AGENDA
COOS COUNTY BOARD OF COMMISSIONERS
Owen Building Large Conference Room
August 5, 2014
8:30 A.M.

1. EXECUTIVE SESSION under the authority of ORS 192.660
   A. (2)(i) Employment Related Performance Reviews

PLEDGE OF ALLEGIANCE

2. CITIZEN COMMENTS (agenda items or general comments) – limited to 3 minutes per person
   scheduled to begin at 9:30 AM

3. DEPARTMENT HEADS
   A. Update from Siuslaw National Forest on Designated Trail Project- BOC
   B. Request Consideration for Economic Development Application from OIMB- BOC
   C. Request Approval of Commercial Lease for Office Space & Authorize Chair to Sign- Health & Human
      Services (HHS)
   D. Request Approval of Aerial Spraying Contract- Forestry
   E. Request Approval of Wulfy Beach Cooperative Agreement & Authorize Department Head to Sign-
      Parks
   F. Request Approval of Dispatch Agreement with Sumner Rural Fire Department- Sheriff
   G. Request Approval of MOU with Coquille Indian Tribe for Adding Portions of County Roads to Tribal
      Inventory System- Road

4. CONSENT CALENDAR- administrative matters not up for discussion
   A. Ratification of All Routine Expenditures, Tax Overpayments and Adjustments and
      Transfer of Funds Within the Budget
      Transfer of Appropriations Within a Department- Sheriff/Dunes- extra help
   B. Items Previously Approved (authorize Chair to sign where necessary)
      2014 Homeland Security Grant Application- Sheriff/Emergency Management
      Temporary Liquor License Application- Wild Women of Charleston
   C. Software Licenses/Maintenance Agreements (authorize Chair to sign where necessary)
      Helion Maintenance Agreement- Planning- $515

5. LATE AGENDA ITEMS

6. COMMISSIONERS REPORTS

This agenda does not limit the ability of the Commissioners to consider additional subjects. The Board reserves the right to place a time limit on public testimony on any matter. The meeting place is handicapped accessible; if special accommodation is needed, please contact the office at least 24 prior to the meeting.
AGENDA ITEM COVERSHEET

Agenda Item Title: Executive Session

Department: BOC/HR Requested Agenda Date: 8/5/14

Contact Person: Phone/Ext.: 

Background and description of need or problem:

- ORS 192.660 (2)(i) Employment Related Performance Review

Funding Source:

Requested Action:

Date: 

Signature of Dept. Head: ________________________________

If this is a Human Resources issue, forward to the Treasurer who will forward it to Human Resources. For all other matters, forward the document to Counsel no later than the Monday prior to the Agenda deadline. Counsel will forward to Treasurer.

If this is a contract or grant:

☐ Is the contract or grant an original?
☐ Is the Contract/Grant Summary Form attached?
☐ Is the contract signed first by the vendor (except state/federal grants or contracts)?
☐ If insurance is required, is the insurance certificate attached?
☐ Is the Clerk’s Coversheet attached or do you want it returned to you for filing?

County Counsel

Treasurer

Rev. 3/10/11
AGENDA ITEM COVERSHEET

Agenda Item Title: Update from Siuslaw National Forest

Department: BOC Requested Agenda Date: 8/5/14

Contact Person: Melissa Cribbins Phone/Ext.: 7539

Background and description of need or problem: Carl Bower will be here to give an update on the designated trail project

Funding Source: n/a

Requested Action:

Date: Signature of Dept. Head: ________________________________

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County Counsel

Treasurer

Rev. 3/10/11
AGENDA ITEM COVERSHEET

Agenda Item Title: Economic Development Grant Application from OIMB

Department: BOC Requested Agenda Date: 8/5/14

Contact Person: Melissa Cribbins Phone/Ext.: 7539

Background and description of need or problem: Craig Young has submitted a grant application for the Oregon Institute of Marine Biology to cover unforeseen expenses associated with completing the Charleston Marine Life Center.

Funding Source: Economic Development

Requested Action: Consider approving the application; direct County Counsel to draft a letter of understanding for grant if approved

Date: Signature of Dept. Head: ____________________________

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County Counsel ____________________________________________

________________________________________________________

Treasurer ________________________________________________

________________________________________________________

See Original Packet for Complete Application

Rev. 3/10/11
AGENDA ITEM COVERSHEET

Agenda Item Title: Commercial Lease for office space

Department: Health & Human Services
Contact Person: Ginger Swan

Requested Agenda Date: 07/29/2014
Phone/Ext.: 541-751-2547

$15/14

Background and description of need or problem: The Health and Human Services department would like to rent addition office space for employees. We found suitable office space that is very close to the North Bend Annex. The owner is willing to provide us with a 2 year lease through Prestige Property Management.

No County General Funds will be used for this contract.

Funding Source: 021-1300-441.22-15

Requested Action: Approve commercial lease

Date: 07/18/2014
Signature of Dept. Head: [Signature]

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- [ ] Is the Clerk's Coversheet attached or do you want it returned to you for filing?

Departments Affected:

Counsel: [Signature]

Treasurer: [Signature]

Human Resources: [Signature]

BOC forwards signed Contract/Grant to: Return both the HHS, MH-Carrie McKim

Rev. 6/13/11
CONTRACT / GRANT SUMMARY FORM

Clerk's File C&A No.: (complete after filed with Clerk) Internal Contract/Agreement or Grant No.: 1300-OHP13-43

Name/Agency Name and Address: Prestige Property Management, PO Box 1511, North Bend, OR 97459

Contact Person: JuLene Gerami Phone No. 541-751-9415

Amount of Contract/Grant Award: $37,600

Payment Terms: 3,100 1st month then 1,500 monthly (state lump sum or amount and time of payments)

Start Date: 09/01/2014 End Date: 09/30/2016

County Department and Employee Responsible for Performance: Mental Health, David Geels, Director

Description: This contract provides additional office space

FINANCIAL INFORMATION

<table>
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10.xxx USDA 14.xxx HUD 20.xxx USDOT 66.xxx EPA 84.xxx Dept. of Education


NOTE: If the contract/grant is associated with more than one CFDA number, each segment must have its own summary form.

☐ New ☐ Renewal ☐ Modification
Previous Amount: $ Original Amount: $
Previous Date: Original Date:

Automatic Renewal? ☐ Yes ☒ No Staff Requirements: ☐ New ☒ Existing ☐ Subcontract
Will unemployment cost be incurred? ☐ Yes ☒ No

PUBLIC CONTRACTING INFORMATION

Method of Selection: Type of Contract:
☐ Bid ☐ None ☐ New (complete sections below)
☐ Quote ☐ Other ______
☐ Proposal ☐ Renewal (no need to complete sections below)

Type of Contract:
☐ Goods and Services - If Not Using Bid or Proposal, Mark Exemption:
☐ Under $5000 ☐ Equipment Maintenance
☐ Under $50,000 for Quotes ☐ Office Supplies
☐ Under $150,000 & Approval from Board for Quotes ☐ Used Vehicles
☐ Sole Source ☐ State Purchasing
☐ Contract with Public Agency ☐ Other ______

☐ Public Improvement – If Not Using Bid, Mark Exemption:
☐ Under $5000 ☐ Alternative Contracting Method Approved by Board
☐ Under $50,000 for Quotes ☐ Other ______
☐ Under $100,000 & Not a Transportation Project for Quotes

☐ Personal Services Contract – If Not Using Proposal, Mark Exemption:
☐ Under $50,000
☐ Under $150,000 & Approval from Board

Will project be reported to Bureau of Labor for Prevailing Wages under ORS 279C.800? ☐ Yes ☒ No

Certificate of insurance required? ☒ Yes ☐ No

Form of contract: ☐ Oral ☒ Written (attach the written contract)

Date Approved by BOC: __________ Review by Counsel: __________

Contract and Grant Summary Form Revised 6/28/05
AGENDA ITEM COVERSHEET

Agenda Item Title: Award of Contract SP-1-14

Department: Forestry  Requested Agenda Date: 8/5/14

Contact Person: Lance Morgan  Phone/Ext.: 7751

Background and description of need or problem: Competitive quotes were received on 7/17/14 for aerial spraying of 236 acres of County Forest Land. Applebee Aviation submitted the low quote of $86.02/Ac. (See attached results)

Funding Source: 103-9000-461.36-21 Reforestation

Requested Action: Award contract No. SP-1-14 to Applebee Aviation, Inc.

Date: 7-28-14  Signature of Dept. Head: 

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☐ Is the Clerk’s Coversheet attached or do you want it returned to you for filing?

Departments Affected:

COUNSEL: ❑

TREASURER: ☒

HUMAN RESOURCES: ☒

BOC forwards signed Contract/Grant to:

Commissioners Initials to Place on Agenda ONLY: 

Rev. 3/10/11
RESULTS OF QUOTE OPENING HELD 7/17/14
CONTRACT NO. SP-1-14

Contractor: Wilbur Ellis Co.
P.O. Box 750
Napavine, WA 98565

Price per Acre: $ No Bid

Contractor: Applebee Aviation, Inc.
P.O. Box 389
Banks, OR 97106

Price per Acre: $ 86.02

Contractor:

Price per Acre: $

Contractor:

Price per Acre: $
AGENDA ITEM COVERSHEET

Agenda Item Title: Approve Wulfy Beach Cooperative Agreement

Department: BOC/Counsel Parks Requested Agenda Date: 8/5/2014

Contact Person: Josh Soper Harry Robson Phone/Ext.:

Background and description of need or problem: Coos County, Tenmile Lakes Basin Partnership, the City of Lakeside, and Ray Wulffenstein, have discussed working together to cooperatively develop and maintain the beach picnic, and swimming areas at Tenmile Lake County Parks. To do so, the Board must approve the attached Cooperative Agreement.

Funding Source: NA

Requested Action: Approve Wulfy Beach Cooperative Agreement

Date: 7/29/2014 Signature of Dept. Head: _________________________

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Departments Affected:

COUNSEL: ✓

______________________________

No Contract Summary Form attached

__________________________________

Rev. 8/29/07
AGENDA ITEM COVERSHEET

Agenda Item Title: DISPATCH SERVICES AGREEMENT

Department: Sheriff’s Office - Dispatch

Requested Agenda Date: 8/5/14

Contact Person: Sgt. Pat Downing

Phone/Ext.: 7811

Background and description of need or problem: Dispatch Services Agreement for FY 14-15: Sumner Rural Fire Department ($190.94).

Funding Source: Revenue to Line Item # 342.01-02

Requested Action: Board review, approval and signature.

Date:

Signature of Dept. Head: Craig Conger

If this is a Human Resources issue, forward to the Treasurer who will forward it to Human Resources. For all other matters, forward the document to Counsel no later than the Monday prior to the Agenda deadline. Counsel will forward to Treasurer.

If this is a contract or grant:
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- Is the contract signed first by the vendor (except state/federal grants or contracts)?
- If insurance is required, is the insurance certificate attached?
- Is the Clerk’s Coversheet attached or do you want it returned to you for filing?

Departments Affected:

COUNSEL:

TREASURER:

HUMAN RESOURCES:

BOC forwards signed Contract/Grant to: Jackie McDaniel, Sheriff’s Office

Rev. 8/29/07
CONTRACT / GRANT SUMMARY FORM

Clerk's File C&A No.: ___________ (complete after filed with Clerk)  Internal Contract/Agreement or Grant No.: _____

Name/Agency Name and Address: Sumner Rural Fire Department
Contact Person: Chief Roger Goude  Phone No. (541) 267-3781
Amount of Contract/Grant Award: $ 190,94
Payment Terms: Yearly (state lump sum or amount and time of payments)
Start Date: July 1, 2014  End Date: June 30, 2015
County Department and Employee Responsible for Performance: Coos County Sheriff's Office; 250 N. Baxter Str., Coquille, OR 97423; Sgt. Pat Downing (541) 396-7811
Description: Dispatch Services Agreement

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11.xxxx Dept. of Commerce  16.xxxx USDOT  39.xxxx General Svs. Admin.  83.xxxx FEMA  93.xxxx USDHHS

NOTE: If the contract/grant is associated with more than one CFDA number, each segment must have its own summary form.

□ New □ Renewal □ Modification
□ Automatic Renewal? Yes □ No
Previous Amount: $ ____________________________
Previous Date: ____________________________
Original Amount: $ ____________________________
Original Date: ____________________________
Staff Requirements: □ New □ Existing □ Subcontract
Will unemployment cost be incurred? □ Yes □ No

PUBLIC CONTRACTING INFORMATION

Method of Selection:
□ Bid □ None
□ Quote □ Other ______
□ Proposal

Type of Contract:
□ New (complete sections below) □ Renewal (no need to complete sections below)
□ Modification (no need to complete sections below)

Type of Contract:
□ Goods and Services - If Not Using Bid or Proposal, Mark Exemption:
□ Under $5000  □ Equipment Maintenance
□ Under $50,000 for Quotes  □ Office Supplies
□ Under $150,000 & Approval from Board for Quotes  □ Used Vehicles
□ Sole Source  □ State Purchasing
□ Contract with Public Agency  □ Other ______

□ Public Improvement – If Not Using Bid, Mark Exemption:
□ Under $5000  □ Alternative Contracting Method Approved by Board
□ Under $50,000 for Quotes
□ Under $100,000 & Not a Transportation Project for
Quotes
□ Personal Services Contract – If Not Using Proposal, Mark Exemption:
□ Under $50,000  □ Other ______
□ Under $150,000 & Approval from Board

Will project be reported to Bureau of Labor for Prevailing Wages under ORS 279C.800? □ Yes □ No
Certificate of insurance required? □ Yes □ No
Form of contract: □ Oral □ Written (attach the written contract)

Date Approved by BOC: ___________  Reviewed by Counsel: ___________
AGENDA ITEM COVERSHEET

Agenda Item Title: Coquille Indian Tribe would like to add portions of the Coos County roadway system to their Tribal Transportation Program Roadway Inventory.

Department: Road Dept.                Requested Agenda Date: 8/5/14

Contact Person: John Rowe                  Phone/Ext.: 7665

Background and description of need or problem: The Coquille Indian Tribe would like to add portions of our County roads to the Tribe’s TTP Road Inventory for additional funding consideration for future roadway improvements.

Funding Source: n/a

Requested Action: Approve & Sign Coquille Indian Tribe’s Acknowledgement of Public Responsibility, Statement of Inability to Provide Funds and Verification of Federal Aid Category.

Date: 6-4-14   Signature of Dept. Head: John Rowe

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- [ ] Is the Clerk’s Coversheet attached or do you want it returned to you for filing?

Departments Affected:

COUNSEL: [ ]

TREASURER: [ ]

HUMAN RESOURCES: [ ]

BOC forwards signed Contract/Grant to:
ROAD DEPT.

Commissioners Initials to Place on Agenda ONLY: ______________________

Rev. 8/29/07
CONTRACT / GRANT SUMMARY FORM

Clerk's File C&A No.: __________ (complete after filed with Clerk) Internal Contract/Agreement or Grant No.: __________

Name/Agency Name and Address: Coquille Indian Tribe, 3050 Tremont Street, North Bend, OR 97459

Contact Person: Todd Tripp Phone No. 541-756-0904

Amount of Contract/Grant Award: $ N/A

Payment Terms: N/A (state lump sum or amount and time of payments)

Start Date: upon signing End Date: none

County Department and Employee Responsible for Performance: Road Department, John Rowe

Description: Coquille Indian Tribe would like to add portions of county roads to the Tribe's Transportation Program Roadway Inventory.

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- 20.xxx USDOT
- 66.xxx EPA
- 84.xxx Dept. of Education
- 11.xxx Dept. of Commerce
- 18.xxx USDOJ
- 83.xxx FEMA
- 93.xxx USDHHS

NOTE: If the contract/grant is associated with more than one CFDA number, each segment must have it's own summary form.

□ New □ Renewal □ Modification

Previous Amount: $ Original Amount: $

Previous Date: Original Date:

Automatic Renewal? □ Yes □ No

Staff Requirements: □ New □ Existing □ Subcontract

Will unemployment cost be incurred? □ Yes □ No

PUBLIC CONTRACTING INFORMATION

Method of Selection: □ Bid □ Quote □ Other IGA □ Proposal

Type of Contract:

□ New (complete sections below)

□ Renewal (no need to complete sections below)

□ Modification (no need to complete sections below)

Type of Contract:

□ Goods and Services - If Not Using Bid or Proposal, Mark Exemption:

- Under $5000
- Under $50,000 for Quotes
- Under $150,000 & Approval from Board for Quotes
- Sole Source
- Contract with Public Agency

□ Equipment Maintenance

□ Office Supplies

□ Used Vehicles

□ State Purchasing

□ Other ______

□ Public Improvement – If Not Using Bid, Mark Exemption:

- Under $5000
- Under $50,000 for Quotes
- Under $100,000 & Not a Transportation Project for Quotes

□ Alternative Contracting Method Approved by Board

□ Other ______

□ Personal Services Contract – If Not Using Proposal, Mark Exemption:

- Under $50,000
- Under $160,000 & Approval from Board

□ Other ______

Will project be reported to Bureau of Labor for Prevailing Wages under ORS 279C.800? □ Yes □ No

Certificate of insurance required? □ Yes □ No

Form of contract: □ Oral □ Written (attach the written contract)

Date Approved by BOC: __________ Reviewed by Counsel: ___