



State of New Hampshire

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

ROBERT L. QUINN
 COMMISSIONER OF SAFETY

September 23, 2019

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

Requested Action

Pursuant to RSA 14:30-a, VI, authorize the Department of Safety, Division of State Police, to accept and expend \$10,000.00 of federal funds from the Department of Safety, Office of Highway Safety that will be used by the Division of State Police to conduct patrols known as "Pedestrian Bicycle". Effective upon Governor and Council approval through September 30, 2020. Funding source: 100% Agency Income.

Funds are to be budgeted in the following account:

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	\$ (39,301.00)	\$ (10,000.00)	\$ (49,301.00)
018-500106	Overtime	\$ 4,496.00	\$ 6,838.00	\$ 11,334.00
037-500174	Technology - Hardware	\$ 3,900.00	\$ -	\$ 3,900.00
038-500177	Technology - Software	\$ 12,420.00	\$ -	\$ 12,420.00
040-500800	Indirect Cost	\$ 2,521.00	\$ 1,119.00	\$ 3,640.00
060-500602	Benefits	\$ 899.00	\$ 2,043.00	\$ 2,942.00
066-500554	Employee Training	\$ 1,500.00	\$ -	\$ 1,500.00
080-500713	Out-of-State Travel	\$ 13,565.00	\$ -	\$ 13,565.00
	Total	\$ 39,301.00	\$ 10,000.00	\$ 49,301.00

Explanation

These funds will be used by the State Police to conduct specialized enforcement patrols of laws related to the operation of non-motorized vehicles and safe pedestrian interactions with the motoring public. In order to have the greatest impact, law enforcement agencies will conduct these patrols at locations and during times that the local crash data indicates there is an increased risk of unsafe behavior.

Funds are to be budgeted as follows:

Funds in Class 18 are needed to pay the overtime for details as approved by the authorizing Federal Agency.

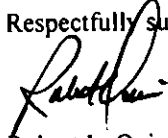
Funds in Class 40 are needed to pay the indirect cost on the remaining appropriations.

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
September 23, 2019
Page 2 of 2

Funds in class 60 are needed to pay for benefits associated with the overtime for the details as approved by the approving Federal Agency.

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

Respectfully submitted,



Robert L. Quinn
Commissioner of Safety

Department of Safety
Highway Safety Equipment and Training Grants
Fiscal Situation

02-23-23-234010-22110000

Federal Funds Awarded:

FFY 2019 - DOS Data Analyst - 10/1/2018 - 9/30/2019	\$17,062.13
FFY 2019 - DOS Forensic laboratory Equipment Training - 2/1/2019-9/30/2019	\$21,998.97
FFY 2019 - CAR Equipment - 8/14/2019-9/30/2019	\$16,320.00
FFY 2020 - Pedestrian Bicycle - 10/1/2019 - 9/30/2020	\$10,000.00
Total Grant Funds Awarded	<u>\$65,381.10</u>

Less: SFY 2019 Expenditures	\$16,078.79
Less: SFY 2020 Current Adjusted Authorized	\$39,301.00

Remaining excess grant funds available to appropriate **\$10,001.31**

This Request **\$10,000.00**

FFY2020 OHS Grant Award


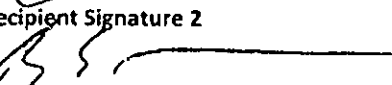
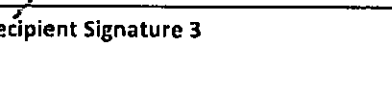
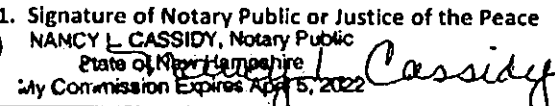
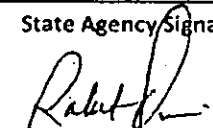
Project Titles	Federal Budget	Minimum Match Required
ENFORCEMENT PATROLS PSP & Task 20-02-04 FAST Act 405d (Flexed) FAIN Number (Subaward): 69A3751830000405dNHL, 69A3751930000405dNHL, 69A3752030000405dNHL CFDA: 20.616	\$185,000.00	\$46,250.00
DUI ENFORCEMENT PSP & Task 20-07-04 FAST Act 405d FAIN Number (Subaward): 69A3751830000405dNHL, 69A3751930000405dNHL, 69A3752030000405dNHL CFDA: 20.616	\$450,000.00	\$112,500.00
DISTRACTED DRIVING PSP & Task 20-04-04 FAST Act 405d (Flexed) FAIN Number (Subaward): 69A3751830000405dNHL, 69A3751930000405dNHL, 69A3752030000405dNHL CFDA: 20.616	\$95,200.00	\$23,800.00
PEDESTRIAN BICYCLE PSP & Task 20-06-04 FAST Act 405h FAIN Number (Subaward): 69A3751830000405hNH0 CFDA: 20.616	\$10,000.00 *	\$2,500.00
OPERATION SAFE COMMUTE PSP & Task 20-02-11 FAST Act 405d (Flexed) FAIN Number (Subaward): 69A3751830000405dNHL, 69A3751930000405dNHL, 69A3752030000405dNHL CFDA: 20.616	\$55,000.00	\$13,750.00
JOIN THE NH CLIQUE PSP & Task 20-01-04 FAST Act 405d (Flexed) FAIN Number (Subaward): 69A3751830000405dNHL, 69A3751930000405dNHL, 69A3752030000405dNHL CFDA: 20.616	\$14,450.00	\$3,612.50
DRIVE SOBER OR GET PULLED OVER PSP & Task 20-07-11 FAST Act 405d FAIN Number (Subaward): 69A3751830000405dNHL, 69A3751930000405dNHL, 69A3752030000405dNHL CFDA: 20.616	\$30,000.00	\$7,500.00
U DRIVE, U TEXT, U PAY PSP & Task 20-04-11 FAST Act 405d (Flexed) FAIN Number (Subaward): 69A3751830000405dNHL, 69A3751930000405dNHL, 69A3752030000405dNHL CFDA: 20.616	\$9,100.00	\$2,275.00
J-One VPN Installation Assistance PSP & Task 20-03-06 FAST Act 405c FAIN Number (Subaward): 18X920405cNH17, 69A3751830000405cNH0, 69A3751930000405cNH1, 69A3752030000405cNH1 CFDA: 20.616	\$176,000.00	\$44,000.00
C.A.R Equipment Training PSP & Task 20-03-06 FAST Act 405c FAIN Number (Subaward): 18X920405cNH17, 69A3751830000405cNH0, 69A3751930000405cNH1, 69A3752030000405cNH1 CFDA: 20.616	\$25,000.00	\$6,250.00
Data Analysis PSP & Task 20-03-08 FAST Act 405c FAIN Number (Subaward): 18X920405cNH17, 69A3751830000405cNH0, 69A3751930000405cNH1, 69A3752030000405cNH1 CFDA: 20.616	\$17,100.00	\$4,275.00
Total (Project Cost is 80% Federal Funds, 20% Applicant Share)	\$1,066,850.00 *	\$266,712.50

OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT FFY2020

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

Grant Agreement Title: New Hampshire State Police - Highway Safety Grant
Identification and Definitions.

Grant Agreement #: 20-246

1.1. State Agency Name New Hampshire Department of Safety Office of Highway Safety		1.2. State Agency Address 33 Hazen Drive, 2 nd Floor Concord, NH 03305	
1.3. Subrecipient Name Department of Safety Division of State Police		1.4. Subrecipient Legal Address 33 Hazen Drive Concord, NH 03305	
State Police Director's Name: Christopher Wagner Grant Contact Name: Colonel Christopher Wagner		State Police Director's / Grant Contact's email: <u>Christopher.wagner@dos.nh.gov</u>	
1.4.1 Subrecipient Type State Government		1.4.2 DUNS 060340564	
1.5. Subrecipient Phone # 603-223-4381	1.6. Grant Period Start Date 10/01/19	1.7. Completion Date 09/30/20	1.8. Grant Limitation \$1,066,850.00 *
1.9. Grant Officer for State Agency John Clegg		1.10. State Agency Telephone Number 603-271-2131	
"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 Perry E. Plummer DOS Assistant Commissioner	
Subrecipient Signature 3 		Name & Title of Subrecipient Signor 3	
1.13. Acknowledgment: State of New Hampshire, County of Merrimack on 8/26/19, 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) NANCY L. CASSIDY, Notary Public State of New Hampshire My Commission Expires April 5, 2022 		1.13.2 Name & Title of Notary Public or Justice of the Peace NANCY L. CASSIDY	
1.14. State Agency Signature(s) 		1.15. Name & Title of State Agency Signor(s) Robert L. Quinn, Commissioner NH Department of Safety Date: 8/27/19	
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: / /			

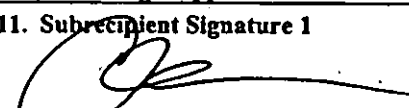
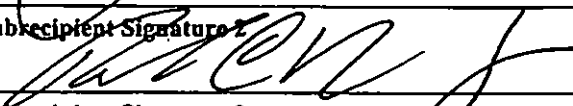
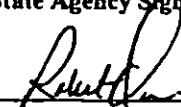
2. **SCOPE OF WORK** In exchange for grant funds provided by the State of New Hampshire, acting through the Agency identified in block 1.1 (hereinafter referred to as "the State"), pursuant to RSA 21-P:55-63, the Subrecipient identified in block 1.3 (hereinafter referred to as "the Subrecipient"), shall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

Grant Agreement Title: **NHSP C.A.R. Equipment Highway Safety Grant** Grant Agreement #: **19-246**

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, 2 nd Floor 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: N/A		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 Government		1.4.2 DUNS 060340564	
1.5. Subrecipient Phone # 603-223-4381	1.6. Effective Date 5/01/19	1.7. Completion Date 09/30/19	1.8. Grant Limitation (\$16,320,000)
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 Richard Bailey Jr., 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) Robert L. Quinn, Commissioner NH Department of Safety Date: <u>5/16/19</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").

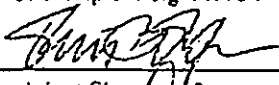
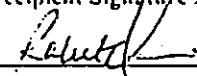
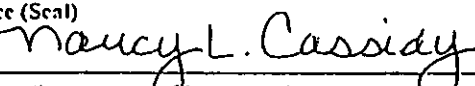
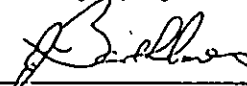
OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT

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

Grant Agreement Title: **DOS Forensic Laboratory Equipment Training**

Grant Agreement #: **19-247**

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	
Colonel's Email Address: christopher.wagner@dos.nh.gov		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 February 1, 2019	1.7. Completion Date September 30, 2019	1.8. Grant Limitation 2/1/2019
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 Timothy J. Pifer Director, Forensic Laboratory	
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 MERRIMACK , on 02/15/19 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 of Notary Public, or Justice of the Peace NANCY L. CASSIDY, NOTARY PUBLIC State of New Hampshire My Commission Expires April 5, 2022	
1.14. State Agency Signature(s) 		1.15. Name & Title of State Agency Signor(s) John J. Barthelmes, Commissioner NH Department of Safety Date: 2/15/19	
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: / /			

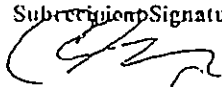
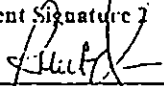
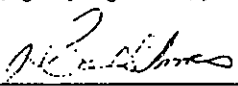
OFFICE OF HIGHWAY SAFETY GRANT AGREEMENT

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

Grant Agreement Title: NHSP Data Analysis

Grant Agreement #: 19-246

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	
Colonel's Email Address: christopher.wagner@dos.nh.gov		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, 2018	1.7. Completion Date September 30, 2019	1.8. Grant Limitation 10/24/19
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: 10/24/19	
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: / /			