

**COMBINED: LEGISLATIVE MEMORANDUM,
CERTIFICATE OF AVAILABILITY OF FUNDS
AND RESOLUTION COVER MEMO**

To: Sullivan County Legislature

Fr: Alex Rau, E911 Coordinator

Re: Request for Consideration of a Resolution: To authorize applicaton for NYS DHSES PSAP
FY16 grant program

Date: 7/7/2016

Purpose of Resolution: [Provide a detailed statement of what the Resolution will accomplish, as well as a justification for approval by the Sullivan County Legislature.]

This annual formula based grant appropriation from NYS DHSES provides reimbursement for certain costs associated with operations and upgrades within the PSAP. This resolution will authorize submission of our application for these funds. There is NO funding match required on the County's part.

Is subject of Resolution mandated? Explain:

No, but highly recommended.

Does Resolution require expenditure of funds? Yes ___ No

If "Yes", provide the following information:

Amount to be authorized by Resolution: \$ _____

Are funds already budgeted? Yes ___ No ___

If "Yes" specify appropriation code(s): _____

If "No", specify proposed source of funds: _____

Estimated Cost Breakdown by Source:

County	\$ _____	Grant(s)	\$ _____
State	\$ _____	Other	\$ _____
Federal Government	\$ _____	(Specify)	_____

Verified by Budget Office: 

Does Resolution request Authority to Enter into a Contract? Yes ___ No

If "Yes", provide information requested on Pages 2. If "NO", please go straight to Page 3 and acquire all pre-legislative approvals.

Request for Authority to Enter into Contract with _____ of _____

Nature of Other Party to Contract: _____ Other: _____

Duration of Contract: From _____ To _____

Is this a renewal of a prior Contract? Yes ___ No ___

If "Yes" provide the following information:

Dates of prior contract(s): From _____ To _____

Amount authorized by prior contract(s): _____

Resolutions authorizing prior contracts (Resolution #s): _____

Future Renewal Options if any:

Is Subject of Contract – i.e. – the goods and/or services Mandated? Yes ___ No ___

If "Yes" cite the mandate's source; describe how this contract satisfies the requirements:

If "No" provide other justification for County to enter into this Contract: [County does not have resources in-house, best source of the subject materials, required by grant, etc.]:

Total Contract Cost for [year or contract period]: (If specific sum is not known state maximum potential cost): _____

Efforts made to find Less Costly alternative:

Efforts made to share costs with another agency or governmental entity:

Specify Compliance with Procurement Procedures (Bid, Request for Proposal, Quote, etc.)

_____ *not applicable* _____

Person(s) responsible for monitoring contract (Title): _____

Pre-Legislative Approvals:

- A. Director of Purchasing: Kathy Jones Date 7/16/16
- B. Management and Budget: Janet Myers Date 7/16/16
- C. Law Department: Thomas J. Crowley Date 7/16/16
- D. County Manager: John K. Moran Date 7/16/16
- E. Other as Required: _____ Date _____

Vetted in Public Safety and Law Enforcement Committee on 07/07/2016

RESOLUTION NO. -16 INTRODUCED BY THE PUBLIC SAFETY AND LAW ENFORCEMENT COMMITTEE TO AUTHORIZE PREPARATION OF A GRANT APPLICATION FOR A PUBLIC SAFETY ANSWERING POINTS (PSAP) PROGRAM WHICH IS SUPPORTED BY THE NEW YORK STATE PUBLIC SAFETY COMMUNICATIONS ACCOUNT WHEREIN FUNDING HAS BEEN APPROPRIATED TO THE DIVISION OF HOMELAND SECURITY & EMERGENCY SERVICES' OFFICE OF INTEROPERABLE AND EMERGENCY COMMUNICATIONS (DHSES / OIEC) TO IMPLEMENT THE PROGRAM. FUNDING WILL ALLOW FOR REIMBURSEMENT OF COSTS ASSOCIATED WITH PSAP CONSOLIDATION, OPERATIONS AND IMPROVEMENTS.

WHEREAS, the New York State Division of Homeland Security and Emergency Services (*NYS DHSES*) provides funds to support efforts of emergency management/homeland security; and

WHEREAS, the NYS DHSES – Office of Interoperable and Emergency Communications (*OIEC*), is administering the Public Safety Answering Points (*PSAP*) program to provide reimbursement for costs associated with PSAP consolidation, operations and improvements; and

WHEREAS, the Sullivan County Division of Public Safety – Office of Emergency Management has been deemed eligible for the funding, in an amount to be determined, to support the improvement of public safety communications; and

WHEREAS, the Sullivan County Division of Public Safety – Office of Emergency Management must submit an application in order to receive said funds and wishes to file an application with the PSAP program; and

WHEREAS, Sullivan County is not required to provide any local cash or in-kind match in support of the PSAP program.

NOW, THEREFORE, BE IT RESOLVED, that the Sullivan County Division of Public Safety – Office of Emergency Management is hereby authorized to prepare an application for funding under the NYS DHSES-OIEC PSAP program.

BE IT FURTHER RESOLVED, that the Sullivan County Legislature hereby authorizes the County Manager, Chairman of the County Legislature, and / or their authorized representative (*as required by the funding source*) to execute any and all necessary documents to submit the NYS DHSES-OIEC PSAP program application for funding; and

BE IT FURTHER RESOLVED, that the Sullivan County Legislature hereby authorizes the County Manager, and / or Chairman of the County Legislature (*as required by the funding source*) to accept the award, and enter into an award agreement or contract to administer the funding secured, in such form as the County Attorney shall approve; and

BE IT FURTHER RESOLVED, that if awarded PSAP program funding, the Sullivan County Division of Public Safety – Office of Emergency Management, shall administer the funds and the PSAP program; and

BE IT FURTHER RESOLVED, that should the PSAP program funding be terminated, the County shall not be obligated to continue any action undertaken by the use of this funding.

Moved by _____, seconded by _____, put to a vote, unanimously carried and declared duly adopted on motion _____.