

SUGGESTED AGENDA

TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS
PERRY, FLORIDA
REGULAR BOARD MEETING
TUESDAY, AUGUST 16, 2016
6:00 P.M.
201 E. GREEN STREET
TAYLOR COUNTY ADMINISTRATIVE COMPLEX
OLD POST OFFICE

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

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

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

BIDS/PUBLIC HEARINGS:

4. THE BOARD TO HOLD A PUBLIC HEARING, SET FOR THIS DATE AT 6:00 P.M., OR AS SOON THEREAFTER AS POSSIBLE, ON THE PASSAGE OF A PROPOSED ORDINANCE TO AMEND CHAPTER 70, SECTION 70-3 - LOCAL OPTION GAS TAX.

CONSENT ITEMS:

5. APPROVAL OF MINUTES FROM 7/5/16, 7/19/16, 7/26/16, AND 8/1/16.
6. EXAMINATION AND APPROVAL OF INVOICES.

7. THE BOARD TO APPROVE THE APPLICATION FOR FUNDING ASSISTANCE AND THE EQUAL EMPLOYMENT OPPORTUNITY PLAN (EEOP) CERTIFICATION FORM FOR THE 2016-2017 FLORIDA DEPARTMENT OF LAW ENFORCEMENT (FDLE) EDWARD BYRNE MEMORIAL JUSTICE ASSISTANCE GRANT (JAG) PROGRAM, AS AGENDAED BY MELODY COX, GRANTS DIRECTOR.
8. THE BOARD TO APPROVE A TRANSFER FROM CONTINGENCY TO THE SOCIAL SERVICES ACCOUNT WHICH FUNDS FEES CHARGED BY THE MEDICAL EXAMINER AND FOR FEES ASSOCIATED WITH THE INVESTIGATION OF CHILD ABUSE CASES, AS AGENDAED BY DUSTIN HINKEL, COUNTY ADMINISTRATOR.
9. THE BOARD TO APPROVE A TRANSFER FROM CONTINGENCY FOR HEALTH INSURANCE IN THE COUNTY ADMINISTRATOR'S BUDGET, AS AGENDAED BY THE COUNTY ADMINISTRATOR.
10. THE BOARD TO APPROVE A REQUEST TO REMOVE COUNTY ASSETS, AS AGENDAED BY GARY KNOWLES, DEPUTY CLERK.
11. THE BOARD TO CONSIDER APPROVAL OF AN AGREEMENT WITH PREBLE-RISH (ENGINEERS) TO TRANSFER ASSIGNMENT OF TWO ON-GOING PROJECTS TO NEWLY FORMED DEWBERRY/PREBLE-RISH, AS AGENDAED BY THE COUNTY ADMINISTRATOR.
12. THE BOARD TO APPROVE A REQUEST TO REMOVE COUNTY ASSETS THAT ARE UNDER THE PURCHASING THRESHOLD OF \$1000 FROM COUNTY INVENTORY, AS AGENDAED BY THERESA COPELAND, DTIS DIRECTOR.
13. THE BOARD TO APPROVE A MEMORANDUM OF UNDERSTANDING BETWEEN THE FLORIDA DIVISION OF EMERGENCY MANAGEMENT AND THE TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS, AS AGENDAED BY STEVE SPRADLEY, EMERGENCY MANAGEMENT DIRECTOR.

CONSTITUTIONAL OFFICERS/OTHER GOVERNMENTAL UNITS:

14. THE BOARD TO APPOINT THE CHAIRMAN OF THE 2016 VALUE ADJUSTMENT BOARD (VAB) FROM REGULAR MEMBERS APPOINTED BY THE BOARD ON AUGUST 2, 2016 (PAM FEAGLE AND JIM MOODY), AS AGENDAED BY THE CLERK.

COUNTY ADMINISTRATOR ITEMS:

15. THE COUNTY ADMINISTRATOR TO DISCUSS INFORMATIONAL ITEMS.

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 COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO HOLD A PUBLIC HEARING SET FOR 6:00 P.M., OR AS SOON THEREAFTER AS POSSIBLE, ON THE PASSAGE OF A PROPOSED ORDINANCE TO AMEND CHAPTER 70, SECTION 70-3 – LOCAL OPTION GAS TAX.

MEETING DATE REQUESTED:

AUGUST 16, 2016

Statement of Issue: THIS LOCAL OPTION GAS TAX REQUIRES AN INTERLOCAL FROM THE CITY OF PERRY. SUCH INTERLOCAL HAS BEEN SIGNED AND THE ORDINANCE IS READY FOR PUBLIC HEARING AND ACTION.

Recommended Action: APPROVE THE ORDINANCE

Fiscal Impact: REVENUE TO THE COUNTY

Budgeted Expense: YES, SUCH REVENUES ARE INCORPORATED INTO THE BUDGET

Submitted By: COUNTY ADMINISTRATOR 850-838-3500 X 7

Contact:

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: On June 6, 2016, the Board tasked the County Attorney to draft a new ordinance to replace the expiring ordinance 2011-12 which imposes a six cent local option fuel tax on gasoline and diesel fuel. That ordinance expires December 31, 2016. The Board is responsible to notify the Florida Department of Revenue of its intent to let the original ordinance expire or extend the ordinance by drafting a new ordinance, as well as obtaining a new interlocal agreement with the City of Perry.

Options:

Attachments:



Florida Department of Revenue
Revenue Accounting
Post Office Box 6609
Tallahassee, Florida 32314-6609

April 22, 2016

Taylor County BOCC
Daryll Gunter, Chairperson
201 East Green Street
Perry, FL 32347

Dear Chairperson,

After a recent review of our files, we found that Taylor County's Ordinance number 2011-12 **expires on December 31, 2016**. Ordinance number 2011-12 imposes the six cents local option fuel tax on every gallon of gasoline and diesel fuel sold in the county.

It is necessary to notify the Florida Department of Revenue, in writing, of the county's intent to let this ordinance expire or extend it at the current rate. If the Commission plans to extend the tax, it is recommended a new ordinance is adopted by October 1, 2016. This new ordinance should reflect an effective date of January 1, 2017 and an expiration date of December 31st. In addition, the county is expected to provide the Florida Department of Revenue with a determination of the method of distribution as required by Chapter 336.025, Florida Statutes.

If you have any questions about this matter, please feel free to contact me at (850) 717-6784.

Sincerely,

Amy A. Barrow
Sr Management Analyst
Revenue Accounting

Margaret Dunn

From: Dustin Hinkel
Sent: Friday, July 29, 2016 9:38 AM
To: Cindy Mock
Cc: CONRAD BISHOP (lawbishop@gtcom.net); Margaret Dunn
Subject: FW: Gas Tax Ordinance
Attachments: SKMBT_C28016060715120.pdf

Hey Cindy,

I have received the signed interlocal from the city. Could you please advertise this ordinance for the nearest available date?

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!](#)

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: The Bishop Law Firm [mailto:lawbishop@fairpoint.net]
Sent: Tuesday, June 07, 2016 3:51 PM
To: Dustin Hinkel <dustin.hinkel@taylorcountygov.com>; 'Cindy Mock' <cmock@taylorclerk.com>
Subject: Gas Tax Ordinance

NOTICE (PURSUANT TO FLORIDA
STATUTE 125.66)

Notice is hereby given that the Board of County Commissioners of Taylor County, Florida will hold a Public Hearing on the passage of a proposed Ordinance to amend Chapter 70, Section 70-3 – Local Option Gas Tax. The Public Hearing shall be held at the Board of County Commissioner's Meeting Room, Taylor County Courthouse Annex, Old Post Office Building in Perry, Florida, at the regular Board meeting on TUESDAY, AUGUST 16, 2016, at 6:00 P.M. The title of the proposed Ordinance is:

**AN ORDINANCE OF TAYLOR COUNTY, FLORIDA,
AMENDING CHAPTER 70, SECTION 70-3 – LOCAL
OPTION GAS TAX – OF THE TAYLOR COUNTY
CODE OF ORDINANCES PROVIDING FOR AN
EXTENSION OF THE SIX (6) CENT LOCAL OPTION
GAS TAX UPON EVERY GALLON OF MOTOR FUEL
AND DIESEL FUEL SOLD IN TAYLOR COUNTY AND
TAXES UNDER THE PROVISIONS OF CHAPTER
206, FLORIDA STATUTES; PROVIDING THAT THE
EXTENSION SHALL BE EFFECTIVE FOR A PERIOD
OF FIVE (5) YEARS BEGINNING JANUARY 1, 2017
AND ENDING DECEMBER 31, 2021 PROVIDING FOR
DISTRIBUTION BETWEEN THE COUNTY
GOVERNMENT AND THE CITY OF PERRY IN
ACCORDANCE WITH AN INTERLOCAL
AGREEMENT; PROVIDING FOR RECISSION;
PROVIDING FOR INCLUSION IN THE CODE;
PROVIDING FOR NEGOTIATIONS BETWEEN
TAYLOR COUNTY AND THE CITY OF PERRY,
PROVIDING FOR SEVERABILITY AND PROVIDING
FOR AN EFFECTIVE DATE.**

The proposed Ordinance may be inspected by the public at the office of the Clerk of Court located at the Taylor County Courthouse, Perry, Taylor County, Florida.

All members of the public are welcome to attend. Notice is further hereby given, pursuant to Florida Statute 286.0105, that any person or persons deciding to appeal any matter considered at this Public Hearing will need a record of the hearing and may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

The Public Hearing may be continued to one or more dates. Any interested party shall be advised that the date, time and place of any continuation of the Public Hearing shall be announced during the Public Hearing and that no further notice concerning the matter will be published.

DATED this 1st day of AUGUST, 2016, by ANNIE MAE MURPHY, Clerk of the Circuit Court and Clerk of the Board of County Commissioners of Taylor County, Florida.

LEGAL ADVERTISEMENT

WEDNESDAY, AUGUST 3, 2016

ONE (1) ISSUE

BILL T.C.B.C.C.

The Bishop Law Firm, P.A.
Attorneys at Law

CONRAD C. BISHOP, JR.
CONRAD C. "SONNY" BISHOP, III

POST OFFICE BOX 167
411 N. WASHINGTON STREET
PERRY, FLORIDA 32348

IN MEMORIAL OF
KATHLEEN MCCARTHY BISHOP 1966-2013
(850) 584-6113
FAX (850) 584-2433

June 7, 2016

VIA E-MAIL AND REGULAR MAIL

Mr. Dustin Hinkel
County Administrator
County Offices
201 East Green Street
Perry, Florida 32347

Hon. Annie Mae Murphy
Clerk of Court
Post Office Box 620
Perry, Florida 32348

Re: Gas Tax Ordinance

Dear Annie Mae and Dustin:

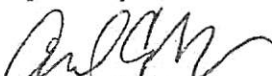
Enclosed please find an Order for the Gas Tax, an Interlocal Agreement with the City and also a Notice.

I know that Dustin is going to negotiate with the City on the percentages.

Please review all of this and if you have a question, please let me know.

Thank you and I hope you are doing fine.

Respectfully,


Conrad C. Bishop, Jr.

CCB/kp
enclosures

ORDINANCE NO.:_____

AN ORDINANCE OF TAYLOR COUNTY, FLORIDA, AMENDING CHAPTER 70, SECTION 70-3 - LOCAL OPTION GAS TAX - OF THE TAYLOR COUNTY CODE OF ORDINANCES PROVIDING FOR AN EXTENSION OF THE SIX (6) CENT LOCAL OPTION GAS TAX UPON EVERY GALLON OF MOTOR FUEL AND DIESEL FUEL SOLD IN TAYLOR COUNTY AND TAXES UNDER THE PROVISIONS OF CHAPTER 206, FLORIDA STATUTES; PROVIDING THAT THE EXTENSION SHALL BE EFFECTIVE FOR A PERIOD OF FIVE (5) YEARS BEGINNING JANUARY 1, 2017 AND ENDING DECEMBER 31, 2021 PROVIDING FOR DISTRIBUTION BETWEEN THE COUNTY GOVERNMENT AND THE CITY OF PERRY IN ACCORDANCE WITH AN INTERLOCAL AGREEMENT; PROVIDING FOR RECISSION; PROVIDING FOR INCLUSION IN THE CODE; PROVIDING FOR NEGOTIATIONS BETWEEN TAYLOR COUNTY AND THE CITY OF PERRY, PROVIDING FOR SEVERABILITY AND PROVIDING FOR AN EFFECTIVE DATE.

WHEREAS, by enacting Florida Statutes Section 336.025, the Florida Legislature granted counties, acting by and through their Board of County commissioners, authority to levy a local one (1) cent, two (2) cent, three (3) cent, four (4) cent, five (5) cent, or six (6) cent local option gas tax upon every gallon of motor fuel and diesel fuel sold in the county and taxed under the provisions of Chapter 206, Florida Statute; and

WHEREAS, monies received from the local option gas tax authorized by Section 336.025, Florida Statute shall be utilized for specific transportation expenditures as adopted by the Board of County Commissioners; and

WHEREAS, it is in the best interest of the residents and taxpayers of Taylor County that the financial burden of constructing and maintaining the County road and transportation system be paid for by those using the system, in the form of a local option gas tax; and

WHEREAS, the safe, efficient and uninterrupted transportation of people and property from place to place in Taylor County is a matter of great importance and concern to the people of the county; and

WHEREAS, Taylor County currently imposes a six (6) cent local option gas tax upon every gallon of motor fuel and diesel fuel sold in Taylor County and taxed under the provisions of Chapter 206, Florida Statute; and

WHEREAS, the current gas tax imposed by the County ceases to be effective on December 31, 2016; and

WHEREAS, Section 336.025, Florida Statute authorizes Taylor County through a majority vote of its Board of County Commissioners to extend the local option gas tax;

NOW, THEREFORE BE IT ORDAINED BY THE BOARD OF COUNTY COMMISSIONERS OF TAYLOR COUNTY, FLORIDA, THAT:

SECTION 1. Chapter 70, Section 70-3 of the Code of Ordinances of Taylor County is hereby amended as follows:

Sec. 70-3. Local option gas tax.

(a) Authority.

This article is adopted pursuant to 336.025 Florida Statute, the general laws of the state and other applicable laws.

(b) Imposition.

There is hereby extended and re-imposed a \$0.06 local option gas tax upon every gallon of motor fuel and diesel fuel sold in the county and taxed under the provisions of Chapter 206, Florida Statutes, parts I and II.

(c) Proceeds.

Pursuant to an interlocal agreement between the Board of County Commissioners and the City Council for the City of Perry, which city contains the population within incorporated areas of the County, the proceeds from the "Local Option Gas Tax" shall be divided and distributed by the Florida Department of Revenue to Taylor County as follows:

Recipient	Share of Proceeds
TAYLOR COUNTY	70.00%
CITY OF PERRY	30.00%

(d) Recission.

It is the intent of the Board of County Commissioners in establishing this article that it be and is hereby empowered to rescind this local option gas tax on January 1, 2022.

(e) Duration.

The tax imposition provided by this article, unless rescinded as set out in section 70-3(d), shall be effective from January 1, 2017 to December 31, 2021.

SECTION 2. Inclusion in the Code of Ordinances

It is the intention of the Board of County Commissioners that the provisions of this ordinance shall become and be made a part of the Taylor County Code; and that the section of this Ordinance may renumbered or re-lettered and word "ordinance" may be changed to "section", "article" or such other appropriate word or phrase in order to accomplish such intentions.

SECTION 3. Severability.

The intent of the Board of County Commissioners is that if any subsection, clause, sentence, provision or phrase of this Ordinance is held to be invalid or unconstitutional by a Court of competent jurisdiction, such invalidity or unconstitutionality shall not be so construed as to render invalid or unconstitutional the remaining provisions of this Ordinance.

SECTION 4. Negotiations.

The intent of the Board of County Commissioners is to re-negotiate the Motor Fuel Tax in 2021.

SECTION 5. Effective Date.

This Ordinance shall take effect upon being enacted and duly filed in the office of the Secretary of State of the State of Florida.

PASSED and ADOPTED in regular session by the Board of County Commissioners of Taylor County, Florida, on this _____ day of _____, 2016.

BOARD OF COUNTY COMMISSIONERS
TAYLOR COUNTY, FLORIDA

BY: _____
Jody Devane, Chairperson

ATTEST:

ANNIE MAE MURPHY, Clerk

INTERLOCAL AGREEMENT

THIS INTERLOCAL AGREEMENT, entered into this _____ day of _____, 2016, between Taylor County, Florida, a political subdivision of the State of Florida, by and through its Board of County Commissioners, hereinafter referred to as the "County" and the City of Perry, Florida, hereinafter referred to as the "City", for the purpose of providing for the division and distribution of the proceeds of the local option gas tax imposed by the County pursuant to Chapter 88-3, Laws of Florida, as amended.

WITNESSETH:

WHEREAS, Chapter 88-3, Section 55, Laws of Florida, is amended, provided the County with the authority to levy in addition to other taxes allowed by law, a local option gas tax upon every gallon of motor fuel and special fuel sold in the County and taxed under the provisions of Chapter 206, Florida Statutes; and,

WHEREAS, pursuant to said enactment, the County, in anticipation of renewal of the local option gas tax, may establish by interlocal agreement with the City of Perry representing a majority of the incorporated area population within the County, a distribution formula for dividing the proceeds of the local option gas tax among the County government and the City of Perry; and

WHEREAS, the City which is a party to this agreement is an incorporated municipality located within Taylor County, Florida, eligible to receive a portion of the local option gas tax, and represents a majority of the incorporated area

population within Taylor County, and desires to jointly establish with the County a distribution formula pursuant to Section 336.025(3)(a)(1), Florida Statutes,

NOW, THEREFORE, in consideration of the mutual covenants contained herein, and pursuant to Section 163.01, et seq., Florida Statutes, the "Florida Interlocal Cooperation Act of 1969", the parties hereto agree as follows:

1. Upon its levy by the County, the local option gas tax shall be divided among, and distributed to the County and the eligible municipalities within the County as follows:

<u>Recipient</u>	<u>Share of Proceeds</u>
TAYLOR COUNTY	70%
CITY OF PERRY	30%

2. This agreement shall take effect on January 1, 2017 and shall terminate on December 31, 2021. It shall also govern the division and distribution of proceeds of the local option gas tax imposed through December 31 but not collected or otherwise available for distribution until after December 31 of the year the agreement terminates.

3. By execution of this agreement, neither the County nor the City will be deemed to have waived any rights or remedies they may have available under the laws of the State of Florida.

4. This agreement may be executed in counterparts and each fully executed counterpart shall be deemed an original instrument.

5. Upon adoption of an ordinance levying the local option gas tax by the County and the execution of this agreement, the County shall provide the State of Florida Department of Revenue the distribution proportions established by this agreement prior to October 1, 2016.

6. A copy of this agreement and all subsequent amendments hereto shall be filed by the County with the Clerk of the Circuit Court of Taylor County, Florida, upon its execution by all parties hereto.

7. This agreement may be amended only in writing approved by all parties executing this agreement.

DATED this _____ day of _____, 2016.

BOARD OF COUNTY COMMISSIONERS
OF TAYLOR COUNTY, FLORIDA

BY: _____
JODY DEVANE, Chairperson

ATTEST:

ANNIE MAE MURPHY, Clerk

CITY OF PERRY

BY: _____
Mayor

ATTEST:

BOB BROWN, City Manager

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TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

Board to approve the Application for Funding Assistance and the Equal Employment Opportunity Plan (EEOP) Certification Form for the 2016-2017 Florida Department of Law Enforcement (FDLE) Edward Byrne Memorial Justice Assistance Grant (JAG) Program.

MEETING DATE REQUESTED:

August 16, 2016

Statement of Issue: Board to approve the Application for Funding Assistance and the EEOP Certification Form for the 2016-2017 funding cycle of the FDLE JAG grant program. The County has been the lead administrator of this grant for several years on behalf of the Sheriff's Department. The funds must be used to prevent and control crime.

Recommended Action: Approve Application for Funding Assistance and EEOP Certification .

Fiscal Impact: The County is eligible to receive up to \$41,639, However the Sheriff's Department has requested the money is divided with the City of Perry and the County will be receiving \$20,820.00 of the grant funds.

Budgeted Expense: Y/N Not applicable.

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The Board approved the Certification of Participation for this grant program at the July 5, 2016 meeting. The Board has been the lead agent for this grant for several years working closely with the Sheriff's Department. The grant funds will be used by the Sheriff's Department for activities that prevent and control crime and the drug eradication programs. The Sheriff's Department will be splitting the funds (50/50) with the City of Perry Police Department. The County only administers the Sheriff's portion of the funds. The City submits their own application and is responsible for their reporting.

Attachments: Application for Funding Assistance and EEOP Certification Form

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 1: Administration

Subgrant Recipient

Organization Taylor County Board of Commissioners

County: Taylor

Chief Official

Name: Patricia Patterson

Title: Chairperson

Address: 108 North Jefferson Street
Suite 102

City: Perry

State: FL **Zip:** 32347-3252

Phone: 850-838-3500 **Ext:**

Fax:

Email: ppatterson@taylorcountygov.com

Chief Financial Officer

Name: Annie Murphy

Title: Clerk of the Court

Address: Post Office Box 620

City: Perry

State: FL **Zip:** 32348

Phone: 850-838-3506 **Ext:**

Fax: 850-838-3549

Email: cmock@taylorclerk.com

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 1: Administration

Implementing Agency

Organization Taylor County Sheriff's Office

County: Taylor

Chief Official

Name: L.E. Williams

Title: Sheriff

Address: 108 North Jefferson Street
Suite 103

City: Perry

State: FL **Zip:** 32347-3252

Phone: 850-584-4225 **Ext:**

Fax: 850-584-7016

Email: ellisondm@flcjn.net

Project Director

Name: John Rice

Title: Chief Investigator

Address: 108 North Jefferson Street
Suite 103

City: Perry

State: FL **Zip:** 32347-3231

Phone: 850-838-3505 **Ext:**

Fax: 850-838-3527

Email: rrice@tcsofl.org

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 2: Project

General Project Information

Project Title: TAYLOR COUNTY DRUG ERADICATION TASK FORCE
Subgrant Recipient: Taylor County Board of Commissioners
Implementing Taylor County Sheriff's Office
Project Start Date: 10/1/2016 **End** 9/30/2017

Problem Identification

In 1992, The Taylor County Sheriff's Office initiated the Taylor County Drug Eradication Task Force to combat the continual drug problems in Taylor County. This was made possible by federal funding. The Drug Task Force operates within the 1,052 square mile area-encompassing Taylor County. Taylor County's large area of woodlands makes it a prime area to manufacture cannabis. The

County also has many traversable waterways including the Fenholloway River, Econfinia River, Steinhatchee River, Aucilla River and the Gulf of Mexico coastline. Additionally, it is believed that waterways are being used to transport controlled substances in Taylor County due to the fact that our coastline is mostly undeveloped. Past investigations have netted crops ranging from 100 to 2,500 marijuana plants per site. Many man-hours were spent on surveillance of organizations and eradication teams on these crops with a limited number of arrests occurring due to the lack of needed personnel. Aerial cannabis eradication operations are limited due to the unavailability of aircraft and funding. Additional resources are being sought to assist in these areas. Taylor County continues to have problems with habitual offenders who are in the market of selling illegal drugs. Significant increases in the number of murders, burglaries, thefts, and other drug related crimes can be directly related to the drug epidemic. The drug task force has, in the past couple of years, received numerous complaints from residents in and around small churches concerning drug sales in these neighborhoods and took immediate action to correct and curtail this activity. Many man-hours or surveillance and buy operations are conducted to minimize the amount of drugs being transported in and out of the county and many mid-to-upper level dealers have been incarcerated due to these efforts. However, due to the multi-tier levels of these drug operatives, what were once low-to mid-level dealers, primarily juveniles, have stepped up operations and are now taking the place of those dealers who have been incarcerated.

Although cocaine, cannabis, methamphetamines, and pharmaceutical drugs are the primary drugs of choice for users in Taylor County, investigations have netted drug dealers responsible for smuggling illegal drugs to the area. Past and current investigations have been very successful in dismantling drug trafficking organizations. Investigative techniques continually change because local dealers are becoming more educated in law enforcement investigation techniques. Through many drug investigations and arrests, a large number of street dealers have been identified as being able to monitor the movement of law enforcement units through the County, hindering the crackdown of on all levels of drug operations.

Project Summary (Scope of Work)

The Taylor County Sheriff's Office has staff and resources to form the Taylor County Drug Eradication Task Force. The County Drug Investigators are responsible for overseeing all drug related operations involving the Task Force, to include but not limited to, organizing

Application for Funding Assistance

Florida Department of Law Enforcement

Justice Assistance Grant - County-wide

surveillance, gathering confidential information, requesting search warrants, and compiling data to determine drug operations and techniques. Together they work directly with numerous federal, state, and local agencies to accomplish their mission. The Task Force organizes and maintains confidential source files which include paying for information and working with confidential informants. The Task Force concentrates on the eradication of all controlled substance covered under Florida Statue 893. The investigators conduct eradication investigations, which include undercover surveillance, aerial surveillance of cannabis plots, and coastal interdiction. The Task Force also conducts investigations targeting street-level, mid-level and high-level drug trafficking organizations. Information gathered is compiled, entered onto the computer, and investigations initiated on how

informants, dealers, and other acquaintances tie in together to determine if there is any organizational structure to the operations in the area. This grant will be paying for expenses only, which include Utilities, Program Operations, Annual Maintenance, Training, Repairs, Equipment Maintenance, Office Maintenance/Repairs, Office Utilities. The Task Force will follow the counties purchasing policy. Items as available will be purchased from state contract pricing. Operational capital outlay items will be purchased utilizing a bidding process, or if applicable sole source purchasing. If sole source the appropriate documentation will be provided. Purchase order is filled out for items that are purchased followed by an invoice and a check is then issued. All purchases will be maintained and shown on our expenditure report which is also reconciled with our bank statements. Task Force Investigators will provide periodic drug related training to other law enforcement personnel as well as civilians. The deliverables and minimum performance for contractual services such as those for

maintenance and utilities will be in accordance with the local subcontract agreements. A copy of all subcontracts will be provided to FDLE's Office of Criminal Justice Grants within 30 days of execution and prior to reimbursement of expenditures for these items. The deliverables for this grant is the quarterly performance of the tasks and activities described in the scope of work, in accordance with local agency employment agreements, positions descriptions and/or purchasing policies. Taylor County will request reimbursement of allowable costs identified in Section 4 on a quarterly basis.

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 2: Project

Section Questions:

Question: What percentage of the total cost of this project is being funded by sources other than this award?

Answer: 0

Question: What is the name of the jurisdiction(s) your agency provides service to. (e.g., City of Miami, Orange County, State of Florida)

Answer: Taylor County

Question: What is the combined population of the jurisdiction(s) your agency provides services to (according to the most recent census)?

Answer: 22570

Question: What is the address of the location being used to provide services for this project?

Answer: 2762 Pisgah Rd
Perry, Florida 32347

Question: Describe your agency. (e.g., non-profit, community based, government)

Answer: Government

Question: Have you verified that the subgrantee has an active and current registration in SAM.gov?

Answer: Yes

Question: What is the Operating Capital Outlay threshold used by the subgrantee?
If the implementing agency is a sheriff's office, indicate the sheriff's office's threshold instead.

Answer: 1,000.00

Question: Does the subgrantee receive a single grant in the amount of \$750,000 or more from the U.S. Department of Justice?

Answer: No

Question: Does the implementing agency receive a single grant in the amount of \$750,000 or more from the U.S. Department of Justice?

Answer: No

Question: In your organization's preceding completed fiscal year, did your organization (the subgrantee) receive at least (a) 80 percent or (b) \$25,000,000 of your annual gross revenues in U.S. federal contracts, subcontracts, loans, grants, subgrants, and/or cooperative agreements?

Answer: No

Question: If you answered yes above, does the public have access to information about the compensation of the executives in your organization (the subgrantee) through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986? If answer to Part 1, above, was "no," answer N/A.

Answer: No

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 3: Performance

General Performance Info:

Performance Reporting

Quarterly

Federal Purpose Area: 01 - Law Enforcement (Includes Task Forces)

State Purpose Area: 1G - General Questions

Objectives and Measures

Objectiv General Questions - General Questions for All Recipients

Measure: General 01

Will your organization be using the crimesolutions.gov website during the grant period regardless of JAG funding? Crimesolutions.gov provides information on several crime reduction and prevention programs and practices.

Goal: No

Measure: General 02

Will your organization be using the The National Training and Technical Assistance Center (NTTAC) during the grant period, regardless of JAG funding? The NTTAC serves as BJA's training and technical assistance center. You can find resources, tools, webinars, and TTA support on a variety of criminal justice issues and initiatives.

Goal: No

Measure: General 03

Will your organization be using the NCJP.org website during the grant period, regardless of JAG funding? NCJP.org contains resources to support strategic planning, program development, and implementation of evidence-based policy and practice.

Goal: No

Measure: General 04

Will your organization be using the Evidence-Based Policing Matrix during the grant period regardless of JAG funding? The Evidence-Based Policing Matrix provides information on evidence-based practices for law enforcement.

Goal: No

Measure: General 05

Will your organization be using the What Works in Reentry Clearinghouse during the grant period regardless of JAG funding? The clearinghouse provides research on the effectiveness of reentry programs and practices.

Goal: No

Measure: General 06

Application Ref 2017-JAGC-2904

Section #3 Page 1 of 4

Contract -JAGC-TAYL- - -

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 3: Performance

Will your organization be using Research to Practice during the grant period regardless of JAG funding? Research to Practice promotes the dissemination of research on drug courts to practitioners and policymakers.

Goal: No

Measure: General 07

Will your organization be using any other resources during the grant period regardless of JAG funding? If yes, please describe them.

Goal: Our agency will be using NADIS, ROCIC, and LP POLICE.

Measure: General 08

During the grant period, will your agency conduct or sponsor (with or without JAG funds) a survey or focus group of citizens on any of the following topics? Enter all that apply from the following list: Public satisfaction with police services; public satisfaction with prosecution services; public satisfaction with public defender/indigent defense services; public satisfaction with courts; public perceptions of crime/disorder problems; personal crime experiences of citizens; none of the above; unsure/don't know.

Goal: N/A

Measure: General 09

During the grant period, which of the following community activities will your organization be involved in, with or without JAG funds and how often will they each occur (yearly, monthly, etc.)? Choose from the following list: Hosting community meetings; attending community meetings; distributing a newsletter, e-mail, or other bulletin; attending community events; conducting social media activities; conducting outreach to minority populations; other (please describe)

Goal: We will be hosting community meetings on a average monthly basis.

Measure: General 10

Law Enforcement Agencies ONLY: In which of the following ways has your agency fostered community involvement in the last year? Enter all that apply from the following list: Citizen Review Board or other review board with citizen representation, Citizen's Police Academy, Internships for university or high school students, Volunteer Program, Auxiliary police officer program, Police Cadet Program, k-12 school programs, Youth Athletic Programs, Other (please Describe), None of the above, Unsure/Don't know.

Goal: N/A

Measure: General 11

Identify the goal(s) you hope to achieve with your funding. If you have multiple goals, describe each goal separately.

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 3: Performance

Goal: Our agencies goal is and has been to identify drug manufacturers, users, and dealers within our county. To develop evidence leading to the arrest and successful prosecution of all those identified.

Measure: General 12

Are the subrecipient and implementing agency aware that they will be required to report on the status of the identified goals during each reporting period?

Goal: Yes.

Measure: General 13

Describe any barriers you may encounter which may prevent you from achieving your identified goal(s).

Goal: Uncooperative defendants and legal prosecution problems.

Measure: General 14

Are you aware that the Office of Criminal Justice Grants encourages recipients to report on any noteworthy accomplishments, success stories, or program results that they would like to showcase?

Goal: Yes.

Measure: General 15

What major activities are planned for each of your goals listed in question 12?

Goal: Working with DEA to continue identifying new targets.

State Purpose Area: 3E - Equipment, Supplies, and Technology Enhancements

Objectives and Measures

Objectiv Equipment - Questions for all recipients purchasing Equipment, Supplies, and Technology Enhancements.

Measure: Equipment 1

Do the Subrecipient and Implementing agencies understand that they will be required to submit an itemized account of all items purchased during each reporting period as part of their performance reporting?

Goal: Yes

State Purpose Area: 4T - Training

Objectives and Measures

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 3: Performance

Objectiv Attending Training - Questions for all recipients attending training.

Measure: Training A1

If your staff will attend training with JAG funds during the grant period, what type of training will they attend? If more than one training will be attended, answer for each separately. Answer from the following list: Certification Training, In-service/annual training, skill building, leadership/management, conference, other (please describe).

Goal: Skill building, drug trends, and Investigative techniques, etc.

Measure: Training A2

Provide a short description of the training/conference which will be attended with JAG funds. If more than one training/conference will be attended, describe each separately.

Goal: N/A

Measure: Training A3

If your staff will attend a training/conference with JAG funds during the reporting period, how many hours will the training course last? A one day course is typically classified as an 8-hour course while a week long course is typically classified as a 40-hour course. If more than one, describe each separately.

Goal: 40 hours a week is the normal.

Measure: Training A4

If your staff will attend training/conference during the reporting period, how many individuals will attend the training/conference using JAG funds? If more than one training/conference was attended, answer for each separately.

Goal: 3

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 4: Financial

General Financial Info:

Note: All financial remittances will be sent to the Chief Financial Officer of the Subgrantee Organization.

Financial Reporting Frequency for this Quarterly

Is the subgrantee a state agency?: No

FLAIR / Vendor Number: 596000879

Budget:

Budget Category	Federal	Match	Total
Salaries and Benefits	\$0.00	\$0.00	\$0.00
Contractual Services	\$0.00	\$0.00	\$0.00
Expenses	\$20,820.00	\$0.00	\$20,820.00
Operating Capital Outlay	\$0.00	\$0.00	\$0.00
Indirect Costs	\$0.00	\$0.00	\$0.00
-- Totals --	\$20,820.00	\$0.00	\$20,820.00
Percentage	100.0	0.0	100.0

Project Generated

Will the project earn project generated income Yes

PGI Reporting Frequency : Quarterly

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 4: Financial (cont.)

Budget Narrative:

Contracted Services: \$6,570.00

Taylor County will execute subcontracts for the following services to be provided between 10/01/15 -09/30/16 for task force program operations.

Approximately 12 months of annual maintenance for alarm system at an estimated \$1,500.00

Approximately 12 months of lawn maintenance and upkeep for covert off site location \$1,000.00

Approximately 12 months of building utilities at an estimated cost of \$4,000.00

Approximately 12 months of post office box rental at an estimated cost of \$70.00

Expenses: \$14,250.00

Travel and training for professional development of task force members, including registration fees, per diem, hotel, airfare, ground transportation or other expense related to narcotics investigations training. Also included are fees related to task force member participation and access to drug enforcement courses and information. Training will be provided to officers involved in task force operations as deemed necessary once training types, locations, and training calendars are obtained.

Training equipment - including video screens, projector and A/V training aids.

Operational expenses and investigative supplies- including patrol and all-terrain vehicle maintenance and repair (such as tires, batteries, oil changes, mechanical or body repair), vehicle equipment (such as tool or lock boxes, lights, sirens, tinting), vehicle rental for undercover operations, drug kits/supplies, undercover disguise or tactical items for person or vehicle (such as snake boots, web gear, camouflage pants, jackets hats in the federally approved camouflage pattern, BDU clothing, holsters/belts, rifle slings, taser cartridges, digital equipment chargers), ultra low light camera, dual lenses camera, DVR kits, infrared illuminators, tactical vest carriers, tools and tool kits, cell phone data retrievers and safety equipment /supplies to dismantling methamphetamine laboratories, hand sanitizer, evidence containers, tarps, film, cables, small surveillance and video cameras, vehicle trackers, batteries, binoculars, gloves, digital recorders and hotel lodging expenses for undercover operations. All shipping and handling is included in cost estimates.

Program Operations- including costs for maintaining the task force's offsite location (such as maintenance and equipment for a/c repair, security system, surveillance cameras, furniture repair or replacement). Communications-including phones, cell phones, phone cards & computer and peripheral equipment (such as laptops, desktops, monitors, printers, mouse, hard drives, tablets, air cards or computer connectivity items).

Office equipment and supplies- including copier, fax, printers, and general office supplies (such as paper, postage, computer programs, ink cartridges, toner, pens, pencils, memo pads, highlighters, paper clips, envelopes, dry erase boards, file

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Budget Narrative (Continued):

folders, binders, CD/DVD's, tape, notepads, book cases).

Confidential Funds- including the purchase of services (P/S) (such as travel transportation of an informant: the lease of an apartment, business front, aircraft or boat, or similar effects to create or establish the appearance of affluence: and/or meals, beverages, entertainment, and similar expenses (including buy money, flash rolls, etc.)for undercover purposes, within reasonable limits); the purchase of evidence (P/E)(such as purchase evidence and /or contraband, such as narcotics and dangerous drugs, firearms, stolen property, counterfeit tax stamps, and so forth, required to determine the existence of a crime or to establish the identity of a participant in a crime); and the purchase of specific information (P/I) (such as the payment of monies to an informant for specific information). All use of confidential funds will be in accordance with state and federal requirements and documented accordingly.

The items in this budget narrative will be purchased according to the Taylor County Board of County Commissioners purchasing policy. Items purchased that are currently on state contract will be bought at state contract pricing. Items that are purchased out of operating capital outlay, unless sole source, will be purchased by obtaining bids. Items that require a shipping and handling payment will be paid for out of this budget.

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 4: Financial

Section Questions:

Question: If the budget contains salaries and benefits, will this project result in a net personnel increase, or continue to fund a prior federally grant funded net personnel increase?

Answer: No

Question: If Expenses or Operating Capital Outlay are included in your budget, what will be the method of procurement for those items? (e.g., competitive bid, sole source, state term contract)

Answer: Competitive bid, Sole Source, State term contract.

Question: If indirect cost is included, explain the indirect cost plan. Provide documentation of approval.

Answer: N/A

Question: If contractual services in the budget are based on unit costs, provide a definition and breakdown of cost for each service. Include the methodology for the unit cost plan and when it was approved.

Answer: N/A

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 5: Standard Conditions

Insert Standard Conditions Page here.

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 6: Signatures

In witness whereof, the parties affirm they each have read and agree to the conditions set forth in this agreement, have read and understand the agreement in its entirety and have executed this agreement by their duly authorized officers on the date, month and year set out below.

Corrections on this page, including Strikeovers,
whiteout, etc. are not

State of Florida
Department of Law Enforcement
Office of Criminal Justice Grants

Signature _____

Typed Name and Title: _____

Date: _____

Subgrant Recipient
Authorizing Official of Governmental Unit
(Commission Chairman, Mayor, or Designated Representative)

Typed Name of Subgrant _____

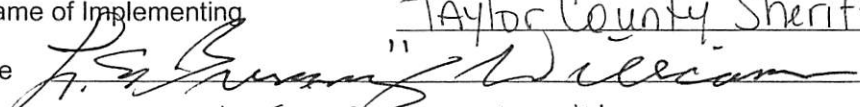
Signature _____

Typed Name and Title: _____

Date: _____

Implementing Agency
Official, Administrator or Designated Representative

Typed Name of Implementing _____ Taylor County Sheriff's Office

Signature  _____

Typed Name and Title: L.E. "Bummy" William _____

Date: 7/27/16 _____

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 6: Signatures

In witness whereof, the parties affirm they each have read and agree to the conditions set forth in this agreement, have read and understand the agreement in its entirety and have executed this agreement by their duly authorized officers on the date, month and year set out below.

Corrections on this page, including Strikeovers,
whiteout, etc. are not

State of Florida
Department of Law Enforcement
Office of Criminal Justice Grants

Signature _____

Typed Name and Title: _____

Date: _____

Subgrant Recipient
Authorizing Official of Governmental Unit
(Commission Chairman, Mayor, or Designated Representative)

Typed Name of Subgrant _____

Signature _____

Typed Name and Title: _____

Date: _____

Implementing Agency
Official, Administrator or Designated Representative

Typed Name of Implementing _____ Taylor County Sheriff's Office

Signature L.E. "Bummy" Williams

Typed Name and Title: L.E. "Bummy" Williams

Date: 7/27/16

Application for Funding Assistance

Florida Department of Law Enforcement
Justice Assistance Grant - County-wide

Section 7: Certifications and Authorizations

Insert Certifications and Authorizations here.

CERTIFICATION FORM

Compliance with the Equal Employment Opportunity Plan (EEOP) Requirements

Please read carefully the Instructions (see below) and then complete Section A or Section B or Section C, not all three. If recipient completes Section A or C and sub-grants a single award over \$500,000, in addition, please complete Section D.

Recipient's Name: <u>Taylor County Sheriff's Office</u>	
Address: <u>108 N Jefferson St - Suite 103</u>	
Is agency a: <input type="checkbox"/> Direct or <input checked="" type="checkbox"/> Sub recipient of OJP, OVW or COPS funding?	Law Enforcement Agency? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
DUNS Number: <u>958215725</u>	Vendor Number (only if direct recipient)
Name and Title of Contact Person: <u>L.E. "Bummy" Williams</u>	
Telephone Number: <u>850-584-4225</u>	E-Mail Address: <u>ellisondm@flcjin.net</u>

Section A—Declaration Claiming Complete Exemption from the EEOP Requirement

Please check all the following boxes that apply.

- | | | |
|---|--|---|
| <input type="checkbox"/> Less than fifty employees. | <input type="checkbox"/> Indian Tribe | <input type="checkbox"/> Medical Institution. |
| <input type="checkbox"/> Nonprofit Organization | <input type="checkbox"/> Educational Institution | <input checked="" type="checkbox"/> Receiving a single award(s) less than \$25,000. |

I, L.E. "Bummy" Williams [responsible official], certify that Taylor County Sheriff's Office [recipient] is not required to prepare an EEOP for the reason(s) checked above, pursuant to 28 C.F.R § 42.302. I further certify that Taylor County Sheriff's Office [recipient] will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

If recipient sub-grants a single award over \$500,000, in addition, please complete Section D

"L.E. "Bummy" Williams, Sheriff [Signature] 7/27/14
Print or Type Name and Title Signature Date

Section B—Declaration Claiming Exemption from the EEOP Submission Requirement and Certifying That an EEOP Is on File for Review

If a recipient agency has fifty or more employees and is receiving a single award or, subaward, of \$25,000 or more, but less than \$500,000, then the recipient agency does not have to submit an EEOP to the OCR for review as long as it certifies the following (42 C.F.R. § 42.305):

I, _____ [responsible official], certify that _____ [recipient], which has fifty or more employees and is receiving a single award or subaward for \$25,000 or more, but less than \$500,000, has formulated an EEOP in accordance with 28 CFR pt. 42, subpt. E. I further certify that within the last twenty-four months, the proper authority has formulated and signed into effect the EEOP and, as required by applicable federal law, it is available for review by the public, employees, the appropriate state planning agency, and the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice. The EEOP is on file at the following office:

[organization],

[address].

Print or Type Name and Title Signature Date

Section C—Declaration Stating that an EEOP Short Form Has Been Submitted to the Office for Civil Rights for Review

If a recipient agency has fifty or more employees and is receiving a single award, or subaward, of \$500,000 or more, then the recipient agency must send an EEOP Short Form to the OCR for review.

I, _____ [responsible official], certify that _____ [recipient], which has fifty or more employees and is receiving a single award of \$500,000 or more, has formulated an EEOP in accordance with 28 CFR pt. 42, subpt. E, and sent it for review on _____ [date] to the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice.

If recipient sub-grants a single award over \$500,000, in addition, please complete Section D

Print or Type Name and Title Signature Date

CERTIFICATION FORM

Compliance with the Equal Employment Opportunity Plan (EEOP) Requirements

Please read carefully the Instructions (see below) and then complete Section A or Section B or Section C, not all three. If recipient completes Section A or C and sub-grants a single award over \$500,000, in addition, please complete Section D.

Recipient's Name: TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS	
Address: 201 EAST GREEN STREET, PERRY, FLORIDA 32347	
Is agency a; <input checked="" type="checkbox"/> Direct or <input type="checkbox"/> Sub recipient of OJP, OVW or COPS funding?	Law Enforcement Agency? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
DUNS Number: 065887796	Vendor Number (only if direct recipient)
Name and Title of Contact Person: MELODY COX, GRANTS DIRECTOR	
Telephone Number: 850-838-3553	E-Mail Address: melody.cox@taylorcountygov.com

Section A—Declaration Claiming Complete Exemption from the EEOP Requirement

Please check all the following boxes that apply.

- | | | |
|---|--|--|
| <input type="checkbox"/> Less than fifty employees. | <input type="checkbox"/> Indian Tribe | <input type="checkbox"/> Medical Institution. |
| <input type="checkbox"/> Nonprofit Organization | <input type="checkbox"/> Educational Institution | <input type="checkbox"/> Receiving a single award(s) less than \$25,000. |

I, _____ [responsible official], certify that _____ [recipient] is not required to prepare an EEOP for the reason(s) checked above, pursuant to 28 C.F.R § 42.302. I further certify that _____ [recipient] will comply with applicable federal civil rights laws that prohibit discrimination in employment and in the delivery of services.

If recipient sub-grants a single award over \$500,000, in addition, please complete Section D

Print or Type Name and Title

Signature

Date

Section B—Declaration Claiming Exemption from the EEOP Submission Requirement and Certifying That an EEOP Is on File for Review

If a recipient agency has fifty or more employees and is receiving a single award or, subaward, of \$25,000 or more, but less than \$500,000, then the recipient agency does not have to submit an EEOP to the OCR for review as long as it certifies the following (42 C.F.R. § 42.305):

I, JODY DEVANE [responsible official], certify that TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS [recipient], which has fifty or more employees and is receiving a single award or subaward for \$25,000 or more, but less than \$500,000, has formulated an EEOP in accordance with 28 CFR pt. 42, subpt. E. I further certify that within the last twenty-four months, the proper authority has formulated and signed into effect the EEOP and, as required by applicable federal law, it is available for review by the public, employees, the appropriate state planning agency, and the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice. The EEOP is on file at the following office:

TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

[organization],

201 EAST GREEN STREET, PERRY, FLORIDA 32347

[address].

JODY DEVANE, CHAIRMAN

Print or Type Name and Title

Signature

Date

Section C—Declaration Stating that an EEOP Short Form Has Been Submitted to the Office for Civil Rights for Review

If a recipient agency has fifty or more employees and is receiving a single award, or subaward, of \$500,000 or more, then the recipient agency must send an EEOP Short Form to the OCR for review.

I, _____ [responsible official], certify that _____ [recipient], which has fifty or more employees and is receiving a single award of \$500,000 or more, has formulated an EEOP in accordance with 28 CFR pt. 42, subpt. E, and sent it for review on _____ [date] to the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice.

If recipient sub-grants a single award over \$500,000, in addition, please complete Section D

Print or Type Name and Title

Signature

Date

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO APPROVE A TRANSFER FROM CONTINGENCY TO THE SOCIAL SERVICES ACCOUNT WHICH FUNDS FEES CHARGED BY THE MEDICAL EXAMINER AND FOR FEES ASSOCIATED WITH THE INVESTIGATION OF CHILD ABUSE CASES, AS AGENDAED BY THE COUNTY ADMINISTRATOR.

MEETING DATE REQUESTED:

AUGUST 16, 2016

Statement of Issue:

This account was budgeted at \$53,535 at the beginning of the FY. On August 1 the Board approved a transfer from contingency of \$5000. Since that time, new invoices have come in necessitating an additional transfer from contingency of \$10,000. This fund pays invoices from the Medical Examiner for autopsies, transport of deceased bodies, and fees charged by the Children's Home Society for investigations of child abuse.

Recommended Action: Approve the transfer

Fiscal Impact: \$10,000 from reserves

Budgeted Expense: Yes, it is understood that the fees must be paid but also that they cannot be anticipated in advance, only estimated.

Submitted By: County Administrator Dustin Hinkel, 850-838-3500 x 7

Contact:

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options:

Attachments:

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

THE BOARD TO APPROVE A TRANSFER FROM CONTINGENCY FOR HEALTH INSURANCE IN THE COUNTY ADMINISTRATOR'S BUDGET, AS AGENDAED BY THE COUNTY ADMINISTRATOR.

MEETING DATE REQUESTED:

August 16, 2016

Statement of Issue: A HEALTHCARE CHOICE MADE DURING OPEN ENROLLMENT IMPACTED THE ALREADY APPROVED BUDGET REQUIRING A TRANSFER FROM CONTINGENCY.

Recommended Action: APPROVE THE TRANSFER

Fiscal Impact: \$9500

Budgeted Expense: NO

Submitted By: COUNTY ADMINISTRATOR 838-3500 X 7

Contact:

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: THE OPEN ENROLLMENT PERIOD FOR HEALTH INSURANCE OCCURS AFTER THE BUDGETING PROCESS. WHEN SELECTIONS IMPACT THE BUDGET, IT REQUIRES A TRANSFER FROM CONTINGENCY.

Options:

Attachments:

Asset to be Disposed 8/16/2016

Asset #	Description	Date Acquired	Make	Model	Location	Serial Number	Cost	Dispose Of	Inventory Last Date
0903 Tax Collector									
3365	Validator	3/9/1993	Epson	M04SA		40070	785.00	Junked	4/27/2016
3857	Typewriter	10/1/1994	IBM	Wheelwriter		11-XYR97	520.00	Junked	4/27/2016
5722	Computer	9/5/2002	Dell	P4		2RN9Y11	1,636.99	Junked	4/27/2016
5926	Printer	9/2/2003	Minolta	2200		2730712366	\$ 549.97	Junked	4/27/2016
6689	Shredder	9/30/2005					\$ 229.99	Junked	4/27/2016
6934	Optiplex Computer	6/29/2004	Dell	745			\$ 1,404.38	Junked	4/27/2016
0904 Property Appraiser									
6717	Laptop	9/30/2005	Dell	D810		JFTP171	\$1,615.82	Junked	6/15/2016
6912	Laptop	8/22/2007	Dell	D830		D3K1Z6D1	\$1,716.25	Junked	6/15/2016
0905 Clerk of Court									
4715	Printer	12/22/1999	Okidata	3410		S804A606103N	\$1,456.60	Surplus	9/10/2015
5223	Printer	10/6/2000	Okidata	3410		002A0003659K	\$2,865.90	Surplus	3/23/2016
5442	Printer	8/29/2001	Okidata	D21001A		103A0004609	\$3,084.94	Surplus	3/22/2016
5873	Printer	11/19/2002	Okidata	4410		204A0005711	\$2,882.44	Surplus	5/18/2015
6482	Fax Machine	5/19/2005	Brother	3800		U60060M4J193606	\$341.72	Surplus	3/23/2016
6939	Video Recorder	9/30/2007	Novia	QC120		7011451	\$1,129.00	Surplus	9/11/2015
0719 County Judge									
1610	Revolver	11/17/1970	Smith & Wess	19		K94-6854	\$126.67	Surplus	9/10/2015
0113 Information Technologies									
6804	Computer	9/21/2006	Dell	GX520			\$1,051.98	Junked	1/6/2015

10



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: Tax Collector
Department Name

DEPT 0903
Clerk Asset Number:
Number

3365
Board Asset Number:
DATE: 4/27/16

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>Epson MO4SA Validator</u>	Room #	Make
Model <u>MO4SA</u>	Year <u>1993</u>	Serial Number <u>040070</u>
Other Description:		
Purchased with Grant: Yes/No? <input 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) Replaced w/ new

Location: (required) _____

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

[Signature]
Department Head

Chairman Signature

County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

3857
Board Asset Number:

FROM: Tax Collector
Department Name

DEPT 0903
Number

DATE: 4/27/16

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
<u>Typewriter Wheelwriter 100</u>		<u>IBM</u>
Model	Year	Serial Number
	<u>1994</u>	<u>11-X4R97</u>
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Junk

** 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 works

Location: (required) _____

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

[Signature]
Department Head

Chairman Signature

County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: Tax Collector
Department Name

Clerk Asset Number:
DEPT 0903
Number

5722

Board Asset Number:

DATE: 04/28/10

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>Computer Tower</u>	Room #	Make <u>Dell</u>
Model <u>P4</u>	Year	Serial Number <u>2RN9Y11</u>
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Junked

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

Explanation for Disposal: (required) Replaced w/new - no longer works

Location: (required) _____

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

Samuel L. L. L.
Department Head

Chairman Signature

County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager

REPORT OF TRANSFER OR DISPOSITION
TAYLOR COUNTY, FL

TO: BOARD OF COUNTY COMMISSIONERS

Asset Number: 5926

FROM: Tax Collector
Department name

DEPT: Taxes
Number

DATE: 5/19/16

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 Color Printer	Location 2 nd Floor TC	Make Minolta
Model Magicolor 2200	Year	Serial Number 2730712366
Other Description: Donating to Boys & Girls Club		

TRANSFER DATA

<u>TRANSFERRED TO:</u>		
DEPT:	#:	New Location:
Losing Custodian/Dept Head		Date of Transfer
Gaining Custodian/Dept Head		County Administrator Approval

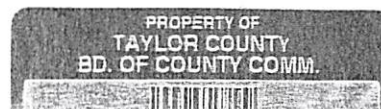
DISPOSITION DATA

Surplus <input type="checkbox"/>	Cannibalized <input type="checkbox"/>	Trade-in <input type="checkbox"/>	Junked <input checked="" type="checkbox"/>	Stolen <input type="checkbox"/>	Missing <input type="checkbox"/>
** Property that is missing or Unable to locate shall be presented to the County Commission by the Property Custodian Immediately					
Explanation for Disposal: (required) old - Toner very expensive					
Last known location: (required) TC - 2 nd Floor					
APPROVED <input type="checkbox"/>	DENIED <input type="checkbox"/>	By the Taylor County Board of Commissioners. _____			
Losing Custodian/Department Head		County Administrator			
Witness of Disposition		Chairman			

Date Removed from Asset Records

Fixed Assets Manager

Revised 7/05 by G Knowles





DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: Tax Collector

Department Name

DEPT

Number

66689
Clerk Asset Number:

Board Asset Number:

DATE: 04-28-16

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>Shredder</u>	Room # <u>DL office</u>	Make <u>Achiever</u>
Model <u>CCS 5000</u>	Year <u>2005</u>	Serial Number
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: Junked

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

Explanation for Disposal: (required) Item does not work

Location: (required) DL office

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

[Signature]
Department Head

Chairman Signature

County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: Tax Collector
Department Name

Clerk Asset Number:

DEPT 0903
Number

6934
Board Asset Number:

DATE: 04/28/16

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>Computer</u>	Room #	Make <u>Dell</u>
Model <u>OptiPlex 745</u>	Year	Serial Number <u>—</u>
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Junked

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

Explanation for Disposal: (required) Replaced w/ new

Location: (required) _____

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

[Signature]
Department Head

Chairman Signature

County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager

REPORT OF TRANSFER OR DISPOSITION
TAYLOR COUNTY, FL

TO: BOARD OF COUNTY COMMISSIONERS

Asset Number: 6717

FROM: TCPA
Department name

DEPT: 0904
Number

DATE: 07-29-16

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 Laptop	Location Storage	Make Dell
Model	Year '05	Serial Number JFTP171
Other Description:		

TRANSFER DATA

<u>TRANSFERRED TO:</u>		
DEPT:	#:	New Location:
Losing Custodian/Dept Head		Date of Transfer
Gaining Custodian/Dept Head		County Administrator Approval

DISPOSITION DATA

Surplus <input type="checkbox"/>	Cannibalized <input type="checkbox"/>	Trade-in <input type="checkbox"/>	Junked <input checked="" type="checkbox"/>	Stolen <input type="checkbox"/>	Missing <input type="checkbox"/>
** Property that is missing or Unable to locate shall be presented to the County Commission by the Property Custodian Immediately					
Explanation for Disposal: (required) software obsolete					
Last known location: (required) TCPA Storage					
APPROVED <input checked="" type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commissioners.					
Losing Custodian/Department Head			Date		
Witness of Disposition			Chairman		

07-29-16
Date Removed from Asset Records

Shirley Bul
Fixed Assets Manager

REPORT OF TRANSFER OR DISPOSITION
TAYLOR COUNTY, FL

TO: BOARD OF COUNTY COMMISSIONERS

Asset Number: 6912

FROM: T CPA
Department name

DEPT: 0904
Number

DATE: 07-29-16

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 Laptop	Location Storage	Make Dell
Model	Year '07	Serial Number D3K12 601
Other Description:		

TRANSFER DATA

<u>TRANSFERRED TO:</u>		
DEPT:	#:	New Location:
<hr/>		
Losing Custodian/Dept Head	Date of Transfer	
<hr/>		
Gaining Custodian/Dept Head	County Administrator Approval	
<hr/>		

DISPOSITION DATA

Surplus <input type="checkbox"/>	Cannibalized <input type="checkbox"/>	Trade-in <input type="checkbox"/>	Junked <input checked="" type="checkbox"/>	Stolen <input type="checkbox"/>	Missing <input type="checkbox"/>
** Property that is missing or Unable to locate shall be presented to the County Commission by the Property Custodian Immediately					
Explanation for Disposal:(required) software obsolete					
Last known location: (required) T CPA Storage					
APPROVED DENIED <input checked="" type="checkbox"/> By the Taylor County Board of Commissioners.					
<hr/>					
Losing Custodian/Department Head			County Administrator		
<hr/>			<hr/>		
Witness of Disposition			Chairman		
<hr/>			<hr/>		

07-29-16
Date Removed from Asset Records

Sh Zel
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

4715
Clerk Asset Number:

Board Asset Number: _____

FROM: Clerk of Court
Department Name

DEPT 0905
Number

DATE: 04/20/16

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 # <u>—</u>	Make <u>Okidata</u>
Model <u>Peacemaker 3410</u>	Year	Serial Number <u>S804A606103N</u>
Other Description: <u>Purchased 12/22/1998</u>		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: <u>Surplus</u>	
** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.	
Explanation for Disposal: (required) _____	
Location: (required) <u>Court house</u> <u>Basement Breakroom, next to Teen Court</u> <u>Office</u>	
APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commission: _____ Date _____	
Chairman Signature _____	
Department Head _____	County Administrator Approval _____

Date Removed From Asset Records

Fixed Assets Manager

- Copy
Original sent to Gary 04/20/16
(2)



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

5223
Clerk Asset Number:

Board Asset Number: _____

FROM: Clerk of Court
Department Name

DEPT 0905
Number

DATE: 04/20/14

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>OKidata</u>
Model <u>Peace Maker</u>	Year	Serial Number <u>002 A 0003659K</u>
Other Description: <u>Purchased 10/06/2000</u>		
Purchased with Grant: Yes/No? <input 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) Court house Basement Breakroom next to court ^{Teen office}

Location: (required) _____

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

Chairman Signature _____

Department Head _____ County Administrator Approval _____

Date Removed From Asset Records

Fixed Assets Manager

Copy
original sent to GARY
04/20/14 (12)



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: Clerk of Court
Department Name

5442
Clerk Asset Number:

DEPT 0905
Number

Board Asset Number:

DATE: 04/20/16

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
Printer		Okidata 4410
Model	Year	Serial Number
D21001A	-	103A0004609
Other Description:		
Purchased 08/29/2001		
Purchased with Grant: Yes/No? <input 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) _____

Location: (required) Recording Dept. Top of Filing Cabinet

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

Chairman Signature _____

Department Head _____ County Administrator Approval _____

Date Removed From Asset Records

Fixed Assets Manager

- copy
- original sent to Gary 04/20/16



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: Clerk of Court
Department Name

5873
Clerk Asset Number:
DEPT 0905
Number

Board Asset Number: _____

DATE: 04/20/16

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
Printer		OKidata
Model	Year	Serial Number
Pacemark 4410		204A0005711
Other Description: Purchased 11/19/2002		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: <u>Surplus</u>	
** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.	
Explanation for Disposal: (required) _____	
Location: (required) <u>Clerks Office 1st Floor - Old vault room</u>	
APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commission: _____	Date _____
_____ Department Head	_____ Chairman Signature
	_____ County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager

- copy
- attached sent to Gary notations (2)

**REPORT OF TRANSFER OR DISPOSITION
TAYLOR COUNTY, FL**

TO: BOARD OF COUNTY COMMISSIONERS

Asset Number: **6482**

FROM: **Clerk of Court** DEPT: **0905**
Department name Number

DATE: **03-11-16**

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 Fax Machine	Location Basement Finance Dept.	Make Brother
Model Intellifax 3800	Year	Serial Number U60060M4J143606
Other Description:		

TRANSFER DATA (if disposing, mark this area N/A)

<u>TRANSFERRED TO:</u>		
DEPT: _____	#: _____	New Location: _____
Losing Custodian/Dept Head _____		Date of Transfer _____
Gaining Custodian/Dept Head _____		County Administrator Approval _____

DISPOSITION DATA (if transferring, mark this area N/A)

Surplus <input checked="" type="checkbox"/>	Cannibalized <input type="checkbox"/>	Trade-in <input type="checkbox"/>	Junked <input type="checkbox"/>	Stolen <input type="checkbox"/>	Missing <input type="checkbox"/> **
** <u>Property that is missing or Unable to locate shall be presented to the County Commission by the Property Custodian Immediately</u>					
Explanation for Disposal: (required)					
Last known location: (required)					
APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commissioners. _____ Date _____					
Losing Custodian/Department Head _____			County Administrator _____		
Witness of Disposition _____			Chairman _____		

Date Removed from Asset Records _____

Fixed Assets Manager _____



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: Clerk of Court
Department Name

6939
Clerk Asset Number:

DEPT 0905
Number

Board Asset Number:

DATE: 04/20/16

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
Digital Video Recorder	—	nNovia
Model	Year	Serial Number
QC120-Quickcapture	—	7011451
Other Description:		
Purchased 09/30/2007		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: _____	
** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.	
Explanation for Disposal: (required) _____	
Location: (required) _____	
APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commission _____ Date _____	
_____	Chairman Signature
Department Head	County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager

- copy
- original sent to Gary (en)



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

1610 08

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: 1610

Board Asset Number:

FROM: County Judge
Department Name

DEPT 0719
Number

DATE: 08-04-16

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 Gun	Room #	Make Smith & Wesson
Model	Year <i>(Purchased in 1970) 88</i>	Serial Number K94-6854
Other Description:		
Purchased with Grant: Yes/No? <input 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) _____

Location: (required) _____

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

[Signature]
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager

(original)



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: Info Tech
Department Name

DEPT 0113
Number

6804
Clerk Asset Number:

Board Asset Number:

DATE: 04/20/16

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>Computer</u>	Room # <u>—</u>	Make <u>Dell</u>
Model <u>Optiplex GX520</u>	Year <u>—</u>	Serial Number <u>?</u>
Other Description: <u>Purchased in 04/21/2006</u>		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: _____

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

Explanation for Disposal: (required) _____

Location: (required) _____

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

Chairman Signature _____

Department Head _____ County Administrator Approval _____

Date Removed From Asset Records

Fixed Assets Manager

- Copy
- original sent to ~~sherese~~ sherese 04/20/16
12

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO CONSIDER APPROVAL OF AN AGREEMENT WITH PREBLE-RISH (ENGINEERS) TO TRANSFER ASSIGNMENT OF TWO ON-GOING PROJECTS TO NEWLY FORMED DEWBERRY/PREBLE-RISH, AS AGENDAED BY THE COUNTY ADMINISTRATOR.

MEETING DATE REQUESTED:

AUGUST 16, 2016

Statement of Issue: The County contracted with Preble-Rish for two projects listed as Carlton Cemetery Road and San Pedro Rd Widening & Resurfacing. This agreement, if approved and signed, will transfer those two projects only to Dewberry/Preble-Rish. The two engineering firms have recently merged.

Recommended Action: Approve the agreement

Fiscal Impact: N/A

Budgeted Expense: yes

Submitted By: Dustin Hinkel, County Administrator 838-3500 x 7

Contact:

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: On August 18, 2015, the Board entered into a contract with Preble-Rish for specific engineering services on an "as needed" basis. Recently, Preble-Rish merged with Dewberry Engineers, Inc., and all employees of Preble-Rish remain and are now part of Dewberry/Preble-Rish. Preble-Rish transferred its professional services agreements to Dewberry Engineers, Inc. (d/b/a Dewberry/Preble-Rish), including two with Taylor County, subject to Taylor County's approval. Those two agreements are Carlton Cemetery Road (PRI Project Number 549.001) and San Pedro Rd Widening and Resurfacing (PRI Project Number 549.002). This agreement before the Board is for those two listed projects only and allows those two projects to now be handled by Dewberry/Preble-Rish.

Options: Not allow the transfer of the two projects

Attachments:

July 25, 2016

Mr. Dustin Hinkle
County Administrator
Taylor County Board of County Commissioners
201 East Green Street
Perry, FL 32347

Re: Assignment of Preble-Rish Inc. Agreements to Dewberry Engineers Inc.
(PRI Project Numbers 549.001 and 549.002)

Dear Mr. Dudley:

On April 6, 2016, the entire Preble-Rish Inc. staff and operations joined Dewberry Engineers Inc. As part of the transaction, Preble-Rish transferred its professional services agreements to Dewberry Engineers Inc., subject to client consent. This letter is a request for the assignment of agreements between the Taylor County Board of County Commissioners and Preble-Rish Inc. to Dewberry Engineers Inc.

The staff and points of contact that served you at Preble-Rish Inc. will remain unchanged. That same staff will also now have available to them the additional resources of Dewberry Engineers Inc. Going forward, the branch offices will operate under the name Dewberry Engineers Inc. d/b/a Dewberry | Preble-Rish

The following current agreements between the Taylor County Board of County Commissioners and Preble-Rish Inc. are to be assigned:

- Carlton Cemetery Road (PRI Project Numbers 549.001)
- Task Order 2009-001-PRI-1 San Pedro Rd Widening & Resurfacing (PRI Project Numbers 549.002)

This assignment is strictly for the above listed agreements executed between Taylor County Board of County Commissioners and Preble-Rish Inc. under which Dewberry Engineers Inc. will acquire all rights, interests and obligations of Preble-Rish Inc. under the agreements arising out of or related to Dewberry's performance under the agreements on and after April 6th, 2016, the effective date of the assignment. Dewberry Engineers Inc. is a New York corporation registered to do business in the State of Florida. Its Federal Tax Identification Number is: 13-0746510.

Preble-Rish Inc. respectfully requests your consent, acknowledgement and agreement to the assignment of the above-referenced agreements by signing this

Mr. Hinkle
Assignment of Contracts
Taylor County
July 25, 2016

letter and returning it to the attention of Debra Preble via email at dpreble@dewberry.com.

Additionally, a certificate of insurance will be provided under separate cover if required under the subject agreement.

If you have a question about this request or need additional documentation, please call Debra Preble at 850.523.0062.

Sincerely,

Preble-Rish, Inc.

Dewberry Engineers Inc.



By: Clifford D. Wilson III
Title: Vice President



By: Darren Conner
Title: President, Southeast

CONSENTED, ACKNOWLEDGED AND AGREED TO:

Taylor County Board of County Commissioners

Signature

By: _____

Title: _____

Date: _____

12

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

THE BOARD TO APPROVE A REQUEST TO REMOVE COUNTY ASSETS THAT ARE UNDER THE PURCHASING THRESHOLD OF \$1000 FROM COUNTY INVENTORY, AS AGENDAED BY THERESA COPELAND, DTIS DIRECTOR

MEETING DATE REQUESTED:

AUGUST 16, 2016

Statement of Issue: TO REMOVE THESE LISTED ITEMS FROM THE COUNTY INVENTORY LIST

Recommended Action: APPROVE THE REQUEST TO REMOVE ASSETS

Fiscal Impact: NONE

Budgeted Expense:

Submitted By: THERESA COPELAND
838-3500 EXT 108

Contact:

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options:

Attachments: SEE ATTACHED DISPOSITIONS



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

Board Asset Number: _____

FROM: Building
Department Name

DEPT 0160
Number

DATE: 7/13/2016

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 hp air compressor	Room #	Make
Model	Year	Serial Number L9/26/2000-00394
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: 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) NOT WORKING

Location: (required) COURTHOUSE STORAGE

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

W D Danner
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: Courthouse Maintenance
Department Name

DEPT 0160
Number

1683
Clerk Asset Number:

Board Asset Number:
DATE: 7/26/16

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>Wood Cabinet</u>	Room # <u>Mailroom</u>	Make
Model	Year	Serial Number
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: 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) Clear up inventory

Location: (required) _____

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

[Signature]
Department Head

[Signature]
Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

3940
Clerk Asset Number:

Board Asset Number:

FROM: CHAMBER OF COMMERCE

DEPT _____
Number

DATE: 7/19/16

Department Name

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 CREDENZA	Room #	Make
Model	Year	Serial Number
Other Description:		
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) ITEM REMOVED FROM INVENTORY

Location: (required) CHAMBER OF COMMERCE

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

[Signature]
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

3941
Clerk Asset Number:

Board Asset Number: _____

FROM: CHAMBER OF COMMERCE

DEPT _____
Number

DATE: _____

Department Name

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 FILING CABINET	Room #	Make
Model	Year	Serial Number
Other Description:		
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

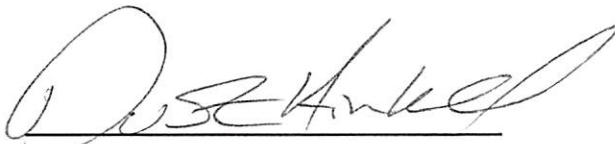
Type of Disposition: SURPLUS

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

Explanation for Disposal: (required) ITEM REMOVED FROM INVENTORY

Location: (required) CHAMBER OF COMMERCE


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


Department Head

Chairman Signature

County Administrator Approval

Date Removed From Asset Records


Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

3942
Clerk Asset Number:

Board Asset Number: _____

FROM: CHAMBER OF COMMERCE

DEPT _____
Number

DATE: _____

Department Name

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 COMPUTER DESK	Room #	Make
Model	Year	Serial Number
Other Description:		
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) ITEM REMOVED FROM INVENTORY

Location: (required) CHAMBER OF COMMERCE

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

[Signature]
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

3945
Clerk Asset Number:

Board Asset Number: _____

FROM: CHAMBER OF COMMERCE

DEPT _____
Number

DATE: _____

Department Name

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
VCR/TV		
Model	Year	Serial Number
Other Description:		
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) ITEM REMOVED FROM INVENTORY

Location: (required) CHAMBER OF COMMERCE

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

[Signature]
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

THE BOARD TO APPROVE A REQUEST TO REMOVE COUNTY
ASSET FROM COUNTY INVENTORY, AS AGENDAED BY
THERESA COPELAND, DTIS DIRECTOR

MEETING DATE REQUESTED:

AUGUST 16, 2016

Statement of Issue: TO REMOVE THESE LISTED ITEMS FROM THE COUNTY
INVENTORY LIST

Recommended Action: APPROVE THE REQUEST TO REMOVE ASSESTS

Fiscal Impact: NONE

Budgeted Expense:

Submitted By: THERESA COPELAND
838-3500 EXT 108

Contact:

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options:

Attachments: SEE ATTACHED DISPOSITION



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

7713
Clerk Asset Number:

Board Asset Number:

FROM: Fire Rescue
Department Name

DEPT 0192
Number

DATE: 7/2/2016

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
Staff Vehicle	Station 1 - Parking Lot	Chevy
Model	Year	Serial Number
Impala	2007	2G1WS58R479183822
Other Description: Vehicle received from Sherrifs Office surplus		
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: 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) mechanical failure / surplus inventory

Location: (required) Station 1 - Parking Lot

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

[Signature]
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:

Memorandum of Understanding between the Florida Division of Emergency Management and the Taylor County Board of County Commissioners.

MEETING DATE REQUESTED:

August 16, 2016

Statement of Issue: Board to consider approval of Memorandum agreement between the Florida Division of Emergency Management and the Taylor County Board of County Commissioners.

Recommended Action: Approve the MOU for AlertFlorida, a mass notification service for the residents of Taylor County.

Fiscal Impact: None

Budgeted Expense: N/A

Submitted By: Steve Spradley, Emergency Management Director

Contact: 850-838-3575

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: Emergency Management desires to utilize the Emergency Alert Notification System provided by the Division of Emergency Management to transmit alerts, notifications, and other authorized public safety messaging to residents, businesses, and visitors located in or transiting through Taylor County. There is no cost to the citizens or BoCC associated with this service. The system utilized by Taylor County will be named ALERT TAYLOR.

Options: Not to approve

- Attachments:**
1. Memorandum of Agreement between the Florida Division of Emergency Management and the Taylor County Board of County Commissioners.
 2. Letter from County Attorney.

The Bishop Law Firm, P.A.
Attorneys at Law

CONRAD C. BISHOP, JR.
CONRAD C. "SONNY" BISHOP, III

POST OFFICE BOX 167
411 N. WASHINGTON STREET
PERRY, FLORIDA 32348

IN MEMORIAL OF
KATHLEEN MCCARTHY BISHOP 1966-2013

(850) 584-6113
FAX (850) 584-2433

August 9, 2016

VIA E-MAIL AND REGULAR MAIL

Mr. Dustin Hinkel
County Administrator
County Offices
201 East Green Street
Perry, Florida 32347

Re: Memorandum of Agreement with the Division of Emergency Management

Dear Dustin:

I have reviewed the above agreement and it looks okay to me.

Please be aware of paragraph 2 (B) (viii), if the County desires to enhance the coverage, then the County is responsible for the additional costs with Everbridge and the County would need to notify the Division.

Thank you and I hope you are doing fine.

Respectfully,


Conrad C. Bishop, Jr.

CCB/kp

Cc: Hon. Annie Mae Murphy

MEMORANDUM OF AGREEMENT
BETWEEN THE FLORIDA DIVISION OF EMERGENCY MANAGEMENT AND
THE TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

This Memorandum of Agreement (the "Agreement") is made and entered into by the Florida Division of Emergency Management (hereinafter referred to as the "Division") and the Taylor County Board of County Commissioners (hereinafter referred to as the "County").

WHEREAS Section 252.35(2)(a)6, Florida Statutes (2015), (F.S.), requires the Division to establish a system of communications and warning to ensure that the state's population and emergency management agencies are warned of developing emergency situations and can communicate emergency response decisions;

WHEREAS the Division has executed contract DEM-16-PG-E4-13-00-22-379 with Everbridge, Inc. for the provision of Statewide alert and mass notification services in support of its AlertFlorida Initiative, hereinafter referred to as the "notification system;"

WHEREAS the Division is funding and providing the notification system at no local cost to eligible subdivisions for the initial contract and all renewal years (ending on June 30, 2019), contingent upon an annual appropriation by the Florida Legislature;

WHEREAS Section 252.38 F.S. establishes Emergency Management powers of political subdivisions and constructs safeguarding the life and property of its citizens as an innate responsibility of the governing political body of each political subdivision of the state, and;

WHEREAS the County desires to utilize the notification system provided by the Division to transmit alerts, notifications, and other authorized public safety messaging to residents, businesses, and visitors located in or transiting through their political subdivision, while performing its powers under section 252.38 F.S.

NOW, THEREFORE, in consideration of the cooperative effort between the parties contained herein, the parties agree as follows:

1. TERM OF AGREEMENT

This agreement is effective on the date of execution by the last-signing party and shall remain in effect for the duration of services provided under contract DEM-16-PG-E4-13-00-22-379, but no later than June 30, 2019.

2. DUTIES AND RESPONSIBILITIES

A. Division of Emergency Management

The Division:

- I. Has assigned a contract manager for the notification system pursuant to section 287.057(14) F.S. who will enforce the performance of the contract

- terms and conditions and serve as a liaison with the contractor, Everbridge Inc.
- II. Reserves the right to access any political subdivision's account or organization in the system for purposes of contract management, and to monitor system activity and usage.
 - III. Will limit the number of personnel with high-level administrative access credentials to the system, and will take reasonable efforts to prevent the unauthorized disclosure of contact information protected under section 119.071(5)(j) F.S.
 - IV. Reserves the right to launch a statewide notification to all available "opt-in" contact data in the system resulting from a catastrophic natural or technological disaster, a widespread public health emergency, an imminent or actual attack of a foreign military power, or a similar emergency where a delay to coordinate locally-initiated notifications would endanger the health and safety of the State's population.
 - V. Reserves the right to require certain notification subscription options be set to "mandatory" in a subdivision's public-facing opt-in portal, including:
 - a. Tornado Warnings
 - b. Flash Flood Warnings
 - c. Hurricane Warnings
 - d. Statewide Notifications
 - e. Countywide Notifications
 - VI. Will, upon termination of the contract, distribute the system's recipient contact data to the County as specified in Minimum Support Requirement number eight of the contract's Scope of Work.

B. Taylor County

The County:

- I. Acknowledges the terms and conditions of the contract, which is attached hereunto, and agrees to abide by the applicable terms thereof, including but not limited to the terms of the Everbridge Core Platform Agreement, incorporated in the contract as Exhibit "E."
- II. Agrees to abide by the Everbridge Acceptable Use Policy, available via <http://www.everbridge.com/aup> and incorporated in the contract as Exhibit "F."
- III. Agrees to place a "powered by AlertFlorida" icon that shall encompass no greater or less than 10% the banner image of the County's public-facing opt-in portal(s) for continuity with statewide branding.
- IV. Acknowledges the following authorized uses of the system and agrees to limit use of the system to those uses, defined by the Division as the following categories of notifications:
 - a. Population protective actions, such as evacuation orders, shelter-in-place warnings, boil water notices, and similar actions;
 - b. Emergency preparedness and response information, such as the availability of sand bag stations for flood-fighting efforts, notification

- of planned or anticipated disruption of municipal services & municipal or commercial utilities, the establishment of emergency shelters, implementation of curfews and other law enforcement security measures, the designation of security zones around specific planned events, the establishment of keywords for event-specific messaging, and other similar messaging that conveys a change in the County's steady-state operational posture;
- c. Disaster recovery information, such as the location of disaster recovery centers, availability of voluntary agency or governmental disaster recovery assistance, and updates on debris clearance and the allowance of re-entry into a portion of the subdivision impacted by a disaster;
 - d. Emergency preparedness exercises, including operational tests of notification capability and public notification of functional or full-scale public safety and emergency management exercises occurring within the jurisdiction;
 - e. Law enforcement searches for a missing person or a manhunt for escaped convicts or suspects evading arrest;
 - f. Automated weather warnings provided by the National Weather Service;
 - g. Notification and recall of County employees, contractors, and other response partners that support the activation of the County's Emergency Operations Center or supplement the staffing of existing public safety response and recovery functions, including the staffing of specialty response teams, and;
 - h. Non-Weather Messages (NWMs) that the County is authorized to broadcast via their IPAWS Alerting Authority including a Civil Danger Warning, Civil Emergency Message, Fire Warning, Hazardous Materials Warning, Local Area Emergency, 911 Telephone Outage Emergency, Nuclear Power Plant Warning, Radiological Hazard Warning, and future NWM's that may become available.
- V. Acknowledges that access to the Integrated Public Alert and Warning System (IPAWS) and Emergency Alert System (EAS) initiation features available in the system is contingent on the County:
 - a. Acquiring its Collaborative Operating Group (COG) license from the Federal Emergency Management Agency (FEMA), and;
 - b. Registering with the National Weather Service for access to HazCollect.
 - VI. Agrees to make a reasonable effort to supply the Division with requested information about any existing or recent local contracts for mass notification services, for the purpose of developing quantitative cost impact and qualitative notification capability measures in support of legislative budget requests for continued funding of the initiative.
 - VII. Agrees to develop a written Standard Operating Procedure (SOP) that governs access to and use of the notification system within the County, to include, at minimum, the following topics:

- a. Defining the local organization administrator(s);
- b. Defining procedures for requesting administrative access within the jurisdiction and the training requirements for granting such access;
- c. Establishing a message drafting and approval process;
- d. Discussing the difference between "opt-in" and "opt-out" contact data, limiting the use of "opt-out" data to imminent or actual life threatening emergencies, and considering the time of day when initiating notifications that use "opt-out" data, and;
- e. Specifying the responsibility and frequency of periodically reviewing all administrative user accounts within the County's organization(s) to validate the continued relationship and need for access of each current user.

The SOP must be developed within 60 days of the effective date of this agreement and is subject to review by the Division at any time during the agreement.

- VIII. Acknowledges that Everbridge, Inc. provides additional notification system capabilities and services which are not covered under the Division's contract for the notification system (hereafter referred to as "non-covered services"). If the County desires to enhance their notification capabilities by adding non-covered services to their organization(s), then the County will be responsible for any additional costs incurred as a result of adding those services, plus any costs arising from technical support of the non-covered services, payable directly to Everbridge. The County will notify the Division of its intent to add non-covered services prior to deployment, and will provide an additional notification after deployment, with the intent of maintaining visibility on the vendor's provision of support and maintenance on covered features.

3. POINTS OF CONTACT

The parties shall direct all matters arising in connection with the performance of this Agreement to the attention of the respective contact persons named below for resolution or action:

For the Division:

Brian Misner, Special Projects Coordinator
 2555 Shumard Oak Boulevard
 Tallahassee, Florida 32399
 Telephone: 850-922-5332
 Email: brian.misner@em.myflorida.com

For the County:

Steve Spradley
 591 US Highway 27 East
 Perry, Florida 32347
 Telephone: 850-838-3575
 Email: steve.spradley@taylorcountygov.com

4. TERMINATION OF AGREEMENT

The parties may terminate this Agreement at any time upon thirty days' written notice to the points of contact specified herein.

5. LIABILITY

Each party hereto agrees that it shall be solely responsible for the negligent or wrongful acts of its employees and agents. Nothing contained herein shall constitute a waiver by either party of its sovereign immunity or the provisions of 768.28, F.S. Nothing herein shall be construed as consent by either party to be sued by third parties.

6. ATTACHMENTS

The following attachments are incorporated hereunto by reference:

- A. Attachment 1 – Definitions
- B. Attachment 2 – Contract DEM-16-PG-E4-13-00-22-379 between the Division and Everbridge, Inc.

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by their duly authorized representatives on the dates appearing beneath their respective signatures.

**FLORIDA DIVISION OF
EMERGENCY MANAGEMENT**

By: _____

Date

**TAYLOR COUNTY BOARD OF
COUNTY COMMISSIONERS**

By: _____

Date

*[Add additional lines for
approvals, attestations, filings,
or seals as needed]*

Attachment 1 – Definitions

Account – An account is the access point to the web-based Everbridge Suite platform. Accounts are segmented into Organizations, and are typically segmented further into numerous groups.

Contact - Individuals who may receive notifications from or through the notification system, including any individual person who provides their personal contact information through an opt-in portal.

Opt-In – The process whereby a contact subscribes to receive notifications through an organization-specific web portal, or by sending the subdivision's keyword(s) or zip code(s) to an established SMS short code.

Opt-Out – Contact and address point data loaded into the Everbridge Platform by a political subdivision without the intervention of the contact.

Organization - In the Everbridge Platform, an organization ("Org") contains a contact database and the capability to send notifications. Each Org has a mapping feature that allows users to send notifications based on registered locations of contacts. Orgs can be configured with a variety of settings and users can view and create numerous reports.

User - Individuals assigned roles and granted permission to manage users, manage contacts and groups, edit settings, and/or send notifications within the Everbridge platform.