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Clerk's [Dist.	03/08/10		SBO
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Incomplete submissions will be returned to the Department until all requirements are met

Department Name <u>Spokane Police</u> Department Project # <u>Range Contract</u>			New Contract CR #	
Contractor/Cons	Date: REC	EIVED		
Name: Address:	Spokane County Detention Serve 1100 W. Mallon	ces emittance Address: ity, State, Zip	MAR	08 2016 ERK'S OFFIC
City, State, Zip:				
Summary of Sei			general in the second	
2016 Range use Services that stip fee of \$11,000.00	contract between Spokane Police E ulates the two parties' responsibilitie).	Department and Spoke es with regards to the	ane County Detention range use and the	on annual
Amount: \$11,000	0.00 (rev) Budget	Code: 0680-11460-2	21400-34210	
	Maximum Amount			
Beginning Date:	01/01/2016 Expiration Date: 12/	31/2016 Open-Ended	d: 🗌	
City Business L	rchasing Policy to be kept on file in De icense	Contractor has been no	tified of State Law req	uirements.
Funds are available Accountant	e in the appropriate by leget account	MM SV	2/29/2016	
Department Head	Signature Signature	-	Date / 9/16 Date	
Other				
Other	Signature		Date	
	Signature		Date	
Distribution List				
Contractor E-mail			kkeck@spokanecity.	org
Dept. Contact E-n	nail: achirowamangu, ewade, slynds,	Taxes and Licenses		

Spokane Police Academy

2302 N. Waterworks Spokane, WA 99212 (509) 742-8116

To: Arlington Richards

From: Sgt. Robert Boothe, Range Master, Spokane Police Academy Range

Date: February 17, 2016

Re: 2016 SPD Range Use Agreement

Dear Lead Firearms Instructor or Administrator,

We agree that the Spokane County Detention Services is solely responsible for the firearms training of its personnel while using the Range. Training Staff and Student behavior and their actions are the sole responsibility of the Spokane County Detention Services. Firearms' training is inherently dangerous and the utmost attention must be paid to maintain a safe training environment. Use of the SPD Range in its present condition is purely at the discretion of the Spokane County Detention Services. Any injury or claims incurred during training shall be the responsibility of the Spokane County Detention Services. Spokane County is a member of the Washington Counties Risk Pool (the "Pool"), as provided by RCW 48.62.031. Spokane County and the Spokane County Detention Services are covered by the Pool's Joint Self-Insurance Policy, as further described in Attachment "A" Insurance, attached hereto and incorporated herein by reference.

The Spokane County Detention Services agrees to pay a non-refundable yearly use fee, between January 1st and January 31st, of the year of the Agreement. Through agreement with the SPD Range Master, Sergeant Robert Boothe, the Spokane County Detention Services will provide this yearly use fee in funds payable to the Spokane Police Range, based on the following usage agreement between the City of Spokane and the Spokane County Detention Services for the amount of eleven thousand dollars (\$11,000.00). The Spokane County Detention Services will be invoiced for the amount. The use of the VIRTRA system will be included in this agreement.

Range use is scheduled based upon availability. It is recommended that scheduling be done with as much advanced notice as possible. Scheduling at least 30 days in advance is preferred; however Range Staff will make every effort to accommodate any requests for range time. Any member(s) of an Agency holding any paid agreement in good standing will be welcome to use the range on a drop-in basis at no additional expense, based on availability of said facility, with-in reason, even if an unlimited package was not purchased. This drop-in capability will not exceed two (2) visitors at a time per Agency, and should not exceed a reasonable frequency of free visits per month.

The Spokane County Detention Services is responsible for ensuring that its members follow the Range Rules posted in, around and on the Range; Range Facility Use Rules (signed as part of this Agreement); and general safe firearms use. Should it be necessary, the Spokane County Detention Services will be notified verbally, and, if necessary in writing of any safety violation that warrants notification. It is not the intent of the SPD Range to restrict an Agency's access to the facility; however, should action be necessary, following counseling and documentation — individuals may be restricted from instructing or attending training at the facility.

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from instructing or attending training at the facility.	
This Agreement may be terminated at the discretion of either party.	rnev
Sgt. Robert Boothe , Range Master Title of Signing Party Dieser	AIIO
Spokane Police Department TAX ID#91-6001280 Dept. Dept. Sexulul 2	250

Attachment "A" Insurance

- 1. <u>INSURANCE</u>. During the term of the Agreement, each Agency/Participant shall maintain in force at its own expense, the following insurance coverages or better:
- A. Worker's Compensation Insurance in compliance with RCW 51.12.020, which requires subject employers to provide workers' compensation coverage for all their subject workers and Employer's Liability Insurance in the amount of \$1,000,000;
- B. General Liability Insurance on an occurrence basis, with a combined single limit of not less than \$1,500,000 each occurrence for bodily injury and property damage. It shall include contractual liability coverage for the indemnity provided under this Agreement. It shall provide that the City, its officers and employees are additional insureds but only with respect to the Contractor's services to be provided under this Agreement;
- C. Automobile Liability Insurance with a combined single limit, or the equivalent of not less than \$500,000 each accident for bodily injury and property damage, including coverage for owned, hired and non-owned vehicles.

*******In the event that an agency is a member of Washington Counties Risk Pool (WCRP), an additional insured endorsement for general liability will not be required and the member County's Memorandum of Liability Coverage (MLC) listing the City of Spokane as Certificate Holder shall be used in place of a Certificate of Insurance.

There shall be no cancellation, material change, reduction of limits or intent not to renew the insurance coverage(s) without sixty (60) days written notice from the Agency/Participant or its insurer(s) to the City.

As evidence of the insurance coverages required by this Contract, the Agency/Participant shall furnish an acceptable Certificate of Insurance (COI) or Memorandum of Liability Coverage (MLC) as proof of membership in the Washington Counties Risk Pool to the City at the time it returns the signed Agreement. The COI shall specify all of the parties who are additional insured, and include applicable policy endorsements, and the deductible or retention level, as well as policy limits. Insuring companies or entities are subject to City acceptance and must have a rating of A- or higher by Best. Copies of all applicable endorsements shall be provided. The Agency/Participant shall be solely financially responsible for all pertinent deductibles, self-insured retentions, and/or self-insurance