

Criminal Justice & Public Safety Committee  
Warren County Office of Emergency Services  
AGENDA  
August 13, 2018

Committee Members: LEGGETT, Geraghty, Simpson, Wild, Magowan, Diamond, Sokol, Hogan,  
Braymer, Driscoll, VACANT

- 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 amend the existing contract with Emergency Services Marketing Corporation, Inc. to change the termination date from August 31, 2018 to December 31, 2018.  
**Rationale:** Emergency Services Marketing Corporation, Inc. has agreed to provide the lamResponding program through December 31, 2018 at no additional cost to the County. This resolution will extend the termination date through the end of the 2018 calendar year.
  - 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
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**Attachments**

#1 Request for Extending, Rescinding or Amending Existing Contract

## **RESOLUTION REQUEST FORM NO. 4**

### ***Request for Extending, Rescinding or Amending Existing Contract***

**DEPARTMENT NAME:** Office of Emergency Services

**DATE:** August 13, 2018

- (a) Purpose of Contract Change:  
**To amend the existing contract to change the termination date from August 31, 2018 to December 31, 2018 at no additional cost to the County.**
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract:  
**253 of 2017 & 355 of 2017**
- (c) Name of Contractor:  
**Emergency Services Marketing Corporation, Inc.**
- (d) Address of Contractor: **PO Box 93**  
**Dewitt, New York 13214**
- (e) Contractor's Contact Person and Telephone Number:  
**Adam Feck 315-701-1372 ext. 25**
- (f) Commencement Date of Extension:
- (g) Termination Date of Extension:
- (h) Payment Provisions: i) lump sum amount  
ii) hourly rate amount  
iii) total amount not to exceed  
iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.)
- (i) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title\* and Amount: **OR** Capital Project **OR** Capital Reserve Project Number, and Title, and Amount:  
**A.4022 470 Emergency Medical Services - Contract**

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