

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

216



FROM: Stanley L. Sniff Jr., Sheriff-Coroner-PA

SUBMITTAL DATE:
02/10/10

SUBJECT: Approval of the Sheriff's Continued Participation in the State and Federal Surplus Property Programs

RECOMMENDED MOTION: Move that the Board of Supervisors:

1. Adopt the State Department of General Services' resolution authorizing specified Sheriff's Department staff to acquire property under the State and Federal Surplus Property Programs.
2. Authorize the Sheriff or designee to sign Program participatory documents for submission to the California Emergency Management Agency (Cal EMA).

BACKGROUND: Since the late 1990's, the Sheriff's Department has participated in several Federal surplus programs, which have included the Department of Defense 1033 Excess Property Program and the Defense Reutilization and Marketing Program. Over the years, the Department has acquired many valuable and useful items, including helicopters and weapons. The Department's acquisition of surplus property has saved the County tens of thousands of dollars.

(Continued on Page 2)
BR 010-073


Will Taylor, Director of Administration for
Stanley L. Sniff Jr., Sheriff-Coroner-PA

FINANCIAL DATA	Current F.Y. Total Cost:	N/A	In Current Year Budget:	N/A
	Current F.Y. Net County Cost:	N/A	Budget Adjustment:	N/A
	Annual Net County Cost:	N/A	For Fiscal Year:	FY 2009-10

SOURCE OF FUNDS:	Positions To Be Deleted Per A-30	<input type="checkbox"/>
	Requires 4/5 Vote	<input type="checkbox"/>

C.E.O. RECOMMENDATION:

APPROVE

BY: Robert Tremaine
Robert Tremaine


County Executive Office Signature

Dep't Recomm.: Consent Policy
Per Exec. Ofc.: Consent Policy

MINUTES OF THE BOARD OF SUPERVISORS

On motion of Supervisor Buster, seconded by Supervisor Stone and duly carried, IT WAS ORDERED that the above matter is approved as recommended.

Ayes: Buster, Stone, Benoit and Ashley
Nays: None
Absent: Tavaglione
Date: March 16, 2010
xc: Sheriff

Kecia Harper-Ihem
Clerk of the Board
By: 
Deputy

Prev. Agn. Ref.: 06/05/07 3.58 | District: All | Agenda Number: 3.53

ATTACHMENTS FILED
WITH THE CLERK OF THE BOARD

COUNTY COUNSELLOR
BY: NEAL R. KIPNIS
DATE: 2/22/10
Departmental Conference

To continue our participation in the programs for an additional two year period, the State Department of General Services requires that the Board of Supervisors adopt a resolution authorizing specific Sheriff's Department employees to acquire State or Federal surplus property on behalf of the County. In addition, the Sheriff's Department will submit participatory documents with Cal EMA.

Lastly, the Sheriff's Department, on behalf of the County, will sign and agree to a release of liability for the State and the Federal Department of Defense for any property damage and/or serious injury and death that may arise from the use of equipment acquired through the programs. County Counsel has approved as to form all surplus program documents which will be submitted to the State Department of General Services.



**DEPARTMENT OF GENERAL SERVICES
OFFICE OF FLEET AND ASSET MANAGEMENT**

1700 National Drive • Sacramento, CA 95834 • (916) 928-5800 • Fax (916) 928-7965 • www.ofa.dgs.ca.gov/opsr

ELIGIBILITY RENEWAL APPLICATION STATE & FEDERAL SURPLUS PROPERTY PROGRAM

A. Name of the Organization Riverside County Sheriff's Dept. Telephone 951-955-2400
Address 4095 Lemon St. **City** Riverside **Zip** 92501
Fax Number 951-955-2428 **E-mail Address** maveling@riversidesheriff.org

Organization is a: PUBLIC GOVERNMENTAL AGENCY PRIVATE AGENCY/ORGANIZATION
 A. Conservation A. Homeless Program
 B. Economic Development B. Private Education - ADA
 C. Education - ADA C. Private Health
 D. Parks & Recreation D. Older Americans Act for Sr. Citizens
 E. Public Health E. Other, Explain
 F. Public Safety
 G. Other, Explain

Number of Service Sites _____
Total Number of Clients Served Each Day _____

RESOLUTION

B. "BE IT RESOLVED by the Governing Board, and hereby ordered that the official(s) and/or employee(s) whose name(s), title(s), and signature(s) are listed below shall be and is (are) hereby authorized as our representative(s) to acquire surplus property through the auspices of the California State Agency for Surplus Property and accept responsibility for payment of incidental fees by the surplus property agency under the Terms and Conditions accompanying this form or listed on the reverse side of this form."

NAME (Print or type)	TITLE	SIGNATURE*	E-MAIL ADDRESS
Colleen Walker	Asstistant Sheriff	<u>[Signature]</u>	<u>cwalker@riversidesheriff.org</u>
Lee Wagner	Asstistant Sheriff	<u>[Signature]</u>	<u>lwagner@riversidesheriff.org</u>
Matthew Aveling	Lieutenant	<u>[Signature]</u>	<u>maveling@riversidesheriff.org</u>
Charles Mungle	Sergeant	<u>[Signature]</u>	<u>cmungle@riversidesheriff.org</u>

***Note: All signatures must be in original form. No copied or stamped signatures.**

The above resolution was PASSED AND ADOPTED this 16th day of March 2010 by the Governing Board of the:

County of Riverside by the following vote: AYES: 4 NOES: 0 ABSENT: 1

I, Kecia Harper-Ihem Clerk of the Governing Board known as Board of Supervisors

Do hereby certify that the foregoing is a full, true, and correct resolution adopted by the governing board of the above named organization at the meeting thereof held at its regular place of meeting on the date and by the vote above stated, a copy of said resolution is on file in the principal office of the Governing Board.

Signed by: [Signature], Deputy
Karen Barton, Board Assistant

NOTE: ALL LOCAL GOVERNMENT & NON-PROFIT INCORPORATED ORGANIZATIONS HAVE A GOVERNING BOARD, THEREFORE COMPLETE ONLY SECTIONS "A" & "B". THE FOLLOWING SECTION "C" IS FOR STATE AGENCIES ONLY.

C. AUTHORIZED BY: _____
Printed Name and Title of Chief Administrative Officer

Signature of Chief Administrative Officer _____ Date _____

STATE OF CALIFORNIA AGENCIES ARE REQUIRED TO PROVIDE THEIR STATE BILLING CODE# _____

FOR STATE SURPLUS AGENCY USE ONLY

Renewal Application Approved _____ Renewal Application Disapproved _____

Date: _____ Signed: _____

FORM APPROVED COUNTY COUNSEL
BY: [Signature] DATE 3/16/10
NEAL R. KIPNIS