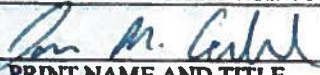



STATE OF NEW MEXICO RMP – COOPERATOR ENGINE RATE SHEET

1. ORDERING OFFICE/ADMINISTRATIVE OFFICE FOR PAYMENT (name and address)		AGREEMENT NUMBER MUST APPEAR ON ALL PAPERS RELATING TO THIS RATE SHEET		
EMRD-FORESTRY DIVISION BERNALILLO DISTRICT 5105 SANTA FE HILLS BLVD NE RIO RANCHO, NM 87144		2. AGREEMENT NUMBER JPA 10-521-2300-005		
		3. EFFECTIVE DATES a. Beginning Jan 1, 2018 b. Ending Dec 31, 2018		
4. COOPERATOR (name and address) McKinley County PO Box 70 413 Bataan Veterans Street Gallup NM, 87301 (office) 505-863-3839 (fax) 505-863-1439 b. TIN: 85-6000234		5. I-SUITE CODING Equipment Agency-NM Personnel Agency-NM Employment Code-Other		
c. Telephone Number (day) 505-863-3839		d. Telephone Number (night) 505-801-0811		
		6. THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES FURNISHED BY <input type="checkbox"/> COOPERATOR <input checked="" type="checkbox"/> GOVERNMENT		
		7. WORK RATE IN BOX 11 & 12 <input type="checkbox"/> STAFFED RATE <input type="checkbox"/> UNSTAFFED RATE		
8. TYPE OF COOPERATOR ("X" appropriate boxes) <input type="checkbox"/> MUNICIPAL <input checked="" type="checkbox"/> COUNTY McKinley County				
9. ITEM DESCRIPTION (include make, model, year, G- Plate, VIN, and accessories)	10. NUMBER OF OPERATORS	11. WORK-OR DAILY a. rate b. unit		12. SPECIAL c. rate d. unit
a. Type 5 Engine Unit# 645 2016 Dodge/RD2 w/CAFS VIN# 3C7WJ2BL4PG706321 Plated G-97610	2-3	181.00 HR		1012.00
b.				
c.				
d.				
e.				
14. SPECIAL PROVISIONS Operator(s) will be furnished by the cooperator and work rate includes personnel. Guarantee for each calendar day that equipment is under hire payment will be made for a minimum of at least 8 hours. For the first and last day payment will be based on actual hours worked and travel, the guarantee will not apply. Fuel surcharge beginning and ending mileage will be documented daily on the Emergency Equipment Shift Ticket(s). If the daily total exceeds 50 miles then miles exceeding 50 will be compensated at a rate of .43/mile. Finance Section will collect and post Emergency Shift Ticket(s) for equipment for each operational period. Upon checkout/demobilization cooperator will receive all original Emergency Shift Ticket(s), OF-286 Emergency Equipment Use Invoice(s) and copies of Pre-Use and Release Inspections.				
15. FISCAL OR AUTHORIZED AGENT'S SIGNATURE		16. DATE	17. FORESTRY DIVISION AUTHORIZED SIGNATURE	18. DATE
		4/21/2018		5/2/18
19. PRINT NAME AND TITLE			20. PRINT NAME AND TITLE	
Rich Austin Deputy Fire Chief			Todd Haines-District Forester	

STATE OF NEW MEXICO RMP – COOPERATOR WATER TENDER RATE SHEET

1. ORDERING OFFICE/ADMINISTRATIVE OFFICE FOR PAYMENT (name and address)		AGREEMENT NUMBER MUST APPEAR ON ALL PAPERS RELATING TO THIS RATE SHEET				
EMNRD-FORESTRY DIVISION BERNALILLO DISTRICT 5105 SANTA FE HILLS BLVD NE RIO RANCHO, NM 87144 PHONE 505-867-2334 FAX 505-867-2225		2. AGREEMENT NUMBER		10-521-2300-005		
		JPA				
4. COOPERATOR (name and address) MCKINLEY COUNTY PO Box 70 413 BATAAN VETERANS STREET GALLUP, NM 87301 (Office) 505-863-3839 (Fax) 505-863-1439		3. EFFECTIVE DATES				
		a. Beginning Jan 1, 2018		b. Ending Dec 31, 2018		
b. TIN: 85-6000234		5. I-SUITE CODING Equipment Agency-NM Personnel Agency-NM Employment Code- Other				
		6. THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES FURNISHED BY <input type="checkbox"/> COOPERATOR <input checked="" type="checkbox"/> GOVERNMENT				
c. Telephone Number (day)	d. Telephone Number (night)	7. WORK RATE IN BOX 11 & 12				
505-863-3839	505-801-0811	<input checked="" type="checkbox"/> STAFFED RATE <input type="checkbox"/> UNSTAFFED RATE				
8. TYPE OF COOPERATOR ("X" appropriate boxes) <input type="checkbox"/> MUNICIPAL <input checked="" type="checkbox"/> COUNTY McKinley County						
9. ITEM DESCRIPTION (include make, model, year, G- Plate, VIN, and accessories)	10. NUMBER OF OPERATORS	11. WORK OR DAILY		12. SPECIAL		13. GUARANTEE (8 or more hours)
		a. rate	b. unit	c. rate	d. unit	
a. T2 Tender, Support T423 2014 Freightliner Lic G-92307 Vin# 1HTWEAZR2FH072026	2	115.50	Hourly			656.00
b. Type 2 Tender, Support 1999 Freightliner Unit# T513 Lic# G-42833 Vin# 1FV6JLCB8XHB02882	2	115.50	Hourly			656.00
c. Type 2 Tender, Support T623 2015 Freightliner Lic G-97139 Vin# 2NP3JJ8X8GM351472	2	115.50	Hourly			656.00
14. SPECIAL PROVISIONS						
Operator(s) will be furnished by the cooperator and work rate includes personnel.						
Guarantee For each calendar day that equipment is under hire payment will be made for a minimum of at least 8 hours. For the 1st and last day payment will be based on actual hours worked and travel, the guarantee will not apply.						
Fuel surcharge beginning and ending mileage will be documented daily on the Emergency Equipment Shift Ticket(s), if the daily total exceeds 50 miles then miles exceeding 50 will be compensated at a rate of .43 cents a mile.						
Finance Section will collect and post Emergency Equipment Shift Ticket(s) for equipment for each operational period. Upon checkout/demobilization cooperator will receive all original Emergency Equipment Shift Ticket(s), OF-286 Emergency Equipment Use Invoice(s) and copies of Pre-Use and Release Inspections						
15. FISCAL OR AUTHORIZED AGENT'S SIGNATURE		16. DATE	17. FORESTRY DIVISION AUTHORIZED SIGNATURE		18. DATE	
		3/26/2018			5/2/18	
19. PRINT NAME AND TITLE			20. PRINT NAME AND TITLE			
Jason Carlisle Fire Chief			Todd Haines- District Forester			

STATE OF NEW MEXICO RMP – COOPERATOR AMBULANCE RATE SHEET

1. ORDERING OFFICE/ADMINISTRATIVE OFFICE FOR PAYMENT (name and address) EMNRD-FORESTRY DIVISION BERNALILLO DISTRICT 5105 SANTA FE HILLS BLVD NE RIO RANCHO, NM 87144 PHONE 505-867-2334 FAX 505-867-2225		AGREEMENT NUMBER MUST APPEAR ON ALL PAPERS RELATING TO THIS RATE SHEET 2. AGREEMENT NUMBER JPA 10-521-2300-0005 3. EFFECTIVE DATES a. Beginning January 1, 2018 b. Ending December 31, 2018				
4. COOPERATOR (name and address) McKinley County PO Box 70 413 Bataan Memorial Drive Gallup, NM 87301 Office: (505) 863-3839 Fax: (505) 863-1439 B. TIN : 85-6000234		5. I-SUITE CODING EQUIPMENT AGENCY - NM PERSONNEL AGENCY - NM EMPLOYMENT CODE OTHER 6. THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES FURNISHED BY <input type="checkbox"/> COOPERATOR <input checked="" type="checkbox"/> GOVERNMENT				
c. Telephone Number (day) (505) 863-3839	d. Telephone Number (night) (505) 801-0811	7. WORK RATE IN BOX 11 & 12 <input type="checkbox"/> STAFFED RATE <input checked="" type="checkbox"/> UNSTAFFED RATE				
8. TYPE OF COOPERATOR ("X" appropriate boxes) <input type="checkbox"/> MUNICIPAL <input checked="" type="checkbox"/> COUNTY						
9. ITEM DESCRIPTION (include make, model, year, G- Plate, VIN, and accessories)	10. NUMBER OF OPERATORS	11. WORK OR DAILY		12. SPECIAL		13. GUARANTEE (8 or more hours)
		a. rate	b. unit	c. rate	d. unit	
A. Ambulance 2014 Chevy/ Braun 3500 4x4 Vin #1GB3K0CGXEF14002 License # G- 91150 R427	2	\$99.00	Hour			\$792.00
B. Command 2012 Ford Expedition Vin #1FC License # G- 88007 RR 1	2	\$49.00	Hour	.43	Mile	NONE

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14. SPECIAL PROVISIONS



Personnel will consist of a minimum of 1 ALS and 1 BLS or high qualified individual. If 24 hour coverage is ordered/needed a Command Vehicle will be ordered with 2 additional personnel a minimum of 1 ALS and 1 BLS or higher qualified individual.

Operators will be furnished by the cooperater and rate will be reimbursed based on hours worked at the incident, at the employees regular pay rate, including overtime and benefits.

Guarantee For each calendar day that equipment is under hire payment will be made for a minimum guarantee of at least 8 hrs. For the 1st and last day payment will be based on actual hours worked and travel, the guarantee will not apply.

Fuel surcharge beginning and ending mileage will be documented daily on the Emergency Equipment Shift Ticket(s), if the daily total exceeds 50 miles then miles exceeding 50 will be compensated at a rate of .43 a mile.

Finance Section will collect and post CTR's for Personnel and Emergency Equipment Shift Tickets for equipment for each operational period. Upon checkout/demobilization cooperater will receive all original CTR's, Emergency Equipment Shift Tickets, OF-288 Firefighter Time Report(s) and OF-286 Emergency Equipment Rental Invoice(s).

15. FISCAL OR AUTHORIZED AGENT'S SIGNATURE	16. DATE	17. FORESTRY DIVISION AUTHORIZED SIGNATURE	18. DATE
			6/11/18
19. PRINT NAME AND TITLE Rich Austin – Deputy Fire Chief		20. PRINT NAME AND TITLE TODD HAINES – DISTRICT FORESTER	

AMBULANCE



McKinley County Fire & EMS



Anthony Dimas Jr.
County Manager

413 Bataan Memorial Drive • PO Box 5210
Gallup, NM 87305
(505) 863-3839 office • (505) 863-1439 fax

Jason M. Carlisle
Fire Chief

March 27, 2018

Robert K. Brown
Fire Management Officer
Bernalillo District, New Mexico State Forestry
5105 Santa Fe Hills Blvd NE
Rio Rancho, NM 87144

Dear Mr. Brown,

I understand that personnel from McKinley County Fire & EMS are on the list of resources that may be deployed in-state or nationally under the Resource Mobilization Plan (RMP).

When McKinley County Fire & EMS personnel are deployed in-state or nationally under the RMP, I authorize them to function as EMS providers so long as the following conditions are met:

- They are currently licensed by and in good standing with the New Mexico EMS Bureau.
- They provide services within their level of licensure as defined by the New Mexico scopes of practice for EMS personnel.
- The work within the McKinley County Fire & EMS Treatment Guidelines.
- They work within guidelines established by the existing incident management and qualification systems.

Please direct any questions to McKinley County Fire & EMS's EMS Coordinator, Tim Berry. You can reach Chief Berry directly by email at tberry@co.mckinley.nm.us or at 505-863-3839.

Sincerely,

Richard Kruis, MD
Medical Director