

Criminal Justice &
Public Safety Committee
Warren County Office of Emergency Services
AGENDA
January 23, 2017

Committee Members: WOOD, Dickinson, Girard, Brock, Simpson, Vanselow, Montesi, Braymer,
Seeber

- I. Committee meeting called to order by Chairman
- II. Motion to approve minutes of prior committee meeting
- III. Action Agenda/New Business
 1. **Request:** Resolution request to fill the position of Grant Administrator due to creation.
Rationale: This position was approved and included in the 2017 budget.
 2. **Request:** Resolution request to fill the position of 3rd Deputy EMS Coordinator due to reinstatement of funding.
Rationale: Funding of this position was approved and included in the 2017 budget.
 3. **Request:** Travel approval for Brian LaFlure and Amy Hirsch to attend the New York State Emergency Management Association Winter Conference in Syracuse, NY on February 21-23, 2017.
Rationale: This annual conference provides updates from the State on various emergency response projects and grants. The conference registration fee of \$125.00 per person is to be paid for out of the existing 2017 budget.
 4. **Request:** Travel approval for Brian LaFlure and Scott Combs to attend the County Fire Coordinator Conference in Montour Falls, NY on April 5-7, 2017.
Rationale: To participate in current updates to the fire service in New York State. A county vehicle will be used for travel with the county incurring no other costs.
 5. **Request:** Resolution request to amend the 2017 budget to accommodate the FY15 State Homeland Security Grant Program in the amount of \$5,982.00
Rationale: Resolution needed to carry over grant funds from 2016 to commence the purchasing process.
 6. **Request:** Resolution request to amend the 2017 budget to accommodate the FY15 Hazmat Grant Program in the amount of \$75,970.76
Rationale: Resolution needed to carry over grant funds from 2016 to commence the purchasing process.
 7. **Request:** Resolution request to amend the 2017 budget to accommodate the FY16 State Homeland Security Grant Program in the amount of \$22,092.31
Rationale: Resolution needed to carry over grant funds from 2016 to commence the purchasing process.
 8. **Request:** Resolution request to ratify the actions of the Chairman of the Board for the FY16 Program to Prepare Communities for Complex Coordinated Terrorist Attacks (CCTA Program) not to exceed \$1,500,000.
Rationale: This is a competitive national grant opportunity with no local match. Even though a terrorist event is a low hazard incident in Warren County, the response and recovery procedures would be similar to other violent events that have a much higher hazard rating in Warren County. Warren County will act as the fiscal agent for the regional application. The region includes, but is not limited to the Warren County Sheriff's Office, the members of the Interoperable

Communications Consortium, State, Federal, Local, non-profit, volunteer organizations and private agencies.

9. **Request:** Resolution request for out of state travel for Micki Guy, EMS Coordinator and Travis Howe, 2nd Deputy EMS Coordinator to attend the EMS Today Conference and Exposition in Salt Lake City, Utah on February 21-25 2017.

Rationale: The EMS Today Conference provides EMS updates and educational workshops as well as the opportunity to view the latest EMS equipment from leading manufacturers. The conference registration fee of \$250.00 per person is to be paid for out of the existing 2017 budget. The hotel cost for the EMS Coordinator is also to be paid for out of the existing 2017 budget. The hotel expense is \$204 per night for four nights. The total cost to the County is \$1,316.

10. **Request:** Resolution request to amend the 2017 budget to accommodate the FY16 Hazardous Materials Emergency Preparedness Grant Program in the amount of \$36,204.

Rationale: Resolution needed to accommodate grant award.

11. **Request:** Resolution request for a new contract with MDC Scuba, Inc. d/b/a Rich Morin's Professional Scuba Centers for dive training services in an amount not to exceed \$5,000 per year.

Rationale: Request needed to provide scuba training services for dive members of the Warren County Marine Rescue Team and Warren County Sheriff's Office Dive Team. The agreement would commence February 1, 2017 and terminate on December 31, 2017 with the possibility of two annual extensions. The funds shall be expended from various department budget codes.

12. **Request:** Resolution request for a new contract with MDC Scuba, Inc. d/b/a Rich Morin's Professional Scuba Centers for equipment service and maintenance for Warren County Marine Rescue Team and Warren County Sheriff's Office Dive Team equipment in an amount not to exceed \$5,000 per year.

Rationale: Resolution needed to service and maintain dive team equipment. The agreement would commence upon execution and terminate on December 31, 2017 with the possibility of two annual extensions. The funds shall be expended from various department budget codes.

- IV. Referral/Pending Items
- V. Information for Discussion/Review
- VI. Privilege of the Floor to discuss any additional items to come before the Committee
- VII. Motion to adjourn

Attachments

- #1 Notice of Intent to Fill Vacant Position
- #2 Notice of Intent to Fill Vacant Position
- #3 Authorization to Attend Meeting or Convention
- #4 Authorization to Attend Meeting or Convention
- #5 Request to Amend County Budget
- #6 Request to Amend County Budget
- #7 Request to Amend County Budget
- #8 Request to Apply for a Grant Application and Grant Agreement
- #9a Requesting Approval for Out-of-State Travel
- #9b Authorization to Attend Meeting or Convention
- #10 Request to Amend County Budget
- #11 Request for New Contract
- #12 Request for New Contract

RESOLUTION REQUEST FORM NO. 12

Schedule "A"

NOTICE OF INTENT TO FILL VACANT POSITION

This notice of intent is filed whenever a department head plans to fill an existing funded position in their budget that is vacated due to a retirement, resignation, termination or promotion. This notice may not be used for requests to create a new position. For complete instructions on the procedure to be followed, see the reverse of this form.

DEPARTMENT HEAD COMPLETES THIS SECTION

Department: Office of Emergency Services Payroll Dept. No: 35
Title of Position: Grant Administrator Base Salary of Position: \$20,000 Grade:
Filling at Step # (If Known): Request to Backfill Due to Promotion: Yes No
Budget code and title: A.3640 Civil Defense Union Non-Union
This position is vacated due to: Retirement Resignation Termination Promotion Other Creation
Employee No.: Is this position mandated? Yes No Is the position reimbursable? Yes No
Source of reimbursement: Federal State Other

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

Competitive-active eligible list Competitive-no list (hiring would be provisional) Non-Competitive Other
Actual Impact to Budget Report will be provided monthly by Human Resources Director.
Candidate's qualifications must be approved by Personnel Officer prior to hiring.
Human Resources Director has approved this form when initialed. 1/25/17

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

The Administrator has no objection to the filling of the vacancy.
The Administrator objects to the filling of the vacancy.
Administrator Signature B. M. Date 1/27/17

BUDGET OFFICER COMPLETES THIS SECTION

The Budget Officer has no objection to the filling of the vacancy.
The Budget Officer objects to the filling of the vacancy.
Budget Officer Signature Frank E. Thomas Date 2/2/17

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Criminal Justice & Public Safety
The committee has no objection to the filling of the vacancy.
The committee objects to the filling of the vacancy.
In the case of an emergency, Committee Chair has no objection to the filling of the vacancy.
In the case of an emergency, Committee Chair objects to the filling of the vacancy.
Ranking Committee Member Signature B. M. Date 2/7/17

RESOLUTION REQUEST FORM NO. 12

Schedule "A"

NOTICE OF INTENT TO FILL VACANT POSITION

This notice of intent is filed whenever a department head plans to fill an existing funded position in their budget that is vacated due to a retirement, resignation, termination or promotion. This notice may not be used for requests to create a new position. For complete instructions on the procedure to be followed, see the reverse of this form.

DEPARTMENT HEAD COMPLETES THIS SECTION

Department: Office of Emergency Services Payroll Dept. No: 36.08
Title of Position: 3rd Deputy EMS Coordinator Base Salary of Position: \$5,309 Grade:
Filling at Step # (If Known): Request to Backfill Due to Promotion: Yes No
Budget code and title: A.4022 Emergency Medical Service Union Non-Union
This position is vacated due to: Retirement Resignation Termination Promotion Other Previously Unfunded
Employee No.: Is this position mandated? Yes No Is the position reimbursable? Yes No
Source of reimbursement: Federal State Other

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

Competitive-active eligible list Competitive-no list (hiring would be provisional) Non-Competitive Other
Actual Impact to Budget Report will be provided monthly by Human Resources Director.
Candidate's qualifications must be approved by Personnel Officer prior to hiring.
Human Resources Director has approved this form when initialed. 1-25-17

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

- The Administrator has no objection to the filling of the vacancy.
The Administrator objects to the filling of the vacancy.

Administrator Signature W.B. M... Date 1/27/17

BUDGET OFFICER COMPLETES THIS SECTION

- The Budget Officer has no objection to the filling of the vacancy.
The Budget Officer objects to the filling of the vacancy.

Budget Officer Signature Frank E. Thomas Date 2/2/17

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Criminal Justice + Public Safety
The committee has no objection to the filling of the vacancy.
The committee objects to the filling of the vacancy.
In the case of an emergency, Committee Chair has no objection to the filling of the vacancy.
In the case of an emergency, Committee Chair objects to the filling of the vacancy.

Ranking Committee Member Signature W.B. M... Date 2/7/17

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

- In-State (needs Supervisory Committee authorization)
 Out-Of State (needs Board resolution)

The Criminal Justice & Public Safety hereby authorizes Brian LaFlure & Amy Hirsch
(Supervisory Committee) (Employee Name)

to attend the New York State Emergency Management Association Winter Conference
(Name of meeting or organization)

at the Embassy Suites in Syracuse, NY
(Address)

On February 21-23, 2017. Mode of transportation to be used County Vehicle
(Dates) (County Vehicle or Mass Transportation)

If the mode of transportation is **not** a county vehicle or mass transportation, please explain:

Proper documentation must be attached when submitting for approval.

(Please check documents attached)

- Notice of meeting or convention including cost.

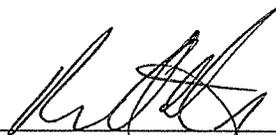
For Overnight Travel

- Room rate \$ Pd. for by NYS GSA* Rate \$ _____

- Meal costs - GSA*per diem rate \$ _____

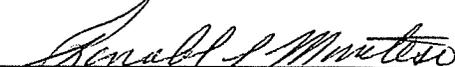
*www.gsa.gov

Date: 1/20/17



Department Head Signature

Date: _____



Committee Chairman Signature

Please refer to the Warren County Travel Policy and County Vehicle Use Regulations for general policy guidelines.

Please check to request a fleet vehicle.

- REQUEST FOR USE OF FLEET VEHICLE**

Filing Instructions:

1. Original with voucher to Auditor.
2. Copy to Frank Morehouse if fleet vehicle is needed.
3. Copy to Clerk of the Board with Resolution Request form if out-of-state travel.
4. Copy to Purchasing with Purchase Order, If required.
5. Copy to County Administrator if credit card will be used.

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

- In-State (needs Supervisory Committee authorization)
- Out-Of State (needs Board resolution)

The Criminal Justice & Public Safety hereby authorizes Brian LaFlure & Scott Combs
(Supervisory Committee) (Employee Name)

to attend the County Fire Coordinator Conference
(Name of meeting or organization)

at Montour Falls, NY
(Address)

On April 5-7, 2017. Mode of transportation to be used County Vehicle
(Dates) (County Vehicle or Mass Transportation)

If the mode of transportation is **not** a county vehicle or mass transportation, please explain:

Proper documentation must be attached when submitting for approval.

(Please check documents attached)

- Notice of meeting or convention including cost.

For Overnight Travel

Room rate \$ Pd. for by NYS GSA* Rate \$ _____

Meal costs - GSA*per diem rate \$ _____

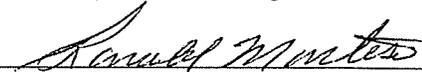
*www.gsa.gov

Date: 1/20/17



Department Head Signature

Date: _____



Committee Chairman Signature

Please refer to the Warren County Travel Policy and County Vehicle Use Regulations for general policy guidelines.

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REQUEST FOR USE OF FLEET VEHICLE

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4. Copy to Purchasing with Purchase Order, If required.
5. Copy to County Administrator if credit card will be used.

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME: Office of Emergency Services

DATE: January 23, 2017

(a) Purpose of Amendment: Increase both sides of the budget to accommodate grant funds.

(b) Appropriation Code, Object Code, Full Title and Amount:

A.3645.4014 230 – FY15 State Homeland Security Program – Auto. Equipment	\$ 687.51
A.3645.4014 250 – FY15 State Homeland Security Program – Technical Equipment	\$ 135.00
A.3645.4014 423 – FY15 State Homeland Security Program – Telephone	\$1,959.69
A.3645.4014 428 – FY15 State Homeland Security Program – Internet	\$3,199.80

(c) Revenue Code (with title), and Amount:

A.3645.4014 4380 – FY15 State Homeland Security Program – State Homeland Security Program	\$5,982.00
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RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME: Office of Emergency Services

DATE: January 23, 2017

(a) **Purpose of Amendment:** Increase both sides of the budget to accommodate grant funds.

(b) Appropriation Code, Object Code, Full Title and Amount:

A.3645.4015 260 – FY15 Hazmat Grant Program – Other Equipment	\$27,407.42
A.3645.4015 410 – FY15 Hazmat Grant Program – Supplies	\$ 467.87
A.3645.4015 422 – FY15 Hazmat Grant Program – Repair/Maint Equipment	\$11,807.88
A.3645.4015 428 – FY15 Hazmat Grant Program – Data/Internet	\$ 5,599.19
A.3645.4015 441 – FY15 Hazmat Grant Program – Auto Supplies/Repair	\$ 2,100.00
A.3645.4015 444 – FY15 Hazmat Grant Program – Travel/Edu/Conference	\$ 2,688.40
A.3645.4015 470 – FY15 Hazmat Grant Program – Contract	\$25,900.00

(c) Revenue Code (with title), and Amount:

A.3645.4015 4382 – FY15 Hazmat Grant Program – Hazmat Grant Program	\$75,970.76
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RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME: Office of Emergency Services

DATE: January 23, 2017

(a) **Purpose of Amendment: Increase both sides of the budget to accommodate grant funds.**

(b) **Appropriation Code, Object Code, Full Title and Amount:**

A.3645.4018 220 – FY16 State Homeland Security Program – Office Equipment \$ 319.00

A.3645.4018 250 – FY16 State Homeland Security Program – Technical Equipment \$ 21,773.31

(c) **Revenue Code (with title), and Amount:**

**A.3645.4018 4380 – FY16 State Homeland Security Program –
State Homeland Security Program**

\$ 22,092.31

RESOLUTION REQUEST FORM NO. 5

Request to Apply for a Grant Application and Grant Agreement

DEPARTMENT NAME: Office of Emergency Services

DATE: January 23, 2017

- (a) Purpose of Grant:
FY16 Program to Prepare Communities for Complex Coordinated Terrorist Attacks
- (b) Name of Grantor:
U.S. Department of Homeland Security
- (c) Address of Contractor: **www.grants.gov**
- (d) Grantor's Contact Person and Telephone Number:
Centralized Scheduling & Information Desk 800-368-6498
- (e) Has or Will the Grant Application or Grant Agreement be provided, if so, Please Attach?
- (f) Effective Date of Grant: **June 8, 2017**
- (g) Termination Date of Grant: **June 7, 2020**
- (h) Total Dollar Amount Involved (not to exceed): **Not to exceed \$1,500,000.00**
- (i) Deadline to Submit Grant Application and/or Grant Agreement:
February 10, 2017
- (j) Is a Budget amendment required? **No** If yes, also complete and submit Form No. 7.
- (k) Are the funds to go into a Capital Project or Capital Reserve Project? **No** If yes, also complete and submit Form No. 8 or Form No. 9, as applicable.
- (i) Is a Local Share Required? **No** If Yes, Where are the Funds? List Budget Code, Object Code, Full Title* and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount:

Sample: A.1010 470 Legislative Board – Contract \$xx.xx
Capital Project No. H289.9550 480 – Old Jail Renovations \$xx.xx

*as listed in budget and LOGOS

RESOLUTION REQUEST FORM NO. 15

Requesting Approval for Out-of-State Travel*

****If the conference announcement or details are available in writing, please attach.***

DEPARTMENT NAME: Office of Emergency Services

DATE: January 23, 2017

- (a) Dates of Travel: February 21-25, 2017
- (b) Purpose (include complete name of any conference, school, etc.): To attend the EMS Today Conference & Exposition
- (c) City/Town & State: Salt Lake City, UT
- (d) Employee(s) Traveling (include title(s): Micki Guy, EMS Coordinator
Travis Howe, 2nd Deputy EMS Coordinator
- (e) Is County paying the costs or is another Agency? The County is to pay for the conference registration fee of \$250 per attendee, plus the hotel expense for Micki Guy, EMS Coordinator at rate of \$204 per night for 4 nights. Total cost to the County is \$1,316.00 which is included in the existing 2017 budget.
- (f) Mode of Transportation to be Use: Mass transportation
(County Vehicle or Mass Transportation)

Please note: If County vehicle use is requested, upon resolution approval, please provide Fleet Manager Frank Morehouse with vehicle request form properly completed.

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

- In-State (needs Supervisory Committee authorization)
 Out-Of State (needs Board resolution)

The Criminal Justice & Public Safety hereby authorizes Micki Guy and Travis Howe
(Supervisory Committee) (Employee Name)

to attend the EMS Today Conference & Exposition
(Name of meeting or organization)

at Salt Lake City, Utah
(Address)

On February 21-25, 2017. Mode of transportation to be used Mass Transportation
(Dates) (County Vehicle or Mass Transportation)

If the mode of transportation is **not** a county vehicle or mass transportation, please explain:

Proper documentation must be attached when submitting for approval.

(Please check documents attached)

- Notice of meeting or convention including cost.

For Overnight Travel

- Room rate \$ 204.00 GSA* Rate \$ \$121.00

- Meal costs - GSA*per diem rate \$ _____

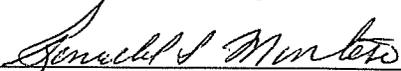
*www.gsa.gov

Date: 1/20/17



Department Head Signature

Date: _____



Committee Chairman Signature

Please refer to the Warren County Travel Policy and County Vehicle Use Regulations for general policy guidelines.

Please check to request a fleet vehicle.

- REQUEST FOR USE OF FLEET VEHICLE**

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3. Copy to Clerk of the Board with Resolution Request form if out-of-state travel.
4. Copy to Purchasing with Purchase Order, If required.
5. Copy to County Administrator if credit card will be used.

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

****If this is the result of a grant award, also complete and submit Form No. 5 or 6***

DEPARTMENT NAME: Office of Emergency Services

DATE: January 23, 2017

(a) **Purpose of Amendment: Increase both sides of the budget to accommodate grant funds.**

(b) **Appropriation Code, Object Code, Full Title and Amount:**

A.3645.4101 470 – FY16 HazMat Emerg Preparedness Grant Program - Contract \$36,204.00

(c) **Revenue Code (with title), and Amount:**

**A.3645.4101 4382 – FY16 HazMat Emerg Preparedness Grant Program –
Hazmat Grant Program \$36,204.00**

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Office of Emergency Services

DATE: January 23, 2017

- (a) Is this a Result of a Bid or Request for Proposal?
No
- (b) Purpose of Contract:
To provide scuba training services for the Warren County Marine Rescue Team and Warren County Sheriff's Office Dive Team.
- (c) Name of Contractor:
MDC Scuba, Inc. d/b/a Rich Morin's Professional Scuba Centers
- (d) Address of Contractor: **20 Warren Street
Glens Falls, NY 12801**
- (e) Contractor's Contact Person and Telephone Number:
Rich Morin 518-761-0533
- (f) Has or will the Contract be provided, if so, please attach:
To be provided
- (g) Commencement Date of Contract:
February 1, 2017
- (h) Termination Date of Contract:
December 31, 2017 with the possibility of two annual extensions
- (i) Payment Provisions: i) lump sum amount
ii) hourly rate amount
iii) total amount not to exceed **\$5,000 per year**
iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
Upon completion of training services
- (j) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title* and Amount: **OR** Capital Project **OR** Capital Reserve Project Number, Title, and Amount:

Various department budget codes

Sample: A.1010 470 Legislative Board – Contract \$xx.xx

Capital Project No. H289.9550 480 – Old Jail Renovations \$xx.xx

*as listed in budget and LOGOS

MDC Scuba, Inc.



Rich Morin's Professional SCUBA CENTERS

20 Warren St. Glens Falls, NY 12801 (518) 761-0533 Fax (518) 761-0420
www.richmorinproscubacenters.com or richmorin@yahoo.com

1-800-924-DIVE

THE "SCUBA" SPECIALISTS

WARREN COUNTY SCHEDULE "A" PRICING FOR 2017

Training

Recreational Courses

Scuba Review	\$164.00
Open Water "Flex"	\$629.00
Private O/W "Flex"	\$1095.00
Advanced Open Water	\$369.00
Rescue Diver	\$549.00
Master Scuba Diver	\$319.00
Altitude Diver	\$174.00
Boat Diver	\$130.00
Buoyancy Specialist	\$164.00
Cavern Diver	\$360.00
Deep Diver	\$306.00
Drift Diver	\$160.00
Dry Suit Diver	\$207.00
Equipment Specialist	\$175.00
U/W Glider Specialist	\$208.00
Ice Diver	\$405.00
Emergency First Response	\$165.00
Multilevel Diver	\$185.00
U/W Navigator	\$329.00
Night Diver Specialist	\$218.00
Enriched Air "Nitrox"	\$317.00
U/W Photographer	\$248.00
Propulsion Vehicle	\$175.00
Search & Recovery	\$362.00
U/W Videographer	\$208.00
Wreck Diver	\$362.00

Public Safety Programs

Surface Support Specialist	\$495.00
Surface Support Ice Specialist	\$495.00
U/W Crime Scene Technician	\$995.00
U/W Crime Scene Photography/Videography Specialist	\$695.00
U/W Crime Scene Investigation Specialist	\$995.00
U/W Crime Scene Victim Recovery Specialist	\$695.00
U/W Crime Scene Evidence Recovery Specialist	\$695.00
U/W CSI Critical Incident Stress Specialist	\$395.00
U/W CSI Boat Operator Specialist	\$595.00
U/W CSI Rehabilitation Specialist	\$395.00
U/W CSI Swift Water Specialist	\$695.00
U/W CSI ROV Operator	\$695.00
U/W CSI Full Face Mask Specialist	\$329.00
U/W CSI Advanced Navigation Specialist	\$429.00
U/W CSI Tow Sled Specialist	\$329.00
U/W CSI Contaminated Water Specialist	\$595.00
U/W CSI Hard Hat Diver Specialist	\$459.00
U/W CSI Drone Operator Specialist	\$395.00
U/W CSI Side Scan Sonar Specialist	\$349.00

Professional Programs

Divemaster	\$655.00
Assistant Instructor	\$985.00
Instructor Development Course	\$2195.00
Master Scuba Diver Trainer	\$1095.00
IDC Staff Instructor	\$1095.00
Instructor Status Update	\$655.00

Equipment Service	\$35.00 Hour
SCUBA Tank Visual Inspection	\$18.00
SCUBA Tank Hydro Test & Visual Inspection	\$49.00
Regulator Service	\$35.00 + Parts
BCD Service	\$36.00 + Parts
Air2 Service	\$30.00 + Parts
Pony Regulator Service	\$50.00 + Parts
AGA Service	\$35.00 + Parts
AGA Service Parts	\$189.00
Guardian Service	\$35.00 + Parts
Guardian Service Parts	\$95.00
Dry Suit Repair	
Hood Installed	\$95.00
Neck Installed	\$75.00
Wrist Installed	\$52.00 Each
Ankle Installed	\$52.00 Each
Pre-Cut Patch	\$12.00 Each
Custom Patch Per Square Inch	\$5.00 Per Sq Inch

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Office of Emergency Services

DATE: January 23, 2017

- (a) Is this a Result of a Bid or Request for Proposal?
No
- (b) Purpose of Contract:
To provide equipment service/maintenance for Warren County Dive Team equipment.
- (c) Name of Contractor:
MDC Scuba, Inc. d/b/a Rich Morin's Professional Scuba Centers
- (d) Address of Contractor: **20 Warren Street
Glens Falls, NY 12801**
- (e) Contractor's Contact Person and Telephone Number:
Rich Morin 518-761-0533
- (f) Has or will the Contract be provided, if so, please attach:
To be provided
- (g) Commencement Date of Contract:
Upon execution
- (h) Termination Date of Contract:
December 31, 2017 with the possibility of two annual extensions
- (i) Payment Provisions: i) lump sum amount
ii) hourly rate amount
iii) total amount not to exceed **\$5,000 per year**
iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.)
Upon completion of services
- (j) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title* and Amount: **OR Capital Project OR Capital Reserve Project Number, Title, and Amount:**

Various department budget codes

Sample: A.1010 470 Legislative Board – Contract \$xx.xx
Capital Project No. H289.9550 480 – Old Jail Renovations \$xx.xx

*as listed in budget and LOGOS

MDC Scuba, Inc.



Rich Morin's Professional SCUBA CENTERS

20 Warren St. Glens Falls, NY 12801 (518) 761-0533 Fax (518) 761-0420
www.richmorinsproscubacenters.com or richmorin@yahoo.com

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THE "SCUBA" SPECIALISTS

WARREN COUNTY SCHEDULE "A" PRICING FOR 2017

Recreational Courses

Scuba Review	\$164.00
Open Water "Flex"	\$629.00
Private O/W "Flex"	\$1095.00
Advanced Open Water	\$369.00
Rescue Diver	\$549.00
Master Scuba Diver	\$319.00
Altitude Diver	\$174.00
Boat Diver	\$130.00
Buoyancy Specialist	\$164.00
Cavern Diver	\$360.00
Deep Diver	\$306.00
Drift Diver	\$160.00
Dry Suit Diver	\$207.00
Equipment Specialist	\$175.00
U/W Glider Specialist	\$208.00
Ice Diver	\$405.00
Emergency First Response	\$165.00
Multilevel Diver	\$185.00
U/W Navigator	\$329.00
Night Diver Specialist	\$218.00
Enriched Air "Nitrox"	\$317.00
U/W Photographer	\$248.00
Propulsion Vehicle	\$175.00
Search & Recovery	\$362.00
U/W Videographer	\$208.00
Wreck Diver	\$362.00

Public Safety Programs

Surface Support Specialist	\$495.00
Surface Support Ice Specialist	\$495.00
U/W Crime Scene Technician	\$995.00
U/W Crime Scene Photography/Videography Specialist	\$695.00
U/W Crime Scene Investigation Specialist	\$995.00
U/W Crime Scene Victim Recovery Specialist	\$695.00
U/W Crime Scene Evidence Recovery Specialist	\$695.00
U/W CSI Critical Incident Stress Specialist	\$695.00
U/W CSI Boat Operator Specialist	\$595.00
U/W CSI Rehabilitation Specialist	\$395.00
U/W CSI Swift Water Specialist	\$695.00
U/W CSI ROV Operator	\$695.00
U/W CSI Full Face Mask Specialist	\$329.00
U/W CSI Advanced Navigation Specialist	\$429.00
U/W CSI Tow Sled Specialist	\$329.00
U/W CSI Contaminated Water Specialist	\$595.00
U/W CSI Hard Hat Diver Specialist	\$459.00
U/W CSI Drone Operator Specialist	\$395.00
U/W CSI Side Scan Sonar Specialist	\$349.00

Professional Programs

Divemaster	\$655.00
Assistant Instructor	\$985.00
Instructor Development Course	\$2195.00
Master Scuba Diver Trainer	\$1095.00
IDC Staff Instructor	\$1095.00
Instructor Status Update	\$655.00

Equipment Service	\$85.00 Hour
SCUBA Tank Visual Inspection	\$18.00
SCUBA Tank Hydro Test & Visual Inspection	\$49.00
Regulator Service	\$85.00 + Parts
BCD Service	\$36.00 + Parts
Air2 Service	\$30.00 + Parts
Pony Regulator Service	\$50.00 + Parts
AGA Service	\$85.00 + Parts
AGA Service Parts	\$189.00
Guardian Service	\$85.00 + Parts
Guardian Service Parts	\$95.00
Dry Suit Repair	
Hood Installed	\$95.00
Neck Installed	\$75.00
Wrist Installed	\$52.00 Each
Ankle Installed	\$52.00 Each
Pre-Cut Patch	\$12.00 Each
Custom Patch Per Square Inch	\$5.00 Per Sq Inch

