STATE OF OREGON 2022-2024

Incident Resource Agreement - SECURITY SERVICES

Part B - Additional Terms and Conditions Resource Information & Rate Sheet

General Description of Duties

May include, but not be limited to, security patrol of Incident Command Post, Fire Camp areas and outlying access roads and equipment staging areas. **Services** include:

- Foot patrols, vehicle patrols, and access control to restricted areas
- Screening individuals for authorized entry into Incident facilities and areas
- Response to issues of trespass, disorder, etc.
- · Watch for and report violations of safety rules: illegal drugs/alcohol, dangerous weapons, suspected criminal behavior
- Document security events via documentation log, and photo or video formats if available
- Report for daily briefing with Logistics Coordinator (LSC) or their representative
- Cordially answer questions from the public or direct them to the correct source
- Other duties as assigned

Security personnel shall only inform persons of applicable laws or restrictions. They may not arrest or use physical force to detain persons committing violations except to prevent imminent loss of life or serious bodily injury. They shall report violations to security personnel with law enforcement authority to take appropriate action.

Services Do Not Include

- Carrying or use of firearms or any other defensive equipment such as pepper spray, handcuffs, batons, etc.
- Restraining, detaining or apprehending individuals
- Confiscation of illegal or prohibited substances
- Patrolling Adults in Custody camp area unless specifically requested

Security Manager Specific Duties

The Security Manager is responsible for organizing and supervising the Security unit, as well as for providing safeguards needed to protect personnel and facilities from loss or damage. The Security Manager may supervise multiple Security Specialists or contractors. This position reports to the Logistics Section Chief (LSC) and works in the Logistics Section functional area.

Rates of Payments

• Daily Rate payment shall be made based on a minimum of eight (8) hours of On-Shift work time per day, between 0001 and 2400 hrs. On-Shift work time under eight (8) hours shall be paid at half (1/2) the agreed upon daily rate.

Additional Rate Provisions for Security Specialists

- **Double-Shift Rate** option is staffed with two personnel for a 24-hour period, from 0001 to 2400 hrs. (two 12-hour shifts with separate staff for day shift and night shift) and must be documented on **Resource Order.**
- The **Double-Shift Rate** is paid 165% of the agreed upon **Daily Rate**.

Required Certifications:

- Unarmed Private Security Specialist shall hold a current <u>DPSST Private Security Unarmed Professional Certification.</u>
- Unarmed Private Security Manager shall hold a current <u>DPSST Private Security Supervisory Manager Certification.</u>

References

- Qualifications per OAR 181A.855
- <u>Duties, Exemptions and Prohibited Acts OAR 259-060-0015</u>
- DPSST Private Security Program

ecurity personnel are e n Part A, Pages 6-7 of t	exempt from PPE requiren his Agreement.	nents as listed in Resou	r ce Standards, Personal P	rotective Equipment (PPE

* For Office Use Only *

Resource Information & Rate Sheet SECURITY SERVICES

Resource Provider / Company Name	Company Owne	er(s)		
Mailing / Payment Address	City	State	Zip Code	
Email Address	Primary Cont	act	Position	
Primary Phone Number Secondar	ry Phone Other			
Is the mailing address and the Poi	nt of Hire the same? Ye	es No	If no, then complete:	
Physical Address	City	State	Zip Code	
Are you willing to be dispatched of	out of your local geograph	ic area? Please ch	eck one: Yes No	
**Please indicate the distance (in	,			
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OPTION 1:	OPTION 2:		OPTION 3:	
Unarmed Private Security Specialist	Unarmed Private Security	Specialist Unarr	, ,	
Chairmea : made security specialist	with Vehicle		with Vehicle	
*List Quantity of Individuals with Law			uantity of Individuals with Law	
Enforcement (LE) Experience:		Enforce	ement (LE) Experience:	
Quantity: Daily Rate:	Quantity: Daily Rate	:: Quanti	Quantity: Daily Rate:	
Double Shift Option	Double :	Shift Option		
COMMENTS:	I	I		
AUTHORIZATION: The undersigned a		•		
Provider, the above information is true, a registered with OregonBuys. The undersi				
falsification, omission, or concealment ma	= = = = = = = = = = = = = = = = = = = =		, , ,	
Authorized Company Signature	Printed Name AND Tit	ile	Date	
State Representative Signature	State Printed Name A	ND fitle	Date	