



State of New Hampshire

DEPARTMENT OF SAFETY OFFICE OF THE COMMISSIONER

33 HAZEN DR. CONCORD, NH 03305 603/271-2791

JOHN J. BARTHELMES COMMISSIONER

November 19, 2018

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 \$17,062.00 of federal pass-through 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 June 30, 2019. Funding Source: 100% Agency Income.

Funds are to be budgeted in the account titled:

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

Class	Description		rrent Adjusted Authorized	Requested Action	Ŗ	Revised Adjusted Authorized
009-405921	Agency Income	\$	(466,203.50)	\$ (17,062.00)	\$	(483,265.50)
018-500106	Overtime	\$	8,391.35	\$ 12,680.00	\$	21,071.35
020-500200	Consumable Supplies	\$	27,500.00	\$ 0.00	\$	27,500.00
030-500311	Equipment	\$	253,565.72	\$ 0.00	\$	253,565.72
040-500800	Indirect Costs	\$	4,659.19	\$ 1,871.00	\$	6,530.19
046-500465	Consultants	\$	164,921.00	\$ 0.00	\$	164,921.00
060-500602	Benefits	S	1,665.53	\$ 2,511.00	\$	4,176.53
080-500713	Out-of-State Travel	S	5,500.71	\$ 0.00	\$	5,500.71
	Total	<u></u>	466,203,50	\$ 17.062.00	\$	483.265.50

Explanation

This request to accept and expend funds from the Office of Highway Safety will enable the existing Data Analyst to retrieve and analyze Highway Safety related data (crashes, arrests, ticketing, etc.) that will identify highway safety problem areas or concerns. This data will 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 indirect costs on all eligible expenses.

Funds in class 060 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,

Department of Safety Highway Safety Equipment and Training Grants Fiscal Situation

02-23-23-234010-22110000

Federal Funds Awarded:		
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
FFY 2018 - DOS Forensic Lab PBT's - 7/1/18-9/30/2018		\$109,570.60
FFY 2018 - DOS Forensic Gas Cromatograph - 7/1/18-9/30/2018		\$180,565.00
FFY 2019 - DOS Data Analyst - 10/1/2018 - 9/30/2019		\$17,062.13
	Total Grant Funds Awarded	\$488,702.20
Less: SFY 2018 Expenditures		\$5,435.23
Less: SFY 2019 Current Adjusted Authorized		\$466,203.50
Remaining excess grant funds available to appropriate		\$17,063.47
This Request		\$17,062.00

OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT

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

Grant Agreement Title: NHSP Data Analysis

Grant Agreement #: 19-246

1. Identification and Definition	ons.				
1.1. State Agency Name New Hampshire Depa Office of Highway Saf	~		1.2. State Agency Address 33 Hazen Drive, Second Floor Concord, NH 03305		
1.3. Subrecipient Name NH Department of Safe Division of State Police	•	1.4. Subrecipient Address 33 Hazen Drive Concord, NH 03305			
Colonel's Email Address: .christopher.wagner@dos.n	h.gov	Grant Contact Email: christopher.wagner@dos	.nh.gov		
1.4.1 Subrecipient Type (St County Govt, College/Univ State		1.4.2 DUNS 060340564			
1.5. Subrecipient Phone #	1.6. Effective Date	1.7. Completion Date	1.8. Grant Limitation		
603-223-8813	October 1, 2018	September 30, 2019	117(05) 161 ×		
1.9. Grant Officer for State John A. Clegg	Agency	1.10. State Agency Teleph 603-271-2893	ione Number		
"By signing this form we ce grant, including if applicab	ertify that we have complied wit sie RSA 31:95-b.!!	th any public meeting requirer	ment for acceptance of this		
1.11. SübrechnionpSignatur	re 1	Colonel Christopher J. Wagne	1.12. Name & Title of Subrecipient Signor 1 Colonel Christopher J. Wagner		
- A		Director, NH State Police			
Subrecipient Signature 2	-	Name & Title of Subrecipler Robert L. Quinn DOS Assistant Commissioner	;		
Subrecipient Signature 3		Name & Title of Subrecipient Signor 3			
officer, personally appeared	ate of New Hampshire, County d the person(s) identified in bloc ned in block 1.11., and acknowl	ck 1.12., known to me (or satis	sfactorily proven) to be the		
1.13.1. Signature of Notary Peace (Seal)	Public or Justice of the	1.13.2 Name & Title of Notal Peace	ry Public or Justice of the		
1.14. State Agency Signat	ure(s) 1.15. Na	ame & Title of State Agency S	ignor(s)		
- Alack	John J. Barthelmes, Commissioner NH Department of Safety Date: 10/24/18				
1.16. Approval by Attorney	y General (Form, Substance and	d Execution) (if G & C approv	/al required)		
By:	By: Assistant Attorney General, On: / /				
1.17. Approval by Governo	r and Council (if applicable)		 .		
By:		On:	1 1		

Subrecipient Initials	 	
Page 1 of 3	Date	

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

I. Identification and Definition	ons.				
1.1. State Agency Name		1.2. State Agency Address			
New Hampshire Department of Safety Office of Highway Safety		33 Hazen Drive, Seco Concord, NH 03305	33 Hazen Drive, Second Ploor		
1.3. Subrecipient Name					
NH Department of Safe	ety	1.4. Subrecipient Address 33 Hazen Drive	3		
Division of State Police	•	Concord, NH 03305	Concord, NH 03305		
Chief's Email Address:		Grant Contact Email:			
Colonel Christopher J. Wa		Christopher.wagner@do	s.nh.gov		
1.4.1 Subrecipient Type (Si County Govt, College/Univ	tate Govt, City/Town Govt,	1.4.2 DUNS	·		
State	ersity, Other (Specity)	060340564			
1.5. Subrecipient Phone#	1.6. Effective Date	1.7. Completion Date	1.8. Grant Limitation		
603-223-8813	October 1, 2017	September 30, 2018	\$16,583.25		
1.9. Grant Officer for State		1.10. State Agency Teleph			
John Λ. Clegg		603-271-2893			
"By signing this form we ce grant, including if applicab	rtify that we have complied with le RSA 31:95-b."	h any public meeting require	ment for acceptance of this		
Subrecipient Signatur	re 1		1.12. Name & Title of Subrecipient Signor 1		
100		Colonel Christopher J. Wagner			
Subrecipient Signature 2		Director, NH State Police Name & Title of Subrecipier	et Signor 2		
Subrecipient Signature 2		Robert L. Quinn	r agaor z		
		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 sig-	the person(s) identified in blo ned in block 1.11., and acknow	ck 1.12., known to me (or satis ledged that he/she executed th	factorily proven) to be the is document in the capacity		
indicated in block 1.12.		· · · · · · · · · · · · · · · · · · ·			
1.13.1. Signature of Notary Peace (Seal)	Public or Justice of the	1.13.2 Name & Title of Notar Peace	y Public or Justice of the		
. 1 1d State Agency Cid	1 16 'N-	unia & Titla of State Again S	innor(s)		
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	l Execution) (if G & C approv	al required)		
Ву:	By: Assistant Attorney General, On: / /				
1.17. Approval by Governor and Council (if applicable)					
B		On:	/ /		
					

Subrecipient Initials		
Page 1 of 3	 Date	

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 Definition	DS.	······································			
1.1. State Agency Name New Hampshire Department of Safety Office of Highway Safety		1 2 -	1.2. State Agency Address 33 Hazen Drive, Second Ploor Concord, NII 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.waguer@dos	.nh.us		
1.4.1 Subrecipient Type (St County Govt, College/Univ State	ate Govt, City/Town Govt, ersity, Other (Specify)	1.A.2 DUNS 060340564			
1.5. Subrecipient Phone #	1.6. Effective Date	1.7. Completion Date	1.8. Grant Limitation		
603-223-3888	October 1, 2017	September 30, 2018	\$164,921.22		
1.9. Grant Officer for State John A. Clegg	Адерсу	1.10. State Agency Teleph 603-271-2893	one Number		
grant, including if applicab		h any public meeting requires	ment for acceptance of this		
1.11. Sabrec plent Signatu	re 1	1.12. Name & Title of Subrecipient Signor 1 Colonel Christopher J. Wagner Director, NH State Police			
Robert I		Name & Title of Subrecipler Robert L. Quinn DOS Assistant Commissioner			
Subrecipient Signature 3	_	Name & Title of Subrecipient Signor 3			
officer, personally appeared person(s) whose name is rig indicated in block 1.12.	ate of New Hampshire, County I the person(s) identified in bloomed in block 1.11., and acknow	k 1.12., known to me (or satis	, before the undersigned factorily proven) to be the is document in the capacity		
1.13.1. Signature of Notary Peace (Senl)	Public or Justice of the	1.13.2 Name & Title of Nota: Peace	ry Public or Justice of the		
1.14. State Agency Signat		me & Title of State Agency S	ignor(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 Governo	r and Council (if applicable)				
Ву:		On:	1 1		

Subrecipient Initials		 		
Page 1 of 3			Date	

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

Project Title: DOS Forensic Lab PBT's Project #: 308-18S-102

1. Identification and Definition	ons.				
1.1. State Agency Name New Hampshire Department of Safety Office of Highway Safety		1.2. State Agency Addres 33 Hazen Drive, Rooi Concord, NH 03305			
1.3. Subrecipient Name Department of Safety Division of State Police		1.4. Subrecipient Address 33 Hazen Drive Concord, NH 03305			
Chief's Email Address:		Grant Contact Email: Timothy.pifer@dos.nh.go	·		
1.4.1 Subrecipient Type (St County Govt, College/Univ State		1.4.2 DUNS 060340564			
1.5. Subrecipient Phone #	1.6. Effective Date	1.7. Completion Date	1.8. Grant Limitation		
603-223-3854	July 1, 2018	September 30, 2018	\$109,570.60		
1.9. Grant Officer for State John Clegg	Agency	1.10. State Agency Teleph 603-271-2893	one Number		
"By signing this form we ce grant, including if applicab		th any public meeting requirer	nent for acceptance of this		
1.11. Subrecipient Signatur): 1 }	1.12. Name & Title of Subrecipient Signor 1 Timothy J. Pifer, Forensic Laboratory Director			
Subrecipient Signature 2 Name & Title of Subrecipient Signor 2 Robert I. 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			y Public or Justice of the		
1.14. State Agency Signatu	rc(s) 1.15. Na	ame & Title of State Agency Si	gnor(s)		
John J. Barthelmes, Commissioner NH Department of Safety Date: 6/28/18					
1.16. Approval by Attorney	General (Form, Substance and	Execution) (if G & C approv	al required)		
Ву:	Sy: Assistant Attorney General, On: / /				
1.17. Approval by Governor and Council (if applicable)					
y: 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 TW Page 1 of 3 Date William Date

Rev. 04/2016

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

Project Title: DOS Forensic Lab Gas Chromatograph

Project #: 308-18S-103

Date __

1. Identification and Definition	ons.				
1.1. State Agency Name New Hampshire Depa Office of Highway Saf			1.2. State Agency Address 33 Hazen Drive, Room 109A Concord, NH 03305		
1.3. Subrecipient Name Department of Safety Division of State Police		1.4. Subrecipient Address 33 Hazen Drive Concord, NH 03305	,		
Chiel's Email Address:		Grant Contact Email:			
1.4.1 Subrecipient Type (St County Govt, College/Univ		1.4.2 DUNS 060340564			
1.5. Subrecipient Phone #	1.6. Effective Date	1.7. Completion Date	1.8. Grant Limitation		
603-223-3888	July 1, 2018	September 30, 2018	\$180,565.00		
1.9. Grant Officer for State John Clegg	Agency	1.10. State Agency Teleph 603-271-2131	one Number		
"By signing this form we ce grant, including if applicab	rtify that we have complied with	h any public meeting requires	nent for acceptance of this		
1.11. Subrecipient Signatur		1.12. Name & Title of Subrecipient Signor 1 Timothy J. Pifer, Forensic Laboratory Director			
Subrecipient Signature 2		Name & Title of Subrecipient Signor 2 Robert 1. Quinn, DOS Assistant Commissioner			
Subrecipient Signature 3		Name & Title of Subrecipient Signor 3			
officer, personally appeared	ate of New Hampshire, County I the person(s) identified in bloc ned in block 1.11., and acknowl	k 1.12., known to me (or satis	, before the undersigned factorily proven) to be the is document in the capacity		
1.13.1. Signature of Notary Peace (Seal)	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 Signate	ure(s) 1.15. Na	me & Title of State Agency Si	gnor(s)		
# Satlime		nn J. Barthelmes, Commission I Department of Safety	ner Date: <u>6/28//8</u>		
1.16. Approval by Attorney	General (Form, Substance and	Execution) (if G & C approv	al required)		
By:	Assi	stant Attorney General, On:			
1.17. Approval by Governor	r and Council (if applicable)				
By:		On:	1 1		
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

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