

Legislation Text

File #: 21-4856, Version: 1

**Department:** Universal Services

Department Head/Elected Official: MG Richard J. Noriega (Ret), Executive Directors & CIO

Regular or Supplemental RCA: ☑ Regular RCA ☑ Supplemental RCA

Type of Request: Interlocal Agreement

Project ID (if applicable): Vendor/Entity Legal Name (if applicable): Texas Division of Emergency Management MWDBE Participation (if applicable):

### **Request Summary (Agenda Caption):**

Request for approval of an agreement with Texas Division of Emergency Management for use of the county's communications systems.

### Background and Discussion:

Universal Services respectfully requests approval of an agreement between Texas Division of Emergency Management and Harris County.

### Expected Impact:

No Impact

## Alternative Options:

### Alignment with Goal(s):

- □ Justice and Safety
- □ Economic Opportunity
- □ Housing
- Public Health

 $\hfill\square$  Transportation

□ Flooding

🗆 Environment

□ Governance and Customer Service**Prior Court Action (if any):** 

## Location:

Address (if applicable list below):

 $\Box$  Countywide

Precinct 1

Precinct 2

□ Precinct 3

Precinct 4Fiscal and Perso	nnel Summary			
Service Name		FY 21-22	Estimates	
			FY 22	Next 3 FYs
Incremental Expenditures		•		
Labor Expenditures		-	-	-
Non-Labor Expenditures		-	-	-
Total Incremental Expenditures		-	-	-
Funding Sources (General Fund, I	PIC Fund, Debt or C	P, Grants, or Ot	her - Please Spe	cify)
Existing Budget	-	-	-	-
	-	-	-	-
	-	-	-	-
Total Current Budget		-	-	-
Additional Budget Requested	-	-	-	-
	-	-	-	-
	-	-	-	-
Total Additional Budget Requested		-	-	-
Total Funding Sources		-	-	-
Personnel (Fill out section only if I	requesting new PCN	Ns)	-	
Current Position Count for Service		-	-	-
Additional Positions Requested		-	-	-
Total Personnel		-	-	-

Anticipated Implementation Date: September 14, 2021

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### **Emergency/Disaster Recovery Note:**

 $\Box$  Not an emergency, disaster recovery, or COVID-19 related item

- □ Emergency Item
- COVID-19 related Item
- □ Disaster Recovery related Item

# Contact(s) name, title, department:

Robert Howard, Sr Manager, Public Safety Technology

# Attachments (if applicable):