

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

**Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.
Please attach any backup information available and be as detailed as possible.*

DEPARTMENT NAME: COUNTRYSIDE ADULT HOME

DATE: 6/21/2016

- (a) Purpose of Request:
**AMEND RESOLUTION WITH MAHONEY NOTIFY-PLUS, INC. FOR OUR
FIRE ALARM SYSTEM & REGULAR MAINTENANCE TO INCLUDE
HOURLY WAGES FOR ANY ADDITIONAL SERVICES AS NEEDED.**

- (b) Details:
**INCLUDE TECHNICAL SERVICE AT \$112.50/HOUR REGULAR RATE &
\$168.75/HR OT RATE.**

- (c) Previous Resolution Number:
255 OF 2016

- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount:
A6030.413 REPAIR/MAINTENANCE TO BUILDING

Sample: A.8021 470 Planning & Community Development – Contract

* as listed in budget and LOGOS