

135074 - Higginsville Police Department License Plate Readers

Application Details

Funding Opportunity: 134871-FY 2022 Local Violent Crime Prevention Grant
Funding Opportunity Due Date: Jan 21, 2022 5:00 PM
Program Area: Local Violent Crime Prevention Grant
Status: Awarded
Stage: Final Application

Initial Submit Date: Jan 20, 2022 11:08 AM
Initially Submitted By: Melanie Shockley
Last Submit Date:
Last Submitted By:

Contact Information

Primary Contact Information

Name: Salutation **Melanie Shockley**
First Name Last Name
Job Title*: Emergency Management Director
Email*: mshockley474@gmail.com
Mailing Address*: 1922 Main Street

12 W 19th Street
Higginsville Missouri 64037
City State/Province Postal Code/Zip
Phone*: (660) 584-2104 Ext.
Phone
###-###-####
Fax: (660) 584-3392
###-###-####

Organization Information

Applicant Agency*: Higginsville, Police Department
Organization Type*: Government
Organization Website: <http://www.higginsville.org>
Federal Tax ID#*: 446000186 01
9 digits (no hyphen) Tax ID Extension
DUNS #: 037120177
9-digit number
Unique Entity ID*: DEZLKFLD2F63
MOVERS Supplier ID: 1001911
MOVERS Address Name: City Hall

SAM/CCR CAGE Code:

5LVZ4 09/21/2025
Valid Until Date

Mailing Address*:

PO Box 110
1922 Main Street

Higginsville Missouri 64037-0110
City State/Province Postal Code/Zip + 4

County*:

Lafayette

Congressional District*:

05
Hold "CTRL" to add additional districts

Phone*:

(660) 584-2104 Ext.
###-###-####

Fax:

(660) 584-3392
###-###-####

Contact Information

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Authorized Official

The correct Authorized Official must be the signatory on this grant for the application to be eligible for funding, please see list below.

The Authorized Official is the individual that has the ability to legally bind the applicant agency in a contract (e.g. Presiding Commissioner, Mayor, City Administrator, University President, State Department Director).

- ☐ If the applicant agency is a city, the Mayor or City Administrator shall be the Authorized Official. (The Police Chief is NOT the Authorized Official)
- ☐ If the applicant agency is a county, the Presiding County Commissioner or County Executive shall be the Authorized Official. (The Sheriff is not the Authorized Official)
- ☐ If the applicant agency is a college/university, the University President (or Campus Chancellor, if applicable) shall be the Authorized Official.

If you are unable to determine the correct Authorized Official for your agency please contact our office at (573)751-5997; (573) 522-4094; (573) 526-9014 or (573)522-3455

Name*:

Mrs Jeanette Dobson
Title First Name Last Name

Job Title*:

City Administrator

Agency*:

City of Higginsville

Mailing Address*:

1922 Main Street

Enter a PO Box where applicable. If a PO Box is not applicable, enter the physical street address.

Street Address 1:

If a PO Box is entered on the Mailing Address line, enter the physical street address here. Do not repeat the mailing address!

Street Address 2:

City/State/Zip*:

Higginsville Missouri 64037
City State Zip

Email*:

caoffice@ctcis.com

Phone*:

(660) 584-2106 Ext.

Fax:

Project Director

The Project Director is the individual that will have direct oversight of the proposed project. The Project Director, therefore, must be the Chief, Sheriff, Director, etc. of the law enforcement agency.

Name*:

Mr Tom Long
Title First Name Last Name

Job Title*: Chief of Police
Agency*: Higginsville Police Department
Mailing Address*: 1922 Main Street
Enter a PO Box where applicable. If a PO Box is not applicable, enter the physical street address.

Street Address 1:

If a PO Box is entered on the Mailing Address line, enter the physical street address here. Do not repeat the mailing address!

Street Address 2:

City/State/Zip*: Higginsville Missouri 64037
City State Zip

Email*: poldephg@ctcis.net

Phone*: (660) 584-2104 Ext.

Fax:

Fiscal Officer

The Fiscal Officer is the individual who has responsibility for accounting and audit issues at the applicant agency level (e.g. City Clerk, County Treasurer, Director of Finance). The project Director and Fiscal Officer cannot be the same person.

Name*: Mrs Sheri Tieman
Title First Name Last Name

Job Title*: City Clerk

Agency*: City of Higginsville

Mailing Address*: 1922 Main Street
Enter a PO Box where applicable. If a PO Box is not applicable, enter the physical street address.

Street Address 1:

If a PO Box is entered on the Mailing Address line, enter the physical street address here. Do not repeat the mailing address!

Street Address 2:

City/State/Zip*: Higginsville Missouri 64037
City State Zip

Email*: caoffice@ctcis.com

Phone*: (660) 584-2106 Ext.

Fax:

Officer in Charge

The Officer in Charge is the individual that will act as the supervisor or commander of the proposed project, if different than the Project Director listed above. This individual will be the primary contact for day-to-day questions regarding the grant project and operations.

Name: Miss Melanie Shockley
Title First Name Last Name

Job Title: Emergency Manager

Agency: Higginsville Police Department

Mailing Address: 1922 Main Street
Enter a PO Box where applicable. If a PO Box is not applicable, enter the physical street address.

Street Address 1:

If a PO Box is entered on the Mailing Address line, enter the physical street address here. Do not repeat the mailing address!

Street Address 2:

City/State/Zip: Higginsville Missouri 64037
City State Zip

Email: mshockley474@gmail.com

Phone: (660) 584-2104 Ext.

Fax:

Project Form

Project Description

1. Describe your Project*:

The goal of this project is to install a license plate reader (LPR) at the I-70 and Highway 13 junction in order to deter criminal activity in Higginsville.

1.a Explain how this project will assist the reduction and/or prevention of local violent crime*:

The purchase of the LPR will allow our officers and dispatchers to be notified when a wanted subject or stolen vehicle enters our jurisdiction. This will allow officers to proactively seek these subjects and apprehend them, preventing criminal activity from occurring in Higginsville.

1.b Describe the local violent crime challenges in your area*:

Higginsville Police Department's jurisdiction includes the junction of I-70 and 13 Highway. This location houses two convenience stores that bring people off the interstate from all over the nation. Traffic from I-70 has been shown to increase drug activity, violent offenders, human trafficking, and traffic accidents in our jurisdiction.

1.c Describe how the proposed project will help provide solutions to the listed challenges*:

Placing an LPR at the I-70 junction will allow officers to be notified in an efficient manner when a wanted subject or vehicle enters our jurisdiction. This notification will allow officers to be proactive in seeking out potential criminal activity and apprehending the subjects if necessary. This will decrease criminal activity in the City of Higginsville.

2. What items are you requesting to purchase?*

We are requesting to purchase one License Plate Reader camera to install at the I-70 and 13 Highway junction.

3. How will the requested items support this project in reducing and/or preventing violent crime?*

Installing an LPR will allow our officers and dispatchers to be notified when a wanted subject or stolen vehicle enters our jurisdiction. Receiving these notifications will increase officer efficiency when it comes to tracking these subjects down and will allow officers to take appropriate action to prevent violet crimes from occurring in the City of Higginsville.

4. Will this project expand youth engagement activities with law enforcement?*

No

5. Will this project expand church and or non-profit engagement activities with law enforcement?*

No

6. Provide examples of how the lack of the requested items has effected the department, officers, or citizens in your area*:

At this time, notifications of wanted subjects and stolen vehicles are received in dispatch through the Missouri Uniform Law Enforcement System and are then passed along to the appropriate law enforcement agency. It takes dispatch time to read through the message and decipher the direction of travel and where the subject could potentially go. There is also the risk that the originating agency could neglect to send the message to our jurisdiction, causing our officers to be unaware of the details of the crime that occurred and less likely to apprehend the subject in our jurisdiction to prevent further criminal activity.

7. Are the requested items replacing items the agency currently has?*

No

8. Do the requested items require specialized training?*

Yes

8.a. If yes, please explain how/when training has/will be provided:

Officers and dispatchers will be trained in using the program and setting up proper notifications when the LPR is installed. They will have constant access to the installing company for any technical issues that may arise.

9. How often will the requested items be used?*: Daily

10. The total number of officers in your department*: 11

11. The total number of police vehicles utilized by the department*: 11

Section 43.505 RSMo ? National Incident-Based Reporting System (NIBRS) formerly Uniform Crime reporting (UCR) Pursuant to Section RSMo 43.505 Uniform Crime Reporting system ? duties of department ? violations, penalty: Each law enforcement agency is required to submit crime incident reports to the department of public safety on forms or in the format prescribed by the department and submit any other crime incident information which may be required by the department of public safety.

12. Is the applicant agency currently participating in Missouri Incident-Based Reporting System (MIBRS)? *: Yes

Section 590.700 RSMo ? Written Policy on Recording of Custodial Interrogations: Pursuant to 590.700.4 RSMo, each law enforcement agency shall adopt a written policy to record custodial interrogations of persons suspected of committing or attempting to commit felony crimes as outlined in subsection 2 of this section.

13. Is your agency in compliance with Section 590.700.4 RSMo - Written Policy on Recording of Custodial Interrogations?*: Yes

Section 43.544 RSMo ? Written Policy on Forwarding Intoxication-Related Traffic Offenses Pursuant to 43.544.1 RSMo, each law enforcement agency shall adopt a policy requiring arrest information for all intoxication-related traffic offenses be forwarded to the central repository as required by Section 43.503 RSMo and shall certify adoption of such policy when applying for any grants administered by the department of public safety.

14. Is your agency in compliance with, Section 43.544 RSMo ? Written Policy on Forwarding Intoxication-Related Traffic Offenses?*: Yes

Section 590.1265 RSMo ? Police Use of Force Transparency Act of 2021 Use of force incidents reporting standards and procedures, publication of report data, analysis report. Each law enforcement agency shall certify compliance with this statute when accepting any grants administered by the department of public safety.

15. Is your agency in compliance with, Section 590.1265 RSMo ? Police Use of Force Transparency Act of 2021?*: Yes

Audit Requirements

16. Has the applicant agency exceeded the State expenditure threshold of \$375,000 in state funds during agency's last fiscal year?*: No

17. Date last audit completed*: 12/18/2020

18. By checking this box the applicant agency understands they are required to upload a copy of the agencies most recent completed audit (or annual financial statement) in the Named Attachments section of this application*: Yes

Certified Assurances

To the best of my knowledge and belief, all data in this application is true and correct, the document has been duly authorized by the governing body of the applicant, and the applicant attests to and/or will comply with the following Certified Assurances if the assistance is awarded:

SFY 2022 LVCP Certified Assurances

I am aware that failure to comply with any of the Certified Assurances could result in funds being withheld until such time that I, the recipient, take appropriate action to rectify the incident(s) of non-compliance. Where the Authorized Official is unable to certify to any of the statements in the Certified Assurances, he or she shall provide an

explanation below and may attach documentation under the 'Named Attachments' form where needed.

I (The Authorized Official) have read and agree to the terms and conditions of the grant.*: Yes

*****The correct Authorized Official must be the signatory on this grant for the application to be eligible for funding, please see list below.*****

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Authorized Official: the individual who has the authority to legally bind the applicant into a contract.

If the applicant agency is a city, the Mayor or City Administrator shall be the Authorized Official. (The Police Chief is NOT the Authorized Official)

If the applicant agency is a county, the Presiding County Commissioner or County Executive shall be the Authorized Official. (The Sheriff is not the Authorized Official)

If the applicant agency is a college/university, the College/University President (or Campus Chancellor, if applicable) shall be the Authorized Official.

****If you are unable to determine the correct Authorized Official for your agency please contact our office at (573)751-5997, (573)522-4094, or (573)522-3455****

Authorized Official Name*: Jeanette Dobson

Authorized Official Job Title*: City Administrator

Date*: 01/19/2022

Interoperable Communications Form

Radio Interoperability

1. Are you applying for interoperable communications equipment?:

No

Refer to the "Radio Interoperability Guidelines" available at <https://dps.mo.gov/dir/programs/ohs/documents/radio-interoperability-guidelines.pdf> for reference to a list of mobile radios certified as meeting the P25 standard by the Missouri Department of Public Safety, and certified to operate on the MOSWIN by the manufacturer.

Budget

Budget

Item Name	Budget Category	Line Item Description	Quantity	Unit Cost	Total Cost
License Plate Reader	Equipment	Implementation Fee	1.00	\$750.00	\$750.00
Falcon LPR	Equipment	License Plate Reader	1.00	\$5,000.00	\$5,000.00
					\$5,750.00
					\$5,750.00

Budget Justification

In the Budget Justification, provide the following information for each budget line item listed above:

What is the item?

How will the item be used?

Who will use the item?

Is the item a replacement to current equipment, in addition to current equipment, or something the agency doesn't currently have?

What cost basis was used to determine the amount requested?(i.e. quote)

Budget Justification*:

The Flock Falcon LPR (License Plate Reader) will be used by the Higginsville Police Department and Higginsville Central Dispatch to alert officers of people entering our jurisdiction who may be wanted for a violent crime or in possession of a stolen vehicle. This will be a new item for the agency. Pricing was determined by a quote received from Flock Safety, Inc. The quote for the camera and implementation fee was provided by an employee of Flock Safety, Inc and has been included in the attachment section of this application.

Total Budget

Budget Total: \$5,750.00

Application Attachments

Named Attachment	Required Description	File Name	Type	Size	Upload Date
Required Attachments					
Audit (If no audit is available the most recent financial statement):	✓ 2020 Audit City of Higginsville	9-30-2020 City of Higg Audit.pdf	pdf	871 KB	01/12/2022 12:03 PM
Federal Fund Schedule (If not included in the audit):					
Other Attachments					
Quote:	Flock Group Inc. Quote	MO - Higginsville PD - Law Enforcement Agreement (1) (1).docx	docx	2 MB	01/19/2022 09:16 AM
Other:					
Other:					
Other:					

flock safety

Flock Group, Inc.
866-901-1781
www.flocksafety.com

INVOICE

Invoice Number: CINV-008616
Date Issued: 05/27/2022
Date Due: 06/27/2022
PO#:

Bill To:
MO - Higginsville PD
PO Box 110
Higginsville, Missouri 64037

ITEMS	BEGIN DATE	END DATE	QTY	UNIT PRICE	AMOUNT
Standard Implementation			1	\$750.00	\$750.00
Flock Falcon Camera	2022	2024	2	\$2,500.00	\$5,000.00
SUBTOTAL					\$5,750.00
Sales Tax					\$0.00
TOTAL					\$5,750.00

Payment Remittance Information

Click here to pay by credit card or ACH/Wire Transfer

Pay by Check:

Payable to: Flock Safety
Memo: 8AD3F42C-0001
Mail to: PO Box 207576
Dallas, TX 75320-7576

If paying by check, please include a printed copy of the invoice PDF with check payment. Payment should be sent via USPS.

Items were delivered in working condition on
5/27/22

404-4670

Tom Long

Received	
Method	
Approved	
Department	TLC
Special Use	
Notes	

Grant will pay back

Questions about your service or installation? Contact support@flocksafety.com

Questions about your invoice? Contact billing@flocksafety.com

Online payment link:

https://invoice.stripe.com/i/acct_19rTiCEaLZZMOidT/live_YWNjdF8xOXJUAUNFYUxaWk1PaWRULF9McGxmSEpTb0FRWExvd1BXUERwSTFGTDdySkTBSFpFLDQ1MTYzNDE4O200d5GZhPaW?s=ap

Account Number		Name:DISPATCH POLICE RECEIVABLE		Fiscal: 2021-2022					
Date	Tran	Reference	Description	Amount	Vendor	Invoice	PO	Encumbrance	R..
05/30/2022	A17678	CHK: 03407	FLOCK FALCON CAMERA	5,750.00	0651	MAY 2022		0.00	1
06/30/2022	B25190	M 06302	void ck #34073	5,750.00CR				0.00	2
06/30/2022	B25191	M 06302	transfer to WL Sp fund	5,750.00				0.00	3
07/07/2022	C25185	RCPT 00554	FLOCK FALCON CAMERA R	5,750.00CR				0.00	4
4 records				0.00					

DATE	I.D.	PO #	DESCRIPTION	AMOUNT
5/30/22	MAY 2022		FLOCK FALCON CAMERA	5,750.00

FLOCK GROUP INC
VEND: 0651
BANK: U

STUB TOTAL 5,750.00

CHECK TOTAL 5,750.00

PLEASE DETACH STUB BEFORE DEPOSITING

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER

CITY OF HIGGINSVILLE
ENTERPRISE FUND
P.O. BOX 110
HIGGINSVILLE, MISSOURI 64037

EQUITY BANK
888.335.5041 • www.equitybank.com
83-535/1011

34073

	IDENTIFICATION NUMBER	DATE	CHECK NUMBER	NET AMOUNT
BANK: U	VEND: 0651	06/09/22	34073	5,750.00

----- FIVE THOUSAND SEVEN HUNDRED FIFTY & 00/100 DOLLARS -----

PAY
TO THE
ORDER
OF

FLOCK GROUP INC
FLOCK SAFETY
1170 HOWELL MILL RD SUITE 210
ATLANTA, GA 30318

VOID IN 60 DAYS

Donald Kuehans

NP

Pamela A. Ven

NP

Shei Tieman

AUTHORIZED SIGNATURE

NP



7701 E. Kellogg, Suite 100 • Wichita, KS 67207
(888) 733-5041 • www.equitybank.com

Account Number	Statement Date	Page
[REDACTED]	06/01/22 to 06/30/22	6 of 6

WATER & LIGHT SPECIAL FUND CITY OF HIGHLANDVILLE		5833
DATE <u>5/21/22</u>		5833
PAY TO THE ORDER OF <u>Flock Group Inc</u>	\$ <u>5750.00</u>	
<u>Five Thousand Seven Hundred Fifty</u> 00/100 DOLLARS		
EQUITY BANK		
FOR Flock Falcon Camera <u>2570</u> <u>Vanita Allen</u>		

06/22/2022 5833 \$5,750.00

Emilee Mahlum

From: State of Missouri <financial@oa.mo.gov>
Sent: Thursday, June 23, 2022 10:01 AM
To: apclerk@ctcis.net
Subject: State of Missouri Payment processed

MUNICIPAL UTILITIES
PAID 01-3990

JUL 01 2022

Flock Falcon Camera
Reimb.

HIGGINSVILLE, MISSOURI

This is an automated message generated by the State of Missouri Vendor Payment website. Please do not respond to this message.

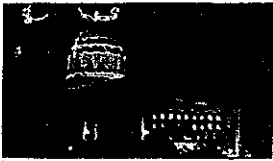
The following was processed on 06/23/22. (AD = Paper Check, EF = Electronic Fund Transfer)

Check Number	Paid Amount	Address
EF [REDACTED]	\$5750.00	1922 MAIN ST, HIGGINSVILLE, MO 64037 - <u>General</u>

If you are enrolled to receive electronic fund transfers, it is your responsibility to verify with your financial institution that these funds have been credited to your account and are available for use prior to the disbursement or withdrawal of such funds. The State is not liable for any overdraft charges incurred due to failure on your behalf to confirm with your financial institution that these funds have been credited to your account.

Payment detail and contact information can be found on the State of Missouri Vendor Services Portal at <https://www.vendorservices.mo.gov/vendorservices/Portal/Default.aspx>

If you do not want to receive payment notifications, please log into the web site, click on 'Update User Information', and deactivate the email option.



State of Missouri Vendor Payment Services

[Vendor Services Portal](#) | [Invoice Number Search](#) | [Check/EFT Search](#) | [Dollar Amount Search](#) | [Date/Location Search](#) |

[Logout](#) | [Back](#)

[Site Information](#)

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[FAQ](#)

[Email Notification
Signup](#)

[Update Email
Information](#)

Payments:

Sort the information by clicking on the column headers. Click on a Check/EFT Number to see payment detail. Payment Amount may not equal Check/EFT Amount as a result of monies intercepted by the State of Missouri for back taxes, levies, garnishments, administrative fees or discounts.

Check/EFT Date	Check/EFT Number	Invoice Number	Payment Amount	Check/EFT Amount
20220623	EF [REDACTED]		\$5,750.00	\$5,750.00

1 record(s) found

[Print Payments Displayed](#) [Export Data to Excel](#) [Export Data to Text File](#)