

AGENDA TRANSMITTAL FORM

To: Board of Supervisors
Date: 01/25/2017
From: Jon Hopkins
(Department Head - please type)

Budget

<input type="radio"/>	Regular Agenda
<input checked="" type="radio"/>	Consent Agenda
<input type="radio"/>	Blue Slip
<input type="radio"/>	Closed Session
Meeting Date Requested: <u>2-14-17</u>	

Department Head Signature _____

Agenda Title: Literacy Grant funds

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

We are requesting an increase to the Literacy Grant budget of \$9,912 ,based upon additional revenue received January 25, 2017 from the California Library Literacy Services Grant. The amount received varies annually and therefore we do not know what the funding amount will be at the time of the original budget. Please see the attached memorandum.

Recommendation/Requested Action:
Accept the funding and approve the budget transfer

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts

Yes

N/A

Is a 4/5ths vote required?

Yes

No

Contract Attached: Yes No N/A

Resolution Attached: Yes No N/A

Ordinance Attached: Yes No N/A

Committee Review?

N/A

Name _____

Committee Recommendation: _____

Comments: _____

Request Reviewed by:

Chairman [Signature]

Counsel GG

Auditor [Signature]

GSA Director [Signature]

CAO _____

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

FOR CLERK USE ONLY

Meeting Date 2-14-17

Time 9:00 a.m.

Item # 1A

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____

A new ATF is required from _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

Completed by _____

Department _____

ATTEST: _____

For meeting _____

Clerk or Deputy Board Clerk

of _____

Save

Print Form

GENERAL SERVICES ADMINISTRATION

MAIL: 12200-B Airport Road, Jackson, CA 95642

LOCATION: 12200-B Airport Road, Martell, CA

PHONE: (209) 223-6744 FAX: (209) 223-0749 E-MAIL: jhopkins@amadorgov.org



SUMMARY MEMORANDUM

TO: Board of Supervisors

FROM: Jon Hopkins, GSA Director *khop*

DATE: January 31, 2017

SUBJECT: Library Literacy Funds

Background: The Library has, since 1992, applied for annual Literacy funds through the California Library Literacy Services Grant. This is the second installment of the California Library Literacy Services Grant funds for the Amador County Library Literacy Program. The amount received varies annually and therefore we do not know what the funding amount will be at the time of the original budget. The amount is predicated on number of people seen within the program, the amount of funding provided to the State and Federal governments and number of hours the program is available to the public. Three (3) years ago due to budget reductions, the program was reduced by 50%; hence affecting the funding stream.

Subject or Key Issue: Increase to Library Literacy Budget by \$9,912.00.

Analysis: Accepting the funding provides partial funding for this program. Not accepting the funds would remove revenue for materials, online resources, training and equipment such as; computers for the program.

Alternatives: There are no viable alternatives unless the County chooses to fund the entire program or eliminate the program all together.

Fiscal or Staffing Impacts: N/A

4/5ths vote: N/A

Recommendation(s):

Accept the funding and approve the budget transfer

c: Chuck Iley, CAO
file

DATE: 1/25/2017

REQUESTED BY: Jon Hopkins

DEPARTMENT: Library-6200

APPROVED BY ADMINISTRATIVE OFFICER: _____ DATE: _____

APPROVED BY ADMINISTRATIVE COMMITTEE: _____ DATE: _____

APPROVED BY BOARD OF SUPERVISORS: _____ DATE: _____

APPROVED BY AUDITOR/CONTROLLER: _____ DATE: _____

JOURNAL ENTRY NO. _____

BUDGET APPROPRIATIONS				REVENUE APPROPRIATIONS			
DEPARTMENT	ACCOUNT	INCREASE	DECREASE	FUND #	REVENUE #	INCREASE\$	DECREASE\$
6200	52425	\$9,912.00		6200	45240	\$9,912.00	

REASON FOR THE REQUEST:

Requesting increase in Library budget in the amount of \$9,912.00 due to additional Library Literacy Grant Revenue received
 1/25/17. \$10,000.00 was approved in the Library budget for Grant revenues and expenditures, an additional \$18,000 was
 received in Library Literacy Grant revenue for fiscal year 2016/17 in September 2016, and this is the next installment of Literacy
 Funds for fiscal year 2016/17 bringing the total to \$27,912.00.

- PLEASE NOTE:**
- TRANSFERS BETWEEN OBJECTS - SALARIES & BENEFITS TO SERVICES & SUPPLIES BOARD OF SUPERVISORS APPROVAL
 - TRANSFER WITHIN OBJECTS - OFFICE EXPENSE TO TRAVEL - COUNTY ADMINISTRATOR APPROVAL
 - FIXED ASSETS - BOARD OF SUPERVISORS APPROVAL
 - TOTAL DOLLARS BUDGET INCREASE - BOARD OF SUPERVISORS APPROVAL

AGENDA TRANSMITTAL FORM

Budget

- Regular Agenda
 - Consent Agenda
 - Blue Slip
 - Closed Session
- Meeting Date Requested:
02/14/2017

To: Board of Supervisors

Date: 02/03/2017

From: James Foley, Director Phone Ext. 625
(Department Head - please type)

Department Head Signature *James Foley*

Agenda Title: Request for Increase in Dept. of Social Services Fixed Assets/Equipment Budget for 2016-2017

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

Request is for increase in Dept. of Social Services Fixed Assets-Equipment Budget (Line Item 56200) for Fiscal Year 2016-2017 due to: (1) Additional costs of \$36,354 in connection with mandated computer up-grades including both hardware and software as well as ongoing recurring production operations charges for central support, and (2) Additional costs of \$5,000 in connection with the purchase of a replacement vehicle originally budgeted at \$20,000. The vehicle to be replaced is four wheel drive and needs to be replaced with a like vehicle. Many clients live up-country where the Social Workers visit them and there is a need for four wheel drive due to snow/ice in winter and because some live down rough, semi-improved roads/lanes.

Funding is from Realignment, Federal and State funds and there will be no impact to the General Fund as a result of this budget increase.

Recommendation/Requested Action:
Authorize the requested action

Fiscal Impacts (attach budget transfer form if appropriate) None Staffing Impacts _____

Is a 4/5ths vote required? Yes No Contract Attached: Yes No N/A

Committee Review? N/A Resolution Attached: Yes No N/A

Name Administrative Committee 02/06/2017 Ordinance Attached Yes No N/A

Committee Recommendation: _____

Comments: _____

Request Reviewed by:

Chairman *[Signature]* Counsel *GE*

Auditor *[Signature]* GSA Director *Hop*

CAO _____ Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Copy of approved ATF to Marcia at Social Services and to Auditor

FOR CLERK USE ONLY

Meeting Date 2-14-17 Time 9:00 a.m. Item # 1B

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes: _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____	A new ATF is required from _____	I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.
	Department _____	
Completed by _____	For meeting _____	ATTEST: _____
	of _____	Clerk or Deputy Board Clerk



DEPARTMENT OF SOCIAL SERVICES

10877 Conductor Blvd. Suite 200, Sutter Creek, CA 95685 Phone (209) 223-6550

To: Board of Supervisors

From: Jim Foley, HHS Director

Date: February 3, 2017

Re: Request one item be placed on the Board of Supervisors' Agenda for February 14, 2017

Request for Increase in Department of Social Services Fixed Assets-Equipment Budget (Line Item 56200) for Fiscal Year 2016-2017 due to:

- Additional costs of \$36,354 in connection with mandated computer up-grades including both hardware and software as well as ongoing recurring production operations charges for central support.

\$55,000 was the original estimated budget approved for this purpose and was based on information provided by the California Health and Human Services Agency Office of Systems Integration, however, since that budget was created and approved, there has been a requirement for additional upgrades itemized in statement attached and requiring an additional \$36,354 which would bring the total budget to \$91,354.

- Additional costs of \$5,000 in connection with the purchase of a replacement vehicle originally budgeted at \$20,000. The vehicle to be replaced is four wheel drive and needs to be replaced with a like vehicle. Many clients live up-country where the Social Workers visit them and there is a need for four wheel drive due to snow/ice in winter and because some live down rough, semi-improved roads/lanes.

Funding is from Realignment, Federal and State funds and there will be no impact to the General Fund as a result of this budget increase.

56200 - Fixed Assets - Equipment

Currently Budgeted for Computer Replacements	\$	55,000.00
39 Refresh Workstations/Software	\$	(59,800.00)
Amount over estimate	\$	(4,800.00)

To Be Purchased

5 CWS/CMS Replacement Computers	\$	(4,875.00)
Windows 10 Ent for CWS/CMS Comp	\$	(4,579.00)
Server Upgrade-Dell PowerEdge R730	\$	(13,400.00)

Estimate Only

6 Workstations to replace virtuals	\$	(5,400.00)
Windows 10 Enterprise	\$	(3,300.00)

Total Increase for Computers Needed: \$ 36,354.00

Currently Budgeted for Vehicle	\$	20,000.00
Upgrade to 4 Wheel Drive Vehicle	\$	(5,000.00)

Total Increase for Vehicle Needed: \$ 5,000.00

Grand Total of Increase Needed for Fixed Assets: \$ 41,354.00

BUDGET TRANSFER REQUEST

DATE: February 7, 2017

REQUESTED BY: James Foley

DEPARTMENT: Social Services

APPROVED BY ADMINISTRATIVE OFFICER: _____ DATE: _____

APPROVED BY ADMINISTRATIVE COMMITTEE: _____ DATE: _____

APPROVED BY BOARD OF SUPERVISORS: _____ DATE: _____

APPROVED BY AUDITOR/CONTROLLER: _____ DATE: _____

JOURNAL ENTRY NO. _____

BUDGET APPROPRIATIONS				REVENUE APPROPRIATIONS			
DEPARTMENT #	ACCOUNT #	INCREASE \$	DECREASE \$	DEPT/FUND #	REVENUE #	INCREASE \$	DECREASE \$
5106	56200	\$41,354					
5106	50100		\$41,354				

REASON FOR THE REQUEST:

Increase to fixed assets for additional computer needs and vehicle cost while decreasing salaries due to position vacancies. Approved by the Administrative Committee on February 6, 2017.

PLEASE NOTE:

- TRANSFERS BETWEEN OBJECTS – SALARIES & BENEFITS TO SERVICES & SUPPLIES - BOARD OF SUPERVISORS APPROVAL
- TRANSFERS WITHIN OBJECTS – OFFICE EXPENSE TO TRAVEL – COUNTY ADMINISTRATOR APPROVAL
- FIXED ASSETS – BOARD OF SUPERVISORS APPROVAL
- TOTAL DOLLARS BUDGET INCREASE – BOARD OF SUPERVISORS APPROVAL

AGENDA TRANSMITTAL FORM

To: Board of Supervisors

Date: 02/01/17

From: James Rooney

(Department Head - please type)

Phone Ext. 454

- Regular Agenda
- Consent Agenda
- Blue Slip
- Closed Session

Meeting Date Requested:

02/14/17

Department Head Signature *James Rooney*

Agenda Title: SECURED ROLL CORRECTIONS

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)
 Request for approval of roll corrections which exceed 50% of the original value or a decrease of \$150,000 or more:
 Apn's 005-393-006-000, 012-100-021-506 & 012-100-021-501.

Recommendation/Requested Action:

APPROVE

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts

Is a 4/5ths vote required? Yes No

Contract Attached: Yes No N/A
 Resolution Attached: Yes No N/A
 Ordinance Attached: Yes No N/A

Committee Review? N/A

Name _____

Committee Recommendation: _____

Comments: _____

Request Reviewed by:

Chairman *[Signature]*

Counsel *GG*

Auditor _____

GSA Director *Hop*

CAO _____

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Assessor _____

FOR CLERK USE ONLY

Meeting Date 2-14-17 Time 9:00 a.m. Item # 2a

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____
 Completed by _____

A new ATF is required from _____
 Department _____
 For meeting _____
 of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

ATTEST: _____
 Clerk or Deputy Board Clerk

County of AMADOR
ASSESSOR ROLL CORRECTION

Asmt 005-393-006-000 Tax Year 2016 R/C # A0613 Roll Type S Fee Parcel 005-393-006-000 Originating Asmt 005-393-006-000 From TRA 005-014 New TRA 005-014

R&T 1 75.54 R&T 2 Value History Y Taxroll Asmt Only N Taxability Code 800

Roll Value	New Value	Sup From Net	Sup To Net
Land 144,867	71,068		
Structure 289,734	233,508		
Growing			
PP MH			
Fixtures R/P			
Fixtures			
Personal Property			
HOX			
Other Exemptions			
CODE	Net Change -130,025	Supl Change	

Owner WEST COAST VENTURE CAPITAL LLC
Mailing Address C/O CARL E BERG
10050 BANDLEY DR
CUPERTINO CA 95014

Situs 1304 FAIRWAY DR
IONE CA 95640

Bill Comments CHANGE IN OWNERSHIP AS OF 9/11/14

Supl Info

10% PP Penalty N
Restricted N
Timber Preserve N
5151 Interest N
506 Interest N

Event From/Thru Dates
Ownership From/Thru Dates
506/5151 From/Thru Dates
From 1 From 2 Thru

TaxBill Days
R/C Date Jan 19, 2017
Created By TM

Print R/C Wks C
Print R/C Letter C
R/C Completed C

Appraiser Initials Date
Supv Appr Initials Date
Chief Appr Initials Date

Asmt Clerk Initials Date
Off Mgr Initials Date

Assessor Signature Date Auditor Signature Date
County Counsel Signature Date
Signature Date



County of AMADOR
ASSESSOR ROLL CORRECTION

Asmt: 012-100-021-506 Tax Year: 2016 R/C #: A0553 Roll Type: S Fee Parcel: 012-100-021-506 Originating Asmt: 012-100-021-506 From TRA: 052-048 New TRA: 052-048

R&T 1: 51 R&T 2: Value History: Y Taxability Code: 000

Roll Value	New Value	Sup From Net	Sup To Net
Land	201,903		
Structure	97,000		
Growing			
PP MH			
Fixtures R/P			
Fixtures			
Personal Property			
HOX			
Other Exemptions			
CODE	Net Change	-104,903	Supl Change

Owner: BUENA VISTA BIOMASS POWER LLC
 Mailing Address: C/O OTOKA ENERGY CORP
 1915 S VILLAGE SQUARE CIR APT 203
 SIOUX FALLS SD 57103-4072

Situs: 4655 COAL MINE RD
 IONE CA

Bill Comments: PROP 8 VALUE ADJUSTMENT

Supl Info

10% PP Penalty: N
 Restricted: N
 Timber Preserve: N
 5151 Interest: N
 506 Interest: N

Event From/Thru Dates: [] []
 Ownership From/Thru Dates: [] []

506/5151 From/Thru Dates: From 1 [] Thru []

TaxBill Days: []
 R/C Date: Jan 13, 2017
 Created By: TM

Print R/C Wks: C
 Print R/C Letter: C
 R/C Completed: C

Appraiser: [] [] []
 Supv Appr: [] [] []
 Chief Appr: [] [] []

Asmt Clerk: [] [] []
 Off Mgr: [] [] []

Assessor Signature: [Signature] Date: 1/13/17
 Auditor: [Signature] Date: 1/13/17
 County Counsel: [Signature] Date: 1/13/17

County of AMADOR
ASSESSOR ROLL CORRECTION

Asmt: 012-100-021-501 Tax Year: 2016 R/C #: A0552 Roll Type: S Fee Parcel: 012-100-021-501 Originating Asmt: 012-100-021-501 From TRA: 052-046 New TRA: 052-046

R&T 1: 51 R&T 2: Value History: Y Taxroll Asmt Only: N Taxability Code: 800

Roll Value	New Value	Sup From Net	Sup To Net
Land	838,184		
Structure	5,550		
Growing			
PP MH			
Fixtures R/P			
Fixtures			
Personal Property			
HOX			
Other Exemptions			
CODE	Net Change		Supl Change
	-434,965		

Owner: ONETO GROUP INC
PO BOX 694
JACKSON CA 95642

Supl Info

10% PP Penalty: N
Restricted: N
Timber Preserve: N
5151 Interest: N
506 Interest: N

Event From/Thru Dates: [] []
Ownership From/Thru Dates: [] []

506/5151 From/Thru Dates: From 1 [] Thru []

TaxBill Days: []
R/C Date: Jan 13, 2017
Created By: TM

Print R/C Wks: C
Print R/C Letter: C
R/C Completed: C

Appraiser: [] [] []
Supv Appr: [] [] []
Chief Appr: [] [] []

Asmt Clerk: [] [] []
Off Mgr: [] [] []

Situs: []

Bill Comments: PROP 8 VALUE ADJUSTMENT

Assessor Signature: [Signature] Date: 1/13/17
Auditor Signature: [Signature] Date: 1/13/17
County Counsel Signature: [Signature] Date: 2/3/17

tmilbourne

AGENDA TRANSMITTAL FORM

- Regular Agenda
- Consent Agenda
- Blue Slip
- Closed Session

Meeting Date Requested:

02/14/2017

To: **Board of Supervisors**

Date: January 26, 2017

*Resol. +
Ag.*

From: Lori Ford

Phone Ext. 422

(Department Head - please type)

Department Head Signature

[Signature] 1/26/17

Agenda Title:

Building Department: Agreement to Limit Use of Agricultural Structure for Baldinelli Exemption Trust

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

Baldinelli Exemption Trust has submitted an application for an Agricultural Exemption (AG01044) and has provided all of the necessary documents including a signed and notarized "AGREEMENT TO LIMIT USES OF AGRICULTURAL STRUCTURE" (attached) for recording as required by County Code Section 15.04.040. Subject property is located at 10900 Shenandoah Road Plymouth, CA being APN 007-120-003-000.

Recommendation/Requested Action:

Adopt the resolution and authorize Chairman to sign the "Agreement to Limit Uses of Agricultural Structure".

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts NONE

NONE

Is a 4/5ths vote required?

Yes

No

Contract Attached:

Yes

No

N/A

Resolution Attached:

Yes

No

N/A

Ordinance Attached:

Yes

No

N/A

Comments:

Committee Review?

N/A

Name

Committee Recommendation:

Request Reviewed by:

Chairman

[Signature]

Counsel

[Signature]

Auditor

GSA Director

[Signature]

CAO

Risk Management

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

When Agreement is signed, return to Building Dept. w/certified Resolution & Acknowledgment of the Chairman's signature.

FOR CLERK USE ONLY

Meeting Date

2-14-17

Time

9:00 Am.

Item #

3A

Board Action: Approved Yes ___ No ___

Unanimous Vote: Yes ___ No ___

Ayes: _____

Resolution _____

Ordinance _____

Other: _____

Noes: _____

Resolution _____

Ordinance _____

Absent: _____

Comments: _____

Distributed on

A new ATF is required from

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

Completed by

Department

For meeting

ATTEST: _____

of

Clerk or Deputy Board Clerk

Recording requested by:
BOARD OF SUPERVISORS

When recorded send to:
BUILDING DEPARTMENT

BEFORE THE BOARD OF SUPERVISORS OF THE
COUNTY OF AMADOR, STATE OF CALIFORNIA

IN THE MATTER OF:

RESOLUTION AUTHORIZING RECORDATION OF
AGREEMENT TO LIMIT USES OF AGRICULTURAL
STRUCTURE – BALDINELLI EXEMPTION TRUST

RESOLUTION NO. 17-xxx

WHEREAS Joanne Baldinelli as Trustee of Baldinelli Exemption Trust, (“Owner”) desires to construct an agricultural structure on his/her/their Property and have applied for an Agricultural Building Permit Exemption; and

WHEREAS, Owner has applied for an Agricultural Exemption and has complied satisfactorily with all other conditions of the Application for the Permit; and

WHEREAS, an Agreement to limit uses of the agricultural structure for Permit #AG01044 is required by Amador County Code Chapter 15.04.040 and was authorized by the Board of Supervisors at their February 14, 2017 meeting; and

WHEREAS, Owner understands and agrees that the exempted agricultural structure can only be used as provided in said Amador County Code Chapter 15.04.040 and that any violation of the conditions under which the Agricultural Building Permits was granted may void the exemption.

THEREFORE, BE IT HEREBY RESOLVED by the Board of Supervisors of the County of Amador that said Board does hereby approve the Agreement to limit uses of an exempt agricultural structure for Building Permit #AG01044 by and between the County of Amador and Baldinelli Exemption Trust, on the terms and conditions contained therein as it relates to Building Permit #AG01044.

BE IT FURTHER RESOLVED that the Chairman of said Board is hereby authorized to sign and execute said Agreement on behalf of the County of Amador.

The foregoing resolution was duly passed and adopted by the Board of Supervisors of the County of Amador at a regular meeting thereof, held on the 14th day of February, 2017 by the following vote:

AYES: Richard M. Forster, Lynn A. Morgan, Patrick Crew, Frank U. Axe, and Brian Oneto

NOES:

ABSENT:

Richard M. Forster, Chairman, Board of Supervisors

ATTEST:

JENNIFER BURNS, Clerk of
the Board of Supervisors, Amador County, California

By: _____

RECORDING REQUESTED BY AND
WHEN RECORDED MAIL TO:

Amador County Building Department
810 Court Street
Jackson, CA 95642

APN: 007-120-003-000
Site Address: 10900 Shenandoah Road Plymouth
Agricultural Building Permit Exemption No.:AG01044

SPACE ABOVE THIS LINE FOR RECORDER'S USE ONLY

AGREEMENT TO LIMIT USES OF AGRICULTURAL STRUCTURE

This Agreement is entered into as of February 14, 2017 by and between the COUNTY OF AMADOR, a political subdivision of the State of California (the "County") and Joanne Baldinelli-Baldinelli Exemption Trust, ("Owner").

RECITALS

A. Owner owns certain real property (the "Property") situated in the unincorporated area of the County of Amador, State of California, described as follows:

Parcel "C" as shown on that certain Parcel map no. 132 for Robert Jameson, which recorded November 24, 1971 in Book 19 of Maps and Plats, page 41, Amador County Records.

Owner desires to construct an agricultural structure on the Property and has applied for an Agricultural Building Permit Exemption.

B. Owner understands and agrees that the exempted agricultural structure can only be used as provided in Amador County Code Chapter 15.04 and that any violation of the conditions under which the Agricultural Building Permit was granted may void the exemption.

C. As a condition of issuance of the Agricultural Building Permit Exemption, the County requires that the restrictions on the use of the structure and all further obligations of Owner set forth in this Agreement run with the land and be made a matter of public record so that any future purchasers of the property will be made aware of them.

D. Owner is aware and agrees that this agreement will be recorded in the Amador County Recorder's Office.

NOW, THEREFORE, the parties agree as follows:

1. Recitals. The parties acknowledge the truth of the recitals set forth above, which are incorporated into this Agreement.
2. Restriction on Use of Agricultural Structure. Owner agrees that in no event shall the exempted agricultural structure be used for any purpose other than to house farm implements, hay, grain,

poultry, livestock or horticultural products. The structure shall not be a place of human habitation or a place of employment where agricultural products are processed, treated, or packaged. Employees may only enter the structure on an occasional basis to store or remove equipment or otherwise perform tasks of a limited duration that require infrequent access to the structure. The structure shall not be a place used by the public.

3. Additional Obligations of Owner.

3.1 Owner understands and agrees that despite an exemption from obtaining a permit, the exempted agricultural structure shall be constructed in compliance with Chapter 15.04 of the Amador County Code, and all other applicable laws of Amador County, the State of California and any federal laws that may apply.

3.2 Owner understands and agrees that any violation of this Agreement or other condition under which the Agricultural Building Permit Exemption was granted may, at the County's sole discretion, void the exemption.

3.3 Owner acknowledges that if the Agricultural Building Permit Exemption becomes void, Owner shall be required to remove the structure or fully permit the structure (building permit application, plan check, inspection process, etc.) and pay all fees then in effect.

3.4 Owner agrees to indemnify the County of Amador and its agents, officers and employees from any claim, action or proceeding against the County or its agents, officers and employees arising from performance or non performance of its obligations under this Agreement.

4. County's Remedies Upon Default. Owner acknowledges that any violation of this Agreement shall constitute a public nuisance. Upon any violation of this Agreement, the County may pursue any remedies provided by statute or ordinance. In addition to all other remedies provided by law, Owner further agrees that the County or any governmental entity having jurisdiction may obtain immediate injunctive relief against any use of the agricultural structure that is inconsistent with this Agreement.

5. Covenant Running with the Land. Owner agrees that the restrictions and obligations of Owner set forth in this Agreement shall be perpetual and run with the land, binding future owners of the Property, unless and until the exempted agricultural structure is either (i) removed from the property, or (ii) fully permitted by the County.

6. No Waiver of Remedies. Failure to exercise any remedy provided for in this Agreement shall not, under any circumstances, be construed as a waiver of the remedy.

7. Entire Agreement. This Agreement contains the entire agreement of the parties respecting its subject matter, and supersedes any and all prior discussions, representations, and oral or written agreements, if any, between the parties.

ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of AMADOR)

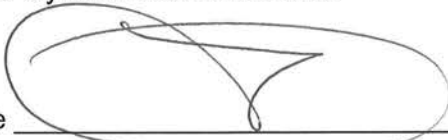
On JANUARY 24, 2017 before me, TANYA JO KARR, NOTARY PUBLIC
(insert name and title of the officer)

personally appeared JOANNE BALDINELLI,
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are
subscribed to the within instrument and acknowledged to me that he/~~she~~/they executed the same in
his/~~her~~/their authorized capacity(ies), and that by his/~~her~~/their signature(s) on the instrument the
person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

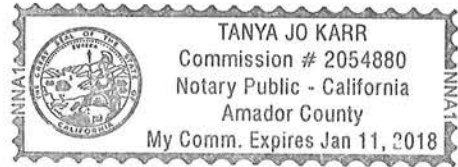
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing
paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____



(Seal)



AGENDA TRANSMITTAL FORM

To: Board of Supervisors

Date: 02/09/2017

From: J.C. Wegner
(Department Head - please type)

Phone Ext. _____

<input type="radio"/>	Regular Agenda
<input checked="" type="radio"/>	Consent Agenda
<input type="radio"/>	Blue Slip
<input type="radio"/>	Closed Session
Meeting Date Requested:	
<u>02/14/2017</u>	

Department Head Signature _____

Agenda Title: Proclamation of local emergency

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

The storms beginning February 6, 2017 which are still continuing have caused significant infrastructure damages. The totality of the damage, and estimates to restore the county to pre-incident conditions is still being determined. Additionally, damage associated with these storms may not immediately manifest itself. Based upon the already identified damages which are estimated at over \$601,000.00 and to afford the county, cities and special districts therein to avail themselves of any potential state and federal aid, a local state of emergency proclamation should be considered. The proclamation is attached.

Recommendation/Requested Action:

Issue proclamation

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts

Potential state and federal funding

None

Is a 4/5ths vote required?

Yes

No

Contract Attached: Yes No N/A

Resolution Attached: Yes No N/A

Ordinance Attached: Yes No N/A

Committee Review?

N/A

Name _____

Committee Recommendation: _____

Comments: _____

Request Reviewed by:

Chairman _____

Counsel _____

Auditor _____

GSA Director _____

CAO _____

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

FOR CLERK USE ONLY

Meeting Date 2-14-17

Time 9:00 A.M.

Item # 38

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes: _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____

A new ATF is required from _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

Department _____

Completed by _____

For meeting _____

ATTEST: _____

of _____

Clerk or Deputy Board Clerk

Save

Print Form

**BEFORE THE BOARD OF SUPERVISORS OF THE
COUNTY OF AMADOR, STATE OF CALIFORNIA**

IN THE MATTER OF:

RESOLUTION PROCLAIMING EXISTENCE OF
A LOCAL EMERGENCY AND REQUESTING
GOVERNOR TO (1) PROCLAIM A STATE OF
EMERGENCY AND (2) REQUEST A
PRESIDENTIAL DECLARATION

RESOLUTION 17-xxx

WHEREAS, Ordinance No. 1396 of the County Code of Amador empowers the Board of Supervisors to proclaim the existence of a local emergency when this county is affected or likely to be affected by a public calamity; and

WHEREAS, The Board of Supervisors of the County of Amador does hereby find:

That the county sustained considerable damages caused by the 2017 February Storms commencing on or about February 6, 2017 and recovery efforts and further damage assessments are still underway, and that conditions of extreme peril exist to the safety of persons and property within this county; and

That there is a great likelihood that further damage is yet to be discovered which will be made part of an official damage assessment, and the full recovery process from these storms is likely to take months.

NOW, THEREFORE, IT IS HEREBY PROCLAIMED that a local emergency now exists throughout the county; and

IT IS FURTHER PROCLAIMED AND ORDERED that during the existence of said local emergency the powers, functions, and duties of the Director of Emergency Services and the emergency organization of the county shall be those prescribed by state law, and by ordinance and resolutions of this county approved by the Board of Supervisors.

IT IS FURTHER ORDERED that a copy of this declaration be forwarded through the Director of the California Governor's Office of Emergency Services to the Governor of California with the request that he proclaim the County of Amador to be in a state of emergency; and further that the Governor request a Presidential Declaration.

IT IS FURTHER ORDERED that said local emergency shall be deemed to continue to exist until its termination is proclaimed by the Board of Supervisors of the County of Amador, State of California.

AYES: Richard M. Forster, Patrick Crew, Lynn A. Morgan, Frank U. Axe, and
Brian Oneto

NOES:

ABSENT:

Richard Forster, Chairman, Amador County Board of Supervisors

ATTEST:

JENNIFER BURNS, Clerk of
the Board of Supervisors, Amador County, California

By: _____

February 2017 storm

APPLICANT: Amador County Transportation & Public Works

CONTACT NAME AND PHONE NUMBER: Aaron Buscateri 209 223 6248

DATE COMPLETED: 2/9/17

IS THIS AN AMENDED LIST OF PROJECTS?

ITEM #	LOCATION	DESCRIPTION OF DAMAGE AND SCOPE OF WORK	COST ESTIMATE	CATEGORY*	WAS WORK COMPLETED BY FORCE ACCT. (FA), CONTRACT (C) OR BOTH (F/C)?	ENTER "ENV" IF THERE ARE ENVIRONMENTAL ISSUES OR "HIST" FOR HISTORIC ISSUES, OR BOTH	WAS THERE INSURANCE COVERAGE? IF YES, ENTER DEDUCTIBLE AMOUNT	WAS THE FACILITY DAMAGED IN A PRIOR DISASTER(S)? IF YES, ENTER DISASTER NAME(S) OR NUMBER(S)	ARE THERE COST EFFECTIVE HAZARD MITIGATION MEASURES THAT MAY PREVENT FUTURE DAMAGE?
1	2.717 Pioneer Creek Rd PM 0.75	Shoulder of Road slid. Road restricted to one lane. Will require retaining wall ± 1200 SF up to 18 ft tall. 76" x 18"	\$						
	2.717 Pioneer Creek Rd	Restrict road to single lane with portable rail.	\$1,000	B	FA				
			\$						
			\$						
			\$						
			\$						
			\$						

*CATEGORY: A) Debris Clearance; B) Protective Measures; C) Road System; D) Water Control Facility; E) Buildings and Equipment; F) Public Utility System; G) Other. (Note: If a single site has more than one category, indicate the category that represents the majority of damage.)

% complete

0%

100%



AGENDA TRANSMITTAL FORM

- Regular Agenda
- Consent Agenda
- Blue Slip
- Closed Session

Meeting Date Requested:

2-14-17

To: **Board of Supervisors**

Date: 1/30/2017

AG

From: JC Wegner
(Department Head - please type)

Phone Ext. 515

Department Head Signature 

Agenda Title: ATCAA Agreement

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

This is an agreement which authorizes ATCAA to provide Positive Parenting and Anger Reduction classes to persons incarcerated in the Amador County Jail. The services are paid for with Inmate Welfare Funds.

Recommendation/Requested Action:

Approve Agreement, Authorize Chairman's Signature

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts None

Funded via IWF _____

Is a 4/5ths vote required?

Yes

No

Contract Attached: Yes No N/A

Resolution Attached: Yes No N/A

Ordinance Attached: Yes No N/A

Committee Review? _____

N/A

Name _____

Committee Recommendation: _____

Comments: _____

Request Reviewed by:

Chairman 

Counsel GG

Auditor _____

GSA Director Hop

CAO _____

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

FOR CLERK USE ONLY

Meeting Date 2-14-17

Time 9:00 A.M.

Item # 4A

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes: _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____

A new ATF is required from _____

Department _____

Completed by _____

For meeting _____

of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

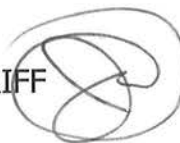
ATTEST: _____

Clerk or Deputy Board Clerk



MEMORANDUM

TO: BOARD OF SUPERVISORS
FROM: JAMES WEGNER, UNDERSHERIFF
SUBJECT: ATCAA CONTRACT
DATE: FEBRUARY 2, 2017
CC:



Consistent with best practices, the Amador County Sheriff's Office (ACSO) provides programs to incarcerated inmates in an effort to improve their situations, reduce recidivism and assist them in being productive citizens. Two of the programs provided are Positive Parenting and Anger Reduction. This has been contractually provided for several years by the Amador Tuolumne Community Action Agency (ATCAA). It is funded via Inmate Welfare Funds. Approximately two years ago at the request of a Board of Supervisor we explored other options for these services. No acceptable appropriate alternative was found. Attached please find three copies of the annual renewal contract for ATCAA to provide inmate services.

CONTRACT BETWEEN AMADOR COUNTY
AND AMADOR-TOULUMNE COMMUNITY ACTION AGENCY FOR
POSITIVE PARENTING AND ANGER REDUCTION SKILLS FOR
INMATES OF THE AMADOR COUNTY DETENTION FACILITY

This CONTRACT is made and entered into the ___ day of _____, 2017, in Jackson, California by and between the County of Amador, a political subdivision of the State of California, hereinafter referred to as the COUNTY, and Amador-Tuolumne Community Action Agency, hereinafter referred to as CONTRACTOR.

WHEREAS, COUNTY desires to facilitate Positive Parenting and Anger Reduction Skill education for the inmates of the Amador County Detention Facility pursuant to Title 15, Section 1070, of the California Code of Regulation; and,

WHEREAS, CONTRACTOR has employees who have the required knowledge and skills to operate such a program; and,

WHEREAS, CONTRACTOR is a nonprofit private and public organization established under the Economic Opportunity Act of 1964 and Community Action Agencies help people to help themselves in achieving self-sufficiency; and,

WHEREAS, COUNTY desires to engage CONTRACTOR to provide staff to continue the current program.

NOW, THEREFORE, the parties mutually agree hereto as follows:

1. **ADMINISTRATION:** COUNTY'S Sheriff or his designated representative, hereinafter called "County Representative", shall represent COUNTY in all matters pertaining to this CONTRACT and shall administer this CONTRACT on behalf of COUNTY.

2. **DESCRIPTION OF SERVICES:**
 - a. CONTRACTOR shall provide employees who have received sufficient education and training to enable them to competently perform the services listed on Exhibit "A" when directed to do so by the Sheriff, or his designee. CONTRACTOR shall designate the employee or employees who shall render services pursuant to this Contract; provided, however, that if COUNTY has an objection to any such employee, CONTRACTOR shall designate a different employee or employees to provide services under this Contract.
 - b. CONTRACTOR shall provide weekly Positive Parenting classes and Anger Management classes for inmates incarcerated in the Amador County Jail. CONTRACTOR shall not provide any greater than 8 hours per week for these classes unless pre-authorized by the Amador County Jail Facility Administrator.

CONTRACTOR shall develop, design and implement the curriculum for the classes being provided to the inmates at CONTRACTORS expense.

CONTRACTOR shall provide all handouts and materials necessary for the successful instruction of the provided classes. CONTRACTOR shall meet with the Jail Programs Manager at least monthly regarding the child visitation program to ensure effectiveness of the provided instruction. The Jail Programs Manager agrees to meet with the CONTRACTOR representative at least monthly regarding child visitation program to ensure effectiveness of the instruction. CONTRACTOR shall be available to the Jail Programs Manager on a consultation basis regarding individual participating inmates.

- c. BACKGROUND: CONTRACTOR employees shall submit to a live scan fingerprint criminal history background check through the California Department of Justice at the expense of the COUNTY for review by the COUNTY prior to CONTRACTOR employee/s being allowed any interaction with any inmate of the COUNTY detention facility (see exhibit B).
- d. FACILITY SAFETY AND SECURITY: CONTRACTOR will agree to the following conditions. CONTRACTOR employees will agree to be subject to search and seizure at any time while on the grounds of the Amador County Jail. No person who is under the influence of alcohol or drugs will be admitted into the facility. No passing of messages or gifts to inmates from any person, or from inmates to persons outside of the facility, or from inmates to other inmates; i.e. male to female, female to male, male to male, etc. Under Penal Code section 4570, unlawful communication is a criminal offense. Any communication either verbal or written that can be construed as an attempt to assist in an escape may be an arrestable offense and is prohibited. No food, drinks, cigarettes, cigars, pipes, matches, lighters, no pens (pencils only), no sharp objects, no weapons or items that could be used as weapons, or items that could be used in an escape; i.e., firearms, knives, chains, wire, rope, etc. Purses and brief cases will be taken at the door and secured in the Jail control room. Disrespect to any Amador County Sheriff's Office personnel or volunteers will not be tolerated and may result in dismissal from the volunteer program. All CONTRACTOR employees being allowed within the Amador County detention facility will agree to and sign a Volunteer Indemnification and "Hold Harmless" agreement prior to admittance to the detention facility (see exhibit C). The COUNTY shall have and maintain the authority to disallow and refuse without reason any CONTRACTOR employee admittance to the facility and its' inmates. All CONTRACTOR employees entering the Amador County Jail must be aware that they will or possibly will have contact with a person or inmate/s who have a communicable disease. All CONTRACTOR employees will be aware that the Amador County Jail has a no hostage policy.
- e. NON-DISCRIMINATION: During the performance of this CONTRACT, CONTRACTOR shall not unlawfully discriminate, harass, or allow harassment against any employee, applicant for employment, or inmate because of sex, race, color, ancestry, religion, national origin, disability, physical or mental status, age or marital status.

- f. The parties acknowledge that CONTRACTOR has adopted a drug-free workplace policy in conformance with State and Federal laws that cover CONTRACTOR's employees. A copy of the policy is attached hereto as Exhibit "D". The CONTRACTOR has received a copy of the COUNTY of Amador Alcohol-Free and Drug-Free Workplace policy number 2-300. The CONTRACTOR has read and signed the Attachment "B", the Policy Acknowledgment form for Contractors. (see attached original signed Acknowledgment form).
- g. PRISON RAPE ELIMINATION ACT (PREA): All CONTRACTOR employees who enter the Amador County Jail shall be trained on PREA standards. The training shall be administered by the CONTRACTOR and shall be approved by the COUNTY.

3. TERMS OF AGREEMENT:

- a. The term of the CONTRACT shall commence on January 3, 2017 and shall terminate on December 31, 2017, unless otherwise terminated.
- b. Either party may terminate this CONTRACT by providing the other party with written notice at least thirty (30) days prior to the date of termination. COUNTY may immediately terminate this CONTRACT for cause. The CONTRACT is dependent upon funding from the Inmate Health and Welfare fund pursuant to section 4025(e) of the California Penal Code, funds being expended for the welfare and education of the inmate population of the Amador County Jail.

4. COMPENSATION:

COUNTY shall reimburse CONTRACTOR for services rendered pursuant to this CONTRACT at a rate of Twenty-five Dollars and no Cents (\$25.00) per hour for the life of the contract. CONTRACTOR shall submit quarterly a detailed statement of hours worked (broken down by general category). COUNTY shall not pay for mileage in any way whatsoever.

5. CONFIDENTIALITY:

All parties to this CONTRACT shall maintain the confidentiality of all its records, including, but not limited to, billings, COUNTY records, inmate records, and all other applicable Federal, State, and County laws, regulations, ordinances, and directives relating to confidentiality of inmate records and information.

6. INSURANCE:

CONTRACTOR shall provide proof of policy of insurance satisfactory to the COUNTY Risk Manager evidencing that CONTRACTOR maintains the following:

- a. Worker's Compensation Insurance: CONTRACTOR shall procure and maintain, at CONTRACTOR'S own expense during the term hereof, Worker's Compensation Insurance for all of its employees to be engaged in work and provide proof of said insurance to COUNTY.

- b. Commercial General Liability Insurance: CONTRACTOR shall procure and maintain, at CONTRACTOR's own expense during the term hereof, Commercial General Liability Insurance, in an amount of not less than One Million Dollars (\$1,000,000) combined single limit coverage per occurrence, including but not limited to endorsements for the following coverage:

Personal injury, premises-operations, products and complete operations, blanket contractual, and independent contractor's liability.

- c. Automobile Liability Insurance: CONTRACTOR shall procure and maintain, at CONTRACTOR'S own expense during the term hereof, Comprehensive Automobile Liability Insurance, on owned, hired, leased and non-owned vehicles used in connection with CONTRACTOR's business in an amount of not less than One Million Dollars (\$1,000,000) combined single limit coverage per occurrence and provide said proof of insurance to COUNTY.

Certificates of Insurance for Commercial General Liability and Automobile Liability shall be on file with the County of Amador, Office of Risk Management, 810 Court Street, Jackson, Ca. 95642 within ten (10) days after Board of Supervisor's approval of this contract. The Commercial General Liability and Automobile Liability policies must be endorsed to name the County of Amador, its officers, employees and volunteers as additional insured.

7. INDEMNITY

CONTRACTOR shall hold harmless, defend and indemnify COUNTY and its officers, officials, employees and volunteers from and against any and all liability, loss, damage, expense, and costs (including without limitation costs and fees of litigation and reasonable attorney's fees) of every nature arising out of or in any manner connected with the performance by CONTRACTOR and its employees of work under the Agreement, or CONTRACTOR's failure to comply with any of its

obligations contained in this Agreement, except such loss or damage that is caused by the sole negligence or willful misconduct of COUNTY.

8. MISCELLANEOUS

- a. Only the Board of Supervisors has the authority to agree to any extension of time, change order, change in the Duties and Responsibilities, change in the CONTRACT price, or other term or condition affecting either CONTRACTOR's or COUNTY's duties set forth herein. CONTRACTOR acknowledges that no COUNTY staff person or COUNTY officer has the power to amend the terms and conditions of the CONTRACT. Any change not authorized in advance in writing by the Board of Supervisors shall be null and void.
- b. It is understood that CONTRACTOR and its employees are not acting as employees of the COUNTY, but solely as an independent CONTRACTOR. This CONTRACT shall not be construed or considered to create an employer/employee relationship of any nature.

IN WITNESS THEREOF, this Agreement has been executed by and behalf of the parties on the day and year below.

MARTIN A. RYAN, SHERIFF-CORONER
AMADOR COUNTY SHERIFF'S OFFICE

Date: _____

RICHARD FORSTER, CHAIRMAN
AMADOR COUNTY BOARD OF SUPERVISORS

Date: _____

ATTEST:

AMADOR COUNTY CLERK OF THE BOARD

Date: _____

RAJEEV RAMBOB, EXECUTIVE DIRECTOR
ATCAA

Date: _____

APPROVED AS TO FORM:

By 

GREG GILLOTT
AMADOR COUNTY COUNSEL

AGENDA TRANSMITTAL FORM

To: **Board of Supervisors**

Date: February 2, 2017

AGM

- Regular Agenda
- Consent Agenda
- Blue Slip
- Closed Session

Meeting Date Requested:

2-14-17

From: James Wegner
(Department Head - please type)

Phone Ext. 515

Department Head Signature _____

Agenda Title: Department of Boating and Waterways Agreement

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

This is the annual agreement between the Amador County Sheriff's Office and the California State Parks Department of Boating and Waterways wherein the County is reimbursed by the state for marine patrol and enforcement services on public waterways within Amador County.

Recommendation/Requested Action:

Approve agreement, authorize Chairman's signature, issue minute order

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts Loss of one deputy sheriff if not approved

Loss of revenue if not approved _____

Is a 4/5ths vote required?

Yes

No

Contract Attached:

Yes

No

N/A

Resolution Attached:

Yes

No

N/A

Ordinance Attached

Yes

No

N/A

Comments: _____

Committee Review? _____

N/A

Name _____

Committee Recommendation: _____

Request Reviewed by:

Chairman *[Signature]*

Counsel *GC*

Auditor _____

GSA Director *top*

CAO _____

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

FOR CLERK USE ONLY

Meeting Date

2-14-17

Time

9:00 A.M.

Item #

4B

Board Action: Approved Yes ___ No ___

Unanimous Vote: Yes ___ No ___

Ayes: _____

Resolution _____

Ordinance _____

Other: _____

Noes: _____

Resolution _____

Ordinance _____

Absent: _____

Comments: _____

Distributed on _____

A new ATF is required from _____

Department

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

Completed by: _____

For meeting

ATTEST: _____

of _____

Clerk or Deputy Board Clerk



MEMORANDUM

TO: BOARD OF SUPERVISORS
FROM: JAMES WEGNER, UNDERSHERIFF
SUBJECT: DBAW AGREEMENT
DATE: FEBRUARY 2, 2017
CC:

A handwritten signature in black ink, appearing to be "J. Wegner", enclosed in a circular scribble.

The Amador County Sheriff's Office provides patrols and boating safety services to navigable waterways within the County of Amador. The California Department of Boating and Waterways reimburses the County of Amador for those services. This in part funds one staff position and operating expenses for the vessels. Attached please find three copies of the annual agreement. Please approve the agreement, authorize the Chairman's signature and issue a minute order.



Boating Safety and Enforcement Financial Aid Program Agreement

This agreement entered into this *1ST day of July, 2017*, by and between the CALIFORNIA DEPARTMENT OF PARKS AND RECREATION, DIVISION OF BOATING AND WATERWAYS, hereinafter called "Department," and the *COUNTY OF AMADOR*, hereinafter called "Agency";

WITNESSETH

WHEREAS, Contingent on approval of the Fiscal Year 2017-2018 budget, the Department intends to agree with Agency for the purpose of performing boating safety and enforcement activities as described in Title 14, California Code of Regulations Section 6593.3; and

WHEREAS, Agency is equipped, staffed and prepared to provide such services on the terms and conditions set forth in this agreement and in accordance with Title 14, California Code of Regulations Section 6593 et seq.; and

WHEREAS, pursuant to Title 14, California Code of Regulations Section 6593.6, Department shall enter into an annual agreement with each participating agency;

NOW, THEREFORE, it is mutually agreed as follows:

I. Applicable Law

Agency shall observe and comply with all applicable federal, state, and county statutes, ordinances, regulations, directives, and laws, including, but not limited to, Harbors and Navigation Code Section 663.7 and Section 6593 et seq. of Title 14, California Code of Regulations. Agreement shall be deemed to be executed within the State of California and construed and governed by the laws of the State of California.

II. Description of Services

Agency shall conduct boating safety and enforcement activities in the jurisdiction of the Agency in consideration of the payments hereinafter set forth.

III. Payments

- A. Maximum Amount. The amount the Department shall be obligated to pay for services rendered under this agreement shall not exceed \$104,136.00 for the agreement term in full consideration of Agency's performance of the services described in this agreement.
- B. Rate of Payment. The Department shall reimburse Agency in accordance with the reimbursement procedures set forth in Title 14, California Code of Regulations Section 6593.9.

- C. Submission of Claims. Agency shall submit claims for reimbursement to the Department contact person identified in paragraph V of this contract on a ___ monthly **OR** ___ quarterly basis. **(Please check one)**
- D. Failure to Submit Claims. Claims for reimbursement shall be submitted within 60 days following the last day of the reporting period. Pursuant to Title 14, California Code of Regulations 6593.9 (i), the Department may reduce an Agency's allocation by five percent if the Agency exceeds the sixty-day billing period and an additional five percent for every thirty-day period thereafter that the Agency is late in filing a claim.

IV. Records

Agency shall maintain records pursuant to Section 6593.10 of Title 14, California Code of Regulations.

V. Notice

Notice shall be in writing and shall be deemed to have been served when it is deposited in the United States mail, first class postage prepaid, and addressed as follows:

TO DEPARTMENT

*Ms. Joanna Andrade
Department of Parks and Recreation
Division of Boating and Waterways
One Capitol Mall, Suite 500
Sacramento, CA 95814*

TO AGENCY

*Amador County Sheriff's Department
700 Court Street
Jackson, CA 95642*

Either party may change the address to which subsequent notice and/or other communication can be sent by giving written notice designating a change of address to the other party.

VI. Term

This agreement shall be for the term beginning **July 1, 2017**, and ending **June 30, 2018**.

VII. Prior Agreements

All prior agreements regarding this subject matter between Department and Agency are hereby terminated effective June 30 prior to the term beginning date of this agreement.

VIII. Amendment

No amendment or variation of the terms of this agreement shall be valid unless made in writing and signed by the parties hereto.

IX. Termination

Agency may terminate this agreement without cause in writing at any time. Department may terminate this agreement without cause upon a sixty (60) days written notice served upon the Agency.

X. Special Provisions

- A. Agency hereby certifies that the obligations created by this agreement do not violate the provisions of Sections 1090 to 1096 of the Government Code.
- B. This agreement shall have no force or effect until signed by the Department, Agency, and approved by the Department of General Services Legal Department, if required.
- C. Agency shall continue with the responsibilities of this agreement during any dispute.

IN WITNESS WHEREOF, the parties hereto have executed this agreement as of the day and year first above written.

CALIFORNIA DEPARTMENT OF PARKS AND RECREATION, DIVISION OF BOATING AND WATERWAYS

By: _____

*California Department of Parks and Recreation,
Division of Boating and Waterways*

Date: _____

“Department”

COUNTY OF AMADOR

By: _____

Title: _____

Date: _____

“Agency”

AGENDA TRANSMITTAL FORM

<input type="checkbox"/>	Regular Agenda
<input checked="" type="checkbox"/>	Consent Agenda
<input type="checkbox"/>	Blue Slip
<input type="checkbox"/>	Closed Session
Meeting Date Requested:	
<u>2-14-17</u>	

To: Board of Supervisors
 Date: January 18, 2017

Ag.

From: JC Wegner
 (Department Head - please type)

Phone Ext. _____

Department Head Signature _____

Agenda Title: Cold Homicide Case Investigator

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)
 This is an agreement between the Amador County Sheriff's Office and retired homicide investigator Albert Fox to conduct supplemental investigation into the unsolved 1987 murder of Gloria Jean Shomler. This is a limited term, limited scope agreement, not to exceed \$3,600.00

Recommendation/Requested Action:
Approve agreement and authorize Chairman's signature

Fiscal Impacts (attach budget transfer form if appropriate) _____ Staffing Impacts None

Funded via AB443 Rural Crimes Funds

Is a 4/5ths vote required? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Contract Attached: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Resolution Attached: Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Ordinance Attached: Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Comments: _____
Committee Review? <u>N/A</u> <input type="checkbox"/> Name _____ Committee Recommendation: _____	

Request Reviewed by:

Chairman [Signature] Counsel _____
 Auditor _____ GSA Director [Signature]
 CAO _____ Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

FOR CLERK USE ONLY

Meeting Date 2-14-17 Time 9:00 A.M. Item # 4C


Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____
 Noes _____ Resolution _____ Ordinance _____
 Absent: _____ Comments: _____

Distributed on _____	A new ATF is required from _____ Department _____	I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.
Completed by _____	For meeting of _____	ATTEST: _____ Clerk or Deputy Board Clerk



MEMORANDUM

TO: AMADOR COUNTY BOARD OF SUPERVISORS
FROM: JAMES WEGNER, UNDERSHERIFF 
SUBJECT: COLD CASE INVESTIGATOR AGREEMENT
DATE: JANUARY 19, 2017
CC:

The Amador County Sheriff's Office has multiple unsolved murder/homicide cases which remain open but suspended. These cases date back to the mid 1980's. There currently is insufficient existing staff available to conduct follow up on these "cold cases". Additionally, cold murder/homicide investigations require specific training and experience, which current staff do not possess and/or to which they have not been exposed. As available evidentiary analysis technologies change and advance, and as the personal situations of suspects and potential witnesses change, and with the need to bring those responsible to justice along with providing closure to friends and family members of victim's, it is important to periodically revisit these investigations. As such, Amador County Sheriff Martin Ryan has identified retired California Department of Justice Investigator Al Fox, a subject matter expert, who is willing to participate in the necessary identified follow up associated with the 1987 Gloria Jean Shomler murder for a fee of \$3,600.00. This fee will be funded via AB443 funds available to the Sheriff. An agreement for services is attached for your approval.

CONTRACTOR SERVICES AGREEMENT

THIS CONTRACTOR SERVICES AGREEMENT (this "Agreement") is entered into as of _____, 2017 by and between the COUNTY OF AMADOR, a political subdivision of the State of California ("County") and ALBERT FOX, an individual (the "Contractor").

RECITALS

A. County desires to engage professional assistance in the area of Cold Homicide Case Investigation, and to provide related assistance to County.

B. County desires to engage Contractor, and Contractor desires to be hired by County, to perform certain investigative services, upon the terms and conditions set forth in this Agreement.

NOW THEREFORE, in consideration of the performance of the covenants herein contained, the parties agree as follows:

1. SERVICES TO BE RENDERED BY CONTRACTOR.

1.1 Contractor will perform the investigative tasks (the "Work") as directed by Amador County Sheriff Martin A. Ryan to include:

Gloria Jean Shomler Homicide Investigation, involving all supplemental investigations as identified by Sheriff Martin A. Ryan and/or the California Department of Justice Violent Crime Investigative Support Section.

1.2 Contractor is authorized to proceed with the Work immediately upon full execution of this Agreement and as directed by Sheriff Ryan. Contractor agrees to commence performance forthwith and to complete the Work in a reasonable time determined by the parties and events.

2. SERVICES TO BE RENDERED BY COUNTY. County agrees to make available to Contractor investigative files, records, documents and evidence applicable to the Work.

3. CHANGES IN SCOPE OF SERVICES. Only the County Board of Supervisors or its designees have the authority to agree to any extension of time, change order, change in the scope of work, change in the Agreement compensation, or other term or condition affecting either Contractor's or County's duties set forth herein. Adjustments in compensation shall be determined through negotiation between the parties to the Agreement. Contractor acknowledges that no County staff person or County officer other than the Board of Supervisors or members of the Board directly authorized to negotiate this Agreement or any changes thereto have the power to amend the terms and conditions of this Agreement. Any change not so authorized in advance in writing by the Board of Supervisors or such designated members of the Board shall be null and void.

4. TERMINATION OF AGREEMENT. County reserves the right to terminate this Agreement with or without cause on thirty (30) days' written notice to Contractor.

In the case of such early termination, Contractor shall be paid for all services satisfactorily rendered up to the effective date of termination, up to the maximum fee prescribed for any task.

5. COMPENSATION TO CONTRACTOR. County shall pay Contractor the sum of \$3,600.00 upon completion of the supplemental investigations, pursuant to this Agreement. The Contractor shall submit an invoice documenting all completed investigative measures/steps.
6. SUPERVISION OF THE WORK.
 - 6.1 The Sheriff shall supervise and direct the Work of the Contractor. The Contractor shall be solely responsible for all methods, techniques, sequences and procedures, and shall coordinate all portions of the Work. County will deal only through Contractor, who shall be responsible for the proper execution of the entire Work.
 - 6.2 Contractor shall be responsible to County for the acts and omissions of Contractor's employees, subcontractors, and their agents and employees, and any other persons performing any of the Work under a contract with Contractor.
7. CONFERENCES AND MEETINGS. In the event it should become necessary for County to hold any conference or meeting regarding the Work, Contractor upon request of County shall attend any such conference or meeting.
8. ASSIGNMENTS. Neither party may assign, sublet, or transfer its interest in this Agreement without the written consent of the other.
9. LICENSES, PERMITS, ETC. Contractor represents and warrants to County that he has all licenses, permits, qualifications, and approvals of whatsoever nature that may be legally required for Contractor to perform the Work. Contractor represents and warrants to County that Contractor shall, at its sole cost and expense, keep in effect at all times during the term of this Agreement any license, permits, and approvals that are legally required for Contractor to perform the Work.
10. INSURANCE.
 - 10.1 Worker's Compensation Insurance: Contractor is aware of the provisions of Section 3700 of the Labor Code which require every employer to be insured against liability for Workers' Compensation or to undertake self-insurance in accordance with the provisions of that code. A Certificate of Insurance must be on file with the Amador County Office of Risk Management as evidence of coverage if Contractor is subject to the provisions of this Labor Code section. In the event that the Contractor needs to hire additional help, it will be the Contractor's responsibility to procure and maintain workers' compensation insurance and provide proof of said insurance to County.
 - 10.2 Commercial General Liability Insurance: Contractor will be afforded Liability Coverage under the County of Amador's coverage, but only for the work performed under this Agreement, and for no other purpose.

- 10.3 Automobile Liability Insurance: Contractor shall procure and maintain at Contractor's own expense during the term hereof Comprehensive Automobile Liability Insurance on owned, hired, leased and non-owned vehicles used in connection with Contractor's business in an amount of not less than Five Hundred Thousand Dollars (\$500,000) combined single limit coverage per occurrence and provide proof of said insurance to County. A certificate of insurance for the Automobile Liability Policy shall be on file with the County of Amador, Office of Risk Management, 810 Court Street, Jackson, CA 95642-9534 within ten (10) days after Board of Supervisor's approval of this Agreement. The Automobile Liability Policy must be endorsed to name the County of Amador, its officers, employees and volunteers as additional insureds, as respects this Agreement.
- 10.4 Professional Liability Insurance: Contractor will be afforded Professional Liability Coverage under the County of Amador's coverage, but only for the work performed under this Agreement, and for no other purpose.
11. INDEMNITY. The parties shall indemnify and hold one another, their officers, agents and employees harmless from and against any and all claims, losses, liabilities, damages, demands, and actions (collectively "Claims") arising out of each parties' respective performance of this Agreement, but only in proportion to and to the extent such liability is caused by or results from the negligent or intentional act or omission of the indemnifying party, its officers, agents, or employees.
12. OWNERSHIP OF REPORTS. Upon completion or termination of this Agreement, County shall be entitled to immediate possession of, and Contractor shall furnish, on request, all reports, computations, plans, correspondence and other pertinent data gathered or computed by Contractor for the Work prior to termination.
13. NON-DISCRIMINATION. Contractor agrees that, in the performance of services under this Agreement, Contractor will not discriminate or permit discrimination against any person or class of persons by reason of race, color, creed, sex, or national origin in any manner prohibited by Title VI of the Civil Rights Act of 1964 or any applicable State enactments, as said regulations may be amended.
14. ALCOHOL-FREE AND DRUG-FREE WORKPLACE POLICY. Contractor acknowledges that it has received a copy of County's policy regarding an alcohol-free and drug-free workplace.
15. NOTICES. All notices herein provided to be given, or which may be given, by either party to the other, shall be deemed to have been fully given when made in writing and deposited in the United States Postal Services, certified with return receipt requested, with postage prepaid and addressed as follows:

To Contractor: Albert Fox
7806 Cottingham Ct
Sacramento, CA 95616
(916) 728-1459

To County:

Martin A. Ryan
Amador County Sheriff-Coroner
700 Court Street
Jackson, CA 95642
(209) 223-6515


The address to which notice shall or may be mailed, as aforesaid, to either party shall or may be changed by written notice given by such party or the other, as hereinbefore provided, but nothing herein contained shall preclude the giving of any such notice by personal service.

16. AGREEMENT EXECUTION. The individual executing this Agreement on behalf of Contractor represents that he or she is fully authorized to execute and deliver this Agreement. If a corporation, Contractor shall, within thirty (30) days after execution of this Agreement, deliver to County a certified copy of a resolution of the Board of Directors of said corporation authorizing or ratifying the execution of this Agreement.
17. CONSTRUED PURSUANT TO CALIFORNIA LAW. The parties hereto agree that the provisions of this Agreement will be construed pursuant to the laws of the State of California.
18. INCORPORATION OF AGREEMENTS AND AMENDMENTS. This Agreement contains all agreements of the parties with respect to any matter mentioned herein. No other Agreement or understanding pertaining to any such matter shall be effective, unless in writing signed by the party to be charged. This Agreement may be modified by the parties hereto only in writing and signed by both parties.
20. TERM. The term of this agreement shall be for a period of two (2) years or for an amount not to exceed \$50,000.00. This agreement may be extended upon mutual concurrence by all parties.
21. SEVERABILITY. The invalidity of any provision of this Agreement, as determined by a court of competent jurisdiction, shall in no way affect the validity of any other provision hereof.
22. TIME OF ESSENCE. Time is hereby expressly declared to be the essence of this Agreement and of each and every provision thereof, and each such provision is hereby made and declared to be a material, necessary, and essential part of this Agreement.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the day and year first above written.

AMADOR COUNTY SHERIFF:

BY: _____


Martin A. Ryan,
Sheriff-Coroner

CONTRACTOR:

Albert Fox
Federal Tax I.D. No.: 550-58-4921

AMADOR COUNTY BOARD OF SUPERVISORS:

BY: _____

Richard Forster, Chairman
Amador Co. Board of Supervisors

COUNTY:

Approved As To Form

BY: _____


Gregory Gillott,
County Counsel

AGENDA TRANSMITTAL FORM

<input type="checkbox"/>	Regular Agenda
<input checked="" type="checkbox"/>	Consent Agenda
<input type="checkbox"/>	Blue Slip
<input type="checkbox"/>	Closed Session
Meeting Date Requested:	
02/14/2017	

To: Board of Supervisors
 Date: 02/05/2017

Agg

From: James Foley, Director of HHS Phone Ext. 412
 (Department Head - please type)

Department Head Signature *James Foley*

Agenda Title: Authorize Jim Foley, Director of HHS to sign an MOU with Law Enforcement, Sheriff and First Responders to administer Narcan to them

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

The Director of Health and Human Services, requests the Board of Supervisors to authorize Jim Foley, Director of Health and Human Services, to sign an MOU to give Narcan to organizations such as local law enforcement, sheriff and first responders.

See attached Memo and MOU template

Recommendation/Requested Action:
Approval for Jim Foley, to sign MOU with law enforcement and first responders to administer Narcan to them.

Fiscal Impacts (attach budget transfer form if appropriate) None Staffing Impacts None

Is a 4/5ths vote required? Yes No

Contract Attached: Yes No N/A
 Resolution Attached: Yes No N/A
 Ordinance Attached: Yes No N/A

Committee Review? N/A

Name _____

Committee Recommendation: _____

Comments: _____

Request Reviewed by:

Chairman *J. Gray* Counsel *Ge*
 Auditor _____ GSA Director *Hop*
 CAO _____ Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Return approval ATF to Angie Grau in Behavioral Health.

FOR CLERK USE ONLY

Meeting Date 2-14-17 Time 9:00 A.M. Item # 4D

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___
 Ayes: _____ Resolution _____ Ordinance _____ Other: _____
 Noes: _____ Resolution _____ Ordinance _____
 Absent: _____ Comments: _____

Distributed on _____	A new ATF is required from _____ Department _____ For meeting _____ of _____	I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors. ATTEST: _____ Clerk or Deputy Board Clerk
Completed by _____		

BEHAVIORAL HEALTH DEPARTMENT

10877 Conductor Boulevard, Suite 300 • Sutter Creek, CA 95685 •
Phone (209) 223-6412 • Fax (209) 223-0920 • Toll Free Number (888) 310-6555



To: Board of Supervisors

From: James Foley, HHS Director

A handwritten signature in black ink, appearing to be "J. Foley", is written over the name "James Foley" in the "From:" line.

Date: February 7, 2017

RE: Authorize Jim Foley, Director of HHS, to sign an MOU with Law Enforcement, Sheriff and First Responders to administer Narcan to them.

Issue / background: Opioid overdose is a rapidly growing and lethal problem. With increasingly powerful opioids coming on the street more people are overdosing and dying. Recently, an easy to use antidote called naloxone or Narcan has become available that can reverse the effects of overdoses and save lives.

Amador has obtained about 200 doses of Narcan intranasal spray. It is easy to use, has no bad side effects if given to someone who is not overdosing and is paid for by the state.

Health Officer, Dr. Kerr, Jim Foley and Amy Hixon (AOD supervisor) are working to get this life saving antidote into the hands of appropriate persons in Amador County.

It will be given to law enforcement, ambulance drivers, paramedics, fire department personnel and individuals who use drugs or know those who do.

For organizations a template MOU has been prepared to ensure it is used appropriately, to help ensure reporting occurs when the Narcan is used and to return the Narcan when it expires.

What is being requested?: It is requested that the BOS give Jim Foley permission to sign the MOU's that will be prepared when an organization takes possession of the Narcan. (Individuals and families will not sign an MOU).

Analysis and alternatives: Some counties are not doing any MOU's since the Narcan is being given to individuals without any contracting. It is also possible to return to the BOS for an MOU for each organization that is taking possession of Narcan. This would be very slow and the desire is to get the Narcan out to those who can use it as soon as possible.

Recommendation: It is recommended that the BOS allow Jim Foley to sign the MOU's as the liability is low and the need for getting the Narcan out quickly is high.

MEMORANDUM OF UNDERSTANDING
BETWEEN THE COUNTY OF AMADOR
BEHAVIORAL HEALTH AND

FOR THE ADMINISTRATION AND STORAGE OF NARCAN NASAL SPRAY KITS

This Memorandum of Agreement ("MOU") is entered into this _____ day of _____, 2017 between Amador County Behavioral Health (BH) and _____.

First responder employees and persons designated by _____ in Attachment A will be trained in the use, administration, and storage of Narcan Kits; and

_____ has agreed to store the Narcan Kits under conditions specified in Attachment A.

I. TERMS

NOW THEREFORE, BH AND _____ AGREE as follows:

- 1) For no charge, _____ shall receive a total of ___ kits after training by BH or a delegated party is completed.
- 2) _____ shall file a report with BH within ___ days of each administration of a Narcan Kit as reflected by the form set forth as Attachment B.
- 3) _____ shall have discretion as to which employees participate under this MOU and the time, place and manner in which such employees may carry the Narcan kits but only after consultation with BHS.
- 4) BHS shall have unilateral discretion to demand return of all Narcan Kits provided based on expiration date or any other reason dictated by business necessity.
- 5) The term of this MOU is open ended, but shall in no event continue after exhaustion or return of all Narcan kits under the terms of this MOU

II. NOTICE:

Any notice or communication related to this MOU, including change of address of either party during the term of the MOU shall be in writing and may be personally served or sent by prepaid first class mail to the respective parties as follows:

To BHS : Jim Foley, LCSW, HHS Director

To:

III. INDEMNIFICATION:

The parties shall mutually hold each other, the county, its elected and appointed officials, officers, employees, agents and volunteers, harmless from any and all claims, losses, and damages for every cause, including but not limited to injury to person or property, resulting from performance under this MOU.

IV. INSURANCE:

Each of the parties of this MOU is an entity which is self-insured and/or carries general liability insurance.

V. ASSIGNABILITY

This MOU shall not be assignable by any party.

VI. ENTIRE AGREEMENT

This MOU contains the entire agreement of the parties relating to the subject matter of this MOU and supersedes all prior agreements and representations between the parties with respect to the subject matter hereof.

VII. CAPTIONS

The captions of this MOU are for convenience in reference only and the words contained therein shall in no way be held to explain, modify, amplify or aid in the interpretation, construction or meaning of the provisions of this MOU.

VIII. COUNTERPARTS

This MOU may be executed simultaneously and in several counterparts, each of which shall be deemed an original, but which together shall constitute one and the same instrument.

IX. OTHER DOCUMENTS

The parties agree that they shall cooperate in good faith to accomplish the object of this MOU and, to that end, agree to execute and deliver such other and further instruments and documents as may be necessary and convenient to the fulfillment of these purposes.

X. AUTHORITY

All parties to this MOU warrant and represent that they have the power and authority to enter into this MOU in the names, titles and capacities herein stated and on behalf of any entities, persons, estates or firms represented or purported to be represented by such entity(s), person(s), estate(s) or firm(s) and that all formal requirements necessary or required by any state and/or federal law in order to enter into this MOU are in full compliance. Further, by entering into this MOU neither party hereto shall have breached the terms or conditions of any other contract or agreement to which such party is obligated, which such breach would have a material effect hereon.

Signature lines

Jim Foley, LCSW HHS Director

Date

Agency or organization receiving narcans

Date

ATTACHMENT A

STAFF DESIGNATION:

Staff designated to carry, use, and administer Narcan kits shall be trained prior to being issued the kits.

A list shall be maintained that contains the following information:

Staff Name

Date Trained

kits issued

Expiration date of kit(s)

Date(s) kits were used (complete report back form and to ACBH)

STORAGE:

Narcan kits shall be stored in a secure locked area at room temperature between 59 F and 77 F.

Narcan kits can withstand short excursions between 39 F and 104 F.

Expiration is just under two years.

AGENDA TRANSMITTAL FORM

To: Board of Supervisors

Date: February 6, 2017

From: Jon Hopkins, GSA Director
(Department Head - please type)

Phone Ext. 759

Department Head Signature _____

<input type="checkbox"/>	Regular Agenda
<input checked="" type="checkbox"/>	Consent Agenda
<input type="checkbox"/>	Blue Slip
<input type="checkbox"/>	Closed Session
Meeting Date Requested:	
<u>2/14/2017</u>	

Agenda Title: Assignment and Assumption of Lease for Airport Lot #170

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

This is an assignment and assumption of lease by and between James Hoyle ("Original Lessees") and Theodore Rosario Jr. Trust ("Successor Lessee") for Airport Space #170. The Lease agreement between the County of Amador and James Hoyle allows for the assignment of lease. Please see the attached memorandum.

Recommendation/Requested Action:

Approve Assignment and Assumption of Lease for Airport Lot #170

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts N/A

N/A

Is a 4/5ths vote required?

Yes

No

Contract Attached:

Yes

No

N/A

Resolution Attached:

Yes

No

N/A

Ordinance Attached:

Yes

No

N/A

Comments: Original Lease & 1st Assignment & Assumption & current Assignment & Assumption are attached

Committee Review?

N/A

Name _____

Committee Recommendation: _____

Request Reviewed by:

Chairman _____

Counsel GS

Auditor _____

GSA Director JHop

CAO _____

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

GSA, -Jon Hopkins, Risk Management (electronically)

FOR CLERK USE ONLY

Meeting Date

2-14-17

Time

9:00 A.M.

Item #

4e

Board Action: Approved Yes ___ No ___

Unanimous Vote: Yes ___ No ___

Ayes: _____

Resolution _____

Ordinance _____

Other: _____

Noes: _____

Resolution _____

Ordinance _____

Absent: _____

Comments: _____

Distributed on _____

A new ATF is required from _____

Department _____

For meeting _____

of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

ATTEST: _____

Clerk or Deputy Board Clerk

Save

GENERAL SERVICES ADMINISTRATION

MAIL: 12200-B Airport Road, Jackson, CA 95642

LOCATION: 12200-B Airport Road, Martell, CA

PHONE: (209) 223-6744 FAX: (209) 223-0749 E-MAIL: jhopkins@amadorgov.org



SUMMARY MEMORANDUM

TO: Board of Supervisors

FROM: Jon Hopkins, GSA Director *JH*

DATE: February 6, 2017

SUBJECT: Airport Hangar Space #170 Assignment and Assumption of Lease

Background: Not all Airport leases are consistent in their terms and conditions as these leases (leases for private aircraft hangar) have been developed over time and have long terms of 30 to 35 years. In 2000, the Airport began an effort to standardize leases establishing a first right of refusal as they expire, through negotiations, or when a new lease is developed. For hangar space 170 this provision is *not* contained within the lease and lease does not expire until February 1, 2030.

This lease was originally between the County and Mr. Mark Cornell for a term of 30 years executed on January 25, 2000. The lease was later assigned and assumed by Mr. James Hoyle on April 11, 2000 (attached for reference is the original lease and first executed assignment & assumption).

In addition, a credit application is provided to the Airport from the potential new tenant. The purpose is to determine an applicant's financial health and avoid potential future issues of non-payment and/or default. The Auditor's office reviews the credit report and provides a determination of risk.

Analysis: The new tenant's credit review was positive and no other known reason can be determined to withhold such request. In accordance with lease section 4(b) the County may not unreasonably withhold such request.

Alternatives: N/A

Fiscal or Staffing Impacts: N/A

4/5ths vote: N/A

Recommendation(s): Approve the Assignment and Assumption of Lease for Airport Hangar Space #170.

c: Chuck Iley, CAO
file

ASSIGNMENT AND ASSUMPTION OF LEASE

THIS ASSIGNMENT AND ASSUMPTION OF LEASE (this "Assignment") is made as of _____, 2017 by and between James Hoyle ("Original Lessee") and Theodore Rosario Jr. Trust ("Successor Lessee").

R E C I T A L S

A. Amador County and Original Lessee entered into that certain Lease (the "Lease") dated January 25, 2000 whereby Amador County leased to Original Lessee certain real property located in the unincorporated area of Amador County, California, more particularly described in the Lease.

B. Original Lessee and Successor Lessee acknowledge a discrepancy between the Term as stated in the Lease, and the term purported in a Memorandum of Assignment of Lease and Amendment Thereto ("Memorandum") recorded with the Amador County Clerk-Recorder on April 13, 2000. The Original Lessee and the Successor Lessee further acknowledge and agree that the 30-year Term of the Lease is controlling and that the Term was not modified by the Memorandum.

C. Original Lessee desires to assign all of its right, title and interest under the Lease to Successor Lessee, and Successor Lessee desire to assume the duties and obligations of Original Lessee under the Lease.

NOW, THEREFOR, FOR GOOD AND VALUABLE CONSIDERATION, Original Lessee and Successor Lessee agree as follows:

1. Original Lessee and Successor Lessee hereby acknowledge the truth of the recitals, as set forth above, which are incorporated in to this Assignment.

2. Original Lessee hereby assigns and transfers to Successor Lessee all of Original Lessee's right, title and interest in and to the Lease.

3. Original Lessee warrants that it has not previously assigned its interest in the Lease to any third party.

4. Successor Lessee accepts the foregoing assignment and assumes all of the duties, obligations and responsibilities of Original Lessee under the Lease.

5. This Assignment may be executed in duplicate copies, and any signed duplicate copy shall be equivalent to a signed original for all purposes.

///

///

///

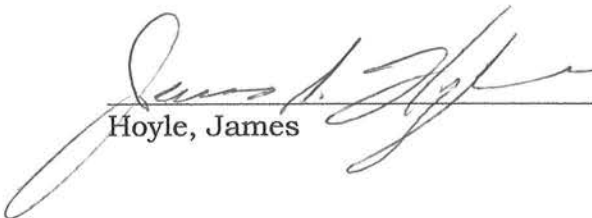
///

///

IN WITNESS WHEREOF, Original Lessee and Successor Lessee have executed this Assignment as of the date set forth opposite their signatures below.

ORIGINAL LESSEE:

Date: 2/2, 2017


Hoyle, James

SUCCESSOR LESSEE:

Date: 2/1/17, 2017


Rosario, Theodore (trustee)

CONSENT BY COUNTY OF AMADOR

County of Amador hereby consents to the above assignment of the Lease by Original Lessee to Successor Lessee, effective as of the date set forth below. This consent in no way releases Original Lessee from any obligation to be performed by Original Lessee under this Lease, whether occurring before or after such assignment.

Dated: _____, 2017

BY: _____
Richard Forster
Chairman, Board of Supervisors

APPROVED AS TO FORM:
GREGORY GILLOT, AMADOR COUNTY
COUNSEL

ATTEST:
JENNIFER BURNS, CLERK OF THE
BOARD OF SUPERVISORS

BY: _____

BY: _____

AGENDA TRANSMITTAL FORM

To: Board of Supervisors

Date: February 6, 2017

From: Jon Hopkins, GSA Director
(Department Head - please type)

Phone Ext. 759

Department Head Signature _____

<input type="checkbox"/>	Regular Agenda
<input checked="" type="checkbox"/>	Consent Agenda
<input type="checkbox"/>	Blue Slip
<input type="checkbox"/>	Closed Session
Meeting Date Requested:	
<u>2/14/2017</u>	

Agenda Title: Assignment and Assumption of Lease for Airport Lot #113

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

This is an assignment and assumption of lease by and between Richard Lemmon ("Original Lessees") and Ron Candiloro ("Successor Lessee") for Airport Lot #113. The Lease agreement between the County of Amador and Richard Lemmon allows for the assignment of lease. Please see attached memorandum.

Recommendation/Requested Action:
Approve Assignment and Assumption of Lease for Airport Lot #113

Fiscal Impacts (attach budget transfer form if appropriate) N/A Staffing Impacts N/A

N/A

Is a 4/5ths vote required? Yes No

Contract Attached: Yes No N/A
 Resolution Attached: Yes No N/A
 Ordinance Attached: Yes No N/A

Committee Review? N/A

Name _____

Committee Recommendation: _____

Comments: Original Lease & Assignment & Assumption are attached

Request Reviewed by:

Chairman [Signature] Counsel GG

Auditor _____ GSA Director [Signature]

CAO _____ Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)
GSA,-Jon Hopkins, Risk Management (electronically)

FOR CLERK USE ONLY

Meeting Date 2-14-17 Time 9:00 A.M. Item # 4f

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____

Completed by _____

A new ATF is required from _____ Department For meeting of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

ATTEST: _____
Clerk or Deputy Board Clerk

Save

GENERAL SERVICES ADMINISTRATION

MAIL: 12200-B Airport Road, Jackson, CA 95642

LOCATION: 12200-B Airport Road, Martell, CA

PHONE: (209) 223-6744 FAX: (209) 223-0749 E-MAIL: ihopkins@amadorgov.org



SUMMARY MEMORANDUM

TO: Board of Supervisors

FROM: Jon Hopkins, GSA Director *Hop*

DATE: February 6, 2017

SUBJECT: Airport Hangar Space #113 Assignment and Assumption of Lease

Background: Not all Airport leases are consistent in their terms and conditions as these leases (leases for private aircraft hangar) have been developed over time and have long terms of 30 to 35 years. In 2000, the Airport began an effort to standardize leases establishing a first right of refusal as they expire, through negotiations, or when a new lease is developed. For hangar space 113 this provision is contained within the lease.

When this provision exists, the County's procedure (approved by the Board on December 18, 2007) requires the Airport Manager review the offer with the General Services Administration (GSA) Director to determine if there are available funds to purchase the hangar and/or if the offer is unreasonable based upon market conditions; of which the GSA Director may decline the offer. If there is funding and/or the offer is reasonable and would benefit the Airport, the GSA Director immediately reviews this information with the Airport Committee to determine if the matter should be considered by the Board. This procedure exists due to the limited time frame (10 days) for the County to review such requests as stipulated in the lease (Section 23 and attached for reference) and the Board has acknowledged that either an addendum or blue slip may be needed in order to meet the ten (10) time frame. Please note: The same terms and conditions offered to the County match those offered to a new tenant and cannot be less, they can be more. (Please see Dave Sheppard's memo, attached, for further information)

In addition, a credit application is provided to the Airport from the potential new tenant. The purpose is to determine an applicant's financial health and avoid potential future issues of non-payment and/or default. The Auditor's office reviews the credit report and provides a determination of risk.

Analysis: The Airport does not have funding to purchase this hangar and the offer has been declined by the GSA Director. Further, the new tenant's credit review was positive.

Alternatives: N/A

Fiscal or Staffing Impacts: N/A

4/5ths vote: N/A

Recommendation(s): Approve the Assignment and Assumption of lease by and between Richard Lemmon, Original Lessee, and Ron Candiloro, Successor Lessee, for Airport Hangar Space #113.

c: Chuck Iley, CAO
file

ASSIGNMENT AND ASSUMPTION OF LEASE

THIS ASSIGNMENT AND ASSUMPTION OF LEASE (this "Assignment") is made as of _____, 2017 by and between Richard Lemmon ("Original Lessee") and Ron Candiloro ("Successor Lessee").

R E C I T A L S

A. Amador County and Original Lessee entered into that certain Lease (the "Lease") dated August 7, 2001 whereby Amador County leased to Original Lessee certain real property located in the unincorporated area of Amador County, California, more particularly described in the Lease.

B. Original Lessee desires to assign all of its right, title and interest under the Lease to Successor Lessees, and Successor Lessees desire to assume the duties and obligations of Original Lessee under the Lease.

NOW, THEREFOR, FOR GOOD AND VALUABLE CONSIDERATION, Original Lessee and Successor Lessees agree as follows:

1. Original Lessee hereby assigns and transfers to Successor Lessees all of Original Lessee's right, title and interest in and to the Lease.

2. Original Lessee warrants that it has not previously assigned its interest in the Lease to any third party.

3. Successor Lessees accept the foregoing assignment and assume all of the duties, obligations and responsibilities of Original Lessee under the Lease jointly and severally.

4. This Assignment may be executed in duplicate copies, and any signed duplicate copy shall be equivalent to a signed original for all purposes.

IN WITNESS WHEREOF, Original Lessee and Successor Lessees have executed this Assignment as of the date set forth opposite their signatures below.

ORIGINAL LESSEE:

Date: 26 JAN 17, 2017

R-H. Lemmon
Lemmon, Richard

AGENDA TRANSMITTAL FORM

To: Board of Supervisors
 Date: 02/08/2017
 From: Board of Supervisors
 (Department Head - please type)

Appnts.

<input type="radio"/> Regular Agenda <input checked="" type="radio"/> Consent Agenda <input type="radio"/> Blue Slip <input type="radio"/> Closed Session Meeting Date Requested: <u>02/14/2017</u>
--

Department Head Signature _____

Agenda Title: Re-Appointment of Dist. I, II and IV Agricultural Advisory Committee Members

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

Approval of the re-appointment of the following Members to the subject committee:

District I representative - David Basset, Christ Bennett as Alternate

District II representative - Dan Port

District IV representative - John B. Allen, Jr.

Recommendation/Requested Action:
Approve

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts

Is a 4/5ths vote required? Yes No

Contract Attached: Yes No N/A
 Resolution Attached: Yes No N/A
 Ordinance Attached: Yes No N/A

Committee Review? Name _____ N/A

Committee Recommendation: _____

Comments: _____

Request Reviewed by:

Chairman [Signature] Counsel GE
 Auditor [Signature] GSA Director Hop
 CAO _____ Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Susan Grijalva, Planning Director; Appointees

FOR CLERK USE ONLY

Meeting Date 2-14-17 Time 9:00 A.M. Item # 6a.

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____
 Completed by _____
 Department _____
 For meeting _____
 of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.
 ATTEST: _____
 Clerk or Deputy Board Clerk

Save

Print Form

AGENDA TRANSMITTAL FORM

To: Board of Supervisors
 Date: 02/08/2017
 From: Board of Supervisors
 (Department Head - please type)

Appnts.

<input type="radio"/>	Regular Agenda
<input checked="" type="radio"/>	Consent Agenda
<input type="radio"/>	Blue Slip
<input type="radio"/>	Closed Session
Meeting Date Requested:	
<u>02/14/2017</u>	

Department Head Signature _____

Agenda Title: Appointment and Re-Appointment of Dist. I, II and IV Airport Advisory Committee Members

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

Approval of the re-appointment of the following Members to the subject committee:

District I representatives - Chris Floyd, Charles Huffman, and Marvin Price as Alternate

District II representatives - Bonnie Dufrene, and John B. Allen, Jr. as Regular Member

District IV representative - Mark Ohlau, Dave Richards, and Debbie Dunn as Alternate

Recommendation/Requested Action:

Approve

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts

Is a 4/5ths vote required?

Yes

No

Contract Attached:

Yes

No

N/A

Resolution Attached:

Yes

No

N/A

Ordinance Attached

Yes

No

N/A

Comments:

Committee Review?

N/A

Name _____

Committee Recommendation: _____

Request Reviewed by:

Chairman [Signature]

Counsel GC

Auditor _____

GSA Director HP

CAO _____

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Dave Sheppard, Airport Manager; Appointees

FOR CLERK USE ONLY

Meeting Date

2-14-17

Time

9:00 AM

Item #

6 B

Board Action: Approved Yes ___ No ___

Unanimous Vote: Yes ___ No ___

Ayes: _____

Resolution _____

Ordinance _____

Other: _____

Noes _____

Resolution _____

Ordinance _____

Absent: _____

Comments: _____

Distributed on _____

A new ATF is required from _____

Department _____

Completed by _____

For meeting _____

of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

ATTEST: _____

Clerk or Deputy Board Clerk

Save

Print Form

AGENDA TRANSMITTAL FORM

To: Board of Supervisors

Date: 02/08/2017

From: Board of Supervisors
(Department Head - please type)

appts.

<input type="radio"/>	Regular Agenda
<input checked="" type="radio"/>	Consent Agenda
<input type="radio"/>	Blue Slip
<input type="radio"/>	Closed Session
Meeting Date Requested:	
<u>02/14/2017</u>	

Department Head Signature _____

Agenda Title: Behavioral Health Advisory Board

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

Approval of the re-appointment of Undersheriff Jim Wegner to the subject committee for a three year term that will expire on February 13, 2020.

Recommendation/Requested Action:
Approve

Fiscal Impacts (attach budget transfer form if appropriate) _____

Staffing Impacts _____

Is a 4/5ths vote required? Yes No

Contract Attached: Yes No N/A

Resolution Attached: Yes No N/A

Ordinance Attached: Yes No N/A

Comments: _____

Committee Review? Name _____ N/A

Committee Recommendation: _____

Request Reviewed by:

Chairman [Signature] Counsel GC

Auditor _____ GSA Director HOP

CAO _____ Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Committee Contact; Appointee _____

FOR CLERK USE ONLY

Meeting Date _____ Time _____ Item # 6c

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____	A new ATF is required from _____	I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.
	Department _____	
Completed by _____	For meeting of _____	ATTEST: _____ Clerk or Deputy Board Clerk

Save

Print Form

AGENDA TRANSMITTAL FORM

To: Board of Supervisors
 Date: 02/08/2017
 From: Board of Supervisors
 (Department Head - please type)

App ts

Phone Ext. _____

<input type="radio"/> Regular Agenda
<input checked="" type="radio"/> Consent Agenda
<input type="radio"/> Blue Slip
<input type="radio"/> Closed Session
Meeting Date Requested: <u>02/14/2017</u>

Department Head Signature _____

Agenda Title: Commission on Aging

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

Approval of the re-appointment of Virginia Manner to the subject committee for a term of three years that will expire on February 13, 2020.

Recommendation/Requested Action:
Approve

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts

Is a 4/5ths vote required? Yes No

Contract Attached: Yes No N/A
 Resolution Attached: Yes No N/A
 Ordinance Attached: Yes No N/A

Committee Review? N/A
 Name _____

Committee Recommendation:

Comments:

Request Reviewed by:

Chairman *[Signature]* Counsel *GB*
 Auditor _____ GSA Director *Hof*
 CAO _____ Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Committee Contact; Appointee _____

FOR CLERK USE ONLY

Meeting Date _____ Time _____ Item # bd

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____
 Noes _____ Resolution _____ Ordinance _____
 Absent: _____ Comments: _____

Distributed on _____
 Completed by _____
 A new ATF is required from _____
 Department _____
 For meeting _____
 of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.
 ATTEST: _____
 Clerk or Deputy Board Clerk

Save

Print Form

AGENDA TRANSMITTAL FORM

<input type="radio"/>	Regular Agenda
<input checked="" type="radio"/>	Consent Agenda
<input type="radio"/>	Blue Slip
<input type="radio"/>	Closed Session
Meeting Date Requested:	
02/14/2017	

To: Board of Supervisors

Date: 01/24/2017

From: Board of Supervisors
(Department Head - please type)

App'ts.

Phone Ext. _____

Department Head Signature _____

Agenda Title: Re-Appointment of District II and District IV Planning Commissioners

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)

Approval of the re-appointment of District II Planning Commissioner, Dave Wardall, and the approval of the re-appointment of Andy Byrne as the District IV Planning Commissioner.

Recommendation/Requested Action:
Approve

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts

Is a 4/5ths vote required?

Yes No

Contract Attached: Yes No N/A
 Resolution Attached: Yes No N/A
 Ordinance Attached: Yes No N/A

Committee Review?

N/A

Name _____

Committee Recommendation:

Comments: _____

Request Reviewed by:

Chairman *[Signature]*

Counsel *GC*

Auditor _____

GSA Director *Hop*

CAO _____

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

Planning, Commissioner

FOR CLERK USE ONLY

Meeting Date _____ Time _____ Item # 10e

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____
 Completed by _____

A new ATF is required from _____
 Department _____
 For meeting _____
 of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.
 ATTEST: _____
 Clerk or Deputy Board Clerk

AGENDA TRANSMITTAL FORM

To: Board of Supervisors
 Date: January 30, 2017

mill

From: Jon Hopkins, Director
 (Department Head - please type)

Phone Ext. X759

<input type="checkbox"/>	Regular Agenda
<input checked="" type="checkbox"/>	Consent Agenda
<input type="checkbox"/>	Blue Slip
<input type="checkbox"/>	Closed Session
Meeting Date Requested:	
<u>02/14/17</u>	

Department Head Signature [Signature]

Agenda Title: Dispense with the formal bidding procedures for the Purchase of one (1) used Skip Loader for Public Works.

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)
 Public Works desires to purchase a used skip loader using funds received from P.G.&E. as a result of the Butte Fire settlement. Attached are various examples of pricing for used skip loaders. Due to the uniqueness and variables of used equipment, bidding is not possible and therefore dispensing with the formal bidding process is recommended. Vendors cannot guarantee any equipment of interest will not be sold while awaiting for the approval process. Therefore the following is recommended:

Recommendation: Dispense with the formal bidding procedures and authorize the Purchasing Agent to issue a purchase order in the amount not to exceed \$75,000 for one (1) used skip loader of fair market value determined by the Purchasing Agent that meets the needs of the Public Works Department after being thoroughly inspected by County mechanics; of which said piece of equipment will be placed in the Heavy Equipment Fund with a ten (10) year depreciation & replacement schedule, including a market escalation factor not less than 1%.

Recommendation/Requested Action:

See above recommendation.

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts N/A

Budgeted

Is a 4/5ths vote required? Yes No

Contract Attached: Yes No N/A
 Resolution Attached: Yes No N/A
 Ordinance Attached: Yes No N/A

Committee Review? N/A

Name _____

Committee Recommendation: _____

Comments: Examples of Skip Loader Pricing Attached

Request Reviewed by:

Chairman [Signature] Counsel GG
 Auditor _____ GSA Director hop
 CAO _____ Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

GSA-Jon Hopkins

FOR CLERK USE ONLY

Meeting Date _____ Time _____ Item # 7A

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___
 Ayes: _____ Resolution _____ Ordinance _____ Other: _____
 Noes: _____ Resolution _____ Ordinance _____
 Absent: _____ Comments: _____

Distributed on _____
 Completed by _____
 A new ATF is required from _____ Department For meeting of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.
 ATTEST: _____
 Clerk or Deputy Board Clerk

Save

GENERAL SERVICES ADMINISTRATION

MAIL: 12200-B Airport Road, Jackson, CA 95642

LOCATION: 12200-B Airport Road, Martell, CA

PHONE: (209) 223-6744 FAX: (209) 223-0749 E-MAIL: jhopkins@amadorgov.org



SUMMARY MEMORANDUM

TO: Board of Supervisors

FROM: Jon Hopkins, GSA Director *hop*

DATE: January 31, 2017

SUBJECT: Dispense with the formal bidding procedures for the Purchase of one (1) used Skip Loader for Public Works.

Background: Public Works has received funding as a result of the Butte Fire settlement. A portion of the funding, approximately \$65k to \$75k is to be used for the purchase of a used skip loader. Attached for reference are various examples of used skip loaders provided by Public Works.

Subject or Key Issue: Purchasing used equipment.

Analysis: Cost of a new skip loader exceeds the funding provided by P.G.&E. and is not required to meet the department's needs. When purchasing used equipment staff verifies the condition of the equipment, obtains maintenance records, ensures licensing issues are addressed, researches any service contracts and warranties that are still available, verifies parts are still available and, performs a cost analysis to determine if the vehicle meets or exceeds Kelly Blue Book costs or performs a market analysis to determine the equipment's fair market value. In addition, due to the uniqueness and variables of used equipment, bidding is not possible.

Alternatives: No other viable alternatives are known.

Fiscal or Staffing Impacts: Adds an additional piece of equipment to maintain.

4/5ths vote: N/A

Recommendation(s):

Dispense with the formal bidding procedures and authorize the Purchasing Agent to issue a purchase order in the amount not to exceed \$75,000 for one (1) used skip loader of fair market value determined by the Purchasing Agent that meets the needs of the Public Works Department after being thoroughly inspected by County mechanics; of which said piece of equipment will be placed in the Heavy Equipment Fund with a ten (10) year depreciation & replacement schedule, including a market escalation factor not less than 1%.

c: Chuck Iley, CAO
file

2013 DEERE 210K

For Sale Price: USD \$65,900



Contact Information

Pacific Coast Iron LLC.

Placerville, California

Phone: (916) 612-1855

OR (916) 933-6050

Fax: (916) 933-6051

Contact: Adam

Machine Location:

Placerville, California



Description

MP BUCKET, DUAL TILT, REAR WEIGHTS, SUSPENSION SEAT, GANNON W/ RIPPERS, TIER 4 INTERIM, VERY CLEAN UNIT!

Specifications

Year	2013	Manufacturer	DEERE
Model	210K	Condition	Used
Hours	760	Drive	4 WD

2012 DEERE 210K

For Sale Price: USD \$44,900



Contact Information

Pacific Coast Iron LLC.

Placerville, California

Phone: (916) 612-1855

OR (916) 933-6050

Fax: (916) 933-6051

Contact: Adam

Machine Location:

Placerville, California



Description

GP BUCKET, SINGLE TILT, GANNON W/ RIPPERS, TIER 4 INTERIM

Specifications

Year	2012	Manufacturer	DEERE
Model	210K	Condition	Used
Hours	2,200	Drive	4 WD

2011 DEERE 210LJ

For Sale Price: USD \$37,000



Contact Information

Americ Machinery Corporation

Vallejo, California

Phone: (253) 236-8555

Fax: (253) 236-8540

Contact: Sales

Machine Location:

Vallejo, California



Description

OROPS MACHINE WITH 4-IN-1, AND SCRAPER BOX WITH SCARIFIERS.

Specifications

Year	2011	Manufacturer	DEERE
Model	210LJ	Condition	Used
Hours	2,147	Drive	4 WD

AGENDA TRANSMITTAL FORM

<input type="checkbox"/>	Regular Agenda
<input checked="" type="checkbox"/>	Consent Agenda
<input type="checkbox"/>	Blue Slip
<input type="checkbox"/>	Closed Session
Meeting Date Requested:	
02/14/17	

To: Board of Supervisors
 Date: February 7, 2017

misc.

From: Aaron Brusatori Phone Ext. 248
 (Department Head - please type)

Department Head Signature *Aaron Brusatori*

Agenda Title: Termination, Without Cause, Consultant Service Agreement with Quincy Engineering

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)
 During the construction of the Ridge Road at New York Ranch Road Intersection Improvement Project Amador County Staff took an active role in the construction engineering process. Staff's involvement in the project reduced the need to have a consultant lead the construction engineering effort.

Amador County has discussed contract termination with the Consultant and has determined that a termination without cause is appropriate in this instance.

Amador County Transportation and Public Works recommends that the contract with Quincy Engineering be terminated without cause as allowed in section 4 of our Consultant Service Agreement. With Board concurrence, 30 day notice will be provided and any outstanding invoices to the consultant will be paid.

Recommendation/Requested Action:
 Authorize Community Development Director to issue letter terminating consultant service agreement

Fiscal Impacts (attach budget transfer form if appropriate) _____ Staffing Impacts Staff will self perform consultant work scope

Minor project cost reduction

Is a 4/5ths vote required? Yes No

Contract Attached: Yes No N/A
 Resolution Attached: Yes No N/A
 Ordinance Attached: Yes No N/A

Committee Review? Name _____ N/A

Committee Recommendation: _____

Comments: _____

Request Reviewed by:
 Chairman *[Signature]* Counsel *GS*
 Auditor _____ GSA Director _____
 CAO _____ Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

FOR CLERK USE ONLY

Meeting Date 2-14-17 Time 9:00 a.m. Item # 7B

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___
 Ayes: _____ Resolution _____ Ordinance _____ Other: _____
 Noes _____ Resolution _____ Ordinance _____
 Absent: _____ Comments: _____

Distributed on _____
 Completed by _____
 of _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.
 ATTEST: _____
 Clerk or Deputy Board Clerk



AMADOR COUNTY COMMUNITY DEVELOPMENT AGENCY
TRANSPORTATION & PUBLIC WORKS

PHONE: (209) 223-6429
FAX: (209) 223-6395
WEBSITE: www.amadorgov.org
EMAIL: PublicWorks@amadorgov.org

COUNTY ADMINISTRATION CENTER • 810 COURT STREET • JACKSON, CA 95642-2132

MEMORANDUM

TO: Board of Supervisors
FROM: Aaron Brusatori, PE *AB*
SUBJECT: Termination of Consultant Services Agreement with Quincy Engineering
DATE: February 7, 2017

Summary

During the construction of the Ridge Road at New York Ranch Road Intersection Improvement Project Amador County Staff took an active role in the construction engineering process. Staff's involvement in the project reduced the need to have a consultant lead the construction engineering effort.

Amador County has discussed contract termination with the Consultant and we agree that a termination without cause is appropriate in this instance.

Amador County Transportation and Public Works recommends that the contract with Quincy Engineering be terminated without cause as allowed in section 4.1 of our Consultant Service Agreement. With Board concurrence, 30 day notice will be provided and any outstanding invoices to the consultant will be paid.

Analysis and Alternatives

The project will incur less construction engineering fees as staff will be performing the duties previously assigned to the consultant in our agreement.

Recommendation

It is recommended the board authorize the Community Development Director to issue letter to terminate, without cause, the Consultant Service Agreement with Quincy Engineering.

AGENDA TRANSMITTAL FORM

To: Board of Supervisors

Date: February 7, 2017

misc.

From: Aaron Brusatori
(Department Head - please type)

Phone Ext. 248

- Regular Agenda
- Consent Agenda
- Blue Slip
- Closed Session

Meeting Date Requested:

02/14/17

Department Head Signature *Aaron Brusatori*

Agenda Title: Letter to Caltrans regarding December 16, 2016 pedestrian accident at SR88 near Pine Grove town hall.

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)
On January 26, 2017, the Public Works Committee discussed an accident report involving a vehicle and two pedestrians which occurred near the Pine Grove town hall on December 16, 2016. The two pedestrians were struck by the vehicle while in the crosswalk near the town hall.

The safety of pedestrians crossing this section of SR88 is a known concern from public comment received over the past several years.

The Public Works Committee request that the Board Chair endorse a letter to Caltrans District 10 expressing the safety concern and the need to upgrade the pedestrian crossing signal system.

Recommendation/Requested Action:

Authorize Chairman to endorse letter.

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts NA

NA

Is a 4/5ths vote required?

Yes No

Contract Attached: Yes No N/A

Resolution Attached: Yes No N/A

Ordinance Attached: Yes No N/A

Comments: _____

Committee Review?

N/A

Name Public Works Committee

Committee Recommendation:

Authorize Chairman to endorse letter.

Request Reviewed by:

Chairman *[Signature]*

Counsel *[Signature]*

Auditor _____

GSA Director *[Signature]*

CAO _____

Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

FOR CLERK USE ONLY

Meeting Date 2-14-17

Time 9:00 a.m.

Item # 7C

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___

Ayes: _____ Resolution _____ Ordinance _____ Other: _____

Noes _____ Resolution _____ Ordinance _____

Absent: _____ Comments: _____

Distributed on _____

A new ATF is required from _____

I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors.

Completed by _____

Department _____
For meeting _____
of _____

ATTEST: _____
Clerk or Deputy Board Clerk

Save



AMADOR COUNTY COMMUNITY DEVELOPMENT AGENCY
TRANSPORTATION & PUBLIC WORKS

PHONE: (209) 223-6429

FAX: (209) 223-6395

WEBSITE: www.amadorgov.org

EMAIL: PublicWorks@amadorgov.org

COUNTY ADMINISTRATION CENTER • 810 COURT STREET • JACKSON, CA 95642-2132

MEMORANDUM

TO: Board of Supervisors

FROM: Aaron Brusatori, PE *AB*

SUBJECT: Letter Regarding Safety Concern – SR88 near Town Hall in Pine Grove

DATE: February 6, 2017

Summary

On January 26, 2017, the Public Works Committee discussed an accident report involving a vehicle and two pedestrians which occurred near the Pine Grove town hall on December 16, 2016. The two pedestrians were struck by the vehicle while in the crosswalk near the town hall.

The safety of pedestrians crossing this section of SR88 is a known concern from public comment received over the past several years.

The Public Works Committee request that the Board Chair endorse a letter to Caltrans District 10 expressing the safety concern and the need to upgrade the pedestrian crossing signal system.

Analysis and Alternatives

Not Applicable to this item.

Attachments:

Draft letter to Carl Baker of Caltrans District 10.

February 14, 2017

Carl Baker
Caltrans District 10
Rural Planning Office Chief
1976 East Charter Way
Stockton, CA 95205

RE: SR88 Pedestrian Accident

Dear Mr. Baker,

On December 16, 2016 two pedestrians were struck by a vehicle while crossing State Route 88 near the town hall in Pine Grove. This crosswalk is a safety concern and has been topic of many discussions by the Board of Supervisors.

The Amador County Board of Supervisors recommends that Caltrans upgrade the existing pedestrian crossing signal system.

Sincerely,

Richard Forster, Chairman
Amador County Board of Supervisors

Attachment:
Accident Report 9295-2016-1563

AGENDA TRANSMITTAL FORM

To: Board of Supervisors

Date: February 7, 2017

Misc.

From: Aaron Brusatori

Phone Ext. 248

(Department Head - please type)

Department Head Signature *Aaron Brusatori*

<input type="checkbox"/>	Regular Agenda
<input checked="" type="checkbox"/>	Consent Agenda
<input type="checkbox"/>	Blue Slip
<input type="checkbox"/>	Closed Session
Meeting Date Requested:	
<u>02/14/17</u>	

Agenda Title: United States Bicycle Route 50 (USBR50) - Letter objecting to designated route

Summary: (Provide detailed summary of the purpose of this item; attach additional page if necessary)
 Amador County department of Transportation and Public Works received a request from the Adventure Cycling Association requesting a resolution of support to list several roads within Amador County on a cross country cycling route, USBR50. The Amador County maintained roads included on the route are Shake Ridge Road, Fiddletown Road, Shenandoah Road, Old Sacramento Road and Latrobe Road.
 The proposed route was discussed with the Public Works Committee on January 26, 2017. Comments were made by Undersheriff Wagner and Jackson resident Bronwyn Hogan. Several concerns were raised with the geometry of the roadways included on the route including narrow roadways, lack of shoulders and no bicycle lanes. It was also conveyed by Ms. Hogan that an alternate route was being evaluated.
 The direction from the Public Works Committee was to draft a letter of objection from the Board Chair to be placed on the consent agenda.

Recommendation/Requested Action:
Authorize Chairman to endorse letter.

Fiscal Impacts (attach budget transfer form if appropriate) NA Staffing Impacts NA

Is a 4/5ths vote required? Yes No

Contract Attached:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Resolution Attached:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Ordinance Attached:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Comments:	_____		

Committee Review? N/A
 Name Public Works Committee
 Committee Recommendation:
Authorize Chairman to endorse letter of opposition.

Request Reviewed by:
 Chairman *[Signature]* Counsel *Ge*
 Auditor *[Signature]* GSA Director *Hop*
 CAO _____ Risk Management _____

Distribution Instructions: (Inter-Departmental Only, the requesting Department is responsible for distribution outside County Departments)

FOR CLERK USE ONLY

Meeting Date 2-14-17 Time 9:00 A.M. Item # 7D

Board Action: Approved Yes ___ No ___ Unanimous Vote: Yes ___ No ___
 Ayes: _____ Resolution _____ Ordinance _____ Other: _____
 Noes _____ Resolution _____ Ordinance _____
 Absent: _____ Comments: _____

Distributed on _____	A new ATF is required from _____ Department	I hereby certify this is a true and correct copy of action(s) taken and entered into the official records of the Amador County Board of Supervisors. ATTEST: _____ Clerk or Deputy Board Clerk
Completed by _____	For meeting of _____	



AMADOR COUNTY COMMUNITY DEVELOPMENT AGENCY
TRANSPORTATION & PUBLIC WORKS

PHONE: (209) 223-6429

FAX: (209) 223-6395

WEBSITE: www.amadorgov.org

EMAIL: PublicWorks@amadorgov.org

COUNTY ADMINISTRATION CENTER • 810 COURT STREET • JACKSON, CA 95642-2132

MEMORANDUM

TO: Board of Supervisors

FROM: Aaron Brusatori, PE *AR*

SUBJECT: Letter of Objection – United States Bicycle Route 50

DATE: February 6, 2017

Summary

Amador County department of Transportation and Public Works received a request from the Adventure Cycling Association requesting a resolution of support to list several roads within Amador County on a cross country cycling route, USBR50. The Amador County maintained roads included on the route are Shake Ridge Road, Fiddletown Road, Shenandoah Road, Old Sacramento Road and Latrobe Road.

The proposed route was discussed with the Public Works Committee on January 26, 2017. Comments were made by Undersheriff Wagner and Jackson resident Bronwyn Hogan. Several concerns were raised with the geometry of the roadways included on the route including narrow roadways, lack of shoulders and no bicycle lanes. It was also conveyed by Ms. Hogan that an alternate route was being evaluated.

The direction from the Public Works Committee was to draft a letter of objection from the Board Chair to be placed on the consent agenda.

Analysis and Alternatives

Objection to the Adventure Cycling Association proposed route does not have any financial implications for Amador County.

Attachments:

Draft objection letter

Email from Adventure Cycling Association

February 14, 2017

Tom Dumas
Caltrans District 10
Office of Metropolitan Planning
1976 East Charter Way
Stockton, CA 95205

RE: USBR50 Proposed Route

Dear Mr. Dumas,

Amador County Board of Supervisors objects to including the Amador County maintained roadways proposed by the Adventure Cycling Association in USBR50. The proposed roads are narrow and were not designed for bicycle traffic.

Sincerely,

Richard Forster, Chairman
Amador County Board of Supervisors



Aaron Brusatori <abusatori@amadorgov.org>

US Bicycle Route 50 - Amador County

danielle.bricker@yahoo.com <danielle.bricker@yahoo.com>

Mon, Nov 14, 2016 at 2:04 PM

Reply-To: danielle.bricker@yahoo.com

To: "allison@actc-amador.org" <allison@actc-amador.org>, "jgamer@cityofplymouth.org" <jgamer@cityofplymouth.org>,

"abusatori@amadorgov.org" <abusatori@amadorgov.org>

Dear Ms. Platt,, Mr Brusatori, and Mr. Gardner,

I'm writing to follow up on my phone calls regarding the proposed **US Bicycle Route 50** through **Amador County**. I will follow up again by phone in the next week. Please feel free to call me at any time.

This project is part of a national effort (through AASHTO) to build a US Bicycle Route system and is being led in our state by Caltrans, California Bicycle Coalition, and the Adventure Cycling Association.

You are perhaps already familiar with this project. So you have it handy, the proposed route though Amador County is the following:

Facility name	Miles traveled on this facility	Total miles traveled in CA	Turn location and road name/designation	General Direction of Travel	Jurisdiction
SR 88 Carson Pass Hwy	32.0	53.2	Turn Right onto Dufrene Rd	SW	
Dufrene Rd	0.3	53.5	Continue straight onto County Route 8N31	SW	Amador County
County Route 8N31	1.0	54.5	Turn Right onto SR 88 Carson Pass Hwy	W	Amador County
SR 88 Carson Pass Hwy	1.9	56.4	Turn Right onto County Route 8N37	W	Caltrans D10
County Route 8N37	3.0	59.4	Turn Right onto SR 88 Carson Pass Hwy	W	Amador County
SR 88 Carson Pass Hwy	8.2	67.6	Turn Right onto Shake Ridge Rd	W	Caltrans D10
Shake Ridge Rd	5.8	73.4	Turn Right onto Fiddletown Rd	W	Amador County
Fiddletown Rd	15.7	89.1	Continue straight onto Shenandoah Rd	W	Amador County
Shenandoah Rd	0.5	89.6	Continue straight onto Main St	W	Amador County
Main Street	0.6	90.2	Continue onto Old Sacramento Rd	W	Plymouth CA or Amador County
Old Sacramento Rd	4.6	94.8	Turn Right onto Latrobe Rd	N	Amador County
Latrobe Rd	14.7	109.5	Continue onto El Dorado Hills Blvd	N	Amador & El Dorado Counties, El Dorado Hills

The route proposal supplied is just that; a proposal. Local agencies like yours will be the ones who determine the final route, as they are the ones who have to assure support for the route to Caltrans.

Here is a link to a draft map of the California route from Sacramento to the Nevada border: <https://ridewithgps.com/routes/16159573>

We are in discussions with all of the counties and cities along the route. The general route for USBR 50 in California is from San Francisco to Sacramento to South Lake Tahoe. USBR 50 continues east, eventually ending in Washington DC. Indiana, Ohio, Maryland, and the District of Columbia have already designated their portions of USBR 50. Nevada, Utah, Pennsylvania, and West Virginia are in the process of designating their portions of USBR 50.

You can find a huge amount of background information on the USBR System at <https://www.adventurecycling.org/routes-and-maps/us-bicycle-route-system/>, including this exciting map for the entire proposed system.

Below is more background information and a template for a resolution your agency can endorse and send to Caltrans District 3 Bicycle Pedestrian Coordinator and the Caltrans state bike/ped coordinator. Caltrans is the agency who will officially submit the route approval application to AASHTO. Here are the contacts who will receive resolutions of support from your agency:

Caltrans District 3
Florigna Feliciano

1/18/2017

County of Amador Mail - US Bicycle Route 50 - Amador County

Transportation Planner
2379 Gateway Oaks Blvd., Suite 150
Sacramento, CA 95833 530-741-5455
florigna.feliciano@dot.ca.gov

Caltrans District 4
Sergio Ruiz
Pedestrian & Bicycle Coordinator
111 Grand Ave, Oakland, CA 94612 510-622-5773
sergio.ruiz@dot.ca.gov

Thank you for taking the time to learn about this project. Please feel free to let me know if you are not the correct contact for your area.

As we hear from other agencies in your region, like El Dorado County, I am also happy to keep you informed about their progress. If you have any questions, please feel free to contact me, too!

Danielle Bricker
Adventure Cycling Association
415-699-2994

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Background information on USBR route designation:

- There is no inherent liability for local agencies per the federal Transportation Research Board: http://onlinepubs.trb.org/onlinepubs/nchrp/nchrp_lrd_53.pdf
- To view AASHTO information on the US Bicycle Route System: <http://route.transportation.org/Pages/USBicycleRoutes.aspx>
- Signage is nice, but not required. There are a number of ways a route can be designated including maps (paper or Internet), signs, pavement markings, downloadable GPS coordinates, etc.
- The choice of roads for a US Bicycle Route is a trade-off between low traffic, direct routing, access to services (bike shops, motels, campgrounds, etc.), access to points of interest, and scenic roads. The best route for a family weekend bike ride may not be the best route for someone on a multi-day long distance bicycle trip.
- Long distance bicycle tourists are experienced road riders and used to varying quality of road surface, absence of paved shoulders, and car and truck traffic. The number of cyclists who might use a given route is difficult to predict, but five to ten riders per day (1,000-2,000 per season) would be considered a significant increase in usage once a route is designated.
- A change in the route can be proposed to Caltrans and they propose the change to AASHTO. AASHTO has accepted every new route and route change requested by state DOTs. Route changes can be made twice per year.
- Designating a USBR does not impose any constraints or restrictions on the use of a road, street, trail or right-of-way. It's current or future status or use for any other purpose is not changed.
- There is no requirement that roads for US Bicycle Routes meet the guidelines in the AASTHO Guide for Bicycle Facilities. This was explicitly considered and it has been written into the process that there are no specific requirements for road or trail standards. It is recognized that local "engineering judgment" will determine when a road is suitable for inclusion in a USBR designation.

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Sample Support Resolution

Whereas bicycle tourism is a growing industry in North America, contributing \$47 billion a year to the economies of communities that provide facilities for such tourists; and

Whereas the American Association of State Highway and Transportation Officials (AASHTO) has designated a corridor crossing California to be developed as United States Bicycle Route 50 (USBR 50), and

Whereas the Adventure Cycling Association and the California Bicycle Coalition, with the cooperation of Caltrans, have proposed a specific route to be designated as USBR 50, a map of which is herein incorporated into this resolution by reference, and

Whereas the proposed route for USBR 50 comes through Amador County and can therefore provide benefits to our residents and businesses, and

Whereas we have investigated the proposed route and found it to be a suitable route, and desire that the route be designated so that it can be mapped and signed, thereby promoting bicycle tourism in our area,

Therefore be it resolved that Amador County hereby expresses its approval and support for the development of USBR 50, and requests that Caltrans get the route is officially designated by AASHTO as soon as this can be achieved, and authorizes the posting of signs within the Amador County right-of-way identifying the route through the community once the official designation has been made.

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2 attachments

1/18/2017

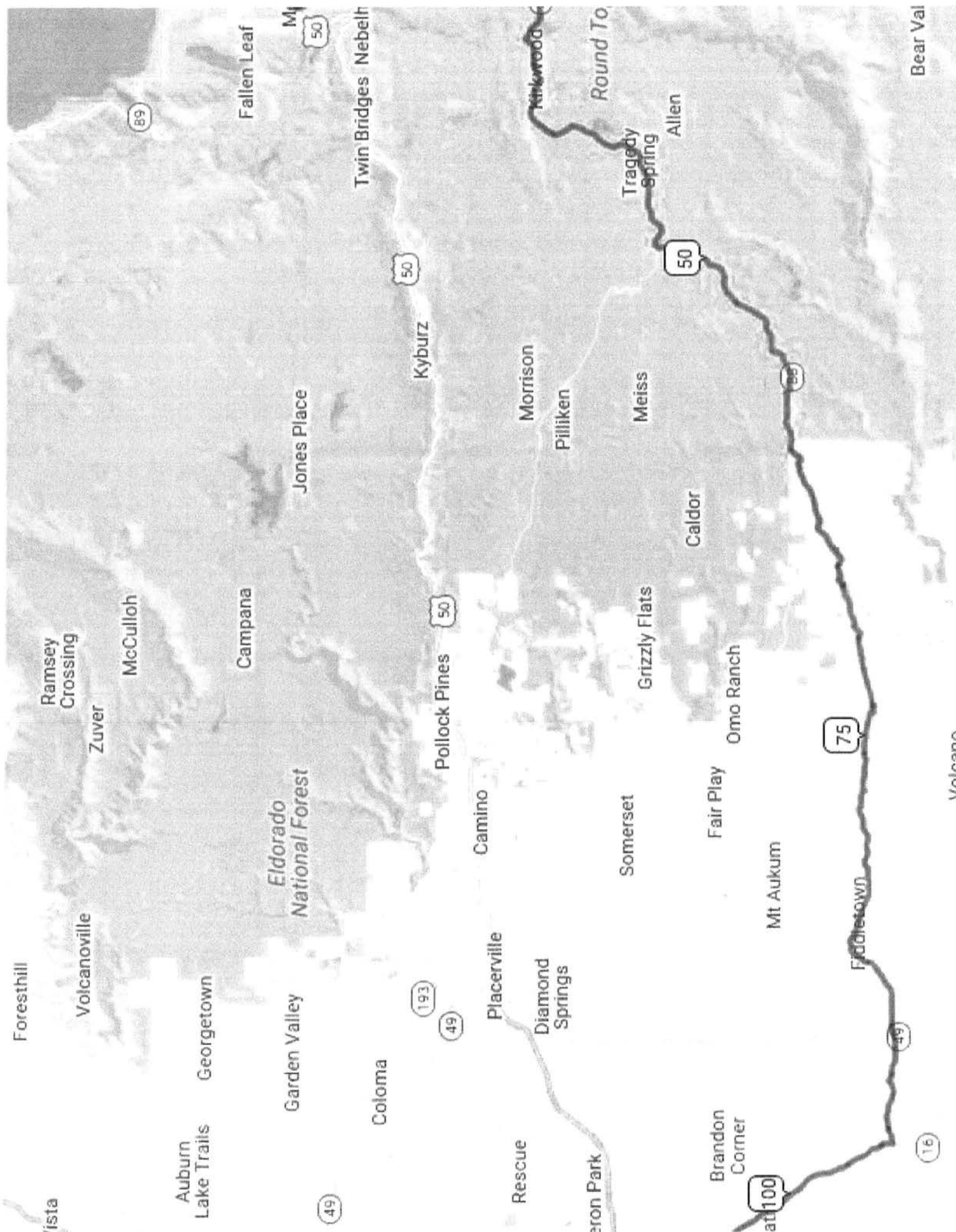
County of Amador Mail - US Bicycle Route 50 - Amador County



USBR 50 - Amador Couty Regional .jpg
202K



USBRSCorridorMap_2016May.pdf
580K



Foresthill

ista

Ramsey Crossing

Volcanoville

Zuver

McCulloh

Auburn Lake Trails

Georgetown

Campana

Eldorado National Forest

Garden Valley

49

Coloma

193

49

Camino

Placerville

Diamond Springs

Rescue

Merion Park

Pollock Pines

Kyburz

Morrison

Pilliken

Somerset

Grizzly Flats

Caldor

Fair Play

Omo Ranch

Mt Aukum

Fiddletown

89

100

75

Fiddletown

49

16

Volcano

Fallen Leaf

Twin Bridges Nebelt

50

Merion Park

Round To

Tragedy Spring

Allen

50

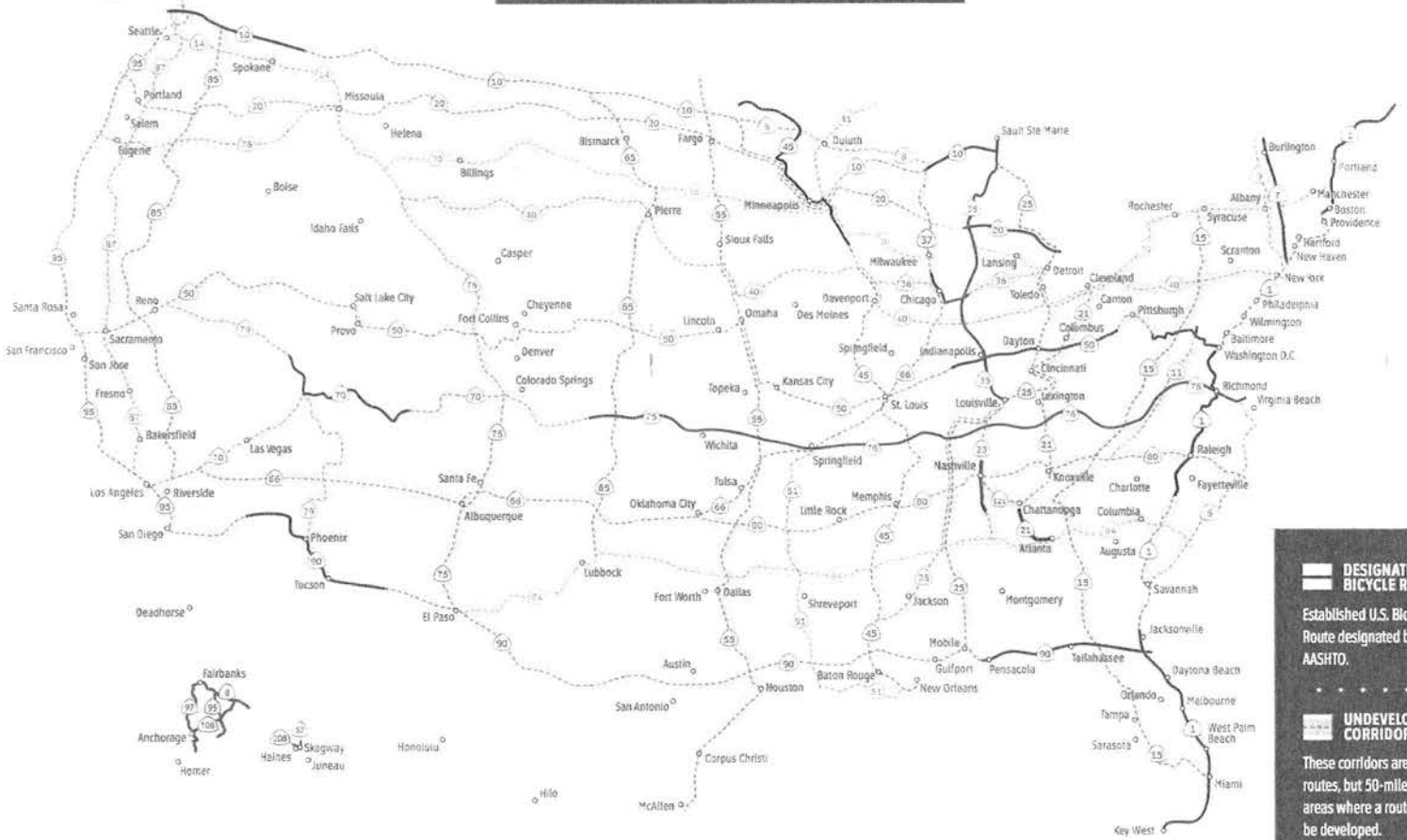
Bear Val



The goal of The United States Bicycle Route System is to connect America through a network of numbered interstate bicycle routes.

NATIONAL CORRIDOR PLAN

May 2016



DESIGNATED U.S. BICYCLE ROUTE

Established U.S. Bicycle Route designated by AASHTO.

UNDEVELOPED CORRIDOR

These corridors are not routes, but 50-mile wide areas where a route may be developed.

ADVENTURECYCLING.ORG/USBRS