

City of Burien, Washington Contract Routing Sheet

Name of Contracting Party: Washington Traffic Safety Commission

Project Name/Description: Memorandum of Understanding for Target Zero Patrol for Impaired Driving (DUI) (Oct. 1, 2012 to Sept. 30, 2013)

Contract Amount: \$ 3,900 for Impaired Driving (DUI)
(Include Contractor's Proposal Amount and Sales Tax)

Type of Contract:

<input type="checkbox"/> Architectural/Engineering <input type="checkbox"/> From Engineering Roster <input type="checkbox"/> Advertised Bidding Done <input type="checkbox"/> Professional Services (Non-Engineering) <input type="checkbox"/> 3 Bids received <input type="checkbox"/> Direct Negotiation	<input type="checkbox"/> Construction <input type="checkbox"/> Informal Bidding Process Done-3 bids (less than \$20,000/\$35,000) <input type="checkbox"/> From Small Works Roster (\$20,000/35,000 to \$100,000) <input type="checkbox"/> Competitive/Advertised Bidding Done (Over \$100,000) <input type="checkbox"/> Other: _____	<input type="checkbox"/> Human Services/Arts & Culture/City Match <input checked="" type="checkbox"/> Other: <u>MOU for traffic safety emphasis patrols</u> <input type="checkbox"/> Contract Amendment to Contract No. _____
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(Please attach a list of all bids received)

Is this contract authorized in the current year's budget? Yes No

If budgeted, list Fund/Dept.: General Fund - Police

Page # in Budget: 2-48 Budget line item amount: \$ _____

BARS Account Number: _____

Is a budget amendment needed? Yes No Amount? \$ _____

Date of Council Approval: _____

REVIEWED BY:

Contract Manager: Henry M. Date: _____

Department Director: _____ Date: _____

Management Analyst: Ull Fleming Date: 12-2-13

<p style="text-align: center;"><u>Routing Instructions:</u></p> <input type="checkbox"/> Send original to Contractor for their signature and then provide a copy of the fully signed contract to _____ <input type="checkbox"/> Contract is already signed by Contractor, please provide a copy of the fully signed contract to: _____ <input type="checkbox"/> Other (Please describe) _____	<p style="text-align: center;"><u>Contract File Checklist:</u></p> <input type="checkbox"/> Purchase Order # _____ <input type="checkbox"/> Tax ID Form <input type="checkbox"/> Current Business License # _____ <input type="checkbox"/> Insurance Certificate <input checked="" type="checkbox"/> Contract Fully Signed NOT Signed
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TZM Approved:
Date 1/30/13
Initials SW

RECEIVED

JAN 31 2013

Traffic Safety

ORIGINAL



**MEMORANDUM OF UNDERSTANDING
WASHINGTON TRAFFIC SAFETY COMMISSION**



**Target Zero Teams
North and South King County Target Zero Task Forces**

Law Enforcement

THIS AGREEMENT, pursuant to Chapter 39.34 RCW, is made and entered into by and between the **BURIEN POLICE DEPARTMENT (Agency)** and the **Washington Traffic Safety Commission (WTSC)**.

TERM: October 1, 2012 to September 30, 2013

AMOUNT: NOT TO EXCEED \$3,900

CFDA # 20.600

IT IS THE PURPOSE OF THIS AGREEMENT to provide funding for King County Law Enforcement Agencies to participate in the Target Zero Teams project.

GOAL: to reduce the number of people killed or seriously injured by impaired drivers in King County through aggressive, multi-jurisdictional, high-visibility patrols using an integrated systems approach to traffic safety which is evidenced-based and targets the locations where the most safety benefit can be realized.

IT IS, THEREFORE, MUTUALLY AGREED THAT:

1. **SCOPE OF WORK:** The Target Zero Team DUI patrols will be deployed at times and locations where data indicates that the most safety benefit can be realized as determined by the King County Target Zero Task Forces.
2. **CONDITIONS:** **(Agency)** will deploy highly skilled officers in coordination with other King County Law Enforcement agencies, the King County Target Zero Task Force, and the WSP District 2 Target Zero Team to generate the highest amount of deterrence possible.

(Agency) certifies that all of the officers that participate in patrols under the terms of this agreement are **SFST trained**. SFST training is required as follows:

- Officers who received SFST training prior to 2008 will need to pass SFST refresher training before participating on these patrols.
 - Officer who received SFST training in 2008 or later will need to take the SFST refresher training when their BAC re-certification is due to stay current and be qualified to work these patrols. (BAC re-certification and SFST refresher training are required every three years.)
 - The 16-hour Advanced Roadside Impaired Driving Enforcement (ARIDE) course is recommended for officers participating in Target Zero Team patrols.
3. PAYMENT FOR LAW ENFORCEMENT: **(Agency)** will provide commissioned law enforcement with appropriate equipment (vehicle, radar, etc.) and on an overtime basis (not to exceed 1.5 times their normal salary and benefits) to participate in these emphasis patrols.

Overtime for court appearances that result from a law enforcement officer making a DUI arrest while on Target Zero Teams patrol will be considered for reimbursement with approval from the Target Zero Manager or her designee.

4. DISPATCH: **WTSC** will reimburse communications officers/dispatch personnel for work on this project providing **(Agency)** has received prior approval from the Target Zero Manager.
5. GRANT AMOUNT: **WTSC** will reimburse **(Agency)** for overtime salary and benefits. Your agency is allotted \$3,900 dollars for the cost of this project. This allocation may be increased by your Target Zero Manager during the above campaign(s), without amending this agreement PROVIDED THAT the increase in the allocation does not exceed 50% of the original amount. Any increase in allocation exceeding 50% will require an amendment to this document.
6. PERFORMANCE STANDARDS:
- a. All participating law enforcement officers are required to have 3 self-initiated contacts per hour of enforcement, or show DUI arrests.
 - b. Some violator contacts may result in related, time-consuming activity. This activity is reimbursable.
 - c. Other activities, such as collision investigation or emergency response that are not initiated through emphasis patrol contact WILL NOT be reimbursed.
9. REIMBURSEMENT OF CLAIMS: Claims for reimbursement must include:
- a. Invoice Voucher (A19-1A Form).

- **(Agency)** identified as the "Claimant";
 - A Federal Tax ID #; and,
 - Original signature of the agency head, command officer or contracting officer.
- b. Payroll support documents (signed overtime slips, payroll documents).
- c. Officer TZY Emphasis Patrol Activity Logs (attached) showing 3 or more self-initiated contacts per hour and/or DUI arrests for reimbursement for any patrol overtime reimbursement.

10. **DEADLINE FOR CLAIMS:** All claims for reimbursement for emphases conducted prior to June 30 must be received by **WTSC** no later than August 15, 2013. Claims for activity conducted between July 1 and September 30 must be received by **WTSC** no later than November 15. Monthly billing is preferred.

11. **DISPUTES:** Disputes arising under this Memorandum shall be resolved by a panel consisting of one representative of the **WTSC**, one representative from **(Agency)**, and a mutually agreed upon third party. The dispute panel shall decide the dispute by majority vote.

12. **TERMINATION:** Either party may terminate this agreement upon 30 days written notice to the other party. In the event of termination of this Agreement, the terminating party shall be liable for the performance rendered prior to the effective date of termination.

13. **SUPPLANTING DISCLAIMER:** I certify that none of the funds for this project supplant the normally budgeted funds of this agency nor do these funds pay for routine traffic enforcement normally provided by this agency.

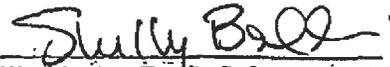
IN WITNESS THEREOF, THE PARTIES HAVE EXECUTED THIS AGREEMENT.

Burien Police Department
Agency

Sgt Henry F. McLauchlan
Contracting Agent (Print)


Signature

1-22-2013
Date


Washington Traffic Safety Commission

2/11/2013
Date

Agency address (for mailing fully executed MOU):

Burien Police Department att. Sgt. McLauchlan

14906 6 ave SW

Burien, WA 98166

Agency PIO contact:

Sgt Henry McLauchlan _____

Same address as above _____

Please return two signed MOUs to your Target Zero Manager.

Sara Wood _____

Target Zero Manager

Kent PD - 220 4th Ave. S. _____

Address

Kent, WA 98032 _____

City/State/Zip

253-856-5851/swood@kentwa.gov _____

Phone/E-mail

Target Zero Manager will return to:

Shelly Baldwin, WTSC Impaired Driving Program Manager

621 - 8th Avenue SW, Suite 409, PO Box 40944

Olympia, WA 98504-0944

360.725.9889 sbaldwin@wtsc.wa.gov