

NOTICE

**THE SWEETWATER COUNTY BOARD OF COUNTY COMMISSIONERS
WILL MEET ON TUESDAY, June 16, 2015 AT 8:30 A.M.
IN THE COMMISSIONERS' CHAMBERS
(TENTATIVE AND SUBJECT TO CHANGE)**

PRELIMINARY

8:30 CALL TO ORDER
QUORUM PRESENT
PLEDGE OF ALLEGIANCE
APPROVAL OF AGENDA
APPROVAL OF MINUTES: June 2, 2015

ACCEPTANCE OF BILLS

Approval of County Vouchers/Warrants
Approval of Monthly Statements
Approval of Bonds
Approval of Abates/Rebates

PUBLIC HEARING

Budget Amendments

CATERING/MALT BEVERAGE PERMIT

Request Approval for 3 Catering Permits for Eden Saloon

COMMISSIONER COMMENTS/REPORTS

8:40 Commissioner Van Matre
8:50 Commissioner West
9:00 Commissioner Kolb
9:10 Commissioner Wendling
9:20 Chairman Johnson

COUNTY RESIDENT CONCERNS

9:30

ACTION/PRESENTATION ITEMS

- 9:40** Board Appointments:
Airport
Board of Health
Community Fine Arts
Library
Memorial Hospital
Museum
Planning & Zoning
Predatory Animal
Recreation
Solid Waste (Eden Valley/Farson)
Southwest Counseling
Star Transit
- 10:10** BFY 15/16 Countywide Consensus Block Grant Joint Resolutions for the City of Green River
- 10:15** Approval of the Courthouse Security Grant Agreement, Certification Statement and Plan for the Justice Center Project
- 10:20** EMS Needs Assessment Grant Application- Update on High Desert Rural Healthcare District
- 10:30** Roadway Easement for County Road 4-24 (Patrick Draw)
- 10:35** Sage Grouse Resolution
- 10:45** Request Approval of FY 16 Health Insurance Renewals
- 11:00** Request Approval of DUI Supervised Probation Employment Contract
- 11:05** Hospice Facility Project Update
- 11:20** Air Service Minimum Revenue Guarantee

OTHER

11:35

LUNCH

PUBLIC HEARING- PLANNING & ZONING

1:30 1. Lewis & Lewis, Inc.

Zoning Map Amendment
Agriculture (A) to Mineral Development 1 (MD-1)

2. Glenn Ellsworth
Variance
Side Setback Requirement

EXECUTIVE SESSION AS NEEDED

ADJOURN

**Immediately following the Regular Board of County Commissioner's Meeting,
the Commission will conduct the Fiscal Year 2016 Budget Workshop**

[Per Wyo. Stat. §18-3-516\(f\) County information can be accessed on the County's website at www.sweet.wy.us](http://www.sweet.wy.us)

June 2, 2015
Green River, WY

The Board of County Commissioners met this day at 8:30 a.m. in Regular Session with all commissioners present. The meeting opened with the Pledge of Allegiance.

Approval of Agenda

Commissioner Kolb moved to approve the agenda. Commissioner Van Matre seconded the motion.
The motion carried.

Approval of Minutes: 5-19-15

Commissioner West moved to approve the minutes. Commissioner Wendling seconded the motion.
The motion carried.

Acceptance of Bills

Approval of County Vouchers/Warrants and Bonds

Commissioner Wendling moved to approve the county bills and the bonds. Commissioner West seconded the motion. The motion carried.

WARRANT NO.s	PAYEE	DESCRIPTION	AMOUNT
64967 & ADVICES	EMPLOYEES AND PAYROLL VENDORS	PAYROLL RUN	5,354.76
64947	AMAZON	EQUIPMENT/SUPPLIES	736.98
64948	CENTURYLINK	PHONE	25.60
64949	FRY'S CUSTOM FLOORS INC	CARPET/INSTALLATION	10,056.50
64950	HOME DEPOT CREDIT SERVICES	SUPPLIES/TOOLS	1,601.89
64951	PAYMENT REMITTANCE CENTER - 3009	TOOLS/SIGNS/SUPPLIES	2,009.27
64952	PAYMENT REMITTANCE CENTER - 3438	TRAVEL/CONFERENCES/TUITION/PARTS/ SUBSCRIPTION/TRAINING	13,350.05
64953	PAYMENT REMITTANCE CENTER - 2452	LODGING/MEALS	330.21
64954	PAYMENT REMITTANCE CENTER - 4720	MEALS/TRAVEL	738.34
64955	PAYMENT REMITTANCE CENTER - 2486	MEALS	141.44
64956	PAYMENT REMITTANCE CENTER - 2478	MEALS/TRAVEL	478.33
64957	PAYMENT REMITTANCE CENTER - 2460	MEALS/TRAVEL	831.83
64958	PAYMENT REMITTANCE CENTER - 7081	MEALS	20.76
64959	PAYMENT REMITTANCE CENTER - 6823	MEALS/PLAQUE	77.46
64960	PITNEY BOWES INC	RENTAL	65.44
64961	QUESTAR GAS	UTILITIES	8,890.68
64962	ROCKY MTN POWER	UTILITIES	6,122.14
64963	UNION TELEPHONE COMPANY INC	CELL PHONES	187.03
64964	VERIZON WIRELESS	PHONES/AIRCARDS/EQUIPMENT	1,811.01
64965	WALMART COMMUNITY/RFCSLLC- PURCHASING	BEVERAGES/SUPPLIES	71.64
64966	WEX BANK	FUEL	4,210.38
64968	CENTURYLINK	PHONE BILL	208.76
64969	DIRECTV	TV'S	72.49
64970	ROCKY MTN POWER	UTILITIES	9,037.73
64971	SIMPLESIGNAL INC	PHONE BILL	2,597.62
64972	UNION TELEPHONE COMPANY INC	PHONES/AIRCARDS/EQUIPMENT	5,387.16
64973	VERIZON WIRELESS	BROADBAND	1,134.53
64974	WALMART COMMUNITY/RFCSLLC- SHERIFF	COMMISSARY/SUPPLIES	708.38
64975	WYOMING DEPT OF WORKFORCE SVCS	WORKERS COMPENSATION	21,945.72
64976	AARMS	SERVICE	530.00
64977	ACE HARDWARE	SUPPLIES/TOOLS	230.68
64978	ACE HARDWARE #11263-C	SUPPLIES/TOOLS	297.80
64979	AIRGAS USA LLC	SUPPLIES	23.83
64980	ARNELL JR. P.C., GARY B	FEES	13,550.00
64981	AUTOSPA INC	WASH	14.15
64982	BI	SERVICES	278.88
64983	BOB BARKER COMPANY INC	INMATE SUPPLIES	1,411.73
64984	BROADWAY MEDIA KMER	ADVERTISING	210.00
64985	CAPITAL BUSINESS SYSTEMS INC	MAINTENANCE	1,259.86
64986	CASTLE ROCK HOSPITAL DISTRICT	BUDGET ALLOCATION	8,333.33
64987	CHEMICAL TESTING PROGRAM	SUPPLIES	3,261.00
64988	CITY OF ROCK SPRINGS	PERMIT	173.00
64989	CJ SIGNS	BANNER	150.00
64990	CODALE ELECTRIC SUPPLY INC	SUPPLIES	201.89
64991	CODE 4 PUBLIC SAFETY EDUCATION ASSN INC	TRAINING	297.00
64992	COMPLETE CARPET CARE	SERVICES	5,930.00
64993	COPIER & SUPPLY CO INC	CONTRACT	383.34
64994	CUMMINS ROCKY MOUNTAIN LLC	BATTERIES	5,153.24
64995	DAVIS, STEVEN DALE	MILEAGE/POSTAGE	7.81
64996	DELL MARKETING L P	EQUIPMENT	11,321.23
64997	DENVER INDUSTRIAL SALES & SVC CO	SUPPLIES	3,196.39
64998	DIVERSIFIED INSURANCE BEN SERV LLC	FEES	1,053.42
64999	DIVERSIFIED INSURANCE BEN SERV LLC	FEES	6,000.00

65000	DIVISION OF VICTIM SERVICES	REGISTRATION	100.00
65001	DIXON INFORMATION INC	ASBESTOS SAMPLES	204.00
65002	DJ'S GLASS PLUS	GLASS	228.42
65003	DJ'S GLASS PLUS	MAINTENANCE	1,300.00
65004	EASTIN, VICKIE	MEAL/MILEAGE	114.52
65005	ELECTRICAL CONNECTIONS INC	MAINTENANCE	2,308.92
65006	EMPLOYERS COUNCIL SERVICES INC	PRE-EMPLOYMENT	170.00
65007	F B MCFADDEN WHOLESALE COMPANY	SUPPLIES	3,064.37
65008	F B MCFADDEN WHOLESALE COMPANY	INMATE FOOD	6,888.72
65009	FARSON FEED STORE	SUPPLIES	7.59
65010	FIRE ENGINEERING COMPANY INC	INSPECTIONS	7,110.00
65011	FLEETPRIDE	PARTS	105.28
65012	G & K SERVICES	SERVICES	146.26
65013	GARY C JOHNSON AND ASSOCIATES	DOCUMENTATION	44.86
65014	GRAINGER	SUPPLIES	1,407.25
65015	GREEN RIVER MARINE INC	MOTOR FLUSH	8.49
65016	GREEN RIVER STAR	SUBSCRIPTION	102.50
65017	HAMPTON INN AND SUITES - PINEDALE	LODGING	635.00
65018	HIGH COUNTRY BEHAVIORAL HEALTH	RENT	1,000.00
65019	HIGH SECURITY LOCK & ALARM	MONITORING	805.25
65020	HOLIDAY INN CONVENTION CENTER	LODGING	83.00
65021	HOLLAND EQUIPMENT COMPANY	PARTS	1,586.35
65022	HOMAX OIL SALES INC	FUEL	199.71
65023	IBARRA, JOSEFINA	FLOWERS/SUPPLIES	89.34
65024	IBS INCORPORATED	SUPPLIES	158.35
65025	INBERG-MILLER ENGINEERS	SPEED STUDIES	307.50
65026	INDO AMERICAN ENGINEERING INC	ENGINEERING	67,788.00
65027	INDUSTRIAL SUPPLY	MATERIALS	389.99
65028	INSULATION INC	ASBESTOS REMOVAL	2,455.42
65029	VENTURE TECHNOLOGIES	SUPPORT	18,212.20
65030	ITW LABELS	LABELS	1,937.30
65031	JACK'S TRUCK & EQUIPMENT	PARTS	2,925.05
65032	JENNY SERVICE CO	INMATE FOOD	962.80
65033	KAMAN INDUSTRIAL TECHNOLOGIES	PARTS	183.60
65034	KROGER - SMITH'S CUSTOMER CHARGES	GROCERIES	98.94
65035	LATORRE, LONA K	MILEAGE	89.70
65036	LEWIS AND LEWIS INC	ROADBASE	81,195.23
65037	LOOP1 SYSTEMS INC	MAINTENANCE	12,304.00
65038	MARCHAL, KRISENA	MEALS/MILEAGE	94.65
65039	MCKEE FOODS CORPORATION	INMATE FOOD	854.96
65040	MEADOW GOLD DAIRIES SLC	INMATE FOOD	1,564.15
65041	MEDICALPRODUCTS LTD INC	SUPPLIES	936.82
65042	MEMORIAL HOSPITAL OF SWEETWATER CO	MEDICAL	3,025.00
65043	MOUNTAIN STATES EMPLOYERS COUNCIL INC	SHIPPING	36.78
65044	MOUNTAINLAND SUPPLY LLC	SUPPLIES	225.72
65045	NAPA AUTO PARTS UNLIMITED	PARTS	28.38
65046	NATIONAL 4-H COUNCIL - SUPPLY SERVICE	SUPPLIES	1,323.96
65047	NATIONAL BUSINESS FURNITURE	FURNITURE	1,249.00
65048	NICHOLAS & COMPANY	INMATE FOOD	2,266.01
65049	NUTECH SPECIALTIES INC	SUPPLIES	304.00
65050	PACIFIC STEEL & RECYCLING	CATTLEGUARDS	71.30
65051	LAW OFFICE OF BOBBY W PINEDA	FEES	3,080.00
65052	PORTER LEE CORPORATION	SOFTWARE/TRAVEL/TRAINING	11,617.50
65053	PREMIER VEHICLE INSTALLATION INC	SUPPLIES	975.56
65054	PROFORCE LAW ENFORCEMENT	EQUIPMENT	5,414.95
65055	PUBLIC DEFENDER	SUPPLEMENT	139,897.52
65056	QUILL CORPORATION	OFFICE SUPPLIES	1,681.58
65057	R & D SWEEPING & ASPHALT	CRACK SEALING	6,540.00
65058	REDENTE, GARY	TRAVEL/MEALS	433.40
65059	ROCK SPRINGS MY PLACE LLC	LODGING	640.00
65060	ROCK SPRINGS NEWSPAPERS INC	ADS	265.44
65061	ROCK SPRINGS NEWSPAPERS INC	ADS	10.70
65062	ROCK SPRINGS WINNELSON CO	SUPPLIES	74.63
65063	SAFEGUARD BUSINESS SYSTEMS	OFFICE SUPPLIES	803.73
65064	SECRETARY OF STATE	FEES	30.00
65065	SIX STATES DISTRIBUTORS INC	LABOR/TOOLS	115.15
65066	SKAGGS COMPANIES INC	UNIFORMS	9,861.29
65067	SKID STRUCTURES	SHED	5,434.00
65068	SLAGOWSKI CONCRETE INC	REPAIRS	34,659.72
65069	SLAUGHTER, ROBERT D	MILEAGE	144.90
65070	SMYTH PRINTING INC	SUPPLIES	82.80
65071	SNAP ON TOOLS	TOOLS	50.75
65072	SODEXO INC & AFFILIATES	LUNCHEON	400.00
65073	SOURCE OFFICE & TECHNOLOGY	SUPPLIES	10.19
65074	SPECIALIZED PATHOLOGY CONSULTANTS	AUTOPSY	2,080.00
65075	STAPLES ADVANTAGE - DEPT LA	SUPPLIES	104.37
65076	SUPERIOR COURT OF CALIFORNIA	DOCUMENTS	241.50
65077	SWCO CONSERVATION DISTRICT	BUDGET ALLOCATION	24,358.72
65078	SWEETWATER CO SCHOOL DISTRICT #1	BUDGET ALLOCATION	3,316.55
65079	SWEETWATER FAMILY RESOURCE CTR	BUDGET ALLOCATION	4,998.34

65080	SWEETWATER TROPHIES	SHIPPING/BADGES/NAME TAG	227.44
65081	SYMBOL ARTS	BADGES	136.00
65082	THE HON COMPANY	TABLES	120.90
65083	THE MASTER'S TOUCH LLC	POSTCARDS	795.00
65084	THE TIRE DEN INC	TIRES	1,583.20
65085	THE UPS STORE - #3042	SHIPPING	9.15
65086	TODD, ANITA	MILEAGE	50.03
65087	TRIAD TACTICAL INC	EQUIPMENT	285.00
65088	TUBBS MD LLC, KENNON C	INMATE MEDICAL	4,200.00
65089	TYLER TECHNOLOGIES INC	SUPPORT/MAINTENANCE	44,218.85
65090	U S FOODS INC	INMATE FOOD	3,988.34
65091	WALTER F STEPHENS JR INC	INMATE CLOTHING	675.75
65092	WATCH SYSTEMS LLC	MAILINGS	727.30
65093	WAXIE SANITARY SUPPLY	SUPPLIES	508.95
65094	WESTERN WYOMING FAMILY HEALTH	BUDGET ALLOCATION	1,743.40
65095	WIMACTEL INC	SERVICE	70.00
65096	WORKFORCEQA CSS HOLDINGS LLC	TESTING	200.00
65097	WYOMING MACHINERY COMPANY	PARTS	541.48
65098	WYOMING SHERIFF'S ASSOCIATION	DUES	587.00
65099	WYOMING STATE BAR	JOB POSTING	95.00
65100	WYOMING STATE FORESTRY DIVISION	REPAIRS	2,378.78
65101	WYOMING TRIBUNE EAGLE	AD	165.60
65102	YOUNG AT HEART CENTER	GRANT EXPENSES	22,314.63
65103	YOUTH HOME INC	BUDGET ALLOCATION	16,750.00

GRAND TOTAL: 749,866.44

The following bonds were placed on file:

Donna Little-Kaumo	SWCO School Dist. #2, Superintendent	\$100,000.00
Karla Leach	WWCC, Asst. Treasurer	\$ 50,000.00

Public Hearing

Budget Amendments

Accounting Manager Bonnie Phillips presented Resolution 15-06-CL-01. Following discussion, Chairman Johnson opened the public hearing. Hearing no comments, the hearing was closed. *Commissioner Van Matre moved to approve Resolution 15-06-CL-01. Commissioner Wendling seconded the motion.* The motion carried.

**RESOLUTION 15-06-CL-01
SWEETWATER COUNTY
BUDGET AMENDMENT**

DUE to unanticipated capital expenditures within the Clerk of District Court department totaling \$1,000,

WHEREAS, it has been determined that the aforementioned funds need to be transferred within the 2014-2015 County Budget,

WHEREAS, the Notice of Public Hearing has been published in accordance with the regulations and rules governing the budget process and there being no protests filed or expressed to the Board of County Commissioners regarding this amendment to the Sweetwater County Budget at the hearing,

BE IT THEREFORE RESOLVED: that the 2014-2015 fiscal year budget for Sweetwater County be amended to reflect the following budget changes:

Expenditures Increase General Fund:

Clerk of District Court – Capital	\$1,000
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Expenditures Decrease General Fund:

Clerk of District Court – Operating	(\$1,000)
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Dated at Green River, Wyoming this 2nd day of June, 2015.

THE BOARD OF COUNTY COMMISSIONERS
OF SWEETWATER COUNTY, WYOMING

Wally J. Johnson, Chairman

John K. Kolb, Member

ATTEST:

Don Van Matre, Member

Randal M. Wendling

Steven Dale Davis, County Clerk

Reid O. West, Member

Accounting Manager Bonnie Phillips presented Resolution 15-06-CL-02. Following discussion, Chairman Johnson opened the public hearing. Hearing no comments, the hearing was closed. *Commissioner Van Matre moved for favorable consideration of Resolution 15-06-CL-02. Commissioner Wendling seconded the motion.* The motion carried.

**RESOLUTION 15-06-CL-02
SWEETWATER COUNTY
BUDGET AMENDMENT**

DUE to unanticipated operating expenditures within the Veterans Services department totaling \$4,800,

WHEREAS, it has been determined that the aforementioned funds need to be transferred within the 2014-2015 County Budget,

WHEREAS, the Notice of Public Hearing has been published in accordance with the regulations and rules governing the budget process and there being no protests filed or expressed to the Board of County Commissioners regarding this amendment to the Sweetwater County Budget at the hearing,

BE IT THEREFORE RESOLVED: that the 2014-2015 fiscal year budget for Sweetwater County be amended to reflect the following budget changes:

Expenditures Increase General Fund:

Veterans Services – Operating \$4,800

Expenditures Decrease General Fund:

Veterans Services – Payroll (\$3,800)
Veterans Services – Capital (\$1,000)

Dated at Green River, Wyoming this 2nd day of June, 2015.

THE BOARD OF COUNTY COMMISSIONERS
OF SWEETWATER COUNTY, WYOMING

Wally J. Johnson, Chairman

John K. Kolb, Member

Don Van Matre, Member

ATTEST:

Randal M. Wendling

Steven Dale Davis, County Clerk

Reid O. West, Member

Commissioner Comments/Reports

Chairman Johnson

Chairman Johnson circulated a photograph of the 333 Broadway parking lot and read aloud a report from Facilities Manager Chuck Radosevich. Chairman Johnson addressed having a plaque displayed at the Sweetwater County Detention Center identifying those who were involved with the 2005 project. Chairman Johnson discussed Sweetwater County maintaining the Marsh Creek Boat Ramp noting the joint relationship between Sweetwater County and the Ashley National Forest. Chairman Johnson met with the Coalition of Local Governments (CLG) and explained that Sage Grouse continues to be an issue and recommended to extend the White Mountain core area habitat boundary to the rim of White Mountain. Chairman Johnson addressed the over reach of the EPA and expressed his concern. Chairman Johnson acknowledged IT Director Tim Knight for his hard work relative to the telephone system project and the significant cost savings he has made. Chairman Johnson explained that he met with Wyoming

Wildlife Federation Field Director Joy Bannon relative to Little Mountain, Sage Creek Drainage and the migration in the Hoback. Chairman Johnson reported that he attended the kick off meeting for the Rock Springs RMP.

The commission discussed having Public Land Specialist Mark Kot draft a resolution for the Sage Grouse Core Habitat.

Commissioner Van Matre

Commissioner Van Matre reported that he met with Parks and Recreation Board President Keaton West relative to the Marsh Creek boat ramp, the trap club facilities and reported on his liaison meeting with the Parks & Recreation Board. Commissioner Van Matre reported that he attended the Tour 23 Sweetwater County Session. Commissioner Van Matre noted that he visited with IT Director Tim Knight, Grants Manager Krisena Marchal, and VSO Director Larry Levitt. Commissioner Van Matre explained that Golden Hour Senior Citizen Center Director Beth Whitman submitted her resignation.

Commissioner West

Commissioner West addressed an article in the Rocket Miner relative to the Board of Health no longer providing home health service by the end of year 2015 and spoke of the duties/services that they will be providing. Commissioner West addressed statutory obligations for Title 25. Chairman Johnson explained that he, Commissioner West and Southwest Counseling Director Linda Acker will be meeting to discuss Title 25 and that he will report data to the Title 25 Committee appointed by Governor Mead.

Commissioner Kolb

Commissioner Kolb reported on his liaison meetings for the Events Complex and the Ambulance Service Board. Commissioner Kolb reported that he attended the Tour 23 Sweetwater County Session. Lastly, Commissioner Kolb noted that he spoke with Grants Manager Krisena Marchal, Land Use Director Eric Bingham and extended his appreciation to IT Director Tim Knight for the cost savings created by cleaning up the telephone system.

Commissioner Wendling

Commissioner Wendling reported on his liaison meeting for the Young at Heart Senior Citizens Center. Commissioner Wendling further reported that he attended the Superior Town Council meeting, the Tour 23 Sweetwater County Session along with Chairman Johnson and Commissioners Kolb and Van Matre, and the TATA Dedication Ceremony & Celebration of the new ventilation system #7 shaft with Commissioner Van Matre. Commissioner Wendling provided an update regarding the status of seasonal fire fighters. Commissioner Wendling expressed his appreciation to county employees for their consideration during the budget process. Lastly, Commissioner Wendling spoke of the flowers that have been planted at the courthouse and thanked all that were involved.

County Resident Concerns

Chairman Johnson opened county resident concerns. County Treasurer Robb Slaughter commended the facilities staff and IT staff for their assistance during the renovation in the treasurer's office. Hearing no further comments, the hearing was closed.

Break

Chairman Johnson called for a break.

Action/Presentation Items

Approval of the BFY 15/16 Countywide Consensus Block Grant Joint Resolution for the City of Green River

Grants Manager Krisena Marchal presented the Countywide Consensus Block Grant Joint Resolution #SWBFY15/16-7 for the City of Green River. Following discussion, Chairman Johnson entertained a motion to approve the Countywide Consensus Block Grant Joint Resolution #SWBFY15/16-7 for the City of Green River. *Commissioner West moved to approve. Commissioner Van Matre seconded the motion.* The motion carried.

Request Approval to Re-Staff 2 Vacant Positions in the Sheriff's Office

Sheriff Lowell and Human Resource Manager Garry McLean requested authorization to re-staff two vacant positions in the Sheriff's Office. Following discussion, *Commissioner Kolb moved to approve the two vacant positions in the Sheriff's Office. Commissioner Wendling seconded the motion.* The motion carried.

Request Approval of VSO Employment Contract

Human Resource Manager Garry McLean presented the employment contract between Sweetwater County, Wyoming and VSO Director Lawrence Levitt. Following discussion, Chairman Johnson entertained a motion to approve the employment contract between Sweetwater County and Lawrence Levitt as presented; noting that the contract is for one year. *Commissioner Van Matre moved to approve the employment contract with the VSO Department. Commissioner Wendling seconded the motion.* The motion carried.

Final Acceptance of Double J Subdivision Road Improvements

Land Use Director Eric Bingham and County Engineer John Radosevich presented Resolution 15-06-EN-01. Owner of Double J Subdivision Jeffrey Fritz was present. Following discussion, Chairman Johnson entertained a motion to approve Resolution 15-06-EN-01, Double J Subdivision Final Acceptance of

Subdivision Road Improvements. *Commissioner West so moved. Commissioner Kolb seconded the motion.* The motion carried.

**RESOLUTION 15-06-EN-01
DOUBLE J SUBDIVISION
FINAL ACCEPTANCE OF SUBDIVISION ROAD IMPROVEMENTS**

WHEREAS, DOUBLE J Subdivision is a legally established residential subdivision of Sweetwater County, the official plat having been duly recorded in the Office of the County Clerk and Recorder on page 557 in the Book of Plats; and

WHEREAS, all streets, alleys, easements and other public lands shown upon said plat were dedicated to public use, subject to full acceptance by the Board of County Commissioners; and

WHEREAS, County policy requires that, prior to such acceptance, the developer of any subdivision provide a warranty of workmanship to ensure the satisfactory construction of all streets, drainage improvements and appurtenant items which will come under County jurisdiction; and

WHEREAS, according to said policy the terms of said warranty shall extend for a period of one year commencing upon the County Engineer's inspection and approval of the initial construction; and

WHEREAS, said terms have been satisfied and the warranty period for the improvements in said Double J Subdivision has expired as of May 20, 2015; and

WHEREAS, as-built plans for the construction of said streets have been reviewed, a final inspection of the improvements was performed, and accordingly, the County Engineer has approved the construction of all improvements and has recommended acceptance by the County;

NOW THEREFORE, BE IT RESOLVED that the Board of Sweetwater County Commissioners does hereby accept the dedication of all platted streets, alleys easements and other land dedicated for public use by DOUBLEJ Subdivision.

BE IT FURTHER RESOLVED that Sweetwater County hereby assumes jurisdiction for maintenance along all said streets, alleys, easements and other public lands.

Dated this 2nd day of June, 2015.

THE BOARD OF COUNTY COMMISSIONERS
OF SWEETWATER COUNTY, WYOMING

Wally J. Johnson, Chairman

John K. Kolb, Member

Don Van Matre, Member

Randal M. Wendling

Reid O. West, Member

ATTEST:

Steven Dale Davis, County Clerk

Other

Letter of Support for a Mine Rescue Day

Commissioner Wendling explained that Mine Rescue Representative Ken Ball approached him to obtain a letter of support from the commission supporting Mine Rescue Day and explained that Mr. Ball will present the letter during his meeting in Washington. Chairman Johnson entertained a motion to approve, and authorize the commission to sign, the letter of support for the Mine Rescue Day. *Commissioner West moved to approve. Commissioner Wendling seconded the motion.* Following discussion, the motion carried. The commission requested that Mr. Ball present the Mine Rescue Day Proclamation in October. Mr. Ball explained how the Mine Rescue Day came to fruition.

Executive Session(s)-Personnel/Legal

Chairman Johnson entertained a motion to enter into executive session for personnel. *Commissioner Wendling so moved. Commissioner Van Matre seconded the motion.* The motion carried. A quorum of the commission was present

After coming out of executive session, Chairman Johnson explained that no action was required.

Adjourn

There being no further business to come before the Board this day, the meeting was adjourned subject to the call of the Chairman.

This meeting was recorded and is available from the County Clerk's office at the Sweetwater County Courthouse in Green River, Wyoming

THE BOARD OF COUNTY COMMISSIONERS
OF SWEETWATER COUNTY, WYOMING

Wally J. Johnson, Chairman

John K. Kolb, Member

Don Van Matre, Member

Randal M. Wendling

Reid O. West, Member

ATTEST:

Steven Dale Davis, County Clerk

	DATE	AMOUNT	WARRANT #'S
EAL	6/5/2015	221,898.40	
EAL	6/12/2015	60,674.26	
EAL	6/16/2015	1,614,084.20	
EAL			
EAL			

	AMOUNT	Payroll:	Check #	Advice #
Payroll Run	1,300,798.08		65104-65142	14290-14542
Payroll Run	3,522.69		65166	14543-14545
Payroll Run				

TOTAL AMOUNT \$3,200,977.63

Vouchers in the above amount are hereby approved and ordered paid this date of 06/16/2015

Wally J. Johnson, County Commissioner

John K. Kolb, County Commissioner

Don Van Matre, County Commissioner

Randal M. Wendling, County Commissioner

Attest:

County Clerk

Reid O. West, County Commissioner

Authorization for Monthly Reports
6-16-15

1. Clerk of District Court

THE BOARD OF COUNTY COMMISSIONERS
FOR SWEETWATER COUNTY, WYOMING

Wally J. Johnson, Chairman

John K. Kolb, Member

Attest:

Donald Van Matre, Member

Randal M. Wendling, Member

Steven Dale Davis, County Clerk

Reid O. West, Member

Monthly Statement

Statement of the earnings or collections of **Donna Lee Bobak** as **Clerk of District Court** within and for the county of Sweetwater, state of Wyoming, for the month ending:

MAY, 2015

Reported to the Board of County Commissioners of said County.

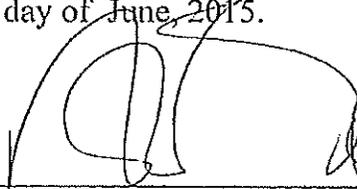
<u>CIVIL FEES</u>	\$	6,367.42
Code: DC		
<u>BOND FORFIETED</u>	\$.00
Code: FO		
<u>CRIMINAL FINES/COSTS</u>	\$	550.00
Code: CF		
<u>TOTAL EARNINGS</u>	\$	6,917.42

Clerk of District Court Check # 9181

STATE OF WYOMING
COUNTY OF SWEETWATER

I hereby certify that the above is a true and correct statement of the earnings of my office, or of moneys collected by me as such officer, during the month above mentioned, and that the same has been by me paid into the county treasury

Witness, my hand and seal this 1st day of June, 2015.



Donna Lee Bobak, Clerk of District Court



Authorization for Bonds
6-16-15

Chris Meats City of Green River, Finance Director/Treasurer \$100,000.00

THE BOARD OF COUNTY COMMISSIONERS
FOR SWEETWATER COUNTY, WYOMING

Wally J. Johnson, Chairman

John K. Kolb, Member

Donald Van Matre, Member

Attest:

Randal M. Wendling, Member

Steven Dale Davis, County Clerk

Reid O. West, Member

Wyoming



Western Surety Company

OFFICIAL BOND AND OATH

KNOW ALL PERSONS BY THESE PRESENTS:

BOND No. OFF. 55030529
Green River

That we Chris Meats of _____, Wyoming, as Principal, and WESTERN SURETY COMPANY, a corporation duly licensed to do business in the State of Wyoming, as Surety, are held and firmly bound unto City of Green River, the State of Wyoming, in the penal sum of One Hundred Thousand & no/100 DOLLARS (\$ 100,000.00), (NOT VALID IF FILLED IN FOR MORE THAN \$100,000.00)

to which payment well and truly to be made, we bind ourselves and our legal representatives, jointly and severally, firmly by these presents.

Dated this 3rd day of June, 2015.

THE CONDITION OF THE ABOVE OBLIGATION IS SUCH, That whereas, the above bounden Principal was duly Appointed Elected to the office of Finance Director/Treasurer in the City of Green River, and State aforesaid for the term beginning June 3, 2015, and ending June 3, 2016.

NOW THEREFORE, If the above bounden Principal and his deputies shall faithfully, honestly and impartially perform all the duties of his said office of Finance Director/Treasurer as is or may be prescribed by law, and shall with all reasonable skill, diligence, good faith and honesty safely keep and be responsible for all funds coming into the hands of such officer by virtue of his office; and pay over without delay to the person or persons authorized by law to receive the same, all moneys which may come into his hands by virtue of his said office; and shall well and truly deliver to his successor in office, or such other person or persons as are authorized by law to receive the same, all moneys, books, papers and things of every kind and nature held by him as such officer, the above obligation shall be void, otherwise to remain in full force and effect.

Principal

WESTERN SURETY COMPANY

By
Paul T. Bruflat, Vice President

ACKNOWLEDGMENT OF SURETY

STATE OF SOUTH DAKOTA } ss (Corporate Officer)
County of Minnehaha }

On this 3rd day of June, 2015 before me, appeared Paul T. Bruflat

to me personally known, being by me sworn, and did say that he is the aforesaid officer of WESTERN SURETY COMPANY, and that the seal affixed to said instrument is the corporate seal of said corporation, and that said instrument was signed and sealed on behalf of said corporation by authority of its Board of Directors, and said officer acknowledged said instrument to be the free act and deed of said corporation.



My Commission Expires March 2, 2020

Notary Public

OATH OF OFFICE

I do solemnly swear (or affirm) that I will support, obey and defend the constitution of the United States, and the constitution of the state of Wyoming; that I have not knowingly violated any law related to my election or appointment, or caused it to be done by others; and that I will discharge the duties of my office with fidelity.

[Signature]

State of Wyoming }
County of Sweetwater } ss



This Oath of Office was subscribed and sworn to before me by Chris N Meats
on this 8th day of June, 2015
My commission expires:

[Signature]
Notary Public, Wyoming

ACKNOWLEDGMENT OF PRINCIPAL

THE STATE OF WYOMING }
County of Sweetwater } ss

On this 8th day of June, 2015, before me, personally
appeared Chris N Meats, to me known to be the
person described in and who executed the foregoing instrument as Principal, and acknowledged that
the same was executed as his free act and deed.

My Commission expires

March 2, 2019



[Signature]
Notary Public, Wyoming

WYOMING
County of

Authorization for Abate/Rebate of Ad Valorum Taxes

June 16, 2015

NOVC	TAXPAYER	ACCOUNT	TAX DIST	VALUATION	TAX YEAR	ADJUSTMENTS	REASON	A/R NUMBER
2015-0205	BP AMERICA PRODUCTION CO	62883	200	-488	2012	-31.86	DOR	6115
2015-0308	ANADARKO E&P CO LLP	63949	100	-273,081	2012	-17,329.17	DOR	6215
2015-0308	ANADARKO E&P CO LLP	63960	101	-43,751	2012	-2,965.22	DOR	6315
2015-0308	ANADARKO E&P CO LLP	63959	100	-6,888	2012	-437.10	DOR	6415
2015-0311	WEXPRO CO	49318	100	-31,478	2012	-1,997.53	DOR	6515
2015-0372	WHITING OIL & GAS CORP	147996	100	-956	2012	-60.67	DOR	6615
2015-0372	WHITING OIL & GAS CORP	147997	102	-25	2012	-1.76	DOR	6715
2015-0364	CHEVRON USA INC	62896	102	-2,083	2012	-146.61	DOR	6815
	FWD CONSTRUCTION	138744	151	-1,031	2014	-74.88	OWNER DECEASE	6915
	BUENO BONITA BARATO	147302	105	-450	2011	-34.10	OUT OF BUSINESS	61015
	BUENO BONITA BARATO	147302	105	-433	2012	-32.82	OUT OF BUSINESS	61115
	BUENO BONITA BARATO	147302	105	-397	2013	-30.03	OUT OF BUSINESS	61215
	BUENO BONITA BARATO	147302	105	-359	2014	-27.15	OUT OF BUSINESS	61315
	NAILS BY NONI	143344	251	-435	2010	-32.62	OUT OF BUSINESS	61415
	NAILS BY NONI	143344	251	-410	2011	-30.84	OUT OF BUSINESS	61515
	NAILS BY NONI	143344	251	-387	2012	-28.38	OUT OF BUSINESS	61615
	NAILS BY NONI	143344	251	-351	2013	-26.29	OUT OF BUSINESS	61715

BOARD OF COUNTY COMMISSIONERS MEETING REQUEST FORM

Requested Meeting Date: June 16, 2015	Name & Title of Presenter: Dale Davis
Department or Organization: County Clerk's Office	Contact Phone & E-mail: Anita Frey 872-3755 frey@sweet.wy.us
Exact Wording for Agenda: Request approval for 3 Catering Permits for Eden Saloon Inc	Preference of Placement on Agenda & Amount of Time Requested for Presentation: No Preference and 5 minutes
Will there be Handouts? (If yes, include with meeting request form) Yes - Included	Will handouts require SIGNATURES: Yes, by Chairman only
Additional Information:	

- All requests to be added to the agenda will need to be submitted in writing on the "Meeting Request Form" by Wednesday at 12:00 p.m. prior to the scheduled meeting and returned in person or electronically to Clerk Sally Shoemaker at: shoemakers@sweet.wy.us
- All handouts are also due by Wednesday at 12:00 p.m. prior to the scheduled meeting date. Handouts may be submitted to Clerk Sally Shoemaker either in person or electronically. *****If your handout is not accompanied with the request to be added to the agenda, your request will be dismissed and you may reschedule for the next meeting provided the handout(s) are received.*****
- Any documents requiring **Board Action** or **signature** are considered agenda items and need to be requested in the same manner.
- All **original** documents requesting action or signature must be submitted to Deputy County Clerk Vickie Eastin. However, a **copy** must be submitted to Sally Shoemaker for distribution of the packet and retention.
- As always, if you are unable to attend the meeting after being placed onto an agenda, please send a representative in your place or your item will be rescheduled.
- In order to determine placement on the agenda, please review the county website (www.sweet.wy.us/commissioner) on Thursday afternoon.
- If a request to be placed on an agenda is received **AFTER** the deadline, you will be considered for the next meeting date.
- No handout will be received during a meeting in session.

APPLICATION FOR 24 HR MALT BEVERAGE CATERING PERMIT

Licensing Authority: Sweetwater County Clerk

Name of Event: Froy Jonas Memorial Rodeo

Permit From: 7.14.15 To: 7.15.15 Local Permit Number: _____

Number of Days Permitted: 1 Fee per day: 10.⁰⁰ Total Fee: 10.⁰⁰

Applicant: Eden Saloon, Inc D/B/A: _____

Contact Person: Patsy Smith Phone: 307 273-5266

Company Location: 3633 A Hwy 191 N City: Eden State: WY Zip: 82932

Mailing Address: Same as above City: _____ State: _____ Zip: _____

Business Phone: 307-273-9496 Residence Phone: 307-273-5266-273-3300

Location of Sales: Eden Valley Arena

Applicants that are receiving anything of value (i.e. money, goods and/or services) from any industry representative must answer the following:

As an applicant for a 24 hour malt beverage or catering permit, are you:

A nonprofit corporation organized under the laws of this state; YES NO

Qualified as a tax exempt organization under the Internal Revenue Code; YES NO

And have been in continuous operation for not less than two (2) years. YES NO

FILING AS (CHOOSE ONLY ONE)

INDIVIDUAL PARTNERSHIP CORPORATION LLC LLP

NOTE: Individual and Partnership filers must be domiciled residents of Wyoming for at least one year and not claimed residence in any other state in the last twelve months.

If a corporation, LLC or LLP list the full names and residence address of all the officers and directors and of all shareholders owning jointly or severally ten percent (10%) or more of the stock of the corporation, LLC or LLP. Use back of form if additional space is needed.

For Corp, LLC, LLP Applicants Legal Name	Date of Birth	DO NOT LIST PO BOXES Residence Address, Street, City, State & Zip	Residence Phone Number	No of years in corp or LLC	% of Stock Held	Have you been Convicted of a Felony Violation?	Have you been Convicted of a Violation Relating to Alcoholic Liquor or Malt Beverages?
George E Buckendorf	10/08/55	3629 US Hwy 191 N Eden, WY 82932	307-273-3300	26	25%	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Cindy F Buckendorf	11/16/57	3629 US Hwy 191 N Eden, WY 82932	307-273-3300	26	25%	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Patsy J Smith	08/10/48	3633 B US Hwy 191 N Eden, WY 82932	705-4680 307-273-5266	26	50%	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
						YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

(If more information is required, complete in identical form, on a separate piece of paper and attach to this application.)

By filing this application, I agree to operate in Wyoming under the requirements of W.S.12-4-502 and all other applicable Wyoming laws and rules, and to file required sales tax reporting documents and taxes.

By signing this application, I acknowledge for Eden Saloon Inc
(Business Name) that all of the information provided is true and correct, and that I agree to meet the Wyoming operating conditions specified above. This application must be signed by an owner, partner, corporate officer or LLC/LLP member.

9.11

VERIFICATION OF APPLICATION

(Requires signatures by ALL Individuals, ALL Partners, ONE (1) LLC Member, TWO (2) Corporate Officers/Directors, or TWO (2) Club Officers.) W.S.12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

Dated this 26th day of May, 2015. Cindy Buckendorf
Applicant
Wesley Smith
Applicant

Signature of Licensing Authority Official

CHAIRMAN

Title

6 / 16 / 2015
Date

2015 EVEC
Troy Jones Memorial Rodeo
July 4th

Platinum Sponsor - \$1,500

Our most visible sponsorship opportunity will be for the event of your choice.

- Large Banner with your design which will be displayed in our arena
- Your sponsorship of the event will be announced at the rodeo
- This money will partially be used as the winning prize for your event
- Tickets to the rodeo

Gold Sponsor - \$1,000

An excellent visible sponsorship opportunity will offset some the operational costs, while receiving fantastic publicity.

- Banner with your design displayed in the arena
- Your sponsorship will be announced at the rodeo
- Tickets to the rodeo

Silver Sponsor - \$500

Show your support, your sponsorship will offset some of the operating costs.

- Banner with your design displayed in the arena
- Your sponsorship will be announced at the rodeo
- Tickets to the rodeo

Bronze Sponsor - \$250

Get involved, your sponsorship will offset some of the operating costs.

- Your sponsorship will be announced at the rodeo
- Tickets to the rodeo

All donations, big or small, will be greatly appreciated and guarantee a successful event. \$ _____

2015 Eden Valley Event Center Sponsorship Form

Sponsorship Level: Platinum - \$1,500 ____ Gold - \$1,000 ____ Silver - \$500 ____ Bronze - \$250 ____

Donation \$ _____

Business/ Individual Name: _____

Contact: _____ Phone Number: _____

Address: _____

Please Make Checks Payable and Submit to: **Eden Valley Events Center, P.O. Box 31, Farson WY 82932**

All gifts to EVEC, a 501(c)3 organization, are tax-deductible in accordance with IRS law. EIN 47-3005319

APPLICATION FOR 24 HR MALT BEVERAGE CATERING PERMIT

Licensing Authority: Sweetwater County, Clerk

Name of Event: 4 of July Dance

Permit From: 7.1.11.5 To: 7.5.11.5 Local Permit Number: _____

Number of Days Permitted: 1 Fee per day: 10.00 Total Fee: 10.00

Applicant: Eden Saloon Inc D/B/A: _____

Contact Person: Patsy Smith Phone: (307) 273-5266

Company Location: 3633 A Hwy 191 N City: Eden State: WY Zip: 82932

Mailing Address: Same as above City: _____ State: _____ Zip: _____

Business Phone: 307-273-9496 Residence Phone: 307-273-5266-273-3300

Location of Sales: Eden Valley Community Hall

Applicants that are receiving anything of value (i.e. money, goods and/or services) from any industry representative must answer the following:

As an applicant for a 24 hour malt beverage or catering permit, are you:

A nonprofit corporation organized under the laws of this state; YES NO

Qualified as a tax exempt organization under the Internal Revenue Code; YES NO

And have been in continuous operation for not less than two (2) years. YES NO

FILING AS (CHOOSE ONLY ONE)

INDIVIDUAL PARTNERSHIP CORPORATION LLC LLP

NOTE: Individual and Partnership filers must be domiciled residents of Wyoming for at least one year and not claimed residence in any other state in the last twelve months.

If a corporation, LLC or LLP list the full names and residence address of all the officers and directors and of all shareholders owning jointly or severally ten percent (10%) or more of the stock of the corporation, LLC or LLP. Use back of form if additional space is needed.

For Corp, LLC, LLP Applicants Legal Name	Date of Birth	DO NOT LIST PO BOXES Residence Address, Street, City, State & Zip	Residence Phone Number	No of years in corp or LLC	% of Stock Held	Have you been Convicted of a Felony Violation?	Have you been Convicted of a Violation Relating to Alcoholic Liquor or Malt Beverages?
George E Buckendorf	10/08/55	3629 US Hwy 191 N Eden, WY 82932	307-273-3300	20	25%	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Cindy F Buckendorf	11/16/57	3629 US Hwy 191 N Eden, WY 82932	307-273-3300	28	25%	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Patsy J Smith	08/10/48	3633 B7 US Hwy 191 N Eden, WY 82932	765-4680 307-273-5266	26	50%	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
						YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

(If more information is required, complete in identical form, on a separate piece of paper and attach to this application.)

By filing this application, I agree to operate in Wyoming under the requirements of W.S.12-4-502 and all other applicable Wyoming laws and rules, and to file required sales tax reporting documents and taxes.

By signing this application, I acknowledge for Eden Saloon, Inc
(Business Name) that all of the information provided is true and correct, and that I agree to meet the Wyoming operating conditions specified above. This application must be signed by an owner, partner, corporate officer or LLC/LLP member.

VERIFICATION OF APPLICATION

(Requires signatures by ALL Individuals, ALL Partners, ONE (1) LLC Member, TWO (2) Corporate Officers/Directors, or TWO (2) Club Officers.) W.S.12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

Dated this 26th day of May, 2015. Cindy Buckendorf
Applicant
Patricia Smith
Applicant

Signature of Licensing Authority Official

CHAIRMAN

06 / 16 / 2015

Title

Date

APPLICATION FOR 24 HR MALT BEVERAGE/CATERING PERMIT

Licensing Authority: Sweetwater County Clerk

Name of Event: Just Cuz Party

Permit From: 7.1.18.14.5 To: 7.1.19.14.5 Local Permit Number: _____

Number of Days Permitted: 1 Fee per day: 10.⁰⁰ Total Fee: 10.⁰⁰

Applicant: Eden Saloon, Inc D/B/A: _____

Contact Person: Patsy Smith Phone: 307 273-5266

Company Location: 3633 A Hwy 191 N City: Eden State: WY Zip: 82932

Mailing Address: Same as above City: _____ State: _____ Zip: _____

Business Phone: 307-273-9496 Residence Phone: 307-273-5266-273-3300

Location of Sales: 3615 N Hwy 191 Eden, WY 82932

Applicants that are receiving anything of value (i.e. money, goods and/or services) from any industry representative must answer the following:

As an applicant for a 24 hour malt beverage or catering permit, are you:

A nonprofit corporation organized under the laws of this state; YES NO

Qualified as a tax exempt organization under the Internal Revenue Code; YES NO

And have been in continuous operation for not less than two (2) years. YES NO

FILING AS (CHOOSE ONLY ONE)

INDIVIDUAL PARTNERSHIP CORPORATION LLC LLP

NOTE: Individual and Partnership filers must be domiciled residents of Wyoming for at least one year and not claimed residence in any other state in the last twelve months.

If a corporation, LLC or LLP list the full names and residence address of all the officers and directors and of all shareholders owning jointly or severally ten percent (10%) or more of the stock of the corporation, LLC or LLP. Use back of form if additional space is needed.

For Corp, LLC, LLP Applicants Legal Name	Date of Birth	DO NOT LIST PO BOXES Residence Address, Street, City, State & Zip	Residence Phone Number	No of years in corp or LLC	% of Stock Held	Have you been Convicted of a Felony Violation?	Have you been Convicted of a Violation Relating to Alcoholic Liquor or Malt Beverages?
George E Buckendorf	10/05/55	3629 US Hwy 191 N Eden, WY 82932	307-273-3300	28	25%	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Cindy F Buckendorf	11/16/57	3629 US Hwy 191 N Eden, WY 82932	307-273-3300	28	25%	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Patsy J Smith	08/10/48	3633 B7MS Hwy 191 N Eden, WY 82932	307-705-4680	28	50%	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
						YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

(If more information is required, complete in identical form, on a separate piece of paper and attach to this application.)

By filing this application, I agree to operate in Wyoming under the requirements of W.S.12-4-502 and all other applicable Wyoming laws and rules, and to file required sales tax reporting documents and taxes.

By signing this application, I acknowledge for Eden Saloon, Inc
(Business Name) that all of the information provided is true and correct, and that I agree to meet the Wyoming operating conditions specified above. This application must be signed by an owner, partner, corporate officer or LLC/LLP member.

VERIFICATION OF APPLICATION

(Requires signatures by ALL Individuals, ALL Partners, ONE (1) LLC Member, TWO (2) Corporate Officers/Directors, or TWO (2) Club Officers.) W.S.12-4-102(b)

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

Dated this 26th day of May, 2015.

Cindy Buckendorf
Applicant

Patricia Smith
Applicant

Signature of Licensing Authority Official

CHAIRMAN

Title

06 / 16 / 2015

Date

BOARD OF COUNTY COMMISSIONERS MEETING REQUEST FORM

Requested Meeting Date: 6/16/15	Name & Title of Presenter: Bonnie Phillips
Department or Organization: Clerk's office	Contact Phone & E-mail: 872-3762
Exact Wording for Agenda: Budget Amendments	Preference of Placement on Agenda & Amount of Time Requested for Presentation: 8:30 10 min
Will there be Handouts? (If yes, include with meeting request form) yes	Will handouts require SIGNATURES: yes
Additional Information:	

- All requests to be added to the agenda will need to be submitted in writing on the "Meeting Request Form" by Wednesday at 12:00 p.m. prior to the scheduled meeting and returned in person or electronically to Clerk Sally Shoemaker at: shoemakers@sweet.wy.us
- All handouts are also due by Wednesday at 12:00 p.m. prior to the scheduled meeting date. Handouts may be submitted to Clerk Sally Shoemaker either in person or electronically. *****If your handout is not accompanied with the request to be added to the agenda, your request will be dismissed and you may reschedule for the next meeting provided the handout(s) are received.*****
- Any documents requiring **Board Action or signature** are considered agenda items and need to be requested in the same manner.
- All **original** documents requesting action or signature must be submitted to Deputy County Clerk Vickie Eastin. However, a **copy** must be submitted to Sally Shoemaker for distribution of the packet and retention.
- As always, if you are unable to attend the meeting after being placed onto an agenda, please send a representative in your place or your item will be rescheduled.
- In order to determine placement on the agenda, please review the county website (www.sweet.wy.us/commissioner) on Thursday afternoon.
- If a request to be placed on an agenda is received **AFTER** the deadline, you will be considered for the next meeting date.
- No handout will be received during a meeting in session.

**RESOLUTION 15-06-CL-03
SWEETWATER COUNTY
BUDGET AMENDMENT**

DUE to the addendum to the memorandum of understanding between Sweetwater County Child Developmental Center and Sweetwater County dated December 15, 2014 agreeing to distribute interest earned and \$50,000 principal to the Sweetwater County Child Developmental Center annually,

WHEREAS, it has been determined that the aforementioned funds need to be included in the 2014-2015 County Budget,

WHEREAS, the Notice of Public Hearing has been published in accordance with the regulations and rules governing the budget process and there being no protests filed or expressed to the Board of County Commissioners regarding this amendment to the Sweetwater County Budget at the hearing,

BE IT THEREFORE RESOLVED: that the 2014-2015 fiscal year budget for Sweetwater County be amended to reflect the following budget changes:

Expenditure Increase General Fund:

Child Developmental Center	\$29,460.63
Revenue Increase CDC Fund	\$17,460.63
Expenditure Increase CDC Fund	\$40,627.00

Dated at Green River, Wyoming this 16th day of June, 2015.

**BOARD OF COUNTY COMMISSIONERS
SWEETWATER COUNTY, WYOMING**

Wally J. Johnson, Chair

John K. Kolb, Member

Don Van Matre, Member

ATTEST:

Randy Wendling, Member

Steven Dale Davis, County Clerk

Reid O. West, Member

NOTICE OF PUBLIC HEARING
SWEETWATER COUNTY
BUDGET AMENDMENT

Notice is hereby given of a Public Hearing to amend the General Fund: Child Developmental Center budget and the CDC Fund budget within the Sweetwater County 2014-2015 budget in the amount of \$70,087.63 due to the addendum to the memorandum of understanding between Sweetwater County Child Developmental Center and Sweetwater County.

Said hearing will be held at the Sweetwater County Commissioners' meeting room in the County Courthouse in Green River, Wyoming on the 16th day of June, 2015 at 8:30 A.M. At this time, any and all interested persons may appear and express their opinion regarding the budget amendment.

Dated at Green River, Wyoming this 8th day of June, 2015.

Board of County Commissioners
Sweetwater County, Wyoming

Attest:

(s) Wally J Johnson, Chair

(s) Steven Dale Davis, County Clerk

Please Advertise as a Legal Advertisement on June 9, 2015.

RESOLUTION 15-06-CL-04
SWEETWATER COUNTY
BUDGET AMENDMENT

DUE to unanticipated capital expenditures within the Road & Bridge department totaling \$200,000,

WHEREAS, it has been determined that the aforementioned funds need to be transferred within the 2014-2015 County Budget,

WHEREAS, the Notice of Public Hearing has been published in accordance with the regulations and rules governing the budget process and there being no protests filed or expressed to the Board of County Commissioners regarding this amendment to the Sweetwater County Budget at the hearing,

BE IT THEREFORE RESOLVED: that the 2014-2015 fiscal year budget for Sweetwater County be amended to reflect the following budget changes:

Expenditure Increase General Fund:

Road & Bridge – Capital	\$200,000
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Expenditure Decrease General Fund:

Road & Bridge – Operating	(\$200,000)
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Dated at Green River, Wyoming this 16th day of June, 2015.

BOARD OF COUNTY COMMISSIONERS
SWEETWATER COUNTY, WYOMING

Wally J. Johnson, Chair

John K. Kolb, Member

Don Van Matre, Member

Randy Wendling, Member

ATTEST:

Steven Dale Davis, County Clerk

Reid O. West, Member

NOTICE OF PUBLIC HEARING
SWEETWATER COUNTY
BUDGET AMENDMENT

Notice is hereby given of a Public Hearing to amend the Road & Bridge department budget within the Sweetwater County 2014-2015 budget in the amount of \$200,000.00 due to unanticipated capital expenditures within the department.

Said hearing will be held at the Sweetwater County Commissioners' meeting room in the County Courthouse in Green River, Wyoming on the 16th day of June, 2015 at 8:30 A.M. At this time, any and all interested persons may appear and express their opinion regarding the budget amendment.

Dated at Green River, Wyoming this 8th day of June, 2015.

Board of County Commissioners
Sweetwater County, Wyoming

Attest:

(s) Wally J Johnson, Chair

(s) Steven Dale Davis, County Clerk

Please Advertise as a Legal Advertisement on June 9, 2015.

RESOLUTION 15-06-CL-05
SWEETWATER COUNTY
BUDGET AMENDMENT

DUE to unanticipated payroll expenditures within the Detention Center department totaling \$7,000,

WHEREAS, it has been determined that the aforementioned funds need to be transferred within the 2014-2015 County Budget,

WHEREAS, the Notice of Public Hearing has been published in accordance with the regulations and rules governing the budget process and there being no protests filed or expressed to the Board of County Commissioners regarding this amendment to the Sweetwater County Budget at the hearing,

BE IT THEREFORE RESOLVED: that the 2014-2015 fiscal year budget for Sweetwater County be amended to reflect the following budget changes:

Expenditure Increase General Fund:

Detention Center – Payroll	\$7,000
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Expenditure Decrease General Fund:

Detention Center – Operating	(\$7,000)
-------------------------------------	------------------

Dated at Green River, Wyoming this 16th day of June, 2015.

BOARD OF COUNTY COMMISSIONERS
SWEETWATER COUNTY, WYOMING

Wally J. Johnson, Chair

John K. Kolb, Member

Don Van Matre, Member

Randy Wendling, Member

ATTEST:

Steven Dale Davis, County Clerk

Reid O. West, Member

NOTICE OF PUBLIC HEARING
SWEETWATER COUNTY
BUDGET AMENDMENT

Notice is hereby given of a Public Hearing to amend the Detention Center department budget within the Sweetwater County 2014-2015 budget in the amount of \$7,000.00 due to unanticipated capital expenditures within the department.

Said hearing will be held at the Sweetwater County Commissioners' meeting room in the County Courthouse in Green River, Wyoming on the 16th day of June, 2015 at 8:30 A.M. At this time, any and all interested persons may appear and express their opinion regarding the budget amendment.

Dated at Green River, Wyoming this 8th day of June, 2015.

Board of County Commissioners
Sweetwater County, Wyoming

Attest:

(s) Wally J Johnson, Chair

(s) Steven Dale Davis, County Clerk

Please Advertise as a Legal Advertisement on June 9, 2015.

**RESOLUTION 15-06-CL-06
SWEETWATER COUNTY
BUDGET AMENDMENT**

DUE to the increases in revenue and expenditures in the Health Insurance Fund anticipated through the end of the fiscal year,

WHEREAS, it has been determined that the aforementioned funds need to be included in the 2014-2015 County Budget,

WHEREAS, the Notice of Public Hearing has been published in accordance with the regulations and rules governing the budget process and there being no protests filed or expressed to the Board of County Commissioners regarding this amendment to the Sweetwater County Budget at the hearing,

BE IT THEREFORE RESOLVED: that the 2014-2015 fiscal year budget for Sweetwater County be amended to reflect the following budget changes:

Revenue Increase Health Insurance Fund	\$300,000.00
Expenditure Increase Health Insurance Fund	\$300,000.00

Dated at Green River, Wyoming this 16th day of June, 2015.

**BOARD OF COUNTY COMMISSIONERS
SWEETWATER COUNTY, WYOMING**

Wally J. Johnson, Chair

John K. Kolb, Member

Don Van Matre, Member

Randy Wendling, Member

ATTEST:

Steven Dale Davis, County Clerk

Reid O. West, Member

NOTICE OF PUBLIC HEARING
SWEETWATER COUNTY
BUDGET AMENDMENT

Notice is hereby given of a Public Hearing to amend the Health Insurance Fund budget within the Sweetwater County 2014-2015 budget in the amount of \$300,000.00 due to additional expenditures anticipated through the end of the fiscal year.

Said hearing will be held at the Sweetwater County Commissioners' meeting room in the County Courthouse in Green River, Wyoming on the 16th day of June, 2015 at 8:30 A.M. At this time, any and all interested persons may appear and express their opinion regarding the budget amendment.

Dated at Green River, Wyoming this 8th day of June, 2015.

Board of County Commissioners
Sweetwater County, Wyoming

Attest:

(s) Wally J Johnson, Chair

(s) Steven Dale Davis, County Clerk

Please Advertise as a Legal Advertisement on June 9, 2015.



SWEETWATER C·O·U·N·T·Y



BOARD VACANCY

The Board of Sweetwater County Commissioners is seeking applicants interested in serving as an appointee to the board of these important County agencies:

- **AIRPORT**
- **COMMUNITY FINE ARTS**
- **LIBRARY**
- **MEMORIAL HOSPITAL OF SWEETWATER COUNTY**
- **MUSEUM**
- **PLANNING & ZONING**
- **PREDATORY ANIMAL**
- **RECREATION**
- **SOLID WASTE (FARSON)**
- **SOUTHWEST COUNSELING**
- **STAR TRANSIT**

If you have applied for a board in the past, please call the Commissioners' Office to update your application.

To apply: please contact the Sweetwater County Commissioners Office at 80 West Flaming Gorge Way, Suite 109, Green River, WY 82935. **Deadline to apply: 5:00 p.m. Monday, June 1, 2015.** Application forms may be obtained at the above address or on the county website www.sweet.wy.us, or by calling 307-872-3897 or via email at: shoemakers@sweet.wy.us

Please advertise on Saturday, May 9, 2015, Wednesday, May 13, 2015 and Wednesday, May 27, 2015.

STATE OF WYOMING
STATE LOAN AND INVESTMENT BOARD

Grant Agreement

1. **Parties.** The parties to this Agreement are the Wyoming Office of State Lands and Investments (Office of State Lands), whose address is 122 West 25th Street, Cheyenne, Wyoming, 82001, and the grant recipient, Sweetwater County (Grantee), whose address is 80 West Flaming Gorge Way, Suite 19, Green River, WY 82935.
2. **Purpose of Agreement.** On April 9, 2015, the State Loan and Investment Board (SLIB) approved a grant from 2014 HEA 41, Section 328, up to the amount of Three Million, Four Hundred Thirty-Four Thousand, Four Hundred Eighty-Five Dollars and 00/100 (\$3,434,485.00), to be used for the following SLIB-approved project:

Sweetwater County Circuit Court Justice Center

The Office of State Lands administers these types of grants. For the above-named project, this agreement shall set out the grant conditions and instructions on how the Office of State Lands will disburse funds for the project.

Additionally, and although not a condition to receiving grant funding under this agreement, the Office of State Lands highly recommends that the governing body of the Grantee attend "Board Training".

3. **Term of Agreement and Required Approvals.** This agreement is effective when all parties have executed it _____.
4. **Responsibilities of Grantee.** The Grantee agrees:
 - A. Grantee shall comply with the special conditions set out on Attachment A to this Agreement and incorporated herein by reference.
 - B. The granted funds are to be spent only for the described purpose or project in the submitted application, and for no other purpose or project.
 - C. Requests for disbursements of funds shall be supported by adequate proof submitted by the Grantee showing that such obligations have

been incurred for the purpose for which the grant was made, and are then due and owing.

- D. The Grantee will establish and maintain sufficient internal controls to ensure that grant funds are spent in accordance with this agreement, SLIB rules, and all other state and federal laws.
- E. If any of the granted funds are not utilized for the above-described project or purpose, the Grantee shall repay such funds immediately to the SLIB. The Grantee further agrees to provide the Office of State Lands, upon request, a full and complete accounting as to the use and distribution of the granted funds; said accounting to be done in accordance with generally accepted accounting principles and shall be provided to the SLIB within a reasonable time.
- F. The Office of State Lands, or another approved designee of the SLIB, may perform an audit or examination of the books and records of the grant at any time and without notice, and that the SLIB or its designee may at any time without notice perform on-site visits and inspections of the project being funded.
- G. The Grantee shall comply with all applicable state and federal laws, rules, and regulations, including compliance with the provisions of Wyo. Stat. § 16-6-1001, Article 10, *Capital Construction Projects Temporary Restrictions*, if receiving funding from 2014 HEA 41, Section 328.

5. **Responsibilities of the Office.** The Office of State Lands agrees:

- A. To furnish granted funds only as needed to discharge obligations incurred by the Grantee for its approved project, provided that the obligations incurred are eligible for funding under 2014 HEA 41, Section 328, under this agreement and other state law, and provided further that the Grantee is in compliance with this agreement, and all other state and federal laws.

6. **Special Provisions.**

- A. To request reimbursement for eligible expenditures, a Grant Draft Request (GDR) form must be completed, and submitted (original signatures required) with a copy of each invoice detailing the expenditures, the SLIB share, and SLIB share of Engineering.
 - (i) All GDR forms must be signed by your authorized signatories. By submission of a GDR, the Grantee hereby warrants that the signatories of the grant draft request form are authorized to sign on behalf of the Grantee. It always remains the responsibility of

the Grantee for ensuring that grant funds are spent in accordance with this agreement, and state and federal law.

- (ii) An electronic copy of the GDR form (with or without formulas) is available on our web site, by going to <http://lands.wyo.gov>, clicking on Grants & Loans in the top menu bar, going to "Court Security Grants" and clicking on "Grant Draft Request". Then, a "File Download" menu will appear—click on Save, and be sure to note where the file is saved. Open the file that you just saved, click on the tab you would like to view or work with, such as Example GDR with formulas, GDR with Formulas, or GDR without Formulas.
- (iii) The Office of State Lands recommends using the GDR with Formulas, to automatically calculate the SLIB Amount for each invoice. Update the form with the following information:

Grant NO.: CHS-15002 SW.
SLIB: 100%
LOCAL: 0%
Requested By: Sweetwater Coutny
Project Description: Sweetwater County Circuit Court Justice Center
D. Amount of Funds Approved for Project: \$3,434,485.00

In addition, update the following at the bottom of the form:

Type the Name & Title for the By Signature
Type the Name & Title for the Attest Signature
Type the Name of the Contact Person
Type the Phone number of the contact person
Type the e-mail address of the contact person

Print on Legal paper (11" x 14"), attach the invoices in the order they appear on the GDR, original signatures are required.

- (iv) Upon receipt, the Office of State Lands will review for accuracy, eligibility, and submit for processing. Payments will be issued directly from the Wyoming State Auditor's office, typically on Monday and Thursday of each week.
- (v) To verify a payment, use the on-line payment search at http://sao.state.wy.us/EFT_Search_page.htm, on the State Auditor's website, by selecting "Vendor Payments Search" and entering as much information as possible. (The Office of State Lands is linked to Dept 060, you are the vendor, the Document will begin with the Grant number), click "Submit." Once you have the results, you can click on the titles at the top of the page to sort by column.

- B. Disbursement requests submitted will be paid by percentage only, and not paid in full. The percentage of payment is based on the amount approved by the SLIB as a percentage of the total eligible project cost given in the application. The SLIB's disbursement percentage for this project is 100%.
- C. For questions about the form, reimbursement process, or eligible items, please contact Dawn Karban (dawn.karban1@wyo.gov or 307-777-7309) or Cori Phelps (cori.phelps@wyo.gov or 307-777-7453).

7. General Provisions.

- A. **Amendments.** Any changes, modifications, revisions, or amendments to this Agreement which are mutually agreed upon by the parties shall be incorporated by written instrument, executed and signed by all parties to this Agreement.
- B. **Applicable Law/Venue.** The construction, interpretation, and enforcement of this Agreement shall be governed by the laws of the State of Wyoming. The Courts of the State of Wyoming shall have jurisdiction over this Agreement and the parties, and the venue shall be the First Judicial District, Laramie County, Wyoming.
- C. **Assignment/Contract Not Used as Collateral.** Neither party shall assign or otherwise transfer any of the rights or delegate any of the duties set out in this Agreement without the prior written consent of the other party. The Grantee shall not use this Agreement, or any portion thereof for collateral for any financial obligation.
- D. **Audit/Access to Records.** The Office of State Lands and its representatives shall have access to any books, documents, papers, electronic data and records of the Grantee which are pertinent to this Agreement.
- E. **Compliance with Laws.** The Grantee shall keep informed of and comply with all applicable federal, state, and local laws and regulations in the performance of this Agreement.
- F. **Entirety of Agreement.** This Agreement, consisting of six (6) pages and Attachment A, one (1) page, represents the entire and integrated Agreement between the parties and supersedes all prior negotiations, representations, and agreements, whether written or oral.
- G. **Force Majeure.** Neither party shall be liable for failure to perform under this Agreement if such failure to perform arises out of causes completely beyond the control and without the fault or negligence of the nonperforming party. Such causes may include, but are not

limited to, acts of God, fires, floods, epidemics, quarantine restrictions, freight embargoes, and unusually severe weather. This provision shall become effective only if the party failing to perform immediately notifies the other party of the extent and nature of the problem, limits delay in performance to that required by the event, and takes all reasonable steps to minimize delays. This provision shall not be effective unless the failure to perform is beyond the control and without the fault or negligence of the nonperforming party.

- H. **Indemnification.** Each party to this Agreement shall assume the risk of any liability arising from its own conduct. Neither party agrees to insure, defend or indemnify the other.
- I. **Severability.** Should any portion of this Agreement be judicially determined to be illegal or unenforceable, the remainder of the Agreement shall continue in full force and effect, and the parties may renegotiate the terms affected by the severance.
- J. **Sovereign Immunity.** The State of Wyoming, the SLIB, the Office of State Lands, and Sweetwater County do not waive sovereign immunity by entering into this Agreement and specifically retain all immunities and defenses available to them as sovereigns pursuant to Wyo. Stat. § 1-39-104(a) and all other applicable law. Designations of venue, choice of law, enforcement actions, and similar provisions should not be construed as a waiver of sovereign immunity. The parties agree that any ambiguity in this Agreement shall not be strictly construed, either against or for either party, except that any ambiguity as to sovereign immunity shall be construed in favor of sovereign immunity.
- K. **Third Party Beneficiary Rights.** The parties do not intend to create in any other individual or entity the status of third party beneficiary, and this Agreement shall not be construed so as to create such status. The rights, duties, and obligations contained in this Agreement shall operate only between the parties to this Agreement and shall inure solely to the benefit of the parties to this Agreement. The provisions of this Agreement are intended only to assist the parties in determining and performing their obligations under this Agreement.
- L. **Titles Not Controlling.** Titles of sections and subsections are for reference only and shall not be used to construe the language in this Agreement.

THE REMAINDER OF THIS PAGE WAS INTENTIONALLY LEFT BLANK.

8. **Signatures.** The parties to this Agreement, either personally or through their duly authorized representatives, have executed this Agreement on the dates set out below, and certify that they have read, understood, and agreed to the terms and conditions of this Agreement.

The signatory for the Grantee also hereby certifies that he or she is authorized to sign this Agreement on behalf of the Grantee and bind the Grantee to the terms herein.

The effective date of this Agreement is the date of the signature last affixed to this page.

WYOMING OFFICE OF STATE LANDS AND INVESTMENTS:

Bridget Hill, Director

Date

GRANTEE:
Sweetwater County

(Name and Title)

Date

ATTORNEY GENERAL'S OFFICE: APPROVAL AS TO FORM

Megan Nicholas, Assistant Attorney General

Date

JPS
6/19/15

STATE OF WYOMING
STATE LOAN AND INVESTMENT BOARD

**Grant Agreement
Attachment A**

Detailed below are the special conditions the Grantee must meet prior to funds being disbursed:

The Grantee shall complete a *Certification Statement* and submit it to the Office of State Lands as soon as possible upon entering into this agreement.

This form can be found on the Office's website by going to <http://lands.state.wy.us>, then clicking on "Grants & Loans", under "Qualifications", then clicking on "Contractors & Design Firms Certification".

The Certification must be submitted prior to submitting the first Grant Draft Request (GDR) or with the first GDR. The Office of State Lands must receive the certification before any GDRs can be reviewed and processed. In addition, the Grantee must reference which grants the completed certification is referencing.

For questions about the Certification, please contact Cori Phelps (cori.phelps@wyo.gov or 307-777-7453).

Certification Statement
W.S. 16-6-101 & W.S. 16-6-1001

W.S. § 16-6-101, et seq. PREFERENCE FOR RESIDENT CONTRACTORS

If advertisement for bids is required, the Contract shall be let to the responsible certified resident making the lowest bid, if the certified resident's bid is not more than five percent (5%) higher than that of the lowest responsible nonresident bidder. "Resident" for this purpose means as defined by W.S. § 16-6-101. A successful resident bidder shall not subcontract more than thirty percent (30%) of the work covered by his contract to nonresident contractors. A resident bidder shall submit a copy of its certificate of residency with its bid.

W.S. § 16-6-1001(2011 Senate File 144) PREFERENCE FOR RESIDENT DESIGN FIRMS

Applicants must comply with all aspects of W.S. § 16-6-1001, if applicable, including but not limited to submitting a plan that promotes the employment of responsible Wyoming resident design firms, including professional architectural and engineering services in the planning and design phases of facilities funded with monies subject to its provisions. Plans are to be submitted to Governor Matthew H. Mead, Capitol Building, Cheyenne, Wyoming 82002

Any funds from the Office of State Lands and Investments for capital construction projects authorized for expenditure after June 30, 2010, which have not been obligated by contract or designed as of January 17, 2011 must provide the signed statement below to the Office of State Lands and Investments with funding applications and prior to reimbursement of expenditures.

I certify to the best of my knowledge and belief that the _____ COUNTY OF SWEETWATER _____ has
(City, Town, District)
complied with W.S. § 16-6-101 and W.S. § 16-6-1001 (2011 Senate File 144) unless otherwise noted below.

1. W.S. § 16-6-1001 (b)

Plan submitted to Governor's Office (Date submitted: _____ 06/16/15 _____)

Item #2 and #3 are project specific for:

CWC# _____, MRG# _____, JPA# _____, CWSRF# _____, DWSRF# _____ CHS# 15002 SW.

2. W.S. § 16-6-1001(a)

Complied with W.S. § 16-6-1001(a)

Waiver Approved; attach copy of written documentation provided to Governor and Joint Appropriations Interim Committee with description and detailed reason

Exempt; attach copy of legal opinion and detailed reason provided to Governor and Joint Appropriations Interim Committee

3. W.S. § 16-6-101

Complied with W.S. § 16-6-101, et. seq

Project has not been bid, but will include standard contract language to comply with W.S. § 16-6-101

Waiver Approved; attach copy of written documentation provided to Governor and Joint Appropriations Interim Committee with description and detailed reason

Exempt; attach copy of legal opinion and detailed reason provided to Governor and Joint Appropriations Interim Committee

Date: _____ 06/16/15 _____

Signature
County Commission Chairman
Title

JPS
6-10-15

Sweetwater County
Certification Statement Plan for W.S. 16-6-1001 (b)
Preference for Resident Design Firms

Any state funds appropriated or authorized for expenditure for Sweetwater County capital construction projects shall be subject to the following procedures which promotes the employment of responsible Wyoming resident design firms as well as partnerships between responsible Wyoming design firms and specialized nonresident firms.

The procedures set forth in this plan are not applicable to projects where a design firm is familiar with the project subject matter based on prior work performed for Sweetwater County on a previous phase of the project or on a prior related project including but not limited to a planning or feasibility phase of the project. In such cases the design firm may remain the same throughout all phases of the project but the initial first phase must adhere to this process unless prohibited by federal law.

The Plan consists of the following:

1. Sweetwater County will provide statewide notice that it is seeking professional services for the design of a capital construction project. Notice will be provided through newspapers with statewide circulation at least once per week for three (3) consecutive weeks.
2. Firms interested in providing the design services, including professional architectural and engineering services as defined by W.S. 9-2-1028(a)(v), will be requested to respond to a "Request for Proposal" in which project specific qualifications and other pertinent information will be provided. The work to be conducted by the firm shall be under the direction of a licensed professional as required by state statutes.
3. Sweetwater County may invite up to three (3) firms for interviews or select the top ranking firm based on but not limited to the following criteria:

CRITERIA

- i. Previous relevant experience of consultant to complete this type of project.
- ii. Qualification and depth of the project team (i.e. Licensed professionals in all areas of the project).
- iii. Previously demonstrated experience of the firm to meet deadlines.
- iv. Cost effectiveness of the proposal (Amount, cost determination, etc.).
- v. Consultants understanding of the project.
- vi. Compliance with information requested in the proposal (ex. Rate schedule, estimated cost, etc.).
- vii. Previous work experience on similar projects.
- viii. Approach to determining an estimated cost for the project.
- ix. Hourly rate of Project Personnel.
- x. Time to complete the design phase(s) of the project.
- xi. Extent to which the work will be performed by individuals whose primary place of work is located within the State of Wyoming.

The criteria listed above will be evaluated and weighted using the following assessment tools:

<u>RATING</u>	<u>Points</u>	<u>WEIGHT</u>	<u>Multiplier</u>
• Outstanding:	5	▪ Critical Item	3
• Well Qualified:	4	▪ Very Important	2
• Satisfactory:	3	▪ Important	1
• Weak:	2		
• Poor:	1		

- Partnerships between responsible Wyoming design firms, including professional engineering and architectural services, and non-resident firms when necessary to secure specialized services required for a project are allowable. If the partnership wishes to be considered as a Wyoming Resident Design Firm, the proposal must specifically request such consideration and must identify the extent to which services are provided by each affiliated firm. Additional consideration will be provided to those partnerships that increase the technical capacity of the Wyoming Partner.
- Should interviews be conducted, the firms will be advised to focus their presentation on price, project specific qualifications, and content of the technical proposal.
- If members of the consultant selection team are having difficulty in deciding between a resident firm and a non-resident firm, Sweetwater County will hire the resident firm.

This Plan which promotes the employment of responsible Wyoming resident design firms was approved by the Sweetwater County Commission on June 16, 2015.

**THE BOARD OF COUNTY COMMISSIONERS OF
SWEETWATER COUNTY, WYOMING**

By:

Wally J. Johnson, Chairman

John K. Kolb, Member

Don Van Matre, Member

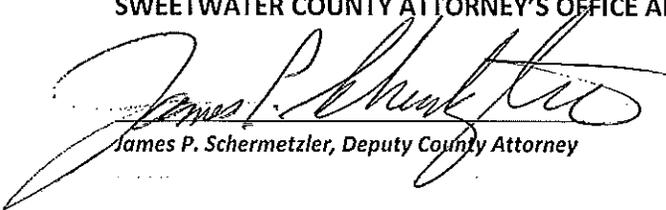
Randy Wendling, Member

Reid O. West, Member

ATTEST:

Steven Dale Davis, County Clerk

SWEETWATER COUNTY ATTORNEY'S OFFICE APPROVAL AS TO FORM



James P. Schermetzler, Deputy County Attorney

BOARD OF COUNTY COMMISSIONERS

MEETING REQUEST FORM

Requested Meeting Date: Tuesday, June 16, 2015	Name & Title of Presenter: Rosemary Lantta, Advisor to the Trustees
Department or Organization: High Desert Rural Health Care District	Contact Phone & E-mail: (307) 267-3195 rmari@aol.com
Exact Wording for Agenda: EMS Needs Assessment Grant Application, Update on HDRHCD	Preference of Placement on Agenda & Amount of Time Requested for Presentation: 10 minutes, early preferred or as the rest of your schedule permits
Will there be Handouts? (If yes, include with meeting request form) Yes, Application and Cover Letter	Will handouts require SIGNATURES: Yes, the EMS Assessment Grant application
Additional Information:	

- All requests to be added to the agenda will need to be submitted in writing on the "Meeting Request Form" by Wednesday at 12:00 p.m. prior to the scheduled meeting and returned in person or electronically to Clerk Sally Shoemaker at: shoemakers@sweet.wy.us
- All handouts are also due by Wednesday at 12:00 p.m. prior to the scheduled meeting date. Handouts may be submitted to Clerk Sally Shoemaker either in person or electronically. *****If your handout is not accompanied with the request to be added to the agenda, your request will be dismissed and you may reschedule for the next meeting provided the handout(s) are received.*****
- Any documents requiring **Board Action** or **signature** are considered agenda items and need to be requested in the same manner.
- All **original** documents requesting action or signature must be submitted to Deputy County Clerk Vickie Eastin. However, a **copy** must be submitted to Sally Shoemaker for distribution of the packet and retention.
- As always, if you are unable to attend the meeting after being placed onto an agenda, please send a representative in your place or your item will be rescheduled.
- In order to determine placement on the agenda, please review the county website (www.sweet.wy.us/commissioner) on Thursday afternoon.
- If a request to be placed on an agenda is received **AFTER** the deadline, you will be considered for the next meeting date.
- No handout will be received during a meeting in session.

HIGH DESERT RURAL HEALTH CARE DISTRICT
P.O. Box 338
Wamsutter, WY 82336-0338

June 10, 2015

Sweetwater Board of County Commissioners
County Courthouse
80 W. Flaming Gorge Way
Green River, WY 82935

Re: High Desert Rural Healthcare District,
EMS Needs Assessment Grant Application

Mr. Chairman and Commissioners,

Thank you for adding to the agenda our request for Sweetwater County to sign our application acknowledging that you are aware that we are applying for a State of Wyoming EMS Needs Assessment Grant. If the grant is awarded, the HDRHCD as applicant/grantee will fund the required grantee's contribution of \$5,000.00 and the remainder of the cost of the assessment (approx. \$60,000.00 dollars) is covered by a grant through the State's EMS Sustainability Trust Account. The signature of Sweetwater County as an involved political subdivision is required.

As background, like most rural communities Wamsutter has experienced a steady decline of the availability of volunteer EMTs. Although the service had been able to maintain a robust roster of 14-20 volunteers in the past, there are now only 6 and all have day jobs. For over a year EMS coverage has been provided primarily through an agreement with Carbon County EMS with evening/weekend coverage by the dedicated but exhausted Wamsutter volunteers.

The Trustees considered proposals for multiple paid, Wamsutter-based EMT teams to augment volunteers. However, the majority of Trustees are concerned that just a large investment in payroll, although providing the desired Wamsutter-based coverage, is a quick fix that doesn't address underlying issues (i.e. low call volume, most employers unwilling to excuse EMTs for runs during working hours, recruiting EMTs willing to relocate). To address that concern, the Trustees provided funds in the proposed budget for exploring all options available for addressing the challenges faced by rural EMS services.

The Trustees are therefore applying for this grant opportunity in order to have a comprehensive, objective assessment of the coverage area in order to inform a strategic, data-supported, long range plan for the District's support of EMS in the region.

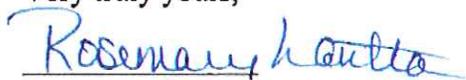
One of the Trustees and I had the opportunity to meet last month with a partner of SafeTech Solutions, the firm that conducts the assessments. We are aware the county is also applying for the grant and we fully support Wamsutter EMS's participation in that countywide assessment. However the consultant did verify that data from participation in the county-wide

assessment that Sweetwater County is applying for would aggregate up to a county level, which may not supply the District-specific evaluation the Trustees are looking for.

The chance to have a comprehensive assessment of a key part of the health care system in the District done by a nationally recognized expert in solutions to the challenges facing rural EMS would be of great interest to the Board on any given day. The ability to get it done for a fraction of the actual cost makes this a no brainer, cost-effective investment in the community and industry in the District.

Thank you for considering our request. We look forward to meeting with you Tuesday to answer any questions you may have.

Very truly yours,



Rosemary Lantta

Advisor to the Board of Trustees

Emergency Medical Services (EMS) Needs Assessment Grant

Wyoming Department of Health
Public Health Division
Office of Emergency Medical Services

This is a fillable form; handwritten forms will not be accepted.

Date

Section I: Contact Information

Primary Contact

Title

Phone Number

E-Mail

Please refer to Appendix A, *Column C* of the Grant Guidance document for RUCA information.

RUCA Number

List political subdivisions within the RUCA

RUCA Number

List political subdivisions within the RUCA

RUCA Number

List political subdivisions within the RUCA

If additional space is needed, please attach a type-written document outlining political subdivisions.

Section II: EMS Agency/Agencies

*If more than one EMS agency is within the RUCA(s), all additional EMS agencies will be **required** to complete and submit EMS Agency Addendum.*

Year Established

Ambulance License

Service Director

Physician Medical Director

Geographical Area Served

I-80 from milepost 187 to 150 and the area approx. 40 mi N, 30 mi S of Town of Wamsutter

Population Served

451 (increases to approx 900 with industry workers)

Trauma Region

4

Call Volume Per Year

100

Highest Skill Level Provided

- EMT
- Intermediate
- Paramedic

Total # of Volunteers

6

Total # of Paid Staff

0

Total # of Stations

1

Total # of EMTs

6

Section III: Budget Information

Is the EMS Agency a 501 (c)(3)?

- Yes
- No

Does the EMS Agency bill for services?

- Yes
- No

If not, why?

Agency has historically billed for most services but due to the rapid decline in volunteers for the last year not had staff for that function.

A medicare number was never obtained for the service.

Previous FY Expenditures

not available

Previous FY Operating Budget

not available

Current FY Operating Budget

FY to Date Expenditures

List Funding and/or Revenue Sources

Source 1	Amount
<input type="text" value="Town of Wamsutter"/>	<input type="text" value="59,750.00"/>
Source 2	Amount
<input type="text" value="Equipment Grants"/>	<input type="text" value="100,000.00"/>
Source 3	Amount
<input type="text"/>	<input type="text"/>
Source 4	Amount
<input type="text"/>	<input type="text"/>
Source 5	Amount
<input type="text"/>	<input type="text"/>
Source 6	Amount
<input type="text"/>	<input type="text"/>

Outline billing practices.

The service uses Metro Billing Service when it bills.

Payor Mix Percentage:

Medicare	<input type="text" value="not available"/>	Medicaid	<input type="text" value="not available"/>
Uncompensated	<input type="text" value="not available"/>	Tribal	<input type="text" value="not available"/>
Private Insurance	<input type="text" value="not available"/>	Veterans Administration	<input type="text" value="not available"/>
Worker's Comp.	<input type="text" value="not available"/>	Self Pay	<input type="text" value="not available"/>
Other (list)	<input type="text" value="not available"/>	Percentage	<input type="text"/>
Other (list)	<input type="text" value="not available"/>	Percentage	<input type="text"/>

Section IV: Needs Assessment

Provide reasons for effectiveness of services and identify opportunities for improvement.

The historical effectiveness of Wamsutter Ambulance has been rooted in the Town's ability to sustain community-based EMS services with volunteers. Wamsutter by both size and remote location is rural by nature and definition. In addition to being 40 miles from the nearest hospital in Rawlins, the Town is located on 1-80 with potential accidents from heavy I-80 traffic (WYDOT estimate is 10,000-19,000 vehicles/day). The advantage of the availability of dedicated, Town-based volunteer EMS for over 30 years to provide urban-level response times has significantly reduced the negative impact of geographical isolation, particularly in winter, on residents, industry workers and truckers/travelers on a heavily used stretch of 1-80.

State concerns with maintaining staff and/or volunteer levels.

Wamsutter is experiencing a shortage of volunteers to staff an all-volunteer EMS organization. Due to many factors, the number of volunteers in Wamsutter has been decreasing steadily over the last several years from an average of 14 to the current level of 4 volunteers and all of them have full time jobs.

For over a year EMS coverage has been provided primarily through an agreement with Carbon County EMS with evening/weekend coverage by the remaining 4 volunteers. The burden on those volunteers has been great and burnout has reached a critical level.

Decreasing volunteerism coupled with recent cuts in industry creating a declining pool of volunteer recruits, an aging permanent population and lack of industry support for allowing volunteers to leave for calls while working suggests that it is not likely to expect that a robust volunteer roster can be reestablished. Even if obtained, funding for full time EMTs does not solve underlying problems of low call volume or the challenge of recruiting and retention of EMTs willing to relocate to a remote, rural location.

Identify gaps in emergency medical services delivery within service area.

Roads north and south of the interstate at Creston Junction are in poor condition, significantly impacting response time.

Describe concerns with maintaining certification levels of current staff.

Increased requirement of continuing education hours has caused a burden on the remaining volunteers, forcing them use vacation leave to attend conferences. In addition, non-specific training content at conferences seems to be counter productive.

There is a need for more specific training at conferences as well as the availability of on-line courses for credit.

Define current communication system(s) and identify any interruptions.

Dispatch from Sweetwater County is delayed as it is patched through to Carbon County, and essential information may be incomplete.

Service has a 30 year relationship with and is very satisfied with Carbon County Dispatch.

Discuss demand for services within service area over the last three years.

With the coverage area including a long stretch of heavily traveled I-80, call volume has increased.

Explain current relationships with local authorities, local dispatch entity or public safety answering point, health care providers, hospitals, and other emergency response entities.

90% of runs go to Memorial Hospital of Carbon County. For the last year the bulk of calls in the Wamsutter coverage area have been made by Carbon County EMS through an agreement.

Although located a longer distance from Wamsutter than the hospital in Carbon County, in the past year there has been an increase and improvement in communication with Memorial Hospital of Sweetwater County.

Outline the method(s) of service evaluation and/or quality improvement practices. Include whether WATRS is being used.

The service accesses the quarterly report through WATRS to review documentation grades.

The service does monthly run reviews and has regular and as-needed meetings with the medical director.

Outline the method(s) of staff evaluation and/or performance improvement practices.

Director conducts Immediate review of any issues that may impact liability or patient care.

Section V: Required Documentation

Letter of commitment for \$5,000 of matching funds	Attached	<input checked="" type="checkbox"/>
Letter(s) of support from stakeholders	Attached	<input checked="" type="checkbox"/>
Assets and liabilities balance sheet	Attached	<input checked="" type="checkbox"/>
Projected next FY budget	Attached	<input checked="" type="checkbox"/>

Section VI: Signatures

Once completed, please print application to obtain signatures.

PLEASE NOTE: This application will not considered without signatures from each authorized signatory from each political subdivision within the RUCAs.

Printed Name	Signature	Political Subdivision	Date
Printed Name	Signature	Political Subdivision	Date
Printed Name	Signature	Political Subdivision	Date
Printed Name	Signature	Political Subdivision	Date
Printed Name	Signature	Political Subdivision	Date
Printed Name	Signature	Political Subdivision	Date

For Office Use Only:

Date Received

Application Number

BOARD OF COUNTY COMMISSIONERS MEETING REQUEST FORM

Requested Meeting Date: BOCC June 16, 2015	Name & Title of Presenter: John Radosevich Sweetwater County Engineer
Department or Organization: Engineering	Contact Phone & E-mail: 307-872-3921
Exact Wording for Agenda: Roadway Easement for County Road 4-24 (Patrick Draw Road)	Preference of Placement on Agenda & Amount of Time Requested for Presentation: 5 minutes
Will there be Handouts? (If yes, include with meeting request form) yes	Will handouts require SIGNATURES: Board Approval and authorize Chairman to sign
Additional Information:	

- All requests to be added to the agenda will need to be submitted in writing on the "Meeting Request Form" by Wednesday at 12:00 p.m. prior to the scheduled meeting and returned in person or electronically to Clerk Sally Shoemaker at: shoemakers@sweet.wy.us
- All handouts are also due by Wednesday at 12:00 p.m. prior to the scheduled meeting date. Handouts may be submitted to Clerk Sally Shoemaker either in person or electronically. *****If your handout is not accompanied with the request to be added to the agenda, your request will be dismissed and you may reschedule for the next meeting provided the handout(s) are received.*****
- Any documents requiring **Board Action** or **signature** are considered agenda items and need to be requested in the same manner.
- All **original** documents requesting action or signature must be submitted to Deputy County Clerk Vickie Eastin. However, a **copy** must be submitted to Sally Shoemaker for distribution of the packet and retention.
- As always, if you are unable to attend the meeting after being placed onto an agenda, please send a representative in your place or your item will be rescheduled.
- In order to determine placement on the agenda, please review the county website (www.sweet.wy.us/commissioner) on Thursday afternoon.
- If a request to be placed on an agenda is received **AFTER** the deadline, you will be considered for the next meeting date.
- No handout will be received during a meeting in session.



May 21, 2015

Sweetwater County
Attn: Robert Robinson
80 West Flaming Gorge Way, Suite 23
Green River, WY 82935

RE: Patrick Draw Roadway Easement
Sweetwater County, WY
Audit No. D03374

Dear Mr. Robinson:

Enclosed for your handling is the original of the above referenced Roadway Easement between Anadarko Land Corp. and Sweetwater County, State of Wyoming.

Please arrange to have the Roadway Easement recorded in the public records of Sweetwater County, WY.

Once recorded please return a recorded copy to my attention via email.

If you have any questions or need additional assistance with this matter, please feel free to contact me at (832) 636-3863 or by email at nolan.mcwherter@anadarko.com.

Respectfully,

ANADARKO LAND CORP.

A handwritten signature in black ink, appearing to read "Nolan McWherter", followed by a horizontal line extending to the right.

Nolan McWherter
Landman

ROADWAY EASEMENT

STATE OF WYOMING §
COUNTY OF SWEETWATER § KNOW ALL PERSONS BY THESE PRESENTS:

THIS EASEMENT, Made this 20th day of MAY, 2015, between ANADARKO LAND CORP., a Nebraska Corporation, whose address is P.O/Box 1330 Houston, TX 77251, Grantor, and SWEETWATER COUNTY, STATE OF WYOMING, whose address is 80 West Flaming Gorge Way Green River, Wyoming 82935, Grantee.

WITNESSETH, That Grantor, for and in consideration of the sum of Ten Dollars (\$10.00) and other good and valuable consideration, to it in hand paid by Grantee, the receipt whereof is hereby acknowledged, has granted, bargained, sold and conveyed, and by these presents does grant, bargain, sell and convey unto Grantee, and unto its successors and assigns, a non-exclusive EASEMENT for the sole purposes of a right-of-way for the construction, operation, maintenance, repair, renewal, reconstruction and use of a non-exclusive access roadway for pedestrian and vehicular ingress and egress purposes together with the right to clear and keep clear all trees, roots, brush and other obstructions located in or on the Easement (hereinafter called "Roadway"), upon, along and under the surface of the land situate in County of Sweetwater, State of Wyoming, described in Exhibit A and B (hereinafter called "Premises") attached and made a part hereof.

RESERVING, however, to Grantor, its successors and assigns, the right to construct at any and all times and to maintain roads, highways, pipelines and telephone, telegraph and electric power pole and wire lines, over, under and across (but in such a way as not unreasonably to interfere with) said Roadway of Grantee on the Premises; it being understood that the right so reserved to Grantor, its successors and assigns, is retained along with the general right of Grantor, its successors and assigns, to the use of the Premises for any purpose not inconsistent with the use by Grantee of said Easement for the purposes herein defined.

This Easement is made subject to all outstanding leases and other outstanding rights, including, but not limited to, those for highways and other roadways and rights of way for irrigation ditches, pipelines, pole and wire lines and the right of renewals and extensions of the same, and subject also to all conditions, limitations, restrictions, encumbrances, reservations or interests of any person which may affect the Premises, whether recorded or unrecorded, and is made without covenant of title or for quiet enjoyment.

The Easement granted herein is for a strip of land one hundred feet (100') in width, which shall include the land fifty feet (50') on either side of the centerline described in Exhibit A and B.

The grant of Easement herein made is on the express condition that Grantor, its successors and assigns, shall not be liable to Grantee, its successors or assigns, for any damage occurring to the installations made or to be made by Grantee upon the Premises or for any other damage whatsoever occasioned by subsidence of the surface of the Premises as a result of mining underneath the same or resulting in any other way from the removal of coal or other minerals in or underlying the Premises.

All operations hereunder shall be conducted at the sole risk and expense of Grantee and in compliance with all federal, state, county and municipal laws, rules, ordinances and regulations which are applicable to the area of operations including but not limited to those pertaining to environment, safety, fire, sanitation, conservation, water pollution, air quality, waste management, toxic and chemical management and reporting, and fish and game. All operations hereunder shall be conducted in a prudent manner. If, as a result of Grantee's operations upon or use of said Premises hereunder, any statute, law, ordinance, rule, regulation or requirement is violated, Grantee shall protect, save harmless, defend and indemnify Grantor, its officers, employees and/or agents, against and from any and all penalties, fines, costs and expenses, including court costs and counsel fees, imposed upon or incurred by Grantor, its officers, employees and/or agents, resulting from, or connected with, such violation and/or violations.

Grantee shall not suffer or permit any mechanic's lien, or other lien, to be filed against said Premises or any part thereof, by reason of work, labor, services, or materials supplied, or claimed to have been supplied, to Grantee, or anyone claiming under Grantee. If any such mechanic's lien, or other lien, shall at any time be filed against said Premises, Grantee shall cause the same to be discharged of record within thirty (30) days of the date of filing the same, and if Grantee shall fail to discharge such lien within such period, then Grantor may, at its option, discharge the same by paying the amount claimed to be due without inquiry into the validity of the same and Grantee shall thereupon reimburse Grantor within thirty (30) days for any payment so made.

Grantee is advised that the generation, transportation, treatment, storage and disposal of hazardous wastes are controlled by the Federal Resource Conservation and Recovery Act of 1976 and regulations issued pursuant to the Act and subsequent Acts by the United States Environmental Protection Agency (EPA) and/or state agencies. If Grantee's use of the Premises shall include any regulated hazardous waste activities, Grantee shall obtain a hazardous waste permit from the EPA or appropriate state agency and shall provide copy of same to Grantor.

GRANTEE, BY THE ACCEPTANCE OF THIS EASEMENT, AGREES TO INDEMNIFY AND HOLD HARMLESS GRANTOR AND ITS AFFILIATES, THEIR OFFICERS, AGENTS, AND EMPLOYEES, AGAINST AND FROM ANY AND ALL LIABILITY, LOSS, DAMAGE, CLAIMS, DEMANDS, ACTIONS, CAUSES OF ACTION, FINES, PENALTIES, COSTS AND EXPENSES OF WHATSOEVER NATURE, INCLUDING ATTORNEY'S FEES AND COURT COSTS, WHICH MAY RESULT FROM PERSONAL INJURY TO OR DEATH OF PERSONS WHOMSOEVER, OR DAMAGE TO OR LOSS OR DESTRUCTION OF PROPERTY OR THE ENVIRONMENT ARISING AFTER THE EXECUTION OF THIS EASEMENT AND ITS RECORDING WITH THE REGISTER OF DEEDS, WHEN SUCH PERSONAL INJURY, DEATH, LOSS, DESTRUCTION OR DAMAGE, HOWSOEVER CAUSED, GROWS OUT OF OR ARISES FROM OR IN CONNECTION WITH GRANTEE'S CONSTRUCTION, OPERATION, MAINTENANCE, REPAIR, RENEWAL, RECONSTRUCTION, REMOVAL OR USE OF SAID ROADWAY AND ANY APPURTENANCES OR IMPROVEMENTS LOCATED OR ACTIVITIES CONDUCTED THEREON. NOTHING CONTAINED HEREIN SHALL CONSTITUTE A WAIVER OF GOVERNMENTAL IMMUNITY APPLICABLE TO THE GRANTEE BY THE LAWS OF THE UNITED STATES OR THE LAWS OF THE STATE OF WYOMING.

The term "affiliate" (or "affiliates" as the case may be) as used herein means any corporation which directly or indirectly controls, or is controlled by, or is under common control with Grantor.

Grantee shall not assign this Easement, or any interest therein, without the written consent of Grantor, which consent shall not be unreasonably withheld.

Subject to the foregoing, the terms and conditions of this grant shall be applicable to Grantee, its successors and assigns.

Grantee hereby agrees that the surface of any of the Premises disturbed in the exercise of the rights granted hereunder to Grantee shall be reseeded by Grantee, at the sole expense of Grantee, in a manner consistent with applicable Governmental requirements on comparable adjacent areas of public lands. Grantee shall eradicate all noxious weeds from the Premises and shall not allow the same to go to seed. Additionally, Grantee shall not change the location of or injure any permanent fences or irrigation structures located on the Premises.

IN WITNESS WHEREOF, Grantor has caused these presents to be signed by its Attorney-in-Fact, the day and year first herein written.

ANADARKO LAND CORP.

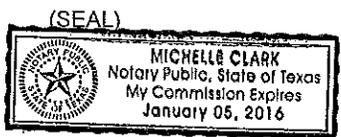
By: [Signature]
Jane Ann Byroad *JAN*
Agent and Attorney-In-Fact

STATE OF TEXAS }
COUNTY OF MONTGOMERY } ss:

The foregoing instrument was acknowledged before me this 20th day of May, 2015, by Jane Ann Byroad, Agent and Attorney-In-Fact of Anadarko Land Corp.

WITNESS my hand and official seal.

My commission expires: January 05, 2016
[Signature]
Michelle Clark
Notary Public



Board of County Commissioners,
Sweetwater County, Wyoming, GRANTEE;

Dated this _____ day of June, 2015

Wally J. Johnson, Chairman

ATTEST:

Dale Davis, Sweetwater County Clerk

Exhibit A

The existing Patrick Draw Road (CR 4-24) crosses the following Sections of land owned by Anadarko Land Corp., the road right-of-way being fifty (50') feet wide on each side of the existing road centerline, as the road is shown on the 1981 Sweetwater County engineering roadway drawings, Map 9022 - A through G (EXHIBIT B), hereby referenced and made a part hereof:

All of the 6th P.M., Sweetwater County, Wyoming;

T. 19 N. R. 99 W.
Sections 13, 25, 35

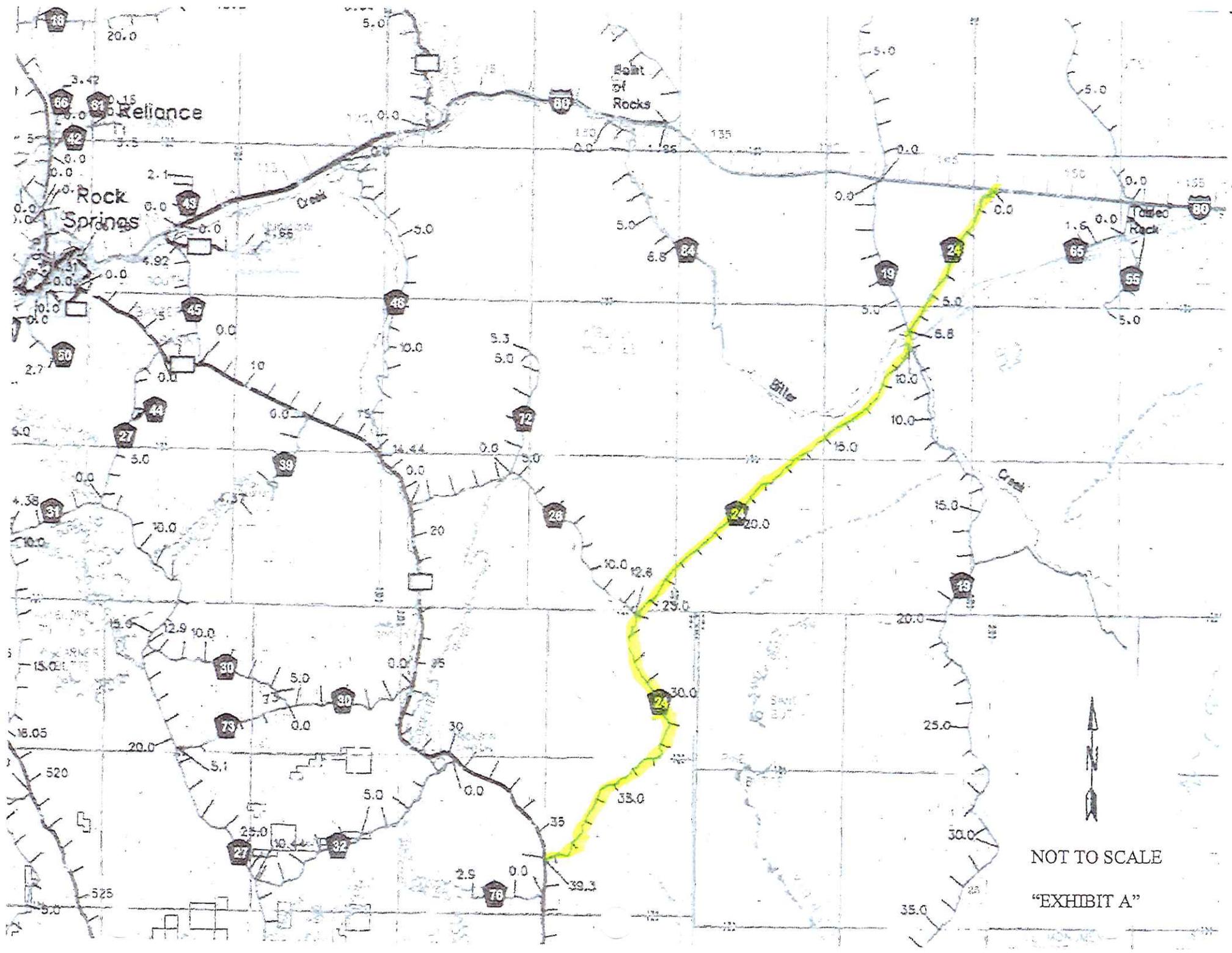
T. 18 N. R. 99 W.
Sections 3, 10(Tract 37 portion), 15, 21, 29, 31

T. 18 N. R. 100.W.
Section 35

T. 17 N. R. 100 W.
Sections 3, 9, 17, 19

T. 17 N. R. 101 W.
Sections 25, 35

T. 16 N. R. 101 W.
Sections 3, 15, 23, 25, 35

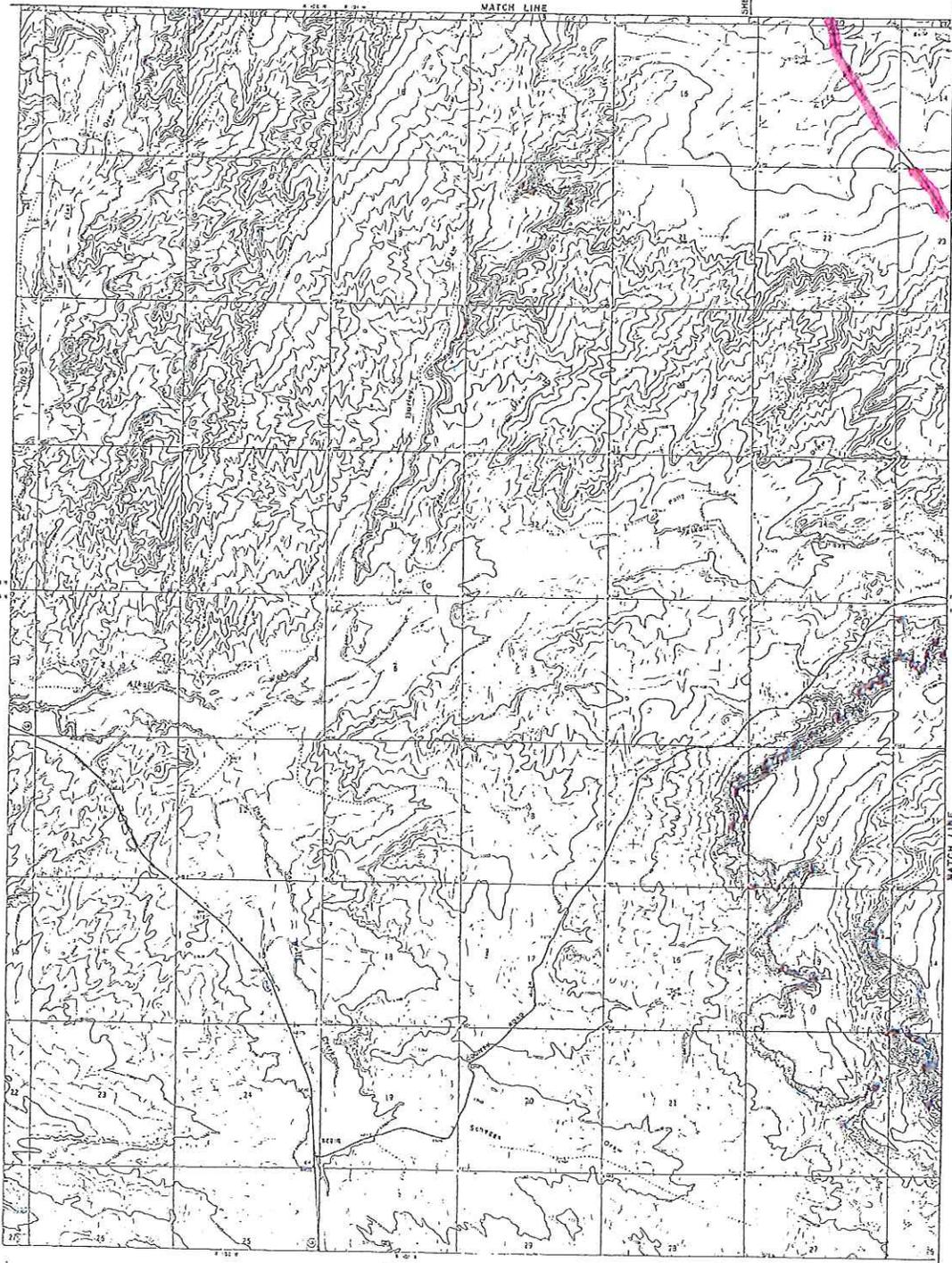


NOT TO SCALE

"EXHIBIT A"

Audit No. D03374

Exhibit B
Map 9022 - A through G
Attached as sheets 1-7



STATEMENT OF ENGINEER

EDWARD FANELIA STATED THAT HE IS BY OCCUPATION A PROFESSIONAL ENGINEER AND LAND SURVEYOR EMPLOYED BY SWEETWATER COUNTY, WYOMING, AS THE COUNTY ENGINEER AND SURVEYOR TO PREPARE THE MAPS SHOWING THE SCHEGGS DRAW ROAD (COUNTY ROAD 4-24), THAT THE PREPARATION OF SAID MAPS WAS MADE UNDER HIS SUPERVISION AND AUTHORITY DURING THE MONTH OF AUGUST 1981 AND THAT THE LOCATION OF SAID ROAD AS SHOWN IS BASED ON U.S. GEOLOGICAL SURVEY QUADRANGLE MAPS OF THE AREA.

Edward Fanelia
EDWARD FANELIA - WYO. REG. NO. 515

SIGNED AND SWORN BEFORE ME THIS 3RD DAY OF September, 1981.

Barbara Wright
BARBARA WRIGHT - NOTARY PUBLIC

MY COMMISSION EXPIRES OCTOBER 17, 1982.

CERTIFICATE OF APPLICANT

THIS IS TO CERTIFY THAT EDWARD FANELIA WHO SUBSCRIBED TO THE STATEMENT HEREIN IS THE PERSON EMPLOYED BY THE UNDERSIGNED APPLICANT TO PREPARE THE MAPS WHICH HAVE BEEN ACCEPTED BY THE APPLICANT AS THE APPROXIMATE FINAL LOCATION OF THE ROAD SHOWN HEREON, AND THAT THIS MAP IS FILED AS PART OF THE COMPLETE APPLICATION IN ORDER THAT APPLICANT MAY OBTAIN THE BENEFITS OF TITLE 1 OF THE FEDERAL LAND POLICY AND MANAGEMENT ACT OF OCTOBER 21, 1976 (PL 94-203 STAT. 27123), AND THAT THE APPLICATION IS SUBMITTED IN ACCORDANCE WITH THE SWEETWATER COUNTY BOARD OF COMMISSIONERS' RESOLUTION NO. 80-1980, SEPTEMBER 1, 1980, AND I FURTHER CERTIFY THAT THE RIGHT OF WAY AS SHOWN ON THE MAPS HEREIN REFERRED TO IS DESIRED FOR A COUNTY ROAD.

SWEETWATER COUNTY BOARD OF COMMISSIONERS

ATTEST
Albert Vesco
ALBERT VESCO, COUNTY CLERK

John L. Venkovich
JOHN L. VENKOVICH, CHAIRMAN

MAP TO ACCOMPANY APPLICATION
FOR RIGHT OF WAY REQUIRED
FOR
SCHEGGS DRAW ROAD
(COUNTY ROAD 4-24)

ACROSS U.S. LANDS IN SWEETWATER COUNTY

APPLICANT
SWEETWATER COUNTY, WYOMING

SCALE 1" = 200'

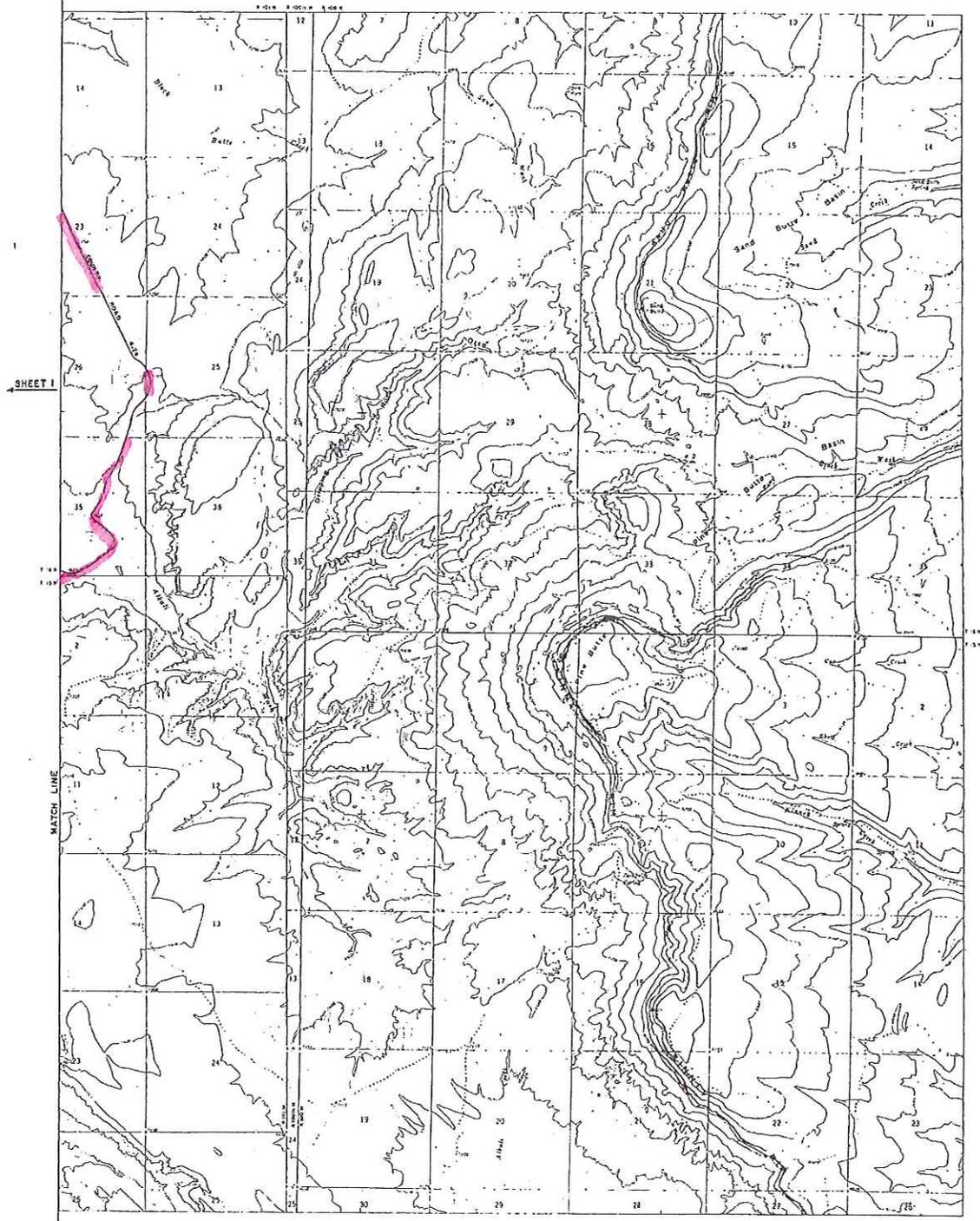
AUGUST 7, 1981

SHEET 1 OF 7

"EXHIBIT B"

[Pink Line] = ANADARKO LAND CORPORATION ROADWAY EASEMENT TO SWEETWATER COUNTY.

DW24-001



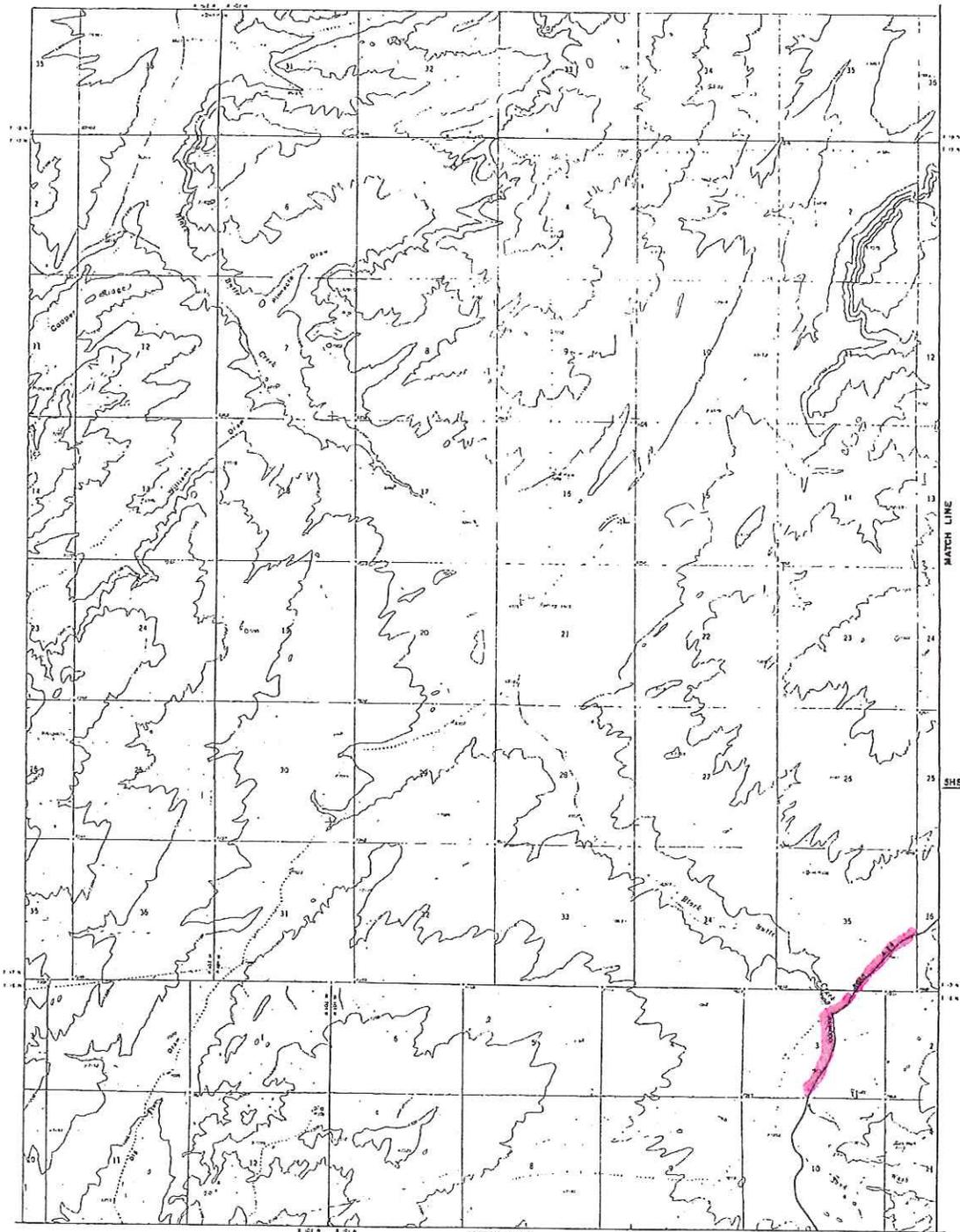
MAP TO ACCOMPANY APPLICATION
 FOR RIGHT OF WAY REQUIRED
 FOR
SCHEGGS DRAW ROAD
 (COUNTY ROAD 4-24)
 ACROSS U.S.A. LANDS IN SWEETWATER COUNTY
 APPLICANT
 SWEETWATER COUNTY, WYOMING
 SCALE 1" = 2000'

AUGUST 7, 1961

SHEET 2 OF 7

"EXHIBIT B"

ZW 74-037



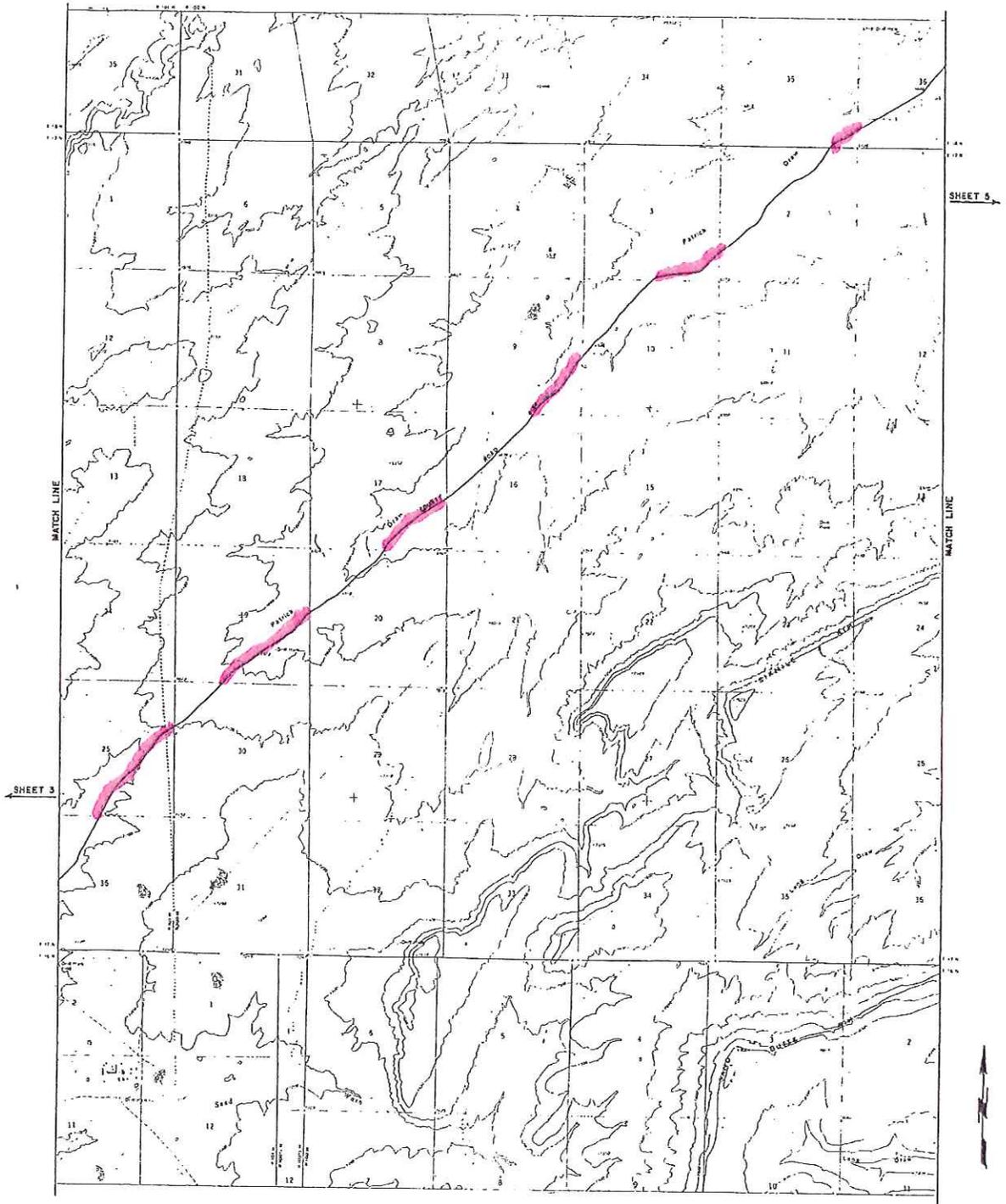
MAP TO ACCOMPANY APPLICATION
 FOR RIGHT OF WAY REQUIRED
 FOR
SCHEGGS DRAW ROAD
 (COUNTY ROAD 4-24)
 ACROSS U.S.A. LANDS IN SWEETWATER COUNTY
 APPLICANT
 SWEETWATER COUNTY, WYOMING
 SCALE 1" = 2000'

AUGUST 7, 1981
 DRAWN BY
 ENGINEERED BY
 M. H. ...

SHEET 3 OF 7

"EXHIBIT B"

ZW-761A



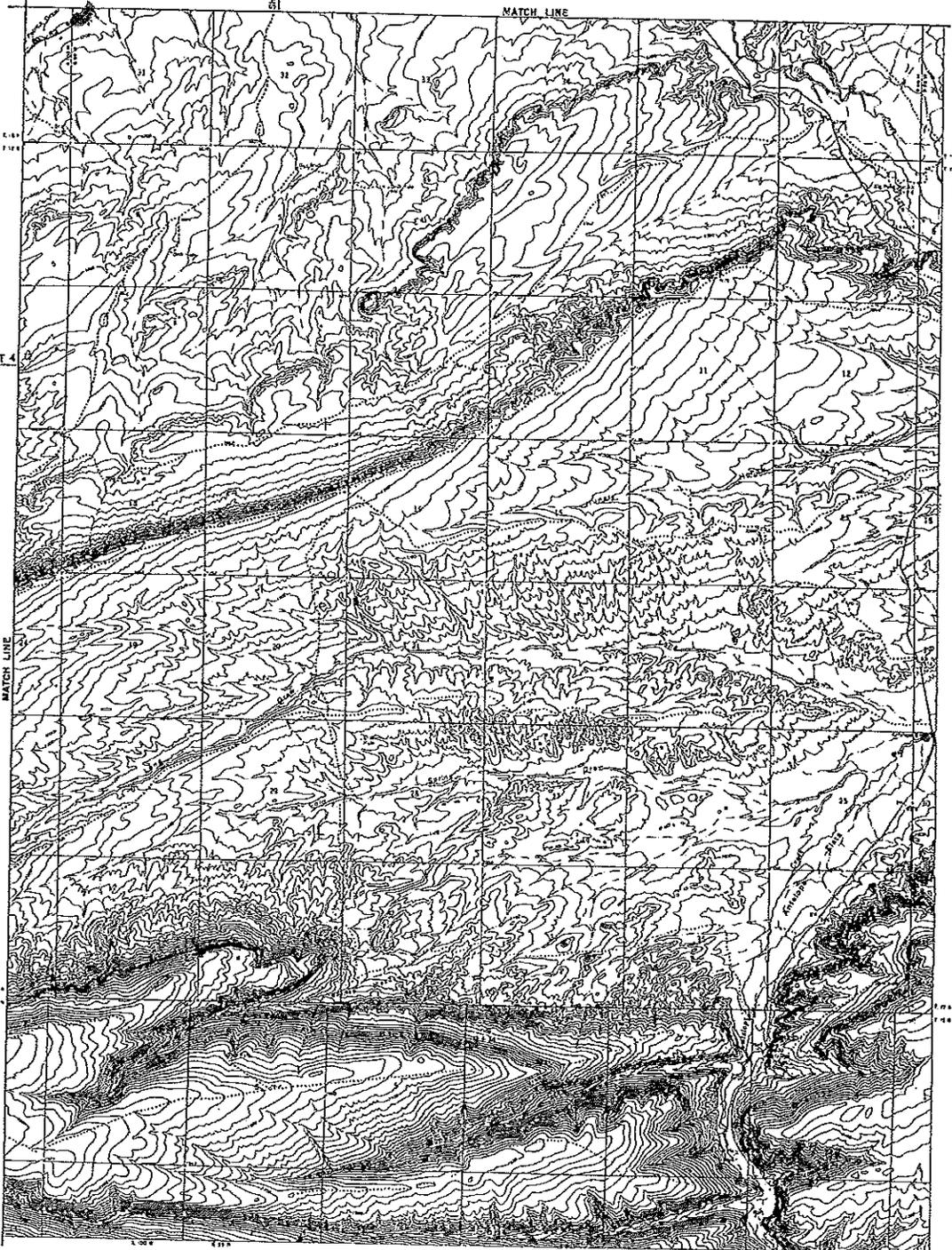
MAP TO ACCOMPANY APPLICATION
 FOR RIGHT OF WAY REQUIRED
 FOR
SCIEGGS DRAW ROAD
 (COUNTY ROAD 4-24)
 ACROSS U.S.A. LANDS IN SWEETWATER COUNTY
 APPLICANT
 SWEETWATER COUNTY, WYOMING

SCALE 1" = 2000'
 AUGUST 7, 1991

SHEET 4 OF 7

"EXHIBIT B"

700-72 MB



MAP TO ACCOMPANY APPLICATION
 FOR RIGHT OF WAY REQUIRED
 FOR
SCHEGGS DRAW ROAD
 (COUNTY ROAD 4-24)
 ACROSS U.S.A. LANDS IN SWEETWATER COUNTY

APPLICANT
 SWEETWATER COUNTY, WYOMING

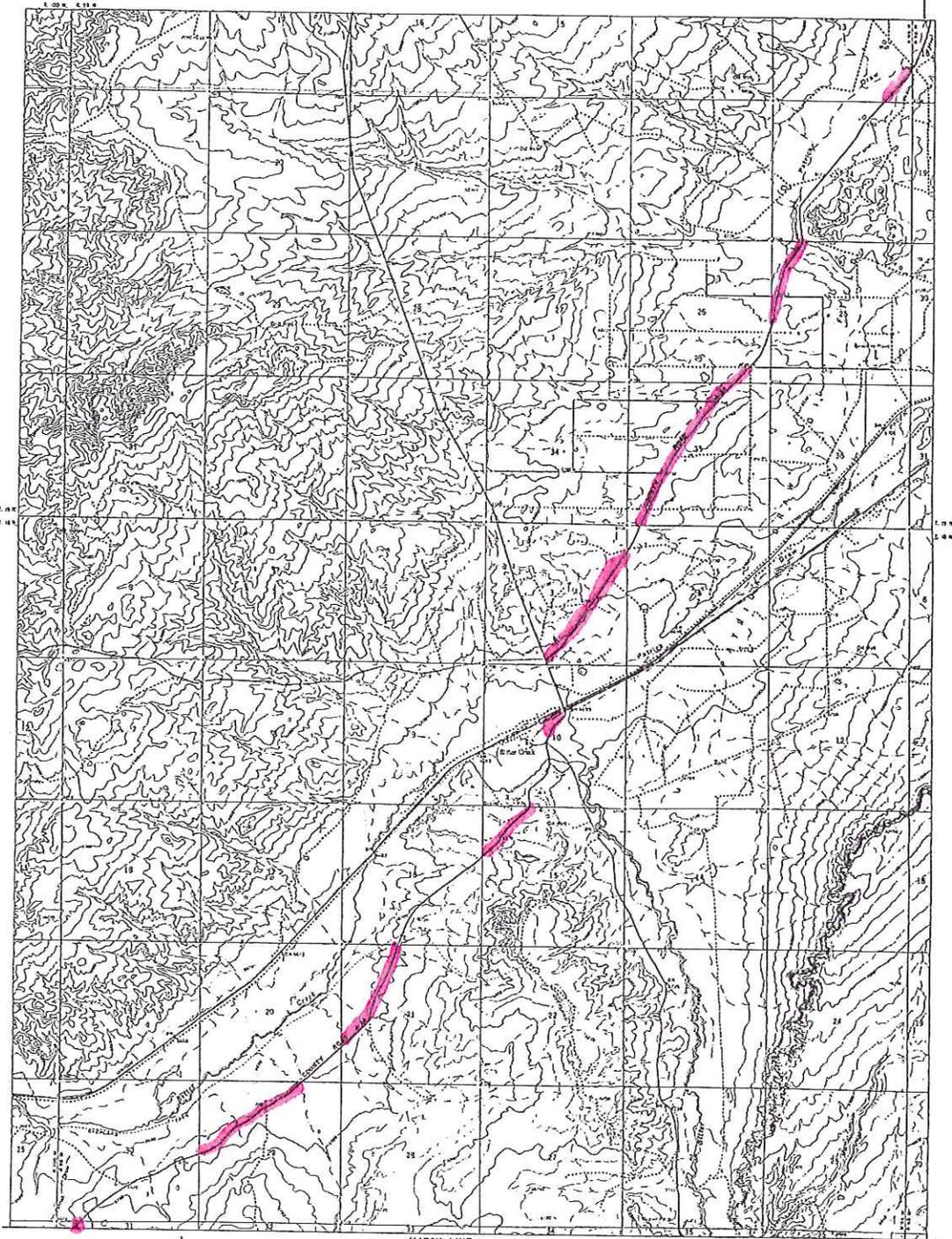
SCALE 1" = 2000'

AUGUST 7, 1981
 DAB S 8022-E
 ENGINEERING I
 W FLAY
 248

SHEET 5 OF 7

"EXHIBIT B"

2007/1-1000



WITHER CREEK QUADRANGLE SHEET 7

1.00
1.00

1.00
1.00

SHEET 5

MATCH LINE

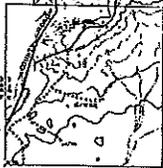
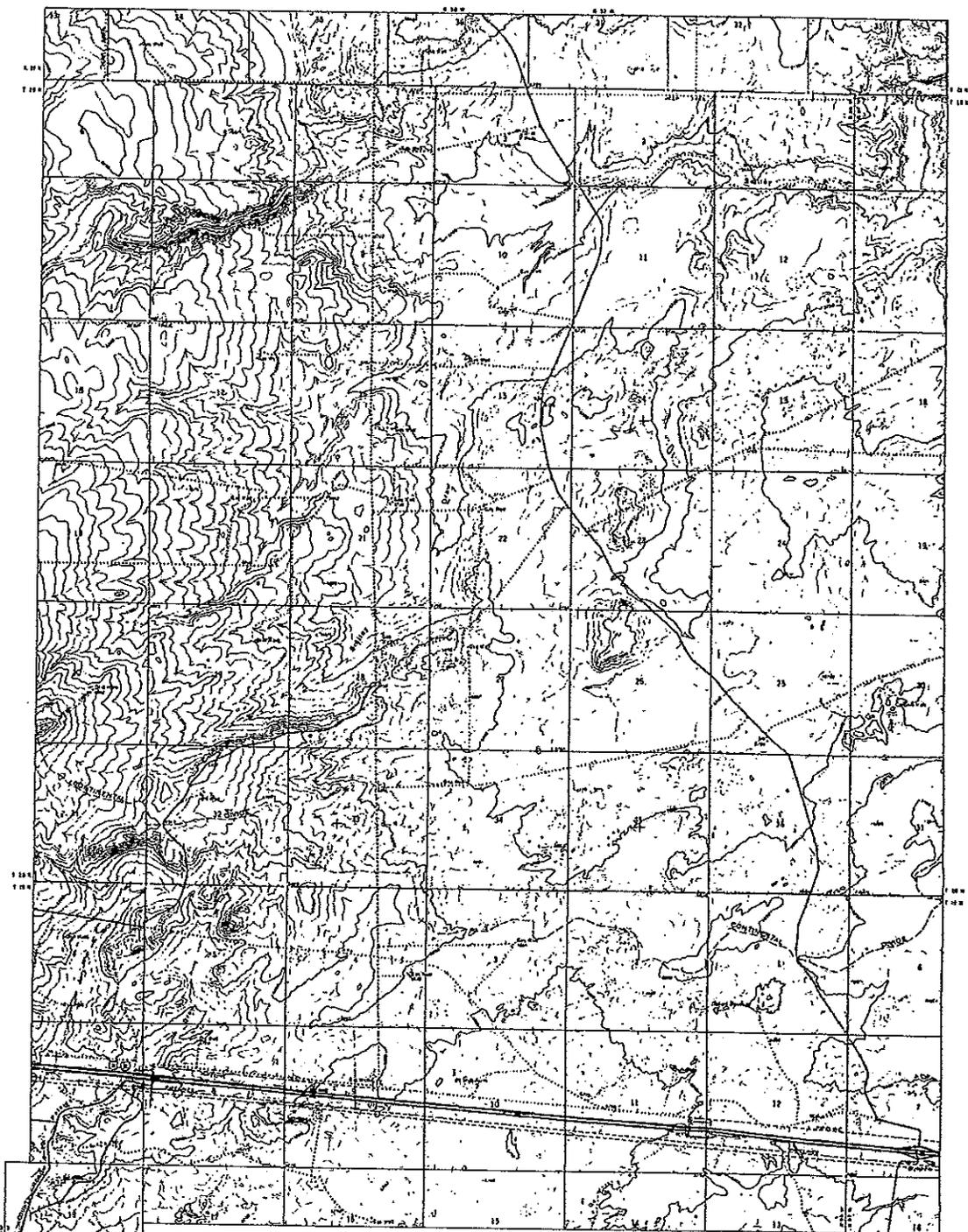
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ACROSS U.S.A. LANDS IN SWEETWATER COUNTY
APPLICANT
SWEETWATER COUNTY, WYOMING
SCALE 1" = 2000'
AUGUST 7, 1981

SHEET 6 OF 7

PLS. 9222 F
ENGINEERING &
M. FLAT
24A

"EXHIBIT B"

200-716 M.C.



SHEET 6
↓

MAP TO ACCOMPANY APPLICATION
FOR RIGHT OF WAY REQUIRED
FOR
SCHEGGS DRAW ROAD
(COUNTY ROAD 4-24)
ACROSS U.S.A. LANDS IN SWEETWATER COUNTY
APPLICANT
SWEETWATER COUNTY, WYOMING
SCALE 1"=2000'

AUGUST 7, 1961
R.P.P.
ENGINEER
M. 10-1
61

SHEET 7 OF 7

"EXHIBIT B"

DN 24-007

BOARD OF COUNTY COMMISSIONERS

MEETING REQUEST FORM

Requested Meeting Date: Tuesday, June 16	Name & Title of Presenter: Mark Kot, Public Lands Planner
Department or Organization: Sweetwater County Commissioners request	Contact Phone & E-mail: 307-872-3917
Exact Wording for Agenda: Sage Grouse Resolution	Preference of Placement on Agenda & Amount of Time Requested for Presentation: 10 minutes
Will there be Handouts? (If yes, include with meeting request form) Yes, attached resolution and cover letter	Will handouts require SIGNATURES: Yes
Additional Information: Per the Board's request, the attached resolution addresses the County's support for encouraging Governor Mead to expand the White Mountain Core Area Boundary. The attached cover letter transmits the attached resolution to the Governor.	

- All requests to be added to the agenda will need to be submitted in writing on the "Meeting Request Form" by Wednesday at 12:00 p.m. prior to the scheduled meeting and returned in person or electronically to Clerk Sally Shoemaker at: shoemakers@sweet.wy.us
- All handouts are also due by Wednesday at 12:00 p.m. prior to the scheduled meeting date. Handouts may be submitted to Clerk Sally Shoemaker either in person or electronically. *****If your handout is not accompanied with the request to be added to the agenda, your request will be dismissed and you may reschedule for the next meeting provided the handout(s) are received.*****
- Any documents requiring **Board Action** or **signature** are considered agenda items and need to be requested in the same manner.
- All **original** documents requesting action or signature must be submitted to Deputy County Clerk Vickie Eastin. However, a **copy** must be submitted to Sally Shoemaker for distribution of the packet and retention.
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- In order to determine placement on the agenda, please review the county website (www.sweet.wy.us/commissioner) on Thursday afternoon.
- If a request to be placed on an agenda is received **AFTER** the deadline, you will be considered for the next meeting date.
- No handout will be received during a meeting in session.

RESOLUTION 15-06-CC-01

WHEREAS, in 2010, the U.S. Fish and Wildlife Service (the service) determined that the Greater Sage Grouse (sage grouse) was warranted for listing under the Endangered Species Act (ESA) but its listing was precluded by other higher priority listing actions making it a candidate species, and

WHEREAS, in its determination, the service concluded that the two top threats to sage grouse were habitat fragmentation and lack of regulatory mechanisms to conserve sage grouse, and

WHEREAS, the service entered a settlement agreement that requires the service to either list the sage grouse as an endangered species or remove it from listing by September 2015, and

WHEREAS, an important factor in the service decision to list the sage grouse is the effectiveness of protection programs being implemented by 11 western states, and

WHEREAS, In 2011, Wyoming Governor Matt Mead issued an Executive Order (EO) that established sage grouse core areas and core area management policies, and

WHEREAS, in early 2015, to meet an EO requirement to review the EO every five years, the Governor directed the Wyoming Sage Grouse Implementation Team (SGIT) to review the EO policies and core area boundaries and to deliver recommendations to the office of the Governor by May 31, 2015, and

WHEREAS, to complete this review, the SGIT requested public recommendations on potential core area boundary adjustments and the SGIT asked the Wyoming Local Sage Grouse Working Groups to examine all public recommendations to provide recommendations to the SGIT Mapping Sub-Committee, and

WHEREAS, the Southwest Wyoming Local Sage Grouse Working Group (working group) met in a public meeting on March 6, 2015 and considered all public recommendations including a request to return the White Mountain Core Area boundary back to the rim of White Mountain where it was initially drawn prior to being moved to accommodate two potential wind energy projects, and

WHEREAS, on March 6, 2015, the working group considered the proposed White Mountain Core Area expansion and unanimously recommended expansion after considering the following:

1. Wind energy projects have been withdrawn from White Mountain;
2. Expanding the core area boundary would enhance sage grouse habitat that would better serve the biological needs of the grouse;
3. The request complied with all 5 criteria established by the SGIT for making core area boundary adjustments;
4. Expanding the White Mountain Core Area would help the state demonstrate to the service that it is taking strong actions to protect the habitat needs of Wyoming Sage Grouse, and

WHEREAS, on April 14, 2015, through a public review process, the SGIT Mapping Sub-Group recommended to the full SGIT, in a 9 to 1 vote, to support the local working group recommendation to expand the White Mountain Core Area as shown on the attached Map (attached Exhibit A), and

WHEREAS, on May 4th, 2015, as a result of a letter from the Rock Springs Grazing Association that opposed the expansion based on the potential for future wind energy projects, the local working group met again in a public meeting to reconsider its previous recommendation to expand the White Mountain Core Area, and, after public comment, the working group did not change its first recommendation to the SGIT, and

WHEREAS, on May 6, 2015, after considering all recommendations and comments regarding the White Mountain Core Area, the SGIT decided to unanimously reverse the recommendations of the working group and SGIT Mapping Sub-group and recommended to the Governor that the White Mountain Core Area not be expanded, and

WHEREAS, on May 19, as a part of the public comment period, the Sweetwater County Board of County Commissioners provided a letter supporting the two working group recommendations to expand the White Mountain Core Area and voiced their continuing objections to the SGIT May 6th recommendation not to expand the White Mountain Core Area, and

WHEREAS, on May 27th, Sweetwater County testified before the full SGIT that Sweetwater County supported expanding the White Mountain Core Area boundary as recommended by the Southwest Local Working Group and SGIT Mapping Subcommittee, and

WHEREAS, Sweetwater County supports the EO and the efforts of the Governor and the SGIT to balance economic concerns with the biological and habitat needs of the sage grouse to avoid listing the sage grouse as an endangered species;

NOW, THEREFORE BE IT RESOLVED, that Sweetwater County supports the expansion of the White Mountain Core Area boundary as recommended by the Southwest Local Working Group and SGIT Mapping Subcommittee and encourages Governor Mead to expand the White Mountain Core Area as shown on the attached map Exhibit A.

Adopted and effective this June 16, 2015

**BOARD OF COUNTY COMMISSIONERS
SWEETWATER COUNTY, WYOMING**

Wally J. Johnson, Chair

John K. Kolb, Member

Don Van Matre, Member

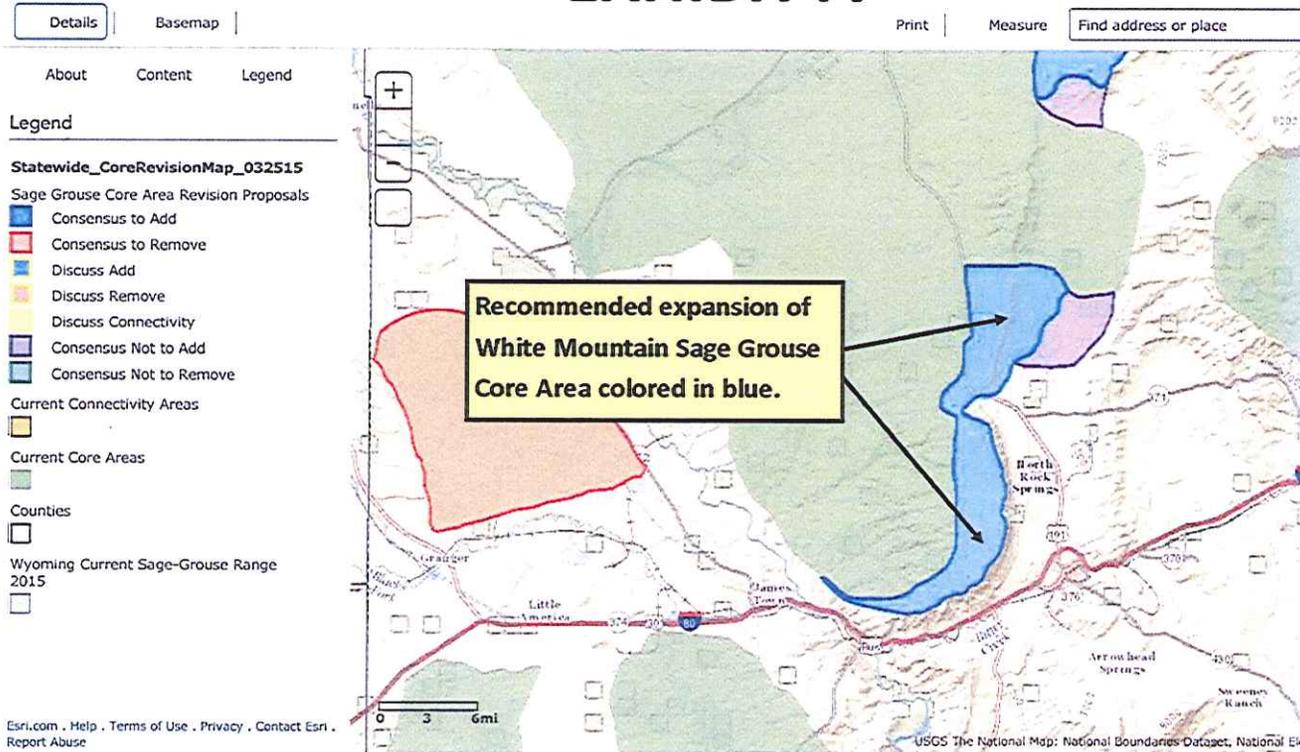
Randal M. Wendling, Member

Attest

Reid O. West, Member

Steven Dale Davis, County Clerk

EXHIBIT A



BOARD OF COUNTY COMMISSIONERS

SWEETWATER

C·O·U·N·T·Y

R

- WALLY J. JOHNSON, CHAIRMAN
- JOHN K. KOLB, COMMISSIONER
- RANDAL M. WENDLING, COMMISSIONER
- REID WEST, COMMISSIONER
- DON VAN MATRE, COMMISSIONER

80 WEST FLAMING GORGE WAY, SUITE 109 -
GREEN RIVER, WY 82935
PH: (307) 872-3890 - FAX - (307) 872-3992

Tuesday, June 16, 2015

Governor Matt Mead
State Capitol
200 West 24th Street
Cheyenne, WY 82002-0010

RE: Sweetwater County request that the White Mountain Core Area boundary be expanded.

Dear Governor Mead:

Sweetwater County requests that the White Mountain Core Area boundary be expanded in accordance with the recommendations of the Southwest Wyoming Local Sage Grouse Working Group and the Sage Grouse Implementation Team (SGIT) and the attached Sweetwater County resolution.

Sweetwater County supports this core area boundary expansion for the following reasons:

1. Expanding the core area boundary on White Mountain would enhance sage grouse habitat which would better serve the biological needs of the bird;
2. The expansion request complies with all 5 sideboards established by the SGIT for making core area boundary adjustments;
3. Pending wind energy projects have been withdrawn from White Mountain and no other wind projects have been proposed for the area;
4. Expanding the White Mountain Core Area boundary will assist the state in demonstrating to the U.S. Fish and Wildlife Service that Wyoming is making a strong effort to protect the habitat needs of Wyoming Sage Grouse.

Sweetwater County emphasizes that it supports the Wyoming Governor's Office in its implementation of the Wyoming Core Area Strategy and in its efforts to preserve the Wyoming economy by keeping the sage grouse off the endangered species list.

If you have any questions, please contact me at 307-872-3897.

Sincerely,

Wally J. Johnson, Chairman
Sweetwater County Board of County Commissioners

Enclosure: Sweetwater County Resolution

BOARD OF COUNTY COMMISSIONERS

SWEETWATER

C·O·U·N·T·Y

- WALLY J. JOHNSON, CHAIRMAN
- JOHN K. KOLB, COMMISSIONER
- RANDAL M. WENDLING, COMMISSIONER
- REID WEST, COMMISSIONER
- DON VAN MATRE, COMMISSIONER

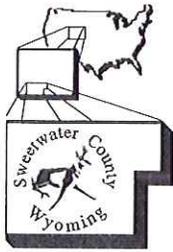
80 WEST FLAMING GORGE WAY, SUITE 109 -
GREEN RIVER, WY 82935
PH: (307) 872-3890 - FAX - (307) 872-3992

- cc Jerimiah Rieman, Natural Resource Policy Advisor, Governor's Office
Bob Budd, Chairman, Wyoming Sage Grouse Implementation Team
Mary Flanderka, Habitat Protection Supervisor, Wyoming Game and Fish Dept.
Tom Christiansen, Sage-Grouse Program Coordinator, Wyoming Game and Fish Dept.
Corby McGuinness, Chairman, Southwest Wyoming Local Sage Grouse Working Group
Mary Jo Rugwell, Acting State Director, BLM Wyoming
Mark Storzer, District Manager, BLM High Desert District
Sweetwater County Board of County Commissioners
Gregory Cowan, Natural Resource Attorney, WCCA
Kent Connelly, President, Coalition of Local Governments
Connie Brook, Attorney, Coalition of Local Governments
Mary Thoman, President, Sweetwater County Conservation District
Eric Bingham, Director, Sweetwater County Land Use Department
John Radosevich, Public Works Director, Sweetwater County

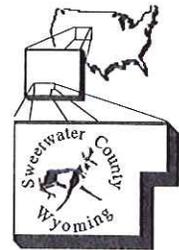
BOARD OF COUNTY COMMISSIONERS MEETING REQUEST FORM

Requested Meeting Date: 6/16/2015	Name & Title of Presenter: Garry McLean, HR Director
Department or Organization: Human Resources	Contact Phone & E-mail: 872-3913
Exact Wording for Agenda: Request approval of Health Insurance renewals FY 16	Preference of Placement on Agenda & Amount of Time Requested for Presentation: 15 min.
Will there be Handouts? (If yes, include with meeting request form) yes	Will handouts require SIGNATURES: yes
Additional Information:	

- All requests to be added to the agenda will need to be submitted in writing on the "Meeting Request Form" by Wednesday at 12:00 p.m. prior to the scheduled meeting and returned in person or electronically to Clerk Sally Shoemaker at: shoemakers@sweet.wy.us
- All handouts are also due by Wednesday at 12:00 p.m. prior to the scheduled meeting date. Handouts may be submitted to Clerk Sally Shoemaker either in person or electronically. *****If your handout is not accompanied with the request to be added to the agenda, your request will be dismissed and you may reschedule for the next meeting provided the handout(s) are received.*****
- Any documents requiring **Board Action** or **signature** are considered agenda items and need to be requested in the same manner.
- All **original** documents requesting action or signature must be submitted to Deputy County Clerk Vickie Eastin. However, a **copy** must be submitted to Sally Shoemaker for distribution of the packet and retention.
- As always, if you are unable to attend the meeting after being placed onto an agenda, please send a representative in your place or your item will be rescheduled.
- In order to determine placement on the agenda, please review the county website (www.sweet.wy.us/commissioner) on Thursday afternoon.
- If a request to be placed on an agenda is received **AFTER** the deadline, you will be considered for the next meeting date.
- No handout will be received during a meeting in session.



Sweetwater County Department of Human Resources



80 W. Flaming Gorge Way
Green River, WY 82935

E-MAIL: SWCHR@SWEET.WY.US

Phone: 307-922-5429 (RS)
307-872-3910 (GR)
Fax: 307-872-3240

MEMORANDUM

TO: Sweetwater County Board of County Commissioners
FROM: Garry McLean 
DATE: June 10, 2015

RE: Health Insurance Renewals

On March 17, 2015, Diversified presented to the Board the performance of the County's health insurance plan and provided some preliminary information for renewal of the County's renewal

During that presentation, Diversified advised the Board that overall the County had a good plan performance year with no claims penetrating the stop loss limit of \$150,000. Based upon this information I requested that Diversified obtain stop loss quotes for this year. *Attachment - 1* shows the summary of the stop loss bids. The County's current stop loss provider HCC returned with a 0 % rate, while Munich, another good company returned with a -7.15%. At first glance it is tempting to simply jump ship and save money with Munich. However, in discussing this issue with Diversified, the stop loss providers factor in how regularly an organization changes providers into their current and future cost formulae. Three to five years with one provider is often advantageous in future pricing. This would be the County's third year with HCC. According to Diversified, frequent changes in stop loss will result in few future bids. The recommendation of Diversified's Brian Carter is to stay with HCC one more year and review again next year. However, he is fine if the Board decides to go with Munich, as they are also a strong, financially stable A+ rated company. The Board will need to vote on a stop loss provider and authorize the chairman to sign and initial in the appropriate locations the attached renewal documents in *Attachment - 2*.

As for UMR's Third Party Administrator (TPA) Renewal, there is very little change. As can be seen in *Attachment - 3*, there are very small increases amounting to approximately \$4,800 annually. I would recommend that the Board approve and authorized the chairman to sign and initial where indicated on the UMR renewal contract *Attachment - 4*.

Overall claims under the plan have continued to be remarkably stable and predictable. Increased utilization of the plan and medical inflation will drive costs upward, perhaps as high as 17 %, but given the current health insurance surplus, premiums have been increased 7 %, providing a slight increase, while also helping us draw down the surplus slowly.

Two years ago the County made the decision to self-fund the dental plan, which has proven very beneficial to the plan. Rates have remained stable, while claims have proven lower than the premium contribution rate, resulting in the County holding on to the proceeds rather than Delta Dental. The County has saved nearly \$100,000 simply by assuming the risk of self-funding the dental program.

There are no notable changes in the other plan areas and costs remain stable. For the upcoming year, staff will be developing a wellness program for BCC review and further analyzing alternative insurance methods, such as High Deductible Health Saving Accounts.



GROUP: Sweetwater County
EFFECTIVE DATE: July 1, 2015

SPECIFIC STOP LOSS	Current	Renewal	Option 1	Option 2	Option 3	Option 4	Option 5	Option 6
CARRIER:	HCC	HCC	Munich	RSLI	Voya	QBE	Berkley	IHC
Carrier Rating:			A+	A+	A	A	A+	A-
TPA:	UMR							
PPO Network:	Options PPO							
UR Vendor:	UMR							
Specific Benefits Included:	Medical & Rx							
Plan Lifetime Maximum:	Unlimited							
Specific Lifetime Maximum Reimbursement:	Unlimited							
Specific Deductible:	\$ 150,000	\$ 150,000	\$ 150,000	\$ 150,000	\$ 150,000	\$ 150,000	\$ 150,000	\$ 150,000
Specific Contract:	12/15	12/15	12/15	12/15	12/15	12/15	12/15	12/15
243 Single Premium	\$ 25.34	\$ 25.34	\$ 32.18	\$ 33.21	\$ 28.00	\$ 27.95	\$ 34.52	\$ 41.24
272 Family Premium	\$ 77.78	\$ 77.78	\$ 64.49	\$ 85.14	\$ 93.55	\$ 78.05	\$ 100.10	\$ 103.12
515 Composite	\$ 52.80	\$ 52.80	\$ 49.24	\$ 60.64	\$ 62.62	\$ 54.41	\$ 69.16	\$ 73.92
Monthly Specific Premium	\$ 27,313.78	\$ 27,313.78	\$ 25,361.02	\$ 31,228.11	\$ 32,249.60	\$ 28,021.45	\$ 35,615.56	\$ 38,069.96
Annual Specific Premium	\$ 327,765.36	\$ 327,765.36	\$ 304,332.24	\$ 374,737.32	\$ 386,995.20	\$ 336,257.40	\$ 427,386.72	\$ 456,839.52
% Difference		0.00%	-7.15%	14.33%	18.07%	2.59%	30.39%	39.38%

Disclosure Status Pending Large Claim Review Pending Large Claim Review

NNL Includes HCC's NNL +50% Includes Munich's NNL +49% Includes QBE's NNL +50%

TOTAL REINSURANCE EXPENSE	Current	Renewal	Option 1	Option 2	Option 3	Option 4	Option 5	Option 6
Annual Fixed Premium	\$ 327,765.36	\$ 327,765.36	\$ 304,332.24	\$ 374,737.32	\$ 386,995.20	\$ 336,257.40	\$ 427,386.72	\$ 456,839.52
% Difference		0.00%	-7.15%	14.33%	18.07%	2.59%	30.39%	39.38%
Maximum Cost Liability	\$ 327,765.36	\$ 327,765.36	\$ 304,332.24	\$ 374,737.32	\$ 386,995.20	\$ 336,257.40	\$ 427,386.72	\$ 456,839.52
% Difference		0.00%	-7.15%	14.33%	18.07%	2.59%	30.39%	39.38%

Rates include 0% commission.



HCC Life Insurance Company
5601 Granito Parkway, 11th Floor, Plano, Texas 75024
main 214 387 5400 facsimile 214 387 5448

May 29, 2015

Stop Loss Marketing
UMR
6465 S. Greenwood Plaza, Ste 300
Centennial, CO 80112

RE: Sweetwater County
Effective Date: 07/01/2015

Dear Stop Loss,

Thank you for placing Sweetwater County with HCC Life Insurance Company. It is our mission to provide you with superior products and service and to exceed your expectations in every aspect of the administration of this account. Our objective is to have your stop loss policy issued as soon as possible from the effective date of coverage.

Enclosed with this letter, are several items that must be executed and returned to us in order for the policy to be issued. This letter will serve as instructional guidance for each of the enclosed forms.

The forms are as follows:

- (a) Application – Please have the application initialed and signed on the appropriate pages. On the last page of the Application, the “Dated At” portion should also be completed along with printing the name of the Officer/Partner as indicated. Any handwritten changes must be initialed by the Officer/Partner. Please be aware that the application is attached to and made a part of the policy.

Please note the Licensed Agent signature must be the Licensed Agent who is (or will be) appointed with HCC Life Insurance Company as the representative of the Agent of Record listed on Page 1 of the Application. Also, please print the name of the Licensed Agent.

- (b) Endorsements/Addendums – If Applicable, please have the endorsement(s) signed by both the Officer/Partner and the Licensed Agent, printing name(s) as indicated. Please refer to the above paragraph regarding the Licensed Agent.
- (c) Business Associate Agreement – Our latest version of the agreement, which is designed to dovetail with the provisions of our Stop Loss policy, now contains all of the new required elements for HCC Life to fulfill its business associate responsibilities. All policyholders are requested to sign this revised agreement.
- (d) Premium Accounting Worksheet – This is a self billing policy and as such the premium accounting worksheet, or similar form of conveyance, should be completed by the plan sponsor or their designee and forwarded to our attention



each month with the appropriate premium payment. The Premium Accounting Worksheet included is for the first month's premium based on the enrollment provided on the underwriting proposal. The premium binder check, or first month's premium submission, should be made payable to HCC Life Insurance Company and mailed to:

Regular Mail

HCC Life Insurance Company
P.O. Box 402032
Atlanta, GA 30384-2032

Overnight Mail

HCC Life Insurance Company
6000 Feldwood Road
Attention: Box 402032
College Park, GA 30349

All subsequent payments during the policy year should be mailed to the same address.

- (e) Underwriting Requirements – Please note that the underwriter may have required additional reports or forms, such as a Disclosure Statement or updated claims information. This information must be received and approved prior to us releasing the Stop Loss Policy. Should you have any outstanding underwriting requirements please submit them to our attention for review and approval as soon as possible.

Please return all completed documentation to my attention at:

HCC Life Plano Office
5601 Granite Parkway, 11th Floor, Plano, TX 75024

HCC Life Insurance Company is rated A+ (Superior) by *A.M. Best Company* and is backed by the financial resources and commitment of our parent company, HCC Insurance Holdings, Inc. For more information about our company, our products and our locations, please visit our website, www.hcclife.com.

Should you have any questions, or if I can be of any assistance, please contact me.

Sincerely,

Kristin Buzbee
Underwriting Assistant II

STOP LOSS INSURANCE
HCC LIFE INSURANCE COMPANY
Three Town Park Commons, 225 TownPark Drive, Suite 350
Kennesaw, Georgia 30144 (800 447-0460)

APPLICATION

1. Full Legal Name of Applicant and Address Sweetwater County 80 West Flaming Gorge Way Green River, WY 82935 Telephone No.: (307)872-3913	2. Applicant is a (check one): <input type="checkbox"/> Corporation <input type="checkbox"/> Labor Union <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> PEO <input type="checkbox"/> Partnership <input type="checkbox"/> MEWA Other: Government
3. Contract Period: Effective Date: 07/01/2015 Expiration Date: 06/30/2016	
4. Full Legal Name of Affiliates, Subsidiaries and other major locations to be included in coverage: Address of Affiliates or Subsidiaries: <input checked="" type="checkbox"/> None <input type="checkbox"/> See attached listing	
5. Nature of Business of the Applicant to be Insured: General Government, NEC	6. Key Contact Person at Applicant:
7. Enter full name of the Employee Benefit Plan(s): Sweetwater County Government Benefit Plan A signed copy of such Employee Benefit Plan(s) must be attached and will form part of this contract.	
8. Name and Address of Plan Supervisor: UMR, Inc. 11 Scott Street, Suite 100 Wausau, WI 54403-480	
9. Agent of Record: Hutchings, Jeana	
10. Estimated Initial Enrollment: Single: 242 Family: 265 Total Covered Units: 507	
11. Retirees Covered: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
12. The Utilization Review vendor will be: UMR Care Management	
13. Deposit Premium (Minimum of first month's estimated premium): \$ 26,770.48 Please review the deposit premium on the Monthly Premium Accounting Worksheet.	
14. SPECIFIC STOP LOSS INSURANCE: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
A. Covered Expenses Paid under the Employee Benefit Plan for the following Plan Benefits are covered for Specific Stop Loss Insurance (not included unless checked): <input checked="" type="checkbox"/> Medical <input checked="" type="checkbox"/> Prescription Drug Card <input type="checkbox"/> Prescription Drugs Under Medical <input type="checkbox"/> Other:	
B. Specific Deductible in each Contract Period per Covered Person: \$150,000	
C. Contract Basis: 12/15 Covered Expenses Incurred from 07/01/2015 through 06/30/2016, and Paid from 07/01/2015 through 09/30/2016.	
D. Unlimited Specific Lifetime Reimbursement Maximum per Covered Person Specific Contract Period Reimbursement Maximum per Covered Person Unlimited	
E. Separate Individual Specific Deductible: None	
F. Monthly Specific Premium Rates: Single: \$25.34 Family: \$77.88	
G. Specific Percentage Reimbursable 100%	
H. Specific Terminal Liability Option: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Specific Terminal Liability Option premium per Covered Person per month:	

15. AGGREGATE STOP LOSS INSURANCE:

Yes No

A. Covered Expenses Paid under the Employee Benefit Plan for the following Plan Benefits are covered for Aggregate Stop Loss Insurance (not included unless checked):
 Medical Dental Weekly Income Vision Prescription Drug Card Prescription Drugs under Medical Other:

B. Minimum Annual Aggregate Deductible: \$
 (Subject to the Definition of Minimum Annual Aggregate Deductible in the Policy)

C. Contract Basis:

D. Aggregate Contract Period Reimbursement Maximum: \$

E. Monthly Aggregate Factors:

Monthly Factors	Combined	Medical	Dental	Weekly Income	Vision	Prescription Drugs
Single						
Employee + Child						

F. Aggregate Percentage Reimbursable %

G. Loss Limit: \$
 For the purposes of Aggregate Stop Loss Insurance, the Loss Limit is the maximum amount of Covered Expenses Incurred by each Covered Person, which can be used to satisfy the Annual Aggregate Deductible.

H. Monthly Deductible Advance Reimbursement Option: Yes No

I. Aggregate Terminal Liability Option: Yes No

J. Aggregate Premium:

1. Annual Premium payable in advance for Contract Period:
2. Monthly Premium rate per Covered Unit:
3. Monthly Deductible Advance Reimbursement premium per Covered Unit per month:
4. Aggregate Terminal Liability Option premium per Covered Unit per month:

SPECIAL RISK LIMITATIONS are stated on the Addendum to Application (if applicable).

It is understood and agreed by the Applicant that:

1. The Applicant is financially sound, with sufficient capital and cash flow to accept the risks inherent in a "self-funded" health care plan, and
2. The Plan Supervisor retained by the Applicant will be considered the Applicant's Agent, and not the Company's Agent, and
3. All documentation requested by the Company must be received within 90 days of the Policy effective date, and is subject to approval by the Company and may require adjustment of rates, factors, and / or Special Limitations to accommodate for abnormal risks, and
4. The Stop Loss Insurance applied for herein will not become effective until accepted by the Company, and
5. Premiums are not considered paid until the premium check is received by the Company, is paid according to the rates set forth in the Application, and all items required to issue the Policy have been returned to the Company. Premiums are subject to refund should any outstanding policy requirement not be met within 90 days of the Policy's effective date, and
6. This Application will be attached to and made a part of the Policy issued by the Company, and
7. The Employee Benefit Plan(s) attached shall be the basis of any Stop Loss Insurance provided by the Company and such Employee Benefit Plan(s) conforms with all applicable State and Federal statutes, and
8. Any reimbursement under the Stop Loss Insurance provided by the Company shall be based on Covered Expenses Paid by the Applicant in accordance with the Employee Benefit Plan(s) attached hereto, and
9. After diligent and complete review, the representations made in this Application, the disclosures made, and all of the information provided for underwriters to evaluate the risk, are true and complete.

Any person who knowingly and with the 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 subjects such person to criminal and civil penalties.

Full Legal Name of Applicant:

Applicant's Federal Tax I.D. Number:

Sweetwater County

836000126

Dated at _____ this _____ day of _____, 20_____.

Officer / Partner Signature (print name)

Licensed Agent Signature (print name)

For HCC Life Insurance Company Office Use Only: ACCEPTANCE

Accepted on behalf of the Company, this _____ day of _____, 20_____.

By: _____

Title: _____

Policy No.: _____

HCC LIFE INSURANCE COMPANY
STOP LOSS POLICY
CONTRACT ADVANTAGE PLAN (CAP) ENDORSEMENT

Policy Number: HCL30623
Endorsement Number: 1
Policyholder: Sweetwater County
Effective Date of Endorsement: 07/01/2015

YOU and WE agree that above policy is amended as follows:

In exchange for premium considerations provided for on the attached Application, We guarantee that if You renew Your Specific Stop Loss Insurance with Us for the next Policy Year with the same Agent of Record, Your renewal Stop Loss Policy will not contain any additional Covered Persons with a Separate Individual Specific Deductible. We reserve the right to carry over to the renewal policy any or all Covered Persons that already have a Separate Individual Specific Deductible shown on the attached Application.

Additionally, We guarantee that the Specific Monthly Premium Rates on Your renewal Stop Loss Policy will not be increased more than 50% over the Specific Monthly Premium Rates shown on the attached Application.

If you purchase a Split Funded Endorsement, the Split Funded Liability on Your renewal Stop Loss Policy will increase by this same percentage.

We may decide not to offer this endorsement, at our discretion, upon Your next Renewal or upon any subsequent Renewal of Your Stop Loss Policy. We also reserve the right to change, modify or cancel this endorsement, at our discretion, should You change your Agent of Record or if You amend or change Your Employee Benefit Plan in any way that materially affects our risk or liability with regards to the Policy or this Endorsement, or if Your renewal Stop Loss Policy:

1. Contains coverage options for Covered Expenses related to Plan Benefits that are different than those selected on the attached Application, or
2. Contains a Contract Period that is longer in duration than the Contract Period shown on the attached Application, or
3. Contains coverage for Retirees, if coverage for Retirees was not purchased with this Policy, or
4. Contains a Specific Deductible that is not equal to the Specific Deductible shown on the attached Application, or
5. Contains a Contract Basis that is not identical to the Contract Basis shown on the attached Application, or
6. Contains a Specific Contract Period Reimbursement Maximum that is higher than the Specific Contract Period Reimbursement Maximum shown on the attached Application, or
7. Contains a Specific Percentage Reimbursable that is higher than the Specific Percentage Reimbursable shown on the attached Application.

If you purchase a Split Funded Endorsement, We reserve the right to change, modify or cancel this endorsement if You:

1. Cancel the Split Funded Endorsement on any renewal Stop Loss policy, or
2. Request the Split Funded Liability be decreased on any renewal Stop Loss policy, or
3. Request the Split Funded Liability be increased by a percentage less than the increase of the Specific Monthly Premium Rates as stated in this Endorsement.

HCC LIFE INSURANCE COMPANY
STOP LOSS POLICY
CONTRACT ADVANTAGE PLAN (CAP) ENDORSEMENT

THERE ARE NO POLICY CHANGES UNDER THIS ENDORSEMENT OTHER THAN STATED ABOVE.

Sweetwater County

Full Legal Name of Applicant/Policyholder

Signed At / Date Signed

Officer/Partner Signature (print name)

Witnessed (Licensed Agent) Signature

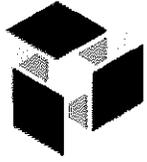
FOR HCC LIFE INSURANCE COMPANY USE ONLY:

ACCEPTANCE

Accepted on behalf of the Company, this _____ day of _____, _____

By _____

Title: _____



HCC

HCC Life Insurance Company

Medical Stop Loss Proposal For Sweetwater County

Presented by
UMR

Underwritten by
Carol Morrison

HCC Life Insurance Company
5601 Granite Parkway, 11th Floor
Plano, TX 75024
(214) 387-5400

Visit us online at www.hcc.com

**HCC Life Insurance Company**5601 Granite Parkway, 11th Floor, Plano, TX 75024
Telephone: (214) 387-5400 Facsimile: (214) 387-5448Broker/Writer: Morrison, Carol
Group: Sweetwater CountyProposal: 05/27/2015
Effective Date: 07/01/2015Proposal No: 2
Valid Thru Date: 07/10/2015
Expiration Date: 06/30/2016**INDIVIDUAL STOP LOSS COVERAGE**

Coverages		Option 1	Option 2
		Medical, Rx Card	Medical, Rx Card
Contract Type		12/15	12/15
Annual Specific Deductible per Individual		150,000	175,000
Contract Advantage Plan		Included	Included
Lifetime Reimbursement	Unlimited		
Maximum Contract Period Reimbursement		Unlimited	Unlimited
Inpatient Mental & Nervous	365 Days		
Quoted Rate Per Month	<u>Enrollment</u>		
Single	242	25.34	21.39
Family	265	77.88	69.99
Composite	507	52.80	46.79
Estimated Annual Premium		321,246	284,685
Quoted Rate(s) includes Commissions of		0.00%	0.00%

OVERALL COST SUMMARY

	Option 1	Option 2
Total Annual Fixed Costs	321,246	284,685
Maximum Annual Liability	321,246	284,685

PROPOSAL QUALIFICATIONS AND CONTINGENCIES

Quoted terms and conditions are subject to possible revision based upon receipt and review of the following items:

- Paid claims experience to the effective date including monthly enrollment figures.
- Updated shock loss information to the date HCC Life Insurance Company has been notified that the proposal has been accepted by the group. Shock loss information should include injuries, illnesses, diseases, diagnoses, or other losses of the type, which are reasonably likely to result in a significant medical expense claim or disability, regardless of current claim dollar amount. In addition, shock loss information should include any claimant that has incurred claim dollars in excess of \$ 75,000, regardless of diagnosis. Information is also needed on any claims processed and unpaid, pending or denied for any reason. Please refer to our Trigger Diagnosis Disclosure List, which provides examples of some, but not all, types of shock losses.
- We will accept final shock loss disclosure no earlier than 30 days prior to the effective date.
- Please see the attached exhibit for plan document assumptions and requirements.
- Should a large claim(s), (non-reoccurring and/or ongoing) become known and the initial date of service is prior to the date of written acceptance by HCC Life Insurance Company, we reserve the right to re-underwrite the case.
- In the event there is a greater than 10% change in enrollment between the submitted initial enrollment data and the final enrollment data, rates and factors may be recalculated.
- Minimum participation level of 75% of all eligible employees is required.
- Rates and Factors are calculated with the plan anniversary date and the Policy effective date as the same date, should the plan anniversary date and the stop loss policy effective date be different we reserve the right to modify our rates, factors and terms of coverage to accommodate for additional liabilities incurred by the plan due to state and/or federal mandates during the stop loss contract period.
- Quote rated with retirees covered. Quote rated with 2 COBRAs being covered based on the census information provided.
- Contract Advantage Plan - 5% has been added to the indicated specific rates for a no laser guarantee renewal rating action of no more than 50%, regardless of the ongoing claim liability at renewal.
- Quote Rated with the following UR Vendors: UMR Care Management, .
- Quote Rated with the following Cost Containment Programs(s): UnitedHealthcare Options.
- **INCUMBENT ADMINISTRATORS ONLY** in Lieu of Disclosure Statement, UMR, Inc. approved reports SLAM Report (Stop Loss Activity Management), UM Cases Open or Closed Within Specified Timeframe, SLAM Report (Stop Loss Activity Management), SLAM Report (Stop Loss Activity Management), SLAM Report (Stop Loss Activity Management), Monthly Aggregate Stop Loss Result will be accepted as disclosure.
- Require an updated SLAM report before we can finalize the underwriting.

PROPOSAL QUALIFICATIONS AND CONTINGENCIES

Initial the selected proposal option:

	Option 1	Option 2
Specific		
Aggregate	N/A	N/A

The Premium and Aggregate Deductibles are based on the data submitted. Any inaccurate or incomplete data submitted may require changes at final underwriting. We will not be bound by any typographical errors or omissions contained herein.

Date: _____ By: _____
Agent of Record or Administrator

This proposal expires if applications are not requested before the valid through date.

Plan Document Assumptions

This proposal for stop loss coverage assumes the Plan Sponsor's plan document includes certain standard clauses, exclusions and limitations. These exclusions and limitations include, but are not limited to the following:

1. **Eligibility, Effective Date, and Enrollment Date** provisions, which include definitions of eligible employees (including definitions of full-time and part-time), dependents, and retirees, if applicable.
2. **Termination Provisions** which clearly define when eligibility and benefits cease. The Termination Provisions should include specific wording regarding extension of coverage (also known as "extension of active service") during a period of inactive service due to disability, layoff or leave of absence. The plan should include COBRA wording consistent with federal requirements.
3. **Transplant** benefit wording that identifies any benefits applicable to the donor (particularly the non-participating donor), the recipient, organ procurement, and any covered transportation, lodging and companion charges.
4. The Plan is expected to contain provisions that preserve its ability to seek a right of recovery, to recover funds via subrogation, to enforce coordination of benefit clauses with other plans and where able, to be secondary to Medicare and other public programs (subject to the Plan's compliance with Medicare Secondary Payer rules).
5. Exclude expenses resulting from losses which are due to any act of war, whether declared or not.
6. Exclude expenses for any injury or illness arising out of or in the course of any occupation or employment for wage or profit.
7. Exclude expenses related to Alternative Treatment, except when deemed both medically necessary and cost effective when compared to a normal course of treatment.
8. All HCC Life policies contain an Experimental and Investigative definition and exclusion along with coverage requirements for clinical trials that complies with the Affordable Care Act (ACA).

Group Life & Disability Submission Checklist



Great news! We are proud to announce that HCC Life now offers comprehensive Life and Disability coverage. We would love the opportunity to become the provider of your company's group benefits. In order to provide you with a competitive quote, we need the information requested below.

Census:

- Gender
- Date of birth or age
- Salary or volume
- Class indicator (multiple class schedule)
- Work zip code (multiple locations)
- Eligible vs. enrolled (employee paid plans)
- Occupations required for the following SIC codes for long term and short term disability:

SIC Code	Description
67XX	Holding and Investment Offices
7361 & 7363	Employment Agencies
7389	Miscellaneous Services, Not Elsewhere Classified
805X	Nursing and Personal Care Facilities
806X	Hospitals
8111	Attorneys
8011 - 8099	Physicians
9111 - 9721	Government and Public Administration
9999	Non-Classifiable Establishments

Situs (company headquarters)

Requested broker commissions

Plan Design:

- Inforce (if applicable)
- Requested
- History information needed for experience rated cases

Rates:

- Inforce (if applicable)
- Renewal (if applicable and known)
- History information needed for experience rated cases

Claims Experience:

- Life and AD&D: 500+ eligible lives
- Long term disability: 500+ eligible lives
- Short term disability: 100+ enrolled lives

Prior Carrier Data (3 to 5 years):

- Incurral report (including valuation date)
- Reserves (open LTD and life waiver forms)
- Paid premium history
- Paid claims history (open and closed)

LTD Open Claim Data:

- Date of disability
- Age at disability
- Gross monthly benefit
- Paid claim amount

LTD Open Claim Data (if available):

- Current age or date of birth
- Diagnosis
- Net monthly benefit
- Social Security status
- Offset amounts
- Disabled life reserve
- State of residence

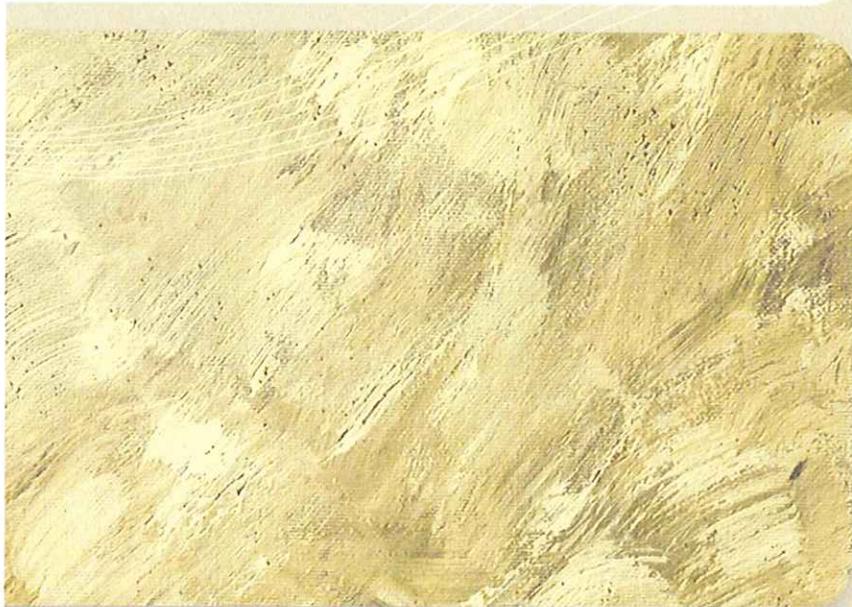
Contact your regional marketing representative or underwriter for more information.

GTL8509 -10/2014

A renewal presentation for:
SWEETWATER COUNTY

Presented to Diversified Benefits Group
by Bonnie Clark

March 2015



A UnitedHealthcare Company

Renewal Services

Customer Name : SWEETWATER COUNTY
Plan Renewal Date : 7/1/2015

All fees shown as per employee per month (PEPM) unless otherwise noted

Proposed renewal fees assume all existing products and services written with UMR will be retained throughout the renewal period. New products and services may be added however proposed fees are subject to change and/or and/or additional fees may apply if any existing products or services are discontinued.

Administration and access fees	Subscribers	Current Fees	Renewal Fees	Renewal Fees	Renewal Fees
			7/1/2015	7/1/2016	7/1/2017
Medical claims	511	\$26.26	\$27.02	\$27.02	\$27.43
Incentivized pharmacy credit	511	(\$9.00)	(\$9.00)	(\$9.00)	(\$9.00)
Medical client advisor commission		Net	Net	Net	Net
Required stop loss interface fee	511	Included	Included	Included	Included
UnitedHealthcare Options PPO network - access fee	476	Included	Included	Included	Included
No Medical Network	35	Included	Included	Included	Included
Utilization and case management (includes NurseLine) - per employee per month savings of \$0.35	511	\$3.65	\$3.65	\$3.65	\$3.65
Maternity management (MM)	511	\$0.65	\$0.68	\$0.68	\$0.68
Truven Health Analytics reporting – three licenses included	511	Included	Included	Included	Included
Conversion	511	\$0.75	\$0.75	\$0.75	\$0.75
Cost reduction and savings program - large bill review/fee negotiation and secondary/travel network - % of savings	511	30%	30%	30%	30%

External PBM Vendors are subject to prior approval and may require additional fees.

Administration of plans requiring integrated deductible and out of pocket with service providers (pharmacy benefits manager (PBM), dental, vision, etc.) will require an integration fee of \$1.00 PEPM, provided UMR has an electronic interface established. Integration is not available until approval from UMR is provided and additional fees may apply.

Pharmacy credit: In order to qualify for incentivized rebates, plan designs must be two-tier closed, or three-tier with a minimum of \$10.00 difference in copayment or 10% difference in coinsurance between preferred and non-preferred branded drugs.

Non-preferred vendor surcharge: An additional stop loss interface fee surcharge of \$5.00 PEPM applies if stop loss coverage is not placed with a UMR preferred vendor. This fee is in addition to the "Required stop loss interface fee" which applies for all groups. Consult your UMR representative for a list of preferred vendors.

Additional Services

Customer Name : SWEETWATER COUNTY
Plan Effective Date : 7/1/2015

All renewal fees are good for one year and are shown as per employee per month (PEPM) unless otherwise noted

Plan Administration	Current Fees	Renewal Fees 7/1/2015
Actuarially certified reserve estimate - per report and per additional breakdown	Pricing available upon request	Pricing available upon request
ID card mailing charge - employee residence	Included with medical administration	Included with medical administration
New York surcharge filing and administration - annual fee	Included with medical administration	Included with medical administration
Claim reprocessing - per claim	\$25.00	\$25.00
OptumHealth SM Care Solutions - centers of excellence	Cost per transplant	Cost per transplant
Subrogation - percent of recoveries	30%	30%
Federal external review for appeals - for non-grandfathered plans for adverse benefit determinations that involve medical judgment or a rescission of coverage.	Up to 5 included, then \$500.00 per review	Up to 5 included, then \$500.00 per review
Self billing	No charge	No charge
Full/Partial Summary of Benefits and Coverage (SBC) creation with data UMR has on file (includes initial SBC plus one amendment, electronic version only provided to employer)	Included with medical administration	Included with medical administration
Translation of SBC into non-English text	Cost of translation	Cost of translation
Print and ship SBCs to employer at open enrollment (approval required)	Cost plus postage	Cost plus postage
Inclusion of outside vendor data in SBC in UMR standard format, e.g. carved out benefits (approval required)	\$1,000 per SBC per benefit plan \$500.00 per SBC per benefit plan	\$1,000 per SBC per benefit plan \$500.00 per SBC per benefit plan
Two or more SBC requests per year		
Reporting		
Ad hoc reports and analysis - per hour (2 hours included with medical administration)	\$100.00	\$100.00
Truven Health Analytics Advantage Suite reporting	Included with medical administration	Included with medical administration
Banking		
Custodial banking - monthly fee (deposit required)	\$500.00	\$500.00

Pharmacy Pricing

Customer Name : SWEETWATER COUNTY
Plan Effective Date : 7/1/2015

Pharmacy benefits provided through OptumRx™. The following fees apply to all retail network pharmacies, with the exception of pharmacies located in states that may elect to participate on a state-fee schedule. Fees assume the pharmacy benefits program is not a discount-card program.

The Limited Network will be available 1/1/2014 that will provide additional discounts. This network provides deeper discounts, but requires members to utilize a restricted network of pharmacies.

	Published AWP
Electronic claim adjudication - per claim ¹	\$0.00
Retail	
Brand discount, plus dispensing fee	16.25% + \$1.40
Net effective generic discount, plus dispensing fee	70.00% + \$1.40
Mail Order	
Brand discount, plus dispensing fee	21.50% + \$0.00
Net effective generic discount, plus dispensing fee	72.75% + \$0.00
Retail 90 Rx (Optional)	
Brand discount, plus dispensing fee	18.50% + \$2.00
Net effective generic discount, plus dispensing fee	70.00% + \$2.00
Rebate Share	
Non-incentivized rebate share (retail) - per Brand claim returned to the client	\$24.00
Non-incentivized rebate share (mail order) - per Brand claim returned to the client	\$78.00
Incentivized rebate share (retail) - per Brand claim returned to the client	\$30.00
Incentivized rebate share (mail order) - per Brand claim returned to the client	\$100.00
Additional Programs	
Prior authorizations - per clinical prior authorization	Included

Specialty drugs are priced on an individual drug basis at the market competitive rate, most commonly around 12.5%.

Compound Drug Claim Pricing: AWP less Standard Contracted Discount + \$7.50 Dispensing fee

Rebate Fee Credit

SWEETWATER COUNTY has elected to immediately receive the benefit of any rebate offered in the Rebate Share section above to reduce their monthly medical administration fees. Since SWEETWATER COUNTY has selected this option, 100% of rebates are retained by OptumRx, UMR is paid a service fee that is used to lower the medical administration fee. This option allows SWEETWATER COUNTY to enjoy the immediate cash flow benefit of their rebates and eliminates the six to nine month lag in receipt of rebates.

¹ An additional \$1.75 per claim applies to the electronic per claim fee for paper claims. Per claim rate guaranteed first year only.

Pharmacy Pricing

Pharmacy Conditions

Fees proposed assume the use of OptumRx™ as the pharmacy benefits manager.

Retail and mail order guarantees are reconciled in the aggregate.

Rates exclude compound and Direct Member Reimbursement claims. (ie: Paper Claims)

Administrator may change pricing (a) any time SWEETWATER COUNTY initiated changes are made to the Benefit Plan, Formulary, Pharmacy Network, or a utilization management program, that adversely impact Administrator's compensation, cost to provide services or ability to satisfy a guarantee (b) when there are changes in Laws and Regulations after the date this quote was provided that affect or are related to the services outlined in this cost proposal (c) when SWEETWATER COUNTY asks and Administrator agrees to perform any service in addition to the services outlined in this cost proposal; or (d) if there is a change in market conditions or utilization or the total number of Members decreases by 10% or more after the date this quote was provided. Any change in the pricing required by the changes will be effective as of the date the changes occur, even if the date is retroactive.

All rates, fees and guarantees are contingent upon OptumRx serving as SWEETWATER COUNTY's exclusive provider of core prescription drug benefit plan, Mail Order Pharmacy, and specialty pharmacy services from OptumRx's specialty pharmacies or any participating pharmacy in OptumRx's retail pharmacy network. Additional fees apply if another mail provider is selected.

Medicare eligible retirees are only eligible for fixed fee pharmacy pricing.

Groups with in-house pharmacies utilizing 340B or GPO pricing are required to use Fixed Fee pricing.

Rebate guarantees and generic AWP discounts may be adjusted proportional to the impact of unexpected releases of generic products to market, or the withdrawal/recall of existing branded products.

Generic discount and dispensing fee guarantees cover Multi-Source products only. A Multi-Source product is defined as one that is manufactured by more than two generic manufacturers. The brand discount and dispensing fee guarantees apply to non-Multi-Source products.

Discounts and dispensing fees exclude Specialty Drugs and certain non-specialty injectable products.

Deductible integration of prescription drug and medical claims requires daily connectivity between the pharmacy benefits manager and the plan administrator, additional coordination fees apply. External vendors are subject to prior approval.

Rebate Management Terms

Rebates and Rebate guarantee contingencies are subject to SWEETWATER COUNTY's adoption of OptumRx's formulary, formulary management, and utilization management.

Incentivized plan designs are two-tier closed or three-tier with a minimum of \$10.00 difference in copayment or 10% difference in coinsurance between preferred and non-preferred Branded Drugs.

Rebate claims exclude ineligible claims, such as Prescription Claims with invalid service provider identification or prescription numbers; where, after meeting the deductible, the Member's Cost-Sharing Amount under the applicable Benefit Plan requires the Member to pay more than 50% of the Prescription Claim; that are manufacturer negotiated fee products not listed on SWEETWATER COUNTY's Formulary for devices without a Prescription Drug component; that are re-packaged NDCs; from 340B which typically receive a discount or rebate directly from Drug Manufacturers under section 340B of the Public Health Service Act, or entities eligible for federal supply schedule prices (e.g., Department of Veterans Affairs, U.S. Public Health Service, Department of Defense); or that are not for Prescription Drugs (except for insulin or diabetic supplies).

If SWEETWATER COUNTY makes any change to its Formulary, not initiated by OptumRx, or Benefit Plan, or adopts any formulary or utilization management program other than one of the options offered by Administrator under its formulary or utilization management programs, Administrator may adjust the Rebate guarantees, effective the date of the Unrestricted access to 90 days supply prescriptions in retail.

"AWP" means the average wholesale price, as reflected on the Pricing Source, of a Prescription Drug or other pharmaceutical products or supplies based on the NDC of the Drug dispensed. Administrator will rely on the Pricing Source as updated by Administrator no less frequently than every seven days to determine AWP for purposes of establishing the pricing provided to SWEETWATER COUNTY under this agreement. Administrator will not establish AWP, and Administrator will have no liability to SWEETWATER COUNTY arising from use of the Pricing Source. If Administrator decides to use a pricing benchmark other than AWP or is required to do so because the Pricing Source discontinues publication of AWP and the change would materially affect SWEETWATER COUNTY's economic benefit under this agreement, then Administrator will provide SWEETWATER COUNTY with modified pricing terms at least 30 days before the effective date of the change. If the parties fail to agree upon the modified pricing terms before the effective date of the modified pricing terms, then Administrator's proposed modified pricing terms will apply until the parties otherwise agree. If the parties are unable to agree to modified pricing terms, then either party may terminate this agreement upon 60 days prior notice to the other party.

Conditions

Customer Name : SWEETWATER COUNTY
Plan Effective Date : 7/1/2015

This renewal proposal is valid until 30 days before the effective date and does not bind coverage or obligate UMR.

The information contained in this response to the request for proposal is considered confidential and proprietary. We are providing this information with the understanding that it will not be used for any purpose other than to evaluate our capabilities to provide the services requested. In addition, this information will not be disclosed to person(s) or entity(s) other than those who are involved in the process of evaluating our response. Written permission must be obtained from UMR prior to any exceptions of these obligations in order to maintain the confidentiality of our responses.

All quoted product fees assume UMR administers the medical plan.

UMR assumes all services provided will be handled according to our standard format and procedures, unless otherwise specifically addressed within this proposal. Specialized services will be priced as necessary.

Fees proposed are based on the plan of benefits as submitted but does not assume duplication of benefits or provisions. Fees proposed assume a standard PPO plan design with no referral administration and no primary care physician tracking. Proposal assumes that the benefit plans will meet the steerage requirements of the networks proposed or will be changed to meet the requirements, including but not limited to; deductible, out of pocket, coinsurance and plan limitations. Plan design changes may impact a Grandfathered Health Plan status. Usage of the Choice Plus network requires employer participation in Value Based Contracting payment methodologies. Please review any changes with your advisor.

The Plan or its sponsor is responsible for state or federal surcharges, assessments, or similar taxes or fees imposed by governmental entities or agencies on the Plan, Plan Sponsor, or us, including but not limited to those imposed pursuant to the Patient Protection and Affordable Care Act of 2010 (PPACA), as amended from time to time. This includes responsibility for determining the amount due, funding, and remitting the PPACA PCORI reinsurance fee which is remitted to the government (federal and/or state).

The fees quoted do not include state or federal surcharges, assessments, or similar taxes/fees imposed by governmental entities or agencies on the Plan, Plan Sponsor, or UnitedHealthcare. We reserve the right to adjust the rates (i) in the event of any changes in federal, state or other applicable legislation or regulation; (ii) in the event of any changes in plan design or procedures required by the applicable regulatory authority or by the sponsor; (iii) any taxes, surcharges, assessments or similar changes being imposed by a governmental entity on the Plan or UnitedHealthcare; or, (iv) as otherwise permitted in our Administrative Service Agreement.

UMR reserves the right to adjust fees in the event of (i) any changes in federal, state or other applicable law or rules; (ii) changes in plan design required by the applicable regulatory authority (e.g. mandated benefits) or by the customer; or (iii) any taxes, surcharges, assessments or similar charges being imposed by a governmental entity on the plan or UMR.

To comply with the Department of Labor's (DOL) claims regulations, we encourage pre-notification of at least 60 calendar days prior to the effective date of this contract. In the event that a 60-day notice is not feasible, UMR does not guarantee, but will make every reasonable effort, to have new plan(s) programmed quickly so claims can be processed within the required DOL timelines.

Fees proposed assume one billing, reporting, eligibility feed, stop loss and banking arrangement.

Do not cancel in-force plan(s) and/or policy(ies) until final approval is received.

UMR is not bound by any typographical errors and/or omissions contained herein.

Fees proposed assume utilization and case management services are provided through UMR in order to access UnitedHealthcare Networks.

Fees proposed are subject to change if a division, subsidiary or affiliated company is added or deleted from the plan, or if the number of covered employees changes by 15% or more from this proposal.

Claim reprocessing due to situations, such as retroactive benefit or eligibility changes, may require additional fees.

Conditions

UMR will share raw claims and eligibility data, however, we reserve the right to exclude data elements deemed proprietary by our organization.

Fees proposed assume the cost reduction and savings program is selected. If this program is not selected, the medical administration fee will increase by \$3.50 PEPM

UMR provides an ERISA DOL appeals process. UMR does not participate in Grievance Review Panel Hearings.

UMR requires that all qualified high-deductible plan designs meet federal regulatory requirements. Our coordination of benefits (COB) process will meet the requirements for Preservation COB processing.

Administration of plans requiring integrated deductible and out of pocket to comply with the Essential Health Benefits provision of Health Care Reform, qualified high deductible health plan or the like, assumes the use of service providers (pharmacy benefits manager (PBM), dental, vision, etc.) that are currently integrated with UMR. Utilizing these service providers may require additional fees. Please refer to your representative to identify integrated service providers.

FSA fees: HCA assumes a minimum of 20% of medical employees participating; DCA assumes a minimum of 20% of the HCA population participating.

Care management bundled discount - fees assume all care management products listed on care management bundled discount line are selected. Discount will change if services selected change.

UMR does not administer statutory disability benefits.

Health reimbursement account assumes 20% participation rate.

HSA trustees bill directly for HSA services.

UMR cannot support the drug data requirements for Medicare Part D subsidy submission of plans where the pharmacy claims are paid under the medical plan. We recommend these pharmacy benefits be provided by a pharmacy benefits manager.



Plans with Stop Loss policy contract types of 12/15.

Plan Name: Sweetwater County

Plan Number: 76-411492

Stop Loss Policy Period: 7/01/2015 – 6/30//2016

Stop Loss Contract Type: 12/15

Claims Incurred Period: 7/01/2015 through 6/30/2016

Claims Paid Period: 7/01/2015 through 9/30/2016

With a 12/15 contract type, a potential gap in coverage is created when claims incurred within the "Claims Incurred Period" above, are paid after the "Claims Paid Period" above, leaving the Employer/Plan Sponsor at risk for those claims.

The Employer/Plan Sponsor and its broker/consultant named below, through their undersigned duly authorized officers, hereby acknowledge that the above is true, and further acknowledge that the Plan is knowingly and intentionally creating this gap, accepting the risk it bears, and holds U/MR harmless for any and all losses incurred by the Plan as a result of such gap in coverage..

Employer/Plan Sponsor:
Signature:
Print Name and Title:
Date:
Broker/Consultant:
Signature:
Print Name:
Date:

BOARD OF COUNTY COMMISSIONERS MEETING REQUEST FORM

Requested Meeting Date: 6/16/2015	Name & Title of Presenter: Garry McLean, HR Director
Department or Organization: Human Resources	Contact Phone & E-mail: 872-3913
Exact Wording for Agenda: Request approval of employment contract DUI Supervised Probation Dept.	Preference of Placement on Agenda & Amount of Time Requested for Presentation: 5 min.
Will there be Handouts? (If yes, include with meeting request form) yes	Will handouts require SIGNATURES: yes
Additional Information:	

- All requests to be added to the agenda will need to be submitted in writing on the "Meeting Request Form" by Wednesday at 12:00 p.m. prior to the scheduled meeting and returned in person or electronically to Clerk Sally Shoemaker at: shoemakers@sweet.wy.us
- All handouts are also due by Wednesday at 12:00 p.m. prior to the scheduled meeting date. Handouts may be submitted to Clerk Sally Shoemaker either in person or electronically. *****If your handout is not accompanied with the request to be added to the agenda, your request will be dismissed and you may reschedule for the next meeting provided the handout(s) are received.*****
- Any documents requiring **Board Action** or **signature** are considered agenda items and need to be requested in the same manner.
- All **original** documents requesting action or signature must be submitted to Deputy County Clerk Vickie Eastin. However, a **copy** must be submitted to Sally Shoemaker for distribution of the packet and retention.
- As always, if you are unable to attend the meeting after being placed onto an agenda, please send a representative in your place or your item will be rescheduled.
- In order to determine placement on the agenda, please review the county website (www.sweet.wy.us/commissioner) on Thursday afternoon.
- If a request to be placed on an agenda is received **AFTER** the deadline, you will be considered for the next meeting date.
- No handout will be received during a meeting in session.

BOARD OF COUNTY COMMISSIONERS MEETING REQUEST FORM

Requested Meeting Date: June 16, 2015	Name & Title of Presenter: John Kennedy, Board President Pam Jelaca, Executive Director
Department or Organization: Hospice of Sweetwater County	Contact Phone & E-mail: Pam: 362-1990 plj@onewest.net
Exact Wording for Agenda: Hospice Facility Project Update	Preference of Placement on Agenda & Amount of Time Requested for Presentation: Later in the afternoon, if possible; approx. 5 - 15 minutes
Will there be Handouts? (If yes, include with meeting request form) Not sure yet.	Will handouts require SIGNATURES: No
Additional Information: If we have our estimate for the C. Street building from PlanOne Architects by noon Wed., I will e-mail.	

- All requests to be added to the agenda will need to be submitted in writing on the "Meeting Request Form" by Wednesday at 12:00 p.m. prior to the scheduled meeting and returned in person or electronically to Clerk Sally Shoemaker at: shoemakers@sweet.wy.us
- All handouts are also due by Wednesday at 12:00 p.m. prior to the scheduled meeting date. Handouts may be submitted to Clerk Sally Shoemaker either in person or electronically. ****If your handout is not accompanied with the request to be added to the agenda, your request will be dismissed and you may reschedule for the next meeting provided the handout(s) are received.****
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- No handout will be received during a meeting in session.

BOARD OF COUNTY COMMISSIONERS MEETING REQUEST FORM

Requested Meeting Date: June 16, 2015	Name & Title of Presenter: Devon Brubaker, Airport Manager
Department or Organization: Rock Springs Sweetwater County Airport	Contact Phone & E-mail: 307-352-6880 dbrubaker@rockspringsairport.com
Exact Wording for Agenda: Air Service Minimum Revenue Guarantee	Preference of Placement on Agenda & Amount of Time Requested for Presentation: Agenda Item / 15 Minutes
Will there be Handouts? (If yes, include with meeting request form) Yes	Will handouts require SIGNATURES: No
<p>Additional Information: County Clerk, Dale Davis will have a resolution prepared for the meeting. This resolution will require signatures.</p> <p>Could you please place us as late as possible on the agenda as we will be presenting our operational budget following the meeting during the budget workshop session.</p> <p>Thank you!</p>	

- All requests to be added to the agenda will need to be submitted in writing on the "Meeting Request Form" by Wednesday at 12:00 p.m. prior to the scheduled meeting and returned in person or electronically to Clerk Sally Shoemaker at: shoemakers@sweet.wy.us
- All handouts are also due by Wednesday at 12:00 p.m. prior to the scheduled meeting date. Handouts may be submitted to Clerk Sally Shoemaker either in person or electronically. *****If your handout is not accompanied with the request to be added to the agenda, your request will be dismissed and you may reschedule for the next meeting provided the handout(s) are received.*****
- Any documents requiring **Board Action** or **signature** are considered agenda items and need to be requested in the same manner.
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- In order to determine placement on the agenda, please review the county website (www.sweet.wy.us/commissioner) on Thursday afternoon.
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- No handout will be received during a meeting in session.

	2014 - 2015	2015 -2016	Difference
Total Contract	\$2,042,059.00	\$1,916,735.00	(\$125,324)
State	\$1,323,792.00	\$1,323,792.00	(\$0)
City/County	\$718,267.00	\$592,943.00	(\$125,324)
Rock Springs - 33%	\$237,028.11	\$195,671.19	(\$41,356.92)
Green River - 22%	\$158,018.74	\$130,447.46	(\$27,571.28)
Sweetwater County - 45%	\$323,220.15	\$266,824.35	(\$56,395.80)

R E S O L U T I O N 15-06-CC-02
S W E E T W A T E R C O U N T Y
S K Y W E S T E N H A N C E D A I R S E R V I C E

WHEREAS, Sweetwater County has participated in the Enhanced Air Service Program in the past and would like to continue to participate in the program which is in the best interest for the traveling public; AND

WHEREAS, Sweetwater County has participated in the Enhanced Air Service Program with the State of Wyoming, the City of Rock Springs and the City of Green River and Sweetwater County would like to continue to participate with the same entities; NOW,

BE IT THEREFORE RESOLVED: that the Board of Sweetwater County Commissioners authorize the Chairman to sign any necessary documents to participate in the Enhanced Air Service Program after the County Attorney's office has reviewed the documents.

Dated at Green River, Wyoming this 16th of June, 2015.

THE BOARD OF COUNTY COMMISSIONERS
OF SWEETWATER COUNTY, WYOMING

Wally J. Johnson, Chairman

John K. Kolb, Member

Don Van Matre, Member

ATTEST:

Randal M. Wendling, Member

Steven Dale Davis, County Clerk

Reid O. West, Member

**Sweetwater County
Board of County Commissioners
Public Meeting**

June 16, 2015

**Land Use
Agenda and Staff Report**

Prepared by:

**Sweetwater County Land Use
80 West Flaming Gorge Way, Suite 23
Green River, WY 82935
(307) 872-3914**

Board of County Commissioners

Public Hearing Agenda

June 16, 2015

**County Commissioner's Meeting Room
80 West Flaming Gorge Way
Green River, WY 82935**

Public Hearing

1. Lewis & Lewis, Inc.
Zoning Map Amendment
Agriculture (A) to Mineral Development 1 (MD-1)
2. Glenn Ellsworth
Variance
Side Setback Requirement

Public Hearing # 1

Board of County Commissioners

June 16, 2015

Property Owner

Rock Springs Grazing Association
 P.O. Box 880
 Rock Springs, WY 82901

Other Parties

Lewis & Lewis, Inc.
 370A Blairtown Road
 Rock Springs, WY 82901

Legal Description

Section 19
 T19N, R108W

Current Zoning

A
 Agriculture

Legal Requirements

Adjacent Notices Sent:

May 7, 2015

Public Hearing Advertised:

May 7, 2015

Sign Posted:

May 11, 2015

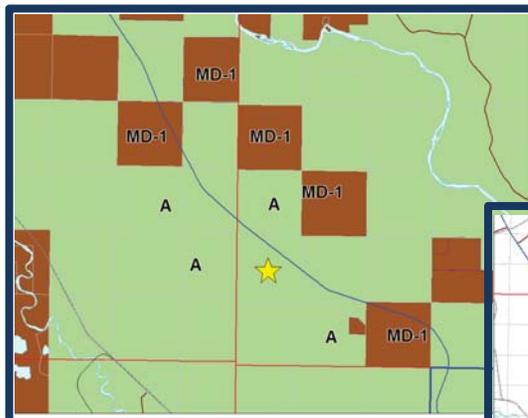
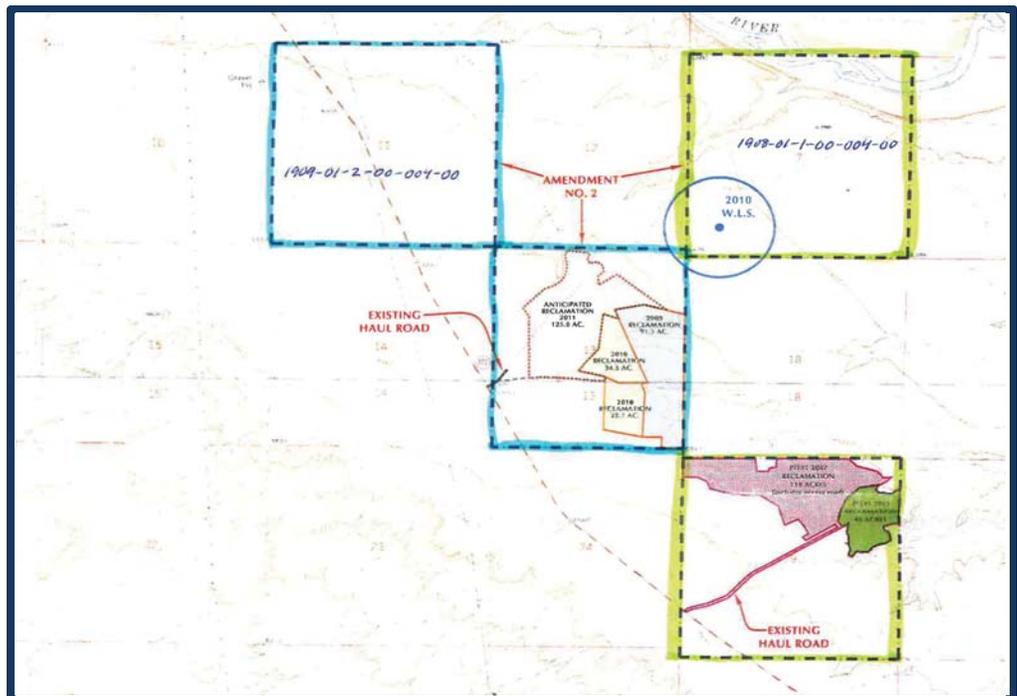
Utilities & Districts

Water:
 Sewer:
 Others:

Land Use Presenter

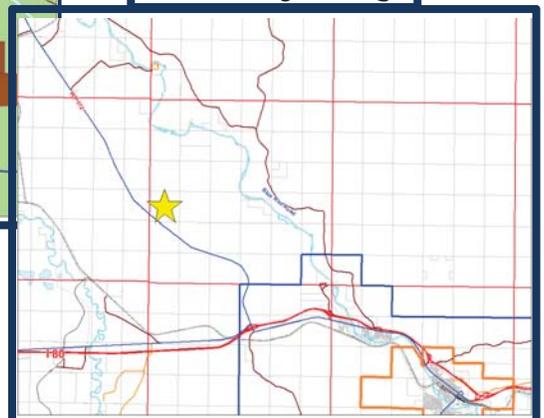
Steve Horton
 Planner III

Lewis & Lewis, Inc.
Zoning Map Amendment
Agriculture to Mineral Development 1



Zoning Map

Vicinity Map



Public Hearing # 1

Lewis & Lewis, Inc.

Zoning Map Amendment

Agriculture to Mineral Development 1

Summary of Application

Lewis & Lewis, Inc is requesting a Zoning Map Amendment from A (Agriculture) to MD-1 (Mineral Development). The request is for the entire Section 19, T.19N, R108W. The property is owned by Rock Springs Grazing Association. Access to the property is from State Hwy 372. In the application, the applicant states the reason for the proposed amendment is for mining of sand and gravel. This proposed Zone Map Amendment is compatible with adjacent land which is Zoned MD-1 and is used for mining of sand and gravel.

Public Comments:

There have been no public comments submitted as of the date of this report.

Agency Comments:

SWC Surveyor: there are no survey issues
Colorado Interstate Gas: no concerns

Staff Comments, Recommendations and Conditions:

This request is for a Zoning Map Amendment from A (Agriculture) to MD-1 (Mineral Development). The request is for an entire Section of land. The applicant is Lewis & Lewis and the property owner is Rock Springs Grazing Association. The proposed use of mining for sand and gravel is compatible with surrounding land which is Zoned MD-1 and used for mining of sand and gravel.

Staff recommends approval of this zoning map amendment.

On June 10, 2015, the Planning and Zoning Commission voted 4-0 to recommend approval of the Zone Map Amendment from A (Agriculture) to MD-1 (Mineral Development) as requested by Lewis & Lewis, Inc.

Public Hearing # 1

Lewis & Lewis, Inc.

Zoning Map Amendment

Agriculture to Mineral Development 1



Looking North



Looking South



Looking East

Looking West



RECOMMENDATION 15-06-ZO-01

LEWIS & LEWIS, INC. ZONING MAP AMENDMENT AGRICULTURE (A) TO MINERAL DEVELOPMENT 1 (MD-1)

WHEREAS, **Lewis & Lewis, Inc.** is requesting a Zoning Map Amendment from Agriculture (A) to Mineral Development 1 (MD-1) in accordance with Section 20 of the 2014 Zoning Resolution. This Zoning Map Amendment is for property owned by Rock Springs Grazing Association which is legally described as:

*Section 19, Township 19 North, Range 108 West of the 6th Principal Meridian,
Sweetwater County, Wyoming.*

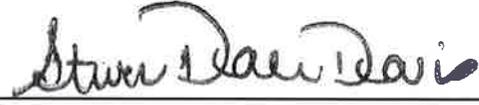
WHEREAS, the Sweetwater County Planning and Zoning Commission held a public hearing in accordance with the procedural requirements of the 2014 Zoning Resolution on June 10, 2015 to consider the applicant's request; and,

WHEREAS, after due consideration and discussion, the Planning and Zoning Commission voted 4-0 to recommend approval of the request;

NOW THEREFORE, the Sweetwater County Planning and Zoning Commission recommends APPROVAL of the Zoning Map Amendment from Agriculture (A) to Mineral Development 1 (MD-1).

Dated this 10th day of June, 2015.

Attest:



Steven Dale Davis, County Clerk

Sweetwater County
Planning and Zoning Commission



Island Richards, Chairman

RESOLUTION 15-06-ZO-01

**LEWIS & LEWIS, INC.
ZONING MAP AMENDMENT
AGRICULTURE (A) TO MINERAL DEVELOPMENT 1 (MD-1)**

WHEREAS, **Lewis & Lewis, Inc.** is requesting a Zoning Map Amendment from Agriculture (A) to Mineral Development 1 (MD-1) in accordance with Section 20 of the 2014 Zoning Resolution. This Zoning Map Amendment is for property owned by Rock Springs Grazing Association which is legally described as:

Section 19, Township 19 North, Range 108 West of the 6th Principal Meridian, Sweetwater County, Wyoming.

WHEREAS, the Sweetwater County Board of County Commissioners held a public hearing in regards to this matter on June 16, 2015 and has given due consideration to the recommendation of the Planning and Zoning Commission and to all the evidence and testimony presented at the hearing;

NOW THEREFORE BE IT RESOLVED that the Sweetwater County Board of County Commissioners APPROVES the Zoning Map Amendment from Agriculture (A) to Mineral Development 1 (MD-1).

Dated this 16th day of June, 2015.

Sweetwater County
Board of County Commissioners

Wally J. Johnson, Chairman

John K. Kolb, Member

Don Van Matre, Member

Randal M. Wendling, Member

Attest:

Steven Dale Davis, County Clerk

Reid O. West, Member



Amendment, Variance or Appeal

Sweetwater County Land Use
80 West Flaming Gorge Way, Suite 23
Green River, WY 82935
p: (307) 872-3914 / 922-5430 f: 872-3991
landuse@sweet.wy.us

Date of Submittal: 5-1-15
Permit Number: 1029
Present Zoning: A
PID: 04-1909-01-2-00-004-00
1908-01-1-00-004-00

Date of Hearings: PZ _____ BCC _____ Resolution: _____
 Approved
 Approved with Conditions: _____
 Denied/Reason: _____
Date of Action: _____ Land Use Official Signature: _____

Application Fee: \$250.00 for **Residential** Applications Requiring a **Public Hearing**
 \$500.00 for **Non-Residential** Applications Requiring a **Public Hearing**

Lot and parcel development standards are found in Section 4 of the 2014 Zoning Resolution. Please make sure that your development and lot or parcel meets these required improvements.

Sweetwater County has adopted and will inspect for the International Fire Code. Sweetwater County has not adopted and does not enforce the International Residential Code or the International Building Code. It is the applicant's or landowner's responsibility to ensure that construction standards are met and buildings and structures are inspected.

Please fill the application out completely; incomplete applications will be returned. Attach all required supporting documentation and additional information which may be required for approval of your application. Regulations may be found in the Sweetwater County Zoning Resolution.

GENERAL INFORMATION

Property Owner of Record Contact Information

Name: John Hay, III/Don Schram
Company: Rock Springs Grazing Association
Address: P O Box 880
Rock Springs WY 82902
Phone: 307-362-3921
Email: _____

Applicant/Business Owner Contact Information

Name: John Arnoldi
Company: Lewis & Lewis, Inc.
Address: P O Box 1928
Rock Springs WY 82902
Phone: 307-362-7948
Email: johnarnoldi@live.com

PROPERTY INFORMATION

County Assigned Address: _____ Lot Size: 2842 (acres)
Project Location: Quarter(s): _____ Section: 7, 19 Township: 19 Range: 108
EXCEPT - SECTION 7 THAT PORTION 11 & 13 Subdivision Name: LINK NORTH OF THE GREEN RIVER Lot: 19 Block: 109

Overlay District: Highway Scenic Slope

RESOLUTION 09.02.20.02 SECTIONS 13, 11 & 7

AMENDMENTS – See Section 20 of the 2014 Zoning Resolution & Attach Any Special Requirements

Language

Section Proposed to be Amended: _____

Proposed Text:

Reason for Proposed Amendment:

Mining of Sand and Gravel

Zoning

Existing Zoning: A Proposed Zoning: MD-1 Overlay

Reason for Proposed Amendment:

Mining of Sand and Gravel

VARIANCE – See Section 4 of the 2014 Zoning Resolution & Attach Any Special Requirements

Cite Regulation Subject to Proposed Variance: _____

Explain Need for Proposed Variance:

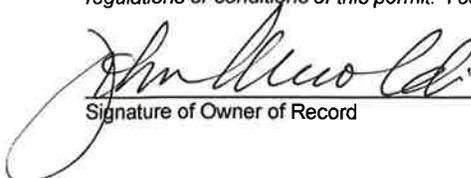
APPEAL – See Section 4 of the 2014 Zoning Resolution & Attach Any Special Requirements. No fee required.

Cite Action Subject to Proposed Appeal: _____

Explain Need for Appeal:

SIGNATURE REQUIRED

I acknowledge that I have read and understand this application and the pertinent regulations. I further agree if the permit is approved, I will comply with all regulations and conditions of approval. I grant Sweetwater County the right of ingress/egress as reasonably necessary to determine compliance with County regulations or conditions of this permit. I certify that the information provided with this application is true and correct.



Signature of Owner of Record

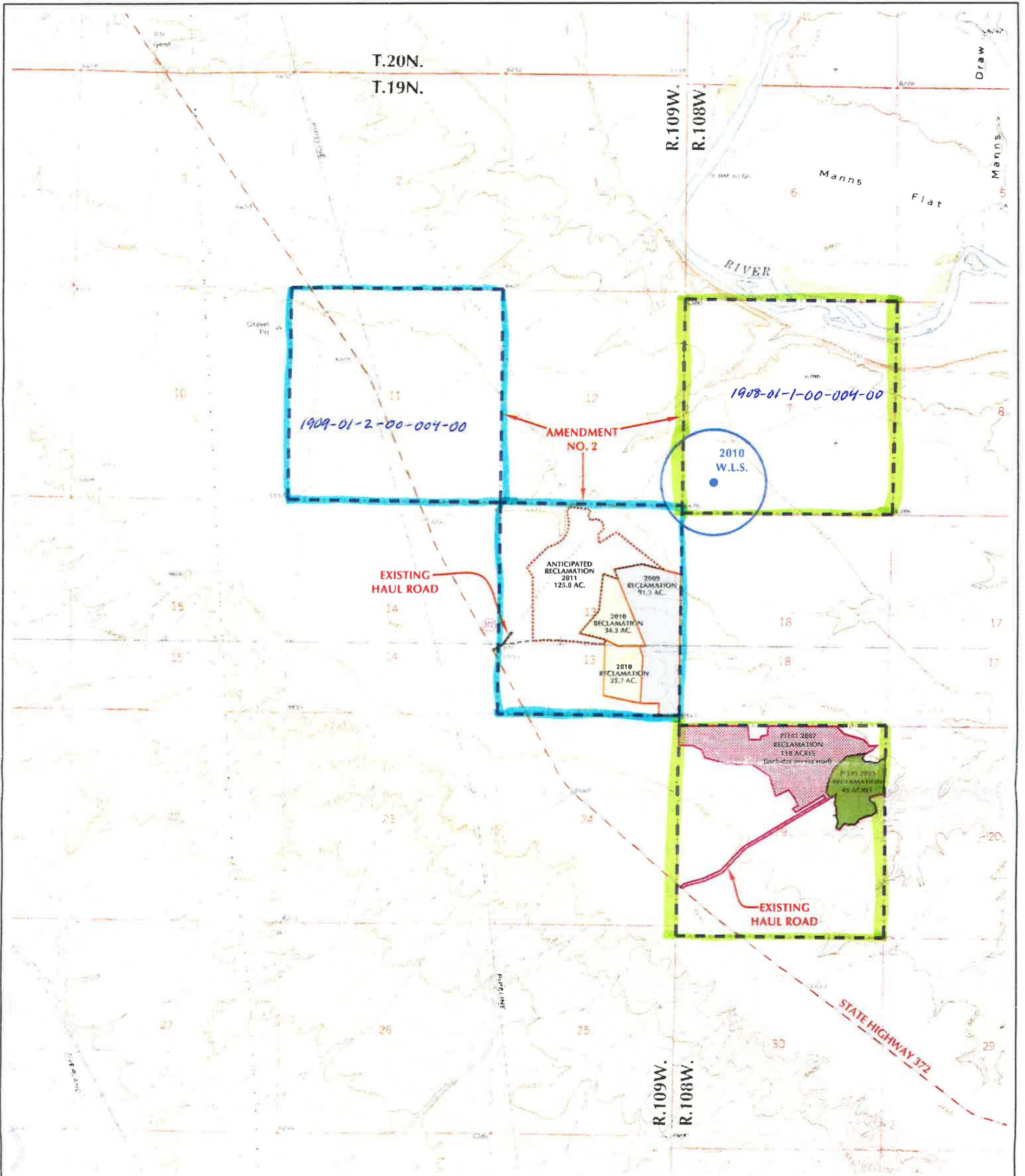
4/29/15

Date



Signature of Applicant/Agent

Date



GENERAL LEGEND

-  RECLAIMED AREA 2009
-  RECLAIMED AREA 2010
-  PERMIT BOUNDARY
-  ANTICIPATED RECLAMATION BEGINNING 2011



LEWIS & LEWIS PIT #1
 SECTION 19, T.19N., R.108W.
 SECTION 7, T.19N., R.108W.
 SECTION 11, T.19N., R.109W.
 SECTION 13, T.19N., R.109W.

SCALE: 1" = 2500'

PREPARED: 06-19-2010

SHEET 1 OF 1	RP1	LEWIS & LEWIS PIT	LEWIS & LEWIS, INC. P.O. BOX 1928	NELSON PROPERTY CONSULTING
	2010 RECLAMATION PLAN - MAP 1		ROCK SPRINGS, WYOMING 82902	2240 Colorado Drive Green River, WY 82935 Phone 307-871-1698 nelsont1@mac.com

Public Hearing # 2

Board of County Commissioners

June 16, 2015

Property Owner

Glenn & Holly Ellsworth
 P.O. Box 54
 Manila, UT 84046

Glenn Ellsworth Variance

Side Setback Requirement

Other Parties

Legal Description

Lots 2 & 3
 Cedar Cliff Estates
 Subdivision

Current Zoning

RR
 Rural Residential

Legal Requirements

Adjacent Notices Sent:

May 7, 2015

Public Hearing Advertised:

May 7, 2015

Sign Posted:

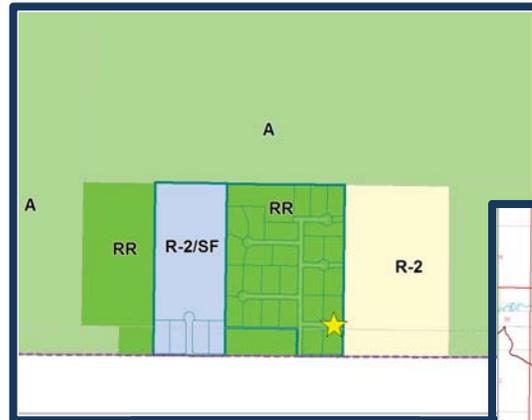
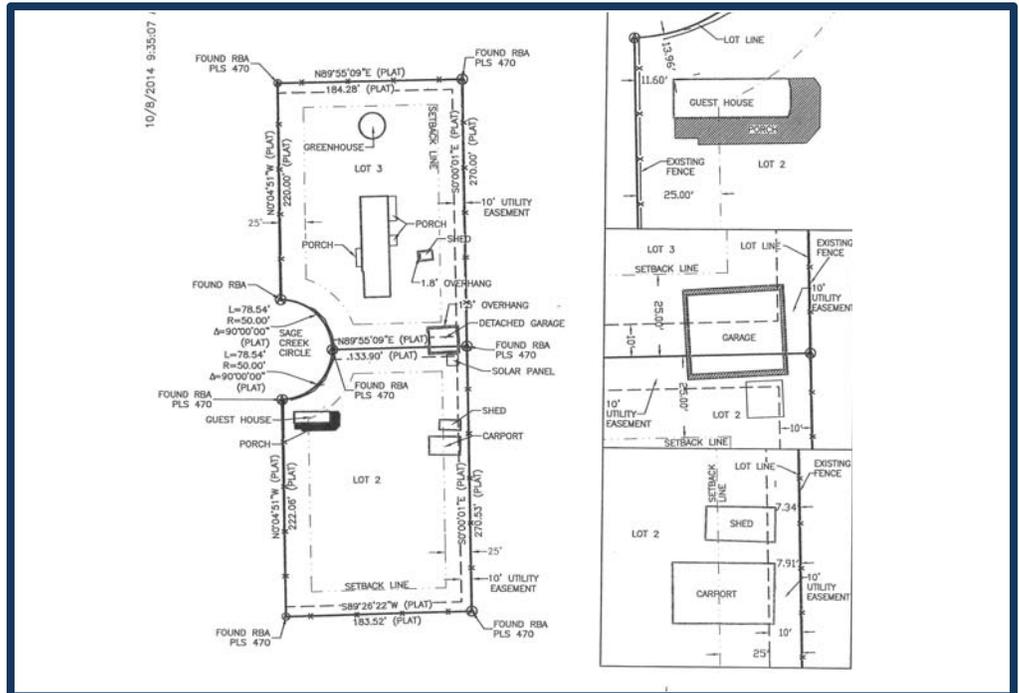
May 6, 2015

Utilities & Districts

Water: Manila
 Sewer: Septic
 Others:

Land Use Presenter

Steve Horton
 Planner III



Zoning Map

Vicinity Map



Public Hearing #2

Glenn Ellsworth

Variance

Side Setback Requirement

Summary of Application

Glenn Ellsworth is requesting a Variance for Setback Requirements for a side setback. The Variance is for a 672 sq. ft. detached garage built on a concrete foundation over 10 years ago. The detached garage has a side setback of 7 ft, but is required to have a 10 ft setback. Therefore, the Variance is for 3 ft. Recently on this property the carport, shed and guest house were found to be in violation of setbacks, but have all been moved to comply with required setbacks. They have been inspected by the Land Use Department and determined to be in compliance.

Public Comments:

Public comment in support submitted by Susan Lems, 2 Cedar Cliff Street.

Agency Comments:

Bridger Valley Electric: no objection
SWC Surveyor: there are no survey boundary issues
Colorado Interstate Gas: no concerns

Staff Comments, Recommendations and Conditions:

A Variance is associated with a situation where a hardship exists. With this request the garage is built on a concrete foundation and a Variance of 3 ft is requested. The applicant had setback violations for a carport, shed, and guest house. These structures have been moved and are now in compliance with required setbacks.

Staff recommends approval of the Variance as submitted on the basis that hardship does exist and the applicant has been cooperative in correcting setback violations with three other structures on his property.

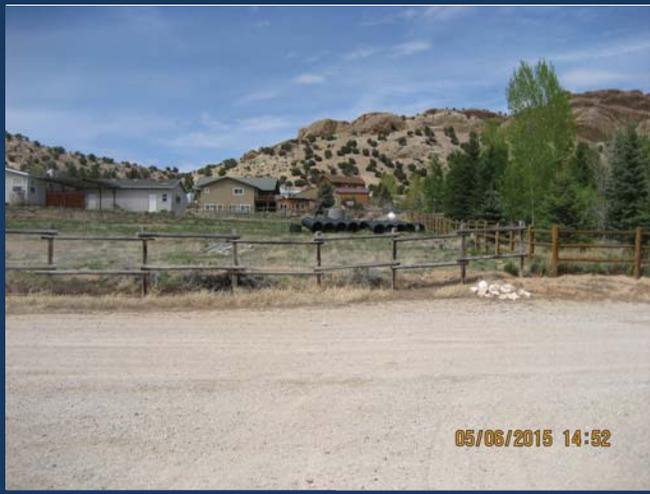
On June 10, 2015, the Planning and Zoning Commission voted 3-0 to recommend approval of the Variance for Side Setback Requirements as requested by Glenn Ellsworth. Commissioner Hansen was excused due to a conflict of interest.

Public Hearing #2

Glenn Ellsworth

Variance

Side Setback Requirement



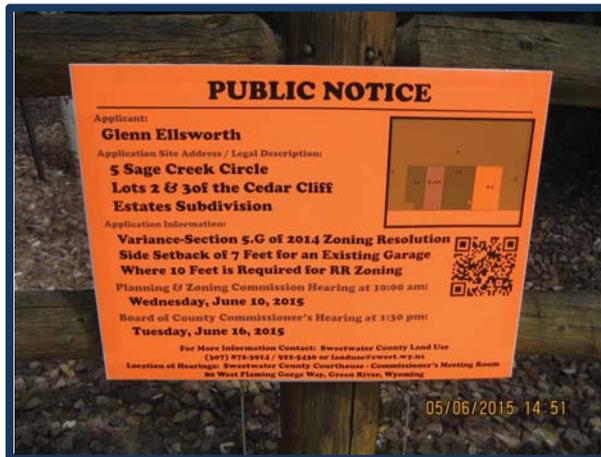
05/06/2015 14:52

Looking North



05/06/2015 14:51

Looking South



05/06/2015 14:51

Looking East

Looking West



05/06/2015 14:51



05/06/2015 14:51

RECOMMENDATION 15-06-ZO-02

GLENN ELLSWORTH VARIANCE SIDE SETBACK REQUIREMENTS

WHEREAS, **Glenn Ellsworth** is requesting a Variance from Section 5.G of the 2014 Zoning Resolution to allow a 7 foot side setback for an existing garage where a 10 foot side setback is required for property zoned Rural Residential. This Variance is for property owned by Glenn and Holly Ellsworth which is legally described as:

Lots 2 and 3 of the Cedar Cliff Estates Subdivision, Sweetwater County, Wyoming.

WHEREAS, the Sweetwater County Planning and Zoning Commission held a public hearing in accordance with the procedural requirements of the 2014 Zoning Resolution on June 10, 2015 to consider the applicant's request; and,

WHEREAS, after due consideration and discussion, the Planning and Zoning Commission voted 3-0 to recommend approval of the request with Commissioner Hansen abstaining;

NOW THEREFORE, the Sweetwater County Planning and Zoning Commission recommends APPROVAL of the Variance for a seven foot side setback.

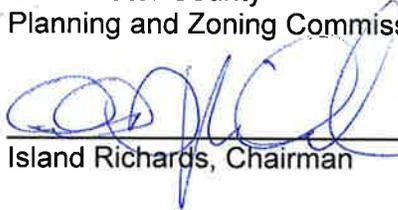
Dated this 10th day of June, 2015.

Attest:



Steven Dale Davis, County Clerk

Sweetwater County
Planning and Zoning Commission



Island Richards, Chairman

RESOLUTION 15-06-ZO-02

**GLENN ELLSWORTH
VARIANCE
SIDE SETBACK REQUIREMENTS**

WHEREAS, **Glenn Ellsworth** is requesting a Variance from Section 5.G of the 2014 Zoning Resolution to allow a 7 foot side setback for an existing garage where a 10 foot side setback is required for property zoned Rural Residential. This Variance is for property owned by Glenn and Holly Ellsworth which is legally described as:

Lots 2 and 3 of the Cedar Cliff Estates Subdivision, Sweetwater County, Wyoming.

WHEREAS, the Sweetwater County Board of County Commissioners held a public hearing in regards to this matter on June 16, 2015 and has given due consideration to the recommendation of the Planning and Zoning Commission and to all the evidence and testimony presented at the hearing;

NOW THEREFORE BE IT RESOLVED that the Sweetwater County Board of County Commissioners APPROVES the Variance for a seven foot side setback on Lots 2 and 3 of the Cedar Cliff Estates Subdivision.

Dated this 16th day of June, 2015.

Sweetwater County
Board of County Commissioners

Wally J. Johnson, Chairman

John K. Kolb, Member

Don Van Matre, Member

Randal M. Wendling, Member

Attest:

Steven Dale Davis, County Clerk

Reid O. West, Member



Amendment, Variance or Appeal

Sweetwater County Land Use
80 West Flaming Gorge Way, Suite 23
Green River, WY 82935
p: (307) 872-3914 / 922-5430 f: 872-3991
landuse@sweet.wy.us

Date of Submittal: 5-4-15
Permit Number: 1031
Present Zoning: RR
PID: 04-1209-21-3-03-013-00

Date of Hearings: PZ _____ BCC _____ Resolution: _____

Approved

Approved with Conditions: _____

Denied/Reason: _____

Date of Action: _____ Land Use Official Signature: _____

Application Fee: \$250.00 for Residential Applications Requiring a Public Hearing
 \$500.00 for Non-Residential Applications Requiring a Public Hearing

Lot and parcel development standards are found in Section 4 of the 2014 Zoning Resolution. Please make sure that your development and lot or parcel meets these required improvements.

Sweetwater County has adopted and will inspect for the International Fire Code. Sweetwater County has not adopted and does not enforce the International Residential Code or the International Building Code. It is the applicant's or landowner's responsibility to ensure that construction standards are met and buildings and structures are inspected.

Please fill the application out completely; incomplete applications will be returned. Attach all required supporting documentation and additional information which may be required for approval of your application. Regulations may be found in the Sweetwater County Zoning Resolution.

GENERAL INFORMATION

Property Owner of Record Contact Information

Name: Glenn Ellsworth

Company: _____

Address: P.O. Box 54, Manila, UT 84046

Phone: 801-558-7873

Email: support@directdss.com

Applicant/Business Owner Contact Information

Name: _____

Company: _____

Address: _____

Phone: _____

Email: _____

RECEIVED
MAY - 4 2015
SWC LAND USE

PROPERTY INFORMATION

County Assigned Address: 5 Sage Creek Circle Lot Size: 2.2 (acres)

Project Location: Quarter(s): _____ Section: 21,28 Township: 12 Range: 109

Subdivision Name: Cedar Cliff Estates Lot: 2-3 Block: _____

Overlay District: Highway Scenic Slope

AMENDMENTS – See Section 20 of the 2014 Zoning Resolution & Attach Any Special Requirements

Language

Section Proposed to be Amended: _____

Proposed Text:

--

Reason for Proposed Amendment:

--

Zoning

Existing Zoning: _____ Proposed Zoning: _____

Reason for Proposed Amendment:

--

VARIANCE – See Section 4 of the 2014 Zoning Resolution & Attach Any Special Requirements

Cite Regulation Subject to Proposed Variance: Section 5.G.

Explain Need for Proposed Variance:

The Variance is for a 672 sq ft garage built on a concrete foundation. It was built over 10 years ago. The garage has a side setback of 7 ft, but is required to have a 10 ft setback. Therefore, the Variance request is for 3 ft. The carport, shed, and guest house were in violation of setbacks, but have all been moved to comply with required setbacks. They have been inspected by the Land Use Department.

APPEAL – See Section 4 of the 2014 Zoning Resolution & Attach Any Special Requirements. No fee required.

Cite Action Subject to Proposed Appeal: _____

Explain Need for Appeal:

--

SIGNATURE REQUIRED

I acknowledge that I have read and understand this application and the pertinent regulations. I further agree if the permit is approved, I will comply with all regulations and conditions of approval. I grant Sweetwater County the right of ingress/egress as reasonably necessary to determine compliance with County regulations or conditions of this permit. I certify that the information provided with this application is true and correct.


Signature of Owner of Record

5-4-15
Date

Signature of Applicant/Agent

Date

