

Tuesday August 21, 2018

**BOARD OF DIRECTORS  
AMADOR FIRE PROTECTION DISTRICT  
COUNTY ADMINISTRATION CENTER**

810 Court Street  
Jackson, California 95642

**-AMENDED-SPECIAL AGENDA**

**-- 10:30a.m. --**

**Please Note: All Board of Directors meetings are recorded.**

In compliance with the Americans with Disabilities Act, if you are a disabled person and you need a disability-related modification or accommodation to participate in this meeting, please contact the Clerk of the Board staff, at (209) 223-6391 or (209) 223-6646(fax). Requests must be made as early as possible and at least one-full business day before the start of the meeting. Assisted hearing devices are available in the Board Chambers for public use during all public meetings.

Pursuant to Government Code 54957.5, all materials relating to an agenda item for an open session of a regular meeting of the Board of Directors which are provided to a majority or all of the members of the Board by Board members, staff or the public within 72 hours of but prior to the meeting will be available for public inspection, at and after the time of such distribution, in the office of the Clerk of the Board of Directors, 810 Court Street, Jackson, California 95642, Monday through Friday, between the hours of 8:00 a.m. and 5:00 p.m., except for County holidays. Materials distributed to a majority or all of the members of the Board at the meeting will be available for public inspection at the public meeting if prepared by the members of the Board or District staff and after the public meeting if prepared by some other person. Availability of materials related to agenda items for public inspection does not include materials that are exempt from public disclosure under Government Code sections 6253.5, 6254, 6254.3, 6254.7, 6254.15, 6254.16, or 6254.2.

**PLEDGE OF ALLEGIANCE**

**AGENDA:** Off-agenda items must be approved by the Board pursuant to Section 54954.2 of the Government Code.

**PUBLIC MATTERS NOT ON THE AGENDA:** Discussion items only; no action will be taken. Any person may address the Board at this time upon any subject within the jurisdiction of the AFPD Board of Directors; however, any matter that requires action may be referred to staff and/or Committee for a report and recommendation for possible action at a subsequent Board meeting. **Please note - there is a five (5) minute limit per topic.**

**ADMINISTRATIVE MATTERS**

- (1) VEHICLE MAINTENANCE REPORT:** Report of expenses for maintenance and repair of District vehicle fleet.
- (2) AGREEMENT WITH CA DOJ FOR APPLICATION FOR LIVE SCAN PROCESSING:** Discussion and possible action relative to subject agreement.
- (3) VOLUNTEER FIRE ASSISTANCE GRANT AWARD:** Discussion and possible action relative to subject grant award.

**MISCELLANEOUS MATTERS**

- (4) **MINUTES:** Review and approval of the regular minutes of the Board of Directors meeting of July 17, 2018, as presented or revised.
- (5) **MINUTES:** Review and approval of the regular minutes of the Board of Directors meeting of July 24, 2018, as presented or revised.

**CLOSED SESSION** may be called for labor negotiations (pursuant to Government Code §54957.6), personnel matters (pursuant to Government Code §54957), real estate negotiations/acquisitions (pursuant to Government Code §54956.8), and/or pending or potential litigation (pursuant to Government Code §54956.9).

- (6) **PROPERTY NEGOTIATION:** Discussion and possible action relative to real estate negotiations/acquisitions of APN 033-480-051(pursuant to Government Code §54956.8)
- (7) **PUBLIC EMPLOYEE DISCIPLINE/DISMISSAL RELEASE:** Discussion and possible action relative to public employee discipline/dismissal release (pursuant to Government Code §54957)
- (8) **CLOSED SESSION MINUTES:** Review and approval of the closed session minutes of the Board of Directors meeting of July 17, 2018, as presented or revised.
- (9) **CLOSED SESSION MINUTES:** Review and approval of the closed session minutes of the Board of Directors meeting of July 24, 2018, as presented or revised.

## **ADJOURNMENT**

# AGENDA TRANSMITTAL FORM

To: Amador Fire Protection Board of Directors

Date: 08/21/2018

From: David Bellerive  
(Department Head - please type)

Phone Ext. 391

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

Meeting Date Requested:

08/21/2018

Department Head Signature 

Agenda Title:

VEHICLE MAINTENANCE REPORT

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

Report of expenses for maintenance and repair of District vehicle fleet.

Recommendation/Requested Action:

Review attached report

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 ☒

Comments:

Committee Review?

N/A ☒

Name

Committee Recommendation:

Request Reviewed by:

Chairman

Counsel

Auditor

GSA Director

CAO

Risk Management

Distribution Instructions:

## FOR CLERK USE ONLY

Meeting Date

08/21/18

Time

10:30am

Item #

1

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 Fire Protection District.

ATTEST: \_\_\_\_\_

AFPD Board Clerk

Vehicle Description	VIN License Number	July 1, 2017/18 Beginning of Fiscal Year Mileage	Odometer Reading	Repair Hours / Comments (out of service, Misc., etc. if applicable)	Dates	Maintenance Performed (description)	July Total Cost this Month	Total Cost of Vehicle starting July 2016
C-5100 - 2015 Ford Explorer AWD (Fire Chief)	1FM5K8AR7FGB25939 {E} 1460509	19,530	25,765				\$0.00	\$413.13
C-5101 - 2010 Ford Expedition XLT 4x4 (Prevention-08/09)	1FMJU1G59AEA43199 {E} 1305976	162,270	171,361		7/10/18	Riebes - light (\$1.28)	\$1.28	\$7,816.80
C-5103 - 2016 Ford F250 4x4 (Battalion Chief)	1FT7X2B60GEA66410 {E} 1485648	19,611	44,648		7/10/2018	Riebes - wiper (\$52.19)	\$52.19	\$1,638.74
C-5104 - Chief 2011 Ford F250 4x4 (Battalion Chief)	1FT7X2B62BEA30761 {E} 1306800	92,337	104,819				\$0.00	\$3,063.93
C-5105 - Chief 2012 Ford Expedition 4x4 (Battalion Chief)	1FMJU1G5XCEP67187 {E} 1401123	67,531	74,498				\$0.00	\$4,353.99
C-5106 -2009 Ford F250 4x4 (Battalion Chief)	1FTSX21569EA15399 {E} 1294991	65,530	71,890				\$0.00	\$3,227.59
E-5113 1991 KME 4x4	1HTSEPCR4NH415881 {E} 349699	80,306	85,647				\$0.00	\$16,891.00
SQ-5125 2008 Ford F350 (Previously SQ-115)	1FDWX37RX8EC15309 {E} 1281212	99,175	101,413				\$0.00	\$1,441.91
WT-5116 2015 Kenworth	2NKHJHJ8X9FM437394 {E} 1410351	2,230	2,702				\$0.00	\$1,524.82
WT-5126 2007 Kenworth	2NKMHZ8X67M199258 {E} 1212617	16,891	17,750				\$0.00	\$3,932.39
E-5141 2003 HME (114 First Out)	44KFT42822WZ20024 {E} 1159077	82,595	95,951		7/10/18 7/10/18	Riebes - antifreeze and lights (\$75.90) Real Work Trucks - door rod and spring (\$63.79)	\$139.69	\$35,093.34

Vehicle Description	VIN License Number	July 1, 2017/18 Beginning of Fiscal Year Mileage	Odometer Reading	Repair Hours / Comments (out of service, Misc., etc. if applicable)	Dates	Maintenance Performed (description)	July Total Cost this Month	Total Cost of Vehicle starting July 2016
SQ-5115 2003 Ford F350 4X4 (previously SQ-145)	1FDWF37P23ED60337 {E} 1159107	42,236	43,034				\$0.00	\$11,083.15
WT-5146 1996 International	1HTSDADR7TH397632 {E} 035872	38,174	41,506				\$0.00	\$4,275.54
U-5210 2000 Ford Explorer 4x4	1FMPU16LXYLB47751 {E} 1022891	107,494	107,956				\$0.00	\$725.65
E-5111 2015 Rosenbauer 4x4 (111 First Out)	54F2CB417FWM11449 {E} 1488122	19,474	27,827		7/10/18	Sterling Auto - AC inop (\$726.96)	\$726.96	\$10,394.71
E-5211 1991 KME	1HTSDPCR9NH416110 {E} 366231	33,432	36,786		7/17/18	Doug Veerkamp - B svc (\$585.84)	\$585.84	\$5,353.21
E-5214 2008 Ford F550	1FDAX57R58EB35812 {E} 1281210	28,278	29,464				\$0.00	\$3,457.11
WT-5216 2015 Kenworth	2NKHJH8X7FM437393 {E} 1410352	3,030	4,223				\$0.00	\$2,740.21
E-5221 2002 HME (122 First Out)	44KFT42842WZ20025 {E} 1159078	97,576	107,990		7/10/18 7/10/18 7/24/18	Riebes - Paddle seat valve (\$35.01) Sterling Auto - B svc, svc transmission, svc cooling sys., gear lube, fuel/water seperator filter (\$1443.93) Doug Veerkamp - Rplc rear shoes and hardware and drums (brakes) (\$725.58)	\$2,204.52	\$24,865.69
E-5222 1991 KME	1HTSDPCRONH416111 {E} 349698	54,320	86,016				\$0.00	\$4,064.07
E-5223 1998 International	1HTSDADR6WH551543 {E} 993299	38,623	42,683				\$0.00	\$9,790.47
E-(5)231 1992 Freightliner	1FV6HLBB8NL481046 {E} 352799	63,292	63,472		7/24/18	Doug Veerkamp - B Svc and ck throttle linkage (\$761.92)	\$761.92	\$9,133.45
E-5234 1992 Ford F350 4x4	2FDKF38G7NCA42025 {E} 292907	33,123	33,511		7/24/18 7/24/18	Rory's Towing - shift cable (\$98.79) Riebes - Shifter cable (\$65.72)	\$164.51	\$3,180.40
WT-5236 2007 Kenworth	2NKMHZ8X87M199259 {E} 1212616	9,833	10,390				\$0.00	\$865.30
E-5361 2016 Rosenbauer (116 First Out)	54F2CA512GWM11580 {E} 1425867	8,502	16,150				\$0.00	\$4,529.31
E-5364 2008 Ford 4x4	1FDAW57R38EC53893 {E} 1356272	32,581	35,746		7/17/18 7/17/18	Autozone (reimb. Kwoka, brakes bad/strike team) brake pads (\$72.72) Les Schwab - Tire (tire blown during strike team) \$300.45	\$373.17	\$16,576.69

Vehicle Description	VIN License Number	July 1, 2017/18 Beginning of Fiscal Year Mileage	Odometer Reading	Repair Hours / Comments (out of service, Misc., etc. if applicable)	Dates	Maintenance Performed (description)	July Total Cost this Month	Total Cost of Vehicle starting July 2016
E-5368 2007 E-ONE	4ENGAAA8371002458 (E) 1356273	62,266	72,896		7/10/18 7/10/18	Riebes - Antifreeze, Hose/Tube, misc parts (\$57.72) Forestry Suppliers - seal gasket (\$11.13)	\$68.85	\$30,095.84
							<b>\$5,078.93</b>	<b>\$220,528.44</b>



# AGENDA TRANSMITTAL FORM

To: Amador Fire Protection Board of Directors

Date: 08/21/2018

From: David Bellerive  
(Department Head - please type)

Phone Ext. x391

☒ Regular Agenda  
☐ Consent Agenda  
☐ Blue Slip  
☐ Closed Session  
Meeting Date Requested:

08/21/2018

Department Head Signature



Agenda Title:

Agreement with CA Department of Justice (DOJ) for Live Scan Processing

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

Discussion and possible action relative to attached agreement for approval by DOJ for Amador Fire's Administrative Technician to process Live Scans for new employees and volunteers per the request of the District Attorney's Office who currently provides this service.

Recommendation/Requested Action:

Approve resolution authorizing President to sign subject agreement.

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

Counsel

Auditor

GSA Director

CAO

Risk Management

Distribution Instructions:

2 signed originals to American Fidelity for full execution

## FOR CLERK USE ONLY

Meeting Date

08/21/18

Time

10:30am

Item #

2

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 Fire Protection District.

Completed by

Department  
For meeting  
of \_\_\_\_\_

ATTEST: \_\_\_\_\_

AFPD Board Clerk

**BEFORE THE BOARD OF DIRECTORS OF THE  
AMADOR FIRE PROTECTION DISTRICT,  
COUNTY OF AMADOR, STATE OF CALIFORNIA**

IN THE MATTER OF:

RESOLUTION RELATIVE TO ACCESS  
SUMMARY CRIMINAL HISTORY  
INFORMATION

RESOLUTION NO. 18-

WHEREAS, Penal Code Sections 11105 (b)(11) and 13300(b)(11) authorize cities, counties, districts and joint powers authorities to access state and local summary criminal history information for employment purposes; and

WHEREAS, Penal Code Section 11105(b)(11) authorizes cities, counties, districts and joint powers authorities to access federal level criminal history information by transmitting fingerprint images and related information to the Department of Justice to be transmitted to the Federal Bureau of Investigation; and

WHEREAS, Penal Code Section 11105(b)(11) and 13300(b)(11) require that there be a requirement or exclusion from employment based on specific criminal conduct on the part of the subject of the record; and

WHEREAS, Penal Code Section 11105(b)(11) and 13300(b)(11) require the city council, Board of Directors, governing body of a city, county, district or joint powers authority to specifically authorize access to summary criminal history information for employment purposes.

NOW THEREFORE BE IT RESOLVED, that Amador Fire Protection District is hereby authorized to access state and federal level summary criminal history information for employment (including volunteers and contract employees), purposes and may not disseminate the information to a private entity.

The foregoing resolution was duly passed and adopted by the Board of Directors of Amador Fire Protection District in a regular meeting thereof, held on the 21st day of August 2018, by the following vote:

AYES:

NOES:

ABSENCE:

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Lynn Morgan, President, Board of Directors

ATTEST:

LINDSEY CLARK, Clerk of the  
Board of Directors, Amador Fire  
Protection District, Amador County,  
California



# CALIFORNIA DEPARTMENT OF JUSTICE

Application for Authorization Pursuant to  
Penal Code Section 11105(b)(11)  
(City, County, Special Districts or Joint Powers Authorities)



## BUREAU OF CRIMINAL INFORMATION AND ANALYSIS

Mail Completed application  
to:

Department of Justice  
Applicant Information and Certification Program  
P.O. Box 903387  
Sacramento, CA 94203-3870



## REQUEST FOR CONTRIBUTING AGENCY ORI AND/OR RESPONSE MAIL CODE

In order to submit applicant fingerprints via Live Scan, you must have an Originating Agency Identifier (ORI) code to identify your agency. In order to receive responses electronically, you must request a Response Mail Code. Note that electronic responses will be sent to a secure electronic mailbox, from which you will retrieve your messages. **In order to receive a Mail Code, you must have a completed form BCII 9005, Subscriber Agreement, on file with the Department of Justice or returned with this request.**

☒ Request for ORI

☒ Request for Electronic Response Mail Code

Contributing Agency Name: Amador Fire Protection District

Mailing Address: 810 Court Street

City, State, Zip Code: Jackson, CA, 95642

Your projection for monthly applicant submissions: 3

Contact Person Name: Lindsey Clark

Phone Number: 2092236391

Email: afpdhdq@amadorgov.org

Fax Number: 2092236646

Please describe the services your agency provides and indicate the California statute you believe authorizes your agency to request criminal history information.

Penal Code Section 11105(b)(11): We are a Special District local Fire agency responsible for providing emergency fire, rescue, and medical aid services in approximately 85% of the unincorporated area of Amador County. Due to the extremely close nature of working with the public and in their homes, it is imperative to have all potential new hires and volunteers go through the Live Scan process and background investigation.

Please check the box(es) for the type(s) of applicants for whom you will be submitting:

☒ Employment Classified Employee (ex: Firefighter)

Title or Position (i.e., Classified Employee)

☐ License, Certification, Permit

Type of License, Certification, Permit

Identify Licensing Agency as it would appear on fingerprint card (i.e., Department of Social Service)

☒ Volunteers

☒ We request that all responses be sent electronically to the same secure mailbox.

☐ We request separate secure mailbox(es) for the following application type(s);

☐ Employment

☐ License, Certification, Permit

☐ Volunteers

ORI's and mail code number(s) will be assigned by the Department of Justice and the information returned to you on form BCII 9003, Notification of ORI, Mail Code, and/or Billing Number.



## NOTIFICATION OF ORI, MAIL CODE, AND/OR BILLING NUMBER

CONTRIBUTING Agency - please provide a complete address in the space below. This form will be returned to you with your ORI, Mail Code, and/or Billing Number information.

Contributing Agency Name: Amador Fire Protection District

Mailing Address: 810 Court Street

City, State, Zip Code: Jackson, CA, 95642

Listed below are the ORI, Mail Code, and/or Billing Number assigned to your agency for applicant responses.

ORI \_\_\_\_\_

Mail Code \_\_\_\_\_

Billing Number \_\_\_\_\_

If separate response locations were requested, assigned codes are as follows:

Type	ORI	Mail Code
Employment		
Licensing, Certification, or Permit		
Volunteer		

The following are the ONLY applicant types with CJIS codes your agency is authorized to submit to the DOJ for background check purposes. The CJIS Code is for internal use only and is not utilized on the BCIA 8016 form.

	Applicant Type	CJIS Code
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Should your address or agency information change in the future, you must notify the DOJ immediately. Please visit the DOJ's website to obtain form BCIA 8386, Applicant Submitting Agency Request to Change.





## BILLING ACCOUNT APPLICATION

**Business/Agency Type:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> School District                 | <input type="checkbox"/> Private School                                 | <input type="checkbox"/> Corporation                                    |
| <input type="checkbox"/> Sole Proprietorship/Partnership | <input type="checkbox"/> Non-Profit Organization                        | <input checked="" type="checkbox"/> Local Government (Special District) |
| <input type="checkbox"/> Federal Government              | <input type="checkbox"/> State Government<br>(Fund Code Required) _____ | <input type="checkbox"/> Federally-Recognized Tribe or Designee         |

**ALL APPLICABLE INFORMATION MUST BE COMPLETED LEGIBLY. INCOMPLETE APPLICATIONS WILL BE RETURNED.**

Business/Agency Name: Amador Fire Protection District

Business/Agency Address: 810 Court Street

City: Jackson State: CA ZIP Code: 95642

Federal Tax Identification Number\*: 27-2029617

Social Security Number (Sole Proprietorship or Partnership)\*: \_\_\_\_\_

\*EITHER a Federal Tax Identification Number OR Social Security Number must be provided.

Authorized Representative: Lindsey Ayanian Clark

Telephone Number: 2092236391 Facsimile Number: 2092236646

Electronic Mail Address: afpdhdq@amadorgov.org

I, the undersigned, have the authority to conduct business for the business/agency listed above. I confirm that all the information on this application is true and correct. I give my permission to the Department of Justice (DOJ) to research and confirm all information provided and to request a credit report at any time. I understand this is an agreement to pay the processing fees associated with the electronic transmission of State and/or Federal criminal offender record information requests, including fees incurred by duplicate transmissions or other errors on the part of the above business/agency or its representative(s). Failure to remit payment in a timely manner may result in the DOJ utilizing all information provided on this billing account application for collection purposes; in addition, the DOJ may disable your customer billing number. I agree to the terms of this agreement and understand it will remain in effect until written cancellation is provided by either party with 30 days notice.

Signature

Lynn Morgan  
Printed Name

President, Board of Director  
Title

08/21/2018  
Date

**DOJ Use Only**

Input By: _____	Account #: _____	Received Date: _____
Input Date: _____	ORI #: _____	ACN #: _____



## APPLICANT FINGERPRINT RESPONSE SUBSCRIBER AGREEMENT

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### SECURITY OF CRIMINAL OFFENDER RECORD INFORMATION

Criminal Offender Record Information (CORI) is information identified through fingerprint submission to the Department of Justice (DOJ) with a criminal record or "No Record". It is confidential information disseminated to applicant agencies authorized by California statute for the purposes of employment, licensing, certification, and volunteer clearances. The following information describes each agency's responsibility toward accessing, storage, handling, dissemination, and destruction of CORI.

#### Background

Penal Code sections 11105 and 13300 identify who may have access to criminal history information and under what circumstances it may be released.

The DOJ maintains the California Law Enforcement Telecommunications System (CLETS) that provides law enforcement agencies with information directly from federal, state, and local computerized information files. However, restrictions have been placed on the user to ensure that the rights of all citizens of California are properly protected.

Article 1, section 1 of the California Constitution grants California citizens an absolute right to privacy. Individuals or agencies violating these privacy rights place themselves at both criminal and civil liability. Laws governing Californians' right-to-privacy were created to curb, among other things, the excessive collection and retention of personal information by government agencies, the improper use of information properly obtained for a proper purpose, and lack of a reasonable check on the accuracy of existing records. (*White v. Davis* (1975) 13 Cal. 3d 757,775.)

#### Employment Background Checks

It is only through the submission of fingerprints to the DOJ that the true identity of an individual can be established. In a 1977 lawsuit (*Central Valley v. Younger*), the court ruled that only arrest entries resulting in conviction, and arrest entries that indicate active prosecution, may be provided for evaluation for employment, licensing, or certification purposes.

#### Exceptions

Some statutory provisions, such as those relating to youth organizations, schools, and financial institutions, further limit information dissemination to conviction for specific offenses. Records provided for criminal justice agency employment as defined in Section 13101 of the Penal Code are exempt from these limitations. In addition, arrest information for certain narcotic and sex crimes, irrespective of disposition, will be provided for employment with a human resource agency as defined in section 1250 of the Health and Safety Code. Other exceptions are listed in the CLETS Policies, Practices, and Procedures (section 1.6.1).





## APPLICANT FINGERPRINT RESPONSE SUBSCRIBER AGREEMENT

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### SECURITY OF CRIMINAL OFFENDER RECORD INFORMATION (continued)

#### Unauthorized Access and Misuse

The unauthorized access and misuse of CORI may affect an individual's civil rights. Additionally, any person intentionally disclosing information obtained from personal or confidential records maintained by a state agency or from records within a system of records maintained by a governmental agency has violated various California statutes. There are several code sections that provide penalties for misuse or unauthorized use of CORI.

#### Authorized Access

CORI shall be accessible only to the Records Custodian and/or hiring authority charged with determining the suitability for employment or licensing of an applicant. The information received shall be used by the requesting agency solely for the purpose for which it was requested and shall not be reproduced for secondary dissemination to any other employment or licensing agency.

The retention and sharing of information between employing and licensing agencies are strictly prohibited. Retention and sharing of information infringes upon the right of privacy as defined in the California Constitution, and fails to meet the compelling state interest defined in *Loder v. Municipal Court* (1976) 17 Cal. 3d 859. In addition, maintenance of CORI separate from the information maintained by the DOJ precludes subsequent record updates and makes it impossible for the DOJ to control dissemination of CORI as outlined in section 11105 of the Penal Code.

CLETS Policies, Practices, and Procedures state that any information transmitted or received via CLETS is confidential and for official use only by authorized personnel (section 1.6.4). The California Code of Regulations, Article 1, section 703, addresses the "right and need" to know CLETS-provided information.

The Bureau of Criminal Information and Analysis (BCIA) recommends that state summary criminal history records, obtained for employment, licensing, or certification purposes, be destroyed once a decision is made to employ, license, or certify the subject of the record. Agencies that either are mandated or permitted by California statute to receive subsequent arrest notifications pursuant to Penal Code (PC) section 11105.2 must complete a Contract for Subsequent Arrest Notification Service (BCIA 8049).

Retention of criminal history records beyond this time should be based on documented legal authority and need. Any records retained must be stored in a secured, confidential file. The agency should designate a specific person responsible for the confidentiality of the record and have procedures to prevent further dissemination of the record, unless such dissemination is specifically provided for by law or regulation.





## APPLICANT FINGERPRINT RESPONSE SUBSCRIBER AGREEMENT

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As an agency receiving background clearance information in response to the submission of applicant fingerprint cards to the DOJ, you are aware of the regulations regarding the security of the hard copy information that you currently receive. The purpose of this Subscriber Agreement is to restate existing regulations and clarify how they apply to the electronic receipt of this same information via fax or e-mail. There are no new regulations. Items 1, 2, 4, 5, and 7 restate existing regulations relative to receiving hard copy information. Item 2 has been expanded to include electronic information. Items 3 and 6 are intended to clarify these regulations relative to electronic information.

In accordance with section 11077 of the Penal Code, the Attorney General is responsible for the security of criminal offender record information. Section 707(a) of the California Code of Regulations requires that **"Automated systems handling criminal offender record information and the information derived therefrom shall be secure from unauthorized access, alteration, deletion, or release. The computer terminals shall be located in secure premises."**

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### SUBSCRIBER AGREEMENT

This agreement is between the : Amador Fire Protection District  
and the Department of Justice for the purposes of the exchange of criminal offender record information.  
The above agrees that:

1. Criminal offender record information and the information derived therefrom shall be accessible only to the records custodian and/or hiring authority charged with determining the suitability of the applicant.
2. Confidential information received electronically or via mail shall be used solely for the purpose for which it was requested and shall not be reproduced for secondary dissemination to any other employment or licensing agency.
3. Retention of CORI is permissible if, after making its initial employment, licensing, or certification decision, the agency has legitimate business need for the information and there are no statutory requirements to destroy such information. Any record information that is retained by the applicant agency must be stored in a secure and confidential file.
4. Criminal history background checks have been completed on all individuals with access or proximity to terminals or fax machines receiving criminal offender record information.
5. Staff with access to criminal offender record information have received training and counseling on the handling of criminal offender record information and have signed employment statement forms acknowledging and understanding of the criminal penalties for the misuse of criminal offender record information (Penal Code sections 502, 11142, and 11143).



## APPLICANT FINGERPRINT RESPONSE SUBSCRIBER AGREEMENT

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6. Reasonable measures shall be taken to locate terminals and fax machines in a secure area to provide protection from unauthorized access to criminal offender record information by other than authorized personnel. Access is defined as the ability to view criminal offender record information on a terminal or on paper.
7. Pursuant to section 702 of the California Code of Regulations, authorized agencies violating this agreement may lose direct access to criminal offender record information maintained by the Department of Justice.

Contributing Agency Name: Amador Fire Protection District

Mailing Address: 810 Court Street

City, State, Zip Code: Jackson, CA, 95642

Phone Number: 2092236391

Signature of Agency Official \_\_\_\_\_

Printed Name of Agency Official Lynn Morgan

Title of Agency Official President, Board of Director

Date 08/21/2018

**CALIFORNIA JUSTICE INFORMATION SERVICES DIVISION  
CRIMINAL OFFENDER RECORD INFORMATION POLICY  
Use of Applicant Criminal Offender Record Information**

**Head of contributing agency/organization must sign and return document**

This policy has been developed to meet the requirements of the State of California, Department of Justice, Division of California Justice Information Services, for any agency that receives Criminal Offender Record Information (CORI).

To ensure the suitability of individuals accessing confidential criminal history records, anyone with access to CORI shall be fingerprinted and processed through the California Department of Justice.

The overall responsibility for the administration of this rests with the agency head or person in charge.

- A. Record Security: Any questions regarding the release, security and privacy of Criminal Offender Record Information (CORI) are to be resolved by the agency head or person in charge.
- B. Record Destruction: It is recommended that the state summary of CORI obtained for employment, licensing or certification purposes be destroyed once a decision is made to employ, license or certify the subject of the record. Retention beyond this time, should be based on legitimate business need or statute.
- C. Record Dissemination: CORI shall be used only for the purpose for which it was requested.
- D. Record Storage: CORI shall be securely maintained and accessible only to the agency head and any others designated by the agency head committed to protect CORI from unauthorized access, use, or disclosure.
- E. Record Reproduction: CORI shall not be reproduced for secondary dissemination to any other employment or licensing agency. However, the requesting agency may provide a copy of the DOJ applicant response to the subject of the record.
- F. Training: **The agency head shall:**
  - 1. Understand and enforce this policy.
  - 2. Be fingerprinted and have a criminal history clearance.
  - 3. Have on file a signed copy of the attached *Employee Statement Form* (which is itself a part of this policy) which acknowledges an understanding of laws prohibiting misuse of CORI.
- G. Penalties: Misuse of CORI is a criminal offense. Misuse of CORI may result in criminal or civil prosecution and/or administrative action up to and including loss of access to information maintained by the Department of Justice.

**I HAVE READ THE ABOVE AND UNDERSTAND THE POLICY REQUIREMENTS.**

Signature: \_\_\_\_\_ Date: 08/21/2018

Print Name: Lynn Morgan Title: President, Board of Director

Contributing Agency/Organization Name: Amador Fire Protection District

Mailing Address: 810 Court Street

City, State, Zip Code: Jackson, CA, 95642

Physical Address: 810 Court Street, Jackson, CA, 95642

**CALIFORNIA DEPARTMENT OF JUSTICE  
CALIFORNIA JUSTICE INFORMATION SERVICES DIVISION  
CRIMINAL OFFENDER RECORD INFORMATION SECURITY REQUIREMENTS  
Use of Applicant Criminal Offender Record Information**

**Custodian of Records must sign and return document**

**CUSTODIAN OF RECORDS DUTIES**

1. The information provided by the Department of Justice (DOJ) to this agency is **confidential** and shall not be disseminated to any other person or agency not authorized by law. A violation of this section is a misdemeanor. (Penal Code Section 11142). However, the requesting agency may provide a copy of the DOJ applicant response to the subject of the record.
2. All personnel/individuals with access to Criminal Offender Record Information (CORI) will have a fingerprint background clearance record check completed through the DOJ as required by the California Code of Regulations Section 703 (d) prior to the submission of fingerprints for employment, licensing, certification or volunteer purposes. (\$32 processing fee)
3. All personnel/individuals with access to CORI will have a signed "Employee Statement Form" on file acknowledging an understanding of laws prohibiting its misuse. (**See Employee Statement**)
4. All personnel/individuals with access to CORI will be trained in the secure handling, storage, dissemination and destruction of CORI.
5. My agency/organization will have a written policy for securing access, storage, dissemination and destruction of criminal record information. This policy will include the steps to be taken to prevent unauthorized access to CORI maintained in our agency files.
6. The Department of Justice may conduct audits of the authorized persons or agencies using CORI to ensure compliance with state laws and regulations. (Section 702 (c) California Code of Regulations)
7. The information provided by the Department of Justice will be maintained in a secured area/locked cabinet separate from the employees personnel file and be used only for the purpose for which it was acquired.
8. Our agency/organization will notify the Department of Justice with regard to any change of agency name, address, telephone number, fax number, Custodian of Records and contact person.
9. The "No Longer Interested Notification Form" will be sent to DOJ, when applicable.
10. Our agency/organization will send an updated Live Scan Subscriber Agreement form to DOJ signed by our new agency official, when applicable.

**On behalf of our agency/organization, I hereby acknowledge that I have read and agree to the above.**

Signature: \_\_\_\_\_ Date: 08/21/2018

Print Name: Lindsey Ayanian Clark Title: Administrative Technician

Contributing Agency/Organization Name: Amador Fire Protection District

Mailing Address: 810 Court Street

City, State, Zip Code: Jackson, CA, 95642

Physical Address: 810 Court Street, Jackson, CA, 95642





**CUSTODIAN OF RECORDS  
APPLICATION FOR CONFIRMATION  
(Penal Code section 11102.2)**

**Applicant Information**

Last Name Ayanian Clark	First Name Lindsey	Middle Name Ann
Address PO Box 104 , 9350 Pacific Street	City Plymouth	State CA Zip Code 95669
Phone Number 2094191886	Date of Birth 05/17/1989	Driver's License or CA ID Number D7604652

**Agency/Organization Information**

Agency Head Lynn Morgan	Phone Number 2092236391
Agency Name Amador Fire Protection District	ORI
Address 810 Court Street	City Jackson
State CA	Zip Code 95642

Please answer fully the following questions:

1. Does the designated Custodian of Records work for the applicant agency? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the relationship? Administrative Technician, In charge of Hiring, Human Resources, and Personnel If no, what is the relationship?
2. Have you ever used a name other than the one on this application? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list other names below.  Lindsey Clark
3. Have you ever been arrested in California or any other state and/or are you awaiting adjudication for any offense for which you were arrested? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, give details below.
4. Have you ever been convicted by any court of a felony or misdemeanor offense in California or any other state? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, disclose the date and place of arrest, whether the conviction was for a felony or misdemeanor, and the sentence imposed.
5. Have you ever been denied a professional license or had such license revoked, suspended, or restricted? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, give details below.
6. Have you ever been adjudged liable for damages in any suit grounded in fraud, misrepresentation, or in violation of state regulatory laws? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, give details below.
7. Have you ever failed to satisfy any court ordered money judgment including restitution? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, give details below.

**Misrepresentation or Failure to Disclose Requested Information on this Application  
Is Cause for Denial or Revocation of Confirmation.**

**Certification**

I certify under penalty of perjury under the laws of the State of California to the truth and accuracy of all statements, answers, and representations made in the foregoing application, including all supplementary statements.

\_\_\_\_\_  
Signature of Applicant

08/21/2018  
Date

California Department of Justice  
Bureau of Criminal Information and Analysis  
Custodian of Records Unit  
P.O. Box 903417  
Sacramento, CA 94203-4170

**DOJ USE ONLY**

**Confirmation of Custodian of Records**

Date confirmed: \_\_\_\_\_ Completed by: \_\_\_\_\_  
(initials)



## CONTRACT FOR SUBSEQUENT ARREST NOTIFICATION SERVICE

Department of Justice  
Bureau of Criminal Information and Analysis  
P.O. Box 903417  
Sacramento, CA 94203-4170

The agency listed below is authorized to receive state summary criminal history information from the files of the Department of Justice (DOJ) for employment, licensing, or certification purposes. This agency further requests that fingerprint transactions submitted for this purpose be retained in DOJ's files for **California only** subsequent arrest notification service pursuant to section 11105.2 of the California Penal Code. **Fingerprint submissions received before the effective date of this contract will not be retained by the California Department of Justice.**

AGENCY NAME: Amador Fire Protection District

AGENCY ADDRESS: 810 Court Street

CITY: Jackson STATE: CA ZIP CODE: 95642

ORI NUMBER: (If Applicable) \_\_\_\_\_

CONTACT PERSON(S): Lindsey Clark

CONTACT PERSON(S) TELEPHONE: 2092236391

**Please retain the following authorized categories:**

☒ ALL EMPLOYEES ☒ ALL VOLUNTEERS

☐ ALL LICENSES, CERTIFICATIONS, OR PERMITS

☐ OTHER: (specify) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This agency certifies that, to its knowledge, there is no statute or regulation prohibiting this notification and that all requirements for criminal record security and privacy of individuals will be met. This agency will notify the Bureau of Criminal Information and Analysis when it no longer has a legitimate interest in a subject, as required by section 11105.2 of the California Penal Code. The agency agrees to immediately return any subsequent arrest notification received from DOJ for any person unknown to the agency.

\_\_\_\_\_  
Signature of Agency Representative Date 08/21/2018

Lynn Morgan  
Print Name

President, Board of Director  
Title of Agency Representative

**FOR DOJ USE ONLY:**

☐ Approved ☐ Not Authorized

\_\_\_\_\_  
Signature of DOJ Representative

\_\_\_\_\_  
Effective Date



# AGENDA TRANSMITTAL FORM

To: **Amador Fire Protection Board of Directors**

Date: 08/21/2018

From: David Bellerive  
(Department Head - please type)

Phone Ext. x391

☒ Regular Agenda  
☐ Consent Agenda  
☐ Blue Slip  
☐ Closed Session

Meeting Date Requested:

08/21/2018

Department Head Signature



Agenda Title:

**VOLUNTEER FIRE ASSISTANCE GRANT AWARD**

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

Last June, AFPD applied for a VFA Grant to buy mobile radios for our vehicles. This grant is administered by the State with the funding provided through the USDA Forest Service. We have been awarded a grant in the amount of \$5,020.02. The attached agreement is needed to proceed with the grant process.

Recommendation/Requested Action:

Approve resolution and authorize President to sign agreement.

Fiscal Impacts (attach budget transfer form if appropriate)

Staffing Impacts n/a

Is a 4/5ths vote required?

Yes ☐

No ☒

Committee Review?

N/A ☒

Name

Committee Recommendation:

Contract Attached:

Yes ☒

No ☐

N/A ☐

Resolution Attached:

Yes ☒

No ☐

N/A ☐

Ordinance Attached

Yes ☐

No ☐

N/A ☒

Comments:

Request Reviewed by:

Chairman

Counsel

Auditor

GSA Director

CAO

Risk Management

Distribution Instructions:

4 originals to CAL FIRE for full execution

## FOR CLERK USE ONLY

Meeting Date

08/21/2018

Time

10:30am

Item #

3

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 Fire Protection District.

ATTEST: \_\_\_\_\_

AFPD Board Clerk

**BEFORE THE BOARD OF DIRECTORS OF THE  
Amador Fire Protection District  
COUNTY OF Amador, STATE OF CALIFORNIA**

**IN THE MATTER OF:**

**Resolution Number: 18-\_\_\_\_\_**

**Approving the Department of Forestry and Fire Protection Agreement #7FG18002** for services from the date of last signatory on page 6 of the Agreement to June 30, 2019 under the Volunteer Fire Assistance Program of the Cooperative Forestry Assistance Act of 1978.

**BE IT RESOLVED** by the Board of Directors of the Amador Fire Protection District, that said Board does hereby approve the Agreement with the California Department of Forestry and Fire Protection dated as of the last signatory date on page 6 of the Agreement, and any amendments thereto. This Agreement provides for an award, during the term of this Agreement, under the Volunteer Fire Assistance Program of the Cooperative Fire Assistance Act of 1978 during the State Fiscal Year 2018-19 up to and no more than the amount of \$5,020.02.

**BE IT FURTHER RESOLVED** that Lynn Morgan, President of said Board be and hereby is authorized to sign and execute said Agreement and any amendments on behalf of the Amador Fire Protection District.

The foregoing resolution was duly passed and adopted by the Board of Directors of the Amador Fire Protection District, at a regular meeting thereof, held on the 21<sup>st</sup> day of August, 2018, by the following vote:

AYES:

\_\_\_\_\_

\_\_\_\_\_  
Signature, Board of Directors Member

NAYS:

ABSENT:

Lynn Morgan, President  
Printed Name and Title

\_\_\_\_\_  
Signature, Board of Directors Member

Brian Oneto, Vice President  
Printed Name and Title

**-----CERTIFICATION OF RESOLUTION-----**

**ATTEST:**

I Lindsey Clark, Clerk of the Amador Fire Protection District,  
County of Amador, California do hereby certify that this is a true and correct copy of the original Resolution Number 18.

WITNESS MY HAND OR THE SEAL OF THE Amador Fire Protection District, on  
this 21<sup>st</sup> day of August, 2018.

**OFFICIAL SEAL  
OR NOTARY CERTIFICATON**

\_\_\_\_\_  
Signature

Clerk of the Board, Amador Fire Protection District  
Title and Name of Local Agency

**VOLUNTEER FIRE ASSISTANCE PROGRAM  
AGREEMENT  
PAGE 1 OF 6**

DEPARTMENT OF FORESTRY AND FIRE PROTECTION

STATE OF CALIFORNIA  
Natural Resources Agency

Agreement for the Volunteer Fire Assistance Program of the  
Cooperative Forestry Assistance Act of 1978

THIS AGREEMENT, made and entered into **ON THE LAST SIGNATORY DATE ON PAGE 6**, by and between the STATE of California, acting through the Director of the Department of Forestry and Fire Protection hereinafter called "STATE", and Amador Fire Protection District

\_\_\_\_\_ hereinafter called "LOCAL AGENCY", covenants as follows:

RECITALS:

1. STATE has been approved as an agent of the United States Department of Agriculture, (USDA), Forest Service for the purpose of administering the Cooperative Forestry Assistance Act (CFAA) of 1978 (PL 95-313, United States Code, Title 16, Chapter 41, Section 2010 et seq., Volunteer Fire Assistance Program), hereinafter referred to as "VFA", and
2. The VFA has made funds available to STATE for redistribution, under certain terms and conditions, to LOCAL AGENCY to assist LOCAL AGENCY to upgrade its fire protection capability, and
3. LOCAL AGENCY desires to participate in said VFA.

NOW THEREFORE, it is mutually agreed between the parties as follows:

4. **APPROVAL:** This Agreement is of no force or effect until signed by both parties and approved by the Department of General Services, if required. LOCAL AGENCY may not commence performance until such approval has been obtained.
5. **TIMELINESS:** Time is of the essence in this Agreement.
6. **FORFEITURE OF AWARD:** LOCAL AGENCY must return this Agreement and required resolution properly signed and executed to STATE at the address specified in paragraph 11, with a postmark no later than December 1, 2018 or LOCAL AGENCY will forfeit the funds.
7. **GRANT AND BUDGET CONTINGENCY CLAUSE:** It is mutually understood between the parties that this Agreement may have been written for the mutual benefit of both parties before ascertaining the availability of congressional appropriation of funds, to avoid program and fiscal delays that would occur if the Agreement were executed after that determination was made.

**VOLUNTEER FIRE ASSISTANCE PROGRAM  
AGREEMENT  
PAGE 2 OF 6**

This **Agreement** is valid and enforceable only if sufficient funds are made available to the STATE by the United States Government for the State Fiscal Year 2018 for the purpose of this program. In addition, this **Agreement** is subject to any additional restrictions, limitations, or conditions enacted by the Congress or to any statute enacted by the Congress that may affect the provisions, terms, or funding of this **Agreement** in any manner.

The parties mutually agree that if the Congress does not appropriate sufficient funds for the program, this **Agreement** shall be amended to reflect any reduction in funds.

The STATE has the option to invalidate the **Agreement** under the 30-day cancellation clause or to amend the **Agreement** to reflect any reduction in funds.

8. **REIMBURSEMENT:** STATE will reimburse LOCAL AGENCY, from funds made available to STATE by the Federal Government, an amount not to exceed **\$5,020.02** on a 50/50 matching funds basis, for the performance of specific projects and/or purchase of specific items identified in Proposed Project, Application for Funding, attached hereto. **Reimbursement will be only for those projects accomplished and/or items purchased between THE LAST SIGNATORY DATE ON PAGE 6 and JUNE 30, 2019.** This sum is the sole and maximum payment that STATE will make pursuant to this Agreement. **LOCAL AGENCY must bill STATE at the address specified in paragraph 11, with a postmark no later than September 1, 2019 in order to receive the funds.** The bill submitted by LOCAL AGENCY must clearly delineate the projects performed and/or items purchased. A vendor's invoice or proof of payment to vendor(s) must be included for items purchased.
9. **LIMITATIONS:** Expenditure of the funds distributed by STATE herein is subject to the same limitations as placed by the VFA, upon expenditure of United States Government Funds. Pursuant to Title 7 of the Code of Federal Regulations, Section 3016.32 subject to the obligations and conditions set forth in that section; title to any equipment and supplies acquired under this **Agreement** vests with the LOCAL AGENCY. For any equipment items over \$5,000, the federal government may retain a vested interest in accordance with paragraph 16 below.
10. **MATCHING FUNDS:** Any and all funds paid to LOCAL AGENCY under the terms of this **Agreement**, hereinafter referred to as "VFA Funds", shall be matched by LOCAL AGENCY on a dollar-for-dollar basis, for each project listed on attachment(s) hereto identified as "Proposed Project". No amount of unpaid "contributed" or "volunteer" labor or services shall be used or consigned in calculating the matching amount "actually spent" by LOCAL AGENCY. LOCAL AGENCY shall not use VFA Funds as matching funds for other federal grants, including Department of Interior (USDI) Rural Fire Assistance grants, nor use funds from other federal grants, including USDI Rural Fire Assistance grants, as matching funds for VFA Funds.
11. **ADDRESSES:** The mailing addresses of the parties hereto, for all notices, billings, payments, repayments, or any other activity under the terms of the Agreement, are:

**VOLUNTEER FIRE ASSISTANCE PROGRAM  
AGREEMENT  
PAGE 3 OF 6**

LOCAL AGENCY: Amador Fire Protection District  
810 Court Street  
Jackson, CA 95642  
Attention: David Bellerive  
Telephone Number(s): 209-223-6391  
FAX Number: 209-223-6646  
E-mail afpdhdq@amadorgov.org

STATE: **Department of Forestry and Fire Protection**  
**Grants Management Unit, Attn: Megan Esfandiary**  
**P. O. Box 944246**  
**Sacramento, California 94244-2460**  
**PHONE: (916) 653-3649**

12. PURPOSE: Any project to be funded hereunder must be intended to specifically assist LOCAL AGENCY to organize, train, and/or equip local firefighting forces in the aforementioned rural area and community to prevent or suppress fires which threaten life, resources, and/or improvements within the area of operation of LOCAL AGENCY.
13. COMBINING: In the event funds are paid for two or more separate, but closely related projects, the 50/50 cost-sharing formula will be applied to the total cost of such combined projects.
14. OVERRUNS: In the event that the total cost of a funded project exceeds the estimate of costs upon which this Agreement is made, LOCAL AGENCY may request additional funds to cover the **Agreement** share of the amount exceeded. However, there is no assurance that any such funds are, or may be, available for reimbursement. Any increase in funding will require an amendment.
15. UNDERRUNS: In the event that the total cost of a funded project is less than the estimate of costs upon which this **Agreement** is made, LOCAL AGENCY may request that additional eligible projects/items be approved by STATE for **Agreement** funding. However, there is no assurance that any such approval will be funded. Approval of additional projects/items, not listed on the Proposed Project application, made by STATE, will be in writing and will require an amendment.
16. FEDERAL INTEREST IN EQUIPMENT: The Federal Government has a vested interest in any item purchased with VFA funding in excess of \$5,000 regardless of the length of this **Agreement**, until such time as the fair market value is less than \$5,000. The VFA percentage used to purchase the equipment will be applied to the sale price and recovered for the Government during the sale. This percentage will remain the same even following depreciation. The Federal Government may not have to be reimbursed if the disposal sale amounts to a fair market value of less than \$5,000. LOCAL AGENCY will notify STATE of the disposal of such items.



**VOLUNTEER FIRE ASSISTANCE PROGRAM  
AGREEMENT  
PAGE 4 OF 6**

17. **EQUIPMENT INVENTORY:** Any single item purchased in excess of \$5,000 will be assigned a VFA Property Number by the STATE. LOCAL AGENCY shall forward a copy of the purchase documents listing the item, brand, model, serial number, any LOCAL AGENCY property number assigned, and a LOCAL AGENCY contact and return address to STATE at the address specified in paragraph 11. The STATE will advise the LOCAL AGENCY contact of the VFA Property Number assigned.
18. **AUDIT:** LOCAL AGENCY agrees that the STATE, the Department of General Services, the Bureau of State Audits, or their designated representative shall have the right to review and to copy any records and supporting documentation pertaining to the performance of this **Agreement**. LOCAL AGENCY agrees to maintain such records for possible audit for a minimum of three (3) years after final payment, unless a longer period of records retention is stipulated. LOCAL AGENCY agrees to allow the auditor(s) access to such records during normal business hours and to allow interviews of any employees who might reasonably have information related to such records. Further, LOCAL AGENCY agrees to include a similar right of the State of California to audit records and interview staff in any subcontract related to performance of this **Agreement**. (GC 8546.7, PCC 10115 et seq., CCR Title 2, Section 1896).
19. **DISPUTES:** In the event of any dispute over qualifying matching expenditures of LOCAL AGENCY, the dispute will be decided by STATE and its decision shall be final and binding.
20. **INDEMNIFICATION:** LOCAL AGENCY agrees to indemnify, defend, and save harmless, the STATE, its officers, agents, and employees, from any and all claims and losses, accruing or resulting to any and all contractors, subcontractors, suppliers, laborers, and any other person, firm or corporation furnishing or supplying work services, materials, or supplies in connection with the performance of this **Agreement**, and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by LOCAL AGENCY in the performance of this **Agreement**.
21. **DRUG-FREE WORKPLACE REQUIREMENTS:** LOCAL AGENCY will comply with the requirements of the Drug-Free Workplace Act of 1990 and will provide a drug-free workplace by taking the following actions:
  - a. Publish a statement notifying employees that unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited and specifying actions to be taken against employees for violations.
  - b. Establish a Drug-Free Awareness Program to inform employees about:
    - 1) the dangers of drug abuse in the workplace;
    - 2) the person's or organization's policy of maintaining a drug-free workplace;



**VOLUNTEER FIRE ASSISTANCE PROGRAM  
AGREEMENT  
PAGE 5 OF 6**

- 3) any available counseling, rehabilitation and employee assistance programs; and,
- 4) penalties that may be imposed upon employees for drug abuse violations.

c. Every employee who works on the proposed **Agreement** will:

- 1) receive a copy of the company's drug-free workplace policy statement; and,
- 2) agree to abide by the terms of the company's statement as a condition of employment on the **Agreement**.

Failure to comply with these requirements may result in suspension of payments under the **Agreement** or termination of the **Agreement** or both and LOCAL AGENCY may be ineligible for funding of any future State **Agreement** if the department determines that any of the following has occurred: (1) the LOCAL AGENCY has made false certification, or violated the certification by failing to carry out the requirements as noted above. (GC 8350 et seq.)

- 22. **TERM:** The term of the Agreement SHALL COMMENCE ON THE LAST SIGNATORY DATE ON PAGE 6 and continue through June 30, 2019.
- 23. **TERMINATION:** This **Agreement** may be terminated by either party giving 30 days written notice to the other party or provisions herein amended upon mutual consent of the parties hereto.
- 24. **AMENDMENTS:** No amendment or variation of the terms of this **Agreement** shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or **Agreement** not incorporated in the **Agreement** is binding on any of the parties.
- 25. **INDEPENDENT CONTRACTOR:** LOCAL AGENCY, and the agents and employees of LOCAL AGENCY, in the performance of this **Agreement**, shall act in an independent capacity and not as officers or employees or agents of the STATE or the Federal Government.

**VOLUNTEER FIRE ASSISTANCE PROGRAM  
AGREEMENT  
PAGE 6 OF 6**

IN WITNESS WHEREOF, the parties have executed this **Agreement** as of the last signatory date below.

STATE OF CALIFORNIA  
DEPARTMENT OF FORESTRY  
AND FIRE PROTECTION

LOCAL AGENCY

Amador Fire Protection District

By: \_\_\_\_\_  
Signature

By: \_\_\_\_\_  
\*Signature

Dan Sendek  
Printed Name

Lynn Morgan  
Printed Name

Staff Chief  
Title  
Cooperative Fire Programs

President  
\*\*Title  
Amador Fire Protection District

\_\_\_\_\_  
Last Signatory Date

08/21/2018  
\*\*\*Date

\*Ensure that the officer signing here for LOCAL AGENCY IS THE SAME Officer authorized in the Resolution to execute this **Agreement**.

\*\*Ensure that the title entered here IS THE SAME title used in the Resolution for the Officer who is executing this **Agreement**.

\*\*\*Ensure that the date LOCAL AGENCY signs IS THE SAME DATE as the Resolution date OR LATER.

**FOR STATE USE ONLY**

AMOUNT ENCUMBERED BY THIS DOCUMENT	PROGRAM/CATEGORY (CODE AND TITLE) Support		FUND TITLE Federal		<b>Department of General Services Use Only</b>          DGS APPROVAL NOT REQUIRED PER SAM 1215
\$5,020.02	(OPTIONAL USE) Vendor #				
	ITEM 3540-001-0001	CHAPTER 29	STATUTE 2018	FISCAL YEAR 18/19	
PRIOR AMOUNT ENCUMBERED FOR THIS AGREEMENT	OBJECT OF EXPENDITURE (CODE AND TITLE)				
\$0	18-9214-418.99-				
TOTAL AMOUNT ENCUMBERED TO DATE					
\$5,020.02					
I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purpose of the expenditure stated above.		T.B.A. NO.		B.R. NO.	
		SIGNATURE OF CDF ACCOUNTING OFFICER <b>X</b>		DATE	

☐ CONTRACTOR

☐ STATE AGENCY

☐ DEPT. OF GEN. SER.

☐ CONTROLLER

☐

## U.S. DEPARTMENT OF AGRICULTURE

---

### **Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions**

---

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7 CFR part 3017, Section 3017.510, Participants' responsibilities. The regulations were published as Part IV of the January 30, 1989, Federal Register (pages 4722-4733). Copies of the regulations may be obtained by contacting the Department of Agriculture agency with which this transaction originated.

#### **(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS ON REVERSE)**

- (1) The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- (2) Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

---

Amador Fire Protection District  
Organization Name

---

7FG18002  
PR/Award Number or Project Name

---

Lynn Morgan, President  
Name(s) and Title(s) of Authorized Representative(s)

---

Signature(s)

---

08/21/2018

Date

**PAYEE DATA RECORD**

(Required when receiving payment from the State of California in lieu of IRS W-9 or W-7)

STD 204 (Rev. 4/2017)

<b>1</b>	<b>INSTRUCTIONS:</b> Type or print the information. Complete all information on this form. Sign, date, and return to the state agency (department/office) address shown in Box 6. Prompt return of this <b>fully completed</b> form will prevent delays when processing payments. Information provided in this form will be used by California state agencies to prepare Information Returns (Form1099). See next page for more information and Privacy Statement. <b>NOTE:</b> Governmental entities, i.e. federal, state, and local (including school districts), are not required to submit this form.																			
<b>2</b>	<b>PAYEE'S LEGAL BUSINESS NAME</b> <i>(As shown on your income tax return)</i> Amador Fire Protection District																			
	<b>SOLE PROPRIETOR OR INDIVIDUAL- ENTER NAME AS SHOWN ON SSN</b> <i>(Last, First, M.I.)</i> N/A							<b>E-MAIL ADDRESS</b> afpdhdq@amadorgov.org												
	<b>MAILING ADDRESS</b> 810 Court Street					<b>BUSINESS ADDRESS</b> 810 Court Street														
	<b>CITY</b> Jackson	<b>STATE</b> CA	<b>ZIP CODE</b> 95642	<b>CITY</b> Jackson	<b>STATE</b> CA	<b>ZIP CODE</b> 95642														
<b>3</b>	<b>PAYEE ENTITY TYPE</b>  <b>CHECK ONE BOX ONLY</b>																			
	<b>ENTER FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN):</b> <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">7</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">0</td> <td style="width: 20px; text-align: center;">2</td> <td style="width: 20px; text-align: center;">9</td> <td style="width: 20px; text-align: center;">6</td> <td style="width: 20px; text-align: center;">1</td> <td style="width: 20px; text-align: center;">7</td> </tr> </table>										2	7	2	0	2	9	6	1	7	
2	7	2	0	2	9	6	1	7												
	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> <b>PARTNERSHIP</b>  <input type="checkbox"/> <b>ESTATE OR TRUST</b> </div> <div style="width: 45%;"> <b>CORPORATION:</b>  <input type="radio"/> <b>MEDICAL</b> <i>(e.g., dentistry, psychotherapy, chiropractic, etc.)</i>  <input type="radio"/> <b>LEGAL</b> <i>(e.g., attorney services)</i>  <input type="radio"/> <b>EXEMPT</b> <i>(nonprofit)</i>  <input checked="" type="radio"/> <b>ALL OTHERS</b> </div> </div>																			
	<input type="checkbox"/> <b>SOLE PROPRIETOR OR INDIVIDUAL</b> <table border="1" style="display: inline-table; border-collapse: collapse; margin-left: 20px;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> <div style="margin-left: 20px;">         Enter social security number (SSN)          or Individual taxpayer identification number (ITIN)       </div> <div style="margin-left: 20px; font-size: small;"> <i>(SSN required by authority of California Revenue and Tax Code sections 18646 and 18661)</i> </div>																			
	<b>NOTE:</b> Payment will not be processed without an accompanying taxpayer identification number.																			
<b>4</b>	<b>PAYEE RESIDENCY STATUS</b>																			
	<input checked="" type="checkbox"/> <b>CALIFORNIA RESIDENT</b> - Qualified to do business in California or maintains a permanent place of business in California. <input type="checkbox"/> <b>CALIFORNIA NON RESIDENT</b> <i>(see next page for more information)</i> - Payments to nonresidents for services may be subject to state income tax withholding. <div style="margin-left: 20px;"> <input type="radio"/> No services performed in California.  <input type="radio"/> Copy of Franchise Tax Board waiver of state withholding attached.         </div>																			
<b>5</b>	<b>I hereby certify under penalty of perjury that the information provided on this document is true and correct. Should my residency status change, I will promptly notify the state agency below.</b>																			
	<b>AUTHORIZED PAYEE REPRESENTATIVE'S NAME</b> <i>(Type or Print)</i> Lynn Morgan					<b>TITLE</b> President			<b>TELEPHONE</b> <i>(include area code)</i> 209-223-6391											
	<b>SIGNATURE</b>					<b>DATE</b> 8/21/2018			<b>E-MAIL ADDRESS</b> lmorgan@amadorgov.org											
<b>6</b>	<b>Please return completed form to:</b>																			
	<b>DEPARTMENT/OFFICE</b> CAL FIRE					<b>UNIT/SECTION</b> Grants Management Unit														
	<b>MAILING ADDRESS</b> P.O. Box 944246					<b>TELEPHONE</b> <i>(include area code)</i> 916-653-3649			<b>FAX</b>											
	<b>CITY</b> Sacramento	<b>STATE</b> CA	<b>ZIP CODE</b> 94244-2460	<b>E-MAIL ADDRESS</b> Megan.Esfandiary@fire.ca.gov																

# AGENDA TRANSMITTAL FORM

To: **Amador Fire Protection Board of Directors**

Date: 08/21/2018

From: David Bellerive  
(Department Head - please type)

Phone Ext. x391

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

Meeting Date Requested:

08/21/2018

Department Head Signature 

Agenda Title:

MINUTES

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

Review and approval of the Board of Directors regular minutes of July 17, 2018 as presented or revised.

Recommendation/Requested Action:

Approve minutes as presented or revised

Fiscal Impacts (attach budget transfer form if appropriate)

n/a

Staffing Impacts 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:

Committee Review?

N/A ☒

Name

Committee Recommendation:

Request Reviewed by:

Chairman \_\_\_\_\_ Counsel \_\_\_\_\_

Auditor \_\_\_\_\_ GSA Director \_\_\_\_\_

CAO \_\_\_\_\_ Risk Management \_\_\_\_\_

Distribution Instructions:

n/a

## FOR CLERK USE ONLY

Meeting Date

08/21/2018

Time

10:30am

Item #

4

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 Fire Protection District.

ATTEST: \_\_\_\_\_

AFPD Board Clerk

**AMADOR FIRE PROTECTION DISTRICT  
BOARD OF DIRECTORS**

Meeting Was Recorded  
On MP3  
No. AFPD 18-07

Jackson, California  
Tuesday, July 17, 2018  
12:27pm

The Board of Directors of the Amador Fire Protection District met in the County Administration Center, 810 Court Street, Jackson, California, on the above date pursuant to adjournment, and the following proceedings were had, to wit:

**Present:**

Lynn Morgan, President, Director  
Brian Oneto, Vice President, Director  
Pat Crew, Director  
Frank Axe, Director  
Richard Forster, Director

**Absent:**

**Staff:**

David Bellerive, Fire Chief  
Lindsey Clark, Clerk of the Board

**AGENDA**

**MOTION:** It was moved by Director Crew, seconded by Director Axe, and unanimously carried to approve the agenda, as presented.

**PUBLIC MATTERS NOT ON THE AGENDA:** Mike Kirkley presented the Board with concerns as to how closed session items are labeled on the agendas. Direction to staff to seek guidance from County Counsel.

**ADMINISTRATIVE MATTERS**

**Vehicle Maintenance Report:** Chief Bellerive presented the subject report to the Board. Discussion ensued relative to subject matter.

**Pine Grove CSD:** Discussion ensued relative to subject matter.

**MOTION:** It was moved by Director Oneto seconded by Director Crew, and carried to deny request from Pine Grove Community Services District to pay any additional cost share for utilities.  
Apposed: Director Axe



## **MISCELLANEOUS MATTERS**

### **Regular Minutes of June 19, 2018:**

**MOTION:** It was moved by Director Axe, seconded by Director Oneto, and unanimously carried to approve the minutes of June 19, 2018.

**CLOSED SESSION:** At 12:52 a.m., the Board recessed into closed session. The following persons were present during portions of this closed session: Fire Chief David Bellerive, This portion of the meeting was not recorded on tape.

**REGULAR SESSION:** At 1:13 p.m., the Board reconvened into regular session. The following matters were reviewed during closed session:

**Property Negotiations:** Discussion Only

**Public Employment, Fire Chief:** Direction to Staff

### **Confidential Minutes:**

**MOTION:** It was moved by Director Forster, seconded by Director Crew, and unanimously carried to approve the confidential minutes of June 19, 2018, with corrections.

**ADJOURNMENT:** At 1:13 p.m., President Morgan adjourned the meeting until August 21, 2018 at 10:30 a.m.

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President, Amador Fire Protection District

# AGENDA TRANSMITTAL FORM

To: Amador Fire Protection Board of Directors

Date: 08/21/2018

From: David Bellerive  
(Department Head - please type)

Phone Ext. x391

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

Meeting Date Requested:

08/21/2018

Department Head Signature 

Agenda Title:

MINUTES

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

Review and approval of the Board of Directors regular minutes of July 24, 2018 as presented or revised.

Recommendation/Requested Action:

Approve minutes as presented or revised

Fiscal Impacts (attach budget transfer form if appropriate)

n/a

Staffing Impacts n/a

Is a 4/5ths vote required?

Yes ☐

No ☒

Committee Review?

N/A ☒

Name \_\_\_\_\_

Committee Recommendation:

Contract Attached:

Yes ☐

No ☐

N/A ☒

Resolution Attached:

Yes ☐

No ☐

N/A ☒

Ordinance Attached

Yes ☐

No ☐

N/A ☒

Comments:

Request Reviewed by:

Chairman \_\_\_\_\_

Counsel \_\_\_\_\_

Auditor \_\_\_\_\_

GSA Director \_\_\_\_\_

CAO \_\_\_\_\_

Risk Management \_\_\_\_\_

Distribution Instructions:

n/a

## FOR CLERK USE ONLY

Meeting Date

08/21/2018

Time

10:30am

Item #

5

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 Fire Protection District.

ATTEST: \_\_\_\_\_

AFPD Board Clerk

**AMADOR FIRE PROTECTION DISTRICT  
BOARD OF DIRECTORS**

Meeting Was Recorded  
On MP3  
No. AFD 18-08

Jackson, California  
Tuesday, July 24, 2018  
3:03pm

The Board of Directors of the Amador Fire Protection District met in the County Administration Center, 810 Court Street, Jackson, California, on the above date pursuant to adjournment, and the following proceedings were had, to wit:

**Present:**

Lynn Morgan, President, Director  
Brian Oneto, Vice President, Director  
Pat Crew, Director  
Frank Axe, Director  
Richard Forster, Director

**Absent:**

**Staff:**

David Bellerive, Fire Chief  
Lindsey Clark, Clerk of the Board

**AGENDA**

**MOTION:** It was moved by Director Axe, seconded by Director Forster, and unanimously carried to approve the agenda, as presented.

**PUBLIC MATTERS NOT ON THE AGENDA:** None

**CLOSED SESSION:** At 3:05 p.m., the Board recessed into closed session. The following persons were present during portions of this closed session: Fire Chief David Bellerive, This portion of the meeting was not recorded on tape.

**REGULAR SESSION:** At 4:58 p.m., the Board reconvened into regular session. The following matters were reviewed during closed session:

**Public Employment, Fire Chief:** Direction to Staff

**ADJOURNMENT:** At 1:13 p.m., President Morgan adjourned the meeting until August 21, 2018 at 10:30 a.m.

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President, Amador Fire Protection District