADLER, JOHNNY HANKERSON AND BEA FOSKEY, A FULL BOARD BEING PRESENT. COUNTY ATTORNEY, CONRAD BISHOP, WAS ALSO PRESENT.

COMMISSIONER FOSKEY DISCUSSED THE MAINTENANCE OF THE EAST END OF ASH STREET TO THE PHARO MORGAN ROAD (HELFN STREET). AFTER DISCUSSION, COMMISSIONER ROWELL MADE A MOTION TO AUTHORIZE THE PUBLIC WORKS DIRECTOR TO GRADE HELEN STREET. THE MOTION WAS SECONDED BY COMMISSIONER FOSKEY. VOTING ON THE MOTION WAS AS FOLLOWS: YEA: COMMISSIONERS ROWELL, FOSKEY AND RUSSELL NAY: COMMISSIONERS HANKERSON AND SADLER

THE MOTION CARRIED.

From:
Sent:
To:
Subject:

Jack Brown Friday, Eebruary 07, 2014 5:29 AM bob brown Re: Minutes Relating to Helen Street

Thanks! Are those prior to 2000 scanned into PDF or any other format?

Jack R. Brown County Administrator Taylor County 201 East Green Street Perry, Fl 32347 Phone: (858) 838-3500, ext. 7 Fax: (850) 838-3501

On Feb 6, 2014, at 2:07 PM, "bob brown" <<u>bbrown@cityofperry.net</u>> wrote:

Those are all the minutes that an electronic search relating to Helen St revealed. We have electronic versions of minutes going back to 2000. THANKS Bob

Visit us at <u>http://www.cityofperry.net</u> Follow us on Twitter: @CityofPerryFL

From: Jack Brown [mailto:jack.brown@taylorcountygov.com] Sent: Thursday, February 06, 2014 1:49 PM To: bob brown Subject: RE: Minutes Relating to Helen Street

Bob,

Thanks! Are there any more minutes prior to this that detail how Helen Street ended up on the CIP, citizen issues, etc....?

Jack R. Brown County Administrator Taylor County Email: Jack.Brown@taylorcountygov.com Phone: (850) 838-3500, Ext. 7 Fax: (850) 838-3501 website: http://www.taylorcountygov.com

Please note: Florida has a very broad public records law. Most written communications to or from public officials regarding public business are available to the media and public upon request. Your e-mail communications may be subject to public disclosure.

1

From: bob brown [mailto:bbrown@cityofperry.net] Sent: Thursday, February 06, 2014 12:20 PM. To: Jack Brown Subject: Minutes Relating to Helen Street

Jack,

Attached are the minutes from Council meetings relating to Helen Street. Some of the minutes relate to the paving of Helen Street being placed in City's 5 year capital plans. That is correct, but in the Capital Plans it always is noted "(pending deeding of property)". Please let me know if you have any questions. THANKS Bob

Visit us at <u>http://www.cityofperry.net</u> Follow us on Twitter: @CityofPerryFL

From:	bob brown <bbrow< th=""></bbrow<>
Sent:	
То:	Thursday, February Jack Brown
Subject:	Minutes Relating to
Attachments:	HELEN STREET MIN

bob brown <br/>brown@cityofperry.net> Thursday, February 06, 2014 12:20 PM fack Brown Minutes Relating to Helen Street HELEN STREET MINUTES DISCUSSIONS.pdf

Jack,

Attached are the minutes from Council meetings relating to Helen Street. Some of the minutes relate to the paving of Helen Street being placed in City's 5 year capital plans. That is correct, but in the Capital Plans it always is noted "(pending deeding of property)".

Please let me know if you have any questions. THANKS Bob

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From: Sent: To: Subject: bob brown <br/>bbrown@cityofperry.net> Thursday, February 06, 2014 12:16 PM Jack Brown FW: PAVING OF HELEN STREET

background

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From: bob brown [mailto:bbrown@cityofperry.net] Sent: Monday, February 14, 2011 9:42 AM To: 'annette anderson' Subject: FW: PAVING OF HELEN STREET

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From: Emily [mailto:emily@ketring.com] Sent: Monday, February 14, 2011 9:06 AM To: bob brown Subject: Fw: PAVING OF HELEN STREET

From: <u>Rtermaat@aol.com</u> Sent: Sunday, February 13, 2011 12:13 PM To: <u>emily@ketring.com</u> Subject: PAVING OF HELEN STREET

Emily: You may recall at the Council Meeting during March of 2009, Joanna appeared before the Council to discuss selfwatering containers, hanging baskets and Snowfest among other things. Right after her, I addressed the Council regarding the "partial paving of Helen Street" in that the Cities Helen Street Project" could not be completed as all property owners to the North of us were not in agreement to deed a portion of their property to this project. All of my neighbors were in attendance at the meeting and spoke to this issue. I am sure the minutes will reflect the decision of the Council. Specifically, they agreed to the partial paving from the intersection of Ash and Helen Streets to the curve in the road, which would encompass the dangerous constantly washing out bridge over the creek. The remark was made by one of the Councilmen that "well put it on the list" and a vote was taken to partially pave Helen Street.

I have been made aware from sources that the funds are available to pave this roadway. In an email back and forth with Bob Brown; when I asked about this paving. His first email to me was :you have to deed part of your property to the City". I responded that I and my neighbors would gladly do so to get this mud road finally paved. Bob's next response to me was "the City does not do partial paving of streets" in direct conflict with the wishes of the Council. Please review the minutes and indicate to me if the City has had a change of heart on this paving or the City Manager is acting on his own to keep this road a mud hole maintained at great expense by Taylor County. We have been in Perry nearly 6 years now, when we purchased the property the Helen Street Project was alive and well and I purchased a very expensive piece of real estate on a dirt road assured that someday I would not tear the springs out of my truck to get home in the mud. Nearly 6 thousand dollars a year in property taxes is a lot to pay for a dirt road access, not to mention the fact that The Timbers hosts most of the premier events and dinners in the City. If need be and the neighbor to the west of the curve in the road is unwilling to give up any of their property, I will give up more of my property to the City to straighten out the curve in the road. The pastor who just purchased the Ragoni property has talked with Joanna and is also anxious to get the thing paved all the way to where the road is partially paved to Helen Street from the other side. Now, however I am addressing at the very least the paving as agreed to by the Council during the March 2009 minutes.

Thanks much, Rick and Joanna Ter Maat

•

From: Sent: To: Subject: Attachments: bob brown <br/>bbrown@cityofperry.net> Thursday, February 06-2014-12:14 PM Wack Brown FW: Rick Termatt's letter on Helen St SKMBT\_42312070611340.pdf

background

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From: bob brown [mailto:bbrown@cityofperry.net]
Sent: Friday, July 06, 2012 11:50 AM
To: 'adowdell@cityofperry.net'; 'Daryll Gunter'; Don Cook (dcook@cityofperry.net); Emily; 'sharris@cityofperry.net'
Subject: Rick Termatt's letter on Helen St

I sent you an email earlier in reply to Mr. Termatt's letter on Helen St. Attached is a copy of his letter. THANKS Bob

# Richard W. Ter Maat 1148 Helen Street Perry, Florida 32347 850-584-7990 C 850-672-0359

Mr. Robert Brown, City Manager City of Perry Perry City Hall 224 S. Jefferson Street Perry, Florida 32347 June 28<sup>th</sup> 2012

**Re: Paving Helen Street** 

Dear Bob:

It is time we bring the issue of paving this dirt road which is maintained by the Count with County taxpayer funds to the forefront. I was told by the City Attorney when I purchased my home for over a half million dollars <u>on a dirt road</u>, that the Helen Street Project was alive and well and that the City was going to move trees, fences, build a bridge and put everything back all pretty and nice. I never ever would have purchased a home with taxes of well over 6 grand a year on a dirt road if I had the slightest idea that it would be a dirt road FOREVER !

Shortly after the purchase of this home I got the bad news that some of the home owners along the road would not give property to the City to widen the and road the project was dead. Just like that. No plan B, no condemning for the public good, just leave it hair pin turn and all, washed out bridge and if I call about dead animals, trash it becomes my problem as it is "private property". Meanwhile school busses and garbage trucks pound it to a washboard daily.

It's taken me six years, but I think I've met everyone on the road and everyone wants the thing paved. So much so that we are forming a coalition and looking into several firms in Tallahassee that specialize in this sort of thing to see where we go next if the City is not willing to do the right thing. We know that the funds have been available a number of times to pave this road which is a major road at this far end of the City. While we are even thinking about this - this road should immediately be blocked at the turn and made into a "not a thru street". It has been long enough. We all await your reply. Kindly respond to me after the Council has had a chance to review this.

Respectfully,

Richard W. Ter Maat

Copy to: Mayor Ketring Legal Coalition Members

From: Sent: To: Subject: bob brown <br/>bbrown@cityofperry.net> Thursday, February 06, 2014 12:14 PM---. Jack Brown FW: Helen Street

background

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From: bob brown [mailto:bbrown@cityofperry.net] Sent: Friday, July 06, 2012 11:47 AM To: 'Rtermaat@aol.com' Subject: Helen Street

Hi Rick,

I've received your letter on the paving of Helen Street dated June 28. We've reviewed this with you on multiple occasions, and I'll summarize it for you again.

- > All of Helen Street is private property
- Florida law prohibits the spending of government money on private property
- Council has said if <u>all</u> the property owners along Helen St. deed the necessary property to the City, the City can then spend money to engineer and pave the road.

Nothing different can happen until the City owns the property.

THANKS Bob

Visit us at http://www.cityofperry.net

From: Sent: To: Subject: Attachments: bob brown <br/>bbrown@cityofperry.net> Thursday\_Eebruary 06, 2014 12:11 PM Jack Brown FW: Original Helen St letter SKMBT\_42312071611260.pdf

Hi Jack,

I'm going to send you a few emails for your use as background relating to Helen Street. Please use discretion in disseminating these further. A copy of relative minutes will also be forthcoming soon and are for full dissemination.

THANKS Bob Visit us at <u>http://www.cityofperry.net</u> Follow us on Twitter: @CityofPerryFL

From: bob brown [mailto:bbrown@cityofperry.net]
Sent: Monday, July 16, 2012 11:45 AM
To: 'adowdell@cityofperry.net'; 'Daryll Gunter'; Don Cook (dcook@cityofperry.net); Emily; 'sharris@cityofperry.net'
Subject: Original Helen St letter

We were going through files on Helen St. as we move forward with Council's direction at the last meeting. We came across the original letters sent to property owners in 2005, I've attached a copy of the one sent by the city attorney to the Termaat's (all owners received the same body of letters).

Thought you might find it interesting that the letter was pretty specific that the paving may not occur, especially if all property owners did not agree to donate property to the project. This is different than what Mr. Termaat consistently reports happened.

THANKS Bob

### SMITH, SMITH & MOORE

Attorneys at Law, P.A.

A Professional Association of Attorneys and Counselors at Law

Dedicated to Client Service

Michael S. Smith Stephen A. Smith, P.A. G. Cline Moore 411 N. Washington Street Post Office Drawer 579 Perry, Florida 32348

(850) 584-3812 Phone (850) 584-7148 Fax Toll Free 1-877-269-9839 Website:www.smithandmoore.com

September 19, 2005

Richard W. Ter Maat Joanna G. Ter Maat 1148 Helen Street Perry, FL 32347

Re: Helen Street Project

Dear Mr. & Mrs. Ter Maat:

We have received inquiries from the land owners adjacent to Helen Street from whom we have requested a conveyance of some of their property, concerning whether or not the City of Perry intends to pay for the property or the relocation of fences and other improvements. The City will pay the costs for the relocation of fences and other improvements located within the area conveyed to the City; however, the City will not pay for the value of the land conveyed. The City is not required to pave Helen Street, but is pursuing the paving project as a public service. If the land owners require receipt of compensation for the property conveyed to the City, then the City will not pave Helen Street. We appreciate the interest shown by the land owners we have communicated with in connection with the Helen Street project and look forward to hearing from you.

Sincerely, Michael S. Smith

MSS/cj Cc: City of Perry

From:	Jack Brown
Sent:	Monday, October, 28, 2013 1:59 PM Pam Feagle; Malcolm Page; Jody Devane (jdevane@taylorcountygov.com); Jim
То:	Pam Feagle; Malcolm Page; Jody Devane (jdevane@taylorcountygov.com); Jim
	Moody; Pat Patterson
Cc:	Dustin Hinkel; Conrad C. Bishop Jr. (lawbishop@fairpoint.net)
Subject:	FW: Helen Street
	Dustin Hinkel; Conrad C. Bishop Jr. (lawbishop@fairpoint.net)

FYI

Jack R. Brown County Administrator Taylor County Email: <u>Jack.Brown@taylorcountygov.com</u> Phone: (850) 838-3500, Ext. 7 Fax: (850) 838-3501 website: http://www.taylorcountygov.com

Please note: Florida has a very broad public records law. Most written communications to or from public officials regarding public business are available to the media and public upon request. Your e-mail communications may be subject to public disclosure.

From: bob brown [mailto:bbrown@cityofperry.net]
Sent: Monday, October 28, 2013 1:57 PM
To: <u>Rtermaat@aol.com</u>
Cc: 'Ray Curtis'; Jack Brown; 'Daryll Gunter'; Don Cook; 'Mike Deming'; 'Shirlie Hampton'; 'Venita Woodfaulk'
Subject: Helen Street

Hi Rick,

I received your packet and enclosed petitions relating to the private property commonly referred to as Helen Street. As we have discussed several times, and as the petitions state, the City does not own the property or have jurisdiction on the property. It is all private property owned by each adjacent property owner.

Since this is private property, the City has no authority or jurisdiction over the property being used as a street. Therefore the Council can't take any action to close the street to traffic or to take any action on your request.

I would suggest that the petitioners seek private counsel to advise them on how to proceed with closing this property.

THANKS Bob

Visit us at <u>http://www.cityofperry.net</u> Follow us on Twitter: @CityofPerryFL

From:	Rtermaat@aol.com
Sent:	Tuesday, July 10, 2012, 9:05 AM
To:	Jack Brown
Cc:	Pam Feagle
Subject:	HELEN STREET
Follow Up Flag:	Follow up
Flag Status:	Flagged
Categories:	Red Category

Many thanks for grading the road - two weeks of 5 mph was long enough. According to my City manager they are never going to pave it as it is all private property. When I advanced the argument that under Florida Municipal Statute 335.01 and others after (someone) maintaining it for over 20 years it would be owned by that governing body. He responded with "the City never maintained the road". Would that mean that the County should pave a City Road - I'm confused.

Thanks again !

From: Sent: To: Subject: Jack Brown Thursday, June 28, 2012 2:04 PM 52281\_46495.tl112712@tasks.teamworkpm.net FW: REQUEST TO GRADE HELEN STREET

From: <u>Rtermaat@aol.com</u> [mailto:Rtermaat@aol.com] Sent: Thursday, June 28, 2012 12:06 PM To: Jack Brown Subject: HELEN STREET

Jack - After the huge rain - Helen Street is almost impassable - It cannot go another three weeks or so until next time.

I am going to write the City about this problem - this thing needs to be paved or shut down to thru traffic. I <u>never</u> would have purchased a half million dollar home on a dirt road if I had not been assured by the City Attorney at the time that the thing was going to be paved (the Helen Street Project)

I have met <u>everyone</u> on Helen Street and ALL OF THEM ARE WILLING TO DEED WHAT EVER PORTION OF THEIR PROPERTY IS NECESSARY TO COMPLETE THE PROJECT.

This thing is either not done as it is too political, too much work or just due to lazy or incompetent officials. Or....all of the above.

Please - grade the swamp. At County Tax Payers Expense this City Road. Rick Ter Maat

From:	Rtermaat@aol.com
Sent:	Wednesday, June 12, 2013 10:39 AM
То:	Jack Brown
Subject:	HELEN ST.

Jack: Thanks for the prompt response on grading Helen Street. I know it's not the Counties responsibility for this road, but, from the school busses, garbage trucks and thru traffic, after all these years the gravel has turned pretty much to sand and after the slightest rain turns into deep ruts. One cannot exceed 5 mpg without tearing up the vehicle.

I have been to the City 3 separate times and once with most of my neighbors regarding paving the road and the City has basically told me what I wanted to hear and then did nothing. It's obvious they have no desire to maintain or blacktop the road. Whoa be unto them if anyone has a heart attack or needs an ambulance South of Ash Street on Helen. That area has never been maintained and is impassable after a rain.

Perhaps I should close the road completely to thru traffic as the City refuses to maintain "Private Property" and won't even pick up the trash and deer carcases on the side of the road. Mike Smith is probably the best attorney with expertise on this from a legal standpoint. I would assume that the County or City has an easement by prescription.

Ya can't have it both ways. Thanks Rick Ter Maat 1148 Helen St., Perry, Fl. 32347 850-672-0359

From: Sent: To: Subject: Jack Brown Thursday, December 29, 2011 11:58 AM Rtermaat@aol.com RE: HELEN STREET

Rick,

The graders are finishing up in Shady Grove this week. Helen Street is scheduled to be graded early next week. I'll pass along your recommendations for grading to the road department. Jack

Jack R. Brown County Administrator Taylor County 201 East Green Street Perry, FL 32347 Email: Jack.Brown@taylorcountygov.com/ Website: http://www.taylorcountygov.com/ Phone: (850) 838-3500, Ext. 7 Fax: (850) 838-3501

Please note: Florida has a very broad public record law. Most written communications to and from officials regarding business are available to the media and the public upon request. Your email communications may be subject to public disclosure.

From: <u>Rtermaat@aol.com</u> [<u>mailto:Rtermaat@aol.com</u>] Sent: Thursday, December 29, 2011 8:17 AM To: Jack Brown Cc: Pam Feagle; <u>bbrown@cityofperry.net</u> Subject: HELEN STREET

Jack: Helen Street is desperately in need of grading again - I think that it needs to be graded with the teeth of the graded much deeper and seriously re-graded and rolled as the ruts rapidly re-appear.

This Band-Aid approach to this problem has got to come to an end. I am gathering my neighbors for an initial appearance before the City Council on the 10th of January. There are and have been funds available to pave this dirt road.

Several options are available. We can: Petition the City to Vacate - close the road to Thru Traffic keeping the busses and garbage trucks from cutting thru and destroying the road or doing the right thing and paving the thing. I can find no one that is against paving it or deeding a portion of their property to the project. I own most of the property along the road and if someone is bitching about giving up a few feet, I'll give up more of mine. But this political whinying needs to come to an end. The road is a joke ! Rick Ter Maat

From:	Rtermaat@aol.com
Sent:	Tuesday, September 27, 2011 1:50 PM
То:	Pam Feagle
Cc:	Jack Brown
Subject:	Re: Fw: GRADING HELEN STREET

Thank you, thank you, thank you.....the road was graded today!

In a message dated 9/27/2011 9:44:12 A.M. Eastern Daylight Time, pfeagle@taylorcountygov.com writes:

Jack, what happened to the road gading that was scheduled for last week? The road is in bad need of grading. Pls let me know so I can inform my constituent. Thanks, Pam

31

Sent from my Verizon Wireless BlackBerry

From: "<u>Rtermaat@aol.com</u>" <<u>Rtermaat@aol.com</u>> Date: Tue, 27 Sep 2011 05:35:01 -0700 To: Jack Brown<jack.brown@taylorcountygov.com> Cc: Pam Feagle<<u>pfeagle@taylorcountygov.com</u>>; <u>ads@perrynewspapers.com<ads@perrynewspapers.com</u>> Subject: GRADING HELEN STREET

Week of the 19th has come and gone and my road is still a washboard.

Maybe if the school busses stopped driving on my property (the road) and the other 70 or 80 cars that travel it at 60 mph it would not be so bad !

RICHARD W. TER MAAT 1148 HELEN STREET, PERRY, FLORIDA 850-672-0359

Within about the past year, Council has informally indicated during a public meeting that Helen St. would be placed somewhere within the S year paying cue after such time as title for the required 65 foot ROW along the full length of Helen St. within the city limits was received by the City. This was to a citizen which is a property owner along Helen that appeared before Council. The Council has been adamant that the City will not pay for any property along Helen to obtain ROW. THANKS

Bob

Follow the City on Twitter. www.twitter.com/cityofperryfl

From: Jack Brown [mailto:jack.brown@taylorcountygov.com] Sent: Friday, December 17, 2010 8;36 AM To: BOB BROWN Subject: Helen Street

# Bob,

Per our discussion last week, regarding Helen Street, would you please confirm our phone conversation where you stated that the council would still be willing to pay Helen Street if the property owners would donate the required right of way? Thanks, Jack

Jack R. Brown County Administrator Taylor County 201 East Green Street Perry, FL 32347 Email: <u>Jack.Brown@taylorcountygov.com</u> Website: <u>http://www.taylorcountygov.com/</u> Phone: (850) 838-3500, Ext. 7 Fax: (850) 838-3501

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From:	
Sent:	
To:	
Subject:	

Jack Brown Friday, December 17, 2010 9:26 AM Pam Feagle FW: Helen Street

From: bob brown [mailto:bbrown@cityofperry.net] Sent: Friday, December 17, 2010 9:13 AM To: Jack Brown Subject: RE: Helen Street

Within about the past year, Council has informally indicated during a public meeting that Helen St. would be placed somewhere within the 5 year paving cue after such time as title for the required 65 foot ROW along the full length of Helen St. within the city limits was received by the City. This was to a citizen which is a property owner along Helen that appeared before Council. The Council has been adamant that the City will not pay for any property along Helen to obtain ROW. THANKS

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From: Sent: To: Subject: Jack Brown Thursday, February 25, 2010 7:00 AM HSEBOATS@aol.com RE: FW: REVISED LTR REGARDING DIRT ROAD replace original

Rick,

Don't drink coffee but I do eat lunch one and a while. Look forward to seeing you. Regards, Jack

Jack R. Brown County Administrator Taylor County Email:Jack.Brown@taylorcountygov.com Phone: (850) 838-3500, Ext. 7 Fax: (850) 838-3501

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From: HSEBOATS@aol.com [mailto:HSEBOATS@aol.com] Sent: Wednesday, February 24, 2010 8:55 PM To: Jack Brown Subject: Re: FW: REVISED LTR REGARDING DIRT ROAD replace original

So, are you coming in for coffee or not? It's just a bumpy road.

In a message dated 2/24/2010 9:26:18 A.M. Eastern Standard Time, jack.brown@taylorcountygov.com writes:

Dear Mr. Rick,

Response is listed below.

Jack R. Brown

County Administrator

**Taylor County** 

Email:Jack.Brown@taylorcountygov.com

Phone: (850) 838-3500, Ext. 7

Fax: (850) 838-3501

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From: HSEBOATS@aol.com [mailto:HSEBOATS@aol.com] Sent: Tuesday, February 23, 2010 7:11 PM To: Jack Brown Cc: Mark Wiggins Subject: Re: FW: REVISED LTR REGARDING DIRT ROAD replace original

One point - driving straight across from Ash Street to my house -

a. If my road becomes impassable please let me know if that is **even** a possibility in the counties long term plans as I find **that** scenario totally unacceptable and b.that (straight across from Ash Street is not my driveway it is Mr. Harms.) Thanks for the information – sorry for the misunderstanding.

By the way, we have **not** had 5 months of rain - sorry – If you look at my response I didn't claim that it had rained for the past five months. What I did say was that over the past five months we have had an extended period of rain. During the past five months your road was graded on 8/12/10/, 9/9/10, 9/30/10, 10/21, 11/30 and 1/5 and yesterday. No different than before but when the lime rock is saturated with water and the woods and property along the sides of the road are saturated and full of water the grading isn't as effective to start with and doesn't hold up as long plus you have more water running across the road during storms due to the already high water table. This causes more ruts, washouts, and potholes in a lime rock road.

I appreciate that today - after writing the entire County Board that the road was finally graded I'm glad that a stinging letter to the newspaper regarding this wasn't necessary. I am glad that you appreciate the road being graded. However, Your writing the board did not have an impact on your road being graded yesterday. Yesterday we got one of our graders back that had been down for maintenance. I will continue to work with you just as any other member of our community as our resources allow, whether you write letters or not that is your prerogative.

I thank you all for what **should** have been done weeks ago. I agree we are three weeks behind on our grading cycle. We had a grader down for a transmission that coupled with rain has put us behind schedule.

Excuse me, but, **you** were the one that told me that the County had a new Road Superintendent, I did not make that up. We do have a new Road Superintendant he works for the Director of Public Works who manages the day to day business of the road department sorry for the miscommunication. Andy McLeod has been over the road department for over 12 years. Mr. Hank Evans our new road superintendant is an outstanding individual as is Mr. McLeod. Do we have room for improvement? Absolutely.

Jack, you have always responded to me courteously and promptly - I don't care if there are 300 miles of roads in the county. Handle it as far as I am concerned. This is akin to the City with their 10 man sanitation department when 3 men could do the job. If your superintendent can't do the job - GET SOMEONE WHO CAN. I will continue to respond to you promptly and with courtesy. I understand your frustration and am personally sorry that we have let you down. We will continue to try to earn your respect.
Regards, Jack
In a message dated 2/23/2010 9:30:50 A.M. Eastern Standard Time, jack.brown@taylorcountygov.com writes:
Rick,
I forgot to include that my responses are in blue in your email below. Jack
Jack R. Brown
County Administrator
Taylor County
Email:Jack.Brown@taylorcountygov.com
Phone: (850) 838-3500, Ext. 7
Fax: (850) 838-3501
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From: Jack Brown Sent: Tuesday, February 23, 2010 9:30 AM To: 'HSEBOATS@aol.com' Subject: RE: REVISED LTR REGARDING DIRT ROAD replace original
Rick,

I hope that you are doing well. Sorry that I didn't have a chance to get back to you yesterday. I know that you want results and not excuses but I will try to respond to the various points that you raise.

Your road is one of approximately three hundred miles of graded roads the Road Department maintains in the County. We are equally concerned with all of the graded roads in our community.

Regards, Jack Brown

Jack R. Brown

**County Administrator** 

Taylor County

Email:Jack.Brown@taylorcountygov.com

Phone: (850) 838-3500, Ext. 7

Fax: (850) 838-3501

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From: HSEBOATS@aol.com [mailto:HSEBOATS@aol.com] Sent: Sunday, February 21, 2010 8:09 AM To: Jack Brown Subject: REVISED LTR REGARDING DIRT ROAD replace original

At sixty eight years old - I've lived owned some 14 homes from Rockford, Illinois to South Florida, to Perry and am frankly confused as to how to deal with a government body that is unresponsive to the needs of it's taxpayers. I have complained now for **5 months** that the dirt road in front of my home for which I pay far in excess of FIVE THOUSAND DOLLARS A YEAR IN REAL ESTATE TAXES has not been graded in that time.[Road Maintenance is pave for by the local motor fuel tax not property taxes} Prior to that period for the five years I have lived at this address the road has been graded by the county on a regular basis and they have done a *fine job*. [The road isn't being maintained any differently than it was five years ago. We have the same person over the Road Department. He has been in that position for over twelve years. What is different is over the past five (5) months we have had more rain over an extended period of time. We can grade during heavy rains and the lime rock like the soil around it is saturated. It doesn't hold up as long and turns to soup quickly. You have much more rutting and pot holes due to rain off coming out of the surrounding property. Additionally you can see where you have kids using their four wheel drive on the side of the road to tear it up. I have made many calls to the

County Administrator and thus far have had zero results. Prompt, polite responses but no responses, frankly, I feel out of his hands (beyond his control).

It is tearing my vehicle up. This is completely unacceptable. I am confused as to what legal recourse I might untimately have when the road finally becomes so bad that I have to leave my vehicle on the blacktop at Ash Street and walk the mile or so to my home. It appears you do have the option of driving straight across from the end of Ash Street to your drive.

Please respond as to what can be done to grade this road and put it in an acceptable condition - Mr Harm, my neighbor has also voiced his concerns about the condition of the road.

Sincerely, Richard W. Ter Maat, 1148 Helen Street, Perry, Florida 32347 850-584-7990

P.S. The City of Loves Park, Illinois realized that it did not have the expertise to handle the road maintenance in it's community and placed the road maintenance out to competitive bid to responsible local road contractors with requiring them to provide large performance bonds. Worked like a charm for them back in the late 70's and they still are doing it with private contractors to this day at far lower cost that government workers. Maybe if your people can't seem to figure this thing out you ought to give privatizing this thing some thought.

From:	HSEBOATS@aol.com
Sent:	Friday, January 08, 2010 4:34 PM
То:	Jack Brown
Cc:	bbrown@cityofperry.net
Subject:	Re: HELEN STREET

WHY AM I CONFUSED - <u>FOR 4 YEARS</u> THE COUNTY HAS MAINTAINED THIS STREET EVERY OTHER MONTH - 4 YEARS AND DONE A FINE JOB - THIS PAST MONTH - THEY STOPPED - NOW I CAN'T GO DOWN IT - BOB BROWN KNOWS DAMN WELL THAT THE OWNERS ON THIS STREET WILL <u>NOT</u> GIVE UP THEIR PROPERTY SO THAT THE CITY CAN PAVE IT AND THAT I APPEARED 6 MONTHS AGO AND THE CITY PUT IT ON THE "LIST" TO PAVE FROM ASH STREET TO THE DICKEY PROPERTY JUST PAST MY DRIVEWAY - THE COUNTY FOR SOME REASON AS THEY HAVE BEEN MAINTAINING IT FOR MANY YEARS (ACCORDING TO BRUCE RATLIFF) HAS A "EASEMENT BY PRESCIPTION" I.E. YOU OWN THE DAMN THING - WHICH AT TIMES KIND OF BUGS ME AS EVERY TIME YOU GRADE IT YOU WIDEN IT ABOUT ANOTHER INCH - AT ANY EVENT BROWN HAS NOTHING - REPEAT NOTHING TO DO WITH THE ROAD UNTIL THE CITY GETS THE BUCKS FROM UNCLE SAM TO PAVE THE THING - IN THE MEAN TIME AS THE COUNTY HAS DONE IN THE PAST AND HAS FOR THE LAST FOUR YEARS I'VE LIVED HERE, MAINTAINED THE ROAD - PLEASE CONTINUE TO MAINTAIN IT - <u>THE COUNTY AND THE CITY CANNOT -</u> **REPEAT CANNOT START NO POINTING FINGERS AT EACH OTHER AND I PARK MY CAR A MILE AWAY AND WALK TO MY HOUSE CAUSE I CANNOT DRIVE MY CAR HOME AND PAY ALMOST SIX THOUSAND DOLLARS A YEAR IN TAXES - PLEASE SEND OUT A ROADGRADER AND GRADE MY ROAD NEXT WEEK.** 

COUNTY CREWS WERE HERE LAST WEEK WITH CUTTERS GOING ALONG THE SIDE OF THE ROAD CUTTING THE TREES AND BRUSH MAINTAINING THE SIDES OF THE ROADS - JUST A SIDEBAR TO THE ABOVE. YOU STILL NEED TO COME IN FOR LUNCH.

In a message dated 1/8/2010 1:41:19 P.M. Eastern Standard Time, jack.brown@taylorcountygov.com writes:

Dear Mr. Ter Maat,

I am sorry that you are frustrated with the situation with Helen Street. As we discussed last year, Helen Street is in the City Limits and is not a County Road. After receiving your email I spoke again to the City Manager regarding the status of Helen Street. He reiterated to me that Helen Street is a private street in the City limits. He went on to say that you appeared before the City Council approximately a year ago and addressed this issue with them and that the City Council informed you that if you would get with all the property owners and have them donate the necessary property that the City Council would consider accepting maintenance of Helen Street. I am sorry that I can't be of further assistance to you in this matter.

I hope that you and your family are doing well. Regards, Jack Brown

Jack R. Brown

**County Administrator** 

From:
Sent:
To:
Subject:

Jack Brown Wednesday, March 26, 2008-10:48.AM 'TIMBERSOFPERRY@aol.com'; Rudolph Parker RE: HELEN STREET

Mr. Ter Maat,

A serious issue with cleaning up the side of the road is that the City nor the County owns the right of way. A prescriptive easement for public use allows maintenance only from the edge of one side of the road to the other edge of the road. It is illegal for the City or the County to work on private property. The side of the road is considered private property. I know this doesn't take into consideration "common sense" but it is the law. We have been told by the state that we will loose our state inmate crews if we direct them to work on what is legally considered private property. Additionally County Commissioners in the past have been removed from office for authorizing work on private property. Please feel free to contact me as you move forward on this issue. I will get back with you after our meeting with the County Attorney. Regards, Jack

Jack R. Brown County Administrator Taylor County Board of County Commissioners 201 E. Green Street Perry, FL 32347 (P) (850) 838-3500 Ext. 7 (F) (850) 838-3501 (email) <u>county.admin@taylorcountygov.com</u>

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From: <u>TIMBERSOFPERRY@aol.com</u> [mailto:TIMBERSOFPERRY@aol.com] Sent: Wednesday, March 26, 2008 10:30 AM To: Jack Brown Subject: Re: HELEN STREET

Thanks for the reply - it is the intention of 80 percent of the abutting property owners to petition the City to vacate the property. I am assuming, as in the past, neither the City nor the County has ever cleaned up the side of Helen Street and likely never will. The stench of rotting dead animal carcases attracting vermin has been overwhelming at times - a *serious health* issue is ongoing and we, the property owners have had enough. Please keep me informed of any procedural changes within the County and sincere thanks for your prompt and courteous help with this matter.

# Rick and Joanna Ter Maat

The Timbers of Perry, Inc. 1148 Helen Street Perry, Florida 32347 850-584-7990

From:	TIMBERSOFPERRY@aol.com
Sent:	Monday, March 24, 2008 7:26 PM
То:	Jack Brown
Subject:	HELEN STREET

Good morning - me again - I spoke with Bob Brown who spoke with the City Attorney and basically he and the attorney stated that if the road has been used for over 20 years then there is a prescribed easement - he stated that if we chose to close the street ourselves that the City would take no action against us, however local residences might.

The City of Perry, even though the street is in the City will take no action whatsoever to ever clean up the piles of trash, discarded appliances, dead animals etc. etc. My specific question to you representing Taylor County is - WILL THE COUNTY CLEAN UP THE SIDE OF THE ROAD - EVER ?

Please indicate to me if this will <u>ever</u> be done as the City refuses and said to "talk to the County". If the City and the County flatly refuse to maintain the cleanliness of the side of the road, for health and safety reasons we have few options available to us.

We - await your reply.

## **Rick and Joanna Ter Maat**

The Timbers of Perry, Inc. 1148 Helen Street Perry, Florida 32347 850-584-7990

From: Sent: To: Subject: Jack Brown Wednesday, March 26, 2008 10:38 AM Rudolph Parker FW: HELEN STREET

FYI

Jack R. Brown County Administrator Taylor County Board of County Commissioners 201 E. Green Street Perry, FL 32347 (P) (850) 838-3500 Ext. 7 (F) (850) 838-3501 (email) county.admin@taylorcountygov.com

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#### Rick and Joanna Ter Maat

*The Timbers of Perry, Inc. 1148 Helen Street Perry, Florida 32347 850-584-7990* 

From:Jack BrownSent:Monday, March 24, 2008 9:51 AMTo:Rudolph ParkerSubject:FW: CLOSING OF HELEN STREETAttachments:DSC02047.jpg; DSC02048.jpg; DSC02049.jpg; DSC02050.jpg; DSC02051.jpg;<br/>9904051800 Helen Street - Board Authorization for Road Department to Maintain -<br/>April 5, 1999.pdf

FYI

Jack R. Brown County Administrator Taylor County Board of County Commissioners 201 E. Green Street Perry, FL 32347 (P) (850) 838-3500 Ext. 7 (F) (850) 838-3501 (email) county.admin@taylorcountygov.com

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From: Jack Brown Sent: Monday, March 24, 2008 9:05 AM To: <u>lawbishop@gtcom.net</u> Subject: FW: CLOSING OF HELEN STREET

Conrad,

I have been contacted by Mr. Ter Maat demanding that we close Helen Street. As I started to research his request several issues have come up. During a regular scheduled Board meeting on April 5, 1999 on a Motion by Commissioner Rowell, seconded by Commissioner Foskey the Board voted by a three to two vote to maintain the portion of the road East of Ash Street to the Pharo Morgan Road which is in the City Limits. Upon discussing this issue with Bob Brown the City Manager, he states that Helen Street is a private road that is open by prescriptive easement and that based upon information from Mike Smith that the City nor the County has the right to close the road. Please take a look and discuss it with Mike Smith. Mr. Ter Matt is pushing for sometime of resolution. Regards, Jack

Mr. Ter Maat,

I am sorry that you and your neighbors continue to have problems from inconsiderate people. As you state you and I spoke regarding this issue last Tuesday. I hope that you recall that I explained to you that I would have to do some investigation. Our offices were closed on Friday. Helen Street where you live is in the City limits. You will have to have approval by the City Council to close the street. I know that you have already spoken to the City Manager regarding this issue. Again regarding drug deals, speeding, illegal dumping, killing dogs, etc. is an issue that the Sheriff. I will pass on to him you frustration and concerns. Regards, Jack Brown

Jack R. Brown County Administrator Taylor County Board of County Commissioners 201 E. Green Street Perry, FL 32347 (P) (850) 838-3500 Ext. 7 (F) (850) 838-3501

From:	Jack Brown
Sent:	Wednesday, March 26, 2008 9:18 AM 'IIMBERSOFPERRY@aol.com'
То:	'TIMBERSOFPERRY@aol.com'
Cc:	lawbishop@gtcom.net; Rudolph Parker; LaWanda Pemberton
Subject:	RE: HELEN STREET

Mr. Ter Matt;

I am sorry to say that I don't have an immediate answer for you. The area we are talking about as you are aware is in the City limits. I understand that you are frustrated. I have spoken to Commissioner Parker regarding this issue. We will discuss this issue with the County Attorney and get back you. As you are aware you still have the option to discuss this matter with the City council. Once Commissioner Parker and I have had the opportunity to meet with the County Attorney we will get back with you regarding what the County is or are not prepared to do. Regards, Jack

Jack R. Brown County Administrator Taylor County Board of County Commissioners 201 E. Green Street Perry, FL 32347 (P) (850) 838-3500 Ext. 7 (F) (850) 838-3501 (email) county.admin@taylorcountygov.com

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We - await your reply.

Rick and Joanna Ter Maat

*The Timbers of Perry, Inc.* 1148 Helen Street Perry, Florida 32347 850-584-7990

From:
Sent:
To:
Cc:
Subject:

Jack Brown Monday, March 24, 2008 8:48 AM "TIMBERSOFPERRY@aol.com" lawbishop@gtcom.net; LaWanda Pemberton RE: CLOSING OF HELEN STREET

Mr. Ter Maat,

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Jack R. Brown County Administrator Taylor County Board of County Commissioners 201 E. Green Street Perry, FL 32347 (P) (850) 838-3500 Ext. 7 (F) (850) 838-3501 (email) <u>county.admin@taylorcountygov.com</u>

Please note: Florida has a very broad public records law. Most written communications to and from public officials regarding public business are available to the media and public upon request. Your email communications may be subject to public disclosure.

From: <u>TIMBERSOFPERRY@aol.com</u> [mailto:TIMBERSOFPERRY@aol.com] Sent: Sunday, March 23, 2008 6:23 PM To: Jack Brown Subject: CLOSING OF HELEN STREET

I spoke with you this past Tuesday, March 18th, 2008 regarding the issue above. I again called on Friday, March 21st, 2008 and did not receive a call back.

I woke up this morning and went out to get the newspaper and discovered the attached - ALL OF THE NEIGHBORS and property owners along Helen Street are fed up with drug deals, dead animals, the use of Helen Street as a landfill, fences damaged and cars speeding along the road - one killed the Dickeys dog last summer.

4 dead deer carcases, 4 dead puppies just this year - enough ! The Dickeys have owned their property for over 20 years and have never asked the County to maintain the road - they own the road across to my property and I own the road across the curve.

Whatever it takes we are prepared to do - we want this road closed to thru traffic. Thanks. PHOTOS ATTACHED

#### **Rick and Joanna Ter Maat**

*The Timbers of Perry, Inc.* 1148 Helen Street Perry, Florida 32347 850-584-7990

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Sent:	Sunday, March 23-2008-6:23-PM
То:	Jack Brown
Subject:	CLOSING OF HELEN STREET
Attachments:	DSC02047.jpg; DSC02048.jpg; DSC02049.jpg; DSC02050.jpg; DSC02051.jpg

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