

Public Services Committee

Meeting Agenda

September 27, 2021 4:30 p.m.

EMT Training Room – Thurber Community Building

1. September 27, 2021 /4:30 p.m. EMT Training Room -Thurber Community Building.
2. Fire DNR Grant Proposal
3. Ambulance Items:
 - a. St. Charles request for Mutual Service Agreement.

Members Present: Councilors Pam Bluhm and Dave Frank.

Members Absent: None.

Others Present: Luke Thieke, Shane Fox, Rocky Burnett and Joel Young.

Fire Dept: Chief Luke Thieke reported that the Department's SCBA bottles need to be replaced. They have been recertified one time previously and are now at the end of their lifespan. The cost estimate is just over \$25,000.00. The committee supported the expenditure and will recommend the purchase to the city council.

Twiford Street: Young reported that residents along Twiford Street have stated concerns about the volume of traffic and the rate of traffic near the Twiford Street / Spring Street intersection. Luke Thieke, who owns a neighboring business agreed that the volume of traffic has increased by a great deal and that the situation seems dangerous. The committee suggested that the City Engineer evaluate the situation.

Ambulance Dept.: Rocky Burnett presented a proposal to purchase twenty chairs for the training room, at a cost of \$2,000. He also presented a proposal to purchase two power-lift cots for the ambulances. He reported that the cots can lift up to 800 pounds which will make loading patients much more safe for the patients and for the EMTs. The committee supported the proposal.

Service Area Coverage Agreement Between

CHATFIELD AMBULANCE & ST. CHARLES AMBULANCE

PURPOSE:

The purpose of this agreement is to identify and record the willingness of the above listed organizations to mutually assist each other during periods of scheduling difficulties when one of the services signatory to this agreement is unable to staff a legal crew configured to adhere to Minnesota Statute 144E.

SERVICE FEES:

The parties agree and understand there will be no bill sent by a party covering the other party's primary service area under this agreement. Each party agrees to be responsible for billing directly those patient(s) who are transported as a result of providing service area coverage. Usual and customary charges will apply. It shall be the responsibility of the transporting agency to collect reimbursement for patient transport services rendered.

LIABILITY COVERAGE:

Both parties agree to maintain general liability (including professional liability) and auto liability coverage through the League of Minnesota Cities Insurance Trust in an amount equal to or greater than the municipal tort caps as set forth in Minnesota Statutes, Chapter 466. Alternatively, a party may maintain equivalent insurance through another insurance company.

INDEMNIFICATION: To the fullest extent permitted by law, both parties agree to defend, indemnify and hold harmless the other party from and against all claims, actions, damages, losses and expenses, including reasonable attorney fees, arising out of a party's negligence or a party's performance or failure to perform its obligations under this Agreement.

WORKERS' COMPENSATION: Each party shall be responsible for all injuries or death of its own personnel. Each party will maintain workers' compensation insurance or self-insurance coverage, covering its own personnel while they are providing assistance pursuant to this Agreement. Each Party waives the right to sue the other party for any workers' compensation benefits paid to its own employees or volunteers or dependents, even if the injuries were caused wholly or partially by the negligence of any other party or its officers, employees, or volunteers.

DAMAGE TO EQUIPMENT: Each party shall be responsible for damages to or loss of its own equipment. Each party waives the right to sue the other party for any damages to or loss of its equipment, even if the damages or losses were caused wholly or partially by the negligence of any other party or its officers, employees, or volunteers.

COMMUNICATIONS:

Communications between Ambulances and their Communication Center(s) will take place on their customary dispatch channels.

RECIPROCITY OF SIMILAR ASSISTANCE:

It is the intent of this agreement that both parties will provide the same type of reciprocal service area coverage to each other whenever possible.

PROCESS:

1. If one party identifies gaps in the duty schedule, the party needing coverage assistance will contact the other party signatory to this agreement by end of business office hours on the day prior to the day when coverage is needed. In the event scheduling assistance is needed throughout a weekend, notification will be made by end of business office hours on the Friday preceding the weekend.
2. Notification will be made via email. Emails will be sent to the designated person(s) of the party being requested for coverage at an address agreeable to both services. A confirmation email will be required to verify the party being requested for coverage can indeed facilitate this request. Copies of these emails will be retained for verification of this coverage. In the event email is not available, efforts will be made to contact the party's representative via phone. Records will be obtained when email is available.
3. Each party will assure maps of service areas are readily available for all service areas covered under this agreement.
4. Each party understands coverage is restricted to no more than 12 hours per 24 hour period.
5. Notification of this coverage will be made to the respective County Public Safety Answering Point (PSAP) or the agency responsible for dispatching both parties signatory to this agreement. This notification will be made by the party requesting the service area coverage.
6. Notification will be made to crew members of both parties signatory to this agreement. This notification will be made by the designated person(s) from each party.
7. In the event the party requesting service area coverage has members available after the covering party has been scheduled, the coverage by the second party will remain in effect with crew members from the party requesting service area coverage having the ability to first respond to requests for service.

If either party wishes to discontinue this agreement, the other party must be notified in writing 30 days in advance.

DATE: _____

Joel Young, City Clerk
City of Chatfield

DATE: _____

Rocky Burnett, Ambulance
DirectorCity of Chatfield

DATE: _____

Nick Koverman, Administrator
City of St. Charles

Joel Young

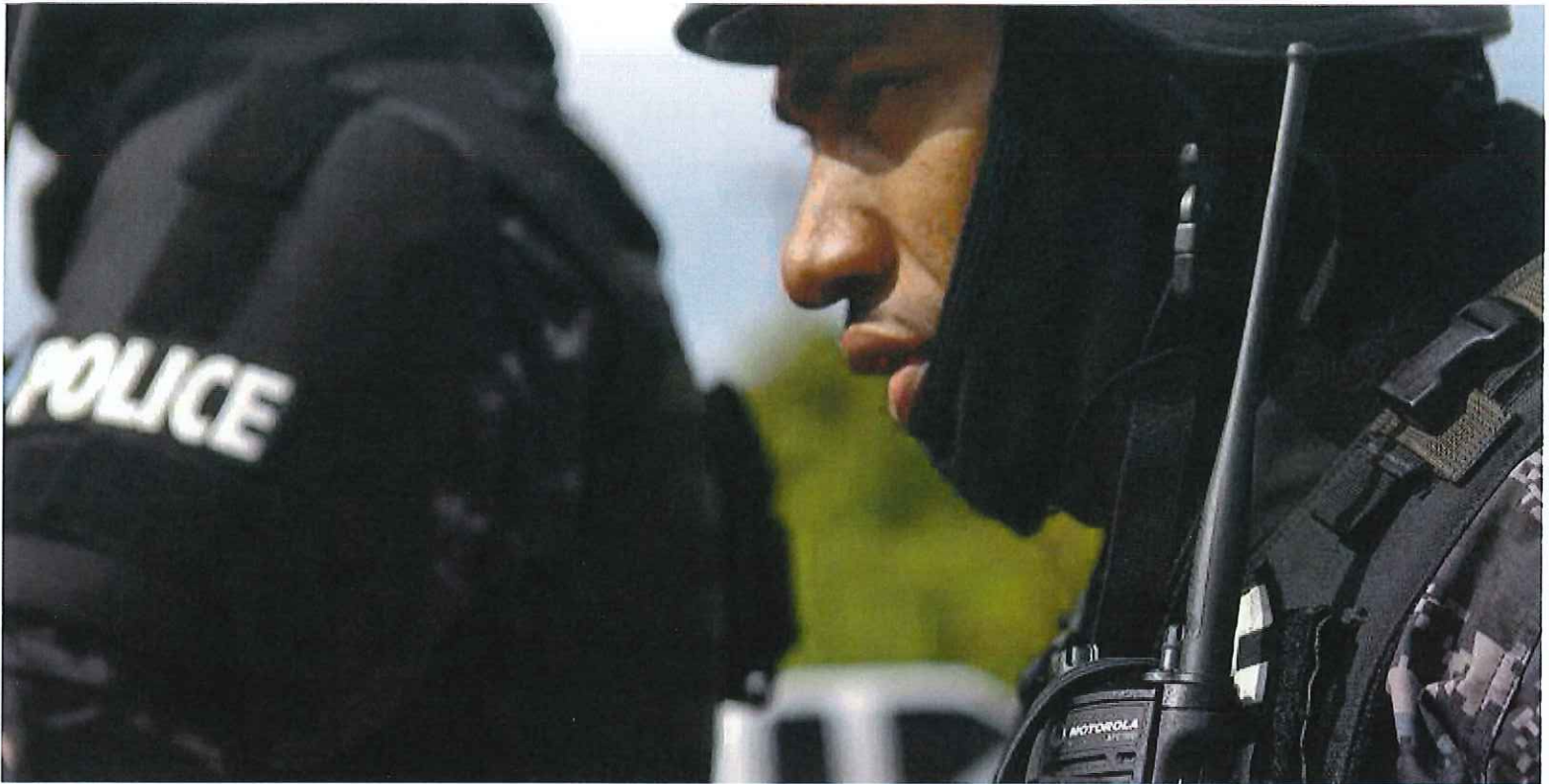
From: Lucas Thieke <lucasthieke@gmail.com>
Sent: Wednesday, September 22, 2021 3:21 PM
To: Joel Young
Subject: Dnr Grant
Attachments: APX4000 8-20-2021.pdf; CHATFIELD FIRE 9-16-21.pdf

Joel, can you add this to the agenda for the public service meeting.

The Chatfield Fire Dept. has received the DNR Grant for 2021-2022 it is a 50% matching grant. We applied for two radios and a digital tank level gauge for our brush truck. Attached are the bids for these items, the items must be purchased before the grant is paid out. We were approved for \$3396.00 as our match. So we need to purchase these items to get our money back.

Thanks

Luke



CHATFIELD FIRE DEPT

08/20/2021



QUOTE-1534860

08/20/2021

CHATFIELD FIRE DEPT
21 2ND ST SE
CHATFIELD, MN 55923

Dear ,

Motorola Solutions is pleased to present CHATFIELD FIRE DEPT with this quote for quality communications equipment and services. The development of this quote provided us the opportunity to evaluate your requirements and propose a solution to best fulfill your communications needs.

This information is provided to assist you in your evaluation process. Our goal is to provide CHATFIELD FIRE DEPT with the best products and services available in the communications industry. Please direct any questions to Gary Anderson at gary.anderson@ancom.org.

We thank you for the opportunity to provide you with premier communications and look forward to your review and feedback regarding this quote.

Sincerely,

Gary Anderson

Motorola Solutions Manufacturer's Representative

Billing Address:
CHATFIELD FIRE DEPT
21 2ND ST SE
CHATFIELD, MN 55923
US

Quote Date:08/20/2021
Expiration Date:11/18/2021
Quote Created By:
Gary Anderson
gary.anderson@ancom.org

End Customer:
CHATFIELD FIRE DEPT

Line #	Item Number	Description	Qty	List Price	Sale Price	Ext. Sale Price
	APX™ 4000 Series	APX4000				
1	H51UCF9PW6AN	APX 4000 7/800 MHZ MODEL 2 PORT	2	\$2,120.00	\$1,179.50	\$2,359.00
1a	Q667BB	ADD: ADP ONLY (NON-P25 CAP COMPLIANT) (US ONLY)	2	\$0.00	\$0.00	\$0.00
1b	QA02756AB	ENH: 3600 OR 9600 TRUNKING BAUD SINGLE SYSTEM	2	\$1,570.00	\$1,177.50	\$2,355.00
1c	H122BV	ALT: 1/4- WAVE 7/800 STUBBY (NAR6595)	2	\$24.00	\$18.00	\$36.00
1d	H885BK	ADD: 3Y ESSENTIAL SERVICE	2	\$95.00	\$95.00	\$190.00
2	PMPN4174A	CHGR DESKTOP SINGLE UNIT IMPRES, US/NA	2	\$76.00	\$51.95	\$103.90
3	PMMN4084A	AUDIO ACCESSORY- HEADSET,PLUS RSM NC IP54 THRD 3.5MM JACK RX	2	\$95.00	\$71.25	\$142.50

Grand Total **\$5,186.40(USD)**

Notes:

- Unless otherwise noted, this quote excludes sales tax or other applicable taxes (such as Goods and Services Tax, sales tax, Value Added Tax and other taxes of a similar nature). Any tax the customer is subject to will be added to invoices.



Any sales transaction following Motorola's quote is based on and subject to the terms and conditions of the valid and executed written contract between Customer and Motorola (the "Underlying Agreement") that authorizes Customer to purchase equipment and/or services or license software (collectively "Products"). If no Underlying Agreement exists between Motorola and Customer, then Motorola's Standard Terms of Use and Motorola's Standard Terms and Conditions of Sales and Supply shall govern the purchase of the Products.
Motorola Solutions, Inc.; 500 West Monroe, United States - 60661 ~ #: 36-1115800

Purchase Order Checklist

Marked as PO/ Contract/ Notice to Proceed on Company Letterhead
(PO will not be processed without this)

PO Number/ Contract Number

PO Date

Vendor = Motorola Solutions, Inc.

Payment (Billing) Terms/ State Contract Number

Bill-To Name on PO must be equal to the *Legal* Bill-To Name

Bill-To Address

Ship-To Address (If we are shipping to a MR location, it must be documented on PO)

Ultimate Address (If the Ship-To address is the MR location then the Ultimate Destination address must be documented on PO)

PO Amount must be equal to or greater than Order Total

Non-Editable Format (Word/ Excel templates cannot be accepted)

Bill To Contact Name & Phone # and EMAIL for customer accounts payable dept

Ship To Contact Name & Phone #

Tax Exemption Status

Signatures (As required)



FIRE SAFETY USA, INC.
3253 19TH ST NW
ROCHESTER, MN 55901
PHONE: 507-529-8444
FAX: 507-529-8111

QUOTATION

SHIP TO ADDRESS:
CHATFIELD FIRE DEPARTMENT

DATE:

9/16/2021

Rep: Kevin Tuohy

QTY	ITEM	DESCRIPTION	PRICE EACH	PRICE EXTENDED
1	WLA300-A00-CMMV2	FRC TANKVISION PRO 300 WATER FRAC KIT	\$1,385.43	\$1,385.43
1	XE-WL300-D0A			\$0.00
1	XE-WL205-D0B			\$0.00
2	XE-WL280-DOB			\$0.00
1	XE-WL200S-C10C			\$0.00
1	XE-WLPT4-S0A			\$0.00
1	XE-300BEZ-A6A			\$0.00
1	XE-XXDLTERMW-A1A			\$0.00
1	XE-XXDT16S8-A1A			\$0.00
1	XE-WLA3PM-R0A			\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
TOTAL				\$1,385.43