

**REVISED 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 CANCELED
  - 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**
  - A. Request Approval of Lease for Office Space- HHS
  - B. Request Approval of Office Space Rental Agreement- Veterans
  - C. Request Approval of Contract with Southern Oregon Veterans Outreach- Veterans
  - D. Request Approval to Purchase Boat from Spokane County Sheriff's Office- Sheriff
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.

BOC only:  
Consent Agenda \_\_\_\_\_  
Regular Agenda \_\_\_\_\_

**LATE AGENDA ITEM COVERSHEET**

**Agenda Item Title:** Request Approval of Lease for Office Space

**Department:** Health & Human Services

**Requested Agenda Date:** 8/5/14

**Contact Person:** Ginger Swan

**Phone/Ext.:** 2547

**Background and description of need or problem:** Health & Human Services Department would like to request approval of a lease for office space for employees. We found suitable office space close to the Coquille Courthouse and the owner is willing to provide a 2-year lease.

**Funding Source:** 021-1300-441.22-15 Rent

**Requested Action:** Approval of lease with Brad Shely for office space in Coquille.

**Date:** 8/1/14

**Signature of Dept. Head:** approved via email

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?

Departments Affected:

COUNSEL: CS

TREASURER: B

BOC forwards signed Contract/Grant to:

Commissioners Initials to Place on Agenda ONLY: \_\_\_\_\_

5A

**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: Brad Shely, PO Box 486, Coquille, OR 97423

Contact Person: Brad Shely Phone No. 541-921-0171

Amount of Contract/Grant Award: \$ \$900 per month; with a \$400 security deposit

Payment Terms: As invoiced (state lump sum or amount and time of payments)

Start Date: 8/1/14 End Date: 8/1/2016

County Department and Employee Responsible for Performance: Ginger Swan, Mental Health

Description: lease of office space

**FINANCIAL INFORMATION**

STATE %	OTHER %	FEDERAL % (CFDA # Required)	Catalog of Federal Domestic Asst. *(CFDA) Number

\*CFDA is a five digit number in the following format: xx.xxx. The first two digits designate the federal agency and the last three the grant description. The following is a partial listing of the two digit agency identifier:

10.xxx USDA      14.xxx HUD      20.xxx USDOT      66.xxx EPA      84.xxx Dept. of Education  
11.xxx Dept. of Commerce      16.xxx USDOJ      39.xxx General Svs. Admin.      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
- Proposal
- None
- Other \_\_\_\_\_

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 space

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 \$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:   *CS*

BOC only:  
Consent Agenda \_\_\_\_\_  
Regular Agenda \_\_\_\_\_

### AGENDA ITEM COVERSHEET

**Agenda Item Title:** Office Space Rental Agreement

**Department:** Veteran's Department

**Requested Agenda Date:** 8/5/2014

**Contact Person:** Eric Gleason

**Phone/Ext.:**

**Background and description of need or problem:** Veteran's Department would like to rent office space in North Bend from Oregon Coast Community Action (ORCCA) for the rate of \$90 per month. Renting this office space will allow the Veteran's Department to better serve the veterans in the North Bend and Coos Bay area.

**Funding Source:** Enhancement from the State

**Requested Action:** Approve Office Space Rental Agreement

**Date:** 8/4/2014

**Signature of Dept. Head:** approved via email

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Departments Affected:

**COUNSEL:** dg

**TREASURER:** g

*No Contract Summary Form Provided*

*5B*

BOC only:  
Consent Agenda \_\_\_\_\_  
Regular Agenda \_\_\_\_\_

### AGENDA ITEM COVERSHEET

**Agenda Item Title:** Southwestern Oregon Veterans Outreach Inc. Contract

**Department:** Veteran's Department

**Requested Agenda Date:** August 5, 2014

**Contact Person:** Eric Gleason, CVSO

**Phone/Ext.:** 7591

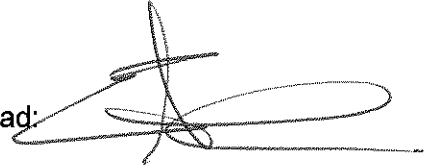
**Background and description of need or problem:** Approval of SOVO Contract

**Funding Source:** Enhancement from the State

**Requested Action:** APPROVAL/Sign and authorize contract

**Date:** August 4, 2014

**Signature of Dept. Head:**




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- Is the Clerk's Coversheet attached?

Departments Affected:

COUNTY COUNSEL: 

TREASURER: 

HUMAN RESOURCES:

Commissioners Initials to Place on Agenda ONLY: \_\_\_\_\_



**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: Southwestern Oregon Veterans Outreach, Inc., 1611 Virginia Ave. Ste 212, North Bend, OR 97459

Contact Person: Tom Benz Phone No. 541 756-8718

Amount of Contract/Grant Award: \$ advancement of \$2,000; 3 quarterly of \$2,000

Payment Terms: quarterly upon receipt of reports; see Section 3 of Exhibit A for details (state lump sum or amount and time of payments)

Start Date: 7/01/14 End Date: 6/30/15

County Department and Employee Responsible for Performance: County Veterans Department, Eric Gleason CVSO

Description: Certified Veteran Service Representatives perform consulting services

**FINANCIAL INFORMATION**

STATE %	OTHER %	FEDERAL % (CFDA # Required)	Catalog of Federal Domestic Asst. *(CFDA) Number

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10.xxx USDA      14.xxx HUD      20.xxx USDOT      66.xxx EPA      84.xxx Dept. of Education  
11.xxx Dept. of Commerce      16.xxx USDOJ      39.xxx General Svs. Admin.      83.xxx FEMA      93.xxx USDHHS

NOTE: If the contract/grant is associated with more than one CDFA 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       None  
 Quote       Other Sole Source  
 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:

- |   |  |
|---|--|
| <input type="checkbox"/> Under \$5000                                     | <input type="checkbox"/> Equipment Maintenance |
| <input type="checkbox"/> Under \$50,000 for Quotes                        | <input type="checkbox"/> Office Supplies       |
| <input type="checkbox"/> Under \$150,000 & Approval from Board for Quotes | <input type="checkbox"/> Used Vehicles         |
| <input type="checkbox"/> Sole Source                                      | <input type="checkbox"/> State Purchasing      |
| <input type="checkbox"/> Contract with Public Agency                      | <input type="checkbox"/> Other _____           |

Public Improvement - If Not Using Bid, Mark Exemption:

- |  |   |
|--|---|
| <input type="checkbox"/> Under \$5000  | <input type="checkbox"/> Alternative Contracting Method Approved by Board |
| <input type="checkbox"/> Under \$50,000 for Quotes                                 | <input type="checkbox"/> Other _____                                      |
| <input type="checkbox"/> 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)

Contract and Grant Summary Form      Revised 6/28/05

Date Approved by BOC: \_\_\_\_\_ Reviewed by Counsel: \_\_\_\_\_

BOC only: Consent Agenda _____ Regular Agenda _____
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### AGENDA ITEM COVERSHEET

**Agenda Item Title:** ACB boat purchase from Spokane County Sheriff's Office.

**Department:** Sheriff's Office/ Marine Division

**Requested Agenda Date:** ~~06-17-14~~ 8/5/14

**Contact Person:** Sgt. Will Coleman

**Phone/Ext.:** 7807

**Background and description of need or problem:** The Oregon State Marine Board and the Coos County Sheriff's Office has identified a need to replace one of the vessels in our fleet (1992 21' Sea Swirl Striper).

The Coos County Sheriff's Office and the Oregon State Marine Board (OSMB) will purchase a 2006 23' Aluminum Chambered Boat (ACB) and trailer from Spokane County Sheriff's Office, Washington. See attached paperwork and photographs of vessel and trailer the Coos County will be taking possession of.

The purchase will include trading a 1998 23'9" Almar Raiv and trailer plus \$17,500. See attached Offer Letter from Spokane County Sheriff's Office describing the vessels and trailers involved.

The Almar Raiv is a vessel that has been transferred into Coos County's possession for the purpose of this trade. Coos County will have to remit a check for \$17,500 to the Spokane County Sheriff's office. Coos County will then be reimbursed by the Oregon State Marine board for this dollar amount.

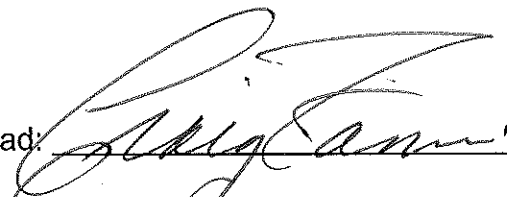
The 1992 striper will be released by the Oregon State Marine board for Coos County to sell and use for additional outfitting for the ACB boat or other needs within the Coos County Sheriff's Office Marine program.

**Funding Source:** Requested from Coos County General Fund, which will be reimbursed by the Oregon State Marine Board.

**Requested Action:** Board approval. *+ signature*

Date: 06-06-14

Signature of Dept. Head:



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Regular Agenda \_\_\_\_\_

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

Departments Affected:

COUNSEL: CS

TREASURER: This purchase has not been budgeted. B

HUMAN RESOURCES: \_\_\_\_\_

BOC forwards signed Contract/Grant to: