

Criminal Justice, Public Safety & Emergency Services Committee
Office of Emergency Services

September 22, 2026

COMMITTEE MEMBERS: MADAY, Conover, Strainer, Gilligan, Driscoll, Butler, O'Neill

- I. Committee meeting called to order by Chair
- II. Approval of minutes of prior Committee Meeting
- III. Privilege of the floor and public comment
- IV. Action Agenda/New Business Items:
 1. Request: Resolution request to increase existing capital project H.254.9550 280 Fire Training Center Project – Project and funding source H.254.9550 2390 Share of Joint Activity, Govt in the amount of \$988.25. **Attachment #1**
Rationale: Resolution is needed to reflect 50% reimbursement payments from Washington County in the amount of \$988.25 for expenses paid in full by Warren County.
 2. Request: Resolution request for a new contract with Mountain Medical Services for the provision of required Hazardous Materials Team annual medical examinations, in an amount not to exceed \$270 per physical. **Attachment #2**
Rationale: This agreement will commence on January 1, 2027, and expire on December 31, 2027. Funding is included in the 2027 budget request under G/L code A.3410 435 Fire Prevention & Control-Medical Fees.
 3. Request: Resolution request for a new contract with Emergency Services Marketing Corp. d/b/a lamResponding for the lamResponding solution subscription for a term commencing on January 1, 2027 and terminating on December 31, 2031. **Attachment #3**
Rationale: The current five-year contract expires on December 31, 2026. The service fee of \$20,907 per year is billed annually and will be budgeted in G/L code A.9781 – Subscription Based IT Services.
- V. Discussion Items
 1. 2027 Budget Request
 2. County EMS Plan
 3. Upcoming Community Outreach
 - a. 9/23 Emergency Preparedness Training – Queensbury Senior Center
 - b. 9/24 OFA Senior Fall Festival – North Creek
- VI. Referrals/Pending Items
- VII. Privilege of the floor and public comment
- VIII. Motion to adjourn

Attachments:

1. Resolution Request Form #9 and supporting documentation
2. Resolution Request Form #3 and supporting documentation
3. Resolution Request Form #3 and supporting documentation

RESOLUTION REQUEST FORM NO. 9

Request to Increase or Decrease or Amend Existing Capital Project or Capital Reserve Project*

****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: September 22, 2026

- (a) Exact Title and Number of Project*:
H.254.9550 280 Fire Training Center Project - Projects
- (b) Is this a Capital Project?
Yes
- (c) Is this a Capital Reserve Project?
- (d) Amount of Increase (if applicable):
\$988.25
- (e) Amount of Decrease (if applicable):
- (f) Source of Funding (if Increase) (including name & title of codes, etc.):
H.254.9550 2390 - Fire Training Center -Share of Joint Activity, Govt
- (g) Changes in Funding (if Amendment):
- (h) Purpose of Increase or Decrease or Amendment:
To correct the Fire Training Center Project to reflect reimbursement receipts from Washington County in the amount of \$988.25.

>

Fiscal Year 2025

Attachment #1

Annual Totals YTD Reclass Journal Type Fiscal Year 2026

Classification Intergovernmental Charges

Month	Amended Budget	Budget	Revenues	Amendments	YTD Balance	Revenues	Current YTD Balance	Percent Received
January	\$100,565.86	\$0.00	\$101,554.11	\$100,565.86	\$101,554.11	\$101,554.11	-\$988.25	101%
February		\$0.00		\$0.00		\$0.00	-\$988.25	101%
March		\$0.00		\$0.00		\$0.00	-\$988.25	101%
April		\$0.00		\$0.00		\$0.00	-\$988.25	101%
May		\$0.00		\$0.00		\$0.00	-\$988.25	101%
June		\$0.00		\$0.00		\$0.00	-\$988.25	101%
July		\$0.00		\$0.00		\$0.00	-\$988.25	101%
August		\$0.00		\$0.00		\$0.00	-\$988.25	101%
September		\$0.00		\$0.00		\$0.00	-\$988.25	101%
October		\$0.00		\$0.00		\$0.00	-\$988.25	101%
November		\$0.00		\$0.00		\$0.00	-\$988.25	101%
December		\$0.00		\$0.00		\$0.00	-\$988.25	101%
Total		\$0.00		\$100,565.86	\$101,554.11	\$101,554.11	-\$988.25	101%
Unposted Transactions		\$0.00		\$0.00		\$0.00	(\$988.25)	101%
Grand Total		\$0.00		\$100,565.86	\$101,554.11	\$101,554.11	(\$988.25)	101%

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Office of Emergency Services

DATE: September 22, 2026

- (a) Is this a Result of a Bid or Request for Proposal?
No
- (b) Purpose of Contract:
To provide required medical examinations for members of the Warren County Hazardous Materials Team.
- (c) Name of Contractor:
Mountain Medical Services
- (d) Address of Contractor: **PO Box 13395
Belfast, ME 04915**
- (e) Contractor's Contact Person and Telephone Number:
Merrie Lynn Towle 518-744-6560 or standardmedicalsolutions@gmail.com
- (f) Has or will the Contract be provided, if so, please attach:
To be provided
- (g) Commencement Date of Contract:
January 1, 2027
- (h) Termination Date of Contract:
December 31, 2027
- (i) Payment Provisions: i) lump sum amount
ii) hourly rate amount
iii) total amount not to exceed **\$270 per physical**
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:**

A.3410 435 Fire Prevention & Control - Medical Fees

**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



Contractual Agreement

This agreement is made between Mountain Medical Services, located at 597 Bay Road, Queensbury, NY 12804 and with Warren County Office of Emergency Services ATTN: Amy Turcotte having an address at 1340 State route 9, Lake George, NY 12845.

This agreement shall be in effect from January 1, 2027- Dec 31, 2027.

The responsibilities and obligations and liabilities shall survive the term of this agreement.

This agreement may be canceled by either party after thirty days of written notification.

Both parties to this agreement are independent contractors, and nothing contained herein shall be construed to place the parties in the relationship of partners, joint venture, principal-agent or employer-employee, and neither party shall have the power to obligate or bind the other whatsoever beyond the terms of this agreement.

Mountain Medical Services, will be compensated for its services as follows:

OSHA 1910.120,1910.134,1910.156,NFPA 1500,1582,1001 physicals.

Included in these physicals are vitals,ears, eyes, nose ,mouth and throat,cardiovascular system,respiratory system,gastrointestinal system, endocrine, and metabolic system,musculoskeletal,audiometric screening,visual acuity and peripheral,pulmonary function testing,complete blood count,chemistry,urinalysis and electrocardiogram.

\$270.00 per physical

Extras if requested:

Heavy Metal Blood Work, includes Lead/Zinc, Cadmium, Arsenic, Mercury	\$ 225.00
Tetanus/Diphtheria/Pertussis	\$ 150.00
Chest Xray 1 view	\$ 130.00
Urine Drug Screen, 10 panel	\$ 65.00

All Vaccines/shots prices are subject to change due to market value

Please note that we do not participate with insurance of any kind

In addition, should there be after hours, post accident testing/reasonable suspicion, there shall be a flat rate fee of \$120.00 per hour with a minimum two hour charge. Also there will be a mileage charge of 56.5 cents (or current rate) per mile applied.

Shy Bladder wait time is \$40.00 per hour after 4:30pm closing time.

The fee for split specimen re-testing of positive specimens (including shipping, lab fees and chain of custody) shall be \$250.00.

The review of all Positive drug screens will be \$200.00, regardless of final outcome. This includes the MRO time for contacting physicians, donors and specialists whom the employee is being treated by.

Payment of invoices is expected within 30 days of receipt of invoice payable to Mountain Medical Services, PO BOX 13395, Belfast Maine, 04915. A late fee/interest fee of 1.5% monthly will be applied to outstanding invoices over 30 days old. We accept payment online at www.quickpayportal.com. Code is on Invoice.

Standard Medical Testing Services, a division of Mountain Medical Services attests that it will keep all information obtained from Warren County Office of Emergency Services, for the purpose of testing confidential unless otherwise required to disclose said information by applicable law, regulation, or subsequent agreement.

The provisions of the Agreement shall be construed, interpreted and governed by the substantive laws of the state of New York, including all matters of construction, validity and performance.

IN WITNESS WHEREOF, the parties hereto have caused this agreement to be executed as of the day and year executed below:

Mountain Medical Services
Merrie Lynn Towle, BSN

Mountain Medical Services
Dr. Michael P. M. Pond, MD
Services

Warren County Office of Emergency

Name: ***Merrie Lynn Towle, BSN***
Title: Director of Occupational Medicine
Date: ***January 1, 2027***

Name: _____
Title: _____
Date: _____

Please execute this agreement, retain the original, and forward a duplicate to Standard Medical Testing Services at 597 Bay Road, Queensbury, NY 12804.

- ☐ Mountain Medical Services * 597 Bay Road Queensbury, NY 12804 518-744-6560
f: 518-409-8441 www.standardmedicalservices.com standardmedicalservices@gmail.com
Mon-Thur 8-4 Fridays 8-3
- ☐ Mountain Medical Services * 354 Broadway Saranac Lake, NY 12983 518-897-1000
Saranac - DOT Drug Testing Hours Monday-Friday 9am - 2pm Weekends 10-12
- ☐ Mountain Medical Services * 1927 Saranac Ave Lake Placid, NY 12983 518-523-7577
www.mountainmedical.net - Corporate Office Only

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Office of Emergency Services

DATE: September 22, 2026

- (a) Is this a Result of a Bid or Request for Proposal?
No
- (b) Purpose of Contract:
To continue the provision of the IamResponding system for first responder and public safety agencies in Warren County.
- (c) Name of Contractor:
Emergency Services Marketing Corp. Inc d/b/a IamResponding
- (d) Address of Contractor: **PO Box 93
Dewitt, NY 13214**
- (e) Contractor's Contact Person and Telephone Number:
Amanda Longo iar-subscriptions@rapidsos.com
- (f) Has or will the Contract be provided, if so, please attach:
To be provided
- (g) Commencement Date of Contract:
January 1, 2027
- (h) Termination Date of Contract:
December 31, 2031
- (i) Payment Provisions: i) lump sum amount **\$20,907 annually**
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.
Annually
- (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:**
A.9781 610 Subscription Based IT Services Principal-Indebtedness
A.9781 710 Subscription Based IT Services Interest-Indebtedness
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

AMORTIZATION SCHEDULE

Title: Emergency Services Marketing Corp – OES

Loan Amount: 96,087.22

Annual Rate: 4.4000

Payment Frequency: Annually

First Payment Date: 01/01/2027

Payment Amount: 20,907.00

No. Of Payments: 5

#	Payment Date	Payment Amount	Current Interest	Cumulative Interest	Current Principal	Cumulative Principal	Balance
0			A 9781 70		A 9781 610		
1	01/01/2027	20,907.00	2,815.93	2,815.93	18,091.07	18,091.07	77,996.15
2027 Total:			2,815.93		18,091.07		
2	01/01/2028	20,907.00	2,252.74	5,068.67	18,654.26	36,745.33	59,341.89
2028 Total:			2,252.74		18,654.26		
3	01/01/2029	20,907.00	1,689.56	6,758.23	19,217.44	55,962.77	40,124.45
2029 Total:			1,689.56		19,217.44		
4	01/01/2030	20,907.00	1,126.37	7,884.60	19,780.63	75,743.40	20,343.82
2030 Total:			1,126.37		19,780.63		
5	01/01/2031	20,907.00	563.18	8,447.78	20,343.82	96,087.22	0.00
2031 Total:			563.18		20,343.82		

Subscriber	Warren County, NY
Subscriber Contact:	Name: Email: Phone:

Subscription Commencement Date: January 1, 2027 Initial Term of: 60 Months

Subscriber shall pay the total sum of \$104,535.00 (US), due as follows:

- i. \$20,907.00 due on or before January 1, 2027;
- ii. \$20,907.00 due on or before January 1, 2028;
- iii. \$20,907.00 due on or before January 1, 2029;
- iii. \$20,907.00 due on or before January 1, 2030;
- iii. \$20,907.00 due on or before January 1, 2031.

This order ("Subscription Order Form") is entered into between IamResponding and Subscriber for the IamResponding Subscription and, if applicable, the MyLocal Safety (MyLS Subscription) services (individually and collectively, "IaR Services"). This Subscription Order Form shall be deemed to apply, whether this is the first Subscription Order Form to be executed by the parties, a subsequent Subscription Order Form, or a renewal of any prior subscription order or agreement. IamResponding agrees to provide Subscriber with access to the IaR Services in accordance with the terms of this Subscription Order Form. Subscriber is solely responsible for obtaining its own internet connection and hardware.

Subscription Start Date and Term

The subscription shall commence on the Subscription Commencement Date, and shall terminate following the number of months listed in Initial Term above. The Initial Term may consist of equal 12-month periods or a partial period followed by equal 12-month periods.

Subscriber's access to the IaR Services shall not be provided until IamResponding has received this signed Subscription Order Form and payment from Subscriber.

Payment Terms

1. Beginning on or before the Subscription Commencement Date and continuing annually on the anniversary of the Subscription Commencement Date, Subscriber shall pay the amounts due for the upcoming term.
2. If Subscriber fails to remit payment on or before the Subscription Commencement Date or the annual anniversary thereof, IamResponding may terminate access to the IaR Services and cancel this Subscription Order Form.
3. All subscription fees are in US funds, and shall be paid in US funds.
4. All prices set forth are the cash discount prices for payments via cash or checks. Non-discounted pricing for credit card payments is 3.5% higher for all prices set forth.
5. All checks should be made payable to:

IamResponding
Tax Identification No.: 20-5787005

Taxation

Subscriber certifies that Subscriber (check one box below):

☐ IS a tax-exempt organization, exempt from state and local sales and use taxes on its purchases, and its tax exemption (and/or exempt organization) number is: _____ (Please attach tax exemption certificate)

☐ IS NOT a tax-exempt organization and is NOT exempt from state and local sales and use taxes on its purchases.

Special Terms

For the purchase of the IaR Subscription and/or MyLS for multiple agencies by one Subscriber ("Group Agreement"), the Group Agreement Addendum, attached hereto, shall apply.

Notes

Agencies and Teams are identified on attached Exhibit A to the Group Agreement Addendum.

General Provisions

This Subscription Order Form is governed by the terms and conditions of the latest versions of the IamResponding Master Services Agreement ("MSA"), available at <https://www.iamresponding.com/msa/> and the Terms of Use ("TOU"), available at <https://www.iamresponding.com/terms-of-use/>, and if the MyLS Subscription is ordered, then in accordance with the Terms of Use for MyLS ("MyLS TOU"), available at <https://mylocalsafety.com/termsOfUse>. The MSA, TOU, and MyLS TOU (if applicable), collectively comprise the parties' agreement ("Agreement"), which governs the terms of this Subscription Order Form. In the event of a conflict between the terms of any Subscription Order Form and the terms of the Agreement, the terms of this Subscription Order Form will prevail and supersede the terms of the Agreement, solely as they apply to the applicable Subscription Order Form.

Signature Line

The signatories to this Order represent that they are duly authorized to execute this Order Form and the Agreement on behalf of the party they represent.

Emergency Services Marketing Corp. d/b/a IamResponding	Subscriber:
Signature:	Signature:
Name: Eric Troy	Name:
Date:	Date:

IamResponding Group Agreement Addendum

1. Group Subscription Services.

- a. *Definition of a Group.* An “agenc(y)(ies)” is defined as a single entity with the ability to view all responders of each company and station of that entity on a single sub-site of the IamResponding.com system. A “group” is a number of agencies that will access the IamResponding.com services with the subscription for all the agencies paid by the Subscriber listed on the accompanying Subscription Order Form. Multiple agencies shall not share subscription services.
- b. *Included Services.* Unlimited access to all responder information of the agencies and teams identified below by County dispatchers, County Fire & EMS Coordinators and such others as may be designated by the Subscriber; the establishment of separate, designated sub-sites for each included agency and team; the set-up of a consolidated dispatch center sub-site of IamResponding.com for monitoring by the dispatch center of each of the agencies and teams identified below on a single system; all current functions of IamResponding.com; 24x7x365 email technical support; set up of program options for each agency and team; periodic system upgrades; provisioning of toll-free access numbers for each agency and team; two (2) live webinar training sessions of system administrators, on mutually agreeable dates and times (“train the trainers”).
- c. *Excluded Services.* Input or maintenance of individual member profiles (to be performed by individual agencies and/or teams); user-end hardware, software, cabling or monitors; installation, maintenance or troubleshooting of user hardware or at user sites. If and when outbound text-to-voice functionality is added as a feature of IamResponding.com, the cost of such outbound telephone calls is not included within this Subscription Agreement and shall be subject to a separate agreement at that time in order to enable that function.

2. **Adjusting Agencies.** Adjustments to the number of agencies included in a group may be made ahead of the anniversary of an upcoming subscription term to take effect at the start of the upcoming term. Additional agencies and region-wide specialty teams may be added during the same subscription term at the Cost per Agency per Year rate listed on the accompanying Subscription Agreement for the active term, prorated for the remainder of that term. In addition, there will be a one-time set up fee of \$49 per agency. Subscriber may, at IaR’s sole discretion, substitute one agency or team for another of similar size/ emergency response, as determined by IaR, by providing notice in writing via email to IamResponding at iar-subscriptions@rapidsos.com of the agency to be replaced and the name and physical address of the agency and the name, email, and mobile number of the primary and secondary contacts for the new agency.



Exhibit A: The following agencies are included under the Subscription Order Form.

	Agency/Team Name	Name, Email and Mobile Number of Primary Contact	Full Physical Address
1	Bakers Mills Fire Dept. (NY)		
2	Bay Ridge Volunteer Fire Company Inc. (NY)		
3	Bolton EMS (NY)		
4	Bolton Landing Vol. Fire Company (NY)		
5	Chestertown Fire Department (NY)		
6	Empire EMS (NY)		
7	Garnet Lake Fire Dept. (NY)		
8	Glens Falls Fire Department (NY)		
9	Hague EMS (NY)		
10	Horicon Fire Department (NY)		
11	Johnsburg EMS (NY)		
12	Johnsburg Vol. Fire Company (NY)		

13	Lake George EMS (NY)		
14	Lake George Fire Department (NY)		
15	North Creek Fire Department (NY)		
16	North Queensbury Fire Department (NY)		
17	North River Fire Department (NY)		
18	North Warren EMS (NY)		
19	Pilot Knob Fire Department (NY)		
20	Placeholder - Warren County, NY		
21	Pottersville Volunteer Fire Department (NY)		
22	Queensbury Central Vol. Fire Co (NY)		
23	Queensbury EMS		
24	Riverside Fire Department (NY)		
25	Rockwell Falls EMS (NY)		
26	South Queensbury Fire Department (NY)		
27	Stoney Creek Fire Department (NY)		

28	Stony Creek EMS (NY)		
29	Thurman Fire Department (NY)		
30	Town of Queensbury Fire (NY)		
31	Warren County Marine Unit (NY)		
32	Warren County OES CERT Team (NY)		
33	Warren County Office of Emergency Management (NY)		
34	Warren County Peer Support Group (NY)		
35	Warren County Sheriff's Office (NY)		
36	Warrensburg EMS (NY)		
37	Warrensburg Fire Department (NY)		
38	West Glens Falls EMS (NY)		
39	West Glens Falls Fire Company (NY)		

RECAP – 2027 OES BUDGET REQUEST

A.3410 FIRE PREVENTION & CONTROL

OBJECT CODE	AMOUNT REQUESTED	INCREASE/ DECREASE	REASON
220 Office Equipment	\$200	\$50	
250 Technical Equipment	\$0	(\$19,000)	Decrease due to prior year (2026) request for radios to enhance interoperability.
260 Other Equipment	\$7,000	\$5,800	2027 request includes \$5,000 to support Countywide Marine Rescue Team and \$2,000 for fire investigation equipment.
418 Insurance	\$4,319	(\$239)	Insurance estimates for 2027
423 Telephone	\$200	(\$50)	
428 Data Processing & Internet Fees	\$3,700	\$46	
435 Medical Fees	\$9,720	\$360	The projected number of Hazmat Team physicals for 2027 is 36 physicals at \$270/physical
441 Auto Supplies & Repair	\$2,000	(\$500)	
442 Automotive Gas & Oil	\$2,000	(\$600)	
444 Travel/Edu/Conference	\$18,000	\$8,000	2027 request includes \$5,000 for travel/mileage, \$5,000 to support Countywide Marine Rescue Team training, and \$8,000 for fire investigation training.
455 Safety Equipment	\$450	\$300	Increase for anticipated expenses

A.3640 CIVIL DEFENSE

OBJECT CODE	AMOUNT REQUESTED	INCREASE/ DECREASE	REASON
220 Office Equipment	\$600	\$100	2027 request for small office equipment and tools
230 Auto Equipment	\$3,000	(\$6,000)	2027 request for vehicle warning equipment
250 Technical Equipment	\$0	(\$1,000)	
410 Supplies	\$6,500	\$2,000	Increase for citizen preparedness outreach initiatives
416 Oil & Gas – Heating	\$4,500	(\$1,500)	2027 request for OES storage building propane usage
418 Insurance	\$3,189	(\$182)	Insurance estimates for 2027
422 Repair/Maint Equipment	\$5,000	\$2,500	2027 request for generator maintenance, vehicle equipment installation
426 Subscriptions	\$1,050	\$150	Subscription increases
428 Data Processing & Internet	\$4,100	(\$200)	
439 Misc Fees & Expenses	\$25	\$25	
441 Auto Supplies/Repair	\$1,500	(\$500)	
444 Travel/Edu/Conf	\$7,500	\$5,000	2027 request includes \$2,500 for travel/mileage and \$5,000 to support peer support training
445 Foods	\$300	\$50	
470 Contract	\$20,364	(\$3,128)	2027 request for the following contracts: \$10,000 USGS; \$300 Emergency Services Marketing (IamResponding) annual call fee; \$6,300 Quickseries mobile application annual fee; \$1,764 Regroup mass notification contract; \$2,000 OES drone support

A.3642 FIRE TRAINING CENTER

OBJECT CODE	AMOUNT REQUESTED	INCREASE/ DECREASE	REASON
415 Electricity	\$450	\$50	Increase based on current and projected costs
416 Oil & Gas Heating	\$550	(\$50)	

A.4022 EMS

OBJECT CODE	AMOUNT REQUESTED	INCREASE/ DECREASE	REASON
230 Automotive Equipment	\$0	(\$5,000)	Decrease due to prior year (2026) request for vehicle warning equipment.
418 Insurance	\$1,596	(\$94)	
422 Repair/Maint Equip	\$2,500	(\$3,500)	Decrease due to prior year (2026) request for equipment installation.
424 Postage	\$30	\$10	
428 Data Processing & Internet	\$1,200	(\$75)	

2026 Adopted Budget vs. 2027 Department Requests

Net increase/decrease as itemized above: \$ (17,177)

*Increase salary & benefits:

(as shown in New World) \$ 16,525

Total increase/decrease in expenses \$ (652)

 Increase in expenses: \$ (652)

 Increase in revenues: \$ 131

Net increase/decrease: \$ (783)