

Governor Steve Sisolak
Chairman

Susan Brown
Clerk of the Board



Attorney General Aaron D. Ford
Member

Secretary of State Barbara K. Cegavske
Member

STATE OF NEVADA BOARD OF EXAMINERS

209 E. Musser Street, Room 200 / Carson City, NV 89701-4298
Phone: (775) 684-0222 / Fax: (775) 684-0260
<http://budget.nv.gov/Meetings>

PUBLIC MEETING NOTICE AND AGENDA

Date and Time: September 10, 2019, 10:00 AM

Location: Old Assembly Chambers of the Capitol Building
101 N. Carson Street
Carson City, Nevada 89701

Video Conference Location: Grant Sawyer Building
555 E. Washington Avenue, Ste. 5100
Las Vegas, Nevada 89101

AGENDA

1. **Call to Order / Roll Call**
2. **Public Comment** (The first public comment is limited to comments on items on the agenda. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes).
3. **Approval of the August 9, 2019 Minutes** (For possible action)

4. State Vehicle Purchases (For possible action)

Pursuant to NRS 334.010, no automobile may be purchased by any department, office, bureau, officer or employee of the state without prior written consent of the State Board of Examiners.

AGENCY NAME	# OF VEHICLES	NOT TO EXCEED:
Department of Agriculture	5	\$212,767
Department of Conservation and Natural Resources – Division of State Parks	4	\$148,483
Department of Conservation and Natural Resources – Environmental Protection Division	1	\$32,131
Gaming Control Board	1	\$23,729
Department of Public Safety – Fire Marshal	2	\$85,234
Department of Wildlife	16	\$547,976
Total	29	\$1,050,320

5. Authorization to Contract with a Current and/or Former State Employee (For possible action)

Board action under this item only grants permission to the employing agency. Current and former employees are still subject to all ethical requirement of NRS chapter 281A, specifically including subsection 550 which restricts certain former employees and state agencies.

A. Department of Administration – Purchasing Division

Pursuant to NRS 333.705, subsection 1, the Department of Administration, Purchasing Division, on behalf of Department of Agriculture, requests authority to contract with current employee David Voth to perform livestock brand inspector duties on an intermittent, on-call basis. The employee will be hired through Master Service Agreement #18404, with HAT Ltd Partnership, DBA Manpower.

B. Department of Corrections

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Tamara Bartel, a current Correctional Sergeant with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with David Bequette, a current Correctional Vocation Trainer with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Dennis Ciciliano, a current Combination Welder II with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Christian Jones, a current Electronics Technician III with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with John Julio, a current Food Services Manager II with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Rudolph Martinez, a current Supply Technician I with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Bryan Nason, a current Locksmith I with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Sandy Rose, a current Correctional Vocational Trainer with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Lashawn Smith, a current Correctional Caseworker Specialist III with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Beverly Stewart, a current Accounting Assistant III with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Michael Thalman, a current Correctional Sergeant with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Duane Wilson, a current Food Service Manager III with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Pamela Bellinger, a current Correctional Officer with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Greg Ingham, a current Senior Correctional Officer with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Jacques Graham, a current Administrative Assistant IV with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Danyele Sipes, a current Administrative Assistant I with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Sheryl Drew, a current Supply Technician I with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Karl Grimmer, a current Senior Correctional Officer with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

C. Nevada Department of Transportation (NDOT)

Pursuant to NRS 333.705, subsection 1, the Department requests to contract with a former employee, Thor Dyson. Atkins North America, Inc. plans to utilize Mr. Dyson to fill the Principal Engineer/Project Manager position in the augmentation of NDOT Construction Crew 907 in District II for Contract 3745.

Pursuant to NRS 333.705, subsection 1, the Department requests to contract with a former employee, Deena Rose. Atkins North America, Inc. plans to utilize Ms. Rose to fill an Inspector Level III position in the augmentation of NDOT Construction Crew 907 in District II for Contract 3745.

6. Requests for the Allocation and Disbursement of Funds for Salary Adjustments (For possible action)

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department, commission and agency requests for allocations from the General Fund and/or Highway Fund salary adjustment accounts are recommended by the Director of Finance:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
2992	Nevada System of Higher Education – University of Nevada, Las Vegas – Law School	\$127,495	
	Total	\$127,495	
1003	Office of Science, Innovation and Technology	\$5,920	
	Total	\$5,920	

7. [Approval of Proposed Leases](#) (For possible action)

8. [Approval of Proposed Contracts](#) (For possible action)

9. [Approval of Proposed Master Service Agreements](#) (For possible action)

10. [Clerk of the Board Contracts](#) (Informational only)

Pursuant to NRS 333.700, the Clerk of the Board may approve all contract transactions for amounts less than \$50,000. Per direction from the August 13, 2013 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$49,999). Attached is a list of all applicable approvals for contracts and amendments approved from July 17, 2019 through August 19, 2019.

11. Reports (Informational only)

A. Statewide Quarterly Overtime Report – Fiscal Year 2019 4th Quarter

Pursuant to NRS 284.180, the Department of Administration, Division of Human Resource Management must prepare and submit quarterly to the Budget Division of the Office of Finance a report regarding all overtime worked by employees of the Executive Department during the quarter. The Budget Division shall transmit quarterly to the Board of Examiners the report and the analysis of the Budget Division regarding the report. The Budget Division submits the 4th Quarter Overtime Report and analysis for Fiscal Year 2019.

B. Department of Motor Vehicles – Complete Streets Program

Pursuant to NRS 482.1825, Subsection 2, the Department shall certify to the State Board of Examiners the amount of the voluntary contributions collected for each county by the department and its agents, and that the money has been distributed as provided in statute. This is the fourth quarter of State Fiscal Year 2019 report for the period beginning April 1, 2019 and ending June 30, 2019.

12. Public Comment (This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes.

13. Adjournment (For possible action)

NOTE: Items may be considered out of order. The public body may combine two or more agenda items for consideration. The public body may remove an item from the agenda or delay discussion relating to an item on the agenda at any time. The public body will limit public comments to three minutes per speaker and may place other reasonable restrictions on the time, place, and manner of public comments but may not restrict comments based upon viewpoint. We are pleased to make reasonable accommodations for members of the public who have disabilities and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify Dale Ann Luzzi at (775) 684-0223 as soon as possible and at least two days in advance of the meeting. If you wish, you may e-mail her at daluzzi@finance.nv.gov. Supporting materials for this meeting are available at: 209 E. Musser Street, Suite 200, Carson City, NV 89701 or by contacting Dale Ann Luzzi at (775) 684-0223 or by email at daluzzi@finance.nv.gov

Agenda Posted at the Following Locations:

1. Blasdel Building, 209 E. Musser Street, Carson City, NV 89701
2. Capitol Building, 101 North Carson Street, Carson City, NV 89701
3. Legislative Building, 401 N. Carson Street, Carson City, NV 89701
4. Nevada State Library & Archives, 100 North Stewart Street, Carson City, NV 89701
5. Grant Sawyer Building, Capitol Police, 555 E. Washington, Las Vegas, NV 89101

Notice of this meeting was posted on the Internet:

<http://budget.nv.gov/Meetings/Meetings-new/> and <https://notice.nv.gov>

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MEETING MINUTES

Date and Time: August 9, 2019, 10:00 AM

Location: Old Assembly Chambers of the Capitol Building
101 North Carson Street
Carson City, Nevada 89701

Video Conference Location: Grant Sawyer Building
555 East Washington Avenue, Suite 5100
Las Vegas, Nevada 89101

MEMBERS PRESENT:

Governor Steve Sisolak – Present in Las Vegas
Attorney General Aaron Ford – Present in Las Vegas
Secretary of State Barbara Cegavske – Present in Las Vegas

STAFF PRESENT:

Susan Brown, Clerk of the Board – Present in Las Vegas
Rosalie Borderlove, Board Counsel, Deputy Attorney General Office – Present in Las Vegas
Dale Ann Luzzi, Board Secretary

OTHERS PRESENT:

Dennis Gallagher, Chief Deputy, Attorney General's Office
Joe Vadala, Special Counsel, Attorney General's Office
Kent Ervin, Member of Public
Bill Newport, Member of Public
Dawn Williford, Member of Public
Marilyn Round, Member of Public
Alexis Ashford, Member of Public

1. Call to Order / Roll Call

Governor: I would like to call today's meeting for the State of Nevada Board of Examiners to order for August 9, 2019. Can I ask the Board Secretary to call the roll please?

Secretary: Good morning. Governor Sisolak.

Governor: Here.

Secretary: Secretary of State Cegavske.

Secretary of State: Here.

Secretary: Attorney General Ford.

Attorney General: Here.

Secretary: Let the record reflect we do have a quorum.

Governor: Thank you.

2. Public Comment (The first public comment is limited to comments on items on the agenda. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes).

Governor: This is the first time for public comment. Anyone wishing to address the Board on any item that is on today's agenda, please step forward, identify yourself for the record. Comments will be limited to three minutes.

Do we have any in Carson City?

Secretary: We do not.

Governor: Do we have any in Las Vegas? We do not.

3. Approval of the July 9, 2019 Minutes (For possible action)

Governor: Next item, do I have a motion for approval of item number 3, *Approval of the July 9, 2019 Minutes*?

Secretary of State: So moved.

Attorney General: Second.

Governor: We have a motion on the floor and a second, is there any discussion? Hearing and seeing none, all in favor signify by saying aye. Any opposed? The motion passes.

4. Department of Administration – Victims of Crime Fiscal Year 2019 4th Quarter Report and Fiscal Year 2020 1st Quarter Recommendation

Pursuant to Nevada Revised Statute (NRS) 217.260, the Department shall prepare and submit quarterly, to the Board of Examiners, for its approval, estimates of available revenue in the fund for the compensation of victims of crime, and the anticipated expenses for the quarter. Claims are categorized as to their priority; and claims categorized as the highest priority are paid, in whole or in part, before other claims.

The 4th quarter fiscal year 2019 Victims of Crime Program report states all approved claims were resolved totaling \$7,280,681.20 with \$1,722,180.28 paid out of the Victims of Crime Program account and \$5,558,500.92 resolved through vendor fee adjustments and cost-containment policies. The program anticipates future cash available at \$7.1 million at the end of Fiscal Year 2020 to help defray crime victims' medical costs. Based on these projections, the Victims of Crime Program recommends paying Priority One, Two and Three claims at 100% of the approved amount for the 1st quarter of fiscal year 2020.

Governor: Item number 4, *Department of Administration, Victims of Crime, Fiscal Year 2019 4th Quarter Report and Fiscal Year 2020 1st Quarter Recommendation*.

Clerk: Good morning, Governor and Members of the Board. Item number 4 is a Victims of Crime Fourth Quarter Report and a Fiscal Year 2020 First Quarter Recommendation. This will be the final report on the Board of Examiners agenda due to a change in statute.

Pursuant to NRS 217.260, the Board of Examiners is required to estimate the available revenue and anticipated claim costs for the State Victims of Crime Program. This item includes a report on the claims paid in the 4th quarter of Fiscal Year 2019 and a recommendation to pay Priority 1, 2 and 3 claims at 100% for the 1st quarter of Fiscal Year 2020. When this report was submitted, the Program anticipated having a reserve at the end of Fiscal Year 2020 of approximately \$7.7 million after covering all expenses and includes a 45-day operating reserve which is a slight increase from the projected reserve of \$7.6 million at the end of the fourth quarter for Fiscal Year 2019. Representatives from the Department are available to answer any questions the Board may have.

Governor: Thank you.

Secretary of State: I'd like to comment, Governor.

Governor: Absolutely, Secretary Cegavske.

Secretary of State: Thank you. I just wanted to thank the people that have been coming forward at every meeting and thank them for everything they have been doing. The reports have been very good and just all the hard work that they've been doing for the years that I've been listening to them and having them come forward. So, just wanted to thank you very much.

Governor: Thank you and we echo your comments.

5. State Vehicle Purchases (For possible action)

Pursuant to NRS 334.010, no automobile may be purchased by any department, office, bureau, officer or employee of the state without prior written consent of the State Board of Examiners.

AGENCY NAME	# OF VEHICLES	NOT TO EXCEED:
Department of Conservation and Natural Resources – Division of State Parks	24	\$880,897
Department of Public Safety – Nevada Highway Patrol	10	\$349,860
Department of Public Safety – Nevada Highway Patrol	225	\$13,282,242
Total	259	\$14,512,999

Governor: Item number 5, *State Vehicle Purchases*.

Clerk: There are three requests for vehicles on this agenda item. The first request is from the Department of Conservation and Natural Resources, Division of State Parks to purchase 23 replacement vehicles which have met the age and/or mileage requirements in the State Administrative Manual (SAM) and one new vehicle for the new Ranger position at Walker State Park.

The second and third requests are from the Department of Public Safety, Highway Patrol Division, the second is to purchase 10 new vehicles and the third is to purchase 225 replacement vehicles that have met the age and /or mileage requirements in SAM.

All these vehicles were included in the agencies' legislatively approved budgets. Representatives from the departments are available to answer any questions.

Governor: Thank you. Do we have any questions on the vehicle purchases? I know I had some, but they've all been answered and I appreciate the answers.

Attorney General: You said there was a budget?

Governor: Yes, they're all approved.

Secretary of State: So moved.

Attorney General: Second.

Governor: We have a motion on the floor and a second, any discussion on that motion? All in favor signify by saying aye. Any opposed? Motion passes.

6. Authorization to Contract with a Current and/or Former State Employee
(For possible action)

Board action under this item only grants permission to the employing agency. Current and former employees are still subject to all ethical requirement of NRS chapter 281A, specifically including subsection 550 which restricts certain former employees and state agencies.

A. Department of Administration – Purchasing Division

Pursuant to NRS 333.705, subsection 1, the Purchasing Division, on behalf of Capitol Police, requests authority to contract with former employee Desirae Munns to perform Administrative Assistant duties for Capitol Police. The former employee will be hired through Master Service Agreement #18404, with HAT Ltd., DBA Manpower Services.

B. Department of Administration – Purchasing Division

Pursuant to NRS 333.705, subsection 1, the Purchasing Division, on behalf of Department of Public Safety, requests authority to contract with former employee Gina M. Johnson to perform background investigations on a part-time/as-needed basis. The former employee will be hired through Master Service Agreement #19314, with Martin-Ross and Associates, LLC.

C. Governor's Office – Nevada Athletic Commission

Pursuant to NRS 333.705, subsection 1, the Nevada Athletic Commission requests authority to contract with Renee A. Shivers-Lightford a current Criminal Investigator III with the Office of the Nevada Secretary of State – Securities Division, to assist the Athletic Commission staff during events and weigh-ins to ensure that all rules and regulations pertaining to unarmed combat are adhered to.

D. Department of Transportation

Pursuant to NRS 333.705, subsection 1, the Department requests to contract with a former employee, Christopher Petersen. Caviola Anson Group, Inc. is proposing to hire Mr. Petersen to fill a senior designer position and utilize his expertise to assist in alternative concept development and verification based on NDOT and Federal Highway Administration regulations for the I-15 Sahara Avenue Interchange to the Flamingo Study, agreement P384-18-015.

Governor: Item number 6, *Authorization to Contract with Current and/or Former State Employee*.

Clerk: Agenda item 6 includes four requests to contract with current and/or former employees pursuant to NRS 333.705, subsection 1.

The first request is from the Department of Administration, Purchasing Division on behalf of Capitol Police to contract with a former employee to perform administrative duties. This individual will be employed by Manpower through Master Service Agreement Contract #18404.

The second request is also from the Department of Administration, Purchasing Division on behalf of the Department of Public Safety to contract with a former employee to perform background investigations. This individual will be employed by Marin-Ross and Associates LLC which is a Master Service Agreement #19314.

The third request is from the Athletic Commission to contract with a current employee of the Secretary of State's Office who will assist the Commission staff during events and weigh-ins to ensure that all rules and regulations pertaining to unarmed combat are adhered to.

The fourth and final request is from the Department of Transportation to allow a contracted vendor to use a former employee to provide expertise to assist in alternative concept development and verification based on state and federal regulations for the I-15/Sahara Interchange.

Representatives from the departments are available to answer any questions.

Governor: I appreciate it, Susan, you got me answers to all my questions and they're all critical-fill positions or backlogged, except for the Athletic Commission weigh-in, which is I guess temporary in basis. Do we have any discussion, any question on this? Can I have a motion?

Attorney General: Move approval.

Governor: We have a motion on the floor for approval.

Secretary of State: Second.

Governor: And a second, all in favor signify by saying aye. Any opposed? Motion passes.

7. Requests for the Allocation and Disbursement of Funds for Salary Adjustments (For possible action)

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary

requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department, commission and agency requests for allocations from the General Fund and/or Highway Fund salary adjustment accounts are recommended by the Director of Finance:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
2666	Department of Employment, Training and Rehabilitation – Commission of Post- Secondary Education	\$11,594	
	Total	\$11,594	
1343	Commission on Ethics	\$1,962	
	Total	\$1,962	
1340	Governor's Finance Office – Budget	\$47,647	
	Total	\$47,647	
3010	Nevada System of Higher Education – Desert Research Institute	\$59,519	
	Total	\$59,519	
3800	Department of Public Safety – Parole Board	\$3,200	
	Total	\$3,200	
2601	Department of Tourism and Cultural Affairs – Stewart Indian School Living Legacy	\$6,463	
	Total	\$6,463	

Governor: Item number 7.

Clerk: Item number 7 is requests for salary adjustments. Sections 4, 5, 6 and 7 of Assembly Bill 517 and sections 2, 3, 4 and 5 of Senate Bill 368 from the 2017 Session which appropriated Salary Adjustment funds to the Board of Examiners to cover vacancy salary savings built into agency budgets, as well as the 3% cost-of-living-adjustments (COLA) effective on July 1, 2017 and July 1, 2018 which were not included in agency salary budgets.

Requests are from the Department of Employment, Training and Rehabilitation, Commission of Post-Secondary Education to cover the cost of COLAs – this request has been reduced to \$8,468; Ethics Commission to cover the costs of COLAs in the amount of \$1,962; the

Governor's Finance Office to cover the cost of COLAs in the amount of \$47,647; the Nevada System of Higher Education, Desert Research Institute to cover the cost of COLAs in the amount of \$59,519; the Parole Board to cover the cost of COLAs in the amount of \$3,200; and the Department of Tourism and Cultural Affairs, Stewart Indian School of Living Legacy to cover the cost of COLAs in the amount of \$6,463.

These requests are all General Fund requests and this would leave a total balance in the account if they're approved of \$29.1 million. Representatives from the various agencies are available to answer any questions.

Governor: Thank you. Do we have any questions regarding these allocations or disbursements for salary adjustments?

Secretary of State: No.

Governor: Do I have a motion?

Attorney General: I move to approve as amended.

Secretary of State: Second.

Governor: We have a motion and a second on item number 7. Any discussion? Hearing and seeing none, all in favor signify by saying aye. Any opposed? The motion passes.

8. Request for a Recommendation of Approval to the Interim Finance Committee for an Allocation Amount from the Contingency Account (For possible action)

A. Department of Business and Industry – Office of the Labor Commissioner

Pursuant to NRS 353.268, the Office requests the Board's recommendation to the Interim Finance Committee for an allocation of \$146,682 from the Interim Finance Committee Contingency Account to cover projected costs related to the Task Force on Employee Misclassification arising from the passage of Senate Bill 493 in the 2019 Legislative Session.

B. Patient Protection Commission

Pursuant to NRS 353.268, the Commission requests the Board's recommendation to the Interim Finance Committee for an allocation of \$296,072 from the Interim Finance Committee Contingency Account, to cover projected costs related to the Patient Protection Commission arising from the passage of Senate Bill 544 in the 2019 Legislative Session.

Governor: Item number 8, *Request for a Recommendation of Approval to the Interim Finance Committee for an Allocation Amount from the Contingency Account.*

Clerk: Item 8 includes two requests for allocations from the Interim Finance Committee General Fund Contingency Account pursuant to NRS 353.268.

The first request is in the amount of \$146,682 from the Department of Business and Industry, Office of the Labor Commissioner to cover the projected cost related to the Taskforce on Employee Misclassification arising from the passage of Senate Bill 493 of the 2019 Legislative Session.

The second request is in the amount of \$296,072 from the Governor's Office, Patient Protection Commission to cover the projected costs related to the duties arising from the passage of Senate Bill 544 of the 2019 Legislative Session, which created the Patient Protection Commission.

Representatives are available to answer any questions you may have.

Governor: Thank you. Are there any questions regarding the allocations from the Contingency Account?

Attorney General: I don't, I just want to make a comment that I think both were very good pieces of legislation that passed. Thank you, Governor, for bringing on the Patient Protection Commission but I think this misclassification issue is also big.

Governor: Absolutely. I think they're going to be very effective and beneficial. Do we have a motion?

Attorney General: Move for approval.

Secretary of State: Second.

Governor: We have a motion and a second on the floor. Any discussion? All in favor, signify by saying aye. Any opposed? The motion passes.

9. Request to Pay a Cash Settlement (For possible action)

Pursuant to Article 5, Section 21 of the Nevada Constitution, the State Board of Examiners may approve, settle or deny any claim or action against the State, any of its agencies or any of its present or former officers, employees, immune contractors or State Legislators.

Department of Transportation (NDOT) – Administration – \$3,400

The Department requests settlement approval in the total amount of \$5,500 to fully resolve an eminent domain action to acquire 92 square feet and a temporary construction easement of 197 square feet on East Tropicana Avenue in Las Vegas as

part of an Americans with Disabilities Act (ADA) sidewalk improvement. NDOT previously deposited \$2,100 with the Court for a right of occupancy. NDOT now requests an additional \$3,400 to resolve the action.

Governor: Item number 9, *Request to Pay a Cash Settlement*.

Clerk: Item 9 includes a request for approval of a cash settlement from the Department of Transportation in the amount of \$3,400 to fully resolve an eminent domain action to acquire 92 square feet and a temporary construction easement of 197 square feet as part of an ADA sidewalk improvement. Approval of this additional amount would bring the total settlement to \$5,500. There are representatives from the Department available to answer any questions.

Governor: I have a question. Why did it change from—and I don't have a problem, this is not an enormous number but why did it change from the first time until now?

Dennis Gallagher: Governor, to answer your question, the dollar amount went up from the initial appraised value that the Department had placed on the property. There was no response from the out-of-state landowner, so we had to file a suit so we could get occupancy to get the project done. Subsequently, the landowner's representatives contacted the Department and we were able to reach this settlement for an additional \$3,400.

Governor: So, is the first appraisal stale, is that what happened?

Joe Vadala: Governor, we had an initial appraisal that was done based on the offer to the landowner and then time was going on and we needed to certify the project, so we went ahead and we filed because it was just a matter of communication, really, with the landowner. Then, when we finally did file the case and we began a negotiation with them, they offered to settle at \$5,500 total. Which again, we would have had to order a new appraisal, which could have eaten up the \$3,400 just in getting the updated appraisal. So, that's why we feel that this is the best interest of the State.

Governor: Thank you, got it. Do we have any other questions on this, item number 9? No, okay. Do I have a motion?

Attorney General: Move approval.

Secretary of State: Second.

Governor: We have a motion on the floor and a second, any discussion? All in favor signify by saying aye. Any opposed? Motion passes. Thank you. Thank you both, all three of you.

10. Approval of Proposed Contracts (For possible action)

Governor: Item number 10, *Approval of Proposed Contracts*.

Clerk: There are 37 contracts in agenda item 10 for approval by the Board this morning. Do any of the Members have additional questions on any of these items?

Governor: No, I do not. I just want to acknowledge, from my point of view, the briefing that I had, I always have a significant number of questions and I get answers back promptly and I think everybody's had the same experience.

Secretary of State: Yes, we do also. We had one contract that we had a question on and your staff was very forthcoming.

Governor: We appreciate that, thanks as always for helping us with that. Do we have any questions? Okay, so I have a motion on the approval of the proposed contracts?

Attorney General: Approval.

Secretary of State: Second.

Governor: We have a motion on the floor and a second, any discussion? All in favor signify by saying aye. Any opposed? Motion passes.

11. Approval of Proposed Master Service Agreements (For possible action)

Governor: Item number 11, *Approval of Proposed Master Service Agreements*.

Clerk: There are nine Master Service Agreements in agenda item 11 for approval by the Board this morning, no additional information had been requested.

Governor: Thank you. This is, likewise, I want to thank you for providing prompt answers to the questions that I had. Do we have any questions on the Master Service Agreements?

Secretary of State: No.

Attorney General: Move approval.

Governor: We have a motion on the floor and a second, any discussion? All in favor, signify by saying aye. Any opposed? The motion passes.

12. Approval of Proposed Work Plan (For possible action)

Governor: Item number 12, *Approval of Proposed Work Plan*.

Clerk: There are three work plans under agenda item 12 for approval today by the Board this morning. No additional information has been requested on these items.

Governor: Is there any discussion?

Attorney General: Move approval.

Secretary of State: Second

Governor: We have a motion on the floor and a second. Any discussion? All in favor, signify by saying aye. Any opposed? Motion passes on item number 12.

13. Clerk of the Board Contracts (Informational only)

Pursuant to NRS 333.700, the Clerk of the Board may approve all contract transactions for amounts less than \$50,000. Per direction from the August 13, 2013 meeting of the Board of Examiners, the Board wished to receive an informational item listing all approvals applicable to the new threshold (\$10,000 - \$49,999). Attached is a list of all applicable approvals for contracts and amendments approved from June 18, 2019 through July 17, 2019.

Governor: Item number 13, *Clerk of the Board Contracts*.

Clerk: There were 47 contracts under the \$50,000 threshold approved by the Clerk between June 18, 2019 and July 17, 2019. This item is informational. Do any of the Members have additional questions on these items?

Governor: We do not. Thank you.

14. Reports (Informational only)

Department of Conservation and Natural Resources – Division of State Lands

Pursuant to NRS 321.5954, the Division is required to provide the Board of Examiners quarterly reports regarding lands or interests in lands transferred, sold, exchanged, or leased under the Tahoe Basin Act program. Pursuant to Chapter 355, Statutes of Nevada, 1993, at page 1153, the agency is to report quarterly on the status of real property or interests in real property transferred under the Lake Tahoe Mitigation Program. This submittal reports on program activities for the 4th quarter of Fiscal Year 2019.

Governor: Item number 14, *Reports*. Department of Conservation and Natural Resources, Division of State Lands.

Clerk: Item 14 is an informational report regarding lands or interest in lands transferred, sold, exchanged or leased under the Tahoe Basin Act Program, as well as a quarterly report on the status of real property or interests in real property transferred under the Lake Tahoe Mitigation Program which is required pursuant to NRS 321.5954 and Chapter 355, Statutes of Nevada.

This report is for the quarter ending June 30, 2019. There were no acquisitions of land during this period. There were six transfers of interest in real property during this quarter which resulted in \$39,684 in proceeds to the Nevada Land Bank. Representatives from the Department are available to answer any questions.

Governor: Do we have any questions or comments on the Conservation and Natural Resources State Lands Report? That was for information.

That concludes our posted agenda.

15. Public Comment (This public comment period is for any matter that is within the jurisdiction of the public body. No action may be taken upon a matter raised under public comment period unless the matter itself has been specifically included on an agenda as an action item. The Chair of the Board will impose a time limit of three minutes.

Governor: Item number 15 is *Public Comment*. This is time set aside for anyone wishing to address the Board on any item, please step forward, identify yourself for the record and comments will be limited to three minutes. I see one in Carson City and I've got several down here. Good morning.

Public Comments: There were five members of the public who provided comments. Their written statements are in Attachment A. [See Attachment A]

16. Adjournment (For possible action)

Governor: Do I have a motion to adjourn?

Attorney General: So moved.

Secretary of State: Second.

Governor: We have a motion and a second. Any discussion? All in favor, signify by saying aye. Any opposed? Motion passes. We are adjourned. Thank you.



**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 13, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Matthew Tuma, Executive Branch Budget Officer
Budget Division

Subject: BOARD OF EXAMINERS **ACTION** ITEM

The following describes an action item submitted for placement on the agenda of the next Board of Examiners' meeting.

DEPARTMENT OF AGRICULTURE

Agenda Item Write-up:

Pursuant to NRS 334.010, the Department requests approval to purchase five replacement vehicles across multiple budget accounts for a total amount not to exceed \$212,767.

Additional Information:

This request is to purchase five vehicles to replace current vehicles that comply with the Vehicle Replacement Policy of SAM 1316. The agency was budgeted for one replacement vehicle and related equipment in E711 and E720 decision units and in one-shot appropriations pursuant to Assembly Bill 504 for a total of \$266,391 during the 2019 Legislative Session as shown in Table 1 below. The quoted cost for the vehicle replacement in BA 4550 exceeds the Legislatively approved amount by \$35 with this difference funded by cost savings in the budget account.

Funding Sources		
BA 4557	AB 504	\$225,000
BA 4550	E-711	\$41,391
Total		\$266,391

Table 1: Funding source for Department of Agriculture vehicle purchases.

Statutory Authority:

NRS 334.010

REVIEWED: cm

ACTION ITEM: _____

STEVE SISOLAK
Governor

STATE OF NEVADA

JENNIFER OTT
Director



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Fax (775) 738-2639

DEPARTMENT OF AGRICULTURE

405 South 21st Street
Sparks, Nevada 89431-5557
Telephone (775) 353-3601 Fax (775) 353-3661
Website: <http://www.agri.nv.gov>

August 6, 2019

MEMORANDUM

TO: Board of Examiners

FROM: Jennifer Ott, Director – Nevada Department of Agriculture

RE: Approval to Purchase Vehicles – FY20

A handwritten signature in blue ink, appearing to be "JO", is written over the "FROM:" line.

This memorandum will serve to advise that the Division of Animal Industry, Budget Account 4557 – Livestock Enforcement, is requesting approval to purchase four replacement vehicles for the Agricultural Livestock Enforcement Officers. The vehicles were Legislatively approved in AB504 as a one shot appropriation in the FY20 budget.

Thank you for your consideration

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: Department of Agriculture-Animal Division	Budget Account #: BA 4557
Contact Name: Doug Farris, Administrator	Telephone Number: 775-353-3708
<p>Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:</p> <p>Number of vehicles requested: <u>4</u> Amount of the request: <u>\$171,341</u></p> <p>Is the requested vehicle(s) new or used: <u>New</u></p> <p>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:</p> <p>Mission of the requested vehicle(s):</p>	
<p>Were funds legislatively approved for the request?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>AB 504 - One Shot Appropriation</p>	<p>If yes, please provide the decision unit number:</p> <p>If no, please explain how the vehicles will be funded?</p>
<p>Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s):</p> <p><input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>4</u> Replacement(s)</p>	
<p>Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1314? If not, please explain.</p> <p>The requested vehicles are heavy duty pickup trucks and are not required to comply with Smart Way or Smart Way Elite requirements.</p>	
<p>Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)</p> <p>Current Vehicle Information: Vehicle #1 Model Year: Odometer Reading: Type of Vehicle: <small>SEE ATTACHED</small></p> <hr/> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle: <small>SEE ATTACHED</small>	<p>Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced.</p> <p>Yes _____</p> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.</p>
<p><i>Please attach an additional sheet if necessary</i></p>	
<p>APPOINTING AUTHORITY APPROVAL:</p> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> _____ Agency Appointing Authority </div> <div style="text-align: center;"> <u>FISCAL ADMINISTRATOR</u> _____ Title </div> <div style="text-align: center;"> <u>8/14/19</u> _____ Date </div> </div>	
<p>BOARD OF EXAMINERS' APPROVAL:</p> <p><input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 40%;"> _____ Board of Examiners </div> <div style="width: 40%;"> _____ Date </div> </div>	

BRIAN SANDOVAL
Governor

STATE OF NEVADA

JERRI CONRAD
Interim Director



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August 6, 2019

Attachment for BOE Vehicle Form – List of Replacement Vehicles BA 4557

Current Vehicle Information:

Vehicle #1	-	2008
Odometer	-	214,257
Type of Vehicle	-	GMC Sierra 2500 Pickup 4WD
Vehicle #2	-	2008
Odometer	-	208,000
Type of Vehicle	-	GMC Sierra 2500 Pickup 4WD
Vehicle #3	-	2008
Odometer	-	179,833
Type of Vehicle	-	GMC Sierra 2500 Pickup 4WD
Vehicle #4	-	2008
Odometer	-	181,589
Type of Vehicle	-	GMC Sierra 2500 Pickup

Vehicle Order Information Form

Does this vehicle meet “Smart Way or Smart Way Elite” requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	RAM 2500 CREW CAB SWB, 2019 DJ2L91		
Dealer Name:	CARSON DODGE CHRYSLER JEEP		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: White	Interior: Black	<input checked="" type="checkbox"/> Cloth <input type="checkbox"/> Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	4	\$ 28,000.00	\$112,000.00
SPECIFY OPTIONS: (description)			\$
Tradesman Level 1 Group (A61)	4	\$1,072.00	
Chrome Appearance Group (AMP)	4	\$3,620.00	
Bed Utility Group (ANT)	4	\$2,528.00	
Diesel Engine; Cummins	4	\$32,000.00	
Engine Block Heater	4	\$344.00	
Four Wheel Drive (4x4)	4	\$10,000.00	
Integrated Trailer Brake	4	\$1,072.00	
Limited Slip Differential	4	\$1,620.00	
Skid Plate	4	\$528.00	
Trailer Tow Mirrors	4	\$708.00	
LT 275/70R18E On Off Road Tires 4x4 On	4	\$892.00	
220 Amp Alternator	4	\$364.00	
115 V Aux Power Outlet (M/H Tradesman 1 or	4	\$548.00	

Aux Switches I/P Mounted	4	\$528.00	
Elect. Transfer Case	4	\$1,072.00	
5 th Wheel/Gooseneck Towing Prep Group	4	\$1,620.00	
DOT Certified Roadside Safety Kit	4	\$708.00	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$171,224.00
DMV Title and DRS Fee's		\$29.25 (x4)	\$117.00
GRAND TOTAL:			\$171,341.00

\$42,806.00 EACH

STANDARD PAGE - FLEET VEHICLES 99SWC-S490

(Use separate page for each package)

DEALER NAME: Carson Dodge Chrysler Jeep

Specify State's Vehicle Item Number: 2.13 Ram 2500 Crew Cab Short Bed 4x2-4x4 Gas and Diesel

(I.e. 1.1 Sedan: Full size; 4 door; 6 passenger)

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
Ram 2500 Crew Cab SWB, 2019, DJ2L91	\$28,000.00	\$28,300.00

State vehicle miles per gallon (MPG): N/A HD Truck

State manufactures warranty: 3/36,000 COMPREHNSIVE AND 5/100,000 POWERTRAIN

Specify engine size and emission rating: 6.4 LITER V-8 Gas

Includes Minimum Standard Equipment Listed: ☒ X Yes ☐ No If no, state exceptions:

Exterior Color: List available colors:

Billet Silver \$182.00, Black Forest Green \$91.00, Blue Streak \$91.00, White, Delmonico Red \$91.00,
Diamond Black \$91.00, Flame Red, Granite Crystal \$182.00, Max. Steel \$182.00, Patriot Blue \$91.00
Walnut Brown \$182.00

Special production color available for \$410.00-Call dealer for colors.

Seats, Cloth: List available colors:

Black

GVW: 10,000#

(When Applicable)

WHEELBASE: 140.0

(When Applicable)

OPTION PACKAGE PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME: Carson Dodge Chrysler Jeep

Specify State's Vehicle Item Number: 2.13 Ram 2500 Crew Cab Short Bed 4x2-4x4 Gas and Diesel

(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)

Option Package Name/Code:

List Equipment Features Below:

Tradesman Level 1 Group (A61) \$268.00

Remote Keyless Entry

Tradesman Level 2 Group (A6B) \$618.00

Sirius Sat Radio, Rear Window Defroster, Rear Power Sliding Window, Floor Cover Carpet (Can Be Deleted), Cloth 40/20/40 Bench Seat, Remote Keyless Entry

Chrome Apperance Group (AMP) \$905.00

Chrome Front and Rear Bumper, 18x18.0 Steel Chrome Clad Wheels, Chrome Grill

Bed Utility Group (ANT) \$632.00

Spray in Bedliner, Deployable Bed Step, LED Bed Lighting

ITEMIZED OPTION PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME: Carson Dodge Chrysler Jeep

DEDUCT AMOUNT

ABS Brake System	STD	\$-
Air Conditioning	STD	\$-
Cruise Control	STD	\$-
Diesel Engine; Cummins	\$8,000.00	\$-
Engine Block Heater	\$86.00	\$-
Four Wheel Drive (4x4)	\$2,500.00	\$-
Heavy Duty Alternator	N/A	\$-
Hitch Receiver	STD	\$-
Integrated Trailer Brake	\$268.00	\$-
Keyless Entry w/Fob (must have power door locks)	See Groups	\$-
Limited Slip Differential	\$405.00	\$-
Paint, Metallic	SEE PAINTS	\$-
Power Mirrors	SEE GROUP	\$-
Power Locks	SEE GROUP	\$-
Power Seats	N/A	\$-
Power Windows	SEE GROUP	\$-
Radio; AM/FM Stereo, Cassette Player	AM/FM STD	\$-
Radio; AM/FM Stereo, Cassette Player, CD	AUX INPUTS	\$-
Rear Window Wiper	N/A	\$-
Seats, Vinyl	No Charge In lieu of Cloth	
Vinyl Colors: Black With Diesel Gray		
Skid Plate	\$132.00	\$-
Tilt Steering	STD	\$-
Tire, Spare, Full Size-	STD	\$-
Trailer Tow Mirrors	\$177.00	\$-
Trailer Tow Package	STD	\$-
Daytime Running Lamps	STD	
Front Fog Lamps	\$177.00	
LT 275/70R18E ON OFF ROAD TIRES 4x4 On	\$223.00	
Rear Sliding Window	SEE GROUP	
HD Snow Plow Prep Group	\$177.00	
Rear Wheelhouse Liners	\$177.00	
Uconnect Handsfree 3.0 W/ 5" Screen	STD	
220 Amp Alternator	\$91.00	
Park View Back Up Camera	STD	
115 V Aux Power Outlet (M/H Tradesman 1 or 2	\$137.00	
Aux Switches I/P Mounted	\$132.00	
Tubular Side Steps	\$450.00	

Dual Alt. Rated at 380 Amps	\$359.00	
Elect. Transfer Case	\$268.00	
Upfitter Electronic Module (VISM)	\$314.00	
Rear Back Up Alarm	\$132.00	
LED Bed Lighting	\$150.00	
Rear Park Sense	\$268.00	
Ram Box Cargo Mgmt System	\$905.00	
Ram Box Utility Group (M/H Ram Box Mgmt)	\$268.00	
5th Wheel/Gooseneck Towing Prep Group	\$405.00	
DOT Certified Roadside Safety Kit	\$177.00	
Spray In Liner	\$514.00	\$-

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ Call Dealer

Assembly Bill No. 504—Committee on Ways and Means

CHAPTER.....

AN ACT making appropriations to the State Department of Agriculture for the purchase of replacement vehicles and the purchase and replacement of laboratory equipment; and providing other matters properly relating thereto.

EXPLANATION — Matter in *bolded italics* is new; matter between brackets ~~omitted material~~ is material to be omitted.

THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

Section 1. 1. There is hereby appropriated from the State General Fund to the State Department of Agriculture, Livestock Enforcement, the sum of \$225,000 for the purchase of four replacement vehicles that are equipped to carry out law enforcement functions.

2. There is hereby appropriated from the State General Fund to the State Department of Agriculture, Veterinary Medical Services, the sum of \$159,605 for new laboratory equipment.

3. There is hereby appropriated from the State General Fund to the State Department of Agriculture, Veterinary Medical Services, the sum of \$14,479 for the replacement of laboratory equipment.

Sec. 2. Any remaining balance of the appropriations made by section 1 of this act must not be committed for expenditure after June 30, 2021, by the entity to which the appropriation is made or any entity to which money from the appropriation is granted or otherwise transferred in any manner, and any portion of the appropriated money remaining must not be spent for any purpose after September 17, 2021, by either the entity to which the money was appropriated or the entity to which the money was subsequently granted or transferred, and must be reverted to the State General Fund on or before September 17, 2021.

Sec. 3. This act becomes effective upon passage and approval.



STEVE SISOLAK
Governor

STATE OF NEVADA

JENNIFER OTT
Director

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August 5, 2019

MEMORANDUM

TO: Board of Examiners

FROM: Jennifer Ott, Director – Nevada Department of Agriculture *JO*

RE: Approval to Purchase Vehicles – FY20

This memorandum will serve to advise that the Division of Animal Industry, Budget Account 4550, is requesting approval to purchase one new replacement vehicle for the State Veterinarian. The vehicle was Legislatively approved in the FY20 budget.

Thank you for your consideration

Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010

Agency Name: Department of Agriculture-Animal Division	Budget Account #: BA 4550
Contact Name: Doug Farris, Administrator	Telephone Number: 775-353-3708
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$41,426</u> Is the requested vehicle(s) new or used: <u>New</u> Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: Mission of the requested vehicle(s):	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1314? If not, please explain. The requested vehicles are heavy duty pickup trucks and are not required to comply with Smart Way or Smart Way Elite requirements.	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: Odometer Reading: Type of Vehicle: <u>2008 Ford 3/4 Ton Pickup/ Odometer 162,367</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle: <u>7</u>	Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced. Yes _____ If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL: <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: center;"> FISCAL ADMINISTRATOR </div> <div style="text-align: right;"> <u>8/14/19</u> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div>Agency Appointing Authority</div> <div>Title</div> <div>Date</div> </div>	
BOARD OF EXAMINERS' APPROVAL: <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div>Board of Examiners</div> <div>Date</div> </div>	

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2019 RAM 2500 CREW CAB LWB (DJ2L92)		
Dealer Name:	Carson Dodge Chrysler Jeep		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: White	Interior: Black	✓ Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 28,200.00	\$
SPECIFY OPTIONS: (description)			\$
Tradesman Level 1 Group (A61)	1	\$268.00	
Diesel Engine	1	\$8,000.00	
Engine Block Heater	1	\$86.00	
Four Wheel Drive (4x4)	1	\$2,500.00	
Integrated Trailer Brake	1	\$268.00	
Limited Slip Differential	1	\$405.00	
Skid Pate	1	\$132.00	
Trailer Tow Mirrors	1	\$177.00	
LT 275/70R18E On Off Road Tires 4x4 On	1	\$223.00	
115 V Aux. Power Outlet (M/H Trademan 1 or	1	\$137.00	
Elect. Transfer Case	1	\$268.00	
LED Bed Lighting	1	\$150.00	
5 th Wheel Gooseneck Towing Prep Group	1	\$405.00	
DOT Certified Roadside Safety Kit	1	\$177.00	

DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$41,396.00
DMV Title and DRS Fee's		\$29.25	\$
GRAND TOTAL:			\$41,425.25

\$41,396.00

STANDARD PAGE - FLEET VEHICLES 99SWC-S490

(Use separate page for each package)

DEALER NAME: Carson Dodge Chrysler Jeep

Specify State's Vehicle Item Number: 2.14 Ram 2500 Crew Cab Long Bed 4x2-4x4 Gas and Diesel

(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
Ram 2500 Crew Cab LWB, 2019, DJ2L92	\$28,200.00	\$28,500.00

State vehicle miles per gallon (MPG): N/A HD Truck

State manufactures warranty: 3/36,000 COMPREHNSIVE AND 5/100,000 POWERTRAIN

Specify engine size and emission rating: 6.4 LITER V-8 Gas

Includes Minimum Standard Equipment Listed: ☒ X Yes ☐ No If no, state exceptions:

Exterior Color: List available colors:

Billet Silver \$182.00, Black Forest Green \$91.00, Blue Streak \$91.00, White, Delmonico Red \$91.00,
Diamond Black \$91.00, Flame Red, Granite Crystal \$182.00, Max. Steel \$182.00, Patriot Blue \$91.00
Walnut Brown \$182.00

Special production color available for \$410.00-Call dealer for colors.

Seats, Cloth: List available colors:

Black

GVW: 10,000#

(When Applicable)

WHEELBASE: 140.0

(When Applicable)

OPTION PACKAGE PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME: Carson Dodge Chrysler Jeep

Specify State's Vehicle Item Number: 2.14 Ram 2500 Crew Cab Long Bed 4x2-4x4 Gas and Diesel

(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)

Option Package Name/Code:

List Equipment Features Below:

Tradesman Level 1 Group (A61) \$268.00

Remote Keyless Entry

Tradesman Level 2 Group (A6B) \$618.00

Sirius Sat Radio, Rear Window Defroster, Rear Power Sliding Window, Floor Cover Carpet (Can Be Deleted), Cloth 40/20/40 Bench Seat, Remote Keyless Entry

Chrome Appearance Group (AMP) \$905.00

Chrome Front and Rear Bumper, 18x18.0 Steel Chrome Clad Wheels, Chrome Grill

Bed Utility Group (ANT) \$632.00

Spray in Bedliner, Deployable Bed Step, LED Bed Lighting

ITEMIZED OPTION PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME: Carson Dodge Chrysler Jeep

DEDUCT AMOUNT

ABS Brake System	STD	\$-
Air Conditioning	STD	\$-
Cruise Control	STD	\$-
Diesel Engine	\$8,000.00	\$-
Engine Block Heater	\$86.00	\$-
Four Wheel Drive (4x4)	\$2,500.00	\$-
Heavy Duty Alternator	N/A	\$-
Hitch Receiver	STD	\$-
Integrated Trailer Brake	\$268.00	\$-
Keyless Entry w/Fob (must have power door locks)	See Groups	\$-
Limited Slip Differential	\$405.00	\$-
Paint, Metallic	SEE PAINTS	\$-
Power Mirrors	SEE GROUP	\$-
Power Locks	SEE GROUP	\$-
Power Seats	N/A	\$-
Power Windows	SEE GROUP	\$-
Radio; AM/FM Stereo, Cassette Player	AM/FM STD	\$-
Radio; AM/FM Stereo, Cassette Player, CD	AUX INPUTS	\$-
Rear Window Wiper	N/A	\$-
Seats, Vinyl	No Charge In Lieu Of Cloth	
Vinyl Colors: Black with Diesel Gray		
Skid Plate	\$132.00	\$-
Tilt Steering	STD	\$-
Tire, Spare, Full Size-	STD	\$-
Trailer Tow Mirrors	\$177.00	\$-
Trailer Tow Package	STD	\$-
Daytime Running Lamps	STD	
Front Fog Lamps	\$177.00	
LT 275/70R18E ON OFF ROAD TIRES 4x4 On	\$223.00	
Rear Sliding Window	SEE GROUP	
HD Snow Plow Prep Group	\$177.00	
Rear Wheelhouse Liners	\$177.00	
Uconnect Handsfree 3.0 W/ 5" Screen	STD	
220 Amp Alternator	\$91.00	
Park View Back Up Camera	STD	
Aux Switches I/P Mounted	\$132.00	
115 V Aux. Power Outlet (M/H Tradesman 1 or	\$137.00	
Tubular Side Steps	\$450.00	

Dual Alt. Rated at 380 Amps	\$359.00	
Elect. Transfer Case	\$268.00	
Upfilter Electronic Module (VISM)	\$314.00	
Rear Back Up Alarm	\$132.00	
LED Bed Lighting	\$150.00	
Rear Park Sense	\$268.00	
5th Wheel/Gooseneck Towing Prep Group	\$405.00	
DOT Certified Roadside Safety Kit	\$177.00	
Spray In Liner	\$514.00	\$-

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ Call Dealer

Schedule Selection: Equipment Schedule

Budget Account: 4550 AGRI - VETERINARY MEDICAL SERVICES										
IT Equipment Replacement - E710 and E720 New Equipment requests.										
[See Attachment]										
Catg	GL Acct	Description	Priority	Year1 Count	Year2 Count	Year1 Rate	Year2 Rate	Year1 Amt	Year2 Amt	
E710		EQUIPMENT REPLACEMENT								
26	7771	MICROSOFT OFFICE 365 RENEWAL	0	8	8	184.00	184.00	1,472	1,472	
26	7771	MICROSOFT OFFICE 365 RENEWAL	0	-8	-8	184.00	184.00	-1,472	-1,472	
26	8371	DUAL 22" DESKTOP MONITORS W/SPEAKER BAR	0	0	0	383.00	383.00	0	0	
26	8371	LAPTOP DOCKING STATION	0	0	1	163.00	163.00	0	163	
26	8371	LAPTOP PC WITH OPERATING SYSTEM - 5 YR WARRANTY	0	0	1	1,579.00	1,579.00	0	1,579	
Total for Decision Unit: E710				0	2			0	1,742	
E711		EQUIPMENT REPLACEMENT								
05	8310	RNO/CC-2.14 4WD TRUCK 3/4T;CRW CAB;L BD	0	1	0	40,673.00	41,893.00	40,673	0	
This request replaces EX19839 which was surplus in October 2017 due to mechanical repairs exceeding the value of the vehicle, age of the vehicle and mileage. [See Attachment]										
Total for Decision Unit: E711				1	0			40,673	0	
E720		NEW EQUIPMENT								
05	8393	GOOSENECK HITCH	0	1	0	718.00	0.00	718	0	
Gooseneck trailer hitch for towing department issued trailers. [See Attachment]										
05	8393	MOBILE VET BOX	0	1	0	10,890.00	0.00	10,890	0	
Public health mobile field investigations of zoonotic diseases. [See Attachment]										
Total for Decision Unit: E720				2	0			11,608	0	
Total for Budget Account: 4550				3	2			52,281	1,742	

\$41,391



**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 7, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Curtis Palmer, Executive Branch Budget Officer
Budget Division

A handwritten signature in blue ink, appearing to be "CP", is written next to the name Curtis Palmer.

Subject: BOARD OF EXAMINERS **ACTION** ITEM

The following describes an action item submitted for placement on the agenda of the next Board of Examiners' meeting.

**DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
DIVISION OF STATE PARKS**

Agenda Item Write-up:

Pursuant to NRS 334.010, the Division requests approval to purchase three replacement vehicles and one new vehicle for a total of four vehicles not to exceed \$148,483.

Additional Information:

This request is to purchase three vehicles to replace current vehicles that comply with the Vehicle Replacement Policy of SAM 1316 and purchase one new vehicle. The total purchase price for the four vehicles is \$148,483.

The Division received vehicle funding of \$1,223,304 during the 2020-2021 legislative session. The agency submitted a request to the August BOE meeting for 24 vehicles in the amount of \$880,897. Combined with the current BOE request, the agency has \$323,924 in appropriations remaining for vehicle replacement. The final two approved vehicle purchases will be presented at a future BOE meeting.

The Division of State Parks was budgeted for replacement vehicles in one-shot appropriations pursuant to Assembly Bill 505 of the 2019 Legislative Session. Additionally, a new vehicle was budgeted in budget account 4162, decision unit E366 as shown in Table 1 below.

Funding Sources		
One-Shot	E-712	\$572,726
One-Shot	E-712	\$569,422
BA 4162	E-364	\$40,578
BA 4162	E-366	\$40,578
Total		\$1,223,304

Table 1: Funding source for State Park vehicle purchases.

Statutory Authority:

NRS 334.010

REVIEWED: <u>am</u>
ACTION ITEM: _____

Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010

Agency Name: State Parks	Budget Account #: 4162
Contact Name: Jen Idema	Telephone Number: 775-684-2773
<p>Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:</p> <p>Number of vehicles requested: 4 Amount of the request: \$148,483.00</p> <p>Is the requested vehicle(s) new or used: New</p> <p>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:</p> <p>Mission of the requested vehicle(s): Operation and maintenance of State Parks.</p>	
<p>Were funds legislatively approved for the request?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>If yes, please provide the decision unit number:</p> <p>If no, please explain how the vehicles will be funded? E366, E712-One Shot</p>
<p>Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s):</p> <p><input type="checkbox"/> 1 Addition(s) <input type="checkbox"/> 3 Replacement(s)</p>	
<p>Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1314? If not, please explain.</p> <p>Yes</p>	
<p>Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)</p> <p>Current Vehicle Information: Vehicle #1 Model Year: _____ Odometer Reading: _____ Type of Vehicle: _____ <small>See attached spreadsheet</small></p> <p>Vehicle #2 Model Year: _____ Odometer Reading: _____ Type of Vehicle: _____</p> <p><i>Please attach an additional sheet if necessary</i></p>	<p>Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced.</p> <p>Yes _____</p> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.</p>
<p>APPOINTING AUTHORITY APPROVAL:</p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="text-align: center;"> Agency Appointing Authority </div> <div style="text-align: center;"> Administrator Title </div> <div style="text-align: center;"> 08/06/2019 Date </div> </div>	
<p>BOARD OF EXAMINERS' APPROVAL:</p> <p><input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;"> Board of Examiners </div> <div style="text-align: center;"> Date </div> </div>	

DCNR - Division of State Parks
BOE Vehicle Request Summary
8/6/2019

	Location	Vehicle Request	Replacement Vehicle Plate #, Year, mileage	Requested Purchase Amt	Leg Approved Amt
1	Division-LE	2020 Chevrolet Tahoe (E712)	EX 42644, 2002 Chevy Silverado, 88,677 miles	\$41,915.25	✓ \$40,909.00
2	Tahoe-SH	2020 Chevrolet Tahoe (E712)	EX 27395, 1992 Ford F150, 97,422 miles	\$42,031.25	✓ \$40,673.00
3	Tahoe-Spooner	2020 Chevrolet Silverado (E712)	EX 27396, 1992 Ford F250, 99,068 miles	\$32,268.25	✓ \$40,909.00
4	Tahoe-SH	2020 Chevrolet Silverado (E366)	New position/new vehicle	\$32,268.25	✓ \$40,909.00
Total September BOE Request					\$148,483.00
Total Approved Funding					\$1,223,304.00

Funding Sources		
One-Shot	E712	\$572,726.00
One-Shot	E712	\$569,422.00
	E364	\$40,578.00
	E366	\$40,578.00
Total		\$1,223,304.00

Budget Officer Note:

August BOE request 24 Vehicles \$880,897
Sept. BOE request 4 Vehicles \$148,483

Estimated funds remaining \$ 323,924

the agency is approved for two more
vehicle purchases



Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2020 Chevrolet Tahoe CK15706 PPV		
Dealer Name:	Champion Chevrolet		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: White	Interior: Earth Gray	<input checked="" type="checkbox"/> Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 35,583.00	\$ 35,583.00
SPECIFY OPTIONS: (description)			
KATS-Anti Theft System		\$ 495.00	
Ballastic Door Panels Front Driver/Passenger		\$ 3,980.00	
LED Spotlamps L & R		\$ 1,300.00	
Wiring Grille Lamps/Siren Circuit		\$ 41.00	
Wiring Grille Lamps/Siren Speakers		\$ 92.00	
Front Aux Dome Lamp Red/White		\$ 170.00	
Keyless Entry Package		\$ 175.00	
Daytime Running Lamp Delete		\$ 50.00	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$ 41,886.00
DMV Title and DRS Fee's		\$29.25	\$ 29.25
GRAND TOTAL:			\$ 41,915.25

Registered Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701
Legal Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701
County Vehicle Based In:	Carson City
Name & Phone of Person to contact when vehicle is ready for delivery:	Jen Idema 775-684-2773



State of Nevada Bid #99SWC-S490


Item # 1.2A - Sport Utility 4 Wheel Drive "Pursuit"

- Base Price - \$35,583.00
- KATS – Anti Theft System \$495.00
- Ballistic Door Panels Front Driver/Passenger \$3,980.00
- LED Spotlamps L & R \$1,300.00
- Wiring Grille Lamps/Sire Speakers \$92.00
- Wiring, Horn/Siren Circuit \$41.00
- Front Aux Dome Lamp Red/White \$170.00
- Keyless Entry Package (8 Remotes Total) \$175.00
- Daytime Running Lamp Delete \$50.00
- Nevada DRS/Title Fee \$29.25

Total \$41,915.25

To - Division Carson City
EX 42644
2002 Chevy Silverado
88,677 miles

Fleet Manager


Kyle M. Outland

800 Kietzke Lane • Reno, Nevada 89502-2095
P.O. Box 7277 • Reno, Nevada 89510-7277 • (775) 786-3111 • Fax (775) 786-4397
www.championchevroletreno.com

STANDARD PAGE ~ BID 99SWC-S490 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Specify State's Vehicle Item Number: 1.2A Sport Utility Vehicle 4 Wheel Drive "PPV"

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
2020 Chevrolet Tahoe - CK15706 - Pursuit	\$35,583.00	\$35,883.00

OPTION PACKAGE NAME/CODE:**Manufactures Suggested Retail Price(MSRP): \$47,276.25**

LIST EQUIPMENT FEATURES BELOW:

Please follow this link for a full brochure.

www.gmfleet.com/

STANDARD PAGE ~ BID 99SWC-S490 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Specify State's Vehicle Item Number: *1.2A Sport Utility Vehicle 4 Wheel Drive*

		DEDUCT AMOUNT
Delete 4-wheel drive system	See Item # 1.2B	\$ N/A
4x4 Off Road Packages; List Options:	\$ N/A	\$ N/A
Anti-Theft System: Kerr Industries - <u>KATS</u>	\$495.00 ✓	\$ N/A
Ability to remove ignition key and leave vehicle running.		
Locking Differential	\$ STD	\$ N/A
Bluetooth for Phone	\$ STD	\$ N/A
Brakes, City Brake Package	\$ Avail @ No charge	
Additional window tinting (Driver and Passenger Front Windows)	\$100.00	\$ N/A
Ballistic Door Panels Level 3	\$1,990.00(Each Door) ✓	\$ N/A
Bumper: Rear bumper will be equipped with reverse sensing system alerting the driver to obstacles while backing up	\$ STD	\$ N/A
Compact disc player: in dash installed	\$ STD	\$ N/A
Content Theft Alarm Disable	\$50.00	\$ N/A
Extended warranty	\$ N/A	\$ N/A
Floor Coverings: carpet front and rear	\$190.00	\$ N/A
Flasher System Head/Tail Lamps	\$495.00	\$ N/A
Mirrors: Heated driver and passenger outside mirrors	\$ STD	\$ N/A
Daytime Running Lamp Delete	\$50.00	\$ N/A
Roll Stability Control Packages	\$ STD	\$ N/A
List package options: <i>Stabilitrak</i>		
Keys, 6 Additional (8 Keys Total)	\$95.00	\$ N/A
Remote Start	\$300.00	\$ N/A
Keyless Entry Package (8 Remotes Total)	\$175.00	\$ N/A
Front Auxiliary Dome Light - Red & White	\$170.00	\$ N/A
Onstar	\$85.00	\$ N/A
Rear Window Switches Inoperative	\$57.00	\$ N/A
Rear Door Locks Inoperative	\$59.00	\$ N/A
Rear Door Handles Inoperative	\$59.00	\$ N/A
Side Impact Air Bags	\$ STD	\$ N/A
Skid Plates	\$ STD	\$ N/A
Spotlights: to be mounted on left and right hand "A" pillar and wired independent of the ignition and individually fused with 10 to 20-amp capacity. To be 6" Unity #225 (equipped with Halogen spot lamp #H7635) or approved equal.	\$490.00(Each Side)	\$ N/A
Spotlights(LED): to be mounted on left and right	\$650.00(Each Side) ✓	\$ N/A
Tow package w/class III hitch/receiver and 7-pin wire harness	\$ STD	\$ N/A
Wiring, Grill Lamps/Siren Speakers	\$92.00	\$ N/A
Wiring, Horn/ Siren Circuit	\$41.00	\$ N/A
Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 375.00 Flat		

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2020 Chevrolet Tahoe CK15706 PPV		
Dealer Name:	Champion Chevrolet		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: White	Interior: Earth Gray	<input checked="" type="checkbox"/> Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 35,583.00	\$ 35,583.00
SPECIFY OPTIONS: (description)			
KATS-Anti Theft System		\$ 495.00	
Ballastic Door Panels Front Driver/Passenger		\$ 3,980.00	
Rear Window Switches Inop		\$ 57.00	
Rear Door Locks/Handles Inop		\$ 59.00	
LED Spotlamps L & R		\$ 1,300.00	
Wiring Grille Lamps/Siren Circuit		\$ 41.00	
Wiring Grille Lamps/Siren Speakers		\$ 92.00	
Front Aux Dome Lamp Red/White		\$ 170.00	
Keyless Entry Package		\$ 175.00	
Daytime Running Lamp Delete		\$ 50.00	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$ 42,002.00

DMV Title and DRS Fee's		\$29.25	\$ 29.25
GRAND TOTAL:			\$ 42,031.25

Registered Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701
Legal Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701
County Vehicle Based In:	Washoe
Name & Phone of Person to contact when vehicle is ready for delivery:	Jen Idema 775-684-2773



State of Nevada Bid #99SWC-S490

Item # 1.2A - Sport Utility 4 Wheel Drive "Pursuit"

- Base Price - \$35,583.00
- KATS – Anti Theft System \$495.00
- Ballistic Door Panels Front Driver/Passenger \$3,980.00
- Rear Window Switches Inop \$57.00
- Rear Door Locks/Handles Inop \$59.00
- LED Spotlamps L & R \$1,300.00
- Wiring Grille Lamps/Sire Speakers \$92.00
- Wiring, Horn/Siren Circuit \$41.00
- Front Aux Dome Lamp Red/White \$170.00
- Keyless Entry Package (8 Remotes Total) \$175.00
- Daytime Running Lamp Delete \$50.00
- Nevada DRS/Title Fee \$29.25

Total \$42,031.25

Fleet Manager

Kyle M. Outland

To - Sand Harbor
EX 27395

1992 Ford F150
97,422 miles

800 Kietzke Lane • Reno, Nevada 89502-2095
P.O. Box 7277 • Reno, Nevada 89510-7277 • (775) 786-3111 • Fax (775) 786-4397
www.championchevroletreno.com

STANDARD PAGE ~ BID 99SWC-S490 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*Specify State's Vehicle Item Number: *1.2A Sport Utility Vehicle 4 Wheel Drive "PPV"*

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
<i>2020 Chevrolet Tahoe - CK15706 - Pursuit</i>	<i>\$35,583.00</i>	<i>\$35,883.00</i>

OPTION PACKAGE NAME/CODE:

Manufactures Suggested Retail Price(MSRP): \$47,276.25

LIST EQUIPMENT FEATURES BELOW:

Please follow this link for a full brochure.

www.gmfleet.com/

STANDARD PAGE ~ BID 99SWC-S490 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Specify State's Vehicle Item Number: *1.2A Sport Utility Vehicle 4 Wheel Drive*

		DEDUCT AMOUNT
Delete 4-wheel drive system	See Item # 1.2B	\$ N/A
4x4 Off Road Packages; List Options:	\$ N/A	\$ N/A
Anti-Theft System: Kerr Industries - <u>KATS</u>	\$495.00 ✓	\$ N/A
Ability to remove ignition key and leave vehicle running.		
Locking Differential	\$ STD	\$ N/A
Bluetooth for Phone	\$ STD	\$ N/A
Brakes, City Brake Package	\$ Avail @ No charge	
Additional window tinting (Driver and Passenger Front Windows)	\$100.00	\$ N/A
Ballistic Door Panels Level 3	\$1,990.00(Each Door) ✓	\$ N/A
Bumper: Rear bumper will be equipped with reverse sensing system alerting the driver to obstacles while backing up	\$ STD	\$ N/A
Compact disc player: in dash installed	\$ STD	\$ N/A
Content Theft Alarm Disable	\$50.00	\$ N/A
Extended warranty	\$ N/A	\$ N/A
Floor Coverings: carpet front and rear	\$190.00	\$ N/A
Flasher System Head/Tail Lamps	\$495.00	\$ N/A
Mirrors: Heated driver and passenger outside mirrors	\$ STD	\$ N/A
Daytime Running Lamp Delete	\$50.00	\$ N/A
Roll Stability Control Packages	\$ STD	\$ N/A
List package options: <i>Stabilitrak</i>		
Keys, 6 Additional (8 Keys Total)	\$95.00	\$ N/A
Remote Start	\$300.00	\$ N/A
Keyless Entry Package (8 Remotes Total)	\$175.00	\$ N/A
Front Auxiliary Dome Light - Red & White	\$170.00	\$ N/A
Onstar	\$85.00	\$ N/A
Rear Window Switches Inoperative	\$57.00 ✓	\$ N/A
Rear Door Locks Inoperative	\$59.00 ✓	\$ N/A
Rear Door Handles Inoperative	\$59.00	\$ N/A
Side Impact Air Bags	\$ STD	\$ N/A
Skid Plates	\$ STD	\$ N/A
Spotlights: to be mounted on left and right hand "A" pillar and wired independent of the ignition and individually fused with 10 to 20-amp capacity. To be 6" Unity #225 (equipped with Halogen spot lamp #H7635) or approved equal.	\$490.00(Each Side)	\$ N/A
Spotlights(LED): to be mounted on left and right	\$650.00(Each Side) ✓	\$ N/A
Tow package w/class III hitch/receiver and 7-pin wire harness	\$ STD	\$ N/A
Wiring, Grill Lamps/Siren Speakers	\$92.00	\$ N/A
Wiring, Horn/ Siren Circuit	\$41.00	\$ N/A
Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 375.00 Flat		

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2020 Chevrolet Silverado ½ Ton Full Size Crew Cab, Short Bed		
Dealer Name:	Champion Chevrolet		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: White	Interior: Earth Gray	<input checked="" type="checkbox"/> Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 29,459.00	\$ 29,459.00
SPECIFY OPTIONS: (description)			
Z71 Off Road Package		\$ 1,540.00	
Auto Door Disable		\$ 75.00	
Daytime Running Lamp Delete		\$ 75.00	
Flex Fuel E85		\$ 100.00	
Rear Window Switches Inop		\$ 50.00	
Rear Door Locks/Handles Inop		\$ 75.00	
Spray In Bedliner		\$ 495.00	
Integrated Trailer Brake Controller		\$ 275.00	
Two Additional Keys		\$ 95.00	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$ 32,239.00
DMV Title and DRS Fee's		\$29.25	\$ 29.25
GRAND TOTAL:			\$ 32,268.25

Registered Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701
Legal Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701
County Vehicle Based In:	Washoe
Name & Phone of Person to contact when vehicle is ready for delivery:	Jen Idema 775-684-2773



State of Nevada Bid #99SWC-S490

Item # 1.3 – ½ Ton Full Size Crew Cab: Short Bed

- Base Price - \$29,459.00
- Z71 Off Road Package(Includes Skid Plates) \$1,540.00
- Auto Door Lock Disable \$75.00
- Daytime Running Lamp Delete \$75.00
- Flex Fuel E85 \$100.00
- Rear Window Switches Inop \$50.00
- Rear Door Locks/Handles Inop \$75.00
- Spray In Bedliner \$495.00
- Integrated Trailer Brake Controller \$275.00
- Two Additional Keys \$95.00

Nevada DRS/Title Fee \$29.25

Subtotal \$32,268.25

Grand Total \$32,268.25 X 2 = \$64,536.50

~~1 - New Position
Dec Unit E366~~

1 - To Spooner
EX 27396
1992 Ford F150
99,068 miles

Fleet Manager

Kyle M. Outland

STANDARD PAGE ~ BID 99SWC-S490 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Specify State's Vehicle Item Number: 1.3 1/2 Ton Crew Cab Pickup 4 Wheel Drive

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
<i>2020 Chevrolet Silverado - CK10543</i>	<i>\$29,459.00</i>	<i>\$29,759.00</i>

OPTION PACKAGE NAME/CODE:**Manufactures Suggested Retail Price(MSRP): \$ \$42,290.00**

LIST EQUIPMENT FEATURES BELOW:

Please follow this link for a full brochure.

www.gmfleet.com/

[illegible]

STANDARD PAGE ~ BID 99SWC-S490 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Specify State's Vehicle Item Number: 1.3 1/2 Ton Crew Cab Pickup 4 Wheel Drive

		DEDUCT AMOUNT
4x4 Off Road Packages; List Options: <i>Z71 Suspension, Skid Plates, Tow Package, High Capacity Air Cleaner, All Terrain Tires, Locking Differential, Electronic Transfer Case, Hill Descent Control</i>	\$1,540.00 ✓	\$- N/A
Anti-Theft System: Kerr Industries - <u>KATS</u> Ability to remove ignition key and leave vehicle running.	\$495.00	\$- N/A
Additional window tinting (Driver and Passenger Windows)	\$100.00	\$- N/A
Auto Door Lock Disable	\$75.00 ✓	\$- N/A
Backup Camera	\$ STD	\$- N/A
Bedliner, Spray In	\$495.00 ✓	\$- N/A
Bluetooth for Phone	\$ STD	\$- N/A
Bumper: Rear bumper will be equipped with reverse sensing system alerting the driver to obstacles while backing up	\$ N/A	\$- N/A
Content Theft Alarm Disable	\$75.00 ✓	\$- N/A
Cruise Control	\$ STD	\$- N/A
Daytime Running Lamp Delete	\$75.00 ✓	\$- N/A
Electronic Transfer Case	\$ STD	\$- N/A
Flex Fuel E85	\$100.00 ✓	\$- N/A
Floor Coverings: carpet front and rear Incl Mats	\$100.00	\$- N/A
Front Auxiliary Dome Light - Red & White	\$250.00	\$- N/A
Power Mirrors: Heated driver and passenger outside power mirrors / Incl Keyless Entry	\$ STD	\$- N/A
Keys, 2 Additional (4 Keys Total)	\$95.00 ✓	\$- N/A
Locking Rear Differential	\$348.00	\$- N/A
Rear Window Switches Inoperative	\$50.00 ✓	\$- N/A
Rear Door Locks/Handles Inoperative	\$75.00 ✓	\$ N/A
Rear Window Defogger	\$207.00	\$- N/A
Side Impact Air Bags	\$ STD	\$- N/A
Skid Plates	\$132.00	\$- N/A
Steps, 4" Black Round	\$750.00	\$- N/A
Spotlights: to be mounted on left and right hand "A" pillar and wired independent of the ignition and individually fused with 10 to 20-amp capacity. To be 6" Unity #225 (equipped with Halogen spot lamp #H7635) or approved equal.	\$660 (Each Side)	\$- N/A
Spotlights(LED): to be mounted on left and right	\$900 (Each Side)	\$- N/A
Tires: LT265/R17C All Terrain	\$395.00	\$- N/A
Tow package w/ 7-Way	\$395.00	\$- N/A
Integrated Trailer Brake Cont(Requires Tow Pack)	\$275.00 ✓	\$- N/A
Upfit Switches Bank of 5 (Shipped Loose)	\$150.00	\$- N/A

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 375.00 Flat

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2020 Chevrolet Silverado ½ Ton Full Size Crew Cab, Short Bed		
Dealer Name:	Champion Chevrolet		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: White	Interior: Earth Gray	<input checked="" type="checkbox"/> Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 29,459.00	\$ 29,459.00
SPECIFY OPTIONS: (description)			
Z71 Off Road Package		\$ 1,540.00	
Auto Door Disable		\$ 75.00	
Daytime Running Lamp Delete		\$ 75.00	
Flex Fuel E85		\$ 100.00	
Rear Window Switches Inop		\$ 50.00	
Rear Door Locks/Handles Inop		\$ 75.00	
Spray In Bedliner		\$ 495.00	
Integrated Trailer Brake Controller		\$ 275.00	
Two Additional Keys		\$ 95.00	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$ 32,239.00
DMV Title and DRS Fee's		\$29.25	\$ 29.25
GRAND TOTAL:			\$ 32,268.25

Registered Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701
Legal Owner:	Agency Name & Address: Nevada State Parks 901 S Stewart St, Suite 5005 Carson City, NV 89701
County Vehicle Based In:	Washoe
Name & Phone of Person to contact when vehicle is ready for delivery:	Jen Idema 775-684-2773



State of Nevada Bid #99SWC-S490

Item # 1.3 – ½ Ton Full Size Crew Cab: Short Bed

- Base Price - \$29,459.00
- Z71 Off Road Package(Includes Skid Plates) \$1,540.00
- Auto Door Lock Disable \$75.00
- Daytime Running Lamp Delete \$75.00
- Flex Fuel E85 \$100.00
- Rear Window Switches Inop \$50.00
- Rear Door Locks/Handles Inop \$75.00
- Spray In Bedliner \$495.00
- Integrated Trailer Brake Controller \$275.00
- Two Additional Keys \$95.00

Nevada DRS/Title Fee \$29.25

Subtotal \$32,268.25

Grand Total \$32,268.25 X 2 = \$64,536.50

1 - New Position
Dec Unit E366

~~1 - To Spooner
EX 27396
1992 Ford F150
99,062 miles~~

Fleet Manager

Kyle M. Outland

STANDARD PAGE ~ BID 99SWC-S490 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Specify State's Vehicle Item Number: *1.3 1/2 Ton Crew Cab Pickup 4 Wheel Drive*

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
<i>2020 Chevrolet Silverado - CK10543</i>	<i>\$29,459.00</i>	<i>\$29,759.00</i>

OPTION PACKAGE NAME/CODE:

Manufactures Suggested Retail Price(MSRP): \$ \$42,290.00

LIST EQUIPMENT FEATURES BELOW:

Please follow this link for a full brochure.

www.gmfleet.com/

STANDARD PAGE ~ BID 99SWC-S490 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Specify State's Vehicle Item Number: 1.3 1/2 Ton Crew Cab Pickup 4 Wheel Drive

		DEDUCT AMOUNT
4x4 Off Road Packages; List Options: <i>Z71 Suspension, Skid Plates, Tow Package, High Capacity Air Cleaner, All Terrain Tires, Locking Differential, Electronic Transfer Case, Hill Descent Control</i>	\$1,540.00 ✓	\$- N/A
Anti-Theft System: Kerr Industries - <u>KATS</u> Ability to remove ignition key and leave vehicle running.	\$495.00	\$- N/A
Additional window tinting (Driver and Passenger Windows)	\$100.00	\$- N/A
Auto Door Lock Disable	\$75.00 ✓	\$- N/A
Backup Camera	\$ STD	\$- N/A
Bedliner, Spray In	\$495.00 ✓	\$- N/A
Bluetooth for Phone	\$ STD	\$- N/A
Bumper: Rear bumper will be equipped with reverse sensing system alerting the driver to obstacles while backing up	\$ N/A	\$- N/A
Content Theft Alarm Disable	\$75.00 ✓	\$- N/A
Cruise Control	\$ STD	\$- N/A
Daytime Running Lamp Delete	\$75.00 ✓	\$- N/A
Electronic Transfer Case	\$ STD	\$- N/A
Flex Fuel E85	\$100.00 ✓	\$- N/A
Floor Coverings: carpet front and rear Incl Mats	\$100.00	\$- N/A
Front Auxiliary Dome Light - Red & White	\$250.00	\$- N/A
Power Mirrors: Heated driver and passenger outside power mirrors / Incl Keyless Entry	\$ STD	\$- N/A
Keys, 2 Additional (4 Keys Total)	\$95.00 ✓	\$- N/A
Locking Rear Differential	\$348.00	\$- N/A
Rear Window Switches Inoperative	\$50.00 ✓	\$- N/A
Rear Door Locks/Handles Inoperative	\$75.00 ✓	\$ N/A
Rear Window Defogger	\$207.00	\$- N/A
Side Impact Air Bags	\$ STD	\$- N/A
Skid Plates	\$132.00	\$- N/A
Steps, 4" Black Round	\$750.00	\$- N/A
Spotlights: to be mounted on left and right hand "A" pillar and wired independent of the ignition and individually fused with 10 to 20-amp capacity. To be 6" Unity #225 (equipped with Halogen spot lamp #H7635) or approved equal.	\$660 (Each Side)	\$- N/A
Spotlights(LED): to be mounted on left and right	\$900 (Each Side)	\$- N/A
Tires: LT265/R17C All Terrain	\$395.00	\$- N/A
Tow package w/ 7-Way	\$395.00 ✓	\$- N/A
Integrated Trailer Brake Cont(Requires Tow Pack)	\$275.00 ✓	\$- N/A
Upfit Switches Bank of 5 (Shipped Loose)	\$150.00	\$- N/A

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 375.00 Flat

STEVE SISOLAK
Governor

BRADLEY CROWELL
Director

Department of Conservation and
Natural Resources

ROBERT MERGELL
Administrator

STATE OF NEVADA



901 S. Stewart Street,
Suite 5005
Carson City, NV
89701-5248

Phone: (775) 684-2770
Fax: (775) 684-2777
stparks@parks.nv.gov
parks.nv.gov

**DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
DIVISION OF STATE PARKS**

August 6, 2019

MEMORANDUM

To: Curtis Palmer, Budget Analyst
Department of Administration

Through: Robert Mergell, Administrator
State Parks

From: Jen Idema, ASO II

Subject: Approval to purchase vehicles

RECEIVED
AUG - 7 2019
GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Attached is the Board of Examiners Request for Approval to Purchase a State Vehicle form, pursuant to NRS 334.010. In SFY 20 State Parks was legislatively approved to purchase 1 new vehicle and 3 replacement vehicles thru decision units E712 and E366, totaling \$148,483.00.

Thank you in advance for your consideration of this request.



**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 14, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Curtis Palmer, Executive Branch Budget Officer
Governor's Finance Office, Budget Division

CP

Subject: BOARD OF EXAMINERS **ACTION** ITEM

The following describes an action item submitted for placement on the agenda of the next Board of Examiners' meeting.

**DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
ENVIRONMENTAL PROTECTION DIVISION**

Agenda Item Write-up:

Pursuant to NRS 334.010, the Division requests approval to purchase one replacement vehicle for a total amount not to exceed \$32,131.

Additional Information:

The request is to purchase one vehicle to replace a current vehicle which complies with the Vehicle Replacement Policy of SAM 1316. The total purchase price for the vehicle is \$32,131. The Division is approved for the vehicle purchase in the FY20-21 Legislatively approved budget in the amount of \$31,435. The agency will use funds from the FED CWA Section 106 EPA grant category to cover the price increase, a difference of \$696. Agency budget account is 3193, decision unit E711 and expenditure categories 06 and 20.

Statutory Authority:


NRS 334.010

REVIEWED: _____

cm

ACTION ITEM: _____

Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010

Agency Name: Bureau of Water Quality Planning	Budget Account #: 3193
Contact Name: Marjorie Hilke	Telephone Number: 775-687-9444
<p>Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:</p> <p>Number of vehicles requested: <u>1</u> Amount of the request: <u>\$32,130.53</u></p> <p>Is the requested vehicle(s) new or used: <u>New</u></p> <p>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: 2019 Toyota Tundra SR DBL CAB 4.6L V8</p> <p>Mission of the requested vehicle(s): Field vehicle for the Bureau of Water Quality Planning to conduct water quality assessments and other uses.</p>	
<p>Were funds legislatively approved for the request?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p>If yes, please provide the decision unit number: E711</p> <p>If no, please explain how the vehicles will be funded?</p>
<p>Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s):</p> <p><input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> 1 Replacement(s)</p>	
<p>Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain.</p> <p>The vehicle will be based in Carson City. Truck will be used for off road field work.</p>	
<p>Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)</p> <p>Current Vehicle Information: Vehicle #1 Model Year: 2010 Dodge Ram 1500 Crew Cab Odometer Reading: 122,360 Type of Vehicle: Pick Up</p> <p>Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:</p> <p><i>Please attach an additional sheet if necessary</i></p>	<p>Does this request meet the replacement schedule criteria pursuant to SAM 1309? If no, explain why the vehicle is being replaced.</p> <p>Yes</p> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.</p>
<p>APPOINTING AUTHORITY APPROVAL:</p> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 30%; text-align: center;">  Agency Appointing Authority </div> <div style="width: 30%; text-align: center;"> <u>Deputy Adm.</u> Title </div> <div style="width: 30%; text-align: center;"> <u>8/5/2019</u> Date </div> </div>	
<p>BOARD OF EXAMINERS' APPROVAL:</p> <p><input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase</p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="width: 40%;"> Board of Examiners </div> <div style="width: 40%;"> Date </div> </div>	

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2019 Toyota Tundra SR DBL CAB 4.6L V8		
Dealer Name:	Carson City Toyota, Compagni Auto Group		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: White	Interior: Beige	XX Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$35,101.28	\$35,101.28
SPECIFY OPTIONS: (description)			(\$3,000)
Rebate		(\$3,000)	
Front Skid Plate (included in price)		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$32,101.28
DMV Title and DRS Fee's		\$29.25	\$29.25
GRAND TOTAL:			\$32,130.53



NEVADA DIVISION OF
**ENVIRONMENTAL
PROTECTION**

STATE OF NEVADA
Department of Conservation & Natural Resources
Steve Sisolak, *Governor*
Bradley Crowell, *Director*
Greg Lovato, *Administrator*

INTEROFFICE MEMORANDUM

TO: CURTIS PALMER, BUDGET ANALYST, GOV'S OFFICE OF FINANCE,
BUDGET DIV
FROM: MARJORIE HILKE, CONTRACT MANAGER, BWQP
SUBJECT: STATE VEHICLE PURCHASE
DATE: AUGUST 14, 2019

The Nevada Department of Conservation and Natural Resources, Division of Environmental Protection, Bureau of Water Quality Planning is seeking approval from the State Board of Examiners to Purchase the following vehicle as approved by the Legislative Session.

Upon approval please contact me at 687-9444 so that I may pick up the original. Should you have any questions please do not hesitate to call me. Thank you

RECEIVED
AUG 14 2019
GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION



MEMORANDUM

DATE: August 14, 2019
To: Curtis Palmer, GFO
FROM: Paul Comba, Chief, Bureau of Water Quality Planning
SUBJECT: REQUEST FOR VEHICLE PURCHASE (BA 3193)

Dear Mr. Palmer,

A new vehicle for the Bureau of Water Quality Planning was included in the SFY20/21 Budget (BA3193). Per your permission as outlined in email to Ms. Daralyn Dobson on July 25, 2019, the purchase of the vehicle will be covered under Cat 20 FED CWA SEC 106 MI EPA Grants rather than Cat 09 FED CWA SEC 319H EPA Grant as was included in the biennium budget. GL 8310 was budgeted for all of the vehicle expenses: purchase cost, shell for truck bed, roof rack and heavy-duty tires. The shortfall in funding for vehicle purchase will be covered using authority in GL 8310. This may result in purchase of a less costly truck bed shell and/or foregoing purchase of a roof rack to ensure that authority in GL 8310 is not exceeded.

Should you have any questions or concerns, please do not hesitate to contact me.

Sincerely,
Paul Comba

Curtis Palmer

From: Curtis Palmer
Sent: Monday, August 12, 2019 10:08 AM
To: Marjorie Hilke
Subject: RE: Vehicle

RECEIVED

AUG 13 2019

Sensitivity: Personal

ENVIRONMENTAL PROTECTION

Flag Status: Completed

Thank you Marjorie. There is some question regarding a "BID" as stated from the dealer, and a price quote. Also, the \$3,000 rebate seems to expire prior to the BOE meeting. Additionally, the price is listed at \$35,101.28 on one page and \$36,304 on another page.

I am going to send this back to you for corrections, a solid quote from the dealership rather than a "BID" and finally, since I am asking for a redo, on the agency cover page memo please include a paragraph about the shortfall in funding and how this will be covered.

Thank you,

Curtis Palmer

Executive Branch Budget Officer
Governor's Finance Office | State of Nevada | Budget Division
209 E. Musser Street, Room 200, Carson City, NV 89701-4298
T: (775) 684-0231 | F: (775) 684-0260 | E: c.palmer@finance.nv.gov

From: Marjorie Hilke
Sent: Monday, August 12, 2019 8:44 AM
To: Curtis Palmer
Subject: RE: Vehicle

Also this was originally put under our 319 NPS Grant Cat. 09 however Angele received permission via email to charge in Cat. 20 instead of Cat. 09.

Marjorie Hilke
Administrative Assistant III
Bureau of Water Quality Planning
Nevada Division of Environmental Protection
Department of Conservation and Natural Resources
901 S. Stewart Street, Suite 4001
Carson City, NV 89701
mhilke@ndep.nv.gov
(O) 775-687-9444



From: Marjorie Hilke
Sent: Monday, August 12, 2019 8:40 AM
To: Curtis Palmer <c.palmer@finance.nv.gov>
Subject: Vehicle

Hi Curtis,

The GL will be 8310 which is what was budgeted for all of the vehicle expenses truck, camper, rack & tires. This will be out of 106 MI Grant 4420/6641917.




Marjorie Hilke
Administrative Assistant III
Bureau of Water Quality Planning
Nevada Division of Environmental Protection
Department of Conservation and Natural Resources
901 S. Stewart Street, Suite 4001
Carson City, NV 89701
mhilke@ndep.nv.gov
(O) 775-687-9444



NEVADA DIVISION OF
**ENVIRONMENTAL
PROTECTION**



Nevada Department of
**CONSERVATION &
NATURAL RESOURCES**

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[»](#) Budget Account Version - Equipment Schedule

[Page Help ?](#)

Budget Account Version - Equipment Schedule Details

Budget Period: 2019-2021 Biennium (FY20-21)

Budget Account: 3193 DCNR - DEP WATER QUALITY PLANNING

Version: L01 LEGISLATIVELY APPROVED

Schedule: EQUIPMENT

[Schedule Details](#) [Additional Text](#)

Decision Unit Filter: E711 EQUIPMENT REPLACEMENT

Status: COMPLETE

Equipment Schedule

						Year 1			Year 2			
Line #	DU	Catg	GL	Equipment Type	Priority	Count	Rate	Total	Count	Rate	Total	
1	E711	09	8310	FUEL-RNO/CC-2.10 4WD TRK:1/2T; FL SZ; EXTEND CAB; LNG BED	0	1	31,435.00	31,435	0	32,378.00	0	
Equipment Schedule Total: 31,435											0	
Grand Total (Includes Other Amounts Below): 37,120											0	

Other Amounts

						Year 1			Year 2			
Line #	DU	Catg	GL	Description	Priority	Quantity	Rate	Total	Quantity	Rate	Total	
1	E711	09	8310	SHELL/TIRES/RACK	0	1	5,685	5,685	0	0	0	
Other Amounts Total: 5,685											0	



CARSON CITY TOYOTA

CAMPAGNI AUTO GROUP

2590 S. CARSON ST. CARSON CITY, NV 89701 CARSONCITYTOYOTA.COM 775-882-8211

July 19 ,2019

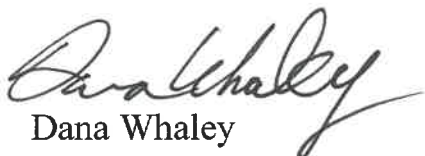
Please accept this Quote for
One 2019 Toyota Tundra SR DBL CAB 4.6L V8
Model 8339
Color White

Price	\$35,101.28
Rebate	\$ <3,000.00>
Total	\$32,130.53 32,101.28
State Title Fee	\$ 29.25
Total	\$ 32,130.53

*Includes Front Skid Plate

* Delivered to Carson City / Reno Nevada

Thank you for your business,


Dana Whaley
General Manager



Specify State's Vehicle Item Number:

(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
2019 8339 Tundra Double Cab SR 4x4	\$34,703	\$35,003

State vehicle miles per gallon (MPG):

State manufactures warranty: basic 36months/36,000 miles powertrain 60months 60,000miles

Specify engine size and emission rating:4.6 Liter v8

Includes Minimum Standard Equipment Listed: ☒ Yes ☐ No If no, state exceptions:

SEE ATTACHED DOCUMENT FOR STANDARD EQUIPMENT

Exterior Color: List available colors:

Midnight Black Metallic, Voodoo Blue, Cavalry Blue, Smoked Mesquite, Barcelona Red Metallic,
Magnetic Gray Metallic, Cement, Silver Sky Metallic, Quicksand

Interior color

Graphite, Black, Beige

GVW:

WHEELBASE.145.7

(When Applicable)

(When Applicable)

OPTION PACKAGE PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME _____

Specify State's Vehicle Item Number:

(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)

Option Package Name/Code:

\$

List Equipment Features Below:

FE 50 State Emissions NO CHARGE

DS Deck Rail System \$ 125

7T Bed Extender \$ 320

CJ Bed Mat \$ 139

BL Bedliner \$ 365

LB Spray in Bedliner \$ 579

EE Entune Premium Audio \$ 525

5A Trifold Tonneau Cover \$ 1295

R2 Black Tube Steps \$ 490

R3 Chrome Tube Steps \$ 535

V5 Security System \$ 359

2T All Weather Mats \$ 239

CF Carpet Floor Mats \$ 239

R4 Black Running Boards \$ 550

U7 Universal Tablet Holder \$ 90

E6 Black Exhaust Tip \$ 104

CONTACT DANA WHALEY FOR CURRENT REBATES TO BE DEDUCTED FROM PRICE

DANAWHALEY@CARSONCITYTOYOTA.COM

ITEMIZED OPTION PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME _____

DEDUCT AMOUNT

ABS Brake System	\$	\$-
Air Conditioning	\$	\$-
Cruise Control	\$	\$-
Diesel Engine	\$	\$-
Engine Block Heater	\$	\$-
Four Wheel Drive (4x4)	\$	\$-
Heavy Duty Alternator	\$	\$-
Hitch Receiver	\$	\$-
Integrated Trailer Brake (3/4 ton only)	\$	\$-
Keyless Entry w/Fob (must have power door locks)	\$	\$-
Limited Slip Differential	\$	\$-
Paint, Metallic	\$	\$-
Power Mirrors	\$	\$-
Power Locks	\$	\$-
Power Seats	\$	\$-
Power Windows	\$	\$-
Radio; AM/FM Stereo, CD	\$	\$-
Rear Window Wiper	\$	\$-
Seats, Vinyl		
Vinyl Colors:		
Skid Plate	\$ 398.28	\$-
Tilt Steering	\$	\$-
Tire, Spare, Full Size	\$	\$-
Trailer Tow Mirrors	\$	\$-
Trailer Tow Package	\$	\$-
Other:	\$	\$-

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 400



TOYOTA

Carson City Toyota

2590 South Carson Street,
Carson City, NV 89701
(775) 882-8211

2019 TUNDRA 4X4 SR DBL CAB 4.6L V8

Model: 8339C

Year: 2019

14 CITY MPG	18 HWY MPG
----------------	---------------

Number of Cylinders: 8

Standard Equipment

MECHANICAL & PERFORMANCE

4.6L i-FORCE V8 DOHC 32V with Dual
Independent VVT-i 310 hp/327 lb-ft
6-Spd Automatic Trans w/Sequential Shift
4WDemand Part-Time 4WD w/Elec Controlled
Transfer Case, A-TRAC & Auto LSD
Tow Rcvr Hitch, 4/7-Pin Connector
3.91 Rear Differential w/9.5" Ring Gear
Dbl Wishbone Frnt Susp w/Stabilizer Bar
Trap Leaf Rr Susp, Staggered O/B Shocks
Power-Assisted 4 Wheel Disc Brakes
18" Wheels w/ P255/70R18 Tires

SAFETY & CONVENIENCE

Halogen Headlights with LED DRLs
Manual Headlight Level Control
Trailer-Sway Control
Star Safety System
3-Point Seatbelts for All Positions
8 Total Airbags (Incl Fr & Rr RSCA)

Optional Equipment

Tire Pressure Monitor System (TPMS)
Toyota Safety Sense P: Pre-Collision Sys
w/ Pedestrian Detection, Dynamic Radar
Cruise Control, Lane Departure Alert w/
Sway Warning Sys, Automatic High Beams

EXTERIOR

6.5' Double-Walled Bed w/Rail Caps
Easy Lower and Lift Tailgate

INTERIOR

40/20/40 Split Fold-Down 4-Way Driver &
4-Way Passenger Adj Front Bench Seat
Single Zone Air Conditioning
Entune Audio 6.1" Touch Screen
w/Backup Camera, AM/FM/CD,
BT Phone/Music, Siri Eyes Free
Power Windows/Door Locks/Heated Mirrors
Remote Keyless Entry System
Engine Immobilizer
Tilt Steering Wheel with Column Shifter

* 2019 Manufacturer's Suggested Retail Price, excludes the Delivery, Processing and Handling Fee, taxes, license, title and available or regionally required equipment. Actual Dealer price may vary. Pricing, specifications, standard features and available equipment are based on information available when this page was produced and subject to change without notice.

Disclaimer: This document is only representative of some of the information contained on an actual window sticker, and is not meant to replace or substitute for the actual window sticker on the vehicle. Please see your retailer for further information.

Steve Sisolak
Governor



Susan Brown
Director

Kimberley Perondi
Deputy Director

**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 14, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Laura E. Freed, Executive Branch Budget Officer
Governor's Finance Office, Budget Division

Subject: BOARD OF EXAMINERS **ACTION** ITEM

The following describes an action item submitted for placement on the agenda of the next Board of Examiners' meeting.

GAMING CONTROL BOARD

Agenda Item Write-up:

Pursuant to NRS 334.010 the Gaming Control Board seeks approval to purchase one new Dodge van for surveillance activities, at a cost not to exceed \$23,728.25.

Additional Information:

The Gaming Control Board was not budgeted for a new vehicle in its main budget account for the 2019-21 biennium. Instead, the Board requests to fund the new vehicle using federal forfeiture funds from Budget Account 4066 (non-executive). The law enforcement-specific equipment is to be added at a separate time by a different vendor than the attached quote from the car dealer.

Statutory Authority:

BOE approval required pursuant to NRS 334.010.

REVIEWED: 
ACTION ITEM: _____



STEVE SISOLAK
Governor

NEVADA GAMING CONTROL BOARD

1919 College Parkway, P.O. Box 8003, Carson City, Nevada 89702
555 E. Washington Avenue, Suite 2600, Las Vegas, Nevada 89101
3650 S. Pointe Circle, Suite 203, P.O. Box 31109, Laughlin, Nevada 89028
557 W. Silver Street, Suite 207, Elko, Nevada 89801
9790 Gateway Drive, Suite 100, Reno, Nevada 89521
750 Pilot Road, Suite I, Las Vegas, Nevada 89119

SANDRA D. MORGAN, *Chairwoman*
TERRY JOHNSON, *Member*
PHIL KATSAROS, *Member*

August 5, 2019

Laura E. Freed
Governor's Finance Office, Budget Division
209 E. Musser Street, Room 200
Carson City, NV 89701

RECEIVED

AUG 12 2019

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Re: Vehicle Purchase Request – Board of Examiners

Dear Laura,

The Nevada Gaming Control Board (Board) requests placement on the agenda for the Board of Examiner's meeting on September 10, 2019 for approval to purchase a vehicle with federal forfeiture money that the Board is authorized to spend pursuant to the Guide to Equitable Sharing for State, Local, and Tribal Law Enforcement Agencies from the United States Department of Justice and the United States Department of the Treasury. The Board requests approval to purchase one Dodge Caravan with a cost of \$23,728.25 for use as an unmarked surveillance van. The Board's intention is to have the van outfitted with a variety of surveillance and law enforcement equipment by a separate vendor. Federal forfeiture money will also be used for such outfitting, for which the Board will seek approval from the Purchasing Division of the Department of Administration at a later date.

One of the primary methods of obtaining intelligence on suspects of criminal investigations relating to illegal gambling operations is conducting physical surveillance by observation from and on automobiles. This vehicle will enable the Board to conduct covert operations while concealing the identity of the Board's agents, while also ensuring their safety during such operations.

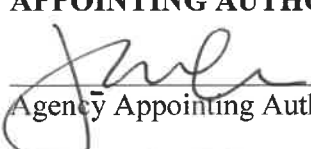
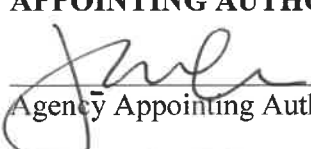
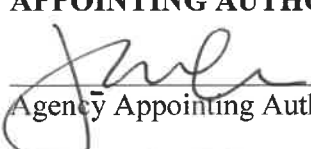
If you have any questions or concerns relating to this purchase, please do not hesitate to contact me.

Sincerely,

Michael K. Morton
Senior Research Specialist

cc: Sandra Douglass Morgan, Chairwoman
Karl Bennison, Chief, Enforcement Division

Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010

Agency Name: Gaming Control Board	Budget Account #: 4066			
Contact Name: Michael Morton	Telephone Number: 775-684-7792			
<p>Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:</p> <p>Number of vehicles requested: 1 Amount of the request: \$23,728.25</p> <p>Is the requested vehicle(s) new or used: New</p> <p>Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: Minivan</p> <p>Mission of the requested vehicle(s): To investigate and surveil possible illegal gaming operations in Nevada</p>				
Were funds legislatively approved for the request? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, please provide the decision unit number: If no, please explain how the vehicles will be funded? Federal forfeiture money			
<p>Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s):</p> <p><input checked="" type="checkbox"/> 1 Addition(s) <input type="checkbox"/> Replacement(s)</p>				
<p>Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1314? If not, please explain.</p> <p>As this van will be outfitted as a law enforcement vehicle, it is exempt from the provisions of SAM 1314.</p>				
<p>Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.)</p> <p>Current Vehicle Information: Vehicle #1 Model Year: Odometer Reading: Type of Vehicle:</p> <hr/> <p>Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:</p> <hr/> <p><i>Please attach an additional sheet if necessary</i></p>	<p>Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced.</p> <hr/> <p>If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.</p>			
<p>APPOINTING AUTHORITY APPROVAL:</p> <table style="width: 100%; border: none;"><tr><td style="width: 40%; text-align: center; vertical-align: bottom;"> _____ Agency Appointing Authority</td><td style="width: 30%; text-align: center; vertical-align: bottom;">Chief, Admin. Div _____ Title</td><td style="width: 30%; text-align: center; vertical-align: bottom;">8.5.19 _____ Date</td></tr></table>		 _____ Agency Appointing Authority	Chief, Admin. Div _____ Title	8.5.19 _____ Date
 _____ Agency Appointing Authority	Chief, Admin. Div _____ Title	8.5.19 _____ Date		
<p>BOARD OF EXAMINERS' APPROVAL:</p> <p><input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase</p> <hr/> <table style="width: 100%; border: none;"><tr><td style="width: 50%; text-align: center;">Board of Examiners</td><td style="width: 50%; text-align: center;">Date</td></tr></table>		Board of Examiners	Date	
Board of Examiners	Date			

CARSON DODGE CHRYSLER JEEP



RAM

DODGE



CHRYSLER



Jeep

www.CarsonDodge.com

8-5-19

State of Nevada
Gaming Control Board
Attn: Michael Morton
Re: State of Nevada Contract 99SWC-S490; Section 4.1

2019 Dodge Grand Caravan FWD

Base Price Reno/Carson City
\$22,300.00
Security Alarm
\$174.00
Power Drivers Seat
\$352.00
Compact Spare Tire
\$352.00
Rear Park Assist
\$263.00
Load Leveling/Height Control
\$258.00
State of Nevada Title Fee
\$29.25

Total with Options:
\$23,728.25

Exterior Color-Billet Silver
Interior Color- Light Graystone/Black; Cloth

Please let me know if you have any questions,

Joel Cryer

Steve Sisolak
Governor



Susan Brown
Director

Kimberley Perondi
Deputy Director

**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 12, 2019
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Bridgette Garrison, Executive Branch Budget Officer
Governor's Finance Office, Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

A handwritten signature in blue ink, appearing to be "B. Garrison", is written over the "From:" line of the memo.

The following describes an action item submitted for placement on the agenda of the next Board of Examiners' meeting.

DEPARTMENT OF PUBLIC SAFETY – FIRE MARSHAL

Agenda Item Write-up:

Pursuant to NRS 334.010 the Department of Public Safety's Fire Marshal requests approval to purchase two additional vehicles for a total amount not to exceed \$85,234 during Fiscal Year 2020.

Additional Information:


The request is to purchase one Ford F-250 XLT 4x4 Diesel to be stationed in Carson City for the Training Bureau and one Ford F-250 XLT to be stationed in Las Vegas for the Investigation Bureau. The agency's 2019-21 legislatively approved budget provided funding for these vehicles. The Fire Marshal's Training Bureau was budgeted \$40,578 for one new vehicle in decision unit E235 and Fire Marshal's Investigation Bureau was budgeted \$40,788 in decision unit E239 for a total of \$81,366. The additional \$3,868 cost for the Training Bureau Ford F-250 Diesel will be 50% State Emergency Response Commission (SERC) funds and 50% Nevada Department of Environmental Protection (NDEP) funds.

Statutory Authority:

BOE approval required pursuant to NRS 334.010.

REVIEWED: _____
ACTION ITEM: _____

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: DPS State Fire Marshal		Budget Account #: 3816
Contact Name: Kristi Defer, ASO 1		Telephone Number: 775-684-7508
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:		
Number of vehicles requested: <u>2</u>		Amount of the request: <u>\$85,233.46</u>
Is the requested vehicle(s) new or used: <u>New</u>		
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:		
Mission of the requested vehicle(s): <u>Vehicles will be utilized for state business, towing/hauling equipment, and emergency response.</u>		
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please provide the decision unit number: <u>E235 and E239</u> If no, please explain how the vehicles will be funded? <u>Additional cost of diesel truck will be funded via work program C48174</u>
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input checked="" type="checkbox"/> <u>2</u> Addition(s) <input type="checkbox"/> Replacement(s)		
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1314? If not, please explain. <u>No - exempt per NAC 486A.125 as vehicles would be utilized for emergency response in a state emergency.</u>		
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) <u>Current Vehicle Information:</u> Vehicle #1 Model Year: Odometer Reading: Type of Vehicle: Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:		Does this request meet the replacement schedule criteria pursuant to SAM 1316? If no, explain why the vehicle is being replaced. If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>		
APPOINTING AUTHORITY APPROVAL:		
 _____ Agency Appointing Authority		_____ Chief, State Fire Marshal Title
		_____ 8/12/19 Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
_____ Board of Examiners		_____ Date

Steve Sisolak
Governor



Nevada Department of
Public Safety
DEDICATION PRIDE SERVICE

George Togliatti
Director

Bart J. Chambers
State Fire Marshal


Nevada State Fire Marshal Division

Stewart Facility
107 Jacobsen Way
Carson City, NV 89711
Telephone (775) 684-7501 • Fax (775) 684-7518

Memorandum

DATE: August 12, 2019

TO: Natasha Kephart, Budget Analyst III
DPS Director's Office

FROM: Kristi Defer, ASO I 

SUBJECT: Request for Approval to Purchase 2 State Vehicles

Attached are the forms and backup documentation as required by the Board of Examiners requesting approval to purchase 2 state vehicles pursuant to NRS 334.010. The cost of the vehicles is \$85,233.46 to include vehicle build costs, DMV Title, and DRS Fees. One vehicle will be stationed in Carson City for the Training Bureau and the other will be stationed in Las Vegas for the Investigation Bureau. The funding for the Training vehicle will be 50% State Emergency Response Commission (SERC) and 50% Nevada Department of Environmental Protection (NDEP). The funding for the Investigation vehicle will be 100% General Fund. Purchase of the vehicles is contingent upon BOE approval. If you have any questions, please feel free to contact me.

Training Vehicle: 2019 F-250 4x4 Diesel

Description	Cost	
Base Price (Reno, Carson City, or Las Vegas delivery)	\$	44,655.00
XL Value Package	\$	1,600.00
Transfer Case & Fuel Tank Skid Plates	\$	100.00
Engine Block Heater	\$	100.00
Platform Running Boards	\$	445.00
Tough Bed Spray-In Bedliner	\$	595.00
Upfitter switches	\$	165.00
Daytime Running Lamps	\$	45.00
Engine: 6.7L 4V OHV Power Stroke V8 Turbo Diesel B20	\$	9,120.00
Transmission Power Take-Off Provision	\$	280.00
Electronic Locking w/3.55 Axle Ratio	\$	390.00
Camper Package	\$	160.00
Destination Charge	\$	1,595.00
GPC Nevada Cost Adjustment	\$	(8,000.00)
Discount	\$	(4,130.94)
	Total	\$ 47,119.06
DMV and DRS Fees	\$	29.25
	Total Cost	\$ 47,148.31

Investigation Vehicle: 2019 F-250 4x4

Description	Cost	
Base Price (Reno, Carson City, or Las Vegas delivery)	\$	44,655.00
XLT Value Package	\$	1,600.00
Transfer Case & Fuel Tank Skid Plates	\$	100.00
Engine Block Heater	\$	100.00
Platform Running Boards	\$	445.00
Tough Bed Spray-In Bedliner	\$	595.00
Upfitter switches	\$	165.00
Daytime Running Lamps	\$	45.00
Destination Charge	\$	1,595.00
GPC Nevada Cost Adjustment	\$	(8,000.00)
Discount	\$	(3,244.10)
	Total	\$ 38,055.90
DMV and DRS Fees	\$	29.25
	Total Cost	\$ 38,085.15

Total Cost for Purchase of 2 Vehicles for Fire Marshal **\$ 85,233.46**

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2020 Ford F-250 XLT 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT		
Dealer Name:	Capital Ford		
Delivery Location:	Carson City		
Vehicle Colors:	Exterior: Oxford White	Interior: Medium Earth Gray	X Cloth <input type="checkbox"/> Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 44,655	\$ 44,655
SPECIFY OPTIONS: (description)			
Options Package (see attached detail)	1	\$3,880	
Engine: 6.7L 4V OHV Power Stroke V8 Turbo Diesel B20	1	\$9,120	
Vehicle Destination Charge	1	\$1,595	
GPC Nevada Cost Adjustment	1	\$(8,000.00)	
Discount	1	\$(4,130.94)	
		\$	
		\$	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$47,119.06
DMV Title and DRS Fee's		\$29.25	\$47,148.31
GRAND TOTAL:			\$47,148.31

Registered Owner:	Agency Name & Address: Dept. of Pub Safety Fire Marshal Div 107 Jacobsen Way Carson City, NV 89711
Legal Owner:	Agency Name & Address: Dept. of Pub Safety Fire Marshal Div 107 Jacobsen Way Carson City, NV 89711
County Vehicle Based In:	Carson City
Name & Phone of Person to contact when vehicle is ready for delivery:	Bart Chambers 775-684-7506

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2020 Ford F-250 XLT 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT		
Dealer Name:	Capital Ford		
Delivery Location:	Carson City		
Vehicle Colors:	Exterior: Oxford White	Interior: Medium Earth Gray	X Cloth <input type="checkbox"/> Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 44,655	\$ 44,655
SPECIFY OPTIONS: (description)			
Options Package (see attached detail)	1	\$3,050	
Vehicle Destination Charge	1	\$1,595	
GPC Nevada Cost Adjustment	1	\$(8,000.00)	
Discount	1	\$(3,244.10)	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)			
Total purchase price with options			\$38,055.90
DMV Title and DRS Fee's		\$29.25	\$38,085.15
GRAND TOTAL:			\$38,085.15

Registered Owner:	Agency Name & Address: Dept. of Pub Safety Fire Marshal Div 107 Jacobsen Way Carson City, NV 89711
Legal Owner:	Agency Name & Address: Dept. of Pub Safety Fire Marshal Div 107 Jacobsen Way Carson City, NV 89711
County Vehicle Based In:	Clark County
Name & Phone of Person to contact when vehicle is ready for delivery:	Bart Chambers 775-684-7506

~ STATE AGENCIES ONLY ~
VEHICLE ORDER JUSTIFICATION SHEET
(This form must accompany requisition)

Agency 656 - Fire Marshal RX No. _____

Contact Kristi Defer Phone No. 775-684-4509

Pursuant to NRS 333.340 if an agency is not purchasing from the lowest responsible dealer, the Purchasing Division must notify the dealer with the lowest price for the vehicle type you have requested of the reasons for this purchase.

Please check all that apply below:

- ☒ Dealer is located in close proximity to the area of vehicle deployment for service, parts and warranty support to the agency - Carson City
- ☒ Dealer has historically provided favorable service to the agency concerning cost of ownership issues
- ☒ Vehicle is compatible with other agency vehicles providing for standardized operation and maintenance including parts management
- ☒ Vehicle requested is best suited for the purpose to be used
- ☒ Vehicles of this make have a good cost of ownership record within the agency
- ☒ If this vehicle does not meet "Smart Way or Smart Way Elite" requirements, agency must provide detailed justification
Per NAC 486A.135, vehicles will be used for
emergency response and transport during a statewide
emergency
- ☐ Other justification

-----State Purchasing use only-----

____ Approved ____ Disapproved by _____ date _____

If disapproved awarded dealer _____

Reason _____

Kristi Defer

From: Timothy Smith <tsmith@capitalfordonline.com>
Sent: Monday, August 12, 2019 11:18 AM
To: Kristi Defer
Subject: proposal.pdf
Attachments: proposal.pdf



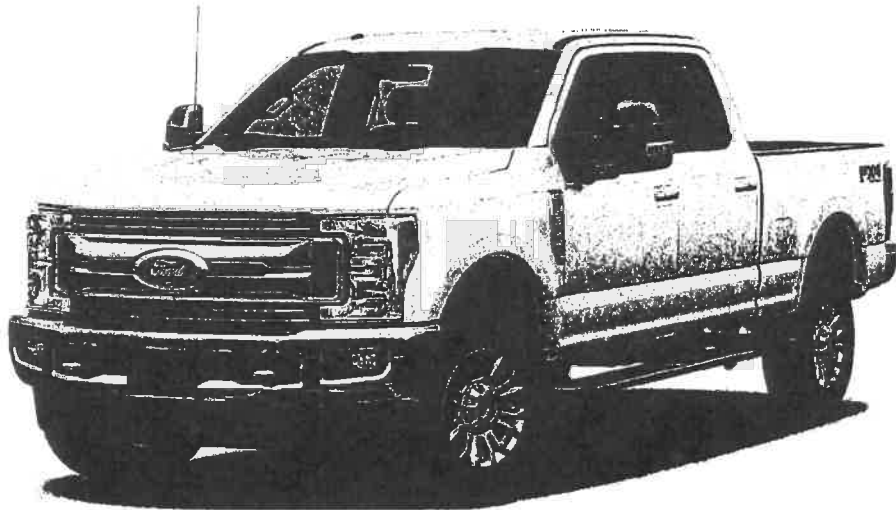
Hi, we do not have 2020 pricing yet. The only difference will be the 10 speed transmission. Please use 2019 Pricing. I will honor that for the 2020.

Tim Smith
Capital Ford
Commercial Account Manager
3660 S. Carson St.
Carson City, Nv. 89706
Ph: 775-882-5353 ext. 183
Fax: 775-882-8071
Email: tsmith@capitalfordonline.com

Diesel

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950



Client Proposal

Prepared by:

TIMOTHY SMITH

Office: 775-882-5353

Date: 08/12/2019



Capital Ford | 3660 South Carson Street, Carson City, Nevada, 897015579

Office: 775-882-5353 | Fax: 775-882-8071



Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Selected Equip & Specs

Dimensions

- Exterior length: 250.0"
- Exterior width: 80.0"
- Wheelbase: 160.0"
- Rear track: 67.2"
- Min ground clearance: 8.2"
- Rear legroom: 43.6"
- Rear headroom: 40.4"
- Rear hiproom: 64.7"
- Rear shoulder room: 65.9"
- Approach angle: 17.9 deg
- Cargo volume: 52.1cu.ft.
- Box length: 81.9"
- Cab to axle: 39.9"
- Exterior height: 81.5"
- Front track: 68.3"
- Turning radius: 26.5'
- Front legroom: 43.9"
- Front headroom: 40.8"
- Front hiproom: 62.5"
- Front shoulder room: 66.7"
- Passenger volume: 131.7cu.ft.
- Departure angle: 22.1 deg
- Maximum cargo volume: 52.1cu.ft.

Powertrain

- * **Powerstroke 450hp 6.7L OHV 32 valve intercooled turbo V-8 engine with diesel direct injection**
- federal
- Part-time
- Fuel Economy Highway: N/A
- * **Recommended fuel : diesel**
- TorqShift-G 6 speed automatic transmission with overdrive
- Fuel Economy Cty: N/A
- * **Transmission PTO provision**

Suspension/Handling

- Front Mono-beam non-independent suspension with anti-roll bar, HD shocks
- Firm ride Suspension
- Front and rear 18 x 8 silver aluminum wheels
- * **Rear rigid axle leaf spring suspension with anti-roll bar, HD shocks**
- Hydraulic power-assist re-circulating ball Steering
- LT275/65SR18 EBSW AS front and rear tires

Body Exterior

- 4 doors
- Conventional right rear passenger
- Turn signal indicator in mirrors
- Chrome bumpers
- Class V trailer hitch with with brake controller and trailer sway control
- Trailer harness
- Clearcoat paint
- 2 front tow hook(s)
- Conventional left rear passenger
- Driver and passenger power remote heated, manual folding door mirrors with turn signal indicator
- Black door mirrors
- * **Running boards**
- Bed-rail protectors
- Box style: regular
- Front and rear 18 x 8 wheels

Convenience

- Manual air conditioning with air filter
- Power windows
- Cruise control with steering wheel controls
- Driver and passenger 1-touch up

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.



Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Selected Equip & Specs (cont'd)

- Driver and passenger 1-touch down
- Manual tilt steering wheel
- Day-night rearview mirror
- 911 Assist emergency SOS
- AppLink smart device integration
- Front and rear cupholders
- Full overhead console
- Rear door bins
- Remote power door locks with 2 stage unlock and illuminated entry
- Manual telescopic steering wheel
- * **Power adjustable pedals**
- Wireless phone connectivity
- 2 1st row LCD monitors
- Dual visor mirrors
- Driver and passenger door bins
- * **Upfitter switches**

Seats and Trim

- Seating capacity of 6
- * **8-way 6-way power driver seat adjustment**
- * **Power height adjustable driver seat**
- * **Manual passenger lumbar support**
- 60-40 folding rear split-bench seat
- Metal-look instrument panel insert
- Front 40-20-40 split-bench seat
- Manual driver lumbar support
- 4-way passenger seat adjustment
- Centre front armrest with storage
- Cloth seat upholstery

Entertainment Features

- SiriusXM AM/FM/Satellite radio with radio data system
- Steering wheel mounted radio controls
- Streaming audio
- SYNC external memory control
- 7 speakers
- Fixed antenna

Lighting, Visibility and Instrumentation

- Halogen aero-composite headlights
- Fully automatic headlights
- Variable intermittent front windshield wipers
- Front and rear reading lights
- Compass
- Camera(s) - rear
- Trip computer
- Trip odometer
- Delay-off headlights
- * **Front fog lights**
- Deep tinted windows
- Tachometer
- Outside temperature display
- Low tire pressure warning
- * **Parking sensors**

Safety and Security

- 4-wheel ABS brakes
- 4-wheel disc brakes
- ABS and driveline traction control
- Dual seat mounted side impact airbag supplemental restraint system
- Remote activated perimeter/approach lighting
- Security system with SecuriLock immobilizer
- Brake assist with hill hold control
- Electronic stability control
- Dual front impact airbag supplemental restraint system
- Safety Canopy System curtain 1st and 2nd row overhead airbag supplemental restraint system
- Power remote door locks with 2 stage unlock and panic alarm
- MyKey restricted driving mode

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.



Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Selected Equip & Specs (cont'd)

- Manually adjustable front head restraints with tilt
- 3 manually adjustable rear head restraints

Dimensions

General Weights

*Curb	7,434 lbs.	GVWR	10,000 lbs.
*Payload	2,670 lbs.		

Front Weights

*Front GAWR	5,600 lbs.	*Front curb weight	4,532 lbs.
Front axle capacity	6,000 lbs.	*Front spring rating	5,600 lbs.
Front tire/wheel capacity	6,830 lbs.		

Rear Weights

Rear GAWR	6,340 lbs.	*Rear curb weight	2,902 lbs.
Rear axle capacity	6,200 lbs.	Rear spring rating	6,340 lbs.
Rear tire/wheel capacity	6,830 lbs.		

Trailer Type

Type	Regular	Harness	Yes
Class	V	Hitch	Yes
Brake controller	Yes	Trailer sway control	Yes

General Trailering

*5th-wheel towing capacity	14800 lbs.	*Gooseneck towing capacity	14800 lbs.
*Towing capacity	15000 lbs.	*GCWR	23500 lbs.

Fuel Tank type

Capacity	34 gal.
----------	---------

Off Road

Approach angle	18 deg	Departure angle	22 deg
Ramp breakover angle	23 deg	Min ground clearance	8"
Load floor height	38"		

Exterior cargo

Length	81.9"	Minimum width	50.5"
Volume	65.4 cu.ft.	Pickup box depth	21.1"
Maximum width	66.9"	Tailgate width	60.5"

Interior cargo

Cargo volume	52.1 cu.ft.	Maximum cargo volume	52.1 cu.ft.
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Powertrain

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.



Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Selected Equip & Specs (cont'd)

Engine Type

* Brand	Powerstroke	Block material	Iron
Cylinders	V-8	Head material	Aluminum
* Ignition	Compression	* Injection	Diesel direct injection
* Liters	6.7L	Orientation	Longitudinal
* Recommended fuel	Diesel	* Valves per cylinder	4
* Valvetrain	OHV	* Forced induction	Intercooled turbo

Engine Spec

* Bore	3.90"	* Compression ratio	16.2:1
* Displacement	406 cu.in.	* Stroke	4.25"

Engine Power

SAEJ1349 AUG2004 compliant	Yes	* Output	450 HP @ 2,800 RPM
* Torque	935 ft.-lb @ 1,800 RPM		

Alternator

Amps	157
------	-----

Battery

Amp hours	78	Cold cranking amps	750
Run down protection	Yes	* Type	Dual

Engine Extras

* Block heater	Yes
----------------	-----

Transmission

Electronic control	Yes	Lock-up	Yes
Overdrive	Yes	Speed	6
Type	Automatic		

Transmission Gear Ratios

* 1st	3.974	* 2nd	2.318
* 3rd	1.516	* 4th	1.149
* 5th	0.858	* 6th	0.674
* Reverse Gear ratios	3.128		

Transmission Torque Converter

* Stall ratio	1.90
---------------	------

Transmission Extras

Driver selectable mode	Yes	Sequential shift control	SelectShift
* PTO provision	Yes		

Drive Type

4wd type	Part-time	Type	Four-wheel
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Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.



Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Pricing Summary - Single Vehicle

		MSRP
<i>Vehicle Pricing</i>		
Base Vehicle Price		\$44,655.00
Options & Colors		\$13,000.00
Upfitting		\$0.00
Destination Charge		\$1,595.00
Subtotal		\$59,250.00
<i>Pre-Tax Adjustments</i>		
Code	Description	
GPC Nevada		-\$8,000.00
Subtotal		\$51,250.00
<i>Discount Adjustments</i>		
Discount		-\$4,130.94
Total		\$47,119.06

Customer Signature

Acceptance Date

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.



Prepared by: TIMOTHY SMITH

08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Major Equipment

(Based on selected options, shown at right)
Powerstroke 6.7L V-8 OHV w/diesel direct injection 450hp
TorqShift-G 6 speed automatic w/OD

- * Rear locking differential driver selectable
- * Brake assistance
- * LT 275/65R18 E BSW AS S-rated tires
- * Firm suspension
- * Air conditioning
- * SiriusXM AM/FM/Satellite with seek-scan, external memory control
- * Daytime running
- * Variable intermittent wipers
- * Dual front airbags
- * Securilock immobilizer
- * Message Center
- * Reclining front split-bench seats
- * Running boards
- * Class V hitch
- * Rear axle capacity: 6200 lbs.
- * Rear spring rating: 6340 lbs.
- * Frame Yield Strength 50000 psi
- * Transmission PTO Provision

Exterior: Oxford White

Interior: Medium Earth Gray

- * 4-wheel ABS
- * Traction control
- * Battery with run down protection
- * Advance Trac w/Roll Stability Control
- * Tinted glass
- * Bluetooth streaming audio
- * Dual power remote heated mirrors
- * 18 x 8 aluminum wheels
- * Driver and front passenger seat mounted side airbags
- * Tachometer
- * Underseat ducts
- * 60-40 folding rear split-bench
- * Audio control on steering wheel
- * Front axle capacity: 6000 lbs.
- * Front spring rating: 5600 lbs.
- * Frame section modulus: 10.7 cu.in.
- * Cab to axle: 39.9"

As Configured Vehicle	MSRP
STANDARD VEHICLE PRICE	\$44,655.00
Order Code 603A	N/C
GVWR: 10,000 lb Payload Package	Included
Tires: LT275/65Rx18E BSW A/S	Included
Wheels: 18" Sparkle Silver Painted Cast Aluminum	Included
Cloth 40/20/40 Split Bench Seat.	Included
160" Wheelbase	STD
Monotone Paint Application	STD
Radio: AM/FM Stereo/MP3 Player	Included
50-State Emissions System	STD
SYNC Communications & Entertainment System	Included
SiriusXM Radio	Included
XLT Value Package	\$1,600.00
Autolock/Auto Unlock	Included
Fog Lamps	Included
Power-Adjustable Pedals	Included
8-Way Power Driver's Seat	Included
Reverse Sensing System	Included
SecuriCode Driver's Side Keyless Entry Keypad	Included

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.



Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

~~Price: \$78,859~~
Price: \$78,859 my

City
N/A



Hwy
N/A

As Configured Vehicle	MSRP
Transfer Case & Fuel Tank Skid Plates	\$100.00
Engine Block Heater	\$100.00
Platform Running Boards	\$445.00
Tough Bed Spray-In Bedliner	\$595.00
Uplifter Switches (6)	\$165.00
Daytime Running Lamps (DRL) (LPO)	\$45.00
Fleet Advertising Credit	\$0.00
Oxford White	N/C
Medium Earth Gray	N/C
Engine: 6.7L 4V OHV Power Stroke V8 Turbo Diesel B20	\$9,120.00
Transmission: TorqShift 6-Speed Automatic	N/C
Dual 78-AH 750 CCA Batteries	Included
34 Gallon Fuel Tank	Included
Transmission Power Take-Off Provision	\$280.00
Electronic-Locking w/3.55 Axle Ratio	\$390.00
Camper Package	\$160.00
Rear Stabilizer Bar	Included

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.



Prepared by: TIMOTHY SMITH

08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

As Configured Vehicle		MSRP
SUBTOTAL		\$57,655.00
Destination Charge		\$1,595.00
TOTAL		\$59,250.00

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.

Gas

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950



Client Proposal

Prepared by:

TIMOTHY SMITH

Office: 775-882-5353

Date: 08/12/2019



Capital Ford | 3660 South Carson Street, Carson City, Nevada, 897015579

Office: 775-882-5353 | Fax: 775-882-8071



Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Selected Equip & Specs

Dimensions

- Exterior length: 250.0"
- Exterior width: 80.0"
- Wheelbase: 160.0"
- Rear track: 67.2"
- Min ground clearance: 8.2"
- Rear legroom: 43.6"
- Rear headroom: 40.4"
- Rear hiproom: 64.7"
- Rear shoulder room: 65.9"
- Approach angle: 17.9 deg
- Cargo volume: 52.1cu.ft.
- Box length: 81.9"
- Cab to axle: 39.9"
- Exterior height: 81.5"
- Front track: 68.3"
- Turning radius: 26.5'
- Front legroom: 43.9"
- Front headroom: 40.8"
- Front hiproom: 62.5"
- Front shoulder room: 66.7"
- Passenger volume: 131.7cu.ft.
- Departure angle: 22.1 deg
- Maximum cargo volume: 52.1cu.ft.

Powertrain

- 385hp 6.2L SOHC 16 valve V-8 engine with variable valve control, SMPI
- federal
- Part-time
- Fuel Economy Highway: N/A
- Recommended fuel : regular unleaded
- TorqShift-G 6 speed automatic transmission with overdrive
- Fuel Economy Cty: N/A

Suspension/Handling

- Front Mono-beam non-independent suspension with anti-roll bar, HD shocks
- Firm ride Suspension
- Front and rear 18 x 8 silver aluminum wheels
- Rear rigid axle leaf spring suspension with HD shocks
- Hydraulic power-assist re-circulating ball Steering
- LT275/65SR18 EBSW AS front and rear tires

Body Exterior

- 4 doors
- Conventional right rear passenger
- Turn signal indicator in mirrors
- Chrome bumpers
- Class V trailer hitch with with brake controller and trailer sway control
- Trailer harness
- Clearcoat paint
- 2 front tow hook(s)
- Conventional left rear passenger
- Driver and passenger power remote heated, manual folding door mirrors with turn signal indicator
- Black door mirrors
- * **Running boards**
- Bed-rail protectors
- Box style: regular
- Front and rear 18 x 8 wheels

Convenience

- Manual air conditioning with air filter
- Power windows
- Cruise control with steering wheel controls
- Driver and passenger 1-touch up

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.



Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Selected Equip & Specs (cont'd)

- Driver and passenger 1-touch down
- Manual tilt steering wheel
- Day-night rearview mirror
- 911 Assist emergency SOS
- AppLink smart device integration
- Front and rear cupholders
- Full overhead console
- Rear door bins
- Remote power door locks with 2 stage unlock and illuminated entry
- Manual telescopic steering wheel
- * **Power adjustable pedals**
- Wireless phone connectivity
- 2 1st row LCD monitors
- Dual visor mirrors
- Driver and passenger door bins
- * **Upfitter switches**

Seats and Trim

- Seating capacity of 6
- * **8-way 6-way power driver seat adjustment**
- * **Power height adjustable driver seat**
- * **Manual passenger lumbar support**
- 60-40 folding rear split-bench seat
- Metal-look instrument panel insert
- Front 40-20-40 split-bench seat
- Manual driver lumbar support
- 4-way passenger seat adjustment
- Centre front armrest with storage
- Cloth seat upholstery

Entertainment Features

- SiriusXM AM/FM/Satellite radio with radio data system
- Steering wheel mounted radio controls
- Streaming audio
- SYNC external memory control
- 7 speakers
- Fixed antenna

Lighting, Visibility and Instrumentation

- Halogen aero-composite headlights
- Fully automatic headlights
- Variable intermittent front windshield wipers
- Front and rear reading lights
- Oil pressure gauge
- Outside temperature display
- Low tire pressure warning
- * **Parking sensors**
- Delay-off headlights
- * **Front fog lights**
- Deep tinted windows
- Tachometer
- Compass
- Camera(s) - rear
- Trip computer
- Trip odometer

Safety and Security

- 4-wheel ABS brakes
- 4-wheel disc brakes
- ABS and driveline traction control
- Dual seat mounted side impact airbag supplemental restraint system
- Remote activated perimeter/approach lighting
- Security system with SecuriLock immobilizer
- Brake assist with hill hold control
- Electronic stability control
- Dual front impact airbag supplemental restraint system
- Safety Canopy System curtain 1st and 2nd row overhead airbag supplemental restraint system
- Power remote door locks with 2 stage unlock and panic alarm
- MyKey restricted driving mode

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Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Selected Equip & Specs (cont'd)

- Manually adjustable front head restraints with tilt
- 3 manually adjustable rear head restraints

Dimensions

General Weights

* Curb	6,585 lbs.	GVWR	10,000 lbs.
Payload	3,480 lbs.		

Front Weights

Front GAWR	4,800 lbs.	* Front curb weight	3,873 lbs.
Front axle capacity	6,000 lbs.	Front spring rating	4,800 lbs.
Front tire/wheel capacity	6,830 lbs.		

Rear Weights

Rear GAWR	6,340 lbs.	* Rear curb weight	2,713 lbs.
Rear axle capacity	6,200 lbs.	Rear spring rating	6,340 lbs.
Rear tire/wheel capacity	6,830 lbs.		

Trailer Type

Type	Regular	Harness	Yes
Class	V	Hitch	Yes
Brake controller	Yes	Trailer sway control	Yes

General Trailering

5th-wheel towing capacity	12500 lbs.	Gooseneck towing capacity	12500 lbs.
Towing capacity	12500 lbs.	GCWR	19500 lbs.

Fuel Tank type

Capacity	34 gal.
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Off Road

Approach angle	18 deg	Departure angle	22 deg
Ramp breakover angle	23 deg	Min ground clearance	8 "
Load floor height	38 "		

Exterior cargo

Length	81.9 "	Minimum width	50.5 "
Volume	65.4 cu.ft.	Pickup box depth	21.1 "
Maximum width	66.9 "	Tailgate width	60.5 "

Interior cargo

Cargo volume	52.1 cu.ft.	Maximum cargo volume	52.1 cu.ft.
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Powertrain

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Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Selected Equip & Specs (cont'd)

Engine Type

Block material	Iron	Cylinders	V-8
Head material	Aluminum	Ignition	Spark
Injection	Sequential MPI	Liters	6.2L
Orientation	Longitudinal	Recommended fuel	Regular unleaded
Valves per cylinder	2	Valvetrain	SOHC
Variable valve control	Yes		

Engine Spec

Bore	4.02"	Compression ratio	9.8:1
Displacement	379 cu.in.	Stroke	3.74"

Engine Power

SAEJ1349 AUG2004 compliant	Yes	Output	385 HP @ 5,750 RPM
Torque	430 ft.-lb @ 3,800 RPM		

Alternator

Amps	157
------	-----

Battery

Amp hours	78	Cold cranking amps	750
Run down protection	Yes	Type	HD

Engine Extras

* Block heater	Yes
----------------	-----

Transmission

Electronic control	Yes	Lock-up	Yes
Overdrive	Yes	Speed	6
Type	Automatic		

Transmission Gear Ratios

1st	4.17	2nd	2.34
3rd	1.52	4th	1.14
5th	0.87	6th	0.69
Reverse Gear ratios	3.4		

Transmission Torque Converter

Stall ratio	2.01
-------------	------

Transmission Extras

Driver selectable mode	Yes	Sequential shift control	SelectShift
Oil cooler	Regular duty		

Drive Type

4wd type	Part-time	Type	Four-wheel
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Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Pricing Summary - Single Vehicle

MSRP

Vehicle Pricing

Base Vehicle Price	\$44,655.00
Options & Colors	\$3,050.00
Upfitting	\$0.00
Destination Charge	\$1,595.00
Subtotal	\$49,300.00

Pre-Tax Adjustments

Code	Description	
GPC Nevada		-\$8,000.00
Subtotal		\$41,300.00

Discount Adjustments

Discount	-\$3,244.10
----------	-------------

Total	\$38,055.90
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Customer Signature

Acceptance Date

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Prepared by: TIMOTHY SMITH
08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

Major Equipment

(Based on selected options, shown at right)

6.2L V-8 SOHC w/SMP1 385hp TorqShift-G 6 speed automatic w/OD	Exterior: Oxford White Interior: Medium Earth Gray
* 4-wheel ABS	* Brake assistance
* Traction control	* LT 275/65R18 E BSW AS S-rated tires
* Battery with run down protection	* Firm suspension
* Advance Trac w/Roll Stability Control	* Air conditioning
* Tinted glass	* SiriusXM AM/FM/Satellite with seek-scan, external memory control
* Bluetooth streaming audio	* Daytime running
* Dual power remote heated mirrors	* Variable intermittent wipers
* 18 x 8 aluminum wheels	* Dual front airbags
* Driver and front passenger seat mounted side airbags	* Securilock immobilizer
* Tachometer	* Message Center
* Underseat ducts	* Reclining front split-bench seats
* 60-40 folding rear split-bench	* Running boards
* Audio control on steering wheel	* Class V hitch
* Front axle capacity: 6000 lbs.	* Rear axle capacity: 5200 lbs.
* Front spring rating: 4800 lbs.	* Rear spring rating: 6340 lbs.
* Frame section modulus: 10.7 cu.in.	* Frame Yield Strength 50000 psi
* Cab to axle: 39.9"	

Fuel Economy

As Configured Vehicle	MSRP
STANDARD VEHICLE PRICE	\$44,655.00
Order Code 603A	N/C
Engine: 6.2L 2-Valve SOHC EFI NA V8 Flex-Fuel	Included
Transmission: TorqShift-G 6-Spd Auto w/SelectShift	Included
3.73 Axle Ratio	Included
GVWR: 10,000 lb Payload Package	Included
Tires: LT275/65Rx18E BSW AS	Included
Wheels: 18" Sparkle Silver Painted Cast Aluminum	Included
Cloth 40/20/40 Split Bench Seat	Included
160" Wheelbase	STD
Monotone Paint Application	STD
Radio: AM/FM Stereo/MP3 Player	Included
50-State Emissions System	STD
SYNC Communications & Entertainment System	Included
SiriusXM Radio	Included
XLT Value Package	\$1,600.00
Autolock/Auto Unlock	Included
Fog Lamps	Included
Power-Adjustable Pedals	Included

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.




Prepared by: TIMOTHY SMITH

08/12/2019

Capital Ford | 3660 South Carson Street Carson City Nevada | 897015579

2019 F-250 4x4 SD Crew Cab 6.75' box 160" WB SRW XLT (W2B)

Price Level: 950

City		Hwy	As Configured Vehicle	MSRP
N/A		N/A	8-Way Power Driver's Seat	Included
			Reverse Sensing System	Included
			SecuriCode Driver's Side Keyless Entry Keypad	Included
			Transfer Case & Fuel Tank Skid Plates	\$100.00
			Engine Block Heater	\$100.00
			Platform Running Boards	\$445.00
			Tough Bed Spray-In Bedliner	\$595.00
			Uplifter Switches (6)	\$165.00
			Daytime Running Lamps (DRL) (LPO)	\$45.00
			Fleet Advertising Credit	\$0.00
			Oxford White	N/C
			Medium Earth Gray	N/C
SUBTOTAL				\$47,705.00
Destination Charge				\$1,595.00
TOTAL				\$49,300.00

Prices and content availability as shown are subject to change and should be treated as estimates only. Actual base vehicle, package and option pricing may vary from this estimate because of special local pricing, availability or pricing adjustments not reflected in the dealer's computer system. See salesperson for the most current information.



**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 13, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Matthew Tuma, Executive Branch Budget Officer
Budget Division

Subject: BOARD OF EXAMINERS **ACTION** ITEM

The following describes an action item submitted for placement on the agenda of the next Board of Examiners' meeting.

DEPARTMENT OF WILDLIFE

Agenda Item Write-up:

Pursuant to NRS 334.010, the Department requests approval to purchase 16 replacement vehicles across multiple budget accounts for a total amount not to exceed \$547,976.

Additional Information:

This request is to purchase 16 vehicles to replace current vehicles that comply with the Vehicle Replacement Policy of SAM 1316. The agency was budgeted for replacement vehicles in E711 decision units for a total of \$614,135 during the 2019 Legislative Session as shown in Table 1 below.

Funding Sources		
BA 4463	E-711	\$151,612
BA 4464	E-711	\$156,814
BA 4465	E-711	\$159,303
BA 4466	E-711	\$38,089
BA 4467	E-711	\$108,317
Total		\$614,135

Table 1: Funding source for Department of Wildlife vehicle purchases.

Statutory Authority:

NRS 334.010

REVIEWED: am

ACTION ITEM: _____

Equipment Schedule

Date: 6/4/19 8:45 AM

Budget Period: 2019-2021 Biennium (FY20-21)

Budget Account: 4463 WILDLIFE - LAW ENFORCEMENT

Version: G01 GOVERNOR RECOMMENDS - Same in LO1

Schedule: EQUIPMENT

DU	Catg	GL	Equipment Type	FY 2020		
				Yr 1 Count	Yr 1 Rate	Yr 1 Total
E711	05	8310	RNO/CC-2.15 4WD TRUCK 3/4T; EXT CAB; S BD	1	\$ 37,903	\$ 37,903
E711	05	8310	RNO/CC-2.15 4WD TRUCK 3/4T; EXT CAB; S BD	1	\$ 37,903	\$ 37,903
E711	05	8310	RNO/CC-2.15 4WD TRUCK 3/4T; EXT CAB; S BD	1	\$ 37,903	\$ 37,903
E711	05	8310	RNO/CC-2.15 4WD TRUCK 3/4T; EXT CAB; S BD	1	\$ 37,903	\$ 37,903

\$151,612 - Total

\$117,449 - Quote Total

Agency Name: <u>Wildlife</u>		Budget Account #: <u>4463</u>	
Contact Name: <u>Liz O'Brien</u>		Telephone Number: <u>775-688-1982</u>	
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:			
Number of vehicles requested: <u>1</u>		Amount of the request: <u>\$28,641</u>	
Is the requested vehicle(s) new or used: <u>New</u>			
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>Pickup</u>			
Mission of the requested vehicle(s): <u>Replace current vehicle with hyl mileage</u>			
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?	
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)			
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>			
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2009</u> Odometer Reading: <u>153,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:		Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
Please attach an additional sheet if necessary			
APPOINTING AUTHORITY APPROVAL: <u>Liz O'Brien</u> <u>Deputy Director</u> <u>7/3/19</u> Agency Appointing Authority Title Date			
BOARD OF EXAMINERS' APPROVAL: <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase _____ Board of Examiners Date			

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>Wildlife</u>	Budget Account #: <u>4463</u>
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1992</u>
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$28,641</u>	
Is the requested vehicle(s) new or used: <u>New</u>	
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>Pickup</u>	
Mission of the requested vehicle(s): <u>Replace current vehicle with high mileage</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> <u> </u> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2009</u> Odometer Reading: <u>181,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL:	
<u>Liz O'Brien</u> Agency Appointing Authority	<u>Deputy Director</u> Title
<u>7/3/19</u> Date	
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
Board of Examiners	Date

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>Wildlife</u>	Budget Account #: <u>4463</u>
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1982</u>
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$ 28,641</u>	
Is the requested vehicle(s) new or used: <u>New</u>	
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>Pickup</u>	
Mission of the requested vehicle(s): <u>Replace current vehicle w/ hyl mileage</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> <u> </u> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2004</u> Odometer Reading: <u>165,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL:	
<u>Liz O'Brien</u> Agency Appointing Authority	<u>Deputy Director</u> Title
<u>7/31/19</u> Date	
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
_____ Board of Examiners	_____ Date

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2.15 – Truck ¾ Ton; Full Size; Extended Cab; Short Bed – CK25753 4x4		
Dealer Name:	Champion Chevrolet		
Delivery Location:	6980 Sierra Center Pkwy., Ste. 120, Reno, NV 89511		
Vehicle Colors:	Exterior: Silver Ice Metallic	Interior: Dark Ash	X Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	3	\$ 27,119	\$81,357
SPECIFY OPTIONS: (description)			\$
Engine Block Heater	3	\$88	
Heavy Duty Alternator (for LE lights/siren)	3	\$132	
Keyless Entry/Trailer Tow	3	\$880	
Skid Plate	3	\$132	
Auxiliary Battery	3	\$135	
Upfitter Switches	3	\$125	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$0	\$
Total purchase price with options		\$28,611	\$85,833
DMV Title and DRS Fee's	3	\$29.25	\$87.75
GRAND TOTAL:			\$85,920.75

Registered Owner:	Agency Name & Address: NV Dept. of Wildlife 6980 Sierra Center Parkway, Ste. 120 Reno, NV 89511
Legal Owner:	Agency Name & Address: NV Dept. of Wildlife 6980 Sierra Center Parkway, Ste. 120 Reno, NV 89511
County Vehicle Based In:	Statewide
Name & Phone of Person to contact when vehicle is ready for delivery:	Tyler Turnipseed 688-1540

STANDARD PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: *2.15 - Truck 3/4 Ton; Full Size; Extended Cab; Short Bed*

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
<i>2019 Chevrolet Silverado - CK25753 4x4</i>	<i>\$27,119.00</i>	<i>\$27,419.00</i>

State vehicle miles per gallon (MPG): *NOT RATED*

Manufactures Suggested Retail Price(MSRP): *\$ 35,360.00*

State manufactures warranty: *3 YR or 36k Miles Bumper to Bumper & 5 YR or 100k Miles Powertrain*

Specify standard engine size and emission rating: *6.0L Vortec V-8 Flex Fuel* *Federal Emission*

Includes Minimum Standard Equipment Listed: *Yes* *X* *No* If no, state exceptions:

AM/FM STEREO W/ USB PORTS, AUX JACK, & SD CARD SLOT CD PLAYER - OPTIONAL SEE BELOW

Exterior Color: List available colors:

***Black, Summit White, Graphite Metallic, Deep Ocean Blue Metallic + \$375.00, Havanah Metallic,
Silver Ice Metallic, Red Hot***

Seats, Cloth: List available colors:

Dark Ash

GVW: *9500(GAS) 10,000(DIESEL)*

WHEELBASE: *144.20*

OPTION PACKAGE PAGE ~BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: *2.15 - Truck 3/4 Ton; Full Size; Extended Cab; Short Bed*

Option Package Name/Code: *1LT* \$4,669.00

List Equipment Features Below:

*17" Machined Aluminum Wheels, Chrome Front/Rear Bumper, Bodyside Moldings, Chrome Grille,
Power Mirrors, Power Windows, Remote Keyless Entry, Deep Tint Glass(Except front Windows),
Premium Cloth, Driver Side Lumbar Control, Carpeted Floor, Rubber Floor Mats, Leather Wrapped Steering Wheel,
Bluetooth, Onstar, Single Slot CD Player*

ITEMIZED OPTION PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - Champion Chevrolet

Vehicle Item Number: 2.15 - Truck 3/4 Ton; Full Size; Extended Cab; Short Bed

		DEDUCT AMOUNT
ABS Brake System	\$ STD	\$- N/A
Air Conditioning	\$ STD	\$- N/A
Backup Camera	\$ STD	\$- N/A
Battery, Auxiliary	\$135.00	\$- N/A
Bedliner, Spray In	\$495.00	\$- N/A
Bluetooth for Phone(Includes My Link Radio)	\$ STD	\$- N/A
Cruise Control	\$ STD	\$- N/A
Deep Tint Glass	\$176.00	\$- N/A
Engine Block Heater	\$88.00	\$- N/A
Four Wheel Drive	\$ STD	\$- N/A
Electronic Transfer Case(Requires 4x4)	\$200.00	\$- N/A
Gear Ratio 4.10	\$ STD	\$- N/A
Heavy Duty Alternator	\$132.00	\$- N/A
Integrated Trailer Brake Controller	\$STD	\$- N/A
Keyless Entry w/Fob (Includes Power Mirrors)	\$880.00	\$- N/A
Keys, Two Additional(4 Total)	\$95.00	\$- N/A
Locking Rear Differential	\$ STD	\$- N/A
Paint, Metallic	\$ STD	\$- N/A
Power Mirrors (Includes Keyless Entry w/Fob)	\$880.00	\$- N/A
Power Locks	\$ STD	\$- N/A
Power Seat(Driver Side)	\$383.00	\$- N/A
Power Windows	\$ STD	\$- N/A
Radio; AM/FM Stereo, CD Player (Incl My Link/Bluetooth)	See Option Package	\$- N/A
Rear Window Defogger	\$198.00	\$- N/A
Seats, Vinyl	\$ Avail @ no extra charge	\$- N/A
Vinyl Colors: Dark Ash		
Skid Plate (Requires 4X4 option)	\$132.00	\$- N/A
Steps, 4" Black Round	\$630.00	\$- N/A
Tilt Steering	\$ STD	\$- N/A
Tire, Spare, Full Size	\$ STD	\$- N/A
Tires, All Terrain	\$200.00	\$- N/A
Trailer Tow Mirrors (Not avail with Power Mirrors)	\$ STD	\$- N/A
Trailer Tow Mirrors-Power (Includes Keyless Entry)	\$880.00	\$- N/A
Trailer Tow Package (Incl 7 & 4 pin connectors)	\$ STD	\$- N/A
Upfitter Switches Bank of 4 @ 30 Amps Each	\$125.00	\$- N/A

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>wildlife</u>	Budget Account #: <u>4463</u>
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1982</u>
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$31,529</u>	
Is the requested vehicle(s) new or used: <u>New</u>	
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:	
Mission of the requested vehicle(s): <u>Pickup</u> <u>Replace vehicle with high mileage</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E 711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2002</u> Odometer Reading: <u>221,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL:	
<u>Liz O'Brien</u> Agency Appointing Authority	<u>Deputy Director</u> Title
<u>7/3/19</u> Date	
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
Board of Examiners	Date

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2.7A – Truck, 1/2 ton, fullsize, crew cab, shortbed		
Dealer Name:	Jones West Ford		
Delivery Location:	6980 Sierra Center Pkwy., Ste. 120, Reno, NV 89511		
Vehicle Colors:	Exterior: Ingot Silver	Interior: Grey	X Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 31,499	\$31,499
SPECIFY OPTIONS: (description)			\$
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$0	
Total purchase price with options		\$31,499	\$31,499
DMV Title and DRS Fee's		\$29.25	\$29.25
GRAND TOTAL:	1	\$31,528.25	\$31,528.25
			\$31,528.25

Registered Owner:	Agency Name & Address: NV Dept. of Wildlife 6980 Sierra Center Parkway, Ste. 120 Reno, NV 89511
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Legal Owner:	Agency Name & Address: NV Dept. of Wildlife 6980 Sierra Center Parkway, Ste. 120 Reno, NV 89511
County Vehicle Based In:	Statewide
Name & Phone of Person to contact when vehicle is ready for delivery:	Tyler Turnipseed 688-1540

STANDARD PAGE ~ BID #99SWC-S490 - FLEET VEHICLES ~ UPDATED 2019-06-26

(Use separate page for each package)

DEALER NAME: JONES-WEST FORD, RENO, NEVADA (ANDY LUDEL/775-829-3206)

Specify State's Vehicle Item Number: <small>(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)</small>		2.7A, TRUCK, 1/2TON, FULLSIZE, CREW CAB, SHORTBED	
Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:		Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS/ELKO
2020 FORD F-150 (W1C) 4X2		\$27,659	\$28,009
2020 FORD F-150 (W1E) 4X4		\$31,499	\$31,849
State manufactures warranty: 3 YRS/36000 MILES			
Standard engine size: (W1C = 2.7L EcoBoost V6 standard) (W1E= 5.0L V8 standard)			
Includes Minimum Standard Equipment Listed: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, state exceptions:			
Included Minimum Standard Equipment			
101A Equipment group, XL series, Power Equipment group, SYNC, Cruise Control, 17" Silver Steel rims			
GVW: 6500#		WHEELBASE: 157"	
<small>(When Applicable)</small>		<small>(When Applicable)</small>	
ITEMIZED OPTIONS PAGE ~ BID #99SWC-S490 - FLEET VEHICLES			
<small>(Use separate page for each package)</small>			
Specify State's Vehicle Item Number: <small>(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)</small>		2.7A, TRUCK, 1/2TON, FULLSIZE, CREW CAB, SHORTBED	
			\$-
			\$-
			\$-
			\$-
Other:			\$-
SEE A FULL LIST OF OPTIONS AND PRICES BELOW			
Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 300 per unit mile.			

Equipment Schedule

Date: 6/4/19 8:50 AM

Budget Period: 2019-2021 Biennium (FY20-21)

Budget Account: 4464 WILDLIFE - GAME MANAGEMENT

Version: G01 GOVERNOR RECOMMENDS - Same in L01

Schedule: EQUIPMENT

DU	Catg	GL	Equipment Type	FY2020		
				Yr 1 Count	Yr 1 Rate	Yr 1 Total
E711	05	8310	RNO/CC-2.16 4WD TRUCK 3/4T;EXT CAB;L BD	1	\$ 38,089	\$ 38,089
E711	05	8310	RNO/CC-2.19 4WD TRUCK 1T;CRW CB;S BD;SRW	1	\$ 42,547	\$ 42,547
E711	05	8310	RNO/CC-2.16 4WD TRUCK 3/4T;EXT CAB;L BD	1	\$ 38,089	\$ 38,089
E711	05	8310	RNO/CC-2.16 4WD TRUCK 3/4T;EXT CAB;L BD	1	\$ 38,089	\$ 38,089

\$156,814 - Total

\$147,305 - Quote Total

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>Wildlife</u>	Budget Account #: <u>4464</u>	
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1982</u>	
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:		
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$ 37,553</u>		
Is the requested vehicle(s) new or used: <u>New</u>		
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:		
Mission of the requested vehicle(s): <u>Pickup</u> <u>replace current vehicle with high mileage.</u>		
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?	
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)		
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>		
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2008</u> Odometer Reading: <u>226,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: _____ Odometer Reading: _____ Type of Vehicle: _____ <i>Please attach an additional sheet if necessary</i>	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
APPOINTING AUTHORITY APPROVAL:		
<u>Liz O'Brien</u> Agency Appointing Authority	<u>Deputy Director</u> Title	<u>7/3/19</u> Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
_____ Board of Examiners	_____ Date	

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2.20A, Truck, 1 Ton, Fullsize, Crew Cab, Longbed, SRW		
Dealer Name:	Jones-West Ford		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: Ingot Silver	Interior: Medium Earth Gray	X Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 35,690.00	\$ 35,690.00
SPECIFY OPTIONS: (description)			
872 Rear View Camera & Prep Kit		\$377.00	
17V XLT Value Package (Crew Cab)		\$1,456.00	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$ 37,523
Total purchase price with options			\$42,708.00
DMV Title and DRS Fee's		\$29.25	\$29.25
GRAND TOTAL:			\$42,737.25

\$ 37,552.25

Registered Owner:	Agency Name & Address: NEVADA DEPARTMENT OF WILDLIFE 6980 SIERRA CENTER PKWY, STE 120 RENO, NV 89511
Legal Owner:	Agency Name & Address: NEVADA DEPARTMENT OF WILDLIFE 6980 SIERRA CENTER PKWY, STE 120 RENO, NV 89511
County Vehicle Based In:	Douglas
Name & Phone of Person to contact when vehicle is ready for delivery:	Rick Thielmann 775-687-6727

STANDARD PAGE ~ BID #99SWC-S490 - FLEET VEHICLES - UPDATED 2019-03-06

(Use separate page for each package)

DEALER NAME: JONES-WEST FORD, RENO, NEVADA (ANDY LUDEL/775-829-3206)

Specify State's Vehicle Item Number: <small>(i.e. 1.1 Sedan: Full size, 4 door, 6 passenger)</small>	2.20.A, TRUCK, 1TON, FULLSIZE, CREW CAB, LONGBED, SRW	
Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS/ELKO
2019 FORD F-350 (W3A) 4X2	\$33,195	\$33,545
2019 FORD F-350 (W3B) 4X4	\$35,690	\$36,040
State manufactures warranty: 3 YRS/36000 MILES		
Standard engine size: 6.2L EFI V8		
Includes Minimum Standard Equipment Listed: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, state exceptions:		
Included Minimum Standard Equipment		
PREF Equipment group, XL Trim, Power Equipment group, Spare tire		
GVW: 10500# <small>(When Applicable)</small>	WHEELBASE: 176" <small>(When Applicable)</small>	
ITEMIZED OPTIONS PAGE ~ BID #99SWC-S490 - FLEET VEHICLES		
<small>(Use separate page for each package)</small>		
Specify State's Vehicle Item Number: <small>(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)</small>	2.20.A, TRUCK, 1TON, FULLSIZE, CREW CAB, LONGBED, SRW	
		\$-
		\$-
		\$-
		\$-
Other:		\$-
SEE A FULL LIST OF OPTIONS AND PRICES BELOW		
Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 300 per unit mile.		

2019MY SUPER DUTY F-350 (CHASSIS CAB SRW) **PRICE LIST**

	OPTION CODE	OTHER OPTIONS (continued)	DEALER INVOICE W/HOLDBACK
AVAILABLE ON ALL MODELS UNLESS OTHERWISE NOTED	525	Cruise Control (XLT/Lar)	N/C
	41P	Skid Plate Package	\$ 91
	67X	Suspension Package, Extra Heavy Service	114
	67H	Suspension Package, Heavy Service	114
	61J	Tire Jack	50
		Tire Jack (with spare tire)	N/C
	531	Trailer Towing Package (XL)	41
	62R	Transmission Power Take-Off Provision (Auto Trans Only)	254
	41A	Rapid-Heat Supplemental Cab Heater	228
	86A	Engine Idle Shutdown - 5 Minutes	228
	86B	Engine Idle Shutdown - 10 Minutes	228
	86C	Engine Idle Shutdown - 15 Minutes	228
	86D	Engine Idle Shutdown - 20 Minutes	228
	96L	Lariat Interior Package	646
	59H	Center High Mount Stop Lamp (CHMSL)	N/C
	872	Rear View Camera & Prep Kit	377
	76S	Remote Start System	228
	435	Window, Power Sliding Rear	368
	76C	Exterior Back-up Chime	127
	98F	CNG/Propane Gaseous Engine Prep Package (w/6.2L only)	286
	98R	Operator Commanded Regeneration (OCR)	228
	96V	XL Value Package	910
	17F	XL Décor Package	201
	87H	Hood Deflector -- Black Molded	118
	90L	Power Equip Group on XL (Reg & Super Cabs)	832
		Power Equip Group on XL Crew Cabs)	1,024
	61S	Splash Guards/Mud Flaps (Front only)	68
	17V	XLT Value Package (Super & Crew Cabs)	1,456
		XLT Value Package (Regular Cab)	1,329
	43C	110V/400W Outlet	159
		110V/400W Outlet with 882	N/C
		110V/400W Outlet with 913	N/C
	18A	Upfitter Interface Module	269
	63A	Utility Lighting System	146
		Utility Lighting System w/ 54F	N/C
	555	Rear Inflatable Seat Belts w/ Rear Belt Monitor	169
	43B	Defrost w/ Fixed & Privacy Glass	55
		Defrost w/ Fixed & Privacy Glass (w/ 435)	N/C
	67E	Extra-Extra Heavy Duty Alternator	78
		Extra-Extra Heavy Duty Alternator w/ 473 or 43C	N/C
	924	Privacy Glass (Regular Cab w/ 43B)	N/C
	86M	Dual Batteries (78 Amp.) on 6.2L Gas	191
	913	SYNC® 3	410
		SYNC® 3 (Lariat)	N/C
	67B	Dual Extra Heavy-Duty Alternator	104
		Dual Extra Heavy-Duty Alternator w/ 41A	N/C
	39S	SiriusXM® Satellite Radio	169
	924	Privacy Glass	27
	87S	FordPass™ Connect	205
	21X	Vehicle Safe by Console Vault	300
		AUDIO	
	21N	Navigation System	519

**2019MY SUPER DUTY F-350 (CHASSIS CAB SRW)
PRICE LIST**

	OPTION CODE	FLEET OPTIONS	DEALER INVOICE W/HOLDBACK
AVAILABLE ON ALL MODELS UNLESS OTHERWISE NOTED	62M	Adjustable Gas and Brake Pedals (Fleet XLT)	\$ 110
	525	Cruise Control	214
	926	Customizable Speed Limit (65 mph)	72
	927	Customizable Speed Limit (75 mph)	72
	18L	TPMS Delete (optional F350 SRW over 10K GVWR only)	N/C
	585	Premium Electronic AM/FM Stereo w/ Single CD Player/Clock(XL fleet only)	501
	91S	LED Warning Strokes - Amber	614
	91G	LED Warning Strokes - White	660
	51D	Spare Tire Delete (Only available to Pool Accounts for sale to RI)	(78)
	47A	Ambulance Prep. Package	1,096
	47L	Ambulance Prep. Pkg. (Special Emissions)	1,096
	47J	Fire Rescue Prep. Pkg. (Special Emissions)	1,096
	942	Daytime Running Lamps (Fleet only)	41
	87T	Fleet Telematics Modem	205
	PGR	Paint, Green (Fleet Only)	601
	PW6	Paint, Green Gem (Fleet Only)	601
	PMB	Paint, Orange (Fleet Only)	601
	PBY	Paint, School Bus Yellow (Fleet Only)	601
	PE4	Paint, Vermillion Red (Fleet Only)	601
	PAT	Paint, Yellow (Fleet Only)	601

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>wildlife</u>	Budget Account #: <u>4464</u>	
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1982</u>	
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:		
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$38,854</u>		
Is the requested vehicle(s) new or used: <u>New</u>		
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:		
Mission of the requested vehicle(s): <u>Pickup</u> <u>Replace current vehicle with high mileage</u>		
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?	
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)		
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>		
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2008</u> Odometer Reading: <u>220,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
<i>Please attach an additional sheet if necessary</i>		
APPOINTING AUTHORITY APPROVAL:		
<u>Liz O'Brien</u> Agency Appointing Authority	<u>Deputy Director</u> Title	<u>7/3/19</u> Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
_____ Board of Examiners	_____ Date	

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2.13A Ram 2500 Crew Cab SWB 4x4 Power Wagon		
Dealer Name:	Carson Dodge Chrysler Jeep		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: Billet Silver	Interior: Silver/Gray	X Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)		\$ 37,600.00	\$37,600.00
SPECIFY OPTIONS: (description)			\$1,224.00
RamBox Cargo Management System		\$905.00	
115v Power Outlet; M/H Tradesman 2 Group		\$137.00	
Billet Silver Exterior Color		\$182.00	
		\$	
		\$	
		\$	
		\$	
		\$	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$38,824.00
DMV Title and DRS Fee's		\$29.25	\$29.25
GRAND TOTAL:			\$39,853.25

Registered Owner:	Agency Name & Address: NEVADA DEPARTMENT OF WILDLIFE 6980 SIERRA CENTER PKWY, STE 120 RENO, NV 89511
Legal Owner:	Agency Name & Address: NEVADA DEPARTMENT OF WILDLIFE 6980 SIERRA CENTER PKWY, STE 120 RENO, NV 89511
County Vehicle Based In:	Elko
Name & Phone of Person to contact when vehicle is ready for delivery:	Cassandra Grieve 775-688-1529

STANDARD PAGE - FLEET VEHICLES 99SWC-S490

(Use separate page for each package)

DEALER NAME: Carson Dodge Chrysler Jeep**Specify State's Vehicle Item Number:** 2.13A Ram 2500 Crew Cab SWB 4x4 Power Wagon

(i.e. 1.1 Sedan: Full size: 4 door; 6 passenger)

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
Dodge Ram 2500 Crew Gas , 2019, DJ7L91	\$37,600.00	\$37,900.00

State vehicle miles per gallon (MPG): N/A HD Truck**State manufactures warranty:** 3/36,000 COMPREHNSIVE AND 5/100,000 POWERTRAIN**Specify engine size and emission rating:** 6.4 LITER V-8 Gas**Includes Minimum Standard Equipment Listed:** ☒ X ☐ Yes ☐ No If no, state exceptions:

(ACE) Package Includes: 180 AMP Alternator, 4.10 Rear Axle Ratio, Front Disconnect Stabilizer Bar, Front Electric Winch, Fuel Tank Skid Plate, GVW Rating 8565#, LT 285/70R17D OWL On Off Road Tire Power Wagon Off Road Group and Badging, Tow Hooks, Transfer Case Skid Plate, Rear Wheel Liners, Tru Lock Front and Rear Axles, Class V Hitch, Bright Front and Rear Bumpers, Fog Lamps, Wheel Flare

Exterior Color: List available colors:

Billet Silver \$182.00, Black Forest Green \$91.00, Blue Steak \$91.00, White, Delmonico Red \$91.00, Diamond Black \$91.00, Flame Red, Granite Crystal \$182.00, Max. Steel \$182.00, Patriot Blue \$91.00, Walnut Brown \$182.00

Seats, Cloth: List available colors:

Black

GVW: 8565 #**WHEELBASE: 149.0**

(When Applicable)

(When Applicable)

ITEMIZED OPTION PAGE - FLEET

(Use separate page for each package)

DEALER NAME: Carson Dodge Chrysler Jeep

		DEDUCT AMOUNT
ABS Brake System	STD	\$-
Air Conditioning	STD	\$-
Cruise Control	STD	\$-
Diesel Engine	N/A	\$-
Engine Block Heater	\$86.00	\$-
Four Wheel Drive (4x4)	Included	\$-
Heavy Duty Alternator	SEE BELOW	\$-
Hitch Receiver	STD	\$-
Integrated Trailer Brake	\$268.00	\$-
Keyless Entry w/Fob (must have power door locks)	SEE GROUP	\$-
Limited Slip Differential	SEE PACKAGE DETA	\$-
Paint, Metallic	SEE PAINTS	\$-
Power Mirrors	STD	\$-
Power Locks	STD	\$-
Power Seats	N/A	\$-
Power Windows	STD	\$-
Radio; AM/FM Stereo	STD	\$-
Radio; AM/FM Stereo	AUX INPUTS	\$-
Rear Window Wiper	N/A	\$-
Seats, Vinyl	No Charge In Lieu Of Cloth	
Vinyl Colors: Black with Diesel Gray		
Skid Plate W/ Tow Hooks	STD	\$-
Tilt Steering	STD	\$-
Tire, Spare, Full Size-	STD	\$-
Trailer Tow Mirrors	\$177.00	\$-
Trailer Tow Package	STD	\$-
Daytime Running Lamps	STD	
Rear Window Defroster	\$177.00	
Mopar Chrome Tube Steps	N/A	
HD Snow Plow Prep 4x4	N/A	
Clarence Lamps	\$86.00	
Power Adjustable Pedals	N/A	
Ram Box Cargo Management System	\$905.00	
Ram Box Utility Group (M/H Ram Box Mgmt Sy	\$268.00	
Rear Back Up Camera	STD	
Rear Back Up Alarm-Audio	\$132.00	
Rear Park Assist	\$268.00	
Remote Start	N/A	

Security Alarm	N/A	
220 Amp Alternator	\$91.00	
Upfitter VISM Module	\$314.00	
115v Power Outlet, M/H Tradesman 1 or 2	\$137.00	
Uconnect Handsfree Communication 5.0	STD	
DOT Safety Kit	\$177.00	
LED Bed Lighting	\$150.00	
Spray In Liner	\$514.00	\$-

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ Call Dealer.

(Use separate page for each package)

Specify State's Vehicle Item Number:2.13A Ram 2500 Crew Cab SWB 4x2-4x4 Gas

Option Package Name/Code:

Tradesman Level 1 Group (A61) \$268.00

Remote Keyless Entry

Tradesman Level 2 Group (A6B) \$618.00

Sirius Sat Radio, Rear Window Defroster, Rear Power Sliding Window, Floor Cover Carpet (Can Be Deleted)

Cloth 40/20/40 Bench Seat, Remote Keyless Entry

Bed Utility Group (ANT) \$632.00	
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Spray in Bedliner, Deployable Bed Step, LED Bed Lighting

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**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>Wildlife</u>	Budget Account #: <u>4464</u>
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>725-688-1982</u>
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$ 33,315</u>	
Is the requested vehicle(s) new or used: <u>New</u>	
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.:	
Mission of the requested vehicle(s): <u>Pickup</u> <u>Replace current vehicle with high mileage</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2006</u> Odometer Reading: <u>176,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL:	
<u>Liz O'Brien</u> Agency Appointing Authority	<u>Deputy Director</u> Title
<u>7/3/19</u> Date	
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
_____ Board of Examiners	_____ Date

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2.13 GMC Sierra 3/4 Ton Crew Cab 6.5' Bed		
Dealer Name:	Reno Buick GMC Cadillac & Isuzu		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: Quick Silver Metallic	Interior: Jet Black	X Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)		\$	\$29,500.00
SPECIFY OPTIONS: (description)			\$3,785.00
Quick Silver Metallic (GAN)		\$536.00	
Fleet Convenience Package ZLQ		\$769.00	
4x4		\$1,954.00	
HD Alternator (KHF) 220 amp		\$251.00	
Deep Tinted Glass (AKO)		\$176.00	
2 Extra Keys		\$99.00	
		\$	
		\$	
		\$	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	
Total purchase price with options			\$33,285.00
DMV Title and DRS Fee's		\$29.25	\$29.25
GRAND TOTAL:			\$33,314.25

Registered Owner:	Agency Name & Address: NEVADA DEPARTMENT OF WILDLIFE 6980 SIERRA CENTER PKWY, STE 120 RENO, NV 89511
Legal Owner:	Agency Name & Address: NEVADA DEPARTMENT OF WILDLIFE 6980 SIERRA CENTER PKWY, STE 120 RENO, NV 89511
County Vehicle Based In:	Washoe
Name & Phone of Person to contact when vehicle is ready for delivery:	Cassandra Grieve 775-688-1529

STANDARD PAGE - FLEET VEHICLES 8475

(Use separate page for each package)

DEALER NAME: RENO * BUICK * GMC * CADILLAC * & *ISUZU* MEDIUM DUTY TRUCKS		
Specify State's Vehicle Item Number: 2.13 3/4 Ton Crew Cab 6.5' bed		
Provide MSRP pricing: \$41,550		
Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
2020 GMC Sierra 3/4Ton Crew Cab Short Bed TC20743	29,500.00	\$29,800.00
Municipal Lease Payment (As Low As) \$ See dealer for terms and details.		
State vehicle miles per gallon (MPG): Estimate: Over 8600 GVWR / Not Rated		
State manufactures warranty: Bumper to Bumper 3yr/36K miles --- PowerTrain 5 yr / 100K miles		
Specify engine size and emission rating: 6.6L (E85 FlexFuel Capable) V8 (401 HP) Fed Emissions		
Includes Minimum Standard Equipment Listed: ____ Yes __X__ No If no, state exceptions:		
(Refer to page 6 of bid) C/D Player not available.\\Standard Equipment Includes The Following:		
Audio system, GMC Infotainment System with 7" diagonal color touchscreen		
AM/FM stereo with seek-and-scan and digital clock, includes Bluetooth		
featuring Android Auto and Apple CarPlay capability for compatible phones.		
Pickup bed includes bed assist step,Differential, heavy-duty locking rear		
Auxiliary External Engine & Transmission Coolers,4 Moveable Cargo Bed Tiedowns,		
170 Amp Alternator, Cruise Control, 10 Ply Tires, Front Recovery Hooks,		
Rear Corner Step Bumper, Power windows, Power Door Locks		
Exterior Color: List available colors: , (GAZ) SUMMIT WHITE No Charge		
Extra cost paints:		
Quick Silver Metallic (GAN) \$536 Pacific Blue Metallic (GAO) \$536		
Dark Sky Metallic (GJI) \$536 Carbon Black Metallic (GCI) \$536		
Cardinal Red (G7C) \$272 Onyx Black (GBA) \$272		
Ask About Special Color availability Dan Nichols 775-333-8701		
Seats, Cloth: List available colors:		
(H1T) Jet Black Cloth Seat Trim		
(H2G) Jet Black Vinyl Seat Trim		
(HOU) Jet Black Cloth Seat Trim (Requires ZL2 Fleet Onnvience PKG)		
WHEELBASE: 172"		
GVW: 11,150 lbs (Gas 4x2) 11,900 (Duramax 4x2)		
GVW: 11,500 lbs (Gas 4x4) 11,250 (Duramax 4x4)		
(When Applicable)		(When Applicable)

OPTION PACKAGE PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME: RENO * BUICK * GMC * CADILLAC* & *ISUZU* MEDIUM DUTY TRUCKS			
Specify State's Vehicle Item Number: 2.13 3/4 Ton Crew Cab 6.5' bed			
Option Package Name/Code:	Cruise Control	K34	\$198.00
List Equipment Features Below: No Longer Standatd on 1SA Sierra Trucks			
As a single option or included in (ZLQ) or (PCI) package below			
Option Package Name/Code:	Fleet Convenience Pkg	ZLQ	\$769.00
List Equipment Features Below:			
(AQQ) Remote Keyless Entry, (K34) cruise control (QT5) EZ Lift power lock and release tailgate and (DBG) outside power-adjustable vertical trailering mirrors with heated upper glass			
Replaces Standard Non Power Verticle Trailering Mirrors. (DUD)			
Option Package Name/Code:	Convenience Package	PCI	\$1,253.00
List Equipment Features Below:			
(AQQ) Remote Keyless Entry, (QT5) EZ Lift power lock and release tailgate, (AKO) tinted glass (UF2) LED cargo bed lighting, (C49) rear-window defogger, (DBG) outside power-adjustable vertical trailering with heated upper glass and (K34) cruise control			
Replaces Standard Non Power Verticle Trailering Mirrors. (DUD)			
Option Package Name/Code:	1SA Driver Alert Package	PQA	\$2,727.00
List Equipment Features Below: Requires and Includes PCI package content			
(UD5) Front and Rear Park Assist, (UKC) Lane Change Alert with Side Blind Zone Alert and (UFG) Rear Cross Traffic Alert (Includes Perimeter Lighting. Includes (PCI) Pkg			
Option Package Name/Code:	GMC MultiPro Tailgate	QK2	\$492.00
List Equipment Features Below:			
Six functional load/access features (Requires (PCI) Package or (ZLQ) Package			
Option Package Name/Code:	Manual Particulate Filter Regen	FPF	\$320.00
List Equipment Features Below: Requires Duamax Diesel L5P			
diesel particulate filter, manual regeneration			
Option Package Name/Code:	Rear Park Assist	UD7	\$280.00
List Equipment Features Below:			
Rear Park Assist, Ultrasonic			
(Requires (PCI) Package or (ZLQ) Fleet Package and (JL1) trailer brake controller, 110-volt AC power outlet & (KC9) 120-volt bed-mounted power outlet.			
Not available with (PQA) 1SA Driver Alert Package I or (ZW9) pickup bed delete.)			
Option Package Name/Code:	Snow Plow Prep Pkg (4X4 only)	VYU	\$345.00
List Equipment Features Below:			
220 Amp Alternator, Power Provided For Back-Up Lamps and Roof Beacon, Additional Circuit For Power Feed For Additional Requirements, Under Body Shield & HD Front Suspension			

ITEMIZED OPTION PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME:	RENO * BUICK * GMC * CADILLAC* & *ISUZU* MEDIUM DUTY TRUCKS
Specify State's Vehicle Item Number:	2.13 3/4 Ton Crew Cab 6.5' bed
Please Call For "Not Listed" Options & Possible Multiple Quantity Vehicle Purchase Discounts.	

DEDUCT AMOUNT

ABS Brake System	Included	\$-
Air Conditioning	Included	\$-
Cruise Control	\$198.00	\$-
Diesel Engine (LP5) Duramax 10 Speed Allison	\$8,950.00	\$-
Four Wheel Drive (4x4)	\$1,954.00	\$-
Engine Block Heater K05	\$88	\$-
Power Take Off (PTO) call for Compatibility	Call	\$-
Dual HD Alternator (KW6) 220 & 170 Amp	\$454.00	
HD Alternator (KHF) 220 amp (Req Gas Engine)	\$251.00	\$-
Trailer Hitch w/ 7 & 4 Pin Connectors (CTT)	Included	\$-
Trailer Brake Control (Required w/Duramax)	\$242.00	\$-
Trailer Wiring Provisions (UY2) Extra Wiring	\$31.00	\$-
Keyless Entry w/Fob	See PCI or ZLQ Pkg	\$-
Limited Slip Differential	Included	\$-
Spray In Bed Liner	\$480.00	
High Visibility Trailering Mirrors (DUD)	Included	
Pwr Seat 10 Way (A2X) Req PCI or ZLQ & K14	\$454.00	\$-
Power Windows (Crew & Double Cab)	Included	\$-
Deep Tinted Glass (AKO)	\$176.00	\$-
Radio; AM/FM Stereo, CD	Included w/no CD	\$-
Rear Park Assist (UD7) Req (ZLQ) or (PCI)	\$310	\$-
Rear Vision Camera (Back-up Camera)	Included w/ Pickup	\$-
Under Body Shield NZZ	\$132	\$-
Assist Steps (Black) Running Boards (VQO)	\$446	\$-
Assist Steps (Chrome) 4" Round (VXJ)	\$710	\$-
Tilt Steering	Included	\$-
Tire, Spare, Full Size	Included	\$-
Cab Roof Beacon Prep & Switch	\$55.00	
Vinyl (BG9) or Carpeted Flooring (B30) Inc.	Included	
Upfitter Switch Kit (5 Aux on dash)	\$182.00	
All Terrain Tires (10 Ply)	Included	
2 Extra Keys includes programming	\$99.00	
Other: See Next Page for additional Items!	\$	\$-

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ by quote

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>Wildlife</u>	Budget Account #: <u>4464</u>
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1982</u>
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$ 37,583</u>	
Is the requested vehicle(s) new or used: <u>new</u>	
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>Pick up</u>	
Mission of the requested vehicle(s): <u>Replace current vehicle with high mileage.</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes.</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2004</u> Odometer Reading: <u>212,000</u> Type of Vehicle: <u>Pick up</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL:	
<u>Liz O'Brien</u> Agency Appointing Authority	<u>Deputy Director</u> Title
<u>7/3/19</u> Date	
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
_____ Board of Examiners	_____ Date

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2.3B 2019 Toyota Tacoma TRD Model 7568		
Dealer Name:	Fallon Ford		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: Silver	Interior: Graphite	<input checked="" type="checkbox"/> Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$37,552.77	\$37,552.77
SPECIFY OPTIONS: (description)			\$
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$	\$
Total purchase price with options			\$37,552.77
DMV Title and DRS Fee's		\$29.25	\$
GRAND TOTAL:			\$37,582.02

Registered Owner:	Agency Name & Address: NEVADA DEPARTMENT OF WILDLIFE 6980 SIERRA CENTER PKWY, STE 120 RENO, NV 89511
Legal Owner:	Agency Name & Address: NEVADA DEPARTMENT OF WILDLIFE 6980 SIERRA CENTER PKWY, STE 120 RENO, NV 89511
County Vehicle Based In:	Washoe
Name & Phone of Person to contact when vehicle is ready for delivery:	Cassandra Grieve 775-688-1529

STANDARD PAGE - FLEET VEHICLES 8475

(Use separate page for each package)

DEALER NAME **FALLON FORD**

Specify State's Vehicle Item Number: **2.3B 2019 TOYOTA TACOMA TRD MODEL 7568**

(i.e. 1.1 Sedan; Full size; 4 door; 6 passenger)

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
2019 TACOMA TRD DBLCAB MODEL 7568	\$ 37,552.77	\$ 38,552.77

State vehicle miles per gallon (MPG): **TBD**

State manufactures warranty: **3 YEAR/36K MILES**

Specify engine size and emission rating: **TBD**

Includes Minimum Standard Equipment Listed: ☒ **X** Yes ☐ No If no, state exception
(Refer to page 6 of bid)

Exterior Color: List available colors:

WHITE, SILVER, RED, BLACK, CEMENT, QUICKSAND

Seats, Cloth: List available colors:

GRAPHITE

GVW:

(When Applicable)

WHEELBASE:

/hen Applicab

(Use separate page for each package)

DEALER NAME_FALLON FORD

Specify State's Vehicle Item Number: 2.3B 2019 TOYOTA TACOMA TRD MODEL 7568

(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)

Option Package Name/Code:	SEE OPTION LINK	\$TBD
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List Equipment Features Below:

[illegible]

ITEMIZED OPTION PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME_FALLON FORD

DEDUCT AMOUNT

ABS Brake System	INC	\$-
Air Conditioning	INC	\$-
Cruise Control	INC	\$-
Diesel Engine	NA	\$-
Four Wheel Drive (4x4)	INC	\$-
ALL WEATHER FLOOR LINER/DOOR SILL	INC	\$-
Hitch Receiver	INC	\$-
BED MAT	\$ 85.00	\$-
Keyless Entry w/Fob (must have power door locks)	INC	\$-
Limited Slip Differential	INC	\$-
DOOR EDGE GUARDS	\$ 90.00	\$-
Power Mirrors	INC	\$-
Power Locks	INC	\$-
Power Seats	NA	\$-
Power Windows	INC	\$-
Radio; AM/FM Stereo	INC	\$-
PAINT PROTECTION FILM	\$ 225.00	\$-
MINI TIE DOWN LOOI	\$ 35.00	\$-
TECHNOLOGY PACKAGE	INC	\$-
TRD SKID PLATE	\$ 375.00	\$-
MUD GUARDS	\$ 129.00	\$-
D RINGS	\$ 40.00	\$-
Tire, Spare, Full Size	INC	\$-
Trailer Tow Mirrors	NA	\$-
ROOF RACK	\$ 285.00	
SPARE TIRE LOCK	\$ 50.00	
ATC LED CAMPER SHELL	\$ 1,595.00	\$-

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 1.00

per mile.

Equipment Schedule

Date: 6/4/19 8:57 AM

Budget Period: 2019-2021 Biennium (FY20-21)

Budget Account: 4465 WILDLIFE - FISHERIES MANAGEMENT

Version: G01 GOVERNOR RECOMMENDS - Same in LO1

Schedule: EQUIPMENT

DU	Catg	GL	Equipment Type
E711	05	8310	RNO/CC-2.16 4WD TRUCK 3/4T;EXT CAB;L BD
E711	05	8310	RNO/CC-2.16 4WD TRUCK 3/4T;EXT CAB;L BD
E711	05	8310	RNO/CC-2.19 4WD TRUCK 1T;CRW CB;S BD;SRW
E711	05	8310	RNO/CC-2.13 4WD TRUCK 3/4 T;CRW CAB;S BD

FY2020			
Yr 1 Count	Yr 1 Rate	Yr 1 Total	
1	\$ 38,089	\$	38,089
1	\$ 38,089	\$	38,089
1	\$ 42,547	\$	42,547
1	\$ 40,578	\$	40,578

\$159,303 - Total

\$140,590 - Quoted total

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>wildlife</u>	Budget Account #: <u>4465</u>	
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1952</u>	
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:		
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$28,807</u>		
Is the requested vehicle(s) new or used: <u>New</u>		
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>Pickup</u>		
Mission of the requested vehicle(s): <u>Replace current vehicle with high mileage.</u>		
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?	
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)		
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>YES</u>		
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>1999</u> Odometer Reading: <u>135,000</u> Type of Vehicle: <u>Cab + chassis</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle: <i>Please attach an additional sheet if necessary</i>	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
APPOINTING AUTHORITY APPROVAL:		
<u>Liz O'Brien</u> Agency Appointing Authority	<u>Deputy Director</u> Title	<u>7/3/19</u> Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
_____ Board of Examiners	_____ Date	

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2.16, 3/4 Ton; 4x4; Extended Cab; Long Bed; SRW		
Dealer Name:	Champion Chevrolet, Reno NV		
Delivery Location:	Reno-HQ		
Vehicle Colors:	Exterior: Silver Ice Metallic	Interior: Dark Ash	Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)		\$25,257	\$25,257
SPECIFY OPTIONS: (description)			
Deep Tint Glass		\$176	
Engine Block Heater	1	\$88	
Four Wheel Drive	1	\$2,045	
Skid Plate	1	\$132	
Keyless Entry w/power trailer tow mirrors	1	\$880	
Electronic Transfer Case	1	\$200	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		N/A	N/A
Total purchase price with options	1	\$28,778	
DMV Title and DRS Fee's	1	\$28.25	\$ 28.25

GRAND TOTAL:		\$28,806.25
Registered Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511	
Legal Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511	
County Vehicle Based In:	White Pine	
Name & Phone of Person to contact when vehicle is ready for delivery:	Buck Douglass 775-234-7319	

STANDARD PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: *2.16 - Truck 3/4 Ton; Full Size; Extended Cab; Long Bed*

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
<i>2019 Chevrolet Silverado - CC25953</i>	<i>\$25,257.00</i>	<i>\$25,557.00</i>
State vehicle miles per gallon (MPG): <i>NOT RATED</i>		
Manufactures Suggested Retail Price(MSRP): <i>\$ 35,555.00</i>		
State manufactures warranty: <i>3 YR or 36k Miles Bumper to Bumper & 5 YR or 100k Miles Powertrain</i>		
Specify standard engine size and emission rating: <i>6.0L Vortec V-8 Flex Fuel</i> <i>Federal Emission</i>		
Includes Minimum Standard Equipment Listed: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If no, state exceptions:		
<i>AM/FM STEREO W/ USB PORTS, AUX JACK, & SD CARD SLOT CD PLAYER - OPTIONAL SEE BELOW</i>		
Exterior Color: List available colors:		
<i>Black, Summit White, Graphite Metallic, Deep Ocean Blue Metallic + \$375.00, Havanah Metallic,</i>		
<i>Silver Ice Metallic, Red Hot</i>		
Seats, Cloth: List available colors:		
<i>Dark Ash</i>		
GVW: <i>9500(GAS) 10,000(DIESEL)</i> WHEELBASE: <i>158.10</i>		

OPTION PACKAGE PAGE ~BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: 2.16 - Truck 3/4 Ton; Full Size; Extended Cab; Long Bed

Option Package Name/Code: 1LT	<i>(Requires 2WD)</i> \$4,245.00	<i>(Requires 4WD)</i> \$4,667.00
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List Equipment Features Below:

17" Machined Aluminum Wheels, Chrome Front/Rear Bumper, Bodyside Moldings, Chrome Grille, Power Mirrors, Power Windows, Remote Keyless Entry, Deep Tint Glass(Except front Windows), Premium Cloth, Driver Side Lumbar Control, Carpeted Floor, Rubber Floor Mats, Leather Wrapped Steering Wheel, Bluetooth, Onstar, Single Slot CD Player

ITEMIZED OPTION PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - Champion Chevrolet

Vehicle Item Number: 2.16 - Truck 3/4 Ton; Full Size; Extended Cab; Long Bed

		DEDUCT AMOUNT
ABS Brake System	\$ STD	\$- N/A
Air Conditioning	\$ STD	\$- N/A
Backup Camera	\$ STD	\$- N/A
Battery, Auxiliary	\$135.00	\$- N/A
Bedliner, Spray In	\$495.00	\$- N/A
Bluetooth for Phone(Includes My Link Radio)	\$ STD	\$- N/A
Cruise Control	\$ STD	\$- N/A
Deep Tint Glass	\$176.00	\$- N/A
Engine Block Heater	\$88.00	\$- N/A
Four Wheel Drive	\$2,045.00	\$- N/A
Electronic Transfer Case(Requires 4x4)	\$200.00	\$- N/A
Gear Ratio 4.10	\$ STD	\$- N/A
Heavy Duty Alternator	\$132.00	\$- N/A
Integrated Trailer Brake Controller	\$ STD	\$- N/A
Keyless Entry w/Fob (Includes Trailer Tow Mirrors-Pwr)	\$880.00	\$- N/A
Keys, Two Additional(4 Total)	\$95.00	\$- N/A
Locking Rear Differential	\$ STD	\$- N/A
Paint, Metallic	\$ STD	\$- N/A
Power Locks	\$ STD	\$- N/A
Power Seat(Driver Side)	\$383.00	\$- N/A
Power Windows	\$ STD	\$- N/A
Radio; AM/FM Stereo, CD Player (Incl My Link/Bluetooth)	See Option Package	\$- N/A
Rear Window Defogger	\$198.00	\$- N/A
Seats, Vinyl	\$ Avail @ no extra charge	\$- N/A
Vinyl Colors: Dark Ash		
Skid Plate (Requires 4X4 option)	\$132.00	\$- N/A
Steps, 4" Black Round	\$630.00	\$- N/A
Tilt Steering	\$ STD	\$- N/A
Tire, Spare, Full Size	\$ STD	\$- N/A
Tires, All Terrain	\$200.00	\$- N/A
Trailer Tow Mirrors (Not avail with Power Mirrors)	\$ STD	\$- N/A
Trailer Tow Mirrors-Power (Includes Keyless Entry)	\$880.00	\$- N/A
Trailer Tow Package (Incl 7 & 4 pin connectors)	\$ STD	\$- N/A
Upfitter Switches Bank of 4 @ 30 Amps Each	\$125.00	\$- N/A

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>Wildlife</u>	Budget Account #: <u>4465</u>
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1982</u>
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$40,725</u>	
Is the requested vehicle(s) new or used: <u>New</u>	
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>Pickup</u>	
Mission of the requested vehicle(s): <u>Replace current vehicle with high mileage</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes.</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2009</u> Odometer Reading: <u>128,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL:	
<u>Liz O'Brien</u> Agency/Appointing Authority	<u>Deputy Director</u> Title
<u>7/3/19</u> Date	
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
Board of Examiners	Date

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2.20, Full Size 1 Ton; Crew Cab; Long Bed; SRW		
Dealer Name:	Champion Chevrolet, Reno NV		
Delivery Location:	Reno-HQ		
Vehicle Colors:	Exterior: Silver Ice Metallic	Interior: Dark Ash	Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)		\$28,996	\$28,996
SPECIFY OPTIONS: (description)			
Deep Tint Glass	1	\$176	
Diesel Engine	1	\$8,268	
Four Wheel Drive	1	\$2,045	
Tow Package	1	\$515	
Trailer Tow Mirrors - Power	1	\$564	
Skid Plate	1	\$132	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		N/A	N/A
Total purchase price with options	1	\$40,696	\$40,696
DMV Title and DRS Fee's	1	\$28.25	\$ 28.25

GRAND TOTAL:		\$40,724.25
Registered Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511	
Legal Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511	
County Vehicle Based In:	Clark	
Name & Phone of Person to contact when vehicle is ready for delivery:	Lisa Ozborn 702-486-6739	

STANDARD PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: *2.20 - Truck 1 Ton; Full Size; Crew Cab; Long Bed, Single Rear Wheel*

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
<i>2019 Chevrolet Silverado - CC35943</i>	<i>\$28,996.00</i>	<i>\$29,296.00</i>

State vehicle miles per gallon (MPG): *NOT RATED*

Manufactures Suggested Retail Price(MSRP): *\$ 38,525.00*

State manufactures warranty: *3 YR or 36k Miles Bumper to Bumper & 5 YR or 100k Miles Powertrain*

Specify standard engine size and emission rating: *6.0L Vortec V-8 Flex Fuel* *Federal Emission*

Includes Minimum Standard Equipment Listed: *Yes* *X* *No* If no, state exceptions:

AM/FM STEREO W/ USB PORTS, AUX JACK, & SD CARD SLOT CD PLAYER - OPTIONAL SEE BELOW

Exterior Color: List available colors:

*Black, Summit White, Graphite Metallic, Deep Ocean Blue Metallic + \$375.00, Havanah Metallic,
Silver Ice Metallic, Red Hot, Mosaic Black Metallic*

Seats, Cloth: List available colors:

Dark Ash

GVW: 10,700(GAS) 11,400(DIESEL)

WHEELBASE: 167.70

OPTION PACKAGE PAGE ~BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: 2.20 - Truck 1 Ton; Full Size; Crew Cab; Long Bed, Single Rear Wheel

Option Package Name/Code: 1LT	(Requires 2WD) \$4,398.00	(Requires 4WD) \$4,549.00
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List Equipment Features Below:

18" Chromed Aluminum Wheels, Chrome Front/Rear Bumper, Bodyside Moldings, Chrome Grille, Power Mirrors, Power Windows, Remote Keyless Entry, Deep Tint Glass(Except front Windows), Premium Cloth, Driver Side Lumbar Control, Carpeted Floor, Rubber Floor Mats, Leather Wrapped Steering Wheel, Bluetooth, Onstar, Single Slot CD Player

ITEMIZED OPTION PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - Champion Chevrolet

Vehicle Item Number: 2.20 - Truck 1 Ton; Full Size; Crew Cab; Long Bed, Single Rear Wheel

		DEDUCT AMOUNT
ABS Brake System	\$ STD	\$- N/A
Air Conditioning	\$ STD	\$- N/A
Backup Camera	\$ STD	\$- N/A
Battery, Auxiliary	\$135(Std on Diesel)	\$- N/A
Bedliner, Spray In	\$495.00	\$- N/A
Bluetooth for Phone(Includes My Link Radio)	\$ STD	\$- N/A
Cruise Control	\$ STD	\$- N/A
Deep Tint Glass	\$176.00	\$- N/A
Engine, Alt Size 6.6L V-8 Duramax Diesel	\$8,268.00	\$- N/A
Engine Block Heater	\$88.00(Std on Diesel)	\$- N/A
Four Wheel Drive	\$2,045.00	\$- N/A
Electronic Transfer Case(Requires 4x4)	\$200.00	\$- N/A
Gear Ratio 3.73 (4.10 Std on Gas / 3.73 Std on Diesel)	\$100.00	\$- N/A
Heavy Duty Alternator	\$132(Gas) \$335(Diesel)	\$- N/A
Integrated Trailer Brake Controller(Incl Tow Pack)	\$515.00	\$- N/A
Keyless Entry w/Fob (Includes Power Windows/Mirrors)	\$564.00	\$- N/A
Keys, Two Additional(4 Total)	\$95.00	\$- N/A
Limited Slip Differential	\$STD	\$- N/A
Paint, Metallic	\$STD	\$- N/A
Power Mirrors (Includes Keyless Entry w/Fob)	\$564.00	\$- N/A
Power Locks	\$STD	\$- N/A
Power Seat(Driver Side)	\$383.00	\$- N/A
Power Windows	\$STD	\$- N/A
Radio;AM/FM Stereo,CD Player(Incl My Link/Bluetooth)	See Option Package	\$- N/A
Rear Window Defogger	\$198.00	\$- N/A
Seats, Vinyl	\$ Avail @ no extra charge	\$- N/A
Vinyl Colors: Dark Ash		
Skid Plate (Requires 4X4 option)	\$132.00	\$- N/A
Steps, 4" Black Round	\$630.00	\$- N/A
Tilt Steering	\$STD	\$- N/A
Tire, Spare, Full Size	\$STD	\$- N/A
Tires, All Terrain	\$200.00	\$- N/A
Trailer Tow Mirrors(Not avail with Pwr Windows/Mirrors)	\$STD	\$- N/A
Trailer Tow Mirrors-Power(Incl Power Windows/Mirrors)	\$564.00	\$- N/A
Trailer Tow Package (Incl Brake Controller)	\$515.00	\$- N/A
Upfitter Switches Bank of 4 @ 30 Amps Each	\$125.00	\$- N/A

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 400.00 flat.

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>Wildlife</u>	Budget Account #: <u>4465</u>
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1982</u>
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$30,972</u>	
Is the requested vehicle(s) new or used: <u>New</u>	
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>Pickup</u>	
Mission of the requested vehicle(s): <u>Replace current vehicle w/ hgh mileage</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2012</u> Odometer Reading: <u>167,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: _____ Odometer Reading: _____ Type of Vehicle: _____ <i>Please attach an additional sheet if necessary</i>	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
APPOINTING AUTHORITY APPROVAL:	
<u>Liz O'Brien</u> Agency Appointing Authority	<u>Deputy Director</u> Title
<u>7/3/19</u> Date	
BOARD OF EXAMINERS' APPROVAL:	
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase	
_____ Board of Examiners	_____ Date

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2.14 ¾ Ton Truck; Full Size; Crew Cab; Long Bed		
Dealer Name:	Champion Chevrolet, Reno NV		
Delivery Location:	Reno-HQ		
Vehicle Colors:	Exterior: Silver Ice Metallic	Interior: Dark Ash	Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$27,778	\$27,778
SPECIFY OPTIONS: (description)			
Spray-in Bedliner	1	\$495	
Four Wheel Drive	1	\$2,045	
Keyless Entry	1	\$317	
Deep Tint Glass	1	\$176	
Skid Plate	1	\$132	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		N/A	N/A
Total purchase price with options	1	\$30,943	\$30,943
DMV Title and DRS Fee's	1	\$28.25	\$ 28.25

GRAND TOTAL:		\$30,971.25
Registered Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511	
Legal Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511	
County Vehicle Based In:	Clark	
Name & Phone of Person to contact when vehicle is ready for delivery:	Kevin Guadalupe 702-486-5127 ext.3310	

STANDARD PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: 2.14 - Truck 3/4 Ton; Full Size; Crew Cab; Long Bed		
Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
<i>2019 Chevrolet Silverado - CC25943</i>	\$27,778.00	\$28,078.00
State vehicle miles per gallon (MPG): NOT RATED		
Manufactures Suggested Retail Price(MSRP): \$ 37,160.00		
State manufactures warranty: 3 YR or 36k Miles Bumper to Bumper & 5 YR or 100k Miles Powertrain		
Specify standard engine size and emission rating: 6.0L Vortec V-8 Flex Fuel Federal Emission		
Includes Minimum Standard Equipment Listed: ____Yes __X__No If no, state exceptions:		
<i>AM/FM STEREO W/ USB PORTS, AUX JACK, & SD CARD SLOT CD PLAYER - OPTIONAL SEE BELOW</i>		
Exterior Color: List available colors:		
<i>Black, Summit White, Graphite Metallic, Deep Ocean Blue Metallic + \$375.00, Havanah Metallic,</i>		
<i>Silver Ice Metallic, Red Hot, Mosaic Black Metallic</i>		
Seats, Cloth: List available colors:		
<i>Dark Ash</i>		
GVW: 9500(GAS) 10,000(DIESEL)		WHEELBASE: 167.70

OPTION PACKAGE PAGE ~BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: *2.14 - Truck 3/4 Ton; Full Size; Crew Cab; Long Bed*

Option Package Name/Code: *1LT* (Requires 2WD) \$4,597.00 (Requires 4WD) \$4,929.00

List Equipment Features Below:

*17" Machined Aluminum Wheels, Chrome Front/Rear Bumper, Bodyside Moldings, Chrome Grille,
Power Mirrors, Power Windows, Remote Keyless Entry, Deep Tint Glass(Except front Windows),
Premium Cloth, Driver Side Lumbar Control, Carpeted Floor, Rubber Floor Mats, Leather Wrapped Steering Wheel,
Bluetooth, Onstar, Single Slot CD Player*

ITEMIZED OPTION PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - Champion Chevrolet

Vehicle Item Number: 2.14 - Truck 3/4 Ton; Full Size; Crew Cab; Long Bed

		DEDUCT AMOUNT
ABS Brake System	\$ STD	\$- N/A
Air Conditioning	\$ STD	\$- N/A
Backup Camera	\$ STD	\$- N/A
Battery, Auxiliary	\$135(Std on Diesel)	\$- N/A
Bedliner, Spray In	\$495.00	\$- N/A
Bluetooth for Phone(Includes My Link Radio)	\$ STD	\$- N/A
Cruise Control	\$ STD	\$- N/A
Deep Tint Glass	\$176.00	\$- N/A
Engine, Alt Size 6.6L V-8 Duramax Diesel	\$8,268.00	\$- N/A
Engine Block Heater	\$88.00(Std on Diesel)	\$- N/A
Four Wheel Drive	\$2,045.00	\$- N/A
Electronic Transfer Case(Requires 4x4)	\$200.00	\$- N/A
Gear Ratio 3.73 (4.10 Std on Gas / 3.73 Std on Diesel)	\$100.00	\$- N/A
Heavy Duty Alternator	\$132(Gas) \$335(Diesel)	\$- N/A
Integrated Trailer Brake Controller(Req Tow Pack)	\$242.00	\$- N/A
Keyless Entry w/Fob (Includes Power Mirrors)	\$317.00	\$- N/A
Keys, Two Additional(4 Total)	\$95.00	\$- N/A
Limited Slip Differential	\$ STD	\$- N/A
Paint, Metallic	\$ STD	\$- N/A
Power Mirrors (Includes Keyless Entry w/Fob)	\$317.00	\$- N/A
Power Locks	\$STD	\$- N/A
Power Seat(Driver Side)	\$383.00	\$- N/A
Power Windows	\$ STD	\$- N/A
Radio; AM/FM Stereo, CD Player (Incl My Link/Bluetooth)	See Option Package	\$- N/A
Rear Window Defogger	\$198.00	\$- N/A
Seats, Vinyl	\$ Avail @ no extra charge	\$- N/A
Vinyl Colors: Dark Ash		
Skid Plate (Requires 4X4 option)	\$132.00	\$- N/A
Steps, 4" Black Round	\$630.00	\$- N/A
Tilt Steering	\$STD	\$- N/A
Tire, Spare, Full Size	\$STD	\$- N/A
Tires, All Terrain	\$200.00	\$- N/A
Trailer Tow Mirrors (Not avail with Power Mirrors)	\$62.00	\$- N/A
Trailer Tow Mirrors-Power (Requires Power Mirrors)	\$308.00	\$- N/A
Trailer Tow Package (Incl 7 & 4 pin connectors)	\$264.00	\$- N/A
Upfitter Switches Bank of 4 @ 30 Amps Each	\$125.00	\$- N/A

Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010

Agency Name: <u>wildlife</u>	Budget Account #: <u>4465</u>	
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1982</u>	
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:		
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$40,056</u>		
Is the requested vehicle(s) new or used: <u>New</u>		
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>Pickup</u>		
Mission of the requested vehicle(s): <u>Replace current vehicle with high mileage</u>		
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?	
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)		
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>		
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2001</u> Odometer Reading: <u>164,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.	
<i>Please attach an additional sheet if necessary</i>		
APPOINTING AUTHORITY APPROVAL:		
<u>L. O'Brien</u> Agency Appointing Authority	<u>Deputy Director</u> Title	<u>7/3/19</u> Date
BOARD OF EXAMINERS' APPROVAL:		
<input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase		
_____ Board of Examiners	_____ Date	

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2.13 ¾ ton; full size; crew cab; short bed Chevrolet Silverado - CC25743		
Dealer Name:	Champion Chevrolet, Reno NV		
Delivery Location:	Reno, NV		
Vehicle Colors:	Exterior: Silver Ice Metallic	Interior: Dark Ash	<input checked="" type="checkbox"/> Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$27,595.00	\$27,595.00
SPECIFY OPTIONS: (description)			
Diesel engine	1	\$8,268.00	
Trailer tow package	1	\$264.00	
Four wheel drive (4x4)	1	\$2,045.00	
Heavy Duty alternator	1	\$335.00	
Integrated trailer brake controller	1	\$242.00	
Upfitter switches	1	\$152.00	
Electronic locking rear differential 3.55 gear	1	\$355.00	
Power mirrors	1	\$317.00	
Trailer Tow mirrors – power	1	\$308.00	
Deep tinted glass	1	\$176.00	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		N/A	N/A
Total purchase price with options	1		\$40,057.00
DMV Title and DRS Fee's	1	\$28.25	\$ 28.25

GRAND TOTAL:		\$40,085.25
Registered Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511	
Legal Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511	
County Vehicle Based In:	Humboldt County	
Name & Phone of Person to contact when vehicle is ready for delivery:	Cody Byrne Nevada Department of Wildlife 775-623-6517 x106	

STANDARD PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: 2.13 - *Truck 3/4 Ton; Full Size; Crew Cab; Short Bed*

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
<i>2019 Chevrolet Silverado - CC25743</i>	<i>\$27,595.00</i>	<i>\$27,895.00</i>
State vehicle miles per gallon (MPG): <i>NOT RATED</i>		
Manufactures Suggested Retail Price(MSRP): <i>\$ 36,965.00</i>		
State manufactures warranty: <i>3 YR or 36k Miles Bumper to Bumper & 5 YR or 100k Miles Powertrain</i>		
Specify standard engine size and emission rating: <i>6.0L Vortec V-8 Flex Fuel</i> <i>Federal Emission</i>		
Includes Minimum Standard Equipment Listed: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If no, state exceptions:		
<i>AM/FM STEREO W/ USB PORTS, AUX JACK, & SD CARD SLOT CD PLAYER - OPTIONAL SEE BELOW</i>		
Exterior Color: List available colors:		
<i>Black, Summit White, Graphite Metallic, Deep Ocean Blue Metallic + \$375.00, Havanah Metallic,</i>		
<i>Silver Ice Metallic, Red Hot</i>		
Seats, Cloth: List available colors:		
<i>Dark Ash</i>		
GVW: 9500(GAS) 10,000(DIESEL)		WHEELBASE: 153.70

OPTION PACKAGE PAGE ~BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: 2.13 - *Truck 3/4 Ton; Full Size; Crew Cab; Short Bed*

Option Package Name/Code: 1LT	(Requires 2WD) \$4,599.00	(Requires 4WD) \$4,931.00
--------------------------------------	----------------------------------	----------------------------------

List Equipment Features Below:

*17" Machined Aluminum Wheels, Chrome Front/Rear Bumper, Bodyside Moldings, Chrome Grille,
 Power Mirrors, Power Windows, Remote Keyless Entry, Deep Tint Glass(Except front Windows),
 Premium Cloth, Driver Side Lumbar Control, Carpeted Floor, Rubber Floor Mats, Leather Wrapped Steering Wheel,
 Bluetooth, Onstar, Single Slot CD Player*

ITEMIZED OPTION PAGE ~ BID 8475 FLEET VEHICLES

DEALER NAME - *Champion Chevrolet*

Vehicle Item Number: 2.13 - Truck 3/4 Ton; Full Size; Crew Cab; Short Bed

		DEDUCT AMOUNT
ABS Brake System	\$ STD	\$- N/A
Air Conditioning	\$ STD	\$- N/A
Backup Camera	\$ STD	\$- N/A
Battery, Auxiliary	\$135(Std on Diesel)	\$- N/A
Bedliner, Spray In	\$495.00	\$- N/A
Bluetooth for Phone(Includes My Link Radio)	\$ STD	\$- N/A
Cruise Control	\$ STD	\$- N/A
Deep Tint Glass	\$176.00	\$- N/A
Engine, Alt Size 6.6L V-8 Duramax Diesel	\$8,268.00	\$- N/A
Engine Block Heater	\$88.00(Std on Diesel)	\$- N/A
Four Wheel Drive	\$2,045.00	\$- N/A
Electronic Transfer Case(Requires 4x4)	\$200.00	\$- N/A
Gear Ratio 3.73 (4.10 Std on Gas / 3.73 Std on Diesel)	\$100.00	\$- N/A
Heavy Duty Alternator	\$132(Gas) \$335(Diesel)	\$- N/A
Integrated Trailer Brake Controller(Req Tow Pack)	\$242.00	\$- N/A
Keyless Entry w/Fob (Includes Power Mirrors)	\$317.00	\$- N/A
Keys, Two Additional(4 Total)	\$95.00	\$- N/A
Limited Slip Differential	\$ STD	\$- N/A
Paint, Metallic	\$ STD	\$- N/A
Power Mirrors (Includes Keyless Entry w/Fob)	\$317.00	\$- N/A
Power Locks	\$STD	\$- N/A
Power Seat(Driver Side)	\$383.00	\$- N/A
Power Windows	\$ STD	\$- N/A
Radio; AM/FM Stereo, CD Player (Incl My Link/Bluetooth)	See Option Package	\$- N/A
Rear Window Defogger	\$198.00	\$- N/A
Seats, Vinyl	\$ Avail @ no extra charge	\$- N/A
Vinyl Colors: Dark Ash		
Skid Plate (Requires 4X4 option)	\$132.00	\$- N/A
Steps, 4" Black Round	\$630.00	\$- N/A
Tilt Steering	\$STD	\$- N/A
Tire, Spare, Full Size	\$STD	\$- N/A
Tires, All Terrain	\$200.00	\$- N/A
Trailer Tow Mirrors (Not avail with Power Mirrors)	\$62.00	\$- N/A
Trailer Tow Mirrors-Power (Requires Power Mirrors)	\$308.00	\$- N/A
Trailer Tow Package (Incl 7 & 4 pin connectors)	\$264.00	\$- N/A
Upfitter Switches Bank of 4 @ 30 Amps Each	\$125.00	\$- N/A

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 400.00 flat.

Equipment Schedule

Date: 6/4/19 9:00 AM

Budget Period: 2019-2021 Biennium (FY20-21)

Budget Account: 4466 WILDLIFE - DIVERSITY DIVISION

Version: G01 GOVERNOR RECOMMENDS

Schedule: EQUIPMENT

DU	Catg	GL	Equipment Type	FY2020		
				Yr 1 Count	Yr 1 Rate	Yr 1 Total
E711	05	8310	RNO/CC-2.16 4WD TRUCK 3/4T;EXT CAB;L BD	1	\$ 38,089	\$ 38,089

\$34,638 - Quote Total

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>Wildlife</u> Contact Name: <u>Liz O'Brien</u>	Budget Account #: <u>4466</u> Telephone Number: <u>775-688-1982</u>
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$34,637.25</u> Is the requested vehicle(s) new or used: <u>New</u> Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>SUV</u> Mission of the requested vehicle(s): <u>To replace current vehicle with high mileage</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> <u> </u> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2000</u> Odometer Reading: <u>237,529</u> Type of Vehicle: <u>Pickup truck</u> Vehicle #2 Model Year: _____ Odometer Reading: _____ Type of Vehicle: _____ <i>Please attach an additional sheet if necessary</i>	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
APPOINTING AUTHORITY APPROVAL: <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> <u>Liz O'Brien</u> Agency Appointing Authority </div> <div style="width: 30%;"> <u>Deputy Director</u> Title </div> <div style="width: 30%;"> <u>7/3/19</u> Date </div> </div>	
BOARD OF EXAMINERS' APPROVAL: <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> Board of Examiners </div> <div style="width: 40%;"> Date </div> </div>	

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2019 4Runner SR5		
Dealer Name:	Fallon Ford Toyota		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: Classic Silver	Interior: Black Graphite	X Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$ 34,076	\$ 34,076
SPECIFY OPTIONS: (description)			
Keep it Wild Savings	1	(\$435)	
50/50 3 rd row seat	1	\$ 692	
Wilderness package	1	\$275	
		\$	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		\$ N/A	\$ N/A
Total purchase price with options			\$ 34,608
DMV Title and DRS Fee's		\$29.25	\$ 29.25
GRAND TOTAL:			\$ 34,637.25

Registered Owner:	Agency Name & Address: Nevada Dept. of Wildlife 6980 Sierra Ctr. Pkwy., Ste. #120 Reno, NV 89511
Legal Owner:	Agency Name & Address: Nevada Dept. of Wildlife 6980 Sierra Ctr. Pkwy., Ste. #120 Reno, NV 89511
County Vehicle Based In:	Washoe
Name & Phone of Person to contact when vehicle is ready for delivery:	David Catalano 775-688-1412 775-848-9773

STANDARD PAGE - FLEET VEHICLES 8475

(Use separate page for each package)

DEALER NAME_ FALLON FORD TOYOTA_

Specify State's Vehicle Item Number: 5.4A 2019 4RUNNER SR5

(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)

Specify MANUFACTURER, MODEL NAME, YEAR & BODY MODEL CODE:	Base Price for RENO/CARSON CITY	Base Price for LAS VEGAS
2019 4RUNNER SR5	\$ 34,076.00	\$ 35,076.00

State vehicle miles per gallon (MPG):TBD

State manufactures warranty: 3 YEAR/36K MILES

Specify engine size and emission rating: TBD

Includes Minimum Standard Equipment Listed: __X__Yes ____No If no, state exceptions:
(Refer to page 6 of bid)

Exterior Color: List available colors:

SUPER WHITE, CLASSIC SILVER, MAGNETTIC GRAY, MIDNIGHT BLACK, BARCELONA RED,
NAUTICAL BLUE

Seats, Cloth: List available colors:

BLACK GRAPHITE, SAND BEIGE

GVW:

(When Applicable)

WHEELBASE:

(When Applicable)

(Use separate page for each package)

DEALER NAME_FALLON FORD TOYOTA_

Specify State's Vehicle Item Number: 5.4A 2019 4RUNNER SR5

(i.e. 1.1 Sedan: Full size; 4 door; 6 passenger)

Option Package Name/Code:	SEE OPTION LINK	\$TBD
----------------------------------	------------------------	--------------

Option Package Name/Code:	SEE OPTION LINK	\$TBD
----------------------------------	------------------------	--------------

Option Package Name/Code:	SEE OPTION LINK	\$TBD
----------------------------------	------------------------	--------------

List Equipment Features Below:

[illegible]

ITEMIZED OPTION PAGE ~ FLEET

(Use separate page for each package)

DEALER NAME_FALLON FORD TOYOTA

DEDUCT AMOUNT

ABS Brake System	INC	\$-
Air Conditioning	INC	\$-
Cruise Control	INC	\$-
KEEP IT WILD SAVINGS		\$ 435.00
50/50 3RD ROW SEAT	\$ 692.00	
WILDERNESS PACKAGE	\$ 275.00	

Delivery charge for other than Reno or Las Vegas (i.e. Ely) \$ 1.00 per mile.

Equipment Schedule

Date: 6/4/19 9:02 AM

Budget Period: 2019-2021 Biennium (FY20-21)

Budget Account: 4467 WILDLIFE - HABITAT

Version: G01 GOVERNOR RECOMMENDS - Same in LO1

Schedule: EQUIPMENT

DU	Catg	GL	Equipment Type	FY2020		
				Yr 1 Count	Yr 1 Rate	Yr 1 Total
E711	05	8310	RNO/CC-2.16 4WD TRUCK 3/4T;EXT CAB;L BD	1	\$ 38,089	\$ 38,089
E711	05	8310	RNO/CC-2.20 4WD TRUCK 1T;CRW CAB;L BED;SRW	1	\$ 42,733	\$ 42,733
E711	05	8310	RNO/CC-5.2 SPORT UTILITY VEHICLE:4X4;4 DOOR;4-6 PASS	1	\$ 27,495	\$ 27,495

\$108,317 - Total

\$107,994 - Quoted Total

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>Wildlife</u>	Budget Account #: <u>4467</u>
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1962</u>
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$ 26,465</u>	
Is the requested vehicle(s) new or used: <u>New</u>	
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>Pickup</u>	
Mission of the requested vehicle(s): <u>Replace current vehicle with high mileage</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2005</u> Odometer Reading: <u>140,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: _____ Odometer Reading: _____ Type of Vehicle: _____ <i>Please attach an additional sheet if necessary</i>	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
APPOINTING AUTHORITY APPROVAL: <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 30%; text-align: center;"> <u>Liz O'Brien</u> Agency Appointing Authority </div> <div style="width: 30%; text-align: center;"> <u>Deputy Director</u> Title </div> <div style="width: 30%; text-align: center;"> <u>7/3/19</u> Date </div> </div>	
BOARD OF EXAMINERS' APPROVAL: <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> Board of Examiners </div> <div style="width: 40%;"> Date </div> </div>	

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2020 Chevrolet Colorado (12M43) 4WD Crew Cab		
Dealer:	Michael Hohl Motors		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: Silver Ice Metallic	Interior: Dark Ash	Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	26342.00	26342.00
SPECIFY OPTIONS: (description)	1		93.00
Fuel, additional 3-gallons	1	18.00	
Transfer case shield	1	75.00	
Transmission, 8-speed automatic	1	0.00	
Tires, P255/65R17 all-season, blackwall	1	0.00	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		N/A	N/A
Total purchase price with options	1		\$26435.00
DMV Title and DRS Fee's	1	\$29.25	\$ 29.25
GRAND TOTAL:			\$26464.25

Registered Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511
Legal Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511
County Vehicle Based In:	Washoe
Name & Phone of Person to contact when vehicle is ready for delivery:	Alan Jenne 775 688 1560



Michael Hohl Motors

Terry Rouda | 775-770-0753 | terry.rouda@michaelhohl.com

STATE BID # 998WC-S490.

Many options require other options when selected, but are not always shown. Please contact us to verify options for proper pricing. If you choose to send us a spec sheet of your required items, we will be glad to price out the vehicle and send you a quote. Total Sales Price is state bid price for base unit with no options, for ordered units only. Out of stock units are higher, and are based on a case by case basis. We are always happy to do dealer trades for vehicles that are needed immediately and can not be ordered.

Please contact us directly for any up fit items not listed by factory.

Effective date 07/01/2019



Michael Hohl Motors

Terry Rouda | 775-770-0753 | terry.rouda@michaelhohl.com

[Fleet] 2020 Chevrolet Colorado (12M43) 4WD Crew Cab 128" Work Truck

Quote Worksheet

	MSRP
Base Price	\$31,700.00
Dest Charge	\$1,095.00
Total Options	\$0.00
	Subtotal
	\$32,795.00
	Subtotal Pre-Tax Adjustments
	\$0.00
Less Customer Discount	(\$6,453.00)
	Subtotal Discount
	(\$6,453.00)
Trade-In	\$0.00
	Subtotal Trade-In
	\$0.00
	Taxable Price
	\$26,342.00
Sales Tax	\$0.00
	Subtotal Taxes
	\$0.00
	Subtotal Post-Tax Adjustments
	\$0.00
	Total Sales Price
	\$26,342.00

Dealer Signature / Date

Customer Signature / Date

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Date Version: 8650. Data Updated: Jun 25, 2019 10:02:00 PM PDT.



Michael Hohl Motors

Terry Rouda | 775-770-0753 | terry.rouda@michaelhohl.com

[Fleet] 2020 Chevrolet Colorado (12M43) 4WD Crew Cab 128" Work Truck

Optional Equipment

ADDITIONAL EQUIPMENT - SAFETY-INTERIOR

CODE	DESCRIPTION	MSRP
8S3	Backup alarm, 97 decibels	\$120.00
8X1	Label, fasten seat belts	\$4.00
—	Chevrolet Connected Access capable	\$0.00
SFW	Back-up alarm calibration	\$50.00
T4Z	Buckle to Drive	\$0.00
UD7	Rear Park Assist, Ultrasonic	\$295.00
UE1	OnStar and Chevrolet connected services capable	\$175.00

ADDITIONAL EQUIPMENT - EXTERIOR

CODE	DESCRIPTION	MSRP
01U	Special Exterior Color	\$0.00
9B7	Mirror, spotter	\$0.00
9M4	Decal and name plate delete, tailgate	\$0.00
9V5	Paints, solid, Woodland Green	\$0.00
9V9	Paints, solid, Doeskin Tan	\$0.00
9W3	Paints, solid, Wheatland Yellow	\$0.00
9W4	Paints, solid, Tangler Orange	\$0.00
A91	Tailgate, remote locking	\$0.00
BW4	Moldings, Chrome beltline	\$0.00
CGN	Bedliner, spray-on, Black with Chevrolet logo	\$475.00
D75	Door handles, body-color	\$0.00
DL6	Mirrors, outside power-adjustable, body-color, manual-folding	\$0.00
PPA	Tailgate, EZ-Lift and Lower	\$0.00
S1K	Wheel, spare, 16" x 7" (40.6 cm x 17.8 cm) steel	Inc.
TGK	Special Paint, Solid, one color	\$425.00
VK3	License plate kit, front	\$40.00
VT5	Bumper, rear body-color	\$0.00

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Data Version: 8650. Data Updated: Jun 25, 2018 10:02:00 PM PDT.



Michael Hohl Motors

Terry Rouda | 775-770-0753 | terry.rouda@michaelhohl.com

[Fleet] 2020 Chevrolet Colorado (12M43) 4WD Crew Cab 128" Work Truck

ADDITIONAL EQUIPMENT - MECHANICAL

CODE	DESCRIPTION	MSRP
5GD	Tow/Haul Mode	Inc.
5H1	Key equipment, two additional keys for single key system	\$20.00
8E1	Fuel, additional 3-gallons	\$18.00
G80	Differential, automatic locking rear	\$325.00
JL1	Trailer brake controller, integrated	\$230.00
K05	Engine block heater	\$100.00
K40	Exhaust brake	\$0.00
NQ6	Transfer case, electric, 2-speed AutoTrac	\$0.00
NY7	Transfer case shield	\$75.00
Z82	Trailer Package, heavy-duty	\$250.00

ADDITIONAL EQUIPMENT - INTERIOR

CODE	DESCRIPTION	MSRP
ATG	Remote Keyless Entry, extended range	\$0.00
B38	Floor covering, full-length Black vinyl	\$0.00
K34	Cruise control, electronic, automatic	\$0.00
UTJ	Theft-deterrent system, unauthorized entry	\$0.00

ADDITIONAL EQUIPMENT - PACKAGE

CODE	DESCRIPTION	MSRP
PCN	WT Convenience Package	\$530.00
PCP	Custom Special Edition	\$2,050.00
PCX	Work Truck Appearance Package	\$435.00

ADDITIONAL EQUIPMENT - ENTERTAINMENT

CODE	DESCRIPTION	MSRP
VV4	4G LTE Wi-Fi Hotspot capable	\$0.00

ADDITIONAL EQUIPMENT - LPO

CODE	DESCRIPTION	MSRP
5JY	LPO, Soft folding tonneau cover	\$595.00
5K2	LPO, Door Decal Package	\$295.00
5VI	LPO, Cargo tie-down rings (set of 4)	\$125.00

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Data Version: 8650. Data Updated: Jun 25, 2019 10:02:00 PM PDT.

**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>Wildlife</u>	Budget Account #: <u>4467</u>
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-698-1982</u>
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>1</u> Amount of the request: <u>\$38,876</u>	
Is the requested vehicle(s) new or used: <u>New</u>	
Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>Pickup</u>	
Mission of the requested vehicle(s): <u>Replace "lemon" vehicle which is unsafe/inoperable</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>8 E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>1</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2000</u> Odometer Reading: <u>98,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: Odometer Reading: Type of Vehicle:	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
<i>Please attach an additional sheet if necessary</i>	
APPOINTING AUTHORITY APPROVAL: <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> <u>Liz O'Brien</u> Agency Appointing Authority </div> <div style="text-align: center;"> <u>Deputy Director</u> Title </div> <div style="text-align: center;"> <u>7/3/19</u> Date </div> </div>	
BOARD OF EXAMINERS' APPROVAL: <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> Board of Examiners </div> <div style="width: 40%;"> Date </div> </div>	

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2020 Chevrolet Silverado 2500 HD (CK20753), 4WD Double Cab		
Dealer:	Michael Hohl Motors		
Delivery Location:	Reno		
Vehicle Colors:	Exterior: Silver Ice Metallic	Interior: Dark Ash	Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	28956.00	28956.00
SPECIFY OPTIONS: (description)	1		9890.00
Engine, Duramax 6.6L Turbo-Diesel V8	1	9890.00	
DELIVERY COST: (If other than Reno\Carson or Las Vegas)		N/A	N/A
Total purchase price with options	1		\$38846.00
DMV Title and DRS Fee's	1	\$29.25	\$ 29.25
GRAND TOTAL:			\$38875.25

Registered Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511
Legal Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511
County Vehicle Based In:	Washoe
Name & Phone of Person to contact when vehicle is ready for delivery:	Alan Jenne 775 688 1560



Michael Hohl Motors

Terry Rouda | 775-770-0753 | terry.rouda@michaelhohl.com

STATE BID # 998WC-S490.

Many options require other options when selected, but are not always shown. Please contact us to verify options for proper pricing. If you choose to send us a spec sheet of your required items, we will be glad to price out the vehicle and send you a quote. Total Sales Price is state bid price for base unit with no options, for ordered units only. Out of stock units are higher, and are based on a case by case basis. We are always happy to do dealer trades for vehicles that are needed immediately and can not be ordered.

Please contact us directly for any up fit items not listed by factory.

Effective date 07/01/2019



Michael Hohl Motors

Terry Rouda | 775-770-0753 | terry.rouda@michaelhohl.com

[Fleet] 2020 Chevrolet Silverado 2500HD (CK20753) 4WD Double Cab 149" Work Truck

Quote Worksheet

	MSRP
Base Price	\$39,300.00
Dest Charge	\$1,595.00
Total Options	\$0.00
	Subtotal
	\$40,895.00
	Subtotal Pre-Tax Adjustments
	\$0.00
Less Customer Discount	(\$11,939.00)
	Subtotal Discount
	(\$11,939.00)
Trade-In	\$0.00
	Subtotal Trade-In
	\$0.00
	Taxable Price
	\$28,956.00
Sales Tax	\$0.00
	Subtotal Taxes
	\$0.00
	Subtotal Post-Tax Adjustments
	\$0.00
	Total Sales Price
	\$28,956.00

Dealer Signature / Date

Customer Signature / Date

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Data Version: 8650. Data Updated: Jun 25, 2019 10:02:00 PM PDT.



Michael Hohl Motors

Terry Rouda | 775-770-0753 | terry.rouda@michaelhohl.com

[Fleet] 2020 Chevrolet Silverado 2500HD (CK20753) 4WD Double Cab 149" Work Truck

Optional Equipment

ADDITIONAL EQUIPMENT - MECHANICAL

CODE	DESCRIPTION	MSRP
5M7	Speedometer calibration	\$50.00
9B9	Governor, electronic speed sensor set to 70 MPH	\$50.00
9C2	Governor, electronic speed sensor set to 65 MPH	\$50.00
9D7	Governor, electronic speed sensor set to 75 MPH	\$50.00
—	Battery, heavy-duty dual 730 cold-cranking amps/70 Amp-hr	\$0.00
—	Capped Fuel Fill	\$0.00
—	Suspension, Off-Road	\$0.00
F60	Heavy Duty Front Spring Package	\$45.00
FPF	DPF, diesel particulate filter, manual regeneration	\$250.00
JHD	Hill Descent Control	\$0.00
JL1	Trailer brake controller, integrated	\$275.00
K05	Engine block heater	\$100.00
K40	Exhaust brake	\$0.00
K4B	Battery, auxiliary, 730 cold-cranking amps/70 Amp-hr	\$135.00
KHF	Alternators, dual, 220-amps primary, 170-amps auxiliary	\$380.00
KW5	Alternator, 220 amps	\$150.00
NQH	Transfer case, two-speed active	\$200.00
NZZ	Skid Plates	\$150.00
PTO	Power Take-Off	W/A
UF3	High idle switch	\$200.00
UY2	Trailer wiring provisions	\$35.00

ADDITIONAL EQUIPMENT - INTERIOR

CODE	DESCRIPTION	MSRP
5H1	Key equipment, two additional keys for single key system	\$50.00
5L5	Theft deterrent system fleet immobilizer modifications	\$50.00
5Y1	Seats, Driver and passenger front individual seats	\$0.00
9L7	Upfitter switch kit, (5)	\$150.00
—	Compass	\$0.00

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[Fleet] 2020 Chevrolet Silverado 2500HD (CK20753) 4WD Double Cab 149" Work Truck

ADDITIONAL EQUIPMENT - INTERIOR

CODE	DESCRIPTION	MSRP
A2X	Seat adjuster, driver 10-way power	\$290.00
AQQ	Remote Keyless Entry	\$0.00
B30	Floor covering, color-keyed carpeting	\$100.00
B32	Floor mats, rubberized vinyl, front	\$0.00
B33	Floor mats, rubberized-vinyl rear	\$0.00
C49	Defogger, rear-window electric	\$225.00
DD8	Mirror, inside rearview auto-dimming	\$0.00
DRZ	Rear Camera Mirror, inside rearview auto-dimming	\$535.00
K34	Cruise control, electronic	\$225.00
KC9	Power outlet, bed mounted, 120-volt	\$0.00
KI4	Power outlet, instrument panel, 120-volt	\$150.00
SFW	Back-up alarm calibration	\$50.00

ADDITIONAL EQUIPMENT - SAFETY-INTERIOR

CODE	DESCRIPTION	MSRP
8S3	Backup alarm, 97 decibels	\$138.00
—	Chevrolet Connected Access capable	\$0.00
UD5	Front and Rear Park Assist, ultrasonic	\$0.00
UD7	Rear Park Assist, Ultrasonic	\$295.00
UE1	OnStar and Chevrolet connected services capable	\$175.00
UFG	Rear Cross Traffic Alert	\$0.00
UKC	Lane Change Alert with Side Blind Zone Alert	\$0.00

ADDITIONAL EQUIPMENT - EXTERIOR

CODE	DESCRIPTION	MSRP
01U	Special Exterior Color	\$0.00
5Z4	Spare wheel, carrier and lock delete	(\$20.00)
8F2	Ornamentation, delete	\$0.00
9G8	Headlamps, daytime running lamps and automatic headlamp control delete	\$50.00
9M4	Decal and name plate delete, tailgate	\$0.00
9R1	Decal delete, Pickup bed	\$0.00

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[Fleet] 2020 Chevrolet Silverado 2500HD (CK20753) 4WD Double Cab 149" Work Truck

ADDITIONAL EQUIPMENT - EXTERIOR

CODE	DESCRIPTION	MSRP
9V5	Paints, solid, Woodland Green	\$450.00
9W3	Paints, solid, Wheatland Yellow	\$450.00
9W4	Paints, solid, Tangier Orange	\$450.00
AKO	Glass, deep-tinted	\$200.00
BHP	Winter Grille Cover	\$0.00
CGN	Chevytec spray-on bedliner	\$545.00
DBG	Mirrors, outside power-adjustable vertical trailering	\$0.00
DLF	Mirrors, outside heated power-adjustable, manual folding	\$50.00
DMQ	Decal, Alaskan Snow Plow Special Edition	\$0.00
DWI	Mirrors, outside power-adjustable vertical trailering with heated and auto-dimming upper glass	\$720.00
QT5	Tailgate, gate function manual with EZ Lift	\$0.00
TGK	Special Paint	\$450.00
U01	Lamps, Smoked Amber roof marker, (LED)	\$55.00
UF2	LED Cargo Area Lighting	\$125.00
V46	Bumper, front chrome	\$200.00
VJH	Bumper, rear chrome	\$0.00
VK3	License plate kit, front	\$0.00

ADDITIONAL EQUIPMENT - PACKAGE

CODE	DESCRIPTION	MSRP
ANQ	Alaskan Snow Plow Special Edition	\$2,000.00
CMT	Gooseneck/5th Wheel Package	\$1,365.00
PCV	WT Convenience Package	\$1,185.00
PQA	WT Safety Package	\$1,090.00
VYU	Snow Plow Prep Package	\$300.00
Z6A	Gooseneck/5th Wheel Prep Package	\$0.00
Z71	Z71 Off-Road Package	\$525.00
ZLQ	WT Fleet Convenience Package	\$760.00

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[Fleet] 2020 Chevrolet Silverado 2500HD (CK20753) 4WD Double Cab 149" Work Truck

ADDITIONAL EQUIPMENT - ENTERTAINMENT

CODE	DESCRIPTION	MSRP
VV4	4G LTE Wi-Fi Hotspot capable	\$0.00

ADDITIONAL EQUIPMENT - LPO

CODE	DESCRIPTION	MSRP
PDB	LPO, Dark Essentials Package	\$375.00
RIA	LPO, All-weather floor liners	\$210.00
RIK	LPO, Black name plates	\$0.00
RVQ	LPO, Black tubular assist steps, 6" rectangular	\$750.00
RVS	LPO, Assist steps - 4" Black - round	\$750.00
S6L	LPO, Off-road assist steps, 3" round tubular, Black	\$965.00
SB7	LPO, Black tailgate lettering	\$0.00
SFZ	LPO, Black Bowtie emblem, front	\$125.00
VOZ	LPO, Tri-fold hard tonneau cover	\$1,100.00
VQK	LPO, Molded splash guards, Black	\$180.00
VQO	LPO, Black work step	\$450.00
VQZ	LPO, Polished exhaust tip	\$150.00
VXJ	LPO, Assist steps - 4" chromed round	\$750.00

ADDITIONAL EQUIPMENT - OTHER

CODE	DESCRIPTION	MSRP
FVX	National Fleet Incentive	\$0.00
P0G	GM Commercial Link - 1 year of Service	\$120.00
P0H	GM Commercial Link - 2 years of Service	\$240.00
P0I	GM Commercial Link - 3 years of Service	\$360.00
P0J	OnStar Additional 21 months of OnStar Fleet Safety and Security.	\$0.00
P0K	OnStar Additional 33 months of OnStar Fleet Safety and Security.	\$0.00
P0L	OnStar Additional 45 months of OnStar Fleet Safety and Security.	\$0.00
P0M	OnStar Additional 21 months of OnStar Fleet Remote Access.	\$0.00
P0N	OnStar Additional 33 months of OnStar Fleet Remote Access.	\$0.00
P0O	OnStar Additional 45 months of OnStar Fleet Remote Access.	\$0.00
R9Y	Fleet Free Maintenance Credit.	(\$45.00)

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[Fleet] 2020 Chevrolet Silverado 2500HD (CK20753) 4WD Double Cab 149" Work Truck

PAINT

CODE	DESCRIPTION	MSRP
GAN	Silver Ice Metallic	\$0.00
GAZ	Summit White	\$0.00
GBA	Black	\$0.00
GJI	Shadow Gray Metallic	\$0.00
GNK	Oxford Brown Metallic	\$0.00

AXLE

CODE	DESCRIPTION	MSRP
GT4	Rear axle, 3.73 ratio	\$0.00
GU6	Rear axle, 3.42 ratio	\$0.00

SEAT TRIM

CODE	DESCRIPTION	MSRP
H0U	Jet Black, Cloth seat trim	\$0.00
H1T	Jet Black, Cloth seat trim	\$0.00
H2G	Jet Black, Vinyl seat trim	\$0.00

RADIO

CODE	DESCRIPTION	MSRP
IOR	Audio system, Chevrolet Infotainment 3 system	\$0.00

ENGINE

CODE	DESCRIPTION	MSRP
L5P	Engine, Duramax 6.6L Turbo-Diesel V8	\$9,890.00
L8T	Engine, 6.6L V8	Inc.

TRANSMISSION

CODE	DESCRIPTION	MSRP
MGM	Transmission, Allison 10-speed automatic	\$0.00
MGU	Transmission, Allison 10-speed automatic with integrated Power Take-Off (PTO)	\$0.00
MYD	Transmission, 6-speed automatic, heavy-duty	\$0.00

WHEELS

CODE	DESCRIPTION	MSRP
PYN	Wheels, 17" (43.2 cm) painted steel, Silver	Inc.

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**Board of Examiners Request for Approval to Purchase a
State Vehicle Pursuant to NRS 334.010**

Agency Name: <u>Wildlife</u>	Budget Account #: <u>1467</u>
Contact Name: <u>Liz O'Brien</u>	Telephone Number: <u>775-688-1982</u>
Pursuant to NRS 334.010, agencies must receive prior written consent to purchase State vehicles. This applies to all new and used vehicles. Please provide the following information:	
Number of vehicles requested: <u>2</u> Amount of the request: <u>\$42,657</u> Is the requested vehicle(s) new or used: <u>New</u> Type of vehicle(s) purchasing e.g. compact sedan, intermediate sedan, SUV, pick up, etc.: <u>Pick up</u> Mission of the requested vehicle(s): <u>Replace current vehicle with high mileage</u>	
Were funds legislatively approved for the request? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide the decision unit number: <u>E711</u> If no, please explain how the vehicles will be funded?
Is the requested vehicle(s) an addition to an existing fleet or replacement vehicle(s): <input type="checkbox"/> Addition(s) <input checked="" type="checkbox"/> <u>2</u> Replacement(s)	
Does the requested vehicle(s) comply with "Smart Way" or "Smart Way Elite" requirements pursuant to SAM 1308? If not, please explain. <u>Yes</u>	
Please Complete for Replacement Vehicles Only: (For type of vehicle, i.e., compact sedan, intermediate sedan, SUV, pick up, etc.) Current Vehicle Information: Vehicle #1 Model Year: <u>2004</u> Odometer Reading: <u>220,000</u> Type of Vehicle: <u>Pickup</u> Vehicle #2 Model Year: _____ Odometer Reading: _____ Type of Vehicle: _____ <i>Please attach an additional sheet if necessary</i>	Does this request meet the replacement schedule criteria pursuant to SAM 1300? If no, explain why the vehicle is being replaced. <u>Yes</u> If the replacement vehicle is an upgrade to the existing vehicle, explain the need for the upgrade.
APPOINTING AUTHORITY APPROVAL: <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 30%;"> <u>Liz O'Brien</u> Agency Appointing Authority </div> <div style="width: 30%;"> <u>Deputy Director</u> Title </div> <div style="width: 30%;"> <u>7/3/19</u> Date </div> </div>	
BOARD OF EXAMINERS' APPROVAL: <input type="checkbox"/> Approved for Purchase <input type="checkbox"/> Not Approved for Purchase <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> Board of Examiners </div> <div style="width: 40%;"> Date </div> </div>	

Vehicle Order Information Form

Does this vehicle meet "Smart Way or Smart Way Elite" requirements? If not, agency must fill out Vehicle Order Justification Sheet.

Please print out this page and complete all fields.

Vehicle Item No., Make, Model & No.:	2020 Chevrolet Silverado 2500HD (CK20743) 4WD Crew Cab 159" Work Truck		
Dealer Name:	Michael Hohl Motors		
Delivery Location:	6980 Sierra Center Parkway, Ste 120, Reno NV 89511		
Vehicle Colors:	Exterior: Silver Ice Metallic	Interior: Dark Ash	Cloth Vinyl
	Quantity	Unit Cost	Total Cost
BASE PRICE (Reno, Carson City or Las Vegas delivery)	1	\$30798.00	\$30798.00
SPECIFY OPTIONS: (description)			\$11825.00
DPF, diesel particulate filter, manual registration	1	250.00	
Trailer brake controller, integrated	1	275.00	
Engine block heater	1	100.00	
Skid plates	1	150.00	
Trailer wiring provisions	1	35.00	
Cruise control, electronic	1	225.00	
Headlamps, daytime running lamps and automatic headlamp control delete	1	50.00	
LED Cargo lighting	1	125.00	
Off Road Package	1	525.00	
Engine, Duramax 6.6L Turbo-Diesel V8	1	9890.00	
Tires, LT265/70R17E	1	200.00	

DELIVERY COST: (If other than Reno\Carson or Las Vegas)		N/A	N/A
Total purchase price with options	1		\$42623.00
DMV Title and DRS Fee's	1	\$29.25	\$ 29.25
GRAND TOTAL:			\$42652.25

Registered Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511
Legal Owner:	Agency Name & Address: Nevada Department of Wildlife 6980 Sierra Center Parkway, Suite 120 Reno, NV 89511
County Vehicle Based In:	Washoe
Name & Phone of Person to contact when vehicle is ready for delivery:	Alan Jenne – 775 6881560



Michael Hohl Motors

Terry Rouda | 775-770-0753 | terry.rouda@michaelhohl.com

STATE BID # 998WC-S490.

Many options require other options when selected, but are not always shown. Please contact us to verify options for proper pricing. If you choose to send us a spec sheet of your required items, we will be glad to price out the vehicle and send you a quote. Total Sales Price is state bid price for base unit with no options, for ordered units only. Out of stock units are higher, and are based on a case by case basis. We are always happy to do dealer trades for vehicles that are needed immediately and can not be ordered.

Please contact us directly for any up fit items not listed by factory.

Effective date 07/01/2019



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[Fleet] 2020 Chevrolet Silverado 2500HD (CK20743) 4WD Crew Cab 159" Work Truck

Quote Worksheet

	MSRP
Base Price	\$41,100.00
Dest Charge	\$1,595.00
Total Options	\$0.00
	Subtotal
	\$42,695.00
	Subtotal Pre-Tax Adjustments
	\$0.00
Less Customer Discount	(\$11,897.00)
	Subtotal Discount
	(\$11,897.00)
Trade-In	\$0.00
	Subtotal Trade-In
	\$0.00
	Taxable Price
	\$30,798.00
Sales Tax	\$0.00
	Subtotal Taxes
	\$0.00
	Subtotal Post-Tax Adjustments
	\$0.00
	Total Sales Price
	\$30,798.00

Dealer Signature / Date

Customer Signature / Date

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[Fleet] 2020 Chevrolet Silverado 2500HD (CK20743) 4WD Crew Cab 159" Work Truck

Optional Equipment

ADDITIONAL EQUIPMENT - MECHANICAL

CODE	DESCRIPTION	MSRP
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9D7	Governor, electronic speed sensor set to 75 MPH	\$50.00
—	Battery, heavy-duty dual 730 cold-cranking amps/70 Amp-hr	\$0.00
—	Capped Fuel Fill	\$0.00
—	Suspension, Off-Road	\$0.00
F60	Heavy Duty Front Spring Package	\$45.00
FPF	DPF, diesel particulate filter, manual regeneration	\$250.00
JHD	Hill Descent Control	\$0.00
JL1	Trailer brake controller, integrated	\$275.00
K05	Engine block heater	\$100.00
K40	Exhaust brake	\$0.00
K4B	Battery, auxiliary, 730 cold-cranking amps/70 Amp-hr	\$135.00
KHF	Alternators, dual, 220-amps primary, 170-amps auxiliary	\$380.00
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PTO	Power Take-Off	W/A
UF3	High Idle switch	\$200.00
UY2	Trailer wiring provisions	\$35.00

ADDITIONAL EQUIPMENT - INTERIOR

CODE	DESCRIPTION	MSRP
5H1	Key equipment, two additional keys for single key system	\$50.00
5L5	Theft deterrent system fleet immobilizer modifications	\$50.00
5Y1	Seats, Driver and passenger front individual seats	\$0.00
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CODE	DESCRIPTION	MSRP
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AQQ	Remote Keyless Entry	\$0.00
B30	Floor covering, color-keyed carpeting	\$100.00
B32	Floor mats, rubberized vinyl, front	\$0.00
B33	Floor mats, rubberized-vinyl rear	\$0.00
C49	Defogger, rear-window electric	\$225.00
DD8	Mirror, inside rearview auto-dimming	\$0.00
DRZ	Rear Camera Mirror, inside rearview auto-dimming	\$535.00
K34	Cruise control, electronic	\$225.00
KC9	Power outlet, bed mounted, 120-volt	\$0.00
KI4	Power outlet, instrument panel, 120-volt	\$150.00
SFW	Back-up alarm calibration	\$50.00

ADDITIONAL EQUIPMENT - SAFETY-INTERIOR

CODE	DESCRIPTION	MSRP
8S3	Backup alarm, 97 decibels	\$138.00
—	Chevrolet Connected Access capable	\$0.00
UD5	Front and Rear Park Assist, ultrasonic	\$0.00
UD7	Rear Park Assist, Ultrasonic	\$295.00
UE1	OnStar and Chevrolet connected services capable	\$175.00
UFG	Rear Cross Traffic Alert	\$0.00
UKC	Lane Change Alert with Side Blind Zone Alert	\$0.00

ADDITIONAL EQUIPMENT - EXTERIOR

CODE	DESCRIPTION	MSRP
01U	Special Exterior Color	\$0.00
5Z4	Spare wheel, carrier and lock delete	(\$20.00)
8F2	Ornamentation, delete	\$0.00
9G8	Headlamps, daytime running lamps and automatic headlamp control delete	\$50.00
9M4	Decal and name plate delete, tailgate	\$0.00
9R1	Decal delete, Pickup bed	\$0.00

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[Fleet] 2020 Chevrolet Silverado 2500HD (CK20743) 4WD Crew Cab 159" Work Truck

ADDITIONAL EQUIPMENT - EXTERIOR

CODE	DESCRIPTION	MSRP
9V5	Paints, solid, Woodland Green	\$450.00
9W3	Paints, solid, Wheatland Yellow	\$450.00
9W4	Paints, solid, Tanger Orange	\$450.00
AKO	Glass, deep-tinted	\$200.00
BHP	Winter Grille Cover	\$0.00
CGN	Chevytec spray-on bedliner	\$545.00
DBG	Mirrors, outside power-adjustable vertical trailing	\$0.00
DLF	Mirrors, outside heated power-adjustable, manual folding	\$50.00
DMQ	Decal, Alaskan Snow Plow Special Edition	\$0.00
DWI	Mirrors, outside power-adjustable vertical trailing with heated and auto-dimming upper glass	\$720.00
QT5	Tailgate, gate function manual with EZ Lift	\$0.00
TGK	Special Paint	\$450.00
U01	Lamps, Smoked Amber roof marker, (LED)	\$55.00
UF2	LED Cargo Area Lighting	\$125.00
V46	Bumper, front chrome	\$200.00
VJH	Bumper, rear chrome	\$0.00
VK3	License plate kit, front	\$0.00

ADDITIONAL EQUIPMENT - PACKAGE

CODE	DESCRIPTION	MSRP
ANQ	Alaskan Snow Plow Special Edition	\$2,000.00
CMT	Gooseneck/5th Wheel Package	\$1,365.00
PCV	WT Convenience Package	\$1,185.00
PQA	WT Safety Package	\$1,090.00
VYU	Snow Plow Prep Package	\$300.00
Z6A	Gooseneck/5th Wheel Prep Package	\$0.00
Z71	Z71 Off-Road Package	\$525.00
ZLQ	WT Fleet Convenience Package	\$760.00

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Steve Sisolak
Governor

Susan Brown
Director



STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division

209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 13, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Shauna Tilley, Executive Branch Budget Officer
Governor's Finance Office

Subject: BOARD OF EXAMINERS **ACTION** ITEM

The following describes an action item submitted for placement on the agenda of the next Board of Examiners meeting.

DEPARTMENT OF ADMINISTRATION – PURCHASING DIVISION

Agenda Item Write-up:


Pursuant to NRS 333.705, subsection 1, the Department of Administration, Purchasing Division, on behalf of Department of Agriculture, requests authority to contract with current employee David Voth to perform livestock brand inspector duties on an intermittent, on-call basis. The employee will be hired through Master Service Agreement #18404, with HAT Ltd Partnership, DBA Manpower.

Additional Information:

Mr. Voth is currently employed with the Department of Agriculture, Plant Industry Division as an Agriculturist 3. During some busy times of the year, the current roster of brand inspectors employed through Manpower is unable to complete all requested brand inspections for the Animal Industry Division in a timely fashion. Mr. Voth would assist in meeting demand during peak times, on an on-call basis not to exceed 20 hours per month, and in a manner that would not conflict with his current duties.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: 
ACTION ITEM: _____

Steve Sisolak
Governor



Deonne E. Contine
Director

Kevin D. Doty
Administrator

**STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION**

Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

August 5, 2019

MEMORANDUM

To: Shauna Tilley

From: Annette Morfin, Purchasing Officer *am*

Subject: CETS Contract 18404 – HAT LTD Partnership dba Manpower
RFP 3296 – Temporary Employment Services

RECEIVED
AUG - 6 2019
GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

Please find attached a copy of the "Authorization to Contract with a Current Employee" for David Voth who Manpower wants to hire. Manpower is aware he would not be able to start with them until approval of the Clerk of the Board or September Board of Examiners.

David Voth is currently working for the Department of Agriculture and does not plan on leaving his current position. This would be separate from his current position and would not conflict with his current position.

If you have any questions, please contact me at 684-0185 or amorfin@dmin.nv.gov



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Current Employee

Employee Information	
Employee Name:	David Voth
Employee ID Number:	60141
Job Title:	Agriculturist 3
Current Employee Agency:	Nevada Department of Agriculture
Current Class and Grade:	34-3
Employment Dates:	9/14/2016 - Current
Contracting Agency:	Manpower / Nevada Department of Agriculture
Please check which of the following applies:	
<input checked="" type="checkbox"/> Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.	
<input type="checkbox"/> Contract is with an entity (contractor) other than a temporary employment agency that employs a current State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.	
a. Summarize scope of contract work.	
Perform occasional brand inspections on a temporary on-call basis.	
b. Document the employee's current job description.	
Currently employed with the NDA Plant Industry Division performing tasks for rangeland health and noxious weeds.	
c. Explain how this differs from current State duties.	
This temporary manpower position will only involve completing inspections of livestock on an intermittent on-call basis for the NDA Animal Industry Division. The duties performed are significantly different from his assigned work duties <u>and will be performed entirely outside of normal assigned work hours.</u>	
d. Explain why existing State employees within your agency cannot perform this function.	
During some busy times of the year, current Manpower employed brand inspectors cannot complete all requested brand inspections in a timely fashion.	

e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate <u>NAC 284.750</u>.
N/A
f. List contractor's hourly rate.
\$15.23
g. List the range of comparable State employee rates.
\$13.42 - \$19.13
h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.
N/A
i. Document justification for hiring contractor.
All part-time brand inspectors employed by the Nevada Department of Agriculture are contracted through the Manpower temporary employment agency.
j. Will the employee be collecting PERS at any time during the contract?
No.
k. What is the duration of the contract with the current employee? (include start and end date)
9/1/2019 - 3/31/2021
l. Will the current employee be working FT/PT? If PT how many hours
Part Time – will not exceed 20 hours per month.

Comments:

Kevin D. Doty

8/5/19

Contracting Agency Head's Signature and Date

Shawn Tilly

8.13.19

Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date

Secondary Employment Disclosure

Employee Name: DAVID VOTH
Employee ID number: (2014)
Name of Secondary Employer: MANPOWER
(If self employed, enter the business name)
Address of Secondary Employer/Self Employment: 1040 COMMERCIAL ST ELKO, NV 89801
Secondary Employer Phone Number: (775) 753-9855

Describe the nature of the work performed by the secondary employer or self employment business.	BRAND INSPECTIONS
Might this activity require or induce you to disclose controlled information obtained as part of your job or impair your independence or ethics?	N/A
List the specific duties, functions, and activities that you personally will perform for the secondary employer or in the self-employment business.	INSPECTIONS OF LIVESTOCK FOR TRANSPORT OR SALE
Document your work schedule with the secondary/self employment; how many and what hours weekly; what your State work schedule is; how many and what hours you will work weekly. Will this conflict with your State work hours?	VARIOUS HOURS - WEEKENDS & EARLY MORNINGS. NO CONFLICT w/ STATE HOURS
If applicable, list provider agreements, brief scope of services, and associated State agencies.	N/A

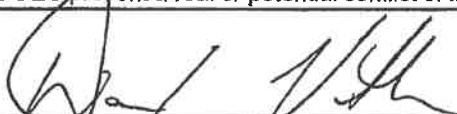
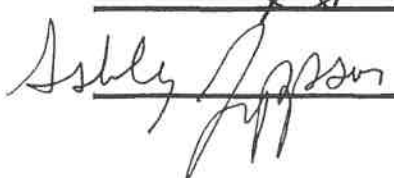
Comments:

Employee statement

☒ I certify that my outside employment does not present a conflict with my State employment. The employment may not be construed as an extension of my duties or responsibilities with the State. I will devote my full time, attention and effort to State employment during official duty hours and not to contractual obligations. If a potential conflict arises, I will notify my supervisor and agency head, within three business days. I agree to submit a new application for approval by July 1 of each year, or within 30 days of a change in outside employment status.

Employee's agency head shall check one of the following statements:

☒ I have reviewed the information provided on this form and determined that this secondary employment **DOES NOT** present a real or potential conflict of interest to the State of Nevada.
☐ I have reviewed the information provided on this form and determined that this secondary employment **DOES** present a real or potential conflict of interest to the State of Nevada.


 Employee's Signature and Date 8-5-19

 Agency Head's Signature and Date 8/5/19

Steve Sisolak
Governor

Susan Brown
Director

Kimberley Perondi
Deputy Director




**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 19, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Kristina Shea, Executive Branch Budget Officer 
Governor's Finance Office

Subject: BOARD OF EXAMINERS **ACTION** ITEM

The following describes an action item submitted for placement on the agenda of the next Board of Examiners meeting.

DEPARTMENT OF CORRECTIONS

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Tamara Bartel, a current Correctional Sergeant with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with David Bequette, a current Correctional Vocation Trainer with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Dennis Ciciliano, a current Combination Welder II with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Christian Jones, a current Electronics Technician III with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with John Julio, a current Food Services Manager II with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Rudolph Martinez, a current Supply Technician I with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Bryan Nason, a current Locksmith I with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Sandy Rose, a current Correctional Vocational Trainer with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Lashawn Smith, a current Correctional Caseworker Specialist III with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Beverly Stewart, a current Accounting Assistant III with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Michael Thalman, a current Correctional Sergeant with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Duane Wilson, a current Food Service Manager III with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Pamela Bellinger, a current Correctional Officer with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Greg Ingham, a current Senior Correctional Officer with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Jacques Graham, a current Administrative Assistant IV with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Danyele Sipes, a current Administrative Assistant I with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Sheryl Drew, a current Supply Technician I with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Pursuant to NRS 333.705, subsection 1, the Department requests authority to contract with Karl Grimmer, a current Senior Correctional Officer with the Nevada Department of Corrections, to deliver packages to inmates. Deliveries are completed on an as needed basis through December 31, 2019.

Additional Information:

Nevada Department of Corrections (NDOC) currently contracts with Access Securepak (Keefe Group, LLC DBA Keefe Supply Company) to provide a package program for incarcerated individuals in which family and friends can purchase food and/or clothing that is delivered, via secured means, to inmates housed throughout NDOC facilities and institutions. Each eligible inmate is allowed to order one clothing item and one food package per quarter or monthly if the inmate is in transitional housing facility. The extension of the contracted employees will help continue the inmate package program and reduce inmate grievances as the department hires new staff approved during the 2019 Session.

The 2019 Legislature approved the addition of Retail Storekeeper positions to address the inmate package program, which will eliminate the need to contract with current employees, however the positions are effective October 1, 2019 and the NDOC indicates

that the new positions will need to have overlap with the contracted employees for Non-custody basic training and additional job specific training purposes. The department indicates it will discontinue contracted employees services prior to December 2019 as the new positions are hired and trained.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: _____

ACTION ITEM: _____



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Current Employee

Employee Information

Employee Name: Tamara Bartel

Employee ID Number: 12806

Job Title: Correctional Sergeant

Current Employee Agency: Nevada Department of Corrections – Lovelock Correctional Center

Current Class and Grade: 13.311 Grade 37

Employment Dates: 6/3/1995 – Current

Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

- ☐ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
 - ☒ Contract is with an entity (contractor) other than a temporary employment agency that employs a current State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.
- a. Summarize scope of contract work.**

Title of Contracted Position is a Commissary Representative — Delivery Clerk. Delivery clerks deliver individually packaged orders to inmates at specified correctional facilities. Verify identity of inmates and obtain signature from inmate upon delivery of goods.

b. Document the employee's current job description.

See attached State of Nevada Work Performance Standards

c. Explain how this differs from current State duties.

Commissary Representative — Delivery Clerk is different from a Correctional Sergeant work in a line supervisory capacity and have charge of an assigned watch or major area in a State correctional institution/facility and supervise the work of subordinate officers in the safe custody, discipline and welfare of inmates in State correctional facilities in a controlled humane environment.

d. Explain why existing State employees within your agency cannot perform this function.

After reviewing, this duty can be performed by a state employee, a Retail Storekeeper within the NDOC; however, at this time there is not a dedicated FTE assigned to this function. Moving forward an additional FTE is being pursued in the FY 20-21 budget.

- e. **Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.**

No

- f. **List contractor's hourly rate.**

The vendor pays the Delivery Clerk \$5 per packaged delivered.

- g. **List the range of comparable State employee rates.**

Not applicable

- h. **Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.**

Not applicable

- i. **Document justification for hiring contractor.**

While the vendor must incur the cost of hiring off-duty custody or non-custody staff to deliver packages; NDOC is requesting an additional FTE in the SFY 20-21 budget. This request is to formalize the current relationship with the employee, vendor, and the State of Nevada.

- j. **Will the employee be collecting PERS at any time during the contract?**

No

- k. **What is the duration of the contract with the current employee? (include start and end date)**

Current – December 31, 2019

- l. **Will the current employee be working FT/PT? If PT how many hours**

Part-time depending on number of packages received at the facility.

Comments:

 8/20/19
Contracting Agency Head's Signature and Date

 8/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

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Authorization to Contract with a Current Employee

Employee Information

Employee Name: David Bequette
Employee ID Number: 23254
Job Title: Correctional Vocation Trainer
Current Employee Agency: Nevada Department of Corrections – Lovelock Correctional Center
Current Class and Grade: 5.225 Grade 32
Employment Dates: 12/4/2000 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

- ☐ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
- ☒ Contract is with an entity (contractor) other than a temporary employment agency that employs a current State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.
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- b. Document the employee's current job description.**

See attached State of Nevada Work Performance Standards

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Commissary Representative — Delivery Clerk is different from a Correctional Sergeant work in a line supervisory capacity and have charge of an assigned watch or major area in a State correctional institution/facility and supervise the work of subordinate officers in the safe custody, discipline and welfare of inmates in State correctional facilities in a controlled humane environment.

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After reviewing, this duty can be performed by a state employee, a Retail Storekeeper within the NDOC; however, at this time there is not a dedicated FTE assigned to this function. Moving forward an additional FTE is being pursued in the FY 20-21 budget.

- e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.**

No

- f. List contractor's hourly rate.**

The vendor pays the Delivery Clerk \$5 per packaged delivered.

- g. List the range of comparable State employee rates.**

Not applicable

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.**

Not applicable

- i. Document justification for hiring contractor.**

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No

- k. What is the duration of the contract with the current employee? (include start and end date)**


Current – December 31, 2019

- l. Will the current employee be working FT/PT? If PT how many hours**

Part-time depending on number of packages received at the facility.

Comments:

 8/20/19
Contracting Agency Head's Signature and Date

 08/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



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DEPARTMENT OF ADMINISTRATION
Purchasing Division

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Authorization to Contract with a Current Employee

Employee Information

Employee Name: Dennis Ciciliano
Employee ID Number: 46277
Job Title: Combination Welder II
Current Employee Agency: Nevada Department of Corrections – Ely State Prison
Current Class and Grade: 9.430 Grade 31
Employment Dates: 1/3/2011 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

- ☐ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
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- a. Summarize scope of contract work.**

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b. Document the employee's current job description.

See attached State of Nevada Work Performance Standards

c. Explain how this differs from current State duties.

Commissary Representative — Delivery Clerk is different from a Correctional Sergeant work in a line supervisory capacity and have charge of an assigned watch or major area in a State correctional institution/facility and supervise the work of subordinate officers in the safe custody, discipline and welfare of inmates in State correctional facilities in a controlled humane environment.

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- e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.**

No

- f. List contractor's hourly rate.**

The vendor pays the Delivery Clerk \$5 per packaged delivered.

- g. List the range of comparable State employee rates.**

Not applicable

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.**

Not applicable

- i. Document justification for hiring contractor.**

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- j. Will the employee be collecting PERS at any time during the contract?**

No

- k. What is the duration of the contract with the current employee? (include start and end date)**

Current – December 31, 2019

- l. Will the current employee be working FT/PT? If PT how many hours**

Part-time depending on number of packages received at the facility.

Comments:

John Bonow 8/20/19
Contracting Agency Head's Signature and Date

[Signature] 8/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

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Authorization to Contract with a Current Employee

Employee Information

Employee Name: Christian Jones
Employee ID Number: 46538
Job Title: Electronics Tech III
Current Employee Agency: Nevada Department of Corrections – Ely State Prison
Current Class and Grade: 6.987 Grade 33
Employment Dates: 2/22/2011 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

- ☐ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
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- f. List contractor's hourly rate.

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Comments:

AR Homowhin 8/20/19
Contracting Agency Head's Signature and Date

Contracting Agency Head's Signature and Date
 08/22/19
 Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



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Authorization to Contract with a Current Employee

Employee Information

Employee Name: John Julio
Employee ID Number: 33241
Job Title: Food Services Manager II
Current Employee Agency: Nevada Department of Correction – Florence McClure Women’s Correctional Center
Current Class and Grade: 3.108 Grade 34
Employment Dates: 4/11/2005 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

- ☐ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
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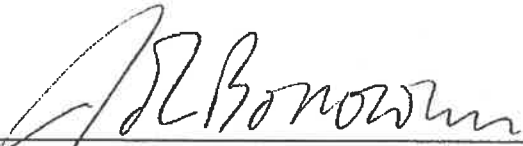
- k. **What is the duration of the contract with the current employee? (include start and end date)**


Current – December 31, 2019

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Part-time depending on number of packages received at the facility.

Comments:

 8/20/19
Contracting Agency Head's Signature and Date

 08/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Current Employee

Employee Information

Employee Name: Rudolf Martinez
Employee ID Number: 40107
Job Title: Supply Technician I
Current Employee Agency: Nevada Department of Correction – High Desert State Prison
Current Class and Grade: 2.836 Grade 25
Employment Dates: 10/22/2007 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

- ☐ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
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- e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate [NAC 284.750](#).

No

- f. List contractor's hourly rate.

The vendor pays the Delivery Clerk \$5 per packaged delivered.

- g. List the range of comparable State employee rates.

Not applicable

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.

Not applicable

- i. Document justification for hiring contractor.

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- j. Will the employee be collecting PERS at any time during the contract?

No

- k. What is the duration of the contract with the current employee? (include start and end date)


Current – December 31, 2019

- l. Will the current employee be working FT/PT? If PT how many hours

Part-time depending on number of packages received at the facility.

Comments:

 8/20/19
Contracting Agency Head's Signature and Date

 08/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Current Employee

Employee Information

Employee Name: Bryan Nason
Employee ID Number: 50109
Job Title: Locksmith I
Current Employee Agency: Nevada Department of Correction – Southern Desert Correctional Center
Current Class and Grade: 9.418 Grade 30
Employment Dates: 9/4/2012 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

- ☐ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
 - ☒ Contract is with an entity (contractor) other than a temporary employment agency that employs a current State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.
- a. Summarize scope of contract work.**

Title of Contracted Position is a Commissary Representative — Delivery Clerk. Delivery clerks deliver individually packaged orders to inmates at specified correctional facilities. Verify identity of inmates and obtain signature from inmate upon delivery of goods.

b. Document the employee's current job description.

See attached State of Nevada Work Performance Standards

c. Explain how this differs from current State duties.

Commissary Representative — Delivery Clerk is different from a Correctional Sergeant work in a line supervisory capacity and have charge of an assigned watch or major area in a State correctional institution/facility and supervise the work of subordinate officers in the safe custody, discipline and welfare of inmates in State correctional facilities in a controlled humane environment.

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- e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.

No

- f. List contractor's hourly rate.

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- g. List the range of comparable State employee rates.

Not applicable

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.

Not applicable

- i. Document justification for hiring contractor.

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- j. Will the employee be collecting PERS at any time during the contract?

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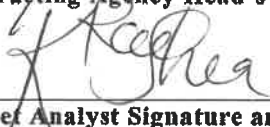
Current – December 31, 2019

- l. Will the current employee be working FT/PT? If PT how many hours

Part-time depending on number of packages received at the facility.

Comments:

 8/20/19
Contracting Agency Head's Signature and Date

 08/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

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Authorization to Contract with a Current Employee

Employee Information

Employee Name: Sandy Rose
Employee ID Number: 48542
Job Title: Administrative Assistant II
Current Employee Agency: Nevada Department of Correction – Southern Desert Correctional Center
Current Class and Grade: 5.225 Grade 32
Employment Dates: 3/17/2014 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

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- a. Summarize scope of contract work.**

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b. Document the employee's current job description.

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No

- f. List contractor's hourly rate.

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- g. List the range of comparable State employee rates.

Not applicable

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.

Not applicable

- i. Document justification for hiring contractor.

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- j. Will the employee be collecting PERS at any time during the contract?

No

- k. What is the duration of the contract with the current employee? (include start and end date)

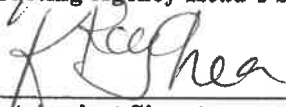
Current – December 31, 2019

- l. Will the current employee be working FT/PT? If PT how many hours

Part-time depending on number of packages received at the facility.

Comments:

 8/20/19
Contracting Agency Head's Signature and Date

 08/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



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Purchasing Division

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Authorization to Contract with a Current Employee

Employee Information

Employee Name: Lashawn Smith
Employee ID Number: 31985
Job Title: Correctional Caseworker Specialist III
Current Employee Agency: Nevada Department of Correction – Case Grande Transitional Housing
Current Class and Grade: 12.556 Grade 40
Employment Dates: 9/12/2005 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

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- a. Summarize scope of contract work.**

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No

- f. List contractor's hourly rate.

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- g. List the range of comparable State employee rates.

Not applicable

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.

Not applicable

- i. Document justification for hiring contractor.

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- j. Will the employee be collecting PERS at any time during the contract?

No

- k. What is the duration of the contract with the current employee? (include start and end date)

Current – December 31, 2019

- l. Will the current employee be working FT/PT? If PT how many hours

Part-time depending on number of packages received at the facility.

Comments:

APL Bonowman 8/20/19
Contracting Agency Head's Signature and Date

Contracting Agency Head's Signature and Date

Budget Analyst Signature and Date K. Reegher 08/22/19

Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



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Purchasing Division

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Authorization to Contract with a Current Employee

Employee Information

Employee Name: Beverly Stewart
Employee ID Number: 29502
Job Title: Accounting Assistant II
Current Employee Agency: Nevada Department of Correction – Southern Desert Correctional Center
Current Class and Grade: 2.301 Grade 27
Employment Dates: 11/17/2003 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

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No

- f. List contractor's hourly rate.

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- g. List the range of comparable State employee rates.

Not applicable

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.

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No

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Current – December 31, 2019

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Comments:

 8/20/19
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Authorization to Contract with a Current Employee

Employee Information

Employee Name: Michael Thalman
Employee ID Number: 30172
Job Title: Correctional Sergeant
Current Employee Agency: Nevada Department of Correction – Warm Springs Correctional Center
Current Class and Grade: 13.311 Grade 37
Employment Dates: 2/9/2004 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

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No

- f. List contractor's hourly rate.**

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- g. List the range of comparable State employee rates.**

Not applicable

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Not applicable

- i. Document justification for hiring contractor.**

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No

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Current – December 31, 2019

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Comments:

 8/20/19
Contracting Agency Head's Signature and Date

 08/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

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Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Current Employee

Employee Information

Employee Name: Duane Wilson
Employee ID Number: 27944
Job Title: Food Services Manager II
Current Employee Agency: Nevada Department of Correction – High Desert State Prison
Current Class and Grade: 3.107 Grade 36
Employment Dates: 2/24/2003 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

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- g. **List the range of comparable State employee rates.**

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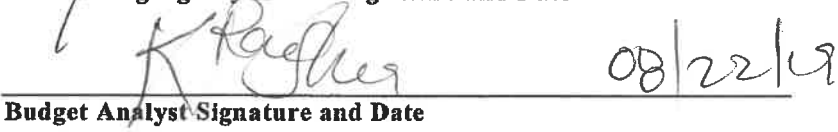
Current – December 31, 2019

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Part-time depending on number of packages received at the facility.

Comments:

 8/20/19
Contracting Agency Head's Signature and Date

 08/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

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Authorization to Contract with a Current Employee

Employee Information

Employee Name: Pamela Bellinger
Employee ID Number: 00758
Job Title: Correctional Officer
Current Employee Agency: Nevada Department of Correction – Case Grande Transitional Housing
Current Class and Grade: 13.311 Grade 34
Employment Dates: 4/19/1997 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

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b. Document the employee's current job description.

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c. Explain how this differs from current State duties.

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- f. List contractor's hourly rate.

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- g. List the range of comparable State employee rates.

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- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.

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No

- k. What is the duration of the contract with the current employee? (include start and end date)

Current – December 31, 2019

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Comments:

Contracting Agency Head's Signature and Date

J. Keeghe 08/22/17
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

Purchasing Division

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Authorization to Contract with a Current Employee

Employee Information

Employee Name: Greg Ingham
Employee ID Number: 43562
Job Title: Correctional Officer
Current Employee Agency: Nevada Department of Correction – Stewart Conservation Camp
Current Class and Grade: 13.311 Grade 35
Employment Dates: 8/17/2009 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

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Authorization to Contract with a Current Employee

Employee Information

Employee Name: Jacques Graham
Employee ID Number: 57452
Job Title: Administrative Assistant IV
Current Employee Agency: Nevada Department of Correction – High Desert State Prison
Current Class and Grade: 2.210 Grade 29
Employment Dates: 6/22/2015 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

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- g. **List the range of comparable State employee rates.**

Not applicable

- h. **Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.**

Not applicable

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- j. **Will the employee be collecting PERS at any time during the contract?**

No

- k. **What is the duration of the contract with the current employee? (include start and end date)**


Current – December 31, 2019

- l. **Will the current employee be working FT/PT? If PT how many hours**

Part-time depending on number of packages received at the facility.

Comments:

 8/20/19
Contracting Agency Head's Signature and Date

 08/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Current Employee

Employee Information

Employee Name: Danyele Sipes
Employee ID Number: 63088
Job Title: Administrative Assistant III
Current Employee Agency: Nevada Department of Correction – High Desert State Prison
Current Class and Grade: 2.212 Grade 25
Employment Dates: 7/31/2017 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

- ☐ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
- ☒ Contract is with an entity (contractor) other than a temporary employment agency that employs a current State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.
- a. Summarize scope of contract work.**

Title of Contracted Position is a Commissary Representative — Delivery Clerk. Delivery clerks deliver individually packaged orders to inmates at specified correctional facilities. Verify identity of inmates and obtain signature from inmate upon delivery of goods.

b. Document the employee's current job description.

See attached State of Nevada Work Performance Standards

c. Explain how this differs from current State duties.

Commissary Representative — Delivery Clerk is different from a Correctional Sergeant work in a line supervisory capacity and have charge of an assigned watch or major area in a State correctional institution/facility and supervise the work of subordinate officers in the safe custody, discipline and welfare of inmates in State correctional facilities in a controlled humane environment.

d. Explain why existing State employees within your agency cannot perform this function.

After reviewing, this duty can be performed by a state employee, a Retail Storekeeper within the NDOC; however, at this time there is not a dedicated FTE assigned to this function. Moving forward an additional FTE is being pursued in the FY 20-21 budget.

- e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.

No

- f. List contractor's hourly rate.

The vendor pays the Delivery Clerk \$5 per packaged delivered.

- g. List the range of comparable State employee rates.

Not applicable

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.

Not applicable

- i. Document justification for hiring contractor.

While the vendor must incur the cost of hiring off-duty custody or non-custody staff to deliver packages; NDOC is requesting an additional FTE in the SFY 20-21 budget. This request is to formalize the current relationship with the employee, vendor, and the State of Nevada.

- j. Will the employee be collecting PERS at any time during the contract?

No

- k. What is the duration of the contract with the current employee? (include start and end date)

Current – December 31, 2019

- l. Will the current employee be working FT/PT? If PT how many hours

Part-time depending on number of packages received at the facility.

Comments:

 8/20/19
Contracting Agency Head's Signature and Date

 08/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Current Employee

Employee Information

Employee Name: Sheryl Drew
Employee ID Number: 61982
Job Title: Supply Technician
Current Employee Agency: Nevada Department of Correction – Southern Desert Correctional Center
Current Class and Grade: 2.836 Grade 25
Employment Dates: 2/27/2017 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

- ☐ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
 - ☒ Contract is with an entity (contractor) other than a temporary employment agency that employs a current State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.
- a. Summarize scope of contract work.**

Title of Contracted Position is a Commissary Representative — Delivery Clerk. Delivery clerks deliver individually packaged orders to inmates at specified correctional facilities. Verify identity of inmates and obtain signature from inmate upon delivery of goods.

b. Document the employee's current job description.

See attached State of Nevada Work Performance Standards

c. Explain how this differs from current State duties.

Commissary Representative — Delivery Clerk is different from a Correctional Sergeant work in a line supervisory capacity and have charge of an assigned watch or major area in a State correctional institution/facility and supervise the work of subordinate officers in the safe custody, discipline and welfare of inmates in State correctional facilities in a controlled humane environment.

d. Explain why existing State employees within your agency cannot perform this function.

After reviewing, this duty can be performed by a state employee, a Retail Storekeeper within the NDOC; however, at this time there is not a dedicated FTE assigned to this function. Moving forward an additional FTE is being pursued in the FY 20-21 budget.

- e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate [NAC 284.750](#).

No

- f. List contractor's hourly rate.

The vendor pays the Delivery Clerk \$5 per packaged delivered.

- g. List the range of comparable State employee rates.

Not applicable

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.

Not applicable

- i. Document justification for hiring contractor.

While the vendor must incur the cost of hiring off-duty custody or non-custody staff to deliver packages; NDOC is requesting an additional FTE in the SFY 20-21 budget. This request is to formalize the current relationship with the employee, vendor, and the State of Nevada.

- j. Will the employee be collecting PERS at any time during the contract?

No

- k. What is the duration of the contract with the current employee? (include start and end date)

Current – December 31, 2019

- l. Will the current employee be working FT/PT? If PT how many hours

Part-time depending on number of packages received at the facility.

Comments:


Contracting Agency Head's Signature and Date

H. DePina 08/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Current Employee

Employee Information

Employee Name: Karl Grimmer
Employee ID Number: 45842
Job Title: Senior Correctional Officer
Current Employee Agency: Nevada Department of Correction – Northern Nevada Correctional Center
Current Class and Grade: 13.312 Grade 35
Employment Dates: 10/10/2016 – Current
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

- ☐ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
 - ☒ Contract is with an entity (contractor) other than a temporary employment agency that employs a current State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.
- a. Summarize scope of contract work.**

Title of Contracted Position is a Commissary Representative — Delivery Clerk. Delivery clerks deliver individually packaged orders to inmates at specified correctional facilities. Verify identity of inmates and obtain signature from inmate upon delivery of goods.

b. Document the employee's current job description.

See attached State of Nevada Work Performance Standards

c. Explain how this differs from current State duties.

Commissary Representative — Delivery Clerk is different from a Correctional Sergeant work in a line supervisory capacity and have charge of an assigned watch or major area in a State correctional institution/facility and supervise the work of subordinate officers in the safe custody, discipline and welfare of inmates in State correctional facilities in a controlled humane environment.

d. Explain why existing State employees within your agency cannot perform this function.

After reviewing, this duty can be performed by a state employee, a Retail Storekeeper within the NDOC; however, at this time there is not a dedicated FTE assigned to this function. Moving forward an additional FTE is being pursued in the FY 20-21 budget.

- e. Document if the individual overseeing or establishing the contract is related to the contractor – If so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.

No

- f. List contractor's hourly rate.

The vendor pays the Delivery Clerk \$5 per packaged delivered.

- g. List the range of comparable State employee rates.

Not applicable

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.

Not applicable

- i. Document justification for hiring contractor.

While the vendor must incur the cost of hiring off-duty custody or non-custody staff to deliver packages; NDOC is requesting an additional FTE in the SFY 20-21 budget. This request is to formalize the current relationship with the employee, vendor, and the State of Nevada.

- j. Will the employee be collecting PERS at any time during the contract?

No

- k. What is the duration of the contract with the current employee? (include start and end date)

Current – December 31, 2019

- l. Will the current employee be working FT/PT? If PT how many hours

Part-time depending on number of packages received at the facility.

Comments:

 8/20/19
Contracting Agency Head's Signature and Date

 08/22/19
Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date

Steve Sisolak
Governor



Susan Brown
Director

Kimberley Perondi
Deputy Director

**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 12, 2019
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Bridgette Garrison, Executive Branch Budget Officer
Governor's Finance Office, Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

A handwritten signature in blue ink, likely belonging to Bridgette Garrison, is written over the "From:" line.

The following describes an action item submitted for placement on the agenda of the next Board of Examiners meeting.

DEPARTMENT OF TRANSPORTATION

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the Department of Transportation requests to contract with a former employee, Thor Dyson. Atkins North America, Inc. plans to utilize Mr. Dyson to fill the Principal Engineer/Project Manager position in the augmentation of NDOT Construction Crew 907 in District II for Contract 3745.

Additional Information:

Atkins North America, Inc. was awarded the agreement as the highest ranked firm responding to the Request for Proposal (RFP). Mr. Dyson retired from state service on June 3, 2019 as the Assistant Director of Operations. Mr. Dyson was not directly, or indirectly involved in the RFP process or in the selection of Atkins North America, Inc.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: _____
ACTION ITEM: _____



1263 South Stewart Street
Carson City, Nevada 89712
Phone: (775) 888-7440
Fax: (775) 888-7201

MEMORANDUM

July 31, 2019

To: State of Nevada Board of Examiners
From: Kristina Swallow, Director
Subject: Authorization to Contract with a Former Employee

RECEIVED

AUG - 7 2019

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

SUMMARY

Pursuant to the Administrative Manual Section 0323, the Nevada Department of Transportation (NDOT) requests the authority to contract with retired state employee, Mr. Thor Dyson. Mr. Dyson retired from state service June of 2019. Atkins North America, Inc. is proposing to engage Mr. Dyson to fill the Principal Engineer/Project Manager position in the augmentation of NDOT Construction Crew 907 in District II for Contract 3745.

BACKGROUND

In June of 2018, NDOT issued a Request for Proposals (RFP) to engage service providers to perform professional and technical engineering services to provide construction management augmentation to Construction Crew 907 for Contract 3745.

NDOT entered into an agreement with Atkins North America, Inc. as the highest ranked firm responding to the RFP. The current Principal Engineer/Project Manager's workload requires that Atkins North America, Inc. seek a replacement to ensure that the agreement is managed as required.

Mr. Dyson has had no influence or authority over the consultant procurement for this crew augmentation.

RECOMMENDATION

We respectfully request your consideration for approval for Atkins North America, Inc. to engage Mr. Thor Dyson to be fill the role as Principal Engineer/Project Manager on their staffing team to augment NDOT Construction Crew 907 for Contract 3745.

Steve Sisolak
Governor



Deonne E. Contine
Director

Kevin D. Doty
Acting Administrator

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Former Employee

Employee Information

Former Employee Name: Thor A. Dyson
Former Employee ID Number: 05204
Former Job Title: Assistant Director, Operations
Former Employee Agency: Nevada Department of Transportation (NDOT)
Former Class and Grade: Grade 55 - Unclassified
Former Employment Dates: October 2, 1989 – June 3, 2019
Contracting Agency: Atkins North America, Inc.

Please check which of the following applies:

- ☐ Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee. Please complete steps a-l below.
- ☒ Contract is with an entity (contractor) other than a temporary employment agency that employs a former State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.

a. Summarize scope of contract work.

Acting as a Senior Resident Engineer / Project Manager for a consultant to NDOT on construction contracts.

b. Document former job description.

Assistant Director, Operations. Supervised Five (5) divisions within NDOT: Materials Division; Construction Division; Traffic & Operations Division; Maintenance & Asset Management Division; and Equipment Division. Testified at the Legislature as required, and administered the Construction Working Group for the NDOT Transportation Board.

c. Is the former employee being hired because of their specialized knowledge of the agency's operations? Is there a clause in the contract for transfer of the specialized knowledge of the contracting agency and a time frame for the transfer?

Yes, the former employee has specialized knowledge of the agency's operations. He is very familiar with what NDOT needs are regarding consultant services and will help meet NDOT's needs to meet the engineering demands that current staff cannot supply.

d. Explain why existing State employees within your agency cannot perform this function.

Manpower shortage due to the increasing size of the NDOT's work program.

- e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.**

N/A – no relationship exists.

- f. List contractor's hourly rate.**

\$ 73.00 per hour

- g. List the range of comparable State employee rates.**

\$41.82 - \$63.43 (Grade 47)

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent. Additionally, has the contract term been limited as a result?**

This contract/agreement will only allow the Project Manager to charge eight (8) hours per month to the agreement even though the Project Manager will work many more hours on the agreement procuring staff as requested by NDOT. The Project Manager will be working with sub-contractors and the prime contractor and is responsible for quality assurance and for meeting the NDOT's needs.

- i. Document justification for hiring contractor.**

There is limited qualified staff available.

- j. Will the employee be collecting PERS at any time during the contract?**

Yes.

- k. What is the duration of the contract with the former employee? (include start and end date)**

This is an active agreement, so at the Board of Examiners approval through March 31, 2021

- l. Will the former employee be working FT/PT? If PT how many hours**

Per the agreement, a Project Manager can only charge up to eight (8) hours per month to the agreement.

Comments:

.

DocuSigned by:

Kristina L. Swallow

Contracting Agency Head's Signature and Date

Budget Analyst Signature and Date *8/12/19*

Clerk of the Board of Examiners Signature and Date

Steve Sisolak
Governor



Susan Brown
Director

Kimberley Perondi
Deputy Director

**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 12, 2019
To: Susan Brown, Clerk of the Board
Governor's Finance Office
From: Bridgette Garrison, Executive Branch Budget Officer
Governor's Finance Office, Budget Division
Subject: BOARD OF EXAMINERS **ACTION** ITEM

A handwritten signature in blue ink, appearing to be "B. Garrison", is written over the "From:" line of the memo.

The following describes an action item submitted for placement on the agenda of the next Board of Examiners meeting.

DEPARTMENT OF TRANSPORTATION

Agenda Item Write-up:

Pursuant to NRS 333.705, subsection 1, the Department of Transportation requests to contract with a former employee, Deena Rose. Atkins North America, Inc. plans to utilize Ms. Rose to fill an Inspector Level III position in the augmentation of NDOT Construction Crew 907 in District II for Contract 3745.

Additional Information:

Atkins North America, Inc. was awarded the agreement as the highest ranked firm responding to the Request for Proposal (RFP). Ms. Rose retired from state service August 2019 as a Staff I, Associate Engineer. +Ms. Rose was not directly, or indirectly involved in the RFP process or in the selection of Atkins North America, Inc.

Statutory Authority:

NRS 333.705 (1)

REVIEWED: _____
ACTION ITEM: _____



1263 South Stewart Street
Carson City, Nevada 89712
Phone: (775) 888-7440
Fax: (775) 888-7201

MEMORANDUM

July 31, 2019

To: State of Nevada Board of Examiners
From: Kristina L. Swallow, Director
Subject: Authorization to Contract with a Former Employee

RECEIVED

AUG - 7 2019

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

SUMMARY

Pursuant to the Administrative Manual Section 0323, the Nevada Department of Transportation (NDOT) requests the authority to contract with retired state employee, Ms. Deena Rose. Ms. Rose retired from state service in August of 2018. Atkins North America, Inc. is proposing to engage Ms. Rose to fill an Inspector Level III position in the augmentation of NDOT Construction Crew 907 in District II for Contract 3745.

BACKGROUND

There is insufficient staff and expertise to successfully manage the workload, size and scope of Contract 3745 currently assigned to NDOT Construction Crew 907 in District II. In June of 2018, NDOT issued a Request for Proposal (RFP) to engage service providers to perform professional and technical engineering services to provide construction management augmentation to Construction Crew 907. This augmentation includes providing an Assistant Resident Engineer, Office Manager, Schedule Reviewer, Surveyors, Inspectors, and Testers, to ensure the construction of Contract 3745 is accomplished in conformance with the plans, specifications, and all other contract documents.

Atkins North America, Inc. was the highest ranked firm responding to the RFP for the augmentation of Crew 907 in District II. NDOT entered into an agreement with Atkins North America, Inc., effective October 1, 2018. The Resident Engineer has requested additional inspection staff and Atkins has proposed to utilize Ms. Deena Rose to fill the role of Inspector Level III, a key role in overseeing the construction of Contract 3745. Ms. Rose is very qualified and brings over 20 years of experience in overseeing highway construction project activities.

Ms. Rose has had no influence or authority over the consultant procurement for this crew augmentation.

RECOMMENDATION

We respectfully request your consideration for approval for Atkins North America, Inc. to engage Ms. Deena Rose to be Inspector Level III on their staffing team to augment NDOT Construction Crew 907 District II.

Steve Sisolak
Governor



Deonne E. Contine
Director

Kevin D. Doty
Acting Administrator

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Former Employee

Employee Information

Former Employee Name: Deena Rose
Former Employee ID Number: 05386
Former Job Title: Staff I - Associate Engineer-Staff
Former Employee Agency: Nevada Department of Transportation
Former Class and Grade: 35-10
Former Employment Dates: December 1996 – August 2018
Contracting Agency: Nevada Department of Transportation

Please check which of the following applies:

- ☐ Contract is with a former State employee (contractor) or a temporary employment agency providing a former employee. Please complete steps a-l below.
- ☒ Contract is with an entity (contractor) other than a temporary employment agency that employs a former State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.

a. Summarize scope of contract work.

The work consists of providing NDOT with construction inspection for Contract 3745

b. Document former job description.

Under general direction, incumbents function independently at the advanced journey level performing technical work requiring knowledge of engineering theories, principles, concepts and practices in a specialized area. Incumbents plan and execute assignments and independently coordinate projects with other technicians. Work assignments cover a wide range of technical engineering duties requiring considerable judgment and ingenuity. Incumbents determine individual work priorities and apply established procedures, techniques, standards and guidelines set forth by management. Positions assigned to this class perform specialized technical engineering work of an advanced nature and function under minimal supervision; use considerable judgment in making independent decisions; may act as a first-line supervisor and have technical or lead worker responsibility for a project and staff of lower level engineering technicians.

c. Is the former employee being hired because of their specialized knowledge of the agency's operations? Is there a clause in the contract for transfer of the specialized knowledge of the contracting agency and a time frame for the transfer?

Yes, the former employee is being hired due to their specialized knowledge of the construction methods of Nevada and the policies and procedures related to the construction of NDOT projects. There is not a clause in the contract for transfer of the specialized knowledge of the contracting agency or a time frame for the transfer.

d. Explain why existing State employees within your agency cannot perform this function.

The workload of the Nevada Department of Transportation employees is extremely high due to increased funding as well as continued vacancies on construction crews in District II.

- e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate NAC 284.750.**

No relation

- f. List contractor's hourly rate.**

\$42

- g. List the range of comparable State employee rates.**

\$19.90 - \$29.22 Hourly (Grade 30)

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent. Additionally, has the contract term been limited as a result?**

The State hourly range does not include the same overhead and direct costs as the contractor's fully loaded rate. Tech III inspectors in private industry are typically only actively employed around 6 to 8 months per year. No, the duration is not affected by the pay as contract term is limited to the length of the agreement, which aligns with the duration of the construction project.

- i. Document justification for hiring contractor.**

NDOT personnel not available at this time.

- j. Will the employee be collecting PERS at any time during the contract?**

Yes

- k. What is the duration of the contract with the former employee? (include start and end date)**

September 2019 until no longer needed.

- l. Will the former employee be working FT/PT? If PT how many hours**

Full Time

Comments:

.

DocuSigned by:

Kristina L. Swallow

Contracting Agency Head's Signature and Date

C48612FC2C1E4FB...

Judith M. Hamilton 8/12/19

Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department, commission and agency requests for allocations from the General Fund and/or Highway Fund salary adjustment accounts are recommended by the Director of Finance:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
2992	NSHE – UNLV Law School	\$127,495	
	Total	\$127,495	

Baugh
8/16

Nevada System of Higher Education

System Administration
4300 South Maryland Parkway
Las Vegas, NV 89119-7530
Phone: 702-889-8426
Fax: 702-889-8492



System Administration
2601 Enterprise Road
Reno, NV 89512-1666
Phone: 775-784-4901
Fax: 775-784-1127

July 22, 2019

MEMORANDUM

To: Tiffany Greenameyer, Budget Analyst
Governor's Finance Office, Budget Division

From: Andrew Clinger, Chief Financial Officer, NSHE

Subject: Request for Salary Adjustment Funds (FY 2019)

NSHE requests Salary Adjustment funds totaling \$127,495.00 for FY 2019. Attached is a summary document, identifying the amount requested for the budget account. Also attached are the templates completed for each budget account to demonstrate the requested Salary Adjustment Funds.

If you have any questions regarding these requests, please let us know.

Enclosure: NSHE Salary Adjustment Request Summary
Institution Requests for Salary Adjustment Funds

NSHE Salary Adjustment Funds Request: FY 2019

Institution: **UNLV LAW**
 Budget Account: **2992**

Phase 1: Eligibility Determination

- if BOR < L01 (by position type), then not eligible for Salary Adjustment Funds
- if \$ tx from Personnel to Operating, then not eligible for Salary Adjustment Funds

	Budgeted Revenue		
	FY 2019 L01	FY 2019 BOR	Difference
GF Appropriations	9,791,110	9,791,110	-
Salary Adjustment Funds	-	613,154	613,154
Non GF Revenue	4,814,128	4,814,128	-
Total Revenue	14,605,238	15,218,392	613,154

	Budgeted Expenditures		
	FY 2019 L01	FY 2019 BOR	Difference
Professional Salary	7,834,207	8,244,924	410,717
Letter of Appointments	-	-	-
Resident Physicians	-	-	-
Graduate Assistant	-	-	-
Classified Salary	866,197	898,125	31,928
Fringe	2,385,935	2,415,059	29,124
Wages	157,400	157,400	-
Vacancy Savings	(136,521)	-	136,521
Operating	3,498,020	3,502,884	4,864
Total Expenditures	14,605,238	15,218,392	613,154

Phase 2: Demonstrate Need

Personnel Expenses	Actual July '18 - June '19	Projected (through FYE)	Total
Professional	8,834,256.58	-	8,834,256.58
Prof on Leave (if not obligated)	-	-	-
Classified (and Technologist)	1,038,964.71	-	1,038,964.71
Class/Tech on Leave (if not obligated)	-	-	-
Fringe	2,563,928.06	-	2,563,928.06
Obligated Health Insurance	-	-	-
Wages	209,618.33	-	209,618.33
LOAs	\$371,650.00	-	371,650.00
GAs and TAs	-	-	-
Med Residents	-	-	-
Subtotal: Personnel Costs	13,018,417.68	-	13,018,417.68

Excluded Personnel Expenses	Actual July '18 - June '19	Projected (through FYE)	Total
New FTE (not in L01)	-	-	-
Ad hoc/Reclassified Positions	233,233.80	-	233,233.80
LOAs and Wages	581,268.33	-	581,268.33
GAs	-	-	-
Overtime	13,405.35	-	13,405.35
Terminal/Retirement Payouts	6,151.64	-	6,151.64
Other Addtl Payroll Adjust	396,706.00	-	396,706.00
Fringe on Excluded Expenses	97,346.90	-	97,346.90
Subtotal: Excluded Expenses	1,328,112.02	-	1,328,112.02

Total Eligible Personnel Expenses	11,690,305.66	-	11,690,305.66
L01 Approved Personnel Exp			
	Professional		7,622,726
	Classified		866,197
	Fringe (Professional)		1,950,478
	Fringe (Classified)		370,742
	Vacancy Savings		136,921
	Subtotal		10,947,064
Salary Adjustment Request			743,242

Available Salary Adjustment Funds 490,523
 Less increase in Operating in BoR approved budget 4,864
 Revised Available Salary Adjustment Funds 485,659

Requested Salary Adjustment Funds	7/9/2019	485,659
Additional Salary Adjustment Fund Request	9/10/2019	127,495
		613,154.00

Brian Sandoval
Governor



James R. Wells, CPA
Director

Paul Nicks
Deputy Director

**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

ALL AGENCY MEMO – 2017–14

October 20, 2017

To: All Agencies

From: James R. Wells, Director
Governor's Finance Office 

Subject: Fiscal Year 2018 and 2019 Salary Adjustment Funds

Assembly Bill 517, Section 3 authorized a 2% salary increase in Fiscal Year 2018 and an additional 2% increase in Fiscal Year 2019. Senate Bill 368, Section 1 authorized an additional 1% salary increase in both Fiscal Years 2018 and 2019. Combined, the two bills provide a 3% cost of living adjustment to State employees in Fiscal Year 2018 and another 3% in Fiscal Year 2019. Both bills appropriated General and Highway Funds to the Board of Examiners (BOE) to meet any deficiencies created between the appropriated money of the respective departments and the amount of money required to pay the higher salaries of the employees. The amounts available for agencies to request for each budget account are provided in a separate spreadsheet posted on our website. (<http://budget.nv.gov/>)

The authority for salary adjustment funds was not budgeted in individual budget accounts. Therefore, once BOE approves a request, a non-IFC work program must be processed to establish the authority before the transfer of cash can be made. Please use the following naming convention for work program number instead of allowing a default number: [FY SA budget account number]. For example, budget account 1234 would use work program number 18SA1234 in Fiscal Year 2018 and 19SA1234 in Fiscal Year 2019.

Transferring budget authority out of category 01 to another category negates eligibility for salary adjustment funds. Salary adjustment funds are also not available to cover other salary cost such as position reclassification, overtime, callback, shift differential, overpayments, terminal leave payouts or accelerated steps.

If salary adjustment funds are required, please submit the request along with:

- Salary projections which support the amount being requested;
- Projections for the balance of the fiscal year for all categories supported by General Funds and/or Highway Funds; and
- A position fund map.

All allocations from the BOE Salary Adjustment Account must be approved by the BOE and are only available for salaries funded by the General Fund and/or Highway Fund. Salaries funded with a funding type other than General Funds or Highway Fund, such as fees, Court Assessments or grants must cover the 3% salary increase in Fiscal Year 2018 and Fiscal Year 2019 for a total of 6% in Fiscal Year 2019 within their existing budget authority. A work program may be necessary to adjust various categorical authority to cover the increased salaries.

Agencies with grant funded positions should also monitor the grant's administrative cap, if applicable, to ensure the increase in salaries doesn't cause the agency to exceed the administrative cap. Please work with the federal granting office if the administrative cap will be exceeded and take the appropriate steps to ensure the State stays within the cap.

If you have any questions, please contact your assigned Executive Branch Budget Officer.

[http://budget.nv.gov/uploadedFiles/budgetnv.gov/content/Contact/Staff%20Agency%20Assignments\(3\).pdf](http://budget.nv.gov/uploadedFiles/budgetnv.gov/content/Contact/Staff%20Agency%20Assignments(3).pdf)

**General Fund Salary Adjustment for NSHE
Fiscal Years 2018 and 2019**

Div	Division Description	Budget	Budget Account Name	FY 2018	FY 2019
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2977	NSHE - SPECIAL PROJECTS	\$ 19,724	\$ 39,773
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2980	NSHE - UNIVERSITY OF NEVADA, RENO	\$ 4,251,081	\$ 8,612,367
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2982	NSHE - UNR SCHOOL OF MEDICINE	\$ 765,122	\$ 1,551,056
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2983	NSHE - INTERCOLLEGIATE ATHLETICS - UNR	\$ 35,519	\$ 72,216
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2985	NSHE - STATEWIDE PROGRAMS - UNR	\$ 130,947	\$ 265,049
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2986	NSHE - SYSTEM ADMINISTRATION	\$ 101,405	\$ 204,687
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2987	NSHE - UNIVERSITY OF NEVADA, LAS VEGAS	\$ 5,706,618	\$ 11,561,073
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2988	NSHE - INTERCOLLEGIATE ATHLETICS - UNLV	\$ 39,912	\$ 80,406
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2989	NSHE - AGRICULTURAL EXPERIMENT STATION	\$ 126,830	\$ 256,719
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2990	NSHE - COOPERATIVE EXTENSION SERVICE	\$ 130,797	\$ 264,924
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2991	NSHE - SYSTEM COMPUTING CENTER	\$ 300,644	\$ 607,616
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2992	NSHE - UNLV LAW SCHOOL	\$ 302,927	\$ 613,154
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2994	NSHE - GREAT BASIN COLLEGE	\$ 353,742	\$ 710,210
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	2996	NSHE - UNIVERSITY PRESS	\$ 10,575	\$ 21,314
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	3001	NSHE - STATEWIDE PROGRAMS - UNLV	\$ 40,887	\$ 82,484
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	3002	NSHE - UNLV DENTAL SCHOOL	\$ 436,713	\$ 888,528
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	3003	NSHE - BUSINESS CENTER NORTH	\$ 49,287	\$ 100,431
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	3004	NSHE - BUSINESS CENTER SOUTH	\$ 41,508	\$ 85,008
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	3005	NSHE - NEVADA STATE COLLEGE	\$ 377,750	\$ 764,744
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	3010	NSHE - DESERT RESEARCH INSTITUTE	\$ 157,554	\$ 319,815
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	3011	NSHE - COLLEGE OF SOUTHERN NEVADA	\$ 2,536,463	\$ 5,141,787
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	3012	NSHE - WESTERN NEVADA COLLEGE	\$ 331,293	\$ 671,580
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	3014	NSHE - UNLV SCHOOL OF MEDICINE	\$ 333,188	\$ 1,106,081
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	3018	NSHE - TRUCKEE MEADOWS COMMUNITY COLLEGE	\$ 1,053,188	\$ 2,132,078
350	NSHE - NEVADA SYSTEM OF HIGHER EDUCATION	3221	NSHE - HEALTH LABORATORY AND RESEARCH	\$ 37,868	\$ 76,787
Total COLA				\$ 17,671,542	\$ 36,229,887
Total Eligible from GF Salary Adjustment Account				\$ 14,137,234	\$ 28,983,910

* Amounts reflect full cost of COLA. The System is eligible for 80% of the total amount

REQUESTS FOR THE ALLOCATION AND DISBURSEMENT OF FUNDS FOR SALARY ADJUSTMENTS

The 2017 Legislature, through Assembly Bill 517 and Senate Bill 368, made appropriations from the General Fund and the Highway Fund to the Board of Examiners to meet salary deficiencies that may be created between the appropriated money of the State's respective departments, commissions, and agencies and the salary requirements for the personnel of those departments, commissions, and agencies. The Board of Examiners, upon recommendation of the Director of the Governor's Finance Office, may allocate and disburse amounts, from the appropriate fund, to the departments, commissions and agencies of the State for the purpose of paying personnel salary deficiencies.

The following department, commission and agency requests for allocations from the General Fund and/or Highway Fund salary adjustment accounts are recommended by the Director of Finance:

BA#	BUDGET ACCOUNT NAME	GENERAL FUND ADJUSTMENT	HWY FUND ADJUSTMENT
1003	Office of Science, Innovation and Technology	\$5,920	
	Total	\$5,920	

8/6/15
TG



Steve Sisolak
Governor


STATE OF NEVADA

GOVERNOR'S OFFICE OF
SCIENCE, INNOVATION &
TECHNOLOGY

100 North Stewart Street, Suite 220
Carson City, Nevada 89701
775-687-0987 Fax: 775-687-0990



Brian L. Mitchell
Director

DATE: August 6, 2019
TO: Catherine Bartlett, Executive Budget Officer- Governor's Finance Office
FROM: Brian Mitchell, Director 
RE: Fiscal Year 2019 Salary Adjustment Funds

Assembly Bill 517, section 3 appropriated General Funds to the Board of Examiners (BOE) to meet deficiencies created between the appropriated money of the respective departments and the amount of money required to pay the salaries of the employees. The Governor's Office, budget account 1003 Office of Science, Innovation and Technology requests salary adjustment funds in the amount of \$5,920.00 to augment a payroll shortfall for fiscal year 2019.

Pay Period Begin Date	04/08/19	04/22/19	05/06/19	05/20/19	06/03/19	Budgeted Authority	386,841.00
Pay Period End Date	04/21/19	05/05/19	05/19/19	06/02/19	06/16/19		
Check Date	05/03/19	05/17/19	05/31/19	06/14/19	06/28/19		

PCN	Description	Grade	Step	Reg Hrs	Hourly Rate		Retirement code	Fringe %	Salary	ER Fringe	Group Insurance	11th Insurance		12th Insurance		Actual	Actual	Total Payroll Projection through FY19					
					Hourly Rate	Merit Increase						Actual	Actual	Actual	Actual								
1	1 NON CLASS/EARN LEAVE/NOT EXEMPT	N/A	N/A	80	46.37		1	0.18430	3,709.60	683.68	740.92	pp22	5,219.12	pp23	4,455.20	pp24	4,393.27	pp25	5,131.20	pp26	4,393.26	pp01	123,937.65
2	2 NON CLASS/EARN LEAVE/NOT EXEMPT	N/A	N/A	80	22.23		8	0.34300	1,778.40	609.99	740.92		3,125.18		2,388.38		2,388.39		3,125.18		2,388.38		70,711.73
3	3 NON CLASS/EARN LEAVE/NOT EXEMPT	N/A	N/A	80	38.60		1	0.18430	3,088.00	569.12	740.92		4,470.19		3,729.27		3,730.31		4,445.16		3,656.09		104,809.32
4	4 NON CLASS/EARN LEAVE/NOT EXEMPT	N/A	N/A	80	31.07		8	0.34300	2,485.60	852.56	740.92		4,078.62		3,337.17		3,338.16		4,078.62		3,337.18		95,667.82

Assessments/Adjustments																				
Total Projections:													0.00	0.00	0.00	0.00	0.00	0.00	83.00	0.00
Subtotal													16,693.11	13,910.02	13,850.13	16,780.16	13,857.91	13,766.87		

Personnel Assessment: 0.00
Payroll Assessment: 0.00
Total Projection Amount: 0.00
YTD Actual Expenditures: 395,538.52
395,538.52

FY17 Legislatively Approved: 386,841.00

Total Budget Authority Available: (8,697.52)
Savings in other categories:

CAT 02 970.00
CAT 03 408.00
CAT 10 930.00
CAT 11 470.00
Salary Adjustment Funding Needed: (5,919.52)

7/31/2019	BSR	395,538.52
Variance		0.00

**General Fund Salary Adjustment
Fiscal Years 2018 and 2019**

Div	Division Description	Budget	Budget Account Name	FY 2018	FY 2019
010	GOVERNOR'S OFFICE	1000	OFFICE OF THE GOVERNOR	\$ 42,819	\$ 86,342
010	GOVERNOR'S OFFICE	1001	GOVERNOR'S MANSION MAINTENANCE	\$ 3,821	\$ 7,695
012	NUCLEAR PROJECTS OFFICE	1005	GOVERNOR'S OFFICE HIGH LEVEL NUCLEAR WASTE	\$ 12,785	\$ 25,809
014	OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	1003	OFFICE OF SCIENCE, INNOVATION AND TECHNOLOGY	\$ 10,244	\$ 20,651
015	GOVERNOR'S FINANCE OFFICE	1340	GOVERNOR'S OFC OF FINANCE - BUDGET DIVISION	\$ 64,223	\$ 130,529
015	GOVERNOR'S FINANCE OFFICE	1342	GOVERNOR'S OFC OF FINANCE- DIV OF INTERNAL AUDITS	\$ 37,673	\$ 77,066
017	WESTERN INTERSTATE COMMISSION FOR HIGHER EDUCATION	2995	W.I.C.H.E. ADMINISTRATION	\$ 4,515	\$ 9,101
018	OFFICE OF WORKFORCE INNOVATION	1004	GOVERNOR'S OFFICE - OFFICE OF WORKFORCE INNOVATION	\$ 10,254	\$ 21,724
018	OFFICE OF WORKFORCE INNOVATION	3270	NEVADA P20 WORKFORCE REPORTING	\$ 2,457	\$ 4,929
020	LIEUTENANT GOVERNOR'S OFFICE	1020	LIEUTENANT GOVERNOR	\$ 9,482	\$ 19,140
030	ATTORNEY GENERAL'S OFFICE	1002	AG - EXTRADITION COORDINATOR	\$ 3,839	\$ 7,844
030	ATTORNEY GENERAL'S OFFICE	1030	AG - ADMINISTRATIVE BUDGET ACCOUNT	\$ 59,047	\$ 119,900
030	ATTORNEY GENERAL'S OFFICE	1036	AG - CRIME PREVENTION	\$ 9,560	\$ 19,575
030	ATTORNEY GENERAL'S OFFICE	1038	AG - CONSUMER ADVOCATE	\$ 14,814	\$ 29,960
040	SECRETARY OF STATE'S OFFICE	1050	SOS - SECRETARY OF STATE	\$ 275,910	\$ 565,452
040	SECRETARY OF STATE'S OFFICE	1051	SOS - HAVA ELECTIONS	\$ 5,139	\$ 10,447
060	CONTROLLER'S OFFICE	1130	CONTROLLER - CONTROLLER'S OFFICE	\$ 96,366	\$ 198,315
082	ADMIN - STATE PUBLIC WORKS DIVISION	1560	ADMINISTRATION - SPWD - FACILITY COND & ANALYSIS	\$ 6,624	\$ 13,566
087	ADMIN - DIRECTOR'S OFFICE	1337	ADMINISTRATION - DIRECTOR'S OFFICE	\$ 1,640	\$ 4,717
088	ADMIN - GRANTS OFFICE	1341	ADMINISTRATION - OFFICE OF GRANT PROCUREMENT COORD	\$ 11,042	\$ 23,021
090	JUDICIAL BRANCH	1484	JUDICIAL PROGRAMS AND SERVICES DIVISION	\$ 20,640	\$ 42,884
090	JUDICIAL BRANCH	1489	COURT OF APPEALS	\$ 56,270	\$ 113,486
090	JUDICIAL BRANCH	1494	SUPREME COURT	\$ 221,145	\$ 449,360
090	JUDICIAL BRANCH	2889	LAW LIBRARY	\$ 13,373	\$ 27,491
101	DTCA - DIVISION OF TOURISM	2600	TOURISM - INDIAN COMMISSION	\$ 4,210	\$ 8,674
101	DTCA - DIVISION OF TOURISM	2601	TOURISM - STEWART INDIAN SCHOOL LIVING LEGACY	\$ 3,575	\$ 7,511
102	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	1526	GOED - GOVERNOR'S OFFICE OF ECONOMIC DEV	\$ 76,561	\$ 154,496
102	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	1528	GOED - RURAL COMMUNITY DEVELOPMENT	\$ 3,805	\$ 7,669
102	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	4867	GOED - PROCUREMENT OUTREACH PROGRAM	\$ 2,581	\$ 5,196
130	DEPARTMENT OF TAXATION	2361	DEPARTMENT OF TAXATION	\$ 694,440	\$ 1,438,314
150	COMMISSION ON ETHICS	1343	ETHICS - COMMISSION ON ETHICS	\$ 4,850	\$ 9,782
240	DEPARTMENT OF VETERANS SERVICES	2560	NDVS - OFFICE OF VETERANS SERVICES	\$ 37,990	\$ 79,727
240	DEPARTMENT OF VETERANS SERVICES	2569	NDVS - NORTHERN NEVADA VETERANS HOME ACCOUNT	\$ 5,108	\$ 13,287
300	NDE - DEPARTMENT OF EDUCATION	2612	NDE - EDUCATOR EFFECTIVENESS	\$ 8,215	\$ 17,028
300	NDE - DEPARTMENT OF EDUCATION	2672	NDE - ACCOUNT FOR ALTERNATIVE SCHOOLS	\$ 2,328	\$ 4,894
300	NDE - DEPARTMENT OF EDUCATION	2673	NDE - OFFICE OF THE SUPERINTENDENT	\$ 31,413	\$ 64,205
300	NDE - DEPARTMENT OF EDUCATION	2675	NDE - STANDARDS AND INSTRUCTIONAL SUPPORT	\$ 22,334	\$ 45,405
300	NDE - DEPARTMENT OF EDUCATION	2676	NDE - CAREER AND TECHNICAL EDUCATION	\$ 12,727	\$ 26,097
300	NDE - DEPARTMENT OF EDUCATION	2680	NDE - CONTINUING EDUCATION	\$ 9,650	\$ 19,818

LEASES SUMMARY

BOE #	LESSEE			LESSOR	AMOUNT
1.	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT			AVALON NEVADA INVESTMENTS, LLC	\$797,338
		This is an extension to an existing lease.			
		Term of Lease:	09/01/2020 – 08/31/2025	Located in Carson City	
2.	GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT			BOARD OF REGENTS OF THE NEVADA SYSTEM OF HIGHER EDUCATION – GREAT BASIN COLLEGE	\$7,200
		This is an extension to an existing lease.			
		Term of Lease:	07/01/2019 – 06/30/2022	Located in Elko	
3.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF PUBLIC AND BEHAVIORAL HEALTH			JS PARK SAHARA, LLC	\$65,888
		This is an amendment to an existing lease adding 927 sq. ft. of additional space at the same cost per sq. ft.			
		Term of Lease:	10/01/2019 – 07/30/2021	Located in Las Vegas	
4.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF PUBLIC AND BEHAVIORAL HEALTH – RADIATION CONTROL PROGRAM			BOWERS FAMILY INVESTMENTS, LLC	\$314,338
		This is an extension to an existing lease.			
		Term of Lease:	08/01/2019 – 07/31/2024	Located in Carson City	
5.	DEPARTMENT OF HEALTH AND HUMAN SERVICES – DIVISION OF PUBLIC AND BEHAVIORAL HEALTH – RURAL CLINICS			LINCOLN COUNTY COMMISSION	\$30,000
		This is an extension to an existing lease.			
		Term of Lease:	10/01/2019 – 09/30/2024	Located in Panaca	
6.	DEPARTMENT OF PUBLIC SAFETY			LANDER COUNTY	\$22,500
		This is an extension to an existing lease.			
		Term of Lease:	09/01/2019 – 08/31/2024	Located in Battle Mountain	

LEASES SUMMARY

BOE #	LESSEE		LESSOR		AMOUNT
7.	DEPARTMENT OF TOURISM & CULTURAL AFFAIRS, NEVADA ARTS COUNCIL		KAPLAN FAMILY TRUST		\$231,060
		This is an extension to an existing lease.			
		Term of Lease:	10/01/2019 – 09/30/2024	Located in Carson City	
8.	PRIVATE INVESTIGATORS' LICENSING BOARD		THE TRUST FOR METHODIST DEVELOPMENT OF THE FIRST METHODIST CHRUCH		\$99,380
		This lease was negotiated to better accommodate the needs of the Board and to reduce space.			
		Term of Lease:	09/11/2019 – 09/30/2025	Located in Carson City	

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by: <i>[Signature]</i>	8-13-19
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Governor's Office of Economic Development 808 West Nye Lane Carson City, Nevada 89701 Bonnie Long 775-687-9910 fax: 775-687-9924 blong@diversifynevada.com				
Remarks:	This is a renewal of an existing lease. GOED has agreed to house the Developmental Disabilities Council in order to reduce expense for both agencies.				
Exceptions/Special notes:					
2. Name of Lessor:	Avalon Nevada Investments, LLC				
3. Address of Lessor:	c/o John Uhart Commercial Real Estate Services 301 West Washington Street, Suite 1 Carson City, Nevada 89701				
4. Property contact:	John Uhart 775-884-1896 fax: 775-884-4896 jfuhart@ccim.net				
5. Address of Lease property:	808 West Nye Lane Carson City, Nevada 89703				
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 10,382				
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
Increase %	\$ 12,873.68	12	\$154,484.16	September 1, 2020-August 31, 2021	\$1.24
0%	\$ 12,873.68	12	\$154,484.16	September 1, 2021-August 31, 2022	\$1.24
4%	\$ 13,392.78	12	\$160,713.36	September 1, 2022-August 31, 2023	\$1.29
0%	\$ 13,392.78	12	\$160,713.36	September 1, 2023-August 31, 2024	\$1.29
4%	\$ 13,911.88	12	\$166,942.56	September 1, 2024-August 31, 2025	\$1.34
c. Total Lease Consideration:	60	\$797,337.60			
d. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 90 Renewal terms: One identical Term				
e. Holdover notice:	# of Days required 30 Holdover terms: 5%/90				
f. Term:	Five (5) Years				
g. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
h. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
i. Janitorial:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input checked="" type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes)				
j. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
k. Comparable Market Rate:	\$1.53 - \$1.71 - Carson City Area				
l. Specific termination clause in lease:	Breach/Default lack of funding				
m. Lease will be paid for by Agency Budget Account Number:	1526				
6. Purpose of the lease:	To house the Governor's Office of Economic Development				
7. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires a remark) <input type="checkbox"/> A relocation (requires a remark) <input type="checkbox"/> A new location (requires a remark) <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other				
a. Estimated Expenses:	Moving: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00				

RECEIVED

AUG - 6 2019

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes _____ No _____ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

Bonnie Long 8/6/19
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV20001123053	Exp:	12/31/2019	16
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
*If yes, please explain in exceptions section				
d. Is the Contractor's Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
g. State of Nevada Vendor number:	T32002712			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			

9. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

David Patrick 8/6/19
Authorized Signature Date

Public Works Division

jz/PS

For Board of Examiners ☒ YES ☐ NO

Steve Sisolak
Governor



Deonne Contine
Director

Ward D. Patrick, PE
Administrator

Carson City Offices:
Public Works Section
515 East Musser Street, Suite 102
Carson City, Nevada 89701-4263
(775) 684-4141 | Fax (775) 684-4142

Buildings & Grounds Section
(775) 684-1800 | Fax (775) 684-1821

Leasing Services Section
(775) 684-1815 | Fax (775) 684-1817

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Public Works Division

Las Vegas Offices:
Public Works Section
2300 McLeod Street
Las Vegas, Nevada 89104-4136
(702) 486-5115 | Fax (702) 486-5094

Buildings & Grounds Section
(702) 486-4300 | Fax (702) 486-4308

MEMORANDUM

Date: August 20, 2019

To: Bessie Wooldridge

From: Patrick Smorra, Public Works Division, Leasing Services, 684-1818
psmorra@admin.nv.gov

Subject: For placement on September's BOE meeting

AVALON NEVADA INVESTMENTS, LLC – Governor's Office of Economic Development – 808 West Nye Lane, Carson City

As requested this memo is a clarification for a retroactive start date of September 1, 2019 for the Lease dated July 17, 2019. This lease renewal required an extended amount of time to negotiate due to Lessor resistance to agree to current market rate costs. Negotiations lasted more than four months resulting in one Agency relocating to another location within Carson City and a reduction of leased space with the current landlord/owner which resulted in reduced costs for the State of Nevada.

Lease renewals require six months advance notice from the Agency to Leasing Services. Prolonged negotiations in excess of thirty (30) days will delay the renewal process. While each Lessor/Owner has their own negotiation process the four months necessary to agree to market rate terms delayed the process.

Thank you,

Patrick Smorra

For Budget Division Use Only	
Reviewed by: <i>Miller</i>	8-13-19
Reviewed by: <i>SA</i>	8-14

STATEWIDE LEASE INFORMATION

1. Agency:	Governor's Office of Economic Development (GOED) 808 West Nye Lane Carson City, Nevada 89703 Bonnie Long (775) 687-9910 Fax: (775) 687-9924 Email: blong@diversifynevada.com				
Remarks:	Leasing Services negotiated this sublease renewal at the existing rate.				
Exceptions/Special notes:					
2. Name of Lessor:	Board of Regents of the Nevada System of Higher Education Great Basin College 1500 College Parkway Elko, NV 89801				
3. Name of Sublessor:	Northeastern Nevada Regional Development Authority (NNRDA) 1500 College Parkway, McMullen Hall, Room 103 Elko, Nevada 89801				
4. Sublessor contact:	Sheldon Mudd (775) 738.2100 Fax: (775) 738-7978 Mobile: (775) 340-3388 Email: smudd@nnrda.com				
5. Address of Lease property:	1500 College Pkwy, McMullen Hall, Room 103 Elko, Nevada 89801				
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 200				
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Actual cost per square foot
Increase %	\$ 200.00	12	\$2,400.00	July 1, 2019-June 30, 2020	\$1.00
0%	\$ 200.00	12	\$2,400.00	July 1, 2020-June 30, 2021	\$1.00
0%	\$ 200.00	12	\$2,400.00	July 1, 2021-June 30, 2022	\$1.00
c. Total Lease Consideration:		36	\$7,200.00		
d. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 90 Renewal terms: One identical term				
e. Holdover notice:	# of Days required 30 Holdover terms: N/A				
f. Term:	Three (3) years				
g. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
h. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
i. Janitorial:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input type="checkbox"/> 5 day <input checked="" type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes)				
j. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
k. Comparable Market Rate:	Not Available - Rural Area				
l. Specific termination clause in lease:	Breach/Default lack of funding				
m. Lease will be paid for by Agency Budget Account Number:	1526				
6. Purpose of the lease:	To house the Governor's Office of Economic Development, Mining Industrial Specialist				
7. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires a remark) <input type="checkbox"/> A relocation (requires a remark) <input type="checkbox"/> A new location (requires a remark) <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other				
a. Estimated Expenses:	Moving: \$0.00	Furnishings: \$0.00	Data/Phones: \$0.00		

RECEIVED

JUL 30 2019

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes ☒ No ☐ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

Bonnie Long 7/29/19
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>Exempt</u>	Exp: N/A	
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>		1
c. Is the Contractor Exempt from obtaining a Business License:	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
*If yes, please explain in exceptions section			
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
*If no, please explain in exceptions section			
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
*If no, please explain in exceptions section			
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
g. State of Nevada Vendor number:	<u>T81072742</u>		
h. IS this an Arms length Transaction	<u>Yes</u>	<input checked="" type="checkbox"/> No	

9. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

Sheryl Kattuck 7/30/19
Authorized Signature Date

Public Works Division

JZ/PS

For Board of Examiners

☒ YES

☐ NO

Steve Sisolak
Governor



Deonne Contine
Director

Ward D. Patrick, PE
Administrator

Carson City Offices:
Public Works Section
515 East Musser Street, Suite 102
Carson City, Nevada 89701-4263
(775) 684-4141 | Fax (775) 684-4142

Buildings & Grounds Section
(775) 684-1800 | Fax (775) 684-1821

Leasing Services Section
(775) 684-1815 | Fax (775) 684-1817

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Public Works Division

Las Vegas Offices:
Public Works Section
2300 McLeod Street
Las Vegas, Nevada 89104-4136
(702) 486-5115 | Fax (702) 486-5094

Buildings & Grounds Section
(702) 486-4300 | Fax (702) 486-4308

MEMORANDUM

Date: August 20, 2019

To: Bessie Wooldridge

From: Patrick Smorra, Public Works Division, Leasing Services, 684-1818
psmorra@admin.nv.gov

Subject: For placement on September's BOE meeting

NORTHERN NEVADA REGIONAL DEVELOPMENT AUTHORITY – Governor's Office of Economic Development – 1500 College Parkway, McMullen Hall, Room 103, Elko, Nevada 89801

As requested this memo is a clarification for a retroactive start date of July 1, 2019 for the Lease dated June 12, 2019. This lease required the approval of the Board of Regents of the Nevada System of Higher Education which delayed the signature process. Also the Board requested the Start and End Dates of the Sub-Lease Agreement coincide with the term of the Master Lease Agreement between Great Basin College and Northeastern Nevada Regional Development Authority.

Leases require signatures from the Lessor (Landlord/Owner), the Tenant (Director and Program Administrator), the Attorney General's Office, the Lessee (Administrator of Public Works Division), prior to submittal and final execution of the Lease at the Board of Examiner's Meeting. Each of the signers has their own review process which can cause a delay from the date the Lease is prepared, to the transmittal date to the Parties for review. If a review from a Party takes more than two weeks it will delay the process.

Thank you,

Patrick Smorra

For Budget Division Use Only	
Reviewed by: <i>Agnes Brant</i>	<i>8/14/19</i>
Reviewed by: <i>JSW</i>	<i>8/17/19</i>
Reviewed by:	

STATEWIDE LEASE INFORMATION SECOND AMENDMENT

1. Agency:	Department of Health and Human Services Division of Public and Behavioral Health 4150 Technology Way, Third Floor Carson City, Nevada 89706 Debbie Ohl T: 775.684.5915 F: 775.684.4211 E: dlohl@health.nv.gov				
Remarks:	This amendment is to add 927 sq. ft. of space to the existing 1,380 sf. Leasing Services has negotiated with the Lessor to keep the rent at the current cost per sq. ft.				
Exceptions/Special notes:					
2. Name of Landlord (Lessor):	JS Park Sahara, LLC				
3. Address of Landlord:	1600 Dove Street, Suite 480 Newport Beach, California 92660				
4. Property contact:	c/o The Saunders Property Company Optima Asset Management Kem Braswell 949.852.0900 Fax: 949.752.5113 kem@optimaasset.com				
5. Address of Lease property:	1840 East Sahara Avenue, Suite 111 Las Vegas, Nevada 89104				
a. Square Footage:	<input checked="" type="checkbox"/> Rentable <input type="checkbox"/> Usable 2,307				
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
Increase %	\$2,676.12	12	\$32,113.44	October 1, 2019 - June 30, 2020	\$1.16
5%	\$2,814.54	12	\$33,774.48	July 1, 2020 - June 30, 2021	\$1.22
c. Total Lease Consideration:		24	\$65,887.92		
d. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 90 Renewal terms: One identical term				
e. Holdover notice:	# of Days required 30 Holdover terms: 5%/90				
f. Term:	No change to original term, expansion of space only				
g. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
h. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
i. Janitorial:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input checked="" type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes)				
j. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input checked="" type="checkbox"/> Tenant				
k. Comparable Market Rate:	\$2.05 - \$2.60 Las Vegas / Henderson Area				
l. Specific termination clause in lease:	Breach/Default lack of funding				
m. Lease will be paid for by Agency Budget Account Number:	3215				
6. Purpose of the lease:	To house the Office of HIV and AIDS				
7. This lease constitutes:	<input type="checkbox"/> An extension of an existing lease <input checked="" type="checkbox"/> An addition to current facilities (requires a remark) <input type="checkbox"/> A relocation (requires a remark) <input type="checkbox"/> A new location (requires a remark) <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other				
a. Estimated Moving Expenses:	\$0.00	Furnishings:	\$0.00	Data/Phones:	\$0.00

RECEIVED

JUL 30 2019

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes ☒ No ☐ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

Christina Hadwin 7/22/19
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV20051400133	Exp:	6/30/2020	
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LLP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO	
*If yes, please explain in exceptions section				
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
g. State of Nevada Vendor number:	T29007659			
h. Is this an arms length Transaction	<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No	

9. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

Shawn Patrick 7/30/17
Authorized Signature Date
Public Works Division

//
For Board of Examiners ☒ YES ☐ NO

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by: <u>ARF</u>	<u>7-29-19</u>
Reviewed by: <u>BAW</u>	<u>7-30-19</u>
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Health and Human Services Division of Public and Behavioral Health, Radiation Control Program 4150 Technology Way, Third Floor Carson City, Nevada 89706 Debbie Ohl (775) 684-5915 Fax (775) 684-4211 Email: dlohl@health.nv.gov				
Remarks:	Leasing Services negotiated this renewal for a new term.				
Exceptions/Special notes:					
2. Name of Lessor:	Bowers Family Investments, LLC				
3. Address of Lessor:	4785 Caughlin Parkway Reno, Nevada 89509				
4. Property contact:	Coldwell Banker Select Property Management 187 Sonoma Street Carson City, Nevada 89701 Rachelle DeLallo (775) 882-3211 Fax: (775) 882-7553 Rachelle.DeLallo@selectpropmgt.com				
5. Address of Lease property:	675 Fairview Drive, Suite 218, 239 and 244 Carson City, Nevada 89701				
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 3,945				
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
Increase %	\$ 5,207.40	12	\$62,488.80	August 1, 2019 - July 31, 2020	\$1.32
0%	\$ 5,207.40	12	\$62,488.80	August 1, 2020 - July 31, 2021	\$1.32
1%	\$ 5,246.85	12	\$62,962.20	August 1, 2021 - July 31, 2022	\$1.33
0%	\$ 5,246.85	12	\$62,962.20	August 1, 2022 - July 31, 2023	\$1.33
1%	\$ 5,286.30	12	\$63,435.60	August 1, 2023 - July 31, 2024	\$1.34
c. Total Lease Consideration:	60		\$314,337.60		
d. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		90	Renewal terms: One (1) identical term	
e. Holdover notice:	# of Days required		30	Holdover terms: 5% / 90	
f. Term:	Five (5) years				
g. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
h. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
i. Janitorial:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input checked="" type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes)				
j. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
k. Comparable Market Rate:	\$1.66 - \$2.07 - Carson City Area				
l. Specific termination clause in lease:	Breach/Default lack of funding				
m. Lease will be paid for by Agency Budget Account Number:	3101				
6. Purpose of the lease:	To house the DPBH/Radiation Control Program				
7. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires a remark) <input type="checkbox"/> A relocation (requires a remark) <input type="checkbox"/> A new location (requires a remark) <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other				
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00

RECEIVED

JUL 25 2019

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes X No _____ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

Christine Hadwin 7/16/19
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV20097559201	Exp:	11/30/2019	12
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input checked="" type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
*If yes, please explain in exceptions section				
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
g. State of Nevada Vendor number:	T29023142			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			

9. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

Shadi Patich 7/24/19
Authorized Signature Date

Public Works Division

PS
For Board of Examiners ☒ YES ☐ NO

Steve Sisolak
Governor



Deonne Contine
Director

Ward D. Patrick, PE
Administrator

Carson City Offices:
Public Works Section
515 East Musser Street, Suite 102
Carson City, Nevada 89701-4263
(775) 684-4141 | Fax (775) 684-4142

Buildings & Grounds Section
(775) 684-1800 | Fax (775) 684-1821

Leasing Services Section
(775) 684-1815 | Fax (775) 684-1817

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Public Works Division

Las Vegas Offices:
Public Works Section
2300 McLeod Street
Las Vegas, Nevada 89104-4136
(702) 486-5115 | Fax (702) 486-5094

Buildings & Grounds Section
(702) 486-4300 | Fax (702) 486-4308

MEMORANDUM

Date: August 20, 2019

To: Bessie Wooldridge

From: Patrick Smorra, Public Works Division, Leasing Services, 684-1818
psmorra@admin.nv.gov

Subject: For placement on September's BOE meeting

BOWERS FAMILY INVESTMENTS, LLC – DHHS/DPBH/RCP – 675 Fairview Drive, Suite 218, 239 and 244, Carson City

As requested this memo is a clarification for a retroactive start date of August 1, 2019 for the Lease dated April 29, 2019. This lease was held by the Lessor for two months for signature which delayed the process.

Leases require signatures from the Lessor (Landlord/Owner), the Tenant (Director and Program Administrator), the Attorney General's Office, the Lessee (Administrator of Public Works Division), prior to submittal and final execution of the Lease at the Board of Examiner's Meeting. Each of the signers has their own review process which can cause a delay from the date the Lease is prepared, to the transmittal date to the Parties for review. If a review from a Party takes more than two weeks it will delay the process.

Thank you,

Patrick Smorra

Please Note: -Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by: <i>Adam Fante</i>	8/14/19
Reviewed by: <i>ADW</i>	8/15/19
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:

Department of Health and Human Services
Division of Public and Behavioral Health
Rural Clinics
4150 Technology Way, #300
Carson City, Nevada 89706
Debbie Ohl
(775) 684-5915 fax (775) 684-4211 dlohl@health.nv.gov

Remarks:

Leasing Services negotiated this lease renewal for an additional five (5) years to include minor tenant improvements; repair ceiling damage from water leak, replace window screen, missing baseboard, and repair/replace/deep clean carpets.

Exceptions/Special notes:

County is responsible for all janitorial services.

2. Name of Lessor:

Lincoln County Commission

3. Address of Lessor:

PO Box 90
Pioche, Nevada 89403

4. Property contact:

Denice Brown
(775) 962-8063 fax: (775) 962-5451 dbrown@lincoln.nv.com

5. Address of Lease property:

1005 Main Street, Suites 110 & 111
Panaca, Nevada 89402

a. Square Footage:

☐ Rentable

☒ Usable 400

b. Cost:

cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
\$ 500.00	12	\$6,000.00	October 1, 2019 - September 30, 2020	\$1.25
0% \$ 500.00	12	\$6,000.00	October 1, 2020 - September 30, 2021	\$1.25
0% \$ 500.00	12	\$6,000.00	October 1, 2021 - September 30, 2022	\$1.25
0% \$ 500.00	12	\$6,000.00	October 1, 2022 - September 30, 2023	\$1.25
0% \$ 500.00	12	\$6,000.00	October 1, 2023 - September 30, 2024	\$1.25

Increase %

c. Total Lease Consideration:

60 \$30,000.00

d. Option to renew:

☒ Yes ☐ No 90 Renewal terms: One (1) identical term

e. Holdover notice:

of Days required 30 Holdover terms: 5% / 90

f. Term:

Five (5) years

g. Pass-thrus/CAM/Taxes

☒ Landlord ☐ Tenant

h. Utilities:

☒ Landlord ☐ Tenant

i. Janitorial:

☒ Landlord ☐ Tenant ☐ 3 day ☐ 5 day ☐ Rural 3 day ☐ Rural 5 day ☒ Other (see special notes)

j. Repairs:

Major: ☒ Landlord ☐ Tenant Minor: ☒ Landlord ☐ Tenant

k. Comparable Market Rate:

Not Available - Rural Area

l. Specific termination clause in lease:

Breach/Default lack of funding

m. Lease will be paid for by Agency Budget Account Number:

3648

6. Purpose of the lease:

To house the Division of Public and Behavioral Health, Rural Clinics

7. This lease constitutes:

- ☒ An extension of an existing lease
- ☐ An addition to current facilities (requires a remark)
- ☐ A relocation (requires a remark)
- ☐ A new location (requires a remark)
- ☐ Remodeling only
- ☐ Other

a. Estimated Expenses:

Moving: \$0.00

Furnishings: \$0.00

Data/Phones: \$0.00

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes ☒ No ☐ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

Christi Dadiuk 7/30/19
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	EXEMPT	Exp: N/A	2
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>		
c. Is the Contractor Exempt from obtaining a Business License:	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
*If yes, please explain in exceptions section			
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
*If no, please explain in exceptions section			
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
*If no, please explain in exceptions section			
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
g. State of Nevada Vendor number:	T40267400		
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	

9. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

David Patrick 8/5/19
Authorized Signature Date
Public Works Division

JZ/PS
For Board of Examiners ☒ YES ☐ NO

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Public Safety Nevada Highway Patrol 555 Wright Way Carson City, Nevada 89711 Jerry Mott 775-684-4593 Fax: 775-684-4809 gmott@dps.state.nv.us				
Remarks:	Leasing Services negotiated this lease renewal at the existing rate for an additional five (5) years to include minor improvement to provide new window blinds or shades.				
Exceptions/Special notes:	Janitorial services shall be provided by the Lessor at the Lessor's sole cost and expense.				
2. Name of Lessor:	Lander County				
3. Address of Lessor:	50 State Route 305 Battle Mountain, Nevada 89820 Mailing Address: P.O. Box 187, Battle Mountain, Nevada 89820				
4. Property contact:	Keith Westengard, Executive Director 775-635-5595 Fax: 775-635-3334 Cell: 775-455-7653 kwestengard@landercountynv.org				
5. Address of Lease property:	50 State Route 305, Suites 207 and 208 Battle Mountain, Nevada 89820				
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 400 300 square feet of office space and 100 square feet of storage space				
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
Increase %	\$ 375.00	12	\$4,500.00	September 1, 2019-August 31, 2020	\$0.94
0%	\$ 375.00	12	\$4,500.00	September 1, 2020-August 31, 2021	\$0.94
0%	\$ 375.00	12	\$4,500.00	September 1, 2021-August 31, 2022	\$0.94
0%	\$ 375.00	12	\$4,500.00	September 1, 2022-August 31, 2023	\$0.94
0%	\$ 375.00	12	\$4,500.00	September 1, 2023-August 31, 2024	\$0.94
c. Total Lease Consideration:		60	\$22,500.00		
d. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		90	Renewal terms:	One (1) Identical Term
e. Holdover notice:	# of Days required		30	Holdover terms:	None
f. Term:	Five (5) years				
g. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
h. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
i. Janitorial:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day <input checked="" type="checkbox"/> Other (see special notes)				
j. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
k. Comparable Market Rate:	Not Available - Rural Area				
l. Specific termination clause in lease:	Breach/Default lack of funding				
m. Lease will be paid for by Agency Budget Account Number:	4713				
6. Purpose of the lease:	To house the Nevada Highway Patrol				
7. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires a remark) <input type="checkbox"/> A relocation (requires a remark) <input type="checkbox"/> A new location (requires a remark) <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other				
a. Estimated Expenses:	Moving: \$0.00		Furnishings: \$0.00		Data/Phones: \$0.00

RECEIVED

JUL 25 2019

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes ☒ No ☐ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

SAORD 7/24/19
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	<u>EXEMPT</u>	Exp: <u>N/A</u>	8
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>		
c. Is the Contractor Exempt from obtaining a Business License:	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
*If yes, please explain in exceptions section			
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
*If no, please explain in exceptions section			
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
*If no, please explain in exceptions section			
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
g. State of Nevada Vendor number:	<u>T40262000</u>		
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	

9. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

Shawn Patrick 7/24/19
Authorized Signature Date
Public Works Division

JZ
For Board of Examiners ☒ YES ☐ NO

Steve Sisolak
Governor



Deonne Contine
Director

Ward D. Patrick, PE
Administrator

Carson City Offices:
Public Works Section
515 East Musser Street, Suite 102
Carson City, Nevada 89701-4263
(775) 684-4141 | Fax (775) 684-4142

Buildings & Grounds Section
(775) 684-1800 | Fax (775) 684-1821

Leasing Services Section
(775) 684-1815 | Fax (775) 684-1817

STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Public Works Division

Las Vegas Offices:
Public Works Section
2300 McLeod Street
Las Vegas, Nevada 89104-4136
(702) 486-5115 | Fax (702) 486-5094

Buildings & Grounds Section
(702) 486-4300 | Fax (702) 486-4308

MEMORANDUM

Date: August 20, 2019

To: Bessie Wooldridge

From: Patrick Smorra, Public Works Division, Leasing Services, 684-1818
psmorra@admin.nv.gov

Subject: For placement on September's BOE meeting

LANDER COUNTY – Department of Public Safety, Nevada Highway Patrol- 50 State Route 305, Suites 207 and 208, Battle Mountain

As requested this memo is a clarification for a retroactive start date of September 1, 2019 for the Lease dated April 15, 2019. This lease required the approval of the Lander County Board which delayed the signature process.

Leases require signatures from the Lessor (Landlord/Owner), the Tenant (Director and Program Administrator), the Attorney General's Office, the Lessee (Administrator of Public Works Division), prior to submittal and final execution of the Lease at the Board of Examiner's Meeting. Each of the signers has their own review process which can cause a delay from the date the Lease is prepared, to the transmittal date to the Parties for review. If a review from a Party takes more than two weeks it will delay the process.

Thank you,

Patrick Smorra

For Budget Division Use Only	
Reviewed by: <i>Attily</i>	8/13/19
Reviewed by: <i>[Signature]</i>	8/14
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Department of Tourism & Cultural Affairs, Nevada Arts Council 716 North Carson Street, Suite A Carson City, Nevada 89701 Jared Franco (775) 687-7118 Fax: (775) 687-6688 jfranco@nevadaculture.org				
Remarks:	Leasing Services negotiated this lease renewal to include paint and carpet repair and/or replacement.				
Exceptions/Special notes:					
2. Name of Lessor:	Kaplan Family Trust				
3. Address of Lessor:	689 Tina Court Stateline, Nevada 89449 Mailing: PO Box 2342 Stateline, Nevada 89449				
4. Property contact:	Carson City Square, LLC PO Box 2342 Stateline, Nevada 89449 Wendy Kaplan (510) 685-5919 Fax: (707) 361-0808 wendyk689@gmail.com Steve Kaplan (707) 315-9446 (Cell) roiguy@gmail.com				
5. Address of Lease property:	716 North Carson Street, Suite A Carson City, Nevada 89701				
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 3,046				
b. Cost:	cost per month	# of months in time frame	cost per year	time frame	Approximate cost per square foot
Increase %	\$ 3,790.00	12	\$45,480.00	October 1, 2019 - September 30, 2020	\$1.24
0%	\$ 3,790.00	12	\$45,480.00	October 1, 2020 - September 30, 2021	\$1.24
2%	\$ 3,866.00	12	\$46,392.00	October 1, 2021 - September 30, 2022	\$1.27
0%	\$ 3,866.00	12	\$46,392.00	October 1, 2022 - September 30, 2023	\$1.27
2%	\$ 3,943.00	12	\$47,316.00	October 1, 2023 - September 30, 2024	\$1.29
c. Total Lease Consideration:		60	\$231,060.00		
d. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 90 Renewal terms: One (1) identical term				
e. Holdover notice:	# of Days required 30 Holdover terms: 5% / 90				
f. Term:	Five (5) years				
g. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
h. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
i. Janitorial:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input checked="" type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes)				
j. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
k. Comparable Market Rate:	\$1.66 - \$2.07 - Carson City Area				
l. Specific termination clause in lease:	Breach/Default lack of funding				
m. Lease will be paid for by Agency Budget Account Number:	2979				
6. Purpose of the lease:	To house the Department of Tourism & Cultural Affairs, Nevada Arts Council				
7. This lease constitutes:	<input checked="" type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires a remark) <input type="checkbox"/> A relocation (requires a remark) <input type="checkbox"/> A new location (requires a remark) <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other				
a. Estimated Expenses:	Moving: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00				

RECEIVED

AUG - 5 2019


GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes ☒ No ☐ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

 8-1-19
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV20141565446	Exp:	9/30/2019	10
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO	
*If yes, please explain in exceptions section				
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
g. State of Nevada Vendor number:	T27036364			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	

9. Compliance with NRS 331.110, Section 1, Paragraph 2:


a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

 8/3/19
Authorized Signature Date

Public Works Division

PS
For Board of Examiners ☒ YES ☐ NO

Please Note: Dates for commencement and BOE targets are initial estimates and may be subject to change in accordance with timeframes of returned documentation.

For Budget Division Use Only	
Reviewed by:	
Reviewed by:	
Reviewed by:	

STATEWIDE LEASE INFORMATION

1. Agency:	Private Investigator's Licensing Board 400 West King Street, Suite 101 Carson City, Nevada 89703 Kevin Ingram T: 702.486.3003 F: 702.486.3009 E: kingram@ag.nv.gov				
Remarks:	Leasing services negotiated this relocation to better accommodate the needs of the Board and to reduced space. This relocation created a savings of \$142,842.96 over the six year term.				
Exceptions/Special notes:	This location includes all furniture left by the Department of Agriculture. Improvements to consist of: build a wall in existing hallway, and create an opening into the new reception area.				
2. Name of Lessor:	The Trust for Methodist Development of the First Methodist Church				
3. Address of Lessor:	c/o Coldwell Banker Select 187 Sonoma Street, Suite A Carson City, Nevada 89701				
4. Property contact:	Nicole Mendoza T: 775.882.3211 F: 775.882.7553 E: nmendoza@selectpropmgt.com				
5. Address of Lease property:	400 West King Street, Suite 101 Carson City, Nevada 89703				
a. Square Footage:	<input type="checkbox"/> Rentable <input checked="" type="checkbox"/> Usable 993				
b. Cost:	cost per month	# of months in time frame	cost per time frame	time frame	Actual cost per square foot
Increase %	\$ -	20 days	\$0.00	September 11, 2019 - September 30, 2019	\$1.35
	\$ 1,340.55	12	\$16,086.60	October 1, 2019 - September 30, 2020	\$1.35
0%	\$ 1,340.55	12	\$16,086.60	October 1, 2020 - September 30, 2021	\$1.35
3%	\$ 1,380.27	12	\$16,563.24	October 1, 2021 - September 30, 2022	\$1.39
0%	\$ 1,380.27	12	\$16,563.24	October 1, 2022 - September 30, 2023	\$1.39
3%	\$ 1,419.99	12	\$17,039.88	October 1, 2023 - September 30, 2024	\$1.43
0%	\$ 1,419.99	12	\$17,039.88	October 1, 2024 - September 30, 2025	\$1.43
c. Total Lease Consideration:	72		\$99,379.44		
d. Option to renew:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		90	Renewal terms: One Identical Term	
e. Holdover notice:	# of Days required		30	Holdover terms: 5%/90	
f. Term:	Six (6) Years, Twenty (20) Days				
g. Pass-thrus/CAM/Taxes	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
h. Utilities:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
i. Janitorial:	<input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant <input type="checkbox"/> 3 day <input checked="" type="checkbox"/> 5 day <input type="checkbox"/> Rural 3 day <input type="checkbox"/> Rural 5 day <input type="checkbox"/> Other (see special notes)				
j. Repairs:	Major: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant Minor: <input checked="" type="checkbox"/> Landlord <input type="checkbox"/> Tenant				
k. Comparable Market Rate:	\$1.53 - \$1.71 - Carson City Area				
l. Specific termination clause in lease:	Breach/Default lack of funding				
m. Lease will be paid for by Agency Budget Account Number:	1032				
6. Purpose of the lease:	To house the Private Investigator's Licensing Board				
7. This lease constitutes:	<input type="checkbox"/> An extension of an existing lease <input type="checkbox"/> An addition to current facilities (requires a remark) <input checked="" type="checkbox"/> A relocation (requires a remark) <input type="checkbox"/> A new location (requires a remark) <input type="checkbox"/> Remodeling only <input type="checkbox"/> Other				
a. Estimated Expenses:	Moving: \$0.00 Furnishings: \$0.00 Data/Phones: \$0.00				

RECEIVED

AUG - 5 2019

GOVERNOR'S FINANCE OFFICE
BUDGET DIVISION

STATEWIDE LEASE INFORMATION

IF THIS LEASE IS FOR A NEW SPACE, RELOCATION, ADDITION TO EXISTING OR REMODEL OF EXISTING SPACE - PLEASE CONFIRM THAT ALL ASSOCIATED COSTS ARE INCLUDED IN YOUR LEGISLATIVELY APPROVED BUDGET.

Yes _____ No _____ Dec Unit _____

IF NO, PLEASE PROVIDE THE APPROVED WORK PROGRAM NUMBER ADDING THE EXPENSE TO YOUR BUDGET

KRQ 8/2/19
Authorized Agency Signature Date

For Public Works Information:

8. State of Nevada Business License Information:

a. Nevada Business ID Number:	NV19861025336	Exp:	N/A	2
b. The Contractor is registered with the Nevada Secretary of State's Office as a:	LLC <input type="checkbox"/> INC <input type="checkbox"/> CORP <input type="checkbox"/> LP <input type="checkbox"/>			
c. Is the Contractor Exempt from obtaining a Business License:	<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO	
*If yes, please explain in exceptions section				
d. Is the Contractors Name the same as the Legal Entity Name?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
*If no, please explain in exceptions section				
e. Does the Contractor have a current Nevada State Business License (SBL)?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
*If no, please explain in exceptions section				
f. Is the Legal Entity active and in good standing with the Nevada Secretary of States Office?	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	
g. State of Nevada Vendor number:	T29000736			
h. Is this an Arms Length Transaction	<input checked="" type="checkbox"/> YES		<input type="checkbox"/> NO	

9. Compliance with NRS 331.110, Section 1, Paragraph 2:

a. I/we have considered the reasonableness of the terms of this lease, including cost	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
b. I/we have considered other state leased or owned space available for use by this agency	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

Handwritten Signature 8/3/19
Authorized Signature Date

Public Works Division

II/PS

For Board of Examiners ☒ YES ☐ NO

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	030	ATTORNEY GENERAL'S OFFICE – SPECIAL LITIGATION FUND	ADAMS NATURAL RESOURCES	GENERAL	\$120,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing outside legal and consulting services in support of the Attorney General's Yucca Mountain legal efforts.				
		Term of Contract:	10/01/2019 - 09/30/2020	Contract # 22253		
2.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	CENTRAL SIERRA CONSTRUCTION	OTHER: BUILDING RENT INCOME REVENUE	\$85,000	
	Contract Description:	This is a new contract to provide project management, journeyman carpentry, general labor and other general building contracting services for various state-owned buildings throughout Nevada.				
		Term of Contract:	Upon Approval - 08/31/2023	Contract # 22179		
3.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	KFC BUILDING CONCEPTS, INC.	OTHER: BUILDING RENT INCOME REVENUE	\$85,000	
	Contract Description:	This is a new contract to provide general building contracting services including carpentry, general construction labor, cement finishing and other construction related services for various state-owned buildings throughout Nevada.				
		Term of Contract:	Upon Approval - 08/31/2023	Contract # 22178		
4.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - MARLETTE LAKE	CARSON CITY	OTHER: REVENUE	\$1,300,000	
	Contract Description:	This is a new interlocal revenue agreement that governs the ongoing water sales and associated water rates the State will charge Carson City from July 1, 2019, to June 30, 2021.				
		Term of Contract:	07/01/2019 - 06/30/2021	Contract # 22279		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
5.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS – NON-EXEC	DG KOCH ASSOCIATES, LLC	BONDS	\$95,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Ely State Prison - Building 9 heating, ventilation and air conditioning replacement CIP project, which will provide project design and construction administration services for the replacement of the Administration Building's air-top handling units: SPWD Project No. 19-M15; Contract No. 112908.				
	Term of Contract:	Upon Approval - 06/30/2023	Contract # 22257			
6.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - 2013 DEPARTMENT OF ADMINISTRATION CIP PROJECTS – NON-EXEC	FARR WEST ENGINEERING DBA FARR WEST CHILTON ENGINEERING	BONDS	\$150,550	Professional Service
	Contract Description:	This is the first amendment to the original contract which provides professional architectural/engineering services for the Stewart Facility - Domestic Fire and Water Main Replacement CIP project: CIP Project No. 17-M36; SPWD Contract No. 112437. This amendment increases the maximum amount from \$138,748 to \$289,298 due to additional requirements related to archeological sensitive areas.				
	Term of Contract:	05/14/2019 - 06/30/2021	Contract # 21629			
7.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF MOTOR VEHICLES CIP PROJECTS – NON-EXEC	HERSHENOW & KLIPPENSTEIN	HIGHWAY 33% BONDS 60% OTHER:7%	\$203,000	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the completion of the south Reno Department of Motor Vehicles Service Office CIP project, to include commercial driver's license course site design, the topographic survey of Sandhill Road and Double R Blvd. for signalization design and intersection signalization design: SPWD Project No. 19-C01; Contract No. 112910.				
	Term of Contract:	Upon Approval - 06/30/2023	Contract # 22269			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
8.	101	DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS- TOURISM	AMADOR STAGE LINES, INC.	OTHER: LODGING TAX	\$250,000	
	Contract Description:	This is a new contract to provide ongoing motor coach transportation services for familiarization tours to showcase the State to tour operators, travel writers and media.				
	Term of Contract:	11/01/2019 - 10/31/2023	Contract # 22138			
9.	101	DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS- TOURISM	PLATINUM LV TRANSPORTATION, LLC DBA WHITTLESEA CHECKER TAXI	OTHER: LODGING TAX	\$75,000	
	Contract Description:	This is a new contract to provide ongoing motor coach transportation services for familiarization tours to showcase the State to tour operators, travel writers and media.				
	Term of Contract:	11/01/2019 - 10/31/2023	Contract # 22168			
10.	101	DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS- TOURISM	SW EXCURSIONS & EDUCATIONAL TOURS INC. DBA SWEETOURS	OTHER: LODGING TAX	\$200,000	
	Contract Description:	This is a new contract to provide ongoing motor coach transportation services for familiarization tours to showcase the State to tour operators, travel writers and media.				
	Term of Contract:	11/01/2019 - 10/31/2023	Contract # 22162			
11.	101	DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS- TOURISM	WINDSTAR LINES	OTHER: LODGING TAX	\$75,000	
	Contract Description:	This is a new contract to provide ongoing motor coach transportation services for familiarization tours to showcase the State to tour operators, travel writers and media.				
	Term of Contract:	11/01/2019 - 10/31/2023	Contract # 22184			
12.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - NETWORK TRANSPORT SERVICES	NOR-CAL BATTERY COMPANY	FEE: USER	\$79,870	
	Contract Description:	This is the fourth amendment to the original contract which provides for replacement of battery systems, rack and ancillary equipment located at communication sites. This amendment increases the maximum amount from \$1,255,485 to \$1,335,355 due to the addition of one replacement battery system at Peavine Peak, one replacement rectifier at Pilot Peak and the reconciliation of contract authority.				
	Term of Contract:	12/08/2015 - 06/30/2020	Contract # 17190			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
13.	300	DEPARTMENT OF EDUCATION - SCHOOL SAFETY	AMERICAN INSTITUTES FOR RESEARCH IN THE BEHAVIORAL SCIENCES	GENERAL 75.1% FEDERAL 24.9%	\$603,000	Professional Service
	Contract Description:	This is the fourth amendment to the original contract which provides a School Climate/Social and Emotional Learning survey to be administered to all pupils who are enrolled in Nevada public schools. This amendment extends the termination date from September 30, 2019 to June 30, 2022 and increases the maximum amount from \$1,124,458 to \$1,727,458 due to the continued need for these services.				
	Term of Contract:	09/08/2015 - 06/30/2022	Contract # 16943			
14.	332	DEPARTMENT OF ADMINISTRATION - NEVADA STATE LIBRARY, ARCHIVES AND PUBLIC RECORDS – STATE LIBRARY	CALIFA GROUP	FEDERAL	\$245,000	
	Contract Description:	This is a new contract to develop unique learning materials for workforce education and training in the healthcare sector available in public libraries.				
	Term of Contract:	10/01/2019 - 09/30/2020	Contract # 22188			
15.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BEHAVIORAL HEALTH PREVENTION AND TREATMENT	MY OFFICE STAFF	FEDERAL	\$76,350	Professional Service
	Contract Description:	This is a new contract to provide onsite and desk monitoring activities, single audit reviews, consulting services, technical assistance and evaluations of sub-recipients in the administration of federal grant programs, laws and other applicable regulations.				
	Term of Contract:	07/01/2019 - 06/30/2020	Contract # 22132			
16.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH – RURAL CLINICS	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO – UNIVERSITY OF NEVADA, RENO - DEPARTMENT OF PSYCHIATRY & BEHAVIORAL SCIENCES	GENERAL	\$71,760	
	Contract Description:	This is a new interlocal agreement to provide telemedicine services to adult clients in rural communities increasing diagnosis and treatment for patients.				
	Term of Contract:	07/01/2019 - 06/30/2021	Contract # 22171			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
17.	407	DEPARTMENT OF HEALTH AND HUMAN SERVICES - WELFARE AND SUPPORTIVE SERVICES - CHILD SUPPORT ENFORCEMENT PROGRAM	SLI GLOBAL SOLUTIONS, LLC	GENERAL 34% FEDERAL 66%	\$5,287,398	
	Contract Description:	This is the first amendment which provides Independent Verification and Validation (IV &V) services for the Child Support Enforcement Automated System replacement. This amendment increases the maximum amount from \$2,211,680 to \$7,499,077.80 revises Attachment AA � Deliverable Payment Schedule, revises the order of precedence by incorporating a new scope of work as Attachment CC - Addendum to Request for Proposal 3475 and moving the state solicitation or request for proposal 3267 and Amendments #01 thru 05 to Attachment CC-1, due to the requirement from the Federal Office of Child Support Enforcement for continuous IV&V services.				
	Term of Contract:	05/01/2018 - 04/30/2024	Contract # 19741			
18.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	CHURCHILL COUNTY	OTHER: REVENUE	\$734,485	Exempt
	Contract Description:	This is a new interlocal revenue agreement to provide ongoing child protective services pursuant to NRS 432B.326.				
	Term of Contract:	07/01/2019 - 06/30/2021	Contract # 21978			
19.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	DOUGLAS COUNTY	OTHER: REVENUE	\$1,002,862	Exempt
	Contract Description:	This is a new revenue interlocal agreement to provide ongoing child protective services pursuant to NRS 432B.326.				
	Term of Contract:	07/01/2019 - 06/30/2021	Contract # 21979			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
20.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	FM MARKETING, LLC	FEDERAL	\$450,000	Sole Source
	Contract Description:	This is the second amendment to the original contract which provides ongoing custom media lists for placement of a media advertising plan, follow-up with civic groups, non-profit education organizations to provide public relations. This amendment extends the termination date from September 30, 2019 to June 30, 2022 and increases the maximum amount from \$96,300 to \$546,300 due to an increased need for these services				
	Term of Contract:	12/04/2018 - 06/30/2022	Contract # 21256			
21.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - RURAL CHILD WELFARE	LYON COUNTY	OTHER: ASSESSMENTS	\$1,405,885	Exempt
	Contract Description:	This is a new interlocal revenue agreement to provide ongoing child protective services pursuant to NRS 432B.326.				
	Term of Contract:	07/01/2019 - 06/30/2021	Contract # 21977			
22.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - NORTHERN NEVADA CHILD AND ADOLESCENT SERVICES	SIGNATURE LANDSCAPES, LLC	GENERAL 72.4% FEDERAL 27.6%	\$66,680	
	Contract Description:	This is a new contract to provide ongoing landscaping services including turf care, horticultural care, irrigation, litter removal and annual planting and care.				
	Term of Contract:	07/01/2019 - 06/30/2023	Contract # 22119			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
23.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO – UNIVERSITY OF NEVADA, LAS VEGAS	FEDERAL	\$52,909	Exempt
	Contract Description:	This is a new interlocal agreement to provide support in implementing the Pediatric Mental Health Care Access Program.				
		Term of Contract:	06/01/2019 - 12/31/2019	Contract # 22212		
24.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	UNIVERSITY OF MARYLAND	FEDERAL	\$169,500	Exempt
	Contract Description:	This is a new contract to provide implementation of Families are Laughing, Outcomes, Coordination, Unconditional Positive Regard, Short-Term into the workforce development activities for the Wraparound In Nevada Program.				
		Term of Contract:	04/01/2019 - 09/30/2019	Contract # 22133		
25.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	ZERO TO THREE: NATIONAL CENTER FOR INFANTS TODDLER & FAMILIES	FEDERAL	\$70,398	
	Contract Description:	This is a new contract to provide training for staff in early childhood diagnostic classification in a developmentally based system for diagnosing mental health and developmental disorders in infants and toddlers.				
		Term of Contract:	07/08/2019 - 06/30/2020	Contract # 22215		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
26.	431	ADJUTANT GENERAL & NATIONAL GUARD	NEVADA ARMY NATIONAL GUARD	GENERAL 17% FEDERAL 83%	\$110,000	
	Contract Description:	This is a new cooperative agreement which establishes the terms and conditions of federal National Guard Bureau funding in support of the operations and training of the Nevada Army and Air National Guards.				
27.	440	DEPARTMENT OF CORRECTIONS - CORRECTIONAL PROGRAMS	BOARD OF REGENTS, NEVADA SYSTEM OF HIGHER EDUCATION OBO – UNIVERSITY OF NEVADA, LAS VEGAS	FEDERAL	\$59,296	Exempt
	Contract Description:	This is the first amendment to the original interlocal agreement which provides ongoing policy evaluation and assessment validation for the Nevada Strategic Recidivism Reduction Plan. This amendment extends the contract termination date from September 9, 2019 to September 30, 2021 and increases the maximum amount from \$50,476 to \$109,772 due to the continued need of these services.				
28.	440	DEPARTMENT OF CORRECTIONS - CORRECTIONAL PROGRAMS	UNIVERSITY OF CINCINNATI CORRECTIONS INSTITUTE	FEDERAL	\$77,500	
	Contract Description:	This is a new contract to provide training for the re-entry program as identified by the Second Chance Act Reentry Initiative - Nevada Recidivism Reduction Plan grant to meet the goals, objectives and activities as required by the Bureau of Justice Assistance. This includes training of trainers in the Nevada Risk Assessment System, Correctional Case Planning and the training of staff members in core correctional practices.				
29.	550	DEPARTMENT OF AGRICULTURE - ADMINISTRATION	JOSE M. CASTRO SERRANO DBA EXPRESS JANITORIAL	OTHER: COST ALLOCATION	\$8,402	Sole Source
	Contract Description:	This is the fifth amendment to the original contract which provides janitorial services to the Sparks headquarters and Consumer Equitability buildings. This amendment extends the termination date from September 30, 2019 to December 31, 2019 and increases the maximum amount from \$132,897 to \$141,300 due to the continued need for these services.				
30.	650	DEPARTMENT OF PUBLIC SAFETY - DIRECTOR'S OFFICE	CARFAX	OTHER: REVENUE	\$1,200,000	
	Contract Description:	This is a new contract to provide an online option to the public to download and pay for Nevada Highway Patrol crash reports.				
	Term of Contract:	Upon Approval - 09/30/2023		Contract # 22248		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
31.	700	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - ADMINISTRATION	ENVIRONMENTAL INCENTIVES, LLC	GENERAL	\$160,000	Sole Source
	Contract Description:	This is the first amendment to the original contract which provides ongoing improvement and implementation to the modeling spreadsheets for the Nevada Conservation Credit System (CCS) to facilitate credit and debit projects, produce performance reports and make the CCS more accessible and efficient to operate. This amendment extends the termination date from December 31, 2019 to December 31, 2021 and increases the maximum amount from \$200,000 to \$360,000 due to the continued need for these services.				
	Term of Contract:	12/12/2017 - 12/31/2021	Contract # 19444			
32.	702	DEPARTMENT OF WILDLIFE – GAME MANAGEMENT	OWYHEE AIR RESEARCH, INC.	FEE: SPORTSMEN 20% OTHER: HERITAGE AND WILDLIFE TRUST ACCOUNT 18% FEDERAL 62%	\$750,000	
	Contract Description:	This is a new contract to provide ongoing fixed wing aircraft services for monitoring wildlife movements, conducting wildlife surveys, and transporting agency personnel in the course of project work.				
	Term of Contract:	09/11/2019 - 09/30/2023	Contract # 22174			
33.	702	DEPARTMENT OF WILDLIFE - HABITAT	UNITED STATES - DEPARTMENT OF THE INTERIOR	OTHER: REVENUE	\$289,000	
	Contract Description:	This is a new revenue interlocal agreement to provide wildlife survey, habitat and ecological restoration activities in northwest Nevada on land administered by the Bureau of Land Management.				
	Term of Contract:	Upon Approval - 06/30/2021	Contract # 22247			
34.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	LYON COUNTY ROAD DIVISION	GENERAL 20% HIGHWAY 80%	\$94,000	
	Contract Description:	This is a new interlocal agreement to provide road maintenance for portions of roads and associated culverts with Lyon County Road Division.				
	Term of Contract:	07/01/2019 - 06/30/2021	Contract # 22230			
35.	706	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - FORESTRY - WILDLAND FIRE PREVENTION PROGRAM	ELKO COUNTY, NEVADA	OTHER: REVENUE	\$600,000	
	Contract Description:	This is a new revenue interlocal agreement to provide ongoing services under the Wildland Fire Protection Program.				
	Term of Contract:	07/01/2019 - 06/30/2020	Contract # 22197			

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
36.	810	DEPARTMENT OF MOTOR VEHICLES - MOTOR CARRIER DIVISION	EXPLORE INFORMATION SERVICES, LLC	HIGHWAY 33.3% FEDERAL 66.7%	\$1,200,000	Sole Source
	Contract Description:	This is a new contract to provide a system which recognizes the registration of commercial motor vehicles registered by other jurisdictions. The system provides for payment of apportioned licensing fees based on the total distance operated in all member jurisdictions.				
		Term of Contract:	Upon Approval - 12/26/2020	Contract # 22246		
37.	810	DEPARTMENT OF MOTOR VEHICLES - ADMINISTRATIVE SERVICES	OPSEC SECURITY, INC.	HIGHWAY	(\$303,824)	
	Contract Description:	This is the fourth amendment to the original contract which provides for a contractor-provided and supported automated dealer placard issuance process. This amendment reduces the maximum amount from \$3,053,758 to \$2,749,933.84 and extends the termination date from September 30, 2019 to June 30, 2024 due to the continued need for these services and the approval of AB53 (2019 Legislative Session) providing the vendor with the authority to control the inventory of the tags, thus charging the dealerships directly.				
		Term of Contract:	06/12/2014 - 06/30/2024	Contract # 15604		
38.	902	DEPARTMENT OF EMPLOYMENT, TRAINING & REHABILITATION - WORKFORCE DEVELOPMENT	THE CAREER INDEX CORPORATION	FEDERAL	\$577,800	Sole Source
	Contract Description:	This is the second amendment to the original contract which provides a software solution to the gathering and reporting of the data required for the common performance measures contained in the Workforce Innovation and Opportunity Act. This amendment increases the maximum amount from \$821,300 to \$1,399,100 and extends the termination date from September 30, 2019 to September 30, 2021 due to the continued need for these services.				
		Term of Contract:	08/08/2017 - 09/30/2021	Contract # 18924		
39.	950	PUBLIC EMPLOYEES BENEFITS PROGRAM	HEALTHSCOPE BENEFITS, INC.	OTHER: 67% STATE SUBSIDY 33% PREMIUM REVENUE	(\$85,000)	
	Contract Description:	This is the fourth amendment to the original contract to which provides a medical Preferred Provider Organization network for participants who reside outside of Nevada and for those who live in Nevada and choose to seek medical services out of state. This amendment decreases the maximum amount of the contract from \$15,540,000 to \$15,455,000 due decreasing the per participant per month charge for participants who live out of state effective July 1, 2019.				
		Term of Contract:	07/01/2012 - 06/30/2022	Contract # 13330		

CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
40.	B001	LICENSING BOARDS AND COMMISSIONS - ACCOUNTANCY	KAEMPFER CROWELL	FEE: LICENSURE	\$61,200	
	Contract Description:	This is a new contract to provide government affairs assistance to the Board.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 22194		
41.	B011	LICENSING BOARDS AND COMMISSIONS - CONTRACTORS	J. A. SOLARI AND PARTNERS, LLC	FEE: LICENSURE	\$165,132	Professional Service
	Contract Description:	This is a new contract to provide annual audited financial statements, semiannual cash receipt testing and other accounting services as needed.				
		Term of Contract:	09/10/2019 - 09/05/2022	Contract # 22223		

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22253**Agency Name: **ATTORNEY GENERAL'S OFFICE**Agency Code: **030**Appropriation Unit: **1031-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ADAMS NATURAL RESOURCES**Contractor Name: **ADAMS NATURAL RESOURCES**Address: **CONSULTING SERVICES LLC****1238 BUZZYS RANCH RD**City/State/Zip: **CARSON CITY, NV 89701-8638**Contact/Phone: **775-882-4201**Vendor No.: **T27037984**NV Business ID: **NV20151430090**To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	100.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2020**Contract term: **1 year**4. Type of contract: **Contract**Contract description: **Consultation**

5. Purpose of contract:

This is a new contract to provide ongoing outside legal and consulting services in support of the Attorney General's Yucca Mountain legal efforts.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$120,000.00**

Payment for services will be made at the rate of \$200.00 per hour

II. JUSTIFICATION

7. What conditions require that this work be done?

Efforts to block the proposed Yucca Mountain repository

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have this expertise needed for this field9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The OAG has used services by this contractor since 2015 and is satisfied with their services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No

If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Dan Nubel, DAG Ph: 775-684-1225

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cschonl1	08/06/2019 15:17:25 PM
Division Approval	cschonl1	08/06/2019 15:17:28 PM
Department Approval	cschonl1	08/06/2019 15:17:31 PM
Contract Manager Approval	cschonl1	08/06/2019 15:17:33 PM
Budget Analyst Approval	jrodrig9	08/07/2019 20:27:30 PM
BOE Agenda Approval	jrodrig9	08/07/2019 20:27:34 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22179**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority
available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity
Name: **CENTRAL SIERRA CONSTRUCTION**Contractor Name: **CENTRAL SIERRA CONSTRUCTION**Address: **INC
2551 PRECISION DR STE C
MINDEN, NV 89423-8976**

City/State/Zip

Contact/Phone: **775/267-2943**Vendor No.: **T80982411**NV Business ID: **NV199210620188**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Building Rent Income Revenue**Agency Reference #: **ASD 2832574**

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/31/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **General Building**

5. Purpose of contract:

This is a new contract to provide project management, journeyman carpentry, general labor and other general building contracting services for various state-owned buildings throughout Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$85,000.00**

Other basis for payment: Labor rates are: Proj. Mgr. \$100/hr.; Journeyman Carpenter \$70/hr.; General Labor \$40/hr. Please see Attachment CC for complete price list

II. JUSTIFICATION

7. What conditions require that this work be done?

The Buildings and Grounds Section is concerned with the safety, health and working conditions of all State employees. Its maintenance duties include carpentry, plumbing, electrical work, heating, ventilating and air conditioning

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is out of the field of expertise of B&G staff9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing
Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Central Sierra Construction
JMA Construction
Reyman Brothers

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

per SAM0338.0 each contractor will be contacted to submit bids on projects. Central Sierra Construction is a Nevada Public Works Board Contractor and pursuant to NRS 338.13862, Building and Grounds is using a Public Works Board prequalified vendor

d. Last bid date: 09/01/2019 Anticipated re-bid date: 08/31/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Donnie Milner, Facility Supervisor Ph: 684-1200

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	08/09/2019 15:08:54 PM
Division Approval	ssands	08/09/2019 15:08:57 PM
Department Approval	ssands	08/09/2019 15:09:00 PM
Contract Manager Approval	ssands	08/09/2019 15:29:38 PM
Budget Analyst Approval	kshea	08/13/2019 10:59:54 AM
BOE Agenda Approval	jrodrig9	08/19/2019 22:06:44 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22178**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	KFC BUILDING CONCEPTS, INC.
Agency Code:	082	Contractor Name:	KFC BUILDING CONCEPTS, INC.
Appropriation Unit:	1349-12	Address:	5635 RIGGINS CT STE 20
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89502-6561
If "No" please explain:	Not Applicable	Contact/Phone:	775/825-5534
		Vendor No.:	T29012071
		NV Business ID:	NV20071277668

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Building Rent Income Revenue

Agency Reference #: **ASD 2832573**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/31/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **General Contractor**

5. Purpose of contract:

This is a new contract to provide general building contracting services including carpentry, general construction labor, cement finishing and other construction related services for various state-owned buildings throughout Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$85,000.00**

Other basis for payment: Labor rates are: Superintendent \$68/hr; Carpenter \$61.50/hr; Labor \$47/hr; Working Hours M-F, 7:00 am to 3:30 pm. Please see Attachment CC for a complete list of rates.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Buildings and Grounds Section is concerned with the safety, health and working conditions of all State employees. Its maintenance duties include carpentry, plumbing, electrical work, heating, ventilating and air conditioning.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is out of the expertise of B&G staff9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

REYMAN BROTHERS
KFC BUILDING
CENTRAL SIERRA CONSTRUCTION

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

per SAM0338.0 each contractor will be contacted to submit bids on projects. KFC Building Concepts Inc. is a Nevada Public Works Board Contractor and pursuant to NRS 338.13862, Building and Grounds are using a Public Works Board prequalified vendor.

d. Last bid date: 06/01/2019 Anticipated re-bid date: 06/01/2024

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

B&G and services are satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	07/19/2019 08:40:06 AM
Division Approval	ssands	07/19/2019 08:40:09 AM
Department Approval	ssands	07/19/2019 08:40:12 AM
Contract Manager Approval	ssands	08/13/2019 16:33:25 PM
Budget Analyst Approval	kshea	08/13/2019 17:09:29 PM
BOE Agenda Approval	jrodrig9	08/19/2019 15:14:59 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22279**

Agency Name: ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name: CARSON CITY, CITY OF
Agency Code: 082	Contractor Name: CARSON CITY, CITY OF
Appropriation Unit: 1366-00	Address: 201 N. CARSON STREET SUITE 2
Is budget authority available?: Yes	City/State/Zip: CARSON CITY, NV 89701
If "No" please explain: Not Applicable	Contact/Phone: 775-887-2092
	Vendor No.: T80990941
	NV Business ID: GOVERNMENTAL ENTITY

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

This retro request is written into the contract.3. Termination Date: **06/30/2021**Contract term: **2 years**4. Type of contract: **Revenue Contract**Contract description: **Water Revenue**

5. Purpose of contract:

This is a new interlocal revenue agreement that governs the ongoing water sales and associated water rates the State will charge Carson City from July 1, 2019, to June 30, 2021.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,300,000.00**

Other basis for payment: FY20 \$550,000; FY21 \$550,000; plus \$200,000 to allow for potential additional water sales in FY21

II. JUSTIFICATION

7. What conditions require that this work be done?

Carson City is purchasing raw water from the Marlette Lake Water System.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

non-applicable9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No

If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No

If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No

If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No

If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	08/14/2019 11:22:13 AM
Division Approval	ssands	08/14/2019 11:22:16 AM
Department Approval	ssands	08/14/2019 11:22:19 AM
Contract Manager Approval	ssands	08/14/2019 16:29:39 PM
Budget Analyst Approval	kshea	08/19/2019 12:36:03 PM
BOE Agenda Approval	jrodrig9	08/19/2019 14:51:19 PM
BOE Final Approval	Pending	



State of Nevada
DEPARTMENT OF ADMINISTRATION
ADMINISTRATIVE SERVICES DIVISION

209 E. Musser Street, Room 304
Carson City, Nevada 89701-4204
(775) 684-0273
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MEMORANDUM

TO: C/O Kristina Shea, Executive Branch Budget Officer
Susan Brown, Director
Governor's Finance Office-Budget Division
State of Nevada
Carson City, Nevada 89701

FROM: Sue Sands – Program Officer
Department of Administration
Administrative Services Division
Contracts Unit

August 14, 2019

SUBJECT: RETRO MEMO

The Interim Interlocal Contract for the raw water sale agreement between the City of Carson City and State Public Works, Buildings and Grounds Section, on behalf of the Marlette Lake Water System, respectfully requests a retro date of July 1, 2019 for this agreement as it is the wish of both signing parties to the agreement.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22257**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	DG KOCH ASSOCIATES, LLC
Agency Code:	082	Contractor Name:	DG KOCH ASSOCIATES, LLC
Appropriation Unit:	1550 - All Categories	Address:	2920 S JONES BLVD. SUITE 100
Is budget authority available?:	Yes	City/State/Zip	LAS VEGAS, NV 89146-5394
If "No" please explain:	Not Applicable	Contact/Phone:	702-221-5160
		Vendor No.:	T29026336
		NV Business ID:	NV20061487757

To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 112908

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2020

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **2 years and 302 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Ely State Prison - Building 9 heating, ventilation and air conditioning replacement CIP project, which will provide project design and construction administration services for the replacement of the Administration Building's air-top handling units: SPWD Project No. 19-M15; Contract No. 112908.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$95,000.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 CIP Project.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Marshall, Benton, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Imars1	08/06/2019 15:10:29 PM
Division Approval	Imars1	08/06/2019 15:10:32 PM
Department Approval	Imars1	08/06/2019 15:10:35 PM
Contract Manager Approval	Imars1	08/06/2019 15:10:46 PM
Budget Analyst Approval	kshea	08/09/2019 15:16:25 PM
BOE Agenda Approval	jrodrig9	08/19/2019 22:37:40 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21629**Amendment
Number: **1**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Legal Entity
Name: **FARR WEST ENGINEERING DBA
FARR WEST CHILTON ENGINEERING**Agency Code: **082**Contractor Name: **FARR WEST ENGINEERING DBA
FARR WEST CHILTON ENGINEERING**Appropriation Unit: **1590-80**Address: **5510 LONGLEY LANE**Is budget authority
available?: **Yes**City/State/Zip: **RENO, NV 89511**

If "No" please explain: Not Applicable

Contact/Phone: **775-851-4788**Vendor No.: **T81102795A**NV Business ID: **NV20011242988**To what State Fiscal Year(s) will the contract be charged? **2019-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **112437**

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **05/14/2019**Anticipated BOE meeting date **08/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **06/30/2021**

Termination Date:

Contract term: **2 years and 48 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is the first amendment to the original contract which provides professional architectural/engineering services for the Stewart Facility - Domestic Fire and Water Main Replacement CIP project: CIP Project No. 17-M36; SPWD Contract No. 112437. This amendment increases the maximum amount from \$138,748 to \$289,298 due to additional requirements related to archeological sensitive areas.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$138,748.00	\$138,748.00	\$138,748.00	Yes - Action
2. Amount of current amendment (#1):	\$150,550.00	\$150,550.00	\$150,550.00	Yes - Action
3. New maximum contract amount:	\$289,298.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 CIP Project

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering Services are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No
 Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
 Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Imars1	06/28/2019 14:28:01 PM
Division Approval	Imars1	06/28/2019 14:28:05 PM
Department Approval	Imars1	06/28/2019 14:28:09 PM
Contract Manager Approval	Imars1	06/28/2019 14:28:12 PM
Budget Analyst Approval	kshea	08/06/2019 15:19:25 PM
BOE Agenda Approval	jrodrig9	08/07/2019 20:17:42 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22269**

Agency Name:	ADMIN - STATE PUBLIC WORKS DIVISION	Legal Entity Name:	HERSHENOW & KLIPPENSTEIN
Agency Code:	082	Contractor Name:	HERSHENOW & KLIPPENSTEIN
Appropriation Unit:	1593 - All Categories	Address:	ARCHITECTS, INC. 5485 RENO CORPORATE DR STE 100
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89511-2262
If "No" please explain:	Not Applicable	Contact/Phone:	775-870-4877
		Vendor No.:	T80984709
		NV Business ID:	NV19941047730

To what State Fiscal Year(s) will the contract be charged? **2021-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	60.00 %
X Highway Funds	33.00 %	X Other funding	7.00 %
Agency Reference #:	112910		

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **2 years and 302 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Completion of the South Reno Department of Motor Vehicles Service Office CIP project, to include Commercial Drivers License Course site design, the topographic survey of Sandhill Road and Double R Blvd. for signalization design, and intersection signalization design: SPWD Project No. 19-C01; Contract No. 112910.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$203,000.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 CIP Project

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Current, Jeff, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Imars1	08/09/2019 08:50:36 AM
Division Approval	Imars1	08/09/2019 08:50:39 AM
Department Approval	Imars1	08/09/2019 08:50:42 AM
Contract Manager Approval	Imars1	08/09/2019 08:50:46 AM
Budget Analyst Approval	kshea	08/13/2019 10:04:02 AM
BOE Agenda Approval	jrodrig9	08/19/2019 22:11:39 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22138**Agency Name: **DTCA - DIVISION OF TOURISM**Agency Code: **101**Appropriation Unit: **1522-31**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **AMADOR STAGE LINES, INC.**Contractor Name: **AMADOR STAGE LINES, INC.**Address: **1331 C ST**City/State/Zip: **SACRAMENTO, CA 95814-0913**Contact/Phone: **LISA ALLEN 775-324-4444**Vendor No.: **T29011695**NV Business ID: **NV19971361183**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % LODGING TAX

Agency Reference #: **RFP #10TCA-S659, AM**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/31/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Transportation Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing motorcoach transportation services for familiarization tours to showcase the State to tour operators, travel writers and media.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$250,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Division of Tourism conducts familiarization (FAM) tours as a tool to showcase the State to tour operators, travel writers and media. The best way for tour operators to sell tours to Nevada, or for journalists to write about Nevada, is to see and experience the product for themselves. When touring the State they will get first hand knowledge of what Nevada has to offer and can better reflect that in their tours. In fact, most travel writers will not write about a destination they have not personally been to. Tours hosted by the Division of Tourism are an essential function of its media and sales departments. Division staff work with industry partners and vendors to convey the best experiences to their guests.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The motor coaches and buses used for transportation during a FAM tour are not available through the State.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

SW EXCURSION DBA SWEETOURS
AMADOR STAGE LINES INC
WINDSTAR LINES
PLATINUM LV TRANSPORTATION LLC

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #10TCA-S659, and in accordance with NRS 333, the selected vendor was part of a multiple vendor award as determined by an independently appointed evaluation committee.

d. Last bid date: 05/09/2019 Anticipated re-bid date: 05/09/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Nevada Division of Tourism - March 18, 2016 - October 31, 2019. The vendor is deemed satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	amathies	06/28/2019 11:57:09 AM
Division Approval	amathies	06/28/2019 11:57:11 AM
Department Approval	amathies	06/28/2019 11:57:14 AM
Contract Manager Approval	amathies	07/18/2019 10:36:18 AM
Budget Analyst Approval	stilley	08/13/2019 16:55:36 PM
BOE Agenda Approval	lfree1	08/14/2019 15:59:40 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22168**

Agency Name: DTCA - DIVISION OF TOURISM	Legal Entity Name: PLATINUM LV TRANSPORTATION, LLC DBA WHITTLESEA CHECKER TAXI
Agency Code: 101	Contractor Name: PLATINUM LV TRANSPORTATION, LLC DBA WHITTLESEA CHECKER TAXI
Appropriation Unit: 1522-31	Address: 6430 PROCYON STREET
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89118
If "No" please explain: Not Applicable	Contact/Phone: ASHLEY WRIGHT 702-333-3083
	Vendor No.: T29038368
	NV Business ID: NV20121673766
To what State Fiscal Year(s) will the contract be charged?	2020-2024

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % LODGING TAX

Agency Reference #: **RFP #10TCA-S659-AM**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/31/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Transportation Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing motorcoach transportation services for familiarization tours to showcase the State to tour operators, travel writers and media.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$75,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Division of Tourism conducts familiarization (FAM) tours as a tool to showcase the State to tour operators, travel writers and media. The best way for tour operators to sell tours to Nevada, or for journalists to write about Nevada, is to see and experience the product for themselves. When touring the State they will get first hand knowledge of what Nevada has to offer and can better reflect that in their tours. In fact, most travel writers will not write about a destination they have not personally been to. Tours hosted by the Division of Tourism are an essential function of its media and sales departments. Division staff work with industry partners and vendors to convey the best experiences to their guests.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The motor coaches and buses used for transportation during a FAM tour are not available through the State.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

AMADOR STAGE LINES
SW EXCURSION DBA SWEETOURS
PLATINUM LV TRANSPORTATION, LLC
WINDSTAR LINES

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #10TCA-S659, and in accordance with NRS 333, the selected vendor was part of a multiple vendor award as determined by an independently appointed evaluation committee.

d. Last bid date: 05/09/2019 Anticipated re-bid date: 05/09/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	amathies	07/05/2019 15:12:26 PM
Division Approval	amathies	07/05/2019 15:12:29 PM
Department Approval	amathies	07/05/2019 15:12:32 PM
Contract Manager Approval	amathies	07/18/2019 10:35:48 AM
Budget Analyst Approval	stilley	08/13/2019 16:52:02 PM
BOE Agenda Approval	lfree1	08/14/2019 16:01:07 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22162**Agency Name: **DTCA - DIVISION OF TOURISM**Agency Code: **101**Appropriation Unit: **1522-31**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SW EXCURSIONS & EDUCATIONAL TOURS INC., DBA SWEETOURS**Contractor Name: **SW EXCURSIONS & EDUCATIONAL TOURS INC., DBA SWEETOURS**Address: **3162 WEST TECO AVE**City/State/Zip: **LAS VEGAS, NV 89120-6291**Contact/Phone: **EARL JOBSON 702-349-9908**Vendor No.: **T27040214**NV Business ID: **NV20031422530**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % LODGING TAX

Agency Reference #: **RFP #10TCA-S659, AM**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/31/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Transportation Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing motorcoach transportation services for familiarization tours to showcase the State to tour operators, travel writers and media.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$200,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Division of Tourism conducts familiarization (FAM) tours as a tool to showcase the State to tour operators, travel writers and media. The best way for tour operators to sell tours to Nevada, or for journalists to write about Nevada, is to see and experience the product for themselves. When touring the State they will get first hand knowledge of what Nevada has to offer and can better reflect that in their tours. In fact, most travel writers will not write about a destination they have not personally been to. Tours hosted by the Division of Tourism are an essential function of its media and sales departments. Division staff work with industry partners and vendors to convey the best experiences to their guests.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The motor coaches and buses used for transportation during a FAM tour are not available through the State.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

AMADOR STAGE LINES
PLATINUM LV TRANSPORTATION LLC
SW EXCURSIONS DBA SWEETOURS

WINDSTAR LINES

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #10TCA-S659, and in accordance with NRS 333, the selected vendor was part of a multiple vendor award as determined by an independently appointed evaluation committee.

d. Last bid date: 05/09/2019 Anticipated re-bid date: 05/09/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Nevada Division of Tourism - 2015-2019. They have been deemed satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	amathies	07/02/2019 15:44:11 PM
Division Approval	amathies	07/02/2019 15:44:14 PM
Department Approval	amathies	07/02/2019 15:44:16 PM
Contract Manager Approval	amathies	07/18/2019 10:34:50 AM
Budget Analyst Approval	stilley	08/13/2019 16:58:19 PM
BOE Agenda Approval	lfree1	08/14/2019 15:58:25 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22184**Agency Name: **DTCA - DIVISION OF TOURISM**Agency Code: **101**Appropriation Unit: **1522-31**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **WINDSTAR LINES**Contractor Name: **WINDSTAR LINES**Address: **2100 E MAULE AVE**City/State/Zip: **LAS VEGAS, NV 89119**Contact/Phone: **JEFF REINWALD 702-895-9973**Vendor No.: **T27042992 A**NV Business ID: **NV20171598741**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % LODGING TAX

Agency Reference #: **RFP #10TCA-S659-AM**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **11/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/31/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Transportation Svcs**

5. Purpose of contract:

This is a new contract to provide ongoing motorcoach transportation services for familiarization tours to showcase the State to tour operators, travel writers and media.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$75,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Division of Tourism conducts familiarization (FAM) tours as a tool to showcase the State to tour operators, travel writers and media. The best way for tour operators to sell tours to Nevada, or for journalists to write about Nevada, is to see and experience the product for themselves. When touring the State they will get first hand knowledge of what Nevada has to offer and can better reflect that in their tours. In fact, most travel writers will not write about a destination they have not personally been to. Tours hosted by the Division of Tourism are an essential function of its media and sales departments. Division staff work with industry partners and vendors to convey the best experiences to their guests.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The motor coaches and buses used for transportation during a FAM tour are not available through the State.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

PLATINUM LV TRANSPORTATION LLC
AMADOR STAGE LINES
SW EXCURSION DBA SWEETOURS
WINDSTAR LINES

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #10TCA-S659, and in accordance with NRS 333, the selected vendor was part of a multiple vendor award as determined by an independently appointed evaluation committee.

d. Last bid date: 05/09/2019 Anticipated re-bid date: 05/09/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	amathies	07/11/2019 08:46:09 AM
Division Approval	amathies	07/11/2019 08:46:12 AM
Department Approval	amathies	07/11/2019 08:46:15 AM
Contract Manager Approval	amathies	07/18/2019 10:35:24 AM
Budget Analyst Approval	stilley	08/13/2019 16:41:38 PM
BOE Agenda Approval	lfree1	08/14/2019 16:02:30 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **17190**Amendment Number: **4**Agency Name: **ADMIN - ENTERPRISE IT SERVICES**Legal Entity Name: **Nor-Cal Battery Co.**Agency Code: **180**Contractor Name: **Nor-Cal Battery Co.**Appropriation Unit: **1388-08**Address: **3432 D Cherokee Road**Is budget authority available?: **Yes**City/State/Zip: **Stockton, CA 95205**If "No" please explain: **Not Applicable**Contact/Phone: **Randall McRoberts 209-948-1411**Vendor No.: **PUR0005789**NV Business ID: **NV20151633606**To what State Fiscal Year(s) will the contract be charged? **2016-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % User
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **RFP #3204**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/08/2015**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2020**

Contract term:

4 years and 205 days4. Type of contract: **Contract**Contract description: **Battery Replacement**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides for replacement of battery systems, rack and ancillary equipment located at communication sites. This amendment increases the maximum amount from \$1,255,485 to \$1,335,355 due to the addition of one replacement battery system at Peavine Peak, one replacement rectifier at Pilot Peak and the reconciliation of contract authority.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$857,599.00	\$857,599.00	\$857,599.00	Yes - Action
a. Amendment 1:	\$137,430.00	\$137,430.00	\$137,430.00	Yes - Action
b. Amendment 2:	\$42,539.00	\$42,539.00	\$42,539.00	Yes - Info
c. Amendment 3:	\$217,917.00	\$217,917.00	\$260,456.00	Yes - Action
2. Amount of current amendment (#4):	\$79,870.00	\$79,870.00	\$79,870.00	Yes - Action
3. New maximum contract amount:	\$1,335,355.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

Battery plants that power public safety communication equipment are at end-of-life and require replacement.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies and employees do not have the staffing or expertise to perform these services

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

- a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

- c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3204 and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 08/24/2015 Anticipated re-bid date: 02/01/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	08/08/2019 14:24:42 PM
Division Approval	ssands	08/08/2019 14:24:48 PM
Department Approval	ssands	08/08/2019 14:24:54 PM
Contract Manager Approval	ssands	08/12/2019 10:54:33 AM
Budget Analyst Approval	cmurph3	08/12/2019 10:57:33 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **16943**Amendment
Number: **4**Agency Name: **NDE - DEPARTMENT OF
EDUCATION**Legal Entity
Name: **AMERICAN INSTITUTES FOR
RESEARCH**Agency Code: **300**Contractor Name: **AMERICAN INSTITUTES FOR
RESEARCH**Appropriation Unit: **2698-22**Address: **1000 THOMAS JEFFERSON ST NW**Is budget authority
available?: **Yes**City/State/Zip **WASHINGTON, DC 20007-3835**

If "No" please explain: Not Applicable

Contact/Phone: **Nilva da Silva 202-403-5086**Vendor No.: **T81077847**NV Business ID: **NV20121141774**To what State Fiscal Year(s) will the contract be charged? **2016-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	75.10 %	Fees	0.00 %
X	Federal Funds	24.90 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **RFP# 3179-AM**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **09/08/2015**
Examiner's approval?Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **09/30/2019**

Termination Date:

Contract term: **6 years and 297 days**4. Type of contract: **Contract**Contract description: **Schl Climt/SEL Srvy**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides a School Climate/Social and Emotional Learning survey to be administered to all pupils who are enrolled in Nevada Public Schools. This amendment extends the termination date from September 30, 2019 to June 30, 2022 and increases the maximum amount from \$1,124,458.00 to \$1,727,458.00 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$992,000.00	\$992,000.00	\$992,000.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	-\$34,192.00	-\$34,192.00	-\$34,192.00	Yes - Info
c. Amendment 3:	\$166,650.00	\$166,650.00	\$132,458.00	Yes - Action
2. Amount of current amendment (#4):	\$603,000.00	\$603,000.00	\$603,000.00	Yes - Action
3. New maximum contract amount:	\$1,727,458.00			
and/or the termination date of the original contract has changed to:	06/30/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

NDE needs a statewide School Climate/SEL survey to help us determine where we need to put more technical assistance and determine the effectiveness of our projects as well as a needs assessment for recent legislative funding.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Currently NDE does not have a School Climate/SEL survey to use or people in the position to write and disseminate one.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3179, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 04/06/2015 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Dept. of Administration : 10/14/08 - 09/30/09
Department of Education : 2/12/13 - 3/31/13
Department of Education : 3/12/13 - 9/30/13
Legislative Counsel Bureau : 3/12/13 - 9/30/13
Vendor has been deemed to be satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval	amccalla	08/07/2019 12:07:56 PM
Division Approval	amccalla	08/12/2019 11:04:44 AM
Department Approval	amccalla	08/12/2019 11:04:57 AM
Contract Manager Approval	amccalla	08/12/2019 11:31:06 AM
Budget Analyst Approval	cbrekken	08/13/2019 12:13:05 PM
BOE Agenda Approval	tgreenam	08/14/2019 07:57:53 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22188**

Agency Name: ADMIN - NV ST LIBRARY, ARCHIVES AND PUBLIC RECORDS	Legal Entity Name: CALIFA GROUP
Agency Code: 332	Contractor Name: CALIFA GROUP
Appropriation Unit: 2891-12	Address: 2471 FLORES ST
Is budget authority available?: Yes	City/State/Zip: SAN MATEO, CA 94403-2273
If "No" please explain: Not Applicable	Contact/Phone: 650-356-2128
	Vendor No.: T32005920
	NV Business ID: NV20171780554

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **ASD 2832589**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2020**Contract term: **1 year**4. Type of contract: **Contract**Contract description: **NV XR Libraries**

5. Purpose of contract:

This is a new contract to develop unique learning materials for workforce education and training in the healthcare sector available in public libraries.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$245,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The proof of concept will enhance the NV XR Libraries ability to showcase career exploration assets and demonstrate the value of 3D immersive learning tools. Essentially, the program will promote local labor markets and training opportunities, thus enabling job seekers to experience the daily routine and career performance skills needed to be a certified hemodialysis technician before potentially pursuing training for employment.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of experience and equipment9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Solicitation Waiver # 190701.

This vendor is the only vendor that will allow access to the platform via a library card as the identifier.

d. Last bid date: 05/01/2019 Anticipated re-bid date: 05/01/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

NSLAPR and service is satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Tammy Westergard, null Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	07/31/2019 13:50:46 PM
Division Approval	ssands	07/31/2019 13:50:50 PM
Department Approval	ssands	07/31/2019 13:50:53 PM
Contract Manager Approval	ssands	07/31/2019 13:50:57 PM
Budget Analyst Approval	mtum1	08/05/2019 17:35:48 PM
BOE Agenda Approval	cmurph3	08/14/2019 14:35:25 PM
BOE Final Approval	Pending	

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Steve Sisolak
Governor

Deonne Contine
Director

Jeffrey Haag
Administrator

Purchasing Use Only:

Approval#: **190701**

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency: Nevada State Library, Archives, & Public Records (NSLAPR) – Dept. of Administration		
	Contact Name and Title	Phone Number	Email Address
	Tammy Westergard, Assistant Administrator	(775) 684-3306	twestergard@admin.nv.gov
	Tod Colegrove, Administrator	(775) 684-3410	tcolegrove@admin.nv.gov

1b	Vendor Information:	
	Identify Vendor:	Califa Group
	Contact Name:	Paula MacKinnon
	Address:	330 Townsend St., Suite 133 San Francisco, CA 94107
	Telephone Number:	415-796-3901
	Email Address:	pmackinnon@califa.org

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	<input checked="" type="checkbox"/>
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract?	Yes	<input checked="" type="checkbox"/>	No
	Amendment:	#		
	CETS:	#		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	October 1, 2019	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	LSTA
	Grant Funds:	
	Other (Explain):	

1g	Total Estimated Value of this Service Contract, Amendment or Purchase:
	\$245,000.00

Proof of Concept

Provide a description of work/services to be performed or commodity/good to be purchased:

This is a **proof of concept project** to test elements designed to raise awareness of and support growth for the College of Southern Nevada's (CSN) certified dialysis technician program. Medicare requires a national certification for any dialysis care technician employed within 6 - 18 months of hire date. 21.1% of our population is dealing with kidney disease at various stages. The ability to meet growing statewide demand for a highly skilled technical workforce is possible through this uniquely focused *library-as-the-linchpin* proof of concept.

The proof of concept elements:

For jobseekers using a public library card as the key identifier, access to strategically curated and interconnected library resources feature four elements:

- 1) 360 video about the day in the life of a dialysis technician;
- 2) a virtual reality experience on *one* part of the dialysis process (the extracorporeal circuit);
- 3) computational learning modules aimed at fluid dynamics and data analysis and
- 4) access to these through a statewide career information database (the Nevada Career Explorer SaaS).

The resources are seamlessly delivered to library patrons and once complete will combine to provide 21st century career coaching, and later should a patron decide to enroll in the CSN program these resources all become direct support to classroom instruction. The *Medical Education Institute's Core Curriculum for the Dialysis Technician* (CSN's course textbook) directly informs this content development.

Introduction to CSN's Dialysis Patient Care Technician program through these specialized services enhances understanding of professional requirements, competencies and employee behavior leading to better informed decision making about this career pathway and Nevada dialysis technician job opportunities. The Nevada Career Explorer SaaS also deploys placement strategies, supports resume preparation and offers interview coaching for newly skilled workers.

2

FOR NEVADANS:

Focused on Nevada's priority industries and in-demand jobs prospective students are provided a 21st century, immersive 3D field trip with cutting edge technology. This makes it possible to:

- efficiently and conveniently see – in 3D - what a specific healthcare STEM job is about,
- assess one's individual aptitude in science, technology, engineering and mathematics (STEM) related to dialysis technician professional requirements and competencies;
- see healthcare STEM job elements and tasks – that otherwise would be very difficult to understand because of the abstract nature of STEM;
- make a better-informed career decision after robust 3D career exploration wherein both students and instructors have greater candidate confidence;
- once enrolled at CSN in the dialysis technician program students engage with the 3D Immersive content and learning modules as an enrichment to support course instruction.

Research indicates the suite of virtual reality and 3D tools helps cognitively anchor abstract science concepts and accelerates classroom success. The easily understood, well-curated and well-displayed library resource is designed to show in this proof of concept how library resources can promote local labor markets and training opportunities for Nevada's priority industries - in this case, strategic focus is on exploring the diagnostic services career pathway leading to a hemodialysis technician certification from the College of Southern Nevada which is the only higher education institution in Nevada that offers this program.

This is not an internal tool of the State Library, Archives and Public Records. It is provided in our role as a support to the College of Southern Nevada.

3	<p>What are the unique features/qualifications required for this service or good that are not available from any other vendor:</p> <p>The unique features required not available from any other vendor are:</p> <ul style="list-style-type: none"> • <i>using a library card</i> as the identifier to access the 3D tools and information database. This way librarians and their allied project partners can work, in sync, to help job seekers make sense of and navigate healthcare fields in order to make informed decisions regarding STEM careers in healthcare. • a comprehensive 3D Nevada-first architecture that accelerates the workforce pipeline capable of meeting the needs of employers in advanced technology healthcare industries like dialysis services; • customized 3D fast track pathway to industry credentials for patrons to pursue 21st century careers in advanced healthcare technology industries; • focused library tools and services to leverage classroom outcomes, success and place people with marketable skills into good paying, in-demand Nevada jobs; • 3D modules to show how <i>all partners uniquely and as a community of practice</i> help a patron/client along the career advisement journey, through education/training pathways, and from application to employment. <p>BACKGROUND OF A UNIQUE PILOT PROGRAM:</p> <p>With the help of subject matter experts from <i>XR Libraries</i> Nevada public libraries have launched a pilot program installing virtual and augmented reality experiences or extended reality, commonly called XR. <i>Nevada's XR Libraries</i> have been focused on familiarizing librarians with the technical aspects of using XR and creating educational programs. General community access and focused education and workforce training partnerships have also rolled out. Each pilot library has been provided with 1 HTC Vive headset; an XR system-ready computer capable of running virtual reality educational and STEAM content software, and robust training and tech support. In collaboration with area schools, after school providers, workforce training partners and more, library staff facilitates programming through leveraging onsite technology space and programs. The Nevada XR Libraries pilot program is focused on workforce development with emphasis on career exploration and classroom "homework help."</p> <p>In order to make accessible this original content from the Nevada XR Libraries pilots, the Nevada State Library, Archives and Public Records (NSLAPR) requires assistance from Lifeliqe in creating a virtual reality experience, NCLab in creating computational learning modules, from XR Libraries in creating a day in the life of a dialysis technician 360 video and MEI as a subject matter expert on performing dialysis for this representative example of interactive 3D assets in workforce development activity.</p> <p>With the College of Southern Nevada, the Nevada State Library will play a central role in facilitating specific educational enrichment and support strategies driven by the skills necessary for success in the CSN Dialysis Patient Care Technician course.</p>
4	<p>Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:</p> <p>Features not available from any other vendor are described below; therefore, the unique required qualities of the platform necessitate sole sourcing:</p> <ul style="list-style-type: none"> • Access to the platform and unique NSLA channel provides the content that is one of a kind to the College of Southern Nevada program and XR Libraries infrastructure and content; • An in place, comprehensive Nevada-first 3D learning platform architecture; • Customized and curated content for the NV XR Libraries which is unique and reflects a community of

	<p>practice that will create valuable learning to replicate the deployment of this workforce development system through library programs;</p> <ul style="list-style-type: none"> The proprietary infrastructure that drives the Lifelike AR/VR library combined with the partner resources will be used to assist the Nevada State Library in its role to support NV XR Libraries in delivery of 3D content and instruction specifically focused on Nevada's in demand occupations and career pathways.
--	--

5	Were alternative services or commodities evaluated? Check One.		Yes:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>
	a. <i>If yes, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.</i>					
	Although a number of vendors might have the capabilities and features of 3D career assets, including online analysis, to date none provide access to those services by means of the public library card. Further, none have integrated Nevada-specific priority industry occupation information or credentials. The combination of the unique assets is essential to the success of the unique, embedded partnership between the College of Southern Nevada and Nevada public librarians.					
	b. <i>If not, why were alternatives not evaluated?</i>					

6	Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL</u> previous waivers <u>MUST</u> accompany this request.				Yes:	<input type="checkbox"/>	No:	<input checked="" type="checkbox"/>
	a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:</i>							
	<i>Term Start and End Dates</i>		<i>Value</i>	<i>Short Description</i>	<i>Type of Procurement (RFP#, RFQ#, Waiver #)</i>			
			\$					
			\$					
			\$					
			\$					

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	Much of the progress we have made to date will be lost. The second phase of the Nevada XR Libraries pilot to facilitate immersive 3D career exploration and classroom support, hinges on this unique combination of assets. If this waiver is denied it is unclear how we will be able to move forward in the pilot.

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
---	--

As previously noted, there are no other vendors that are part of this first of its kind emerging technology pilot program. We have substantiated this by talking to vendors, website analysis, email inquiries. The quality of this pilot program is driven from the combination of these subject matter experts. The easy to use interface of the Nevada Career Explorer and the subject matter expertise of XR Libraries, Lifelique, NCLab and MEI will combine to deliver the unique set of assets. The proof of concept project is priced fairly and is reasonable. Year after year, NSLAPR licenses many information resources on various platforms and the price for this resource is comparable to resources analogous to this license. We are wholly familiar with industry pricing and trends and this is a reasonable price.

Will this purchase obligate the State to this vendor for future purchases? *Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.*

Yes:

X

No:

a. *If yes, please provide details regarding future obligations or needs.*

The project is anticipated to be successful and advance the imperative to continue with the proof of concept building out a full concept, which will likely lead into developing 3D assets for other Nevada priority career pathways. Through Califa, Nevada's XR Libraries can be a major part of the solution in providing access to and experience with the 3D/immersive technology needed to accelerate all Nevadan's ability to explore and benefit from this powerful learning tool. Setting libraries at the center of this solution reinforces the Library Services and Technology Act (LSTA) priority for Nevada's public libraries to: "Expand services for learning and access to information and educational resources in a variety of formats, in all types of libraries, for individuals of all ages in order to support such individuals' needs for education, lifelong learning, workforce development, and digital literacy skills." With library leadership, Califa will provide the launch point for all partners to build and sustain access to emerging technology to bridge the digital divide by nurturing individualized experiences with 3D learning and content creation.

RESOURCES AND COMPENTENCIES

- Library spaces throughout Nevada, that are open after hours and on the weekends all with Internet access and technology, most with high speed internet and current technology are robust resources;
- Library patrons are (generally speaking) self-motivated information seekers;
- Library patrons (oftentimes) represent underserved populations;
- Library professionals seek to add value to the overall shared responsibility of getting Nevadans trained, leveled up (or both) to take their rightful place in Nevadas middle class jobs;
- The ability to provide follow-on support to all patrons who start exploring career pathways and job opportunities that come with new technology is not new to librarians. Librarians have always been go-to people in giving citizens technology support and helping people find trusted information.

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.

Tammy Westergard
Agency Representative Initiating Request

Tammy Westergard
Print Name of Agency Representative Initiating Request

June 28, 2019
Date

[Signature]
Signature of Agency Head Authorizing Request

Tod Colegrove
Print Name of Agency Head Authorizing Request

June 28, 2019
Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns please contact the Purchasing Division at 775-684-0170.

Signed:

Kevin D. Doty
Administrator, Purchasing Division or Designee

7/8/19
Date

Scope of Work

Date: 06/28/19

Califa Group
330 Townsend Street
Suite 133
San Francisco, CA 94107

Customer: Tammy Westergard, assistant administrator

Customer entity: Nevada State Library, Archives and Public Records (NSLAPR)

Project title: *Accelerating Nevada's Healthcare Workforce Development*

Proposed project description

Califa is a California-based nonprofit library consortium of over 220 institutions. Partnering with NSLAPR, Califa proposes to develop a unique immersive experience aimed at increasing employment in one of Nevada's key workforce sectors (healthcare) through a hemodialysis technician certification project - using 3D immersive strategies in a multi-faceted workforce development project.

Prospective students are provided a virtual "fieldtrip" with technology that makes it possible to efficiently explore a STEM job, in this case the Dialysis Patient Care Technician (DPCT) program at the College of Southern Nevada (CSN). This tool will assess one's individual aptitude for a DPCT career. Once enrolled, students will engage with 3D immersive content and learning modules provided by partners NCLab, Lifelique XR Libraries and the Medical Education Institute (MEI) as an adjunct to formal course instruction provided by CSN. The aforementioned VR equipment for the DPCT enrichment experiences will be an in-house public library resource. Access to the Nevada Career Explorer, a job matching software already provided to Nevada libraries, will also be actively promoted to increase DPCT interest and placements. Essentially, the proposed program will promote local labor markets and training opportunities, thus enabling jobseekers to experience the daily routine and career performance skills needed to be a certified hemodialysis technician before potentially pursuing training for employment. This proposed project will be integrated into an existing NSLAPR program, Nevada XR Libraries (see: Project background).

This estimate and all quoted rates are proprietary and confidential.

Califa is uniquely positioned to work with NSLAPR to deploy this project for several reasons; namely:

- Providing access to XR Libraries to create 360-degree video and 3D assets using the Lifeliqe platform and assets;
- Lifeliqe as a 3D content provider has the worlds largest STEM VR / AR / 3D Interactive collection that combines and curates the content gathered, and is used in the Nevada XR Libraries cohort
- Utilize a consistent, schematic approach to project deployment through a uniform and integrated experience using strategic partnerships with the College of Southern Nevada (CSN), XR Libraries, Headed2, MEI, Lifeliqe, and NCLab.
- Makes locally created content directly related to hemodialysis available to all Nevada libraries with VR capabilities.
- Allow content creators to retain ownership to the content.

The Nevada State Library's *Nevada Career Explorer* powered by Headed2 will be used to promote the essential nature of the in-demand career of hemodialysis technician by matching both prospective and enrolled students and graduates with local employers via the Nevada Career Explorer. Participants will use a free library card to access the Career Explorer and create an employment profile to receive curated guidance.

Califa forms the cohesive, dynamic project *Accelerating Nevada's Healthcare Workforce Development*. The roles and responsibilities of our partners are outlined below (for more specific breakdown, see: Scope of work):

- **Lifeliqe** will create the VR experiences to be used in the initial phase of career exploration for the DPCT program. This will gauge student aptitude and interest in the hemodialysis career path. Additionally, the VR experiences and materials will act as an enrichment to formal classroom and practicum instruction.
- **MEI** will license use of MEI's content from Modules 3 and 4 of the *Core Curriculum for the Dialysis Technician* in the virtual and augmented reality (VR / AR) STEM content and practice resource and facilitate communication and planning. MEI's work is for review, consultation, and use of their source material.
- **NCLab** will create applications that teach scientific principles and computational modules applied to dialysis, together with self-paced tutorials and interactive media.
- **XR Libraries** will provide 360 video designed to engage and promote the DPCT program (title "A day in the life of a hemodialysis technician"). These videos will be deployed on the Lifeliqe platform.

The integration of the expertise provided by these four partners is entirely unique as it brings subject matter experts from disparate backgrounds to develop a holistic experience designed to strengthen Nevada's talent pool. Importantly, *Accelerating*

This estimate and all quoted rates are proprietary and confidential.

Nevada's Healthcare Workforce Development will position NSLAPR to further its statewide reach by spearheading libraries as career facilitators in the workforce ecosystem. By focusing on one of Nevada's priority industries (healthcare) and in-demand occupations (hemodialysis technician), Nevada XR Libraries and Califa will align with Governor Sisolak's state priority on education and job creation, as well as OSIT's vision of "a pathway to success for every Nevadan."

Program background

In 2018, Nevada libraries launched a pilot program installing virtual and augmented reality experiences or extended reality in their space. Collectively called Nevada XR Libraries, this collective was led by NSLAPR and focused on familiarizing librarians with the technical aspects of using XR to create educational programs. General community access and focused education and workforce training partnerships were emphasized. Each pilot library received one HTC Vive headset; a VR system-ready computer capable of running virtual reality educational software; and robust training/tech support from industry experts at XR Libraries and Lifelike. Now in its second phase, the Nevada XR Libraries pilot program is focused on workforce development with emphasis on career exploration and classroom homework help. *Accelerating Nevada's Healthcare Workforce Development* will be part of the second phase of this initiative. Nevada has 1.3 million library cardholders, with 2/3 of those in the Las Vegas metro area. This positions libraries as the prime leader in career exploration as internet access is provided free to users with immediate access to the Nevada Career Explorer using a library card.

CSN's Division of Workforce and Economic Development established the DPCT training program in 2010. Dialysis techs operate kidney dialysis machines and are responsible for direct patient care. The technicians prepare patients for dialysis, monitor them and the machine during dialysis and perform required procedures when dialysis is completed. This field necessitates formal training specifically because Medicare began requiring that patient care dialysis technicians be certified by January 2010 as a condition of coverage. According to the National Kidney Foundation, the technician role is critical as kidney disease and failure is growing issue in the United States. More than 485,000 Americans are being treated for kidney failure in 2018. Of this number, more than 341,000 are dialysis patients, with 90,000 individual patients added annually.

This estimate and all quoted rates are proprietary and confidential.

Scope of Work

Califa will facilitate the integration of the project's major development aspects by working directly with the Nevada State Library and the four partners to advance and deploy *Accelerating Nevada's Healthcare Workforce Development*. Partner activity included in the Califa scope of work:

The Nevada CareerExplorer career information system (CIS) for outreach and recruitment to possible trainees. The CIS allows individuals to explore industry sectors, career clusters and career pathways – the career pathways that users build in the CIS link education, employment and career knowledge and advancement with direct access to training programs, colleges and university, industry certifications and employers. From assessment through exploration, users develop well-thought out career pathways, set goals and make decisions parallel to the skills employers' value in the workplace.

Custom "Promoted Pathways" curriculum will be added to the CIS to promote the targeted STEM industry and occupation allowing career seekers to:

(1) explore the Medical and Clinical Laboratory Technician occupation, contained in the Diagnostic Services Career Pathway within the Health Science Career Cluster and, and related LMI, skill requirements, and training/certifications; the Promoted Pathways within the CIS will include 360-degree video about "A Day in the Life of Working in Diagnostic Services," virtual reality experiences and computational assessments to accurately convey the STEM skills requirements needed;

(2) connect with workforce training provider(s), ex. CSN, to learn more about program offering and financial aid, ex. WIOA training voucher eligibility;

(3) connect with employers employing the occupation regarding work-based learning opportunities (identified/offered by the employer where available), job openings, application process (resume, cover letter, references), etc.; and

(4) allow employer engagement with CSN program completers via custom CIS Employer Profiles.

- Deadline: December 31, 2019. There are no additional costs to customize the CIS.

Lifelike will create VR experiences to be deployed as part of the program. These will be uploaded on the on the Lifelike platform. Services will be provided in three milestones: preparation (startup and storyboarding), production (VR simulation), and refinement (improvements). Included in the Lifelike scope of work:

- Milestone 1
 - Storyboarding of the VR experience explaining the process of hemodialysis.
 - Cooperation with subject matter field experts to assure a correct demonstration of the hemodialysis process.
 - Implementing startup processes and preparations for a new content production.

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- Selection of four additional interactive 3D models that will accompany virtual reality experience to be made available through Lifelike via a dedicated channel.
- Collection of feedback from all involved partners on the virtual reality experience, adjustments to the additional 3D models and other accompanying materials.
- Milestone 2: Creation of a comprehensive virtual reality experience of extracorporeal circuits and its interaction with the dialysis machine, with all access for beta testing of the milestone 2 outcome. The virtual reality experience will be prepared for HTC Vive virtual reality headset and be created as following:
 - Based on the storyboard approved by guarantors and stakeholders;
 - Involving interactive features
 - Involving animated events
 - Involving a compelling storyline
 - Segmented into chapters which can be replayed
 - Involving a VR quiz.
- Milestone 3
 - Selection of 2 interactive 3D models from current Lifelike online application that will be improved in a way that the learning outcomes from virtual reality are strengthened through these additional content assets.
 - Creation of 2 new interactive 3D models that will strengthen the learning outcomes from virtual reality through these additional content assets.
 - Build the additional content based on storyboards by appointed guarantors.
 - Creation of a lesson plan that will serve as an adjunct to the virtual reality experience. The lesson plan will offer additional information, activities and assessment.
 - Collection of feedback on Milestone 2 outcomes.
- Start up and storyboarding
- Guarantor engagement
- Build of 3D digital objects
- Build of virtual reality experience
- Testing and refinement of 3D digital objects
- Timeline and implementation activities
- Frequent collaboration, communication and planning with partners.
- Deadline: December 31, 2019
- **Estimated cost: \$178,000.00**

MEI:

The Medical Education Institute, Inc. (MEI) is a subject matter expert on kidney disease and dialysis. MEI developed the *Core Curriculum for the Dialysis Technician*, a dialysis

This estimate and all quoted rates are proprietary and confidential.

technician training manual. The *Core Curriculum's* Modules 3 and 4 content is being used in the development of the virtual and augmented reality STEM content and practice resources. MEI's work is for review, consultation, and use of our source material. This is a fixed cost. No additional funds will be requested for this proof of concept, under this scope of work.

MEI will provide the following:

- Provide feedback on important dialysis topics to cover for project
- Review pieces developed for proof of concept
- Ongoing support for the project by telephone and email
- Licensing use of MEI's content from Modules 3 and 4 of the *Core Curriculum for the Dialysis Technician* in the virtual and augmented reality (VR / AR) STEM content and practice resources Communication and planning

Deadlines: December 31, 2019: Guidance complete for the beta proof of concept project
Estimated cost: \$7,000.00

NCLab will create custom-made applications that teach scientific principles applied to dialysis, together with self-paced tutorials and interactive media to be called "NCLab Dialysis Practice Resources". This will be presented in an online learning platform accessible to all enrolled DPCT students. Included in the NCLab scope of work:

- Minor revisions. Pre-planning and storyboarding must be thorough enough to be on message resulting in minor adjustments, if any.
- Extensive revisions or major changes to the description of assets after placed in concept may incur additional production charges.
- NSLAPR can use all final projects in any manner consistent with licensing terms for the licensing agreement between NCLab and NSLAPR. CSN may use the projects at no charge until July 30, 2021 for the DPCT program.
- Frequent collaboration, communication and planning with partners.
- A timeline and implementation activities.
- Deadline: December 31, 2019
- Estimated cost: \$30,000.00

XR Libraries will provide 360 video production of "A day in the life of a dialysis technician." Included is the XR Libraries scope of work:

- Construction of the Day in the Life of a Dialysis Technician 360 video (approximately 20 minutes in length).
- Uploading of the 3D video to the NSLAPR Lifeliqe channel as well as the Nevada Career Explorer.

This estimate and all quoted rates are proprietary and confidential.

- NSLAPR requires the 360 video to be viewable on any PC / Chromebook running the Google Chrome browser, using an unlock code made available to each of the 16 NV XR Libraries.
- A statement of purpose for the NSLAPR 360 video to include:
 - Interviews with dialysis technicians;
 - Development of scripted walk through of daily activities;
 - Examination of procedures and patient interactions;
- Ongoing support for the 360 video in person or by telephone
- Frequent collaboration, communication and planning with partners.
- Deadline: Dec. 31, 2019
- Estimated cost: \$25,000.00

Proposed project total cost: \$245,000

Deliverables and pricing

Quantity	Provider	Service description	Term	Total
	Califa	Project management		\$ 5,000
	Headed2	Career Information System		included
	Lifelige	Virtual reality experience		\$ 178,000
	MEI	Review, consultation, and use of source material		\$ 7,000
	NCLab	Custom-made applications that teach scientific principles applied to dialysis, together with self-paced tutorials and interactive media		\$ 30,000
	XR Libraries	Construction of the Day in the Life of a Dialysis Technician 360 video (approximately 20 minutes in length).		\$ 25,000
Total				\$ 245,000

Contact information

Paula MacKinnon, executive director

pmackinnon@califa.org

(415) 796-3901

www.califa.org

This estimate and all quoted rates are proprietary and confidential.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22132**

Agency Name: DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name: MY OFFICE STAFF
Agency Code: 406	Contractor Name: MY OFFICE STAFF
Appropriation Unit: 3170-28	Address: PO BOX 7689
Is budget authority available?: Yes	City/State/Zip: RENO, NV 89510-7689
If "No" please explain: Not Applicable	Contact/Phone: Debbra King 775-813-6687
	Vendor No.: T29039317
	NV Business ID: NV20161320565
To what State Fiscal Year(s) will the contract be charged? 2020	

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %
Agency Reference #:	C 17226		

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

The Bureau was developing budgets for State Fiscal Year 2020 and needed to ensure funding was available. Additionally, My Office Staff was on a previous contract that was set to expire in July 2019, but My Office Staff utilized all funds available on the contract at the end of April 2019. Negotiations pertaining to the contract began in late May 2019 to discuss scope of work and updated quotes.

3. Termination Date: **06/30/2020**Contract term: **1 year**4. Type of contract: **Contract**Contract description: **Subaward Monitoring**

5. Purpose of contract:

This is a new contract to provide onsite and desk monitoring activities, single audit reviews, consulting services, technical assistance and evaluations of sub-recipients in the administration of federal grant programs, laws and other applicable regulations.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$76,350.00**Other basis for payment: **See consideration****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Bureau of Behavioral Health Wellness and Prevention has had multiple repeat single audit findings related to sub-recipient monitoring, single audit reviews of sub-recipients, the issuance of management decision letters and general federal compliance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

At the recommendation of Eide Bailey, additional staff to conduct onsite and desk monitors was discussed in December of 2018 during the Division of Public and Behavioral Health's recent single audit exit interview. Additionally, the Bureau has experienced a history of high turnover. With an influx of new staff into the Bureau, there is not enough staff that has the experience level to correct the issues without consulting guidance.

9. Were quotes or proposals solicited? No
Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor with DPBH since 2017 - satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmorse	07/15/2019 14:42:07 PM
Division Approval	rmorse	07/15/2019 14:42:13 PM
Department Approval	mwinebar	07/31/2019 11:04:34 AM
Contract Manager Approval	rmorse	08/06/2019 07:28:53 AM
Budget Analyst Approval	laaron	08/13/2019 12:57:55 PM
BOE Agenda Approval	bwooldri	08/14/2019 13:11:18 PM
BOE Final Approval	Pending	

STATE OF NEVADA

STEVE SISOLAK
Governor

RICHARD WHITLEY, MS
Director



LISA SHERYCH
Interim Administrator

IHSAN AZZAM, PhD., MD
Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH
4150 Technology Way, Suite 300
Carson City, NV 89706
Telephone: (775) 684-4220 · Fax: (775) 684-4211

DATE: June 6, 2019

MEMORANDUM

TO: Aaron Frantz
Budget Officer
Governor's Finance Office

THROUGH: Christina Hadwick
Administrative Services Officer IV
Division of Public and Behavioral Health

FROM: Brook Adie
Bureau Chief
Bureau of Behavioral Health Wellness and Prevention

SUBJECT: REQUEST FOR RETROACTIVE START DATE OF CONTRACT – C 17226 (CETS#:22132)

This memorandum requests that the following contract be approved for a retroactive start.

The following information is required:

- Name of Vendor: **My Office Staff**
- Services to be provided: **Certified Public Accountant.**
- Funding source and expenditure category: **BA# 3170 - CAT 28; Substance Abuse Prevention and Treatment Block Grant**
- Requested start date of work: **July 1, 2019**
- Expected execution date of agreement (IFC approvals): **August 2019**
- Detailed explanation as to why a retroactive agreement is necessary, including:
 - Reason(s) why the agreement was not submitted timely:
 - **The Bureau was developing budgets for State Fiscal Year 2020 and needed to ensure funding was available. Additionally, My Office Staff was on a previous contract that was set to expire in July 2019, but My Office Staff utilized all funds available on the contract at the end of May 2019. Negotiations pertaining to the contract began in the late May 2019 to discuss scope of work and updated quotes.**
 - Describe the impact to the program/services if this work is not started prior to the execution of the agreement: **The Bureau will not complete all required monitors as required by Title 2 of the Code of Federal Regulations Part 200. This contract is to ensure that the Bureau conducts a monitor on all prevention coalitions in State Fiscal Year 2020 to ensure compliance with federal regulations, state law, and any other applicable policies and procedures.**

Revised 4/19

Public Health: Working for a Safer and Healthier Nevada

- Explain how the program/bureau will prevent future retroactive requests: **The Bureau will begin negotiations in March when a contract is expiring in June.**

If you have any questions, please contact Laurie Gleason at (775) 276-4612 or lagleason@health.nv.gov.

cc: Contract Unit
Division of Public and Behavioral Health

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22171**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	Board of Regents, NSHE - Dept. of
Agency Code:	406	Contractor Name:	Board of Regents, NSHE - Dept. of
Appropriation Unit:	3648-08	Address:	Psychiatry & Behavioral Scienc
Is budget authority available?:	Yes	City/State/Zip	1664 N. Virginia St., M/S 0332 Reno, NV 89557-0332
If "No" please explain:	Not Applicable	Contact/Phone:	Gail Smith 775-784-6001
		Vendor No.:	D35000816
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **C 17222**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

UNR provided the rates for the services to us in mid-June. We were unable to submit our contract until these rates had been set. The contractor has a current caseload with Rural Clinics. Delaying the start of this contract will force temporary reassignments of clients to alternative prescribers who already have full caseloads. The continuity of care will be impacted and possibly, the quality of care due to over-extended prescribers.

3. Termination Date: **06/30/2021**Contract term: **2 years**4. Type of contract: **Interlocal Agreement**Contract description: **Telemedicine Service**

5. Purpose of contract:

This is a new interlocal agreement to provide telemedicine services to adult clients in rural communities increasing diagnosis and treatment for patients.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$71,760.00**

Payment for services will be made at the rate of \$35,880.00 per fiscal year

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract allows Division Public and Behavior Health (DPBH) and University of Nevada School of Medicine (UNSON) to treat patients more efficiently utilizing teleconferencing equipment to quickly diagnose and treat patients.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are providing these services.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

State agencies routinely provide vendor services for each other.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dohl0	07/24/2019 16:52:26 PM
Division Approval	rmorse	07/30/2019 14:55:52 PM
Department Approval	mwinebar	07/31/2019 11:38:45 AM
Contract Manager Approval	rmorse	08/06/2019 07:41:15 AM
Budget Analyst Approval	laaron	08/08/2019 14:13:40 PM
BOE Agenda Approval	bwooldri	08/09/2019 14:05:54 PM
BOE Final Approval	Pending	

STATE OF NEVADA

STEVE SISOLAK
Governor

RICHARD WHITLEY, MS
Director



LISA SHERYCH
Interim Administrator

IHSAN AZZAM, PhD., MD
Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

4150 Technology Way, Suite 300

Carson City, NV 89706

Telephone: (775) 684-4220 · Fax: (775) 684-4211

DATE: June 21, 2019

MEMORANDUM

TO: Aaron Frantz
Budget Officer
Governor's Finance Office

THROUGH: Christina Hadwick
Administrative Services Officer IV *CH*
Division of Public and Behavioral Health

FROM: Tina Gerber-Winn
Agency Manager
Rural Clinics

SUBJECT: REQUEST FOR RETROACTIVE START DATE OF CONTRACT – UNR-Department of Psychiatry and Behavioral Sciences (CETS #22171)

This memorandum requests that the following contract be approved for a retroactive start.

The following information is required:

- Name of Vendor: University of Nevada, Reno School of Medicine Integrated Clinical Services, Inc. MSAN, Department of Psychiatry and Behavioral Sciences.
- Services to be provided: UNSOM will provide Telemedicine/ Psychiatric Services & coordination of clinical care provided by an Advanced Practice Registered Nurse (APRN) at \$86.25 per hour for up to 8 hours per week for adult patients. Services include psychiatric and physical assessments, triage, referrals, consultations, and monitoring along with completion of all required psychiatric documentation in the Rural Clinic's Electronic Health Record.
- Funding source and expenditure category: BA 3648- CAT 08; 100% GFUND
- Requested start date of work: July 1, 2019
- Expected execution date of agreement (BOE/IFC approvals): September 10, 2019
- Detailed explanation as to why a retroactive agreement is necessary, including:
 - Reason(s) why the agreement was not submitted timely:
 - The University of Nevada Reno provided the rates for the services to us in mid-June. We were unable to submit our contract until these rates had been set.
 - Describe the impact to the program/services if this work is not started prior to the execution of the agreement: The contractor has a current caseload with Rural Clinics. Delaying the start of this contract will force temporary reassignments of clients to alternative prescribers who already have full caseloads. The continuity of care will be impacted and possibly, the quality of care due to over-extended prescribers. Instability in medication prescriptions can lead to increased mental health distress, costly emergency services, and inpatient care.
 - Explain how the program/bureau will prevent future retroactive requests: Rural Clinics maintains an active tracking sheet for all contractual agreements. We will continue this practice and review the status of all new contracts and renewals on a weekly basis to ensure the steps to completion are assertively pursued. We will request updated rates from vendors at least 3 months in advance.

If you have any questions, please contact Brian Burriss at (775) 684-5029 or brianburriss@health.nv.gov.

cc: Contract Unit
Division of Public and Behavioral Health

Revised 4/19

Public Health: Working for a Safer and Healthier Nevada

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **19741**Amendment
Number: **1**Agency Name: **DHHS - WELFARE AND
SUPPORTIVE SERVICES**Legal Entity
Name: **SLI GLOBAL SOLUTIONS, LLC**Agency Code: **407**Contractor Name: **SLI GLOBAL SOLUTIONS, LLC**Appropriation Unit: **3238-35**Address: **8555 16th Street, Suite 800**Is budget authority
available?: **Yes**City/State/Zip **Silver Springs, MD 20910**If "No" please explain: **Not Applicable**Contact/Phone: **Stephen Esposito 480-620-5907**

Vendor No.:

NV Business ID: **NV20121606936**To what State Fiscal Year(s) will the contract be charged? **2018-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	34.00 %	Fees	0.00 %
X	Federal Funds	66.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **05/01/2018**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved
Termination Date: **04/30/2024**Contract term: **6 years and 1 day**4. Type of contract: **Contract**Contract description: **IV&V Services - CSEP**

5. Purpose of contract:

This is the first amendment to the original contract which provides Independent Verification and Validation (IV &V) services for the Child Support Enforcement Automated System replacement. This amendment increases the maximum amount from \$2,211,680 to \$7,499,077.80 and additionally revises Attachment AA - Deliverable Payment Schedule, revises the order of precedence by incorporating a new scope of work as Attachment CC - Addendum to Request for Proposal 3475 and moving the State Solicitation or RFP 3267 and Amendments #01 thru 05 to Attachment CC-1, due to the requirement from the Federal Office of Child Support Enforcement for continuous IV&V services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$2,211,680.00	\$2,211,680.00	\$2,211,680.00	Yes - Action
2. Amount of current amendment (#1):	\$5,287,397.80	\$5,287,397.80	\$5,287,397.80	Yes - Action
3. New maximum contract amount:	\$7,499,077.80			

II. JUSTIFICATION

7. What conditions require that this work be done?

Agency requires an IV&V vendor for the Nevada Child Support Enforcement Automated System replacement project due to requirements from the Federal Office of Child Support Enforcement.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that must be provided by an independent vendor.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

SLI Global Solutions, LLC
BerryDunn
Computer Consultants International
Gartner Group

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3475, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Currently under contract with DWSS and providing satisfactory services.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cbuscay	07/24/2019 13:57:31 PM
Division Approval	bberry	08/01/2019 12:56:35 PM
Department Approval	mwinebar	08/02/2019 08:55:56 AM
Contract Manager Approval	sjon23	08/02/2019 14:00:20 PM

EITS Approval
Budget Analyst Approval
BOE Agenda Approval

daxtel1
bwooldri
bwooldri

08/06/2019 10:00:03 AM
08/13/2019 12:02:44 PM
08/13/2019 12:02:48 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21978**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	CHURCHILL COUNTY
Agency Code:	409	Contractor Name:	CHURCHILL COUNTY
Appropriation Unit:	3229-00	Address:	CHURCHILL COUNTY JUVENILE PROB
Is budget authority available?:	Yes		155 N. TAYLOR ST., SUITE 182
If "No" please explain:	Not Applicable	City/State/Zip:	FALLON, NV 89406
		Contact/Phone:	775-423-4092
		Vendor No.:	T81032440C
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

This is a retroactive agreement due to the need for the assessment amount to be determined through the Legislative process and the interlocal contract to be approved through the Churchill County Board of Commissioners.

3. Termination Date: **06/30/2021**Contract term: **2 years**4. Type of contract: **Interlocal Agreement**Contract description: **CPS Assessments**

5. Purpose of contract:

This is a new interlocal revenue agreement to provide ongoing child protective services pursuant to NRS 432B.326.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$734,485.00**

Other basis for payment: \$363,117 for SFY20 and \$371,368 for SFY21

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a revenue contract pursuant to NRS 432B.326.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a revenue contract pursuant to NRS 432B.326.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

This is a revenue contract pursuant to NRS 432B.326.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

Yes If "Yes", please explain

Churchill County.

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This is a revenue contract. The relationship between Churchill County and the Division has been satisfactory for several biennium.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	knielsen	08/05/2019 10:50:52 AM
Division Approval	knielsen	08/05/2019 10:50:55 AM
Department Approval	mwinebar	08/05/2019 14:29:17 PM
Contract Manager Approval	sknigge	08/06/2019 16:36:02 PM
Budget Analyst Approval	laaron	08/07/2019 16:13:50 PM
BOE Agenda Approval	bwooldri	08/09/2019 14:35:44 PM
BOE Final Approval	Pending	

STEVE SISOLAK
Governor



RICHARD WHITLEY, MS
Director

ROSS E. ARMSTRONG
Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF CHILD AND FAMILY SERVICES
4126 TECHNOLOGY WAY, SUITE 300
CARSON CITY, NV 89706
Telephone (775) 684-4400 • Fax (775) 684-4455
dcfs.nv.gov

MEMORANDUM

TO: Lynnette Aaron, Executive Branch Budget Officer I
Governor's Finance Office, Budget Division

THROUGH: Mark Winebarger, Admin Services Officer IV
Department of Health and Human Services, Director's Office

FROM: Katrina Nielsen, Admin Services Officer IV
Division of Child and Family Services

DATE: June 18, 2019

SUBJECT: Retroactive Contract Request – Churchill County Child Protective Services Assessments

A retroactive date of July 1, 2019 is requested for the interlocal contract between the Division of Child and Family Services (DCFS) and Churchill County in order to issue an assessment for child protective services to the County pursuant to NRS 432B.3262.

DCFS is requesting the retroactive contract due to the need for the assessment amount to be determined through the legislative process and the subsequent need for the County Board of Commissioners to review and approve the contract.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-4414.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21979**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	Douglas County
Agency Code:	409	Contractor Name:	Douglas County
Appropriation Unit:	3229-00	Address:	1594 Esmeralda Ave.
Is budget authority available?:	Yes	City/State/Zip	Minden, NV 89423
If "No" please explain:	Not Applicable	Contact/Phone:	775-782-9821
		Vendor No.:	T40174400G
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

This is a retroactive agreement due to the need for the assessment amount to be determined through the Legislative process and the interlocal contract to be approved through the Douglas County Board of Commissioners.

3. Termination Date: **06/30/2021**Contract term: **2 years**4. Type of contract: **Interlocal Agreement**Contract description: **CPS Assessments**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing child protective services pursuant to NRS 432B.326.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,002,862.00**

Other basis for payment: \$497,251 for SFY20 and \$505,611 for SFY21

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a revenue contract pursuant to NRS 432B.326.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a revenue contract pursuant to NRS 432B.326

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

This is a revenue contract pursuant to NRS 432B.326

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

Yes If "Yes", please explain

Douglas County

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This is a revenue contract. The relationship between Douglas County and the Division has been satisfactory for several biennia.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	knielsen	08/05/2019 10:44:12 AM
Division Approval	knielsen	08/05/2019 10:44:19 AM
Department Approval	mwinebar	08/05/2019 14:27:54 PM
Contract Manager Approval	sknigge	08/05/2019 16:33:21 PM
Budget Analyst Approval	laaron	08/16/2019 10:58:25 AM
BOE Agenda Approval	bwooldri	08/19/2019 15:42:05 PM
BOE Final Approval	Pending	

STEVE SISOLAK
Governor



RICHARD WHITLEY, MS
Director

ROSS E. ARMSTRONG
Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF CHILD AND FAMILY SERVICES
4126 TECHNOLOGY WAY, SUITE 300
CARSON CITY, NV 89706
Telephone (775) 684-4400 • Fax (775) 684-4455
dcfs.nv.gov

MEMORANDUM

TO: Lynnette Aaron, Executive Branch Budget Officer I
Governor's Finance Office, Budget Division

THROUGH: Mark Winebarger, Admin Services Officer IV
Department of Health and Human Services, Director's Office

FROM: Katrina Nielsen, Admin Services Officer IV
Division of Child and Family Services *Katrina Nielsen*

DATE: July 29, 2019

SUBJECT: Retroactive Contract Request – CETS #21979 Douglas County Child Protective Services Assessments

A retroactive date of July 1, 2019 is requested for the interlocal contract between the Division of Child and Family Services (DCFS) and Douglas County in order to issue an assessment for child protective services to the County pursuant to NRS 432B.3262.

DCFS is requesting the retroactive contract due to the need for the assessment amount to be determined through the legislative process and the subsequent need for the County Board of Commissioners to review and approve the contract.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-4414.

*Nevada Department of Health and Human Services
Helping People -- It's Who We Are And What We Do*

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21256**Amendment Number: **2**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Legal Entity Name: **FM MARKETING, LLC**Agency Code: **409**Contractor Name: **FM MARKETING, LLC**Appropriation Unit: **3229-42**Address: **7473 W LAKE MEAD BLVD STE 100**Is budget authority available?: **Yes**City/State/Zip: **LAS VEGAS, NV 89128-0265**

If "No" please explain: Not Applicable

Contact/Phone: **702/249-9900**Vendor No.: **T29040933**NV Business ID: **NV20041045342**To what State Fiscal Year(s) will the contract be charged? **2019-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/04/2018**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2019**Contract term: **3 years and 208 days**4. Type of contract: **Contract**Contract description: **Media Campaign**

5. Purpose of contract:

This is the second amendment to the original contract which provides ongoing custom media lists for placement of a media advertising plan, follow-up with civic groups, non-profit education organizations to provide public relations. This amendment extends the termination date from September 30, 2019 to June 30, 2022 and increases the maximum amount from \$96,300 to \$546,300 due to an increased need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$50,000.00	\$50,000.00	\$50,000.00	Yes - Action
a. Amendment 1:	\$46,300.00	\$46,300.00	\$46,300.00	Yes - Info
2. Amount of current amendment (#2):	\$450,000.00	\$450,000.00	\$496,300.00	Yes - Action
3. New maximum contract amount:	\$546,300.00			
and/or the termination date of the original contract has changed to:	06/30/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

A shortage of Foster Homes in rural Nevada causes children to be placed outside of their community of origin. A comprehensive media campaign coupled with collaborative outreach by courts and community partnership will yield homes in rural Nevada and enhance efforts to keep children in their schools and communities when they must be removed from their parents due to safety reasons.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies do not have the expertise to undertake launching a media campaign.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

- a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 180607

Approval Date: 06/29/2018

- c. Why was this contractor chosen in preference to other?

FM Marketing developed DCFS' media campaign in 2014. This contract is a continuation of that existing campaign.

- d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contractor has been under contract with the Division since 2014 and service provided has been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	hbugg	07/30/2019 12:01:39 PM
Division Approval	knielsen	07/31/2019 10:00:30 AM

Department Approval	mwinebar	07/31/2019 16:42:59 PM
Contract Manager Approval	sknigge	08/01/2019 11:55:43 AM
Budget Analyst Approval	bwooldri	08/22/2019 10:32:35 AM
BOE Agenda Approval	bwooldri	08/22/2019 10:33:10 AM

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Brian Sandoval
Governor

Patrick Cates
Director

Jeffrey Haag
Administrator

Purchasing Use Only:

Approval#: **180607**

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:			
State Agency: <u>DCFS</u>			
1a	Contact Name and Title	Phone Number	Email Address
	<u>Maria Hickey</u>	<u>684-1975</u>	<u>mhickey@dcfs.nv.gov</u>
	<u>Betsy Crumrine</u>	<u>684-1979</u>	<u>bcrumrine@dcfs.nv.gov</u>
Vendor Information:			
1b	Identify Vendor:	<u>FM Marketing, LLC</u>	
	Contact Name:	<u>Susan Somers</u>	
	Address:	<u>7473 West Lake Mead, Suite 100 Las Vegas NV 89128</u>	
	Telephone Number:	<u>(702) 227-8700 or cell (702) 249-9900</u>	
	Email Address:	<u>susan@fmmnpr.com</u>	
Type of Waiver Requested – Check the appropriate type:			
1c	Sole or Single Source:	<u>X single source</u>	
	Professional Service Exemption:		
Contract Information:			
1d	Is this a new Contract?	Yes	No
	Amendment:	<u>#</u>	
	CETS:	<u>#</u>	
Term:			
1e	One (1) Time Purchase:		
	Contract:	Start Date: <u>Upon Approval</u>	End Date: <u>June 30, 2022</u>
Funding:			
1f	State Appropriated:		
	Federal Funds:		
	Grant Funds:	<u>Title XX</u>	
	Other (Explain):		
Total Estimated Value of this Service Contract, Amendment or Purchase:			
1g	<u>\$49,000.00</u>		

2	Provide a description of work/services to be performed or commodity/good to be purchased: Create custom media lists for placement of media plan/advertising; follow up with civic groups, non-profits and education organizations that DCFS has presented panel discussions to recruit/create awareness for potential referral sources; provide public relations services, such as writing & distributing press releases, media alerts, place radio, TV, print and online media, schedule for TV and radio interviews, news stories, briefs, sound bites, online submissions and listings, promote upcoming foster parent training and events, coordinate media interviews, photo shoots, media training in rural Nevada communities; provide updated content for Childs Journey Home, Facebook page, Instagram or twitter messaging.
---	--

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor: This media campaign was developed in 2014, FM Marketing knows DCFS and the rural region and has the expertise to reproduce our advertising and/or place the media with the most effective outlets available.
---	---

4	Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source: This advertising campaign was developed including print, media, and radio content in 2014. To put this out to bid would mean starting over and creating something different, and we would lose the recognize-ability that we already have with the print material that now defines our "brand" and message. The service provider developed relationships with media outlets in rural Nevada and we want to capitalize on those relationships where available.
---	--

5	Were alternative services or commodities evaluated? Check One. Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/>
	a. If yes, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.
	b. If not, why were alternatives not evaluated?
	This advertising campaign was developed including print, media, and radio content in 2014. To put this out to bid would mean starting over and creating something different, and we would lose the recognize-ability that we already have with the print material that now defines our "brand" and message. The service provider developed relationships with media outlets in rural Nevada and we want to capitalize on those relationships where available.

6	Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany this request.			Yes: <input checked="" type="checkbox"/>	No: <input type="checkbox"/>
	a. If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:				
	Term Start and End Dates		Value	Short Description	Type of Procurement (RFP#, RFO#, Waiver #)
	July 1, 2014	September 30, 2014	\$60,175.00	Create media plan and positive awareness opportunities in rural	See attached

				Nevada communities by using developed media lists, create and publicize DCFS message through press releases, radio, TV, print & online media, billboards and content for DCFS facebook page, Childs Journey Home, etc.	
	October 1, 2014	September 30, 2015	\$93,525.00	Same as above, this was an amendment.	
			\$		
			\$		
			\$		

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid? <i>This advertising campaign was developed including print, media, and radio content in 2014 at a substantial cost. To put this out to bid would mean starting over and creating something different, and we would lose the recognize-ability that we already have with the print material that now defines our "brand" and message.</i>
---	--

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable? <i>FM Marketing created this media plan in 2014 and having done so, they have everything needed to recreate the plan, with enhancements where requested, in an effective and timely manner.</i>
---	--

9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u> a. <i>If yes, please provide details regarding future obligations or needs.</i> <i>If the Division of Child and Family Services has future funding available to use these print, media, and radio materials again we need to do so. It is vital to keep the need for foster/relative/adoptive resource homes for rural children in the forefront in all rural communities. The need to keep children in their community and schools of origin is in the best interest for the children and their parents.</i>	Yes:	X	No:	
---	--	------	---	-----	--

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.


Agency Representative Initiating Request

Reesha Powell
Print Name of Agency Representative Initiating Request

5/31/2018
Date


Signature of Agency Head Authorizing Request


Print Name of Agency Head Authorizing Request

6/7/18
Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

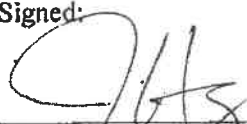
Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns please contact the Purchasing Division at 775-684-0170.

Signed:


Administrator, Purchasing Division or Designee

6-29-2018
Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21977**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	LYON COUNTY
Agency Code:	409	Contractor Name:	LYON COUNTY
Appropriation Unit:	3229-00	Address:	LYON COUNTY HUMAN SERVICES 27 S. MAIN ST
Is budget authority available?:	Yes	City/State/Zip	YERINGTON, NV 89447
If "No" please explain:	Not Applicable	Contact/Phone:	775-463-6531
		Vendor No.:	T40156600AH
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

This is a retroactive agreement due to the need for the assessment amount to be determined through the Legislative process.3. Termination Date: **06/30/2021**Contract term: **2 years**4. Type of contract: **Interlocal Agreement**Contract description: **CPS Assessments**

5. Purpose of contract:

This is a new interlocal revenue agreement to provide ongoing child protective services pursuant to NRS 432B.326.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,405,885.00**

Other basis for payment: \$701,055 for SFY20 and \$704,830 for SFY21

II. JUSTIFICATION

7. What conditions require that this work be done?

This is a revenue contract pursuant to NRS 432B.326.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a revenue contract pursuant to NRS 432B.326.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

This is a revenue contract pursuant to NRS 432B.326.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

Yes If "Yes", please explain

Lyon County

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This is a revenue contract. The relationship between Lyon County and the Division has been satisfactory for several biennium.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	knielsen	07/25/2019 16:50:12 PM
Division Approval	knielsen	07/25/2019 16:50:15 PM
Department Approval	mwinebar	07/30/2019 14:32:22 PM
Contract Manager Approval	sknigge	08/05/2019 10:56:24 AM
Budget Analyst Approval	laaron	08/07/2019 15:45:12 PM
BOE Agenda Approval	bwooldri	08/09/2019 14:36:07 PM
BOE Final Approval	Pending	

STEVE SISOLAK
Governor



RICHARD WHITLEY, MS
Director

ROSS E. ARMSTRONG
Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF CHILD AND FAMILY SERVICES
4126 TECHNOLOGY WAY, SUITE 300
CARSON CITY, NV 89706
Telephone (775) 684-4400 • Fax (775) 684-4455
dcfs.nv.gov

MEMORANDUM

TO: Lynnette Aaron, Executive Branch Budget Officer I
Governor's Finance Office, Budget Division

THROUGH: Mark Winebarger, Admin Services Officer IV
Department of Health and Human Services, Director's Office

FROM: Katrina Nielsen, Admin Services Officer IV
Division of Child and Family Services *Katrina Nielsen*

DATE: July 29, 2019

SUBJECT: Retroactive Contract Request – CETS #21977 Lyon County Child Protective Services Assessments

A retroactive date of July 1, 2019 is requested for the interlocal contract between the Division of Child and Family Services (DCFS) and Lyon County in order to issue an assessment for child protective services to the County pursuant to NRS 432B.3262.

DCFS is requesting the retroactive contract due to the need for the assessment amount to be determined through the legislative process and the subsequent need for the County Board of Commissioners to review and approve the contract.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-4414.

*Nevada Department of Health and Human Services
Helping People – It's Who We Are And What We Do*

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22119**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	SIGNATURE LANDSCAPES, LLC
Agency Code:	409	Contractor Name:	SIGNATURE LANDSCAPES, LLC
Appropriation Unit:	3281-07	Address:	3705 BARRON WAY
Is budget authority available?:	Yes	City/State/Zip	RENO, NV 89511-1876
If "No" please explain:	Not Applicable	Contact/Phone:	Robert Gamboa 775/857-4333
		Vendor No.:	T27035213
		NV Business ID:	NV20011064513

To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	72.40 %	Fees	0.00 %
X	Federal Funds	27.60 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**

Anticipated BOE meeting date 09/2019

Retroactive? **Yes**

If "Yes", please explain

Agency received one response to the solicitation request for this service though a second vendor expressed interest but were unable to bid until June 13th, 2019. To be fair and competitive, the agency elected to delay the bid date which caused this to be a retro contract.

3. Termination Date: **06/30/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Landscaping**

5. Purpose of contract:

This is a new contract to provide ongoing landscaping services including turf care, horticultural care, irrigation, litter removal and annual planting and care.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$66,680.00**

Payment for services will be made at the rate of \$1,169.00 per Month (July 1, 2019-June 30, 2020)

Other basis for payment: \$1,204.00 per Month (July 1, 2020-June 30, 2021); \$1,240.00 per Month (July 1, 2021-June 30, 2022); \$1,277.00 per Month (July 1, 2022-June 30, 2023). Additional funds of \$8,000.00 for unexpected repairs.

II. JUSTIFICATION

7. What conditions require that this work be done?

The campus of Northern Nevada Child and Adolescent Services is very large. The Agency does not staff grounds maintenance and currently the custodians and maintenance staff are attempting the upkeep of the landscape however, the staff cannot complete their primary duties due to lack of manpower resources.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No grounds maintenance staff in employment with this agency nor any State agency that offers this service.

9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Signature Landscapes
All Around Town Lawn & Landscaping
All Seasons Lawn & Landscaping
Premium Lawn & Landscaping
American Lawn & Landscaping

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Lowest responding bidder

d. Last bid date: 06/13/2019 Anticipated re-bid date: 05/01/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Division of Child and Family Services, services satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Imran Hyman, ASO II Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ihyman	06/21/2019 10:39:17 AM
Division Approval	knielsen	07/15/2019 14:53:49 PM
Department Approval	mwinebar	07/16/2019 16:06:46 PM
Contract Manager Approval	sknigge	07/16/2019 16:50:35 PM
Budget Analyst Approval	laaron	07/19/2019 15:43:12 PM
BOE Agenda Approval	bwooldri	07/26/2019 11:42:54 AM
BOE Final Approval	Pending	

STEVE SISOLAK
Governor

STATE OF NEVADA



Richard Whitley
Director
Department of Health and Human Services

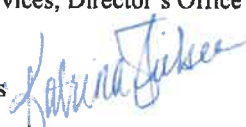
Ross Armstrong
Administrator
Division of Child and Family Services

Department of Health and Human Services
Division of Child and Family Services
Northern Nevada Child and Adolescent Services
2655 Enterprise Road
Reno, Nevada 89512
Phone: (775) 688-1600 Fax: (775) 688-1616

MEMORANDUM

TO: Lynnette Aaron, Executive Branch Budget Officer
Governor's Finance Office

THROUGH: Mark Winebarger, ASO IV
Department of Health and Human Services, Director's Office

FROM: Katrina Nielsen, ASO IV
Division of Child and Family Services 

DATE: 7/16/2019

SUBJECT: Retroactive Contract Request – CETS # 22119 Signature Landscapes LLC.

A retroactive effective date of July 1, 2019, is requested for the Contract between the Division of Child and Family Services (DCFS) and Signature Landscapes LLC in order to provide uninterrupted landscaping maintenance services for the property at 2655 Enterprise Road in Reno.

Initially the agency only received a response from the current vendor providing service. The only other vendor that was interested was not available to visit until June 13, 2019, so the agency waited to receive that proposal on June 17, 2019. The current vendor was chosen again due to a substantial difference in cost.

Services began before the Contract was approved due to the need for landscaping maintenance. Therefore, in order to continue this service, we are requesting retroactive approval of this Contract.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-7942.

ih/KN

TREATMENT SERVICES

Children's Clinical Services Early Childhood Mental Health Services Mobile Crisis Response Team
Family Learning Homes Adolescent Treatment Center
W.I.N. (Wraparound in Nevada for Children and Families)

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22212**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Agency Code: **409**Appropriation Unit: **3646-17**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Board of Regents - UNLV

Contractor Name: **Board of Regents - UNLV**Address: **4505 Maryland Parkway**City/State/Zip: **Las Vegas, NV 89154-1055**

Contact/Phone: Amanda Haboush 702-895-1812

Vendor No.: D35000813

NV Business ID: Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/01/2019**

Anticipated BOE meeting date 09/2019

Retroactive? **Yes**

If "Yes", please explain

The Nevada Institute for Children's Research and Policy began providing evaluation services on June 1, 2019 in an effort to fulfill the HRSA grant requirements timely. We will initiate year 2 and subsequent years of the contract two months in advance to ensure future contracts do not require retroactive approval.

3. Termination Date: **12/31/2019**Contract term: **213 days**4. Type of contract: **Interlocal Agreement**Contract description: **HRSA Support**

5. Purpose of contract:

This is a new interlocal agreement to provide support in implementing the Pediatric Mental Health Care Access Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$52,909.00**

Other basis for payment: As broken out in Attachment B - Cost Schedule upon receipt and of an approved invoice(s).

II. JUSTIFICATION

7. What conditions require that this work be done?

The services of an independent evaluation firm are needed to monitor and evaluate the project performance, outcome and impact and assist in the design, implementation, and conclusion of the HRSA Pediatric Mental Health Care Access Program (PMHCA) in Nevada. The research and planning contract is essential to ensure that the Nevada PMHCA will meet project goals, expectations and requirements.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the capacity to conduct the required evaluation services.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

36%

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

Yes If "Yes", please explain

Interlocal Agreement with NSHE.

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

UNLV has been under contract with the Division in the past as well as currently. Services have been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Stephanie Dotson, Clinical Program Manager 1 Ph: 775-688-2415

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	prassie1	07/29/2019 16:17:28 PM
Division Approval	knielsen	07/31/2019 10:18:28 AM
Department Approval	mwinebar	08/02/2019 08:09:26 AM
Contract Manager Approval	sknigge	08/02/2019 11:31:45 AM
Budget Analyst Approval	laaron	08/15/2019 16:18:00 PM
BOE Agenda Approval	bwooldri	08/16/2019 08:10:43 AM
BOE Final Approval	Pending	

STEVE SISOLAK
Governor



RICHARD WHITLEY, MS
Director


ROSS E. ARMSTRONG
Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF CHILD AND FAMILY SERVICES
4126 TECHNOLOGY WAY, SUITE 300
CARSON CITY, NV 89706
Telephone (775) 684-4400 • Fax (775) 684-4455
dcfs.nv.gov

MEMORANDUM

TO: Lynnette Aaron, Executive Branch Budget Officer
Governor's Finance Office, Budget Division

THROUGH: Mark Winebarger, Administrative Services Officer IV
Department of Health and Human Services, Director's Office

FROM: Katrina Nielsen, Administrative Services Officer IV
Division of Child and Family Services 

DATE: 07/30/2019

SUBJECT: Retroactive Interlocal Contract - CETS #22212 University of Nevada Las Vegas -
Nevada Institute for Children's Research and Policy (NICRP) for Children's Mental
Health

A retroactive effective date of June 1, 2019 is requested for the Interlocal Contract between public agencies, the Department of Health and Human Services - Division of Child and Family Services (DCFS) and Board of Regents, Nevada System of Higher Education - University of Nevada, Las Vegas - Nevada Institute for Children's Research and Policy (NICRP) for Children's Mental Health in order to provide the evaluation services for the Health Resources & Services Administration (HRSA) Pediatric Mental Health Care Access (PMHCA) program.

NICRP began providing evaluation services on June 1, 2019 in an effort to fulfill the HRSA grant requirements timely. We will initiate year 2 and subsequent years of the contract two months in advance to ensure future contracts do not require retroactive approval.

If you have any questions, please do not hesitate to contact me at (775) 684-7942.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22133**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	UNIVERSITY OF MARYLAND
Agency Code:	409	Contractor Name:	UNIVERSITY OF MARYLAND
Appropriation Unit:	3646-15	Address:	BALTIMORE FOUNDATION, INC. 620 W. LEXINGTON ST, 4TH FLOOR
Is budget authority available?:	Yes	City/State/Zip:	BALTIMORE, MD 21201-1501
If "No" please explain:	Not Applicable	Contact/Phone:	Emily Goldman 410-706-1869
		Vendor No.:	T27042247
		NV Business ID:	Governmental Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

The project request was initially submitted as a subgrant but was determined to be more appropriate in a contract. This caused a delay and services began before the Contract was approved in order to implement and complete the training before the current System of Care grant period ends on September 30, 2019. Therefore, in order to complete the work before closing the grant, we are requesting a retroactive approval of this Contract.

3. Termination Date: **09/30/2019**Contract term: **182 days**4. Type of contract: **Interlocal Agreement**Contract description: **FOCUS training**

5. Purpose of contract:

This is a new contract to provide implementation of Families are Laughing, Outcomes, Coordination, Unconditional Positive Regard, Short-Term into the workforce development activities for the Wraparound In Nevada Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$169,500.00**

Payment for services will be made at the rate of \$28,250.00 per month

II. JUSTIFICATION

7. What conditions require that this work be done?

The tailored training model for Wraparound Implementation offered by the University of Maryland enhances the targeted case management services that are performed daily in the WIN (Wraparound in Nevada) program. FOCUS is a time-limited intermediate care coordination model designed to support decreased involvement with systems while working to build connections and supports for families through community-based resources.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No State employees or Nevada State agency offers this type of training

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Tiffany Ontiveros, Clinical Program Planner Ph: 702-486-5004

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	prassie1	06/27/2019 13:24:39 PM
Division Approval	knielsen	07/18/2019 08:15:27 AM
Department Approval	mwinebar	07/25/2019 15:56:42 PM
Contract Manager Approval	sknigge	07/29/2019 14:28:18 PM
Budget Analyst Approval	laaron	07/31/2019 09:24:13 AM
BOE Agenda Approval	bwooldri	08/19/2019 14:26:46 PM
BOE Final Approval	Pending	



DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF CHILD AND FAMILY SERVICES
4126 TECHNOLOGY WAY, SUITE 300
CARSON CITY, NV 89706
Telephone (775) 684-4400 • Fax (775) 684-4455
dcfs.nv.gov

MEMORANDUM

TO: Lynnette Aaron, Executive Branch Budget Officer I
Governor's Finance Office, Budget Division

THROUGH: Mark Winebarger, Admin Services Officer IV
Department of Health and Human Services, Director's Office

FROM: Katrina Nielsen, Admin Services Officer IV
Division of Child and Family Services

DATE: 07/23/2019

SUBJECT: Retroactive Contract – CETS # 22133 University of Maryland, Baltimore – National Wraparound Implementation Center (NWIC)

A retroactive effective date of April 1, 2019 is requested for the Contract between the Division of Child and Family Services (DCFS) and University of Maryland, Baltimore National Wraparound Implementation Center (NWIC) in order to provide training, coaching and monitoring for the FOCUS Implementation Project to Wraparound In Nevada staff. Wraparound Implementation Center discovered that there was a gap in services to families needing an intermediate level of care. Poor outcomes were reflected for a large group of youth/families utilizing services. DCFS partnered with NWIC to develop a tiered care coordination model.

The project request was initially submitted as a subgrant but was determined to be more appropriate in a contract. This caused a delay and services began before the Contract was approved in order to implement and complete training before the current System of Care grant period ends on September 30, 2019. Therefore, in order to complete the work before closing the grant, we are requesting retroactive approval of this Contract.

The Division has requested that all personnel initiating contracts take the "Essentials of State Purchasing" and has developed a brief internal contracting process training that is now available to program staff.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-7942.KN

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22215**

Agency Name:	DHHS - DIVISION OF CHILD AND FAMILY SERVICES	Legal Entity Name:	ZERO TO THREE: NATIONAL CENTER FOR INFANTS TODDLER & FAMILIES
Agency Code:	409	Contractor Name:	ZERO TO THREE: NATIONAL CENTER FOR INFANTS TODDLER & FAMILIES
Appropriation Unit:	3646-17	Address:	FOR INFANTS TODDLER & FAMILIES 1255 23RD ST. NW #350
Is budget authority available?:	No	City/State/Zip	WASHINGTON, DC 20037
If "No" please explain:	C47635 pending	Contact/Phone:	Laura W. Shiflett 202-857-2600
		Vendor No.:	T80964949B
		NV Business ID:	NV20161295270

To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **SNCAS19-01**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/08/2019**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

This project was initially submitted as a Solicitation Waiver as Zero to Three: National Center for Infants, Toddlers & Families is the only official training provider for DC:O-5. After the 15-day review period it was determined to fall under the RFP process. The RFP process was then completed; however, it caused a delay in getting a contract processed. To fulfill Federal grant requirements work needed to begin upon selection of the vendor, resulting in the need for a retroactive contract.

3. Termination Date: **06/30/2020**Contract term: **358 days**4. Type of contract: **Contract**Contract description: **Diagnostic Training**

5. Purpose of contract:

This is a new contract to provide training for staff in early childhood diagnostic classification in a developmentally based system for diagnosing mental health and developmental disorders in infants and toddlers.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$70,397.80**

Other basis for payment: As itemized in Section 6 - Consideration

II. JUSTIFICATION

7. What conditions require that this work be done?

Provide official training for clinicians in the diagnostic classification for early childhood mental health disorders, and certified training for trainers model in the diagnostic classification for early childhood mental health disorder.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There are currently no state employees with the expertise to provide the training.

9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Zero to Three

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

RFP #SNCAS19-01, and in accordance with NRS 333, the selected vendor was the only vendor to respond to the RFP. Program review determined vendor's response was acceptable.

d. Last bid date: 06/18/2019 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	prassie1	07/23/2019 15:07:23 PM
Division Approval	knielsen	07/29/2019 13:08:57 PM
Department Approval	mwinebar	07/30/2019 12:39:16 PM
Contract Manager Approval	sknigge	07/30/2019 13:31:35 PM
Budget Analyst Approval	laaron	08/19/2019 15:36:33 PM
BOE Agenda Approval	bwooldri	08/19/2019 17:18:23 PM
BOE Final Approval	Pending	

STEVE SISOLAK
Governor



RICHARD WHITLEY, MS
Director


ROSS E. ARMSTRONG
Administrator

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF CHILD AND FAMILY SERVICES
4126 TECHNOLOGY WAY, SUITE 300
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dcfs.nv.gov

MEMORANDUM

TO: Lynnette Aaron, Executive Branch Budget Officer I
Governor's Finance Office, Budget Division

THROUGH: Mark Winebarger, Administrative Services Officer IV
Department of Health and Human Services, Director's Office

FROM: Katrina Nielsen, Administrative Services Officer IV
Division of Child and Family Services 

DATE: 07/23/2019

SUBJECT: Retroactive Contract Request – CETS # 22215 Zero to Three: National Center for Infants, Toddlers & Families

A retroactive effective date of July 8, 2019 is requested for the Contract between the Department of Health and Human Services - Division of Child and Family Services (DCFS) and Zero to Three: National Center for Infants, Toddlers & Families in order to provide the early childhood mental health diagnostic classification training for the Health Resources & Services Administration (HRSA) Pediatric Mental Health Care Access (PMHCA) program. The federal HRSA grant approved these training activities for year 1 and year 2 of the grant.

This project was initially submitted as a Solicitation Waiver to the Purchasing Division as Zero to Three: National Center for Infants, Toddlers & Families is the only official training provider for DC:O-5. After the 15-day review period it was determined to fall under the RFP process. The RFP process was then completed; however, it caused a delay in getting a contract processed. An individual contract and scope of work has been developed to facilitate the necessary work to capture the necessary elements of early childhood mental health diagnostic classification trainings and performance measures for federal reporting. However, to fulfill Federal grant requirements work needed to begin upon selection of the vendor, resulting in the need for a retroactive contract.

The Division has developed a training for program personnel that will be initiating contracts. This training will help set guidelines for determining the proper fiscal mechanism to utilize and the timeframes associated with each procurement process.

If you have any questions, please do not hesitate to contact me at (775) 684-4414.

*Nevada Department of Health and Human Services
Helping People -- It's Who We Are And What We Do*

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22256**

Agency Name:	ADJUTANT GENERAL & NATIONAL GUARD	Legal Entity Name:	NEVADA ARMY NATIONAL GUARD
Agency Code:	431	Contractor Name:	NEVADA ARMY NATIONAL GUARD
Appropriation Unit:	All Appropriations	Address:	2452 FAIRVIEW DR
Is budget authority available?:	Yes	City/State/Zip	CARSON CITY, NV 89701
If "No" please explain:	Not Applicable	Contact/Phone:	775-887-7824
		Vendor No.:	T81089009
		NV Business ID:	N/A

To what State Fiscal Year(s) will the contract be charged? **2020-2025**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	17.00 %	Fees	0.00 %
X	Federal Funds	83.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2019**

Anticipated BOE meeting date 09/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2024**Contract term: **5 years and 1 day**4. Type of contract: **Cooperative Agreement**Contract description: **MCA FFY 2020-2024**

5. Purpose of contract:

This is a new cooperative agreement which establishes the terms and conditions of federal National Guard Bureau funding in support of the operations and training of the Nevada Army and Air National Guards.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$110,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The conditions that require this work to be done are to sustain daily operations of the Nevada National Army and Air National Guard units.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

N/A9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

N/A

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	twollan1	08/07/2019 15:58:34 PM
Division Approval	twollan1	08/07/2019 15:58:39 PM
Department Approval	twollan1	08/07/2019 15:58:42 PM
Contract Manager Approval	twollan1	08/07/2019 15:58:45 PM
Budget Analyst Approval	jrodrig9	08/15/2019 10:24:16 AM
BOE Agenda Approval	jrodrig9	08/15/2019 10:24:19 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **19371**Amendment
Number: **1**Agency Name: **DEPARTMENT OF CORRECTIONS**Legal Entity
Name: **BOARD OF REGENTS-UNLV NSHE**Agency Code: **440**Contractor Name: **BOARD OF REGENTS-UNLV NSHE**
Address: **4505 MARYLAND PKWY BOX 451005**Appropriation Unit: **3711-22**Is budget authority
available?: **Yes**City/State/Zip: **LAS VEGAS, NV 89154-5009**

If "No" please explain: Not Applicable

Contact/Phone: **Emily J. Salisbury 702-895-0236**Vendor No.: **D35000815**NV Business ID: **Government Entity**To what State Fiscal Year(s) will the contract be charged? **2018-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **DHHS RFP 3106**

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **12/12/2017**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **09/30/2019**

Termination Date:

Contract term: **3 years and 292 days**4. Type of contract: **Interlocal Agreement**Contract description: **RE-Entry Program**

5. Purpose of contract:

This is the first amendment to the original interlocal agreement which provides ongoing policy evaluation and assessment validation for the Nevada Strategic Recidivism Reduction (SRR) Plan. This amendment extends the contract termination date from September 9, 2019 to September 30, 2021 and increases the maximum amount from \$50,476 to \$109,772 due to the continued need of these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$50,476.00	\$50,476.00	\$50,476.00	Yes - Action
2. Amount of current amendment (#1):	\$59,296.00	\$59,296.00	\$59,296.00	Yes - Action
3. New maximum contract amount:	\$109,772.00			
and/or the termination date of the original contract has changed to:	09/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

The NDOC was provided the Second Chance Act Grant through the Bureau of Justice for Year 2 activities. This grant works to provide re-entry services, training, evaluation, research and validation of research to measure efforts to reduce recidivism. The Department is contracting with UNLV to evaluate Nevada's assessments, specifically for women. UNLV with partner to provide and develop a gender responsive assessment for the Florence McClure Women's Correctional Center to support program placement to reduce recidivism in Nevada.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

An outside party is required for this service, as the Department does not have the resources or technical expertise to accomplish this goal.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Exempt (Per statute)**

c. Why was this contractor chosen in preference to other?

NRS 277.180- Any one or more public agencies may contract with one or more other public agencies to perform any governmental service, activity, or undertaking, which any of its public agencies is authorized by law to performed. The federally approved indirect cost rate is 26%.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dmartine	06/21/2019 16:18:39 PM
Division Approval	amonro1	06/24/2019 11:45:29 AM
Department Approval	sewart	06/24/2019 12:04:02 PM
Contract Manager Approval	aroma2	07/05/2019 10:13:49 AM

Budget Analyst Approval
BOE Agenda Approval

kshea
jrodrig9

08/19/2019 12:28:11 PM
08/19/2019 15:01:35 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21798**

Agency Name: DEPARTMENT OF CORRECTIONS	Legal Entity Name: University of Cincinnati Corrections Institute
Agency Code: 440	Contractor Name: University of Cincinnati Corrections Institute
Appropriation Unit: 3711-22	Address: 51 Goodman Dr. Suite 530
Is budget authority available?: Yes	City/State/Zip: Cincinnati, OH 45221-0222
If "No" please explain: Not Applicable	Contact/Phone: Amanda Lampson 513-556-2868
	Vendor No.: T29024907B
	NV Business ID: Government Entity

To what State Fiscal Year(s) will the contract be charged? **2019-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: 440

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 06/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2021**Contract term: **2 years and 122 days**4. Type of contract: **Interlocal Agreement**Contract description: **Re-Entry Programs**

5. Purpose of contract:

This is a new contract to provide training for the re-entry program as identified by the Second Chance Act Reentry Initiative - Nevada Recidivism Reduction Plan grant to meet the goals, objectives and activities as required by the Bureau of Justice Assistance. This includes training of trainers in the Nevada Risk Assessment System, Correctional Case Planning and the training of staff members in core correctional practices.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$77,500.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Bureau of Justice federal award requires the assessment and evidence-based training activities for staff development with the goal of reducing recidivism. These activities were identified in the grant as required activities and funded entirely by the federal grant.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The evidence-based practices and curriculum on the Nevada Risk Assessment (NRAS) and the cognitive approaches to the effective delivery of programs is specialized. The cost of maintaining this level of training capabilities would require the department to serve as a research institution and would be cost-prohibitive. The department has incorporated the train-the-trainer as a required element to ensure sustainability with the training and programs. However, the department does not have the expertise to deliver this level of training without the technical and educational support from the University of Cincinnati. No other state agency provides this service.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor was selected for the training based on the Ohio Risk Assessment System of which the state adopted in previous years with the copyright permission to be identified as the Nevada Risk Assessment System (NRAS). The University of Cincinnati is the only research and training facility that offers the required training and certification of the tool as part of an evidence-based system.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dmartine	04/30/2019 14:36:33 PM
Division Approval	amonro1	05/02/2019 09:20:41 AM
Department Approval	sewart	05/02/2019 10:17:26 AM
Contract Manager Approval	aroma2	07/05/2019 11:51:28 AM
Budget Analyst Approval	kshea	08/16/2019 11:50:43 AM
BOE Agenda Approval	jrodrig9	08/19/2019 11:45:05 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **17755**Amendment Number: **5**Agency Name: **DEPARTMENT OF AGRICULTURE**Legal Entity Name: **JOSE M. CASTRO SERRANO, DBA Express Janitorial**Agency Code: **550**Contractor Name: **JOSE M. CASTRO SERRANO, DBA Express Janitorial**Appropriation Unit: **4554-04**Address: **1901 Silverada Boulevard**Is budget authority available?: **Yes**City/State/Zip: **Reno, NV 89512**

If "No" please explain: Not Applicable

Contact/Phone: **Jose Castro Serrano 775-337-2322**Vendor No.: **T27039163**NV Business ID: **NV20151602240**To what State Fiscal Year(s) will the contract be charged? **2016-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Cost Allocation

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **02/01/2016**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2019**Contract term: **3 years and 334 days**4. Type of contract: **Contract**Contract description: **Janitorial Services**

5. Purpose of contract:

This is the fifth amendment to the original contract which provides janitorial services to the Sparks headquarters and Consumer Equitability buildings. This amendment extends the termination date from September 30, 2019 to December 31, 2019 and increases the maximum amount from \$132,897 to \$141,300 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$84,620.00	\$84,620.00	\$84,620.00	Yes - Action
a. Amendment 1:	\$15,257.50	\$15,257.50	\$15,257.50	Yes - Info
b. Amendment 2:	\$10,000.00	\$10,000.00	\$25,257.50	Yes - Info
c. Amendment 3:	\$17,940.00	\$17,940.00	\$43,197.50	Yes - Info
d. Amendment 4:	\$5,080.00	\$5,080.00	\$48,277.50	No
2. Amount of current amendment (#5):	\$8,402.50	\$13,482.50	\$56,680.00	Yes - Action
3. New maximum contract amount:	\$141,300.00			
and/or the termination date of the original contract has changed to:	12/31/2019			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Sparks headquarters and Consumer Equitability buildings must be maintained to a minimum standard of cleanliness.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State does not employ full time janitorial staff of this location.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 190101

Approval Date: 01/10/2019

c. Why was this contractor chosen in preference to other?

The selected vendor was the only one who responded to the original RFP and has continued to complete satisfactory services during the contract.

d. Last bid date: 01/04/2016

Anticipated re-bid date: 10/01/2019

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has provided satisfactory services to the Department of Agriculture since 2016.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval

bbel1

07/23/2019 14:11:34 PM

Division Approval

bbel1

07/23/2019 14:11:43 PM

Department Approval	bbel1	07/26/2019 07:56:36 AM
Contract Manager Approval	melli2	08/13/2019 07:06:23 AM
Budget Analyst Approval	mtum1	08/13/2019 11:26:02 AM
BOE Agenda Approval	cmurph3	08/14/2019 14:50:52 PM

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Brian Sandoval
Governor

Patrick Cates
Director

Jeffrey Haag
Administrator

Purchasing Use Only:

Approval#: 190101

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency: <i>Department of Agriculture</i>		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Debra Crowley-Fiscal Administrator</i>	<i>775-353-3602</i>	<i>dcrowley@agri.nv.gov</i>

1b	Vendor Information:	
	Identify Vendor:	<i>Jose M. Castro Serrano DBA Express Janitorial</i>
	Contact Name:	<i>Jose Castro Serrano</i>
	Address:	<i>418 South Rock Boulevard, Sparks, NV 89431</i>
	Telephone Number:	<i>775-800-7434</i>
	Email Address:	<i>expressjanitorialreno@gmail.com</i>

1c	Type of Waiver Requested -- Check the appropriate type:	
	Sole or Single Source:	<i>X</i>
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract?	Yes		No X
	Amendment:	#3		
	CETS:	#17755		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	<i>01/01/2019</i>	End Date:

1f	Funding:	
	State Appropriated:	
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	<i>X-Cost Allocation</i>

1g	Total Estimated Value of this Service Contract, Amendment or Purchase:
	<i>\$32,880.00</i>

2	Provide a description of work/services to be performed or commodity/good to be purchased:
	<i>Express Janitorial provides janitorial services to approximately 40,000 square feet of space at our Sparks headquarters and consumer equitability buildings.</i>

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
	<i>State Purchasing is in the process of adding janitorial services to their Master Service agreement/ contracts. By extending additional time to our existing janitorial contract, we anticipate our current provider will be able to complete the RFP proposal through NevadaEPro.</i>

4	Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:
	<i>Express Janitorial has signed up in NevadaEPro, but has not had the opportunity to complete the RFP proposal that State Purchasing planned to release in November 2018. State Purchasing's RFP should be available in the near future, which will allow Express Janitorial the time needed to complete the RFP.</i>

5	Were alternative services or commodities evaluated? Check One.		Yes:	<input type="checkbox"/>	No:	<input checked="" type="checkbox"/>
	a. <i>If yes, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.</i>					
	b. <i>If not, why were alternatives not evaluated?</i>					
<i>We anticipate completing a walkthrough of qualified vendors when this amended contract is completed prior to July 2019.</i>						

6	Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of ALL previous waivers MUST accompany this request.				Yes:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>
	a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:</i>							
	Term		Value	Short Description	Type of Procurement (RFP#, RFQ#, Waiver #)			
	Start and End Dates							
	02/01/16	07/31/19	\$ 127,817.50	Janitorial Services	RFP #455416-01			
			\$					
			\$					
		\$						
		\$						

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>There is no potential consequence to the State.</i>

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	<i>We will be using the Master Service contract list at the end of this amended contract.</i>

9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:		No:	X
	a. <i>If yes, please provide details regarding future obligations or needs.</i>				

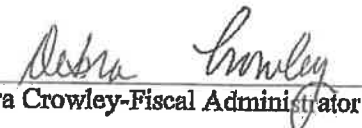
By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.


Debra Crowley-Fiscal Administrator

Debra Crowley

Print Name of Agency Representative Initiating Request

Date 1/10/19


Debra Crowley-Fiscal Administrator

1/10/19

Debra Crowley

Print Name of Agency Head Authorizing Request

Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns please contact the Purchasing Division at 775-684-0170.

Signed:


Administrator, Purchasing Division or Designee

1-11-2019
Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22248**

Agency Name: **DPS-DIRECTOR'S OFFICE**
 Agency Code: **650**
 Appropriation Unit: **All Budget Accounts - Category 00**
 Is budget authority available?: **No**
 If "No" please explain: This is a revenue contract.

Legal Entity Name: **CarFax**
 Contractor Name: **CarFax**
 Address: **5860 Trinity Parkway Suite 600**
 City/State/Zip: **Centreville, PA 20120**
 Contact/Phone: **Chris Marchetti 720-448-4750**
 Vendor No.: **T27043063**
 NV Business ID: **NV20191478610**

To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

Agency Reference #: **RFP # 65DPS-S615HM**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2023**Contract term: **4 years and 30 days**4. Type of contract: **Contract**Contract description: **Online Crash Reports**

5. Purpose of contract:

This is a new contract to provide an online option to the public to download and pay for Nevada Highway Patrol crash reports.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,200,000.00**

Other basis for payment: These fees are currently collected in budget account 9651 - Highway Patrol in Revenue GL 3603 - NHP Administrative Fees. The additional revenue collected by CarFax for the purchase of an online accident reports will also be coded to the same fund 201, budget account 9651 and RGL 3603 which are unappropriated highway funds.

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract will provide the Department of Public Safety access to information provided to CarFax from other law enforcement agencies.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This contract is necessary because Department of Public Safety employees do not have the information available to complete the task.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Experian
Wave Technology Solutions Group
LexisNexis

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #65DPS-S615, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 04/22/2019 Anticipated re-bid date: 04/01/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Boegle, Charlene, ASO Ph: 775-684-4698

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jdibasil	08/05/2019 14:48:50 PM
Division Approval	jdibasil	08/05/2019 14:48:53 PM
Department Approval	gmott	08/05/2019 15:06:25 PM
Contract Manager Approval	gmott	08/05/2019 15:06:31 PM
Budget Analyst Approval	bmacke1	08/13/2019 18:31:12 PM
BOE Agenda Approval	jrodrig9	08/19/2019 21:56:31 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **19444**Amendment Number: **1**Agency Name: **DCNR - CONSERVATION & NATURAL RESOURCES**Legal Entity Name: **Environmental Incentives, LLC**Agency Code: **700**Contractor Name: **Environmental Incentives, LLC**Appropriation Unit: **4150-10**Address: **3351 Lake Tahoe Blvd Ste 2**Is budget authority available?: **Yes**City/State/Zip: **South Lake Tahoe, CA 96150-7920**If "No" please explain: **Not Applicable**Contact/Phone: **Jeremy Sokulsky 530-541-2980**Vendor No.: **PUR0005645**NV Business ID: **NV20101203250**To what State Fiscal Year(s) will the contract be charged? **2018-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/12/2017**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **12/31/2019**Contract term: **4 years and 20 days**4. Type of contract: **Contract**Contract description: **Conserv Credit Study**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing improvement and implementation to the modeling spreadsheets for the Nevada Conservation Credit System (CCS) to facilitate credit and debit projects, produce performance reports and make the CCS more accessible and efficient to operate. This amendment extends the termination date from December 31, 2019 to December 31, 2021 and increases the maximum amount from \$200,000 to \$360,000 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$200,000.00	\$200,000.00	\$200,000.00	Yes - Action
2. Amount of current amendment (#1):	\$160,000.00	\$160,000.00	\$160,000.00	Yes - Action
3. New maximum contract amount:	\$360,000.00			
and/or the termination date of the original contract has changed to:	12/31/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

In 2013, the State of Nevada, DCNR contracted with Environmental Incentives to develop a modeling for valuing Greater Sage-grouse (GRSG) habitat, quantifying GRSG habitat improvements (credits) and disturbances (debits), and the development of mitigation exchange program to track mitigation with disturbances in order to demonstrate a net conservation gain to the species. The system needed to be scientifically based, have the buy-in of affected stakeholders, and meet federal mitigation requirements for the GRSG. The entire mitigation program is known as the Nevada Conservation Credit System (CCS) and habitat modeling program is known as the Habitat Quantification Tool (HQT).

Because new science regarding GRSG is always emerging, it was always envisioned that the CCS and HQT would need to be updated to reflect the best available science. It was also envisioned that the CCS would periodically need to be modified to reflection current or changing federal regulations, as well as to make the system more user friendly and streamlined. In general, the work/services for this contract can be described as adaptive management (incorporation of best information) and functionality (e.g. meet federal policies, user improvements, etc.).

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have the expertise or knowledge to perform this project.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

- a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 190706

Approval Date: 07/22/2019

- c. Why was this contractor chosen in preference to other?

- d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

12/3/13-12/31/17 and 12/12/17-current: The Department of Conservation and Natural Resources has a current contract with this vendor, and the quality of service provided has been verified as satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	kwilliam	07/08/2019 13:19:26 PM
Division Approval	kwilliam	07/08/2019 13:19:30 PM
Department Approval	kwilliam	07/08/2019 13:19:33 PM
Contract Manager Approval	kwilliam	08/06/2019 14:53:16 PM
Budget Analyst Approval	cpalme2	08/08/2019 15:52:29 PM
BOE Agenda Approval	cmurph3	08/12/2019 15:49:22 PM

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Steve Sisolak
Governor

Deonne B. Contine
Director

Kevin D. Doty
Acting Administrator

Purchasing Use Only:

Approval#: 190706

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency: <u>DCNR</u>		
	<i>Contact Name and Title</i>	<i>Phone Number</i>	<i>Email Address</i>
	<i>Jim Lawrence, Deputy Director, DCNR</i>	<i>684-2726</i>	<i>lawrence@dcnr.nv.gov</i>
	<i>Kelly McGowan, SEP Program Manager</i>	<i>684-8600 ext. 28</i>	<i>kmcgowan@sagebrucheco.nv.gov</i>
	<i>Kelly Williams, ASO IV, DCNR</i>	<i>684-2703</i>	<i>k.williams@dcnr.nv.gov</i>

1b	Vendor Information:	
	Identify Vendor:	<i>Environmental Incentives, LLC.</i>
	Contact Name:	<i>Jeremy Sokulsky</i>
	Address:	<i>3351 Lake Tahoe Blvd., South Lake Tahoe, CA 96150</i>
	Telephone Number:	<i>530-541-2980</i>
	Email Address:	<i>jsokulsky@enviroincentives.com</i>

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	<input checked="" type="checkbox"/> XX
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract?	Yes	No	<input checked="" type="checkbox"/> XX
	Amendment:	#1		
	CETS:	#19444		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	<i>12/31/2019</i>	End Date:

1f	Funding:	
	State Appropriated:	<input checked="" type="checkbox"/> XX
	Federal Funds:	
	Grant Funds:	
	Other (Explain):	

1g	Total Estimated Value of this Service Contract, Amendment or Purchase:
	<i>\$160,000</i>

2		<p>Provide a description of work/services to be performed or commodity/good to be purchased:</p> <p><i>In 2013, the State of Nevada, DCNR contracted with Environmental Incentives to develop a modeling for valuing Greater Sage-grouse (GRSG) habitat, quantifying GRSG habitat improvements (credits) and disturbances (debits), and the development of mitigation exchange program to track mitigation with disturbances in order to demonstrate a net conservation gain to the species. The system needed to be scientifically based, have the "buy-in" of affected stakeholders, and meet federal mitigation requirements for the GRSG. The entire mitigation program is known and the Nevada Conservation Credit System (CCS) and habitat modeling program is known as the Habitat Quantification Tool (HQT).</i></p> <p><i>Because new science regarding GRSG is always emerging, it was always envisioned that the CCS and HQT would need to be updated to reflect the best available science. It was also envisioned that the CCS would periodically need to be modified to reflect current or changing federal regulations, as well as to make the system more user friendly and streamlined. In general, the work/services included in the current contract needs include ongoing support and maintenance of the current system to meet federal policies, user improvements, etc.</i></p>												
3		<p>What are the unique features/qualifications required for this service or good that are not available from any other vendor:</p> <p><i>This solicitation waiver is for an amendment to an existing contract with Environmental Incentives (EI), the original vendor who led the design and development of the CCS and HQT. This vendor has a complete understanding of the CCS (policies, operational processes and tools) and the HQT. The CCS and HQT were developed specific to the needs of the Sagebrush Ecosystem Program and the model for valuing Greater Sage-grouse habitat, quantifying GRSG habitat improvements (credits and disturbances (debits)). EI developed this unique set of tools that do not exist elsewhere.</i></p>												
4		<p>Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:</p> <p><i>No other vendor has the irreplaceable historical knowledge of the CCS, the expertise and experience related to developing habitat exchange mitigation programs, and the broad range of capabilities necessary to support the State with the successful launch of the CCS.</i></p>												
5		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 65%;">Were alternative services or commodities evaluated? Check One.</td> <td style="width: 10%; text-align: center;">Yes:</td> <td style="width: 10%; text-align: center;">No:</td> <td style="width: 15%; text-align: center;">XX</td> </tr> <tr> <td colspan="4"> <p>a. <u>If yes</u>, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.</p> <p><i>No other alternatives were evaluated because no other alternatives would provide the capabilities needed and the associated cost-efficiency that EI, the vendor who originally developed the CCS, has provided.</i></p> </td> </tr> <tr> <td colspan="4"> <p>b. <u>If not</u>, why were alternatives not evaluated?</p> <p><i>It would be very inefficient, costly and, potentially, risky for the State to use another organization or vendor without the unique technical capabilities and historical knowledge specific to the CCS.</i></p> </td> </tr> </table>	Were alternative services or commodities evaluated? Check One.	Yes:	No:	XX	<p>a. <u>If yes</u>, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.</p> <p><i>No other alternatives were evaluated because no other alternatives would provide the capabilities needed and the associated cost-efficiency that EI, the vendor who originally developed the CCS, has provided.</i></p>				<p>b. <u>If not</u>, why were alternatives not evaluated?</p> <p><i>It would be very inefficient, costly and, potentially, risky for the State to use another organization or vendor without the unique technical capabilities and historical knowledge specific to the CCS.</i></p>			
Were alternative services or commodities evaluated? Check One.	Yes:	No:	XX											
<p>a. <u>If yes</u>, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.</p> <p><i>No other alternatives were evaluated because no other alternatives would provide the capabilities needed and the associated cost-efficiency that EI, the vendor who originally developed the CCS, has provided.</i></p>														
<p>b. <u>If not</u>, why were alternatives not evaluated?</p> <p><i>It would be very inefficient, costly and, potentially, risky for the State to use another organization or vendor without the unique technical capabilities and historical knowledge specific to the CCS.</i></p>														

6	Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL</u> previous waivers <u>MUST</u> accompany this request.				Yes:	XX	No:	
	a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:</i>							
	Term Start and End Dates		Value	Short Description	Type of Procurement (RFP#, RFQ#, Waiver #)			
	12/3/13	12/31/17	\$999,029	Conservation Credit System	RFP #3092			
	12/12/17	12/31/19	\$200,000	Conservation Credit System	Waiver #171003			
			\$					
		\$						
		\$						

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>The state has already invested significantly in the existing CCS/HQT. A competitive bid will delay critical system improvements. Bringing in a new vendor could also create an inordinate amount of additional time for the staff to "train" the new vendor on the CCS, causing cost inefficiencies and increasing the risk to the State because it is critical that the State be responsive with the CCS to ensure we remain on track for not having the GRSG listed as an endangered species.</i>

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	<i>SEP members have been highly engaged in greater sage-grouse planning and mitigation discussions across the 11-state species range. In addition, program staff have been involved with regional policy discussions, and have attended numerous greater sage-grouse and mitigation conferences and forums over the past few years. The SEP has a thorough understanding of the organizations with the capabilities needed by the State for GRSG. Based on the extensive knowledge, the SEP believes that EI is the only vendor with the necessary qualifications and that the cost is fair and reasonable.</i>

9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:	XX	No:	
	a. <i>If yes, please provide details regarding future obligations or needs.</i>				
	<i>The state is working towards internal support and maintenance of the CCS and HQT in an effort to decrease the amount of funding necessary to support the system. However, given the relative newness of the program and the complexities of the GRSG mitigation, the State may need to enter into a contract with the vendor for specific improvements that the SEP may need as they continue to implement the CCS and run the HQT.</i>				

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.

Kelly M. Williams
Agency Representative Initiating Request

Kelly M. Williams
Print Name of Agency Representative Initiating Request

7/11/19
Date

[Signature]
Signature of Agency Head Authorizing Request

James R. Lawrence
Print Name of Agency Head Authorizing Request

7/11/19
Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns please contact the Purchasing Division at 775-684-0170.

Signed:

Kevin D. Doty
Administrator, Purchasing Division or Designee

7/22/19
Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22174**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4464-14**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Owyhee Air Research, Inc.**Contractor Name: **Owyhee Air Research, Inc.**Address: **3305 Airport Road**City/State/Zip: **Nampa, ID 83687**Contact/Phone: **John Romero 208-250-4104**Vendor No.: **T27030662**NV Business ID: **NV20111188452**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	20.00 % Sportsmen
X Federal Funds	62.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	18.00 % Heritage and Wildlife Trust Account

Agency Reference #: **RFP # 72DOW-S592 tb**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/11/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2023**Contract term: **4 years and 20 days**4. Type of contract: **Contract**Contract description: **Flight and Telemetry**

5. Purpose of contract:

This is a new contract to provide ongoing fixed wing aircraft services for monitoring wildlife movements, conducting wildlife surveys, and transporting agency personnel in the course of project work.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$750,000.00**

Other basis for payment: As invoiced by the Contractor and approved by the State

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Department of Wildlife has broad sweeping legislative authority to manage Nevada's wildlife species. This contract will assist in this management.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The state does not have the resources to accomplish this work.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

**K2 Aerial Application
 Morris Ag Air
 Owyhee Air Research**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #72DOW-S592, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 05/16/2019 Anticipated re-bid date: 05/16/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Nevada Department of Wildlife 2011 � Present
Services is satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Cody Schroeder, Wildlife Staff Specialist Ph: 775-688-1659

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nroble1	07/09/2019 10:08:45 AM
Division Approval	tdoucett	07/16/2019 14:34:03 PM
Department Approval	eobrien	07/17/2019 08:53:26 AM
Contract Manager Approval	nroble1	07/22/2019 09:16:17 AM
Budget Analyst Approval	mtum1	08/12/2019 16:08:21 PM
BOE Agenda Approval	cmurph3	08/14/2019 15:31:49 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22247**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4467-00**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **US Department of the Interior**Contractor Name: **US Department of the Interior**Address: **Bureau of Land Management
2800 Cottage Way, W-1623**City/State/Zip: **Sacramento, CA 95825**Contact/Phone: **Traci Thaler 916-978-4529**

Vendor No.:

NV Business ID: **Government Entity**To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

Agency Reference #: **20R-01**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **1 year and 303 days**4. Type of contract: **Revenue Contract**Contract description: **WL Survey/Hab Restor**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide wildlife survey, habitat and ecological restoration activities in northwest Nevada on land administered by the Bureau of Land Management.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$289,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

This revenue contract will ensure we can effectively receive monies to conduct wildlife and habitat projects.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Nevada Department of Wildlife will be doing this work, revenue contract.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

N/A since the Department will be providing wildlife services.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Mark Freese, Habitat Biologist Ph: 775-688-1145

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nroble1	08/05/2019 10:23:13 AM
Division Approval	tdoucett	08/07/2019 09:36:36 AM
Department Approval	eobrien	08/07/2019 12:09:37 PM
Contract Manager Approval	nroble1	08/07/2019 12:34:16 PM
Budget Analyst Approval	mtum1	08/12/2019 16:37:22 PM
BOE Agenda Approval	cmurph3	08/14/2019 15:28:57 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22230**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4162-04**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **Lyon County Road Division**Contractor Name: **Lyon County Road Division**Address: **18 Highway 95A North**City/State/Zip: **Yerington, NV 89447**Contact/Phone: **Dustin Homan 775-463-6551**

Vendor No.:

NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	20.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
X	Highway Funds	80.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

The agency is requesting a retroactive interlocal agreement for Walker River State Recreation Area. The contract was not approved by Lyon County until July 18, 2019.3. Termination Date: **06/30/2021**Contract term: **2 years**4. Type of contract: **Interlocal Agreement**Contract description: **Road repair**

5. Purpose of contract:

This is a new interlocal agreement to provide road maintenance for portions of roads and associated culverts with Lyon County Road Division.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$94,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The roads and culverts require maintenance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

We don't have the proper machinery or staff expertise.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

Yes If "Yes", please explain

They are a county agency.

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

They were under contract with Nevada State Parks for the past two years with satisfactory compliance.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Randy Denter, Park Supervisor Ph: 775-463-9824

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	07/26/2019 13:06:01 PM
Division Approval	sdecrona	07/26/2019 13:06:05 PM
Department Approval	sdecrona	07/26/2019 13:06:08 PM
Contract Manager Approval	sdecrona	07/26/2019 15:29:06 PM
Budget Analyst Approval	cpalme2	08/06/2019 14:31:20 PM
BOE Agenda Approval	cmurph3	08/14/2019 14:38:16 PM
BOE Final Approval	Pending	

STEVE SISOLAK
Governor

BRADLEY CROWELL
Director

Department of Conservation and
Natural Resources

ROBERT MERGELL
Administrator

STATE OF NEVADA



901 S. Stewart Street,
Suite 5005
Carson City, NV
89701-5248

Phone: (775) 684-2770
Fax: (775) 684-2777
stparks@parks.nv.gov
parks.nv.gov

DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
DIVISION OF STATE PARKS

July 26, 2019

MEMORANDUM

TO: Curtis Palmer, Budget Analyst
Robert Mergell, Administrator
Jennifer Idema, Administrative Service Officer
Bryan Stockton, Deputy Attorney General

FROM: Shirley DeCrona, Management Analyst

SUBJECT: Retroactive Inter local with Lyon County Road Division for Walker River State Recreation Area

Nevada State Parks will be reimbursing Lyon County Road Division for road and culvert maintenance for portions of Pitchfork and Rafter 7 of East Walker Road, Flying M portion of Pine Grove Road and Minister and Sweetwater road. There is additional maintenance required to portions of roads required to reach Walker River State Recreation Area.

I am requesting a retroactive inter local with Lyon County Road Division because we didn't have a commitment from NDOT and it wasn't approved by Lyon County until July 25, 2019. There will be road costs due to the park that will take place prior to the BOE meeting that will require county reimbursement.

The inter local is not to exceed \$94,000 for the two year term through June 30, 2021.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22197**Agency Name: **DCNR - FORESTRY DIVISION**Agency Code: **706**Appropriation Unit: **4194-00**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **Elko County, Nevada**Contractor Name: **Elko County, Nevada**Address: **571 Idaho Street**City/State/Zip: **Elko, NV 89801**Contact/Phone: **775-738-5398**

Vendor No.:

NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

Agency Reference #: **NDF19-050**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

NDF did not receive the signed agreement from Elko County in time to meet the BOE deadline for the June meeting.3. Termination Date: **06/30/2020**Contract term: **1 year**4. Type of contract: **Revenue Contract**Contract description: **Wildland Fire Protec**

5. Purpose of contract:

This is a new revenue interlocal agreement to provide ongoing services under the Wildland Fire Protection Program.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$600,000.00**

Payment for services will be made at the rate of \$150,000.00 per Quarter

Other basis for payment: Payable in advance on the first of each quarter beginning July 1, 2019 for State Fiscal Year 2020.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Nevada Division of Forestry and Elko County will work closely together to maintain effective wildfire management to quickly suppress wildland fire regardless of jurisdiction and/or ownership. It is considered mutually beneficial to all parties to jointly take action as necessary to safely and effectively contain all wildland fires.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a revenue contract to the Division of Forestry. State employees will be utilized to perform work for which the county will make payment to the Division.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Not Applicable

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Elko County is currently under contract for the Wildland Fire Protection Program and has been since January 2015.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Boullier, Ron, State Fire Program Manager Ph: 775-684-2556

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dgree6	07/17/2019 09:04:46 AM
Division Approval	dgree6	07/17/2019 09:04:49 AM
Department Approval	dgree6	07/17/2019 09:04:55 AM
Contract Manager Approval	jcoope8	07/24/2019 11:26:12 AM
Budget Analyst Approval	cpalme2	07/29/2019 12:16:30 PM
BOE Agenda Approval	cmurph3	07/30/2019 13:34:38 PM
BOE Final Approval	Pending	



STATE OF NEVADA
DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES
NEVADA DIVISION OF FORESTRY
2478 Fairview Drive
Carson City, Nevada 89701
Phone (775) 684-2500 Fax (775) 684-2570

MEMORANDUM

DATE: July 16, 2019

TO: Curtis Palmer, Executive Branch Budget Officer
Governor's Finance Office

FROM: Kacey KC, State Forester

A handwritten signature in blue ink, appearing to be "Kacey KC", is written over the "FROM:" line.

RE: Request for Retroactive start date approval for WFPP Contract with Elko County, CETS #22197

This memorandum requests that the above referenced Nevada Division of Forestry (NDF) contract be approved with a retroactive effective date of July 1, 2019. It is of critical importance that the Division implements this revenue contract in order to continue to procure resources that will provide protection of life and property for the citizens of this State.

NDF and Elko County have been in negotiation for continued participation in the Wildland Fire Protection Program for several months. It has always been the intention of both parties for this agreement to be effective on July 1, 2019 as the current contract for this service expired on June 30, 2019. A delay in getting this agreement on the Elko County Commissioners' meeting agenda prevented NDF from meeting the Board of Examiners' deadline for the June meeting.

Thank you for your consideration of this request. Should you have any questions, or require additional information, please do not hesitate to contact me at 775.684.2501.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22246**Agency Name: **DEPARTMENT OF MOTOR VEHICLES**Agency Code: **810**Appropriation Unit: **4717-26**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Explore Information Services, LLC**Contractor Name: **Explore Information Services, LLC**Address: **2750 BLUE WATER R STE 200**City/State/Zip: **Eagan, MN 55121**Contact/Phone: **John Christenson 651-405-4268**Vendor No.: **T32008341**NV Business ID: **NV20021140479**To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	66.70 %	Bonds	0.00 %
X Highway Funds	33.30 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/26/2020**Contract term: **1 year and 117 days**4. Type of contract: **Contract**Contract description: **IRP IFTA System**

5. Purpose of contract:

This is a new contract to provide a system which recognizes the registration of commercial motor vehicles registered by other jurisdictions. The system provides for payment of apportioned licensing fees based on the total distance operated in all member jurisdictions.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$1,200,000.00**

Other basis for payment: Basis of payment made per milestone met within time frames stated in the Scope of Work

II. JUSTIFICATION

7. What conditions require that this work be done?

Intermodal Surface Transportation Efficiency Act of 1991 (ISTEA) requires all states to participate in International Registration Program (IRP) to establish, maintain or enforce commercial motor vehicle registration law, regulation or agreement that limits the operation in that State of a commercial motor vehicle that is not registered under the laws of the State, if the vehicle is registered under the laws of a State participating in the Plan (� 31704. Vehicle Registration); and International Fuel Tax Agreement (IFTA) to maintain compliance with the IFTA Articles of Agreement, Procedure Manual, Audit Manual and the Clearinghouse information exchange protocols and procedures.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

None have the knowledge or resources to perform the duties needed9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 190501

Approval Date: 05/03/2019

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Debbie Martinez, Management Analyst II Ph: 775-684-4515

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bmusselm	08/06/2019 14:14:35 PM
Division Approval	bmusselm	08/06/2019 14:14:39 PM
Department Approval	asmit3	08/06/2019 16:03:38 PM
Contract Manager Approval	nlope4	08/06/2019 16:05:30 PM
EITS Approval	daxtel1	08/15/2019 17:01:22 PM
Budget Analyst Approval	bmacke1	08/16/2019 11:15:20 AM
BOE Agenda Approval	jrodrig9	08/19/2019 22:03:48 PM
BOE Final Approval	Pending	

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Steve Sisolak
Governor

Deonne E. Contine
Director

Kevin D. Doty
Acting Administrator

Purchasing Use Only:

Approval#: 190501

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency: <i>Department of Motor Vehicles</i>		
	Contact Name and Title	Phone Number	Email Address
	<i>Melaine Mason, MA 4</i>	<i>775-684-4501</i>	<i>mmason@dmv.nv.gov</i>

1b	Vendor Information:	
	Identify Vendor:	<i>Explore Information Services, LLC</i>
	Contact Name:	<i>John Christenson@exploredata.com</i>
	Address:	<i>2900 Lone Oak Parkway Ste. 140, Eagan, MN 55121</i>
	Telephone Number:	<i>(651) 405-4268</i>
	Email Address:	<i>John.christenson@exploredata.com</i>

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	<i>X</i>
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract?	Yes	<i>X</i>	No
	Amendment:	#		
	CETS:	#		

1e	Term:				
	One (1) Time Purchase:				
	Contract:	Start Date:	<i>Upon approval</i>	End Date:	<i>12/26/2020</i>

1f	Funding:	
	State Appropriated:	<i>\$1,013,200.00</i>
	Federal Funds:	<i>\$800,000.00</i>
	Grant Funds:	
	Other (Explain):	

1g	Total Estimated Value of this Service Contract, Amendment or Purchase:
	<i>\$1,813,200.00</i>

Provide a description of work/services to be performed or commodity/good to be purchased:

The Department of Motor Vehicles (DMV) is responsible for administering and implementing commercial motor vehicle registrations to include both based plated (100% Nevada) traveling intrastate; and apportioned (2 or more jurisdictions) under International Registration Plan (IRP). IRP provides a single point of registration to travel across the entire continental US and Canada. Registration fees are paid to the "base jurisdiction" and distributed to the jurisdictions where travel occurred on an apportioned basis.

The current in-house COBOL registration system is unable to update federal databases within required timeframes; check carrier safety status; offer web access for external uses; and identify, collect and maintain the USDOT Number and Tax Identification Number (TIN) for the Motor Carrier Responsible for Safety (MCRS) at the vehicle level to comply with Performance and Registration Information System (PRISM) federal mandates of October, 2020. Additionally, the Department of Public Safety, Highway Patrol Division (DPS) receives funding from the Motor Carrier Safety Assistance Program (MCSAP) Grant with PRISM being a component of that grant funding.

The Intermodal Surface Transportation Efficiency Act of 1991 (ISTEA) requires the State of Nevada to be a member of both the International Registration Plan (IRP) and the International Fuel Tax Agreement (IFTA).

2 Due to the current IFTA system having no provisions for filing amended, corrected or audited returns and having no financial component; resulting in IFTA non-compliance DMV/Motor Carrier Division (MCD) entered into a Joinder contract with the Commonwealth of Kentucky Finance and Administration Cabinet in May, 2018 through December 26, 2020, with an option to renew for 2 years (CETS #19931). Kentucky (KY) holds a contract with Explore Information Services, LLC (Explore) in which they maintain and host the IFTA Processing Consortium (IPC) system. The IFTA IPC was founded by the jurisdictions of California, Connecticut, Kentucky, Maryland, Michigan and New Hampshire for the purpose of maintaining compliance with the IFTA Articles of Agreement, Procedures manual, and Audit Manual. IPC jurisdictions achieve efficiencies, cost savings and compliance thru their collective expertise, collaboration, and a shared cost model.

Explore offers an IRP and IFTA software solution. The IRP software solution includes: on-line capabilities to provide customers the ability to manage accounts (electronic filing, credentialing, correspondence and payments), check carrier safety status before issuing registration, capture the MCRS at the vehicle level, audit module and permitting capabilities. Having Explore provide for both program requirements allows for a seamless experience by Nevada's motor carrier's utilizing one login, a reduction in pricing to add on the IRP platform through Explore, and is congruent with the IPC moving towards one vendor providing both platforms. Commonwealth of Kentucky is working with Explore to expand the platform to include the IRP software solution. Based on information from the Commonwealth of Kentucky, they are hopeful to have the agreement with Explore completed by the end of June

Information provided to Nevada DMV is that prior to the expiration of the existing IFTA contract through the IPC, the IPC will be soliciting for a single vendor providing both platforms. At such time the contract is solicited and awarded, it is intention of Nevada DMV to once again enter into a joinder contract to gain the benefits of collaborative pricing, optimize work flows with web-based service delivery and electronic

	communications inherent with the pooling of resources to achieve the consortiums' common goal.
--	--

	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
3	<p>Explore provides a common customer account for both IRP and IFTA with a single login and integrated account information for staff and customers; along with simplified audit validation. A common account for both IRP and IFTA will improve efficiencies by reducing operational costs and significantly improves customer service.</p> <p>Explore estimates the IRP system to be operational for internal users in 4-5 months and for external users 3-6 months later.</p> <p>Explore is in the process of completing the IFTA financial interface which can be used for IRP also.</p>

	Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:
4	<p>The Department is currently in a Joinder contract with the Commonwealth of Kentucky to participate in the IFTA Processing Consortium (IPC) which is hosted by Explore Data Services. No other service provider has authority to integrate their IRP system with the IPC solution. Additionally, when the IFTA solutions available were considered, Explore offered one of the lowest implementation costs for both their IRP and IFTA solutions.</p>

	Were alternative services or commodities evaluated? Check One.	Yes:	No:	
	a. <i>If yes, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.</i>			
	Due to the Emergent business needs to replace the IFTA system, the DMV was authorized to enter into a joinder contract which allows State Agencies the ability to "join" or use a contract that had been competitively bid by another governing body outside of the state, which in this instance was the Common Wealth of Kentucky.			
5	However, prior to requesting authority to join the contract with Kentucky, all five (5) vendors offering both IRP and IFTA solutions were considered at that time. Even without going through the Joinder process with Kentucky, Explore offered one of the lowest implementation costs for both their IRP and IFTA solutions.			
	b. <i>If not, why were alternatives not evaluated?</i>			

	Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL</u> previous waivers <u>MUST</u> accompany this request.	Yes:	No:	
6	a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:</i>			

<i>Term Start and End Dates</i>		<i>Value</i>	<i>Short Description</i>	<i>Type of Procurement (RFP#, RFQ#, Waiver #)</i>
<i>10/13/2009</i>	<i>11/30/17</i>	<i>\$1,868,386.34</i>	<i>Xerox State & Local Solutions</i>	<i>Waiver #090905- see attached</i>
		\$		
		\$		
		\$		
		\$		

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<p>If the State of Nevada had to competitively bid for IRP services there is a potential for the loss of \$800,000 in grant funding due to expire September 30, 2019, as well as higher maintenance fees when utilizing a vendor other than Explore, which offers both programs on the same platform.</p> <p>The current vendor providing IRP services, Xerox State and Local Solutions, Inc., provided notice of termination of the contract effective June 2019. The ability for DMV and State Purchasing to procure a vendor in a short period of time would not reasonably be completed by the end of June. Thus, Nevada DMV is in jeopardy of losing the ability to comply with IRP as well as provide the services to the motor carrier companies.</p> <p>Most notable, utilizing the same platform for IFTA and IRP services provides the user with one login, a seamless experience, and the ease of managing one software program rather than two potentially different platforms.</p>

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	<p>IFTA solutions are available through a variety of vendors. The DMV reached out to five (5) vendors and received quotes back from all five of those vendors on the IFTA and IRP systems. Explore came in below the average range provided from those quotes, thus DMV is confident in providing the information regarding the reduced maintenance expense. The reason for the lower cost to the State is due to the shared costs and resources of the IPC consortium.</p> <p>The IPC consortium plans to solicit IFTA and IRP systems as the existing IFTA contract reaches its expiration. During this process, competitive vendors providing both solutions will apply and a vendor will be selected. It is the intention of Nevada DMV to participate in this solicitation process, as well as enter into a joinder to the benefits of collaborative pricing.</p>

9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:		No:	
	a. If yes, please provide details regarding future obligations or needs.				
	The only obligation will be during the expenses identified as part of the contract. Once the contract expires, all obligations to that vendor cease.				

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.

Melaine Mason
Agency Representative Initiating Request

Melaine Mason, MA 4
Print Name of Agency Representative Initiating Request

05/02/2019
Date

Angela Smith Lamb
Signature of Agency Head Authorizing Request

Angela Lamb, Administrator
Print Name of Agency Head Authorizing Request

05/02/2019
Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns please contact the Purchasing Division at 775-684-0170.

Signed:

Kevin D. Doty
Administrator, Purchasing Division or Designee

5/3/19
Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **15604**Amendment Number: **4**Agency Name: **DEPARTMENT OF MOTOR VEHICLES**Legal Entity Name: **OpSec Security, Inc.**Agency Code: **810**Contractor Name: **OpSec Security, Inc.**Appropriation Unit: **4745-18**Address: **1857 Colonial Village Lane
PO Box 10155**Is budget authority available?: **Yes**City/State/Zip: **Lancaster, PA 17601**If "No" please explain: **Not Applicable**Contact/Phone: **Robert A. White 717-293-4110**Vendor No.: **T29035128**NV Business ID: **NV20141263952**To what State Fiscal Year(s) will the contract be charged? **2014-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

X Highway Funds **100.00 %** Other funding 0.00 %Agency Reference #: **RFP #3053**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **06/12/2014**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **09/30/2019**

Termination Date:

Contract term: **10 years and 21 days**4. Type of contract: **Contract**Contract description: **TempTag Issuance Sys**

5. Purpose of contract:

This is the fourth amendment to the original contract which provides for a contractor-provided and supported automated dealer placard issuance process. This amendment reduces the maximum amount from \$3,053,758 to \$2,749,933.84 and extends the termination date from September 30, 2019 to June 30, 2024 due to the continued need for these services and the approval of AB532 (2019 Legislative Session) providing the vendor with the authority to control the inventory of the tags, thus charging the dealerships directly.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$2,292,500.00	\$2,292,500.00	\$2,292,500.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
b. Amendment 2:	\$761,258.00	\$761,258.00	\$761,258.00	Yes - Action
c. Amendment 3:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#4):	-\$303,824.16	-\$303,824.16	-\$303,824.16	Yes - Action
3. New maximum contract amount:	\$2,749,933.84			

II. JUSTIFICATION

7. What conditions require that this work be done?

The Department is required to supply sellers and lessors of vehicles temporary placards for use by the new owner to operate a vehicle until permanent registration is obtained. The new placards will include security sticker and electronic transmission of data to allow access for law enforcement.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have the means to support an automated dealer placard issuance process.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #3053, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: Anticipated re-bid date: 06/01/2017

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bmusselm	07/30/2019 16:35:24 PM
Division Approval	bmusselm	07/30/2019 16:35:32 PM
Department Approval	asmit3	07/30/2019 16:54:57 PM
Contract Manager Approval	nlope4	07/30/2019 17:20:22 PM
EITS Approval	daxtel1	07/31/2019 16:57:51 PM
Budget Analyst Approval	bmacke1	08/12/2019 08:50:08 AM
BOE Agenda Approval	jrodrig9	08/19/2019 22:29:17 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **18924**Amendment
Number: **2**Agency Name: **DETR - EMPLOYMENT SECURITY**Legal Entity
Name: **The CAREER INDEX CORPORATION**Agency Code: **902**Contractor Name: **The CAREER INDEX CORPORATION**Appropriation Unit: **4770-11**Address: **1078 W PENINSULA DR**Is budget authority
available?: **Yes**City/State/Zip: **COEUR D ALENE, ID 83814-7793**If "No" please explain: **Not Applicable**Contact/Phone: **K.D. Nygaard 888-558-1658**Vendor No.: **T32005302**NV Business ID: **NV 2017145474770**To what State Fiscal Year(s) will the contract be charged? **2018-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **3078-19-REHAB**

2. Contract start date:

a. Effective upon Board of
Examiner's approval? **No** or b. other effective date **08/08/2017**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved **09/30/2019**

Termination Date:

Contract term: **4 years and 54 days**4. Type of contract: **Contract**Contract description: **SARA**

5. Purpose of contract:

This is the second amendment to the original contract which provides a software solution to the gathering and reporting of the data required for the common performance measures contained in the Workforce Innovation and Opportunity Act. This amendment increases the maximum amount from \$821,300 to \$1,399,100 and extends the termination date from September 30, 2019 to September 30, 2021 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$821,300.00	\$821,300.00	\$821,300.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#2):	\$577,800.00	\$577,800.00	\$577,800.00	Yes - Action
3. New maximum contract amount:	\$1,399,100.00			
and/or the termination date of the original contract has changed to:	09/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

The purpose of the SARA project a solution to the gathering and reporting of the data required for the common performance measures contained in the Workforce Innovation and Opportunity Act (WIOA) across case management systems for the core partners without modifying these existing systems. The project also seeks to increase the core partners ability to share common clients and documentation and recording for those clients.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This project spans multiple State and local participating agencies. There is no State agency which provides similar services.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

- a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 190802

Approval Date: 08/06/2019

- c. Why was this contractor chosen in preference to other?

Vendor selected by Rehabilitation Services Administration for pilot program for these services. Nevada was selected as one of three states to participate in the pilot. An additional grant opportunity provided for funding to include additional partner agencies for the duration of the project.

- d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? Yes

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval

mjohns43

08/05/2019 15:07:06 PM

Division Approval	mjohns43	08/05/2019 15:42:59 PM
Department Approval	mjohns43	08/05/2019 15:43:06 PM
Contract Manager Approval	mjohns43	08/05/2019 15:43:11 PM
EITS Approval	daxtel1	08/13/2019 09:42:50 AM
Budget Analyst Approval	cbrekken	08/13/2019 11:19:40 AM
BOE Agenda Approval	tgreenam	08/14/2019 08:16:28 AM

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Steve Sisolak
Governor

Deonne E. Contine
Director

Kevin D. Doty
Acting Administrator

Purchasing Use Only:

Approval#: **190802**

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency: <i>Department of Employment, Training and Rehabilitation</i>		
	Contact Name and Title	Phone Number	Email Address
	<i>Mariruth Johnson</i>	<i>775-684-3823</i>	<i>m-johnson@detr.nv.gov</i>
	<i>Andrea Allen</i>	<i>775-684-3865</i>	<i>aeallen@detr.nv.gov</i>

1b	Vendor Information:	
	Identify Vendor:	<i>The Career Index Corporation</i>
	Contact Name:	<i>KD Nygaard</i>
	Address:	<i>1078 W Peninsula Dr, Coeur D'Alene, ID 83184</i>
	Telephone Number:	<i>888-558-1658 ext 804</i>
	Email Address:	<i>kdn@thecareerindex.com</i>

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	<input checked="" type="checkbox"/>
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> X
	Amendment:	<i>Amendment 2</i>		
	CETS:	<i># 18924</i>		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	End Date:	
		<i>10-01-2019</i>	<i>09-30-2021</i>	

1f	Funding:	
	State Appropriated:	
	Federal Funds:	<input checked="" type="checkbox"/> X
	Grant Funds:	
	Other (Explain):	

1g	Total Estimated Value of this Service Contract, Amendment or Purchase:
	<i>\$580,800.00</i>

2	<p>Provide a description of work/services to be performed or commodity/good to be purchased:</p> <p><i>The proposed action under this justification and approval is to provide a continued pilot program that utilizes the automated, web-based mobile compatible virtual assistant (SARA) to communicate with clients of DETR Vocational Rehabilitation (VR) and Employment Security Divisions, Local Workforce Development Boards, Department of Education and DHHS Division of Welfare Support Services. It also shares data to clients between partner agencies and has the potential to be a common intake system, increasing efficiency and improving quality of service to clients. The continuation of this pilot program is necessary as the Welfare Support Services were not included in the original pilot and continued testing is required to ensure that the application can be used as a common performance reporting tool.</i></p>
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3	<p>What are the unique features/qualifications required for this service or good that are not available from any other vendor:</p> <p><i>During the initial and continuation of the pilot program, The Career Index Corporation's technology was developed as a client engagement and communications system that automatically gathers needed information as the right time from participants and providers without staff intervention. Using artificial intelligence (AI) and natural language processing, it can engage in intelligent, two-way communications with participants and third parties using two-way SMS (texting), email and interactive voice response (IVR). In the continuation of the pilot, agencies such as the Division of Welfare Support will have access to SARA allowing staff across agencies to communicate directly with clients using both Text Messaging and Email from within the system. All outgoing and incoming emails and text messages are automatically made part of the client case notes thus eliminating the need for transcription and copy and paste. SARA can also share participant information between selected staff members. For example, a case manager can easily share a specific participant with a selected counselor and vice versa. SARA includes an Application Programming Interface (API) that can push generated case notes to virtually any Case Management System in near real-time. SARA will reduce redundancy in service delivery among the partner agencies and enable the State to meet the requirements of Federal Workforce Innovation and Opportunity Act (WIOA) and fulfill the goals outlined in Nevada's Unified State Plan to deliver core and intensive services to dislocated workers and other job-seeking clients.</i></p>
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4	<p>Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:</p> <p><i>In the initial pilot, it was based on information from the Rehabilitation Division's Federal oversight agency, Rehabilitation Services Administration (RSA) have determined that no other such Vocational rehabilitation-specific product exists currently in the marketplace. Upon the continuation of the pilot program, it was found that SARA is part of a program funded by RSA. The Career Index Corporation is the only source able to meet the requirements in the original and continuation pilot. Therefore; only one responsible source. Welfare (Title 1 partner) remains within the pilot because the pilot was extended due to their late entry under the grant. TCI is permitting 94 free seats extension for an additional year -- expires 09-30-2020 for Welfare with the continuation of the pilot program.</i></p>
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5	<p>Were alternative services or commodities evaluated? Check One. Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/></p> <p>a. <i>If yes, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.</i></p> <p>b. <i>If not, why were alternatives not evaluated?</i></p>
---	---

	<i>The RSA, through its Workforce Innovation Technical Assistance Center chose The Career Index program to solve data sharing and reporting requirements for states to meet WIOA requirements for the original pilot program. The RSA has also chosen The Career Index program for a continuation pilot program and DETR has made a significant investment of over \$1,000,000 trying to comply with the integration and reporting mandates of WIOA with The Career Index.</i>
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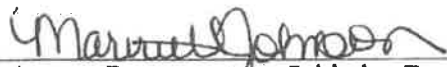
6	Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL</u> previous waivers <u>MUST</u> accompany this request.			Yes:	X	No:	
	a. If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:						
	Term Start and End Dates		Value	Short Description	Type of Procurement (RFP#, RFQ#, Waiver #)		
	08-08-17	09-30-19	\$0.00	Amend negotiated items	Amendment 1/Waiver #170502		
	08-08-17	09-30-19	\$821,300.00	Original Contract with Solicitation Waiver	Waiver #170502		
		\$					

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>The denial of a continuation of the original pilot program will result as a loss of Federal grant funding for Statewide implementation, loss of the ability to use a common intake system between all WIOA core programs, thus increasing work force and slow down to client services and the citizens of Nevada.</i>

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	<i>In research of the original and continuation of this pilot program, staff spoke with other state's VR programs and searched internet for similar services. In consideration of the continuation of the pilot program, staff found recent sole source justification by the Department of Veterans Affairs for same vendor.</i>

9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:		No:	X
	a. If yes, please provide details regarding future obligations or needs.				

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.



Agency Representative Initiating Request

Mariruth Johnson

Print Name of Agency Representative Initiating Request

8-2-19

Date



Signature of Agency Head Authorizing Request

Kimberly S. Gaa

Print Name of Agency Head Authorizing Request

8-2-19

Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns please contact the Purchasing Division at 775-684-0170.

Signed:



Administrator, Purchasing Division or Designee

8/6/19

Date

Brian Sandoval
Governor



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

Enterprise I.T. Services Division

100 N. Stewart Street, Suite 100 | Carson City, NV 89701
Phone: (775) 684-5800

Patrick Cates
Director

Michael Dietrich
State CIO

David Haws
EITS Administrator

DATE: September 17, 2018

TO: Kimberly Gaa, IDP Administrator, DETR
Mikki Reed, MA III, DETR
Kathleen B. DeSocio, ASO 4, DETR

CC: David Haws, Administrator, DOA, EITS

FROM: Tim Lewis, Technical Investment Administrator, DOA, EITS

SUBJECT: TIN Review: *DETR Budget 4770 Category 26*

We completed the review of the *Category 26* TIN for budget 4770. The TIN documents DETR's planning for replacement equipment (E710 and E720), software maintenance and other IT support costs for the 20/21 biennium.

If I can be of further assistance, please feel free to contact me.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **13330**Amendment Number: **4**Agency Name: **PUBLIC EMPLOYEES BENEFITS**Legal Entity Name: **HEALTHSCOPE BENEFITS, INC.**Agency Code: **950**Contractor Name: **HEALTHSCOPE BENEFITS, INC.**Appropriation Unit: **1338 - All Categories**Address: **27 CORPORATE HILL DR**Is budget authority available?: **Yes**City/State/Zip: **LITTLE ROCK, AR 72205-4537**

If "No" please explain: Not Applicable

Contact/Phone: **501/218-7810**Vendor No.: **T29028424**NV Business ID: **NV20011223201**To what State Fiscal Year(s) will the contract be charged? **2013-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % 67% State Subsidy/ 33% Premium Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2012**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

The revised fee schedule for PPO Network rates has a start date of July 1, 2019, beginning Plan Year 2020, to implement a reduction in PEBP's program costs. The alternative is to delay implementation of the reduced fee schedule beyond July 1, 2019 and pay higher program fees.

3. Previously Approved Termination Date: **06/30/2022**Contract term: **10 years and 1 day**4. Type of contract: **Contract**Contract description: **National PPO**

5. Purpose of contract:

This is the fourth amendment to the original contract to which provides a medical Preferred Provider Organization network for participants who reside outside of Nevada and for those who live in Nevada and choose to seek medical services out of state. This amendment decreases the maximum amount of the contract from \$15,540,000 to \$15,455,000 due decreasing the per participant per month charge for participants who live out of state effective July 1, 2019.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$8,900,000.00	\$8,900,000.00	\$8,900,000.00	Yes - Action
a. Amendment 1:	\$3,000,000.00	\$3,000,000.00	\$3,000,000.00	Yes - Action
b. Amendment 2:	\$3,640,000.00	\$3,640,000.00	\$3,640,000.00	Yes - Action
c. Amendment 3:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#4):	-\$85,000.00	-\$85,000.00	-\$85,000.00	Yes - Action
3. New maximum contract amount:	\$15,455,000.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

PEBP provides medical coverage for its participants residing in-state and out-of-state as a part of the standard benefits package offered to active employees and retirees.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State of Nevada does not maintain medical networks.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was chosen by the evaluation committee and ratified by the PEBP Board for its ability to provide network discounts, beneficial negotiation rates, scope of network availability and no contract exceptions. This vendor is also PEBP's current Third Party Administrator.

d. Last bid date: 09/01/2006 Anticipated re-bid date: 09/01/2015

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

HealthSCOPE Benefits is PEBP's current Third Party Administrator. PEBP is very satisfied by the services provided by HealthSCOPE.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ceaton	06/04/2019 10:15:26 AM
Division Approval	ceaton	06/04/2019 10:15:38 AM

Department Approval	ceaton	06/04/2019 10:15:50 AM
Contract Manager Approval	ceaton	08/01/2019 15:57:11 PM
Budget Analyst Approval	lfree1	08/13/2019 11:15:11 AM
BOE Agenda Approval	lfree1	08/13/2019 11:15:24 AM



ACCREDITED

CORE
Expires 04/01/2021

STEVE SISOLAK
Governor

Deonne Contine
Board Chair

STATE OF NEVADA
PUBLIC EMPLOYEES' BENEFITS PROGRAM
901 S. Stewart Street, Suite 1001 | Carson City, Nevada 89701
Telephone 775-684-7000 | 1-800-326-5496 | Fax 775-684-7028
www.pebp.state.nv.us

DAMON HAYCOCK
Executive Officer

DATE: July 25, 2019
TO: Laura Freed, Budget Analyst
FROM: Cari Eaton, Chief Financial Officer
SUBJECT: HealthScope Benefits Contract 13330 Amendment #4

Laura,

Please find attached three copies of retroactive Contract 13330 Amendment #4 for Board of Examiners Approval. This amendment reduces the contract max and revises Attachment DD, Updated Fee Schedule Effective 07/01/2019. The PEBP Board ratified this amendment on July 25, 2019. This amendment is retroactive because negotiations occurred in May 2019 and the next time the contract amendment could be added to a PEBP Board agenda to be ratified was not until the July 2019 meeting. Please feel free to contact me with any questions that you may have regarding this amendment.

Please call me at 775-684-7006 when this contract is ready for pick-up.

Thank you.

Please let me know if you have any questions, I can be reached at 684-7006 or ceaton@peb.nv.gov.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22194**Agency Name: **BDC LICENSING BOARDS & COMMISSIONS**Agency Code: **BDC**Appropriation Unit: **B001 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Kaempfer Crowell**Contractor Name: **Kaempfer Crowell**Address: **50 W Liberty Street, Suite 700**City/State/Zip: **Reno, NV 89501**Contact/Phone: **Michael Hillerby 775-852-3900**

Vendor No.:

NV Business ID: **NV19941041279**To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Licensure
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date: **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **2 years and 303 days**4. Type of contract: **Contract**Contract description: **Government Affairs**

5. Purpose of contract:

This is a new contract to provide government affairs assistance to the Board.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$61,200.00**

Payment for services will be made at the rate of \$1,800.00 per Month

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS Chapter 628 requires the Nevada State Board of Accountancy to recommend the creation and/or amendment of laws regarding the practice of public accountancy in the State of Nevada. To complete this legislative requirement, it is a necessity for the Board to receive expert advice on government affairs. In addition, the issues require special skills, expertise and knowledge of an experienced legislative liaison to assure optimal results for the Board and the citizens it services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Assistance and time is needed in the planning and dissemination of information to legislative members with the expertise and required knowledge of the Nevada Legislature. The Board operates with a staff of two and does not have the ability, expertise or knowledge that can be uniquely performed by the contractor.

9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

The Ferraro Group
Carrara Group LLC
Kaempfer Crowell

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The contractor has unique knowledge, experience and a long history representing a variety of Nevada State Boards. The contractor has also represented the professional membership organization and has a vast knowledge of the regulation of certified public accountants. The Board of Accountancy has utilized the services of the contractor for many years which provides continuity of services. Also the other individual that were provided an informal solicitation letter respectfully declined to submit proposals.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Nevada State Board of Accountancy, Nevada State Board of Pharmacy, Nevada State Board of Nursing

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	vwind1	07/15/2019 14:15:07 PM
Division Approval	vwind1	07/15/2019 14:15:11 PM
Department Approval	vwind1	07/15/2019 14:15:15 PM
Contract Manager Approval	vwind1	07/15/2019 14:15:19 PM
Budget Analyst Approval	lfree1	07/19/2019 09:43:16 AM
BOE Agenda Approval	lfree1	07/19/2019 09:43:19 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22223**Agency Name: **BDC LICENSING BOARDS & COMMISSIONS**Agency Code: **BDC**Appropriation Unit: **B011 - All Categories**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **J. A. Solari and Partners, LLC**Contractor Name: **J. A. Solari and Partners, LLC**Address: **500 Damonte Ranch Parkway, Suite 1008**City/State/Zip: **Reno, NV 89521**Contact/Phone: **775-827-3550**

Vendor No.:

NV Business ID: **NV20111407891**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Licensure
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/10/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/05/2022**Contract term: **2 years and 361 days**4. Type of contract: **Contract**Contract description: **Audit**

5. Purpose of contract:

This is a new contract to provide annual audited financial statements, semiannual cash receipt testing and other accounting services as needed.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$165,132.00**

Other basis for payment: 1st year \$53,425; 2nd year \$55,028; 3rd year \$56,679 Paid as performed.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board requires an independent accounting firm to carry out its annual financial statement audit per NRS 218G.40.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Contractor is an independent Certified Public Accountant qualified to perform an independent examination of the financial accounting records of the Nevada State Contractors Board.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Nevada State Contractors Board

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dlumbert	07/25/2019 12:51:22 PM
Division Approval	dlumbert	07/25/2019 12:51:24 PM
Department Approval	dlumbert	07/25/2019 12:51:27 PM
Contract Manager Approval	dlumbert	07/25/2019 12:51:31 PM
Budget Analyst Approval	lfree1	08/12/2019 16:12:15 PM
BOE Agenda Approval	lfree1	08/12/2019 16:12:41 PM
BOE Final Approval	Pending	

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.		VARIOUS STATE AGENCIES	A HOME FOR YOU, LLC	OTHER: VARIOUS AGENCIES	\$250,000	
	Contract Description:	This is a new contract to provide community based living arrangement services statewide.				
	Term of Contract:		Upon Approval - 06/30/2022	Contract # 22243		
2.		VARIOUS STATE AGENCIES	AT&T CORP.	OTHER: VARIOUS AGENCIES	\$3,000,000	
	Contract Description:	This is a new contract to provide ongoing long distance voice and data services statewide.				
	Term of Contract:		10/01/2019 - 09/30/2021	Contract # 22249		
3.		VARIOUS STATE AGENCIES	ANGELIC PERSONAL CARE ATTENDANTS, LLC	OTHER: VARIOUS AGENCIES	\$400,000	
	Contract Description:	This is a new contract to provide personal care services statewide.				
	Term of Contract:		Upon Approval - 06/30/2022	Contract # 22244		
4.		VARIOUS STATE AGENCIES	COLLABORATIVE TECHNOLOGY SOLUTIONS, LLC	OTHER: VARIOUS AGENCIES	\$300,000	
	Contract Description:	This is a new contract to provide blind and low vision medical technology services statewide.				
	Term of Contract:		Upon Approval - 06/30/2022	Contract # 22206		
5.		VARIOUS STATE AGENCIES	DIVERSIDAD, LLC	OTHER: VARIOUS AGENCIES	\$225,000	
	Contract Description:	This is a new contract to provide translation and interpretation services statewide.				
	Term of Contract:		Upon Approval - 01/15/2022	Contract # 22241		
6.		VARIOUS STATE AGENCIES	ENVIRONMENTAL PROTECTION SERVICES	OTHER: VARIOUS AGENCIES	\$500,000	
	Contract Description:	This is a new contract to provide ongoing bat gate construction and installation services statewide.				
	Term of Contract:		10/01/2019 - 09/30/2023	Contract # 22193		
7.		VARIOUS STATE AGENCIES	M D DEVELOPMENTAL AGENCY, LLC	OTHER: VARIOUS AGENCIES	\$400,000	
	Contract Description:	This is a new contract to provide early childhood development services statewide.				
	Term of Contract:		Upon Approval - 06/30/2022	Contract # 22245		
8.		VARIOUS STATE AGENCIES	MT FEELINGS, LLC	OTHER: VARIOUS AGENCIES	\$250,000	
	Contract Description:	This is a new contract to provide marriage and family therapy services statewide.				
	Term of Contract:		Upon Approval - 06/30/2022	Contract # 22226		

MASTER SERVICE AGREEMENT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
9.		VARIOUS STATE AGENCIES	NEIGHBOR NETWORK OF NORTHERN NEVADA	OTHER: VARIOUS AGENCIES	\$400,000	
	Contract Description:	This is a new contract to provide community based behavioral services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 22208		
10.		VARIOUS STATE AGENCIES	ORENDA THERAPEUTIC SERVICES, PLLC	OTHER: VARIOUS AGENCIES	\$250,000	
	Contract Description:	This is a new contract to provide marriage and family therapy services statewide.				
		Term of Contract:	Upon Approval - 06/30/2022	Contract # 22225		
11.		VARIOUS STATE AGENCIES	THOMAS PETROLEUM, LLC	OTHER: VARIOUS AGENCIES	\$10,000,000	
	Contract Description:	This is the second amendment to the contract which provides a statewide electronic fuel dispensing and card lock system. This amendment extends the termination date from September 30, 2019 to March 30, 2021 and increases the maximum amount from \$20,000,000 to \$30,000,000 due to the continued need for these services.				
		Term of Contract:	04/01/2015 - 03/30/2021	Contract # 16309		

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22243**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: A Home for You, LLC

Contractor Name: **A Home for You, LLC**Address: **3208 Cedar Point Way**City/State/Zip: **North Las Vegas, NV 89031**

Contact/Phone: Patricia Johnson-Robinson 706-409-4717

Vendor No.: T27043049

NV Business ID: NV20181767280

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: RM167

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **2 years and 303 days**4. Type of contract: **MSA**Contract description: **NonMedical Provider**

5. Purpose of contract:

This is a new contract to provide community based living arrangement services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$250,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation for Behavioral and community based related services to provide living arrangements.

d. Last bid date: 05/03/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	08/01/2019 16:03:54 PM
Division Approval	jthom17	08/01/2019 16:03:57 PM
Department Approval	ldeloach	08/01/2019 17:07:03 PM
Contract Manager Approval	cphipp1	08/02/2019 14:12:32 PM
Budget Analyst Approval	stilley	08/13/2019 11:18:13 AM
BOE Agenda Approval	lfree1	08/13/2019 16:49:36 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22249**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **AT&T Corp.**Contractor Name: **AT&T Corp.**Address: **One AT&T Way**City/State/Zip: **Bedminster, NJ 07921**Contact/Phone: **Tina Peterson 775-453-7599**Vendor No.: **PUR0005291**NV Business ID: **NV19711002665**To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Various agencies**Agency Reference #: **99SWC-S487 tb**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2021**Contract term: **2 years**4. Type of contract: **MSA**Contract description: **Long Distance Svc**

5. Purpose of contract:

This is a new contract to provide ongoing long distance voice and data services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$3,000,000.00**

Other basis for payment: As invoiced by the Contractor and approved by the State

II. JUSTIFICATION

7. What conditions require that this work be done?

State employees require long distance voice and data services to perform their jobs.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

These services are regulated by the Nevada Public Utilities Commission.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

**CenturyLink
AT&T Corp
Cox Nevada Telecom**b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP #99SWC-S487, and in accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 02/05/2019 Anticipated re-bid date: 02/05/2021

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Current vendor for statewide long distance. Service is satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?
Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	08/06/2019 07:13:54 AM
Division Approval	jthom17	08/06/2019 07:13:58 AM
Department Approval	ldeloach	08/06/2019 08:49:20 AM
Contract Manager Approval	tbeck1	08/06/2019 08:51:35 AM
Budget Analyst Approval	stilley	08/13/2019 12:03:42 PM
BOE Agenda Approval	lfree1	08/14/2019 10:58:17 AM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22244**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Angelic Personal Care Attendants, LLC

Contractor Name: **Angelic Personal Care Attendants, LLC**Address: **3430 E. Flamingo Rd Ste 251**City/State/Zip: **Las Vegas, NV 89121**

Contact/Phone: Mary Hope Garcia 702-444-4686

Vendor No.: T27043051

NV Business ID: NV20181531792

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X Other funding 100.00 % Various Agencies**

Agency Reference #: RM167

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **2 years and 303 days**4. Type of contract: **MSA**Contract description: **NonMedical Provider**

5. Purpose of contract:

This is a new contract to provide personal care services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$400,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation for Behavioral and community based related services to provide personal emergency response devices.

d. Last bid date: 05/03/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	08/02/2019 15:25:28 PM
Division Approval	jthom17	08/02/2019 15:25:31 PM
Department Approval	ldeloach	08/05/2019 08:17:04 AM
Contract Manager Approval	cphipp1	08/05/2019 13:16:05 PM
Budget Analyst Approval	stilley	08/13/2019 11:08:50 AM
BOE Agenda Approval	lfree1	08/13/2019 16:51:06 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22206**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Collaborative Technology Solutions, LLC

Contractor Name: **Collaborative Technology Solutions, LLC**Address: **1489 W Warm Springs Rd. Suite 110**City/State/Zip: **Henderson , NV 89014**

Contact/Phone: Genise Burnett 978-560-3551

Vendor No.: T27042975

NV Business ID: NV20191218999

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X Other funding 100.00 % Various Agencies**

Agency Reference #: RM107

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **2 years and 303 days**4. Type of contract: **MSA**Contract description: **Medical Provider**

5. Purpose of contract:

This is a new contract to provide blind and low vision medical technology services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$300,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was chosen as part of a multi award RFQ for medical and related services.

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	07/17/2019 10:53:35 AM
Division Approval	jthom17	07/17/2019 15:05:05 PM
Department Approval	mstar2	07/18/2019 09:47:49 AM
Contract Manager Approval	rvradenb	07/25/2019 09:58:09 AM
Budget Analyst Approval	stilley	08/13/2019 10:52:19 AM
BOE Agenda Approval	lfree1	08/13/2019 16:53:51 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22241**

Agency Name:	MSA MASTER SERVICE AGREEMENTS	Legal Entity Name:	Diversidad, LLC
Agency Code:	MSA	Contractor Name:	Diversidad, LLC
Appropriation Unit:	9999 - All Categories	Address:	828 Colina Alta Place
Is budget authority available?:	Yes	City/State/Zip	Las Vegas, NV 89138
If "No" please explain:	Not Applicable	Contact/Phone:	David Loaiza 702-703-4895
		Vendor No.:	T29042158
		NV Business ID:	NV20181235367

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: RV359

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **01/15/2022**Contract term: **2 years and 137 days**4. Type of contract: **MSA**Contract description: **Translation Services**

5. Purpose of contract:

This is a new contract to provide translation and interpretation services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$225,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to support these required services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The required services require certifications to facilitate translation and interpretation services in specialized situations.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was chosen as part of a multi-award process for translation and interpretation services.

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	08/05/2019 08:31:51 AM
Division Approval	jthom17	08/05/2019 08:31:57 AM
Department Approval	ldeloach	08/05/2019 08:50:45 AM
Contract Manager Approval	rvradenb	08/05/2019 08:52:14 AM
Budget Analyst Approval	stilley	08/13/2019 11:48:00 AM
BOE Agenda Approval	lfree1	08/14/2019 13:07:14 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22193**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **ENVIRONMENTAL PROTECTION SERVICES**Contractor Name: **ENVIRONMENTAL PROTECTION SERVICES**Address: **PO BOX 21025**City/State/Zip: **CARSON CITY, NV 89721-1025**Contact/Phone: **Brian Breiter 775/220-6687**Vendor No.: **T27022506A**NV Business ID: **NV20171736447**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X** Other funding **100.00 % Various Agencies**Agency Reference #: **RV-S656**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2019**

Anticipated BOE meeting date 09/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2023**Contract term: **4 years**4. Type of contract: **MSA**Contract description: **Bat Gate Const/Inst**

5. Purpose of contract:

This is a new contract to provide ongoing bat gate construction and installation services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$500,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Historical hard rock mines have, over time, become significant roosting habitat for dozens of wildlife species. These artificial roosts serve as surrogate habitats where natural cave roosts are no longer available. Adits and shafts have expanded the range of some wildlife species. These underground habitats provide year-round shelter for large populations of birds and bats that sometimes number in the thousands per roosting site. Anticipated end products include; stable cave/mine roosting bat and bird habitats as well as the security of the traveling public when in close proximity to these abandoned mines.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State agencies or employees do not have the ability or resources to construct and install these gates/grids.

9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Walker River Construction, Inc.
Geotechnical Testing Services, Inc.
Environmental Protection Services

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to RFP 99SWC-NV19-S656 and in accordance with NRS 333, the selected vendor was the only proposer to submit a bid for this solicitation.

d. Last bid date: 03/03/2015 Anticipated re-bid date: 06/01/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Div of Minerals and Dept of Wildlife, both agencies were satisfied

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:

Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	mstar2	07/16/2019 14:56:19 PM
Division Approval	mstar2	07/16/2019 14:56:24 PM
Department Approval	ldeloach	07/16/2019 15:19:26 PM
Contract Manager Approval	rvradenb	07/17/2019 07:56:13 AM
Budget Analyst Approval	stilley	08/13/2019 11:54:18 AM
BOE Agenda Approval	lfree1	08/14/2019 13:09:55 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22245**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **M D Developmental Agency, LLC**Contractor Name: **M D Developmental Agency, LLC**Address: **2520 St. Rose Parkway
Ste 220-G**City/State/Zip: **Henderson, NV 89074**Contact/Phone: **Monique Robinson and Debra Stewart
708-253-9271**Vendor No.: **T32008619**NV Business ID: **NV20191306565**To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: **RM167**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **2 years and 303 days**4. Type of contract: **MSA**Contract description: **NonMedical Provider**

5. Purpose of contract:

This is a new contract to provide early childhood development services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$400,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was selected as part of a multi award solicitation for Behavioral and community based related services to provide personal emergency response devices.

d. Last bid date: 05/03/2018 Anticipated re-bid date: 05/15/2026

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	08/02/2019 15:43:15 PM
Division Approval	jthom17	08/02/2019 15:43:19 PM
Department Approval	ldeloach	08/05/2019 08:20:09 AM
Contract Manager Approval	cphipp1	08/05/2019 13:16:56 PM
Budget Analyst Approval	stilley	08/13/2019 11:03:23 AM
BOE Agenda Approval	lfree1	08/13/2019 16:52:38 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22226**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **MT Feelings, LLC**Contractor Name: **MT Feelings, LLC**Address: **801 S. Rancho Dr. Suite E-8**City/State/Zip: **Las Vegas, NV 89106**Contact/Phone: **Michael Thomas 702-606-7530**Vendor No.: **T29042357**NV Business ID: **NV20171140389**To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: **RM107**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **2 years and 303 days**4. Type of contract: **MSA**Contract description: **Medical Provider**

5. Purpose of contract:

This is a new contract to provide marriage and family therapy services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$250,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was chosen as part of a multi award RFQ for medical and related services.

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	07/25/2019 14:58:57 PM
Division Approval	jthom17	07/25/2019 14:59:01 PM
Department Approval	ldeloach	07/25/2019 16:25:13 PM
Contract Manager Approval	rvradenb	07/29/2019 08:53:29 AM
Budget Analyst Approval	stilley	08/13/2019 11:38:28 AM
BOE Agenda Approval	lfree1	08/13/2019 16:44:54 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22208**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **NEIGHBOR NETWORK OF NORTHERN NEVADA**Contractor Name: **NEIGHBOR NETWORK OF NORTHERN NEVADA**Address: **999 PYRAMID WAY**City/State/Zip: **SPARKS, NV 89431-4471**Contact/Phone: **Amy Dewitt-Smith 775/453-4774**Vendor No.: **T27040994**NV Business ID: **NV20151333295**To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: **RM167**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **2 years and 303 days**4. Type of contract: **MSA**Contract description: **NonMedical Provider**

5. Purpose of contract:

This is a new contract to provide community based behavioral services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$400,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was chosen as part of a multi award RFQ for Behavioral and Community based related services.

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	07/17/2019 10:52:53 AM
Division Approval	jthom17	07/17/2019 10:53:02 AM
Department Approval	mstar2	07/17/2019 14:51:52 PM
Contract Manager Approval	rvradenb	07/18/2019 08:27:54 AM
Budget Analyst Approval	stilley	08/13/2019 11:24:08 AM
BOE Agenda Approval	lfree1	08/13/2019 16:48:05 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22225**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Agency Code: **MSA**Appropriation Unit: **9999 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Orenda Therapeutic Services, PLLC

Contractor Name: **Orenda Therapeutic Services, PLLC**Address: **1017 E. Basin Ave #3**City/State/Zip: **Pahrump, NV 89060**

Contact/Phone: Felisa Huene 702-721-8434

Vendor No.: T27042973

NV Business ID: NV20151323645

To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: RM107

2. Contract start date:

a. Effective upon Board of Examiner's approval? **Yes** or b. other effective date: **NA**

Anticipated BOE meeting date 09/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2022**Contract term: **2 years and 303 days**4. Type of contract: **MSA**Contract description: **Medical Provider**

5. Purpose of contract:

This is a new contract to provide marriage and family therapy services statewide.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$250,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The agency does not have the personnel to perform these services.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This is a specialized service that requires specially trained individuals to provide these services.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor was chosen as part of a multi award RFQ for medical and related services.

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	07/25/2019 14:34:06 PM
Division Approval	jthom17	07/25/2019 14:34:11 PM
Department Approval	ldeloach	07/25/2019 16:27:12 PM
Contract Manager Approval	rvradenb	07/29/2019 08:54:10 AM
Budget Analyst Approval	stilley	08/13/2019 11:28:28 AM
BOE Agenda Approval	lfree1	08/13/2019 16:46:23 PM
BOE Final Approval	Pending	

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **16309**Amendment Number: **2**Agency Name: **MSA MASTER SERVICE AGREEMENTS**Legal Entity Name: **Thomas Petroleum, LLC**Agency Code: **MSA**Contractor Name: **Thomas Petroleum, LLC**Appropriation Unit: **9999 - All Categories**Address: **4825 Sloan Lane**Is budget authority available?: **Yes**City/State/Zip: **Las Vegas, NV 89115**

If "No" please explain: Not Applicable

Contact/Phone: **Paul Anderson 775-848-0834**Vendor No.: **PUR0004763**NV Business ID: **NV20091301224**To what State Fiscal Year(s) will the contract be charged? **2015-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Various Agencies

Agency Reference #: **RFP 3125**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/01/2015**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2019**Contract term: **6 years**4. Type of contract: **MSA**Contract description: **Fuel Card Lock**

5. Purpose of contract:

This is the second amendment to the contract which provides a statewide electronic fuel dispensing and card lock system. This amendment extends the termination date from September 30, 2019 to March 30, 2021 and increases the maximum amount from \$20,000,000 to \$30,000,000 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$20,000,000.00	\$20,000,000.00	\$20,000,000.00	Yes - Action
a. Amendment 1:	\$0.00	\$0.00	\$0.00	No
2. Amount of current amendment (#2):	\$10,000,000.00	\$10,000,000.00	\$10,000,000.00	Yes - Action
3. New maximum contract amount:	\$30,000,000.00			
and/or the termination date of the original contract has changed to:	03/30/2021			

II. JUSTIFICATION

7. What conditions require that this work be done?

State agencies have the need for a Statewide Electronic Fuel Dispensing & Card Lock Processing System.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have the sources or means to provide a statewide card lock system for the purchase of fuel for state owned vehicles.

9. Were quotes or proposals solicited? Yes

Was the solicitation (RFP) done by the Purchasing Division? Yes

- a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

- c. Why was this contractor chosen in preference to other?

Pursuant to RFP 3125 and in accordance with NRS 333, this vendor meets the qualifications of the RFP, and was selected by the appointed evaluation committee.

- d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

This contractor is the current vendor for the Statewide Electronic Fuel Dispensing & Card Lock Processing System.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jthom17	08/15/2019 11:11:50 AM
Division Approval	jthom17	08/15/2019 11:11:54 AM
Department Approval	ldeloach	08/15/2019 13:18:39 PM
Contract Manager Approval	nfese1	08/15/2019 13:27:35 PM

Budget Analyst Approval
BOE Agenda Approval

stilley
lfree1

08/16/2019 10:06:55 AM
08/16/2019 13:44:20 PM

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
1.	010	ATHLETIC COMMISSION	JOSEPH W. NADY	FEE: ATHLETIC COMMISSION GATE FEES 93% OTHER: TICKET SURCHARGE (AMATEUR PROGRAM) 7%	\$20,000	
		Contract Description: This is a new contract to provide ongoing unarmed combat inspector services for weigh-ins and events.				
		Term of Contract:	08/07/2019 - 06/30/2023	Contract # 21848		
2.	010	ATHLETIC COMMISSION	RENEE A. SHIVERS-LIGHTFORD	FEE: ATHLETIC COMMISSION GATE FEES 93% OTHER: TICKET SURCHARGE (AMATEUR PROGRAM) 7%	\$20,000	CURRENT EMPLOYEE
		Contract Description: This is a new contract to provide ongoing unarmed combat inspector services for weigh-ins and events.				
		Term of Contract:	08/09/2019 - 06/30/2023	Contract # 21912		
3.	015	GOVERNOR'S OFFICE OF FINANCE – SMART21	GARTNER, INC.	GENERAL 81% HIGHWAY 19%	\$30,506	
		Contract Description: This is a new work plan under master services agreement #18964 which provides ongoing research and advisory services related to information technology. This work plan covers individual access advisor service which provides various deliverables to advise and assist the IT Professional 4.				
		Term of Contract:	10/01/2019 - 09/30/2020	Contract # 22054		
4.	030	ATTORNEY GENERAL'S OFFICE - COUNCIL FOR PROSECUTING ATTORNEYS	NEWAGE LAKE LAS VEGAS, LLC	FEE: REGISTRATION	\$24,500	
		Contract Description: This is a new contract to provide conference facilities for Nevada's annual Advisory Council for Prosecuting Attorneys 2019 Conference being held in Henderson, Nevada.				
		Term of Contract:	07/24/2019 - 12/31/2019	Contract # 22209		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
5.	030	ATTORNEY GENERAL'S OFFICE	LEGAL PROCESS SERVICE	GENERAL	\$45,000	
	Contract Description:	This is a new contract to provide ongoing services for courier/messenger services for the Carson City and Reno offices.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 22026		
6.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	ANTHONY'S GLASS, INC.	OTHER: BUILDING RENT INCOME REVENUE	\$30,000	
	Contract Description:	This is a new contract to provide ongoing glass repair and maintenance services in state-owned facilities in the southern Nevada area.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 22006		
7.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	CAPITAL GLASS, INC.	OTHER: BUILDING RENT INCOME REVENUE	\$26,696	
	Contract Description:	This is a new contract to provide ongoing installation, repair, maintenance and glazing services for glass doors and windows in state-owned buildings.				
		Term of Contract:	08/19/2019 - 08/31/2023	Contract # 22180		
8.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	SUMMIT PLUMBING CO., LLC DBA SUMMIT SEPTIC SEWER/DRAIN SERVICES	OTHER: BUILDING RENT INCOME REVENUE	\$43,548	
	Contract Description:	This is a new contract to provide ongoing plumbing services for various state-owned buildings.				
		Term of Contract:	09/01/2019 - 08/31/2023	Contract # 22182		
9.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - BUILDINGS AND GROUNDS	WATERS SEPTIC TANK SERVICE	OTHER: BUILDINGS AND GROUNDS BUILDING RENT INCOME REVENUE	\$11,786	
	Contract Description:	This is a new contract to provide ongoing pumping of sewer lines, hydro-flushing, video inspections, vacuum truck services and analytical sands/oil separator testing for state-owned facilities in northern Nevada.				
		Term of Contract:	07/01/2019 - 06/30/2023	Contract # 22092		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
10.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - NEVADA SYSTEM OF HIGHER EDUCATION CIP PROJECTS - CCSN - NON-EXEC	CARPENTER SELLERS DEL GATTO ARCHITECTS, PC	GENERAL	\$11,503	Professional Service
	Contract Description:	This is the third amendment to the original contract which provides professional architectural/engineering services for the Nevada State College Education Academic Building Advance Planning CIP project: CIP Project No 17-P08; SPWD Contract No. 111548. This amendment increases the maximum amount from \$1,671,698.50 to \$1,683,201.05 due to increased need for plan check fee, a catwalk extension, FAA application and structural height increase to complete the project due to the additional architectural/engineering services.				
	Term of Contract:	12/12/2017 - 06/30/2021	Contract # 19476			
11.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - NEVADA SYSTEM OF HIGHER EDUCATION CIP PROJECTS - CCSN - NON-EXEC	PGAL, LLC	BONDS	\$16,250	Professional Service
	Contract Description:	This is the second amendment to the original contract which provides professional architectural/engineering services for the University of Nevada, Las Vegas College of Engineering Academic and Research Building Advance Planning CIP project. This amendment increases the maximum amount from \$2,465,161 to \$2,481,411 due to the additional site investigation and survey services needed to complete the project.				
	Term of Contract:	12/12/2017 - 06/30/2021	Contract # 19438			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
12.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - HEALTH AND HUMAN SERVICES CIP PROJECTS - NON-EXEC	HARRIS CONSULTING ENGINEERS, LLC	BONDS	\$30,500	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Caliente Youth Center - Administration Building Chiller Replacement CIP project and will include design services and construction administration services to replace the chiller: SPWD Project No.19-M22; Contract No. 112911.				
	Term of Contract:	08/14/2019 - 06/30/2023	Contract # 22262			
13.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - DEPARTMENT OF CORRECTIONS CIP PROJECTS - NON-EXEC	FARR WEST ENGINEERING DBA FARR WEST CHILTON ENGINEERING	BONDS	\$13,920	Professional Service
	Contract Description:	This is the second amendment to the original contract which provides professional architectural/engineering services for the Indian Springs Prison Complex - Water Storage Tank and Connect Well #6 CIP: CIP Project No. 17-M29; SPWD Contract No. 111597. This amendment increases the maximum from \$140,825 to \$154,745 due to additional design modifications and water rights fee maintenance needed to complete the project.				
	Term of Contract:	01/09/2018 - 06/30/2021	Contract # 19488			
14.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - VETERANS CIP PROJECTS - NON-EXEC	JBA CONSULTING ENGINEERS, INC. DBA NV5 CONSULTANTS	GENERAL	\$21,500	Professional Service
	Contract Description:	This is a new contract to provide professional engineering services for the replacement of the Southern Nevada Veterans Home - Culinary Refrigeration Units CIP project, to include mechanical, plumbing and electrical engineering design services and construction documents for the replacement of the walk-in freezer and cooler. SPWD Project No. 19-M06; Contract No. 112912.				
	Term of Contract:	08/14/2019 - 06/30/2023	Contract # 22258			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
15.	082	DEPARTMENT OF ADMINISTRATION - STATE PUBLIC WORKS - VETERANS CIP PROJECTS - NON-EXEC	JBA CONSULTING ENGINEERS, INC. DBA NV5 CONSULTANTS	BONDS	\$12,500	Professional Service
	Contract Description:	This is a new contract to provide professional architectural/engineering services for the Southern Nevada Veterans Home - Domestic Hot Water Storage Tank Replacement CIP project, to include construction and bid document, design services and construction administration services for the replacement of the domestic water tanks: SPWD Project No. 19-M04; Contract No. 112913.				
	Term of Contract:	08/19/2019 - 06/30/2023	Contract # 22260			
16.	089	DEPARTMENT OF ADMINISTRATION - HEARINGS AND APPEALS	OBELISK TRANSLATIONS, LLC	OTHER: CHARGES FOR SERVICES/WORKERS COMP	\$49,998	
	Contract Description:	This is a new contract to provide ongoing professional translation and interpreter services.				
	Term of Contract:	07/01/2019 - 06/30/2021	Contract # 21774			
17.	180	DEPARTMENT OF ADMINISTRATION - ENTERPRISE INFORMATION TECHNOLOGY SERVICES - NETWORK TRANSPORT SERVICES	TOWER SITES, INC.	FEE: USER	\$42,000	Sole Source
	Contract Description:	This is the first amendment to the original contract which provides ongoing building and microwave tower space at the Pequop Summit in Elko County. This amendment extends the termination date from September 30, 2019 to September 30, 2020 and increases the maximum amount from \$180,000 to \$220,000 due to the continued need for these services.				
	Term of Contract:	10/01/2015 - 09/30/2020	Contract # 16969			
18.	240	DEPARTMENT OF VETERANS SERVICES - SOUTHERN NEVADA VETERANS HOME ACCOUNT	MOJAVE ELECTRIC NV, LLC	OTHER: PRIVATE/COUNTY 35% FEDERAL 65%	\$10,000	
	Contract Description:	This is a new contract to install electrical conduit.				
	Term of Contract:	08/16/2019 - 12/31/2020	Contract # 22240			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
19.	240	DEPARTMENT OF VETERANS SERVICES - GENERAL VETERANS SERVICES-FEES - NON-EXEC	THE FACTORY, LLC	OTHER: GIFT FUNDS	\$21,600	
	Contract Description:	This is a new contract to design, write, edit and complete the 2019 Annual Report including graphic design, web design and photography.				
		Term of Contract:	07/17/2019 - 07/15/2020	Contract # 22139		
20.	300	DEPARTMENT OF EDUCATION - ASSESSMENTS AND ACCOUNTABILITY	ACT, INC.	GENERAL 76% FEDERAL 24%	\$10,300	
	Contract Description:	This is the first amendment to the original contract which provides scoring and reporting services of the ACT college readiness assessment. This amendment extends the termination date from September 30, 2019 to September 30, 2022 and increases the maximum amount from \$10,300 to \$20,600 due to the continued need for these services.				
		Term of Contract:	12/01/2015 - 09/30/2022	Contract # 17863		
21.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES	APEX GRADING & PAVING, INC.	GENERAL	\$49,962	
	Contract Description:	This is a new contract to provide asphalt repairs and maintenance on damaged roads and parking lots.				
		Term of Contract:	07/30/2019 - 06/30/2023	Contract # 21795		
22.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - BEHAVIORAL HEALTH ADMINISTRATION	STEVEN R. GRAYBAR	GENERAL	\$12,500	
	Contract Description:	This is a new contract to provide clinical consultation and facilitation for the Nevada Psychology Internship Consortium interns.				
		Term of Contract:	07/01/2019 - 07/31/2020	Contract # 22116		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
23.	406	DEPARTMENT OF HEALTH AND HUMAN SERVICES - PUBLIC AND BEHAVIORAL HEALTH - MATERNAL CHILD HEALTH SERVICES	UNIVERSITY OF UTAH	FEDERAL	\$40,000	
	Contract Description:	This is the third amendment to the original contract which provides information, resources and local referrals to families, service providers or care coordinators serving children and youth with special healthcare needs. Additionally, this amendment revises due dates and reporting criteria in the scope of work. This amendment extends the termination date from September 30, 2019 to September 30, 2020 and increases the maximum amount from \$128,500 to \$168,500 due to the continued need for these services.				
		Term of Contract:	05/23/2016 - 09/30/2020	Contract # 18094		
24.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - NORTHERN NEVADA CHILD AND ADOLESCENT SERVICES	GARDNER MECHANICAL SERVICES, INC.	GENERAL 72.4% FEDERAL 27.6%	\$12,000	
	Contract Description:	This is a new contract to provide ongoing heating, ventilation and air conditioning maintenance and repairs on an as needed basis.				
		Term of Contract:	07/22/2019 - 06/30/2023	Contract # 22083		
25.	409	DEPARTMENT OF HEALTH AND HUMAN SERVICES - CHILD AND FAMILY SERVICES - SOUTHERN NEVADA CHILD AND ADOLESCENT SERVICES	BOARD OF REGENTS NEVADA SYSTEM OF HIGHER EDUCATION OBO- UNIVERSITY OF NEVADA, RENO	FEDERAL	\$15,000	
	Contract Description:	This is a new interlocal agreement to provide ongoing training, professional development, technical assistance, data collection and management of the Positive Behavioral Interventions and Supports system at Desert Willow Treatment Center.				
		Term of Contract:	07/01/2019 - 09/30/2019	Contract # 22129		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
26.	440	DEPARTMENT OF CORRECTIONS - PRISON MEDICAL CARE	ARAY MEDICAL TECHNOLOGY, INC.	GENERAL	\$4,903	
	Contract Description:	This is the second amendment to the original contract to provide maintenance and repair services for a digital x-ray machine located at Northern Nevada Correctional Center. This amendment increases the maximum amount from \$7,943.23 to \$12,846.25 for unanticipated repair services.				
	Term of Contract:	04/01/2019 - 09/30/2019	Contract # 21653			
27.	440	DEPARTMENT OF CORRECTIONS - DIRECTOR'S OFFICE	AMERICAN ALARM CO., INC. DBA AM ALARM, INC.	GENERAL	\$21,187	
	Contract Description:	This is a new contract to provide services to troubleshoot and repair cell door controls, unit lighting and the public announcement system that was damaged when a water line burst at Warm Springs Correctional Center.				
	Term of Contract:	07/01/2019 - 12/31/2019	Contract # 22147			
28.	440	DEPARTMENT OF CORRECTIONS - DIRECTOR'S OFFICE	NOVACOAST, INC.	GENERAL	\$15,000	
	Contract Description:	This is a new contract to provide personal computer technical services associated with the creation of Windows 10 64-bit base image and machine-specific add-on images for up to 15 workstations along with the associated training, documentation and 1 year of support services.				
	Term of Contract:	07/30/2019 - 06/30/2020	Contract # 21955			
29.	440	DEPARTMENT OF CORRECTIONS - CORRECTIONAL PROGRAMS	CORRECTIONAL COUNSELING, INC.	FEDERAL	\$44,500	Sole Source
	Contract Description:	This is a new contract to provide ongoing services for training of re-entry program staff and facilitation of trainers of staff as defined by the Statewide Recidivism Reduction Grant.				
	Term of Contract:	07/23/2019 - 09/30/2021	Contract # 22029			
30.	440	DEPARTMENT OF CORRECTIONS - CORRECTIONAL PROGRAMS	SALISBURY CONSULTING, LLC	FEDERAL	\$22,105	Sole Source
	Contract Description:	This is a new contract to provide services required by the Department of Justice/ Bureau of Justice Assistance Adult Re-Entry and Employment Strategic Planning Grant for data and project assessment.				
	Term of Contract:	08/19/2019 - 04/30/2020	Contract # 22135			
31.	611	GAMING CONTROL BOARD	SOUTHERN NEVADA AREA COMMUNICATIONS COUNCIL	GENERAL 55% FEDERAL 45%	\$49,999	
	Contract Description:	This is a new interlocal agreement that continues ongoing access to an 800MHz two-way radio system in support of the Board's Enforcement Division field operations in southern Nevada.				
	Term of Contract:	08/15/2019 - 06/30/2021	Contract # 22266			

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
32.	650	DEPARTMENT OF PUBLIC SAFETY - TRAINING	LIQUIVISION TECHNOLOGY, INC.	OTHER: REVENUE	\$20,000	
	Contract Description:	This is a new revenue contract to provide ongoing lead and brass collection and recycling services for the Firing Range. The Department will receive 85% of the current market value of the materials reclaimed.				
		Term of Contract:	07/30/2019 - 07/31/2023	Contract # 22228		
33.	702	DEPARTMENT OF WILDLIFE - DIRECTOR'S OFFICE	DYER ENGINEERING CONSULTANTS, INC.	FEE: SPORTSMEN 50% BONDS 15% FEDERAL 35%	\$45,000	Professional Service
	Contract Description:	This is a new contract to provide ongoing statewide civil engineering services, including design of dams, hydraulic structures and recreational facilities as well as environmental engineering for stream improvements and National Environmental Policy Act document preparation.				
		Term of Contract:	08/13/2019 - 06/30/2023	Contract # 22146		
34.	702	DEPARTMENT OF WILDLIFE - FISHERIES MANAGEMENT	PISCES MOLECULAR, LLC	FEE: AQUATIC INVASIVE SPECIES	\$49,000	
	Contract Description:	This is a new contract to provide ongoing lab services of plankton water samples for early detection and monitoring of aquatic invasive species, primarily for quagga and zebra mussels.				
		Term of Contract:	08/13/2019 - 12/31/2022	Contract # 22218		
35.	702	DEPARTMENT OF WILDLIFE - HABITAT	STATE OF OKLAHOMA	FEE: SPORTSMEN 25% FEDERAL 75%	\$12,992	
	Contract Description:	This is a new interlocal agreement to provide ongoing soil analysis services at project sites for habitat restoration.				
		Term of Contract:	08/02/2019 - 06/30/2020	Contract # 21736		
36.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	KATOMA, LLC	OTHER: REVENUE	\$10,000	
	Contract Description:	This is a new revenue contract to provide pontoon and personal watercraft rentals at Lake Tahoe State Park, Cave Rock.				
		Term of Contract:	07/22/2019 - 10/01/2019	Contract # 22199		
37.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	SIERRA DIVING CENTER	OTHER: REVENUE	\$10,000	
	Contract Description:	This is a new revenue contract to provide scuba tour and classes at Lake Tahoe State Park.				
		Term of Contract:	07/29/2019 - 04/30/2020	Contract # 22216		

INFORMATION CONTRACT SUMMARY

BOE #	DEPT #	STATE AGENCY	CONTRACTOR	FUNDING SOURCE	AMOUNT	EXCEPTIONS FOR SOLICITATIONS AND/OR EMPLOYEES
38.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	WALKER MARINE, INC. DBA SALVAGE MARINE	OTHER: REVENUE	\$10,000	
		Contract Description:	This is a new revenue contract to provide vessel launch services at Lake Tahoe State Park, Cave Rock.			
		Term of Contract:	08/20/2019 - 03/31/2020	Contract # 22198		
39.	704	DEPARTMENT OF CONSERVATION AND NATURAL RESOURCES - STATE PARKS	WATERWAVE GROUP, LLC	OTHER: REVENUE	\$10,000	
		Contract Description:	This is a new revenue contract to provide motorboat rentals at Lake Tahoe State Park, Cave Rock.			
		Term of Contract:	08/08/2019 - 10/01/2019	Contract # 22250		
40.	B024	LICENSING BOARDS AND COMMISSIONS - PODIATRY	DREITZER LAW	FEE: LICENSURE	\$20,000	Professional Service
		Contract Description:	This is a new contract for legal services, including representation in lawsuits, disciplinary actions, administrative hearings and legislative assistance.			
		Term of Contract:	07/19/2019 - 06/30/2021	Contract # 22084		
41.	B030	LICENSING BOARDS AND COMMISSIONS - REGISTERED ENVIRONMENTAL HEALTH SPECIALISTS	LORYLYNN, LTD	FEE: LICENSURE	\$48,000	
		Contract Description:	This is a new contract to provide executive director and board administration services.			
		Term of Contract:	09/01/2019 - 08/31/2021	Contract # 22221		

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21848**Agency Name: **GOVERNOR'S OFFICE**Agency Code: **010**Appropriation Unit: **3952-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **JOSEPH W NADY**Contractor Name: **JOSEPH W NADY**Address: **PO BOX 85**City/State/Zip: **GENOA, NV 89411**Contact/Phone: **Joeseeph Nady 775/220-5559**Vendor No.: **T29006173**NV Business ID: **NV20141685601**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	93.00 % Athletic Commission Gate Fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	7.00 % Ticket Surcharge (Amateur Program)

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/07/2019**Anticipated BOE meeting date **06/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 328 days**4. Type of contract: **Contract**Contract description: **Inspector Services**

5. Purpose of contract:

This is a new contract to provide ongoing unarmed combat inspector services for weigh-ins and events.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: \$50 per weigh-in, \$50 per Boxing gym inspection, and \$150 per event; \$1,000 yearly for travel; not to exceed \$20,000 over contract term.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 467.050 allows the Commission to utilize and employ inspectors as independent contractors.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Weigh-ins and events occur on evenings, weekends, and holidays. The Commission has a limited staff and would incur overtime in trying to fulfill these obligations.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor has knowledge of the rules and regulations of unarmed combat and has been previously contracted with the Athletic Commission. This is one of several vendors available to the Athletic Commission for these services.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Previously contracted with the Athletic Commission. Performance has been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	08/07/2019 13:32:01 PM
Division Approval	ssands	08/07/2019 13:32:04 PM
Department Approval	ssands	08/07/2019 13:32:08 PM
Contract Manager Approval	ssands	08/07/2019 13:32:11 PM
Budget Analyst Approval	cbrekken	08/07/2019 13:33:47 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21912**Agency Name: **GOVERNOR'S OFFICE**Agency Code: **010**Appropriation Unit: **3952-04**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **RENEE A SHIVERS-LIGHTFORD**Contractor Name: **RENEE A SHIVERS-LIGHTFORD**Address: **2067 HIDDEN HOLLOW LN**City/State/Zip: **HENDERSON, NV 89012-3203**Contact/Phone: **702/460-7678**Vendor No.: **T32003163**NV Business ID: **NV20141667362**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	93.00 % Athletic Commission Gate Fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %	X	Other funding	7.00 % Ticket Surcharge (Amateur Program)

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/09/2019**Anticipated BOE meeting date **08/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 326 days**4. Type of contract: **Contract**Contract description: **Inspector Services**

5. Purpose of contract:

This is a new contract to provide ongoing unarmed combat inspector services for weigh-ins and events.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Other basis for payment: \$50 per weigh-in; \$50 per Boxing gym inspection; \$150 per event; \$1000 yearly for travel; not to exceed \$20,000 over contract term.

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 467.050 allows the Commission to utilize and employ inspectors as independent contractors.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Weigh-ins and events occur on evenings, weekends and holidays. The Commission has limited staff and the agency would incur overtime in the effort to fulfill these obligations.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor has knowledge of the rules and regulations of unarmed combat and has been previously contracted with the Athletic Commission. This is one of several vendors available to the Athletic Commission for these services.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

Yes

See the attached Authorization to Contract form for details.

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

Yes

See the attached Authorization to Contract form for details.

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contractor has been under Contract with the Nevada Athletic Commission for Inspector services. Services are satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	avance	05/30/2019 16:00:53 PM
Division Approval	avance	05/30/2019 16:00:55 PM
Department Approval	jhanse4	06/07/2019 16:27:25 PM
Contract Manager Approval	fmason	06/11/2019 09:12:41 AM
Budget Analyst Approval	cbrekken	08/09/2019 15:07:34 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22054**Agency Name: **GOVERNOR'S FINANCE OFFICE**Agency Code: **015**Appropriation Unit: **1325-04**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **GARTNER INC**Contractor Name: **GARTNER INC**Address: **PO BOX 911319**City/State/Zip: **DALLAS, TX 75391-1319**Contact/Phone: **Jay Friedman 239/561-4815**Vendor No.: **PUR0005339A**NV Business ID: **NV19941112701**To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	81.00 %	Fees	0.00 %
	Federal Funds	0.00 %	Bonds	0.00 %
X	Highway Funds	19.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2019**Anticipated BOE meeting date **08/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2020**Contract term: **1 year**4. Type of contract: **Other (include description): MSA Work Plan**Contract description: **SMART 21 Project**

5. Purpose of contract:

This is a new work plan under master services agreement #18964 which provides ongoing research and advisory services related to information technology. This work plan covers individual access advisor service which provides various deliverables to advise and assist the IT Professional 4.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,506.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The State of Nevada requires a statewide single solution for enhanced functionality and technology to support and automate the state's Human Resource Management and Integrate Financial System. This technology will improve customer service statewide.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not have the resources or software capabilities to provide a statewide ERP system.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **Yes**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

EITS, 2014 to current, satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ddav12	06/26/2019 09:37:40 AM
Division Approval	ddav12	06/26/2019 09:37:43 AM
Department Approval	ddav12	06/26/2019 09:37:47 AM
Contract Manager Approval	ddav12	07/23/2019 07:59:09 AM
Budget Analyst Approval	cbrekken	07/25/2019 10:13:07 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22209**Agency Name: **ATTORNEY GENERAL'S OFFICE**Agency Code: **030**Appropriation Unit: **1041-10**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **NewAge Lake Las Vegas, LLC**Contractor Name: **NewAge Lake Las Vegas, LLC**Address: **1610 Lake Las Vegas Parkway**City/State/Zip: **Henderson, NV 89011**Contact/Phone: **Tom Badley 702-567-4707**

Vendor No.:

NV Business ID: **NV2012530035**To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Registration Fees
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/24/2019**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2019**Contract term: **160 days**4. Type of contract: **Contract**Contract description: **Conference Hosting**

5. Purpose of contract:

This is a new contract to provide conference room rentals, audio visual equipment and catering for Nevada's annual Advisory Council for Prosecuting Attorneys 2019 Conference being held in Henderson Nevada from September 11, 2019 - September 13, 2019.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$24,500.00**Other basis for payment: **Upon Invoice****II. JUSTIFICATION**

7. What conditions require that this work be done?

The mission of the Advisory Council for Prosecuting Attorneys is to develop and implement a training program for prosecutors in the state; to coordinate the development of policies for conducting criminal and civil prosecutions; and to coordinate proposed legislation for submission to the Legislature. Statutory Authority: NRS 241A.010 to NRS 241A.090.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The state does not have conference hosting facilities capable of hosting this event.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

The Westin Lake Las Vegas
Casablanca Resort Hotel Mesquite

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pricing/Services

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Lesley Volkov, MAIL Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cschon1	07/17/2019 13:32:36 PM
Division Approval	cschon1	07/17/2019 13:32:38 PM
Department Approval	cschon1	07/17/2019 13:32:40 PM
Contract Manager Approval	cschon1	07/23/2019 15:47:37 PM
Budget Analyst Approval	bmacke1	07/24/2019 14:10:58 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22026**Agency Name: **ATTORNEY GENERAL'S OFFICE**Agency Code: **030**Appropriation Unit: **All Appropriations**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**

Legal Entity Name:

Legal Process Service

Contractor Name: **Legal Process Service**Address: **724 S. 8th Street**City/State/Zip: **Las Vegas, NV 89119**Contact/Phone: **702-471-7255**Vendor No.: **Pending**NV Business ID: **NV19921069984**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **06/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **messenger service**

5. Purpose of contract:

This is a new contract to provide ongoing services for courier/messenger services for the Carson City and Reno offices.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Messenger services are required due to the urgency of filing legal documents with the courts.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not available to perform the tasks needed by messenger services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Legal Process Service
 Reno Carson Messenger
 Bootleg
 Finishline Delivery

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

They offered reasonable pricing and seem to value customer service for their clients.

d. Last bid date: 02/08/2019 Anticipated re-bid date: 02/01/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	cschonl1	06/06/2019 11:12:54 AM
Division Approval	cschonl1	06/06/2019 11:12:56 AM
Department Approval	cschonl1	06/06/2019 11:12:59 AM
Contract Manager Approval	cschonl1	06/06/2019 11:13:02 AM
Budget Analyst Approval	jrodrig9	07/18/2019 14:08:00 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22006**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority
available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity
Name: **ANTHONY'S GLASS, Inc.**Contractor Name: **ANTHONY'S GLASS, Inc.**Address: **3955 W. SUNSET ROAD, UNIT 105**City/State/Zip **LAS VEGAS, NV 89118**Contact/Phone: **702-873-4040**Vendor No.: **T29040913**NV Business ID: **NV20011312355**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Building Rent Income Revenue

Agency Reference #: **ASD 2832343**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **07/01/2019**
Examiner's approval?Anticipated BOE meeting date **07/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Glass repair**

5. Purpose of contract:

This is a new contract to provide ongoing glass repair, replace maintenance of glass, windows, and mirrors in southern Nevada at the request and approval of Buildings and Grounds.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,000.00**

Other basis for payment: Rates are as follows: Hourly rate is \$95/hr/man; Overtime rate \$142.50/hr/man; Weekend & Holiday rate \$190/hr/man; Materials will have a 15% mark-up.

II. JUSTIFICATION

7. What conditions require that this work be done?

B&G is mandated to keep in a clean, orderly and presentable position buildings, rooms, basements, floors, windows, furniture, and appurtenances.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of equipment and expertise.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing
Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several open-ended vendor contracts that per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Shiyann Living, AAIII Ph: 702-486-4300

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	06/19/2019 12:09:56 PM
Division Approval	ssands	06/19/2019 12:10:00 PM
Department Approval	ssands	06/19/2019 12:10:05 PM
Contract Manager Approval	ssands	06/20/2019 08:21:34 AM
Budget Analyst Approval	kshea	07/23/2019 14:08:15 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22180**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **CAPITAL GLASS INC**Contractor Name: **CAPITAL GLASS INC**Address: **2951 N DEER RUN RD STE 1**City/State/Zip: **CARSON CITY, NV 89701-1467**Contact/Phone: **775/883-6401**Vendor No.: **T80316580**NV Business ID: **NV19671000768**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Building Rent Income Revenue

Agency Reference #: **ASD 2832575**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/19/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/31/2023**Contract term: **4 years and 13 days**4. Type of contract: **Contract**Contract description: **Glass Repair**

5. Purpose of contract:

This is a new contract to provide ongoing glass door repairs and installation, replacement and installation of glass windows and glazing work for various state-owned buildings throughout Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$26,696.30**

Other basis for payment: M-F 8:00 am to 4:30 pm; Labor rate \$95/hr.; Overtime \$145.50/hr.; Holiday & week-end rate \$190/hr.(based on availability) Parts & material cost plus \$15% overhead and 25% mark-up.

II. JUSTIFICATION

7. What conditions require that this work be done?

Buildings, rooms, basements, floors, windows, furniture, and appurtenances are to be kept clean, orderly and presentable as befitting public property.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of personnel and expertise9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

per SAM0338.0 each contractor will be contacted to submit bids on projects. Capital Glass is a Nevada Public Works Board Contractor and pursuant to NRS 338.13862, Building and Grounds is using a Public Works Board prequalified vendor

d. Last bid date: 06/01/2019 Anticipated re-bid date: 06/01/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Donnie Milner, Facility Supervisor Ph: 684-1200

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	07/31/2019 12:23:28 PM
Division Approval	ssands	07/31/2019 12:23:31 PM
Department Approval	ssands	07/31/2019 12:23:35 PM
Contract Manager Approval	ssands	08/01/2019 15:50:32 PM
Budget Analyst Approval	kshea	08/19/2019 16:49:50 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22182**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **SUMMIT PLUMBING CO LLC DBA**Contractor Name: **SUMMIT PLUMBING CO LLC DBA**Address: **SUMMIT SEPTIC SEWER/DRAIN SVC
1219 SERVICE DR STE D**City/State/Zip: **GARDNERVILLE, NV 89410**Contact/Phone: **775/267-9987**Vendor No.: **T29008376A**NV Business ID: **NV19991021762**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Building Rent Income Revenue

Agency Reference #: **ASD 2832577**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/31/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Plumbing Services**

5. Purpose of contract:

This is a new contract to provide ongoing plumbing services which include drain cleaning, wet well-pumping, backflow testing, grease trap pumping, hydro-vac services, and pipe inspections for various state-owned buildings throughout Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$43,548.22**

Other basis for payment: Please see Attachment CC for a complete price list for various locations and services.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Buildings and Grounds Section is concerned with the safety, health and working conditions of all State employees. It's maintenance duties include carpentry, plumbing, electrical work, heating, ventilating and air conditioning.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of personnel and expertise9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Summit Plumbing
Brunos Plumbing
Jet Plumbing

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of many of the same type vendor and Per SAM 0338.0, each contractor will be contacted to submit bids on projects.

d. Last bid date: 06/01/2019 Anticipated re-bid date: 06/01/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Donnie Mlner, Facility Supervisor Ph: 684-1200

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	07/31/2019 15:01:34 PM
Division Approval	ssands	07/31/2019 15:01:39 PM
Department Approval	ssands	07/31/2019 15:01:44 PM
Contract Manager Approval	ssands	07/31/2019 15:04:32 PM
Budget Analyst Approval	kshea	08/13/2019 15:54:40 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22092**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Agency Code: **082**Appropriation Unit: **1349-12**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Waters Septic Tank Service

Contractor Name: **Waters Septic Tank Service**Address: **4275 Rewana Way**City/State/Zip: **Reno, NV 89502**Contact/Phone: **775-882-1577**

Vendor No.:

NV Business ID: **NV19781005671**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

Federal Funds 0.00 % Bonds 0.00 %

Highway Funds 0.00 % **X Other funding 100.00 % B&G Building Rent Income Revenue**Agency Reference #: **ASD 2832423**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **07/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **4 years**4. Type of contract: **Contract**Contract description: **Sewer/Plumbing svcs**

5. Purpose of contract:

This is a new contract to provide the ongoing provision of pumping of sewer lines, hydro-flushing, video inspections, vacuum truck services, as well as TCLP & TPH analytical testing for sands/oil separators for state-owned facilities in northern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$11,785.50**Other basis for payment: Hours of Operation; Mon-Fri 4:00 pm to 7:00 am; Labor \$90/per hour; Overtime rate \$135/per hour
Please see Attachment AA for all services and rates**II. JUSTIFICATION**

7. What conditions require that this work be done?

Buildings, rooms, basements, floors, windows, furniture, and appurtenances are to be kept clean, orderly and presentable as befitting public property

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lack of equipment and expertise for B&G staff9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Donnie Milner, Facility Supervisor Ph: 775-684-1800

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ssands	06/24/2019 13:55:23 PM
Division Approval	ssands	06/24/2019 13:55:27 PM
Department Approval	ssands	06/24/2019 13:55:30 PM
Contract Manager Approval	ssands	06/24/2019 13:55:34 PM
Budget Analyst Approval	kshea	07/23/2019 16:04:38 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT

1. Contract Number: **19476** Amendment Number: **3**

Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION** Legal Entity Name: **CARPENTER SELLERS DEL GATTO ARCHITECTS PC**

Agency Code: **082** Contractor Name: **CARPENTER SELLERS DEL GATTO ARCHITECTS PC**

Appropriation Unit: **1510-71** Address: **ARCHITECTS PC**

Is budget authority available?: **Yes** City/State/Zip: **8882 SPANISH RIDGE AVE. LAS VEGAS, NV 89148-1303**

If "No" please explain: **Not Applicable** Contact/Phone: **702-251-8896**

Vendor No.: **T80997582**

NV Business ID: **NV19871041301**

To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **111548**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/12/2017**Anticipated BOE meeting date **08/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2021**Contract term: **3 years and 200 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is the third amendment to the original contract which provides professional architectural/engineering services for the Nevada State College Education Academic Building Advance Planning CIP project to include advance design services for a 65,000 square foot building from schematic design through construction documents in preparation for a Construction Manager at Risk project method for construction: CIP Project No 17-P08; SPWD Contract No. 111548. This amendment increases the maximum amount to \$1,683,201.05 due to the increased need for plan check fee, catwalk extension, FAA application, and structural height increase to complete the job.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$1,502,735.00	\$1,502,735.00	\$1,502,735.00	Yes - Action
a. Amendment 1:	\$94,405.00	\$94,405.00	\$94,405.00	Yes - Action
b. Amendment 2:	\$74,558.50	\$74,558.50	\$74,558.50	Yes - Action
2. Amount of current amendment (#3):	\$11,502.55	\$11,502.55	\$11,502.55	Yes - Info
3. New maximum contract amount:	\$1,683,201.05			

II. JUSTIFICATION

7. What conditions require that this work be done?

2017 Agency CIP.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Imars1	06/26/2019 15:29:58 PM
Division Approval	Imars1	06/26/2019 15:30:03 PM
Department Approval	Imars1	06/26/2019 15:30:08 PM

Contract Manager Approval
Budget Analyst Approval

lmars1
kshea

06/26/2019 15:30:13 PM
07/22/2019 09:34:16 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **19438**Amendment Number: **2**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **PGAL, LLC**Agency Code: **082**Contractor Name: **PGAL, LLC**Appropriation Unit: **1510-72**Address: **3379 W Oqendo Rd**Is budget authority available?: **Yes**City/State/Zip: **Las Vegas, NV 89118**If "No" please explain: **Not Applicable**Contact/Phone: **702-730-4911**

Vendor No.:

NV Business ID: **NV20021118384**To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **111541**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/12/2017**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2021**Contract term: **3 years and 200 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is the second amendment to the original contract which provides professional architectural/engineering services for the University of Nevada, Las Vegas College of Engineering Academic and Research Building Advance Planning CIP project, to include full schematic, development and construction documents for all structures, site work, landscaping, built-in equipment and furnishings: CIP Project 17-P09; SPWD Contract No. 111541. This amendment increases the maximum amount from \$2,465,161 to \$2,481,411.00 due the additional sit investigation and surveys needed to complete the project.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$2,709,181.00	\$2,709,181.00	\$2,709,181.00	Yes - Action
a. Amendment 1:	-\$244,020.00	-\$244,020.00	-\$244,020.00	Yes - Action
2. Amount of current amendment (#2):	\$16,250.00	\$16,250.00	\$16,250.00	Yes - Info
3. New maximum contract amount:	\$2,481,411.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Imars1	07/19/2019 07:47:49 AM
Division Approval	Imars1	07/19/2019 07:47:53 AM
Department Approval	Imars1	07/19/2019 07:47:59 AM
Contract Manager Approval	Imars1	07/19/2019 07:48:04 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22262**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Agency Code: **082**Appropriation Unit: **1535 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **HARRIS CONSULTING ENGINEERS**Contractor Name: **HARRIS CONSULTING ENGINEERS**Address: **LLC
680 PILOT RD., STE A**City/State/Zip: **LAS VEGAS, NV 89119-9015**Contact/Phone: **702-269-1575**Vendor No.: **T27003439**NV Business ID: **NV20011085889**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **112911**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/14/2019**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 321 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Chiller Replacement project and will include design services and construction administration for the replacement of the chiller at the Caliente Youth Center - Administration Building: SPWD Project No.19-M22; Contract No. 112911.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$30,500.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 CIP Project

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Marshall, Benton, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Imars1	08/07/2019 11:19:09 AM
Division Approval	Imars1	08/07/2019 11:19:13 AM
Department Approval	Imars1	08/07/2019 11:19:17 AM
Contract Manager Approval	Imars1	08/07/2019 11:19:20 AM
Budget Analyst Approval	kshea	08/14/2019 13:14:47 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **19488**Amendment Number: **2**Agency Name: **ADMIN - STATE PUBLIC WORKS DIVISION**Legal Entity Name: **FARR WEST ENGINEERING DBA FARR WEST CHILTON ENGINEERING**Agency Code: **082**Contractor Name: **FARR WEST ENGINEERING DBA FARR WEST CHILTON ENGINEERING**Appropriation Unit: **1550-63**Address: **dba FARR WEST ENGINEERING**Is budget authority available?: **Yes****5510 Longley Lane**If "No" please explain: **Not Applicable**City/State/Zip: **Reno, NV 89511**Contact/Phone: **775-851-4788**Vendor No.: **T81102795A**NV Business ID: **NV20011242988**To what State Fiscal Year(s) will the contract be charged? **2018-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **111597**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **01/09/2018**Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **06/30/2021**Contract term: **3 years and 172 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is the second amendment to the original contract which provides professional architectural/engineering services for the Indian Springs Prison Complex - Water Storage Tank and Connect Well #6 CIP project, to include complete design and construction services for the installation of up to a 1.4 million gallon water tank, new tank layout, connection to Well #6 and the reconditioning of two existing water storage tanks: CIP Project No. 17-M29; SPWD Contract No. 111597. this amendment increases the maximum from \$140,825.00 to \$154,745.00 due to additional design modifications and Water Right Fee Maintenance needed to complete this project.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$135,957.00	\$135,957.00	\$135,957.00	Yes - Action
a. Amendment 1:	\$4,850.00	\$4,850.00	\$4,850.00	No
2. Amount of current amendment (#2):	\$13,920.00	\$18,770.00	\$18,770.00	Yes - Info
3. New maximum contract amount:	\$154,727.00			

II. JUSTIFICATION

7. What conditions require that this work be done?

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Professional Architectural/Engineering are provided by SPWD to support the State Capital Improvement Program. Consultants are selected based on their ability to provide design and engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? No

Was the solicitation (RFP) done by the Purchasing Division? No

- a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

- c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

- d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lmars1	07/12/2019 09:00:21 AM
Division Approval	lmars1	07/12/2019 09:00:28 AM
Department Approval	lmars1	07/12/2019 09:00:34 AM
Contract Manager Approval	lmars1	07/12/2019 09:00:40 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22258**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Agency Code: **082**Appropriation Unit: **1567 - All Categories**Is budget authority
available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **JBA CONSULTING ENGINEERS INC**Contractor Name: **JBA CONSULTING ENGINEERS INC**Address: **DBA NV5 CONSULTANTS
5155 W PATRICK LN., STE 100**City/State/Zip: **LAS VEGAS, NV 89118-2828**Contact/Phone: **702-362-9200**Vendor No.: **T80928382**NV Business ID: **NV20151389633**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **112912**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **08/14/2019**
Examiner's approval?Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 321 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is a new contract to provide professional engineering services for the replacement of the Culinary Refrigeration Units at the Southern Nevada Veterans Home (Boulder City). The services will include mechanical, plumbing, and electrical engineering design services and construction documents for the walk-in freezer & cooler at the Southern Nevada Veterans Home. SPWD Project No. 19-M06; Contract No. 112912.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$21,500.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 CIP Project

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architectural/Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing
Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Marshall, Benton, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Imars1	08/07/2019 10:23:33 AM
Division Approval	Imars1	08/07/2019 10:23:36 AM
Department Approval	Imars1	08/07/2019 10:23:40 AM
Contract Manager Approval	Imars1	08/14/2019 13:55:24 PM
Budget Analyst Approval	kshea	08/14/2019 14:49:08 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22260**Agency Name: **ADMIN - STATE PUBLIC WORKS
DIVISION**Agency Code: **082**Appropriation Unit: **1567 - All Categories**Is budget authority
available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **JBA CONSULTING ENGINEERS INC**Contractor Name: **JBA CONSULTING ENGINEERS INC**Address: **DBA NV5 CONSULTANTS
5155 W PATRICK LN., STE 100**City/State/Zip: **LAS VEGAS, NV 89118-2828**Contact/Phone: **702-362-9200**Vendor No.: **T80928382**NV Business ID: **NV20151389633**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	X Bonds	100.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **112913**

2. Contract start date:

a. Effective upon Board of **No** or b. other effective date **08/19/2019**
Examiner's approval?Anticipated BOE meeting date **09/2020**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 316 days**4. Type of contract: **Contract**Contract description: **Arch/Eng**

5. Purpose of contract:

This is a new contract to provide professional architectural/engineering services for the Domestic Hot Water Storage Tank Replacement project and will provide design services and construction administration for the replacement of the domestic water tanks at the Southern Nevada Veterans Home: SPWD Project No. 19-M04; Contract No. 112913

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,500.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

2019 CIP Project

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Capital Improvement Program. Consultants are selected based on their ability to provide design and Professional Architecture/Engineering are provided by SPWD to support the State engineering services to meet the goals established by the Legislature.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing
Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

Demonstrated the required expertise for work on this project.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Marshall, Benton, Project Manager Ph: 775-684-4141

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Imars1	08/07/2019 10:47:37 AM
Division Approval	Imars1	08/07/2019 10:47:41 AM
Department Approval	Imars1	08/07/2019 10:47:45 AM
Contract Manager Approval	Imars1	08/07/2019 10:47:49 AM
Budget Analyst Approval	kshea	08/19/2019 16:49:00 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21774**

Agency Name:	ADMIN - HEARINGS AND APPEALS DIVISION	Legal Entity Name:	OBELISK TRANSLATIONS LLC
Agency Code:	089	Contractor Name:	OBELISK TRANSLATIONS LLC
Appropriation Unit:	1015-04	Address:	1900 E BONANZA RD.
Is budget authority available?:	Yes	City/State/Zip	LAS VEGAS, NV 89101-3339
If "No" please explain:	Not Applicable	Contact/Phone:	NAPOLEAN BUENROSTRO 702-581-4474
		Vendor No.:	T27041374
		NV Business ID:	NV20161532547

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Charges for Services/Workers Comp

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **07/2019**Retroactive? **Yes**

If "Yes", please explain

The Hearings Division began the contract process for interpreters late. This did not allow enough time for all interpreter contracts to be reviewed, signed by all parties, and finalized prior to July 01, 2019.

3. Termination Date: **06/30/2021**Contract term: **2 years**4. Type of contract: **Contract**Contract description: **Interpreter**

5. Purpose of contract:

This is a new contract to provide ongoing professional translation and interpreter services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,998.00**

Other basis for payment: Monthly progress payments based on services provided.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Division is required by statute to provide interpreter services to non-English speaking injured workers to be properly represented at appeal hearings.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Employees do not have the language skills need to complete the job.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This is one of several contractors available to the Hearing and Appeals Division for interpreter and translation services.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Curiel, Vanessa, null Ph: 702-486-2525

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	Imars1	07/24/2019 09:37:11 AM
Division Approval	Imars1	07/24/2019 09:37:13 AM
Department Approval	Imars1	07/24/2019 09:37:17 AM
Contract Manager Approval	Imars1	07/24/2019 09:47:01 AM
Budget Analyst Approval	cbrekken	07/25/2019 11:10:41 AM

Steve Sisolak
Governor



Deonne E. Contine
Director

Michelle L. Morgando, Esq.
Senior Appeals Officer

Northern Nevada:
Hearing Office
1050 E. William St., Ste. 400
Carson City, Nevada 89701
(775) 687-8440 | Fax (775) 687-8441

Appeals Office
1050 E. William St., Ste. 450
Carson City, Nevada 89701
(775) 687-8420 | Fax (775) 687-8421


STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION
Hearings Division
<http://hearings.nv.gov>

Southern Nevada:
Hearing Office
2200 S. Rancho Drive, Ste. 210
Las Vegas, Nevada 89102
(702) 486-2525 | Fax (702) 486-2879

Appeals Office
2200 S. Rancho Drive, Ste. 220
Las Vegas, Nevada 89102
(702) 486-2527 | Fax (702) 486-2555

MEMORANDUM

To: Contracts Unit

From: Michelle Morgando, Senior Appeals Officer 

Date: July 9, 2019

Subject: Justifications for Retroactive Contract

The Hearings Division began the contract process for interpreters late. This did not allow enough time for all interpreter contracts to be reviewed, signed by all parties, and finalized prior to July 1, 2019.

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **16969**Amendment Number: **1**Agency Name: **ADMIN - ENTERPRISE IT SERVICES**Legal Entity Name: **TOWER SITES, INC.**Agency Code: **180**Contractor Name: **TOWER SITES, INC.**Appropriation Unit: **1388-06**Address: **17640 W NATIONAL AVENUE**Is budget authority available?: **Yes**City/State/Zip: **NEW BERLIN, WI 53146-3727**

If "No" please explain: Not Applicable

Contact/Phone: **TERRY MICHAELS 262-786-8330**Vendor No.: **T29034595**NV Business ID: **NV20141158046**To what State Fiscal Year(s) will the contract be charged? **2016-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % User
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **10/01/2015**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2019**Contract term: **5 years and 1 day**4. Type of contract: **Contract**Contract description: **Mountaintop Space**

5. Purpose of contract:

This is the first amendment to the original contract which provides ongoing building and microwave tower space at the Pequop Summit in Elko County. This amendment extends the termination date from September 30, 2019 to September 30, 2020 and increases the maximum amount from \$180,000 to \$220,000 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$180,000.00	\$180,000.00	\$180,000.00	Yes - Action
2. Amount of current amendment (#1):	\$42,000.00	\$42,000.00	\$42,000.00	Yes - Info
3. New maximum contract amount:	\$222,000.00			
and/or the termination date of the original contract has changed to:	09/30/2020			

II. JUSTIFICATION

7. What conditions require that this work be done?

Tower Sites purchased the Rocky Point communication peak from SatCom. This Tower Site Access Agreement Contract is for leased space inside Tower Sites' building on Tower Sites' tower. This site is essential to the State communications system.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lease of private site. The State does not own this site.

9. Were quotes or proposals solicited? No
Was the solicitation (RFP) done by the Purchasing Division? No

- a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

- b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 150707

Approval Date: 07/29/2015

- c. Why was this contractor chosen in preference to other?

Owner of the site.

- d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

- b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

- c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Over the last 10 years with the Department of Information Technology and Nevada Department of Transportation satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ddav12	07/18/2019 11:55:42 AM
Division Approval	ddav12	07/18/2019 11:55:48 AM

Department Approval	ddav12	07/18/2019 11:55:54 AM
Contract Manager Approval	ddav12	07/18/2019 11:56:00 AM
Budget Analyst Approval	cmurph3	07/22/2019 08:29:21 AM

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Steve Sisolak
Governor

Deanne E. Contine
Director

Kevin D. Dwy
Acting Administrator

Purchasing Use Only:

Approval #:

283

CONTRACT EXTENSION JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED - INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1	Agency Contact Information – Note: Copy(s) will be sent to only the contact(s) listed below:			
	State Agency:	Enterprise Information Technology Services (EITS)		
	Contact Name(s) and Titles:	Debra David, Program Officer I		
	Telephone Number(s):	775-684-0278		
	Email Address(s):	drdavid@admin.nv.gov		

2	Contractor Information:			
	Contractor:	Tower Sites INC.		
	Contact Name:	Terry Michaels		
	Address:	17640 W. National Avenue, New Berlin, Wisconsin 53146-3727		
	Phone Number:	262-786-8330		
	Email Address:	tmichaels@tower-sites.com		

3	Ongoing relationship disclosure – List all previous contract information:			
	Procurement method:			
	CETS #:			
	Contract "not to exceed amount":	\$		
	Contract term:	Start date:	End date:	
		mm/dd/yy	mm/dd/yy	

4	Procurement method used to award the current contract:			
	RFP, solicitation # if applicable:			
	Quote, solicitation # if applicable:			
	Waiver, provide number:	150707		
	Other:			

5	Current contract information:			
	CETS #:	16969		
	Initial contract "not to exceed amount":	\$180,000.00		
	Contract term:	Start date:	End date:	
		mm/dd/yy	mm/dd/yy	
		10/01/2015	09/30/2019	

Amendment information – List all previously approved amendments:			
6	Amd #:	Brief synopsis of what amendment accomplished:	Change in end date: mm/dd/yy

Proposed amendment information:			
7	Amd #:	Brief synopsis of what the requested amendment will accomplish	Change in end date: mm/dd/yy
	1	<i>Contract Extension will allow us to get a lease in place, which can take up to 9 months to a year to implement. This amendment would be a bridge until the lease is in place.</i>	\$42,000 09/30/2020

8	What is the justification to extend the contract term beyond the State's four (4) year re-solicitation policy (SAM 0338):		
	<p><i>Tower Sites rents space on their tower to the State of Nevada for our communication equipment. It is in the States best interest to have long term leases in these situations because its costly and disruptive to our services to change. In some of these cases, they are the only vendor we can use; unless the state constructs its own facilities on these mountaintops.</i></p> <p><i>The State needs to operate these communications sites indefinitely in support of our requirement for public safety communications; the microwave network directly supports the Nevada Shared Radio System that is also currently in the middle of getting replaced by NDOT, Washoe County, and Nevada Energy. We will always need to have mountaintop communication facilities. These locations will not move. It saves money and prevents an extended outage of our communications infrastructure already in place on these mountaintops.</i></p>		

9	What are the potential consequences to the State if the contract extension request is denied?		
	<ul style="list-style-type: none"> <i>Re-coordination and relicensing of frequencies with the Federal Communications Commission</i> <i>Moving multiple racks of microwave communications equipment to another facility; assuming there is availability in another facility.</i> <i>Removing a 10' diameter microwave dish and waveguide off of the existing vendor's tower and installing on another tower at the site; 12 antennas total. Assuming there's another vendor that can accommodate our antennas, any new vendor's tower will require a structural analysis to ensure that it can handle the increased loading of our antennas before installation</i> <i>Removing large 48-volt battery plant and charging system and installing in another facility</i> <i>Loss of public safety communications at this site during the relocation process, which would take weeks or months to accomplish</i> <i>Many of our existing users are also in Tower Sites's facilities; if our microwave equipment is relocated to another facility, conduits would need to be installed between these facilities on the mountaintop in order for us to continue providing service, which requires Forest Service or BLM permits and approval that could take months or years to obtain.</i> <i>The need for more manpower and additional funds to respond</i> 		

By signing below, I know and understand the proposed contract extension exceeds the State's policy pursuant to SAM Section 0338 that contracts be solicited at least every four (4) years and attest that all statements are true and correct.



Signature of Agency Representative Initiating Request

Debra David

6/13/19

Date

Signature of Agency Head Authorizing Request



David Haws

6/18/19

Date

Please consider this memo as my support of your request to extend the identified contract beyond the current State policy period. This exemption is granted pursuant to NRS 333.135 and SAM 0338 and may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines the decision was based on incorrect or inaccurate facts. Pursuant to NRS 333.700(7), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns, please contact the Purchasing Division at 775-684-0170.

Signed:



Administrator, Purchasing Division or Designee

6/18/19

Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22240**Agency Name: **DEPARTMENT OF VETERANS SERVICES**Agency Code: **240**Appropriation Unit: **2561-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Mojave Electric NV, LLC**Contractor Name: **Mojave Electric NV, LLC**Address: **3755 W. Hacienda Avenue**City/State/Zip: **Las Vegas, NV 89118-1755**Contact/Phone: **Jason Loux 702-798-2970**Vendor No.: **T80975069**NV Business ID: **NV20081583981**To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	65.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	35.00 % Private/County

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/16/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2020**Contract term: **1 year and 138 days**4. Type of contract: **Contract**Contract description: **Electrical Install**

5. Purpose of contract:

This is a new contract to install electrical conduit for wander guard/security system at the Southern Nevada State Veterans Home.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000.00**

Other basis for payment: Time and materials. Payable upon submission of an approved invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

This work is part of an update to the Wander Guard System in the Southern Nevada State Veterans Home. The system helps to keep certain residents with specific medical issues from wandering into areas that may be dangerous for them.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

This work requires a licensed electrician and NDVS does not have a licensed electrician on staff.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Mojave Electric NV, LLC
Schneider Electric
Sunrise Electrical

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Best proposal at a fair price.

d. Last bid date: 07/08/2019

Anticipated re-bid date: 08/19/2020

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor has performed plumbing repairs to the Southern Nevada State Veterans Home in the past and work was satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	agarland	08/01/2019 12:04:53 PM
Division Approval	agarland	08/01/2019 12:04:57 PM
Department Approval	agarland	08/01/2019 12:05:01 PM
Contract Manager Approval	agarland	08/01/2019 12:05:05 PM
Budget Analyst Approval	bmacke1	08/16/2019 11:16:37 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22139**Agency Name: **DEPARTMENT OF VETERANS SERVICES**Agency Code: **240**Appropriation Unit: **2564 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: The Factory, LLC

Contractor Name: **The Factory, LLC**Address: **201 W LIBERTY ST STE 312**City/State/Zip: **Reno, NV 89501-0522**

Contact/Phone: Brian Stoudt 775-846-0522

Vendor No.: T32004634

NV Business ID: NV20091222446

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Gift Funds

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/17/2019**

Anticipated BOE meeting date 08/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/15/2020**Contract term: **364 days**4. Type of contract: **Contract**Contract description: **Graphic/Web Design**

5. Purpose of contract:

This is a new contract to design, write, edit and complete the 2019 Annual Report. Services to include graphic design, web design and photography as required.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$21,600.00**

Payment for services will be made at the rate of \$1,800.00 per month

Other basis for payment: Upon submission of approved detailed invoice.

II. JUSTIFICATION

7. What conditions require that this work be done?

The annual report is used as a communication toll with agencies, community partners, and state and federal agencies.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NDVS does not have the staff available with the skills necessary to complete project.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

**The Abbi Agency
EstiPonia Group
The Factory**

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Vendor presented with the skills to perform the job as required and at a fair price.

d. Last bid date: 06/27/2019 Anticipated re-bid date: 07/20/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has provided similar work to NDVS in the past and the work that was performed was satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
LLC

16. a. Is the Contractor Name the same as the legal Entity Name?
Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?
Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?
Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	agarland	07/01/2019 08:51:07 AM
Division Approval	agarland	07/01/2019 08:51:14 AM
Department Approval	agarland	07/01/2019 08:51:17 AM
Contract Manager Approval	agarland	07/01/2019 08:51:23 AM
Budget Analyst Approval	bmacke1	07/17/2019 14:27:28 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **17863**Amendment Number: **1**Agency Name: **NDE - DEPARTMENT OF EDUCATION**Legal Entity Name: **ACT INC**Agency Code: **300**Contractor Name: **ACT INC**Appropriation Unit: **2697-44**Address: **500 ACT Drive**Is budget authority available?: **Yes**City/State/Zip: **IOWA CITY, IA 52243**If "No" please explain: **Not Applicable**Contact/Phone: **ANDREW JOPLING 817/543-0234**Vendor No.: **T29022931**NV Business ID: **NV20071357380**To what State Fiscal Year(s) will the contract be charged? **2016-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	76.00 %	Fees	0.00 %
X	Federal Funds	24.00 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **12/01/2015**Anticipated BOE meeting date **08/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2019**Contract term: **6 years and 304 days**4. Type of contract: **Contract**Contract description: **ACT Score Reporting**

5. Purpose of contract:

This is the first amendment to the original contract which provides scoring and reporting services of the ACT college readiness assessment. This amendment extends the termination date from September 30, 2019 to September 30, 2022 and increases the maximum amount from \$10,300 to \$20,600 due to the continued need for these services for school years ended in 2019, 2020, 2021, and 2022.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$10,300.00	\$10,300.00	\$10,300.00	Yes - Info
2. Amount of current amendment (#1):	\$10,300.00	\$10,300.00	\$20,600.00	Yes - Info
3. New maximum contract amount:	\$20,600.00			
and/or the termination date of the original contract has changed to:	09/30/2022			

II. JUSTIFICATION

7. What conditions require that this work be done?

All High School Juniors in Nevada take the ACT College Entrance Exam. The test is a standards-based achievement test and career planning tool that assesses students academic readiness for college. In July 2014 the Nevada State Board of Education selected the ACT as Nevada's new college and career readiness assessment. Beginning with the Class of 2016 participation in the ACT statewide test is a graduation requirement. Thus it is essential we receive the scoring and reporting each year on our students.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Nevada Department of Education employees do not have the training or expertise to compile the reports. This is a test provided and administered by ACT and the company does all of the scoring and reporting for each State for their test.

9. Were quotes or proposals solicited? No
Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

RFP #3132 was completed for the assessment testing contract - ACT, Inc. contract number 16058. This contract with ACT, Inc. is for the ACT test results are reported from the vendor to the Department of Education and no other company can score and report these tests.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Department of Employment, Training and Rehabilitation - 12/5/2012 - work was satisfactory

Department of Education - 7/1/2013 to current - work was satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Non-profit Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. Not Applicable

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level

User

Signature Date

Budget Account Approval	amccalla	07/25/2019 13:37:35 PM
Division Approval	amccalla	07/25/2019 13:37:38 PM
Department Approval	amccalla	07/25/2019 13:37:42 PM
Contract Manager Approval	amccalla	07/25/2019 13:37:45 PM
Budget Analyst Approval	cbrekken	08/07/2019 13:20:17 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21795**Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**Agency Code: **406**Appropriation Unit: **3162-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **APEX GRADING & PAVING INC**Contractor Name: **APEX GRADING & PAVING INC**Address: **P.O. Box 19045**City/State/Zip: **Reno, NV 89511**Contact/Phone: **Rob Ayers 775-852-9701**Vendor No.: **T32006526A**NV Business ID: **NV20011207548**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **C 17111**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/30/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 336 days**4. Type of contract: **Contract**Contract description: **Parking lot repairs**

5. Purpose of contract:

This is a new contract to provide asphalt repairs and maintenance on damaged roads and parking lots.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,962.00**

Other basis for payment: Cost per Attachment A

II. JUSTIFICATION

7. What conditions require that this work be done?

Asphalt repairs and maintenance as needed due to damaged roads and parking lot.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees are not licensed or qualified to perform these services.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Apex Grading & Paving Inc.
Walker River Construction
Sierra Nevada Construction

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

In accordance with NRS 333, the selected vendor was the highest scoring proposer as determined by an independently appointed evaluation committee.

d. Last bid date: 04/05/2019 Anticipated re-bid date: 02/10/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Andy Chao, ASO II Ph: 775-688-2033

Greg Holcomb, Facility Supervisor Ph: 775-688-2125

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmorse	07/16/2019 11:56:27 AM
Division Approval	rmorse	07/16/2019 11:56:29 AM
Department Approval	mwinebar	07/25/2019 15:12:09 PM
Contract Manager Approval	dohl0	07/26/2019 08:48:59 AM
Budget Analyst Approval	afrantz	07/30/2019 10:20:32 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22116**

Agency Name:	DHHS - PUBLIC AND BEHAVIORAL HEALTH	Legal Entity Name:	GRAYBAR, STEVEN R
Agency Code:	406	Contractor Name:	GRAYBAR, STEVEN R
Appropriation Unit:	3168-10	Address:	6121 Lakeside Drive, Suite 230
Is budget authority available?:	Yes	City/State/Zip	Reno, NV 89511
If "No" please explain:	Not Applicable	Contact/Phone:	Dr. Steve Graybar 775-324-5357
		Vendor No.:	T29037878
		NV Business ID:	NV20161277582

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **C 17230**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **07/2019**Retroactive? **Yes**

If "Yes", please explain

This contract provides clinical consultation/facilitation for four DPBH NV-PIC psychology interns under the NV-PIC program. This contract was delayed due to the program's inexperience with the division's policies and procedures pertaining to the contracting process. The contract unit will work with the program to train and educate staff for future contract submissions.

3. Termination Date: **07/31/2020**Contract term: **1 year and 31 days**4. Type of contract: **Contract**Contract description: **NV-PIC**

5. Purpose of contract:

This is a new contract to provide clinical consultation and facilitation for four Nevada Psychology Internship Consortium psychology interns.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,500.00**

Payment for services will be made at the rate of \$125.00 per hour

Other basis for payment: Not to exceed 100 hours

II. JUSTIFICATION

7. What conditions require that this work be done?

This contract is a requirement of the Nevada Psychology Internship Consortium, an accredited training program.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

State employees do not possess the specialized expertise to perform these services.

9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Dr. Steven Graybar
Dr. Deborah Ribnick
Dr. Michael Shepard

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

In accordance with NRS/NAC 333 the vendor was chosen by an informal selection committee.

d. Last bid date: 05/23/2019 Anticipated re-bid date: 04/23/2020

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Vendor provided services to DPBH in 2017 - satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmorse	06/26/2019 12:10:01 PM
Division Approval	rmorse	06/26/2019 12:10:03 PM
Department Approval	mwinebar	07/18/2019 08:53:12 AM
Contract Manager Approval	dohl0	07/19/2019 09:08:06 AM
Budget Analyst Approval	bwooldri	08/12/2019 15:20:31 PM

STATE OF NEVADA

STEVE SISOLAK
Governor

RICHARD WHITLEY, MS
Director



LISA SHERYCH
Interim Administrator

IHSAN AZZAM, PhD., MD
Chief Medical Officer

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

4150 Technology Way, Suite 300

Carson City, NV 89706

Telephone: (775) 684-4220 · Fax: (775) 684-4211

DATE: July 1, 2019

MEMORANDUM

TO: Aaron Frantz
Budget Officer
Governor's Finance Office

THROUGH: Christina Hadwick
Administrative Services Officer IV
Division of Public and Behavioral Health

FROM: Emily Slife
Psychologist
Southern Nevada Adult Mental Health Services

SUBJECT: REQUEST FOR RETROACTIVE START DATE OF CONTRACT – Dr. Steven Graybar
(CETS #22116)

This memorandum requests that the following contract be approved for a retroactive start.

The following information is required:

- Name of Vendor: **Dr. Steven Graybar**
- Services to be provided: **Provide clinical consultation for the four DPBH NV-PIC psychology interns. This hour-long peer professional development group is aimed at helping the interns learn and develop skills of peer consultation and support. Facilitate weekly meetings, up to 42 meetings for the period July 1, 2019 through July 31, 2020.**
- Funding source and expenditure category: **BA 3168 - CAT 10; GFUND.**
- Requested start date of work: **July 1, 2019**
- Expected execution date of agreement: **August 15, 2019**
- Detailed explanation as to why a retroactive agreement is necessary, including:
 - Reason(s) why the agreement was not submitted timely:
 - **This contract was delayed due to the program's inexperience with the division's policies and procedures pertaining to the contracting process.**
 - Describe the impact to the program/services if this work is not started prior to the execution of the agreement: **If this retroactive request is not approved, the NV-PIC Psychology Internship Peer Professional Development Group project will be affected without the services of a Facilitator.**
 - Explain how the program/bureau will prevent future retroactive requests: **The contract unit will work with the program to train and educate staff for future contract submissions.**

If you have any questions, please contact Emily Slife at (702) 486-0711 or eslife@health.nv.gov.

cc: Contract Unit
Division of Public and Behavioral Health

Revised 4/19

Public Health: Working for a Safer and Healthier Nevada

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **18094**Amendment Number: **3**Agency Name: **DHHS - PUBLIC AND BEHAVIORAL HEALTH**Legal Entity Name: **University of Utah**Agency Code: **406**Contractor Name: **University of Utah**Appropriation Unit: **3222-15**Address: **DBA Department of Pediatrics
295 Chipeta Way**Is budget authority available?: **Yes**City/State/Zip: **Salt Lake City, UT 84108**If "No" please explain: **Not Applicable**Contact/Phone: **Jason Fox 801-587-1621**Vendor No.: **T29000319**NV Business ID: **Governmental Entity**To what State Fiscal Year(s) will the contract be charged? **2016-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 %

Fees 0.00 %

X Federal Funds **100.00 %**

Bonds 0.00 %

Highway Funds 0.00 %

Other funding 0.00 %

Agency Reference #: **C 14920**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **05/23/2016**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2019**Contract term: **4 years and 131 days**4. Type of contract: **Interlocal Agreement**Contract description: **Web Portal**

5. Purpose of contract:

This is the third amendment to the original contract which provides information, resources and local referrals to families, service providers or care coordinators serving children and youth with special healthcare needs. Additionally, this amendment revises due dates and reporting criteria in the scope of work. This amendment extends the termination date from September 30, 2019 to September 30, 2020 and increases the maximum amount from \$128,500 to \$168,500 due to the continued need for these services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$40,000.00	\$40,000.00	\$40,000.00	Yes - Info
a. Amendment 1:	\$8,500.00	\$8,500.00	\$48,500.00	No
b. Amendment 2:	\$80,000.00	\$88,500.00	\$128,500.00	Yes - Action
2. Amount of current amendment (#3):	\$40,000.00	\$40,000.00	\$40,000.00	Yes - Info
3. New maximum contract amount:	\$168,500.00			
and/or the termination date of the original contract has changed to:	09/30/2020			

II. JUSTIFICATION

7. What conditions require that this work be done?

The State of Nevada needs to care for children born with metabolic health issues.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The portal is maintained by the vendor in Utah.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Pursuant to NRS 277.180 one or more public agencies may contract with any one or more other public agencies to perform any governmental service, activity or undertaking. This contract is a very cost-effective way to provide specialized web content for the Nevada CYSHCN community without building a new website.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

The vendor has conducted business with the state multiple times - satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rmorse	06/20/2019 11:20:54 AM
Division Approval	rmorse	06/20/2019 11:20:59 AM
Department Approval	mwinebar	07/18/2019 08:45:54 AM
Contract Manager Approval	ttilto1	07/19/2019 09:29:23 AM
Budget Analyst Approval	afrantz	07/22/2019 11:08:27 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22083**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Agency Code: **409**Appropriation Unit: **3281-07**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **GARDNER MECHANICAL SERVICES, INC.**Contractor Name: **GARDNER MECHANICAL SERVICES, INC.**Address: **270 EAST PARR BLVD.**City/State/Zip: **RENO, NV 89512**Contact/Phone: **Scott Wagner 775-329-4133**Vendor No.: **T32005641A**NV Business ID: **NV19871014001**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X	General Funds	72.40 %	Fees	0.00 %
X	Federal Funds	27.60 %	Bonds	0.00 %
	Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/22/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 344 days**4. Type of contract: **Contract**Contract description: **HVAC Repair**

5. Purpose of contract:

This is a new contract to provide ongoing HVAC maintenance and repairs on an as needed basis.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,000.00**

Payment for services will be made at the rate of \$95.00 per Hour

II. JUSTIFICATION

7. What conditions require that this work be done?

Routine preventative maintenance services are required to ensure the equipment remains in good working condition.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No State employees have the needed expertise and no State agency provides these services.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Westernaire
Mt. Rose Heating and Air
Gardner Mechanical
Horizon Mechanical
RHP Mechanical

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor selected was the only bidder.

d. Last bid date: 05/01/2019 Anticipated re-bid date: 05/01/2023

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Northern Nevada Child and Adolescent Services, service satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Imran Hyman, ASO II Ph: 775-688-1636

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	ihyman	06/13/2019 15:01:24 PM
Division Approval	knielsen	07/17/2019 18:12:58 PM
Department Approval	mwinebar	07/18/2019 09:28:33 AM
Contract Manager Approval	sknigge	07/19/2019 10:33:48 AM
Budget Analyst Approval	laaron	07/22/2019 10:14:34 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22129**Agency Name: **DHHS - DIVISION OF CHILD AND FAMILY SERVICES**Agency Code: **409**Appropriation Unit: **3646-15**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **BOARD OF REGENTS - UNR**Contractor Name: **BOARD OF REGENTS - UNR**Address: **KUNR 88.7 FM
MAIL STOP 0294**City/State/Zip: **RENO, NV 89557-0294**Contact/Phone: **Ashley Greenwald 775-682-6052**Vendor No.: **D35000816B**NV Business ID: **Government Entity**To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **Yes**

If "Yes", please explain

PBIS has been providing training to Desert Willow Treatment Center (DWTC) staff through an interlocal agreement since July 1, 2018 with a termination date of June 30, 2019. This initial interlocal agreement also included the Juvenile Justice Program. However, the decision was made to enter into a new contract with PBIS to continue their work only with the DWTC staff and with a retroactive date of July 1, 2019.

3. Termination Date: **09/30/2019**Contract term: **91 days**4. Type of contract: **Interlocal Agreement**Contract description: **PBIS training**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing training, professional development, technical assistance, data collection and management of the Positive Behavioral Interventions and Supports (PBIS) system at Desert Willow Treatment Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,000.00**

Payment for services will be made at the rate of \$15,000.00 per contract completion

II. JUSTIFICATION

7. What conditions require that this work be done?

There are youth with high needs that are placed at Desert Willow Treatment Center that require a specialized behavioral intervention to address their specialized needs. Staff are being trained by the University of Reno (PBIS) to sustain this intervention.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

There currently are no staff with the knowledge to provide this service. However, with this contract PBIS will provide technical assistance and training to staff and implement positive interventions and supports.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

Yes If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

26% \$3,031.62

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Division of Child and Family Services & Juvenile Justice from January 31, 2016-June 30, 2019 and services were satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	prassie1	06/26/2019 11:27:52 AM
Division Approval	knielsen	07/30/2019 17:04:07 PM
Department Approval	mwinebar	08/02/2019 08:14:18 AM
Contract Manager Approval	sknigge	08/06/2019 14:46:56 PM
Budget Analyst Approval	laaron	08/07/2019 13:47:05 PM

STEVE SISOLAK
Governor

STATE OF NEVADA



Richard Whitley
Director
Department of Health and Human Services

Ross Armstrong
Administrator
Division of Child and Family Services

**Department of Health and Human Services
Division of Child and Family Services
Northern Nevada Child and Adolescent Services
2655 Enterprise Road
Reno, Nevada 89512
Phone: (775) 688-1600 Fax: (775) 688-1616**

MEMORANDUM

TO: Lynnette Aaron, Budget Analyst
Department of Administration

THROUGH: Mark Winebarger, Administrative Services Officer IV
Division of Child and Family Services

FROM: Katrina Nielsen, Administrative Services Officer IV
Division of Child and Family Services

DATE: 08/6/2019

SUBJECT: Retroactive Contract - CETS #22129 BOARD OF REGENTS - UNIVERSITY OF NEVADA
RENO PBIS for Children's Mental Health

A retroactive effective date of July 1, 2019 is requested for the Contract between the Division of Child and Family Services (DCFS) and BOARD OF REGENTS - UNIVERSITY OF NEVADA RENO PBIS for Children's Mental Health in order to provide training to DCFS staff at Desert Willow Treatment Center (DWTC) on Positive Behavior Implementation Strategies.

PBIS has been providing training to DWTC staff thorough an Interlocal Agreement since July 1, 2018 with an end date of June 30, 2019. This initial Interlocal Agreement also included the Juvenile Justice Program. However, the decision was made to enter into a new contract with PBIS to continue their work only with the DWTC for the new agreement retroactive effective July 1, 2019. Nevada System of Care continues to have funds allotted for this vendor to complete the work through the end of the grant period which is September 30, 2019.

The Division has not solicited other vendors as the current vendor is the only one able to provide training in this specific intervention.

Thank you for your consideration of this request. If you have any questions, please do not hesitate to contact me at (775) 684-7942.

TREATMENT SERVICES

*Children's Clinical Services Early Childhood Mental Health Services Mobile Crisis Response Team
Family Learning Homes Adolescent Treatment Center
W.I.N. (Wraparound in Nevada for Children and Families)*

Rev. 1/04/19

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21653**Amendment Number: **2**Agency Name: **DEPARTMENT OF CORRECTIONS**Legal Entity Name: **Aray Medical Technology Inc**Agency Code: **440**Contractor Name: **Aray Medical Technology Inc**
Address: **West Coast Imaging & Radiology**
2165 Larkspur LaneAppropriation Unit: **3706-04**City/State/Zip: **Redding, CA 96002-0600**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Contact/Phone: **Ralph Ackerman 530-782-5511**Vendor No.: **T27042853**NV Business ID: **NV20161085145**To what State Fiscal Year(s) will the contract be charged? **2019-2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **04/01/2019**Anticipated BOE meeting date **08/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Previously Approved Termination Date: **09/30/2019**Contract term: **182 days**4. Type of contract: **Contract**Contract description: **Xray repair**

5. Purpose of contract:

This is the second amendment to the original contract to provide maintenance and repair and parts for a digital x-ray machine located at Northern Nevada Correctional Center (NNCC). This amendment increases the maximum contract amount from \$7,943.23 to \$12,846.25 for unanticipated repair services.

6. CONTRACT AMENDMENT

	Trans \$	Info Accum \$	Action Accum \$	Agenda
1. The max amount of the original contract:	\$5,053.23	\$5,053.23	\$5,053.23	No
a. Amendment 1:	\$2,890.00	\$7,943.23	\$7,943.23	No
2. Amount of current amendment (#2):	\$4,903.02	\$12,846.25	\$12,846.25	Yes - Info
3. New maximum contract amount:	\$12,846.25			

II. JUSTIFICATION

7. What conditions require that this work be done?

The digital x-ray machine at NNCC is not operable.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The department does not have the staff licensed to perform these services and no other State agency performs these services.

9. Were quotes or proposals solicited? Yes
Was the solicitation (RFP) done by the Purchasing Division? No

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Lowest most responsible bidder.

d. Last bid date: 03/20/2019 Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	rhage1	07/31/2019 09:30:03 AM
Division Approval	amonro1	08/02/2019 12:42:11 PM
Department Approval	sewart	08/02/2019 15:41:54 PM
Contract Manager Approval	aroma2	08/07/2019 11:14:25 AM
Budget Analyst Approval	kshea	08/16/2019 13:08:22 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22147**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3710-09**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **AMERICAN ALARM CO INC DBA**Contractor Name: **AMERICAN ALARM CO INC DBA**Address: **AM ALARM INC
1671 VINEYARD DR
ANTIOCH, CA 94509-8549**City/State/Zip: **ANTIOCH, CA 94509-8549**Contact/Phone: **I.stringer@am-alarm.com 925/779-1121**Vendor No.: **T27032403**NV Business ID: **NV20061154721**To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **440**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/01/2019**Anticipated BOE meeting date **07/2019**Retroactive? **Yes**

If "Yes", please explain

This work is urgently required due to damage that occurred when a water line burst, flooding the electrical cabinets in the mechanical room and damaging these controls. Failure to approve this work may cause much more costly repairs to be required, as the cell doors are not supposed to be manually overridden except as an emergency procedure. Additionally, if the cell door controls fail completely, up to 180 inmates will require relocation as it will be impossible to secure them.

3. Termination Date: **12/31/2019**Contract term: **183 days**4. Type of contract: **Contract**Contract description: **Cell Door Repairs**

5. Purpose of contract:

This is a new contract to provide services to troubleshoot and repair cell door controls, unit lighting and P/A system that was damaged when a water line burst at Warm Springs Correctional Center.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$21,187.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Recently, a water line burst within the facility and caused flooding inside the mechanical room, damaging the HU4A cell door controls, unit lighting and the P/A system, rendering them inoperable. If we do not get this issue resolved quickly, manual override of the operating gears will lead to much higher cost repairs or the need to relocate 180 inmates due to security concerns.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NDOC does not have staff who can perform this work. No State agency provides this service.

9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

A solicitation waiver has been submitted for this work. When other service providers were contacted for a solicitation, they indicated that this vendor would be required to reprogram all the proprietary software associated with the operating system.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bweisent	07/02/2019 09:41:30 AM
Division Approval	amonro1	07/02/2019 15:20:55 PM
Department Approval	sewart	07/02/2019 17:36:35 PM
Contract Manager Approval	aroma2	08/16/2019 10:46:41 AM
Budget Analyst Approval	kshea	08/16/2019 10:47:19 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21955**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3710-26**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Novacoast, Inc.**Contractor Name: **Novacoast, Inc.**Address: **1505 Chapala Street**City/State/Zip: **Santa Barbara, CA 93101**Contact/Phone: **Travis Reed 805-668-5531**Vendor No.: **T29025733**NV Business ID: **NV20051412204**To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	100.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **440**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/30/2019**Anticipated BOE meeting date **07/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2020**Contract term: **336 days**4. Type of contract: **Contract**Contract description: **Re-Image Windows 10**

5. Purpose of contract:

This is a new contract to provide service for creation of Windows 10 64 bit base image, machine-specific add-on images for up to 15 workstation models, training, documentation and 1 year of support for Department of Corrections.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$15,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

If this contract is not established NDOC will fail in making the Windows 10 rollout deadline by December 2019. The consequences of not rolling out Windows 10 are running all of NDOC on an unsupported and insecure Windows 7 platform and non-compliance with EITS security standards.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Complexities and time constraints require that the work must be completed by or before December 2019, which cannot be done by DOC staff. No other State agency provides this service.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Dell
NovaCoast, Inc.
SHI International Corp

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This vendor provided the lowest cost and most responsive bid.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	bweisent	07/11/2019 12:23:37 PM
Division Approval	amonro1	07/11/2019 14:43:58 PM
Department Approval	sewart	07/11/2019 16:18:59 PM
Contract Manager Approval	aroma2	07/23/2019 08:51:14 AM
Budget Analyst Approval	kshea	07/30/2019 14:25:42 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22029**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3711-22**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **CORRECTIONAL COUNSELING INC**Contractor Name: **CORRECTIONAL COUNSELING INC**Address: **2028 EXETER RD**City/State/Zip: **GERMANTOWN, TN 38138-3945**Contact/Phone: **901/360-1564**Vendor No.: **T32004851**NV Business ID: **NV20171286117**To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds 0.00 % Fees 0.00 %

X Federal Funds **100.00 %** Bonds 0.00 %

Highway Funds 0.00 % Other funding 0.00 %

Agency Reference #: **440**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/23/2019**Anticipated BOE meeting date **06/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **09/30/2021**Contract term: **2 years and 70 days**4. Type of contract: **Contract**Contract description: **Re-Entry Programs**

5. Purpose of contract:

This is a new contract to provide ongoing services for training of re-entry program staff and facilitation of trainers on staff as defined by the Statewide Recidivism Reduction (SRR) Grant for Nevada Department of Corrections for Nevada's Strategic Recidivism Reduction Plan.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$44,500.00**

Other basis for payment: Based on minimum of one Step 1 classes at minimum cost of \$6,800.00 per class (up to 10 participants per class), minimum of two Step 2 classes at minimum cost of \$6,800.00 per class (up to 10 participants per class) ~\$13,600.00, minimum of two Step 3 classes at minimum cost of \$3,800.00 per class (up to 10 participants per class) ~\$7,600.00. Additional costs include \$750 per day at a minimum of \$11,250 based on minimum class schedule, \$1500.00 license agreement per prospective MRT Facilitator Trainer for training & certification services/materials and up to \$1500 for replacement materials.

II. JUSTIFICATION

7. What conditions require that this work be done?

The Bureau of Justice federal award requires the assessment and evidence-based training activities for staff development with the goal of reducing recidivism. These activities were identified in the grant as required activities and funded entirely by the federal grant. Correctional Counseling, Inc. will be providing evidence-based correctional programming specifically, Moral Reconation Therapy.

If the contract is not approved, the department will not be able to perform and complete the mandatory training as required by the Second Chance Act Grant to ensure there are at least two (2) effective cognitive based programs with certification and audit metrics to evaluate performance.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The evidence-based practice and curriculum on Moral Reconciliation Therapy is a specialized program. The department does not have the expertise to deliver this level of training without the technical and education support from Correctional Counseling, Inc. No other state agency provides this service.

9. Were quotes or proposals solicited? No
Was the solicitation (RFP) done by the Purchasing Division? Yes

a. List the names of vendors that were solicited to submit proposals (include at least three):

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 171006

Approval Date: 10/20/2017

c. Why was this contractor chosen in preference to other?

Approved under Second Chance Act Statewide Adult Recidivism Reduction Strategic Plan Grant for evidence based correctional programming specifically Moral Reconciliation Therapy.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dmartine	06/20/2019 07:44:31 AM
Division Approval	amonro1	06/20/2019 13:53:52 PM
Department Approval	sewart	06/21/2019 10:05:04 AM
Contract Manager Approval	aroma2	07/23/2019 10:15:12 AM

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Brian Sandoval
Governor

Patrick Cates
Director

Jeffrey Haag
Administrator

Purchasing Use Only:

Approval#: 171006

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:		
	State Agency: Nevada Department of Corrections (NDOC)		
	Contact Name and Title	Phone Number	Email Address
	Venus Fajota, Chief of Purchasing & Inmate Svcs	(775) 887-3234	vfajota@doc.nv.gov

1b	Vendor Information:	
	Identify Vendor:	Correctional Counseling, Inc.
	Contact Name:	Breathitt Robinson
	Address:	2028 Exeter Rd., Germantown, TN 38138
	Telephone Number:	(901) 360-1564
	Email Address:	Breathitt.mrt@gmail.com

1c	Type of Waiver Requested – Check the appropriate type:	
	Sole or Single Source:	Sole Source
	Professional Service Exemption:	

1d	Contract Information:			
	Is this a new Contract?	Yes	X	No
	Amendment:	#		
	CETS:	#19370		

1e	Term:			
	One (1) Time Purchase:	One Time Purchase		
	Contract:	Start Date:	Upon BOE Approval	End Date: 09/30/2021

1f	Funding:	
	State Appropriated:	
	Federal Grant Funds:	BA 3711 CAT 22
	Grant Funds:	
	Other (Explain):	

1g	Total Estimated Value of this Service Contract, Amendment or Purchase:
	\$72,046/year

2	Provide a description of work/services to be performed or commodity/good to be purchased:
	<p><i>The Correctional Counseling, Inc. (CCI) will provide evidence-based correctional programming – specifically Moral Reconnection Therapy (MRT), to NDOC as part of the Second Chance Act Statewide Adult Recidivism Reduction Strategic Plan Grant (Second Chance Act Grant), including the practices, tools and train-the-trainer course. Doing so will allow NDOC to deliver a cognitive-based program and intervention for continuity of care, particularly for Veteran offenders.</i></p> <p><i>The MRT workbooks and other related materials are only sold to CCI by Eagle Wing Books, Inc. under an exclusive distribution contract.</i></p>

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
	<p><i>MRT is trademarked and CCI is the sole and exclusive source of MRT and related materials as well as training in the MRT, facilitator certification and related programs.</i></p>

4	Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:
	<p><i>The NDOC cannot competitively bid for a trademarked service which is only offered by one firm. Moral Recognition Therapy (MRT) is trademarked and CCI is the only authorized firm to train MRT (see the attachments).</i></p> <p><i>The NDOC initially contacted the University of Cincinnati, the University of Reno, the Bureau of Justice and Substance Abuse and Mental Health Service Administration (SAMHSA) and the U.S. Department of Health and Human Services to seek a bid to provide the train-the-trainer training to our staff. NDOC was advised, by all prospective vendors, CCI is the only vendor that provides the MRT Works Program. CCI is the sole and exclusive source of and has the copy-right materials.</i></p>

5	Were alternative services or commodities evaluated? Check One.	Yes:	<input type="checkbox"/>	No:	<input checked="" type="checkbox"/>
	a. <i>If yes, what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.</i>				
	b. <i>If not, why were alternatives not evaluated?</i>				
	<i>MRT is trademarked and CCI is the sole and exclusive source of MRT and related materials as well as training in the MRT, facilitator certification and related programs</i>				

6	Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL</u> previous waivers <u>MUST</u> accompany this request.	Yes:	<input checked="" type="checkbox"/>	No:	<input type="checkbox"/>

a. <i>If yes, starting with the most recent contract and working backward, for the entire relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:</i>				
Term <i>Start and End Dates</i>		Value	Short Description	Type of Procurement <i>(RFP#, RFQ#, Waiver #)</i>
06/13/17	09/30/17	\$71,650.00	MRT programming services	Waiver# 170404
		\$		

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>If the contract is not approved through this request, NDOC will not be able to meet the mandates of the federal Second Chance Act grant awarded to NDOC to ensure there are at least two (2) effective cognitive-based programs with certification and audit metrics to evaluate performance and risk federal funding for the future.</i>

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	<i>The NDOC initially contacted the University of Cincinnati, the University of Reno, the Bureau of Justice and Substance Abuse and Mental Health Service Administration (SAMHSA) and the U.S. Department of Health and Human Services to seek a bid to provide the train-the-trainer training to our staff. NDOC was advised, by all prospective vendors, CCI is the only vendor that provides the MRT Works Program. CCI holds the copy-right materials to provide these services (see attached).</i>

9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:	X	No:	
	a. <i>If yes, please provide details regarding future obligations or needs.</i>				
	<p><i>This request is related to Year 2 funding for the federal Second Chance Act Strategic Recidivism Reduction (SRR) grant. As mentioned in the original solicitation waiver (CETS#18657 / Wavier #170404) approved 04/27/17 for Year 1 funding of the same grant, CCI is the only provider of MRT, and has been providing these services for over thirty years; it is copy-right material.</i></p> <p><i>NDOC would like to contract with CCI for train-the-trainer, and later master trainer, through federal funds, for sustainability and to enhance and maintain the program with NDOC staff. However, that can only be done with initial education and programming.</i></p> <p><i>If NDOC does not use MRT through the federal Second Chance grant funds the NDOC would have to return the federal funding since there is no other vendor who can provide this program material.</i></p>				

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.

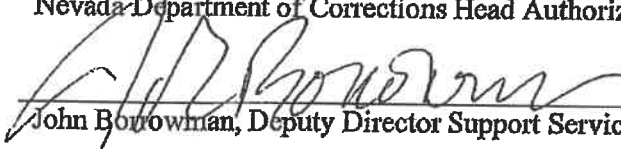
Nevada Department of Corrections Representative Initiating Request


Venus B. Fajota, Chief of Purchasing & Inmate Services

Date

10/16/17

Nevada Department of Corrections Head Authorizing Request


John Borrowman, Deputy Director Support Services

Date

10/17/17

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

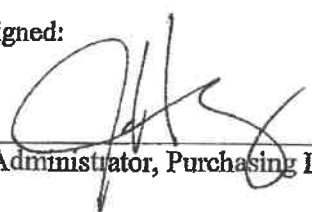
Print Name of Representative Providing Review

Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns please contact the Purchasing Division at 775-684-0170.

Signed:


Administrator, Purchasing Division or Designee

Date

10-20-2017

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22135**Agency Name: **DEPARTMENT OF CORRECTIONS**Agency Code: **440**Appropriation Unit: **3711-25**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **Salisbury Consulting LLC**Contractor Name: **Salisbury Consulting LLC**Address: **3463 Sioux Way**City/State/Zip: **Las Vegas, NV 89169-3142**Contact/Phone: **Emily Salisbury, Ph.D. 503-781-1482**Vendor No.: **T29041819**NV Business ID: **NV20161451602**To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
X Federal Funds	100.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

Agency Reference #: **440**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/19/2019**Anticipated BOE meeting date **08/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2020**Contract term: **255 days**4. Type of contract: **Contract**Contract description: **Project Assessment**

5. Purpose of contract:

This is a new contract to provide services required by the Department of Justice/ Bureau of Justice Assistance Adult Re-Entry and Employment Strategic (ARES) Planning Grant for data and project assessment.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$22,105.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

UNLV has reached their board imposed grant cap, leaving Salisbury Consulting, LLC as the only uniquely qualified local vendor to provide this service. Dr. Salisbury has been the UNLV lead during the Statewide Recidivism Reduction (SRR) grant and that knowledge and experience will be an integral part of this implementation of the ARES goals and deliverables, as required by the original SRR grant, which is now referred to as the Adult Re-entry and Employment Strategic Planning (ARES) grant.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

An outside party is required by the grant requirements for this service. No other State agency provides this service.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Sole Source Contract (As Approved by Chief of Purchasing)**

Approval #: 190703

Approval Date: 07/09/2019

c. Why was this contractor chosen in preference to other?

Dr. Salisbury has been the UNLV lead during the SRR grant and that knowledge and experience will be an integral part of this implementation of the ARES goals and deliverables. This experience makes Salisbury Consulting, LLC the critical and most optimal vendor option to provide this service.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLP

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	dmartine	07/01/2019 08:22:28 AM
Division Approval	amonro1	07/01/2019 12:27:16 PM
Department Approval	sewart	07/02/2019 08:38:44 AM
Contract Manager Approval	aroma2	07/10/2019 09:05:17 AM
Budget Analyst Approval	kshea	08/19/2019 12:30:16 PM



STATE OF NEVADA
DEPARTMENT OF ADMINISTRATION

Purchasing Division

515 East Musser Street, Suite 300 | Carson City, Nevada 89701
Phone: (775) 684-0170 | Fax: (775) 684-0188

Authorization to Contract with a Current Employee

Employee Information

Employee Name: Emily J. Salisbury, Ph.D.
Employee ID Number: 000031217
Job Title: J000449-Associate Professor Criminal Justice
Current Employee Agency: NSHE/UNLV and Nevada Department of Public Safety, Division of Parole and Probation
Current Class and Grade:
Employment Dates: August 1, 2014 – Present
Contracting Agency: Nevada Department of Corrections

Please check which of the following applies:

- ☒ Contract is with a current State employee (contractor) or a temporary employment agency providing a current employee. Please complete steps a-l below.
- ☐ Contract is with an entity (contractor) other than a temporary employment agency that employs a current State employee who will be performing any or all of the contracted services. Please complete all steps a-l below.
- a. Summarize scope of contract work.**

Data and project assessment for the Department of Justice/Bureau of Justice Assistance Adult Re-Entry and Employment Strategic Planning grant (ARES) awarded to the Nevada Department of Corrections

b. Document the employee's current job description.

Academic Faculty-Teaching, Research, Service

c. Explain how this differs from current State duties.

The role and responsibilities for the contracted services are separate and apart from the role of academic faculty. No teaching is involved, only external data and project assessment. Note that the employee has reached her maximum allotment for summer salary with NSHE/UNLV (as a result of her working on 3 additional federal research grants beyond this one), and must run this contract external to NSHE/UNLV as a result.

d. Explain why existing State employees within your agency cannot perform this function.

The Nevada Department of Corrections has established a professional relationship with Dr. Salisbury and the RFP for the grant required applicants to partner with an external, independent researcher who is a subject matter expert.

- e. Document if the individual overseeing or establishing the contract is related to the contractor – if so, explain the relationship and why this would not affect independence and why this would not violate [NAC 284.750](#).**

N/A

- f. List contractor's hourly rate.**

\$53.66 per hour

- g. List the range of comparable State employee rates.**

State approved contract rate: \$125.00 per hour

- h. Justify contract rate if it exceeds the maximum employee/employer rate for a comparable State position by more than 10 percent.**

N/A

- i. Document justification for hiring contractor.**

Dr. Salisbury via UNLV has been involved in the Nevada Department of Corrections Statewide Recidivism Reduction (SRR) grant for several years. Due to her previous experience and insight into our facilities and programs, she can produce the data/assessments necessary to fulfill the deliverables of this grant without a lengthy review process. Additionally, she has already met all of the requirements and background clearances to be able to access any Nevada Department of Corrections facility, which would normally add another 90 days before we could start the project and data collection.

- j. Will the employee be collecting PERS at any time during the contract?**

PERS will be collected for the employee's regular contractual duties with NSHE/UNLV, but not for the services provided on this contract with the Nevada Department of Corrections.

- k. What is the duration of the contract with the current employee? (include start and end date)**

Upon August 2019 BOE Approval-04/30/20

- l. Will the current employee be working FT/PT? If PT how many hours**

PT/approximately 8 hours per week

Comments:

 6/28/19

NDOC Deputy Director, Support Services- John Borrowman- Signature and Date

 6/25/19

Budget Analyst Signature and Date

Clerk of the Board of Examiners Signature and Date

Secondary Employment Disclosure

Employee Name: Emily Salisbury
Employee ID number: _____
Name of Secondary Employer: Salisbury Consulting LLC
(if self-employed, enter the business name)
Address of Secondary Employer/Self Employment: 3463 Sioux Way, Las Vegas, NV 89169
Secondary Employer Phone Number: 503-781-1482

Describe the nature of the work performed by the secondary employer or self employment business.	Professional criminal justice consulting
Might this activity require or induce you to disclose controlled information obtained as part of your job or impair your independence or ethics?	No
List the specific duties, functions, and activities that you personally will perform for the secondary employer or in the self-employment business.	Assisting NDOC with collecting policy data from stakeholders, participating in grant meetings to provide expert consultation
Document your work schedule with the secondary/self employment; how many and what hours weekly; what your State work schedule is; how many and what hours you will work weekly. Will this conflict with your State work hours?	No more than one, 8-hour day per week during the 9-month academic calendar (mid-August through mid-May), as per the NSHE policy. No, this will not conflict with state work hours.
If applicable, list provider agreements, brief scope of services, and associated State agencies.	

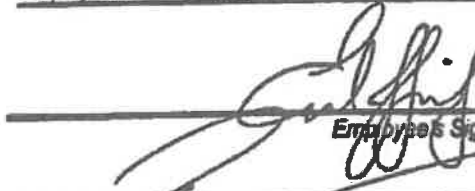

Comments:

Employee statement

X I certify that my outside employment does not present a conflict with my State employment. The employment may not be construed as an extension of my duties or responsibilities with the State. I will devote my full time, attention and effort to State employment during official duty hours and not to contractual obligations. If a potential conflict arises, I will notify my supervisor and agency head, within three business days. I agree to submit a new application for approval by July 1 of each year, or within 30 days of a change in outside employment status.

Employee's agency head shall check one of the following statements:

X I have reviewed the information provided on this form and determined that this secondary employment **DOES NOT** present a real or potential conflict of interest to the State of Nevada.
 _____ I have reviewed the information provided on this form and determined that this secondary employment **DOES** present a real or potential conflict of interest to the State of Nevada.

 4/30/19
 Employee's Signature and Date
 5/1/19
 Agency Head's Signature and Date

Northern Administration
5500 Snyder Ave.
Carson City, NV 89701
(775) 887-3285

Southern Administration
3955 W. Russell Rd.
Las Vegas, NV 89118
(702) 486-9912



**State of Nevada
Department of Corrections**

Steve Sisolak
Governor


James Dzurenda
Director

Kim T. Thomas, J.D.
Deputy Director, Programs

MEMORANDUM

DATE: July 1, 2019

TO: Kristina Shea, Executive Branch Budget Officer
Governor's Finance Office

FROM: Chris Franklin, Management Analyst IV, Nevada Department of Corrections 

Subject: **Notice of Pending Federal Grant Extension - Second Chance Act-Adult Re-entry and Employment Strategic Planning Grant**

The Second Chance Act-Adult Re-entry and Employment Strategic Planning Grant (2018-RQ-BX-0009) was awarded to the Nevada Department of Corrections (NDOC) for the project/budget periods of 10/1/2018 – 9/30/2019. The department has been informed by both the Department of Justice, Bureau of Justice Administration (BJA) and the Council of State Governments (CSG) that due to several reasons of no fault of the NDOC, an extension to the end date of the above subject grants for all eleven awardees would be initiated and approved by the federal entity.

All awardees have been given until 7/31/2019 to submit their extension requests for the project/budget periods to end on 9/30/2020. The NDOC will be submitting an extension requests on or before the July due date. Once approved, a new grant award will be provided to the Nevada Department of Corrections. At that time the department will submit contract and budget amendments to reflect the new grant period end dates.

Thank you

State of Nevada
Department of Administration

Purchasing Division

515 E. Musser Street, Suite 300
Carson City, NV 89701



Steve Sisolak
Governor

Deonne E. Contine
Director

Kevin D. Doty
Acting Administrator

Purchasing Use Only:

Approval#: **190703**

SOLICITATION WAIVER JUSTIFICATION AND REQUEST FORM

ALL FIELDS ARE REQUIRED – INCOMPLETE REQUESTS WILL BE RETURNED TO THE AGENCY

1a	Agency Contact Information - Note: Approved copy will be sent to only the contact(s) listed below:			
	State Agency: Department of Corrections			
	Contact Name and Title		Phone Number	Email Address
	Alicia Roman, Contracts Manager		775-887-3333	aroman@doc.nv.gov

1b	Vendor Information:			
	Identify Vendor:		Salisbury Consulting LLC	
	Contact Name:		Emily Salisbury, Ph.D.	
	Address:		3463 Sioux Way, Las Vegas, NV 89169	
	Telephone Number:		503-781-1482	
Email Address:		Emily.salisburyconsulting@gmail.com		

1c	Type of Waiver Requested – Check the appropriate type:			
	Sole or Single Source:		X	
	Professional Service Exemption:			

1d	Contract Information:			
	Is this a new Contract?	Yes	X	No
	Amendment:	#		
	CETS:	#22135		

1e	Term:			
	One (1) Time Purchase:			
	Contract:	Start Date:	Upon BOE Approval (8/19)	End Date: 04/30/20

1f	Funding:	
	State Appropriated:	
	Federal Funds:	100.00%
	Grant Funds:	
	Other (Explain):	

1g	Total Estimated Value of this Service Contract, Amendment or Purchase:	
	\$22,105.00	

2	Provide a description of work/services to be performed or commodity/good to be purchased:
	<i>Salisbury Consulting LLC will be providing an independent review of the NDOC, our data measures, and the application of those measures to program performance measure/goals necessary to meet the time line and deliverables of the Adult Re-entry and Employment Strategic Planning (ARES) grant.</i>

3	What are the unique features/qualifications required for this service or good that are not available from any other vendor:
	<i>Having provided previous programmatic support of the Statewide Recidivism Reduction (SRR) grant, Dr. Emily Salisbury will engage as a subject matter expert and member of the statewide strategic planning committee on correctional rehabilitation and the principles of effective offender interventions. Her expertise is highly specialized, as she is a uniquely qualified local provider of this service based on her education and experience.</i>

4	Explain why this service or good cannot be competitively bid and why this purchase is economically only available from a single source:
	<i>Dr. Salisbury has been the UNLV lead during the SRR grant, originally awarded in 2017, and that knowledge and experience will be an integral part of this implementation of the most recent Adult Re-entry and Employment Strategic Planning (ARES) grant goals and deliverables which allows for the continued work which began with the SRR grant, as noted above. This work would have continued through UNLV if the board imposed limitations for grant funding had not reached their limit prior to completion of the full scope of work required by the grant.</i>

5	Were alternative services or commodities evaluated? Check One.	Yes:		No:	X
	a. <u>If yes</u> , what were they and why were they unacceptable? Please be specific with regard to features, characteristics, requirements, capabilities and compatibility.				
	b. <u>If not</u> , why were alternatives not evaluated?				
	<i>Dr. Salisbury has been the UNLV lead during the SRR grant and her knowledge and experience will be an integral part of this implementation of the ARES goals and deliverables, as originally required by the SRR grant and currently required through the ARES grant.</i>				

6	Has the agency purchased this service or commodity in the past? Check One. Note: If your previous purchase(s) was made via solicitation waiver(s), a copy or copies of <u>ALL</u> previous waivers <u>MUST</u> accompany this request.			Yes:		No:	X
	a. If yes, starting with the most recent contract and working backward, for the <u>entire</u> relationship with this vendor, or any other vendor for this service or commodity, please provide the following information:						
	Term Start and End Dates		Value	Short Description	Type of Procurement (RFP#, RFQ#, Waiver #)		
			\$				
			\$				
			\$				

			\$		
--	--	--	----	--	--

7	What are the potential consequences to the State if the waiver request is denied and the service or good is competitively bid?
	<i>If Dr. Salisbury cannot provide this work, NDOC will not be able to meet the requirements set forth by the Federal grant, jeopardizing any future grant awards.</i>

8	What efforts were made or conducted to substantiate there is no competition for the service or good and to ensure the price for this purchase is fair and reasonable?
	<i>This scope of work requiring an independent review, data measures, and the application of those measures to program performance measure/goals of program has been contracted with UNR in northern Nevada and UNLV in southern Nevada, since the original SRR grant was awarded in 2017. NDOC actually saves 26% on this work by contracting directly with Salisbury Consulting LLC, due to a reduction in staff overhead. \$30,063.00 was originally budgeted for the same work through the UNLV (NSHE) contract, before it was clear that the board imposed grant cap would be exceeded.</i>

9	Will this purchase obligate the State to this vendor for future purchases? <u>Before selecting your answer, please review information included on Page 2, Section 9 of the instructions.</u>	Yes:	X	No:	
	a. <i>If yes, please provide details regarding future obligations or needs.</i>				
	<i>There is a possibility of future grant awards that may require Dr. Salisbury's services.</i>				

By signing below, I know and understand the contents of this Solicitation Waiver Request and Justification and attest that all statements are true and correct.

Alicia Roman CONTRACTS MANAGER
Agency Representative Initiating Request

NEVADA DEPARTMENT OF CORRECTIONS 6/28/19
Print Name of Agency Representative Initiating Request Date

[Signature]
Signature of Agency Head Authorizing Request

6/28/19
Print Name of Agency Head Authorizing Request Date

PLEASE NOTE: In an effort to avoid possible conflict with any equipment, system or process already installed or in place by the State of Nevada or to assist in our due diligence, State Purchasing may solicit a review of your request from another agency or entity. The signature below indicates another agency or entity has reviewed the information you provided. This signature does not exempt your agency from any other processes that may be required.

Name of agency or entity who provided information or review:

Representative Providing Review

Print Name of Representative Providing Review Date

Please consider this memo as my approval of your request. This exemption is granted pursuant to NAC 333.150(2)(a)(b)(c), NRS 333.400. This exemption may be rescinded in the event reliable information becomes available upon which the Purchasing Administrator determines that the service or good sought may in fact be contracted for in a more effective manner. Pursuant to NRS 284.173(6), contracts for services do not become effective without the prior approval of the State Board of Examiners (BOE).

If you have any questions or concerns please contact the Purchasing Division at 775-684-0170.

Signed:

Kevin D. Doty 7/9/19
Administrator, Purchasing Division or Designee Date

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22266**

Agency Name: GCB - GAMING CONTROL BOARD	Legal Entity Name: Southern Nevada Area Communications Council
Agency Code: 611	Contractor Name: Southern Nevada Area Communications Council
Appropriation Unit: 4061-04	Address: 6000 E. Rochelle Ave.
Is budget authority available?: Yes	City/State/Zip: LAS VEGAS, NV 89122
If "No" please explain: Not Applicable	Contact/Phone: 702/455-7390
	Vendor No.: T81026920E
	NV Business ID: EXEMPT

To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

X General Funds	55.00 %	Fees	0.00 %
X Federal Funds	45.00 %	Bonds	0.00 %
Highway Funds	0.00 %	Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/15/2019**

Anticipated BOE meeting date 08/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **1 year and 320 days**4. Type of contract: **Interlocal Agreement**Contract description: **SNACC Radios**

5. Purpose of contract:

This is a new interlocal agreement that continues ongoing access to an 800MHz two-way radio system in support of the Board's Enforcement Division field operations in Southern Nevada.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,999.00**

Payment for services will be made at the rate of \$21,638.16 per year

Other basis for payment: \$21,638.16 for FY2020 and \$22,871.44 for FY2021 for the existing 82 radios, plus the applicable service fee and buy-in fee for any additional radios

II. JUSTIFICATION

7. What conditions require that this work be done?

Enforcement agents require law enforcement grade reliable communications to conduct field operations in a wide variety of urban and rural environments in Southern Nevada.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Requires F.C.C. licensing, technical expertise in radio frequency communications technology, and an established 800 MHz radio relay system.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

This government entity best meets the needs of the agency at this time.

d. Last bid date:

Anticipated re-bid date:

10. Does the contract contain any IT components?

No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Contractor is currently under contract with the Gaming Control Board; services are satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	klay0	08/07/2019 16:39:14 PM
Division Approval	klay0	08/07/2019 16:39:17 PM
Department Approval	klay0	08/07/2019 16:39:21 PM
Contract Manager Approval	klay0	08/07/2019 16:39:24 PM
Budget Analyst Approval	lfree1	08/15/2019 15:58:09 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22228**Agency Name: **DPS-DIRECTOR'S OFFICE**Agency Code: **650**Appropriation Unit: **3775-00**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **LIQUIVISION TECHNOLOGY, INC**Contractor Name: **LIQUIVISION TECHNOLOGY, INC**Address: **711 MARKET STREET**City/State/Zip: **KLAMATH FALLS, OR 97601**Contact/Phone: **JOHN BUDDEN 541-281-6944**

Vendor No.:

NV Business ID: **NV20111264189**To what State Fiscal Year(s) will the contract be charged? **2020-2024**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 %

Agency Reference #: **650**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/30/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **07/31/2023**Contract term: **4 years and 2 days**4. Type of contract: **Revenue Contract**Contract description: **Lead Brass Clean Up**

5. Purpose of contract:

This is a new revenue contract to provide ongoing lead and brass collection and recycling services for the bullet trap and associated area at the Nevada Department of Public Safety (DPS) Training Division Firing Range in Carson City. The contractor will conduct lead and brass collection on an as needed basis. DPS will receive 85% of the current market value of the materials reclaimed.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**Other basis for payment: **Market Rate, per pound****II. JUSTIFICATION**

7. What conditions require that this work be done?

The Department of Public Safety and Department of Corrections share the NNCC Firearms range located in Carson City. Lead and brass waste from use of the firearms must be removed and disposed of to maintain the range in a safe and healthy environment for the officers who use it and comply with OSHA standards. The contract is for the reclamation of the DPS side of the shared range only.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Lead reclamation services are not offered by State agencies

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Liquivision
Action Target
1-800-Got Scrap

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Liquivision is the only vendor willing to perform services in this area.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Foreign Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	jdibasil	07/25/2019 16:27:54 PM
Division Approval	jdibasil	07/25/2019 16:27:59 PM
Department Approval	cboegle	07/25/2019 16:32:04 PM
Contract Manager Approval	cboegle	07/25/2019 16:32:08 PM
Budget Analyst Approval	bmacke1	07/30/2019 15:59:59 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22146**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4460-07**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **DYER ENGINEERING CONSULTANTS, INC.**Contractor Name: **DYER ENGINEERING CONSULTANTS, INC.**Address: **INC
9160 DOUBLE DIAMOND PKWY STE A**City/State/Zip: **RENO, NV 89521**Contact/Phone: **775/852-1440**Vendor No.: **T29030589**NV Business ID: **NV19981192874**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	50.00 %	Sportsmen Revenue
X Federal Funds	35.00 %	X	Bonds	15.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

Agency Reference #: **19-53**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/13/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2023**Contract term: **3 years and 322 days**4. Type of contract: **Contract**Contract description: **Civil Engineering**

5. Purpose of contract:

This is a new contract to provide ongoing statewide civil engineering services, including design of dams, hydraulic structures and recreational facilities as well as environmental engineering for stream improvements and National Environmental Policy Act document preparation.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$45,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The need to upgrade existing facilities and new facility requirements.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

These are large, complex engineering projects that require special expertise.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

The selected vendor has the required expertise.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Rodd Lighthouse, Professional Engineer Ph: 775-688-1586

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nroble1	07/01/2019 15:26:15 PM
Division Approval	tdoucett	07/09/2019 15:00:38 PM
Department Approval	eobrien	07/26/2019 10:54:49 AM
Contract Manager Approval	nroble1	07/29/2019 10:53:15 AM
Budget Analyst Approval	mtum1	08/13/2019 17:41:34 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22218**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4465-19**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **PISCES MOLECULAR, LLC**Contractor Name: **PISCES MOLECULAR, LLC**Address: **1600 RANGE ST STE 201**City/State/Zip: **BOULDER, CO 80301-2739**Contact/Phone: **John Wood 303/546-9300**Vendor No.: **T27030933**NV Business ID: **NV20191299682**To what State Fiscal Year(s) will the contract be charged? **2020-2023**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Aquatic Invasive Species decal
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **20-03**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/13/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **12/31/2022**Contract term: **3 years and 141 days**4. Type of contract: **Contract**Contract description: **Mussel Water Sample**

5. Purpose of contract:

This is a new contract to provide ongoing lab services of plankton water samples for early detection and monitoring of aquatic invasive species, primarily for quagga and zebra mussels.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$49,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Water sample testing throughout the State of Nevada for early detection and rapid response for aquatic invasive species.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The State does not have the required analytical instruments or training.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Scripps Institution of Oceanography
 Pisces Molecular LLC
 Skidway Institute of Oceanography

b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The selected vendor provides the necessary services at the most reasonable cost.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

For the Department of Wildlife since FY18 and work has been satisfactory.

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Laura Megill, Wildlife Staff Specialist Ph: 775-688-1532

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	nroble1	07/23/2019 13:34:33 PM
Division Approval	tdoucett	07/25/2019 12:39:35 PM
Department Approval	eobrien	07/30/2019 10:57:07 AM
Contract Manager Approval	nroble1	07/30/2019 12:23:07 PM
Budget Analyst Approval	mtum1	08/13/2019 17:47:05 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **21736**Agency Name: **DEPARTMENT OF WILDLIFE**Agency Code: **702**Appropriation Unit: **4467-13**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **OKLAHOMA, STATE OF**Contractor Name: **OKLAHOMA, STATE OF**Address: **OKLAHOMA STATE UNIVERSITY
113 STUDENT UNION**City/State/Zip: **STILLWATER, OK 74078**Contact/Phone: **405/744-8520**Vendor No.: **T80953447T**NV Business ID: **Government Entity**To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	25.00 % Sportsmen Revenue
X Federal Funds	75.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

Agency Reference #: **#19-46**

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/02/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2020**Contract term: **333 days**4. Type of contract: **Interlocal Agreement**Contract description: **Soil Analysis**

5. Purpose of contract:

This is a new interlocal agreement to provide ongoing soil analysis services at project sites for habitat restoration.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$12,992.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The goal in this project is to perform soil analysis to characterize Ecological Site Descriptions at project sites for better habitat restoration.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Department of Wildlife staff do not have the equipment necessary to conduct soil testing that is required for this project.9. Were quotes or proposals solicited? **Yes**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

**Kansas State University Soil Testing Lab
Oklahoma State University Soil Lab
Soil Test Farm Consultants**
b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The selected vendor provides the necessary services at the most reasonable cost.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Governmental Entity

16. Not Applicable

17. Not Applicable

18. Not Applicable

19. Agency Field Contract Monitor:

Lee Turner, Wildlife Staff Specialist Ph: 775-688-1542

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	tdoucett	04/24/2019 07:17:48 AM
Division Approval	eobrien	07/03/2019 13:08:52 PM
Department Approval	eobrien	07/03/2019 13:08:56 PM
Contract Manager Approval	nroble1	07/05/2019 16:25:00 PM
Budget Analyst Approval	mtum1	08/02/2019 17:42:32 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22199**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4162-00**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **Katoma LLC.**Contractor Name: **Katoma LLC.**Address: **PO Box 5442**City/State/Zip: **Stateline, NV 89449**Contact/Phone: **Tomasz Walas 775-297-2970**

Vendor No.:

NV Business ID: **NV20141309320**To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/22/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/01/2019**Contract term: **71 days**4. Type of contract: **Revenue Contract**Contract description: **personal watercrafts**

5. Purpose of contract:

This is a new revenue contract to provide pontoon and personal watercraft rentals at Lake Tahoe State Park, Cave Rock boat launch.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Vendor wants to rent pontoon and personal watercraft.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Not applicable.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Brett Hartley, Park Ranger Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	07/16/2019 09:32:21 AM
Division Approval	sdecrona	07/16/2019 09:32:24 AM
Department Approval	sdecrona	07/16/2019 09:32:26 AM
Contract Manager Approval	sdecrona	07/16/2019 09:32:31 AM
Budget Analyst Approval	cpalme2	07/22/2019 14:32:53 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22216**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4162-00**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **Sierra Diving Center**Contractor Name: **Sierra Diving Center**Address: **104 E. Grove Street**City/State/Zip: **Reno, NV 89502**Contact/Phone: **Keith Chesnut 775-825-2147**

Vendor No.:

NV Business ID: **NV19761003275**To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/29/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **04/30/2020**Contract term: **276 days**4. Type of contract: **Revenue Contract**Contract description: **Scuba Tours & Train**

5. Purpose of contract:

This is a new revenue contract to provide scuba tour and classes at Lake Tahoe Nevada State Park.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Vendor would like to have scuba tours and classes at the park.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Non competitive.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

non-competitive

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Kevin Fromherz, Park Ranger III Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	07/23/2019 08:13:01 AM
Division Approval	sdecrona	07/23/2019 08:13:08 AM
Department Approval	sdecrona	07/23/2019 08:13:11 AM
Contract Manager Approval	sdecrona	07/24/2019 11:18:21 AM
Budget Analyst Approval	cpalme2	07/29/2019 11:58:22 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22198**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4162-00**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: Walker Marine, Inc. DBA Salvage Marine

Contractor Name: **Walker Marine, Inc. DBA Salvage Marine**Address: **PO Box 10499**City/State/Zip: **So. Lake Tahoe , CA 96158**

Contact/Phone: Clay Walker 530-541-8514

Vendor No.:

NV Business ID: NV20061021670

To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/20/2019**

Anticipated BOE meeting date 09/2019

Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **03/31/2020**Contract term: **224 days**4. Type of contract: **Revenue Contract**Contract description: **Vessel Launch**

5. Purpose of contract:

This is a new revenue contract to provide vessel launch services at Cave Rock State Park.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

Vendor wants to launch boats from the park.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

Non competitive.9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:
Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Brett Hartley, Park Ranger Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	07/16/2019 09:10:49 AM
Division Approval	sdecrona	07/16/2019 09:10:52 AM
Department Approval	sdecrona	07/16/2019 09:10:54 AM
Contract Manager Approval	sdecrona	07/23/2019 12:39:52 PM
Budget Analyst Approval	cmurph3	08/20/2019 08:46:08 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22250**Agency Name: **DCNR - PARKS DIVISION**Agency Code: **704**Appropriation Unit: **4162-00**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **Waterwave Group, LLC.**Contractor Name: **Waterwave Group, LLC.**Address: **PO Box 762**City/State/Zip: **Zephyr Cove, NV 89448**Contact/Phone: **Lukasz Madzik 530-307-2208**

Vendor No.:

NV Business ID: **NV20171509826**To what State Fiscal Year(s) will the contract be charged? **2020**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	Fees	0.00 %
Federal Funds	0.00 %	Bonds	0.00 %
Highway Funds	0.00 %	X Other funding	100.00 % Revenue

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **08/08/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **10/01/2019**Contract term: **54 days**4. Type of contract: **Revenue Contract**Contract description: **Motor Boat Rentals**

5. Purpose of contract:

This is a new revenue contract to provide motor boat rentals at Lake Tahoe Nevada State Park - Cave Rock.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$10,000.00****II. JUSTIFICATION**

7. What conditions require that this work be done?

The vendor would like to rent boats to the public.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

NA9. Were quotes or proposals solicited? **No**Was the solicitation (RFP) done by the Purchasing Division? **No**

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicableb. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

Non-competitive.

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

No If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Not Applicable

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

LLC

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

Brett Hartley, Park Ranger Ph: null

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	sdecrona	08/06/2019 08:54:08 AM
Division Approval	sdecrona	08/06/2019 08:54:11 AM
Department Approval	sdecrona	08/06/2019 08:54:15 AM
Contract Manager Approval	sdecrona	08/06/2019 09:33:08 AM
Budget Analyst Approval	cpalme2	08/08/2019 16:17:16 PM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22084**Agency Name: **BDC LICENSING BOARDS & COMMISSIONS**Agency Code: **BDC**Appropriation Unit: **B024 - All Categories**Is budget authority available?: **Yes**

If "No" please explain: Not Applicable

Legal Entity Name: **Richard Dreitzer**Contractor Name: **Dreitzer Law**Address: **601 S Tenth Street, Suite 202C**City/State/Zip: **Las Vegas, NV 89101**Contact/Phone: **Richard Dreitzer 702-245-5666**

Vendor No.:

NV Business ID: **NV20191275150**To what State Fiscal Year(s) will the contract be charged? **2020-2021**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 %	Licensure
Federal Funds	0.00 %		Bonds	0.00 %	
Highway Funds	0.00 %		Other funding	0.00 %	

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **07/19/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **06/30/2021**Contract term: **1 year and 347 days**4. Type of contract: **Contract**Contract description: **Legal Services**

5. Purpose of contract:

This is a new contract for legal services required by the Board, which includes representation in law suits, disciplinary actions, administrative hearings, and legislative assistance.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$20,000.00**

Payment for services will be made at the rate of \$200.00 per Hour

II. JUSTIFICATION

7. What conditions require that this work be done?

The Board finds it necessary to engage in a contract for Legal Services as outlined within the Contract Scope of Work for the purpose of accomplishing work of the Board under statute authority which authorizes the hiring of independent legal counsel.

8. Explain why State employees in your agency or other State agencies are not able to do this work:

No legal expertise within the Board of Podiatry. Legal services to be provided by the contractor pertain to a specific area of knowledge and a continuity of services.

9. Were quotes or proposals solicited?

No

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Not Applicable

b. Solicitation Waiver: **Professional Service (As defined in NAC 333.150)**

c. Why was this contractor chosen in preference to other?

d. Last bid date: Anticipated re-bid date:

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Previous contract with the Nevada State Board of Podiatry

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is not registered with the Nevada Secretary of State's Office because the legal entity is a:
Sole Proprietor

16. a. Is the Contractor Name the same as the legal Entity Name?

No b. If "No", please explain:

Registration with the Nevada Secretary of State's office shows Richard Dreitzer as the entity registered.

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. Not Applicable

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	vwind1	06/13/2019 14:49:53 PM
Division Approval	vwind1	06/13/2019 14:49:57 PM
Department Approval	vwind1	06/13/2019 14:50:01 PM
Contract Manager Approval	vwind1	06/13/2019 14:50:04 PM
Budget Analyst Approval	lfree1	07/19/2019 11:17:35 AM

CONTRACT SUMMARY

(This form must accompany all contracts submitted to the Board of Examiners (BOE) for review and approval)

I. DESCRIPTION OF CONTRACT1. Contract Number: **22221**Agency Name: **BDC LICENSING BOARDS & COMMISSIONS**Agency Code: **BDC**Appropriation Unit: **B030 - All Categories**Is budget authority available?: **Yes**If "No" please explain: **Not Applicable**Legal Entity Name: **Lorylynn Ltd.**Contractor Name: **Lorylynn Ltd.**Address: **8885 Scott Valley Ct.**City/State/Zip: **Reno, NV 89523**Contact/Phone: **Loretta Ponton 775-560-8662**

Vendor No.:

NV Business ID: **NV20061202027**To what State Fiscal Year(s) will the contract be charged? **2020-2022**

What is the source of funds that will be used to pay the contractor? Indicate the percentage of each funding source if the contractor will be paid by multiple funding sources.

General Funds	0.00 %	X	Fees	100.00 % Licensure
Federal Funds	0.00 %		Bonds	0.00 %
Highway Funds	0.00 %		Other funding	0.00 %

2. Contract start date:

a. Effective upon Board of Examiner's approval? **No** or b. other effective date **09/01/2019**Anticipated BOE meeting date **09/2019**Retroactive? **No**

If "Yes", please explain

Not Applicable3. Termination Date: **08/31/2021**Contract term: **2 years**4. Type of contract: **Contract**Contract description: **Exec Director Srvs**

5. Purpose of contract:

This is a new contract to provide executive director and board administration services.

6. NEW CONTRACT

The maximum amount of the contract for the term of the contract is: **\$48,000.00**

Payment for services will be made at the rate of \$2,000.00 per Month

II. JUSTIFICATION

7. What conditions require that this work be done?

NRS 625A.055 provides authority for the Board to employ and fix the compensation of staff

8. Explain why State employees in your agency or other State agencies are not able to do this work:

The Board must employ its own staff.

9. Were quotes or proposals solicited?

Yes

Was the solicitation (RFP) done by the Purchasing Division?

No

a. List the names of vendors that were solicited to submit proposals (include at least three):

Lorylynn Ltd
Posted on State Purchasing Website
GPI Record Management LLC
b. Solicitation Waiver: **Not Applicable**

c. Why was this contractor chosen in preference to other?

The vendor has extensive experience in providing Executive Director and similar services and was the highest ranked proposer.

d. Last bid date: 05/31/2019 Anticipated re-bid date: 07/01/2022

10. Does the contract contain any IT components? No

III. OTHER INFORMATION

11. Is there an Indirect Cost Rate or Percentage Paid to the Contractor?

No If "Yes", please provide the Indirect Cost Rate or Percentage Paid to the Contractor

Not Applicable

12. a. Is the contractor a current employee of the State of Nevada or will the contracted services be performed by a current employee of the State of Nevada?

No

b. Was the contractor formerly employed by the State of Nevada within the last 24 months or will the contracted services be performed by someone formerly employed by the State of Nevada within the last 24 months?

No

c. Is the contractor employed by any of Nevada's political subdivisions or by any other government?

No If "Yes", please explain

Not Applicable

13. Has the contractor ever been engaged under contract by any State agency?

Yes If "Yes", specify when and for which agency and indicate if the quality of service provided to the identified agency has been verified as satisfactory:

Speech-Language Pathology Audiology and Hearing Aid Dispensing Board, current, services are verified as satisfactory
Board of Occupational Therapy, 9/1/06 - 6/30/14; services verified as satisfactory
Board of Environmental Health Specialists, current, services verified as satisfactory
Nevada Physical Therapy Board, 2/16 - 6/16, services verified as satisfactory

14. Is the contractor currently involved in litigation with the State of Nevada?

No If "Yes", please provide details of the litigation and facts supporting approval of the contract:

Not Applicable

15. The contractor is registered with the Nevada Secretary of State's Office as a:

Nevada Corporation

16. a. Is the Contractor Name the same as the legal Entity Name?

Yes

17. a. Does the contractor have a current Nevada State Business License (SBL)?

Yes

18. a. Is the legal entity active and in good standing with the Nevada Secretary of State's Office?

Yes

19. Agency Field Contract Monitor:

20. Contract Status:

Contract Approvals:

Approval Level	User	Signature Date
Budget Account Approval	lp310000	07/24/2019 13:45:48 PM
Division Approval	lp310000	07/24/2019 13:45:56 PM
Department Approval	lp310000	07/24/2019 13:46:04 PM
Contract Manager Approval	lp310000	07/24/2019 13:46:10 PM
Budget Analyst Approval	lfree1	07/29/2019 13:54:35 PM

Steve Sisolak
Governor



Susan Brown
Director

Kimberley Perondi
Deputy Director

**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Room 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 7, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Lynnette Aaron, Executive Branch Budget Officer LA
Governor's Finance Office, Budget Division

Subject: BOARD OF EXAMINERS **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners meeting:

FISCAL YEAR 2019 – 4th QUARTER OVERTIME REPORT

Agenda Item Write-up:

Fiscal year 2019 fourth quarter overtime report by department.

Additional Information:

As of the fourth quarter of fiscal year 2019, overtime pay and accrued compensatory leave accounted for a total of approximately \$46.23 million, or 4.27% of total pay, a 0.1% decrease from fiscal year 2018.

The 5 agencies with the highest dollar amount of overtime and accrued comp time for 4th quarter FY19 accounted for 87.0% of the total:

1. Department of Corrections – \$3.32 million
2. Department of Health & Human Services – \$2.49 million
3. Department of Public Safety – \$2.14 million
4. Department of Transportation – \$984k
5. Department of Conservation & Natural Resources – \$353k

The 5 agencies with the highest percentage of overtime and accrued comp time as a share of total pay for 4th quarter FY19 were:

- 1. Department of Public Safety – 8.7%
- 2. Commission on Mineral Resources – 8.3%
- 3. Department of Corrections – 7.8%
- 4. Department of Veterans Service – 7.2%
- 5. Adjutant General – 6.2%

At the Department of Corrections, overtime and comp time increased by \$309,000 (10.3%) from the prior quarter, and continued to be driven by the large correctional centers and medical personnel. Overtime and comp time for 4th quarter FY19 were highest at these 7 locations, which accounted for 89.6% of the total overtime for the department:

- 1. High Desert State Prison – \$1.02 million
- 2. Ely State Prison – \$649k
- 3. Northern Nevada Correctional Center– \$490k
- 4. Lovelock Correctional Center – \$325k
- 5. Southern Desert Correctional Center – \$203k
- 6. Florence McClure Women’s Correctional Center – \$171k
- 7. Prison Medical – \$117k


By event code, the highest four causes accounted for 86.7% of the overtime:

- 1. Covering annual and military leave – \$1.84 million
- 2. Hospital coverage – \$553k
- 3. Workload – \$257k
- 4. Covering holiday shifts – \$231k

At the Department of Health and Human Services, overtime was driven by Public & Behavioral Health (\$1.26 million - primarily in Southern Nevada Adult Mental Health (\$797k) and Facility for the Mental Offender (\$305k) budget accounts), Child and Family Services (\$737k) and Aging & Disability Services (\$444k). By event code, the highest four causes accounted for 75.2% of the overtime:

- 1. Covering vacant shifts – \$878k
- 2. Covering 24 hour shifts – \$581k
- 3. Workload – \$287k
- 4. Covering holiday shifts – \$131k

REVIEWED:



INFO ITEM:

OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2019 SUMMARY (QTR 4)
NEVADA DEPARTMENT OF ADMINISTRATION



Tuesday, September 10, 2019

CUMULATIVE STATEWIDE TOTALS (QTR 4)

	2017	2018	2019
BASE PAY	\$941,770,386	\$989,490,532	\$1,036,667,285
OVERTIME PAY + ACCRUED COMP	\$46,840,107	\$46,267,557	\$46,234,766
TOTAL PAY	\$988,610,493	\$1,035,758,089	\$1,082,902,051
OT/COMP AS A SHARE OF TOTAL PAY	4.74%	4.47%	4.27%

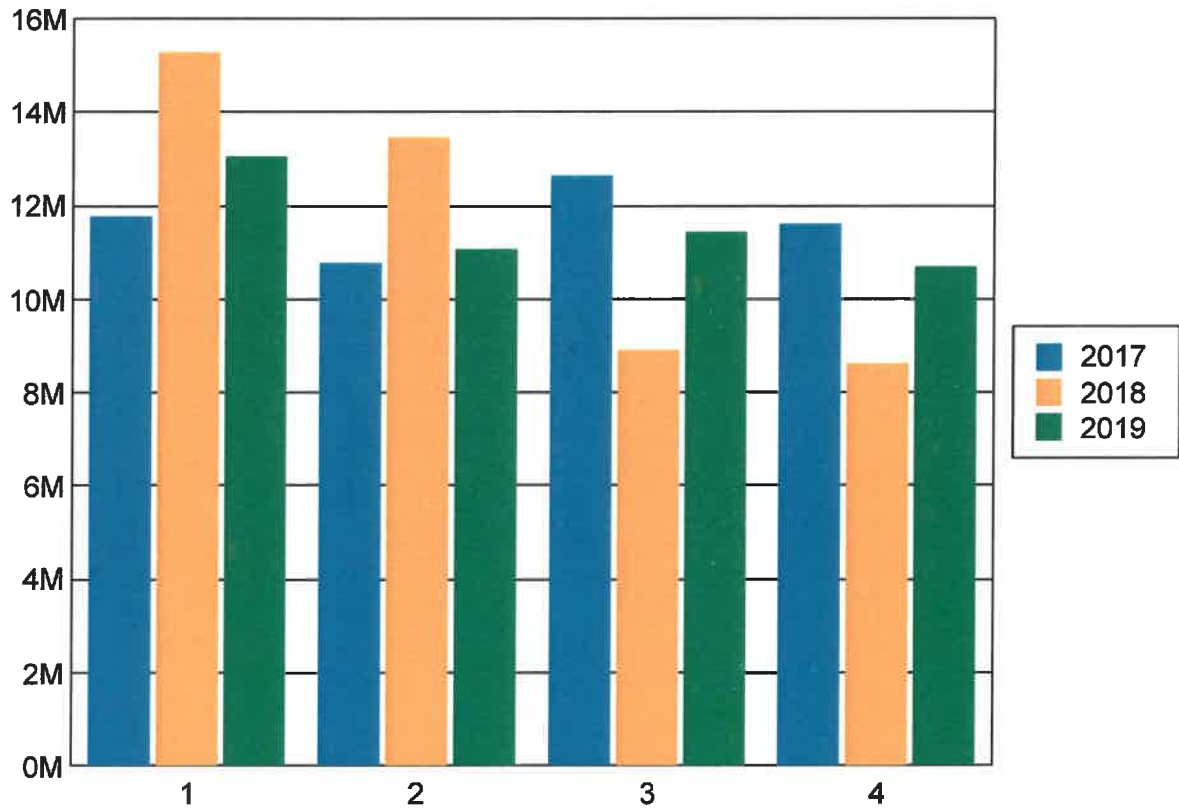
Highest OT/Comp expenditures in dollars

Agency Code	Department	Overtime and Accrued Comp	OT/Comp as a Share of Total Pay
44	DEPARTMENT OF CORRECTIONS	\$3,320,039	7.81%
40	DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$2,494,923	3.03%
65	DEPARTMENT OF PUBLIC SAFETY	\$2,137,466	8.66%
80	DEPARTMENT OF TRANSPORTATION	\$983,784	3.78%
70	DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$352,597	2.96%

Highest percentages of OT/Comp as a share of Total Pay

Agency Code	Department	Overtime and Accrued Comp	OT/Comp as a Share of Total Pay
65	DEPARTMENT OF PUBLIC SAFETY	\$2,137,466	8.66%
50	COMMISSION ON MINERAL RESOURCES	\$21,598	8.26%
44	DEPARTMENT OF CORRECTIONS	\$3,320,039	7.81%
24	DEPARTMENT OF VETERANS SERVICE	\$233,087	7.19%
43	ADJUTANT GENERAL	\$85,246	6.20%

Statewide OT/Comp Distribution by Quarter



	Q1 Base Pay	Q2 Base Pay	Q3 Base Pay	Q4 Base Pay
2017	\$223,221,510	\$220,013,829	\$248,467,283	\$250,067,764
2018	\$231,058,718	\$261,110,987	\$232,557,766	\$264,763,061
2019	\$242,665,983	\$274,869,661	\$242,174,664	\$276,956,977

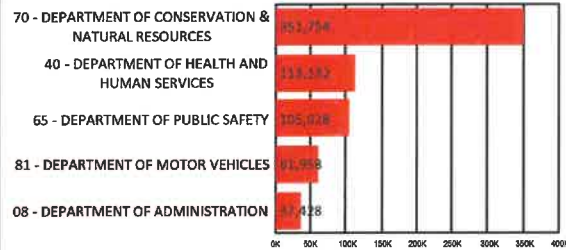
OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2019 QUARTERLY ANALYSIS vs FY2018
NEVADA DEPARTMENT OF ADMINISTRATION
Tuesday, September 10, 2019

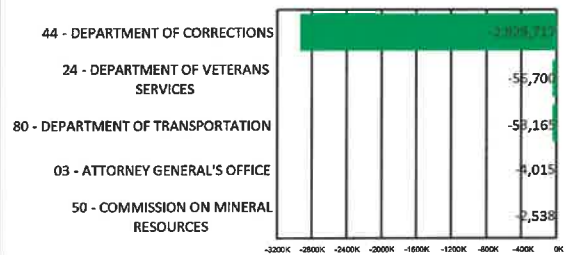


FY2019 - QTR1

Greatest increases in OT/Comp expenditures vs FY2018

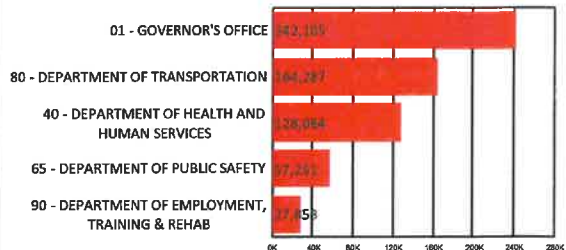


Greatest reductions in OT/Comp expenditure vs FY2018

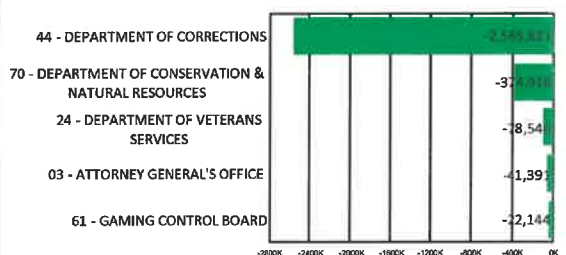


FY2019 - QTR2

Greatest increases in OT/Comp expenditures vs FY2018

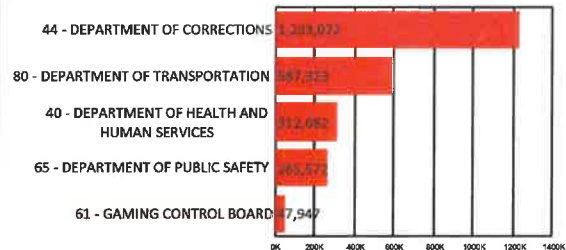


Greatest reductions in OT/Comp expenditure vs FY2018

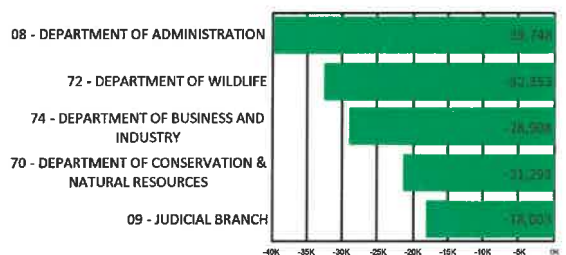


FY2019 - QTR3

Greatest increases in OT/Comp expenditures vs FY2018

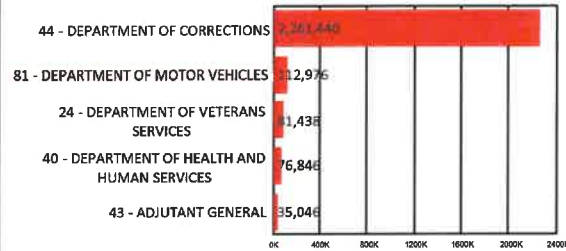


Greatest reductions in OT/Comp expenditure vs FY2018

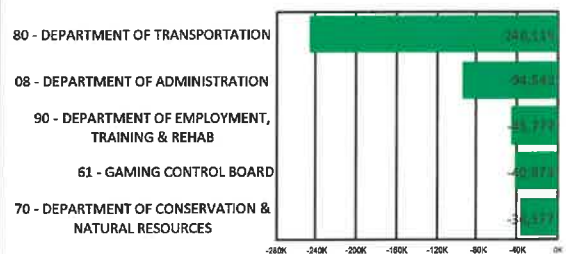


FY2019 - QTR4

Greatest increases in OT/Comp expenditures vs FY2018

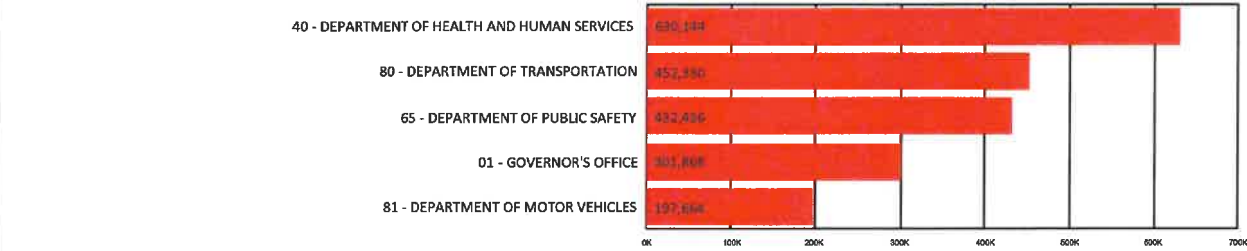


Greatest reductions in OT/Comp expenditure vs FY2018

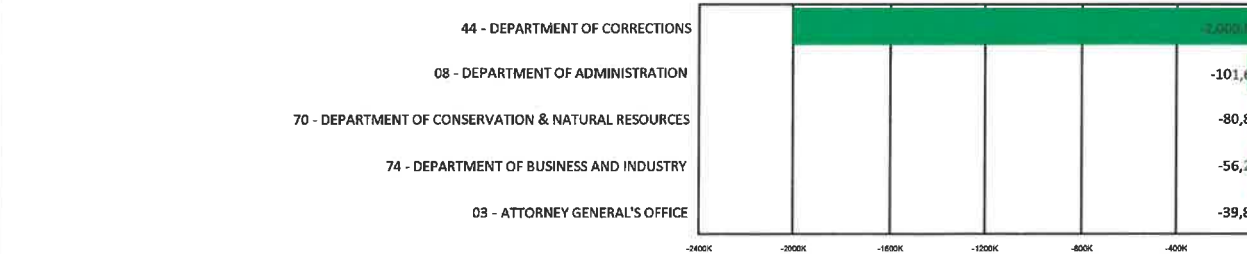


FY2019 - YEAR-TO-DATE TOTALS

Greatest increases in OT/Comp expenditures vs FY2018



Greatest reductions in OT/Comp expenditure vs FY2018



OVERTIME/ACCRUED COMP USE BY DEPARTMENT

FISCAL YEAR 2019 QUARTERLY DETAILED ANALYSIS

NEVADA DEPARTMENT OF ADMINISTRATION

Tuesday, September 10, 2019



	FY2019QTR1				FY2019QTR2				FY2019QTR3				FY2019QTR4			
	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2018	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2018	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2018	Overtime Pay and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/ Comp versus FY2018
01 - GOVERNOR'S OFFICE	\$35,865	\$1,540,285	2.33%	\$35,565	\$242,404	\$2,006,817	12.08%	\$242,105	\$22,394	\$1,553,400	1.44%	\$22,321	\$5,129	\$1,813,376	0.28%	\$1,876
02 - LIEUTENANT GOVERNOR'S OFFICE	\$0	\$79,060	0.00%	\$0	\$0	\$88,164	0.00%	\$0	\$0	\$72,385	0.00%	\$0	\$0	\$88,473	0.00%	\$0
03 - ATTORNEY GENERAL'S OFFICE	\$16,585	\$6,292,314	0.26%	\$-4,015	\$25,140	\$7,223,916	0.35%	\$-41,391	\$25,867	\$6,165,831	0.42%	\$10,815	\$26,844	\$7,240,932	0.37%	\$-5,247
04 - SECRETARY OF STATE'S OFFICE	\$5,525	\$1,674,793	0.33%	\$1,977	\$19,320	\$1,967,352	0.98%	\$18,956	\$22,341	\$1,714,338	1.30%	\$21,424	\$25,719	\$2,005,275	1.28%	\$11,226
05 - TREASURER'S OFFICE	\$362	\$585,477	0.06%	\$-946	\$2,430	\$694,474	0.35%	\$634	\$1,337	\$641,577	0.21%	\$-948	\$5,760	\$753,682	0.76%	\$4,962
06 - CONTROLLER'S OFFICE	\$7,116	\$663,171	1.07%	\$-385	\$53,111	\$822,630	6.46%	\$13,815	\$9,263	\$656,587	1.41%	\$6,095	\$1,925	\$756,472	0.25%	\$-940
08 - DEPARTMENT OF ADMINISTRATION	\$164,298	\$7,883,073	2.08%	\$37,428	\$100,783	\$8,967,610	1.12%	\$-4,755	\$147,380	\$7,752,079	1.90%	\$-39,748	\$77,145	\$9,007,528	0.86%	\$-94,542
09 - JUDICIAL BRANCH	\$2,506	\$6,862,635	0.04%	\$446	\$3,949	\$7,982,872	0.05%	\$1,600	\$1,188	\$6,842,299	0.02%	\$-18,003	\$4,824	\$7,954,286	0.06%	\$1,258
10 - DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS	\$8,083	\$1,526,336	0.53%	\$2,988	\$13,577	\$1,760,125	0.77%	\$-2,084	\$4,537	\$1,512,837	0.30%	\$-199	\$12,213	\$1,818,446	0.67%	\$504
12 - GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	\$0	\$666,628	0.00%	\$0	\$0	\$773,125	0.00%	\$0	\$0	\$709,128	0.00%	\$0	\$750	\$760,310	0.10%	\$750
13 - DEPARTMENT OF TAXATION	\$48,120	\$4,808,467	1.00%	\$12,623	\$38,304	\$5,710,078	0.67%	\$26,053	\$77,888	\$4,975,773	1.57%	\$24,557	\$68,978	\$5,808,844	1.19%	\$-29,554
15 - COMMISSION ON ETHICS	\$0	\$100,787	0.00%	\$0	\$0	\$133,694	0.00%	\$0	\$0	\$114,595	0.00%	\$0	\$0	\$133,694	0.00%	\$0
22 - JUDICIAL DISCIPLINE COMMISSION	\$0	\$96,983	0.00%	\$0	\$0	\$114,493	0.00%	\$0	\$0	\$99,782	0.00%	\$0	\$0	\$116,180	0.00%	\$0
23 - COMMISSION ON PEACE OFFICER STANDARDS & TRAINING	\$217	\$228,617	0.09%	\$217	\$662	\$252,200	0.26%	\$-211	\$144	\$231,378	0.06%	\$144	\$726	\$272,720	0.27%	\$-589
24 - DEPARTMENT OF VETERANS SERVICES	\$175,802	\$2,786,174	6.31%	\$-56,700	\$230,121	\$3,269,931	7.04%	\$-78,540	\$211,475	\$2,827,970	7.48%	\$40,407	\$233,087	\$3,243,962	7.19%	\$81,438
30 - DEPARTMENT OF EDUCATION	\$78,691	\$2,553,559	3.08%	\$14,087	\$44,075	\$2,996,448	1.47%	\$3,261	\$56,711	\$2,602,924	2.18%	\$2,547	\$53,490	\$3,038,804	1.76%	\$2,290
31 - STATE PUBLIC CHARTER SCHOOL AUTHORITY	\$12,176	\$294,250	4.14%	\$10,651	\$145	\$336,992	0.04%	\$145	\$5,228	\$250,609	2.09%	\$5,228	\$2,737	\$318,470	0.86%	\$-1,899
40 - DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$2,926,799	\$71,510,141	4.09%	\$113,132	\$3,086,825	\$82,312,646	3.75%	\$128,084	\$3,147,932	\$72,991,239	4.31%	\$312,082	\$2,494,923	\$82,368,221	3.03%	\$76,846
43 - ADJUTANT GENERAL	\$63,467	\$1,311,973	4.84%	\$4,279	\$63,301	\$1,286,204	4.92%	\$4,831	\$95,445	\$1,226,917	7.78%	\$43,638	\$85,246	\$1,375,835	6.20%	\$35,046
44 - DEPARTMENT OF CORRECTIONS	\$2,842,681	\$36,419,404	7.81%	\$-2,929,717	\$3,223,506	\$42,305,764	7.62%	\$-2,565,611	\$3,010,975	\$36,186,224	8.32%	\$1,233,072	\$3,320,039	\$42,523,315	7.81%	\$2,261,440
50 - COMMISSION ON MINERAL RESOURCES	\$16,458	\$212,274	7.75%	\$-2,538	\$43	\$194,809	0.02%	\$-358	\$4,687	\$185,850	2.52%	\$-2,781	\$21,598	\$261,500	8.26%	\$6,086
55 - DEPARTMENT OF AGRICULTURE	\$37,783	\$1,802,872	2.10%	\$17,893	\$16,495	\$2,013,686	0.82%	\$-106	\$15,272	\$1,701,291	0.90%	\$-5,104	\$19,646	\$2,042,804	0.96%	\$-3,291
58 - PUBLIC UTILITIES COMMISSION	\$0	\$1,849,658	0.00%	\$0	\$0	\$2,196,122	0.00%	\$0	\$0	\$1,865,252	0.00%	\$0	\$0	\$2,114,269	0.00%	\$0
61 - GAMING CONTROL BOARD	\$156,413	\$5,929,203	2.64%	\$-1,868	\$144,617	\$7,017,229	2.06%	\$-22,144	\$180,448	\$6,145,521	2.94%	\$47,947	\$128,629	\$7,128,222	1.80%	\$-40,973
65 - DEPARTMENT OF PUBLIC SAFETY	\$2,331,194	\$21,707,129	10.74%	\$105,028	\$1,881,849	\$24,318,090	7.74%	\$57,251	\$1,739,392	\$21,082,472	8.25%	\$265,572	\$2,137,466	\$24,694,739	8.66%	\$4,585
69 - COLORADO RIVER COMMISSION	\$445	\$697,940	0.06%	\$-374	\$2,080	\$798,584	0.26%	\$-37	\$10,318	\$679,821	1.52%	\$7,847	\$7,787	\$804,942	0.97%	\$6,172
70 - DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$2,250,466	\$12,742,674	17.66%	\$351,754	\$313,197	\$11,238,644	2.79%	\$-374,916	\$65,483	\$9,517,866	0.69%	\$-21,293	\$352,597	\$11,903,109	2.96%	\$-36,377
72 - DEPARTMENT OF WILDLIFE	\$72,956	\$3,659,052	1.99%	\$18,763	\$67,555	\$4,091,939	1.65%	\$9,467	\$75,488	\$3,560,781	2.12%	\$-32,353	\$115,313	\$4,277,996	2.70%	\$-3,773
74 - DEPARTMENT OF BUSINESS AND INDUSTRY	\$68,571	\$8,580,789	0.80%	\$14,504	\$41,422	\$10,033,744	0.41%	\$-13,568	\$36,058	\$8,636,707	0.42%	\$-28,908	\$59,119	\$10,058,094	0.59%	\$-28,278
80 - DEPARTMENT OF TRANSPORTATION	\$1,339,231	\$26,214,466	5.11%	\$-53,165	\$1,211,065	\$26,296,952	4.61%	\$164,287	\$2,120,173	\$26,665,299	7.95%	\$587,323	\$983,784	\$26,052,713	3.78%	\$-246,115
81 - DEPARTMENT OF MOTOR VEHICLES	\$195,222	\$12,837,086	1.52%	\$61,958	\$160,023	\$14,954,430	1.07%	\$17,355	\$197,974	\$12,957,727	1.53%	\$5,376	\$306,762	\$15,222,997	2.02%	\$112,976
90 - DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$191,008	\$10,936,485	1.75%	\$7,163	\$88,314	\$11,014,334	0.80%	\$27,853	\$149,213	\$10,849,643	1.38%	\$36,110	\$122,022	\$10,918,440	1.12%	\$-45,777
95 - EMPLOYEES' BENEFITS DIVISION	\$0	\$439,202	0.00%	\$0	\$0	\$508,825	0.00%	\$0	\$742	\$427,109	0.17%	\$742	\$2,801	\$501,025	0.56%	\$473
96 - SILVER STATE HEALTH INSURANCE EXCHANGE	\$0	\$221,069	0.00%	\$0	\$0	\$261,053	0.00%	\$0	\$0	\$206,807	0.00%	\$0	\$0	\$254,358	0.00%	\$0
Total	\$13,048,040	\$255,714,023	5.10%	\$-2,239,253	\$11,074,314	\$285,943,975	3.87%	\$-2,388,023	\$11,435,353	\$253,610,018	4.51%	\$2,523,909	\$10,677,058	\$287,634,035	3.71%	\$2,070,575

OVERTIME/ACCRUED COMP USE BY DEPARTMENT
FISCAL YEAR 2019 COMPARATIVE YEAR-TO_DATE ANALYSIS (QTR1-QTR4) VS FY2017-FY2018
NEVADA DEPARTMENT OF ADMINISTRATION
Tuesday, September 10, 2019



	FY 2017 QTR1-QTR4				FY 2018 QTR1-QTR4				FY 2019 QTR1-QTR4			
	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year	Overtime and Accrued Comp	Total Pay	OT/Comp as a Share of Total Pay	Difference in OT Pay/Comp vs Prior Fiscal Year
01 - GOVERNOR'S OFFICE	\$227,530	\$5,527,718	4.12%	\$224,128	\$3,924	\$6,354,293	0.06%	\$-223,606	\$305,792	\$6,913,877	4.42%	\$301,868
02 - LIEUTENANT GOVERNOR'S OFFICE	\$0	\$326,956	0.00%	\$0	\$0	\$319,134	0.00%	\$0	\$0	\$328,082	0.00%	\$0
03 - ATTORNEY GENERAL'S OFFICE	\$78,200	\$25,614,849	0.31%	\$23,819	\$134,274	\$26,360,257	0.51%	\$56,074	\$94,437	\$26,922,993	0.35%	\$-39,838
04 - SECRETARY OF STATE'S OFFICE	\$34,227	\$6,586,670	0.52%	\$3,495	\$19,323	\$7,069,438	0.27%	\$-14,904	\$72,905	\$7,361,757	0.99%	\$53,582
05 - TREASURER'S OFFICE	\$7,735	\$2,510,129	0.31%	\$-7,081	\$6,187	\$2,537,335	0.24%	\$-1,548	\$9,888	\$2,675,210	0.37%	\$3,702
06 - CONTROLLER'S OFFICE	\$63,004	\$2,667,671	2.36%	\$4,057	\$52,830	\$2,747,003	1.92%	\$-10,174	\$71,414	\$2,898,860	2.46%	\$18,585
08 - DEPARTMENT OF ADMINISTRATION	\$483,957	\$29,900,068	1.62%	\$176,013	\$591,223	\$31,849,675	1.86%	\$107,266	\$489,606	\$33,610,290	1.46%	\$-101,617
09 - JUDICIAL BRANCH	\$18,703	\$27,919,672	0.07%	\$11,055	\$27,165	\$29,021,206	0.09%	\$8,462	\$12,467	\$29,642,092	0.04%	\$-14,698
10 - DEPARTMENT OF TOURISM AND CULTURAL AFFAIRS	\$33,466	\$5,925,223	0.56%	\$14,766	\$37,202	\$6,512,338	0.57%	\$3,736	\$38,410	\$6,617,744	0.58%	\$1,208
12 - GOVERNOR'S OFFICE OF ECONOMIC DEVELOPMENT	\$0	\$3,044,104	0.00%	\$0	\$0	\$3,062,267	0.00%	\$0	\$750	\$2,909,191	0.03%	\$750
13 - DEPARTMENT OF TAXATION	\$174,708	\$17,450,629	1.00%	\$63,988	\$199,611	\$19,646,221	1.02%	\$24,903	\$233,291	\$21,303,161	1.10%	\$33,680
15 - COMMISSION ON ETHICS	\$0	\$429,994	0.00%	\$0	\$0	\$467,118	0.00%	\$0	\$0	\$482,771	0.00%	\$0
22 - JUDICIAL DISCIPLINE COMMISSION	\$0	\$419,777	0.00%	\$0	\$0	\$418,556	0.00%	\$0	\$0	\$427,439	0.00%	\$0
23 - COMMISSION ON PEACE OFFICER STANDARDS & TRAINING	\$0	\$0	0.00%	\$0	\$2,188	\$923,494	0.24%	\$371	\$1,749	\$984,916	0.18%	\$-439
23 - COMMISSION ON PEACE OFFICERS STANDARDS & TRAINING	\$1,817	\$882,933	0.21%	\$-823	\$0	\$0	0.00%	\$0	\$0	\$0	0.00%	\$0
24 - DEPARTMENT OF VETERANS SERVICES	\$1,092,012	\$10,921,953	10.00%	\$362,408	\$863,879	\$11,517,994	7.50%	\$-228,133	\$850,485	\$12,128,036	7.01%	\$-13,394
30 - DEPARTMENT OF EDUCATION	\$180,063	\$9,989,644	1.80%	\$102,873	\$210,782	\$10,175,955	2.07%	\$30,719	\$232,968	\$11,191,736	2.08%	\$22,186
31 - STATE PUBLIC CHARTER SCHOOL AUTHORITY	\$7,300	\$776,430	0.94%	\$-4,808	\$6,162	\$889,652	0.69%	\$-1,137	\$20,287	\$1,200,321	1.69%	\$14,125
36 - COMMISSION ON POSTSECONDARY EDUCATION	\$0	\$207,148	0.00%	\$-2,656	\$0	\$0	0.00%	\$0	\$0	\$0	0.00%	\$0
40 - DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$10,587,994	\$279,622,486	3.79%	\$1,354,033	\$11,026,335	\$290,687,440	3.79%	\$438,341	\$11,656,479	\$309,182,248	3.77%	\$630,144
43 - ADJUTANT GENERAL	\$207,257	\$5,384,342	3.85%	\$-25,872	\$219,665	\$4,844,299	4.53%	\$12,408	\$307,458	\$5,200,928	5.91%	\$87,794
44 - DEPARTMENT OF CORRECTIONS	\$15,502,021	\$146,858,502	10.56%	\$4,544,522	\$14,398,016	\$155,896,797	9.24%	\$-1,104,005	\$12,397,200	\$157,434,708	7.87%	\$-2,000,816
50 - COMMISSION ON MINERAL RESOURCES	\$35,077	\$740,256	4.74%	\$1,977	\$42,376	\$854,865	4.96%	\$7,299	\$42,785	\$854,433	5.01%	\$409
55 - DEPARTMENT OF AGRICULTURE	\$98,938	\$7,231,711	1.37%	\$-18,015	\$79,804	\$7,225,684	1.10%	\$-19,134	\$89,196	\$7,560,653	1.18%	\$9,392
58 - PUBLIC UTILITIES COMMISSION	\$0	\$6,821,795	0.00%	\$0	\$0	\$7,488,146	0.00%	\$0	\$0	\$8,025,301	0.00%	\$0
61 - GAMING CONTROL BOARD	\$546,057	\$24,750,040	2.21%	\$107,777	\$627,146	\$25,150,050	2.49%	\$81,089	\$610,108	\$26,220,175	2.33%	\$-17,038
65 - DEPARTMENT OF PUBLIC SAFETY	\$7,348,087	\$83,266,030	8.82%	\$842,662	\$7,657,465	\$87,676,307	8.73%	\$309,377	\$8,089,900	\$91,802,429	8.81%	\$432,436
69 - COLORADO RIVER COMMISSION	\$8,128	\$2,698,273	0.30%	\$-2,548	\$7,022	\$2,863,674	0.25%	\$-1,106	\$20,631	\$2,981,286	0.69%	\$13,608
70 - DEPARTMENT OF CONSERVATION & NATURAL RESOURCES	\$3,190,142	\$40,558,844	7.87%	\$1,424,630	\$3,062,574	\$42,913,783	7.14%	\$-127,568	\$2,981,743	\$45,402,292	6.57%	\$-80,831
72 - DEPARTMENT OF WILDLIFE	\$230,710	\$14,267,111	1.62%	\$-82,004	\$339,207	\$14,788,352	2.29%	\$108,497	\$331,312	\$15,589,768	2.13%	\$-7,895
74 - DEPARTMENT OF BUSINESS AND INDUSTRY	\$281,267	\$34,194,915	0.82%	\$57,970	\$261,421	\$35,781,118	0.73%	\$-19,846	\$205,171	\$37,309,333	0.55%	\$-56,250
80 - DEPARTMENT OF TRANSPORTATION	\$5,618,697	\$96,922,578	5.80%	\$1,258,870	\$5,201,923	\$100,780,973	5.16%	\$-416,774	\$5,654,253	\$105,229,430	5.37%	\$452,330
81 - DEPARTMENT OF MOTOR VEHICLES	\$452,587	\$50,979,606	0.89%	\$82,579	\$662,316	\$53,631,609	1.23%	\$209,730	\$859,981	\$55,972,239	1.54%	\$197,664
90 - DEPARTMENT OF EMPLOYMENT, TRAINING & REHAB	\$326,148	\$40,696,521	0.80%	\$-290,590	\$525,209	\$42,699,100	1.23%	\$199,060	\$550,557	\$43,718,901	1.26%	\$25,348
92 - DEFERRED COMPENSATION	\$48	\$94,352	0.05%	\$48	\$0	\$0	0.00%	\$0	\$0	\$0	0.00%	\$0
95 - EMPLOYEES' BENEFITS DIVISION	\$0	\$0	0.00%	\$0	\$2,328	\$1,698,117	0.14%	\$2,328	\$3,543	\$1,876,161	0.19%	\$1,215
95 - PUBLIC EMPLOYEES' BENEFITS PROGRAM	\$0	\$1,576,941	0.00%	\$0	\$0	\$0	0.00%	\$0	\$0	\$0	0.00%	\$0
96 - SILVER STATE HEALTH INSURANCE EXCHANGE	\$4,226	\$844,621	0.50%	\$-4,751	\$0	\$905,840	0.00%	\$-4,226	\$0	\$943,287	0.00%	\$0
Total	\$46,840,107	988,610,493.19	4.74%	\$10,222,523	\$46,267,557	1,035,758,088.76	4.47%	\$-572,502	\$46,234,766	1,082,902,050.78	4.27%	\$-32,791

Top 7 Correctional Centers (including Prison Medical)

[illegible]

Agency:

440 DEPARTMENT OF CORRECTIONS

Highest 4 Causes of Overtime by Event Code										
11	COVER-AL/MIL	150:00:00	\$	3,929.96	45135:35	\$	1,833,529.73	45285:35	\$	1,837,459.69
63	AGNCY DEFINE	12:00	\$	281.64	13799:53	\$	552,474.84	13811:53	\$	552,756.48
30	WORKLOAD	178:41:00	\$	4,915.43	5699:26:00	\$	251,947.70	5878:07:00	\$	256,863.13
13	COVER-HOL/WK	1685:50:00	\$	46,167.50	6930:00:00	\$	185,183.67	8615:50:00	\$	231,351.17
									\$	2,878,430.47
										86.7%

Row Labels	Sum of Dollars3
COVER-VACANT	877,799.53
COVER-24 HR	580,617.63
WORKLOAD	287,272.86
COVER-HOL/WK	130,975.07
COVER-SICK	109,067.33
TRAINING	76,711.70
CLIENT SVCS	66,838.82
AGNCY DEFINE	57,328.38
TRAVEL	42,044.81
PROGRAM DEAD	39,438.72
COVER-AL/MIL	39,058.66
ACCT/FISCAL	37,603.38
EMERGENCIES	35,808.75
INVESTIGATE	27,919.38
OFFICE SPprt	17,474.02
SPECIAL EVNT	10,987.27
BUDGET PREP	10,721.07
SITE REPAIR	9,897.10
COVER-TRAIN	5,881.50
BACKLOG REDU	5,767.36
MEETINGS	4,725.16
TRAIN-PERSON	3,354.18
COURT	2,796.01
STAFF MEET	2,555.72
ADMIN	2,213.06
PERSONNEL	2,103.02
ACCIDENTS	1,936.64
COVER-INJURY	1,838.93
CONFERENCES	1,524.68
ADMIN SUPprt	1,065.78
WORKSHOPS	609.00
CLIENT MEET	578.78
(blank)	383.00
UNDEFINED	25.67
Grand Total	2,494,922.97

1 COVER-VACANT	877,799.53
2 COVER-24 HR	580,617.63
3 WORKLOAD	287,272.86
4 COVER-HOL/WK	130,975.07
	1,876,665.09
	75.2%

Row Labels	Sum of Dollars3
406	1,259,605.76
HR-SO NEV ADULT MENTAL HEALTH	796,723.04
HR-FAC FOR MENTAL OFFENDER	304,556.67
HR-NNV ADULT MENTAL HEALTH SVC	83,556.04
HR-HEALTH CARE FACILITY REG	38,931.01
HR-HEALTH ALERT NETWORK	13,609.88
HR-OFF OF STATE HEALTH ADMIN	7,638.26
HR-BEHAVIORAL HEALTH PREV & TR	6,098.07
HR-BEHAVIORAL HEALTH ADMINSTR	5,169.70
HR-HHS DPBH RURAL CLINICS	1,697.56
HR-RADIATION CONTROL PROGRAM	1,131.31
HR-CHRONIC DISEASE	355.68
HR-COMMUNITY HEALTH SERVICES	78.06
HR-ENVIRONMENTAL HEALTH SRVCS	60.48
HR-CANCER CONTROL REGISTRY	-
HR-COMMUNICABLE DISEASES	-
HR-MATERNAL CHILD HEALTH SRVC	-
HR-HEALTH STATISTICS&PLANNING	-
HR-EMERGENCY MEDICAL SERVICES	-
HR-CHILD CARE SERVICES	-
HR- MARIJUANA HEALTH REGISTRY	-
HR-WIC FOOD SUPPLEMENT	-
(blank)	-
HR-HHS HD BIOSTATS & EPIDMILG	-
HR-IMMUNIZATION PROGRAM	-
409	737,019.21
HR-NEVADA YOUTH TRAINING CTR	159,391.01
HR-SO NEV CHILD & ADLSCNT SVCS	147,751.55
HR-SUMMIT VIEW YOUTH CENTER	143,184.78
HR-CALIENTE YOUTH CENTER	133,900.43
HR-RURAL CHILD WELFARE	103,225.18
HR-NO NEV CHILD & ADLSCNT SVCS	22,698.68
HR-YOUTH PAROLE SERVICES	13,767.53
HR-CHILDREN/YOUTH/FAMILY ADMIN	12,626.60
HR-COMMUNITY JUV JUSTICE PRG	278.87
HR-UNITY/SACWIS	194.58
(blank)	-
402	444,023.92
HR-DESERT REGIONAL CENTER	386,345.39
HR-AGING FEDERAL PROG & ADMIN	49,265.03
HR-SIERRA REGIONAL CENTER	3,983.05
HR-COMMUNITY BASED SERVICES	2,027.88
HR-EARLY INTERVENTION SVCS	1,239.09
HR-RURAL REGIONAL CENTER	1,163.48
(blank)	-
HR-SENIOR RX AND DISABILITY RX	-
403	30,131.81
HR-HEALTH CARE FIN & POLICY	30,131.81
(blank)	-
400	16,388.23
HR-ADMINISTRATION	10,685.09
HR-IDEA PART C COMPLIANCE	3,236.21
HR-DEVELOPMENTAL DISABILITIES	1,571.12
HR-GRANTS MANAGEMENT UNIT	895.81
HR-CONSUMER HEALTH ASSISTANCE	-
(blank)	-
HR-PUBLIC DEFENDER	-
407	7,754.04
HR-WELFARE ADMINISTRATION	7,712.89
HR-WELFARE FIELD SERVICES	41.15
(blank)	-
HR-CHILD SPprt ENFORCEMNT PROG	-
HR-CHILD CARE ASSIST & DEVEL	-
HR-ENERGY ASSISTANCE - WELFARE	-
Grand Total	2,494,922.97

Steve Sisolak
Governor



Susan Brown
Director

Kim Perondi
Deputy Director

**STATE OF NEVADA
GOVERNOR'S FINANCE OFFICE
Budget Division**

209 E. Musser Street, Suite 200 | Carson City, NV 89701-4298
Phone: (775) 684-0222 | www.budget.nv.gov | Fax: (775) 684-0260

Date: August 13, 2019

To: Susan Brown, Clerk of the Board
Governor's Finance Office

From: Bridgette Mackey-Garrison, Executive Branch Budget Officer
Budget Division

A handwritten signature in blue ink, appearing to read "B. Mackey-Garrison", is written over the "From:" line.

Subject: BOARD OF EXAMINERS **INFORMATION** ITEM

The following describes an information item submitted for placement on the agenda of the next Board of Examiners meeting:

DEPARTMENT OF MOTOR VEHICLES – COMPLETE STREETS PROGRAM

Agenda Item Write-up:

Pursuant to NRS 482.1825, Subsection 2, the Department of Motor Vehicles (DMV) shall certify to the State Board of Examiners the amount of the voluntary contributions collected for each county by the department and its agents, and that the money has been distributed as provided in statute. This is the fourth quarter of State Fiscal Year 2019 (FY19) report for the period beginning April 1, 2019 and ending June 30, 2019.

Additional Information:

The Nevada Complete Streets bill was designed to provide a local funding source for transportation improvements to make local streets "Complete Streets" – streets that are safe and inviting for people using all transportation modes – walkers, baby strollers, people using canes, people using wheelchairs, bicyclist, buses, trolleys – rather than just for cars and trucks.

Uses:

The uses reports from the local jurisdictions will be reported on a fiscal year basis and is anticipated for the September 2019 BOE.

Statutory Authority:

NRS 482.1825

REVIEWED:	<u>Sam 8/19</u>
INFO ITEM:	_____

During the 4th quarter, the DMV collected a total of \$90,594 voluntary contributions for the Complete Streets Program. The following tables demonstrate the percent contributed by county alongside the 3rd quarter of this year and the same period last year:

Complete Streets Contributions FY2019			Complete Streets Contributions FY2019			Complete Streets Contributions FY2018		
By County	Collected 4th Quarter	% of Total	County	Collected 3rd Quarter	% of Total	By County	Collected 4th Quarter	% of Total
Carson City	\$ 2,578.00	2.85%	Carson City	\$ 2,658.00	2.98%	Carson City	\$ 2,632.00	2.94%
Clark	\$ 71,644.00	79.08%	Clark	\$ 70,298.00	78.82%	Clark	\$ 70,118.00	78.22%
Douglas	\$ 2,502.00	2.76%	Douglas	\$ 2,232.00	2.50%	Douglas	\$ 2,508.00	2.80%
Washoe	\$ 13,870.00	15.31%	Washoe	\$ 13,998.00	15.70%	Washoe	\$ 14,384.00	16.05%
Total	\$ 90,594.00	100.00%	Total	\$ 89,186.00	100.00%	Total	\$ 89,642.00	100.00%

NRS 482.1825 subsection 3 authorizes the DMV to deduct and withhold 1% of the contributions collected to reimburse the Department for its expenses in collecting and distributing the contributions. After deducting \$905.94 for the 1% costs for DMV to administer the program, Clark County received \$70,927.56; Washoe County received \$13,731.30; Carson City received \$2,552.22 and Douglas County received \$2,476.98 which is demonstrated in the below tables:

Complete Streets Contributions FY2019			Complete Streets Contributions 1% Commission			Complete Streets Contributions Distributions		
By County	Collected 4th Quarter	% of Total	County	4th Quarter	% of Total	County	4th Quarter	% of Total
Carson City	\$ 2,578.00	2.85%	Carson City	\$ 25.78	2.85%	Carson City	\$ 2,552.22	2.85%
Clark	\$ 71,644.00	79.08%	Clark	\$ 716.44	79.08%	Clark	\$ 70,927.56	79.08%
Douglas	\$ 2,502.00	2.76%	Douglas	\$ 25.02	2.76%	Douglas	\$ 2,476.98	2.76%
Washoe	\$ 13,870.00	15.31%	Washoe	\$ 138.70	15.31%	Washoe	\$ 13,731.30	15.31%
Total	\$ 90,594.00	100.00%	Total	\$ 905.94	100.00%	Total	\$ 89,688.06	100.00%

As required by subsection 2 of NRS 482.1825, the tables below summarize the monthly reports for the voluntary Complete Streets contributions collected by quarter pursuant to subsection 11 of NRS 482.480 for each participating county by the Department of Motor Vehicles for the period beginning July 1, 2018 and ending June 30, 2019.

Total FY19	1st	2nd	3rd	4th	Total FY19
Donations	44,951	39,618	44,593	45,297	174,459
Registrations	321,654	283,407	300,110	324,069	1,229,240
% of Registrations that Donate	13.97%	13.98%	14.86%	13.98%	14.198%

For FY19 4th quarter, Clark County received on average 15.42% where Douglas County received on average 9.63% of vehicle registrations donating.

Department of Motor Vehicles
Complete Streets: Monthly Report FY19
Report Date: 7/12/2019
Reporting Period: June 2019

Contributions

	4th Quarter								Year to Date	
FY 2019	April		May		June		Total Collected 4th Quarter			
County	Amount	% of Total	Amount	% of Total	Amount	% of Total	4th Quarter	% of Total	Amount	% of Total
Carson City	\$ 890.00	2.79%	\$ 892.00	2.98%	\$ 796.00	2.77%	\$ 2,578.00	2.85%	\$10,436.00	2.99%
Clark	\$ 25,386.00	79.47%	\$ 23,784.00	79.40%	\$ 22,474.00	78.32%	\$ 71,644.00	79.08%	\$273,436.00	78.37%
Douglas	\$ 866.00	2.71%	\$ 804.00	2.68%	\$ 832.00	2.90%	\$ 2,502.00	2.76%	\$9,732.00	2.79%
Washoe	\$ 4,802.00	15.03%	\$ 4,476.00	14.94%	\$ 4,592.00	16.00%	\$ 13,870.00	15.31%	\$55,314.00	15.85%
Total	\$ 31,944.00	100.00%	\$ 29,956.00	100.00%	\$ 28,694.00	100.00%	\$ 90,594.00	100.00%	\$ 348,918.00	100%

DMV Commission (1%)

	4th Quarter								Year to Date	
County	April		May		June		Total DMV 1% 4th Quarter			
	Amount	% of Total	Amount	% of Total	Amount	% of Total	4th Quarter	% of Total	Amount	% of Total
Carson City	\$ 8.90	2.79%	\$ 8.92	2.98%	\$ 7.96	2.77%	\$ 25.78	2.85%	\$104.36	2.99%
Clark	\$ 253.86	79.47%	\$ 237.84	79.40%	\$ 224.74	78.32%	\$ 716.44	79.08%	\$2,734.36	78.37%
Douglas	\$ 8.66	2.71%	\$ 8.04	2.68%	\$ 8.32	2.90%	\$ 25.02	2.76%	\$97.32	2.79%
Washoe	\$ 48.02	15.03%	\$ 44.76	14.94%	\$ 45.92	16.00%	\$ 138.70	15.31%	\$553.14	15.85%
Total	\$ 319.44	100.00%	\$ 299.56	100.00%	\$ 286.94	100.00%	\$ 905.94	100.00%	\$3,489.18	100%

Distributions

	4th Quarter								Year to Date	
County	April		May		June		Total Distributions 4th Quarter			
	Amount	% of Total	Amount	% of Total	Amount	% of Total	4th Quarter	% of Total	Amount	% of Total
Carson City	\$ 881.10	2.79%	\$ 883.08	2.98%	\$ 788.04	2.77%	\$ 2,552.22	2.85%	\$ 10,331.64	2.99%
Clark	\$ 25,132.14	79.47%	\$ 23,546.16	79.40%	\$ 22,249.26	78.32%	\$ 70,927.56	79.08%	\$ 270,701.64	78.37%
Douglas	\$ 857.34	2.71%	\$ 795.96	2.68%	\$ 823.68	2.90%	\$ 2,476.98	2.76%	\$ 9,634.68	2.79%
Washoe	\$ 4,753.98	15.03%	\$ 4,431.24	14.94%	\$ 4,546.08	16.00%	\$ 13,731.30	15.31%	\$ 54,760.86	15.85%
Total	\$ 31,624.56	100.00%	\$ 29,656.44	100.00%	\$ 28,407.06	100.00%	\$ 89,688.06	100.00%	\$ 345,428.82	100.00%

Note:

1. DMV began accepting contributions on 12/15/14.
2. DMV began accepting Douglas County contributions on 5/9/16.

Department of Motor Vehicles
Complete Streets Report: Donations by County
Fiscal Year 2019

8/15/2019

1st Qtr		Totals
Donations	\$	44,951
Registrations		321,654
		13.975%

2nd Qtr		Totals
Donations	\$	39,618
Registrations		283,407
		13.979%

3rd Qtr		Totals
Donations	\$	44,593
Registrations		300,110
		14.859%

4th Qtr		Totals
Donations	\$	45,297
Registrations		324,069
		13.978%
		3rd vs. 4th
		\$ 704
		\$ 23,959
		2.938%

Carson City					
1st Quarter					
	July	August	September	1st Qtr	
Donations	\$ 476	\$ 481	\$ 446	\$ 1,403	
Registrations	3,731	3,685	3,492	10,908	
% Donated	12.76%	13.05%	12.77%	12.86%	

2nd Quarter					
	October	November	December	2nd Qtr	
Donations	\$ 432	\$ 403	\$ 362	\$ 1,197	
Registrations	3,418	3,028	2,987	9,433	
% Donated	12.64%	13.31%	12.12%	12.69%	

3rd Quarter					
	January	February	March	3rd Qtr	
Donations	\$ 443	\$ 401	\$ 485	\$ 1,329	
Registrations	3,147	2,831	3,808	9,786	
% Donated	14.08%	14.16%	12.74%	13.58%	

4th Quarter					
	April	May	June	4th Qtr	
Donations	\$ 445	\$ 446	\$ 398	\$ 1,289	
Registrations	3,625	3,781	3,627	11,033	
% Donated	12.28%	11.80%	10.97%	11.68%	
FY19 Total					\$ 9,147
					71,287
					12.83%

Clark					
1st Quarter					
	July	August	September	1st Qtr	
Donations	\$ 11,647	\$ 11,893	\$ 11,281	\$ 34,821	
Registrations	73,993	78,685	75,182	229,860	
% Donated	15.33%	15.11%	15.00%	15.15%	

2nd Quarter					
	October	November	December	2nd Qtr	
Donations	\$ 11,033	\$ 9,921	\$ 9,972	\$ 30,926	
Registrations	72,788	66,333	67,720	206,841	
% Donated	15.16%	14.96%	14.73%	14.95%	

3rd Quarter					
	January	February	March	3rd Qtr	
Donations	\$ 11,563	\$ 10,073	\$ 13,513	\$ 35,149	
Registrations	73,640	65,204	82,533	221,377	
% Donated	15.70%	15.45%	16.37%	15.88%	

4th Quarter					
	April	May	June	4th Qtr	
Donations	\$ 12,693	\$ 11,892	\$ 11,237	\$ 35,822	
Registrations	78,726	77,690	75,857	232,273	
% Donated	16.12%	15.31%	14.81%	15.42%	
FY19 Total					\$ 237,614
					1,548,429
					15.35%

Douglas					
1st Quarter					
	July	August	September	1st Qtr	
Donations	\$ 453	\$ 445	\$ 425	\$ 1,323	
Registrations	4,352	4,454	4,095	12,901	
% Donated	10.41%	9.99%	10.38%	10.26%	

2nd Quarter					
	October	November	December	2nd Qtr	
Donations	\$ 446	\$ 354	\$ 376	\$ 1,176	
Registrations	4,127	3,533	3,346	11,006	
% Donated	10.81%	10.02%	11.24%	10.69%	

3rd Quarter					
	January	February	March	3rd Qtr	
Donations	\$ 386	\$ 309	\$ 421	\$ 1,116	
Registrations	3,696	3,152	4,052	10,900	
% Donated	10.44%	9.80%	10.39%	10.24%	

4th Quarter					
	April	May	June	4th Qtr	
Donations	\$ 433	\$ 402	\$ 416	\$ 1,251	
Registrations	4,197	4,423	4,370	12,990	
% Donated	10.32%	9.09%	9.52%	9.63%	
FY19 Total					\$ 8,481
					82,604
					10.27%

Washoe					
1st Quarter					
	July	August	September	1st Qtr	
Donations	\$ 2,500	\$ 2,536	\$ 2,368	\$ 7,404	
Registrations	22,913	23,553	21,519	67,985	
% Donated	10.91%	10.77%	11.00%	10.89%	

2nd Quarter					
	October	November	December	2nd Qtr	
Donations	\$ 2,332	\$ 2,052	\$ 1,935	\$ 6,319	
Registrations	20,544	18,107	17,476	56,127	
% Donated	11.35%	11.33%	11.07%	11.26%	

3rd Quarter					
	January	February	March	3rd Qtr	
Donations	\$ 2,295	\$ 2,010	\$ 2,694	\$ 6,999	
Registrations	19,208	16,704	22,135	58,047	
% Donated	11.95%	12.03%	12.17%	12.06%	

4th Quarter					
	April	May	June	4th Qtr	
Donations	\$ 2,401	\$ 2,238	\$ 2,296	\$ 6,935	
Registrations	22,506	22,662	22,605	67,773	
% Donated	10.67%	9.88%	10.16%	10.23%	
FY19 Total					\$ 48,379
					432,091
					11.20%

- Notes:
1. Registration transaction counts come from: G:\Crystal Report\VR\Registrations\New and Renewal Registrations
 2. Registration transactions include new registrations and registration renewals completed on the Kiosk, Web and MyDMV Portal only.
 3. DMV began accepting Douglas County contributions on 5/9/16.

Comparison

FY18		4th Qtr
Donations	\$	44,821
Registrations		319,118
		14.045%
		% Change
		\$ 476
		4,951
		-0.068%