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# State of New Hampshire

DEPARTMENT OF SAFETY  
OFFICE OF THE COMMISSIONER  
33 HAZEN DR. CONCORD, NH 03305  
603/271-2791

JOHN J. BARTHELMES  
COMMISSIONER

March 6, 2017

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

### Requested Action

Authorize the Department of Safety, Division of State Police, to accept and expend \$21,821.000 of federal pass-through funds from the Department of Safety, Office of Highway Safety, entitled New Hampshire State Police C.A.R. (Collision Analysis & Reconstruction) – Advanced Traffic Crash Investigation & Reconstruction Training to pay the registration and training costs for investigation and reconstruction training. Effective upon Governor and Council approval through June 30, 2017. Funding Source: 100% Agency Income.

Funds are to be budgeted in the account titled:

02-23-23-234010-22110000 Dept. of Safety – Division of State Police – Highway Safety Equipment and Training Grants

Class	Description	Current Adjusted		Revised Adjusted
		Authorized	Requested Action	Authorized
009-405921	Agency Income	\$ (2,065,157.51)	\$ (21,821.00)	\$ (2,086,978.51)
018-500106	Overtime	\$ 12,336.00	\$ -	\$ 12,336.00
019-500105	Holiday Pay	\$ 1,429.52	\$ -	\$ 1,429.52
020-500221	Current Expenses	\$ 0.22	\$ -	\$ 0.22
030-500311	Equipment	\$ 1,384,497.41	\$ -	\$ 1,384,497.41
037-500173	Technology - Hardware	\$ 11,800.00	\$ -	\$ 11,800.00
038-500177	Technology - Software	\$ 25,600.00	\$ -	\$ 25,600.00
039-500180	Telecommunications	\$ 0.60	\$ -	\$ 0.60
040-500800	Indirect Cost	\$ 50,792.95	\$ 2,201.00	\$ 52,993.95
046-500465	Consultants	\$ 337,078.50	\$ -	\$ 337,078.50
059-500117	Temp - Full Time	\$ 146,493.00	\$ -	\$ 146,493.00
060-500602	Benefits	\$ 86,129.31	\$ -	\$ 86,129.31
080-500713	Out-of-State Travel	\$ 9,000.00	\$ 19,620.00	\$ 28,620.00
	Total	\$ 2,065,157.51	\$ 21,821.00	\$ 2,086,978.51

### Explanation

This request to accept and expend funds from the Office of Highway Safety will enable NH Department of Safety C.A.R. members to attend training related to traffic crash investigations and reconstruction in New Braintree, MA. The training will take place between March 27, 2017 and May 12, 2017. The first course will build upon theories and techniques previously learned and will delve into the advanced concepts of traffic crash investigations. The second course will build upon the first and the students will take part in a more intense study of time/distance calculations, two-dimensional momentum, and impact

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council

March 6, 2017

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speed calculations using momentum equations. This specialized training is not offered in New Hampshire and requires travel to Massachusetts.

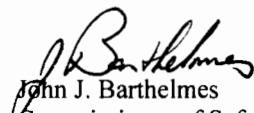
The funds are to be budgeted as follows:

Funds in class 040 will be used to pay for Indirect Costs on all eligible expenses.

Funds in class 080 will be used to pay for the training registration and the meal allowance while in training.

In the event that Agency Income becomes no longer available, General and/or Highway funds will not be requested to support this program.

Respectfully submitted,

  
John J. Barthelmes  
Commissioner of Safety

Department of Safety  
Highway Safety Equipment and Training Grants  
Fiscal Situation

02-23-23-234010-22110000

**Federal Funds Awarded:**

FFY 2016 Grant - NHSP Captain Position - 10/1-9/30/2016	\$165,714.00
FFY 2016 Grant - VPN Installation Assistance - 10/1-9/30/2016	\$165,977.65
FFY 2016 Grant - NHSP Crash Records Management System 10/1-9/30/2016	\$109,960.50
FFY 2016 Grant - NHSP Robotic Total Stations	\$135,000.00
FFY 2016 Grant - NHSP C.A.R. Equipment	\$37,400.00
FFY 2017 Grant - VPN Installation Assistance - 10/1-9/30/2017	\$164,081.40
FFY 2017 Grant - NHSP Captain Position - 10/1-9/30/2017	\$160,000.00
FFY 2017 Grant - DOS Forensic Lab PBT's	\$127,500.00
FFY 2017 Grant - DOS Forensic Lab Intoxilyzers	\$1,143,207.80
FFY 2017 NHSP C.A.R. - Advanced Traffic Crash Investigation & Reconstruction Training	\$21,821.36
<b>Total Grant Funds Awarded</b>	<b>\$2,230,662.71</b>

Less: SFY 2016 Grant Expenditures	\$106,693.64
Less: SFY 2017 Current Adjusted Authorized	\$2,065,157.51

**Remaining excess grant funds available to appropriate** \$58,811.56

**This Request** \$21,821.00

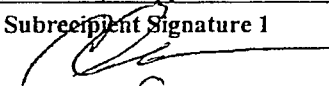
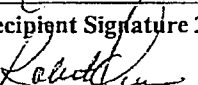
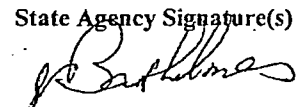
**OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT**

The State of New Hampshire and the Subrecipient hereby  
Mutually agree as follows:  
**GENERAL PROVISIONS**

Project Title: New Hampshire State Police C.A.R. - Advanced  
Traffic Crash Investigation & Reconstruction Training

Project #: 308-17S-120

**I. Identification and Definitions.**

<b>1.1. State Agency Name</b> New Hampshire Department of Safety Office of Highway Safety		<b>1.2. State Agency Address</b> 33 Hazen Drive, Room 109A Concord, NH 03305	
<b>1.3. Subrecipient Name</b> Department of Safety/New Hampshire State Police		<b>1.4. Subrecipient Address</b> 33 Hazen Drive, Concord NH 03305	
<b>Project Director Email Address:</b> Colonel Christopher Wagner, Director New Hampshire State Police <a href="mailto:christopher.wagner@dos.nh.gov">christopher.wagner@dos.nh.gov</a>		<b>Grant Contact Email:</b> <a href="mailto:christopher.wagner@dos.nh.gov">christopher.wagner@dos.nh.gov</a>	
<b>1.4.1 Subrecipient Type - State Government</b> State		<b>1.4.2 DUNS</b> 060340564	
<b>1.5. Subrecipient Phone #</b> 603-223-3888	<b>1.6. Effective Date</b> February 1, 2017	<b>1.7. Completion Date</b> September 30, 2017	<b>1.8. Grant Limitation</b> \$21,821.36 *
<b>1.9. Grant Officer for State Agency</b> John A. Clegg		<b>1.10. State Agency Telephone Number</b> 603-271-2893	
<b>"By signing this form we certify that we have complied with any public meeting requirement for acceptance of this grant, including if applicable RSA 31:95-b."</b>			
<b>1.11. Subrecipient Signature 1</b> 		<b>1.12. Name &amp; Title of Subrecipient Signor 1</b> Christopher Wagner, Colonel, New Hampshire State Police	
<b>Subrecipient Signature 2</b> 		<b>Name &amp; Title of Subrecipient Signor 2</b> Robert L. Quinn, Assistant Commissioner	
<b>Subrecipient Signature 3</b>		<b>Name &amp; Title of Subrecipient Signor 3</b>	
<b>1.13. Acknowledgment:</b> State of New Hampshire, County of _____, on / / , before the undersigned officer, personally appeared the person(s) identified in block 1.12., known to me (or satisfactorily proven) to be the person(s) whose name is signed in block 1.11., and acknowledged that he/she executed this document in the capacity indicated in block 1.12.			
<b>1.13.1. Signature of Notary Public or Justice of the Peace (Seal)</b>		<b>1.13.2 Name &amp; Title of Notary Public or Justice of the Peace</b>	
<b>1.14. State Agency Signature(s)</b> 		<b>1.15. Name &amp; Title of State Agency Signor(s)</b> John J. Barthelmes, Commissioner NH Department of Safety Date: <u>2/23/17</u>	
<b>1.16. Approval by Attorney General (Form, Substance and Execution) (if G &amp; C approval required)</b> By: _____ Assistant Attorney General, On: / /			
<b>1.17. Approval by Governor and Council (if applicable)</b> By: _____ On: / /			

**2. SCOPE OF WORK:** In exchange for grant funds provided by the State of New Hampshire, acting through the Agency identified in block 1.1 (hereinafter referred to as "the State"), pursuant to RSA 21-P:55-63, the Subrecipient identified in block 1.3 (hereinafter referred to as "the Subrecipient"), shall perform that work identified and more particularly described in the scope of work attached hereto as EXHIBIT A (the scope of work being hereinafter referred to as "the Project").

Subrecipient Initials \_\_\_\_\_ Date \_\_\_\_\_  
Page 1 of 3

**EXHIBIT B**

Grant Amount and Method of Payment

**1. GRANT AMOUNT**

FEDERAL BUDGET AND PERSONNEL DATA	
a. Personnel Services Salary	
b. Current Expenses	
c. Equipment	
d. Indirect Costs and Audit Expense \$19,620.00 x 11.22 percent  \$1,651.02 - 405D Funds (17-02 M6OT 22) \$550.34 - 402 Funds (17-02 AL 22)	\$2,201.36
e. Contractual Services	
f. Travel Expenses Registration – 6 troopers x 2 trainings x \$1,095.00/training C.A.R Training \$9,855.00-405D Funds (17-02 M6OT 22) C.A.R Training \$3,285.00-402 Funds (17-02 AL 22)  Meals - 6 troopers x 2 trainings x 10 days x \$54/day \$4,860.00-405D Funds (17-02 M6OT 22) \$1,620.00-402 Funds (17-02 AL 22)	\$13,140.00     6,480.00
<b>Total</b>	<b>\$21,821.36</b>

<b>Project Cost is 80% Federal Funds, 20% Applicant Share</b>
<b>Awarding Agency:</b> Office of Highway Safety (OHS)
<b>Project Title &amp; Number:</b> NHSP C.A.R. Traffic Crash Investigation & Reconstruction Training
<b>PSP &amp; Task #:</b> 17-02 M6OT 22 = \$16,366.02 / 17-02.AL 22 = \$5,455.34
<b>Funding Source:</b> 405D Funds / 402 Funds
<b>Catalog of Federal Domestic Assistance (CFDA) Number:</b> 20.616 / 20.600
<b>In Kind Match:</b> \$4,091.51 (405D Funds 17-02 M6OT 22) / \$1,363.84 (402 Funds 17-02 AL 22)

**2. PAYMENT SCHEDULE**

- a. The Subrecipient agrees that the total payment by the State under this grant agreement shall be up to \$21,821.36.

Grantee Initials \_\_\_\_\_ Date \_\_\_\_\_

**CONTRACTUAL AGREEMENT  
FOR HIGHWAY SAFETY PROJECT GRANT**

For HSA Use Only

State of New Hampshire  
Highway Safety Agency  
8 Regional Drive, Building 2  
Concord, NH 03301-8530

Date Received September 29, 2015	Project Number #300-16S-002
Date Approved September 29, 2015	PSP and Task # 16-08, 01

Part I

Project Title NH State Police Captain Position	2. Type of Application (Check One) <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Revision <input type="checkbox"/> Continuation
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Applicant Name of Agency DUNS Number 060340564 NH Department of Safety	B. Address of Agency 33 Hazen Drive Concord NH 03305-0011
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Government Unit (Check One) <input checked="" type="checkbox"/> State <input type="checkbox"/> City/Town <input type="checkbox"/> County <input type="checkbox"/> Other (specify):	D. Name Address of Governmental Unit State of New Hampshire  Concord, NH 03301
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Contract Duration A. Contract Period Start Date: October 1, 2015 Termination Date: September 30, 2016	Functional Area PA - Planning & Administration CFDA# 20.600 Program Title State & Community Highway Safety Funding Source National Highway Traffic Safety Administration
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Description of Project (Describe in detail in Schedule A) and Source of Funds

Budget (Provide itemization as called for on Schedule B) and Source of Funds

Cost Category	Total Budget	Federal Budget	Local Budget	State Budget	Other Funds
Personnel Services	\$165,714.00	\$165,714.00			
Current Expense					
Equipment					
Direct Costs Audit					
Contractual Services					
Other					
Estimated Costs Including Non-Federal Share	\$165,714.00	\$165,714.00			

Local Benefit: Anticipated that the federal share for local benefit will be: 0% (\$0.00)
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**CONTRACTUAL AGREEMENT  
FOR HIGHWAY SAFETY PROJECT GRANT**

For HSA Use Only

State of New Hampshire  
Highway Safety Agency  
8 Regional Drive, Building 2  
Concord, NH 03301-8530

Date Received October 8, 2015	Project Number #310-16S-002
Date Approved October 8, 2015	PSP and Task # 16-04, 07

Part I

Project Title VPN Installation	2. Type of Application (Check One) <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Revision <input type="checkbox"/> Continuation
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Applicant Name of Agency New Hampshire Department of Safety Division of State Police DUNS Number 060340564	B. Address of Agency 33 Hazen Drive Concord NH 03305-0011
Government Unit (Check One) <input checked="" type="checkbox"/> State <input type="checkbox"/> City/Town <input type="checkbox"/> County Other (specify):	D. Name Address of Governmental Unit State of New Hampshire Concord, NH 03301

Contract Duration Contract Period Start Date: October 1, 2015 Termination Date: September 30, 2016	Functional Area K9 - 408 Data Program Incentive CFDA# 20.610 Program Title Traffic Safety Info System Improvements Grant Funding Source National Highway Traffic Safety Administration
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Description of Project (Describe in detail in Schedule A) and Source of Funds

Budget (Provide itemization as called for on Schedule B) and Source of Funds					
Cost Category	Total Budget	Federal Budget	Local Budget	State Budget	Other Funds
Personnel Services					
Current Expense					
Equipment					
Direct Costs Audit	\$18,951.65	\$18,951.65			
Contractual Services	\$147,026.00	\$147,026.00			
Other					
Estimated Costs Including Non-Federal Share	\$165,977.65	\$165,977.65			

Local Benefit:  
It is anticipated that the federal share for local benefit will be: 0% (\$0.00)

**CONTRACTUAL AGREEMENT  
FOR HIGHWAY SAFETY PROJECT GRANT**

For HSA Use Only

State of New Hampshire  
Highway Safety Agency  
88 Regional Drive, Building 2  
Concord, NH 03301-8530

Date Received October 22, 2015	Project Number #310-16S-003
Date Approved October 22, 2015	PSP and Task # 16-04, 02

Part I

1. Project Title NH State Police CRMS Vendor 1	2. Type of Application (Check One) <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Revision <input type="checkbox"/> Continuation
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Applicant Name of Agency: NH Department of Safety Division of State Police DUNS Number: 060340564	B. Address of Agency 33 Hazen Drive Concord NH 03305-0011
Government Unit (Check One) <input checked="" type="checkbox"/> State <input type="checkbox"/> City/Town <input type="checkbox"/> County Other (specify):	D. Name Address of Governmental Unit State of New Hampshire Concord, NH 03301

Contract Duration Contract Period Start Date: October 1, 2015 Termination Date: September 30, 2016	Functional Area: M3DA - 405c Data Program CFDA#: 20.616 Program Title: Traffic Safety Info System Improvement Grant Funding Source: National Highway Traffic Safety Administration
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Description of Project (Describe in detail in Schedule A) and Source of Funds

Budget (Provide itemization as called for on Schedule B) and Source of Funds

Cost Category	Total Budget	Federal Budget	Local Budget	State Budget	Other Funds
Personnel Services					
Current Expense					
Equipment					
Direct Costs Audit	\$12,555.50	\$12,555.50			
Contractual Services	\$97,405.00	\$97,405.00			
Other					
Estimated Costs Including Non-Federal Share	\$109,960.50	\$109,960.50	*		

Local Benefit:  
It is anticipated that the federal share for local benefit will be: 100% (\$109,960.50)



# CONTRACTUAL AGREEMENT FOR HIGHWAY SAFETY PROJECT GRANT

**For HSA Use Only**

State of New Hampshire  
Office of Highway Safety  
13 Hazen Drive, Room 109A  
Concord, NH 03305

Date Received August 11, 2016	Project Number 308-16S-092
Date Approved August 11, 2016	PSP and Task # 16-02, 22

**Part I**

<p>1. Project Title NH State Police Robotic Total Stations (5)</p>	<p>2. Type of Application (Check One)</p> <p><input checked="" type="checkbox"/> Initial  <input type="checkbox"/> Revision  <input type="checkbox"/> Continuation</p>
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<p>3. Applicant A. Name of Agency      DUNS Number 060340564 NH Department of Safety Division of State Police</p>	<p>B. Address of Agency 33 Hazen Drive Concord NH 03305-0011</p>
<p>C. Government Unit (Check One)</p> <p><input checked="" type="checkbox"/> State  <input type="checkbox"/> City/Town  <input type="checkbox"/> County  <input type="checkbox"/> Other (specify):</p>	<p>D. Name Address of Governmental Unit State of New Hampshire  Concord, NH 03301</p>

<p>Contract Duration A. Contract Period</p> <p>Start Date:            August 15, 2016 Termination Date:    September 30, 2016</p>	<p>Functional Area    M6OT - 405d Impaired Driving Low CFDA#              20.616 Program Title      Impaired Driving Countermeasures Grant Funding Source    National Highway Traffic Safety Administratio</p>
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Description of Project (Describe in detail in Schedule A) and Source of Funds

Budget (Provide itemization as called for on Schedule B) and Source of Funds					
Cost Category	Total Budget	Federal Budget	Local Budget	State Budget	Other Funds
Personnel Services					
Current Expense					
Equipment	\$101,250.00	\$101,250.00			
Indirect Costs Audit					
Contractual Services					
Other					
Total Estimated Costs Including Non-Federal Share	\$101,250.00	\$101,250.00			

Local Benefit:

It is anticipated that the federal share for local benefit will be:      0% (\$0.00)

# CONTRACTUAL AGREEMENT FOR HIGHWAY SAFETY PROJECT GRANT

### For HSA Use Only

State of New Hampshire  
Office of Highway Safety  
33 Hazen Drive, Room 109A  
Concord, NH 03305

Date Received August 11, 2016	Project Number 308-16S-092
Date Approved August 11, 2016	PSP and Task # 16-03, 01

**Part I**

<p>1. Project Title NH State Police Robotic Total Stations (5)</p>	<p>2. Type of Application (Check One)</p> <p><input checked="" type="checkbox"/> Initial  <input type="checkbox"/> Revision  <input type="checkbox"/> Continuation</p>
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<p>3. Applicant</p> <p>A. Name of Agency      DUNS Number 060340564 NH Department of Safety Division of State Police</p>	<p>B. Address of Agency 33 Hazen Drive Concord NH 03305-0011</p>
<p>C. Government Unit (Check One)</p> <p><input checked="" type="checkbox"/> State  <input type="checkbox"/> City/Town  <input type="checkbox"/> County  <input type="checkbox"/> Other (specify):</p>	<p>D. Name Address of Governmental Unit State of New Hampshire  Concord, NH 03301</p>

<p>4. Contract Duration</p> <p>A. Contract Period</p> <p>Start Date:            August 15, 2016 Termination Date:    September 30, 2016</p>	<p>Functional Area    PT - Police Traffic Services CFDA#                20.600 Program Title       State &amp; Community Highway Safety Funding Source    National Highway Traffic Safety Administratio</p>
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**Description of Project (Describe in detail in Schedule A) and Source of Funds**

Budget (Provide itemization as called for on Schedule B) and Source of Funds					
Cost Category	Total Budget	Federal Budget	Local Budget	State Budget	Other Funds
Personnel Services					
Current Expense					
Equipment	\$33,750.00	\$33,750.00			
Indirect Costs Audit					
Contractual Services					
Other					
Total Estimated Costs including Non-Federal Share	\$33,750.00	\$33,750.00	<sup>②</sup> * + \$101,250.00 = \$135,000.00 *		total * \$135,000.00 *

Local Benefit:

It is anticipated that the federal share for local benefit will be:      0% (\$0.00)

**CONTRACTUAL AGREEMENT  
FOR HIGHWAY SAFETY PROJECT GRANT**

For HSA Use Only

State of New Hampshire  
Office of Highway Safety  
33 Hazen Drive, Room 109A  
Concord, NH 03305

Date Received August 11, 2016	Project Number 308-16S-093
Date Approved August 11, 2016	PSP and Task # 16-02, 23

Part I

1. Project Title NH State Police C.A.R. Equipment	2. Type of Application (Check One) <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Revision <input type="checkbox"/> Continuation
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3. Applicant A. Name of Agency DUNS Number 060340564 NH Department of Safety Division of State Police	B. Address of Agency 33 Hazen Drive Concord NH 03305-0011
C. Government Unit (Check One) <input checked="" type="checkbox"/> State <input type="checkbox"/> City/Town <input type="checkbox"/> County Other (specify):	D. Name Address of Governmental Unit State of New Hampshire Concord, NH 03301

Contract Duration A. Contract Period Start Date: August 15, 2016 Termination Date: September 30, 2016	Functional Area M6OT - 405d Impaired Driving Low CFDA# 20.616 Program Title Impaired Driving Countermeasures Grant Funding Source National Highway Traffic Safety Administratio
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Description of Project (Describe in detail in Schedule A) and Source of Funds

Budget (Provide itemization as called for on Schedule B) and Source of Funds					
Cost Category	Total Budget	Federal Budget	Local Budget	State Budget	Other Funds
Personnel Services					
Current Expense					
Equipment	\$28,050.00	\$28,050.00			
Indirect Costs Audit					
Contractual Services					
Other					
Total Estimated Costs Including Non-Federal Share	\$28,050.00	\$28,050.00	①		

Local Benefit:  
Anticipated that the federal share for local benefit will be: 0% (\$0.00)

**CONTRACTUAL AGREEMENT  
FOR HIGHWAY SAFETY PROJECT GRANT**

For HSA Use Only

State of New Hampshire  
Office of Highway Safety  
33 Hazen Drive, Room 109A  
Concord, NH 03305

Date Received August 11, 2016	Project Number 308-16S-093
Date Approved August 11, 2016	PSP and Task # 16-03, 01

Part I

1. Project Title NH State Police C.A.R. Equipment	2. Type of Application (Check One) <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Revision <input type="checkbox"/> Continuation
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3. Applicant A. Name of Agency DUNS Number 060340564 NH Department of Safety Division of State Police	B. Address of Agency 33 Hazen Drive Concord NH 03305-0011
C. Government Unit (Check One) <input checked="" type="checkbox"/> State <input type="checkbox"/> City/Town <input type="checkbox"/> County <input type="checkbox"/> Other (specify):	D. Name Address of Governmental Unit State of New Hampshire Concord, NH 03301

Contract Duration A. Contract Period Start Date: August 15, 2016 Termination Date: September 30, 2016	Functional Area PT - Police Traffic Services CFDA# 20.600 Program Title State & Community Highway Safety Funding Source National Highway Traffic Safety Administration
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Description of Project (Describe in detail in Schedule A) and Source of Funds

Budget (Provide itemization as called for on Schedule B) and Source of Funds					
Cost Category	Total Budget	Federal Budget	Local Budget	State Budget	Other Funds
Personnel Services					
Current Expense					
Equipment	\$9,350.00	\$9,350.00			
Indirect Costs - Audit					
Contractual Services					
Other					
Total Estimated Costs Including Non-Federal Share	\$9,350.00	\$9,350.00	+ \$28,050.00	= \$37,400.00	total *

Local Benefit:  
It is anticipated that the federal share for local benefit will be: 0% (\$0.00)


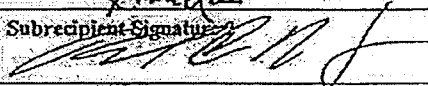

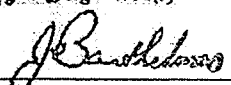
**OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT**

The State of New Hampshire and the Subrecipient hereby  
Mutually agree as follows:  
**GENERAL PROVISIONS**

Project Title: NHSP VPN Installation

Project #: 310-17S-009

**1. Identification and Definitions.**

1.1. State Agency Name New Hampshire Department of Safety Office of Highway Safety		1.2. State Agency Address 33 Hazen Drive, Room 109A Concord, NH 03305	
1.3. Subrecipient Name NH Department of Safety Division of State Police		1.4. Subrecipient Address 33 Hazen Drive Concord, NH 03305	
Chief's Email Address: N/A		Grant Contact Email:	
1.4.1 Subrecipient Type (State Govt, City/Town Govt, County Govt, College/University, Other (Specify) State		1.4.2 DUNS 060340564	
1.5. Subrecipient Phone # 223-3888	1.6. Effective Date 10/01/16	1.7. Completion Date 09/30/17	1.8. Grant Limitation \$164,081.40 *
1.9. Grant Officer for State Agency John Clegg		1.10. State Agency Telephone Number 271-2893	
"By signing this form we certify that we have complied with any public meeting requirement for acceptance of this grant, including if applicable RSA 31:95-b."			
1.11. Subrecipient Signature 1 		1.12. Name & Title of Subrecipient Signor 1 Robert L. Quinn, DOS Assistant Commissioner	
Subrecipient Signature 2 		Name & Title of Subrecipient Signor 2 Richard C. Bailey, DOS Assistant Commissioner	
Subrecipient Signature 3		Name & Title of Subrecipient Signor 3	
1.13. Acknowledgment: State of New Hampshire, County of <u>Merrimack</u> on <u>9/29/16</u> before the undersigned officer, personally appeared the person(s) identified in block 1.12., known to me (or satisfactorily proven) to be the person(s) whose name is signed in block 1.11., and acknowledged that he/she executed this document in the capacity indicated in block 1.12.			
1.13.1. Signature of Notary Public or Justice of the Peace (Seal) 		1.13.2 Name & Title of Notary Public or Justice of the Peace <u>Nancy L. Cassidy</u> NOTARY	
1.14. State Agency Signature(s) 		1.15. Name & Title of State Agency Signor(s) John J. Barthelme, Commissioner NH Department of Safety Date: <u>9-29-16</u>	
1.16. Approval by Attorney General (Form, Substance and Execution) (if G & C approval required) By: _____ Assistant Attorney General, On: <u>  /  /  </u>			
1.17. Approval by Governor and Council (if applicable) By: _____ On: <u>  /  /  </u>			

2. **SCOPE OF WORK:** In exchange for grant funds provided by the State of New Hampshire, acting through the Agency identified in block 1.1 (hereinafter referred to as "the State"), pursuant to RSA 21-P:55-63, the Subrecipient identified in block 1.3 (hereinafter referred to as "the Subrecipient"), shall perform that work identified and more particularly described in the scope of work attached hereto as EXHIBIT A (the scope of work being hereinafter referred to as "the Project").

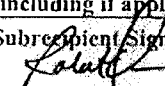

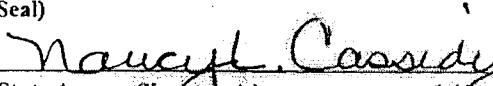

**OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT**

The State of New Hampshire and the Subrecipient hereby  
Mutually agree as follows:  
**GENERAL PROVISIONS**

Project Title: **NHISP Captain Position**

Project #: **300-17S-002**

**1. Identification and Definitions.**

<b>1.1. State Agency Name</b> New Hampshire Department of Safety Office of Highway Safety		<b>1.2. State Agency Address</b> 33 Hazen Drive, Room 109A Concord, NH 03305	
<b>1.3. Subrecipient Name</b> Department of Safety Division of State Police		<b>1.4. Subrecipient Address</b> 33 Hazen Drive Concord, NH 03305	
Chief's Email Address: N/A		Grant Contact Email: John.clegg@dos.nh.gov	
<b>1.4.1 Subrecipient Type (State Govt, City/Town Govt, County Govt, College/University, Other (Specify))</b> State Government		<b>1.4.2 DUNS</b> 060340564	
<b>1.5. Subrecipient Phone #</b> 223-3888	<b>1.6. Effective Date</b> 10/01/16	<b>1.7. Completion Date</b> 09/30/17	<b>1.8. Grant Limitation</b> \$160,000.00 *
<b>1.9. Grant Officer for State Agency</b> John Clegg		<b>1.10. State Agency Telephone Number</b> 271-2893	
"By signing this form we certify that we have complied with any public meeting requirement for acceptance of this grant, including if applicable RSA 31:95-b."			
<b>1.11. Subrecipient Signature 1</b> 		<b>1.12. Name &amp; Title of Subrecipient Signor 1</b> Robert L Quinn, DOS Assistant Commissioner	
<b>Subrecipient Signature 2</b> 		<b>Name &amp; Title of Subrecipient Signor 2</b> Richard C. Bailey, DOS Assistant Commissioner	
<b>Subrecipient Signature 3</b>		<b>Name &amp; Title of Subrecipient Signor 3</b>	
<b>1.13. Acknowledgment:</b> State of New Hampshire, County of Merrimack, on 9/29/16 before the undersigned officer, personally appeared the person(s) identified in block 1.12., known to me (or satisfactorily proven) to be the person(s) whose name is signed in block 1.11., and acknowledged that he/she executed this document in the capacity indicated in block 1.12.			
<b>1.13.1. Signature of Notary Public or Justice of the Peace (Seal)</b> 		<b>1.13.2 Name &amp; Title of Notary Public or Justice of the Peace</b> NANCY L. CASSIDY, Notary Public Commission Expires April 18, 2017	
<b>1.14. State Agency Signature(s)</b> 		<b>1.15. Name &amp; Title of State Agency Signor(s)</b> John J. Barthelmes, Commissioner NH Department of Safety Date: 9-29-16	
<b>1.16. Approval by Attorney General (Form, Substance and Execution) (if G &amp; C approval required)</b> By: _____ Assistant Attorney General, On: / /			
<b>1.17. Approval by Governor and Council (if applicable)</b> By: _____ On: / /			

**2. SCOPE OF WORK:** In exchange for grant funds provided by the State of New Hampshire, acting through the Agency identified in block 1.1 (hereinafter referred to as "the State"), pursuant to RSA 21-P:55-63, the Subrecipient identified in block 1.3 (hereinafter referred to as "the Subrecipient"), shall perform that work identified and more particularly described in the scope of work attached hereto as EXHIBIT A (the scope of work being hereinafter referred to as "the Project").

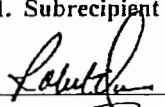
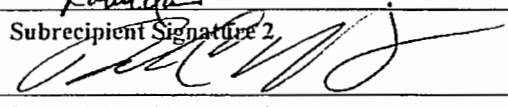
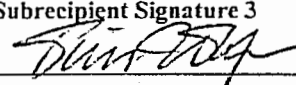
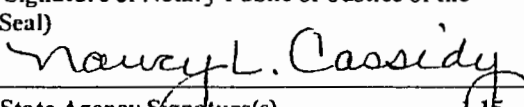
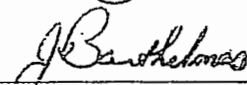
OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT

The State of New Hampshire and the Subrecipient hereby  
Mutually agree as follows:  
GENERAL PROVISIONS

Project Title: DOS Forensic Lab PBTs

Project #: 308-17S-097

1. Identification and Definitions.

1.1. State Agency Name New Hampshire Department of Safety Office of Highway Safety		1.2. State Agency Address 33 Hazen Drive, Room 109A Concord, NH 03305	
1.3. Subrecipient Name NH Department of Safety Division of State Police		1.4. Subrecipient Address 33 Hazen Drive Concord, NH 03305	
Chief's Email Address: N/A		Grant Contact Email: timothy.pifer@dos.nh.gov	
1.4.1 Subrecipient Type (State Govt, City/Town Govt, County Govt, College/University, Other (Specify) State		1.4.2 DUNS  060340564	
1.5. Subrecipient Phone #  223-3888	1.6. Effective Date  10/01/16	1.7. Completion Date  09/30/17	1.8. Grant Limitation  \$127,500.00 *
1.9. Grant Officer for State Agency John Clegg		1.10. State Agency Telephone Number 271-2893	
"By signing this form we certify that we have complied with any public meeting requirement for acceptance of this grant, including if applicable RSA 31:95-b."			
1.11. Subrecipient Signature 1 		1.12. Name & Title of Subrecipient Signor 1 Robert L. Quinn, DOS Assistant Commissioner	
Subrecipient Signature 2 		Name & Title of Subrecipient Signor 2 Richard C Bailey, DOS Assistant Commissioner	
Subrecipient Signature 3 		Name & Title of Subrecipient Signor 3 TIMOTHY J. PIFER, NH STATE POLICE LAB DIRECTOR	
1.13. Acknowledgment: State of New Hampshire, County of Merrimack on 9/29/16 before the undersigned officer, personally appeared the person(s) identified in block 1.12., known to me (or satisfactorily proven) to be the person(s) whose name is signed in block 1.11., and acknowledged that he/she executed this document in the capacity indicated in block 1.12.			
1.13.1. Signature of Notary Public or Justice of the Peace (Seal) 		1.13.2 Name & Title of Notary Public or Justice of the Peace NANCY L. CASSIDY, Notary Public My Commission Expires April 18, 2017	
1.14. State Agency Signature(s) 		1.15. Name & Title of State Agency Signor(s) John J. Barthelmes, Commissioner NH Department of Safety Date: 9-29-16	
1.16. Approval by Attorney General (Form, Substance and Execution) (if G & C approval required)			
By:		Assistant Attorney General, On: / /	
1.17. Approval by Governor and Council (if applicable)			
By:		On: / /	

2. SCOPE OF WORK: In exchange for grant funds provided by the State of New Hampshire, acting through the Agency identified in block 1.1 (hereinafter referred to as "the State"), pursuant to RSA 21-P:55-63, the Subrecipient identified in block 1.3 (hereinafter referred to as "the Subrecipient"), shall perform that work identified and more particularly described in the scope of work attached hereto as EXHIBIT A (the scope of work being hereinafter referred to as "the Project").

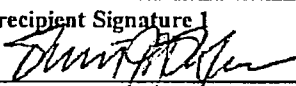
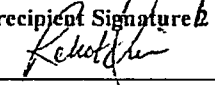
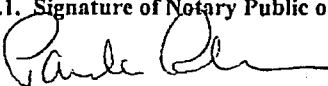
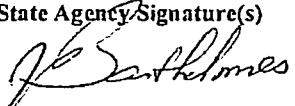
**OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT**

The State of New Hampshire and the Subrecipient hereby  
Mutually agree as follows:  
**GENERAL PROVISIONS**

**Project Title: DOS Forensic Lab Intoxilyzers**

**Project #: 308-17S-110**

**1. Identification and Definitions.**

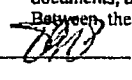
<b>1.1. State Agency Name</b> New Hampshire Department of Safety Office of Highway Safety		<b>1.2. State Agency Address</b> 33 Hazen Drive, Room 109A Concord, NH 03305	
<b>1.3. Subrecipient Name</b> New Hampshire Department of Safety Forensic Laboratory		<b>1.4. Subrecipient Address</b> 33 Hazen Drive Concord, NH 03305	
<b>Chief's Email Address:</b> N/A		<b>Grant Contact Email:</b> timothy.pifer@dos.nh.gov	
<b>1.4.1 Subrecipient Type (State Govt, City/Town Govt, County Govt, College/University, Other (Specify))</b> State		<b>1.4.2 DUNS</b> 060340564	
<b>1.5. Subrecipient Phone #</b> 603-223-3854	<b>1.6. Effective Date</b> November 1, 2016	<b>1.7. Completion Date</b> September 30, 2017	<b>1.8. Grant Limitation</b> \$1,143,207.80
<b>1.9. Grant Officer for State Agency</b> John A. Clegg		<b>1.10. State Agency Telephone Number</b> 271-2893	
<b>"By signing this form we certify that we have complied with any public meeting requirement for acceptance of this grant, including if applicable RSA 31:95-b."</b>			
<b>1.11. Subrecipient Signature 1</b> 		<b>1.12. Name &amp; Title of Subrecipient Signor 1</b> Timothy J. Pifer Director, DOS Forensic Laboratory	
<b>Subrecipient Signature 2</b> 		<b>Name &amp; Title of Subrecipient Signor 2</b> Robert L. Quinn Assistant Commissioner, Department of Safety	
<b>Subrecipient Signature 3</b>		<b>Name &amp; Title of Subrecipient Signor 3</b>	
<b>1.13. Acknowledgment: State of New Hampshire, County of Merrimack, on 10/26/16, before the undersigned officer, personally appeared the person(s) identified in block 1.12., known to me (or satisfactorily proven) to be the person(s) whose name is signed in block 1.11., and acknowledged that he/she executed this document in the capacity indicated in block 1.12.</b>			
<b>1.13.1. Signature of Notary Public or Justice of the Peace (Seal)</b> 		<b>1.13.2 Name &amp; Title of Notary Public or Justice of the Peace</b> Pamela Redlon Notary Public	
<b>1.14. State Agency Signature(s)</b> 		<b>1.15. Name &amp; Title of State Agency Signor(s)</b> John J. Barthelmes, Commissioner NH Department of Safety Date: 10/27/16	
<b>1.16. Approval by Attorney General (Form, Substance and Execution) (if G &amp; C approval required)</b>			
By: Assistant Attorney General, On: / /			
<b>1.17. Approval by Governor and Council (if applicable)</b>			
By: On: / /			

**2. SCOPE OF WORK:** In exchange for grant funds provided by the State of New Hampshire, acting through the Agency identified in block 1.1 (hereinafter referred to as "the State"), pursuant to RSA 21-P:55-63, the Subrecipient identified in block 1.3 (hereinafter referred to as "the Subrecipient"), shall perform that work identified and more particularly described in the scope of work attached hereto as EXHIBIT A (the scope of work being hereinafter referred to as "the Project").

**3. AREA COVERED:** Except as otherwise specifically provided for herein, the Subrecipient shall perform the Project in, and with respect to, the State of New Hampshire, computer programs, computer printouts, notes, letters, memoranda, paper, and documents, all whether finished or unfinished.

Subrecipient Initials  
Page 1 of 3

9.2. Between the Effective Date and the Completion Date the Subrecipient shall

 Date 10/26/16