

**COPY**

**Commonwealth of Massachusetts  
 Executive Office of Public Safety and Security  
 Office of Grants and Research  
 Highway Safety Division  
 10 Park Plaza, Suite 3720  
 Boston, MA 02116  
 Tel: 617.725.3341**

**Application for Grant Funds (AGF)  
 FFY 2011 Automated License Plate Reader Grant Program  
Deadline for Applications: Noon, November 29, 2010**

**All sections must be completed to be eligible.**

Name and Complete Address of Department or Municipality  <b>Concord Police Department        219 Walden Street, P.O. Box 519        Concord, MA 01742</b>			
Chief's Last Name <b>Neal</b>	First <b>Barry</b>	Middle Initial <b>R.</b>	
E-Mail Address <b>bneal@concordma.gov</b>	Telephone <b>978-318-3400</b>	Fax <b>978-369-8420</b>	
Grant Contact Last Name <b>Goldman</b>	First Name <b>Brian</b>	Middle Initial <b>H.</b>	Title <b>Sergeant</b>
E-Mail Address <b>bgoldman@concordma.gov</b>	Telephone <b>978-318-3400</b>	Fax <b>978-369-8420</b>	
<b>Applicant Profile</b>			
Does your department currently have any ALPR units in use? If so, how many?		<b>NO</b>	
Number of full-time officers		<b>34</b>	
Number of part-time officers		<b>0</b>	
What is the population of your community according to the 2009 census?		<b>15,538</b>	
How large is your community (square miles)?		<b>24</b>	

**Problem Identification**

<b>Category</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>
Number of unlicensed motorist citations	<b>93</b>	<b>104</b>	<b>78</b>
Number of uninsured motorist citations	<b>79</b>	<b>57</b>	<b>77</b>
Number of operating with a suspended license citations	<b>173</b>	<b>142</b>	<b>151</b>

Number of operating with a suspended license arrests	40	24	30
Number of stolen vehicles reports	3	3	2
Number of stolen vehicle arrests	2	0	1

**Proposed Programming**

**Experience-** Provide a summary of previous experience your department has with highway safety initiatives (Click It or Ticket, Massachusetts Law Enforcement Challenge, crash reporting, etc.).

The Concord Police Department has been involved with highway initiatives for approximately 15 years. We have been approved and managed grants for involving the traffic enforcement and equipment grants, car seat grants, bicycle helmet grants, and moped, bicycle and pedestrian safety grants. We utilized each of these grants to capacity, supplementing our own traffic initiative programs and equipment inventory. These grants have played a critical role in making the roadways safer for vehicular, bicycle and pedestrian traffic in the Town of Concord.

**Timeline-** Provide your projected timeline for unit purchase, training, and implementation (January 2011-June 30, 2011).

Our projected timeline would be immediate, as outlined below:

Our Department has already field-tested three different ALPR Units, as part of the Northeast Massachusetts Law Enforcement Council's (NEMLEC) initiative. We have already identified the unit we intend to purchase immediately upon funding approval in January, 2011.

Depending on delivery of the unit, we are estimating a January, 2011 installation in our dedicated cruiser, specifically outfitted for traffic enforcement initiatives.

All officers have already been trained on the demo units and will receive a refresher course through Roll Call. In addition, a department policy will be drafted and implemented upon installation of the unit. Our goal is to have the ALPR Unit in service, as soon as possible.

**Project Activities-** Describe your proposed deployment use (how many hours per day, per week, etc.).

Upon installation of the ALPR Unit, the designated traffic enforcement cruiser will be deployed at a minimum of 16 hours each day, 7 days a week. This vehicle will be assigned to traffic enforcement duties as its primary function, which will take place throughout the Town of Concord, including Route 2. In addition, this unit will be utilized as the primary unit for all traffic enforcement initiatives that the Department initiates to include all EOPSS Grants.

**Capabilities-** Describe your department's technical capabilities to implement this program.

The Concord Police Department has a full-time Technology/Information Officer. His duties include: the oversight and deployment of all computer and network systems utilized by the Department, as well as implementation of any new technology.

All marked cruisers are equipped with the latest computer laptop technology and are on a four year replacement schedule.

In addition to the Department's in-house capabilities, the Town of Concord has a full-time IT Department as well.

The Department's Computer Program of choice is IMC and IMC Mobile. We currently have all marked cruisers, and one unmarked cruiser (the traffic enforcement unit) outfitted with computer laptops, which enable our officers to instantly access the Massachusetts Registry of Motor Vehicle's data, as well as reports and dispatch information.

**Goals-** Identify specific, measurable, attainable, realistic and time-bound goals and objectives for this program (i.e. increase uninsured motorist violations by 20% over 2009 levels by August 2011).

Our goal is to increase effectiveness in the enforcement of uninsured motor vehicles, revoked or suspended registrations and licenses by a minimum of 25% over the current enforcement levels. In addition, the ALPR System will assist with the apprehension of subjects that may be wanted and/or missing.

We anticipate an increase to exceed 25% in the enforcement of the following motor vehicle categories: Unlicensed, Suspended/Revoked Operators, Uninsured and Revoked Registrations.

This data will be tracked, reviewed, and utilized on a monthly basis to develop deployment strategies that will be adjusted, as necessary, to achieve maximum benefit and results.

**Evaluation-** Describe your evaluation plan (for example, a pre and post data comparison for your community during the grant period with the same time period in the previous year).

Upon implementation of the ALPR System, an analysis will be conducted by comparing violation data on a monthly basis, which will be compared to the previous years corresponding month to evaluate the increase in violation detection.

In addition, officers will be given specific traffic enforcement assignments aimed at increasing the probability of intercepting motor vehicle offenders.

**Additional Information-** Provide any additional information about your current and/or proposed ALPR program you would like EOPSS to consider when evaluating your AGF response (major highways through community, commuter population).

The National Highway Traffic Safety Administration (NHTSA) estimates that there are forty million license privileges that are revoked, suspended or denied for serious traffic violations currently in the United States.

The ALPR System will greatly enhance the Concord Police Department's abilities to identify and locate motorists with existing violations, such as: suspended, revoked, and expired registrations, uninsured and stolen motor vehicles, identification of missing/AMBER Alert Persons, and BOLO's. The ALPR System will also increase our ability to identify plates and/or licenses that have been suspended or revoked for alcohol related offenses; and therefore, increase the potential to initiate an interdiction before that offender can strike again.

During the time we had the three demo units through NEMLEC, we observed a 25% increase in enforcement activity, which was directly attributed to the ALPR Units. This percentage would have been higher if we were working with one unit. The unit we have chosen to purchase has demonstrated a high level of consistency in locating offenders and would be a valuable tool in making our roads safer, which is our ultimate goal.

The Town of Concord has several highly traveled routes and a major rotary linking us to other communities, which are utilized daily, creating a dense commuter population. These roadways all provide multiple opportunities to target motorists that break the law. By providing officers with an enforcement plan, we will be able to maximize the use of the ALPR Technology.

In addition, a correction facility and pre-release center, as well as a major hospital are located within the Town. There are also several significant historical areas that incorporate the National Park Service, which attract thousands of visitors annually. An ALPR Unit would enable us to quickly identify any suspicious vehicles on or near these properties.

**BUDGET TEMPLATE**

**January 2011 - June 30, 2011-** also provide specification sheet from your chosen vendor

<b>Equipment</b>	<b>Cost/Rate</b>	<b>Total</b>
(1) MPH-900X3 AD3 SPLIT TRANS Mobil Licence Plate Reader to include Related Software and Operations Center License	\$20,000/Each	\$20,000.00
<b>Total</b>		<b>\$20,000.00</b>

Total funding requested \$ 20,000.00

Please Note:

If your department does not have an officer safety belt policy, 50% of your total grant award will be deducted. If your department falls into this category, please provide a statement agreeing that the balance will be paid by your department or that no funds will be awarded.

Grant recipients are required to provide an in-kind (soft) match which represents 20% of the total project cost. For example if you receive \$5,000, your 20% match would be calculated as follows: \$5,000 divided by 80% = \$6,250 X 20% = \$1,250.

**FEDERAL IN-KIND MATCH REQUIREMENTS - REQUIRED**

<b>Item/Service</b>	<b>Quantity</b>	<b>Cost</b>	<b>Total</b>
Supervisory Time	30 Hours	\$41.00 Per Hr	\$1,230.00
Scheduling of Officers	30 Hours	\$41.00 Per Hr	\$1,230.00
Report Preparation	30 Hours	\$41.00 Per Hr	\$1,230.00
Cruiser Maintenance	24 Hours	\$34.00 Per Hr	\$816.00
Equipment Maintenance	24 Hours	\$34.00 Per Hr	\$816.00
Roll Call Training	12 Hours	\$41.00 Per Hr	\$492.00
<b>Total</b>			<b>\$5,814.00</b>

Department's plan to pay for additional maintenance and warranty costs:		
<b>Year 1</b>	<b>Free</b>	
<b>Year II</b>	<b>\$1,600 Per Year</b>	<b>Hardware and Software</b>
<b>Year III</b>	<b>\$1,600 Per Year</b>	<b>Hardware and Software</b>
<b>Year IV</b>	<b>\$1,600 Per Year</b>	<b>Hardware and Software</b>
<b>Beyond</b>		<b>Software Only</b>

**For EOPSS/HSD Use:**  
 Revised Total Request:  
 \$ \_\_\_\_\_

Applications due on or before November 29, 2010 at noon to:

Dan DeMille, Program Coordinator  
Executive Office of Public Safety and Security  
Office of Grants and Research  
Highway Safety Division  
10 Park Plaza, Suite 3720  
Boston, MA 02116

**CHECK LIST**

- Completed Application (original and 8 copies)
- Required Signatures
- Safety belt policy or commitment to establish one by DATE
- Contract Authorized Signatory Listing

Please note that in the event that your department or municipality is selected for an award, a Standard Contract Form and General Subrecipient Conditions will be provided for your signature at that time.

Before signing below, or obtaining signature, please be sure the entire application is complete.

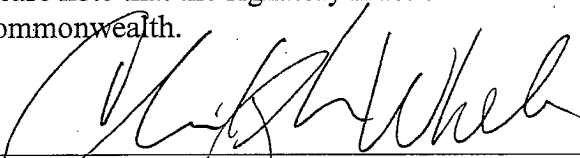
**ASSURANCES**

The Concord Police Department/municipality acknowledges and agrees to comply with all grant contract requirements and performance measures. This municipality or department understands and agrees that a grant received as a result of this application is subject to the regulations governing highway safety projects and grant management requirements and will comply with all State and Federal Guidelines. Funding is based on availability of federal funds. I hereby acknowledge my understanding of the above grant requirements and will comply with the best of my ability:

Christopher Whelan, Town Manager

Authorized Representative Name and Title (please print)

Please note that the signatory must be authorized to enter into a contract with the Commonwealth.



Authorized Signature in blue ink

11/22/10

Date signed in blue ink

Deadline: An original application form with attachments, along with <sup>8</sup>three copies, must be received by HSD by **noon on November 29, 2010**. Faxed and electronic responses will **NOT** be accepted.

\*It is suggested that departments verify with EOPSS-HSD receipt of application prior to deadline (this is because of recent mail delivery problems). Please email Dan DeMille at [Daniel.DeMille@state.ma.us](mailto:Daniel.DeMille@state.ma.us) to verify receipt.

# ELSAG North America Law Enforcement Systems, LLC

412 Clocktower Commons  
 Brewster, NY 10509  
 Duns # 196140821  
 Phone: 1-866-9MPH900 (967-4900)  
 Fax: 336-379-7164

DATE

11/18/2010
**QUOTATION**

**Delivered to:**

Concord Police Dept.  
 Att: Det. James Forten  
 219 Walden St.  
 Concord, Massachusetts 01742

Quotation valid until: January 31, 2011

Prepared by: Pat Fox

Projected Arrival Date: TBD

(Please mail or Fax your purchase order to the address and telephone number above and Fax a copy to (518) 452-7777)

Receipt of Goods

**NASPO Multi-State Contract #PC62119 Award #19745**  
**Massachusetts State Contract # HLS01**  
**WCSA # PC 62119 Hazardous Incident Response Equipment**  
**(Contract term: 5/20/2007 - 5/10/2010)**

**MASSACHUSETTS EOPPS FY2011 AUTOMATED LICENSE PLATE GRANT**

Model #	Description	Cost	Units	Amount
<b>MPH-900X3 AD3 SPLIT TRANS</b>	Mobile License Plate Reader - Includes 3 units with LPR Processors, 6 cameras (3 color & 3 infrared in 3 enclosures), junction box, cables and related software. (REQUIRES INSTALLATION BY ELSAG N.A. AUTHORIZED PERSONNEL).	\$19,400	1	\$19,400.00
<b>MPH-900 INSTALL</b>	Hedley mounts with 1 Clicker for a Ford Crown Victoria. The cameras will consist of (2) 25mm cameras on the driver's side and a 16mm camera on the passenger side of the vehicle.			
<b>OPERATION CENTER LICENSE</b>	Operations Center License	\$600	1	<b>\$600.00</b>
			<b>TOTAL</b>	<b>\$20,000.00</b>

**Service Plan for goods and services provided by the above quote**

Year I	Free		
Year II	\$1,600.00 per year		Hardware and Software
Year III	\$1,600.00 per year		Hardware and Software
Year IV	\$1,600.00 per year		Hardware and Software
Beyond			Software Only

**Service Plan Includes:**

- Software Updates
- Annual Training/Service
- Parts & Labor

Approval Signature: \_\_\_\_\_



# COMMONWEALTH OF MASSACHUSETTS CONTRACTOR AUTHORIZED SIGNATORY LISTING



**CONTRACTOR LEGAL NAME :**  
**CONTRACTOR VENDOR/CUSTOMER CODE:**

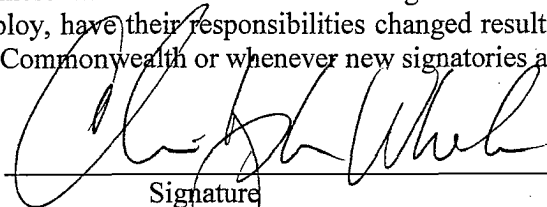
**INSTRUCTIONS:** Any Contractor (other than a sole-proprietor or an individual contractor) must provide a listing of individuals who are authorized as legal representatives of the Contractor who can sign contracts and other legally binding documents related to the contract on the Contractor's behalf. In addition to this listing, any state department may require additional proof of authority to sign contracts on behalf of the Contractor, or proof of authenticity of signature (a notarized signature that the Department can use to verify that the signature and date that appear on the Contract or other legal document was actually made by the Contractor's authorized signatory, and not by a representative, designee or other individual.)

**NOTICE:** *Acceptance of any payment under a Contract or Grant shall operate as a waiver of any defense by the Contractor challenging the existence of a valid Contract due to an alleged lack of actual authority to execute the document by the signatory.*

For privacy purposes **DO NOT ATTACH** any documentation containing personal information, such as bank account numbers, social security numbers, driver's licenses, home addresses, social security cards or any other personally identifiable information that you do not want released as part of a public record. The Commonwealth reserves the right to publish the names and titles of authorized signatories of contractors.

AUTHORIZED SIGNATORY NAME	TITLE
Christopher Whelan	Town Manager
Douglas Meagher	Deputy Town Manager

I certify that I am the President, Chief Executive Officer, Chief Fiscal Officer, Corporate Clerk or Legal Counsel for the Contractor and as an authorized officer of the Contractor I certify that the names of the individuals identified on this listing are current as of the date of execution below and that these individuals are authorized to sign contracts and other legally binding documents related to contracts with the Commonwealth of Massachusetts on behalf of the Contractor. I understand and agree that the Contractor has a duty to ensure that this listing is immediately updated and communicated to any state department with which the Contractor does business whenever the authorized signatories above retire, are otherwise terminated from the Contractor's employ, have their responsibilities changed resulting in their no longer being authorized to sign contracts with the Commonwealth or whenever new signatories are designated.

  
\_\_\_\_\_  
Signature

Date: 11/22/10

Title: Town Manager

Telephone: 978-318-3000

Fax: 978-318-3002

Email: cwhelan@concordma.gov

[Listing can not be accepted without all of this information completed.]

A copy of this listing must be attached to the "record copy" of a contract filed with the department.

# COMMONWEALTH OF MASSACHUSETTS CONTRACTOR AUTHORIZED SIGNATORY LISTING



CONTRACTOR LEGAL NAME :  
CONTRACTOR VENDOR/CUSTOMER CODE:

## PROOF OF AUTHENTICATION OF SIGNATURE

This page is optional and is available for a department to authenticate contract signatures.  
It is recommended that Departments obtain authentication of signature for the signatory  
who submits the Contractor Authorized Listing.

This Section MUST be completed by the Contractor Authorized Signatory in presence of notary.

Signatory's full legal name (print or type): Christopher Whelan

Title: Town Manager

X

Signature as it will appear on contract or other document (Complete only in presence of notary):

AUTHENTICATED BY NOTARY OR CORPORATE CLERK (PICK ONLY ONE) AS FOLLOWS:

I, Douglas Meagher (NOTARY) as a notary public certify that I witnessed  
the signature of the aforementioned signatory above and I verified the individual's identity on this date:

NOVEMBER 22, 2010

My commission expires on:



DOUGLAS MEAGHER  
NOTARY PUBLIC  
Commonwealth of Massachusetts  
My Commission Expires  
April 16, 2015

AFFIX NOTARY SEAL

I, \_\_\_\_\_ (CORPORATE CLERK) certify that I witnessed the  
signature of the aforementioned signatory above, that I verified the individual's identity and confirm the individual's  
authority as an authorized signatory for the Contractor on this date:

\_\_\_\_\_, 20\_\_\_\_.

AFFIX CORPORATE SEAL

COMMONWEALTH OF MASSACHUSETTS  
CONTRACTOR AUTHORIZED SIGNATORY LISTING

Issued May  
2004



CONTRACTOR LEGAL NAME :  
CONTRACTOR VENDOR/CUSTOMER CODE:

PROOF OF AUTHENTICATION OF SIGNATURE

This page is optional and is available for a department to authenticate contract signatures.  
It is recommended that Departments obtain authentication of signature for the signatory  
who submits the Contractor Authorized Listing.

This Section MUST be completed by the Contractor Authorized Signatory in presence of notary.

Signatory's full legal name (print or type): Douglas Meagher

Title: Deputy Town Manager

X Douglas Meagher  
Signature as it will appear on contract or other document (Complete only in presence of notary):

AUTHENTICATED BY NOTARY OR CORPORATE CLERK (PICK ONLY ONE) AS FOLLOWS:

I, Anita S. Tekle (NOTARY) as a notary public certify that I witnessed  
the signature of the aforementioned signatory above and I verified the individual's identity on this date:  
Nov. 22, 2010.

My commission expires on:

Anita S. Tekle  
Notary Public  
Commonwealth of Massachusetts  
My Commission Expires  
December 29, 2011

AFFIX NOTARY SEAL

I, \_\_\_\_\_ (CORPORATE CLERK) certify that I witnessed the  
signature of the aforementioned signatory above, that I verified the individual's identity and confirm the individual's  
authority as an authorized signatory for the Contractor on this date:

\_\_\_\_\_, 20\_\_\_\_.

AFFIX CORPORATE SEAL