



QUAY COUNTY GOVERNMENT
300 South Third Street
P.O. Box 1246
Tucumcari, NM 88401
Phone: (575) 461-2112
Fax: (575) 461-6208

AGENDA
REGULAR SESSION
QUAY COUNTY BOARD OF COMMISSIONERS
NOVEMBER 26, 2018

9:00 A.M. Call Meeting to Order

Pledge of Allegiance

Approval of Minutes-Regular Session November 9, 2018

Approval/Amendment of Agenda

Public Comment

Ongoing Business

New Business

- I. **C. Renee Hayoz, Presbyterian Medical Services, Administrator**
 - Presentation of Monthly RPHCA Reports
- II. **Russell Shafer, Quay County Sheriff**
 - Presentation of Sheriff's Report
- III. **Daniel Zamora, Emergency Management Coordinator**
 - Request Approval of Mitigation Grant Application for Fire Station Generators
- IV. **Cheryl Simpson, Quay County Finance Director**
 - Request Approval of FY 2018-2019 Resolution #10 Budgetary Adjustment
 - Request Approval of FY 2018-2019 Resolution #11 Budgetary Adjustment
 - Request Approval of FY 2018-2019 Resolution #12 Budgetary Adjustment
 - Request Approval of FY 2018-2019 Resolution #13 Budgetary Adjustment
- V. **Larry Moore, Quay County Road Superintendent**
 - Road Update
- VI. **Richard Primrose, Quay County Manager**
 - Request Approval of the Clinton D Harden & Associates Contract
 - Correspondence



DOC #CM-00455
12/11/2018 11:23 AM Doc Type: COCOM
Fee: (No Fieldtag Finance.TotalFees found) Pages: 97
Quay County, NM Ellen White - County Clerk, County Cler



VII. Indigent Claims Board

- **Call Meeting to Order**
- Request Approval of **Indigent Minutes for the October 22, 2018 Meeting**
- Request Approval of **November Claims Prepared by Sheryl Chambers**
- **Adjourn**

VIII. Request Approval of Accounts Payable

IX. Other Quay County Business That May Arise During the Commission Meeting and/or Comments from the Commissioners

X. Request for Closed Executive Session

- Pursuant to Section 10-15-1(H) 7. The New Mexico Open Meetings Act Pertaining to Threatened or Pending Litigation
- Pursuant to Section 12-6-5 NMSA 1978 of the Audit Act for Audit Exit Conference

XI. Franklin McCasland, Quay County Commission Chairman

- Proposed action, if any, from Executive Session

Adjourn

Lunch-Time and Location to be Announced

REGULAR SESSION-BOARD OF QUAY COUNTY COMMISSIONERS

November 26, 2018

9:00 A.M.

BE IT REMEMBERED THE HONORABLE BOARD OF QUAY COUNTY COMMISSIONERS met in regular session the 26th day of November, 2018 at 9:00 a.m. in the Quay County Commission Chambers, Tucumcari, New Mexico, for the purpose of taking care of any business that may come before them.

PRESENT & PRESIDING:

Franklin McCasland, Chairman
Mike Cherry, Member
Sue Dowell, Member
Ellen L. White, County Clerk
Richard Primrose, County Manager

OTHERS PRESENT:

Larry Moore, Quay County Road Superintendent
Vic Baum, Quay County Assessor
Daniel Zamora, Quay County Emergency Management
Russell Shafer, Quay County Sheriff
Renee Hayoz, Presbyterian Medical Services Administrator
Gail Houser, Tucumcari MainStreet Director
Patsy Gresham, Quay County Treasurer
Ron Warnick, Quay County Sun
Cheryl Simpson, Quay County Manager's Office

Chairman McCasland called the meeting to order. Daniel Zamora led the Pledge of Allegiance.

A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve the minutes from the November 9, 2018 regular session as presented. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye".

A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve the agenda as presented. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye".

PUBLIC COMMENTS: NONE

ONGOING BUSINESS: NONE

NEW BUSINESS:

Renee Hayoz, Presbyterian Medical Services Administrator presented the monthly RPHCA Report ending October 31, 2018. Hayoz stated an Open House will be scheduled for December so the public can meet the new provider. A copy of the report is attached to these minutes.

Russell Shafer, Quay County Sheriff presented reports for September and October, 2018. Copies are attached and made a part of these minutes.

Daniel Zamora, Emergency Management Coordinator requested approval to submit a Mitigation Grant Application for funding generators to be placed at all rural fire stations in Quay County. The New Mexico Department of Homeland Security is requesting applications by November 30 so they can review them and forward on to Federal Homeland Security by their January 31st deadline. Award notices aren't expected until the fall of 2019. The total amount of the request is \$112,000.00. A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve the Application. MOTION carried with Dowell voting "aye", Cherry voting "aye" and McCasland voting "aye". A copy is attached and made a part of these minutes.

Cheryl Simpson, Quay County Finance Director presented the following Resolutions for approval:

1. Resolution No. 10; Budgetary Increase for Forrest Fire Department (Loan Proceeds for Fire Truck). A MOTION was made by Mike Cherry, Seconded by Sue Dowell to approve. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye".
2. Resolution No. 11; Budgetary Increase to DWI Fund. A MOTION was made by Mike Cherry, Seconded by Sue Dowell to approve. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye".
3. Resolution No. 12; Budgetary Increase to CDBG Fund. A MOTION was made by Mike Cherry, Seconded by Sue Dowell to approve. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye".
4. Resolution No. 13; Budgetary Increase to County Improvements. (Detention Center Improvements) A MOTION was made by Sue Dowell, Seconded by Mike Cherry to approve. MOTION carried with Cherry voting "aye", Dowell voting "aye" and McCasland voting "aye".

All four Resolutions are attached and made a part of these minutes.

Larry Moore, Quay County Road Superintendent presented the following road updates:

1. Approved 2018-19 Match Waiver Amended Agreements have been received for the CAP and Co-op Projects.
2. The two new John Deere Leased Blades have arrived and the other two were returned.
3. Chris Cothran, Casa Mesa Wind Project Manager asked Larry to drive the roads to the project to determine what repairs need to be made to the roadways following their use of them. Moore drove the roads and items were pinpointed and will be addressed. Moore stated the roads were in pretty good shape.
4. Crews are working on the School Bus Projects in the San Jon area. (Quay Roads 60, 64 and 65)
5. The donation of millings for the projects in San Jon, are yet to be received.
6. Crews have been performing normal maintenance on all roads following the recent snow and moisture.

Commissioner Dowell asked if any new information was available regarding the responsibility of maintaining cattle guards in state right-of-ways. Primrose stated the NM State District Engineer sent an email stating it's their position the responsibility lies with the County.

Dowell asked if someone had contacted Larry Hines regarding the Environmental Study performed in his area. Moore stated he hadn't yet, but he would. Moore informed Dowell the Study was a categorical exclusion and there were no findings.

Quay County Manager, Richard Primrose requested approval of a Professional Services Contract between Quay County and Clinton D. Harden & Associates. Harden is a registered lobbyist in New Mexico and has served Quay County several years prior. Dowell stated she agrees that a lobbyist is required to assist governments with being effectively represented during the legislative session, but she continues to be bothered that we have to pay someone from outside of Quay County to do this on our behalf. Cherry said he would like to see the terms of the contract extended from 3 months to 1 year to address committee meetings outside of the normal legislative session. A MOTION was made by Sue Dowell, SECONDED by Franklin McCasland to approve the Contract as presented with a term of 3 months. MOTION carried with Dowell voting "aye", Cherry voting "aye" and McCasland voting "aye". A copy is attached and made a part of these minutes.

Richard Primrose, Quay County Manager presented the following correspondence:

1. Provided a copy of the monthly Gross Receipt Tax Report.
2. Distributed a flyer from the NM Extension Office regarding a Private Applicators Workshop to be held on November 27th at the Convention Center.
3. Reported a Ute Water Commission meeting is set for December 6.
4. Reminded everyone the Commission will only have one meeting in December, on the 10th.
5. A Legislative Reception will be held at the Convention Center on Saturday, December 8 at 3:00 p.m.
6. Congratulated Bard/Endee Fire District, Rural One Fire District and Porter Fire District on receiving Fire Funds Grant. Bard Endee and Rural One both received \$100,000.00 and Porter received \$47,500.00
7. The Courthouse will be closed on December 24-25 for Christmas.

Ellen White, Quay County Clerk reminded everyone of the Christmas/Employee Appreciation Dinner set for Friday, December 14th at 6 PM at the Fairgrounds.

Chairman McCasland called the Indigent Claims Board meeting to order. Time noted 9:40 a.m.

-----INDIGENT CLAIMS BOARD-----

Return to regular session. 9:45 a.m.

ACCOUNTS PAYABLE:

A MOTION was made by Mike Cherry SECONDED by Sue Dowell to approve the expenditures included in the Accounts Payable Report ending November 21, 2018. MOTION carried with Dowell voting "aye", Cherry voting "aye" and McCasland voting "aye".

Other Quay County Business That May Arise During the Commission Meeting and/or comments from the Commissioners: NONE

Chairman McCasland requested a ten minute break. Time noted: 9:55 a.m.

Return to regular session. Time noted 10:05 a.m.

A MOTION was made by Mike Cherry, SECONDED by Sue Dowell to go into Executive Session pursuant to the Open Meetings Act pursuant to Section 10-15-1(H)7 to discuss Threatened or Pending Litigation and 12-6-5 for Audit Exit Conference. MOTION carried with Cherry voting "aye", McCasland voting "aye" and Dowell voting "aye".

Time noted 10:07 a.m.

-----EXECUTIVE SESSION-----

Return to regular session. Time noted 11:55 a.m.

A MOTION was made by Mike Cherry, SECONDED by Sue Dowell stating only Threatened or Pending Litigation was discussed and the Audit Exit Conference was held during Executive Session. MOTION carried with Cherry voting "aye", McCasland voting "aye" and Dowell voting "aye".

NO ACTION WAS TAKEN FOLLOWING EXECUTIVE SESSION.

There being no further business, a MOTION was made by Sue Dowell SECONDED by Mike Cherry to adjourn. MOTION carried with Cherry voting "aye" and Dowell voting "aye". Time noted 12:00 p.m.

Respectfully submitted by Ellen White, County Clerk.

BOARD OF QUAY COUNTY COMMISSIONERS



Franklin McCasland
Franklin McCasland

Sue Dowell
Sue Dowell

Mike Cherry
Mike Cherry

ATTEST:

Ellen L. White
Ellen L. White, County Clerk

Clinic/Program Name: Quay County Family Health Center
Month Reported: October 2018

Monthly RPHCA Narrative Report

Please provide brief but detailed information for the following questions. Answer all questions or mark N/A.

1. **Please describe any changes in the types of services provided during the month reported. Describe any discussions about adding new services**

Nurse Practitioner started on 10/22/18.

2. **Please describe any difficulties encountered in providing services during the month reported. What were the causes of the difficulties?**

None. Training of new Nurse Practitioner.

3. **Were there any changes in the encounters (+ or - 10%) from the previous month reported? Please explain any causes for the changes.**

Encounters are still averaging in the same area since operating with only one NP. New NP just started seeing patients during the last week of October.

4. **Please describe any changes in the staffing pattern (regardless of the position or the change in FTE).**

Hired Nurse Practitioner on 10/22/18.

5. **Please describe recruitment efforts for any positions. Which positions? What actions have been taken?**

All positions have been filled.

6. **Were there any changes to the hours? Explain.**

No changes were made. Hours continue to be 7:00 AM – 5:30 PM, Monday through Friday.

7. **What efforts did you make to collaborate with local and statewide entities?**

-Administrator attended the Quay Co Commissioner Meeting on 10/22.
-Quay County Health Council meeting was attended on 10/11/18.
-Community Meeting was attended on 10/4/18. There was an estimated 1100 people in attendance.

8. **Please describe any methods for increasing clinic utilization that your program and staff are engaging in.**

Site continues to provide care at the Quay County Detention Center.

9. Please describe the outreach activities your program and staff provided to the community during the month reported.

- QCFHC has agreed to sponsored a water station for the 5K/10K Quay Co Annual Fun Run on October 6. There were over 150 participants
- The Harding Co Wellness Fair was attended on October 17. There were 108 attendees at the event
- Five (5) flu clinics were held at various locations throughout the County. There was an estimated 118 influenza vaccines administered.
- -The Senior Centers in the communities of House, San Jon and Tucumcari were visited and senior services were provided.

10. Have you received any new funding? Are you aware of any new funding opportunities? Please describe any new initiatives or projects that have been implemented.

None at this time.

Please note the date of the last advisory board meeting AND THE AGENDA ITEMS DISCUSSED.

Meeting was held on September 18, 2018

PMS Board Report
Recruitment of New Members
Regional Goals
Clinic Update
Home Visiting Update

**RPHCA Program
Monthly Level of Operations Form**

revised 7/7/15

Organization Name: Presbyterian Medical Services		Contract #	18774
Reporting Site: Quay County Family Health Center		Report Month/Year:	10/01/18
Action Plan Item		Actual Monthly Level	
Level of Operations	Total Number of Primary Care Encounters		320
	By Provider Type:		
	Physician Encounters		23
	Midlevel Practitioner Encounters		297
	Dentist Encounters		
	Dental Hygienist Encounters		
	Behavioral Health Encounters		
	All Other Licensed/Certified Provider Encounters		
	By Payment Source:		
	Sliding Fee Encounters - Medical/Behavioral Health		23
	Sliding Fee Encounters - Dental		
	Medicaid Encounters - Medical/Behavioral Health		102
	Medicaid Encounters - Dental		
	County Indigent Encounters		
	Other 3 rd Party Encounters		96
Medicare Encounters		96	
100% Self Pay (non-discounted/non-3 rd party) Encounters		3	
Unduplicated Number of Users	Total # of unduplicated users		107
	At or Below Poverty		73
	Between Poverty and 200% of Poverty		32
	Above 200% of Poverty		2
Staffing Level	Administrative Staff		3.2
		Clinical FTEs	
		Admin FTEs	
	Physicians		0.05
	Certified Nurse Practitioners		2
	Physician Assistants		
	Certified Nurse Midwives		
	Dentists		
	Dental Hygienists		
	Behavioral Health Professionals		
	Community Health Workers		
	Clinical Support Staff		2.2
All Other Staff		4.7	
Prior Month's Primary Care Financial Information	Please enter the month being reported: June		
	Total Primary Care Revenues - all sources		58,021
	Sliding Fee Revenues - Medical		2,399
	Sliding Fee Revenues - Dental		0
	Medicaid Revenues - Medical		23,040
	Medicaid Revenues - Dental		0
	County Indigent Fund Revenues		0
	Other 3 rd Party Revenues		4,760
	Medicare Revenues		8,486
	100% Self Pay (non-discounted/non-3 rd party) Patient Revenues		126
	Contracts/Grants Revenues (including RPHCA)		19,210
	Total Primary Care Expenditures		65,259
	Total Primary Care Charges		53,500
	Sliding Fee Discounts - Medical		5,975
Sliding Fee Discounts - Dental		0	
Prepared by: C Renee Hayoz		11/13/2018	

October 31, 2018

Quay County Sheriff's Office monthly report.

Calls for Service

Month Reported	Count
January	87
February	76
March	120
April	109
May	116
June	101
July	97
August	109
September	98
October	124
November	
December	

Civil Process

Month Received	Count
January	72
February	63
March	81
April	71
May	35
June	48
July	64
August	99
September	77
October	66
November	
December	

Prisoner Transports

Month Reported	Count
January	11
February	15
March	15
April	6
May	16
June	10
July	11
August	11
September	10
October	11
November	
December	

Arrest

Month Arrested	Count
January	19
February	8
March	4
April	12
May	15
June	13
July	9
August	13
September	19
October	17
November	
December	

Citations

Month Issued	Count
January	17
February	8
March	13
April	71
May	12
June	21
July	6
August	14
September	46
October	8
November	
December	

Traffic Stops

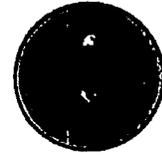
Month Occurred	Count
January	63
February	31
March	56
April	109
May	53
June	47
July	22
August	38
September	90
October	31
November	
December	

	Deputy	Year	UNIT#	Total Mileage
Seven full time Law Enforcement Deputies.	Q-1	16	6749	101271
1 Sheriff	Q-2	18	7016	23001
1 Under Sheriff	Q-3	16	7213	40656
5 Deputies	Q-4	15	7997	23204
	Q-5	15	9874	23142
	Q-6	14	0262	64541
	Q-7	10	8905	86405

Russell Shafer, Sheriff



NEW MEXICO DEPARTMENT OF HOMELAND SECURITY & EMERGENCY MANAGEMENT



Hazard Mitigation Project
Sub-grant Application

CONSTRUCTION AND LAND DISTURBANCE

INSTRUCTIONS:

- Attach additional sheets if more space is needed.
- Provide a list of any additional attachments.
- For questions or more information, contact DHSEM.Mitigation@state.nm.us or call [505-476-9682](tel:505-476-9682)

Submit **one hard copy**, and **one digital copy** of the completed application packet via one of the following.

Fed Ex or UPS

State Hazard Mitigation Program
NM DHSEM
13 Bataan Blvd.
Santa Fe, NM 87508

US Postal Service

State Hazard Mitigation Program
NM DHSEM
PO Box 27111
Santa Fe, NM 87502

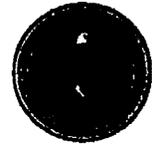
DOCUMENT CHECKLIST

- Completed Application
- Project Area Map
- Environmental Considerations Information (Attachment I, page 5-14)
- Construction Drawings (Attachment I, page 15)
- Schedule (Attachment II, tab 1)
- Detailed Budget (Attachment II, tab 2)
- Benefit Cost Analysis Report, Zip File, and Supporting Documents
- Non-Federal Funds Commitment Letter (Attachment I, page 16)
- Delegation of Signature Authority Letter (Attachment I, page 17)
- Standard Form 424
- Standard Form 424 C
- Standard Form 424 D
- 20-16C and Signature Page
- SF LLL - Disclosure of Lobbying Activities (if applicable)

Ensure all documents are signed by an authorized representative and attached. The application is not complete until all documents are received.



Hazard Mitigation Project Sub-grant Application



CONSTRUCTION AND LAND DISTURBANCE

A. GENERAL INFORMATION

1. Project Name
2. Total Project Cost

I certify that all information in this form is true and correct and the document has been duly approved by the governing body of the sub-applicant.

Name and Title Date

B. SUB-APPLICANT INFORMATION

1. Sub-Applicant Name
2. Type of Sub-Applicant
- Local Government
 - Indian Tribal Government
 - Quasi-governmental Entity
 - Private Non-Profit - please attach a description of your legal status, function, and facilities owned
 - Other

3. Sub-Applicant State Gross Receipts/Combined Reporting System Tax Number
(e.g. 11-111111-111)

4. Sub-Applicant State Department of Finance and Administration Vendor Number

5. Federal EIN/Tax Number (e.g. 11-111111)

if other, please specify:

6. DUNS Number

051336105

7. Tribal ID Number

N/A

8. Is the Sub-applicant delinquent on any federal debt?

YES NO

If **YES**: provide explanation

9. Is the Sub-applicant subject to review by executive order 12372 Process?: **NO**

C. CONTACT INFORMATION

PRIMARY CONTACT

1. First and Last Name

Daniel Zamora

2. Title

Emergency Management Coordinator

3. Agency/Organization

Quay County

4. Address

300 S 3rd St

5. City

Tucumcari

6. State

New Mexico

7. Zip 88401

8. Phone

(575)461-8535

Other Phone (575)403-4788

9. E-mail

daniel.zamora@quaycounty-nm.gov

ALTERNATE CONTACT

10. First and Last Name

Richard Primrose

11. Title

County Manager

12. Agency/Organization

Quay County

13. Address

300 S 3rd St

14. City

Tucumcari

15. State 16. Zip
17. Phone Other Phone
18. E-mail

D. GENERAL COMMUNITY INFORMATION

1. Community Name
2. Federal Identification Processing Standard Code (FIPS Code) 3. State Legislative District
4. Firewise Community Number - enter N/A if not applicable 5. US Congressional District
6. Does this community participate in the National Flood Insurance Program?
 NO YES
Community Identification Number (CID) Community Rating System # (if applicable)
7. Has the community adopted the National Fire Protection Association Codes? (NFPA 5000)
 YES NO
8. Has the community adopted building codes consistent with the International Building Codes?
 YES NO
9. Communities's Building Code Effectiveness Schedule rating? (BCEGS) - enter N/A if not applicable

E. CURRENT STATE MITIGATION PLAN

1. Does the State in which the entity is located have a current FEMA approved multi-hazard mitigation plan in compliance with 44CFR Part 201?: **Yes**
2. What is the name of the plan: **New Mexico State Hazard Mitigation Plan**
3. What is the type of plan: **Standard State Plan**
4. State Plan Expiration Date: **September 12, 2023**

F. CURRENT COMMUNITY MITIGATION PLAN

1. Is the entity that will benefit from the proposed activity covered by a current FEMA approved multi-hazard mitigation plan in compliance with 44 CFR Part 201?

- YES (if currently active) NO NOT KNOWN

If **YES**: What is the name of the Plan?

Quay County and the City of Tucumcari HMP

When was the plan approved by FEMA?

07/10/2018

What is the type of plan? *Check all that apply:*

- Local Tribal
 Multi-jurisdiction Multi-hazard

If **NO**: please explain the current status of the Mitigation Plan update or creation:

[Empty box for explanation]

2. Does the entity have any other mitigation plan adopted?

- YES NO NOT KNOWN

If **YES**: what is the name of the plan and date it was adopted?

[Empty box for name and date]

G. PREVIOUS FEMA MITIGATION PLANNING AND PROJECT SUB-GRANTS

1. Name of Project or Plan: Quay County Mitigation Plan Update

Performance Period (Start/End dates)

01/07/2018-06/30/2018

Federal Share Amount

\$33,750.00

2. Name of Project or Plan: [Empty box]

Performance Period (Start/End dates)

[Empty box]

Federal Share Amount

[Empty box]

If there were additional awards, attach sheets with the above information for each.

H. PROJECT INFORMATION

1. What is the **PROJECT CODE** and **PROJECT TYPE**?

Refer to the "Proposed List of Activities", Attachment I, page 1-3 for additional information.

601.2 Generators

2. **LOCATION** - What is the latitude and longitude of the construction location? (e.g: 8.730107, 167.738815)

2a) Include additional coordinates if work will be implemented in multiple, unconnected sites.

See attachment 1

2b) Attach a **PROJECT AREA MAP** showing the location of the project in relation to the surrounding infrastructure and current development. Show the area that will benefit from the mitigation activity. Include the Special Flood Hazard Area and the Flood Insurance Rate Map (FIRM) panel information.

2c) Describe the geographic area(s) impacted by the project and the areas that will benefit from the mitigation activity.

We would like to equip all nine fire districts in Quay County with generators. This will benefit the entire county by ensuring response capabilities in the event of power loss caused by a severe storm or other natural events.

3. PROJECT OR ACTIVITY DESCRIPTION

- Name and describe the proposed mitigation project.
- Describe the natural hazards to be mitigated.
- Describe the goals, objectives, and the need.
- Describe how the project will provide a long term solution.

The Quay County generator project will equip all of the fire districts in Quay County with generators for their fire stations to ensure response capabilities in the event of power loss caused by wildfire, drought, thunderstorm, high wind, severe winter storm, flood, earthquake, extreme heat, tornado. None of the fire stations are currently equipped with generators creating a huge vulnerability for the communities within Quay County with regards to response capabilities of the nine fire districts. The fire stations are also designated as emergency shelters which enhances the need for generators. The life of the generators is estimated at twenty years making this a long term solution.

3a). What percent of the population will benefit from this mitigation activity?

100%

3b) How was this calculated?

Every unincorporated square mile of Quay County is covered by a rural fire district and municipalities rely on mutual aid from the rural fire districts.

3c) Does this project or activity relate to a Mitigation Activity identified in the entity's Hazard Mitigation Plan?

Yes, Action number five on page 74 of the Quay County and the City of Tucumcari Hazard Mitigation Plan describes the need for this type of project.

5. Install generators at Critical Facilities. (Previous Action 3.C.3)
Project

Description/Comments:

This project would allow for fixed diesel powered generators to be installed at critical facilities to ensure continuity of emergency services to the public during high hazard events.

Jurisdiction: Quay County, City of Tucumcari

Hazard(s) Addressed: Wildfire, Drought, Thunderstorm, High Wind, Severe Winter Storm, Flood, Earthquake, Extreme Heat, Tornado

Responsible Organization: Local Emergency Management Division

3d) Describe any critical facilities that will benefit from the project

All nine Quay County fire districts main stations and substations would benefit from from this project totaling 16 fire stations. These sixteen fire stations cover all of the unincorporated areas in Quay County and offer mutual aid to the municipalities making them vital to the safety of the residents of Quay County.

3e) Describe the level of protection provided by the project. What is the frequency or intensity of the event to be mitigated?

4.6.4 Probability and Extent of Future Events

Snow and Ice can be hazards in two respects: when they fall from the sky, they reduce visibility; and when they accumulate on the surface, they reduce traction and put a strain on power lines, roofs, and other structures. Severe winter storms have been and will continue to be a threat to the economic and social well-being of the County and participating jurisdictions.

Disruptions of emergency and other essential services are the main threats to the people and property. Isolated, rural communities and limited snow removal equipment exacerbate the effects of snow events in the County.

Given this approximate frequency, the probability of a future severe winter storm event to the entire planning area is "Possible".

3f) How will the mitigation project or activity leverage the involvement of partners to enhance the outcome?

The Bard-Endee North station houses the E-Dispatch system that notifies firefighters when they are being paged through text message. Equipping this fire station with a generator will ensure fire personnel, emergency management and county officials are notified of an emergency.

3g) What outreach activities are associated with this project or activity?
(press releases, websites, workshops, advertisements, etc.)

The fire chiefs have come together and decided to make this a county wide goal in order to ensure response capabilities. We will have this application approved during a public meeting by the Quay County commission and have the local media publicizes our efforts.

4. Describe or attach a **SCOPE OF WORK**.

Refer to Attachment I, page 4 for additional information.

All aspects of the project or activity must be addressed in the Scope of Work. Any activity outside of the approved Scope of Work will be ineligible for reimbursement or non-federal match. Tasks must be consistent with the schedule.

- Include a description of each task or milestone to be accomplished.
- Identify the responsible party for each task.
- Include the methodology for implementation.
- Describe the staffing, use of consultants, sub-grant oversight, etc.

Quay County would like to equip 16 fire stations with backup generators and transfer switches to ensure response capabilities in the event of power loss caused by severe storms or other natural events. The generators will be installed on concrete slabs protected on one side by a wall of the station and on the other by metal pipe barriers. The size of the generators has been selected using peak demand data collected from the electric company that provides service to the stations. The location of the generators has been selected due to the proximity to existing infrastructure. (See attached site maps) The transfer switches will be placed in the locations identified by the contractor.

5. MAINTENANCE - Provide a general, anticipated maintenance schedule that covers the project's lifespan. Explain what entity will be providing maintenance and repairs over the course of that lifespan.

Generators will be protected by a fire station wall on one side and metal pipe on the other. Monthly inspections and testing will take place during training and meeting night by each individual department.

6. PROJECT/SUB-GRANT MANAGEMENT

- Describe how the costs and schedule will be managed.
- Include a description of how successful performance will be assured.
- Describe the staff and resources needed to implement this mitigation activity and the applicant's ability to provide these resources.

The Emergency Manager in coordination with the Fire Marshall will provide over site and report to the County Manger on a monthly basis. Performance agreements will be put in place when selecting an installation service provider to assure successful completion of the project within the performance period.

I. ENVIRONMENTAL CONSIDERATIONS

Refer to Attachment I, page 5-14 for additional information

1. Attach the appropriate **ENVIRONMENTAL CONSIDERATIONS INFORMATION** based on the Project Type Submittal Requirements .
-

J. CONSTRUCTION DRAWINGS

Refer to Attachment I, page 15 for additional information

1. Describe and attach **CONSTRUCTION DRAWINGS**. These must be complete and stamped by a New Mexico certified Professional Engineer unless submitting a Phased Project.

The location of the generators was selected due to proximity of existing infrastructure. (See site maps) The size range of the generators has been selected using peak demand data collect from the electric company that provides service to the fire stations however a final determination will be made by a licensed professional. (See spec sheet and electric company data)

K. SCHEDULE

Refer to Attachment II, tab 1 for samples

1. Attach a **PROJECT SCHEDULE** that describes the timeline for the milestones and overall completion of the project. The milestones must be consistent with the tasks from the Scope of Work .
-

L. BUDGET

1. Attach a **DETAILED BUDGET**. Refer to Attachment II, tab 2 for a sample of the level of detail required.
2. Describe or attach a **BUDGET NARRATIVE**.
Include a comprehensive description of each line item in the detailed budget. All figures must match across all budget documents.

We are estimating the generators to cost \$4,000 each. The transfer will be \$1000 each. Delivery is estimated to be \$500 each. Installation of the concrete pads will be \$500 each. Installation of the generators will be \$500 each for electrical services and \$500 each for gas.

3. Total Project Cost

\$112,000.00

3a) Proposed Federal Share
Amount (up to 75%)

\$84,000.00

% of Total 75%

3b) Proposed Non-federal
Share (at least 25%)

\$28,000.00

% of Total 25%

4. Identify the source of the non-federal funds.

4a) Source Agency	Amount
<input type="text" value="Quay County"/>	<input type="text" value="\$28,000.00"/>

Funding Type	Name of fund
<input type="radio"/> In-kind	<input type="text" value="Fire Protection Fund"/>
<input checked="" type="radio"/> Cash	

4b) Source Agency	Amount
<input type="text"/>	<input type="text"/>

Funding Type	Name of fund
<input type="radio"/> In-kind	<input type="text"/>
<input type="radio"/> Cash	

If additional sources are included, attach sheets with the above information for each.

M. COST EFFECTIVENESS

1. Attach the Benefit Cost Analysis.

Both the BCA Report and the electronic zip file are required. Include any and all Supporting Documents.

2. Estimate the cost per year to maintain the project.

3. Include a brief narrative of the Benefit Cost Analysis that describes the cost effectiveness of the project.

- Include the hazard event frequency.
- Include the severity of damages.
- Identify the types of properties/structures at risk.
- Include a statement regarding how well documented and reasonable the costs are.

The fire districts experience power loss multiple times a year. Although these outages have not cause any additional damage due to loss of services the potential for future loss of life and property is probable. The cost of equipping the fire districts with generators would be greatly out weighed by the potential loss of life and property due to fire in the event of a loss of power that resulted in loss of fire protection services.

N. ALTERNATIVES

1. Describe at least 3 alternative actions. Include the following for each alternative:

- physical area affected
- construction methods, including excavation or earth moving activities
- change from existing conditions
- level of protection to be provided (frequency or intensity of event to be mitigated)
- long term solution to the source of the problem
- risk to critical facilities
- impact to natural/historic/cultural resources
- general cost estimate
- general schedule for implementation

2. Describe the process used to select the proposed project or activity as the best alternative.

(The "Proposed Activity" is one alternative. "No Action" may be another.)

Equipping the proposed 16 stations with generators would mitigate the greatest loss of life and property however equipping only the nine main stations could bring cost and land disturbance down. No action will undoubtedly cost more than either alternative as it is only a matter of time before emergency services are hindered by loss of power to these critical infrastructure.



QUAY COUNTY GOVERNMENT

300 South Third Street

P.O. Box 1246

Tucumcari, NM 88401

Phone: (575) 461-2112

Fax: (575) 461-6208

Quay County Generators Attachment 1

District 1 Main Station

1218 Camino del Coronado Tucumcari, NM 88401

Longitude (-103 44.841) Latitude (35 10.113)

Age of structure: 24 (1994)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

District 1 Substation

6649 Quay Road AR Tucumcari, NM 88401

Longitude (-103 46.41) Latitude (35 13.373)

Age of structure: 38 (1980)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

District 2

Main Station: 3303 State Highway 278 Tucumcari, NM 88401

Longitude (-103 36.845) Latitude (35 9.984)

Age of structure: 24 (1994)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

District 2 Substation

3032 State Highway 278 Tucumcari, NM 88401

Longitude (-103 36.793) Latitude (35 7.627)

Age of structure: 43 (1975)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

District 3 Main Station

6702 Quay Road AD, Tucumcari, NM 88401

Longitude (-103 31.486) Latitude (35 13.85)

Age of structure: 13 (2005)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

District 3 Substation

3450 Quay Road 72 Tucumcari, NM 88401

Longitude (-103 37.362) Latitude (35 18.144)

Age of structure: 33 (1985)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

District 4 (Quay)

4209 Quay Road 46 Quay, NM 88401

Longitude (-103 45.706) Latitude (35 55.451)

Age of structure: 24 (1994)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

Bard-Endee Bard Main Station

1097 Route 66 Bard, NM 88411

Longitude (-103 12.442) Latitude (35 6.86)

Age of structure: 24 (1994)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

Bard-Endee Endee Main Station

325 State Highway 93 Endee, NM 88411

Longitude (-103 6.366) Latitude (35 8.199)

Age of structure: 14 (2004)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

Bard-Endee Substation

794 State Highway 392 Bard, NM 88411

Longitude (-103 11.486) Latitude (35 12.911)

Age of structure: 5 (2013)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

Porter

1751 Quay Road 65 Porter, NM 88434

Longitude (-103 19.334) Latitude (35 12.089)

Age of structure: 16 (2002)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

Nara Visa

380 Bell Street Nara Visa, NM 88430

Longitude (-103 6.068) Latitude (35 36.391)

Age of structure: 42 (1976)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

Jordan Main Station

3699 Quay Road BH Jordan, NM 88121

Longitude (-103 50.932) Latitude (34 47.679)

Age of structure: 40 (1978)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

Jordan Substation (Ima)

5613 State Highway 156 Ima, NM 88427

Longitude (-103 1.506) Latitude (34 47.653)

Age of structure: 22 (1996)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

Jordan Substation (McAllister)

3229 State Highway 252 McAllister, NM 88427

Longitude (-103 46.615) Latitude (34 41.681)

Age of structure: 20 (1998)

Generator will be external to the building

Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

The generator will be fixed

See attached map for illustration

Forrest

209 State Highway 210 Forrest, NM 88427

Longitude (-103 36.086) Latitude (34 47.689)

Age of structure: 40 (1978)

Generator will be external to the building

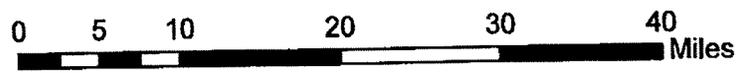
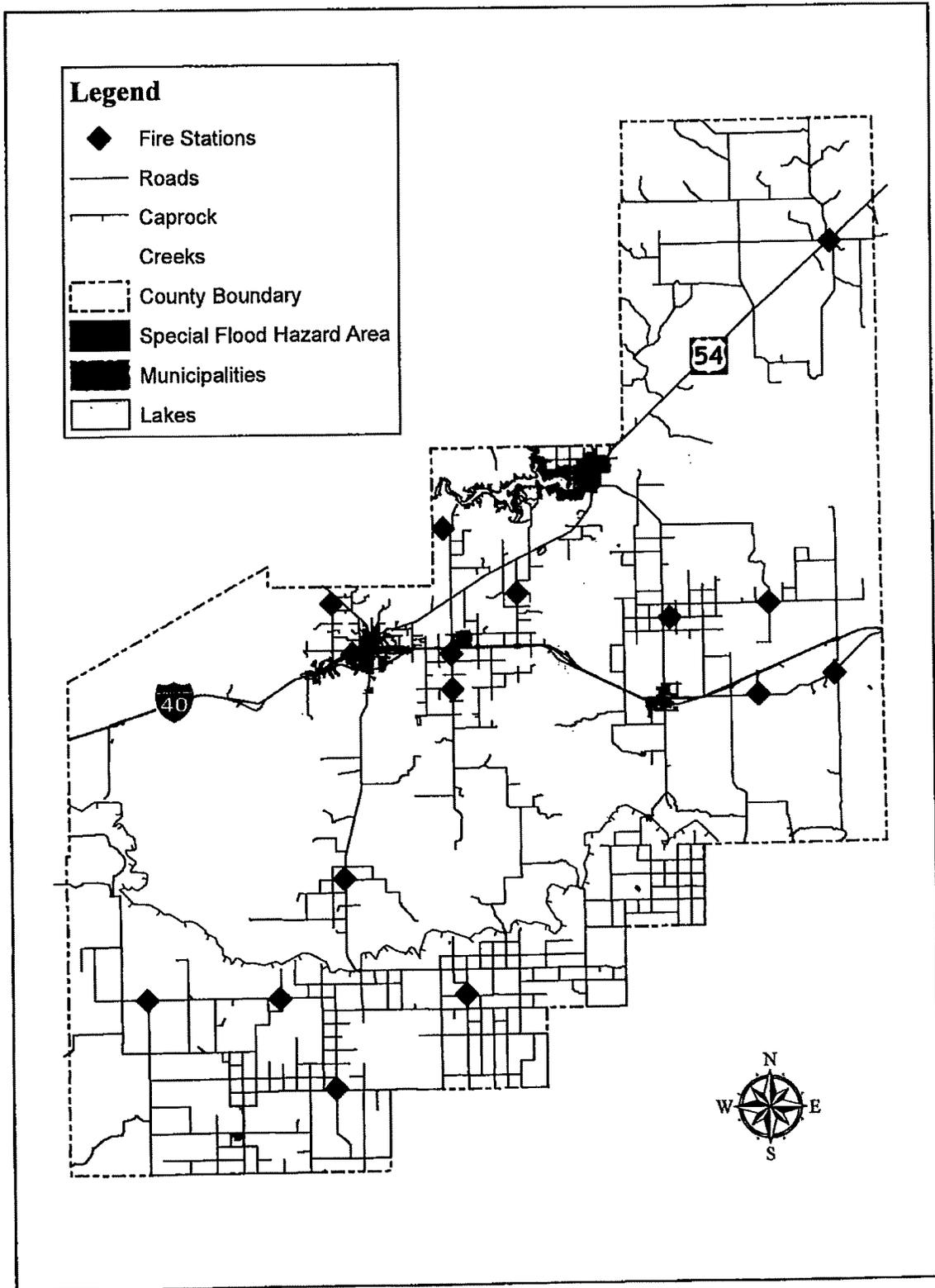
Generator will be placed on a concrete pad with a metal pipe barrier

The concrete pads will be four feet wide and ten feet long and two inches in the ground

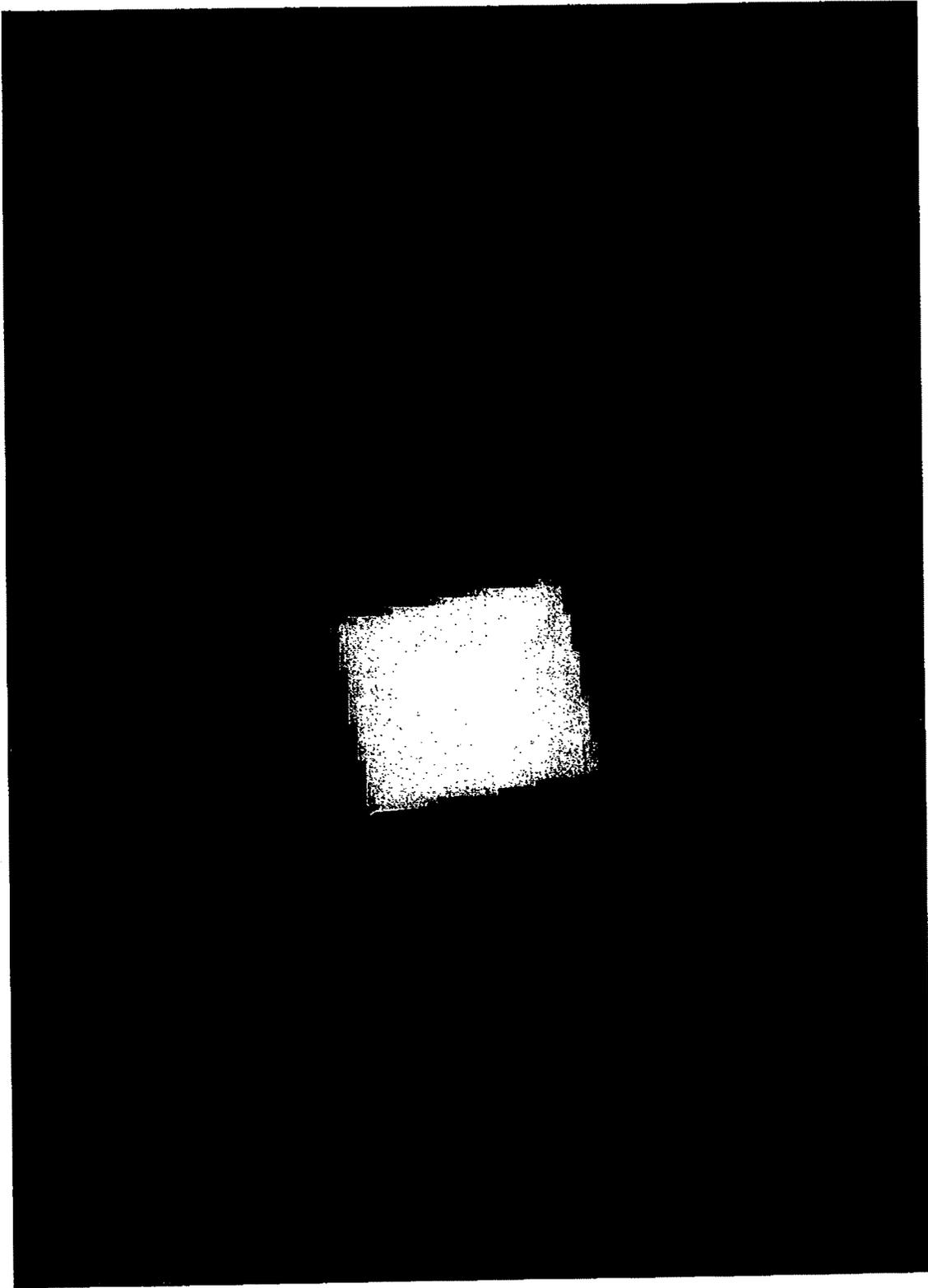
The generator will be fixed

See attached map for illustration

Quay County Generators Project Area Map



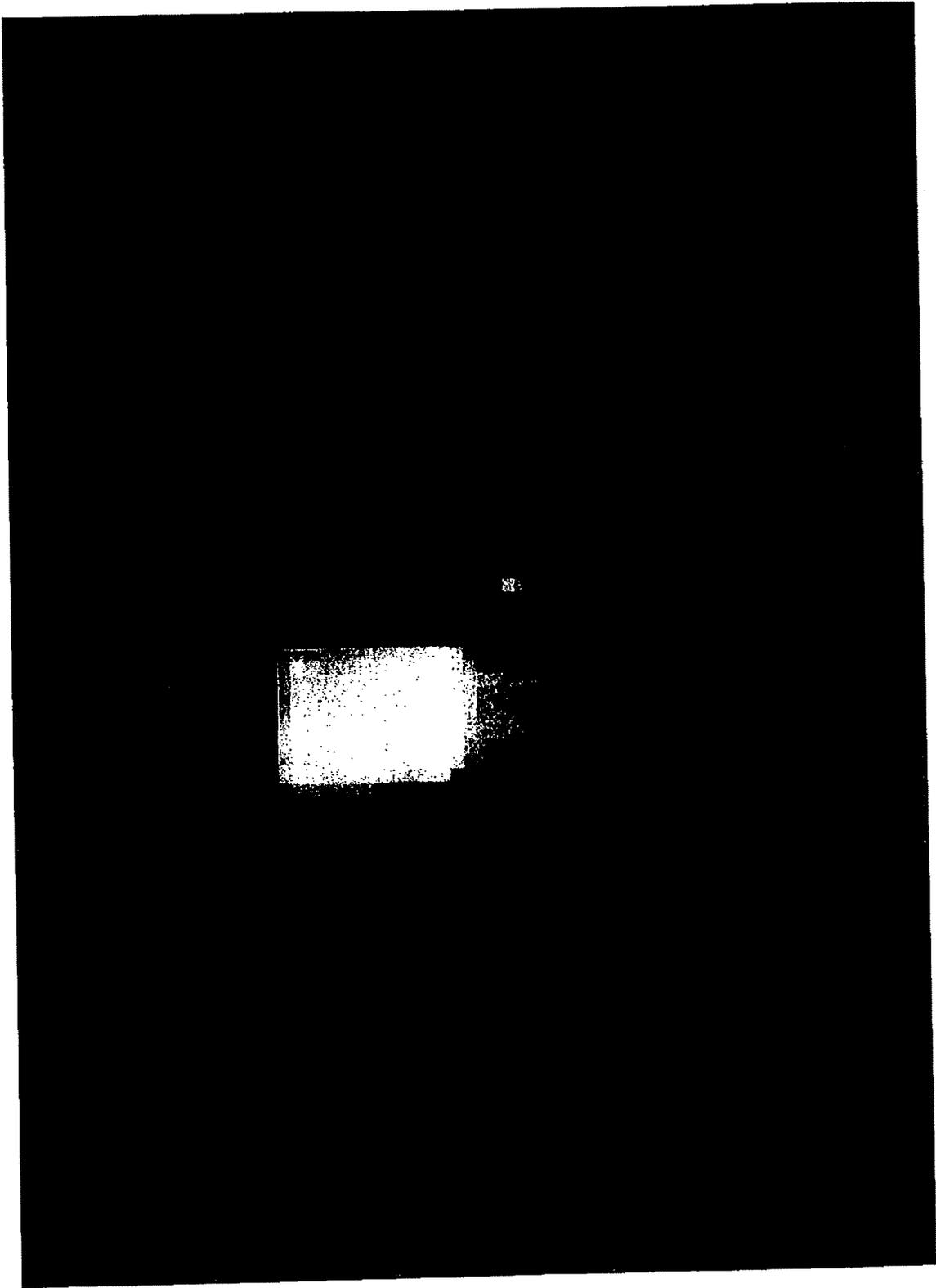
District 1 Main Station



Legend

0 12.525 50 75 100 Feet

District 1 Substation

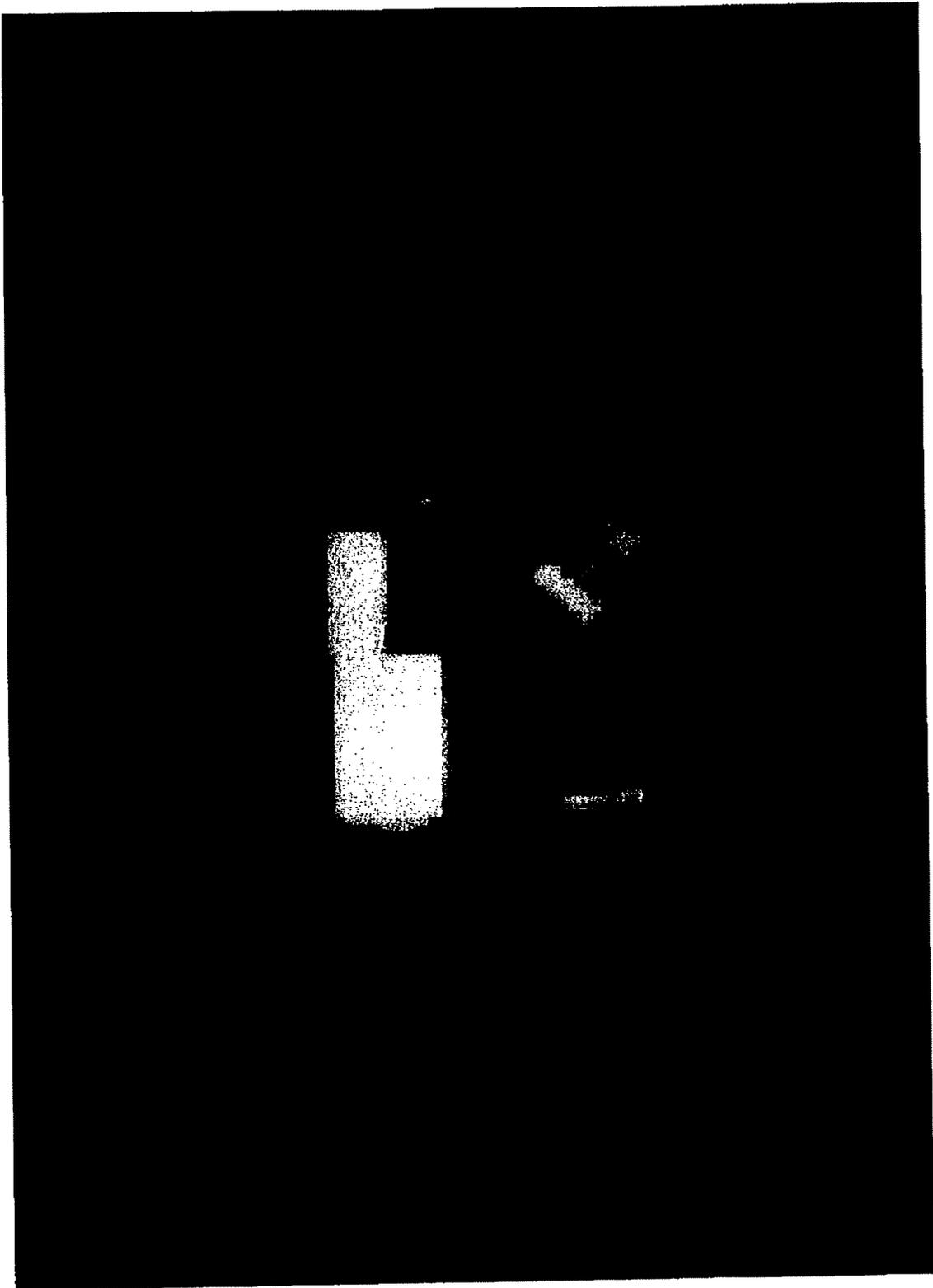


Legend

0 12.5 25 50 75 100 Feet



ε
District 2 Main Station



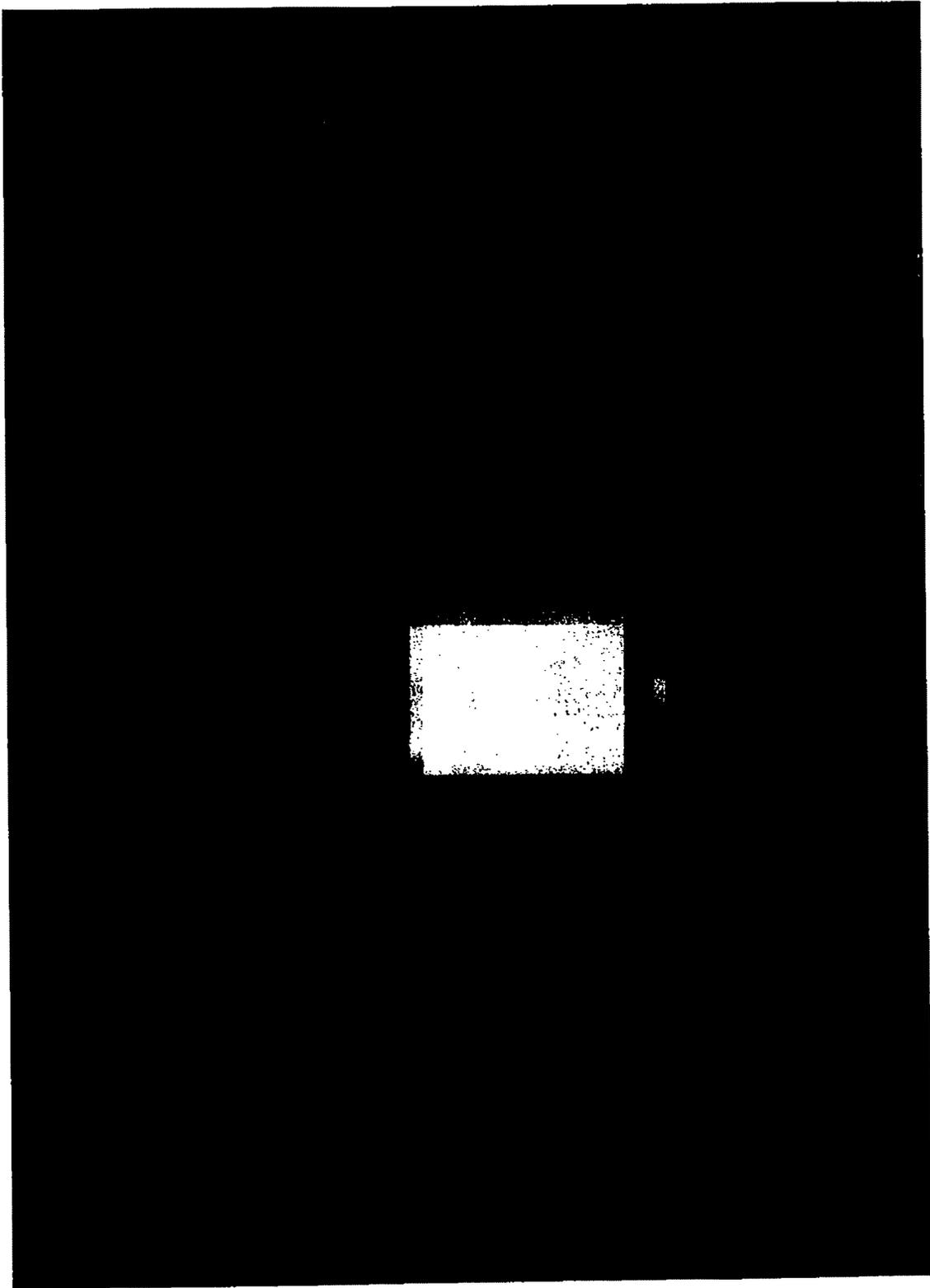
Legend

 Generator Location

0 25 50 100 150 200 Feet



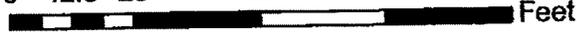
District 2 Substation



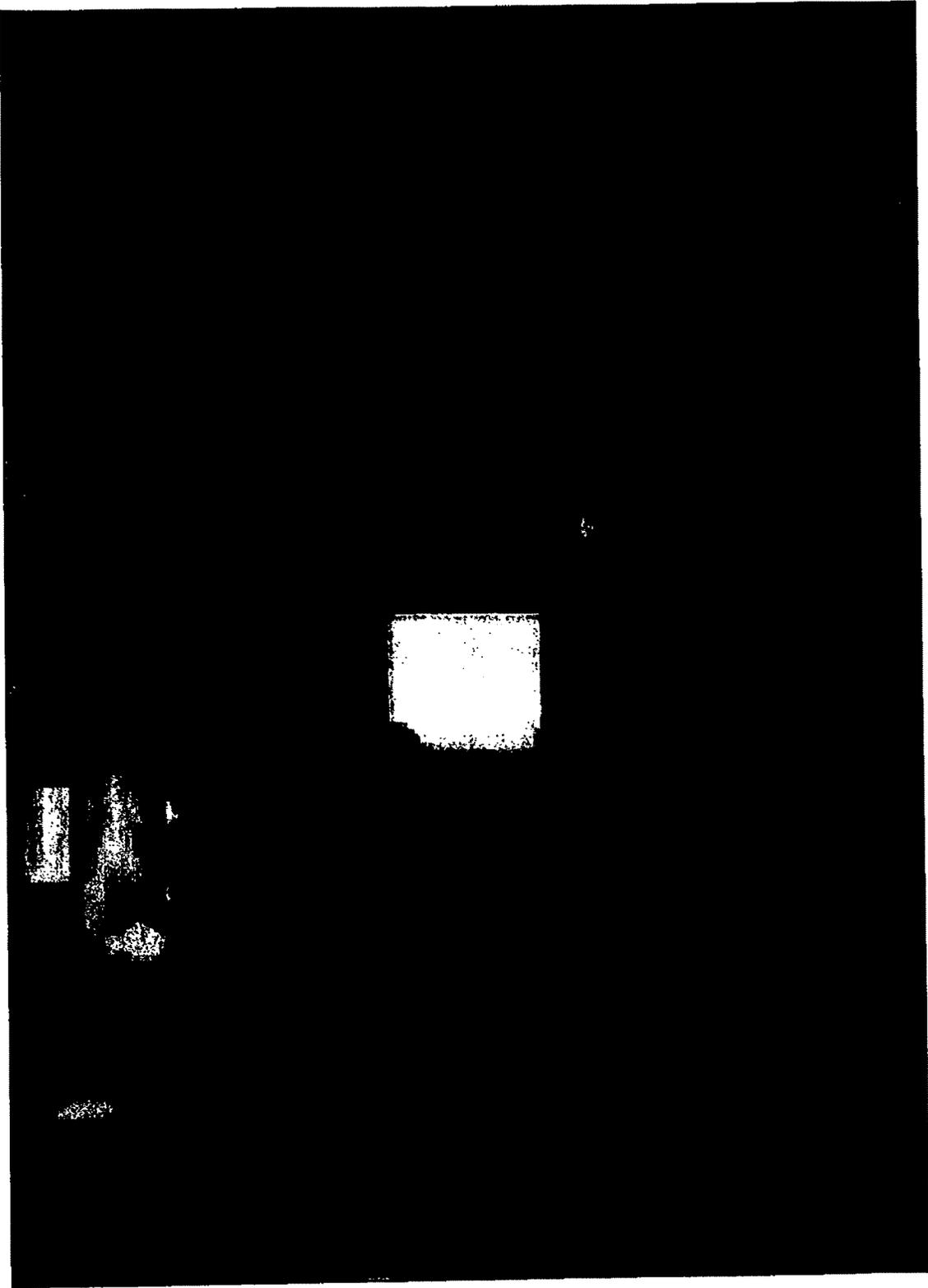
Legend

 Generator Location

0 12.5 25 50 75 100 Feet

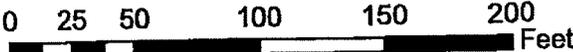


Distict 3 Main Station

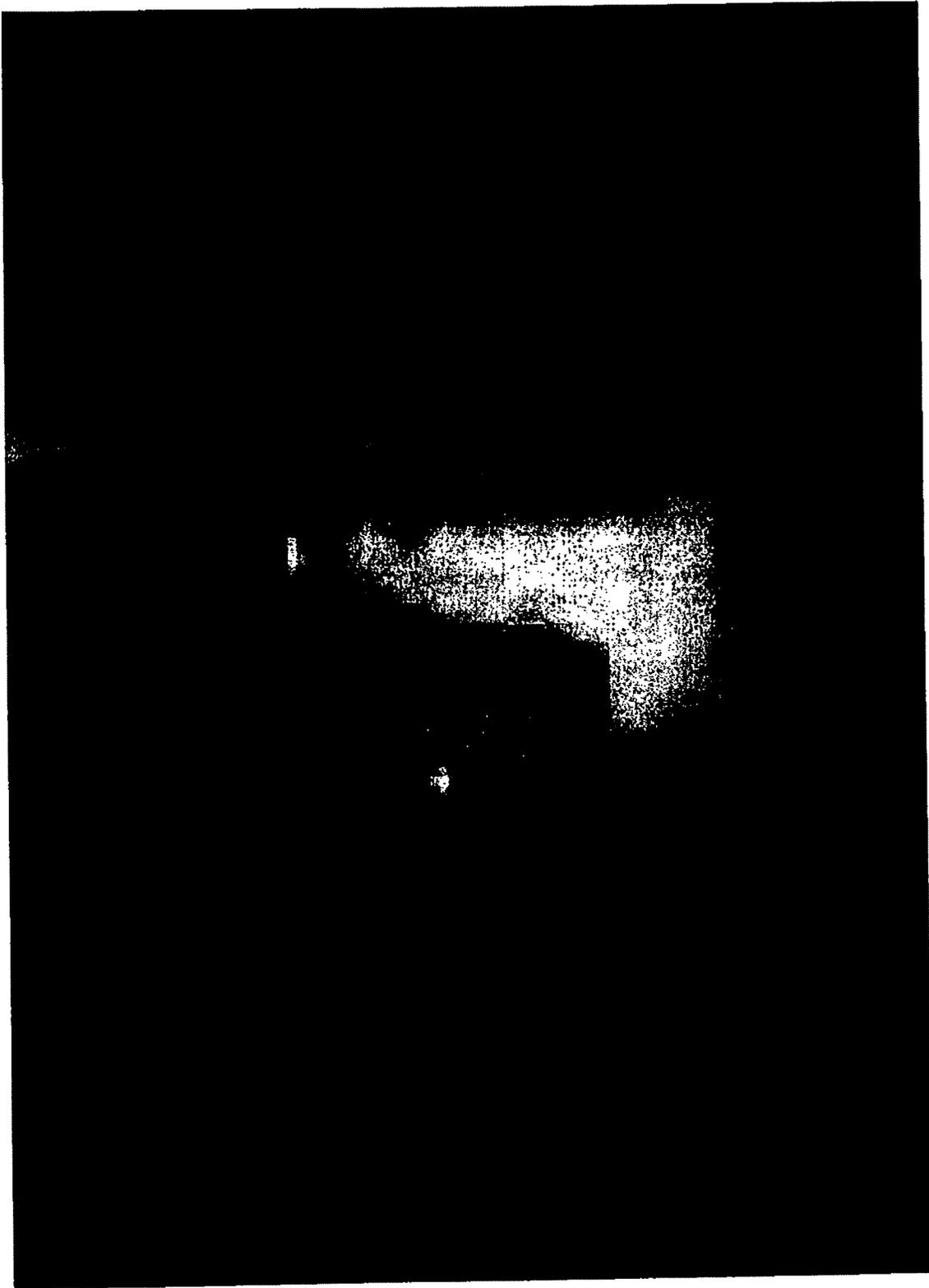


Legend

 Generator Location



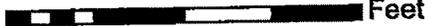
Distict 3 Substation



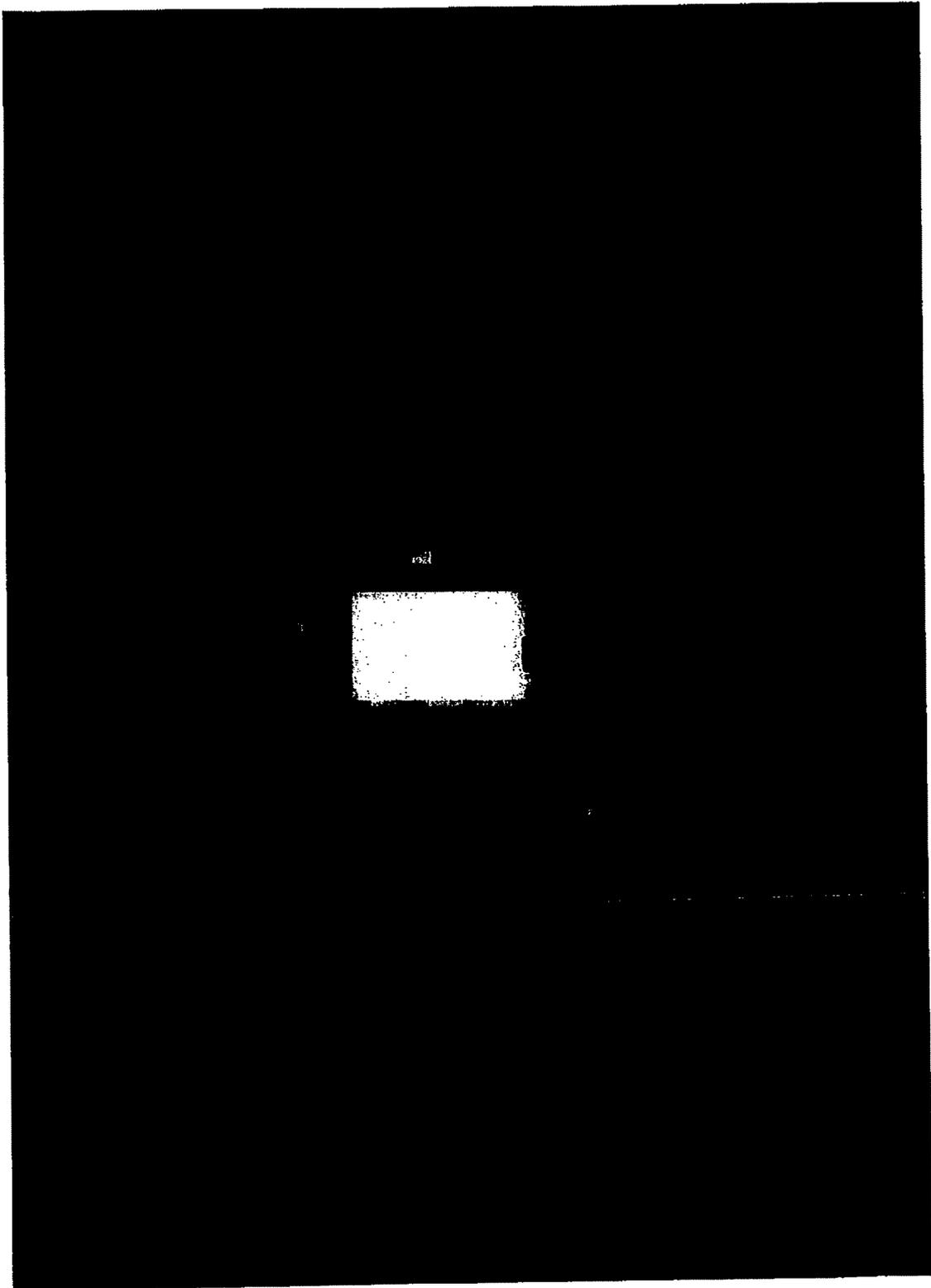
Legend

 Generator Location

0 12.525 50 75 100 Feet



District 4 Fire Station



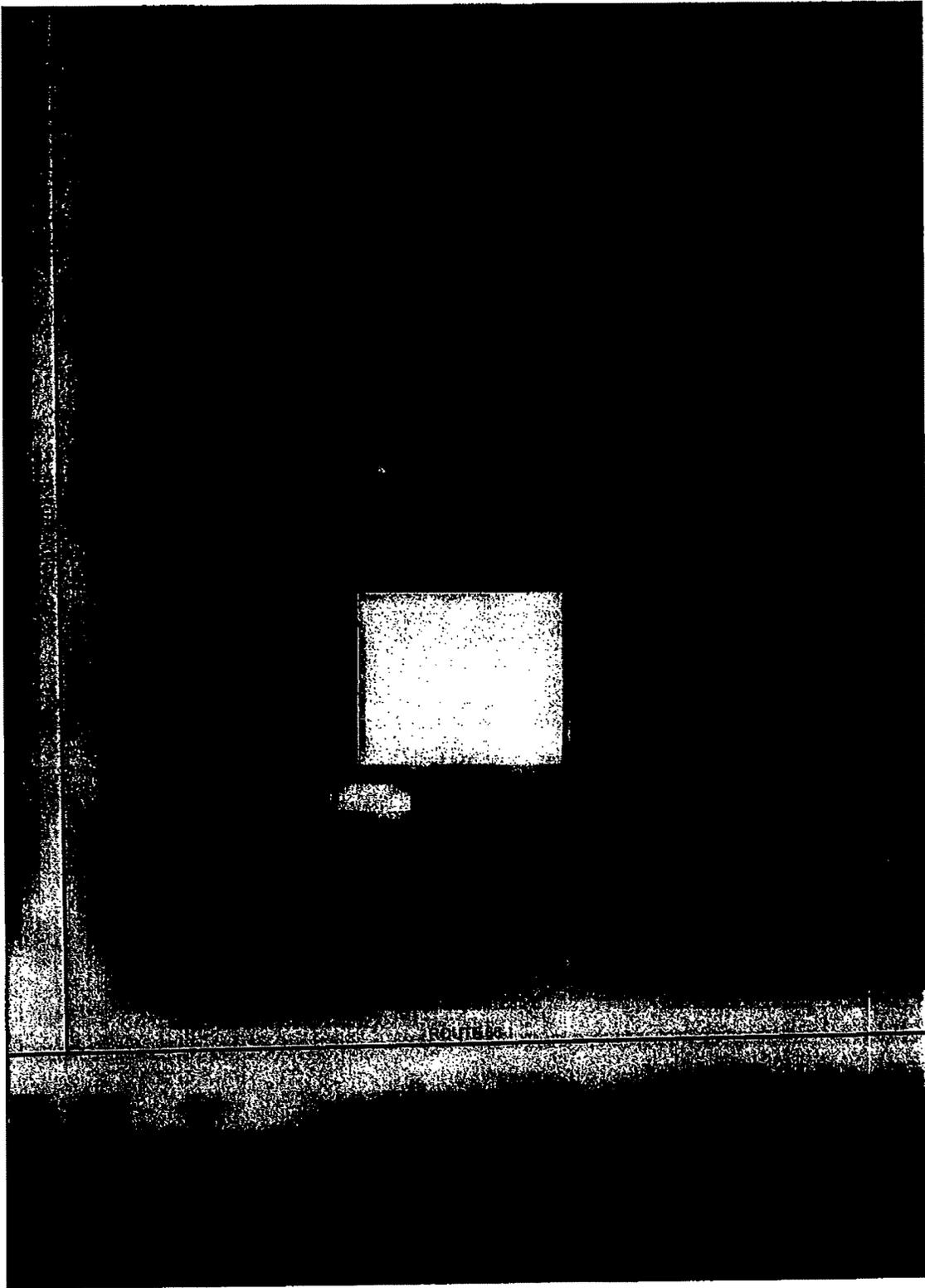
Legend

 Generator Location

0 25 50 100 150 200 Feet

A horizontal scale bar with alternating black and white segments, used for measuring distances in feet.

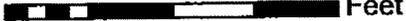
Bard-Endee Bard Main Station



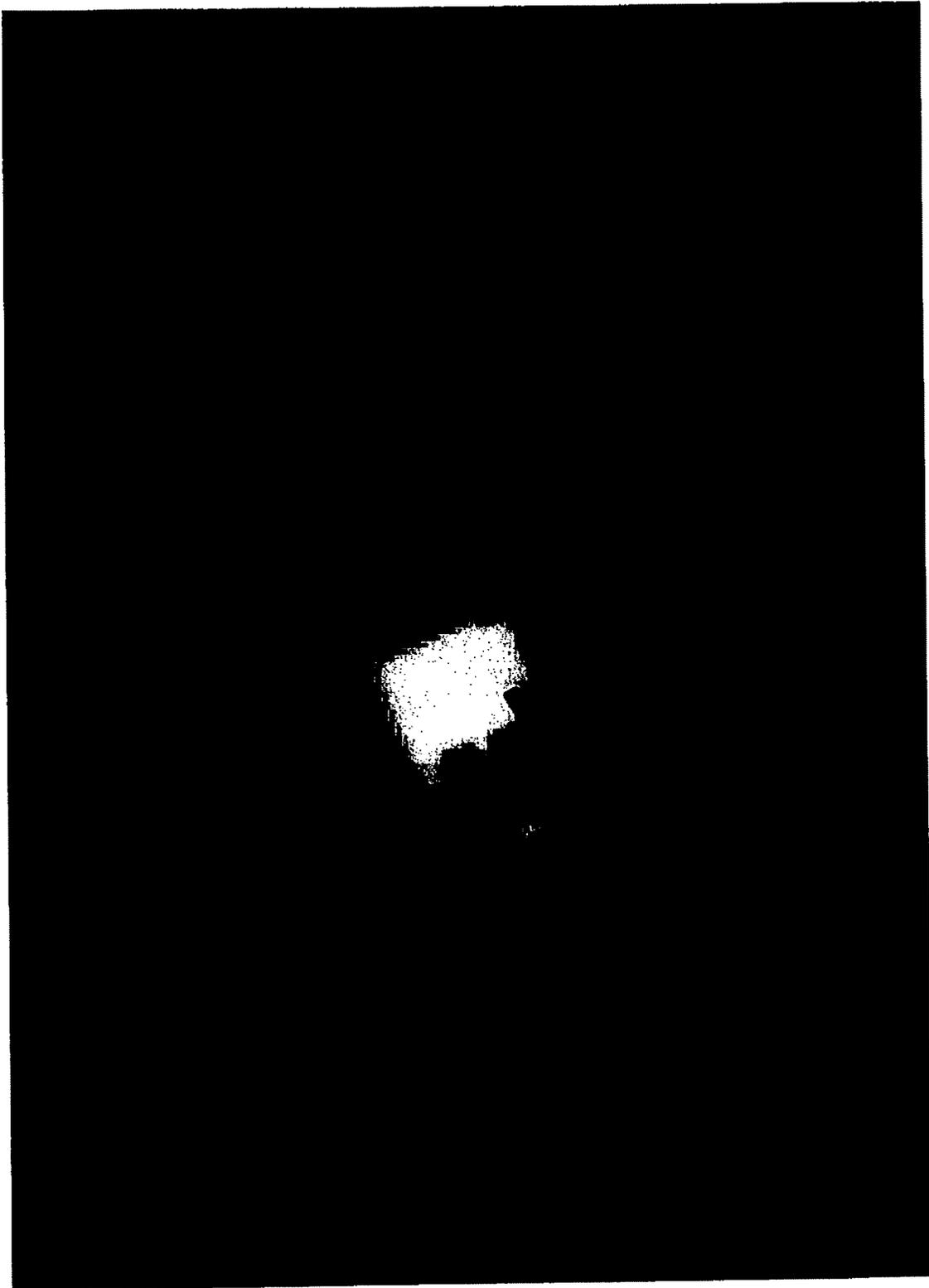
Legend

 Generator Location

0 12.525 50 75 100 Feet



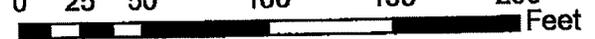
Bard-Endee Endee Main Station



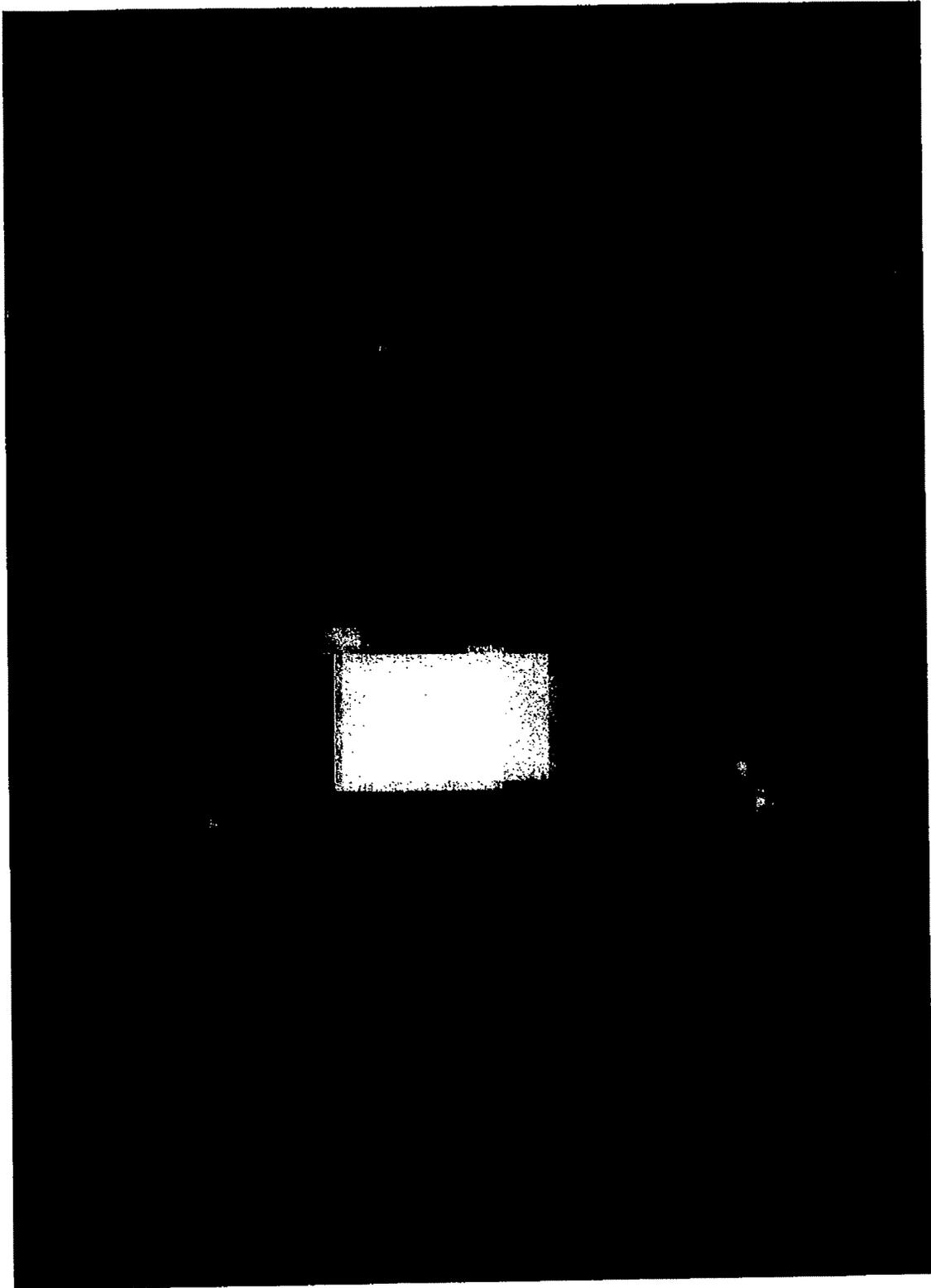
Legend

 Generator Location

0 25 50 100 150 200 Feet

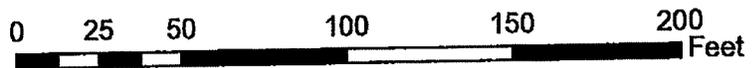


Bard-Endee Substation

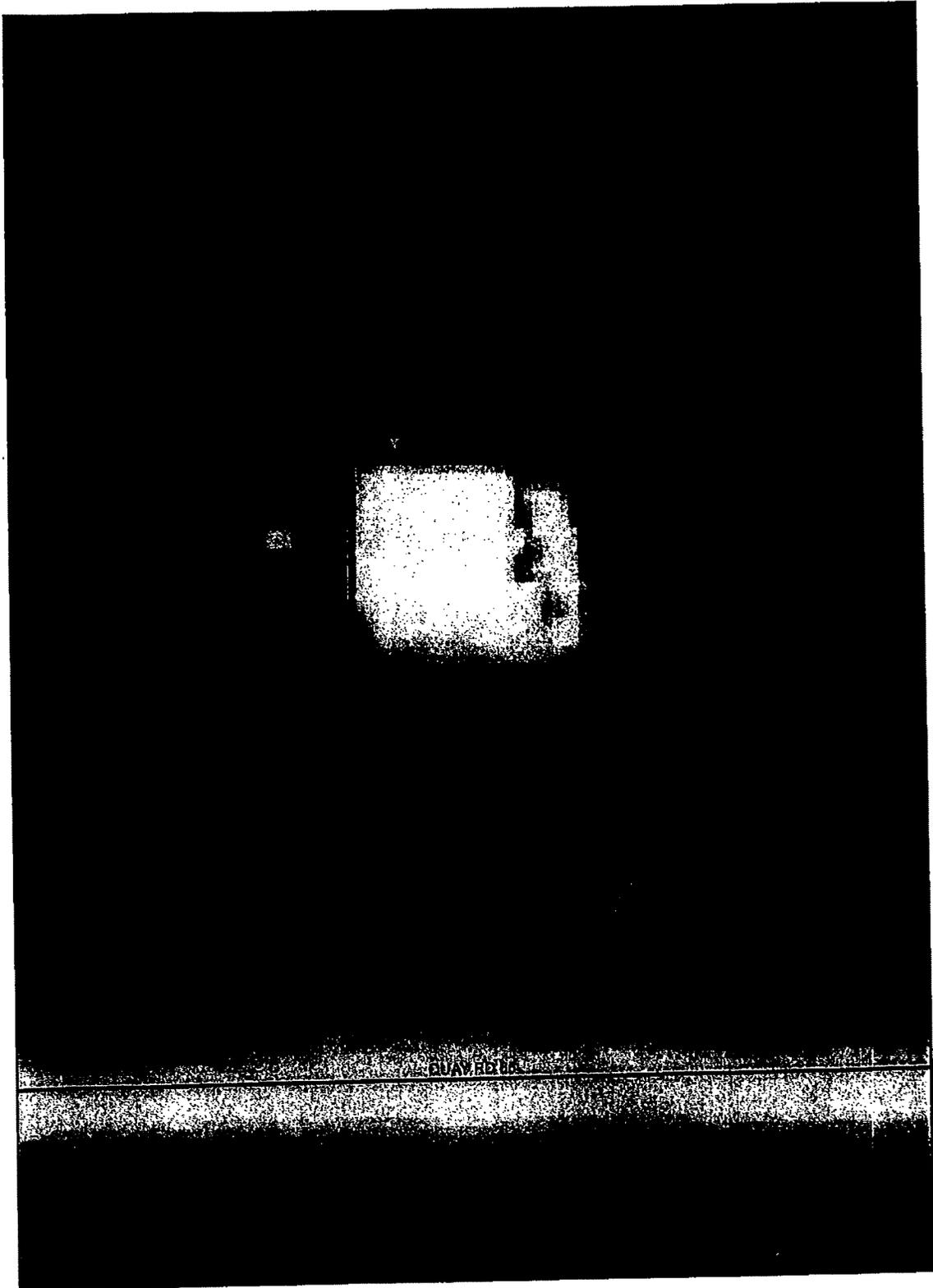


Legend

 Generator Location

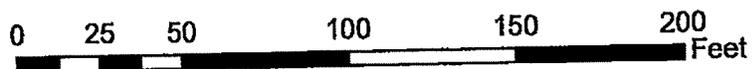


Porter Fire Station



Legend

 Generator Location



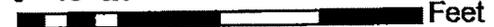
Nara Visa Fire Station



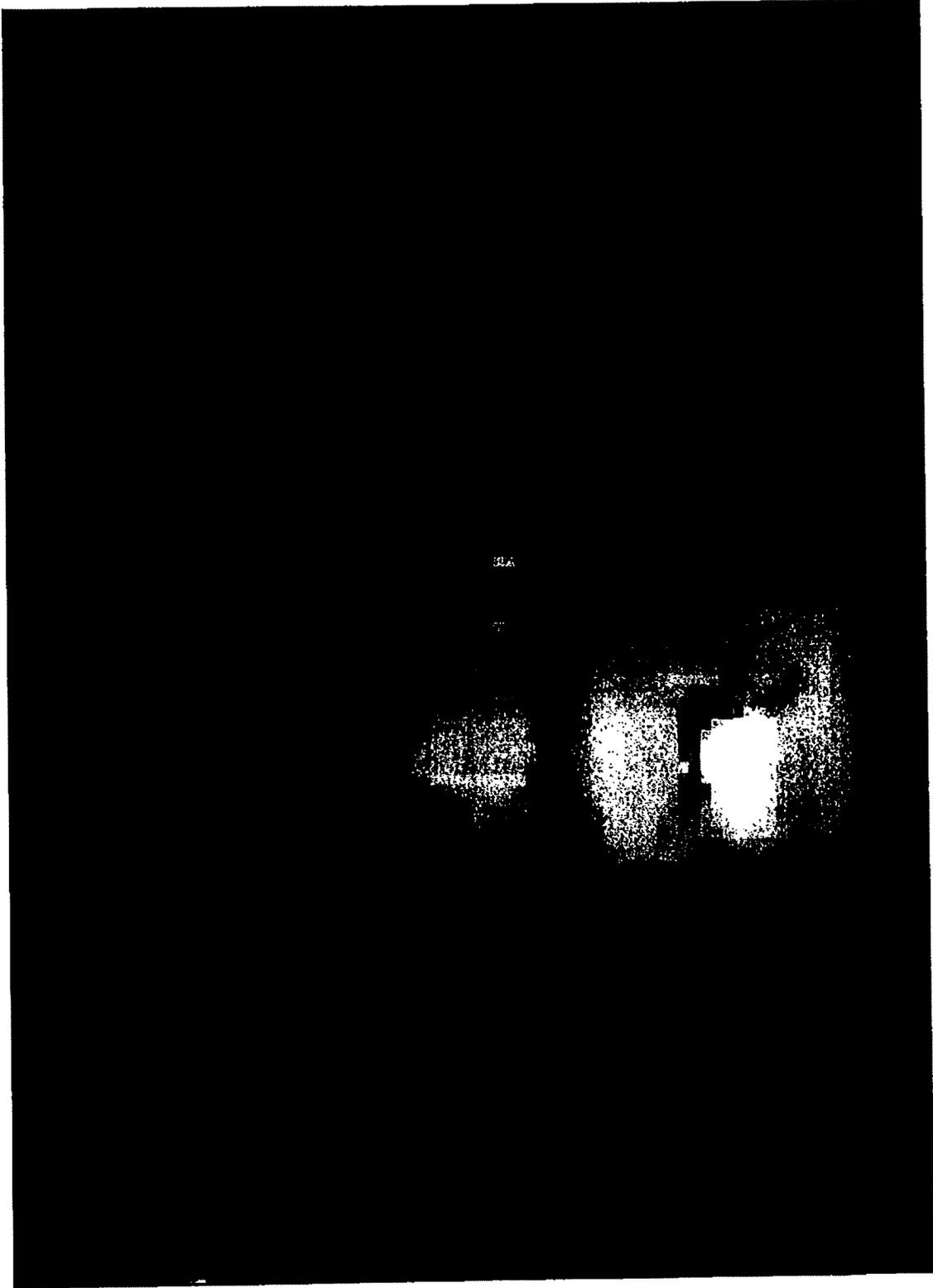
Legend

 Generator Location

0 10 20 40 60 80 Feet



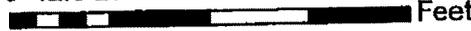
Jordan Main Station



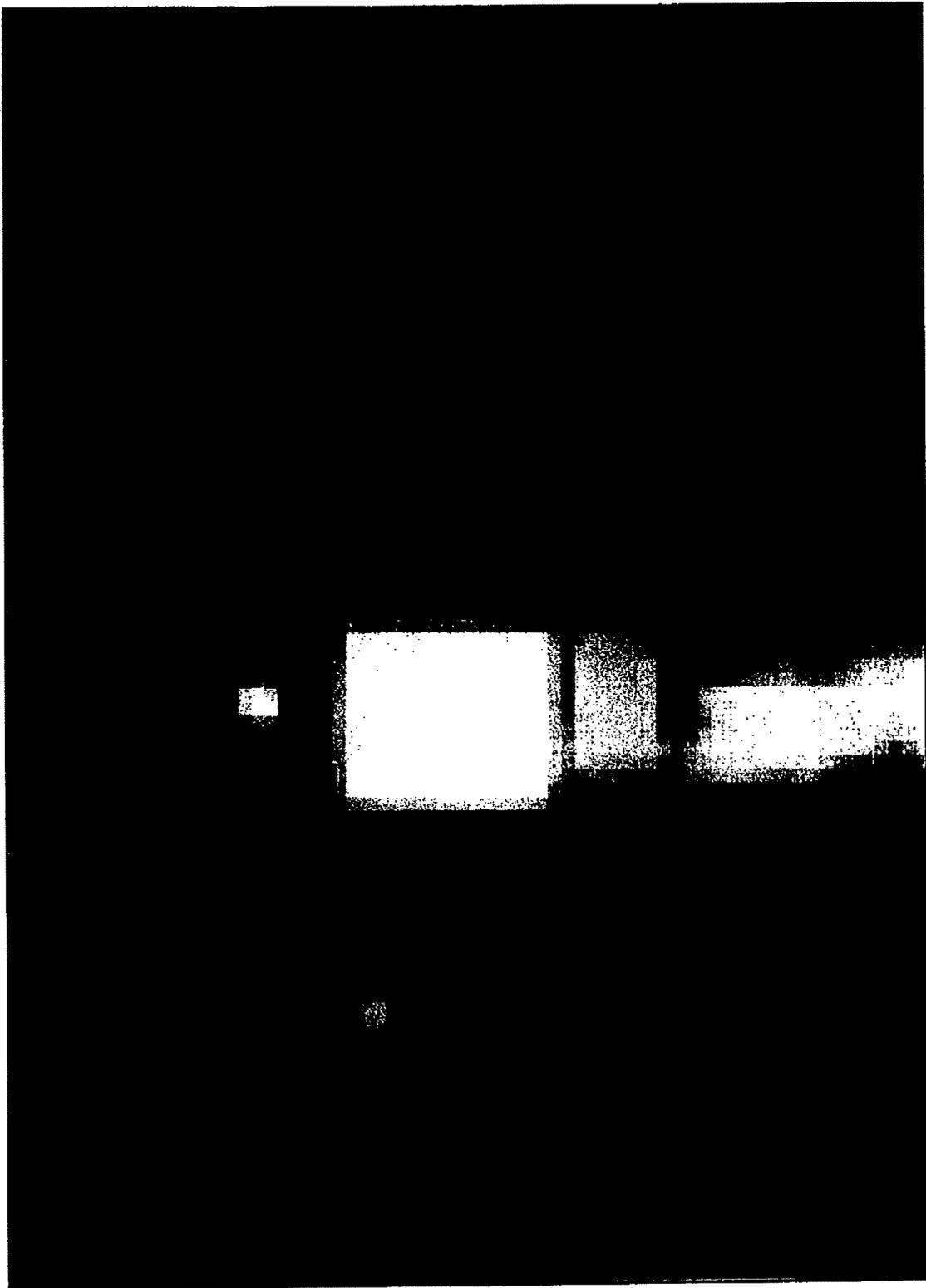
Legend

 Generator Location

0 12.5 25 50 75 100 Feet



Jordan Substation (Ima)



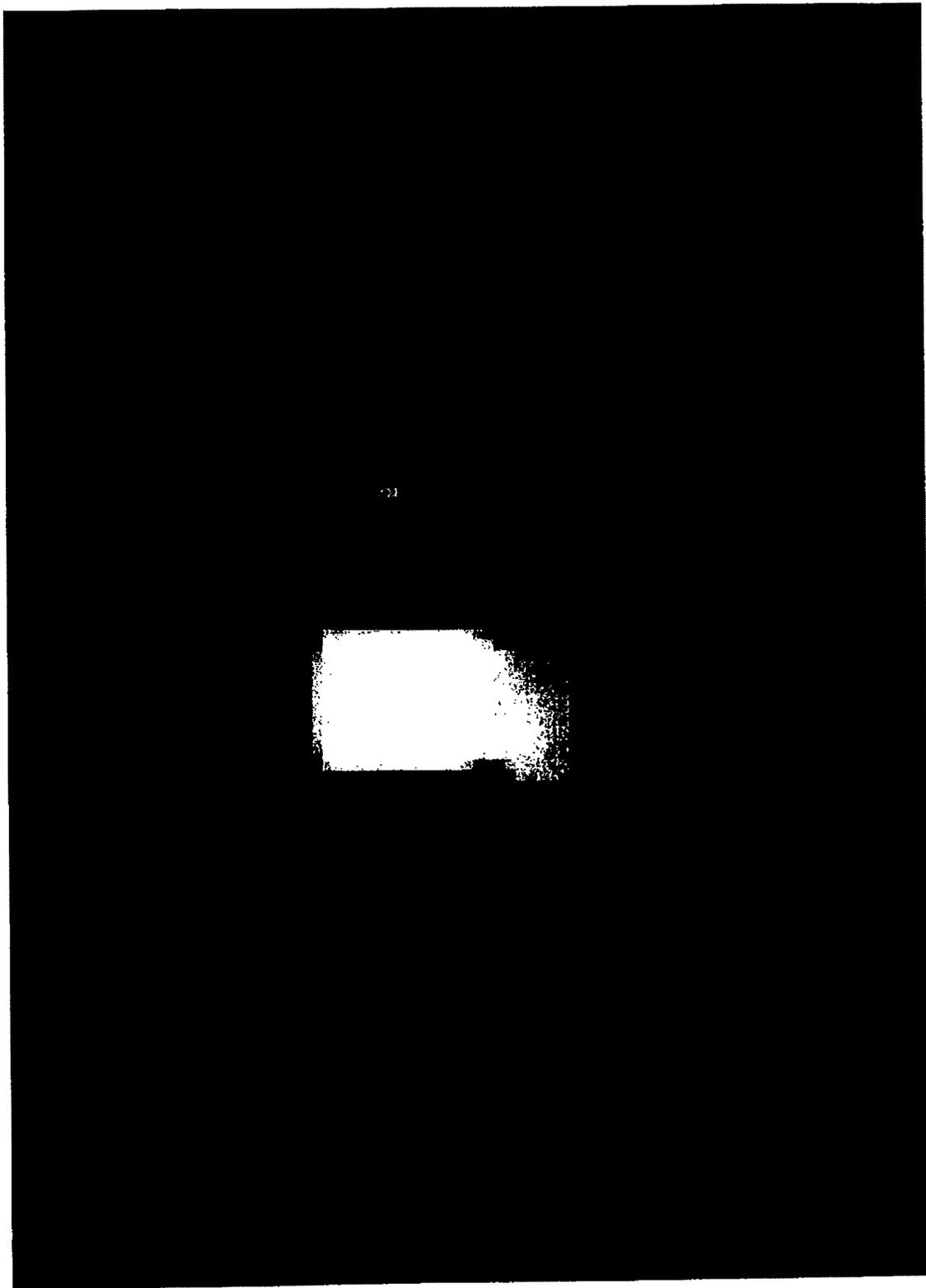
Legend

 Generator Location

0 12.5 25 50 75 100 Feet



Jordan Substation (McAlister)



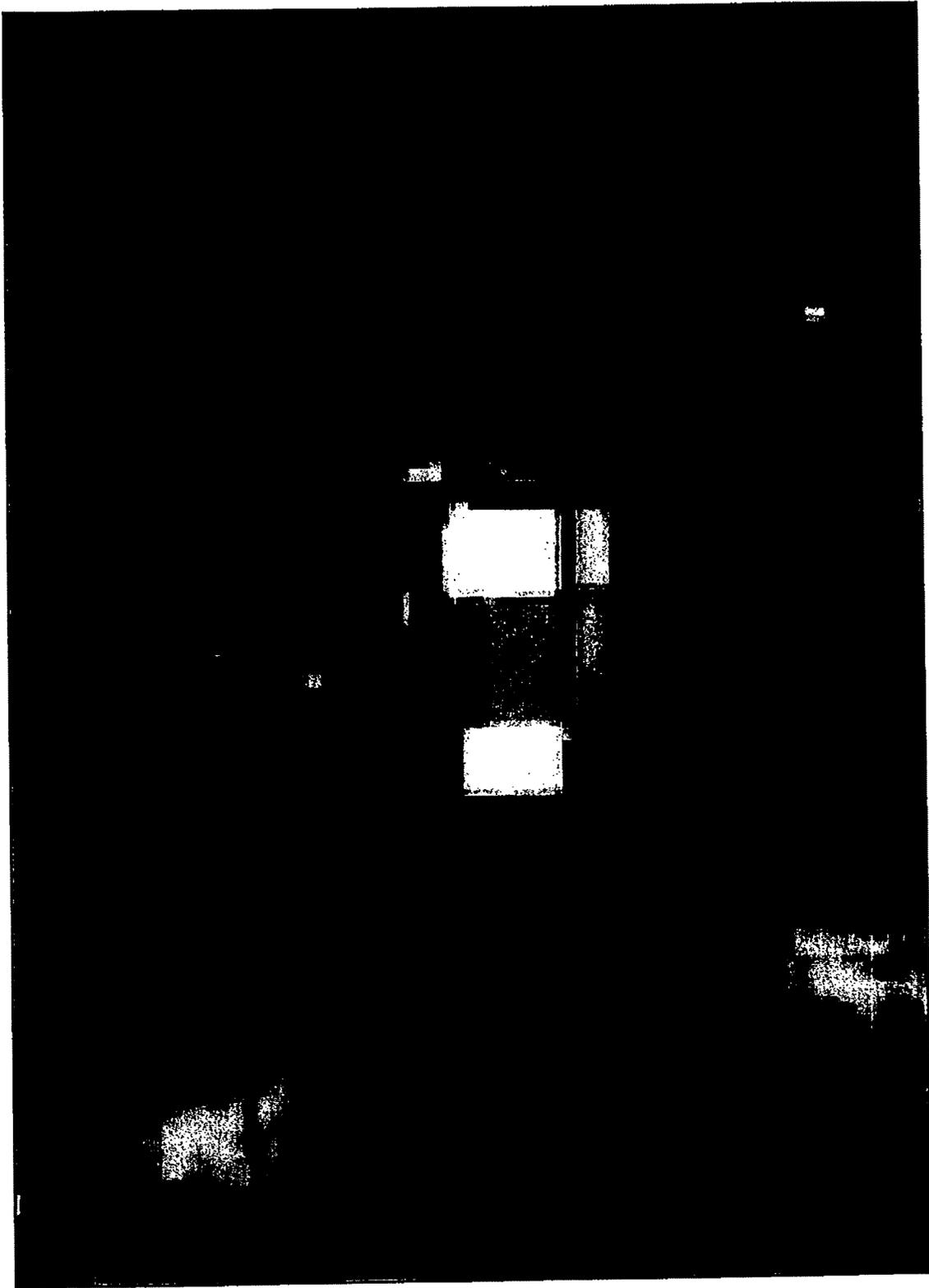
Legend

 Generator Location

0 12.5 25 50 75 100 Feet



Forrest Fire Station



Legend

 Generator Location

0 25 50 100 150 200 Feet



16/20/22 kW

GENERAC®

GUARDIAN® SERIES
Residential Standby Generators
Air-Cooled Gas Engine

16/20/22 kW

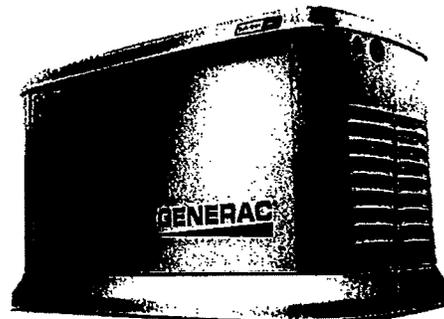
1 of 6

INCLUDES:

- True Power™ Electrical Technology
- Two Line LCD Multilingual Digital Evolution™ Controller (English/Spanish/French/Portuguese)
- Two Transfer Switch Options Available: 100 Amp, 16 Circuit Switch or 200 Amp Service Rated Smart Switch. See Page 5 for Details.
- Electronic Governor
- Standard Wi-Fi™ Remote Monitoring
- System Status & Maintenance Interval LED Indicators
- Sound Attenuated Enclosure
- Flexible Fuel Line Connector
- Direct-To-Dirt Composite Mounting Pad
- Natural Gas or LP Gas Operation
- 5 Year Limited Warranty
- Listed and Labeled by the Southwest Research Institute allowing installation as close as 18" (457 mm) to a structure.*
**Must be located away from doors, windows, and fresh air intakes and in accordance with local codes.*
https://assets.swri.org/library/DirectoryOfListedProducts/ConstructionIndustry/973_DoC_204_13204-01-01_Rev9.pdf

Standby Power Rating

Models G007036-1, G007037-1 (Aluminum - Bisque) - 16 kW 60 Hz
Model G007035-1 (Aluminum - Bisque) - 16 kW 60 Hz
Models G007039-1, G007038-1 (Aluminum - Bisque) - 20 kW 60 Hz
Models G007043-2, G007042-2 (Aluminum - Bisque) - 22 kW 60 Hz



QUIET-TEST™



Note: CUL certification only applies to unbundled units and units packaged with limited circuit switches. Units packaged with the Smart Switch are UL certified in the USA only.

FEATURES

- **INNOVATIVE ENGINE DESIGN & RIGOROUS TESTING** are at the heart of Generac's success in providing the most reliable generators possible. Generac's G-Force engine lineup offers added peace of mind and reliability for when you need it the most. The G-Force series engines are purpose built and designed to handle the rigors of extended run times in high temperatures and extreme operating conditions.
- **TRUE POWER™ ELECTRICAL TECHNOLOGY:** Superior harmonics and sine wave form produce less than 5% Total Harmonic Distortion for utility quality power. This allows confident operation of sensitive electronic equipment and micro-chip based appliances, such as variable speed HVAC systems.
- **TEST CRITERIA:**
 - ✓ PROTOTYPE TESTED
 - ✓ SYSTEM TORSIONAL TESTED
 - ✓ NEMA MG1-22 EVALUATION
 - ✓ MOTOR STARTING ABILITY
- **MOBILE LINK™ REMOTE MONITORING:** FREE with every Guardian Series Home standby generator. Allows you to monitor the status of your generator from anywhere in the world using a smartphone, tablet, or PC. Easily access information such as the current operating status and maintenance alerts. Connect your account to your authorized service dealer for fast, friendly and proactive service. With Mobile Link, you are taken care of before the next power outage.
- **SOLID-STATE, FREQUENCY COMPENSATED VOLTAGE REGULATION:** This state-of-the-art power maximizing regulation system is standard on all Generac models. It provides optimized FAST RESPONSE to changing load conditions and MAXIMUM MOTOR STARTING CAPABILITY by electronically torque-matching the surge loads to the engine. Digital voltage regulation at ±1%.
- **SINGLE SOURCE SERVICE RESPONSE** from Generac's extensive dealer network provides parts and service know-how for the entire unit, from the engine to the smallest electronic component.
- **GENERAC TRANSFER SWITCHES:** Long life and reliability are synonymous with GENERAC POWER SYSTEMS. One reason for this confidence is that the GENERAC product line includes its own transfer systems and controls for total system compatibility.

THE GENERAC PROMISE



GENERAC[®]

features and benefits

16/20/22 kW

Engine

- Generac G-Force design
- "Spiny-lok" cast iron cylinder walls
- Electronic Ignition/spark advance
- Full pressure lubrication system
- Low oil pressure shutdown system
- High temperature shutdown

Maximizes engine "breathing" for increased fuel efficiency. Plateau honed cylinder walls and plasma moly rings helps the engine run cooler, reducing oil consumption resulting in longer engine life.

Rigid construction and added durability provide long engine life.

These features combine to assure smooth, quick starting every time.

Pressurized lubrication to all vital bearings means better performance, less maintenance and longer engine life. Now featuring up to a 2 year/200 hour oil change interval.

Shutdown protection prevents catastrophic engine damage due to low oil.

Prevents damage due to overheating.

Generator

- Revolving field
- Skewed stator
- Displaced phase excitation
- Automatic voltage regulation
- UL 2200 listed

Allows for a smaller, light weight unit that operates 25% more efficiently than a revolving armature generator.

Produces a smooth output waveform for compatibility with electronic equipment.

Maximizes motor starting capability.

Regulates the output voltage to $\pm 1\%$ prevents damaging voltage spikes.

For your safety.

Transfer Switch (if applicable)

- Fully automatic
- NEMA 3R
- Remote mounting

Transfers your vital electrical loads to the energized source of power.

Can be installed inside or outside for maximum flexibility.

Mounts near your existing distribution panel for simple, low-cost installation.

Evolution™ Controls

- Auto/Manual/Off illuminated buttons
- Two-line LCD multilingual display
- Sealed, raised buttons
- Utility voltage sensing
- Generator voltage sensing
- Utility Interrupt delay
- Engine warm-up
- Engine cool-down
- Programmable exercise
- Smart battery charger
- Main line circuit breaker
- Electronic governor

Selects the operating mode and provides easy, at-a-glance status indication in any condition.

Provides homeowners easily visible logs of history, maintenance and events up to 50 occurrences.

Smooth, weather-resistant user interface for programming and operations.

Constantly monitors utility voltage, setpoints 65% dropout, 80% pick-up, of standard voltage.

Constantly monitors generator voltage to ensure the cleanest power delivered to the home.

Prevents nuisance start-ups of the engine, adjustable 2-1500 seconds from the factory default setting of five (5) seconds by a qualified dealer.

Ensures engine is ready to assume the load, setpoint approximately 5 seconds.

Allows engine to cool prior to shutdown, setpoint approximately 1 minute.

Operates engine to prevent oil seal drying and damage between power outages by running the generator for 5 minutes every other week. Also offers a selectable setting for weekly or monthly operation providing flexibility and potentially lower fuel costs to the owner.

Delivers charge to the battery only when needed at varying rates depending on outdoor air temperature. Compatible with lead acid and AGM-style batteries.

Protects generator from overload.

Maintains constant 60 Hz frequency.

Unit

- SAE weather protective enclosure
- Enclosed critical grade muffler
- Small, compact, attractive

Sound attenuated enclosures ensure quiet operation and protection against mother nature, withstanding winds up to 150 mph. Hinged key locking roof panel for security. Lift-out front for easy access to all routine maintenance items. Electrostatically applied textured epoxy paint for added durability.

Quiet, critical grade muffler is mounted inside the unit to prevent injuries.

Makes for an easy, eye appealing installation, as close as 18" (457 mm) away from a building.

16/20/22 kW**Installation System**

- 1 ft (305 mm) flexible fuel line connector
- Direct-to-dirt composite mounting pad
- Integral sediment trap

Absorbs any generator vibration when connected to rigid pipe.

Complex lattice design prevents settling or sinking of the generator system.

Prevents particles and moisture from entering the fuel regulator and engine, prolonging engine life.

Remote Monitoring

- Ability to view generator status
- Ability to view generator Exercise/Run and Total Hours
- Ability to view generator maintenance information
- Monthly report with previous month's activity.
- Ability to view generator battery information
- Weather information

Monitor your generator via your smartphone, tablet, or computer at any time via the Mobile Link application for complete peace of mind

Review the generator's complete protection profile for exercise hours and total hours

Provides maintenance information for your specific model generator when scheduled maintenance is due

Detailed monthly reports provide historical generator information

Built in battery diagnostics displaying current state of the battery

Provides detailed local ambient weather conditions for generator location

GENERAC

specifications

16/20/22 kW

Generator Model	G007035-1, G007036-1, G007037-1 (16 kW)	G007038-1, G007039-1 (20 kW)	G007042-2, G007043-2 (22 kW)
Rated Maximum Continuous Power Capacity (LP)	16,000 Watts*	20,000 Watts*	22,000 Watts*
Rated Maximum Continuous Power Capacity (NG)	16,000 Watts*	18,000 Watts*	19,500 Watts *
Rated Voltage	240	240	240
Rated Maximum Continuous Load Current – 240 Volts (LP/NG)	66.7 / 66.7	83.3 / 75.0	91.7 / 81.3
THD %	Less than 5%	Less than 5%	Less than 5%
Main Line Circuit Breaker	70 Amp	90 Amp	100 Amp
Phase	1	1	1
Number of Rotor Poles	2	2	2
Rated Frequency	60 Hz	60 Hz	60 Hz
Power Factor	1.0	1.0	1.0
Battery Requirement (not included)	12 Volts, Group 28R 540 CCA Minimum or Group 35AGM 650 CCA Minimum		
Unit Weight (lb/kg)	409 / 186	448 / 203	466 / 211
Dimensions (L x W x H) in/in	48 x 25 x 23 7/8 x 21 1/8 x 638 x 732		
Sound output in dB(A) at 23 ft (7 m) with generator operating at normal load**	67	67	67
Sound output in dB(A) at 23 ft (7 m) with generator in Quiet-Fast™ low-speed exercise mode**	55	55	57
Exercise duration	5 min	5 min	5 min

Engine	GENERAC G-Force 1000 Series		
Type of Engine	2	2	2
Number of Cylinders	2	2	2
Displacement	999 cc	999 cc	999 cc
Cylinder Block	Aluminum w/ Cast Iron Sleeve		
Valve Arrangement	Overhead Valve	Overhead Valve	Overhead Valve
Ignition System	Solid-state w/ Magneto	Solid-state w/ Magneto	Solid-state w/ Magneto
Governor System	Electronic	Electronic	Electronic
Compression Ratio	9.5:1	9.5:1	9.5:1
Starter	12 VDC	12 VDC	12 VDC
Oil Capacity including Filter	Approx. 1.9 qt / 1.8 L	Approx. 1.9 qt / 1.8 L	Approx. 1.9 qt / 1.8 L
Operating rpm	3,600	3,600	3,600
Fuel Consumption			
Natural Gas	ft ³ /hr (m ³ /hr)		
1/2 Load	218 (6.17)	204 (5.78)	228 (6.46)
Full Load	309 (8.75)	301 (8.52)	327 (9.26)
Liquid Propane	ft ³ /hr (gal/hr) (l/hr)		
1/2 Load	74 (2.03) [7.70]	87 (2.37) [8.89]	92 (2.53) [9.67]
Full Load	107 (2.94) [11.11]	130 (3.56) [13.48]	142 (3.90) [14.77]

Note: Fuel pipe must be sized for full load. Required fuel pressure to generator fuel inlet at all load ranges - 3.5" water column (7-13 mm mercury) for natural gas, 10-12" water column (19-22 mm mercury) for LP gas. For BTU content, multiply ft³/hr x 2500 (LP) or ft³/hr x 1600 (NG). For Megajoule content, multiply m³/hr x 93.15 (LP) or m³/hr x 37.26 (NG)

Controls	
Two-Line Plain Text Multilingual LCD Display	Simple user Interface for ease of operation.
MODE Buttons: Auto	Automatic Start on Utility Failure: 7-day exercise
Manual	Start with starter control, unit stays on. If utility fails, transfer to load takes place.
Oil	Stops unit. Power is removed. Control and charge still operate.
Ready to Run/Maintenance Messages	Standard
Engine Run Hours Indication	Standard
Programmable start delay between 2-1600 seconds	Standard (programmable by dealer only)
Utility Voltage Loss/Return to Utility Auto/Manual (Brownout Setting)	From 140-177 V / 190-216 V
Future Set Capable Exercise/Exercise Set Error Warning	Standard
Run/Alarm/Maintenance Logs	60 Events Each
Engine Start Sequence	Cyclic cranking: 16 sec on, 7 rest (90 sec maximum duration).
Starter Lockout	Starter cannot re-engage until 5 sec after engine has stopped.
Smart Battery Charger	Standard
Charger Fault/Missing AD Warning	Standard
Low Battery/Battery Problem Protection and Battery Condition Indication	Standard
Automatic Voltage Regulation with Over and Under Voltage Protection	Standard
Under-Frequency/Overload/Stepper Overcurrent Protection	Standard
Safe/Fused/Fuse Problem Protection	Standard
Automatic Low Oil Pressure/High Oil Temperature Shutdown	Standard
Overcrank/Over-speed (@ 72 Hz) rpm Sense Loss Shutdown	Standard
High Engine Temperature Shutdown	Standard
Internal Fault/Incorrect Wiring Protection	Standard
Common External Fault Capability	Standard
Field Upgradable Firmware	Standard

** Sound levels are taken from the front of the generator. Sound levels taken from other sides of the generator may be higher depending on installation parameters. Rating definitions - Standby: Applicable for supplying emergency power for the duration of the utility power outage. No overload capability is available for this rating. (All ratings in accordance with BS5514, ISO9046 and DIN6271). * Maximum kilovolt amps and current are subject to and limited by such factors as fuel (butane/propane content, ambient temperature, altitude, engine power and condition, etc. Maximum power decreases about 3.5 percent for each 1,000 feet (304.8 meters) above sea level; and also will decrease about 1 percent for each 8 °C (10 °F) above 16 °C (60 °F).

16/20/22 kW

Limited Circuits Switch Features

- 16 space, 24 circuit, breakers not included.
- Electrically operated, mechanically-held contacts for fast, positive connections
- Rated for all classes of load, 100% equipment rated, both inductive and resistive.
- 2-pole, 250 VAC contactors.
- 30 millisecond transfer time.
- Dual coil design.
- Rated for both copper and aluminum conductors.
- Main contacts are silver plated or silver alloy to resist welding and sticking.
- NEMA/UL 3R aluminum outdoor enclosure allows for indoor or outdoor mounting flexibility.
- Multi listed for use with 1" standard, tandem, GFCI and AFCI breakers from Siemens, Murray, Eaton and Square D for the most flexible and cost effective install.

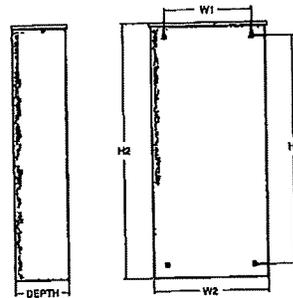
Dimensions

	Height		Width		Depth
	H1	H2	W1	W2	
in	26.75	30.1	10.5	13.5	6.91
mm	679.4	764.3	266.7	343.0	175.4

Wire Ranges		
Conductor Lug	Neutral Lug	Ground Lug
1/0 - #14	2/0 - #14	2/0 - #14

Model	G007036-1 (16kW)
Number of Poles	2
Current Rating (Amps)	100
Voltage (VAC)	120/240/1Ø
Utility Voltage Monitor (Fixed)*	80%
-Pick-up	65%
-Dropout	
Exercises bi-weekly for 5 minutes*	Standard
Transfer Time	Standard
Total Circuits Available	24
Transfer Breaker Capabilities	8 tandems
Circuit Breaker Protected Available RMS Symmetrical Fault Current @ 250 Volts	10,000

*Function of Evolution Controller
Exercise can be set to weekly or monthly



Service Rated Smart Switch Features

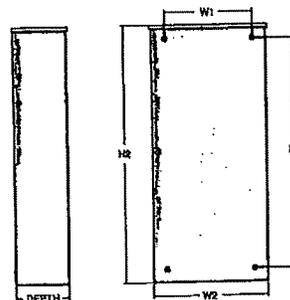
- Includes Digital Power Management Technology standard (DPM).
- Intelligently manages up to four air conditioner loads with no additional hardware.
- Up to four more large (240 VAC) loads can be managed when used in conjunction with Smart Management Modules (SMMs).
- Electrically operated, mechanically-held contacts for fast, clean connections.
- Rated for all classes of load, 100% equipment rated, both inductive and resistive.
- 2-pole, 250 VAC contactors.
- Service equipment rated, dual coil design.
- Rated for both aluminum and copper conductors.
- Main contacts are silver plated or silver alloy to resist welding and sticking.
- NEMA/UL 3R aluminum outdoor enclosure allows for indoor or outdoor mounting flexibility.

Dimensions

	200 Amps 120/240, 1Ø Open Transition Service Rated				Depth
	Height		Width		
	H1	H2	W1	W2	
in	26.75	30.1	10.5	13.5	6.91
mm	679.4	764.3	266.7	343.0	175.4

Model	G007037-1 (16 kW)/G007039-1 (20 kW)/ G007043-2 (22 kW)
Number of Poles	2
Current Rating (Amps)	200
Voltage (VAC)	120/240/1Ø
Utility Voltage Monitor (Fixed)*	80%
-Pick-up	65%
-Dropout	
Exercises bi-weekly for 5 minutes*	approx. 13 sec
Transfer Time	Standard
Enclosure Type	NEMA/UL 3R
Weight	22,000
Lug Range	250 MCM - #6

*Function of Evolution Controller
Exercise can be set to weekly or monthly

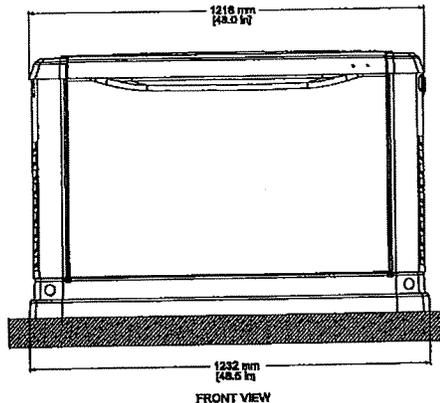
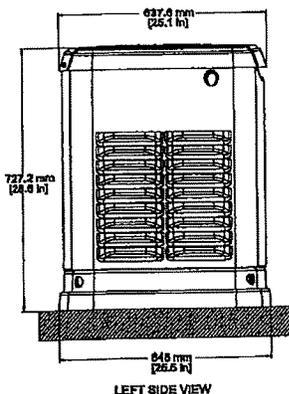


16/20/22 kW

Model #	Product	Description
G007005-0	Wi-Fi LP Fuel Level Monitor	The Wi-Fi enabled LP fuel level monitor provides constant monitoring of the connected LP fuel tank. Monitoring the LP tank's fuel level is an important step in making sure your generator is ready to run during an unexpected power failure. Status alerts are available through a free application to notify when your LP tank is in need of a refill.
G005819-0	26R Wet Cell Battery	Every standby generator requires a battery to start the system. Generac offers the recommended 26R wet cell battery for use with all air-cooled standby product (excluding PowerPact®).
G007101-0	Battery Pad Warmer	The pad warmer rests under the battery. Recommended for use if the temperature regularly falls below 0 °F (-18 °C). (Not necessary for use with AGM-style batteries).
G007102-0	Oil Warmer	Oil warmer slips directly over the oil filter. Recommended for use if the temperature regularly falls below 0 °F (-18 °C).
G007103-1	Breather Warmer	The breather warmer is for use in extreme cold weather applications. For use with Evolution controllers only in climates where heavy icing occurs.
G005621-0	Auxiliary Transfer Switch Contact Kit	The auxiliary transfer switch contact kit allows the transfer switch to lock out a single large electrical load you may not need. Not compatible with 50 amp pre-wired switches.
G007027-0 - Blisque	Fascia Base Wrap Kit (Standard on 22 kW)	The fascia base wrap snaps together around the bottom of the new air cooled generators. This offers a sleek, contoured appearance as well as offering protection from rodents and insects by covering the lifting holes located in the base.
G005703-0 - Blisque	Paint Kit	If the generator enclosure is scratched or damaged, it is important to touch up the paint to protect from future corrosion. The paint kit includes the necessary paint to properly maintain or touch up a generator enclosure.
G006485-0	Scheduled Maintenance Kit	Generac's scheduled maintenance kits provide all the hardware necessary to perform complete routine maintenance on a Generac automatic standby generator.
G006873-0	Smart Management Module (50 Amps)	Smart Management Modules are used in conjunction with the Automatic Transfer Switch to increase its power management capabilities. It provides additional power management flexibility not found in any other power management system.

dimensions & UPCs

Dimensions shown are approximate. Refer to installation manual for exact dimensions. DO NOT USE THESE DIMENSIONS FOR INSTALLATION PURPOSES.



Model	UPC
G007035-1	696471074161
G007036-1	696471074154
G007037-1	696471074178
G007038-1	696471074185
G007039-1	696471074192
G007042-2	696471074208
G007043-2	696471074215

search

administrator

AMI Demand Response Tools Admin

Home / AMI / Meters / 5826650000

5826650000 / 6649 QR-AR

Actions

Meter Information

Device Name: 5826650000
 Meter Number: 58036820
 Type: MCT-410cl
 Physical Address: 586784
 Route: CCU LESSIA
 Status: Enabled

Ping

Meter Readings

Usage Reading: 13,445.600 KWH 10/24/2018 04:33:00
 Previous Usage Reading: 13,445.800 KWH 10/24/2018 04:33:00
 Total Consumption: 0.000
 Peak Demand: 2.544 kW 10/21/2009 17:35:00
 Demand: 0.086 kW 09/26/2018 14:20:00
 Voltage: 249.900 Volts 09/26/2018 14:20:57

Show All Quick View

Read Now

GIS Information

Customer Information:

Name:
 Address:
 Phone Number:
 Email:

Service Location

Address:

View GIS Details

Device Groups

search

Groups

Active Meters

310_410

All

ALL COLLECTIONS

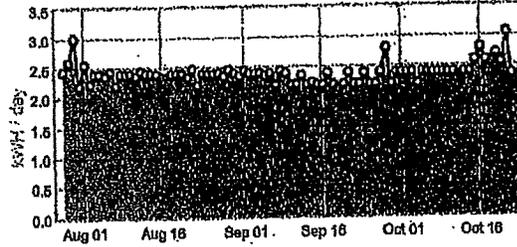
All Meters

310_410

Meters

Trend

Previous Three Month's Normalized Usage Reading



Graph Type: Load Profile | Voltage Profile | Demand | Usage (Normalized)

Time Period: 1D | 1W | 1M | 3M | 1Y | Custom

Chart Style: Line | Bar

Archived Usage Data HTML | CSV | PDF

Normalized Usage HTML | CSV | PDF

Date:

Outages

Blink Count: 288,000 Counts 10/24/2018 12:10:48

Outages Last Retrieved: 10/24/2018 12:10:48

Log	Time	Duration
1	08/01/2018 14:13:57	00:00:01.416
2	08/25/2018 16:35:13	00:00:01.350
3	08/16/2018 17:39:52	00:00:01.216
4	08/01/2018 22:50:31	00:00:02.000
5	08/01/2018 22:50:28	00:00:00.583
6	08/01/2018 20:35:49	00:00:01.950

Read Now

Time of Use

You Widget not configured.

search

administrator

AMI Demand Response Tools Admin

Home / AMI / Meters / 6754350000

6754350000 District 2 Main

Actions

Meter Information

Device Name: 6754350000
Meter Number: 115730388
Type: MCT-410L
Physical Address: 2899634
Route: CCU LESBIA
Status: Enabled

Ping

Meter Readings

Usage Reading: 69,013.4 KWH 10/30/2018 04:17:00
Previous Usage Reading: 69,013.4 KWH 10/30/2018 04:17:00
Total Consumption: 0.000
Peak Demand: 12.372 kW 08/14/2013 20:25:00
Demand: 0.389 kW 10/30/2018 09:15:00
Voltage: 250.800 Volts 10/30/2018 09:19:26

Show All Quick View

Read Now

CIS Information

Customer Information:

Name:
Address:
Phone Number:
Email:

Service Location

Address:

View CIS Details

Device Groups

search

Groups

Active Meters

310_410

All

ALL COLLECTIONS

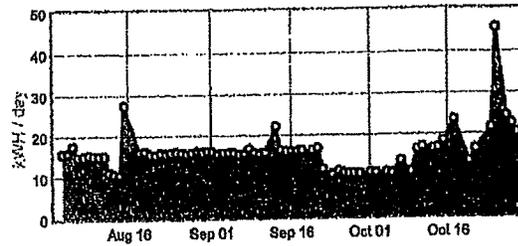
All Meters

310_410

Meters

Trend

Previous Three Month's Normalized Usage Reading



Graph Type: Load Profile | Voltage Profile | Demand | Usage (Normalized)

Time Period: 1D | 1W | 1M | 3M | 1Y | Custom

Chart Style: Line | Bar

Archived Usage Data HTML | CSV | PDF

Normalized Usage HTML | CSV | PDF

Data:

Outages

Blink Count: 94.000 Counts 10/30/2018 09:19:26

Outages Last Retrieved: 10/30/2018 09:19:26

Table with 3 columns: Log, Time, Duration. Contains 8 rows of outage data with timestamps and durations.

Read Now

Time of Use

You Widget not configured.

search administrator

AMI Demand Response Tools Admin

Home / AMI / Meters / 5753300000

5753300000 District 2 Sub

Actions

Meter Information

Device Name: 5753300000
 Meter Number: 83287292
 Type: MCT-410cL
 Physical Address: 3378486
 Route: CCU LESBIA
 Status: Enabled

Ping

Meter Readings

Usage Reading: 10,994.600 KWH 10/30/2018 04:14:00
 Previous Usage Reading: 10,894.600 KWH 10/30/2018 04:14:00
 Total Consumption: 0.000
 Peak Demand: 2.412 KW 01/15/2013 11:20:00
 Demand: 0.216 KW 10/17/2016 16:35:00
 Voltage: 248.500 Volts 10/17/2016 16:39:24

Show All Quick View

Read Now

CIS Information

Customer Information:

Name:
 Address:
 Phone Number:
 Email:

Service Location

Address:

View CIS Details

Device Groups

search

Groups

Active Meters

310_410

All

ALL COLLECTIONS

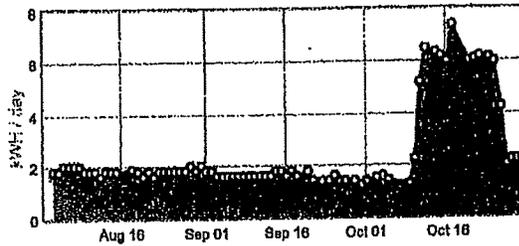
All Meters

310_410

Meters

Trend

Previous Three Month's Normalized Usage Reading



Graph Type: Load Profile | Voltage Profile | Demand | Usage (Normalized)
 Time Period: 1D | 1W | 1M | 3M | 1Y | Custom
 Chart Style: Line | Bar
 Archived Usage Data: HTML | CSV | PDF
 Normalized Usage: HTML | CSV | PDF
 Date:

Outages

Blink Count: 146,000 Counts 10/30/2018 09:21:11
 Outages Last Retrieved: 10/30/2018 09:21:11

Log	Time	Duration
1	08/01/2018 22:50:33	00:00:02.316
2	07/13/2018 18:13:15	00:00:01.416
3	04/12/2018 14:34:28	00:14:34.000
4	08/24/2017 22:57:33	00:00:02.000
5	08/16/2017 22:20:46	02:10:47.000
6	08/15/2017 02:45:45	00:04:59.000

Read Now

Time of Use

Tou Widget not configured.

search

administrator

AMI Demand Response Tools Admin

Home / AMI / Meters / 7716110000

7716110000 District 3 Sub 6702 QR-AD

Actions

Meter Information

Device Name: 7716110000
Meter Number: 82811008
Type: MCT-420cL
Physical Address: 2025108
Route: CCU LESBIA
Status: Enabled

Ping

Meter Readings

Usage Reading: 1,331.0 KWH 10/21/2018 04:27:00
Previous Usage Reading: 1,331.0 KWH 10/21/2018 04:27:00
Total Consumption: 0.000
Peak Demand: 0.000 kW 07/12/2018 11:45:03
Demand: 0.756 kW 10/30/2018 09:25:00
Voltage: 249.000 Volts 10/30/2018 09:28:26

Show All Quick View

Read Now

CIS Information

Customer Information:

Name:
Address:
Phone Number:
Email:

Service Location

Address:

View CIS Details

Device Groups

search

Groups

Active Meters

310_410

All

ALL COLLECTIONS

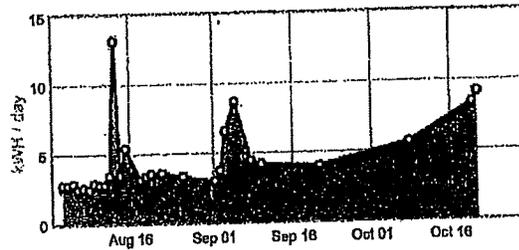
All Meters

310_410

Meters

Trend

Previous Three Month's Normalized Usage Reading



Graph Type: Load Profile | Voltage Profile | Demand | Usage (Normalized)
Time Period: 1D | 1W | 1M | 3M | 1Y | Custom
Chart Style: Line | Bar
Archived Usage Data: HTML | CSV | PDF
Normalized Usage Data: HTML | CSV | PDF

Outages

Blink Count: 3,000 Counts 10/30/2018 09:28:26
Outages Last Retrieved: 10/30/2018 09:28:26

Table with columns: Log, Time, Duration. Contains 3 rows of outage data.

Read Now

Time of Use

You Widget not configured.

Device Configuration

Current Configuration: (none)

Device Configurations: C2SX Net Meter Assign

5605550000

search

administrator

AMI Demand Response Tools Admin

Home / AMI / Meters / 5605550000

5605550000 NE Int QR-K + NM-66

Actions

Meter Information

Device Name: 5605550000
Meter Number: 120989303
Type: MCT-410L
Physical Address: 2830080
Route: CCU SAN JON
Status: Enabled

Ping

Meter Readings

Usage Reading: 18,599.000 kWh 10/24/2018 02:37:00
Previous Usage Reading: 18,599.000 kWh 10/24/2018 02:37:00
Total Consumption: 0.000
Peak Demand: 12.984 kW 09/02/2016 09:36:00
Demand: 0.331 kW 09/13/2018 10:30:00
Voltage: 247.200 Volts 09/13/2018 10:32:57

Show All Quick View

Read Now

CIS Information

Customer Information:

Name:
Address:
Phone Number:
Email:

Service Location

Address:

View CIS Details

Device Groups

search

Groups

Active Meters

310 410

All

ALL COLLECTIONS

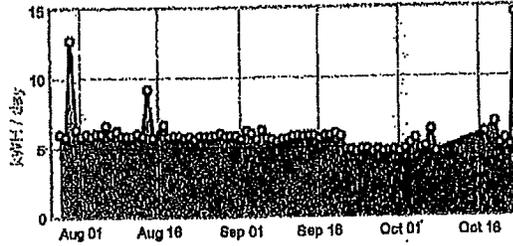
All Meters

310 410

Meters

Trend

Previous Three Month's Normalized Usage Reading



Graph Type: Load Profile | Voltage Profile | Demand | Usage (Normalized)

Time Period: 1D | 1W | 1M | 3M | 1Y | Custom

Chart Style: Line | Bar

Archived Usage Data HTML | CSV | PDF

Normalized Usage Data HTML | CSV | PDF

Outages

Blank Count: 91.000 Counts 10/24/2018 12:11:33

Outages Last Retrieved: 10/24/2018 12:11:48

Log	Time	Duration
1	10/09/2018 01:02:48	00:00:01.460
2	10/07/2018 02:30:15	00:00:01.760
3	10/05/2018 04:19:19	00:00:01.366
4	09/01/2018 10:12:34	00:00:01.433
5	08/26/2018 08:08:31	00:00:01.466
6	08/16/2018 23:35:20	00:00:01.400

Read Now

Time of Use

Time Widget not configured.

search

administrator

AMI Demand Response Tools Admin

Home / AMI / Meters / 5611000000

5611000000 Endeer Fire Station

Actions

Meter Information

Device Name: 5611000000
 Meter Number: 58036168
 Type: MCT-410oL
 Physical Address: 906808
 Route: CCU SAN JON
 Status: Enabled

Ping

Meter Readings

Usage Reading: 26,821.400 KWH 10/24/2018 02:08:00
 Previous Usage Reading: 26,821.400 KWH 10/24/2018 02:08:00
 Total Consumption: 0.000
 Peak Demand: 4.704 KW 02/07/2017 08:25:00
 Demand: 0.372 KW 09/19/2018 10:55:00
 Voltage: 247.000 Volts 09/19/2018 10:57:28

Show All Quick View

Read Now

CIS Information

Customer Information:

Name:
 Address:
 Phone Number:
 Email:

Service Location

Address:

View CIS Details

Device Groups

search

Groups

Active Meters

310_410

All

ALL COLLECTIONS

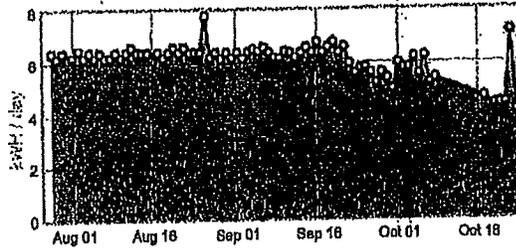
All Meters

310_410

Meters

Trend

Previous Three Months Normalized Usage Reading



Graph Type: Load Profile | Voltage Profile | Demand | Usage (Normalized)

Time Period: 1D | 1W | 1M | 3M | 1Y | Custom

Chart Style: Line | Bar

Archived Usage Data HTML | CSV | PDF

Normalized Usage HTML | CSV | PDF

Date:

Outages

Blink Count: 210.000 Counts 10/24/2018 12:16:33

Outages Last Retrieved: 10/24/2018 12:16:47

Log	Time	Duration
1	10/08/2018 01:03:05	00:00:01.500
2	10/07/2018 02:30:29	00:00:01.800
3	10/05/2018 04:19:43	00:00:01.388
4	09/01/2018 10:12:46	00:00:01.450
5	08/25/2018 08:08:47	00:00:01.483
6	08/16/2018 23:36:16	00:00:01.400

Read Now

Time of Use

You Widget not configured.

search

administrator

AMI Demand Response Tools Admin

Home / AMI / Meters / 5626800000

5626800000 *Barb Endee North Station*

Actions

Meter Information

Device Name: 5626800000
Meter Number: 93287594
Type: MGT-410dL
Physical Address: 3408859
Route: RPT_SJ14
Status: Enabled

Ping

Meter Readings

Usage Reading: 19,488.000 kWh 10/30/2018 02:24:00
Previous Usage Reading: 19,488.000 kWh;10/30/2018 02:24:00
Total Consumption: 0.000
Peak Demand: 8.124 kW 03/28/2014 18:25:00
Demand: 0.276 kW 10/17/2016 16:16:00
Voltage: 241.800 Volts 10/17/2016 16:17:54

Show All Quick View

Read Now

CIS Information

Customer Information:

Name:
Address:
Phone Number:
Email:

Service Location

Address:

View CIS Details

Device Groups

search

Groups

Active Meters

310 410

All

ALL COLLECTIONS

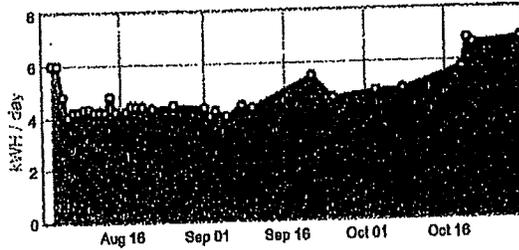
All Meters

310 410

Meters

Trend

Previous Three Month's Normalized Usage Reading



Graph Type: Load Profile | Voltage Profile | Demand | Usage (Normalized)
Time Period: 1D | 1W | 1M | 3M | 1Y | Custom
Chart Style: Line | Bar
Archived Usage Data: HTML | CSV | PDF
Normalized Usage Data: HTML | CSV | PDF

Outages

Blink Count: 76.000 Counts 10/30/2018 09:31:11
Outages Last Retrieved: 10/30/2018 09:31:11

Log	Time	Duration
1	07/27/2018 08:14:51	00:00:02.000
2	04/12/2018 14:34:21	00:14:34.000
3	08/20/2017 18:28:27	00:00:02.000
4	08/16/2017 02:45:37	00:04:59.000
5	08/16/2017 00:59:42	01:45:54.000
6	08/16/2017 00:59:11	00:00:30.000

Read Now

Time of Use

Rate A

Usage Rate A: 0.000 kWh 04/26/2013 10:52:51 I
Peak Demand Rate A: 0.000 kW 04/26/2013 10:52:51 I

View Historical Readings

Read Now

search

administrator

AMI Demand Response Tools Admin

Home / AMI / Meters / 4322500000

4322500000 *Foyrest*

Actions

Meter Information

Device Name: 4322500000
 Meter Number: 82811089
 Type: MCT-420cL
 Physical Address: 2028971
 Route: CCU WEBER CITY
 Status: Enabled

[Ping](#)

Meter Readings

Usage Reading: 5,551.0 KWH 10/30/2018 07:51:00
 Previous Usage Reading: 5,551.0 KWH 10/30/2018 07:51:00
 Total Consumption: 0.000
 Peak Demand: 0.000 KW 10/30/2018 09:59:27 |
 Demand: 0.000 KW 10/30/2018 09:59:27 |
 Voltage: 0.000 Volts 10/30/2018 09:59:27 |

Show All [Quick View](#) [Read Now](#)

CIS Information

Customer Information:

Name:
 Address:
 Phone Number:
 Email:

Service Location

Address:

[View CIS Details](#)

Device Groups

search

Groups

- Active Meters
 - 310_410
 - All
 - ALL COLLECTIONS
- All Meters
 - 310_410
- Meters

Trend

Previous Three Month's Normalized Usage Reading

Graph Type: Load Profile | Voltage Profile | Demand | Usage (Normalized)
 Time Period: 1D | 1W | 1M | 3M | 1Y | Custom
 Chart Style: Line | Bar
 Archived Usage Data: HTML | CSV | PDF
 Normalized Usage Data: HTML | CSV | PDF

Outages

Blink Count: 29,000 Counts 10/30/2018 09:59:58
 Outages Last Retrieved: 10/30/2018 09:59:58

Log	Time	Duration
1	10/08/2018 00:20:12	00:00:01.883
2	08/18/2018 02:37:28	00:41:11.000
3	08/18/2018 01:50:18	00:00:01.788
4	08/18/2018 01:48:17	00:00:01.200
5	08/18/2018 01:08:26	00:00:00.616
6	08/18/2018 01:06:24	00:00:01.400

[Read Now](#)

Time of Use

You Widget not configured.

Device Configuration

Current Configuration: (none)
 Device Configurations: C2SX Net Meter [Assign](#)

Quay County Generator Project Budget

Item	Cost Classification	Unit Measure	Unit Quantity	Unit Cost	Amount
Generator	Construction	Each	16	\$4,000	\$64,000
Transfer Switch	Construction	Each	16	\$1,000	\$16,000
Delivery	Construction	Each	16	\$500	\$8,000
Intallation (Concrete)	Construction	Each	16	\$500	\$8,000
Insallation (Electric)	Construction	Each	16	\$500	\$8,000
Installation (Gas)	Construction	Each	16	\$500	\$8,000
	Total Sub-grant Amount				\$112,000

Benefit-Cost Analysis (BCA) Worksheet
Generator Adaptation

Proposed Project:

1. **Project Information:**

- a) Project description: We would like to equip
or rural fire stations with generators
to ensure response capabilities.
- b) Will the generator power structure(s) or equipment: structures
- c) How many structure(s) will be mitigated? 16
- d) What is the age of the structure(s) to be mitigated? 3-50 years
- e) Provide the installation location for each generator: See attached list
- f) Total Project Cost \$ 60,000
- g) Annual maintenance costs \$ 100
- h) Please describe any damages NOT mitigated by the proposed project (in what way could the structure(s) not be protected by this mitigation):
- _____
- _____
- _____

Damage Information: Provide the following information for all events (flood, severe storm, tornado, wildfire, etc.) that have impacted the structure(s). Include this information separately for each event, even when multiple events occurred within one year.

2. **Event:**

- a) What type of event has impacted the structure(s)? _____
- b) Date of Event _____ mm/dd/year
- c) Frequency of Event _____
(if known, e.g., 25yr, 3 inches of rain in two hours) Please describe how frequency was determined.
- _____
- _____

3. **Public Buildings:**

Were public buildings closed as a result of this event? If yes, how long were they closed (in days)? (Please provide additional information for each event and each structure on a separate sheet. Label with this number & title)

What is the annual budget associated with the public building(s)?

Document any damages and repair costs.

4. **School Closures:** Were schools closed as a result of this event? If yes, specify the school name, address, and annual budget. (Please provide additional information for each event and each structure on a separate sheet. Label with this number & title.)

What is the annual budget associated with the school?

Document any damages and repair costs.

5. **Municipal Services:** Provide the costs or person-hours for municipal services required as a direct result of this event. Do not include debris removal.

- a) Police \$ _____
- b) Fire: \$ _____
- c) Public Works: \$ _____
- d) Volunteer Fire \$ _____
- e) Other: \$ _____

6. **Debris Clean-up & Removal:** List any costs and/or person-hours associated with event clean-up without double counting what has been listed above:

- a) Public Works: \$ _____
- b) Volunteers: \$ _____
- c) Private Property Owners: \$ _____

Loss of Use Information:

7. **Roadways and Bridges:** Were there any road and/or bridge closures as a result of this event? If yes, and a detour was established, please provide the following information.

If you have more than one road or bridge affected or damaged, please provide additional information on a separate sheet. Label with this number & title.

- a) What is the name of the road or bridge? _____
- b) What was the cost for set-up and take-down of a detour? \$ _____
- c) What was the duration of closure? _____ Days _____ Hours
- d) What is the daily one-way traffic count? _____ (vehicles/day)
- e) What was the additional travel distance in miles? _____
- f) What was the additional travel time in minutes? _____
- g) If damages to the road/bridge occurred,
 - a. What were the emergency repair costs? \$ _____
 - b. What were the costs to restore to pre-disaster condition \$ _____

8. Electric Service: If electric service was disrupted:
- a) What was the duration of the outage in hours? _____
 - b) How many **people** (not customers) were without service? _____
 - c) If damages occurred,
 - a. What were the emergency repair costs? \$ _____
 - b. What were the costs to restore to pre-disaster condition \$ _____
9. Wastewater Treatment: If Services were disrupted and/or damaged:
- a) What was the duration without wastewater treatment, in hours? _____
 - b) How many **people** (not customers) were affected? _____
 - c) Was the loss of treatment _____ full or _____ partial?
 - a) If damages occurred,
 - a. What were the emergency repair costs? \$ _____
 - b. What were the costs to restore to pre-disaster condition \$ _____
 - b) If fines were imposed, what was the total? \$ _____
10. Water Service: If Services were disrupted and/or damaged:
- a) What was the duration without water, in hours? _____
 - b) How many **people** (not customers) were affected? _____
 - c) If damages occurred,
 - a. What were the emergency repair costs? \$ _____
 - b. What were the costs to restore to pre-disaster condition \$ _____
 - d) If fines were imposed, what was the total? \$ _____
11. Police Station: If Services were disrupted and/or damaged:
- a) What was the duration without services? _____ Days _____ Hours
 - b) How many people are served by this station? _____
 - c) How many police officers work at this police station? _____
 - d) How many police officers would serve the same area if the station were shut down due to a disaster? _____
 - e) Indicate the type of area served by this police station
 Metropolitan City Rural
 - e) If damages occurred,
 - a. What were the emergency repair costs? \$ _____
 - b. What were the costs to restore to pre-disaster condition \$ _____
12. Fire Station: If Services were disrupted and/or damaged:
- a) What was the duration without services? _____ Days _____ Hours
 - b) How many people are served by this station? *See attached document*
 - c) What is the distance between this fire department and the fire department that could respond to the same geographical area? _____ Miles
 - d) Does the fire station provide emergency medical services? Yes No
 - a. If yes, what is the distance between this fire department and the fire

department that could provide EMS services to the same geographical area? _____ Miles

e) Indicate the type of area served by this police station
 Urban Suburban Rural Wilderness

f) If damages occurred,
a. What were the emergency repair costs? \$ _____
b. What were the costs to restore to pre-disaster condition \$ _____

13. Hospitals: If Services were disrupted and/or damaged:

a) What was the duration without services? _____ Days _____ Hours
b) How many people are served by this Hospital? _____
c) What is the distance between this hospital and the hospital that would treat people in the event this hospital was inoperative? _____ Miles
d) How many people are served by that alternative hospital? _____
g) If damages occurred,
a. What were the emergency repair costs? \$ _____
b. What were the costs to restore to pre-disaster condition \$ _____

14. Other Facility Types: If Services were disrupted and/or damaged:

a) What other facility was damaged

b) What was the duration without services? _____ Days _____ Hours
c) What is the total annual budget(s) for the department(s) associated with the particular facility? _____
h) If damages occurred,
a. What were the emergency repair costs? \$ _____
b. What were the costs to restore to pre-disaster condition \$ _____

IF MITIGATING A FLOOD EVENT

Flood Insurance Rate Map (FIRM) – Flood Insurance Study (FIS):

15. Flood Insurance Rate Map (FIRM):

- a) FIRM Panel Number: _____ Effective date: _____
- b) Flood Insurance Study (FIS) effective date: _____
- c) Community ID Number: _____
- d) Is the structure located in the 100-year floodplain? Yes No

16. Flood Insurance Study (FIS):

a. Complete the following for Riverine Flooding:

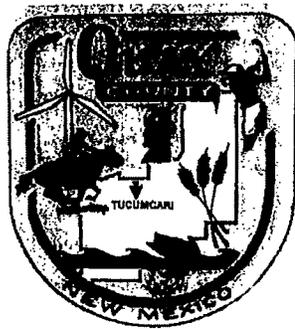
- i. Streambed elevation: _____ (ft)
- ii. Flood Profile Number: _____

Riverine Flood Table		
Flood Frequency	Discharge (cfs)	Water Elevation NGVD (ft)
10-year event		
50-year event		
100-year event		
500-year event		

b. Complete the following for Coastal Data:

Transect Description Elevation		
Transect	1% Annual Chance Stillwater	Maximum 1% Annual Chance Wave Crest

Transect Data: Still Water Elevations						
Transect	10 Percent (10 yr)	2 Percent (50 yr)	1 Percent (100 yr)	0.2 Percent (500 yr)	Zone	Base Flood Elevation



QUAY COUNTY GOVERNMENT

300 South Third Street
P.O. Box 1246
Tucumcari, NM 88401
Phone: (575) 461-2112
Fax: (575) 461-6208

Quay County Fire Districts

District 1

Age of structure: 24 (1994)
Main Station: 1218 Camino del Coronado Tucumcari, NM 88401
Age of structure: 38 (1980)
Substation: 6649 Quay Road AR Tucumcari, NM 88401
Distance between alternate fire department: 1.7 Miles
Medical Services: Yes
Distance between alternate fire department that could provide EMS: 1.7 Miles
Type of area served: Rural

District 2

Age of structure: 24 (1994)
Main Station: 3303 State Highway 278 Tucumcari, NM 88401
Age of structure: 43 (1975)
Substation: 3032 State Highway 278 Tucumcari, NM 88401
Distance between alternate fire department: 9.2 Miles
Medical Services: No
Type of area served: Rural

District 3

Age of structure: 13 (2005)
Main Station: 6702 Quay Road AD, Tucumcari, NM 88401
Age of structure: 33 (1985)
Substation: 3450 Quay Road 72 Tucumcari, NM 88401
Distance between alternate fire department: 15 Miles
Medical Services: No
Type of area served: Rural

Bard-Endee

Age of structure: 24 (1994)
Bard: 1097 Route 66 Bard, NM 88411
Age of structure: 14 (2004)
Endee: 325 State Highway 93 Endee, NM 88411
Age of structure: 5 (2013)
North Station: 794 State Highway 392 Bard, NM 88411
Distance between alternate fire department: 8 Miles
Medical Services: Yes
Distance between alternate fire department that could provide EMS: 8 Miles
Type of area served: Rural

Porter

Age of structure: 16 (2002)
1751 Quay Road 65 Porter, NM 88434
Distance between alternate fire department: 14 Miles
Medical Services: No
Type of area served: Rural

Nara Visa

Age of structure: 42 (1976)
380 Bell Street Nara Visa, NM 88430
Distance between alternate fire department: 27 Miles
Medical Services: No
Type of area served: Rural

Quay

Age of structure: 24 (1994)
4209 Quay Road 46 Quay, NM 88401
Distance between alternate fire department: 19 Miles
Medical Services: Yes
Distance between alternate fire department that could provide EMS: 18 Miles
Type of area served: Rural

Jordan

Age of structure: 40 (1978)
Main Station: 3699 Quay Road BH Jordan, NM 88121
Age of structure: 22 (1996)
Ima Substation: 5613 State Highway 156 Ima, NM 88427
Age of structure: 20 (1998)
McAllister Substation: 3229 State Highway 252 McAllister, NM 88427
Distance between alternate fire department: 18 Miles
Medical Services: No
Type of area served: Rural

Forrest

Age of structure: 40 (1978)

209 State Highway 210 Forrest, NM 88427

Distance between alternate fire department: 18 Miles

Medical Services: Yes

Distance between alternate fire department that could provide EMS: 22 Miles

Type of area served: Rural



Quay County E911 Addressing

301 South Third Street
P.O. Box 1227
Tucumcari, NM 88401
Phone: (505) 461-1760
Fax: (505) 461-8465
armando.nava@quaycounty-nm.gov

Armando Nava – E911/Rural Addressing

6/26/2014

Population in Quay County Fire Districts

Fire District	Population
Bard/Endee	255
Forest	305
Jordan	424
Logan	228
NaraVisa	347
Porter	140
Quay	167
SanJon	176
R3	261
R2	783
R1	1592

(Took # of Addresses within the Fire districts and multiplied by 2.2. Number of occupants based on 2010 Census Data)



FARMERS' ELECTRIC COOPERATIVE, INC. OF NEW MEXICO

July 14, 2009

New Mexico Public Regulation Commission
Attn. Operations Division
24 East Palace Avenue
Santa Fe, New Mexico 87501

RE: Report of Major Interruption of Service (Supplemental Update)

Dear Operations Division:

On Tuesday, July 14, 2009 at approximately 09:30 hours an outage occurred on Farmers' Electric Cooperative's (FEC) transmission system. The outage affected the Santa Rosa community and rural consumers served from substations within Santa Rosa. In addition, portions of the communities of Tucumcari, Logan, San Jon and Conchas Lake were affected.

The outage began with a transmission line owned and operated by our wholesale power supplier, Southwestern Public Service Company (SPS). This transmission line serves both SPS loads in the Tucumcari area, and is a wholesale delivery point for FEC, also in the Tucumcari area.

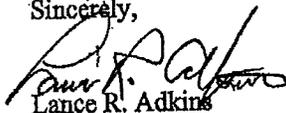
FEC has limited ability to switch transmission feeds on the FEC transmission system and restore limited service from alternate directions. Within one hour of onset of the transmission outage FEC had restored service to consumers in the communities of San, Logan, rural Tucumcari, and portions of Santa Rosa. Approximately 500 consumers, located in Santa Rosa and Conchas Lake area, were without power until 13:45 hours.

SPS was unable to determine the cause of the outage on the transmission line. SPS reports that, following two line patrols, they re-energized the line at 13:10 hours without incident. At that time FEC personnel began the process of transferring load back to the SPS transmission system. The FEC System returned to "normal operations" at 14:30 hours.

It is estimated that 5,242 cooperative members were affected by the outage, Load affected by the interruption was approximately 10,000 kW demand initially, with estimated lost sales of 12,392 kWh's.

If you have any questions, please contact me at (575) 762-4466.

Sincerely,


Lance R. Adkins
General Manager



FARMERS' ELECTRIC COOPERATIVE, INC. OF NEW MEXICO

August 14, 2013

New Mexico Public Regulation Commission
Attn. Operations Division
1120 Paseo de Peralta
Santa Fe, New Mexico 87504

RE: UTILITY DIVISION: Report of Major Interruption of Service

On Tuesday, August 13, 2013 at approximately 17:55 hours, Farmers' Electric Cooperative's (FEC) Tucumcari Transmission Interchange lost power. At the onset of the outage, the Tucumcari Interchange was providing transmission power to five Distribution Substations located in the communities of Santa Rosa, Newkirk, Lesbia/Logan and San Jon New Mexico.

The outage was caused by severe thunderstorm conditions that destroyed a barn, causing debris to impact both distribution and transmission lines in the Lesbia area.

FEC was able to restore power to the community of Santa Rosa at 18:46 hours (51 minute outage) and restore power to the communities of Lesbia/Logan and San Jon at 19:56 hours (120 minute outage).

Approximately 200 consumers continued without power until distribution lines were repaired and service restored by 03:00 hours on August 14.

There were approximately 5,369 metered accounts affected at the onset of the outage with an estimated 10.9 MW of load on the distribution substations at the time the outage began. If you have any questions, please contact me at 800.445.8541 or 575.762.4466.

Sincerely,

A handwritten signature in black ink, appearing to read "Lance R. Adkins". The signature is written in a cursive, flowing style.

Lance R. Adkins
General Manager

TROUBLE CALL

JOB NO. 12277

Received By BU
Person reporting MULTIPLE Amistad SUB Date 18 Aug 2018 Time 10 pm - 6 am
Location of Outage Amistad SUB
What time did the lights go out? Date 17/18 Aug 2018 Time 10 pm 17 Aug
Did you check the house breakers? N/A Pole breakers N/A
Do you know of anything you think could cause the outages? 69 KV reclosure
opened, wouldn't close

LINE REPORT

Notified 17 Aug 2018 at 10 a.m. (p.m.) Hours 6 Minutes 30
Restored 18 Aug 2018 at 4:30 (a.m.) p.m.
Weather T-Storms
Cause of trouble-work done Lightning

Charges, if any _____

Shawn / Adam / Willi
Work performed by



QUAY COUNTY GOVERNMENT

300 South Third Street
P.O. Box 1246
Tucumcari, NM 88401
Phone: (575) 461-2112
Fax: (575) 461-6208

November 20, 2018

Wendy Blackwell, State Mitigation Officer
NMDHSEM
P.O. Box 27111
Santa Fe, NM 87502

SUBJECT: Hazard Mitigation Project Sib-grant Application
Non-Federal Funds Commitment Letter for Quay County

Ms. Blackwell,

This letter is to serve as the Non-Federal Funds Commitment Letter as required for the Unified Hazard Mitigation Assistance Programs. Quay County has submitted an application for the Quay County Generators project which will equip all of the fire districts in Quay County with generators to ensure response capabilities.

Quay County has budgeted a total of \$28,000, which is 25% of the total project cost. The non-federal match will be in the form of cash.

Daniel Zamora will be the primary contact for the project. He can be reached by email at daniel.zamora@quaycounty-nm.gov or by phone at (575)461-8535.

Sincerely,

Richard Primrose
Quay County Manager

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

1.a. Type of Submission: <input checked="" type="checkbox"/> Application <input type="checkbox"/> Plan <input type="checkbox"/> Funding Request <input type="checkbox"/> Other Other (specify): <input type="text"/>	1.b. Frequency: <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Quarterly <input type="checkbox"/> Other Other (specify): <input type="text"/>	1.d. Version: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Resubmission <input type="checkbox"/> Revision <input type="checkbox"/> Update 2. Date Received: 11/14/2018 3. Applicant Identifier: <input type="text"/> 4a. Federal Entity Identifier: <input type="text"/> 4b. Federal Award Identifier: <input type="text"/>	STATE USE ONLY: 5. Date Received by State: <input type="text"/> 6. State Application Identifier: <input type="text"/>
1.c. Consolidated Application/Plan/Funding Request? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Explanation <input type="text"/>			

7. APPLICANT INFORMATION:

a. Legal Name: Quay County		
b. Employer/Taxpayer Identification Number (EIN/TIN): 85-6000238	c. Organizational DUNS: 0513361050000	
d. Address:		
Street1: 300 S 3rd St	Street2: <input type="text"/>	
City: Tucumcari	County / Parish: <input type="text"/>	
State: NM: New Mexico	Province: <input type="text"/>	
Country: USA: UNITED STATES	Zip / Postal Code: 88401	
e. Organizational Unit:		
Department Name: <input type="text"/>	Division Name: <input type="text"/>	
f. Name and contact information of person to be contacted on matters involving this submission:		
Prefix: <input type="text"/>	First Name: Daniel	Middle Name: <input type="text"/>
Last Name: Zamora	Suffix: <input type="text"/>	
Title: <input type="text"/>		
Organizational Affiliation: <input type="text"/>		
Telephone Number: 5754034788	Fax Number: <input type="text"/>	
Email: daniel.zamora@quaycounty-nm.gov		

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

8a. TYPE OF APPLICANT:

Other (specify):

b. Additional Description:

9. Name of Federal Agency:

10. Catalog of Federal Domestic Assistance Number:

CFDA Title:

11. Descriptive Title of Applicant's Project:

12. Areas Affected by Funding:

13. CONGRESSIONAL DISTRICTS OF:

a. Applicant: b. Program/Project:

Attach an additional list of Program/Project Congressional Districts if needed.

14. FUNDING PERIOD:

a. Start Date: b. End Date:

15. ESTIMATED FUNDING:

a. Federal (\$): b. Match (\$):

16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?

- a. This submission was made available to the State under the Executive Order 12372 Process for review on:
- b. Program is subject to E.O. 12372 but has not been selected by State for review.
- c. Program is not covered by E.O. 12372.

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

17. Is The Applicant Delinquent On Any Federal Debt?

Yes No

EXEMPT

18. By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

** I Agree

** This list of certifications and assurances, or an Internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix:

First Name:

Franklin

Middle Name:

Last Name:

McCasland

Suffix:

Title:

Quay County Commission Chair

Organizational Affiliation:

Telephone Number:

5754612112

Fax Number:

Email:

emccasland79@yahoo.com

Signature of Authorized Representative:

Franklin M. Casland

Date Signed:

1/26/2018

Attach supporting documents as specified in agency instructions.

Attachments

New Attachments

View Attachments

NOTICE

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

Consolidated Application/Plan/Funding Request Explanation:

[Empty box for Consolidated Application/Plan/Funding Request Explanation]

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

Applicant Federal Debt Delinquency Explanation:

[Empty text box for explanation]

BUDGET INFORMATION - Construction Programs

NOTE: Certain Federal assistance programs require additional computations to arrive at the Federal share of project costs eligible for participation. If such is the case, you will be notified.

COST CLASSIFICATION	a. Total Cost	b. Costs Not Allowable for Participation	c. Total Allowable Costs (Columns a-b)
1. Administrative and legal expenses	\$	\$	\$
2. Land, structures, rights-of-way, appraisals, etc.	\$	\$	\$
3. Relocation expenses and payments	\$	\$	\$
4. Architectural and engineering fees	\$	\$	\$
5. Other architectural and engineering fees	\$	\$	\$
6. Project inspection fees	\$	\$	\$
7. Site work	\$	\$	\$
8. Demolition and removal	\$	\$	\$
9. Construction	\$ 112,000.00	\$	\$ 112,000.00
10. Equipment	\$	\$	\$
11. Miscellaneous	\$	\$	\$
12. SUBTOTAL (sum of lines 1-11)	\$ 112,000.00	\$	\$ 112,000.00
13. Contingencies	\$	\$	\$
14. SUBTOTAL	\$ 112,000.00	\$	\$ 112,000.00
15. Project (program) income	\$	\$	\$
16. TOTAL PROJECT COSTS (subtract #15 from #14)	\$ 112,000.00	\$	\$ 112,000.00

FEDERAL FUNDING

17. Federal assistance requested, calculate as follows:
 (Consult Federal agency for Federal percentage share.)
 Enter the resulting Federal share.

Enter eligible costs from line 16c Multiply X %

\$

ASSURANCES - CONSTRUCTION PROGRAMS

OMB Number: 4040-0009
Expiration Date: 01/31/2019

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0042), Washington, DC 20503.

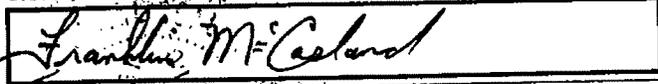
PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the Awarding Agency. Further, certain Federal assistance awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, the right to examine all records, books, papers, or documents related to the assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will not dispose of, modify the use of, or change the terms of the real property title or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure non-discrimination during the useful life of the project.
4. Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.
5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progressive reports and such other information as may be required by the assistance awarding agency or State.
6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
7. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
8. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards of merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
9. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
10. Will comply with all Federal statutes relating to non-discrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681 1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

11. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal and federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
12. Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
13. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333) regarding labor standards for federally-assisted construction subagreements.
14. Will comply with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
16. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
17. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (Identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq.).
18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
19. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
20. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL 	TITLE Quay County Commission Chair
APPLICANT ORGANIZATION Quay County	DATE SUBMITTED 11/26/2018



U.S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
SUMMARY SHEET FOR ASSURANCES AND CERTIFICATIONS

O.M.B. No. 1660-0025
Expires July 31, 2007

FOR _____ CA FOR (Name of Recipient)
FY _____

This summary sheet includes Assurances and Certifications that must be read, signed, and submitted as a part of the Application for Federal Assistance.

An applicant must check each item that they are certifying to:

- Part I** FEMA Form 20-16A, Assurances-Nonconstruction Programs
- Part II** FEMA Form 20-16B, Assurances-Construction Programs
- Part III** FEMA Form 20-16C, Certification Regarding Lobbying; Debarment, Suspension, and Other Responsibility Matters; and Drug-Free Workplace Requirements
- Part IV** SF LLL, Disclosure of Lobbying Activities (If applicable)

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the identified attached assurances and certifications.

Franklin McCasland

Quay County Commission Chair

Typed Name of Authorized Representative

Title



11/26/2018

Date Signed

NOTE: By signing the certification regarding debarment, suspension, and other responsibility matters for primary covered transaction, the applicant agrees that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by FEMA entering into this transaction.

The applicant further agrees by submitting this application that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the FEMA Regional Office entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions. (Refer to 44 CFR Part 17.)

Paperwork Burden Disclosure Notice

Public reporting burden for this form is estimated to average 1.7 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing, reviewing, and maintaining the data needed, and completing and submitting the form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, U.S. Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington DC 20472. You are not required to complete this form unless a valid OMB control number is displayed in the upper corner on this form. **Please do not send your completed form to the above address.**

U. S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
**CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND
OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS**

O.M.B. No. 1660-0025
Expires July 31, 2007

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 1.7 hours per response. The burden estimate includes the time for reviewing instructions and searching existing data sources, gathering and maintaining the data needed and completing, and submitting the form. You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, U.S. Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (1660-0001). **NOTE: Do not send your completed form to this address.**

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 44 CFR Part 18, "New Restrictions on Lobbying" and 28 CFR Part 17, "Government-wide Debarment and Suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Federal Emergency Management Agency (FEMA) determines to award the transaction, grant, or cooperative agreement.

1. LOBBYING

As required by section 1352, Title 31 of the U.S. Code, and implemented at 44 CFR Part 18, for persons entering into a grant or cooperating agreement over \$ 100,000, as defined at 44 CFR Part 18, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement.

(b) If any other funds than Federal appropriated funds have been paid or will be paid to any other person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or an employee of Congress, or employee of a member of Congress in connection with this Federal Grant or cooperative agreement, the undersigned shall complete and submit Stand Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all subrecipients shall certify and disclose accordingly.

Standard Form-LLL "Disclosure of Lobbying Activities" attached
(This form must be attached to certification if nonappropriated funds are to be used to influence activities.)

2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 44 CFR Part 67, for prospective participants in primary covered transactions, as defined at 44 CFR Part 17, Section 17.610-A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three-year period preceding this application been convicted of a or had a civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or perform a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1) (b) of this certification; and

(d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause of default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. DRUG-FREE WORKPLACE (GRANTEE OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 44 CFR Part 17, Subpart F, for grantees, as defined at 44 CFR Part 17.615 and 17.620-

A. The applicant certifies that it will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distributions

(b) Establishing an on-going drug free awareness program to inform employees about-

- (1) The dangers of drug abuse in the workplace;
- (2) The grantee's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant to be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will-

(1) Abide by the term of the statement; and

(2) Notify the employee in writing of his or her conviction for a violation of a criminal drug statute occurring on the workplace no later than five calendar days after such convictions;

(e) Notifying the agency, in writing, with 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position, title, to the applicable FEMA awarding office, i.e., regional office or FEMA office.

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is convicted-

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation act of 1973, as amended; or

(2) Requiring such an employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug free workplace through implementation of paragraphs (a),(b),(c),(d),(e) and (f).

B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, City, County, State, Zip code)

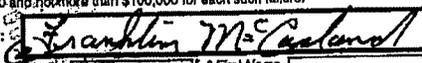
Check If there are workplaces on file that are not identified here.

Section 17.630 of the regulations provide that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for FEMA funding. States and State agencies may elect to use a state wide certification.

DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

Approved by OMB
4040-0013

1. * Type of Federal Action: <input type="checkbox"/> a. contract <input checked="" type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance	2. * Status of Federal Action: <input type="checkbox"/> a. bid/offer/application <input checked="" type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award	3. * Report Type: <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> SubAwardee * Name: <input type="text" value="Quay County"/> * Street 1: <input type="text" value="300 B 3rd St"/> Street 2: <input type="text"/> * City: <input type="text" value="Tucumancauri"/> State: <input type="text" value="NM: New Mexico"/> Zip: <input type="text" value="88401"/> Congressional District, if known: <input type="text" value="3"/>		
5. If Reporting Entity in No.4 is Subawardee, Enter Name and Address of Prime: <div style="border: 1px solid black; height: 40px;"></div>		
6. * Federal Department/Agency: <input type="text" value="Federal Emergency Management Agency"/>	7. * Federal Program Name/Description: <input type="text"/> CFDA Number, if applicable: <input type="text"/>	
8. Federal Action Number, if known: <input type="text"/>	9. Award Amount, if known: \$ <input type="text"/>	
10. a. Name and Address of Lobbying Registrant: Prefix <input type="text"/> * First Name <input type="text" value="Clinton"/> Middle Name <input type="text"/> * Last Name <input type="text" value="Harden"/> Suffix <input type="text"/> * Street 1: <input type="text" value="1348 CR H"/> Street 2: <input type="text"/> * City: <input type="text" value="Clovis"/> State: <input type="text" value="NM: New Mexico"/> Zip: <input type="text" value="88610"/>		
b. Individual Performing Services (including address if different from No. 10a) Prefix <input type="text"/> * First Name <input type="text" value="Clinton"/> Middle Name <input type="text"/> * Last Name <input type="text" value="Harden"/> Suffix <input type="text"/> * Street 1: <input type="text"/> Street 2: <input type="text"/> * City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/>		
<p style="font-size: small;">Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which all decisions placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.</p>		
* Signature:  * Name: Prefix <input type="text"/> * First Name <input type="text" value="Franklin"/> Middle Name <input type="text"/> * Last Name <input type="text" value="McIsland"/> Suffix <input type="text"/> Title: <input type="text" value="Quay County Commission Chair"/> Telephone No.: <input type="text" value="5754612112"/> Date: <input type="text" value="11/26/2018"/>		
Authorized for Local Reproduction Standard Form - 1111 (Rev. 7-97)		

**QUAY COUNTY
FISCAL YEAR 2018-2019
RESOLUTION No. 10**

Authorization of Budgetary Increase to **Forrest Fire Department (411)**

WHEREAS, at meeting of the Board of Quay County Commissioners on November 26, 2018 the following was among the proceedings;

WHEREAS, the Board of Quay County Commissioners deems it necessary to request this Budgetary Increase;

State Fund 20900 Budgetary Increase		<u>DEBIT</u>	<u>CREDIT</u>
20900-0001-46300 Loan Proceeds			\$149,995.00
20900-3002-58080 Vehicles		\$278,000.00	
	<u>Revenue Inc.</u>	<u>Inc. to Purchase Fire Truck</u>	
Forrest Fire	+\$149,995.00	\$278,000.00	

WHEREAS, the above activity was not contemplated at the time the final budget was adopted and approved **Loan Proceeds and Cash to purchase a new Fire Truck**

NOW THEREFORE, BE IT RESOLVED that after approval of the Local Government Division of the Department of Finance and Administration, the above Budgetary Adjustments be made.

DONE at Tucumcari, County of Quay, New Mexico this 26th day of November, 2018.



ATTEST:

Franklin McCasland, Commissioner

Sue Dowell, Commissioner

Mike Cherry, Commissioner

Ellen White, County Clerk

**QUAY COUNTY
FISCAL YEAR 2018-2019
RESOLUTION No. 11**

Authorization of Budgetary Increase to **DWI Fund (624)**

WHEREAS, at meeting of the Board of Quay County Commissioners on November 26, 2018 the following was among the proceedings;

WHEREAS, the Board of Quay County Commissioners deems it necessary to request this Budgetary Increase;

State Fund 22300 Budgetary Increase		<u>DEBIT</u>	<u>CREDIT</u>
22300-0001-47071 State – DWI Local Grant (DFA)			\$5,336.00
22300-3006-51020 Salaries Full Time Position	\$3,500.00		
22300-3006-52010 FICA – Regular	\$ 200.00		
22300-3006-52011 FICA – Medicare	\$ 50.00		
22300-3006-52020 Retirement	\$ 375.00		
22300-3006-52030 Health & Medical Premiums	\$1,211.00		
	<u>Revenue Inc.</u>	<u>Inc. to Salary & Benefits</u>	
	FY18 DWI Reversion \$5,336.00		\$5,336.00

WHEREAS, the above activity was not contemplated at the time the final budget was adopted and approved **FY18 reversion of cash to FY19 DWI Grant Funding**

NOW THEREFORE, BE IT RESOLVED that after approval of the Local Government Division of the Department of Finance and Administration, the above Budgetary Adjustments be made.

DONE at Tucumcari, County of Quay, New Mexico this 26th day of November, 2018.



Ellen White
Ellen White, County Clerk

Franklin McCasland
Franklin McCasland, Commissioner

Sue Dowell
Sue Dowell, Commissioner

Mike Cherry
Mike Cherry, Commissioner

**QUAY COUNTY
FISCAL YEAR 2018-2019
RESOLUTION No. 12**

Authorization of Budgetary Increase to CDBG Fund (655)

WHEREAS, at meeting of the Board of Quay County Commissioners on November 26, 2018 the following was among the proceedings;

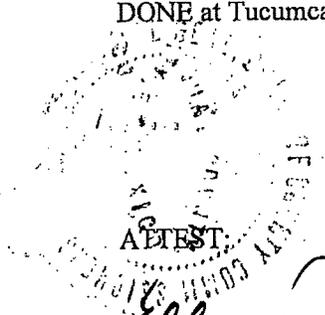
WHEREAS, the Board of Quay County Commissioners deems it necessary to request this Budgetary Increase;

State Fund 30200 Budgetary Increase		<u>DEBIT</u>	<u>CREDIT</u>
30200-0001-47300 State Appropriation			\$50,000.00
30200-0001-47520 Federal – CDBG (HUD)			\$750,000.00
30200-0001-47899 Local – Other			\$83,819.00
30200-2002-55030 Contract–Professional Serv	\$163,426.00		
30200-2002-58090 Roadways/Bridges	\$720,393.00		
39900-0001-61200 Transfers Out	\$83,819.00		
30200-0001-61100 Transfers In			\$83,819.00
	<u>Revenue Inc.</u>	<u>Inc. to Professional Services and Construction</u>	
QR AR Road Project	\$883,819.00		\$883,819.00

WHEREAS, the above activity was not contemplated at the time the final budget was adopted and approved **CDBG Funding granted and budgeted for Quay Road AR project along with Legislative Appropriation for engineering and County Match funds transfer.**

NOW THEREFORE, BE IT RESOLVED that after approval of the Local Government Division of the Department of Finance and Administration, the above Budgetary Adjustments be made.

DONE at Tucumcari, County of Quay, New Mexico this 26th day of November, 2018.



ATTEST:

Ellen White
Ellen White, County Clerk

Franklin McCasland
Franklin McCasland, Commissioner

Sue Dowell
Sue Dowell, Commissioner

Mike Cherry
Mike Cherry, Commissioner

**QUAY COUNTY
FISCAL YEAR 2018-2019
RESOLUTION No. 13**

Authorization of Budgetary Increase to **County Improvements (649)**

WHEREAS, at meeting of the Board of Quay County Commissioners on November 26, 2018 the following was among the proceedings;

WHEREAS, the Board of Quay County Commissioners deems it necessary to request this Budgetary Increase;

State Fund 30300 Budgetary Increase	<u>DEBIT</u>	<u>CREDIT</u>
30300-0001-47300 State Legislative Appropriations		\$222,750.00
30300-2002-58010 Buildings & Structures	\$222,750.00	
	<u>Revenue Inc.</u>	<u>Inc. for Building Improvements</u>
Detention Center Renovation	\$222,750.00	\$222,750.00

WHEREAS, the above activity was not contemplated at the time the final budget was adopted and approved **State Legislative appropriation awarded for Building Improvements to Quay County Detention Center.**

NOW THEREFORE, BE IT RESOLVED that after approval of the Local Government Division of the Department of Finance and Administration, the above Budgetary Adjustments be made.

DONE at Tucumcari, County of Quay, New Mexico this 26th day of November, 2018.



ATTEST

Ellen White
Ellen White, County Clerk

Franklin McCasland
Franklin McCasland, Commissioner

Sue Dowell
Sue Dowell, Commissioner

Mike Cherry
Mike Cherry, Commissioner



QUAY COUNTY GOVERNMENT

300 South Third Street

P.O. Box 1246

Tucumcari, NM 88401

Phone: (575) 461-2112

Fax: (575) 461-6208

PROFESSIONAL SERVICES CONTRACT

This contract is hereby made and entered into by and between QUAY COUNTY (hereinafter "QUAY COUNTY" or "COUNTY") and CLINTON D HARDEN & ASSOCIATES (hereinafter "CDH") on this 26th day of November 2018

WHEREAS QUAY COUNTY has found it necessary and desirable to retain an individual or firm to provide government relation services as further described below; and

WHEREAS QUAY COUNTY desires to hire CDH to provide said services; and

WHEREAS, CDH desires to provide such services under the terms and conditions of this professional services contract.

THEREFORE, IT IS HEREBY MUTUALLY AGREED UPON by and between the parties that:

1. Scope of Work: CLINTON D HARDEN & ASSOCIATES shall:

A. Represent Quay County's interests from January 15 2019 through April 15 2019, including during the Regular Session of the 2019 New Mexico State Legislature

B. Design and implement a campaign directed towards key state legislators, administration leadership and staff on the important issues facing Quay County including those issues adopted by the Association of Counties, when those issues are supported by the County

C. Design and implement an aggressive funding request campaign to acquire funding appropriations as approved by Quay County for substantial infrastructure improvements including transportation, DWI, detention center, fire, E-911 updates and economic development initiatives;

D. Represent QUAY COUNTY at public hearings, committee meetings and/or meetings with government officials; present and defend Quay County projects, scopes of work, and budgets; and assist in preparing handout materials, if appropriate, for review by interested parties;

E. Regularly consult with Quay County Manager concerning any action directed by Quay County Manager. Action shall be deemed authorized by the County pursuant to this contract. The County may change their designees by a majority vote of the commissioners.

2. Terms: This contract shall be effective from January 15, 2019 through April 15, 2019

3. Compensation: Quay shall pay CDH as follows for work performed under this contract

A. A total sum of Seven Five Hundred (\$7,500.00) plus New Mexico Gross receipt taxes. The fee shall be paid by the County.

B. The first installment shall be due on January 15, of 2019, subsequent installments due on the 15th of February 2019

C. CLINTON D HARDEN & ASSOCIATES will also be reimbursed for any necessary expenses which are approved in advance by the County.

D. In the event that the contract is terminated, the annual fee should be prorated to the date of termination.

E. CLINTON D HARDEN & ASSOCIATES will obtain a business license and work contracted herein will be deemed performed at Quay County, New Mexico with gross receipts taxes on the contract being paid at Tucumcari Quay County, New Mexico.

4. Termination:

A. Quay County may, with or without cause, terminate this contract. The County shall have the right to terminate this contract due to any action or publicity about CLINTON D HARDEN & ASSOCIATES, where County determines, in their sole discretion, that the actions or publicity discredits, embarrasses or puts the County in a bad light. Notice of termination shall be in writing and hand-delivered or mailed (certified mail, return receipt requested) to CDH. If notice is by mail, the notice period will begin to run three (3) calendar days from the date the notice is deposited with the United States Postal Service. If notice is hand-delivered, the notice period will begin to run as of the date of delivery to Clint Harden, agent of Clinton D Harden & Associates at their place of business, located at 1348 CR H, Clovis, New Mexico 88101

B. CLINTON D HARDEN & ASSOCIATES may terminate this contract if the County is in default in the performance of any material term, condition or covenant of this agreement and if County does not cure the default within twenty (20) business days after notice, or, if the default is of such nature that it cannot be cured completely within the twenty (20) business day period. If CLINTON D HARDEN & ASSOCIATES exercises its right of termination under this paragraph, this contract shall terminate sixty (60) days following the date written notice of termination is given, as completely as if it were the date definitely fixed for the expiration of this contract. Notice of termination shall be in writing and hand-delivered or mailed (certified mail, return receipt) to County Designee). If notice is by mail, the notice period will begin to run three (3) calendar days from the date the notice is deposited with the United States Postal Service. If notice is hand-delivered, the notice period will begin to run as of the date of delivery to the office of the County Designee.

C. In no event shall termination nullify obligations of either party prior to the effective date of the termination.

5. Status: CLINTON D HARDEN & ASSOCIATES is a New Mexico LLC, CDH acknowledges that it is an independent contractor and as such neither it, nor its employees, agents or representatives shall be considered employees or agents of COUNTY nor shall CDH be eligible to accrue sick leave, retirement benefits, or any other benefits provided County employees. CDH will provide legislative, administrative and executive advocacy on behalf of COUNTY.

6. Subcontracting: CDH shall not subcontract any portion of the services to be performed under this contract, without the prior written approval of COUNTY.

7. Assignment: CDH shall not assign or transfer any interest in the contract, or assign any claims for money due, or to become due, under this contract without the prior written approval of COUNTY.

8. Updates: CDH agrees that it will provide Bi-Weekly updates during the legislative and/or special session when applicable. CDH will provide written reports on interim activity quarterly.

9. Indemnification: CLINTON D HARDEN & ASSOCIATES agrees to indemnify and hold harmless COUNTY, its elected officials, agents and employees from any and all claims, suits and causes of action which may arise from negligent or reckless performance under this contract unless specifically exempted by New Mexico law. CDH further agrees to indemnify and hold COUNTY harmless from all claims for personal injury or death sustained by CDH, its employees, agents or other representatives while engaged in the performance of this contract.

10. Release: CDH agrees that upon contract termination date and County adherence to payment plan it releases COUNTY from all liabilities, claims and/or obligations whatsoever arising from, or under this contract.

11. Non-Agency: CLINTON D HARDEN & ASSOCIATES agrees not to purport to bind COUNTY to any obligation not assumed herein by COUNTY, unless CLINTON D HARDEN & ASSOCIATES has express written approval and then only within the limits of that expressed authority.

12. Conflict of Interest: CLINTON D HARDEN & ASSOCIATES warrants that it presently has no interest or conflict of interest and shall not acquire any interest or conflict of interest which would conflict with its performance of services under this contract.

13. Non-Discrimination: CLINTON D HARDEN & ASSOCIATES agrees that it, its employee(s) and or agent(s) shall comply with all federal, state and local laws regarding equal employment opportunities, fair labor standards, and other non-discrimination and equal opportunity compliance laws, regulations and practices.

14. Entire Contract: This contract represents the entire agreement of the parties and supersedes any and all prior oral or written agreements or understandings between the parties concerning the subject matter of this contract.

15. Amendment: This contract shall not be altered, changed, modified or amended, except by instrument, in writing, executed by both parties.

16. Applicable law: This contract shall be governed by the Laws of the State of New Mexico and the ordinances, resolutions, rules and regulations of COUNTY. Venue for any dispute arising from this contract shall be the District Court located in Quay County.

17. Attorney's Fees: Should either party to this contract be obligated to seek enforcement of the terms of this contract through a court of law, the breaching party as determined by any judge or special master shall be responsible for all court costs and reasonable attorney's fees incurred by the non-breaching party as a result of the breach of this agreement.

18. Acknowledgments: CLINTON D HARDEN & ASSOCIATES acknowledges that it is aware of the Procurement code, Sections 13-1-28 through 13-1-199, NMSA (1978), as amended, imposes civil and criminal penalties for its violation. CLINTON D HARDEN & ASSOCIATES also agrees to comply with the requirements and guidelines of the New Mexico Lobbyist Registration Act. In addition, CLINTON D HARDEN & ASSOCIATES acknowledges that it is aware that New Mexico criminal statutes impose felony penalties for illegal bribes, gratuities and kick-backs.

19. Work Product: All work and work product produced under this contract shall be and remain the exclusive property of Quay , and CLINTON D HARDEN & ASSOCIATES shall not use, sell, disclose or otherwise make available to anyone (individual, corporation or organization) any work and work product produced under the contract, other than to COUNTY.

IN WITNESS HEREOF, the parties have executed this agreement as of the date first written above.

COUNTY OF QUAY

By: Franklin McCasland Title Commission Chairman
Franklin McCasland

CLINTON D HARDEN & ASSOCIATES LLC

By: _____ Date _____
CLINTON D HARDEN
LEAD CONSULTANT

