

The Board of Supervisors met on 8/13/19 at 10:09 a.m. in the Story County Administration Building. Members present: Linda Murken and Lauris Olson, with Murken presiding. Lisa Heddens absent. (all audio of meetings available at storycountyiowa.gov)

ADOPTION OF AGENDA: Olson moved, Murken seconded the approval of the agenda as listed. Motion carried unanimously (MCU) on a roll call vote.

MINUTES: 8/6/19 Minutes and 8/8/19 Canvass Minutes – Olson moved, Murken seconded the approval of Minutes as presented. Roll call vote. (MCU)

PERSONNEL ACTIONS: 1) new hire, effective 8/14/19, in Sheriff's Office for Stephanie Norris @ \$1,645.60/bw; 2) pay adjustment, effective 8/18/19, in a) Attorney's Office for Benjamin Matchan @ \$2,816.31/bw; b) Auditor's Office for Michelle Bellile @ \$20.81/hr; c) Facilities Management for Shelley Grimard @ \$19.67/hr; d) Planning and Development for Jerry Moore @ \$3,240.00/bw; e) Secondary Roads for Roger Holland @ \$30.69/hr; f) Sheriff's Office for Molly Feildman @ \$1,825.60/bw; Nathan Gruis @ \$2,138.40/bw; Benjamin Boelkes @ \$2,834.80/bw; g) Treasurer's Office for Jennifer DeVries @ \$21.12/hr; effective 9/15/19, in a) Environmental Health for Margaret Jaynes @ \$3,349.39/bw.

Olson moved, Murken seconded the approval of Personnel Actions as presented. Roll call vote. (MCU)

Olson moved, Murken seconded approval of the Consent Agenda as listed.

1. Additional lease contract between Marco Printing and Information Technology for print services for the Auditor's Office, effective 8/1/19, for \$46.00 a month
2. Memorandum of Understanding between the City of Ames and Story County to apply jointly to the Justice Assistance Grant Program for grant funding of up to \$12,728.00 with Ames designated as fiscal agent
3. Resolution #20-01, Setting a Date and Time for Public Hearing for 8/20/19, for First Consideration of Ordinance No. 284 Amending Certain Boundaries of the Official Zoning Map of Story County Iowa – Roland Veterinary Clinic Rezoning and Resolution #20-02 Cornerstone to Capstone (C2C) Future Land Use Map Amendment
4. Resolution #20-03, Setting a Date and Time for Public Hearing for 8/20/19, for First Consideration of Ordinance No. 285 Amending Chapter 88.05, General Site Planning Standards, and Chapter 85, Definitions, in the Story County Land Development Regulations for storm water management, erosion and sediment control
5. Renewal fees between Story County and NEOGOV for Insight Enterprise Software License, effective 10/9/19-10/8/20, for \$7,631.06

Roll call vote. (MCU)

Olson moved, Murken seconded to adjourn at 10:11 a.m. Roll call vote. (MCU)

Story County
Board of Supervisors Meeting
Tentative Agenda
8/13/19

1. CALL TO ORDER: 10:00 A.M.
2. PLEDGE OF ALLEGIANCE:
3. ADOPTION OF AGENDA:
4. PUBLIC COMMENT #1:
This comment period is for the public to address topics on today's agenda
5. CONSIDERATION OF MINUTES:
 - I. 8/6/19 Minutes & 8/8/19 Canvass Minutes

Department Submitting Auditor

6. CONSIDERATION OF PERSONNEL ACTIONS:
 - I. Action Forms

1)new hire, effective 8/14/19, in Sheriff's Office for Stephanie Norris @ \$1,645.60/bw;
2)pay adjustment, effective 8/18/19, in a)Attorney's Office for Benjamin Matchan @ \$2,816.31/bw; b)Auditor's Office for Michelle Bellile @ \$20.81/hr; c)Facilities Management for Shelley Grimard @ \$19.67/hr; d)Planning and Development for Jerry Moore @ \$3,240.00/bw; e)Secondary Roads for Roger Holland @ \$30.69/hr; f)Sheriff's Office for Molly Feildman @ \$1,825.60/bw; Nathan Gruis @ \$2,138.40/bw; Benjamin Boelkes @ \$2,834.80/bw; g)Treasurer's Office for Jennifer DeVries @ \$21.12/hr; effective 9/15/19, in a)Environmental Health for Margaret Jaynes @ \$3,349.39/bw.

Department Submitting HR

7. CONSENT AGENDA:
(All items listed under the consent agenda will be enacted by one motion. There will be no separate discussion of these items unless a request is made prior to the time the Board votes on the motion.)

- I. Consideration Of Additional Lease Contract Between Marco Printing And Information Technology For Print Services For Story County Auditor Effective 8/1/19 For \$46.00/Mo

Department Submitting Information Technology

Documents:

MARCO COPIER CONTRACT AUG 2019.PDF

- II. Consideration Of MOU Between The City Of Ames, Story County And The Justice Assistance Grant Program For \$12,728.00

Department Submitting Sheriff

Documents:

JAG MOU.PDF

- III. Consideration Of Resolution #20-01, Setting A Date And Time For Public Hearing For August 20, 2019, For First Consideration Of Ordinance #284 Amending Certain Boundaries Of The Official Zoning Map Of Story County Iowa – Roland Veterinary Clinic Rezoning And Resolution #20-02 C2C Future Land Use Map Amendment Consent

Department Submitting Planning and Development

Documents:

RESOLUTION 20 01.PDF

- IV. Consideration Of Resolution #20-03, Setting A Date And Time For Public Hearing For August 20, 2019, For First Consideration Of Ordinance #285 Amending Chapter 88.05, General Site Planning Standards, And Chapter 85, Definitions, In The Story County Land Development Regulations For Stormwater Management, Erosion And Sediment Control

Department Submitting Planning and Development

Documents:

RESOLUTION 20 03.PDF

- V. Consideration Of Renewal Fees Between Story County And NEOGOV For Insight Enterprise Software License Effective 10/9/2019 - 10/8/2020 For \$7,631.06

Department Submitting Information Technology

Documents:

INSIGHT ENTERPRISE SOFTWARE LICENSE RENEWAL.PDF

8. UPCOMING AGENDA ITEMS:
9. PUBLIC FORUM #2:
Comments from the Public on Items not on this Agenda. The Board may not take any Action on the Comments due to the Requirements of the Open Meetings Law, but May Do So In the Future.
10. LIAISON ASSIGNMENTS, COMMITTEE MEETINGS UPDATES, AND ANNOUNCEMENTS FROM THE SUPERVISORS:
11. ADJOURNMENT:

Story County strives to ensure that its programs and activities do not discriminate on the basis of race, color, national origin, sex, age or disability. Persons requiring assistance, auxiliary aids or services, or accommodation because of a disability may contact the county's ADA coordinator at (515) 382-7204.



STATE AND LOCAL GOVERNMENT ADDENDUM

AGREEMENT NO. 1479533

Phone: 800.892.8548 | Fax: 800.847.3087

Addendum to Agreement # _____ and any future supplements/schedules thereto, between Story, County of _____, as Customer and Marco Technologies LLC, as Lessor ("Agreement"). The words "you" and "your" refer to Customer. The words "we," "us" and "our" refer to L

The parties wish to amend the above-referenced Agreement by adding the following language:

REPRESENTATIONS AND WARRANTIES OF CUSTOMER: You hereby represent and warrant to us that: (i) you have been duly authorized under the Constitution and laws of the applicable jurisdiction and by a resolution or other authority of your governing body to execute and deliver this Agreement and to carry out your obligations hereunder; (ii) all legal requirements have been met, and procedures have been followed, including public bidding, in order to ensure the enforceability of this Agreement; (iii) this Agreement is in compliance with all laws applicable to you, including any debt limitations or limitations on interest rates or finance charges; (iv) the Equipment will be used by you only for essential governmental or proprietary functions of you consistent with the scope of your authority, will not be used in a trade or business of any person or entity, by the federal government or for any personal, family or household use, and your need for the Equipment is not expected to diminish during the term of this Agreement; (v) you have funds available to pay Payments until the end of your current appropriation period, and you intend to request funds to make Payments in each appropriation period, from now until the end of the term of this Agreement; and (vi) your exact legal name is as set forth on page one of this Agreement.

NON-APPROPRIATION OR RENEWAL: If either sufficient funds are not appropriated to make Payments or any other amounts due under this Agreement or (to the extent required by applicable law) this Agreement is not renewed either automatically or by mutual ratification, this Agreement shall terminate and you shall not be obligated to make Payments under this Agreement beyond the then-current fiscal year for which funds have been appropriated. Upon such an event, you shall, no later than the end of the fiscal year for which Payments have been appropriated or the term of this Agreement has been renewed, deliver possession of the Equipment to us. If you fail to deliver possession of the Equipment to us, the termination shall nevertheless be effective but you shall be responsible, to the extent permitted by law and legally available funds, for the payment of damages in an amount equal to the portion of Payments thereafter coming due that is attributable to the number of days after the termination during which you fail to deliver possession and for any other loss suffered by us as a result of your failure to deliver possession as required. You shall notify us in writing within seven days after (i) your failure to appropriate funds sufficient for the payment of the Payments or (ii) to the extent required by applicable law, (a) this Agreement is not renewed or (b) this Agreement is renewed by you (in which event this Agreement shall be mutually ratified and renewed), provided that your failure to give any such notice under clause (i) or (ii) of this sentence shall not operate to extend this Agreement or result in any liability to you.

TITLE TO THE EQUIPMENT: If the selected purchase option for this Agreement is \$1.00 or \$101.00, unless otherwise required by law, upon your acceptance of the Equipment, title to the Equipment shall be in your name, subject to our interest under this Agreement.

The parties wish to amend the above-referenced Agreement by adding the following language:

Any provision in the Agreement stating this Agreement supersedes any invoice and/or purchase order is hereby amended and restated as follows: "You agree that the terms and conditions contained in this Agreement, which, with the acceptance certification, is the entire agreement between you and us regarding the Equipment and which supersedes any purchase order, invoice, request for proposal, response or other related document."

Any provision in the Agreement stating that this Agreement shall automatically renew unless the Equipment is purchased, returned or a notice requirement is satisfied is hereby amended and restated as follows: "Unless the purchase option is \$1.00 or \$101.00, at the end of the initial term, this Agreement shall renew on a month-to-month basis under the same terms hereof unless you send us written notice at least 30 days before the end of any term that you want to purchase or return the Equipment, and you timely purchase or return the Equipment."

Any provision in the Agreement stating that we may assign this Agreement is hereby amended and restated as follows: "We may sell, assign, or transfer this Agreement without notice to or consent from you, and you waive any right you may have to such notice or consent."

NOTE: A FACSIMILE, ELECTRONIC OR SCANNED VERSION OF THIS DOCUMENT WITH SIGNATURE SHALL BE CONSIDERED BE AN ORIGINAL. CAPITALIZED TERMS IN THIS DOCUMENT ARE DEFINED AS IN THE AGREEMENT, UNLESS SPECIFICALLY STATED OTHERWISE.

Any provision in the Agreement stating that you grant us a security interest in the Equipment to secure all amounts owed to us under any agreement is hereby amended and restated as follows: "To the extent permitted by law, you grant us a security interest in the Equipment to secure all amounts you owe us under this Agreement and any supplements hereto. You authorize and ratify our filing of any financing statement(s) and the naming of us on any vehicle title(s) to show our interest."

Any provision in the Agreement stating that you shall indemnify and hold us harmless is hereby amended and restated as follows: "You shall not be required to indemnify or hold us harmless against liabilities arising from this Agreement. However, as between you and us, and to the extent permitted by law and legally available funds, you are responsible for and shall bear the risk of loss for, shall pay directly, and shall defend against any and all claims, liabilities, proceedings, actions, expenses, damages or losses arising under or related to the Equipment, including, but not limited to, the possession, ownership, lease, use or operation thereof, except that you shall not bear the risk of loss of, nor pay for, any claims, liabilities, proceedings, actions, expenses, damages or losses that arise directly from events occurring after you have surrendered possession of the Equipment in accordance with the terms of this Agreement to us or that arise directly from our gross negligence or willful misconduct."

Any provision in the Agreement stating that a default by you under any agreement with our affiliates or other lenders shall be an event of default under the Agreement is hereby amended and restated as follows: "You will be in default if: (i) you do not pay any Payment or other sum due to us under this Agreement when due or you fail to perform in accordance with the covenants, terms and conditions of this Agreement; (ii) you make or have made any false statement or misrepresentation to us; or (iii) you dissolve, liquidate, terminate your existence or are in bankruptcy."

Any provision in the Agreement stating that you shall pay our attorneys' fees is hereby amended and restated as follows: "In the event of any dispute or enforcement of rights under this Agreement or any related agreement, you agree to pay, to the extent permitted by law and to the extent of legally available funds, our reasonable attorneys' fees (including any incurred before or at trial, on appeal or in any other proceeding), actual court costs and any other collection costs, including any collection agency fee."

Any provision in the Agreement requiring you to pay amounts due under the Agreement upon the occurrence of a default, failure to appropriate funds or failure to renew the Agreement is hereby amended to limit such requirement to the extent permitted by law and legally available funds.

Any provision in the Agreement stating that the Agreement is governed by a particular state's laws and you consent to such jurisdiction and venue is hereby amended and restated as follows: "This Agreement will be governed by and construed in accordance with the laws of the state where you are located. You consent to jurisdiction and venue of any state or federal court in such state and waive the defense of inconvenient forum."

By signing this Addendum, Customer acknowledges the above changes to the Agreement and authorizes Lessor to make such changes. In the event of any conflict between this Addendum and the Agreement, this Addendum shall prevail. In all other respects, the terms and conditions of the Agreement remain in full force and effect and remain binding on Customer.

CUSTOMER ACCEPTANCE

Marco Technologies LLC

LESSOR

X

SIGNATURE

TITLE

DATE

Story, County of

CUSTOMER

X

SIGNATURE

TITLE

DATE

NOTE: A FACSIMILE, ELECTRONIC OR SCANNED VERSION OF THIS DOCUMENT WITH SIGNATURE SHALL BE CONSIDERED BE AN ORIGINAL. CAPITALIZED TERMS IN THIS DOCUMENT ARE DEFINED AS IN THE AGREEMENT, UNLESS SPECIFICALLY STATED OTHERWISE.



MAP Supplement

APPLICATION NO. 1479533	MAP AGREEMENT NO. 1202967	SUPPLEMENT NO.
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Meter Reading Contact Person: 0

CUSTOMER INFORMATION

FULL LEGAL NAME: Story, County of
 STREET ADDRESS: 900 Sixth St
 CITY: Nevada STATE: IA ZIP: 50201 PHONE: 515-382-7305 FAX:
 BILLING NAME (IF DIFFERENT FROM ABOVE): BILLING STREET ADDRESS:
 CITY: STATE: ZIP: E-MAIL:

EQUIPMENT WITH CONSOLIDATED MINIMUMS - ADDED

MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	START METER COLOR	START METER BW
1. See Attached Pool Billing			
2.			
3.			

Minimum Payment* \$ See Attached B&W Print Allowance See Attached Excess B&W Print Charge* \$ See Attached
 *plus applicable taxes

EQUIPMENT WITH CONSOLIDATED MINIMUMS - DELETED

MAKE/MODEL/ACCESSORIES	SERIAL NUMBER	END METER COLOR	END METER BW
1.			

MARCO SUPPORT DESK (By selecting "YES" you agree that the Marco Support Desk Monthly Fee will be added to this Supplement's monthly invoice.)

Do you wish to enroll in the Marco Support Desk for equipment listed herein? Yes OR No

Combined Total of all Equipment Enrolled:

Marco Support Desk Device Monthly Fees		
1 - 5 Devices: \$10	6 - 15 Devices: \$20	16+ Devices: \$30

If enrolled, the equipment on this Supplement will qualify for Marco Support Desk in addition to any other equipment enrolled under the MAP Agreement. If no box is checked, then you have elected to waive Marco Support Desk coverage for equipment listed herein.

FREQUENCY OF MINIMUM PAYMENT

Please Check One: Monthly Quarterly Semi-Annually Annually
 (If no box is checked, frequency will be Monthly)

METER READING FREQUENCY

Please Check One: Monthly Quarterly Semi-Annually Annually
 (If no box is checked, frequency will be Monthly)

TERM

29 Mos. End of Term of this Supplement coincides with the End of Term set forth in the MAP Agreement (coterminal) and/or previous Supplement(s) (as applicable).
 Mos. Term applies to this Supplement only.

SUPPLIES COVERAGE LEVELS: Please Check One: All Inclusive HP OEM No Supplies Included
 (If no box is checked, no supplies will be included) (Billed at Standard Pricing)

TERMS AND CONDITIONS

You have requested this Supplement to the MAP Agreement between the Owner and Customer as identified in Owner's records by the MAP Agreement set forth above. If this Supplement relates to Equipment not subject to the MAP Agreement (i.e., additional Equipment), this Supplement, together with the preprinted terms of the MAP Agreement (as amended), constitutes an agreement between Customer and Owner with respect to the Equipment referenced herein, separate and distinct from the MAP Agreement. Customer agrees to be bound by the terms of this Supplement, which includes the preprinted terms of the MAP Agreement (as amended) and agrees this Supplement shall commence on the date of Owner's acceptance. The parties agree that: (i) this Supplement and any related documents hereto may be authenticated by electronic means; (ii) the "original" of this Supplement shall be the copy that bears your manual, facsimile, scanned or electronic signature and that also bears our manually signed signature; and (iii) to the extent this Supplement constitutes chattel paper (as defined by the UCC), a security interest may only be created in the original. You agree not to raise as a defense to the enforcement of this Supplement or any related documents that you executed or authenticated such documents by electronic or digital means or that you used facsimile or other electronic means to transmit your signature on such documents. If any provision in this Supplement conflicts with a provision in the MAP Agreement, the provision in this Supplement shall control. If this Supplement relates to Equipment subject to the MAP Agreement (i.e. replaced or removed Equipment and/or payment modifications), the MAP Agreement shall be modified or supplemented as set forth above as of the date Owner accepts this Supplement. Except as specifically modified by this Supplement, all other terms and conditions of the MAP Agreement (as amended) and any personal guaranty(s) remain in full force and effect.

OWNER ACCEPTANCE

Print Name: Marco Technologies, LLC Signature: _____ Title: _____
 Owner: Marco Technologies, LLC Dated: _____

PRIVACY AND INFORMATION SECURITY

You acknowledge that the Equipment you have received may be equipped with a hard drive that may store personal and confidential information ("PCI") and you understand the privacy and information security risks associated with PCI that may be stored on your Equipment. You agree to be responsible for safeguarding any PCI and you agree to indemnify and hold Marco Technologies LLC harmless from any loss, misappropriation or breach of the PCI that may be stored on your Equipment.

Story, County of _____
 CUSTOMER (as referenced above) SIGNATURE: X [Signature] TITLE: Board Chair
 DATED: 8-13-19

CUSTOMER ACCEPTANCE

By signing below, you certify that you have reviewed and do agree to all terms and conditions of the MAP Agreement and this Supplement.

Story, County of _____
 CUSTOMER (as referenced above) SIGNATURE: X [Signature] TITLE: Board Chair
 DATED: 8-13-19

42-6005024

FEDERAL TAX I.D. #

PRINT NAME



MAP Supplement
Pool Billing Schedule

APPLICATION NO.
1479533

AGREEMENT NO.

Meter Reading Contact Person: 0

Managed Account Program

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 1 NAME: Board Of Supervisors copiers

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 125.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 2 NAME: Board of Supervisors printers

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 13.14
*plus applicable taxes
B&W Print Allowance 0
Excess B&W Print Charge* \$ 0.010000

POOL 3 NAME: Information Desk printers

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 13.14
*plus applicable taxes
B&W Print Allowance 0
Excess B&W Print Charge* \$ 0.010000

POOL 4 NAME: Attorney Ames copiers

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 173.93
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County of
CUSTOMER (as referenced above)
X [Signature] SIGNATURE
TITLE Board Chair
DATED 8-13-19



MAP Supplement
Pool Billing Schedule

APPLICATION NO.
1479533

AGREEMENT NO.

Meter Reading Contact Person: 0

Managed Account Program

Phone: 800.892.8548 | Fax: 800.847.3087

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POOL 5 NAME: Attorney Ames printers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 13.14

*plus applicable taxes

B&W Print Allowance 0

Excess B&W Print Charge* \$ 0.010000

POOL 6 NAME: Engineering Copiers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 99.29

*plus applicable taxes

Color Print Allowance 0

Excess Color Print Charge* \$ 0.045000

B&W Print Allowance 0

Excess B&W Print Charge* \$ 0.004500

POOL 7 NAME: Engineering Printers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 13.14

*plus applicable taxes

B&W Print Allowance 0

Excess B&W Print Charge* \$ 0.010000

POOL 8 NAME: Facilities Copiers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 85.00

*plus applicable taxes

Color Print Allowance 0

Excess Color Print Charge* \$ 0.045000

B&W Print Allowance 0

Excess B&W Print Charge* \$ 0.004500

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County of
CUSTOMER (as referenced above)

X [Signature]
SIGNATURE

TITLE Board Chair
DATED 8-13-19



MAP Supplement
Pool Billing Schedule

APPLICATION NO.
1479533

AGREEMENT NO.

Meter Reading Contact Person: 0

Managed Account Program

Phone: 800.892.8548 | Fax: 800.847.3087

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POOL 17 NAME: Community Services copiers

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 121.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 18 NAME: Auditor & Elections copiers

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 127.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 19 NAME: IT -E911 printers

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 21.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.090000
Excess B&W Print Charge* \$ 0.010000

POOL 20 NAME: Recorders Printers

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 13.14
*plus applicable taxes
B&W Print Allowance 0
Excess B&W Print Charge* \$ 0.010000

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County of
CUSTOMER (as referenced above)
X [Signature]
TITLE Board Chair
DATED 8-13-19
SIGNATURE



MAP Supplement
Pool Billing Schedule

APPLICATION NO.
1479533

AGREEMENT NO.

Meter Reading Contact Person: 0

Managed Account Program

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 21 NAME: Safety Coordinator printer

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5 are empty.

Minimum Payment* \$ 29.88
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.000000
Excess B&W Print Charge* \$ 0.010000

POOL 22 NAME: Facilities Printers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5 are empty.

Minimum Payment* \$ 81.52
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.000000
Excess B&W Print Charge* \$ 0.010000

POOL 23 NAME: Auditor & Elections printer

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Row 1: HP E50045DW 900 6th St Nevada, IA

Minimum Payment* \$ 46.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.000000
Excess B&W Print Charge* \$ 0.010000

POOL 24 NAME:

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5 are empty.

Minimum Payment* \$ 0.00
*plus applicable taxes
B&W Print Allowance 0
Excess B&W Print Charge* \$ 0.000000

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County of
CUSTOMER (as referenced above)

X [Signature]
SIGNATURE

TITLE Board Chair
DATED 8-13-19



MAP Supplement
Pool Billing Schedule

APPLICATION NO.
1479533

AGREEMENT NO.

Meter Reading Contact Person: 0

Managed Account Program

Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 9 NAME: Plan & Zone Health copiers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 75.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 10 NAME: Information Technology copiers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 85.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 11 NAME: Recorder -copiers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 78.61
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 12 NAME: Treasurer Printers

Pool Location:

Table with 4 columns: MAKE/MODEL/ACCESSORIES, SERIAL NUMBER, START METER COLOR, START METER BW. Rows 1-5.

Minimum Payment* \$ 63.68
*plus applicable taxes
B&W Print Allowance 0
Excess B&W Print Charge* \$ 0.010000

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County of
CUSTOMER (as referenced above)

X [Signature]
SIGNATURE

TITLE Board Chair
DATED 8-13-19



MAP Supplement
Pool Billing Schedule

APPLICATION NO.
1479533

AGREEMENT NO.

Meter Reading Contact Person: 0

Managed Account Program Phone: 800.892.8548 | Fax: 800.847.3087

This Pool Billing Schedule is to be attached to and becomes part of the above-referenced Agreement by and between the undersigned and Marco Technologies, LLC.

POOL 13 NAME: Treasurer copiers

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 119.00
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 14 NAME: Conservation copier

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 250.83
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 15 NAME: Attorney Nevada copiers

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 214.74
*plus applicable taxes
Color Print Allowance 0
B&W Print Allowance 0
Excess Color Print Charge* \$ 0.045000
Excess B&W Print Charge* \$ 0.004500

POOL 16 NAME: Attorney Nevada printers

Pool Location:
MAKE/MODEL/ACCESSORIES SERIAL NUMBER START METER COLOR START METER BW
1.
2.
3.
4.
5.
Minimum Payment* \$ 13.82
*plus applicable taxes
B&W Print Allowance 0
Excess B&W Print Charge* \$ 0.010000

CUSTOMER ACCEPTANCE

This Pool Billing Schedule is hereby verified as correct by the undersigned Customer, who acknowledges receipt of a copy.

Story, County of
CUSTOMER (as referenced above)
X [Signature]
TITLE Board Chair
DATED 8-13-19

THE STATE OF IOWA
COUNTY OF STORY

KNOW ALL BY THESE PRESENT

**MEMORANDUM OF UNDERSTANDING
BY AND BETWEEN THE CITY OF AMES, IOWA, AND STORY COUNTY, IOWA**

JUSTICE ASSISTANCE GRANT (JAG) PROGRAM AWARD

This Agreement is made and entered into this ____ day of _____, 2019, by and between Story County, Iowa, acting by and through the Chairman of the County Board of Supervisors as an authorized agent for the county, hereinafter referred to as COUNTY, and the City of Ames, acting by and through the Mayor as an authorized agent for the city, hereinafter referred to as AMES, both of Story County, State of Iowa, witnesseth:

WHEREAS, under the Department of Justice, Office of Justice Programs, Bureau of Justice Assistance 2019 Edward Byrne Memorial Justice Assistance Grant Formula Program, Local Solicitation, hereinafter referred to as GRANT, funds have become available to the parties for use in improving law enforcement programs; and

WHEREAS, the GRANT requires that the COUNTY and AMES agree on the process for filing an application for the acquisition, administration and expenditure of those funds; and,

WHEREAS, each governing body finds that the performance of this Agreement is in the best interests of all parties, that the undertaking will benefit the public, and that the division of funds and costs is equitable;

NOW THEREFORE, AMES and COUNTY agree as follows:

Section 1.

The parties are eligible for funding through the GRANT of up to \$12,728.00. The parties agree that AMES will file a single application on behalf of both parties that provides for distribution of funds as follows:

To AMES - \$12,728.00 to support equipment purchases and training for the public safety network. The parties agree that the primary source of funding for the projects identified in the grant will be the grant proceeds. Any additional funding required and not covered by the grant will be agreed to, in advance of the expenditure, by both parties.

Section 2.

AMES shall be designated as the fiscal agent for the purposes of this GRANT and shall be responsible for all administrative support to meet the requirements of the GRANT. COUNTY shall not be responsible for any costs associated with the administration of the GRANT.

Section 3.

Each party to this agreement will be responsible for its own actions in providing services under this agreement and shall not be liable for any civil liability that may arise from the furnishing of the services by the other party.

Section 4.

The parties to this Agreement do not intend for any third party to obtain a right by virtue of this Agreement.

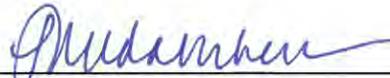
Section 5.

By entering into this Agreement, the parties do not intend to create any obligations express or implied other than those set out herein; nor do they intend to create a separate legal entity for the purposes of this GRANT, specifically they do not intend to create a legal entity authorized by Chapter 28E of the Code of Iowa; further, this Agreement shall not create any rights in any party not a signatory hereto.

IN WITNESS THEREOF, the parties have caused this Agreement to be signed by their authorized representatives.

Story County

By: Linda Murken, Chairman
Story County Board of Supervisors



Signature

City of Ames

By: John A. Haila, Mayor
City of Ames

Signature

DO NOT WRITE IN THE SPACE ABOVE, RESERVED FOR RECORDER

Prepared by Amelia Schoeneman, Planning and Development Department, 900 6th Street, Nevada, Iowa 50201 515-382-7247

STORY COUNTY IOWA
RESOLUTION OF THE BOARD OF SUPERVISORS
RESOLUTION NUMBER 20-03

SETTING DATE AND TIME FOR PUBLIC HEARING FOR AUGUST 20, 2019, FOR FIRST CONSIDERATION OF ORDINANCE NO. 285 PERTAINING TO AMENDING CHAPTER 88.05, GENERAL SITE PLANNING STANDARDS, AND CHAPTER 85, DEFINITIONS, IN THE STORY COUNTY LAND DEVELOPMENT REGULATIONS FOR STORMWATER MANAGEMENT, EROSION AND SEDIMENT CONTROL BY ADDING DESIGN CRITERIA ADDRESSING WATER QUALITY AND THE VOLUME AND RATE OF STORMWATER RUNOFF PERMITTED FOR DEVELOPMENTS THAT DISTURB OVER ONE ACRE; ADDING REQUIREMENTS FOR SEDIMENT AND EROSION CONTROL FOR SITES THAT DISTURB UNDER ONE ACRE, INCLUDING TEMPORARY AND FINAL SITE STABILIZATION, PRACTICES TO MINIMIZE THE AREA DISTURBED, PERIMETER AND OTHER CONTROLS FOR SITES WITH SENSITIVE FEATURES, TOPSOIL RESTORATION, A STABILIZED CONSTRUCTION ENTRANCE, AND CONCRETE WASTE; AND ADDING ASSOCIATED DEFINITIONS.

WHEREAS, the Board of Supervisors approved the *Code of Ordinances of Story County, Iowa, on May 29, 2018*;

AND WHEREAS, Section 1.11 (2)(A), a proposed ordinance shall be considered and receive a favorable vote for passage in accordance with Section 331.302 (6) of the Code of Iowa, as amended;

AND WHEREAS, Section 1.11 (2)(B) the title of the proposed ordinance shall be published in accordance with Section 331.305 of the *Code of Iowa*, as amended, prior to its first consideration by the Board. Copies of the full text of the ordinance shall be made available to the public at the time of publication at the office of the County Auditor, and the published notice shall specify where such copies may be obtained;

AND WHEREAS, the Story County Planning and Zoning Commission will review and consider the proposed ordinance amendment at their August 7, 2019, meeting;

NOW THEREFORE BE IT RESOLVED that a public hearing date on this matter be held on the proposed Ordinance No. 285 on the 20th of August, 2019, at the Story County Administration Building, 900 6th St, Nevada, Iowa, at 10 AM and the Board of Supervisors directs Planning and Development staff to place copies of the full text of the ordinance with the Office of the County Auditor.

Dated this 13th day of August 2019.

Board of Supervisors

Attest: Story County Auditor

Moved by: Olson

Seconded by: Murken

Voting Aye: Olson, Murken

Voting Nay: None

Absent: Lisa Heddens

DO NOT WRITE IN THE SPACE ABOVE, RESERVED FOR RECORDER

Prepared by Amelia Schoeneman, Planning and Development Department, 900 6th Street, Nevada, Iowa 50201 515-382-7247

STORY COUNTY IOWA
RESOLUTION OF THE BOARD OF SUPERVISORS
RESOLUTION NUMBER 20-01

SETTING DATE AND TIME FOR PUBLIC HEARING FOR AUGUST 20, 2019, FOR FIRST CONSIDERATION OF ORDINANCE NO. 284 AMENDING CERTAIN BOUNDARIES OF THE OFFICIAL ZONING MAP OF STORY COUNTY IOWA, AS REFERENCED IN SECTIONS 86.02 OF THE STORY COUNTY CODE OF ORDINANCES, DESCRIBED AS THE WEST 1.85 NET ACES (PREVIOUSLY DESCRIBED AS PARCEL B) OF PARCEL A AND B IN SECTION 16 OF HOWARD TOWNSHIP (PARCEL 02-16-4000-490), FROM THE A-1 AGRICULTURAL ZONING DISTRICT TO THE A-2 AGRIBUSINESS ZONING DISTRICT AND RESOLUTION #20-02 C2C FUTURE LAND USE MAP AMENDMENT FROM THE RURAL RESIDENTIAL AREA TO THE COMMERCIAL/INDUSTRIAL AREA.

WHEREAS, the Board of Supervisors approved the *Code of Ordinances of Story County, Iowa*, on May 29, 2018;

AND WHEREAS, Section 1.11 (2)(A), a proposed ordinance shall be considered and receive a favorable vote for passage in accordance with Section 331.302 (6) of the Code of Iowa, as amended;

AND WHEREAS, Section 1.11 (2)(B) the title of the proposed ordinance shall be published in accordance with Section 331.305 of the *Code of Iowa*, as amended, prior to its first consideration by the Board. Copies of the full text of the ordinance shall be made available to the public at the time of publication at the office of the County Auditor, and the published notice shall specify where such copies may be obtained;

AND WHEREAS, the Story County Planning and Zoning Commission will review and consider the proposed ordinance amendment at their August 7, 2019, meeting;

NOW THEREFORE BE IT RESOLVED that a public hearing date on this matter be held on the proposed Ordinance No. 284 on the 20th of August, 2019, at the Story County Administration Building, 900 6th St, Nevada, Iowa, at 10 AM and the Board of Supervisors directs Planning and Development staff to place copies of the full text of the ordinance with the Office of the County Auditor.

Dated this 13th day of August 2019.

Board of Supervisors

Attest: Story County Auditor

Moved by: Olson

Seconded by: Murken

Voting Aye: Olson, Murken

Voting Nay: None

Absent: Heddens