

ALBANY COUNTY SHERIFF'S OFFICE

County Court House Albany, New York 12207 (518) 487-5400 <u>WWW.ALBANYCOUNTYSHERIFF.COM</u>

CRAIG D. APPLE, SR. SHERIFF



WILLIAM M. RICE UNDERSHERIFF

LEON A. BORMANN CHIEF DEPUTY

SHAWN P. NOONAN

EXECUTIVE UNDERSHERIFF

CHIEF DEPUTY

October 27, 2020

Honorable Andrew Joyce Legislative Clerk's Office 112 State Street, Room 710 Albany, New York 12207

Dear Mr. Joyce:

The attached correspondence is forwarded for presentation to the Albany County Legislature.

Legislative approval is required in order to allow Albany County to apply for a grant with the State of New York, Division of Criminal Justice Services, for the 2020/21 Livescan Equipment Grant.

The grant award for the Albany County Sheriff's Office is anticipated to be \$34,327.50, with a match of \$8,583.01. These grant funds will be utilized to upgrade the six Livescan fingerprint systems for the Sheriff's Office.

This project is valid for 12 months starting no sooner than 12/01/20.

Should there be any questions, please do not hesitate to call.

ncerely.

Cc: Hon. Daniel P. McCoy, County Executive Hon. William Clay, Public Safety Chairman

Hon. Wanda Willingham, Audit & Finance Committee

Brandon Russell, Esq., Majority Counsel

Arnis Zilgme, Esq., Minority Counsel

Christian Barnes, Minority Conference

FOR COUNSEL USE ONLY DATE: 1 RECEIVED: RECEIVED BY: REQUEST FOR LEGISLATIVE ACTION METHOD: HAND COURIER MAIL **OCTOBER 28, 2020** DATE: **DEPARTMENT:** ALBANY COUNTY SHERIFF'S DEPT **CRAIG D APPLE SR** CONTACT PERSON: 487-5440 TELEPHONE: DEPT. REPRESENTATIVE ATTENDING SHERIFF CRAIG D APPLE SR COMMITTEE MEETING: **PURPOSE OF REQUEST:** ADOPTION OF LOCAL LAW AMENDMENT OF PRIOR LEGISLATION APPROVAL/ADOPTION OF PLAN/PROCEDURE BOND APPROVAL BUDGET AMENDMENT(SEE BELOW) CONTRACT AUTHORIZATION (SEE BELOW) **ENVIRONMENTAL IMPACT** HOME RULE REQUEST PROPERTY CONVEYANCE OTHER: (STATE BRIEFLY IF NOT LISTED ABOVE) TO APPLY FOR THE 2020/2021 LIVESCAN EQUIPMENT GRANT BEING OFFERED BY THE STATE OF NEW YORK, DIVISION OF CRIMINAL JUSTICE SERVICES. **CONCERNING BUDGET AMENDMENTS** STATE, THE FOLLOWING INCREASE ACCOUNT/LINE NO. SOURCE OF FUNDS: TITLE CHANGE: CONCERNING CONTRACT AUTHORIZATION, STATE THE FOLLOWING: TYPE OF CONTRACT CHANGE ORDER/CONTRACT AMENDMENT PURCHASE (EQUIPMENT/ SUPPLIES) LEASE (EQUIPMENT/SUPPLIES) -REQUIREMENTS PROFESSIONAL SERVICES **EDUCATIONAL/TRAINING** GRANT: NEW Х RENEWAL 10/28/2020 SUBMISSION DEADLINE DATE SETTLEMENT OF A CLAIM

RELEASE OF LIABILITY OTHER: (STATE BRIEFLY)

TATE THE FOLLOW	NG:				
CONTRACT TERMS	/CONDITIONS:	PARTY (NAME/ADDRESS):			
	STATE OF NEW YORK	•		ATT	
	DIVISION OF CRIMINAL	JUSTICE SERVICES			
	ALBANY, NY 12210		***		
	AMOUNT/RATE SCHED	NII E/EEE			
			. ¢24 227 E0	TOTAL	
		WITH A \$8,583.01 CASH MATCH =			
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	SYSTEMS USED BY TH	E USED TO UPGRADE THE SIX LIV	ESCAN FIN	GERFR	1141
CONTRACT FUNDIN		IE SHERIFF 3 OFFICE			
CONTRACT FUNDIN	ANTICIPATED IN CURR	RENT BUDGET: YES		NO	X
	FUNDING SOURCE:	NYS, DCJS		_''	
	FUNDING SOUNCE.	N13, DC33			
	COUNTY BUDGET ACC	COLINTS			
	REVENUE:	ONIO.			
	INEVENUE.				
	APPROPRIATION:				
	BOND(RES. NO. & DAT	E OF ADOPTION)			
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IF MANDATED CITE	AUTHORITY	•			
ANTICIPATED IN CU	RRENT ADOPTED BUDG	ET: YES		NO	X
IF YES, INDICATE R	EVENUE APPROPRIATIO	N ACCOUNTS:			
FISCAL IMPACT - FU	JNDING:	(DOLLARS OR PERCENTAGES)			
STATE		-			
COUNTY		•			
TERM/LENGTH OF F	UNDING	12 MONTHS			
			(2)		
PREVIOUS REQUES	TS FOR IDENTICAL OR	SIMILAR ACTION:			
RESOLUTION/LAW I	NUMBER:				
DATE OF ADOPTION	J;				
		P.			
JUSTIFICATION:		LEGISLATIVE ACTION IS REQUES	TED)		
HIS GRANT WILL F	IELP WITH UPGRADES T	O OUR LIVESCAN EQUIPMENT			
		(I.E. APPLICATION/APPROVAL N			
		PROVAL NOTICE, PROGRAM ANN			
AND/OR ANY MATER	RIALS WHICH EXPLAIN O	R SUPPORT THE REQUEST FOR	LEGISLATIV	'E ACTIO	JN.)
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SUBMITTED BY: FITLE:	CRAIG D APPLE SR SHERIFF				



REQUEST FOR PROPOSALS (RFP) SFY 2020-21 LIVESCAN Equipment Program – Issued September 2020

KEY DATES AND NOTICES:

Release Date of RFP:

Wednesday, September 23, 2020

Submission Deadline:

Wednesday, October 28, 2020 by Noon

Estimated Total Program Funding:

\$2.8 million

Deadline for Final Submission of Questions

Regarding this RFP:

Friday, October 2, 2020

Response to Questions Regarding this RFP

Posted:

On or about October 9, 2020

Notification of Award(s):

On or about November 18, 2020

Anticipated Contract Start Date:

December 1, 2020

- Proposals must be received by the submission deadline on-line via the DCJS Grants Management System (GMS). Applicants who are not registered to access GMS will need to obtain user access to respond to this Solicitation. See Appendix: DCJS Grants Management System (GMS) Instructions and Helpful Hints.
- 2. Questions regarding this RFP must be emailed to <u>dcjsfunding@dcjs.ny.gov</u>, with Livescan as the subject. Responses to the questions will be posted on the DCJS website at http://www.criminaljustice.ny.gov/ofpa/index.htm on or about date indicated above. If the applicant has any general questions such as, "Did DCJS receive my e-mail?" please call (518) 457-9787. Please note that DCJS cannot answer substantive questions concerning this solicitation in any manner other than the e-mail method.
- 3. Applicants will be advised of award decisions via a letter of notification, which will be emailed to the address provided by the applicant in GMS. Applicants not receiving an award will receive notification emailed to the address provided by the applicant in GMS. A debriefing is available to any entity that submitted an application in response to this solicitation who is not successful in receiving an award. (See Section: Notification of Awards.)
- 4. There is a 25% cash match requirement for this program.
- 5. Unless otherwise modified by DCJS, the contract period for this grant opportunity will be 12 months, starting no earlier than December 1, 2020.

Project	E	LS20-1089-E00 t: Albany Count	Livesca:	n Equipme	nt Program	2020 Proj	ect Status:	Application F	Received	
Home	General	Participants	Budget	Work Plan	Questi	ons Acc	eptance	Contract Ch	ecklist	
Search Open	Please enter budget information. If you are requesting an advance, please enter the amount requested and the justification, then save the screen before proceeding. You may edit the Advance if necessary at a later time. Enter budget information by participant. If you will only be operating with one budget, please enter the budget for the									
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Site Review	Participant Albany Cou			Grant Fun	ds	Matcl	ning Funds	Total		
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Reports				75.009			5.00% \$8	8,583.01 \$	34,327.50	
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Version 4.1.6		unty Sheriffs Offic Edit (Click here to		nes to budge	et categories	s)				
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Version 1 Total	Total Cost	Grant Funds	Matching	Funds	
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