

**AGENDA
CRAVEN COUNTY BOARD OF COMMISSIONERS
REGULAR SESSION
MONDAY, OCTOBER 21, 2013
8:30 A.M.**

CALL TO ORDER

ROLL CALL

PLEDGE OF ALLEGIANCE

APPROVE AGENDA

APPROVE MINUTES OF OCTOBER 7, 2013 REGULAR SESSION

1. CARTS PUBLIC HEARING

DEPARTMENTAL MATTERS

2. ELECTIONS: BUDGET AMENDMENT – Melonie Wray, Elections Director

3. TAX: RELEASES & REFUNDS – Ronnie Antry, Tax Administrator

4. EMERGENCY SERVICES: FT. BARNWELL FRANCHISE MODIFICATION REQUEST – Stanley Kite, EMS Director

5. HEALTH: BUDGET AMENDMENT – Scott Harrelson, Health Director

6. DSS: UPDATE ON GOVERNMENT SHUTDOWN – Kent Flowers, Social Services Director

7. PLANNING: FY 12 CDBG – SS HOUSING CONTRACTOR AWARDS – Chip Bartlett, Holland Consulting Planners

8. FACILITIES: EOC PROJECT UPDATE – Gene Hodges, Assistant County Manager, Facilities/Operations

9. APPOINTMENTS

A. Pending

B. Upcoming

10. COUNTY ATTORNEY'S REPORT: Jim Hicks

11. COUNTY MANAGER'S REPORT: Jack Veit

12. COMMISSIONERS' REPORTS

RECESS TO WORK SESSION

Agenda Date: October 21, 2013

Presenter: _____

Agenda Item No. 1

Board Action Required: Yes

CARTS PUBLIC HEARING

A public hearing was advertised to receive public comment on the 5311 Community Transportation Program (CTP) application. (See Attachment #1)

Board Action: Receive public comment and consider approval of grant application.

Agenda Date: October 21, 2013

Presenter: Melonie Wray

Agenda Item No. 2

Board Action Required: Yes

ELECTIONS: BUDGET AMENDMENT

Attachment #2 is a budget amendment requested by Elections to cover required mailing to voters relative to the new Commissioners' districts. All affected voters need to be mailed voter cards before the filing for Commissioners' seats in February 2014.

Board Action: A roll call vote is needed to approve budget amendment.

Agenda Date: October 21, 2013

Presenter: Ronnie Antry

Agenda Item No. 3

Board Action Required: Yes

TAX: RELEASES AND REFUNDS

Craven County Tax Administrator, Ronnie Antry, will present the routine requests for tax releases and refunds contained in Attachment #3 for the Board's approval.

Board Action: A roll call vote is needed to approve tax releases and refunds.

Agenda Date: October 21, 2013

Presenter: Stanley Kite

Agenda Item No. 4

Board Action Required: Yes

**EMERGENCY SERVICES: FT. BARNWELL FRANCHISE MODIFICATION
REQUEST**

Attachment #4 is an application from Ft. Barnwell to operate at the EMT I Level of care. They would like to start providing EMT I Level of care beginning January 1, 2014. This would bring the last Basic Life Support Provider to an Advanced Life Support Provider, and would necessitate modifying the EMS System Plan. The EMS Advisory Council and Medical Director have already endorsed the request. Minutes of the EMS Advisory Council are also included in the attachment.

Board Action: Consider approval of request.

Agenda Date: October 21, 2013

Presenter: Scott Harrelson

Agenda Item No. 5

Board Action Required: Yes

HEALTH: BUDGET AMENDMENT

Health Director, Scott Harrelson, will request a budget amendment for Craven County's 50% share of the cost of utilizing Strategic Emergency Management (SEM) in partnership with Wayne County. SEM will serve as Bioterrorism Coordinator for the two counties. The budget amendment can be seen in Attachment #5 along with a copy of the agreement.

Board Action: A roll call vote is needed to approve budget amendment.

Agenda Date: October 21, 2013

Presenter: Kent Flowers

Agenda Item No. 6

Board Action Required: No

DSS UPDATE ON GOVERNMENT SHUTDOWN

DSS Director, Kent Flowers, will update the Board on the status of the department's programs in the wake of the federal government shutdown.

Board Action: Receive information

Agenda Date: October 21, 2013

Presenter: Chip Bartlett

Agenda Item No. 7

Board Action Required: Yes

PLANNING: FY12 CDBG – SS HOUSING CONTRACTOR AWARDS

A contractor's meeting related to the County's current CDBG housing project was held on October 3rd. The bid package that was sent out at that time included all three (3) homes that are proposed to receive improvements under the grant application.

The actual bid opening for this project will be held on October 17, 2013.

Contract bid results and award recommendations for this work will be presented by the Program Administrator, Chip Bartlett of Holland Consulting Planners during the Commissioner's Meeting.

Board Action: Vote to approve contractor awards.

Agenda Date: October 21, 2013

Presenter: Gene Hodges

Agenda Item No. 8

Board Action Required: No

FACILITIES: EOC PROJECT UPDATE

The construction of the EOC-911 Center is progressing. Assistant County Manager Gene Hodges will provide a presentation to the Board regarding the status and timeline for completion of this project.

Board Action: Receive the information provided.

Agenda Date: October 21, 2013

Presenter: _____

Agenda Item No. 9

APPOINTMENTS

- A. PENDING
- B. UPCOMING

Board Action: If the intent is to make appointments effective immediately, a motion to waive the one meeting waiting requirement would be in order.

A. PENDING APPOINTMENT(S):

FIREMEN'S RELIEF FUND BOARD OF TRUSTEES

AUTHORIZATION: NCGS 58-84-30

MISSION/FUNCTION: To safeguard firefighters in active service and dependent members of their families from financial loss resulting from sickness, injury or loss of life suffered while in performance of his or her duties as a firefighter.

NUMBER OF MEMBERS:

5 per department

TYPE:

2 appointed by Board of Commissioners; 2 appointed by the department; 1 appointed by Commissioner of Insurance

QUALIFICATIONS (Special Skills, Professional Classifications, Affiliations, Limitations, etc.):

LENGTH OF TERMS: 2 Years

MEETING SCHEDULE: As necessary

COMPENSATION: No X Yes Specify: _____

Term(s) ending: Ralph Roeland - #6 (Initial Appointment 1999)

No applications on file

NURSING HOME ADVISORY COMMITTEE

AUTHORIZATION: N.C.G.S.131E-115

MISSION/FUNCTION: Work to maintain the intent of the Nursing Home Patients Bill of Rights within the licensed homes in the County; to promote community involvement and cooperation with domiciliary homes to ensure quality care for the elderly.

NUMBER OF MEMBERS:
7-12

TYPE:
Dictated by the number of homes in the county; homes have right to recommend 25% of appointees

QUALIFICATIONS (Special Skills, Professional Classifications, Affiliations, Limitations, etc.):

Cannot be employed by or have a relative in an adult care home.

LENGTH OF TERMS: 3 Years

MEETING SCHEDULE: Quarterly, beginning in March, third Wednesday, 10:00 a.m.

COMPENSATION: No Yes

Term(s) Ending: Rachelle Martin (Initial appointment 2010)
(No longer serving and needs to be replaced.)

No applications on file.

JUVENILE CRIME PREVENTION COUNCIL (JCPC)

AUTHORIZATION: N.C.G.S. 147-33.66

MISSION/FUNCTION: To assess the needs of juveniles in the community, evaluate the adequacy of resources available and develop or propose ways to address unmet needs.

NUMBER OF MEMBERS:
25 (maximum)

TYPE:
From among the following categories, or in some instances, the designees of the specified position: school superintendent, chief of police, sheriff, district attorney, chief court counselor, area mental health director, social services director, county manager, substance abuse professional, member of faith community, county commissioner, person under the age of 21, juvenile defense attorney, chief district court judge, member of the business community, local health director, non-profit representative, parks and recreation representative, up to seven additional members appointed by the Board of Commissioners

QUALIFICATIONS (Special Skills, Professional Classifications, Affiliations, Limitations, etc.):

LENGTH OF TERMS: 2 Years

MEETING SCHEDULE: 2nd Monday of the month 12:30 p.m.

COMPENSATION: No Yes Specify: _____

Terms ending: Lillie Hayes (Deceased)
Carol Mattocks (initial appointment 2001)
Alvin Burney (Deceased)

No applications on file

JURY COMMISSION

AUTHORIZATION: NCGS Chapter 9-1

MISSION/FUNCTION: Selects list of suitable citizens from among those eligible to serve as jurors for a term of court

NUMBER OF MEMBERS:

1
1
1

TYPE:

(Appointed by County Commissioners)
(Appointed by Sr. Resident Superior Court Judge)
(Appointed by Clerk of Superior Court)

QUALIFICATIONS (Special Skills, Professional Classifications, Affiliations, Limitations, etc.):

Must be qualified voter of Craven County

LENGTH OF TERMS: 2 Years

MEETING SCHEDULE: _____

COMPENSATION: No Yes Specify: _____

Term(s) ending: George Griffin (initial appointment 1999)

Application(s) on file: George Griffin (Attachment # 11.B.)

*** Clerk of Court, Terri Sharp, has indicated that the appointment of Jury Commissioner is time sensitive. The Commissioners typically meet in October to begin selecting eligible citizens to serve. December 1 is the deadline for submission of the report to the state, with the Thanksgiving holidays intervening.**

B. UPCOMING APPOINTMENTS

November – None

December

Health

David Baxter, Optometrist (initial appointment 2011)
Si Seymour (initial appointment 2011)
David Stevick, Engineer (initial appointment 2007)
Robert Whitley, Dentist (initial appointment 2004)

Firemen's Relief Fund

Daniel Murphy, West New Bern (initial appointment 2011)

JCPC

Joel Grimm (initial appointment 1996)
Toussaint Summers, N.B. Police (initial appointment 2011)

Havelock Library

Lossie Carter (initial appointment 1996)
Joanna Wishon (initial appointment 2008)
Jennettia Drake (initial appointment 2011)

Agenda Date: October 21, 2013

Presenter: Jim Hicks

Agenda Item No. 10

Board Action Required: Yes

COUNTY ATTORNEY'S REPORT

A. FINAL APPROVAL – OFFER TO PURCHASE REAL PROPERTY
(Parcel No. 3-035-124)

The County previously received a tentative offer to acquire this property from Mr. Mitchell for the sum of \$3,000. The Board accepted the tentative offer, and it was advertised for upset bids. No upset bids were received. The proposed deed is attached hereto.

Board Action: It is recommended that the Board approve the final sale to Mr. Mitchell for the sum of \$3,000.

B. FINAL APPROVAL- OFFER TO PURCHASE REAL PROPERTY
(Parcel No. 8-015-116)

The County and City of New Bern previously received a tentative offer to acquire this property from Mr. Cantlow for the sum of \$2,000. The Board accepted the tentative offer, and it was advertised for upset bids. No upset bids were received. The proposed deed is attached hereto.

Board Action: It is recommended that the Board approve the final sale to Mr. Cantlow for the sum of \$2,000.

C. FINAL APPROVAL- OFFER TO PURCHASE REAL PROPERTY
(Parcel No. 8-015-117)

The County and City of New Bern previously received a tentative offer to acquire this property from Mr. and Ms. Simmons for the sum of \$1,500. The Board accepted the tentative offer, and it was advertised for upset bids. No upset bids were received. The proposed deed is attached hereto.

Board Action: It is recommended that the Board approve the final sale to Mr. and Ms. Simmons for the sum of \$1,500.

D. FINAL APPROVAL – OFFER TO PURCHASE REAL PROPERTY
(Parcel No. 8-015-118)

The County and City of New Bern previously received a tentative offer to acquire this property from Mr. Grist for the sum of \$2,000. The Board accepted the tentative offer, and it was advertised for upset bids. No upset bids were received. The proposed deed is attached hereto.

Board Action: It is recommended that the Board approve the final sale to Mr. Grist for the sum of \$2,000.

Agenda Date: October 21, 2013

Presenter: Jack Veit

Agenda Item No. 11

COUNTY MANAGER'S REPORT

Agenda Date: October 21, 2013

Presenter: _____

Agenda Item No. 12

COMMISSIONERS' REPORTS



**Craven Area Rural Transit System
PUBLIC TRANSPORTATION**

Director – Terry Jordan
P.O. Box 13605 - 2822 Neuse Blvd.
New Bern, North Carolina 28561
Phone: 252-636-4917 - Fax: 252-636-4919
1-800-735-2962 TDD/TTY
Email: carts@cravencounty.com



October 17, 2013

To: Craven County Board of Commissioners
Jack Veit, Craven County Manager
Gene Hodges-Assistant County Manger
Rick Hemphill-Assistant County Manager

From: Terry A. Jordan, CARTS Director

Ref: FY 2015 Community Transportation Program (CTP) Application

Each year Craven County applies for the Community Transportation Program (CTP) grant. A Public Hearing and an adopted resolution by the Craven County Board of Commissioners are a required part of the process.

The Public Hearing meeting announcement was advertised in the New Bern Sun Journal on Sunday, October 13th, 2013 as required by the grant. The application was also posted to the Craven County web site on October 9th, 2013, and is available to the public in hard copy format at the CARTS office. The document includes: Overview of requirements, System Description, and Local Share Certification for Funding, Administrative Budget Summary, Proposed Project Administrative Expenses, Capital Budget Summary, Proposed Project Capital Expenses, Operating Budget Summary, and Proposed Project Operating Budget.

The application to NCDOT requests funding for:

Administrative-- \$338,272 with a 15% (\$50,742) local match which is generated by CARTS. This amount includes items such as administrative salaries, office rent, utilities, office supplies, marketing, vehicle insurance, safety training, contract services, etc. NCDOT/PTD placed a cap of this funding to remain the same for the previous three years..

Capital--\$178,830 with a 10% (\$17,883) local match which is generated by CARTS. This amount includes replacement of three (3) CARTS vehicles and lettering and ten (10) mobile two way radios. All requested items have met the minimum useful life as defined by NCDOT/PTD.

CARTS Public Transportation

Operating-- \$86,438 with a 50% (\$43,219) local match which is generated by CARTS. This amount includes expense for the RED AND YELLOW LOOP routes only. All other operation cost such as driver salary, vehicle maintenance, fuel, tires, etc. are paid 100% by services sold.

The total FY 2014 CTP application requests \$603,540 with required local match of \$111,842.

Once again the staff, management, and many citizens of Craven, Jones and Pamlico Counties whom utilize the services provided with this grant wish to express their appreciation for your support of the transportation services provided by Craven County through CARTS.

CREDIT MEMOS SUBJECT TO BOARD APPROVAL ON 10/21/2013

| TAXPAYER NAME | ACCT#/TICKET# | AMOUNT |
|---|----------------------|----------|
| ALLTEL COMMUNICATIONS INC #199 VALUATION ERROR - TO BE REBILLED | 0079080 2013-0000821 | 1,796.50 |
| ALLTEL COMMUNICATIONS INC #201 VALUATION ERROR- TO BE REBILLED | 0044987 2013-0000823 | 2,064.42 |
| CIT TECHNOLOGY FINANCING SERVI VALUATION ERROR - TO BE REBILLED | 0042772 2013-0010399 | 40.36 |
| CIT TECHNOLOGY FINANCING SERVI CORRECTING ERROR ON LISTING | 0042772 2013-0092321 | 53.80 |
| DAUGHERTY, SHELTON B & LILA C RECYCLE & DRAINAGE BILLED IN ERROR | 1707955 2013-0013517 | 54.90 |
| DIRECT CAPITAL CORPORATION DID NOT OWN 1/1/2013 | 0076302 2013-0014832 | 211.12 |
| DRAPAL, MARTIN J QUALIFIED FOR VETERAN EXCLUSION | 0058441 2013-0015532 | 242.35 |
| EBORN, BENJAMIN LEE DID NOT OWN BOAT 1/1/2013 | 0029617 2013-0090524 | 79.60 |
| GASKINS, FRANCES SENIOR EXCLUSION REMOVED IN ERROR | 0090049 2013-0020342 | 243.38 |
| GATES, GREGORY T DOUBLE BILLED-SEE ACCT 75480 | 0084964 2010-0019361 | 58.58 |
| GATES, GREGORY T DOUBLE BILLED-SEE ACCT 75480 | 0084964 2011-0021399 | 53.63 |
| GATES, GREGORY T DOUBLE BILLED-SEE ACCT 75480 | 0084964 2012-0021223 | 49.02 |
| GOODING, JOHNNIE R, SR & WEST DID NOT OWN 1/1/2009 | 0049082 2009-0022326 | 609.81 |
| GOODING, JOHNNIE R, SR & WEST DID NOT OWN 1/1/2010 | 0049082 2010-0020346 | 433.24 |

CREDIT MEMOS SUBJECT TO BOARD APPROVAL ON 10/21/2013

| TAXPAYER NAME | ACCT#/TICKET# | AMOUNT |
|---|----------------------|--------|
| GOODING, JOHNNIE R, SR & WEST DID NOT OWN 1/1/2011 | 0049082 2011-0022557 | 384.62 |
| GOODING, JOHNNIE R, SR & WEST DID NOT OWN 1/1/2012 | 0049082 2012-0022384 | 337.82 |
| HOLLOWAY, ROBERT NOT IN BUSINESS 1/1/2011 | 0067062 2011-0090655 | 6.30 |
| HOLLOWAY, ROBERT NOT IN BUSINESS 1/1/2012 | 0067062 2012-0090769 | 12.62 |
| HOLMES, JERRY LEE MOVED FROM CRAVEN COUNTY IN 2012 | 3486149 2013-0092218 | 170.74 |
| JOHNSTON, JONATHAN M & DEANNA DRAINAGE BILLED IN ERROR | 0091260 2013-0029283 | 5.00 |
| JONES, CLARENCE P DWELLING BURNED 7/28/12 | 0094430 2013-0090700 | 241.44 |
| LATHAM, ETHEL B FORECLOSURE-LIEN EXTINGUISHED | 4290153 2004-0030336 | 15.10 |
| LATHAM, ETHEL B FORECLOSURE-LIEN EXTINGUISHED | 4290153 2005-0031345 | 14.60 |
| LATHAM, ETHEL B FORECLOSURE-LIEN EXTINGUISHED | 4290153 2006-0031736 | 14.11 |
| LATHAM, ETHEL B FORECLOSURE-LIEN EXTINGUISHED | 4290153 2007-0032630 | 14.23 |
| LATHAM, ETHEL B FORECLOSURE-LIEN EXTINGUISHED | 4290153 2009-0033232 | 26.97 |
| LATHAM, ETHEL B FORECLOSURE-LIEN EXTINGUISHED | 4290153 2010-0030280 | 41.45 |
| LATHAM, ETHEL B FORECLOSURE-LIEN EXTINGUISHED | 4290153 2011-0033632 | 38.86 |

CREDIT MEMOS SUBJECT TO BOARD APPROVAL ON 10/21/2013

| TAXPAYER NAME | ACCT#/TICKET# | AMOUNT |
|--|----------------------|--------|
| LATHAM, ETHEL B FORECLOSURE-LIEN EXTINGUISHED | 4290153 2012-0033513 | 36.21 |
| LATHAM, ETHEL B FORECLOSURE-LIEN EXTINGUISHED | 4290153 2013-0032292 | 24.40 |
| LATHER, RONALD M BILLED IN INCORRECT SITUS-TO REBILL | 0078651 2013-0032300 | 28.96 |
| MAYBERRY, OID C PER MARINA BOAT LEFT IN 2011 | 0013815 2012-0037173 | 47.62 |
| MOBILE MINI INC CHARGED LATE FEE IN ERROR | 0074995 2013-0090854 | 5.56 |
| MOBILE MINI INC CHARGED LATE FEE IN ERROR | 0074995 2013-0090856 | .99 |
| MOBILE MINI INC CHARGED LATE FEE IN ERROR | 0074995 2013-0090857 | 1.21 |
| MOFFITT, JOHN T JR BOAT NOT TAXABLE TO CRAVEN COUNTY | 0000149 2013-0038458 | 121.85 |
| NUCO2 SUPPLY LLC LATE LISTING FEE CHARGED IN ERROR | 0080250 2013-0090963 | 1.60 |
| NUCO2 SUPPLY LLC LATE LISTING FEE CHARGED IN ERROR | 0080250 2013-0090962 | 10.18 |
| NUCO2 SUPPLY LLC LATE LISTING FEE CHARGED IN ERROR | 0080250 2013-0090961 | 7.11 |
| PATRICIA R ROBBINS LPC LPA PLL NOT IN BUSINESS 1/1/2012 | 0083549 2013-0042783 | 78.89 |
| RUSSELL, JOSEPH ADAM MILITARY EXEMPTION | 0092178 2013-0047852 | 43.30 |
| SIMONEAUX, RAMON J NOT IN BUSINESS 1/1/2013 | 6553490 2013-0091655 | 13.81 |

CREDIT MEMOS SUBJECT TO BOARD APPROVAL ON 10/21/2013

| TAXPAYER NAME | ACCT#/TICKET# | AMOUNT |
|---|----------------------|----------|
| SINCLAIR, MAYNARD LEE JR RELEASED TO ONSLOW COUNTY | 0087250 2012-0052241 | 90.24 |
| STEVENS, TINA DID NOT OWN 1/1/2012 | 0039879 2012-0054360 | 169.34 |
| WHITE, GRACE B CORRECTED VALUATION ERROR | 0027799 2013-0058972 | 145.54 |
| WOOD, BILLY J & NANCY L DWELLING VACANT SINCE 2009 | 0067490 2013-0061080 | 36.00 |
| ZAMORA, ENRIQUE DOUBLE BILLED-SEE ACCT 93137 | 0083387 2010-0058169 | 81.50 |
| ZAMORA, ENRIQUE DOUBLE BILLED-SEE ACCT 93137 | 0083387 2011-0064653 | 79.64 |
| ZAMORA, ENRIQUE DOUBLE BILLED-SEE ACCT 93137 | 0083387 2012-0064589 | 71.15 |
| | 49 -CREDIT MEMO(S) | 8,409.67 |

REFUNDS SUBJECT TO BOARD APPROVAL ON 10/21/2013

| TAXPAYER NAME | ACCT#/TICKET# | AMOUNT |
|---|----------------------|----------|
| EBORN, BENJAMIN LEE DID NOT OWN 1/1/2010 | 0029617 2010-0015442 | 27.46 |
| EBORN, BENJAMIN LEE DID NOT OWN 1/1/2011 | 0029617 2011-0017012 | 26.33 |
| EBORN, BENJAMIN LEE DID NOT OWN 1/1/2012 | 0029617 2012-0016860 | 79.04 |
| HARRIS CORPORATION - GCSD LOCATED ON BASE CHERRY POINT | 0079568 2009-0024894 | 135.76 |
| HARRIS CORPORATION - GCSD LOCATED ON BASE CHERRY POINT | 0079568 2010-0022721 | 84.64 |
| HARRIS CORPORATION - GCSD LOCATED ON BASE CHERRY POINT | 0079568 2011-0025164 | 47.81 |
| HARRIS CORPORATION - GCSD LOCATED ON BASE CHERRY POINT | 0079568 2012-0025022 | 43.37 |
| PHILLIPS, LINDA ANN DOUBLE BILLED-SEE ACCT 83727 | 0092365 2013-0043598 | 36.00 |
| SANDERSON, DELBERT JR DOUBLE BILLED-SEE ACCT 25522 | 6350240 2012-0091487 | 580.11 |
| | 9 -REFUND(S) | 1,060.52 |

Craven County



Serving the People

CRAVEN COUNTY

APPLICATION FOR FRANCHISE MODIFICATION

DATE: 08/13/13

I. APPLICANT:

- A. Name of Applicant Organization: FORT BARNWELL RESCUE SQUAD
- B. Address of Applicant Organization: 9334 NC Hwy 55 W DOVER NC 28526
- C. Name of the Owner/President or Individual responsible for operations of the organization: JOSH A. LANE
- D. Address of Owner/President: 10590 NC Hwy 55 W
DOVER, NC 28526
- E. Telephone Number: (W) (252) 560-3315 (H) () _____
- F. Type of Franchise applied for (Check appropriate)
1. Emergency Transportation
 2. Convalescent and Non-Emergency Transport
 3. First Responder
 4. Rescue (Check here and appropriate below)
 - a. Basic Rescue
 - b. Light Rescue
 - c. Medium Rescue
 - d. Heavy Rescue
 - e. Other (Specify) Advance to Intermediate Level of Care

II.

A. Listing of Ambulance or Rescue Vehicles Owned and Operated by the Applicant.

| YEAR | CURRENT MILEAGE | MAKE | MODEL/TYPE | STATE CERTIFICATION | | SPECIFICATION KKK | | PURPOSE | | | STATUS | |
|------|-----------------|------|-----------------|---------------------|----|-------------------|----|---------|-----|-----|--------|------|
| | | | | YES | NO | YES | NO | AMB | RES | ADM | PRIM | BACK |
| 2006 | 45180 | Ford | E450 Super Duty | Y | | | | AMB | | | Y | |
| 2008 | 19634 | Ford | E450 Super Duty | Y | | | | AMB | | | Y | |
| | | | | | | | | | | | | |
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Abbreviations: AMB=Ambulance RES=Rescue ADM=Administrative PRIM=Primary BACK=Back-up

III.

- A. Description of applicant's capability to provide twenty-four (24) hour coverage, seven (7) days a week for the area to be served by providing availability of Paramedic on all first out calls. (Make attachments if necessary)

Fort Barnwell Rescue Squad currently has a total of 13 ALS personnel. (4) of these personnel are already able to operate at an ALS level in Craven county. We are also currently aggressively hiring ALS personnel to ensure adequate coverage for the citizens of Fort Barnwell and the surrounding areas. We plan to increase the ALS roster by no less than (4) members within the next 30-45 days to pre-plan for sick days and/or call outs. Attached is an August 2013 schedule showing 24/7 coverage with the current roster.

Required Attachments:

1. Alphabetical roster of personnel with names, addresses, State P Number, level of certification, dates of certification and expiration and position or duties within the organization. Indicate personnel currently in the Craven County EMS System and approved by the Medical Director.
2. Such other information as may prove beneficial to the county in determining the capability of the applicant to provide Paramedic services in the County of Craven.
3. List of additional equipment needed and anticipated availability date for service.

Fort Barnwell EMS Roster

| | | | | |
|---------|-----------------------------------|-------------|----------|--|
| P036677 | LINDA BLAND | EMT-B | 06/30/14 | 9935 HWY 55 W DOVER, NC 28526 |
| P076320 | NICOLE BLAND | EMT-I | 05/31/16 | 2120 JONESTOWN RD DOVER, NC 28526 |
| P081109 | JONATHAN CROOM (EMT-P Boarded) | EMT-P | 05/31/17 | 1665 OLD BRICK RD VANCEBORO, NC 28586 |
| P001744 | BARBARA CUMBACKER | EMT-P | 12/31/13 | P.O. BOX 5040 KINSTON, NC 28503 |
| P999509 | RICHARD CRUMBACKER | EMT-I | 12/31/16 | P.O. BOX 5040 KINSTON, NC 28503 |
| P088975 | MICHAEL DAVIS | EMT-B | 08/31/16 | 8315 HWY 55 W DOVER, NC 28526 |
| P008568 | WILLIAM FISCHER JR | EMT-I | 12/31/16 | 865 KINGOLD BLVD APT-P SNOW HILL, NC 28580 |
| P037048 | THOMAS GASKINS | EMT-P | 10/31/16 | 6082 EMMA CANNON RD AYDEN, NC 28513 |
| P021031 | MARK GOSNELL | EMT-I | 06/30/16 | 602 TILGHMAN MILL RD KINSTON, NC 28501 |
| P088208 | RYAN GRAHAM | EMT-B | 07/31/16 | 110 STONEY BRANCH RD NEW BERN, NC 28562 |
| P013559 | MICHAEL HERRING | EMT-B | 06/30/17 | 209 E RAILROAD ST LA GRANGE, NC 28551 |
| P026996 | JOSHUA HOUGHTON | EMT-B | 04/30/17 | 4052 MORRIS DR GRIFTON, NC 28530 |
| P079194 | KANDICE JONES | EMT-B | 06/30/15 | 102 STILLWOOD RD JACKSONVILLE, NC 28540 |
| P013010 | ANTONIO LEDBETTER (EMT-P Boarded) | EMT-P | 08/31/17 | 1040 CHICKENSHACK RD HOOKERTON, NC 28538 |
| P052102 | LORRI MEAD | EMT-B | 01/31/16 | 102 CARRIAGE HILLS CT RICHLANDS, NC 28574 |
| P026748 | JESSE SHACKLEFORD | EMT-P | 05/31/17 | 127 FIREFIGHTER LN KINSTON, NC 28501 |
| P018927 | JASON SIMPSON | EMT-B | 06/30/14 | 130 E NORTH SHORE LN ARAPAHOE, NC 28510 |
| P013846 | JEDEDIAH STANCILL | EMT-P | 06/30/16 | 3801 COLDWATER CREEK DR GRIFTON, NC 28530 |
| P072602 | MILANDO STANCILL | EMT-P | 08/31/14 | 3846 AURORA DR GREENVILLE, NC 27858 |
| P013350 | CRYSTAL TEW (EMT-P Boarded) | EMT-P/CHIEF | 09/30/16 | 247 DEBBIE AVE KINSTON, NC 28504 |
| P016710 | ASBHY TIPPETT (EMT-I Boarded) | EMT-P | 07/31/17 | 1815 ASBURY RD COVE CITY, NC 28523 |

Additional Equipment Needed To Operate At EMT-I Level

Our anticipated in service date is 01/01/2014 to allow adequate time to order, receive, stock the units with the new equipment, and receive inspection along with getting all ALS personnel boarded at EMT-I level.

- EMT-I MEDICATIONS
 - Ipratropium
 - Levalbuterol
 - Normal Saline IV Solution
 - Lactated Ringers IV Solution
 - Injectable Diphenhydramine
 - Epinephrine 1:1000
 - Epinephrine 1:10,000
 - Glucagon
 - Dextrose 50%
 - A Histamine 2 Blocker (Ranitidine, Cimetidine, or Famotidine)
 - Naloxone
 - Ketorolac
 - Vasopressin
- ENDOTRACHEAL INTUBATION EQUIPMENT AND ACCESSORIES
 - Disposable Laryngoscope Blades Mac 0-4
 - Disposable Laryngoscope Blades Miller 0-4
 - ET Tubes Sized 2.0-9.0 with half sizes
 - Appropriate ETT Stylets
 - Laryngoscope Handles
 - Meconium Aspirators
 - Gum Elastic Bougies
 - ETT Adapters
- IV ACCESS EQUIPMENT AND ACCESSORIES
 - IV Catheters sized 14ga-24ga
 - Saline Lock Attachments
 - 10cc Normal Saline Flush Syringes
 - IV Securing Devices / Tegaderms
 - Iodine Cleansing Pads
 - Tubing GTT Sets 10gtt and 60gtt
 - Tourniquets
- CPAP EQUIPMENT AND ACCESSORIES
 - Disposable Sterile WhisperFlow CPAP Kits
 - Extra PEEP valves sized 7.5 and 5.0
 - Additional Mask Sizes
 - Additional Head Straps

- Ohio Adapter / Flow Generator
- CPAP Attachment For D Cylinder Regulators

- MEDICATION ADMINISTRATION ACCESSORIES
 - Syringes Sized 1cc, 3cc, 5cc, 10cc, 20cc, and 60cc
 - Filtered Injection Needles Sized 19ga and 23ga

August 2013

| Sun | Mon | Tue | Wed | Thu | Fri | Sat |
|----------------------------|--------------------------|------------------------------|----------------------------|--------------------------|---------------------------------|--------------------------|
| | | | | 1 Jesse Richard | 2 Kandice Barbara | 3 Jon Croom Tom |
| | | | | Richard Linda | Kandice Barbara | Kandice Linda |
| 4 Jon Croom Kandice | 5 John Fischer Tom | 6 Richard John Fischer | 7 Crystal Jesse | 8 Mark Ryan | 9 Barbara Jesse | 10 Jon Croom Lorri |
| John Fischer Ashby | Ryan Barbara | Ryan Milando | Josh Jon Croom | Mark Josh | Barbara Lorri | Lorri Ashby |
| 11 Ashby Jon Croom | 12 Jesse Barbara | 13 Crystal Richard | 14 John Fischer Ryan | 15 Jon Croom Ashby | 16 Ryan Ashby | 17 Kandice Mark |
| Josh Jon Croom | Richard Lorri | Milando Linda | Barbara John Fischer | Josh Ryan | Kandice Mark | Kandice Lorri |
| 18 Mike Jon Croom | 19 Jesse Richard | 20 Ashby Richard | 21 Crystal Milando | 22 Jesse Mike | 23 Jon Croom John Fischer | 24 Kandice Josh |
| Ashby Mark | Josh Linda | Milando Ashby | Linda Mike | Richard John Fischer | Kandice Ryan | Josh John Fischer |
| 25 Mark John Fischer | 26 Ryan Mike | 27 Mark Jon Croom | 28 Jesse Richard | 29 Jed Mike | 30 Crystal Ashby | 31 Kandice Lorri |
| Crystal 8pm Ryan | Mark Barbara | Jon Croom Milando | Josh Linda | Mike Linda | Barbara Ashby | Kandice Lorri |

CONTRACT AND AGREEMENT

STATE OF NORTH CAROLINA
CRAVEN COUNTY/WAYNE COUNTY

This Agreement is made and entered into this 7th day of October 2013 by the undersigned parties: Strategic Emergency Management, LLC (hereinafter, "Contractor") whose address is 103 Grouse Court, New Bern, NC 28562, and the Craven County Health Department (hereinafter, "CCHD"), on behalf of itself and the Wayne County Health Department, whose address is 2818 Neuse Boulevard, New Bern, NC 28562.

In consideration of the promises, rights and obligations set forth below, the parties hereby agree as follows:

Term

The term of this Agreement shall begin on June 1, 2013, and terminate on May 31, 2014, unless terminated earlier as set forth in this Agreement. The term of this Agreement may be extended by mutual agreement between the parties.

Services

The Contractor will provide the following services to both the Craven County Health Department and the Wayne County Health Department, said two health department having entered into a Memorandum of Understanding for CCHD to ensure the same for the Wayne County Health Department:

Scope of Services

Provide Public Health Preparedness and Response activities for both the Craven County Health Department and the Wayne County Health Department (hereinafter collectively the "Local Health Departments") between June 01, 2013- May 31, 2014.

1. Shall coordinate efforts towards completing the gaps that were identified in March 2012 Capabilities Assessments by:
 - A. Developing and implementing an updated work plan that provides a description of activities and dates of completion.
 - B. Utilizing the PHP&R Progress Check Database to record activities and updates.
2. The Local Health Departments shall designate one representative (Public Health Planner/Preparedness Coordinator), at minimum to participate in state and regional planning processes by attending, at minimum:
 - A. Not less than 75% of scheduled PHP&R regional in-person planning meetings in your respective PHP&R region.
 - B. The annual Preparedness Conference.
3. The Local Health Departments shall meet the following Strategic National Stockpile (SNS) requirements:
 - A. Maintain an SNS Plan that meets the requirements of the Local Technical Assistance Review Tool (LTAR) with a minimum score of 79.

CONTRACT AND AGREEMENT

- i. Complete call down drills, communication platforms checks and systems required by the LTAR tool.
 - ii. Complete trainings and exercises with After Action Reports and Corrective Action Plans required by the LTAR tool.
 - B. The Public Health Planner/Preparedness Coordinator or a representative of the Local Health Departments shall attend annual SNS review meetings.
 - C. Submit an updated full scale Point of Dispensing exercise planning timeline by May 31, 2014 in order to prepare for the full scale Point of Dispensing exercise, which is required to be conducted by June 30, 2016. Details for exercise preparation and planning will be provided by PHP&R.
 - D. Provide updates and data for each Point of Dispensing/Local Receiving Site (POD/LRS) location, hospital information sheets, and other documents as requested.
4. The Local Health Departments shall maintain preparedness and response activities by:
 - A. Maintaining a system to receive reports of communicable diseases or other public health threats on a 24-hour-a-day, 7-day-a-week basis.
 - B. Establishing and maintaining a respiratory protection program. This may be in conjunction with other programs in the Local Health Departments.
 - C. Maintaining a current Incident command System (ICS) and National Incident Management Systems (NIMS) as guided by the North Carolina Public Health Workforce ICS and NIMS Training Directive.

Period of Performance

The term of the Agreement shall begin **JUNE 1, 2013** and terminate on May 31, 2014. It may be terminated by thirty (30) days written notice by either party.

PERFORMANCE MEASURES/REPORTING REQUIREMENTS:

The Local Health Departments shall:

1. Comply with laws, rules and contractual requirements for programs and services provided pursuant to the Local Health Departments Consolidated Agreement and Agreement Addendum, including requirements for corrective action.
2. Provide data as requested by PHP&R that supports reporting Performance Measures of the CDC Public Health Emergency Preparedness Cooperative Agreement. The essential data elements are found in the CDC Public Health Preparedness Capabilities and subsequent updates from CDC. Preparedness activities will be aimed at achieving, at minimum, locally applicable priority elements as defined in the CDC Public Health Preparedness capabilities document.
3. Submit the following updates and reports:
 - A. Homeland Security Exercise and Evaluation Plan (HSEEP) compliant documentation and After Action Reports (AARs) within 60 days of completing the full scale Point of Dispensing Exercise and other documents as required by the CDC.
 - B. Monthly Expenditure Monitoring Reports (EMRs)
 - C. Monthly description of activities to the PHP&R Progress Check Database.

CONTRACT AND AGREEMENT

4. Provide all plans and documents for review by PHP&R staff as needed. Plans and other documents must be consistent with state and federal requirements and must be specific to the local public health areas managed by the CCHD and WCHD respectively.

Period of Performance

The term of the Agreement shall begin **JUNE 1, 2013** and terminate May 31, 2014. It may be terminated by thirty (30) days written notice by either party.

1. Termination

This Contract may be terminated without cause by either party by giving written notice to the other at least thirty (30) calendar days prior to the effective date of termination stated in the notice.

If Contractor fails to fulfill Contractor's obligations, CCHD may terminate this Contract by giving written notice to Contractor at least seven (7) calendar days prior to the effective date of termination and stating in the notice the reason for the termination.

2. Obligations in the Event of Termination

Upon termination of this Contract, all finished or unfinished documents, data, Studies and reports prepared by Contractor, pursuant to this Contract shall become the property of CCHD.

CCHD shall promptly pay the Contractor, for all services performed up to the effective date of termination, subject to any offset sums due Contractor against sums owed by Contractor, to CCHD.

3. CCHD Responsibilities

- Make staff available as needed for briefing, strategy and planning meetings.
- Grant full access to current and previous documents related All Hazards, SNS and pandemic planning.

4. Payment for Work

Contractor shall be paid by CCHD for services rendered under this Contract the sum of \$50,000.00 over the course of twelve (12) months with the sum of \$4,166.67 to be paid by the 10th of each month half by Wayne County and half by Craven County. In the event the Contractor does not begin at the start of the program year the contract will be prorated to fit the remainder of the program year at the rate of \$4,166.67 per month. However, upon early termination, Contractor shall only be paid for services through the date of termination.

5. Modification or Amendment

No amendment, change or modification of this Agreement shall be valid unless in writing and signed by the parties hereto.

6. Licenses/Certifications

CONTRACT AND AGREEMENT

Contractor shall be responsible for obtaining whatever licenses, permits and/or certifications are necessary under applicable federal, state and local laws to fulfill Contractor's service obligations under the terms of this Contract.

7. Tax Payments

Contractor understands and agrees that CCHD will not contribute to Medicare, Social Security, unemployment insurance or any other required employment taxes, nor will CCHD withhold federal or state income taxes from compensation paid to Contractor.

Contractor understands and agrees that the Contractor shall be responsible for paying one hundred percent (100 %) of all applicable employment and income taxes.

8. Income Reporting

Contractor agrees that it will report to federal, state and local government agencies, as required by law, that Contractor has been paid by CCHD certain sums for services rendered under the terms of this Contract.

9. Insurance

CCHD will not purchase any insurance of any kind, including workers' compensation, and automobile liability insurance for Contractor or Contractor's employees and agents.

10. Job Training

Contractor will not receive any on-the-job training from CCHD to perform work under the terms of this Contract. Contractor agrees to attend meetings related to job functions.

11. Non-Exclusivity Provision

Contractor is permitted to provide contracting services to the public and to other companies during the terms of this Agreement so long as Contractor is able to fulfill Contractor obligations to CCHD.

12. Breakdown of Fee's

Activity #514: Bioterrorism

\$50,000.00

Planning

- A. All hazards plan for Public Health to include the identification of the population with special needs. The plan will address how individuals within these populations will be identified in a database for emergency preparedness.
- B. Develop and implement mutual aid agreements, as needed to support NIMS compliant public health response.
- C. Implement and oversee evaluation of Airborne Infection Isolations Room (AIR) by contacting PHIRST to assure compliance.
- D. Use and maintain an incident management system for local event and response activities. If possible, conduct along with local emergency management and communicate with State Systems.

CONTRACT AND AGREEMENT

- E. Develop and implement health and safety plans for public health responders to include guidelines for personal protective equipment (PPE), prophylaxis, mental health and personal safety.
- F. Maintain a community containment policy, in accordance with the pandemic influenza plan.
- G. Maintain current and updated 24/7/365 contract information for the Local Health Department. This information should include telephone numbers, pagers, and other information needed to alert the LHD to critical events and/or recommend needed emergency responses.
- H. Participate in the North Carolina Health Alert Network (NCHAN).

Exercises-minimum of two exercises by JUNE 2014

- A. Exercise some aspect of Quarantine and Isolation policy
- B. Exercise some aspect of Communication Plan
- C. Exercise SNS plan

Training

Continue to implement the Division of Public Health's National Incident Management System (NIMS) Workforce Training Program. Maintain an updated database of trained individuals within your organization. Report the aggregate number of individuals trained quarterly.

Develop and/or maintain an OSHA compliant respiratory protection program as offered by the Public Health Regional Surveillance Teams by June 2014. Staff participating in the program should at a minimum include environmental health staff, Epi Team, clinical staff, and the county/district public health preparedness coordinator.

Demonstrate that 75% of full time employees will have completed the Public Health Workforce Development System Online Assessment by June 30, 2014.

13. Right to Hire Assistants

Contractor may hire such assistants as Contractor deems necessary to perform the services under the terms of this agreement. CCHD shall not hire, direct or control Contractor's assistants and shall not be responsible for their pay or any benefits that may be agreed upon between Contractor and any assistants.

14. Expenses

Contractor shall be responsible for paying all expenses incurred while performing the services under this Agreement. CCHD will pay for all travel and training outside the region-not to exceed \$2,000.00.

15. Employment Benefits

Contractor understands and agrees that Contractor is not entitled to receive any employment benefits from CCHD, including, but not limited to, health, life or disability insurance, retirement or pension plan paid vacation or sick leave, unemployment compensation or workers' compensation insurance.

CONTRACT AND AGREEMENT

16. Independent Contractor

This Agreement does not create an employee/employer relationship between Contractor and CCHD. It is the parties' intention that Contractor shall be an independent contractor, and not a CCHD employee for all purposes, including, but not limited to, the Fair Labor Standards Act, Minimum Wage and Overtime Payments Act, Federal Insurance Contribution Act, Social Security Act, Federal Unemployment Tax Act, the provisions of the Internal Revenue Code, the State Revenue and Taxation Law, the State Workers' Compensation Law and the State Unemployment Insurance Law. Contractor will retain sole and absolute discretion and judgment in the manner and means of carrying out Contractor's activities and responsibilities hereunder. Contractor agrees that it is a separate and independent enterprise from CCHD, that it has full opportunity to find other business, that it has made its own investment in its business and that it will utilize a high level of skill necessary to perform the work. This Agreement shall not be construed as creating any joint employment relationship between Contractor and CCHD, and CCHD will not be liable for obligations incurred by Contractor including, but not limited to, unpaid minimum wage and/or overtime premiums.

17. Confidentiality

Contractor acknowledges that during the time that it performs services for CCHD/WCHD under this contract, Contractor will have access to and become acquainted with various secrets, innovations, processes, information, records and specifications owned or licensed by the Local Health Departments and/or used by the Local Health Departments in connection with the operation of its business, including, without limitation, CCHD/WCHD's business and product processes, methods, patients' and clients' lists, accounts and procedures. Contractor shall be required to sign the standard Patient Confidentiality Statement of the Local Health Departments.

Contractor agrees that it will not disclose any information and materials, directly or indirectly, or use any of them in any manner, either during the term of this Agreement or at any time thereafter, except as required in the course of this engagement with CCHD/WCHD.

Further, if required by HIPPA, Contractor shall execute a Business Associate Agreement.

18. Recordkeeping, Audit and Inspection of Records

Contractor shall maintain books, records, and other compilation of data relating to services performed under this Agreement that demonstrate that Contractor worked as an independent contractor.

All such records shall be kept for at least six (6) years. If any litigation, claim, negotiation, audit or other action involving the records starts prior to the expiration of the applicable retention period, all records shall be kept until the action is completed and fully resolved.

The IRS, CCHD/WCHD or any other entity involved in the action shall have the right at reasonable times and upon reasonable notice to examine and copy at reasonable expense, the books, records and other compilations of data of Contractor which pertain to the provisions and requirements of this Contract. Such access shall include on-site audits, reviews and copying of records.

19. Governing Law; Exclusive Venue

CONTRACT AND AGREEMENT

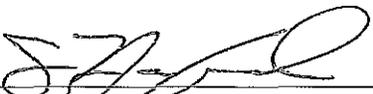
Notwithstanding the principles of conflicts of law, the internal laws of the State of North Carolina shall govern and control the validity, interpretation, performance, and enforcement of this Agreement. Exclusive venue for any action, whether at law or in equity, shall be Craven County.

20. Miscellaneous:

- A. **Assignment.** This Agreement is not assignable by any party without the consent of the other.
- B. **Waiver.** The waiver by either party of a breach of a provision of this Agreement shall not operate or be construed to invalidate the balance of the provisions contained in this Agreement, which shall continue to remain in effect.
- C. **Severability.** The finding by any court that a provision of this Agreement is invalid shall not operate or be construed to invalidate the balance of the provisions contained in this Agreement, which provisions shall continue to remain in full force and effect.
- D. **Entire Agreement.** This Agreement contains the entire agreement between the parties relating to the subject matter hereof, and all prior proposals, discussions or writings are superseded hereby. The terms of this Agreement shall be binding upon and shall inure to the benefit of the parties and their successors and assigns, if any.

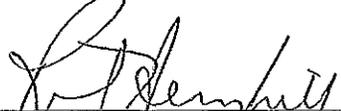
IN WITNESS WHEREOF, the parties hereto each contending to be legally bound has caused this Agreement to be executed by their duly authorized representatives, effective as of the day and year first above written.

By: 
Director, Craven County Health Department

By: 
Contractor

Its: _____

This instrument has been pre-audited in the manner required by the Local Government Budget and Fiscal Control Act.

By: 
Craven County Finance Officer

Prepared by:

Jimmie B. Hicks, Jr.
Sumrell, Sugg, Carmichael, Hicks & Hart, P.A.
416 Pollock Street
New Bern, NC 28560

NORTH CAROLINA
CRAVEN COUNTY

Tax Parcel No. 3-035-124
Revenue Stamps \$0.00

QUITCLAIM DEED

THIS QUITCLAIM DEED, made this 21st day of October, 2013, by and between **CRAVEN COUNTY**, a body politic and corporate of the State of North Carolina (“Grantor”); to **DRED C. MITCHELL, JR.**, an individual of the State of North Carolina (“Grantee”), whose mailing address is _____, is as follows:

WITNESSETH:

That said Grantor for and in consideration of the sum of TEN DOLLARS (\$10.00) and other good and valuable consideration to Grantor paid by the Grantee, the receipt of which is hereby acknowledged, has remised and released, and by these presents does remise, release and forever quitclaim unto the Grantee, Grantee’s heirs, successors and assigns, pursuant to N.C.G.S. Section 160A-274, the following described property, **which said property does not include the primary residence of the Grantor** to wit:

**SEE EXHIBIT “A” ATTACHED HERETO
AND INCORPORATED HEREIN BY REFERENCE.**

Prepared by:
Sumrell, Sugg, Carmichael, Hicks and Hart, P.A.
Attorneys at Law
416 Pollock Street
New Bern, North Carolina 28560

No Title Search
No Opinion Rendered
Property Does Not Include a Primary Residence

TO HAVE AND TO HOLD the above described lot or parcel of land and all privileges and appurtenances thereunto belonging to the Grantee, Grantee's heirs, successors and assigns, free and discharged from all right, title, claim or interest of the said Grantor or anyone claiming by, through or under the Grantor.

IN TESTIMONY WHEREOF, **CRAVEN COUNTY** has caused this instrument to be executed as its act and deed by the Chairman of its Board of Commissioners, attested by its Clerk, and its seal to be hereunto affixed, all by the authority of its Board of Commissioners, as of the day and year first above written.

CRAVEN COUNTY

(COUNTY SEAL)

By: SCOTT C. DACEY, Chairman
Craven County Board of Commissioners

ATTEST:

GWENDOLYN M. BRYAN, Clerk
Craven County Board of Commissioners

STATE OF NORTH CAROLINA
COUNTY OF CRAVEN

I, _____, Notary Public in and for said County and State, do hereby certify that on the ____ day of October, 2013, before me personally appeared SCOTT C. DACEY, with whom I am personally acquainted, who, being by me duly sworn, says that he is the Chairman of the Board of Commissioners for Craven County, and that GWENDOLYN M. BRYAN is the Clerk of the Board of Commissioners for Craven County, the body politic and corporate described in and which executed the foregoing instrument; that he knows the common seal of said body politic and corporate; that the seal affixed to the foregoing instrument is said common seal; that the name of the body politic and corporate was subscribed thereto by the said Chairman; that the said common seal was affixed, all by order of the Board of Commissioners of said body politic and corporate; and that the said instrument is the act and deed of said body politic and corporate.

WITNESS my hand and official seal this the ____ day of October, 2013.

Notary Public

My Commission Expires:

EXHIBIT A

All of that certain tract or parcel of land lying and being situate in Number Three (3) Township, Craven County, North Carolina and being more particularly described as follows:

Being all of that certain property conveyed to Craven County by Commissioner's Deed recorded in Deed Book 2190, Page 852 in the Office of the Register of Deeds of Craven County, North Carolina.

Subject to restrictive covenants and easements of record.

9\\SERVER04\lssdocs\00000011\00046073.000.DOC

Prepared by and return to:

Michael Scott Davis
DAVIS HARTMAN WRIGHT PLLC
209 Pollock Street
New Bern, NC 28560

Tax Parcel # 8-015-116
Revenue Stamps \$0.00

STATE OF NORTH CAROLINA

COUNTY OF CRAVEN

QUITCLAIM DEED

THIS QUITCLAIM DEED, made this 22nd day of October, 2013, by and between the **CITY OF NEW BERN**, a municipal corporation of the State of North Carolina, and **CRAVEN COUNTY**, a body politic and corporate of the State of North Carolina (“Grantors”); to **DEBROU CANTLOW and spouse, LOIS CANTLOW**, whose mailing address is _____, (“Grantees”);

WITNESSETH:

That said Grantors for and in consideration of the sum of TEN DOLLARS (\$10.00) and other good and valuable consideration to Grantors paid by the Grantees, the receipt of which is hereby acknowledged, have remised and released, and by these presents do remise, release and forever quitclaim unto the Grantee, Grantees’ heirs and assigns, the following described property, to wit:

SEE EXHIBIT A ATTACHED HERETO AND INCORPORATED HEREIN BY REFERENCE.

The property herein conveyed does not include the primary residence of a Grantor.

DAVIS HARTMAN WRIGHT PLLC
Attorneys at Law
209 Pollock Street
New Bern, NC 28560

TO HAVE AND TO HOLD the above described lot or parcel of land and all privileges and appurtenances thereunto belonging to the Grantees, Grantees' heirs and assigns, free and discharged from all right, title, claim or interest of the said Grantors or anyone claiming by, through or under the Grantors.

IN TESTIMONY WHEREOF, the **CITY OF NEW BERN** has caused this instrument to be executed as its act and deed by its Mayor, attested by its City Clerk, and its seal to be hereunto affixed, all by the authority of its Board of Aldermen, and **CRAVEN COUNTY** has caused this instrument to be executed as its act and deed by the Chairman of its Board of Commissioners, attested by its Clerk, and its seal to be hereunto affixed, all by the authority of its Board of Commissioners, as of the day and year first above written.

CITY OF NEW BERN

(SEAL)

By: _____
Mayor

ATTEST:

City Clerk

STATE OF NORTH CAROLINA

COUNTY OF CRAVEN

I, _____, Notary Public in and for said County and State, do hereby certify that on the ____ day of October, 2013, before me personally appeared LEE WILSON BETTIS, JR., with whom I am personally acquainted, who, being by me duly sworn, says that he is the Mayor and that VERONICA MATTOCKS is the City Clerk for the City of New Bern, the municipal corporation described in and which executed the foregoing instrument; that he knows the common seal of said municipal corporation; that the seal affixed to the foregoing instrument is said common seal; that the name of the municipal corporation was subscribed thereto by the said Mayor; that the said common seal was affixed, all by order of the Board of Aldermen of said municipal corporation; and that the said instrument is the act and deed of said municipal corporation.

WITNESS my hand and official seal this the ____ day of October, 2013.

Notary Public

My Commission Expires:

CRAVEN COUNTY

By: _____
Chairman, Craven County Board of
Commissioners

(SEAL)

ATTEST:

Clerk, Craven County Board of
Commissioners

STATE OF NORTH CAROLINA

COUNTY OF CRAVEN

I, _____, Notary Public in and for said County and State, do hereby certify that on the ____ day of _____, 2013, before me personally appeared _____, with whom I am personally acquainted, who, being by me duly sworn, says that he is the Chairman of the Board of Commissioners for Craven County, and that GWENDOLYN M. BRYAN is the Clerk of the Board of Commissioners for Craven County, the body politic and corporate described in and which executed the foregoing instrument; that he knows the common seal of said body politic and corporate; that the seal affixed to the foregoing instrument is said common seal; that the name of the body politic and corporate was subscribed thereto by the said Chairman; that the said common seal was affixed, all by order of the Board of Commissioners of said body politic and corporate; and that the said instrument is the act and deed of said body politic and corporate.

WITNESS my hand and official seal this the ____ day of _____, 2013.

Notary Public

My Commission Expires:

EXHIBIT A

All those certain lots or parcels of land lying and being situate in Number Eight (8) Township, Craven County, North Carolina, and being more particularly described as follows:

Being all those certain tracts or parcels of land on the southeastern side of Ruth Avenue and being depicted as Lot No. 207 Ruth Avenue as shown and delineated on a map of Cleveland Park, said map being recorded in Map Book 2, Page 93 in the Office of the Register of Deeds of Craven County, reference to said map being hereby made for a more perfect description of said Lot No. 207 Ruth Avenue.

Subject to any restrictive covenants and easements of record.

Prepared by and return to:

Michael Scott Davis
DAVIS HARTMAN WRIGHT PLLC
209 Pollock Street
New Bern, NC 28560

Tax Parcel # 8-015-117
Revenue Stamps \$0.00

STATE OF NORTH CAROLINA

COUNTY OF CRAVEN

QUITCLAIM DEED

THIS QUITCLAIM DEED, made this 22nd day of October, 2013, by and between the **CITY OF NEW BERN**, a municipal corporation of the State of North Carolina, and **CRAVEN COUNTY**, a body politic and corporate of the State of North Carolina (“Grantors”); to **LEROY SIMMONS and spouse, KATHRYN ROSA SIMMONS**, whose mailing address is _____, (“Grantees”);

WITNESSETH:

That said Grantors for and in consideration of the sum of TEN DOLLARS (\$10.00) and other good and valuable consideration to Grantors paid by the Grantees, the receipt of which is hereby acknowledged, have remised and released, and by these presents do remise, release and forever quitclaim unto the Grantee, Grantees’ heirs and assigns, the following described property, to wit:

SEE EXHIBIT A ATTACHED HERETO AND INCORPORATED HEREIN BY REFERENCE.

The property herein conveyed does not include the primary residence of a Grantor.

DAVIS HARTMAN WRIGHT PLLC
Attorneys at Law
209 Pollock Street
New Bern, NC 28560

TO HAVE AND TO HOLD the above described lot or parcel of land and all privileges and appurtenances thereunto belonging to the Grantees, Grantees' heirs and assigns, free and discharged from all right, title, claim or interest of the said Grantors or anyone claiming by, through or under the Grantors.

IN TESTIMONY WHEREOF, the **CITY OF NEW BERN** has caused this instrument to be executed as its act and deed by its Mayor, attested by its City Clerk, and its seal to be hereunto affixed, all by the authority of its Board of Aldermen, and **CRAVEN COUNTY** has caused this instrument to be executed as its act and deed by the Chairman of its Board of Commissioners, attested by its Clerk, and its seal to be hereunto affixed, all by the authority of its Board of Commissioners, as of the day and year first above written.

CITY OF NEW BERN

(SEAL)

By: _____
Mayor

ATTEST:

City Clerk

STATE OF NORTH CAROLINA

COUNTY OF CRAVEN

I, _____, Notary Public in and for said County and State, do hereby certify that on the ____ day of October, 2013, before me personally appeared LEE WILSON BETTIS, JR., with whom I am personally acquainted, who, being by me duly sworn, says that he is the Mayor and that VERONICA MATTOCKS is the City Clerk for the City of New Bern, the municipal corporation described in and which executed the foregoing instrument; that he knows the common seal of said municipal corporation; that the seal affixed to the foregoing instrument is said common seal; that the name of the municipal corporation was subscribed thereto by the said Mayor; that the said common seal was affixed, all by order of the Board of Aldermen of said municipal corporation; and that the said instrument is the act and deed of said municipal corporation.

WITNESS my hand and official seal this the ____ day of October, 2013.

Notary Public

My Commission Expires:

CRAVEN COUNTY

By: _____
Chairman, Craven County Board of
Commissioners

(SEAL)

ATTEST:

Clerk, Craven County Board of
Commissioners

STATE OF NORTH CAROLINA

COUNTY OF CRAVEN

I, _____, Notary Public in and for said County and State, do hereby certify that on the ____ day of _____, 2013, before me personally appeared _____, with whom I am personally acquainted, who, being by me duly sworn, says that he is the Chairman of the Board of Commissioners for Craven County, and that GWENDOLYN M. BRYAN is the Clerk of the Board of Commissioners for Craven County, the body politic and corporate described in and which executed the foregoing instrument; that he knows the common seal of said body politic and corporate; that the seal affixed to the foregoing instrument is said common seal; that the name of the body politic and corporate was subscribed thereto by the said Chairman; that the said common seal was affixed, all by order of the Board of Commissioners of said body politic and corporate; and that the said instrument is the act and deed of said body politic and corporate.

WITNESS my hand and official seal this the ____ day of _____, 2013.

Notary Public

My Commission Expires:

EXHIBIT A

All those certain lots or parcels of land lying and being situate in Number Eight (8) Township, Craven County, North Carolina, and being more particularly described as follows:

Being all those certain tracts or parcels of land on the southeastern side of Ruth Avenue and being depicted as Lot No. 209 Ruth Avenue as shown and delineated on a map of Cleveland Park, said map being recorded in Map Book 2, Page 93 in the Office of the Register of Deeds of Craven County, reference to said map being hereby made for a more perfect description of said Lot No. 209 Ruth Avenue.

Subject to any restrictive covenants and easements of record.

Prepared by and return to:

Michael Scott Davis
DAVIS HARTMAN WRIGHT PLLC
209 Pollock Street
New Bern, NC 28560

Tax Parcel # 8-015-118
Revenue Stamps \$0.00

STATE OF NORTH CAROLINA

COUNTY OF CRAVEN

QUITCLAIM DEED

THIS QUITCLAIM DEED, made this 22nd day of October, 2013, by and between the **CITY OF NEW BERN**, a municipal corporation of the State of North Carolina, and **CRAVEN COUNTY**, a body politic and corporate of the State of North Carolina (“Grantors”); to **LORENZA GRIST**, whose mailing address is _____, (“Grantee”);

WITNESSETH:

That said Grantors for and in consideration of the sum of TEN DOLLARS (\$10.00) and other good and valuable consideration to Grantors paid by the Grantee, the receipt of which is hereby acknowledged, have remised and released, and by these presents do remise, release and forever quitclaim unto the Grantee, Grantee’s heirs and assigns, the following described property, to wit:

SEE EXHIBIT A ATTACHED HERETO AND INCORPORATED HEREIN BY REFERENCE.

The property herein conveyed does not include the primary residence of a Grantor.

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Attorneys at Law
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TO HAVE AND TO HOLD the above described lot or parcel of land and all privileges and appurtenances thereunto belonging to the Grantee, Grantee's heirs and assigns, free and discharged from all right, title, claim or interest of the said Grantors or anyone claiming by, through or under the Grantors.

IN TESTIMONY WHEREOF, the **CITY OF NEW BERN** has caused this instrument to be executed as its act and deed by its Mayor, attested by its City Clerk, and its seal to be hereunto affixed, all by the authority of its Board of Aldermen, and **CRAVEN COUNTY** has caused this instrument to be executed as its act and deed by the Chairman of its Board of Commissioners, attested by its Clerk, and its seal to be hereunto affixed, all by the authority of its Board of Commissioners, as of the day and year first above written.

CITY OF NEW BERN

(SEAL)

By: _____
Mayor

ATTEST:

City Clerk

STATE OF NORTH CAROLINA

COUNTY OF CRAVEN

I, _____, Notary Public in and for said County and State, do hereby certify that on the ____ day of October, 2013, before me personally appeared LEE WILSON BETTIS, JR., with whom I am personally acquainted, who, being by me duly sworn, says that he is the Mayor and that VERONICA MATTOCKS is the City Clerk for the City of New Bern, the municipal corporation described in and which executed the foregoing instrument; that he knows the common seal of said municipal corporation; that the seal affixed to the foregoing instrument is said common seal; that the name of the municipal corporation was subscribed thereto by the said Mayor; that the said common seal was affixed, all by order of the Board of Aldermen of said municipal corporation; and that the said instrument is the act and deed of said municipal corporation.

WITNESS my hand and official seal this the ____ day of October, 2013.

Notary Public

My Commission Expires:

CRAVEN COUNTY

By: _____
Chairman, Craven County Board of
Commissioners

(SEAL)

ATTEST:

Clerk, Craven County Board of
Commissioners

STATE OF NORTH CAROLINA

COUNTY OF CRAVEN

I, _____, Notary Public in and for said County and State, do hereby certify that on the ____ day of _____, 2013, before me personally appeared _____, with whom I am personally acquainted, who, being by me duly sworn, says that he is the Chairman of the Board of Commissioners for Craven County, and that GWENDOLYN M. BRYAN is the Clerk of the Board of Commissioners for Craven County, the body politic and corporate described in and which executed the foregoing instrument; that he knows the common seal of said body politic and corporate; that the seal affixed to the foregoing instrument is said common seal; that the name of the body politic and corporate was subscribed thereto by the said Chairman; that the said common seal was affixed, all by order of the Board of Commissioners of said body politic and corporate; and that the said instrument is the act and deed of said body politic and corporate.

WITNESS my hand and official seal this the ____ day of _____, 2013.

Notary Public

My Commission Expires:

EXHIBIT A

All those certain lots or parcels of land lying and being situate in Number Eight (8) Township, Craven County, North Carolina, and being more particularly described as follows:

Being all those certain tracts or parcels of land on the southeastern side of Ruth Avenue and being depicted as Lot No. 211 Ruth Avenue as shown and delineated on a map of Cleveland Park, said map being recorded in Map Book 2, Page 93 in the Office of the Register of Deeds of Craven County, reference to said map being hereby made for a more perfect description of said Lot No. 211 Ruth Avenue.

Subject to any restrictive covenants and easements of record.