

SUGGESTED AGENDA

TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS
PERRY, FLORIDA

TUESDAY, JULY 21 2015

2:00 P.M.

SPECIAL BUDGET WORKSHOP

6:00 P.M.

REGULAR BOARD MEETING

AMENDED ITEMS 6A, 21A, 22A

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 RECEIVE BIDS, SET FOR THIS DATE AT 6:00 P.M., OR AS SOON THEREAFTER AS POSSIBLE, FOR DMH ULTRASOUND EQUIPMENT FOR ANESTHESIA.
5. BOARD TO RECEIVE BIDS, SET FOR THIS DATE AT 6:05 P.M., OR AS SOON THEREAFTER AS POSSIBLE, FOR DMH OPERATING ROOM TABLES.
6. THE BOARD TO HOLD A PUBLIC HEARING ON THE REQUEST FOR A LETTER OF CONCURRENCE FOR SETBACK WAIVER BY SUNSET

PLACE DEVELOPERS, INC., STEINHATCHEE, FL, SET FOR THIS DATE AT 6:10 P.M., OR AS SOON THEREAFTER AS POSSIBLE.

PUBLIC REQUESTS:

- 6A. THE BOARD TO HEAR FROM CHERYL MASSEY REGARDING DUMPSTERS FROM WASTE PRO.

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

CONSENT ITEMS:

7. APPROVAL OF MINUTES OF JUNE 30 AND JULY 6, 2015.
(COPIES PROVIDED BY E-MAIL)
8. EXAMINATION AND APPROVAL OF INVOICES.
9. THE BOARD TO ACCEPT THE ANNUAL FISCAL AUDIT FOR THE PERRY-TAYLOR CHAMBER OF COMMERCE AND APPROVE THE RELEASE OF ALLOCATED FUNDS, AS REQUESTED BY DAWN TAYLOR, CHAMBER PRESIDENT.
10. THE BOARD TO CONSIDER APPROVAL OF DISPOSITION OF SURPLUS PROPERTY, AS AGENDAED BY THERESA COPELAND, IT DIRECTOR.
11. THE BOARD TO RATIFY THE COUNTY ADMINISTRATOR'S SIGNATURE ON THE CERTIFICATE OF EXPENDITURE REPORT TO THE FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES, FLORIDA FOREST SERVICE, VOLUNTEER FIRE ASSISTANCE GRANT PROGRAM, AS AGENDAED BY THE GRANTS DIRECTOR.
12. THE BOARD TO RATIFY THE COUNTY ADMINISTRATOR'S SIGNATURE ON THE VOLUNTEER FIRE ASSISTANCE GRANT APPLICATION TO FLORIDA FOREST SERVICE IN THE AMOUNT OF \$3,288.00, AS AGENDAED BY THE GRANTS DIRECTOR.
13. THE BOARD TO RATIFY THE SIGNATURE OF THE COUNTY ADMINISTRATOR ON THE 2ND QUARTER FY 2014-2015 SMALL COUNTY CONSOLIDATED WASTE MANAGEMENT GRANT PAYMENT REQUEST, AS AGENDAED BY THE GRANTS DIRECTOR.
14. THE BOARD TO RATIFY THE COUNTY ADMINISTRATOR'S SIGNATURE ON THE FIRST QUARTER FY 2014-2015 SMALL

COUNTY CONSOLIDATED WASTE MANAGEMENT GRANT PAYMENT REQUEST, AS AGENDAED BY THE GRANTS DIRECTOR.

15. THE BOARD TO RATIFY THE COUNTY ADMINISTRATOR'S SIGNATURE ON THE CERTIFICATION OF COMPLETION STATEMENT AS REQUIRED BY THE FLORIDA BOATING IMPROVEMENT PROGRAM (FBIP) FOR THE COUNTY TO BE REIMBURSED FOR THE CONSTRUCTION OF THE NEW BOAT RAMP AT WILLIAMS FISH CAMP LANDING (MANDALAY), AS AGENDAED BY THE GRANTS DIRECTOR.
16. THE BOARD TO RATIFY THE COUNTY ADMINISTRATOR'S SIGNATURE ON THE DETAILED WORK PLAN BUDGET FOR ARTHROPOD CONTROL FOR FY 2015-2016 AS AGENDAED BY GARY WAMBOLT, ENVIRONMENTAL SERVICES DIRECTOR.
17. THE BOARD TO APPROVE AND EXECUTE THE SITE DEDICATION AS REQUIRED BY THE FLORIDA BOATING IMPROVEMENT PROGRAM (FBIP) FOR THE COUNTY TO BE REIMBURSED FOR THE CONSTRUCTION OF THE NEW BOAT RAMP AT WILLIAMS FISH CAMP LANDING (MANDALAY), AS AGENDAED BY THE GRANTS DIRECTOR.

HOSPITAL ITEMS:

18. THE BOARD TO REVIEW AND CONSIDER THE RECOMMENDATION OF THE BID COMMITTEE TO PURCHASE ANESTHESIA EQUIPMENT FOR DOCTORS' MEMORIAL HOSPITAL FROM MINDRAY NORTH AMERICA, AS AGENDAED BY THE COUNTY ADMINISTRATOR.

COUNTY STAFF ITEMS:

19. THE BOARD TO REVIEW AND APPROVE U.S. DEPARTMENT OF TRANSPORTATION FEDERAL AVIATION ADMINISTRATION (FAA), AIRPORT IMPROVEMENT PROGRAM, SPONSOR CERTIFICATIONS AS NOW REQUIRED BY FAA FOR ALL GRANTS, AS AGENDAED BY THE GRANTS DIRECTOR.
20. THE BOARD TO APPROVE THE LETTER OF SUBMITTAL, ACKNOWLEDGEMENT STATEMENT, AND DRUG FREE WORKPLACE CERTIFICATION REQUIRED FOR SUBMISSION OF THE RESIDENTIAL CONSTRUCTION MITIGATION PROGRAM (RCMP) GRANT APPLICATION, AS AGENDAED BY THE GRANTS DIRECTOR.
21. THE BOARD TO CONSIDER APPROVAL OF THE BID COMMITTEE'S RECOMMENDATION OF MUSICMASTERS FOR THE THIRD FLOOR

COURTROOM AUDIO SYSTEM UPGRADE, AS AGENDAED BY DANNY GRINER, BUILDING DIRECTOR.

GENERAL BUSINESS:

21A. THE BOARD TO CONSIDER TASKING STAFF WITH CREATING TEMPORARY PARKING AT THE KEATON BEACH BOAT RAMP, AS AGENDAED BY COMMISSIONER DEVANE.

COUNTY ADMINISTRATOR ITEMS:

22. THE BOARD TO REVIEW AND DISCUSS AN INVOICE RECEIVED FROM THE STEINHATCHEE PROJECTS BOARD FOR GROUNDS MAINTENANCE AT THE STEINHATCHEE COMMUNITY CENTER, AS AGENDAED BY THE COUNTY ADMINISTRATOR.

22A. THE BOARD TO APPROVE THE SIGNATURES ON THE FLORIDA ENTERPRISE ZONE PROGRAM SIGNATURE AUTHORIZATION FORM, AS AGENDAED BY THE COUNTY ADMINISTRATOR.

23. 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, IF APPLICABLE, 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 MARGARET DUNN, 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.



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

DUSTIN HINKEL, 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) 584-6113 Phone
(850) 584-2433 Fax

INVITATION TO BID

The Taylor County Board of County Commissioners is soliciting sealed bids for **DMH Ultrasound Equipment for Anesthesia.**

Qualified firms or individuals desiring to provide the required products must submit five (5) packages in a sealed envelope or similar package marked "**Sealed Bid for DMH Ultrasound Equipment**" to the Clerk of Court, 1st Floor Courthouse, 108 North Jefferson Street, Suite 102, Perry, Florida 32347, to arrive no later than 4:00 P.M., local time, on July 17, 2015. **All Proposals MUST have the respondent's name and mailing address clearly shown on the outside of the envelope or package when submitted.** Proposals will be opened and respondents announced at 6:00 P.M. local time, or as soon thereafter as practical, on July 21, 2015, in the Taylor County Administrative Complex, 201 East Green Street, Perry, Florida 32347.

Bid information may be obtained on-line at <http://www.taylorcountygov.com/Bids/Index.htm>.

The County reserves the right, in its sole and absolute discretion, to reject any or all Bids, to cancel or withdraw this solicitation at any time and waive any irregularities in the Solicitation process. The County reserves the right to award any contract to the respondent which it deems to offer the best overall service; therefore, the County is not bound to award any contract(s) based on the lowest quoted price. The County, in its sole and absolute discretion, also reserves the right to waive any minor defects in the process and to accept the proposal deemed to be in the County's best interest. **No faxed Proposals will be accepted.**

Additional information may be obtained from:

Taylor County Administrative Department
201 East Green Street
Perry, FL 32347
(850) 838-3500

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



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INVITATION TO BID

The Taylor County Board of County Commissioners is soliciting sealed bids for **DMH Operating Room Tables**.

Qualified firms or individuals desiring to provide the required products must submit five (5) packages in a sealed envelope or similar package marked "**Sealed Bid for DMH Operating Room Tables**" to the Clerk of Court, 1st Floor Courthouse, 108 North Jefferson Street, Suite 102, Perry, Florida 32347, to arrive no later than 4:00 P.M., local time, on July 17, 2015. **All Proposals MUST have the respondent's name and mailing address clearly shown on the outside of the envelope or package when submitted.** Proposals will be opened and respondents announced at 6:05 P.M. local time, or as soon thereafter as practical, on July 21, 2015, in the Taylor County Administrative Complex, 201 East Green Street, Perry, Florida 32347.

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

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:


THE BOARD TO HOLD A PUBLIC HEARING ON THE REQUEST FOR A LETTER OF CONCURRENCE FOR SETBACK WAIVER BY SUNSET PLACE DEVELOPERS, INC., STEINHATCHEE, FL, SET FOR THIS DATE AT 6:10 P.M. OR AS SOON THEREAFTER AS POSSIBLE.

MEETING DATE REQUESTED:

JULY 21, 2015

Statement of Issue:

THE ORIGINAL REQUEST FOR SETBACK WAIVER WAS APPROVED BY THE BOARD ON APRIL 6, 2015. AT THAT TIME, THE DEVELOPER NOTIFIED THE BOARD THAT DREDGING WOULD OCCUR 16 FEET FROM THE COUNTY'S RIPARIAN RIGHTS LINE. THE NEW REQUEST BY THE DEVELOPER IS FOR DREDGING TO OCCUR WITHIN 5 FEET FROM THE COUNTY'S RIPARIAN RIGHTS LINE.

Recommended Action:
Fiscal Impact:

N/A

Budgeted Expense:
Submitted By:

DUSTIN HINKEL, COUNTY ADMINISTRATOR

Contact:

838-3500

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:
Options:
Attachments:

DOCUMENTATION SUBMITTED BY THE DEVELOPER

Margaret Dunn

From: DALE ROWELL <ldrdelta@fairpoint.net>
Sent: Tuesday, July 7, 2015 8:08 AM
To: Dustin Hinkel
Cc: 'Bruce & Mary'; 'Jesse Reade'; Margaret Dunn
Subject: RE: Letter of Concurrence for Sunset Place Condo

Thanks, sorry for the short notice, we had to change the location of the dredge area and docks; this is the last item we need to proceed with the project. All help is appreciated.
Dale

From: Dustin Hinkel [mailto:dustin.hinkel@taylorcountygov.com]
Sent: Monday, July 06, 2015 4:55 PM
To: DALE ROWELL
Cc: Bruce & Mary; Jesse Reade; Margaret Dunn
Subject: RE: Letter of Concurrence for Sunset Place Condo

Thank you Dale! I have forwarded on for review and will try to get it on an agenda as soon as possible.

Thanks!

Dustin Hinkel

County Administrator
Taylor County Board of County Commissioners

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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: DALE ROWELL [mailto:ldrdelta@fairpoint.net]
Sent: Monday, July 06, 2015 3:31 PM
To: Dustin Hinkel
Cc: Bruce & Mary; Jesse Reade
Subject: Letter of Concurrence for Sunset Place Condo

Dustin we had to change the waiver for Sunset Place Condos. The changes will affect any of the County's rights. The dredging will be 5 feet from the riparian rights line between the County and theirs. There will be 21 feet between the riparian rights line and the closest dock.
Thanks

Thanks

Dale Rowell
Delta Professional Land Services LLC
4510 MAY POP ROAD
GREENVILLE FL 32331

Home (850)584-9818
Cell (850)843-3560
Office (850) 584-2849

Waiver of Liability Notice:

This electronic format is provided for informational purposes only. It is intended exclusively for the individual or entity to which it is addressed. Users of this electronic format are responsible for checking its consistency with current original signed and sealed plats and drawing as prepared, issued, and held by Delta Professional Land Services LLC. Delta Professional Land Services LLC shall not be responsible or liable for any changes made electronically or otherwise. Information regarding any alleged conflicts, errors, or omissions should be submitted in writing to Delta Professional Land Services LLC. Use of this electronic format by any party constitutes acceptance of this Waiver of Liability. If you have received this message in error, please notify the sender immediately.

No virus found in this message.

Checked by AVG - www.avg.com

Version: 2015.0.6037 / Virus Database: 4365/10177 - Release Date: 07/06/15

Margaret Dunn

From: Bruce & Mary <toberb@bellsouth.net>
Sent: Tuesday, July 14, 2015 9:44 AM
To: DALE ROWELL; Dustin Hinkel
Cc: Margaret Dunn
Subject: Re: Taylor County Letter

To Dale and Dustin,

I want to also make myself available to attend the 7/21/15 Board of County Commissioners meeting if either of you see this helpful.

With our current scallop season rentals it's very apparent we need to dredge to protect our future rentals. Due to the filled in silt we're down to only several usable slips at low tide for our 32 unit complex.

Would appreciate both of your advising if you would see my attendance to be helpful and what I could present to show the importance of dredging around our dock and within our own riparian rights lines.

Thank you both for your help.

From: DALE ROWELL
Sent: Thursday, July 09, 2015 10:54 AM
To: 'Dustin Hinkel' ; 'Bruce & Mary'
Cc: 'Margaret Dunn'
Subject: RE: Taylor County Letter

Thanks, I will be there in case of any questions.
Dale

From: Dustin Hinkel [mailto:dustin.hinkel@taylorcountygov.com]
Sent: Thursday, July 09, 2015 10:09 AM
To: DALE ROWELL; 'Bruce & Mary'
Cc: Margaret Dunn
Subject: RE: Taylor County Letter

Good Morning,

I have been told that we were able to get our public hearing advertisement in the paper in time to consider this at our meeting on July 21. Have a great day!

Thanks!

Dustin Hinkel

County Administrator
Taylor County Board of County Commissioners

[Click here to sign up for instant severe weather alerts and updates via email and text message!](#)

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850-838-3500 ext 7 Office
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dustin.hinkel@taylorcountygov.com
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From: DALE ROWELL [mailto:ldrdelta@fairpoint.net]
Sent: Wednesday, July 08, 2015 3:42 PM
To: 'Bruce & Mary'
Cc: Dustin Hinkel
Subject: RE: Taylor County Letter

Bruce I am sure that it will be on the next available agenda. I will keep you posted as I find out.
Thanks
Dale

From: Bruce & Mary [mailto:toberb@bellsouth.net]
Sent: Wednesday, July 08, 2015 2:28 PM
To: Dale Rowell; Jesse Reade
Subject: Taylor County Letter

Dale----When available to you, please advise when we can expect Taylor County sign off. (date of next meeting, if Public hearing is needed, etc.)

Can you get an early indication of how they will vote on this ?

Jesse----Since FDEP asked for additional info surely they consider the permit application active without risk of it expiring. Need to
continue until we reach a agreeable means of dredging.

Do you need to formally ask for an extension of time ? I reviewed the application and see nothing indicating an expiration time.

Please advise.

Margaret Dunn

From: Dustin Hinkel
Sent: Monday, July 6, 2015 4:54 PM
To: Margaret Dunn; CONRAD BISHOP (lawbishop@gtcom.net)
Cc: Kenneth Dudley
Subject: FW: Letter of Concurrence for Sunset Place Condo
Attachments: Tayllor County Waiver Letter 07062015.pdf

FYI... didn't we do a public hearing for this the last time it came up? If so, Margaret could you please update the prior notice and get it advertised in time for the 7/21 meeting?

Thanks!

Dustin Hinkel

County Administrator
Taylor County Board of County Commissioners

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Sent: Monday, July 06, 2015 3:31 PM
To: Dustin Hinkel
Cc: Bruce & Mary; Jesse Reade
Subject: Letter of Concurrence for Sunset Place Condo

Dustin we had to change the waiver for Sunset Place Condos. The changes will affect any of the County's rights. The dredging will be 5 feet from the riparian rights line between the County and theirs. There will be 21 feet between the riparian rights line and the closest dock.

Thanks

Thanks

Dale Rowell
Delta Professional Land Services LLC

LETTER OF CONCURRENCE FOR SETBACK WAIVER

TO: Sunset Place Developers, Inc (owner/applicant)
115 First Ave NW (address of project)
Steinhatchee, Florida 32359

File No.: _____

FROM: Taylor County Board of County Commissioners (adjacent property owner)
P. O. Box 620
Perry Florida 32348

Section 18-21.004(3)(d), Florida Administrative Code, provides:

Except as provided herein, all structures, including mooring pilings, breakwaters, jetties and groins, and activities must be set back a minimum of 25 feet inside the applicant's riparian rights lines. Marginal docks, however, must be set back a minimum of 10 feet. Exceptions to the setbacks are: private residential single-family docks or piers associated with a parcel that has a shoreline frontage of less than 65 feet, where portions of such structures are located between riparian lines less than 65 feet apart, or where such structure is shared by two adjacent single-family parcels; utility lines; bulkheads, seawalls, riprap or similar shoreline protection structures located along the shoreline; structures and activities previously authorized by the Board; structures and activities built or occurring prior to any requirement for Board authorization; **when a letter of concurrence is obtained from the affected adjacent upland riparian owner;** or when the Board determines that locating any portion of the structure or activity within the setback area is necessary to avoid or minimize adverse impacts to natural resources.

I hereby state that I am the owner of the adjacent upland riparian property located to the east of the facility or activity proposed to be constructed or conducted by Sunset Place Developers, Inc (the applicant), as shown in the above referenced file (and on the attached drawing). I understand that the subject project will be located entirely within the applicant's riparian rights area, and I do not object to the proposed structure or activity being located within the area required as a setback distance from the common riparian rights line, as required by Chapter 18-21.004(3)(d), F.A.C. This file shows the structure will be located entirely within the applicant's riparian rights area and within 21 feet of the common riparian rights line between our parcels.

(Original signature of adjacent owner)

(Date signed)

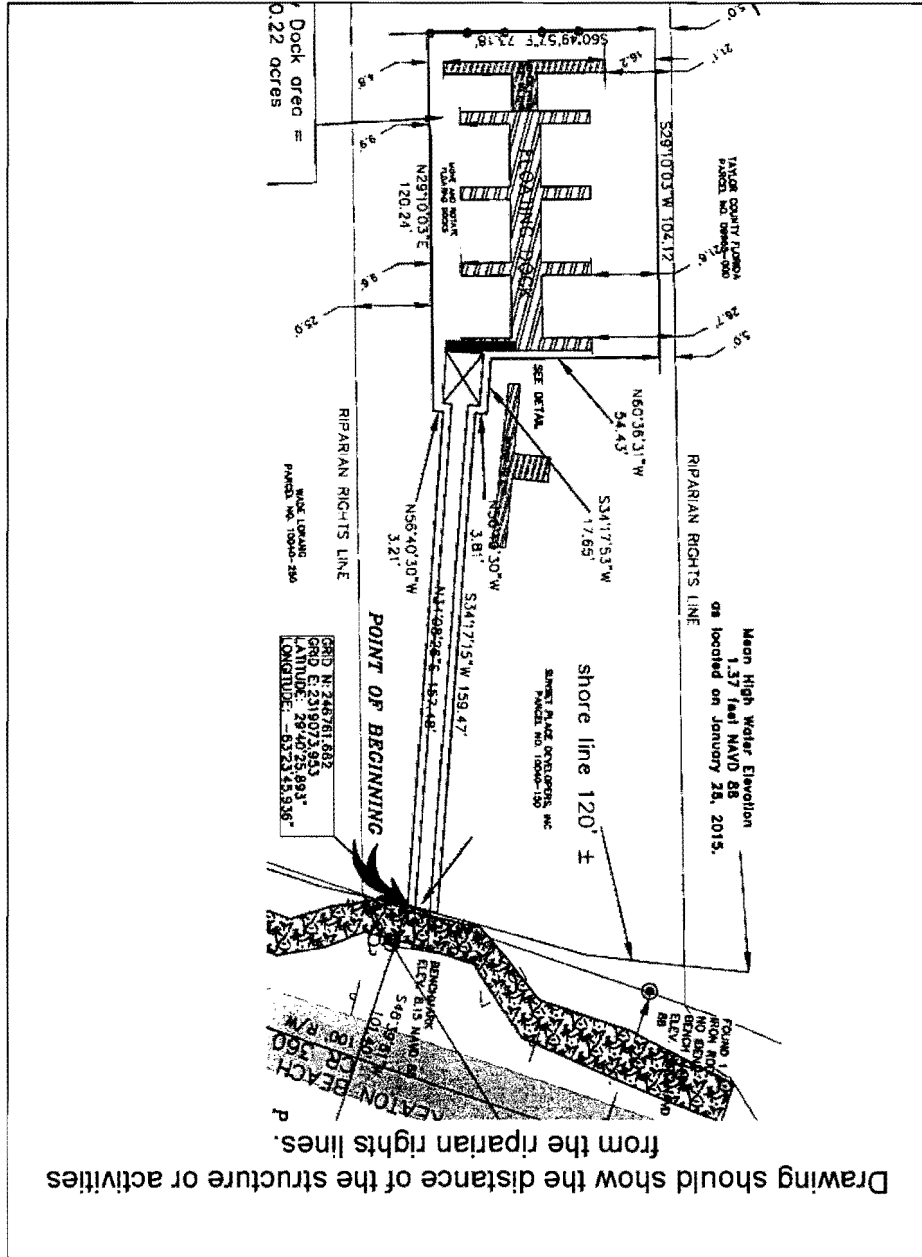
Taylor County Board of County Commissioners
(Printed name of adjacent owner)

This form is not adopted by rule; therefore, any letter of concurrence of similar content may be accepted.

LETTER OF CONCURRENCE FOR SETBACK WAIVER

PAGE 2 - DRAWING, SKETCH, OR SURVEY OF PROPOSED DOCK LOCATION

Drawing should show the distance of the structure or activities from the riparian rights lines.



(Initials of adjacent owner)

(Date)

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO REVIEW AND APPROVE THE FY 2014 FINANCIAL AUDIT FROM THE PERRY-TAYLOR COUNTY CHAMBER OF COMMERCE AND APPROVE THE RELEASE OF FUNDS BUDGETED FOR THE CHAMBER.

MEETING DATE REQUESTED:

JULY 21, 2015

Statement of Issue: THE BOARD APPROVED AN ALLOCATION OF \$5000 FOR THE PERRY-TAYLOR CHAMBER OF COMMERCE FOR FY 14-15. THE CHAMBER IS REQUESTING RELEASE OF THOSE FUNDS AND HAS SUBMITTED A COPY OF THE CHAMBER'S FINANCIAL RECORDS AS OF DEC 31, 2014.

Recommended Action: APPROVE THE RELEASE OF FUNDS

Fiscal Impact: \$5000

Budgeted Expense: YES

Submitted By: PERRY-TAYLOR CHAMBER OF COMMERCE

Contact: DAWN TAYLOR 584-5366

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options:

Attachments:

Perry-Taylor County Chamber of Commerce

"Share Our Good Nature"

PO Box 892

Perry, FL 32348

850-584-5366 Fax 850-584-8030

INVOICE

INVOICE NO: CF-14-15

DATE: April 20, 2015

To: **Accounts Payable**
Taylor County Board of County Commissioners
ATTEN: Accounts Payable

Ship To:
Perry-Taylor County Chamber of Commerce
PO Box 892
Perry, FL 32348

| SALESPERSON | DATE CONFIRMED | COLOR OR B/W | INVOICE NO. | TERMS |
|-------------|----------------|--------------|-------------|-------|
| Chamber | | | CF-14-15 | |

| QUANTITY | DESCRIPTION | UNIT PRICE | AMOUNT |
|---------------------|---|------------|------------|
| 1 | County Funding for the Perry-Taylor County Chamber of Commerce Fiscal Year 2014-2015 <i>(as Budgeted)</i> <i>7-14-15</i> | \$5,000.00 | \$5,000.00 |
| SUBTOTAL | | | \$5,000.00 |
| SALES TAX | | | -0- |
| SHIPPING & HANDLING | | | -0- |
| TOTAL DUE | | | \$5,000.00 |

Make all checks payable to: Perry-Taylor County Chamber of Commerce
If you have any questions concerning this invoice, call: Dawn Taylor at 584-5366

THANK YOU FOR YOUR CONTINUED SUPPORT!

Agenda for 7/21/15
(constant) *Dawn*

Tammy Taylor

From: Dawn Taylor <taylorchamber@fairpoint.net>
Sent: Wednesday, May 27, 2015 4:50 PM
To: 'TAMMY TAYLOR'
Cc: CHAM-TASK FORCE-Charlton Knowles
Subject: Chamber & TDC Funding Request
Attachments: 2015-2016 FY-BUDGET REQUEST LETTER - COUNTY-Chamber.doc; Budget-Draft 2016.xls; 2015-2016 Proposed Budget.xls; PERRY TAYLOR COUNTY CHAMBER AUDIT 2013.pdf

Importance: High

Hi Tammy – I have attached our budget requests for the Chamber and the TDC.

Attachment #1 – Letter to BOCC with Attachment of Supporting Documentation (One file)

Attachment #2 – Proposed FY 2015-2016 Operating Budget for the Chamber

Attachment #3 – TDC Proposed FY 2015-2016 Operating Budget

Attachment #4 – Audit 2013 (UNTIL we get our 2014 AUDIT – Due ANY DAY NOW) – *received July 2015 - attached*
n/a not attached for agenda 8/8 7/14/15

Thanks Tammy. Let me know if you need anything else. I did call our accountant, Jim Davis, and he said he'll have our audit by Friday most likely. I've attached the following to my Treasurer.

Dawn

Dawn V. Taylor, President
Taylor County Chamber of Commerce & Tourism Development
PO Box 892 Perry, FL 32348
850-584-5366
taylorchamber@gtcom.net
www.taylorcountychamber.com



April 20, 2015

County Commission Chairman Patricia Patterson
Board of County Commissioners
PO Box 620
Perry, FL 32348

Dear Chairman Patterson:

Please find the attached invoice and agreement contract requesting the release of our funding allocation for Fiscal Year 2014-2015.

If you find that you are in need of any additional information, please feel free to contact our office. Thank you for your time and consideration.

Sincerely,

Dawn V. Taylor
President

Enclosure: Contract Agreement

AGREEMENT

THIS AGREEMENT made this 20th of April, 2015, between TAYLOR COUNTY, FLORIDA, hereinafter called the County, and The Perry-Taylor County Chamber of Commerce.

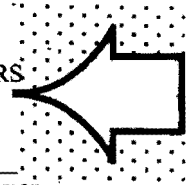
WITNESSETH: That the County and The Perry-Taylor County Chamber of Commerce for the following consideration stated herein covenant and agree as follows:

1. That the County will contribute the following sum (\$5,000.00) to The Perry-Taylor County Chamber of Commerce for the following purposes: Support of local partnerships to better serve the Taylor County business community, assisting with business retention and economic development along with the administration of advertising grants, and the administration of the Taylor County Small Business Outreach Center. The Chamber will continue establishment of goals and objectives to meet the needs of the business community at large. The Chamber provides support to the following organizations: The Taylor County Development Authority, the Tourism Development Council, Main Street, The Florida Forest Festival, the Small Business Development Center, Keep Taylor County Beautiful and the Enterprise Zone.
2. That in return for this contribution by the County, the Perry-Taylor County Chamber of Commerce will do the items listed in Paragraph 1 and in addition will present the County an audit following the fiscal year.
3. **VENUE:** Taylor County, Florida, shall be the proper venue for any litigation involving this contract.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed this 20th day of April.

BOARD OF COUNTY COMMISSIONERS
TAYLOR COUNTY, FLORIDA

BY: _____
PATRICIA PATTERSON, Chairman



**SIGN
HERE**

ATTEST:

ANNIE MAE MURPHY, Clerk

BY: _____

ATTEST:

WITNESS FOR _____

WITNESS FOR _____

**PERRY – TAYLOR COUNTY
CHAMBER OF COMMERCE, INC.**

**FINANCIAL STATEMENTS AND
INDEPENDENT AUDITOR'S REPORT**

DECEMBER 31, 2014

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**JAMES E. DAVIS
CERTIFIED PUBLIC ACCOUNTANT
3848 KILLEARN COURT
TALLAHASSEE, FL 32309**

850-224-2087

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Perry - Taylor County Chamber of Commerce, Inc.
Perry, Florida

Report on the Financial Statements

I have audited the accompanying financial statements of the Perry - Taylor County Chamber of Commerce, Inc. (a nonprofit organization), which comprise the statement of financial position as of December 31, 2014 and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

My responsibility is to express an opinion on these financial statements based on my audit. I conducted my audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that I plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatements.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of entity's internal control. Accordingly, we express no opinion. The audit, also, includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

I believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Opinions

In my opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Perry - Taylor County Chamber of Commerce, Inc. as of December 31, 2014 and the results of activities and cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America..

Supplementary Information

My audit was made for the purpose of forming an opinion on the financial statements taken as a whole. The supplemental information contained on page 14 is presented for the purpose of additional analysis. This information has been subjected to the auditing procedures applied in the audit of the financial statements referenced above and, in my opinion, is fairly stated in relation to these financial statements taken as a whole.

James E. Davis
Certified Public Accountant

June 10, 2015

PERRY – TAYLOR COUNTY CHAMBER OF COMMERCE, INC.
STATEMENT OF FINANCIAL POSITION
DECEMBER 31, 2014

ASSETS

| | | |
|---|----|---------------|
| Cash and other cash equivalents | \$ | 62,496 |
| Prepaid insurance | | 1,654 |
| Property and equipment - at cost, less accumulated depreciation of \$60,019 | | |
| | \$ | <u>64,150</u> |

LIABILITIES

| | | |
|------------------|----|-----|
| Accounts payable | \$ | 798 |
|------------------|----|-----|

NET ASSETS

| | | |
|--------------|----|---------------|
| Unrestricted | | 63,352 |
| | \$ | <u>64,150</u> |

See Notes to Financial Statements

PERRY – TAYLOR COUNTY CHAMBER OF COMMERCE, INC.
STATEMENT OF ACTIVITIES
FOR THE YEAR ENDED DECEMBER 31, 2014

UNRESTRICTED NET ASSETS

Support

| | |
|---------------------------------|----------------|
| Fund raising projects - net | \$30,846 |
| City of Perry contribution | 5,000 |
| Taylor County contribution | 5,000 |
| Grants | 4,965 |
| Membership dues | 26,581 |
| Tourism Development Council | 50,000 |
| Florida Forest Festival support | 8,000 |
| Progress Energy agreement | 6,500 |
| Other Support | 503 |
| | <u>137,395</u> |

Expenses

| | |
|------------------------|----------------|
| Program services | 97,972 |
| Management and general | 22,451 |
| Fund raising | 2,011 |
| | <u>122,434</u> |

INCREASE (DECREASE) IN UNRESTRICTED NET ASSETS 14,961

Net assets at beginning of year 48,391

Net assets at end of year \$ 63,352

See Notes to Financial Statements.

PERRY – TAYLOR COUNTY CHAMBER OF COMMERCE, INC.
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED DECEMBER 31, 2014

CASH FLOWS FROM OPERATING ACTIVITIES

| | |
|---|----------------|
| Change in net assets - | \$ 14,961 |
| Adjustments to reconcile change in net assets: | |
| Depreciation | - |
| Decrease (Increase) in prepaid insurance | 623 |
| Increase (Decrease) in accounts payable | <u>(1,479)</u> |
| Net cash flow provided (used) by operating activities | 14,105 |

CASH FLOWS FROM INVESTING ACTIVITIES

| | |
|--|----------|
| Net cash flows from (used by) investing activities | <u>-</u> |
|--|----------|

CASH FLOWS FROM FINANCING ACTIVITIES

| | |
|--|-------------------------|
| Net cash flows from financing activities | <u>-</u> |
| Net increase (decrease) in cash | 14,105 |
| Cash - beginning of year | <u>48,391</u> |
| Cash - end of year | <u><u>\$ 62,496</u></u> |

See Notes to Financial Statements

PERRY – TAYLOR COUNTY CHAMBER OF COMMERCE, INC.
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2014

| | <u>Program Services</u> | <u>Supporting Services</u> | | |
|----------------------------------|-------------------------|----------------------------|----------------|-------------------|
| | <u>Economic and</u> | <u>Management</u> | <u>Fund</u> | |
| | <u>Member Services</u> | <u>and General</u> | <u>Raising</u> | <u>Total</u> |
| Personnel expense | \$ 64,026 | \$ 16,403 | \$1,655 | \$ 82,084 |
| Annual Audit | - | 2,500 | - | 2,500 |
| Supplies | 629 | 161 | 17 | 807 |
| Web Site expense | 383 | - | - | 383 |
| Telephone | 1,519 | 389 | 39 | 1,947 |
| Postage | 1,279 | 328 | 33 | 1,640 |
| Utilities | 2,389 | 612 | 61 | 3,062 |
| Property and liability insurance | 3,968 | 1,017 | 102 | 5,087 |
| Maintenance and repair | 330 | 85 | 8 | 423 |
| Equipment rental | 2,266 | 581 | 58 | 2,905 |
| Conferences, meeting, and travel | 817 | - | - | 817 |
| Dues and subscriptions | 1,705 | - | - | 1,705 |
| Office expenses | 1,339 | 343 | 35 | 1,717 |
| Promotional and public relations | 2,140 | - | - | 2,140 |
| Pest control | 126 | 32 | 3 | 161 |
| Grant Expense | 4,929 | - | - | 4,929 |
| Tourism Development Council | 10,127 | - | - | 10,127 |
| | <u>\$ 97,972</u> | <u>\$ 22,451</u> | <u>\$2,011</u> | <u>\$ 122,434</u> |

See Notes to Financial Statements

PERRY – TAYLOR COUNTY CHAMBER OF COMMERCE, INC.
NOTES TO FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2043

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of Perry - Taylor County Chamber of Commerce, Inc. ("Chamber") have been prepared on the accrual basis of accounting. Under this method, support and revenues are recognized when earned and measurable and expenses are recognized when incurred.

Plant Assets and Depreciation

Use of operating funds for plant acquisitions and capital lease obligation payments are accounted for as increase in fixed assets. Donated assets are capitalized at fair value. Estimates have been used to record approximate cost of fixed assets where original cost could not be determined. Depreciation of building and equipment is provided over the estimated useful lives of the respective assets on a straight-line basis. The following is a summary of the major classes of depreciable assets and their estimated useful lives in years:

| <u>Classification</u> | <u>Years</u> |
|---------------------------|--------------|
| Building and improvements | 10 - 30 |
| Equipment | 2 - 20 |
| Furniture and fixtures | 5 - 20 |

Additions and betterment are capitalized by addition to the related property accounts, while repair and maintenance costs are charged against income. There was no depreciation expense for the year ended December 31, 2014.

Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures; accordingly, actual results could differ from these estimates.

Income Taxes

The Perry - Taylor County Chamber of Commerce, Inc. is entitled to be exempt from federal income taxes under Section 501 (c) (6) of the Internal Revenue Code and exempt from state income taxes under applicable state law; therefore, no provision has been made for income taxes.

PERRY-TAYLOR COUNTY CHAMBER OF COMMERCE, INC
NOTES TO FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2014

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – continued

Donated Materials and Services

Donated materials and equipment are reflected as contributions in the accompanying statements at their estimated values at date of receipt. No amounts have been reflected in the statement for donated services, as no objective basis is available to measure the value of such services; however, a substantial number of volunteers have donated significant amounts of their time in the organization's program services.

Compensated Absences

The Chamber provides annual leave and sick benefits to all its full-time employees as specified in its personnel policies. No liability has been recognized for compensated absences because the amount is insignificant.

Cash Equivalents

For purposes of the financial statements, the Chamber considers all checking and savings accounts to be cash equivalents.

NOTE 2 – NATURE OF THE ORGANIZATION

The Perry – Taylor County Chamber of Commerce, Inc. was organized to support the business community of Perry and Taylor County and promote economic growth.

NOTE 3 – BUILDINGS, EQUIPMENT AND FIXTURES

Building, equipment and fixtures and the related accumulated depreciation at December 31, 2014 are summarized as follows:

| | |
|-----------------------------------|--------------------|
| Buildings | \$ 15,000 |
| Furniture, fixtures and equipment | 24,520 |
| Building improvements | 20,499 |
| | <u>60,019</u> |
| Less accumulated depreciation | (60,019) |
| | <u><u>\$ -</u></u> |

PERRY-TAYLOR COUNTY CHAMBER OF COMMERCE, INC.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2014

NOTE 3 – BUILDINGS, EQUIPMENT AND FIXTURES – continued

The building, which houses the Chamber's office, is owned by the Taylor Board of County Commissioners and is provided to the Chamber as long as it operates according to its original purpose. If the Chamber ceases to exist, the building reverts back to the Board of County Commissioners. Costs associated with the Chamber office building have been capitalized and included in the Chamber's Building, Equipment and Fixtures on the financial statements.

NOTE 4 – CONCENTRATION OF CREDIT RISK

Information related to significant concentration of credit risk for financial instruments owned by the Chamber is as follows:

Demand and time deposits with banks – The Chamber has two checking accounts and a savings account with one bank amounting to \$52,667 and \$9,829 respectively at December 31, 2014. The Chamber has no policy requiring collateral to support this account; however, this account is federally insured up to \$250,000 by the FDIC.

NOTE 5 – FUNCTIONAL ALLOCATION OF EXPENSES

The cost of providing the various programs and other activities has been summarized on a functional basis in the Statement of Activities. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

NOTE 6 – RISK MANAGEMENT

The Chamber is exposed to various risk of loss related to torts; thefts of, damage to and destruction of assets; errors or omissions; injuries to employees and/or the public; or damage to property of others. The Chamber purchases insurance to protect itself against these risks.

PERRY-TAYLOR COUNTY CHAMBER OF COMMERCE, INC.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2014

NOTE 7 – CONTINGENCIES/COMMITMENTS

As a result of having tax exempt status the Chamber is subject to regulation by federal and state agencies with potential financial and compliance examinations by these agencies. The Chamber is not aware of any decisions or findings that could have a negative effect on the financial statements or operations of the Chamber as of the date of this audit.

NOTE 8 – SUBSEQUENT EVENTS

The Chamber evaluates subsequent events through the date of the auditor's report.

SUPPLEMENTAL INFORMATION

PERRY – TAYLOR COUNTY CHAMBER OF COMMERCE, INC.
SCHEDULE OF SUPPORT AND EXPENSES – BUDGET COMPARISON
FOR THE YEAR ENDED DECEMBER 31, 2014

| | Budget | Actual | Variance |
|---|----------------|------------------|------------------|
| Support: | | | |
| Banquet | \$ 2,000 | \$ 3,376 | \$ 1,376 |
| Blue Grass Festival | - | 2,534 | 2,534 |
| Blues & BBQ | 1,980 | 1,756 | (224) |
| FFF-Staff Support | 8,000 | 8,000 | - |
| Fund raising – net | 19,250 | 23,180 | 3,930 |
| Local governments | 10,000 | 10,000 | - |
| Grant | 5,000 | 4,965 | (35) |
| Membership dues | 26,000 | 26,581 | 581 |
| Progress Energy Agreement | 6,500 | 6,500 | - |
| Tourism Development Council | 50,000 | 50,000 | - |
| Other Support | - | 1,301 | 1,301 |
| | <u>128,730</u> | <u>138,193</u> | <u>9,463</u> |
| Expense: | | | |
| Professional fees | 2,500 | 2,500 | - |
| Conference, meetings and travel | 1,200 | 817 | 383 |
| Dues and subscriptions | 2,000 | 1,705 | 295 |
| Equipment rental | 3,300 | 2,905 | 395 |
| Insurance | 6,300 | 5,087 | 1,213 |
| Maintenance and repair | 4,050 | 423 | 3,627 |
| Office Expense & Postage | 5,080 | 82,084 | (77,004) |
| Personnel expense | 82,500 | 3,357 | 79,143 |
| Promotional and public relations | 1,900 | 2,140 | (240) |
| Tourism Development Council | 6,800 | 10,127 | (3,327) |
| Supplies | 1,000 | 807 | 193 |
| Telephone | 1,920 | 1,947 | (27) |
| Utilities | 5,180 | 3,606 | 1,574 |
| Grant expense | 5,000 | 4,929 | 71 |
| | <u>128,730</u> | <u>122,434</u> | <u>6,296</u> |
| Excess (Deficit) of support over expenses | <u>\$ -</u> | <u>\$ 15,759</u> | <u>\$ 15,759</u> |


See Notes to Financial Statements

Tammy Taylor

From: Dawn Taylor <taylorchamber@fairpoint.net>
Sent: Thursday, July 02, 2015 2:15 PM
To: 'TAMMY TAYLOR'
Subject: Finally - Our Audit!!
Attachments: CHAMBER AUDIT REPORT 2014.pdf

Have a Happy 4th!!

Dawn V. Taylor, President
Taylor County Chamber of Commerce & Tourism Development
PO Box 892 Perry, FL 32348
850-584-5366
taylorchamber@gtcom.net
www.taylorcountychamber.com

| TAYLOR COUNTY BOARD OF COMMISSIONERS | |
|--|--|
| County Commission Agenda Item | |
| SUBJECT/TITLE:  | THE BOARD TO REVIEW AND CONSIDER APPROVAL OF DISPOSITION FORMS FOR SURPLUS OF COUNTY PROPERTY, AS AGENDAED BY THERESA COPELAND, DTIS |
| MEETING DATE REQUESTED: | JULY 21, 2015 |

Statement of Issue: THE BOARD TO CONSIDER APPROVAL OF DISPOSITION OF
PROPERTY FORMS.

Recommended Action: APPROVE

Fiscal Impact: N/A

Budgeted Expense: Y/N

Submitted By: THERESA COPELAND

Contact: 838-3500X108

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: THE BOARD IS RESPONSIBLE FOR TRACKING AND DISPOSING
OF ITS PROPERTY. STAFF IS REQUESTING FOR LISTED ITEMS BE SURPLUSED.

Options: APPROVE/NOT APPROVE

Attachments: PROPERTY FORMS

ITEMS TO BE REMOVED FROM INVENTORY ON 7/21/2015

| | | | |
|------------|-----------------------------------|--------------------|---------|
| BCC # 6334 | MOBILE SATELLITE WEATHER RECORDER | Serial# i7ub36pj | SURPLUS |
| BCC # 6530 | SATELLITE BASED WWEATHER SYTEM | SERIAL#6DJH60RT | SURPLUS |
| BCC # 6646 | CANNON PRINTER IMAGERUNNER | SERIAL #XCK21332-- | SURPLUS |



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

Board Asset Number: 6646

FROM: Animal Control
Department Name

DEPT 0250
Number

DATE: 7-8-15

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

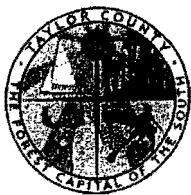
| | | |
|--|-------------|---------------------------------------|
| Name of Item <u>Printer</u> | Room # . | Make <u>Cannon</u> |
| Model <u>Image Runner 5000</u> | Year | Serial Number <u>XCK 21332 (?)</u> |
| Other Description: | | |
| Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below. | | |

DISPOSITION DATA

| | |
|---|---|
| Type of Disposition <u>Supplies</u> | |
| ** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately. | |
| Explanation for Disposal: (require <u>No longer works</u>) | |
| Last Known Location: (required) <u>Animal Shelter</u> | |
| APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commission: _____ Date _____ | |
| <u>Carrie L. Perkins</u> Department Head | <u>[Signature]</u> County Administrator Approval |

Date Removed From Asset Record

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number: 6530

FROM: Emergency mang
Department Name

DEPT 0226
Number

DATE: 7/6/2015

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

| | | |
|--|----------------------|---|
| Name of Item <u>Satellite based Weather system</u> | Room # <u>EOC</u> | Make |
| Model | Year | Serial Number <u>6DJH60RJ-KM Radio</u> |
| Other Description: <u>Mobile</u> | | |
| Purchased with Grant: Yes/No? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below. | | |

DISPOSITION DATA

Type of Dispositior Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) obsolete

Last Known Location: (required) EOC

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

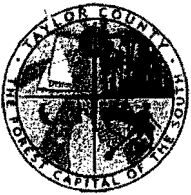
Steve Spadley
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Reco

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

Board Asset Number: 6334

FROM: Emergency Mang. DEPT 0226
Department Name Number

DATE: 7/6/2015

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

| | | |
|--|----------------------|----------------------------------|
| Name of Item <u>Mobile Satellite Weather Rec.</u> | Room # <u>EOC</u> | Make |
| Model | Year | Serial Number <u>E7UB36PJ</u> |
| Other Description: <u>mobile</u> | | |
| Purchased with Grant: Yes/No? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below. | | |

DISPOSITION DATA

Type of Disposition Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) obsolete

Last Known Location: (required) EOC

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Steve Spadley
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Record: _____

[Signature]
Fixed Assets Manager

(c) Recipient agrees to use any equipment purchased under the terms of this Agreement for the purpose for which it was intended.

(d) Equipment purchased under the terms of this Agreement shall remain the property of the Recipient. The disposition of equipment shall be made in accordance with the Recipient's policies and procedures and applicable federal policies and procedures.

(5) CERTIFICATIONS

(a) By its execution of this Agreement, the Recipient certifies that it is currently in full compliance with the Rule Chapters 27P-6, 27P-11, and 27P-19, Florida Administrative Code, Chapter 252, Florida Statutes, and appropriate administrative rules and regulations that guide the emergency management program and associated activities.

(b) The Recipient certifies that funds received from the Emergency Management, Preparedness and Assistance Trust Fund (EMPA funds) will not be used to supplant existing funds, nor will funds from one program under the Trust Fund be used to match funds received from another program under the Trust Fund. The Recipient further certifies that EMPA funds shall not be expended for 911 services, emergency medical services, law enforcement, criminal justice, fire service, public works or other services outside the emergency management responsibilities assigned to the Recipient's Emergency Management Agency, unless such expenditure enhances emergency management capabilities as expressly assigned in the local Comprehensive Emergency Management Plan (CEMP).

(c) The Recipient certifies that it is a participant in the most current Statewide Mutual Aid Agreement (SMAA).

(d) By its signature, the Recipient reaffirms its certification to employ and maintain a full-time Director consistent with Rule 27P-19.002(6), Florida Administrative Code.

(6) OTHER CONDITIONS

(a) As a further condition of receiving funding under this Agreement, following full or partial County Emergency Operation Center activation at a level equivalent to a State Emergency Operation Center level two (2) or above during the period of this Agreement, then the Recipient shall, within forty-five (45) days following the conclusion of the activation, evaluate the performance of all elements of the local emergency management program during that activation, and provide a written after action report to the Division.

(b) Funds may not be used for items such as door prizes and gifts. Flyers and educational information to educate the public about the Emergency Management Program is allowable.

(c) Food and beverages may be purchased for Emergency Management personnel and other personnel only if the Recipient's Emergency Operation Center or field command office is in an activated status and personnel receiving food/beverage are on duty at either of these locations. Purchases may be made only under (1) An Executive Order issued by the Governor or (2) a State of Emergency appropriately declared by local officials in response to an emergency event or threat.

(d) Within 60 days of execution of this Agreement, the Recipient shall provide copies of any new or updated ordinances in effect which expressly address emergency management, disaster preparedness, civil defense, disasters, and emergencies or otherwise govern the activation of the local emergency management program provided in s.252.38, Florida Statutes.



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

4700

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: Emergency Mgt.

DEPT 0226

DATE: 07/14/2015

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

| | | |
|--|--------|---------------|
| Name of Item | Room # | Make |
| photo id system | | |
| Model | Year | Serial Number |
| | | 5639 |
| Other Description: | | |
| Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below. | | |

DISPOSITION DATA

Type of Disposition: surplused

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) no longer usable

Location: (required) DTIS Dept.

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Steve Snedley
Department Head

Chairman Signature _____
County Administrator Approval _____
Sharon Copeland
Fixed Assets Manager

Date Removed From Asset Records _____

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Board to ratify the County Administrator's signature on the Certificate of Expenditure Report to Florida Department of Agriculture and Consumer Services, Florida Forest Service, Volunteer Fire Assistance Grant Program.

MEETING DATE REQUESTED:

July 21, 2015

Statement of Issue: Board to ratify the County Administrator's signature on the Certificate of Expenditure Report to Florida Forest Service to close out a Volunteer Fire Assistance Grant in the amount of \$7,256 awarded to the County on December 2, 2014. All funds have been expended.

Recommended Action: Board to a ratify the County Administrator's signature on the Certificate of Expenditure Report .

Fiscal Impact: The County expended all funds awarded.

Budgeted Expense: This had been a budgeted expense for FY 2014-2015.
applicable

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The County was awarded funding assistance to purchase four (4) full sets of Turnout Gear which included helmets, boots, and gloves.

Attachments: Certificate of Expenditure and support documentation.



ADAM H. PUTNAM
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Florida Forest Service

CERTIFICATE OF EXPENDITURE

This will certify that all funds received by:

Taylor County Board of Commissioners
(Name of Entity)

under the Year 20 15 Volunteer Fire Assistance Federal Cost-share program were spent in accordance with the Grant application, as amended, and as approved by the Florida Department of Agriculture and Consumer Services, Florida Forest Service.

This I attest, under penalties of perjury:

Dustin Hinkel
(Printed Name)

County Administrator
(Title)

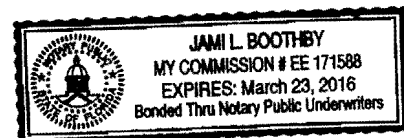
[Signature]
(Signature)

STATE OF FLORIDA
COUNTY OF Taylor

Sworn before me on this 9th day of July, 2015

Dustin Hinkel personally appeared before me,
whom I personally know.

[Signature]
NOTARY PUBLIC (Seal)



2013 APPROVED FEDERAL COST SHARE

05 Taylor

Taylor County Board of Commissioners

| | AMOUNT APPROVED | FED COST SHARE (50%) | NUMBER | DESCRIPTION |
|------------------|-----------------|----------------------|--------|---|
| <i>Closed</i> - | \$9,503 | \$4,751.50 | 9 | Radios, 7 Pagers, 8 Microphones, 7 LED Lanterns, 4 Chain Saws |
| | | | | BPO Full Set of Turnout Gear including Helmet, Boots, Gloves |
| FIRE DEPT. TOTAL | \$16,759 | \$8,379.50 | | |

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Board to ratify the County Administrator's signature on the Volunteer Fire Assistance Grant Application to Florida Forest Service in the amount of \$3,288.

MEETING DATE REQUESTED:

July 21, 2015

Statement of Issue: Board to ratify the County Administrator's signature on a grant application in the amount of \$3,288 to Florida Forest Service requesting funding assistance to purchase nine (9) paging receivers with chargers for Taylor County Fire Rescue.

Recommended Action: Board to ratify the County Administrator's signature.

Fiscal Impact: The County will be required to provide a match of \$1,644 which has already been budgeted. No additional County funds will be required for the project.

Budgeted Expense: Yes, the match funds were previously budgeted to purchase this equipment.

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The County is requesting funding assistance to purchase nine (9) paging receivers with chargers for firefighters.

Attachments: Grant Application and required support documents.



ADAM H. PUTNAM
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Florida Forest Service
VOLUNTEER FIRE ASSISTANCE GRANT APPLICATION

| | | | |
|--|---------------------|---|--|
| LEGAL NAME Taylor County Board of Commissioners | | FORM OF ORGANIZATION: (Municipal, Fire District, Non-Profit, County) County | |
| ADDRESS 201 E. Green Street | | IF COUNTY, LIST VFD'S BENEFITING FROM GRANT: Shady Grove (North) and Keaton Beach (South) | |
| CITY Perry | | | |
| STATE FL | ZIP 32348 | | |
| COUNTY Taylor | COUNTY # | | |
| EMPLOYER IDENTIFICATION NUMBER (EIN) 5 9 - 6 0 0 0 8 7 9 | | | |

| | | | |
|---|--|--|--|
| IS FIRE DEPARTMENT LOCATED IN AN INCORPORATED TOWN? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> IF YES, NAME OF TOWN: _____ POPULATION OF TOWN: _____ PROTECTED AREA: EST. POPULATION: 18,000 SIZE: (SQ. MILES) 1650 | | WHAT IS THE FIRE DEPARTMENT ISO RATING? 9 IS FIRE DEPARTMENT NIMS COMPLIANT? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> CURRENT COOPERATIVE AGREEMENT WITH FFS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> DISTANCE OF CLOSEST MUTUAL AID FIRE DEPARTMENT: 18-35 NAME OF FIRE DEPARTMENT: City of Perry | |
|---|--|--|--|

| | | | |
|--|--|---|--|
| NUMBER OF FIREFIGHTERS: PAID: 12 VOLUNTEERS: 34 | | HAS APPLICANT RECEIVED GRANT FUNDS FROM ANY SOURCE IN THE PAST 12 MONTHS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> | |
| NO. OF INCIDENTS PAST YEAR: WILDLAND FIRE: 71 OTHER: 305 | | IF YES, WHERE? FI Division of Forestry | |
| NO. OF FIREFIGHTERS CERTIFIED AS: WILDLAND FIREFIGHTER I 10 WILDLAND FIREFIGHTER II 5 | | AMOUNT: \$ 3,628 | |
| | | LIST TOTAL FUNDS RECEIVED FROM OTHER TAXING AUTHORITIES SUCH AS CITY, COUNTY, TAXING DISTRICTS (Past 12 Months) AMOUNT: \$ 28,562 | |

| LIST OF FIREFIGHTING VEHICLES: | | | |
|--------------------------------|----------------|---------------------|-----------------------|
| TYPE | MAKE/YR.MODEL | PUMP CAPACITY (GPM) | WATER CAPACITY (GAL.) |
| Brush Truck | Ford 550/2005 | 120 | 300 |
| Engine | Ford 550/2001 | 1250 | 1000 |
| Engine | Chevy C60/1986 | 1000 | 1000 |
| Engine | Ford 550/1999 | 1250 | 1000 |

| ESTIMATED GRANT FUNDING REQUEST: | | LIST OF EQUIPMENT OR SUPPLIES TO PURCHASE WITH GRANT FUNDS: | | |
|--|-----------------|---|------------------------------------|----------------|
| FEDERAL | \$ 1,644 | NUMBER | DESCRIPTION | AMOUNT |
| APPLICANT | \$ 1,644 | 9 | Motorola Minitor VI Paging | \$3,288 |
| COUNTY | \$ | | Receivers with chargers and | |
| TOTAL | \$ 3,288 | | batteries | |
| (Federal not more than 50% of total. Applicant at least 50% of total in matching funds.) | | | Total: | \$3,288 |

We understand that this is a 50 percent maximum cost-share program (Cooperative Forestry Assistance Act of 1978, PL 95-313), and that funds on deposit up to 50 percent of the actual purchase price of the items approved will be committed to our project. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION ARE TRUE AND CORRECT. THE GOVERNING BODY OF THE APPLICANT HAS DULY AUTHORIZED THIS DOCUMENT.

| | | |
|--|--|--|
| Type Name of Authorized Representative Dustin Hinkel | Title County Administrator | Telephone Number: (850) 838 - 3500 ext. 107 FAX: (850) 838 - 3501 |
| Signature of Authorized Representative | Date Signed and Submitted July 7, 2015 | Email: dustin.hinkel@taylorcountgov.com |

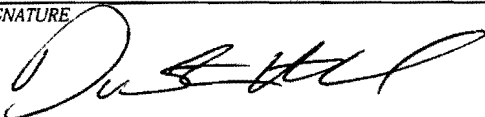
U. S. DEPARTMENT OF AGRICULTURE

*Certification Regarding Debarment, Suspension, and Other
Responsibility Matters - Primary Covered Transactions*

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7 CFR Part 3017, Section 3017.510, Participants' responsibilities. The regulations were published as Part IV of the January 30, 1989, Federal Register (pages 4722-4733). Copies of the regulations may be obtained by contacting the Department of Agriculture agency offering the proposed covered transaction.

(Before completing certification, read instructions on reverse.)

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
- (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - (b) have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or Local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - (c) are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or Local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
 - (d) have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or Local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

| | |
|---|--|
| <small>ORGANIZATION NAME</small> | <small>PR/AWARD NUMBER OR PROJECT NAME</small> |
| Taylor County Board of Commissioners | |
| <small>NAME AND TITLE OF AUTHORIZED REPRESENTATIVE</small> | |
| Dustin Hinkel County Administrator | |
| <small>SIGNATURE</small>  | <small>DATE</small> 7/7/2015 |

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this form, the prospective primary participant is providing the certification set out on the reverse side in accordance with these instructions.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out on this form. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the department or agency to whom this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.
6. The prospective primary participant agrees by submitting this form that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.
7. The prospective primary participant further agrees by submitting this form that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

ASSURANCES – NON-CONSTRUCTION PROGRAMS

Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§ 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§ 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age;
 - (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§ 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290-dd-3 and 290-ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. § 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 961-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Health Act (5 U.S.C. §§ 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§ 276a to 276a-7), the Copeland Act (40 U.S.C. § 276c and 18 U.S.C. §§ 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§ 327-333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102 (a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition of \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§ 1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. § 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§ 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

V, B-5 (02/05)

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13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

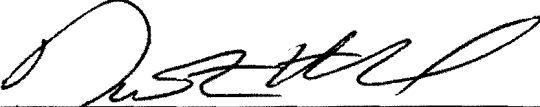
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for

research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

| | | |
|--|-------------------------------|----------------------------|
| SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL  | TITLE County Administrator | |
| APPLICANT ORGANIZATION Taylor County Board of Commissioners | | DATE SUBMITTED 7/7/2015 |

V, B-6 (02/05)
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Standard Form 424B (9-03)
Prescribed by OMB Circular A-102

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Board to ratify County's Administrator's signature on the 2nd quarter FY 2014-2015 Small County Consolidated Waste Management Grant Payment Request.

MEETING DATE REQUESTED:

July 21, 2015

Statement of Issue: Requesting Board to ratify the County Administrator's signature on the 2nd quarter FY 2014-2015 Small County Consolidated Waste Management Grant Payment Request.

Recommended Action: Ratify the County Administrator's signature on the Payment Request.

Fiscal Impact: The County received a grant in the amount of \$90,909 for the Small County Consolidated Waste Program. \$20,847.00 is to be reimbursed to the County for the 2nd quarter reporting period. No match is required.

Budgeted Expense: Y/N

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The County received a Small County Consolidated Waste Management Grant in the amount of \$90,909 FY 2014-2015. We are requesting reimbursement in the amount of \$20,847.00 for the 2nd quarter reporting period.

Attachments: Reimbursement Request Summary Form and support documentation

ATTACHMENT B
PAYMENT REQUEST SUMMARY FORM

Grantee: TAYLOR COUNTY
Mailing Address: 201 East Green St.
Perry, FL 32347

Grantee's Grant Manager:
Melody Cox

DEP Agreement No.: 529SC
Date Of Request: 06/30/2015

Payment Request No.: 2

Performance
Period: 01/01/2015 – 3/31/2015

Task/Deliverable Amount
Requested: \$20,847.00

Task No.: 1 & 2

GRANT EXPENDITURES SUMMARY SECTION

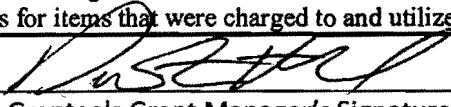
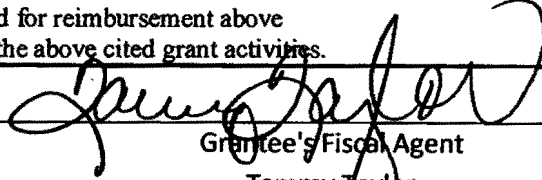
10/01/2014 – 09/30/2015

[Effective Date of Grant through End-of-Grant Period]

| CATEGORY OF EXPENDITURE | AMOUNT OF THIS REQUEST | TOTAL CUMULATIVE PAYMENTS |
|---|------------------------|---------------------------|
| Salaries | \$17,232.00 | \$33,689.70 |
| Fringe Benefits | \$ | \$ |
| Travel (if authorized) | \$ | \$ |
| Subcontracting: | \$ | \$ |
| | \$ | \$ |
| Waste Tire Disposal – D.E. Barnes | \$3,598.00 | \$5,689.00 |
| Waste Tire Disposal – Aucilla | \$17.00 | \$26.00 |
| Supplies/Other Expenses | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| TOTAL AMOUNT | \$20,847.00 | \$39,404.70 |
| TOTAL TASK BUDGET AMOUNT | \$90,909.00 | |
| Less Total Cumulative Payments of: | \$39,404.70 | |
| TOTAL REMAINING IN TASK | \$51,504.30 | |

GRANTEE CERTIFICATION

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 Dustin Hinkel | Grantee's Fiscal Agent Tammy Taylor |
| Print Name 850-838-3500 Ex.107 | Print Name 850-838-3506 Ex. 122 |
| Telephone Number | Telephone Number |

ATTACHMENT D

PROGRESS REPORT FORM

| | | | |
|---|------------------------------------|-----------------------|--------------|
| DEP Agreement No.: | 529SC | | |
| Grantee Name: | TAYLOR COUNTY | | |
| Grantee Address: | 201 E Green Street Perry, Fl 32347 | | |
| Grantee's Grant Manager: | Melody Cox | Telephone No.: | 850-838-3553 |
| Reporting Period: 01/01/2015 – 03/31/2015 | | | |
| Project Number and Title: CSFA # 37.012 – Small County Consolidated Grants | | | |

Provide the following information for all tasks and deliverables identified in the Grant Work Plan: a summary of project accomplishments for the reporting period; a comparison of actual accomplishments to goals for the period; if goals were not met, provide reasons why; provide an update on the estimated time for completion of the task and an explanation for any anticipated delays and identify by task.

NOTE: Use as many pages as necessary to cover all tasks in the Grant Work Plan.

The following format should be followed:

Task 1: Recycling Services for residents and small businesses which includes operation of the recycling and collection facility and administrative duties required for the recycling program.

Progress for this reporting period: Task 1 was completed as per the Grant Work Plan. Three full time employees and one part – time employee operate the recycling and collection facility.

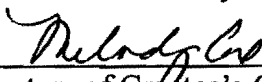
Identify any delays or problems encountered: There were no delays or problems encountered this reporting period. Documentation of staff salary and benefits is included in the report attachments.

Task 2: Disposal of waste tires. (tons)

Progress for this reporting period: Waste tires were disposed of as per the Grant Work Plan. D.E. Barnes picks up the majority of waste tires. Periodically the County disposes of waste tires at the Aucilla Area Regional Landfill and two invoices in the amount of \$17.00 was submitted this reporting period.

Identify any delays or problems encountered: There were no delays or problems encountered this reporting period. Documentation of the expenditures incurred disposing of the waste tires is included in the report attachments.

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

July 8, 2015

 Date

**TAYLOR COUNTY
2ND QUARTER REIMBURSEMENT (FY 14/15)
SMALL COUNTY SOLID WASTE GRANT**

10/01/14-12/31/14

SALARIES

Employees



| | | |
|----------------------|-------------------|---------------|
| Recycling Technician | \$ 9.28 @ 480 hrs | = \$ 4,454.40 |
| Utilities Mechanic | \$10.40 @ 480 hrs | = \$ 4,992.00 |
| HEO I | \$10.59 @ 480 hrs | = \$ 5,083.20 |
| Secretary | \$11.26 @ 240 hrs | = \$ 2,702.40 |

SUBTOTAL \$17,232.00

WASTE TIRE DISPOSAL

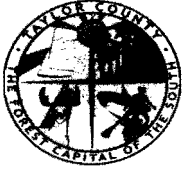
| <u>VENDOR</u> | <u>DESCRIPTION</u> | <u>AMOUNT</u> | <u>CHECK#</u> | <u>DATE PAID</u> |
|--------------------------|--------------------|---------------|---------------|------------------|
| D. E. Barnes Inc. | Tire Disposal | \$1,468.00 | 50435 | 01/05/15 |
| D. E. Barnes Inc. | Tire Disposal | \$1,104.00 | 50682 | 02/17/15 |
| D. E. Barnes Inc. | Tire Disposal | \$1,026.00 | 50854 | 03/17/15 |
| Aucilla Area Solid Waste | Tire Disposal | \$ 11.00 | 50751 | 03/02/15 |
| Aucilla Area Solid Waste | Tire Disposal | \$ 6.00 | 50843 | 03/17/15 |

SUBTOTAL \$3,615.00

GRAND TOTAL \$20,847.00

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

Board to ratify County's Administrator's signature on the 1st quarter FY 2014-2015 Small County Consolidated Waste Management Grant Payment Request.

MEETING DATE REQUESTED:

July 21, 2015

Statement of Issue: Requesting Board to ratify the County Administrator's signature on the 1st quarter FY 2014-2015 Small County Consolidated Waste Management Grant Payment Request.

Recommended Action: Ratify the County Administrator's signature on the Payment Request.

Fiscal Impact: The County received a grant in the amount of \$90,909 for the Small County Consolidated Waste Program. \$18,557.70 is to be reimbursed to the County for the 1st quarter reporting period. No match is required.

Budgeted Expense: Y/N

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The County received a Small County Consolidated Waste Management Grant in the amount of \$90,909 FY 2014-2015. We are requesting reimbursement in the amount of \$18,557.70 for the 1st quarter reporting period.

Attachments: Reimbursement Request Summary Form and support documentation

**ATTACHMENT B
PAYMENT REQUEST SUMMARY FORM**

Grantee: TAYLOR COUNTY
Mailing Address: 201 East Green St.
 Perry, FL 32347
DEP Agreement No.: 529SC
Date Of Request: 06/30/2015

Grantee's Grant Manager:
 Melody Cox
Payment Request No.: 1
Performance
Period: 10/01/2014 – 12/31/2014

Task/Deliverable Amount
Requested: \$18,557.70

Task No.: 1 & 2

GRANT EXPENDITURES SUMMARY SECTION

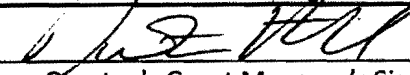
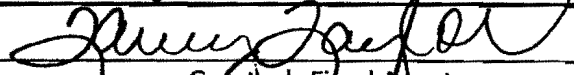
10/01/2014 – 09/30/2015

[Effective Date of Grant through End-of-Grant Period]

| CATEGORY OF EXPENDITURE | AMOUNT OF THIS REQUEST | TOTAL CUMULATIVE PAYMENTS |
|---|------------------------|---------------------------|
| Salaries | \$16,457.70 | \$16,457.70 |
| Fringe Benefits | \$ | \$ |
| Travel (if authorized) | \$ | \$ |
| Subcontracting: | \$ | \$ |
| | \$ | \$ |
| Waste Tire Disposal – D.E. Barnes | \$2,091.00 | \$2,091.00 |
| Waste Tire Disposal – Aucilla | \$9.00 | \$9.00 |
| Supplies/Other Expenses | \$ | \$ |
| | \$ | \$ |
| | \$ | \$ |
| TOTAL AMOUNT | \$18,557.70 | \$18,557.70 |
| TOTAL TASK BUDGET AMOUNT | \$90,909.00 | |
| Less Total Cumulative Payments of: | \$18,557.70 | |
| TOTAL REMAINING IN TASK | \$72,351.30 | |

GRANTEE CERTIFICATION

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 |
| Dustin Hinkel | Tammy Taylor |
| Print Name | Print Name |
| 850-838-3500 Ex.107 | 850-838-3506 Ex. 122 |
| 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.

"TOTAL CUMULATIVE PAYMENTS" COLUMN: 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.**

GRANTEE CERTIFICATION: 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 D

PROGRESS REPORT FORM

| | | | |
|---|--|-----------------------|--------------|
| DEP Agreement No.: | 529SC | | |
| Grantee Name: | TAYLOR COUNTY | | |
| Grantee Address: | 201 E Green Street Perry, FL 32347 | | |
| Grantee's Grant Manager: | Melody Cox | Telephone No.: | 850-838-3553 |
| Reporting Period: | 10/01/2014 – 12/31/2014 | | |
| Project Number and Title: | CSFA # 37.012 – Small County Consolidated Grants | | |
| <p>Provide the following information for all tasks and deliverables identified in the Grant Work Plan: a summary of project accomplishments for the reporting period; a comparison of actual accomplishments to goals for the period; if goals were not met, provide reasons why; provide an update on the estimated time for completion of the task and an explanation for any anticipated delays and identify by task.</p> <p>NOTE: Use as many pages as necessary to cover all tasks in the Grant Work Plan.</p> <p><u>The following format should be followed:</u></p> <p>Task 1: Recycling Services for residents and small businesses which includes operation of the recycling and collection facility and administrative duties required for the recycling program. Progress for this reporting period: Task 1 was completed as per the Grant Work Plan. Three full time employees and one part – time employee operate the recycling and collection facility. Identify any delays or problems encountered: There were no delays or problems encountered this reporting period. Documentation of staff salary and benefits is included in the report attachments.</p> <p>Task 2: Disposal of waste tires. (tons) Progress for this reporting period: Waste tires were disposed of as per the Grant Work Plan. D.E. Barnes picks up the majority of waste tires. Periodically the County disposes of waste tires at the Aucilla Area Regional Landfill and one invoice in the amount of \$9.00 was submitted this reporting period. Identify any delays or problems encountered: There were no delays or problems encountered this reporting period. Documentation of the expenditures incurred disposing of the waste tires is included in the report attachments.</p> | | | |

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

July 8, 2015


 Date

**TAYLOR COUNTY
1ST QUARTER REIMBURSEMENT (FY 14/15)
SMALL COUNTY SOLID WASTE GRANT**

10/01/14–12/31/14

SALARIES

Employees

| | | | |
|---|----------------------|-------------------|---------------|
|  | Recycling Technician | \$ 9.28 @ 460 hrs | = \$ 4,268.80 |
| | Utilities Mechanic | \$10.40 @ 460 hrs | = \$ 4,784.00 |
| | HEO I | \$10.59 @ 460 hrs | = \$ 4,871.40 |
| | Secretary | \$11.26 @ 225 hrs | = \$ 2,533.50 |

SUBTOTAL \$16,457.70

WASTE TIRE DISPOSAL

| <u>VENDOR</u> | <u>DESCRIPTION</u> | <u>AMOUNT</u> | <u>CHECK#</u> | <u>DATE PAID</u> |
|--------------------------|--------------------|---------------|---------------|------------------|
| D. E. Barnes Inc. | Tire Disposal | \$1,153.00 | 50076 | 10/23/14 |
| D. E. Barnes Inc. | Tire Disposal | \$ 938.00 | 50134 | 11/03/14 |
| Aucilla Area Solid Waste | Tire Disposal | \$ 9.00 | 50207 | 11/17/14 |

SUBTOTAL \$2,100.00

GRAND TOTAL \$18,557.70

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Board to ratify the County Administrators signature of the Certification of Completion Statement as required by the Florida Boating Improvement Program (FBIP) for the County to be reimbursed for the construction of the new boat ramp at Williams Fish Camp Landing (Mandalay).

MEETING DATE REQUESTED:

July 21, 2015

Statement of Issue: Board to ratify County Administrators signature on the Certification of Completion Statement as required by the Florida Boating Improvement Program Grant (FWC Contract No. 13268) which provided funding assistance in the amount of \$178,411 for the demolition of the existing boat ramp and construction of a new boat ramp with docks and associated gangways at Williams Fish Camp Landing (Mandalay).

Recommended Action: Ratify the County Administrators signature.

Fiscal Impact: The County was awarded a grant in the amount of \$178,411 from the Florida Boating Improvement Program.

Budgeted Expense: Not applicable

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The FBIP grant provided funding assistance for the demolition of the existing boat ramp which was in disrepair and for the construction of a new two lane boat ramp, docking and associated gang ways.

Attachments: Certification of Completion Statement



FLORIDA FISH AND WILDLIFE CONSERVATION COMMISSION

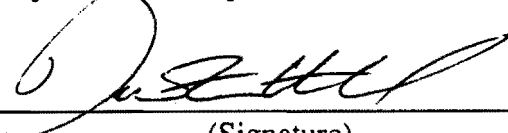
Florida Boating Improvement Program

CERTIFICATION OF COMPLETION STATEMENT

I, Dustin Hinkel, County Administrator
(Print Name and Title)

representing Taylor County Board of Commissioners
(Name of Local Government)

do hereby certify that the Florida Boating Improvement Program project funded by FWC Contract No. 13268 has been completed in compliance with all terms and conditions of said Agreement; that all amounts payable for materials, labor and other charges against the project have been paid; and that no liens have been attached against the project.


(Signature)

July 8, 2015
(Date)

WARNING: "Whoever knowingly makes a false statement in writing with the intent to mislead a public servant in the performance of his or her official duty shall be guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083." § 837.06, Florida Statutes.

CERTIFICATE BY COMMISSION

I certify: That, to the best of my knowledge and belief, the work on the above-named project has been satisfactorily completed under the terms of the Agreement.

Division: _____

By: _____ Date: _____

Name: _____

Title: _____

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO RATIFY THE COUNTY ADMINISTRATOR'S SIGNATURE ON THE DETAILED WORK PLAN BUDGET FOR ARTHROPOD CONTROL FOR FY 2015-2016, AS ADENDAED BY GARY WAMBOLT, ENVIRONMENTAL SERVICES DIRECTOR.

MEETING DATE REQUESTED:

JULY 21, 2015

Statement of Issue: STATE FUNDING FOR MOSQUITO CONTROL REQUIRES A DETAILED WORK PLAN BUDGET.

Recommended Action: RATIFY THE COUNTY ADMINISTRATOR'S SIGNATURE

Fiscal Impact: N/A

Budgeted Expense:

Submitted By: GARY WAMBOLT, ENVIRONMENTAL SERVICES DIRECTOR

Contact: 838-3533

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options:

Attachments:



DETAILED WORK PLAN BUDGET - ARTHROPOD CONTROL

Section 388.341, F.S. and 5E-13.022(1) and (3), F.A.C.
Telephone Number (850) 617-7995

FOR COUNTY OR
DISTRICT USE ONLY

Submit to:
Mosquito Control Program
3125 Conner Blvd, Bldg 6

FD-36 (Rev. 07-13)



ADAM H. PUTNAM
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Agricultural Environmental Services

DETAILED WORK PLAN BUDGET - ARTHROPOD CONTROL

Section 888.341, F.S. and 5E(13.022(1)) and (3), F.A.C.
Telephone Number (850) 617-7895

FOR COUNTY OR
DISTRICT USE ONLY

Submit to:
Mosquito Control Program
3125 Conner Blvd, Bldg 6

| | | | | | | | | | | | | | | |
|---------------------------------------|----------------------------|---|--------------|---------------------------|--------------|--------------|-----------------|---------|--|--|--|--|--|--|
| RECOMMENDED FOR APPROVAL | | FOR FISCAL YEAR BEGINNING OCTOBER 1, 2015 | | PREPARED BY: Cheryl White | | | | | | | | | | |
| DATE: | | ENDING SEPTEMBER 30, 2016 | | DATE: 7/8/2015 | | | | | | | | | | |
| APPROVED BY: Mosquito Control Program | | COUNTY or DISTRICT: Taylor | | APPROVED BY: [Signature] | | | | | | | | | | |
| DATE: | | AUTHORITY: CHAPTER 388, F.S. | | DATE: 7/8/15 | | | | | | | | | | |
| PAGE 2 OF 4 | | TO BE PAID FROM: | | PROGRAM ELEMENTS | | | | | | | | | | |
| ACCOUNT | TITLE | PERIOD OR QUANTITY | RATE OR UNIT | TOTAL COST | LOCAL | STATE | GENERAL EXPENSE | CAPITAL | | | | | | |
| EXPENDITURES | | | | | | | | | | | | | | |
| 10 | Personal Services | | | \$ 39,246.00 | \$ 16,387.00 | \$ 22,859.00 | | | | | | | | |
| 20 | Personal Services Benefits | | | \$ 14,802.00 | \$ 6,158.00 | \$ 8,644.00 | | | | | | | | |
| 30 | Operating Expense | | | \$ 125.00 | \$ 125.00 | | | | | | | | | |
| 40 | Travel & Per Diem | | | \$ 500.00 | | \$ 500.00 | | | | | | | | |
| 41 | Communication Serv | | | \$ 600.00 | \$ 600.00 | | | | | | | | | |
| 42 | Freight Services | | | | | | | | | | | | | |
| 43 | Utility Service | | | \$ 275.00 | \$ 275.00 | | | | | | | | | |
| 44 | Rentals & Leases | | | | | | | | | | | | | |
| 45 | Insurance | | | \$ 1,200.00 | \$ 1,200.00 | | | | | | | | | |
| 46 | Repairs & Maintenance | | | \$ 1,600.00 | \$ 1,600.00 | | | | | | | | | |
| 47 | Printing and Binding | | | | | | | | | | | | | |
| 48 | Promotional Activities | | | | | | | | | | | | | |
| 49 | Other Charges | | | \$ 188.00 | \$ 100.00 | \$ 88.00 | | | | | | | | |
| 51 | Office Supplies | | | \$ 430.00 | \$ 430.00 | | | | | | | | | |
| 52.1 | Gasoline/Oil/Lube | | | \$ 3,900.00 | \$ 3,900.00 | | | | | | | | | |
| 52.2 | Chemicals | | | \$ 7,988.00 | \$ 6,689.00 | \$ 1,299.00 | | | | | | | | |

| | | | | | | | | | | | | | | |
|------|--------------------------------|--|--|-----------|-----------|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | |
| 52.3 | Protective Clothing | | | \$ 200.00 | \$ 200.00 | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 52.4 | Misc. Supplies | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 52.5 | Tools & Implements | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 54 | Publications & Dues | | | \$ 300.00 | \$ 300.00 | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 55 | Training | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 60 | Capital Outlay | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 71 | Principal | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 72 | Interest | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 81 | Aids to Government Agencies | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 83 | Other Grants and Aids | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 89 | Contingency (Current Year) | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 99 | Payment of Prior Year Accounts | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |



DETAILED WORK PLAN BUDGET - ARTHROPOD CONTROL

FOR COUNTY OR DISTRICT USE ONLY

Submit to:
Mosquito Control Program
3125 Conner Blvd, Bldg 6

[illegible]

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Board to approve and execute the Site Dedication as required by the Florida Boating Improvement Program (FBIP) for the County to be reimbursed for the construction of the new boat ramp at Williams Fish Camp Landing (Mandalay).

MEETING DATE REQUESTED:

July 21, 2015

Statement of Issue: Board to approve and execute the Site Dedication as required by the Florida Boating Improvement Program Grant (FWC Contract No. 13268) which provided funding assistance in the amount of \$178,411 for the demolition of the existing boat ramp and construction of a new boat ramp with docks and associated gangways at Williams Fish Camp Landing (Mandalay).

Recommended Action: Approve Site Dedication

Fiscal Impact: The County was awarded a grant in the amount of \$178,411 from the Florida Boating Improvement Program and the Site Dedication is required for reimbursement of grant award amount.

Budgeted Expense: Not applicable

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The FBIP grant provided funding assistance for the demolition of the existing boat ramp which was in disrepair and for the construction of a new two lane boat ramp, docking and associated gang ways. All FBIP grants used for construction purposes require a twenty (20) year commitment by the County and the site must be open for public use for boater access during this period of time.

Attachments: Site Dedication Form and Exhibit A.

SITE DEDICATION

This Site Dedication gives notice that the Real Property identified as described in Exhibit A, Legal Description, attached hereto, (the "Property") has been developed with financial assistance provided by the Florida Legislature, through the Fish and Wildlife Conservation Commission, under the grant program called the Florida Boating Improvement Program (FBIP). In accordance with Chapter 68-1.003, F.A.C., and the Program Guidelines of the FBIP, the Property is hereby dedicated to the public as a boating access facility for the use and benefit of the general public for a minimum period of twenty (20) years from the date of this dedication.

DEDICATOR

Original signature

Patricia Patterson

Printed Name

Chairman

Title

July 21, 2015

Date

Witness

Printed Name

Witness

Printed Name

STATE OF FLORIDA

COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20____
by _____, who is personally known to me or who
produced _____ as identification.

Stamp:

Notary Public, State of Florida

Exhibit A

SEC TWP RGE SUBD BLK LOT
24 04 03 01002 000
NAME: UNITED STATES OF AMERICA

LEGAL: LEG 0051.90 ACRES
FOR COMPLETE LEGAL SEE
OR 169-457 & 148-651-657

ADD :
ADD :
ADD :
CSZ : WASHINGTON DC 20003
911 : 24250 FISH CAMP RD

LAND : \$207,600
AGR-VAL : \$
EX-FEAT : \$15,698
BUILDING : \$
MARKET--->: \$223,298
ASSESSMT->: \$223,298

TD : CO EXEMPTION : 95
DOR : 8800 EX-AMT :

HXYR : 2008
TAX BILL: \$.00

| LAND | UNIT-PRICE | LAND UNITS | APPRAISED |
|-----------|------------|------------|-----------|
| 8800-1073 | \$4,000.00 | 51.90 | \$207,600 |

PROT CAP : \$215,548
UPROT CAP : \$
TOT ASMT->: \$215,548

EXEMP AMT : \$215,548
TAXABLE-->: \$-SCH \$-CO \$-OTH \$-CTY
0-NXT, 1-PRV, 3-REKEY, 4-MENU, 5-BLDS, 8-SALES, 9-PRC, V-VALUE, L-LEGAL

MEMORANDUM OF UNDERSTANDING
BETWEEN THE
UNITED STATES DEPARTMENT OF INTERIOR
FISH AND WILDLIFE SERVICE
AND
TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

This MEMORANDUM OF UNDERSTANDING is made and entered into this 25 day of April, 2013, between the TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS, hereinafter called the "COUNTY" and the United States Department of the Interior, FISH AND WILDLIFE SERVICE, acting by and through its Regional Director, Southeast Region, under authority granted in 16 U.S.C. Sec. 661 et seq., hereinafter called the "Service".

WITNESSETH:

WHEREAS, the SERVICE, by Acts of the Congress, administers the National Wildlife Refuge System for the purposes of (1) preserving, restoring, and enhancing in their natural ecosystems all species of animals and plants that are endangered or threatened with becoming endangered: (2) perpetuating migratory bird resources: (3) preserving a natural diversity and abundance of fauna and flora on refuge lands: (4) providing an understanding and appreciation of fish and wildlife ecology and man's role in the environment: (5) providing refuge visitors with a high quality, safe, wholesome and enjoyable recreational experience oriented toward wildlife to the extent that these activities are compatible with purpose for which the wildlife refuge was established: and,

WHEREAS, the SERVICE administers and manages approximately 900 acres of land, more or less, in Taylor County as part of the St. Marks National Wildlife Refuge: and,

WHEREAS, the COUNTY being the local governmental body is concerned with the welfare of Taylor County citizens and with environmental quality of Taylor County: and,

WHEREAS, the SERVICE represented by the St. Marks National Wildlife Refuge is concerned with the environmental quality of Taylor County and with the welfare of Taylor County citizens: and,

WHEREAS, The Aucilla River boat launch ramp at the old Williams Fish Camp Landing has been providing outdoor recreational opportunities for the citizens of Taylor County and other visitors for many years and,

WHEREAS, the COUNTY desires to see this facility continue in operation and is willing to take responsibility for the operation and maintenance of this facility and,

WHEREAS, the COUNTY is seeking funding to modify and improve the existing concrete boat launch ramp and add covered picnic tables with landscaping on site and,

NOW THEREFORE, in consideration of the foregoing premises and of the mutual covenants hereafter contained, the parties agree as follows:

THE SERVICE

1. Recognizes the COUNTY's desire to see the continued operation of this facility.
2. Recognizes the COUNTY'S willingness to take responsibility for the operation and maintenance of this facility.
3. Agrees that the COUNTY will be permitted to operate and maintain this facility for a period of twenty years from the date of signing of this Memorandum of Understanding with an option to examine, reevaluate, modify, and extend this Memorandum of Understanding for an additional period of time on terms agreeable to both parties.
4. Agrees that the COUNTY, if desirable, may charge a reasonable fee for public use of this facility.
5. Agrees that the COUNTY, if desirable, may move a small temporary portable mobile home onto the site for occupancy by an attendant and a portable toilet facility.

THE COUNTY

1. Agrees to take responsibility for the operation and maintenance of this facility, which includes the boat launch ramp entrance road, parking lot for the launch ramp and picnic area, the boat launch ramp, the garbage stations, and the seawall.
2. Agrees that if a user fee is appropriate, that fee will be used only to offset the cost of operating and maintaining this facility, and that the fee will be reasonable and evenly applied to all users, regardless of place of residence, and may be collected by whatever means the COUNTY deems appropriate.
3. Agrees that services to be provided will include only boat launching and parking within the existing parking lot, picnic tables (number and location to be agreed upon by the SERVICE and COUNTY managers), trash receptacles, and portable restroom(s).
4. Agrees that operation and maintenance of these SERVICE facilities will include litter control and garbage removal, dead tree/limb removal, maintenance of roads, parking lot, and boat launch ramp.
5. Recognizes that the SERVICES agrees only to expand services provided effective April 2013 by improving the current boat ramp with respect to grade and materials but maintaining essentially the current size and adding no more than three covered picnic tables to the site.
6. Agrees that any modification to facilities will first be coordinated in writing with the refuge manager.

THE COUNTY AND THE SERVICE MUTUALLY AGREE

1. That each party will require its management and operational personnel to be familiar with the provisions of this Memorandum of Understanding.
2. That all provisions of this Memorandum of Understanding are subject to applicable laws of the State of Florida and the laws of the United States.
3. This Memorandum of Understanding shall not be amended or modified except in advance and in writing signed by both parties. The MOU may be terminated by either party with 60 days written notification to the other party and without liability to either party.
4. That, notwithstanding the foregoing the SERVICE shall not be committed to incur monetary obligations in the fulfillment of the terms and conditions of this

memorandum, except to the extent funds are made available by the Congress of the United States.

5. That nothing in this agreement shall be construed as recognition that the COUNTY has any ownership rights to the subject area of facilities now or in the future, and that any modifications both in terms of services or facilities are undertaken only with the permission of the SERVICE in accordance with this agreement.

PERIOD OF PERFORMANCE

This agreement shall be in effect from April 25, 2013 until April 25, 2033.

LIABILITY- Each party hereto agrees that it shall be solely responsible for the negligent or wrongful acts of its employees and agents. Any tort actions involving the Service will be administered in accordance with the Tort Claims Act and any tort actions involving the County will be administered in accordance with the laws of the State of Florida.

POINTS OF CONTACT Points of contact for purposes of administering this agreement are:

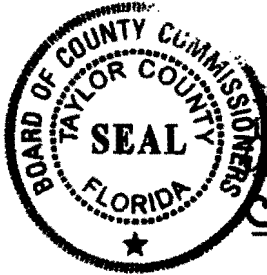
Service

James Burnett
Project Leader, St. Marks NWR
1255 Lighthouse Road
St. Marks, FL 32355

County

Jack Brown
Taylor County Administrator
201 East Green Street
Perry, FL 32347

IN WITNESS WHEREOF, the parties hereto have caused this instrument to be executed as of the day and year first above written.



TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

BY

Chairman

Signed, sealed and delivered
in the presence of:

Ann Mae Murphy
Clerk of Court

UNITED STATES OF AMERICA

DEPARTMENT OF THE INTERIOR

FISH AND WILDLIFE SERVICE

BY

James Burnett
Project Leader, North Florida Refuges

Signed, sealed and delivered

In the presence of:

Lori Nicholson
Joel Guzman

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO CONSIDER APPROVAL OF THE PURCHASE OF ANESTHESIA EQUIPMENT FOR DOCTOR'S MEMORIAL HOSPITAL FROM MINDRAY NORTH AMERICA AS RECOMMENDED BY THE BID COMMITTEE.

MEETING DATE REQUESTED:

JULY 21, 2015

Statement of Issue:

THERE WERE FIVE RESPONSES TO THE BID SOLICITATION FOR ANESTHESIA EQUIPMENT ON MAY 4, 2015. THE FIVE COMPANIES WERE ASKED TO DEMONSTRATE THEIR EQUIPMENT AND FOUR COMPLIED. A RECOMMENDATION HAS COME FROM THE COMMITTEE TO PURCHASE FROM MINDRAY NORTH AMERICA, THE LOWEST RESPONSIVE RESPONSIBLE BIDDER.

Recommended Action:

APPROVE THE RECOMMENDATION OF THE COMMITTEE

Fiscal Impact:

\$145,072.92

Budgeted Expense:

YES

Submitted By:

DUSTIN HINKEL ON BEHALF OF THE COMMITTEE

Contact:

838-3500 X 7

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options:

Attachments:

To: Amanda Gregory
Subject: RE: Anesthesia Recommendation

Mindray's initial pricing allowed for a trade in. Do you have a trade in???

From: Amanda Gregory [<mailto:agregory@doctorsmemorial.com>]
Sent: Tuesday, July 14, 2015 1:56 PM
To: Margaret Dunn
Subject: FW: Anesthesia Recommendation

Margaret

I have attached the letter of recommendation for the Anesthesia Machines. We are recommending the A5 system from Mindray \$145,072.92.

I have also attached the spreadsheet with all vendors with the specs that was requested. On the Score sheets that is the evaluation tool we used. On that bottom of the spreadsheet (where you can click on the different sheets) there is the evaluation forms for each vendor. we had a total of 2 evaluations for each system.

*Thanks
Amanda*

*Amanda Gregory
Materials Management Director
850-584-0155*



A partnership with Tallahassee Memorial HealthCare

Margaret Dunn

From: Amanda Gregory <agregory@doctorsmemorial.com>
Sent: Tuesday, July 14, 2015 3:18 PM
To: Margaret Dunn
Subject: RE: Anesthesia Recommendation

The equipment comes with a 2year warranty and they included 3 additional years in the quote totaling \$116,551.17. It was also recommended to pay for the additional \$28,521.75 for Preventive Maintenance for the Equipment.

So Equipment, Warranty with preventive Maintenance for a total of 5years gives you a grand total of \$145,072.92

From: Margaret Dunn [mailto:margaret.dunn@taylorcountygov.com]
Sent: Tuesday, July 14, 2015 2:48 PM
To: Amanda Gregory
Subject: RE: Anesthesia Recommendation

The quoted price includes the trade in allowance of \$33,705.81 which brings the total price down to \$116,551.17. But then you have to add the warranty addition. It appears to be \$28,521.75 but I am unable to determine the time period. It gives quantity but is that years? Months? What is the price of the 5 yr warranty?

From: Amanda Gregory [mailto:agregory@doctorsmemorial.com]
Sent: Tuesday, July 14, 2015 2:41 PM
To: Margaret Dunn
Subject: RE: Anesthesia Recommendation

I would not know the trade in. It will be a third party that they will come get the old when the new is set up and ready.

From: Margaret Dunn [mailto:margaret.dunn@taylorcountygov.com]
Sent: Tuesday, July 14, 2015 2:35 PM
To: Amanda Gregory
Subject: RE: Anesthesia Recommendation

Get me a pricing sheet, please, that shows the trade in allowance. I'd rather not take the \$145k to the BCC if I can take \$97k.

From: Amanda Gregory [mailto:agregory@doctorsmemorial.com]
Sent: Tuesday, July 14, 2015 2:18 PM
To: Margaret Dunn
Subject: RE: Anesthesia Recommendation

Yes we have 3 that will be traded in

From: Margaret Dunn [mailto:margaret.dunn@taylorcountygov.com]
Sent: Tuesday, July 14, 2015 2:12 PM

MAY 4, 2015

7. THE BOARD TO RECEIVE BIDS FOR DMH ANESTHESIA MACHINE, SET FOR THIS DATE AT 6:15 P.M., OR AS SOON THEREAFTER AS POSSIBLE.

THE FOLLOWING BIDS WERE RECEIVED:

1. MINDRAY N. AMERICA
800 MACARTHUR BOULEVARD
MAHWAH, NJ 07430
145072.92 trade in 97,448.28 w/trade in optional? 116,551.17 w/trade
2. DRAEGER MEDICAL, INC.
3135 QUARRY ROAD
TELFORD, PA 18969
191527.52 trade in 191,527.51 w/trade in 144,515.71 equipment 47,011.80 5 yr warranty
3. GE HEALTHCARE
9900 WEST INNOVATION DRIVE
WAUWATOSA, WI
214357.09 NO trade in 179,077.09 + 35,280 5 yr warranty
4. METROPOLITAN MEDICAL
15 WESTSIDE DRIVE
ASHVILLE, NC 28806
246882 NO trade in 220,724.05 New 187,509.00 NO trade in 136,920.00 refurbished warranty 9720 Basic or \$59,373 full/pm
5. INTERMED BIOMEDICAL SERVICES
13351 PROGRESS BOULEVARD
ALACHUA, FL 32615
161500 NO trade in 103,500 NO trade in + 58,000 warranty

One is refurbished

Margaret Dunn

From: Amanda Gregory <agregory@doctorsmemorial.com>
Sent: Tuesday, July 14, 2015 1:56 PM
To: Margaret Dunn
Subject: FW: Anesthesia Recommendation
Attachments: Anesthesia Recommendation.docx; Copy of Anesthesia Spreadsheet.xlsx; Anesthesia Score Sheets.xlsx

Margaret

I have attached the letter of recommendation for the Anesthesia Machines. We are recommending the A5 system from Mindray \$145,072.92.

I have also attached the spreadsheet with all vendors with the specs that was requested. On the Score sheets that is the evaluation tool we used. On that bottom of the spreadsheet (where you can click on the different sheets) there is the evaluation forms for each vendor. we had a total of 2 evaluations for each system.

*Thanks
Amanda*

*Amanda Gregory
Materials Management Director
850-584-0155*



A partnership with Tallahassee Memorial HealthCare

| ~ June 2015 ~ | | | | | | |
|---------------|--|--|--|---|---|--------|
| ◀ May | | | | | | July ▶ |
| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
| | 1 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 14 | 15 | 16 | 17 | 18 | 19 Space Labs Telemetry Presentation 10:30 – 12pm | 20 |
| 21 | 22 | 23 Mindray Telemetry Presentation 1130-1pm | 24 Mindray Anesthesia Presentation 2pm-4pm | 25 Fukuda Denshi Telemetry Presentation 11am-3pm | 26 | 27 |
| 28 | 29 GE Anesthesia Presentation 1230-3pmkw | 30 Drager Anesthesia Presentation 11-130pm | Notes: | | | |

Margaret Dunn

From: Amanda Gregory <agregory@doctorsmemorial.com>
Sent: Thursday, June 18, 2015 2:14 PM
To: Margaret Dunn
Subject: May Presentations
Attachments: May Presentations.docx

Just wanted to send this calendar to you. We have booked presentations for the Anesthesia and Telemetry system. If you can attend that would be great if not we understand. We will be completing an evaluation sort of like we did with the Beds and Stretchers.

*Thanks
Amanda*

DMH Anesthesia Machine Specifications

| Company Name: | Mindray \$125,970.03 | Mindray \$145,072.92 | Drager \$192,724.51 | GE Medical \$214,304.59 |
|--|---|---|------------------------|--------------------------------------|
| Need a total of 3 machines | Yes | Yes | Yes | Yes |
| Anesthesia System: | A3 | A5 | Fabius GS | Aespire View |
| 3 Gas, Flow Tubes O2, Air, N2O | Yes | Yes | Yes | Yes |
| 3 Gas inlet 3 Connector DISS | Yes | Yes | Yes | Yes |
| Double Vapor Mount Auto Excl. | Yes | Yes | Yes | Yes |
| Gas analyzer | Yes | Yes | Yes | Yes |
| Connections: | | | | |
| PIN Index O2-Air-N2O | Yes | Yes | Yes | Yes |
| Central gas supply hoses | Yes | Yes | Yes | Yes |
| Power Outlet Strip, 4 socket | No only 3 | Yes | Yes | Yes |
| Ventilator & Display: (prefer touchscreen) | Yes | Yes | Not Touch Screen | Yes |
| Software options | Yes | Yes | Yes | Yes |
| PCV + PS + SIMV/PS | Yes | Yes | Yes | Yes plus more |
| Cozy 2.6 with heating | Equivalent to | Equivalent to | Yes | GE's Advanced Breathing System (ABS) |
| Kit Cover/ramming protection | Unnecssary for Mindray System | Unnecssary for Mindray System | Yes | GE's Advanced Breathing System (ABS) |
| Cozy Arm | Equivalent to | Equivalent to | Yes | GE's Advanced Breathing System (ABS) |
| Moisture reduction kit | Kit unnecessary for Mindray System: Our built in warmed breathing system helps reduce/eliminate moisture. Offered as a standard feature with no additional charge | Kit unnecessary for Mindray System: Our built in warmed breathing system helps reduce/eliminate moisture. Offered as a standard feature with no additional charge | Yes | Yes |
| Breathing Bag arm | Yes | Yes | Yes | Yes |
| Mech. airway pressure gauge Ki | Yes | Yes | Yes | Yes |
| Pressure port guards | Yes | Yes | Yes | Yes |

| Monitor: | Touch Screen | Touch Screen | Not touch Screen | B450 (touch screen |
|--|--------------|--------------|------------------|--------------------|
| Vital signs, pressure monitoring (ABG/CVP) | Yes | Yes | Yes | Yes |
| Ability to interface with CPSI (Computer Program & System Incorporated) EMR (electronic medical record) and print abnormal values, ability to transfer to hospital wide monitors | Yes | Yes | Yes | Yes |

| | | | | |
|--------------------------|-----|-----|-----|-----|
| Endotracheal Suction | Yes | Yes | Yes | Yes |
| Kit vacuum suction mount | Yes | Yes | Yes | Yes |

| | | | | |
|---------------------------|----------------------------------|----------------------------------|-----|-----|
| O2 Therapy | Yes | Yes | Yes | Yes |
| External O2 flow tube, US | Yes + air mixer for added safety | Yes + air mixer for added safety | Yes | Yes |

| | | | | |
|------------------------------|-----|-----|-----|-----|
| Selection CS Hoses: | | | | |
| With O2 | Yes | Yes | Yes | Yes |
| With N2O | Yes | Yes | Yes | Yes |
| With AIR | Yes | Yes | Yes | Yes |
| With VAC | Yes | Yes | Yes | Yes |
| With EVAC | Yes | Yes | Yes | Yes |
| DISS/CGAV-5 / Nipple + Nut | Yes | Yes | Yes | Yes |
| Length of CS hoses 15 - 20ft | Yes | Yes | Yes | Yes |

| | | | | |
|--------------------------------|-----|-----|-----|-----|
| Equipment Selection: | | | | |
| With conversion kit – GCX rail | Yes | Yes | Yes | Yes |
| Power Strip | Yes | Yes | Yes | Yes |

| | | | | |
|---|--|--|---|--|
| Warranty – 5 years, service agreement | Yes | Yes | Yes | Yes |
| Where is the closest field service representative? | Orlando | Orlando | Jacksonville | Orlando |
| Equipment down time & replacement transfer locations | 2 hour response by phone& Onsite 24hrs | 2 hour response by phone& Onsite 24hrs | within 1hr phone response & onsite within 24hrs | 1hr reponse by phone & onsite within 24hrs |
| Time line for installation, Education, implementation and ongoing Education support | Yes | Yes | Yes | Per RFB |

| | | | | |
|--|----------|----------|----------|---------|
| List unique capabilities of your monitors how that would be beneficial to DMH? | Yes | Yes | Yes | Per RFB |
| Shipping Cost | Included | Included | Included | FOB |

Doctors' Memorial Hospital

Anesthesia Recommendation

Based on our trials and colleague evaluations performed on June 24-June 30, 2015, the three that meet Doctors' Memorial Hospital patient and provider care needs were Mindray A3, Mindray A5, Drager Fabius GS and GE Medical Aespire View.

The enclosed attachments were the specs for the Anesthesia Machine. The Mindray A5 has significant advantages to providing our ability to offer the patient a better anesthesia and airway management for breathing, in addition to the Anesthesiologist and Certified Registered Nurse Anesthetist ability to provide safe patient care.

The specs enclosed the following with additional advantages:

Hardware:

- Central Locking Brake- A5 offers 1 central locking mechanism, whereas A3 offers individual wheel brakes on all 4 casters.
- Integrated cable sweep System- Keeps the equipment wheels from rolling over fragile cabling typically laying on the floor in the OR. Savings on repair cost of damaged cabling.
- The A5 offers the option to have the gas analysis module reside in it so the agent ID, oxygen, nitrous oxide and carbon dioxide numbers appear on the ventilator screen next to the other ventilator parameters. The A3 does not have this option.

Ventilation Modes:

- PVC – Volume Guarantee (VGT) – A5 offers volume Guarantee whereas A3 does not – this mode is excellent with laparoscopic cases where compliance changes occur and for sicker patients with Chronic Obstructive Pulmonary Disease or Acute Respiratory Distress Syndrome.
- SIMV-PC – This mode offers synchronization with the patient's breathing so the patient is more comfortable when waking up and won't buck against the machine while in pressure control.

Advanced Features:

- High pressure O2 port – Quick access for emergency oxygen jet ventilation
- Spirometry standard on A5 – breath to breath loops help instantly visualize condition and compliance of lungs, a potential migration of the endotracheal tube, an endotracheal cuff leak and changes in lung compliance during ventilation. Improves patient safety.

Safety Features:

- Backup Touchpad screen – ensures that the clinician always has access to user interface in the event the touch screen service issue. Increasing patient safety
- Capability to mix air with oxygen Mac cases through nasal cannula when using electro cautery. Reducing the risk of surgical fire.
- Lithium-ion battery backup – A5 offers 150min., whereas the A3 offers 75min.

1 Very Poor 2 Poor 3 Average 4 Good 5 Very Good

Mindray

Monitors:

| | | | | | |
|---|--|--|--|---|---|
| 1. Ease of Use? | | | | | 2 |
| 2. How effective is monitor with manageing/responding to alarms? | | | | 1 | 1 |
| 3. Meets clinical requirements? | | | | | 2 |
| 4. Overall Quality | | | | | 2 |

Remote Capabilities: Yes NO

| | | |
|--|---|--|
| 5. Confirmation of integration to CPSI? | √ | |
|--|---|--|

Service:

| | | |
|--|---|--|
| 12. Sufficient warranty (5yrs requested)? | √ | |
|--|---|--|

| | | |
|---|---|--|
| 13. Monitoring field service rep in close proximity? | √ | |
|---|---|--|

14. What do like most about system?

User friendly, Advantages in obese patient and patient with poor respiratory compliance

15. What do you like least about this system?

Nothing

YES NO

| | | |
|---|---|--|
| 16. Would you recommend this system for DMH? | √ | |
|---|---|--|

Comments:

1 Very
Poor

2 Poor

3
Average

4 Good

5 Very
Good

Drager

Monitors:

| | | | | | |
|---|--|--|---|---|---|
| 1. Ease of Use? | | | | | 2 |
| 2. How effective is monitor with managing/responding to alarms? | | | 1 | | 1 |
| 3. Meets clinical requirements? | | | | 1 | 1 |
| 4. Overall Quality | | | | | 2 |

Remote Capabilities: Yes NO

| | | |
|--|---|--|
| 5. Confirmation of integration to CPSI? | √ | |
| Service: | | |
| 12. Sufficient warranty (5yrs requested)? | √ | |
| 13. Monitoring field service rep in close proximity? | √ | |

14. What do like most about system?

Company's reputation,
Durability, Ease of use, Heating
System

15. What do you like least about this system?

There are a couple of advanced
ventilation programs not on this
machine. Machine did not have
touch screen

YES

NO

| | | |
|---|---|--|
| 16. Would you recommend this system for DMH? | √ | |
|---|---|--|

Comments:

1 Very
Poor

2 Poor

3
Average

4 Good

5 Very
Good

GE Medical

Monitors:

| | | | | | |
|---|--|---|--|---|---|
| 1. Ease of Use? | | | | 1 | 1 |
| 2. How effective is monitor with managing/responding to alarms? | | | | 1 | 1 |
| 3. Meets clinical requirements? | | 1 | | | 1 |
| 4. Overall Quality | | 1 | | 1 | |

Remote Capabilities:

Yes

NO

| | | |
|--|---|--|
| 5. Confirmation of integration to CPSI? | √ | |
| Service: | | |
| 12. Sufficient warranty (5yrs requested)? | √ | |
| 13. Monitoring field service rep in close proximity? | √ | |

14. What do like most about system?

Reliability provides a variety of ventilation modes

15. What do you like least about this system?

Lots of plastic parts which are thin and fragile. Position of pressure gauge out of line of inside. Requires pulling section of machine open to calibrate O2 each day.

YES

NO

| | | |
|--|---|---|
| 16. Would you recommend this system for DMH? | √ | √ |
|--|---|---|

Comments:

This machine is not
appropriate for an OR it is an
Endoscopy Suite Ventilator

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

Board to review and approve U. S. Department of Transportation, Federal Aviation Administration (FAA), Airport Improvement Program, Sponsor Certifications as now required by FAA for all grants. The County has a pending FAA grant requesting funding assistance for the rehabilitation of the concrete apron at Perry- Foley Airport.

MEETING DATE REQUESTED:

July 21, 2015

Statement of Issue: Board to review and approve FAA Sponsor Certification Forms for the pending FAA grant in the amount of \$623,940.25 for the rehabilitation of the concrete apron at the Airport.

Recommended Action: Approve Sponsor Certifications

Fiscal Impact: The County has pending grant applications in the amount of \$623,940.25 with FAA and FDOT for Phase1 of the rehabilitation of the concrete apron at the Airport. The project will be 100% grant funded.

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

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The County has submitted grant application to FAA requesting funding assistance for Phase 1 of the rehabilitation of the concrete apron. FAA has approved the application but will not release a grant contract until the following Sponsor Certifications have been approved by the Board and submitted to FAA:

- Drug- Free Workplace
- Equipment/Construction Contracts
- Selection Of Consultants
- Project Plans And Specifications

**Attachments: Sponsor Certifications for: Drug-Free Workplace,
Equipment/Construction Contracts, Selection Of
Consultants, and Project Plans And Specifications**

**U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION
AIRPORT IMPROVEMENT PROGRAM
SPONSOR CERTIFICATION
DRUG-FREE WORKPLACE**

Taylor County

(Sponsor)

Perry Foley Airport

(Airport)

(Project Number)

Description of Work:

Concrete Apron Rehabilitation

Title 49, United States Code, section 47105(d), authorizes the Secretary to require certification from the sponsor that it will comply with the statutory and administrative requirements in carrying out a project under the Airport Improvement Program (AIP). General requirements on the drug-free workplace within Federal grant programs are described in Title 49, Code of Federal Regulations, Part 29. Sponsors are required to certify they will be, or will continue to provide, a drug-free workplace in accordance with the regulation. The AIP project grant agreement contains specific assurances on the Drug-Free Workplace Act of 1988.

Except for the certified items below marked not applicable (N/A), the list includes major requirements for this aspect of project implementation, although it is not comprehensive, nor does it relieve the sponsor from fully complying with all applicable statutory and administrative standards.

| | Yes | No | N/A |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. A statement has been (will be) published notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the sponsor's workplace, and specifying the actions to be taken against employees for violation of such prohibition. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. An ongoing drug-free awareness program has been (will be) established to inform employees about: | | | |
| a. The dangers of drug abuse in the workplace; | | | |
| b. The sponsor's policy of maintaining a drug-free workplace; | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Any available drug counseling, rehabilitation, and employee assistance programs; and | | | |
| d. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace. | | | |
| 3. Each employee to be engaged in the performance of the work has been (will be) given a copy of the statement required within item 1 above. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Employees have been (will be) notified in the statement required by item 1 above that, as a condition employment under the grant, the employee will: | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. Abide by the terms of the statement; and | | | |

| | Yes | No | N/A |
|---|-------------------------------------|--------------------------|--------------------------|
| b. Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction. | | | |
| 5. The FAA will be notified in writing within ten calendar days after receiving notice under item 4b above from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title of the employee, to the FAA. Notices shall include the project number of each affected grant. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. One of the following actions will be taken within 30 calendar days of receiving a notice under item 4b above with respect to any employee who is so convicted: | | | |
| a. Take appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Require such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency. | | | |
| 7. A good faith effort will be made to continue to maintain a drug-free workplace through implementation of items 1 through 6 above. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

I have prepared documentation attached hereto with site(s) for performance of work (street address, city, county, state, zip code). There are no such workplaces that are not identified in the attachment. I have prepared additional documentation for any above items marked "no" and attached it hereto. I certify that, for the project identified herein, responses to the forgoing items are accurate as marked and attachments are correct and complete.

Taylor County

(Name of Sponsor)

(Signature of Sponsor's Designated Official Representative)

Ms. Patricia Patterson

(Typed Name of Sponsor's Designated Official Representative)

BCC Chairperson

(Typed Title of Sponsor's Designated Official Representative)

(Date)

**U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION
AIRPORT IMPROVEMENT PROGRAM
SPONSOR CERTIFICATION
EQUIPMENT/CONSTRUCTION CONTRACTS**

Taylor County

(Sponsor)

Perry Foley Airport

(Airport)

(Project Number)

Description of Work:

Concrete Apron Rehabilitation

Title 49, United States Code (USC), section 47105(d), authorizes the Secretary to require certification from the sponsor that it will comply with the statutory and administrative requirements in carrying out a project under the Airport Improvement Program (AIP). General standards for equipment and construction contracts within Federal grant programs are described in Title 49, Code of Federal Regulations (CFR), Part 18.36. AIP standards are generally described in FAA Advisory Circular (AC) 150/5100-6, Labor Requirements for the Airport Improvement Program, AC 150/5100-15, Civil Rights Requirements for the Airport Improvement Program, and AC 150/5100-16, Airport Improvement Program Grant Assurance One--General Federal Requirements. Sponsors may use State and local procedures provided procurements conform to these Federal standards.

Except for the certified items below marked not applicable (N/A), the list includes major requirements for this aspect of project implementation, although it is not comprehensive, nor does it relieve the sponsor from fully complying with all applicable statutory and administrative standards.

| | Yes | No | N/A |
|---|-------------------------------------|--------------------------|--------------------------|
| 1. A code or standard of conduct is (will be) in effect governing the performance of the sponsor's officers, employees, or agents in soliciting and awarding procurement contracts. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Qualified personnel are (will be) engaged to perform contract administration, engineering supervision, construction inspection, and testing. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. The procurement was (will be) publicly advertised using the competitive sealed bid method of procurement. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. The bid solicitation clearly and accurately describes (will describe): | | | |
| a. The current Federal wage rate determination for all construction projects, and | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. All other requirements of the equipment and/or services to be provided. | | | |

| | Yes | No | N/A |
|---|-------------------------------------|--------------------------|--------------------------|
| 5. Concurrence was (will be) obtained from FAA prior to contract award under any of the following circumstances: | | | |
| a. Only one qualified person/firm submits a responsive bid, | | | |
| b. The contract is to be awarded to other than the lowest responsible bidder, | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Life cycle costing is a factor in selecting the lowest responsive bidder, or | | | |
| d. Proposed contract prices are more than 10 percent over the sponsor's cost estimate. | | | |
| 6. All contracts exceeding \$100,000 require (will require) the following provisions: | | | |
| a. A bid guarantee of 5 percent, a performance bond of 100 percent, and a payment bond of 100 percent; | | | |
| b. Conditions specifying administrative, contractual, and legal remedies, including contract termination, for those instances in which contractors violate or breach contract terms; and | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Compliance with applicable standards and requirements issued under Section 306 of the Clean Air Act (42 USC 1857(h)), Section 508 of the Clean Water Act (33 USC 1368), and Executive Order 11738. | | | |
| 7. All construction contracts contain (will contain) provisions for: | | | |
| a. Compliance with the Copeland "Anti-Kick Back" Act, and | | | |
| b. Preference given in the employment of labor (except in executive, administrative, and supervisory positions) to honorably discharged Vietnam era veterans and disabled veterans. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. All construction contracts exceeding \$2,000 contain (will contain) the following provisions: | | | |
| a. Compliance with the Davis-Bacon Act based on the current Federal wage rate determination; and | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Compliance with the Contract Work Hours and Safety Standards Act (40 USC 327-330), Sections 103 and 107. | | | |
| 9. All construction contracts exceeding \$10,000 contain (will contain) appropriate clauses from 41 CFR Part 60 for compliance with Executive Orders 11246 and 11375 on Equal Employment Opportunity. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. All contracts and subcontracts contain (will contain) clauses required from Title VI of the Civil Rights Act and 49 CFR 23 and 49 CFR 26 for Disadvantaged Business Enterprises. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | Yes | No | N/A |
|---|-------------------------------------|--------------------------|--------------------------|
| 11. Appropriate checks have been (will be) made to assure that contracts or subcontracts are not awarded to those individuals or firms suspended, debarred, or voluntarily excluded from doing business with any U.S. Department of Transportation (DOT) element and appearing on the DOT Unified List. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

I certify, for the project identified herein, responses to the forgoing items are accurate as marked and have prepared documentation attached hereto for any item marked "no" that is correct and complete.

Taylor County

(Name of Sponsor)

(Signature of Sponsor's Designated Official Representative)

Ms. Patricia Patterson

(Typed Name of Sponsor's Designated Official Representative)

BCC Chairperson

(Typed Title of Sponsor's Designated Official Representative)

(Date)

**U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION
AIRPORT IMPROVEMENT PROGRAM
SPONSOR CERTIFICATION
SELECTION OF CONSULTANTS**

Taylor County

(Sponsor)

Perry Foley Airport

(Airport)

(Project Number)

Description of Work:

Concrete Apron Rehabilitation

Title 49, United States Code, section 47105(d), authorizes the Secretary to require certification from the sponsor that it will comply with the statutory and administrative requirements in carrying out a project under the Airport Improvement Program (AIP). General standards for selection of consultant services within Federal grant programs are described in Title 49, Code of Federal Regulations (CFR), Part 18.36. Sponsors may use other qualifications-based procedures provided they are equivalent to specific standards in 49 CFR 18 and FAA Advisory Circular 150/5100-14, Architectural, Engineering, and Planning Consultant Services for Airport Grant Projects.

Except for the certified items below marked not applicable (N/A), the list includes major requirements for this aspect of project implementation, although it is not comprehensive, nor does it relieve the sponsor from fully complying with all applicable statutory and administrative standard.

| | Yes | No | N/A |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Solicitations were or will be made to ensure fair and open competition from a wide area of interest. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Consultants were or will be selected using competitive procedures based on qualifications, experience, and disadvantaged enterprise requirements with the fees determined through negotiations. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. A record of negotiations has been or will be prepared reflecting considerations involved in the establishment of fees, which are not significantly above the sponsor's independent cost estimate. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. If engineering or other services are to be performed by sponsor force account personnel, prior approval was or will be obtained from the FAA. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. The consultant services contracts clearly establish or will clearly establish the scope of work and delineate the division of responsibilities between all parties engaged in carrying out elements of the project. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Costs associated with work ineligible for AIP funding are or will be clearly identified and separated from eligible items in solicitations, contracts, and related project documents. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | Yes | No | N/A |
|---|-------------------------------------|--------------------------|--------------------------|
| 7. Mandatory contact provisions for grant-assisted contracts have been or will be included in consultant services contracts. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. The cost-plus-percentage-of-cost methods of contracting prohibited under Federal standards were not or will not be used. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. If the services being procured cover more than the single grant project referenced in this certification, the scope of work was or will be specifically described in the advertisement, and future work will not be initiated beyond five years. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

I certify, for the project identified herein, responses to the forgoing items are accurate as marked and have prepared documentation attached hereto for any item marked "no" that is correct and complete.

Taylor County

(Name of Sponsor)

(Signature of Sponsor's Designated Official Representative)

Ms. Patricia Patterson

(Typed Name of Sponsor's Designated Official Representative)

BCC Chairperson

(Typed Title of Sponsor's Designated Official Representative)

(Date)

**U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION
AIRPORT IMPROVEMENT PROGRAM
SPONSOR CERTIFICATION
PROJECT PLANS AND SPECIFICATIONS**

Taylor County

Perry Foley Airport

(Sponsor)

(Airport)

(Project Number)

Description of Work:

Concrete Apron Rehabilitation

Title 49, United States Code, section 47105(d), authorizes the Secretary to require certification from the sponsor that it will comply with the statutory and administrative requirements in carrying out a project under the Airport Improvement Program (AIP). AIP standards are generally described in FAA Advisory Circular (AC) 150/5100-6, Labor Requirements for the Airport Improvement Program, AC 150/5100-15, Civil Rights Requirements for the Airport Improvement Program, and AC 150/5100-16, Airport Improvement Program Grant Assurance One--General Federal Requirements. A list of current advisory circulars with specific standards for design or construction of airports as well as procurement/installation of equipment and facilities is referenced in standard airport sponsor Grant Assurance 34 contained in the grant agreement.

Except for the certified items below marked not applicable (N/A), the list includes major requirements for this aspect of project implementation, although it is not comprehensive, nor does it relieve the sponsor from fully complying with all applicable statutory and administrative standards.

| | Yes | No | N/A |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. The plans and specifications were (will be) prepared in accordance with applicable Federal standards and requirements, so no deviation or modification to standards set forth in the advisory circulars, or State standard, is necessary other than those previously approved by the FAA. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Specifications for the procurement of equipment are not (will not be) proprietary or written so as to restrict competition. At least two manufacturers can meet the specification. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. The development included (to be included) in the plans is depicted on the airport layout plan approved by the FAA. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Development that is ineligible for AIP funding has been (will be) omitted from the plans and specifications. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. The process control and acceptance tests required for the project by standards contained in Advisory Circular 150/5370-10 are (will be) included in the project specifications. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. If a value engineering clause is incorporated into the contract, concurrence was (will be) obtained from the FAA. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. The plans and specifications incorporate (will incorporate) applicable requirements and recommendations set forth in the Federally approved environmental finding. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

- | | Yes | No | N/A |
|--|-------------------------------------|--------------------------|--------------------------|
| 8. For construction activities within or near aircraft operational areas, the requirements contained in Advisory Circular 150/5370-2 have been (will be) discussed with the FAA as well as incorporated into the specifications, and a safety/phasing plan has FAA's concurrence, if required. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. The project was (will be) physically completed without Federal participation in costs due to errors and omissions in the plans and specifications that were foreseeable at the time of project design. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

I certify, for the project identified herein, responses to the forgoing items are accurate as marked and have prepared documentation attached hereto for any item marked "no" that is correct and complete.

Taylor County

(Name of Sponsor)

(Signature of Sponsor's Designated Official Representative)

Ms. Patricia Patterson

(Typed Name of Sponsor's Designated Official Representative)

BCC Chairperson

(Typed Title of Sponsor's Designated Official Representative)

(Date)

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TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

Requesting Board approval of the Letter of Submittal, Acknowledgement Statement, and Drug Free Workplace Certification required for submission of the Residential Construction Mitigation Program (RCMP) grant application.

MEETING DATE REQUESTED:

July 21, 2015

Statement of Issue: The County is submitting grant application to the RCMP program requesting housing rehabilitation funding which can be used to "strengthen" and improve resiliency of residential structures from hurricanes and severe weather events. These funds can be used separately or in conjunction with CDBG and SHIP funds.

Recommended Action: Board to approve documents required for the RCMP grant submission.

Fiscal Impact: The County will be submitting grant application requesting funding assistance in the amount of \$194,000. A match is not required.

Budgeted Expense: Y/N Not Applicable

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: As Government Services Group (GSG) provides SHIP grant administration and inspection services to the County, Jay Moseley with GSG assisted the County in preparing the grant application due to the tight timelines and the detail required in the application. Should the County be awarded funds through this program, we would be able to provide a considerable amount of additional housing rehabilitation assistance to our citizens.

Attachments: Letter of Submittal, Acknowledgement Statement, and Drug Free Workplace Certification



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

DUSTIN HINKEL, 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) 584-6113 Phone
(850) 584-2433 Fax

July 21, 2015

RFP-DEM-14-15-043 Mitigation Retrofit Program
Florida Division of Emergency Management
Ms. Tara Walters
2555 Shumard Oak Blvd.
Tallahassee, FL 32399-2100

Re: Technical Proposal Number RFP-DEM-14-15-043 Hurricane Loss Mitigation
Program – Mitigation Retrofit Improvements

Dear Ms. Walters:

Taylor County Board of Commissioners (BOCC) FEID #59-6000879 is pleased to submit an original, three copies, and one CD of the technical proposal pursuant to RFP #: RFP-DEM-14-15-043 Mitigation Retrofit Improvement Program. Taylor County BOCC will fund selected single family homes in incorporated Taylor County for wind mitigation retrofit improvements. Based on the wind mitigation inspection, the County shall identify residential structures for possible wind mitigation retrofit improvements and the type of wind mitigation measures proposed.

The Taylor County Board of County Commissioners agrees to the following assurances: (1) only those entries identified in the application are involved in the proposed project, (2) the signer and point of contact has full authority to bind the applicant and all other involved parties.

If you have any questions, please do not hesitate to contact our Grants Director Melody Cox at 850-838-3553 or via email at melody.cox@taylorcountygov.com.

I respectfully ask for your favorable consideration and appreciate the opportunity to submit this technical proposal.

Sincerely,

Patricia Patterson
Chairman

EXHIBIT "B"
ACKNOWLEDGEMENT
RFP-DEM-14-15-043
HURRICANE LOSS MITIGATION PROGRAM
Residential Construction Mitigation Program (RCMP)

ACKNOWLEDGEMENT: I certify that I have read and agree to abide by all terms and conditions of this solicitation and that I am authorized to sign for the proposer. I certify that the response submitted is made in conformance with all requirements of the solicitation.

Proposer: Taylor County FEID #: 59-6000879

Address: 201 E. Green St.

City: Perry State: Florida

Zip Code: 32347

Telephone Number: 850-838-3500 E-Mail Address: melody.cox@taylorcountygov.com

Authorized Signature: _____ Date: _____

Printed / Typed: Patricia Patterson Title: Chair

NOTE: In submitting a response, the proposer acknowledges they have read and agree to the solicitation terms and conditions and their submission is made in conformance with those terms and conditions.

EXHIBIT "D"

CERTIFICATION OF DRUG-FREE WORKPLACE

IDENTICAL TIE BIDS - Preference shall be given to businesses with drug-free workplace programs. Whenever two or more proposals are received from respondents which are both certified minority businesses (as set forth above), and which are equal with respect to price, quality and service, the proposal received from a business that certifies that it has implemented a drug-free workplace program shall be given preference in the award process. Established procedures for processing tie bids will be followed if none of the tied vendors have a drug-free workplace program. In order to have a drug-free workplace program, a business shall:

- A. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
- B. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
- C. Give each employee engaged in providing the commodities or contractual services that are under bid a copy of the statement specified in subsection A.
- D. In the statement specified in subsection A, notify the employees that as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893, F.S., or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
- E. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
- F. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

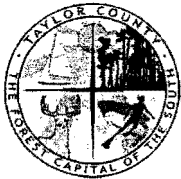
As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

VENDORS SIGNATURE

DATE

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

Board to consider bid committee recommendation for 3rd Floor Courtroom Audio System Upgrade

MEETING DATE REQUESTED:

July 21, 2015

Statement of Issue: Bid Committee recommendation

Recommendation: Approve bid from MusicMasters

Fiscal Impact: \$24,490

Budgeted Expense: Yes ☒ No ☐ N/A ☐

Submitted By: Danny Griner

Contact: building.director@taylorcountygov.com

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: Facilities Maintenance staff was instructed to pursue bids for improvements to the existing and outdated audio system located in the 3rd floor courtroom. Staff prepared bid specifications and the County Commission approved them during the June 1, 2015 meeting. The request for proposals was advertised twice in the local paper and mailed to 4 contractors. The board received one bid during the July 6, 2015 meeting and the bid was from MusicMasters out of Tallahassee.

The Bid Committee met and agreed to recommend that the Board approve the \$24,490.00 bid received from MusicMasters and signing of the contract for the project.

- Options:**
1. Accept the bid.
 2. Choose not to pursue the project

- Attachments:**
1. Bid Committee minutes
 2. Copy of draft contract



TAYLOR COUNTY BUILDING & PLANNING DEPARTMENT

MEMORANDUM

TO: Board of County Commissioners
FROM: Bid Committee
RE: 3rd Floor Courtroom Audio System Upgrade bid
DATE: July 8, 2015

The bid committee for the 3rd Floor Courtroom Audio System Upgrade, consisting of Gary Wambolt, Steve Spradley and Danny Griner met on July 8, 2015 to discuss the bid result for the bid that was received by the Board on July 6, 2015. The amount of the sole bid received was as follows:

| COMPANY | TOTAL PRICE |
|---|-------------|
| Main Street Music Incorporated d/b/a MusicMasters | \$24,490.00 |

The Bid Committee noted that the bid package for MusicMasters was complete and included the required liability and workers compensation insurance. The Committee further noted that the packet included the required prior related experience, work history and Public Entity Crimes Statement.

The Bid Committee unanimously recommends that the Board of County Commissioners accept the bid from MusicMasters in the amount of \$24,490.00 and approve the signing of the contract to proceed with the project.

Handwritten signature of Gary Wambolt.

Gary Wambolt

Handwritten signature of Steve Spradley.

Steve Spradley

Handwritten signature of Danny Griner.

Danny Griner

CONTRACT FORM

This contract made the ____th day of July, 2015 between, **TAYLOR COUNTY**, hereinafter called the **COUNTY**, and **MAIN STREET MUSIC INCORPORATED**, d/b/a **MUSICMASTERS**, hereinafter called the **CONTRACTOR**.

WITNESSETH, that the County and the Contractor for the consideration stated herein agree as follows:

1. **SCOPE OF WORK.** The Contractor shall perform all tasks required to be performed and shall provide and furnish all the labor, necessary tools, expendable equipment and all utility and transportation services required to perform and complete in a workmanlike manner all the work required in connection with the **COURTROOM AUDIO SYSTEM UPGRADE**. The Contractor agrees to provide and install all materials in association with the Courtroom Audio System Upgrade in accordance with the bid specifications for the project and clean up and legally dispose of all associated trash and debris. The following is a general description of the project elements:

SCOPE OF WORK:

Contractor shall be responsible for providing all audio equipment as described. This includes all labor, materials, equipment, tools, transportation, and project management required for a complete and fully operational system.

Contractor is responsible for removal of existing speakers and audio equipment, and installation of the new audio system and related items. Owner will retain ownership of existing equipment, and or provide for disposal of the equipment.

Owner will supply one 20 Amp dedicated circuit for the sound system at the sound system equipment rack location.

Contractor will provide single-line schematic drawings of the sound system being provided and installed. Included will be interconnection to the court recording system, and any other peripheral equipment required to complete the audio system.

Contractor may proceed with work when drawings have been approved.

Contractor is responsible for supplying a complete and fully operational audio system as specified in the bid document, and any subsequent addendums.

Contractor shall field verify all work site conditions prior to submitting shop drawings.

All equipment, except OFE, shall be new, latest version at the time of bid, and shall conform to applicable UL, CSA, or ANSI provisions.

SUBMITTALS

Contractor will provide one set of shop drawings, complete with product data on all equipment within thirty (30) calendar days of date shown on award notice to contractor.

CLOSEOUT SUBMITTAL

Upon completion of the installation contractor will provide two complete sets of "as built" drawings referencing equipment locations, rack layouts, all related patch points, interconnect, and related information. A complete set of manufacturer's equipment documentation, owner manuals, all data discs, all product related information, organized in a three ring binder of sufficient size. Also provide an electronic copy (PDF). Drawings should include serial numbers model numbers, and related information specific to the hardware. Copies of all programming code related to the courtroom control system and audio processor.

GENERAL SPECIFICATIONS

1. All cabling is to be labeled at each end with simple description of cable function.
2. All equipment shall be new, latest version, excluding "B" stock equipment. Damaged equipment will be rejected by the owner, and will be replaced without additional cost to the Owner.
3. Rack cabling will be installed in a neat, secure, and organized manner using standard practice wiring methods.

QUALITY ASSURANCE

Quality standards apply based on NEC, NEMA, ANSI, OSHA, UL, FCC, NCTA and EIA.

WARRANTY / SERVICE

Contractor shall warrant labor, travel, equipment, and materials for twelve (12) months following the date of final completion acceptance.

Contractor will provide technical support during normal business hours, 8am to 5pm, Monday through Friday. In the event an issue cannot be resolved via phone technical support then on-site support will be provided within four hours, or when the Owner requests based on the courtroom schedule, to resolve the issue and return the system to functionality.

SYSTEM OVERVIEW

Sound reinforcement system to provide mix minus audio for the Judge, Well, Defense, Prosecution, Jury, and Witness. Each zone will be individually powered and processed, as well as time aligned to the specific microphone location in the room, in order to create a high level of intelligibility in a manner which sounds minimally amplified at each location. The final result will yield a conversational environment where everyone participating in the court proceedings can easily communicate in a comfortable listening environment, where the sound system essentially disappears into the sound field.

COURTROOM EQUIPMENT SPECIFICATION

Equipment as specified, no substitutions

AUDIO PROCESSING

One Media Matrix Nion NE Audio processor
One Media Matrix NIO-AEC echo cancellation card
One Media Matrix NIO-4x4 input / output card
One Media Matrix NIO-8O output card

AMPLIFICATION

One BiAmp MCA8050 8 channel 50 watt per channel amplifier
Six TDT50 Transformers for 70V zone application

MICROPHONES

Two Shure MX202W/C microphones to be suspended over the Jury
Existing microphones will be used for the rest of the locations

SPEAKERS

Eighteen Community CL4P coaxial 4" ceiling speakers to be distributed as follows:
Zone 1 Judge (1), Zone 2 Witness (1), Zone 3 Jury (2), Zone 4 Defense (1), Zone 5 Prosecution (1)
Zone 6 Public Seating (8) Zone 7 Side staff table seating area (4)

AUDIO RACK

Lowell Floor rack model LBR 24-22, with fully vented door LFD24-FV
Necessary lacing bars and wire management devices to provide a clean and organized rack
Court Technology Recording Equipment (OFE) may also be installed in the rack (to be coordinated with Court Technology Officer)
ONE APC 1500 watt rack mount UPS model UPS X 1500VA rack/tower LCD

CABLE / CONNECTORS

Microphone wire will be West Penn 291

Line Level wire will be West Penn 292
Speaker cable will be West Penn 16 Ga. 225,
Plenum Cable Where required by code
All connectors will be Switchcraft or Neutric solder on connectors
Custom surface mount input connections for the attorney tables to accommodate one
Microphone input and one network output (future)

TELEPHONE INTERFACE

One J.K. Audio InnKeeper1-RX to provide telephone conference interface to the Owner supplied phone system. Owner will provide POTS line for the phone conference.

CONTROL SYSTEM

One Crestron CP3N Control system processor
One Crestron TSW-1050 Touch Panel (Clerk Location)
One Crestron TSW-750 (Judge's bench)
Table top mounts for both touch panels

PROGRAMMING

Provide all programming required to provide an operator free auto mix sound system. Utilize mix-minus technique for each zone. Delay microphones to the various speaker zones so that the amplified sound remains in time with the acoustic sound. For example, the jury mics should be individually time aligned to the Judge speaker, the attorney's speakers, etc. The Judge microphone should be time aligned to the Jury speakers, to the public seating area, the Jury, to the attorney speakers, etc. This requires a significant amount of programming with multiple mix matrixes and delay processors splitting and combining within the DSP. Each microphone should be time aligned individually to each unique destination.

Provide a completely independent record mix environment within the DSP for the Court Recording. Provide a four channel breakout Mix A,B,C,D, with microphones grouped as specified by the Court Technology Officer. Provide a summed mix E as specified by the Court Technology Officer (CTO). Coordinate with the CTO and verify all record mixes and levels are to their satisfaction for level, quality, and all other elements. The court recording mixes must be completely independent of the courtroom mixes and must not be affected by turning up and down microphone levels in the courtroom, or by muting the microphones in the courtroom.

The court recording will be activated and deactivated by the Judge, or Clerk, from either of the two touch panels. When the recording is activated the owner supplied recording light will be turned on via the control system. When recording is ended, the recording light will be turned off via the control system. When the recording is activated, the outputs of the audio processor will be unmuted and begin sending audio to the court recording system. When recording is stopped, the outputs will be muted and cease sending audio to the court recording system. These mutes are separate and independent of the microphones in the courtroom.

Sidebar will provide white noise to be played in the courtroom speakers, will mute all microphones with exception to the Judge's microphone and the sidebar microphone (OFE), and

will mute the level of all microphones into the amplification system for confidentiality. The recording will be uninterrupted, as well as the recording being sent to the court reporter location, should they be using a court reporter.

The court reporter location will receive the "sum" mix E, and will activate and deactivate with the control system parallel to the "blue man" activation. Court reporter feed will be made compatible with the existing equipment, properly balanced or unbalanced, whatever is required to provide a noise free, hum free, clean recording to the court reporter equipment (OFE).

The Judge Crestron touch panel will only provide the controls necessary for the judge to begin the recording, go to sidebar, leave sidebar, and end recording, unless otherwise requested by the Judge and the Court.

The Clerk touch panel will provide a full complement of audio controls, individual microphone up/down, on/off, recording controls as previously described, phone conference activation, deactivation, translation on/off, and other functions that may be presented by the court, room reset, and additional features that may be required.

The programming element of this system requires the programmer to be flexible in the design of the GUI in order to provide a finished product that is logical, simple to operate, and meets the needs of the individuals operating the system. The CTO will provide recommendations to the needs of the court, and will ultimately have the final approval of the design and function of the system.

Throughout the one year system warranty service period programming modifications will be provided without charge to the Owner, including travel and related costs, to insure the Owner receives a system that functions in the manner with which it is intended.

During the installation, the Owner may have additional equipment that requires integration, such as displays for the translation system, translation codec, or other related equipment. This programming and integration will be provided at no additional cost.

SUMMARY OF SYSTEM

The Contractor will be expected to provide a professional quality installation of all the equipment, integration of existing and new equipment, and develop and deploy a logical and simple user interface to facilitate the use of the system by NON TECHNICAL OPERATORS. The success of the system will depend greatly on the ability to understand what is needed in the day to day operations of the courtroom, and the individuals within the judicial system that operate the equipment.

Staff: the Contractor shall employ sufficient staff to complete the aforementioned tasks and such employees will be easily identifiable through some type of recognizable means, (i.e. uniforms designating a corporate logo and employee name or a photo identification badge with a signature of a corporate principle.)

2. **THE CONTRACT PRICE.** The County shall pay to the Contractor for the performance of this contract, subject to any additions or deductions provided therein, in current funds, the sum of \$ 24,490 and will be paid in increments consistent with the project element categories contained in the scope of work. Unforeseen repairs and/or change orders, if needed, will require processing of a Purchase Order agreed upon by the Contractor and the County.

3. **DURATION OF CONTRACT.** The Contract shall take effect upon final execution and terminate six (6) months from that date. This contract shall not be extended for more than three (3) months, unless otherwise agreed in writing.

4. **ASSIGNMENTS.** This contract shall not be subletted, transferred, assigned or otherwise conveyed by the Contractor without prior written approval of the County.

5. **TERMINATION OF CONTRACT.** The County reserves the right to terminate or suspend the contract in whole or in part at any time the interest of the County requires such termination or suspension. The County shall notify the Contractor in writing of such action with instructions as to the effective date of termination or suspension or specify the stage of work at which the action is to be taken. The Contractor will be paid for all work satisfactorily performed and any reasonable termination expenses that can be documented. Work performed payment will be based on proposal item prices, which include or should have included profit and overhead. No profit or overhead will be allowed for work not performed.

If the County determines that the performance of the Contractor is not satisfactory, the County shall have the option of: (a) immediately terminating the contract, or (b) notifying the Contractor of the deficiency with a requirement that the deficiency be corrected within a specified time. Failure to correct such deficiencies in the specified time will result in the Contractor being declared in default and the contract may be terminated.

If the contract is terminated for cause before performance is completed, the Contractor shall be paid for the work units satisfactorily accomplished and accepted at the contract unit price.

6. DEFAULT OF CONTRACT. If the Contractor fails to begin the work under the Contract within the time specified in the "Notice to Proceed", or fails to perform the work with sufficient workmen and equipment or with sufficient materials to assure the prompt completion of the contract, or performs the work unsuitably or neglects or refuses to remove materials or discontinues the prosecution of work, or fails to resume work which has been discontinued within a reasonable time after notice to do so, or becomes insolvent or is declared bankrupt, or files for reorganization under the bankruptcy code, or commits any act of bankruptcy or insolvency, either voluntarily for a period of ten calendar days, or makes an assignment for the benefit of creditors, or fails to comply with contract requirements, minimum wage payments or EEO requirements, or for any reasonable cause becomes unsatisfactory in the opinion of the County, the County will give notice in writing to the Contractor or his surety of such delay, neglect, or default.

If the Contractor, within a period of ten calendar days after the notice described above, shall not proceed to correct the conditions of which complaint is made, the County shall, have full power or authority, without violating the contract, to take the prosecution of the work out of the hands of the Contractor and to declare the contract in default.

7. PRESERVATION OF PROPERTY. The Contractor shall preserve from damage all property associated with, or which is in the vicinity of, or is in any way affected by the work. This applies to public and private property and/or utilities.

Any damage occurring to such properties shall be immediately repaired at the expense of the Contractor.

8. **HOLD HARMLESS AND INSURANCE.** To the extent allowed by law, the Contractor shall indemnify, defend and save and hold harmless, the County, all of its officers, agents or employees from all suits, actions, claims, demands, liabilities of any nature whatsoever arising out of, because of, or due to breach of this agreement by the Contractor, its sub-contractors, agents or employees or due to any negligent act or occurrence of omission or commission of the Contractor, its subcontractors, agents, or employees. Neither Contractor nor any of its subcontractors will be liable under this section for damages arising out of injury or damage to persons or property directly caused or resulting from the sole negligence of the County or any of its officers, agents or employees.

9. **GENERAL LIABILITY INSURANCE.** The Contractor shall maintain general liability insurance of at least \$1,000,000.00 per person and property damage insurance of at least \$50,000.00 each occurrence, holding the County harmless for the contractor's negligence, and list the County as additionally insured under the contractor's coverage.

Certificates of such insurance shall be filed with the County prior to beginning work under this contract and shall be subject to approval for adequacy of protection.

10. **WORKER'S COMPENSATION INSURANCE.** The Contractor shall provide Worker's Compensation Insurance in accordance with the laws of the State of Florida and in amounts sufficient to secure the benefits of the Florida Worker's Compensation Law for all of its employees. Workers Compensation exemptions will be accepted upon providing a current certificate, Articles of Incorporation, and a signed Taylor County Workers Compensation Hold Harmless Agreement. The Contractor shall insure that the employees of a subcontractor are covered by similar insurance.

11. **PERMITS, RULES & REGULATIONS.** It shall be the Contractor's responsibility to secure all permits necessary to conduct the work in accordance with required regulations and to notify all applicable utilities or parties affected by the Contractor's operations. The Contractor shall further be responsible for all fees associated with the performance of this contract. The Contractor agrees to abide by all applicable State and Federal Laws, rules and regulations.

12. **WARRANTY.** The Contractor agrees to guarantee work and materials against defects in workmanship and material for one (1) year from the date of project completion and will repair or replace such products or components found defective.

13. **ACCESS TO RECORDS.** The Contractor agrees to provide access to those records, books and documents that pertain to this project during the project period and for a three (3) year period thereafter.

14. **COMPONENT PARTS OF THIS CONTRACT.** This contract consists of the following component parts, all of which are as fully a part of this contract as if herein set out verbatim or, if not attached, as if hereto attached.

(a) The Contractors proposal

(b) This Instrument

In the event that any provision in any of the above component parts of this contract conflicts with any provision in any other of the component parts, the provision in the component list enumerated above shall govern over any other component part which follows it numerically, except as may be otherwise specifically stated.

15. **AUTHORIZED PERSONNEL.** The Contractor is to contact the following for any correspondence or questions regarding this project: Taylor County Facilities Maintenance Department, 201 East Green Street, Perry, Florida 32347, telephone number (850) 838-3500, Ext. 1.

16. **LITIGATION.** If any litigation arises out of this Contract, venue of all such cases shall be Taylor County, Florida, and the prevailing party is entitled to a reasonable attorney fee and costs.

In WITNESS WHEREOF, the parties hereto have caused this instrument, as of the _____ day of _____, 2015.

WITNESSES:

TAYLOR COUNTY

Patricia Patterson
Chairperson

ATTEST: _____
ANNIE MAE MURPHY

WITNESSES:

CONTRACTOR

Main Street Music Incorporated
d/b/a MusicMasters

STATE OF FLORIDA
COUNTY OF TAYLOR

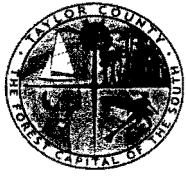
The foregoing instrument was acknowledged before me this _____ day of _____, 2015, _____, who is personally known to me and who did not take an oath.

NOTARY PUBLIC
My Commission Expires: _____

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO REVIEW AND DISCUSS AN INVOICE RECEIVED FROM THE STEINHATCHEE PROJECTS BOARD FOR GROUNDS MAINTENANCE AT THE STEINHATCHEE COMMUNITY CENTER, AS AGENDAED BY THE COUNTY ADMINISTRATOR

MEETING DATE REQUESTED:

JULY 21, 2015

Statement of Issue:

THE PROJECTS BOARD IS REQUESTING A MONTHLY INCREASE OF \$200 FOR THE REMAINING FISCAL YEAR

Recommended Action:

REVIEW AND DISCUSS

Fiscal Impact:

\$1,900

Budgeted Expense:

ORIGINALLY BUDGETED FOR \$275/MONTH

Submitted By:

DUSTIN HINKEL

Contact:

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: THE STEINHATCHEE PROJECTS BOARD HAS BEEN CARING FOR THE GROUNDS OF THE STEINHATCHEE COMMUNITY CENTER FOR MANY YEARS. THE CURRENT BUDGET WILL NOT SUPPORT THIS INCREASE AND A TRANSFER AND BUDGET ADJUSTMENT WILL BE NECESSARY.

Options:

**APPROVE PAYMENT AND TRANSFER FROM RESERVES
DISAPPROVE**

Attachments:

JUNE 2015 INVOICE



**STEINHATCHEE COMMUNITY PROJECTS BOARD
PO BOX 736
STEINHATCHEE, FL 32359**

INVOICE # 06-15-40

**DATE: 06/22/2015
TO: TAYLOR COUNTY
Danny Griner
201 E. Green Street
Perry, FL 32348**

Invoice for Lawn Maintenance – June.....\$475.00

Total Due.....\$475.00

Effective 6/1/15 the cost of Grounds Maintenance at the Steinhatchee Community Center increased by \$200.00 per month.

Per Mr. Hunt, Chairman of the Board, I am including this amount in the June invoice for reimbursement. There should be sufficient funds to cover this for the remainder of this budget year. Please contact Mr. Hunt with any questions.

**Thank you,
Liana Chapman**