

**VERMONT DEPARTMENT OF CORRECTIONS
AGREEMENT FOR COMMUNITY SERVICE WORK**

This Agreement, by and between:
The Town of Charlotte (**The Client**)

 x **Municipal** agency and the Vermont Department of Corrections

Conditions of the Agreement are as follows:

1. The **Scope of Work** agreed to generally includes:
 - **Park improvements**
 - **Park maintenance**
 - **Assisting with trail maintenance**
 - **Assisting with invasive plant management**
 - **Tasks agreed upon between the Department of Corrections staff and the Town of Charlotte**

2. **Client** to provide detailed clarification and direction of scope as needed. Client contact person is:

Jenny Cole
Telephone number: 802-425-3105
Email: colelogcabin@gmavt.net

3. The **Term** of the agreement is from: **January 1, 2014 through December 31, 2014**

4. **Supervision** of service crew will be by the Vermont Department of Corrections.

5. **Transportation** of crew will be provided by the Vermont Department of Corrections.

Labor and Equipment to be provided by the **Vermont Department of Corrections** includes:

- Portable toilet and pop up tent (when facilities are not available on site) and disposal of waste.
- Work crew of 5-6 women
- Clothing appropriate for outdoor weather (work shoes/boots, long pants, work gloves)
- Safety equipment to include; protective eyewear, earplugs

Other **Materials/Equipment** provided by **Client** includes:

- Bio-Gel bags for portable toilet
- Any and all applicable permits
- All landscaping materials
- Any needed tools to complete tasks
- Other items to ensure the safety of workers doing specific tasks, such as nitrile gloves, dust masks, respirators"

8. **Fee** for work service to be invoiced monthly to client by Vermont Offender Work Program on the basis of:

\$60.00 Flat Fee Per ½ day

The maximum number of offenders to be billed per day under this agreement is 5-6 as required and agreed.

Terms are net 30 days from date of invoice. Invoices to be submitted to Client at:

Address:

Town of Charlotte, Charlotte Park and Wildlife Refuge Oversight Committee
PO Box 119
Charlotte, Vermont 05445
Attention: Jenny Cole

This Agreement cancelable by either party with 30 days written notice

Agreed:

Client by: _____ **Date:** MONTH ____ 2014

Department of Corrections by: _____ **Date:** MONTH ____ 2014

Jennifer Sprafke Assistant Superintendent
Chittenden Regional Correctional Facility
7 Farrell Street
South Burlington, Vermont 05403
Phone: 802-859-3204
Fax: 802-863-7473
E-Mail: Jennifer.sprafke@state.vt.us



State of Vermont
Agency of Human Services
Community & Law Enforcement Notification Form

To the Town of: Charlotte, Vermont
From: Jennifer Sprafke – Assistant Superintendent CRCF
Subject: Facility Work Crews
Date: 01/01/2014

This is to inform you that a Department of Corrections, supervised Facility Work Crew will be working in your community. This is comprised of up to 5-6 minimum custody inmates. These inmates are within 30 months of their release to the community.

This work is being performed for the following organization Charlotte wildlife Refuge Oversight Committee at the following location: **Charlotte wildlife park, Greenbush Road, Charlotte VT
Thorpe Barn Route 7 Charlotte VT**

**The following is the anticipated start and completion dates:
January 2014 to December 2014**

Typical work hours away from the facility, including departure and return, will typically be from 7:30 a.m. – 2:30 p.m.; Monday through Friday, excluding State observed holidays.

We are interested in providing this service to your community and ensuring that, Community and Law Enforcement officials are well informed about our presence.

If you have any questions or concerns regarding the Facility Work Crew program, please do not hesitate to contact me during regular business hours Monday thru Friday at 802- 859-3204.

