

AGENDA
COOSA COUNTY COMMISSION
February 21, 2023
3:00 p.m. Continued Commission Meeting
from recessed February 14, 2023
Commission Courtroom

WELCOME

COMMISSION ROLL CALL

INVOCATION, PLEDGE OF ALLEGIANCE

APPROVAL OF MINUTES AND WAIVER OF READING MINUTES

OPEN BIDS FOR WASTE COLLECTION AND DISPOSAL

NEW BUSINESS

- 1) Approval for Chairman McElrath to sign the Liability Fund Participation Agreement and the Longevity participation Resolution with ACCA—Administrator Amy Gilliland
- 2) Approval for Mayor Scott White to put an AED in the Rockford Senior Center—Mayor White
- 3) Discuss the Debris Removal Guidance issued from the State—Engineer Tad Eason & EMA Director Sheldon Hutcherson
- 4) Approval for Chairman McElrath to sign the Opioid settlement sign-on Agreements and Resolution—Chairman McElrath
- 5) Approval to accept the insurance proposal from VFIS for the EMS department, which includes coverage for the Ambulance, Rescue truck and the items and equipment associated with both vehicles—Administrator Amy Gilliland
- 6) Approval to begin advertising for part-time employees for the EMS department—Administrator Amy Gilliland

OLD BUSINESS

- 1) Approval for Chairman McElrath and Attorney John K. Johnson to sign the FY2023 Certifications and Assurances for the Transit Administration—Chairman McElrath

STAFF REPORTS

Administrator

Attorney

EMA

EMS

Courthouse Maintenance

Engineer

Safety Coordinator

DISCUSSION ITEMS BY COMMISSIONERS

ADJOURN

MINUTES**COOSA COUNTY COMMISSION****FEBRUARY 21, 2023****3:00 P.M.****CALL TO ORDER**

THE COOSA COUNTY COMMISSION MET AT THE COOSA COUNTY COURTHOUSE FEBRUARY 21, 2023 WITH CHAIRMAN BERTHA K. MCELRATH PRESIDING.

COMMISSION ROLL CALL

COMMISSION ROLL CALL: HERE –CHAIRMAN BERTHA K. MCELRATH, VICE-CHAIR LAMAR DAUGHERTY, AND COMMISSIONER JOHN FORBUS.

INVOCATION AND PLEDGE OF ALLEGIANCE

INVOCATION WAS GIVEN BY CHAIRMAN BERTHA K. MCELRATH. THE PLEDGE OF ALLEGIANCE WAS SAID BY ALL IN ATTENDANCE.

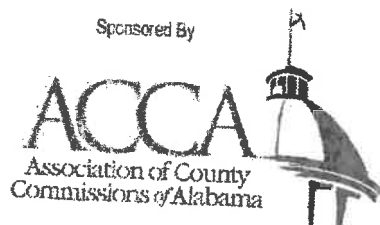
APPROVAL OF MINUTES AND WAIVER OF READING MINUTES

MOTIONED BY COMMISSIONER VICE-CHAIR LAMAR DAUGHERTY TO APPROVE THE MINUTES AND WAIVER OF READING MINUTES OF JANUARY 10, 2023. SECONDED BY COMMISSIONER JOHN FORBUS. UNANIMOUSLY APPROVED

NO BIDS WERE RECEIVED TO OPEN FOR THE WASTE COLLECTION AND DISPOSAL

NEW BUSINESS

MOTIONED BY COMMISSIONER JOHN FORBUS TO APPROVE FOR CHAIRMAN MCELRATH TO SIGN THE LIABILITY FUND PARTICIPATION AGEEMENT AND THE LONGEVITY PATICIPATION RESOLUTION WITH ACCA. SECONDED BY VICE-CHAIR LAMA DAUGHERTY.
UNANIMOUSLY APPROVED



**ASSOCIATION OF COUNTY COMMISSIONS OF ALABAMA
LIABILITY SELF-INSURANCE FUND, INC.**

RESOLUTION

WHEREAS, Coosa County is a member of the Association of County Commissions of Alabama Liability Self-Insurance Fund, Inc. ("Liability Fund") for the contract period ending Dec. 31, 2023; and

WHEREAS, the County's participation in the Liability Fund has been a significant benefit to the County since becoming a member; and

WHEREAS, the representation and service provided by the Liability Fund continues to be in the best interest of Coosa County and its officials and employees; and

WHEREAS, Coosa County would benefit by agreeing to extend its participation in the Liability Fund for an additional three-year period beginning Jan. 1, 2024 and concluding Dec. 31, 2026.

NOW, THEREFORE, BE IT RESOLVED by the Coosa County Commission that it renews its participation in the Liability Fund for calendar years 2024 through 2026 and hereby directs its Chair to immediately execute the 2024-2026 ACCA Liability Self-Insurance Fund, Inc. Participation Agreement.

Adopted this the 21st day of February 2023.

Bertha K. McElrath
County Commission Chairperson

MOTIONED BY CHAIRMAN BERTHA MCELRATH TO APPROVE FOR MAYOR SCOTT WHITE TO PUT AN AED-DEFIBRILLATOR IN THE ROCKFORD SENIOR CENTER. SECONDED BY COMMISSIONER JOHN FORBUS. UNANIMOUSLY APPROVED



DISCUSS THE DEBRIS REMOVAL GUIDANCE ISSUED FORM THE STATE.

MOTIONED BY VICE-CHAIR LAMAR DAUGHERTY TO APPROVE FOR CHAIRMAN BERTHA MCELRATH TO SIGN THE OPIOID SETTLEMENT SIGN-ON AGREEMENT AND RESOLUTION. SECONDED BY COMMISSIONER JOHN FORBUS. UNANIMOUSLY APPROVED

PROPOSED

RESOLUTION NO. 2023-0214

A RESOLUTION AUTHORIZING COOSA COUNTY TO JOIN THE STATE OF ALABAMA AND OTHER LOCAL GOVERNMENTS AS PARTICIPANTS IN CURRENT AND FUTURE OPIOID SETTLEMENTS

WHEREAS, the opioid epidemic continues to impact communities in the United States, the State of Alabama, and Coosa County, Alabama.

WHEREAS, Coosa County has suffered harm and will continue to suffer harm as a result of the opioid epidemic;

WHEREAS, the State of Alabama and some Alabama local governments have filed lawsuits against opioid manufacturers, distributors, and retailers ("Opioid Litigation");

WHEREAS, the State of Alabama has entered into various Settlement Agreements and are likely to enter into additional agreements in the future which include the claims for the State of Alabama's local governments;

WHEREAS the Coosa County finds the terms of the current Settlement Agreements acceptable and in the best interest of the community and anticipates the terms of the future Settlement Agreements to be similarly acceptable;

WHEREAS, the State of Alabama has prepared and presented Settlement Sign-On Agreements to the local governments and Coosa County finds the terms of the Sign-On Agreement acceptable and in the best interest of the community;

WHEREAS, the current and future Settlement Agreements and Sign-On Agreements will detail the allocation of Settlement Funds, which Coosa County finds acceptable and in the best interest of the community;

NOW, THEREFORE, BE IT RESOLVED BY COMMISSION OF COOSA COUNTY,
ALABAMA,

Section 1. That Coosa County finds that participation in the various Opioid Settlements, Settlement Agreement and Sign-On Agreement is in the best interest of Coosa County and its citizens because such a plan would ensure an effective structure for the commitment of Settlement Funds to abate and seek to resolve the opioid epidemic.

Section 2. That Coosa County hereby expresses its support for the Settlement of various Opioid claims and allocation and use of Settlement Funds as generally described in the Settlement Agreement and Sign-On Agreement.

Section 3. That Coosa County's Chairperson ("County Chairperson") is hereby expressly authorized to execute the Settlement Sign-On Agreements and is hereby authorized to execute any formal agreements necessary to implement the Settlements and plan for the allocation and use of Settlement Funds.

Section 4. That the County Chairperson is hereby expressly authorized to execute any formal agreement and related documents evidencing Coosa County's agreement to the settlement of claims and litigation related to the Opioid Epidemic.

Section 5. That the County Chairperson is authorized to take such other action as necessary and appropriate to effectuate Coosa County's participation in any Settlement related to the Opioid Epidemic.

Section 6. This Resolution is effective upon adoption, the welfare of Coosa County, Alabama requiring it.

ADOPTED this the 14th day of February, 2023.

ATTEST:

Bryan K. McElvate

MOTIONED BY COMMISSIONER JOHN FORBUS TO APPROVE TO ACCEPT THE INSURANCE PROPOSAL FROM VFIS FOR THE EMS DEPARTMENT, WHICH INCLUDES COVERAGE FOR THE AMBULANCE, RESCUE TRUCK AND THE ITEMS AND EQUIPMENT ASSOCIATED WITH BOTH VEHICLES. SECONDED BY VICE-CHAIR LAMAR DAUGHERTY. UNANIMOUSLY APPROVED

3952

POLICY NUMBER:

IL U 041 12 08

ALABAMA UNINSURED MOTORISTS COVERAGE SELECTION/REJECTION

Applicant/Named Insured: <i>Bert K. McElroy</i>	Policy Effective Date:
Company:	Producer:

Alabama law permits you to make certain decisions regarding Uninsured Motorists Coverage. This document briefly describes this coverage and the options available.

You should read this document carefully and contact us or your agent if you have any questions regarding Uninsured Motorists Coverage and your options with respect to this coverage.

This document includes general descriptions of coverage. However, no coverage is provided by this document. You should read your policy and review your Declarations Page(s) and/or Schedule(s) for complete information on the coverages you are provided.

UNINSURED MOTORISTS COVERAGE

Uninsured Motorists Coverage provides insurance protection to an insured for damages which the insured is legally entitled to recover from the owner or operator of an uninsured motor vehicle because of bodily injury caused by an automobile accident. Also included are damages due to the bodily injury that result from an automobile accident with a hit-and-run vehicle whose owner or operator cannot be identified.

Unless rejected, Uninsured Motorists Coverage will be afforded at limits at least equal to: (1) split limits of 25,000 for each person, subject to \$50,000 for each accident with respect to bodily injury; or (2) a single limit of \$50,000 for each accident.

Applicable to new york only:

The **CLAIMS MADE** policy covers only claims:

- (1) actually made against the insured while the policy remains in effect, or
- (2) arising from incidents reported to the insurer while the policy remains in effect.

All coverage provided by the policy ceases upon the termination of the policy, except for the automatic (basic) extended reporting period coverage, unless the insured purchases additional (supplemental) extended reporting period coverage.

The automatic (basic) extended reporting period is 90 days. The additional (supplemental) extended reporting period is unlimited, with any period of time less than that being at the insured's option.

The applicant should be aware that there are potential coverage gaps that may arise upon expiration of the applicable (either basic or supplemental) extended reporting period. For example, there is no coverage for a claim made after the applicable extended reporting period terminates unless the incident giving rise to such claim was reported to the insurance company prior to the termination of the applicable extended reporting period.

There is no separate premium charge for the basic extended reporting period. The premium for the supplemental extended reporting period is 50% of the annual premium for the last policy.

If the applicant is changing from an occurrence policy to a claims made policy, the receipt of information from the insurer describing the limited scope of coverage and potential coverage gaps inherent in claims made forms is acknowledged.

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Agent's Signature: _____

Applicant's Signature: Beth K McElrath

Address: _____

Title: _____

City / State / Zip: _____

Date: _____

"CLAIMS-MADE" MANAGEMENT LIABILITY APPLICATION

(Supplement C)

1. Legal name of applicant: _____
2. Address: _____
3. Desired effective date of coverage: _____
4. Limits of liability requested (cannot be greater than the General Liability limit):
 - ☐ \$300,000 each offense or wrongful act / \$1,000,000 aggregate
 - ☐ \$500,000 / \$1,000,000
 - ☐ \$1,000,000 / \$2,000,000
 - ☐ \$1,000,000 / \$3,000,000
 - ☐ \$1,000,000 / \$10,000,000 (aggregate limit does not apply to each named insured with this option)
5. Does the applicant have knowledge of any incidents which would cause a reasonable person to believe that a claim or suit might result? ☐ Yes ☐ No
 If yes, please give complete details, including date: _____
6. Name of person designated to receive any and all notices from the company or agent concerning this insurance: _____

COVERAGE CANNOT BECOME EFFECTIVE PRIOR TO THE DATE THIS SIGNED APPLICATION IS APPROVED BY THE COMPANY.

THE APPLICANT ACCEPTS NOTICE THAT ANY POLICY WHICH MAY BE ISSUED AND ANY RENEWALS THEREOF WILL APPLY ON A "CLAIMS MADE" BASIS.

The applicant agrees that in the event they become aware of any fact which would serve to alter any answer previously given to one or more of the foregoing questions, they will so advise the agent. The applicant further agrees that based on such revised information, the agent may revise or withdraw any quotation previously given.

The undersigned, being authorized by and acting on behalf of the applicant, declares that to the best of his / her knowledge and after having made proper inquiry, the responses to the foregoing are true and that no facts have been suppressed or any material facts misstated. The applicant further agrees that this application shall be the basis of any policy issued. The application is valid for 90 days from the date it is signed.

Agent's Signature: _____

Applicant's Signature: Bertha K. McElroy

Address: _____

Title: _____

City / State / Zip: _____

Date: _____

VFIS ORDER FORM

COOSA COUNTY COMMISSION (AL) C87372

Coverage	Effective/ Expiration Dates	Accept Initial to accept coverage	Decline Initial to decline coverage	Premium Quoted
Property				
Crime				
Portable Equipment				
Auto				
General Liability				
Management Liability				
Excess Liability				
Total				

Payment Plans

Installment Option: (no installment fee)

- ☐ Ten Pay (\$10,000 P&C account minimum and 25% down payment)
- ☐ Semi-Annual (\$2,500 P&C account minimum)
- ☐ Quarterly (\$3,500 P&C account minimum)

✓

Signature of Insurance Representative

Date

Agency Name/Address

Producer/Service Rep.

Before you return this form, you must:

1. Provide the INSURED'S Federal ID#: 63-6001482
2. Identify all mortgagees, loss payees and (for Auto only) additional insureds/lessors (provide address).
3. Choose \$1,000,000 underlying limits when there is Excess Liability.

This is not a binder, nor should it be used as one. This form is solely for the purpose of ordering property and casualty insurance coverages for which VFIS has provided a valid quote.

✓ Bonnie K. McEhret

Signature of Insured

Date

Comments/Notes:

Internal Use Only:	C87372	AL	Qt Eff Dt: 03/01/2023	Doc ID: 577a9b2b0c454a5a92f9e3d8c5f2fca8
	Property:	30110510000000	Crime: 0	PE: 30110510000000
	GL:	30110510000000	ML: 30110510000000	Auto: 30110510000000
			Excess: 0	



CLAIMS-MADE MANAGEMENT LIABILITY SUPPLEMENTAL APPLICATION

1. Legal name of applicant: COOSA COUNTY COMMISSION
2. Address: PO BOX 10, ROCKFORD, AL 35136
3. Desired effective date of coverage: _____
4. Limits of liability requested (cannot be greater than the General Liability limit):
 - ☐ \$300,000 each offense or wrongful act / \$1,000,000 aggregate
 - ☐ \$500,000 / \$1,000,000
 - ☐ \$1,000,000 / \$2,000,000
 - ☒ \$1,000,000 / \$3,000,000
 - ☐ \$1,000,000 / \$10,000,000 (aggregate limit does not apply to each named insured with this option)
5. Does the applicant have knowledge of any incidents which would cause a reasonable person to believe that a claim or suit might result? ☐ Yes ☒ No
 If yes, please give complete details, including date: _____
6. Name of person designated to receive any and all notices from the company or agent concerning this insurance: _____

COVERAGE CANNOT BECOME EFFECTIVE PRIOR TO THE DATE THIS SIGNED APPLICATION IS APPROVED BY THE COMPANY.
THE APPLICANT ACCEPTS NOTICE THAT ANY POLICY WHICH MAY BE ISSUED AND ANY RENEWALS THEREOF WILL APPLY ON A "CLAIMS MADE" BASIS.

The applicant agrees that in the event they become aware of any fact which would serve to alter any answer previously given to one or more of the foregoing questions, they will so advise the agent. The applicant further agrees that based on such revised information, the agent may revise or withdraw any quotation previously given.

The undersigned, being authorized by and acting on behalf of the applicant, declares that to the best of his / her knowledge and after having made proper inquiry, the responses to the foregoing are true and that no facts have been suppressed or any material facts misstated. The applicant further agrees that this application shall be the basis of any policy issued. The application is valid for 90 days from the date it is signed.

Agent's Signature: _____ Applicant's Signature: Bertha K McElharts
 Address: _____ Title: _____
 City / State / Zip: _____ Date: _____

MOTIONED BY COMMISSIONER JOHN FORBUS TO APPROVE TO BEGIN ADVERTISING FOR PART-TIME EMPLOYEES FOR THE EMS DEPARTMENT. SECONDED BY CHAIRMAN BERTHA MCELRATH. UNANIMOUSLY APPROVED

MOTIONED BY VICE-CHAIR LAMAR DAUGHERTY TO APPROVE TO ADVERTISE FOR BIDS ON WASTE DISPOSAL. SECONDED BY COMMISSIONER JOHN FORBUS. UNANIMOUSLY APPROVED

OLD BUSINESS

MOTIONED BY COMMISSIONER JOHN FORBUS TO APPROVE FOR CHAIRMAN BERTHA MCELRATH AND ATTORNEY JOHN K. JOHNSON TO SIGN THE FY2023 CERTIFICATIONS AND ASSURANCES FOR THE TRANSIT ADMINISTRATION. SECONDED BY COMMISSIONER JOHN FORBUS. UNANIMOUSLY APPROVED

Certifications and Assurances

Fiscal Year 2023

FEDERAL FISCAL YEAR 2023 CERTIFICATIONS AND ASSURANCES FOR FTA ASSISTANCE PROGRAMS

(Signature pages alternate to providing Certifications and Assurances in TrAMS.)

Name of Applicant: Coosa County Commission

The Applicant certifies to the applicable provisions of all categories: (check here) X

Or,

The Applicant certifies to the applicable provisions of the categories it has selected:

Category	Certification
01 Certifications and Assurances Required of Every Applicant	
02 Public Transportation Agency Safety Plans	
03 Tax Liability and Felony Convictions	
04 Lobbying	
05 Private Sector Protections	
06 Transit Asset Management Plan	
07 Rolling Stock Buy America Reviews and Bus Testing	
08 Urbanized Area Formula Grants Program	
09 Formula Grants for Rural Areas	
10 Fixed Guideway Capital Investment Grants and the Expedited Project Delivery for Capital Investment Grants Pilot Program	
11 Grants for Buses and Bus Facilities and Low or No Emission Vehicle Development Grant Programs	

Certifications and Assurances

Fiscal Year 2023

- 12 Enhanced Mobility of Seniors and Individuals with Disabilities Programs
- 13 State of Good Repair Grants
- 14 Infrastructure Finance Programs
- 15 Alcohol and Controlled Substances Testing
- 16 Rail Safety Training and Oversight
- 17 Demand Responsive Service
- 18 Interest and Financing Costs
- 19 Cybersecurity Certification for Rail Rolling Stock and Operations
- 20 Tribal Transit Programs
- 21 Emergency Relief Program

CERTIFICATIONS AND ASSURANCES SIGNATURE PAGE**AFFIRMATION OF APPLICANT**Name of the Applicant: Coosa County Commission

BY SIGNING BELOW, on behalf of the Applicant, I declare that it has duly authorized me to make these Certifications and Assurances and bind its compliance. Thus, it agrees to comply with all federal laws, regulations, and requirements, follow applicable federal guidance, and comply with the Certifications and Assurances as indicated on the foregoing page applicable to each application its Authorized Representative makes to the Federal Transit Administration (FTA) in the federal fiscal year, irrespective of whether the individual that acted on his or her Applicant's behalf continues to represent it.

The Certifications and Assurances the Applicant selects apply to each Award for which it now seeks, or may later seek federal assistance to be awarded by FTA during the federal fiscal year.

The Applicant affirms the truthfulness and accuracy of the Certifications and Assurances it has selected in the statements submitted with this document and any other submission made to FTA, and acknowledges that the Program Fraud Civil Remedies Act of 1986, 31 U.S.C. § 3801 *et seq.*, and implementing U.S. DOT regulations, "Program Fraud Civil Remedies," 49 CFR part 31, apply to any certification, assurance or submission made to FTA. The criminal provisions of 18 U.S.C. § 1001 apply to any certification, assurance, or submission made in connection with a federal public transportation program authorized by 49 U.S.C. chapter 53 or any other statute

Certifications and Assurances

Fiscal Year 2023

In signing this document, I declare under penalties of perjury that the foregoing Certifications and Assurances, and any other statements made by me on behalf of the Applicant are true and accurate.

Signature Bertha K. McElrath Date: February 21, 2023
Name Bertha K. McElrath Authorized Representative of Applicant

AFFIRMATION OF APPLICANT'S ATTORNEY

For (Name of Applicant): Coosa County Commission

As the undersigned Attorney for the above-named Applicant, I hereby affirm to the Applicant that it has authority under state, local, or tribal government law, as applicable, to make and comply with the Certifications and Assurances as indicated on the foregoing pages. I further affirm that, in my opinion, the Certifications and Assurances have been legally made and constitute legal and binding obligations on it.

I further affirm that, to the best of my knowledge, there is no legislation or litigation pending or imminent that might adversely affect the validity of these Certifications and Assurances, or of the performance of its FTA assisted Award.

Signature John K. Johnson Date: 2-21-23
Name John K. Johnson Attorney for Applicant

Each Applicant for federal assistance to be awarded by FTA must provide an Affirmation of Applicant's Attorney pertaining to the Applicant's legal capacity. The Applicant may enter its electronic signature in lieu of the Attorney's signature within TrAMS, provided the Applicant has on file and uploaded to TrAMS this hard-copy Affirmation, signed by the attorney and dated this federal fiscal year.

MOTIONED BY COMMISSIONER JOHN FORBUS TO APPROVE TO BEGIN ADVERTISING FOR PART-TIME EMPLOYEES FOR THE EMS DEPARTMENT. SECONDED BY CHAIRMAN BERTHA MCEL RATH. UNANIMOUSLY APPROVED

MOTIONED BY VICE-CHAIR LAMAR DAUGHERTY TO APPROVE TO ADVERTISE FOR BIDS ON WASTE DISPOSAL. SECONDED BY COMMISSIONER JOHN FORBUS. UNANIMOUSLY APPROVED

OLD BUSINESS

MOTIONED BY COMMISSIONER JOHN FORBUS TO APPROVE FOR CHAIRMAN BERTHA MCEL RATH AND ATTORNEY JOHN K. JOHNSON TO SIGN THE FY2023 CERTIFICATIONS AND ASSURANCES FOR THE TRANSIT ADMINISTRATION. SECONDED BY COMMISSIONER JOHN FORBUS. UNANIMOUSLY APPROVED

MOTION TO ADJOURN

MOTIONED BY VICE-CHAIR LAMAR DAUGHERTY TO ADJOURN. SECONDED BY JOHN FORBUS. UNANIMOUSLY APPROVED

MINUTES APPROVED THIS 14TH DAY OF MARCH, 2023.

CHAIRMAN BERTHA MCEL RATH

VICE-CHAIR LAMAR DAUGHERTY

JOHN JOINER

3955-A