

**REVISED AGENDA**  
COOS COUNTY BOARD OF COMMISSIONERS  
Owen Building Large Conference Room  
August 3, 2015  
1:00 P.M.

1. **EXECUTIVE SESSION under the authority of ORS 192.660**  
**PLEDGE OF ALLEGIANCE**
2. **CITIZEN COMMENTS (agenda items or general comments) – limited to 3 minutes per person- scheduled to begin at 1:00 PM**
3. **CCAT GOVERNING BODY**
  - A. Correction to 2015/16 Budget
4. **DEPARTMENT HEADS**
  - A. Request Approval of Transfer of Funds & Purchase of Steel Piling- Road
  - B. Request Approval to Purchase Tax Account 29610- Land Agent/Surveyor
  - C. Request Approval to Purchase Canine- Sheriff
  - D. Request Approval to Purchase 4 In-Car Boosters- Sheriff
  - E. Request Approval of Resolution Appointing Interim County Counsel- County Counsel/Human Resources
5. **CONSENT CALENDAR- administrative matters not up for discussion**
  - A. **Approval of Minutes**  
Regular Meeting Minutes- July 7, 2015
  - B. **Items Previously Approved (authorize Chair to sign where necessary)**  
Temporary Liquor License Use for the Following: Sharkbites Seafood Café (3), Backside Brewing, Abique Wind Vineyard, River's Edge Winery, Davey Jones Locker, Naked Winery  
In-Kind Contribution to Weed Board- not to exceed \$700- Road/Planning  
Contract between Weed Board & Coquille Watershed Association- Weed Board  
Pay Scale/Advertising/Filling Position of County Counsel- County Counsel/HR
  - C. **Software Licenses/Maintenance Agreements (authorize Chair to sign where necessary)**  
Change of Business Name (Stancil Solutions to Synergon Solution Inc)- Sheriff
6. **LATE AGENDA ITEMS**
  - A. Request Approval of Agreement with OHSU & Authorize Chair to Sign- Coos Health & Wellness
  - B. Request Approval of Reappointment to Planning Commission- BOC
7. **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:** Agreement with Oregon Health & Science University

**Department:** Health & Human Services

**Requested Agenda Date:** 08/3/2015

**Contact Person:** Ginger Swan

**Phone/Ext.:** 541-751-2547

**Background and description of need or problem:** Collection of Feasibility Data on Existing Obesity Prevention Programs and Built Environments in Coos County.

**Funding Source:** Oregon Health & Science University

**Requested Action:** *agreement w/OHSCU*  
**Approve purchase of server** *and authorize Chair to sign*

**Date:** 07/30/2015

**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.

**Departments Affected:**

**Counsel:** *KR* \_\_\_\_\_

**Treasurer:** *OK, B* \_\_\_\_\_

**Human Resources:** *na* \_\_\_\_\_

**BOC forwards signed Contract/Grant to:** *na* *CKW*

*6A*

## CONTRACT / GRANT SUMMARY FORM

Clerk's CJ No.: \_\_\_\_\_ (complete after filed with Clerk) Contract/Agreement/Grant No.: \_\_\_\_\_

Name/Agency Name and Address: Oregon Health & Science University, 3181 SW Sam Jackson Park Rd, L106RGC, Portland, OR 97239

Contact Person: Star Leigh Wall Phone No. 503-494-7769

Amount of Contract/Grant Award: \$ 10500

Payment Terms: One lump payment. (state lump sum or amount and time of payments)

Start Date: 7/1/2015 End Date: 6/30/2016

County Department and Employee Responsible for Performance: Coos Health & Wellness, Ginger Swan, Director

Description: Collection of Feasibility Data on Existing Obesity Prevention Programs & Built Environments in Coos County

### FINANCIAL INFORMATION

STATE %	OTHER %	FEDERAL % (CFDA # Required)	Catalog of Federal Domestic Asst. *(CFDA) Number
		<u>100%</u>	<u>93.350</u>

\*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:                                      Type of Contract:

Bid                                       None                                       New (complete sections below)  
 Quote                                       Other \_\_\_\_\_                                       Renewal (no need to complete sections below)  
 Proposal                                       Modification (no need to complete sections below)

Type of Contract:

Goods and Services - If Not Using Bid or Proposal, Mark Exemption:  
 Under \$10,000                                       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 \$5,000                                       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: _____	Reviewed by Counsel: _____
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BOC only: Consent Agenda _____
Regular Agenda _____

**LATE AGENDA ITEM COVERSHEET**

**Agenda Item Title:** Reappointment to Planning Commission

**Department:** BOC

**Requested Agenda Date:** 8/3/15

**Contact Person:**

**Phone/Ext.:**

**Background and description of need or problem:** Larry Scarborough's term on the Planning Commission expired June 30<sup>th</sup> and they would like to have him reappointed before the next commission meeting, which is August 6<sup>th</sup>.

**Funding Source:** n/a

**Requested Action:** Approve Order 15-08-033C, reappointing Larry Scarborough to the Planning Commission

**Date:**

**Signature of Dept. Head:** \_\_\_\_\_

For all 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 \_\_\_\_\_

Human Resources \_\_\_\_\_

WB

1  
2 BOARD OF COMMISSIONERS  
3 COUNTY OF COOS  
4 STATE OF OREGON

5 In the Matter of Reappointing Larry Scarborough )  
6 to the Coos County Planning Commission )

ORDER  
15-08-033C

7  
8 NOW BEFORE the Board of Commissioners sitting regularly for the transaction of County  
9 business on the 3<sup>rd</sup> day of August 2015 in the matter of reappointing Larry Scarborough to the Coos  
10 County Planning Commission;

11 IT APPEARING that the above-named individual is duly qualified and willing to serve on the Coos  
12 County Planning Commission;

13 NOW, THEREFORE, IT IS HEREBY ORDERED that Larry Scarborough is reappointed to the  
14 Coos County Planning Commissioner for a 4 year term, said term to expire June 30, 2019.

15 DATED this \_\_\_\_\_ day of August, 2015

16 BOARD OF COMMISSIONERS

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19 \_\_\_\_\_  
Chair

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21 \_\_\_\_\_  
Commissioner

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23 \_\_\_\_\_  
Commissioner  
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