



BOARD OF SUPERVISORS AGENDA ITEM REPORT
CONTRACTS / AWARDS / GRANTS

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: 6/18/19

* = Mandatory, information must be provided

or Procurement Director Award ☐

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

Governor's Office of Highway Safety

***Project Title/Description:**

Governor's Office of Highway Safety Accident Investigation Related Materials and Supplies

***Purpose:**

Purchase four (4) mobile computers. Per the Grants Program Manager at GOHS indirect costs are not allowed on this grant.

***Procurement Method:**

Not applicable grant.

***Program Goals/Predicted Outcomes:**

Purchase four (4) to enhance accident investigations throughout Pima County.

***Public Benefit:**

To enhance accident investigation throughout Pima County.

***Metrics Available to Measure Performance:**

Quarterly Reports

***Retroactive:**

No.

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Contract / Award Information

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

Effective 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 22-73.***Amendment / Revised Award Information**

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

Amendment No.: _____ AMS Version No.: _____

Effective Date: _____ New Termination Date: _____

Prior Contract No. (Synergen/CMS): _____

☐ Expense or ☐ Revenue ☒ Increase ☐ Decrease Amount This Amendment: \$ _____Is there revenue included? ☐ Yes ☐ No If Yes \$ _____***Funding Source(s) required:**Funding from General Fund? ☐ Yes ☒ No If Yes \$ _____ % _____**Grant/Amendment Information** (for grants acceptance and awards) ☐ Award ☒ AmendmentDocument Type: GTAM Department Code: SD Grant Number (i.e., 15-123): 19*59Effective Date: 05/21/19 Termination Date: 09/30/19 Amendment Number: #1☐ Match Amount: \$ _____ ☒ Revenue Amount: \$ 12,300.00***All Funding Source(s) required:** National Highway Traffic Safety Administration passed through the Governor's Office of Highway Safety***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)?** Federal funding passed through Governor's Office of Highway SafetyContact: Bonnie SchaefferDepartment: SheriffTelephone: 351-6374Department Director Signature/Date: Julia Gates 5/23/2019Deputy County Administrator Signature/Date: [Signature] 6/11/2019County Administrator Signature/Date: [Signature] 6/11/19

(Required for Board Agenda/Addendum Items)

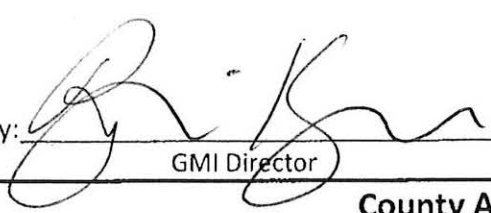

GRANT APPLICATION APPROVAL REQUEST

Instructions: Fill out the top section of this form completely. Contact the program Grants Management & Innovation (GMI) Lead if you require assistance (724-2240). Email your completed request to: GMI@pima.gov. Your request will be forwarded to County Administration for review. Notification of approval requests should be submitted at least 15 business days prior to the application's submission deadline (AP 5-1 Procedure).

Requesting department or entity:	Sheriff	Date: 6/10/19
Contact information:	Name: Teresa Wilson	Telephone: (520) 351-6240
Funding opportunity title:	Governor's Office of Highway Safety - Accident Investigations	
Link to opportunity:	n/a	
Funding agency:	Governor's Office of Highway Safety	
Amount to be requested:	\$ 12,300.00	
Due date and time:		
What are you going to spend the money on?	Purchase four (4) mobile computers for the Department's Motors Unit.	
What will be the benefit to Pima County?	Enhanced accident investigations throughout Pima County.	
Indirect costs – check one:	<input type="checkbox"/> I will be requesting indirect costs. Indirect-cost rate to be requested: % <input checked="" type="checkbox"/> I have attached a request for waiver of indirect costs (GMI Intranet) I <input type="checkbox"/> need help understanding indirect costs	
By: <u><i>J. Z. M. 4442</i></u> Date: <u>6/10/2019</u> <div style="text-align: center;">Department Director or Designee</div>		

GRANT COST/BENEFIT ANALYSIS

To be completed by GMI staff

CFDA No.			
Competitive Criteria:			
Other Factors:			
Number of Awards:	Total amount to be awarded:		
Match Required: <input type="checkbox"/> Yes <input type="checkbox"/> No If required what is the amount/percent: _____			
Terms Notes (e.g. unusual restrictions, reporting burdens, etc.):			
Will this project require additional office/project space?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will this project require staff time that cannot be paid for by the grant?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Will your project require any equipment items over \$5,000 per item?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the proposal use a fixed price contract?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is this project subject to Human Subjects compliance?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does this project involve subrecipients?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there a Statutory Funding Preference from the funding agency?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Allowable Indirect Rate: _____ If Indirect is not allowed, attach documentation.			
List any other proposal or funder specific requirements:	our indirect rate only applies to personnel costs; this grant will only be used for equipment		
GMI notes & recommendations: (PK)			
By: 		Date: 6/10/19	
GMI Director			
County Administrator Approval Request			
Approved: <input checked="" type="checkbox"/> Not Approved: _____ Subject to Further Review: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If your project is subject to further review, please contact your GMI Lead to discuss necessary revisions prior to resubmission of the Grant Approval Application Request.			
By: 		Date: 6-10-2019	
County Administrator or Designee			

REQUEST FOR WAIVER OF INDIRECT COSTS

Requestor (Department Lead)	Teresa Wilson, Sheriff's Department
Project Title	Governor's Office of Highway Safety - Accident Investigations
Sponsor Due Date:	n/a
GMI Lead	

Pima County's Indirect Cost Waiver Policy:

Refer to County Administrator's March 5, 2019 directive regarding recovery of indirect costs:
"No grant acceptance on behalf of the County is to be processed unless there is a clear indication that indirect costs can and are being reimbursed" (insert link to memo).

Instructions for Requesting Indirect Cost Waiver

Please be aware the request for waiver must be submitted with the Grant Application Approval Request. All requests for waiver of indirect costs must present a compelling reason. Reasons that do not meet the "compelling reason" justification include:

- ✓ An application will be more competitive without indirect costs requested
- ✓ A budget cut is anticipated in future years

We are seeking a waiver of indirect costs for this project based on the following:

Grant is for the purchase of equipment only.

(Signature)

Reviewed and Approved by:

(Signature)

County Administrator or his Designee

Date: 6/10/2019



DOUGLAS A. DUCEY
GOVERNOR

ALBERTO GUTIER
DIRECTOR
GOVERNOR'S HIGHWAY SAFETY REPRESENTATIVE

DATE: May 21, 2019

TO: Sheriff Mark Napier
Pima County Sheriff's Department
1750 East Benson Highway
Tucson, Arizona 85714

FROM: Alberto Gutier, Director
Governor's Highway Safety Representative
Governor's Office of Highway Safety

TRANSMITTAL: Change Order Number: 2019-61
Effective Date: May 21, 2019
Revision Number: 001
Project Coordinator: Renee Bracamonte
Contract Number: 2019-A1-012
Program Area: 402-Accident Investigations

NARRATIVE:

The purpose of this Change Order is to add funds Materials and Supplies for four (4) mobile computers for the Pima County Sheriff's Dept. Motor officers to enhance Accident Investigation throughout Pima County.

There is a **\$12,300 increase** in Federal funds because of this Change Order.

Contract Number: 2019-AI-012
Change Order Number: 2019-61

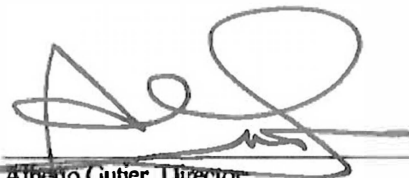
ESTIMATED COSTS:

	<u>From</u>	<u>To</u>
I. Personnel Services (includes overtime)	\$0.00	\$0.00
II. Employee Related Expenses (ERE 40%)	\$0.00	\$0.00
III. Professional and Outside Services	\$0.00	\$0.00
IV. Travel In-State	\$0.00	\$0.00
V. Travel Out-of-State	\$0.00	\$0.00
VI. Materials and Supplies Four (4) computers	\$8,450.00	\$20,750.00
VII. Capital Outlay	\$0.00	\$0.00
TOTAL ESTIMATED COSTS	<u>\$8,450.00</u>	<u>\$20,750.00</u>

*Includes all applicable training, tax, freight, and advertising costs. The GOHS reserves the right to limit reimbursement of Employee Related Expenses from zero (0) to a maximum rate of 40 percent. This is the maximum ERE amount to be reimbursed. It is agreed and understood that the Pima County Sheriff's Department shall absorb any and all expenditures in excess of \$20,750.00.

AGREEMENT AND AUTHORIZATION TO PROCEED

by State Official responsible to the Governor for the
administration of the State Highway Safety Agency.



Alberto Gutier, Director
Governor's Highway Safety Representative
Governor's Office of Highway Safety

5-21-19

Date

PIMA COUNTY

Chairman, Board of Supervisors

Date

Clerk of the Board

Date

APPROVED AS TO FORM AND LEGAL AUTHORITY:



Deputy County Attorney



Date