



BOARD OF SUPERVISORS AGENDA ITEM REPORT AWARDS / CONTRACTS / GRANTS

☐ Award ☒ Contract ☐ Grant

Requested Board Meeting Date: 06/04/2024

* = Mandatory, information must be provided

or Procurement Director Award: ☐

***Contractor/Vendor Name/Grantor (DBA):**

Southern Arizona Rescue Association

***Project Title/Description:**

Provision of Equipment, Supplies and Specialized Volunteers for Search and Rescue Operations

***Purpose:**

State Statute authorizes Board of Supervisors to contract for acquisition, rental or hire of equipment, services, services supervision, supplies, and other resources for use in search or rescue operations involving the life or health of any person. In order to conduct effective operations during manpower-intensive incidents, the Pima County Sheriff's Department (PCSD) utilizes the services of volunteer organizations within the community. SARA has specific equipment and supplies that are utilized to assist with such search and rescue operations initiated by or through the PCSD

***Procurement Method:**

Direct Select per Board of Supervisors Policy D29.6, III-C .

***Program Goals/Predicted Outcomes:**

SARA will provide equipment, supplies, and specially trained volunteers for use in search and rescue operations that occur throughout the County in response to calls the Pima County Sheriffs Department receives and must maintain records regarding the search and rescue activities performed under this Contract.

***Public Benefit:**

SARA is a non-profit, all-volunteer Search and Rescue organization serving Southern Arizona and Pima County since 1958. Their most recent Call Out Response Report reflects forty-three (43) calls for assistance, mostly occurring in the Santa Catalina Mountains in Coronado National Forest. SARA continues to be instrumental in volunteer coordination and response during search and rescue operations in Pima County and it is beneficial to continue our collaboration for service to the public.

***Metrics Available to Measure Performance:**

Contractor must submit Call Out Response Reports for all rescue activities conducted.

***Retroactive:**

No

TO: COB 5-20-24 (1)
Vers: 3
Pgs: 2

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THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (*) fields

Contract / Award Information

Document Type: _____ Department Code: _____ Contract Number (i.e., 15-123): _____
 Commencement Date: _____ Termination Date: _____ Prior Contract Number (Synergen/CMS): _____
☐ Expense Amount \$ _____ * ☐ Revenue Amount: \$ _____

***Funding Source(s) required:** _____

Funding from General Fund? ☐ Yes ☐ No If Yes \$ _____ % _____

Contract is fully or partially funded with Federal Funds? ☐ Yes ☐ No

If Yes, is the Contract to a vendor or subrecipient? _____

Were insurance or indemnity clauses modified? ☐ Yes ☐ No

If Yes, attach Risk's approval.

Vendor is using a Social Security Number? ☐ Yes ☐ No

If Yes, attach the required form per Administrative Procedure 22-10.

Amendment / Revised Award Information

Document Type: CT Department Code: OEM Contract Number (i.e., 15-123): 23*413

Amendment No.: 1 AMS Version No.: 3

Commencement Date: 07/01/2024 New Termination Date: 06/30/2025

Prior Contract No. (Synergen/CMS): _____

☒ Expense ☐ Revenue ☒ Increase ☐ Decrease

Amount This Amendment: \$ 100,000.00

Is there revenue included? ☐ Yes ☒ No If Yes \$ _____

***Funding Source(s) required:** General Fund

Funding from General Fund? ☒ Yes ☐ No If Yes \$ 100,000.00 % 100

Grant/Amendment Information (for grants acceptance and awards)

☐ Award ☐ Amendment

Document Type: _____ Department Code: _____ Grant Number (i.e., 15-123): _____

Commencement Date: _____ Termination Date: _____ Amendment Number: _____

☐ Match Amount: \$ _____ ☐ Revenue Amount: \$ _____

***All Funding Source(s) required:** _____

***Match funding from General Fund?** ☐ Yes ☐ No If Yes \$ _____ % _____

***Match funding from other sources?** ☐ Yes ☐ No If Yes \$ _____ % _____

***Funding Source:** _____

***If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?**

Contact: Lisa Romero

Department: OEM

Telephone: 724-9312

Department Director Signature: _____

Date: 5/12/24

Deputy County Administrator Signature: _____

Date: 14 May 2024

County Administrator Signature: _____

Date: 5/14/2024

Pima County Department of Emergency Management

Project: Provision of Equipment, Supplies and Training for Search and Rescue Operations

Contractor: Southern Arizona Rescue Association

5990 N. Sabino Canyon Rd., Tucson, AZ 85750

Contract No.: CT-OEM-23*413

Contract Amendment No.: 01

Orig. Contract Term: 07/01/2023 – 06/30/2024	Orig. Amount:	\$100,00.00
Termination Date Prior Amendment: N/A	Prior Amendments Amount:	\$ 0.00
Termination Date This Amendment: 06/30/2025	This Amendment Amount:	\$100,000.00
	Revised Total Amount:	\$200,000.00

CONTRACT AMENDMENT

The parties agree to amend the above-referenced contract as follows:

1. Background and Purpose.

1.1. Background. On July 1, 2023 County and Contractor entered into the above referenced agreement to provide provision of equipment, supplies, and training for search and rescue operations.

1.2. Purpose. County requires the continuation of the Project for a one-year period and additional funding.

2. Term. The County is exercising the first extension option to renew the contract for one additional year commencing on July 1, 2024 and terminating on June 30, 2025. If the commencement date is before the Effective Date of this amendment, the parties will, for all purposes, deem the amendment to have been in effect as of the commencement date.

3. Maximum Payment Amount. The maximum amount the County will spend under this Contract, as set forth in Section 4, is increased by \$100,00.00. County's total payments to Contractor under this contract, including any sales taxes, will not exceed \$200,00.00.

All other provisions of the Contract not specifically changed by this Amendment remain in effect and are binding upon the parties.

PIMA COUNTY

Chair, Board of Supervisors

Date

ATTEST

Clerk of the Board

Date

APPROVED AS TO FORM

Darlene M. Cortina
Deputy County Attorney

Darlene M. Cortina
Print DCA Name

4/24/2024
Date

CONTRACTOR

Jason Schluter
Authorized Officer Signature

JASON SCHLUTER, SARA PRESIDENT
Printed Name and Title

4/29/2024
Date

APPROVED AS TO CONTENT

Shane Clark
Shane, Clark Director

4/29/24
Date