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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

December 2, 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 \$16,583.00 of federal funds from the Department of Safety, Office of Highway Safety, entitled DOS Data Analyst to pay for overtime related costs for the State Police Data Analyst. Effective upon Governor and Council approval through September 30, 2018. 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

<u>Class</u>	<u>Description</u>	<u>Current Authorized</u>	<u>Requested Action</u>	<u>Revised Authorized</u>
009-405921	Agency Income	\$ (1,405,405.11)	\$ (16,583.00)	\$ (1,421,988.11)
018-500106	Overtime	\$ 8,020.00	\$ 12,490.00	\$ 20,510.00
030-500311	Equipment	\$ 1,249,493.11	\$ 0.00	\$ 1,249,493.11
040-500800	Indirect Cost	\$ 19,288.00	\$ 1,620.00	\$ 20,908.00
046-500465	Consultants	\$ 117,624.00	\$ 0.00	\$ 117,624.00
060-500602	Benefits	\$ 1,980.00	\$ 2,473.00	\$ 4,453.00
080-500713	Out-of-State Travel	\$ 9,000.00	\$ 0.00	\$ 9,000.00
	Total	\$ 1,405,405.11	\$ 16,583.00	\$ 1,421,988.11

Explanation

This request to accept and expend funds from the Office of Highway Safety will enable the Data Analyst to retrieve and analyze Highway Safety related data, such as crashes, arrests, ticketing, etc., which will identify highway safety problem areas or concerns. This data shall then be shared with State, local, and county law enforcement agencies or other partners to support enforcement or media outreach efforts, target areas of concern for legislative change, or other initiatives.

The funds are to be budgeted as follows:

Funds in class 018, Overtime, will be used to pay for the overtime for the Data Analyst.

Funds in class 040, Indirect Costs, will be used to pay Administrative Services for indirect costs on all eligible expenses.

Funds in class 060, Benefits, will be used to pay for benefits related to the overtime expenses.

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
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 2017 Grant - VPN Installation Assistance - 10/1/2016 - 9/30/2017	\$164,081.40
FFY 2017 Grant - DOS Forensic Lab PBT's - 10/1/2016 - 9/30/2017	\$127,497.00
FFY 2017 Grant - DOS Forensic Lab Intoxilyzers - 11/1/2016 - 9/30/2017	\$1,143,207.80
FFY 2017 NHSP C.A.R. - Advanced Traffic Crash Inv & Recon Training - 2/1/2017 - 9/30/2017	\$21,821.36
FFY 2018 - DOS Data Analyst - 10/1/2017 - 9/30/2018	\$16,583.25
FFY 2018 - NHSP VPN Installation - 10/1/2017 - 9/30/2018	\$164,921.22
Total Grant Funds Awarded	<u>\$1,638,112.03</u>

Less: SFY 2017 Expenditures	\$95,294.13
Less: SFY 2018 Current Adjusted Authorized	\$1,405,405.11

Remaining excess grant funds available to appropriate	<u><u>\$137,412.79</u></u>
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This Request	\$16,583.00
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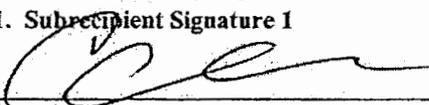
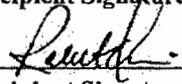
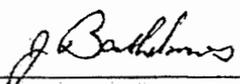
OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT

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

Project Title: DOS Data Analysis

Project #: 310-18S-015

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, Second Floor 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: Colonel Christopher J. Wagner		Grant Contact Email: Christopher.wagner@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 # 603-223-8813	1.6. Effective Date October 1, 2017	1.7. Completion Date September 30, 2018	1.8. Grant Limitation \$16,583.25 *
1.9. Grant Officer for State Agency John A. Clegg		1.10. State Agency Telephone Number 603-271-2893	
"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 Colonel Christopher J. Wagner Director, NH State Police	
Subrecipient Signature 2 		Name & Title of Subrecipient Signor 2 Robert L. Quinn DOS Assistant Commissioner	
Subrecipient Signature 3		Name & Title of Subrecipient Signor 3	
1.13. Acknowledgment: 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.			
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	
1.14. State Agency Signature(s) 		1.15. Name & Title of State Agency Signor(s) John J. Barthelmes, Commissioner NH Department of Safety Date: 11/3/17	
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: / /	

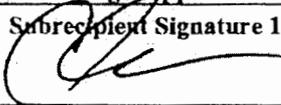
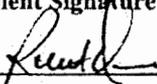
OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT

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

Project Title: NHSP VPN Installation

Project #: 310-18S-002

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, Second Floor 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: Christopher J. Wagner		Grant Contact Email: christopher.wagner@dos.nh.us	
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 # 603-223-3888	1.6. Effective Date October 1, 2017	1.7. Completion Date September 30, 2018	1.8. Grant Limitation \$164,921.22 *
1.9. Grant Officer for State Agency John A. Clegg		1.10. State Agency Telephone Number 603-271-2893	
"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 Colonel Christopher J. Wagner Director, NH State Police	
Subrecipient Signature 2 		Name & Title of Subrecipient Signor 2 Robert L. Quinn DOS Assistant Commissioner	
Subrecipient Signature 3		Name & Title of Subrecipient Signor 3	
1.13. Acknowledgment: 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.			
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	
1.14. State Agency Signature(s) 		1.15. Name & Title of State Agency Signor(s) John J. Barthelmes, Commissioner NH Department of Safety Date: 11/3/17	
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: / /	

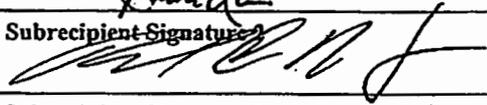
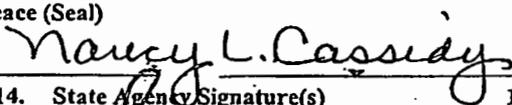
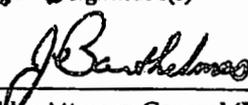
OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT

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 Meriden <u>Meriden</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 NANCY L. CASSIDY NOTARY	
1.14. State Agency Signature(s) 		1.15. Name & Title of State Agency Signor(s) John J. Barthelmes, 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").

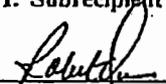
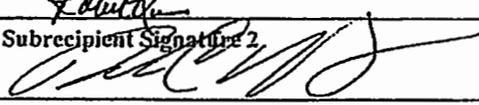
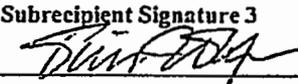
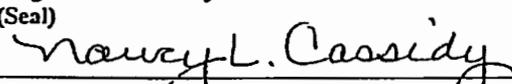
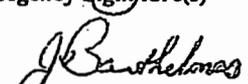
OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT

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

Project Title: DOS Forensic Lab PBTs

Project #: 308-17S-097

I. 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").

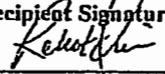
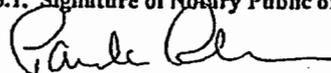
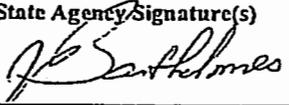
OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT

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.

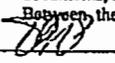
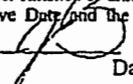
1.1. State Agency Name New Hampshire Department of Safety Office of Highway Safety		1.2. State Agency Address 33 Hazen Drive, Room 109A Concord, NH 03305	
1.3. Subrecipient Name New Hampshire Department of Safety Forensic Laboratory		1.4. Subrecipient Address 33 Hazen Drive Concord, NH 03305	
Chief's 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 # 603-223-3854	1.6. Effective Date November 1, 2016	1.7. Completion Date September 30, 2017	1.8. Grant Limitation \$1,143,207.80
1.9. Grant Officer for State Agency John A. 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 Timothy J. Pifer Director, DOS Forensic Laboratory	
Subrecipient Signature 2 		Name & Title of Subrecipient Signor 2 Robert L. Quinn Assistant Commissioner, Department of Safety	
Subrecipient Signature 3		Name & Title of Subrecipient Signor 3	
1.13. Acknowledgment: State of New Hampshire, County of <u>Merrimack</u> , on <u>10/26/16</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 Pamela Redlon Notary Public	
1.14. State Agency Signature(s) 		1.15. Name & Title of State Agency Signor(s) John J. Barthelmes, Commissioner NH Department of Safety Date: <u>10/27/16</u>	
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").

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.

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

Subrecipient Initials
Page 1 of 3

  Date 10/26/16

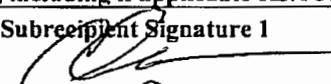
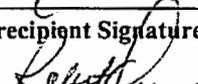
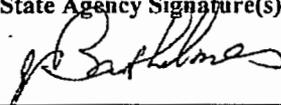
OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT

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

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 Department of Safety/New Hampshire State Police		1.4. Subrecipient Address 33 Hazen Drive, Concord NH 03305	
Project Director Email Address: Colonel Christopher Wagner, Director New Hampshire State Police christopher.wagner@dos.nh.gov		Grant Contact Email: christopher.wagner@dos.nh.gov	
1.4.1 Subrecipient Type - State Government State		1.4.2 DUNS 060340564	
1.5. Subrecipient Phone # 603-223-3888	1.6. Effective Date February 1, 2017	1.7. Completion Date September 30, 2017	1.8. Grant Limitation \$21,821.36 *
1.9. Grant Officer for State Agency John A. Clegg		1.10. State Agency Telephone Number 603-271-2893	
"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 Christopher Wagner, Colonel, New Hampshire State Police	
Subrecipient Signature 2 		Name & Title of Subrecipient Signor 2 Robert L. Quinn, Assistant Commissioner	
Subrecipient Signature 3		Name & Title of Subrecipient Signor 3	
1.13. Acknowledgment: 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.			
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	
1.14. State Agency Signature(s) 		1.15. Name & Title of State Agency Signor(s) John J. Barthelmes, Commissioner NH Department of Safety Date: <u>2/23/17</u>	
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").