

NIFS ID:CQPD19000005 Department: Police Dept.

Capital:

SERVICE: Equine veterinary services

Contract ID #:CQPD19000005

NIFS Entry Date: 13-NOV-19

Term: from 01-JAN-19 to 31-DEC-21

New	
Time Extension:	
Addl. Funds:	
Blanket Resolution:	
RES#	

1) Mandated Program:	N
2) Comptroller Approval Form Attached:	Y
3) CSEA Agmt. § 32 Compliance Attached:	N
4) Vendor Ownership & Mgmt. Disclosure Attached:	Y
5) Insurance Required	Y

Vendor Info:	4
Name: Cornell Ruffian Equine Specialists	Vendor ID#:
Address: 111 Plainfield Avenue Elmont, NY 11103	Contact Person: J
	Phone:

Department:	
Contact Name: Jaclyn Delle	
Address: 1 West Street	
Mineola, NY 11501	
Phone: 5165713054	

## **Routing Slip**

Department	NIFS Entry: X	09-DEC-19 JDELLEPD
Department	NIFS Approval: X	09-DEC-19 JDELLEPD
DPW	Capital Fund Approved:	
ОМВ	NIFA Approval: X	14-JAN-20 IQURESHI
OMB	NIFS Approval: X	09-JAN-20 JNOGID
County Atty.	Insurance Verification: X	19-DEC-19 AAMATO
County Atty.	Approval to Form: X	09-DEC-19 DMCDERMOTT
СРО	Approval: X	03-APR-20 KOHAGENCE

DCEC	Approval: X	05-APR-20 JCHIARA
Dep. CE	Approval: X	15-APR-20 TFOX
Leg. Affairs	Approval/Review: X	23-APR-20 GCASTILLO
Legislature	Approval:	
Comptroller	Deputy:	
NIFA	NIFA Approval:	

## **Contract Summary**

**Purpose:** New contract to provide equine veterinarian services for the Police Department's Police Service horses. Services shall include, but not be limited to: diagnostic exams; emergency medical care; emergency surgery; all required medications and vaccinations; all required medical testing. The term of the contract is five years.

Method of Procurement: The County issued a Request for Proposals ("RFP") on 10/30/18 and Cornell Ruffian was selected as one (1) of the two (2) highest scoring proposers. The evaluation committee consisted of three members of the Nassau County Police Department's Mounted United, and one member of the Police Department's Legal Bureau

Procurement History: RFP Issued 10/30/18 - Cornell Ruffian selected as one of the two highest scoring proposers

**Description of General Provisions:** Services shall include, but not be limited to: diagnostic exams; emergency medical care; emergency surgery; all required medications and vaccinations; all required medical testing.

Impact on Funding / Price Analysis: \$60,000 - max value

Change in Contract from Prior Procurement: N/A

Recommendation: (approve as submitted) Approve as submitted.

## **Advisement Information**

BUDGET CODES		
Fund:		
Control:		
Resp:		
Object:		
Transaction:		
Project #:		
Detail:		

	RENEWAL
%	
Increase	
%	
Decrease	

FUNDING	AMOUNT	
SOURCE	AMOUNT	
Revenue		
Contract:		
County	\$ 60,000.00	
Federal	\$ 0.00	
State	\$ 0.00	
Capital	\$ 0.00	
Other	\$ 0.00	
TOTAL	\$ 60,000.00	

LINE	INDEX/OBJECT CODE	AMOUNT
		\$ 60,000.00
		\$ 0.00
		\$ 0.00
		\$ 0.00
		\$ 0.00
		\$ 0.00
	TOTAL	\$ 60,000.00

A RESOLUTION AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE A PERSONAL SERVICES AGREEMENT BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY POLICE DEPARTMENT, AND CORNELL UNIVERSITY, ACTING ON BEHALF OF CORNELL RUFFIAN EQUINE SPECIALISTS

WHEREAS, the County has negotiated a personal services agreement with Cornell University, acting on behalf of Cornell Ruffian Equine Specialists, to provide equine veterinarian services, a copy of which is on file with the Clerk of the Legislature; now, therefore, be it

RESOLVED, that the Rules Committee of the Nassau County Legislature authorizes the County Executive to execute the said agreement with Cornell University, acting on behalf of Cornell Ruffian Equine Specialists.

# NIFA Nassau County Interim Finance Authority

## Contract Approval Request Form (As of January 1, 2015)

1.	Vendo	r: Cornell	Ruffian	Equine	<b>Specialists</b>
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2. Dollar amount requiring NIFA approval: \$60000

Amount to be encumbered: \$60000

This is a New

If new contract - \$ amount should be full amount of contract

If advisement - NIFA only needs to review if it is increasing funds above the amount previously approved by NIFA

If amendment - \$ amount should be full amount of amendment only

## 3. Contract Term: 01/01/2019 - 12/31/2021

Has work or services on this contract commenced? Y

If yes, please explain: Certain emergency services have been provided on an as-needed basis to ensure the health of service horses as contract routed through approvals.

#### 4. Funding Source:

X General Fund (GEN) Capital Improvement Fund (CAP) Other	Grant Fund (GRT)	Federal % ( State % ( County %	
Is the cash available for the full amount of the contra If not, will it require a future borrowing?	act?	Y N	
Has the County Legislature approved the borrowing?	?	N/A	
Has NIFA approved the borrowing for this contract?		N/A	

## 5. Provide a brief description (4 to 5 sentences) of the item for which this approval is requested:

New contract to provide equine veterinarian services for the Police Department's Police Service horses. Services shall include, but not be limited to: diagnostic exams; emergency medical care; emergency surgery; all required medications and vaccinations; all required medical testing. The term of the

6. Has the item requested herein followed all proper procedures and thereby approved by the:

Nassau County Attorney as to form

Nassau County Committee and/or Legislature

Date of approval(s) and citation to the resolution where approval for this item was provided:

7. Identify all contracts (with dollar amounts) with this or an affiliated party within the prior 12 months:

Contract ID	Date	Amount

### **AUTHORIZATION**

To the best of my knowledge, I hereby certify that the information contained in this Contract Approv al Request Form and any additional information submitted in connection with this request is true an d accurate and that all expenditures that will be made in reliance on this authorization are in conformance with the Nassau County Approved Budget and not in conflict with the Nassau County Multi-Year Financial Plan. I understand that NIFA will rely upon this information in its official deliberation s.

**IQURESHI** 

14-JAN-20

**Authenticated User** 

**Date** 

## **COMPTROLLER'S OFFICE**

To the best of my knowledge, I hereby certify that the information listed is true and accurate and is in conformance with the Nassau County Approved Budget and not in conflict with the Nassau County Multi-Year Financial Plan.

Regarding funding, please check the correct response:

\_I certify that the funds are available to be encumbered pending NIFA approval of this contract.

If this is a capital project:

I certify that the bonding for this contract has been approved by NIFA.

Budget is available and funds have been encumbered but the project requires NIFA bonding authorization

Authenticated User

Date

**NIFA** 

Amount being approved by NIFA: \_

Payment is not guaranteed for any work commenced prior to this approval.

Authenticated User

Date

NOTE: All contract submissions MUST include the County's own routing slip, current NIFS pri ntouts for all relevant accounts and relevant Nassau County Legislature communication documents and relevant supplemental information pertaining to the item requested herein.

NIFA Contract Approval Request Form MUST be filled out in its entirety before being submitted to NIFA for review.

NIFA reserves the right to request additional information as needed.

Jack Schnirman Comptroller



## OFFICE OF THE COMPTROLLER

240 Old Country Road Mineola, New York 11501

# COMPTROLLER APPROVAL FORM FOR PERSONAL, PROFESSIONAL OR HUMAN SERVICES CONTRACTS

Attach this form along with all personal, professional or human services contracts, contract renewals, extensions and amendments.

CONTRACTOR NAME: Cornell Ruffian Equine Specialists
CONTRACTOR ADDRESS: 111 Plainfield Ave., Elmont, NY 11103
FEDERAL TAX ID #:
Instructions: Please check the appropriate box ("\sum") after one of the following roman numerals, and provide all the requested information.
I.   The contract was awarded to the lowest, responsible bidder after advertisement for sealed bids. The contract was awarded after a request for sealed bids was published in [newspaper] on [date]. The sealed bids were publicly opened on [date] [#] of sealed bids were received and opened.
II. The contractor was selected pursuant to a Request for Proposals.  The Contract was entered into after a written request for proposals was issued on Oct. 30, 2018 (reissue date date). Potential proposers were made aware of the availability of the RFP by advertisement in Newsday [newspaper], posting on industry websites, via email to interested parties and by publication on the County procurement website. Proposals were due on Nov. 13, 2018 [date]. 4 [state #] proposals were received and evaluated. The evaluation committee consisted of: Three (3) members of the Nassau County Police Department's Mounted Unit, and one (1) member of the Police Department's Legal Bureau.
(list # of persons on committee and their respective departments). The proposals were scored and ranked. As a result of the scoring and ranking, the highest-ranking proposer was selected.

The crenev	This is a renewal, extension or amendment of an existing contract.  contract was originally executed by Nassau County on [date]. This is a wal or extension pursuant to the contract, or an amendment within the scope of the contract or RFP es of the relevant pages are attached). The original contract was entered into
of the	[describe irement method, i.e., RFP, three proposals evaluated, etc.] Attach a copy of the most recent evaluation a contractor's performance for any contract to be renewed or extended. If the contractor has not yed a satisfactory evaluation, the department must explain why the contractor should nevertheless be ted to continue to contract with the county.
prop depa	Pursuant to Executive Order No. 1 of 1993, as amended, at least three osals were solicited and received. The attached memorandum from the rtment head describes the proposals received, along with the cost of each osal.
	A. The contract has been awarded to the proposer offering the lowest cost proposal; OR:
	B. The attached memorandum contains a detailed explanation as to the reason(s) why the contract was awarded to other than the lowest-cost proposer. The attachment includes a specific delineation of the unique skills and experience, the specific reasons why a proposal is deemed superior, and/or why the proposer has been judged to be able to perform more quickly than other proposers.
mem	Pursuant to Executive Order No. 1 of 1993 as amended, the attached orandum from the department head explains why the department did not nat least three proposals.
	A. There are only one or two providers of the services sought or less than three providers submitted proposals. The memorandum describes how the contractor was determined to be the sole source provider of the personal service needed or explains why only two proposals could be obtained. If two proposals were obtained, the memorandum explains that the contract was awarded to the lowest cost proposer, or why the selected proposer offered the higher quality proposal, the proposer's unique and special experience, skill, or expertise, or its availability to perform in the most immediate and timely manner.
	B. The memorandum explains that the contractor's selection was dictated by the terms of a federal or New York State grant, by legislation or by a court order. (Copies of the relevant documents are attached).
	C. Pursuant to General Municipal Law Section 104, the department is purchasing the services required through a New York State Office of General Services contract no, and the attached memorandum explains how the purchase is within the scope of the terms of that contract

☐ D. Pursuant to General Municipal Law Section 119-0, the department is purchasing the services required through an inter-municipal agreement.
VI.  This is a human services contract with a not-for-profit agency for which a competitive process has not been initiated. Attached is a memorandum that explains the reasons for entering into this contract without conducting a competitive process, and details when the department intends to initiate a competitive process for the future award of these services. For any such contract, where the vendor has previously provided services to the county, attach a copy of the most recent evaluation of the vendor's performance. If the contractor has not received a satisfactory evaluation, the department must explain why the contractor should nevertheless be permitted to contract with the county.
In certain limited circumstances, conducting a competitive process and/or completing performance evaluations may not be possible because of the nature of the human services program, or because of a compelling need to continue services through the same provider. In those circumstances, attach an explanation of why a competitive process and/or performance evaluation is inapplicable.
VII. This is a public works contract for the provision of architectural, engineering or surveying services. The attached memorandum provides details of the department's compliance with Board of Supervisors' Resolution No. 928 of 1993, including its receipt and evaluation of annual Statements of Qualifications & Performance Data, and its negotiations with the most highly qualified firms.
Instructions with respect to Sections VIII, IX and X: All Departments must check the box for VIII.
Then, check the box for either IX or X, as applicable. VIII. ☑ Participation of Minority Group Members and Women in Nassau County
Contracts. The selected contractor has agreed that it has an obligation to utilize best efforts to hire MWBE sub-contractors. Proof of the contractual utilization of best efforts as outlined in Exhibit "EE" may be requested at any time, from time to time, by the Comptroller's Office prior to the approval of claim vouchers.
IX. Department MWBE responsibilities. To ensure compliance with MWBE requirements as outlined in Exhibit "EE", Department will require vendor to submit list of sub-contractor requirements prior to submission of the first claim voucher, for services under this contract being submitted to the Comptroller.
X.   Wendor will not require any sub-contractors.
In addition, if this is a contract with an individual or with an entity that has only one or two employees:  \[ \] a review of the exiteria set forth by the Internal Revenue Service, Revenue Ruling No. 87-41, 1987-1 C.B. 296, attached as Appendix A to the Comptroller's Memorandum, dated February 13, 2004, concerning independent contractors and employees indicates that the contractor would not be considered an employee for federal tax purposes.
Department Head Signature
11/27/2019 Date



### **COUNTY OF NASSAU**

## POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

1. Has the vendor or any corporate officers of the vendor provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator?

YES	NO X If yes, to what campaign cor	nmittee?			
2. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.					
The und	The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.				
The undersigned further certifies and affirms that the contribution(s) to the campaign committees identified above were made freely and without duress, threat or any promise of a governmental benefit or in exchange for any benefit or remuneration.					
	ically signed and certified at the date and time indic n Ducharme [JNN25@CORNELL.EDU]	ated by:			
Dated:	02/20/2020 01:36:26 PM	Vendor:	Cornell University - Cornell Ruffian Equine Specialists		
		Title:	Chief Medical Officer		

## PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

1.	Principal Name: Norm Ducharme  Date of birth:
	Home address:
	Country: State/Province/Territory: Zip/Postal Code: Zip/Postal Code:
	Business Address: 111 Plainfield Ave.
	City: Elmont State/Province/Territory: NY Zip/Postal Code: 11003
	Country US
	Telephone: 5164884510
	Other present address(es):
	City: State/Province/Territory: Zip/Postal Code:
	Country:
	Telephone:
	List of other addresses and telephone numbers attached
0	
2,	Positions held in submitting business and starting date of each (check all applicable)
	President
	Chairman of Board Treasurer Shareholder
	Chief Exec. Officer 01/01/2017 Secretary
	Chief Financial Officer
	Vice President
	(Other)
3.	Do you have an an iff the act in the last of the last
ა.	Do you have an equity interest in the business submitting the questionnaire?  YES NO X If Yes, provide details
	YES NO X If Yes, provide details.
4.	Are there any outstanding loans, guarantees or any other form of security or lease or any other type of
	contribution made in whole or in part between you and the business submitting the guestionnaire?
	YES NO X If Yes, provide details.
5.	Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization
	other than the one submitting the questionnaire?
	YES NO X If Yes, provide details.
	1.10 / A   II 100, provide details.

YES	NO X If Yes, provide details.
ו any	ffirmative answer is required below whether the sanction arose automatically, by operation of law, or a action taken by a government agency. Provide a detailed response to all questions checked "YES". If pace, photocopy the appropriate page and attach it to the questionnaire.
In the	e past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Secti ich you have been a principal owner or officer:
a.	
۵.	Been debarred by any government agency from entering into contracts with that agency?  YES NO X If yes, provide an explanation of the circumstances and corrective action
	YES NO X If yes, provide an explanation of the circumstances and corrective action taken.
	MINOTE
b.	Been declared in default and/or terminated for cause on any contract, and/or had any contracts
	cancelled for cause?
	YES NO X If yes, provide an explanation of the circumstances and corrective action
	taken.
С.	Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not
	limited to, failure to meet pre-qualification standards?  YES NO X If yes, provide an explanation of the circumstances and corrective action
	" yes, provide an explanation of the circumstances and corrective action
Ī	taken.
L	
ı.	Reen suspended by any government agency from entering into any sector of the contract of the c
	Been suspended by any government agency from entering into any contract with it; and/or is any act pending that could formally debar or otherwise affect such business's ability to bid or propose on
	contract?
	YES NO X If yes, provide an explanation of the circumstances and corrective action
	taken.

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?

a.	Is there any felony charge pending against you?  YES NO X If yes, provide an explanation of the circumstances and corrective actio taken.
b.	Is there any misdemeanor charge pending against you?  YES NO X If yes, provide an explanation of the circumstances and corrective action taken.
C.	Is there any administrative charge pending against you?  YES NO X If yes, provide an explanation of the circumstances and corrective action taken.
d.	In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crian element of which relates to truthfulness or the underlying facts of which related to the conduct of business? Y YES NO X If yes, provide an explanation of the circumstances and corrective action taken.
e.	In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor?  YES NO X If yes, provide an explanation of the circumstances and corrective action taken.
Ī,	In the past 5 years, have you been found in violation of any administrative or statutory charges?  YES NO X If yes, provide an explanation of the circumstances and corrective action taken.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?

	YES NO X If yes, provide an explanation of the circumstances and corrective action taken.
1.	In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer?
	YES NO X If yes, provide an explanation of the circumstances and corrective action taken.
2.	In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5
	had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?  YES  NO  X  If yes, provide an explanation of the circumstances and corrective action taken.

I, Norm Ducharme , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges.
I, Norm Ducharme , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity.
CERTIFICATION
A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.
Cornell University - Cornell Ruffian Equine Specialists
Name of submitting business
Electronically signed and certified at the date and time indicated by: Norm Duchmarme [NGD1@CORNELL.EDU]
Chief Medical Officier
Title
03/31/2020 04:00:41 PM Date

## **Business History Form**

The contract shall be awarded to the responsible proposer who, at the discretion of the County, taking into consideration the reliability of the proposer and the capacity of the proposer to perform the services required by the County, offers the best value to the County and who will best promote the public interest.

In addition to the submission of proposals, each proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the Proposal.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks.

(USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS).

Date:	02/2	20/2020					
1)	Proposer'	's Legal Name:	Cornell Universi	ty - Cornell Ruffian Ed	quin	ne Specialists	
2)	Address	of Place of Business	s: 111 Plainf	ïeld Ave			
	City:	Elmont	Sta	te/Province/Territory:	: <u>N</u>	IY Zip/Postal Code: 11003	
	Country:	US					
3)	Mailing Ad	ddress (if different):	1				
	City:					Zip/Postal Code:	
	Country:						
	Phone:						
-	Does the I	business own or rei	nt its facilities?	Own		If other, please provide details:	
L							
4)	Dun and E	Bradstreet number:	872612445				
5)	Federal I.I	D. Number:					
6)	The propo	ser is a: Other		(Describe	e) ,	A satellite hospital of Cornell University	
7)	Does this I	business share offic	ce space, staff, or	equipment expenses	s wit	th any other business?	
Ē	YES	NO X If y	es, please provid	le details:			_
_							
۵۱ .	Daga 4bir l						
8) [	YES	ousiness control on NO X If y	e or more other b es, please provid	ousinesses? le details:			
9) (	Does this b	ousiness have one one one of	or more affiliates,	and/or is it a subsidia	ary o	of, or controlled by, any other business?	?
		e clinic/hospital of (	es, please provid Cornell University	e uetaiis:			$\neg$

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10)	Has the proposer ever had a bond or surety cancelled or forfeited, or a contract with Nassau County or any other government entity terminated?  YES NO X If yes, state the name of bonding agency, (if a bond), date, amount of bond and reason for such cancellation or forfeiture: or details regarding the termination (if a contract).
11)	Has the proposer, during the past seven years, been declared bankrupt?  YES NO X If yes, state date, court jurisdiction, amount of liabilities and amount of assets
12)	In the past five years, has this business and/or any of its owners and/or officers and/or any affiliated business, been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency? And/or, in the past 5 years, have any owner and/or officer of any affiliated business been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency, where such investigation was related to activities performed at, for, or on behalf of an affiliated business.  YES NOX If yes, provide details for each such investigation, an explanation of the
	circumstances and corrective action taken.
13)	In the past 5 years, has this business and/or any of its owners and/or officers and/or any affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies? And/or, in the past 5 years, has any owner and/or officer of an affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies, for matters pertaining to that individual's position at or relationship to an affiliated business.  YES NOX If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.
14)	Has any current or former director, owner or officer or managerial employee of this business had, either before or during such person's employment, or since such employment if the charges pertained to events that allegedly occurred during the time of employment by the submitting business, and allegedly related to the conduct of that business:  a) Any felony charge pending?  YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.
I	
[	b) Any misdemeanor charge pending? YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.

c) In the past 10 years, you been convicted, after trial or by plea, of any felony and/or any other crime, an Page 2 of 6 Rev. 3-2016

	YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.		
	d) In the past 5 years, been convicted, after trial or by plea, of a misdemeanor?  YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.		
	e) In the past 5 years, been found in violation of any administrative, statutory, or regulatory provisions?  YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.		
15)	In the past (5) years, has this business or any of its owners or officers, or any other affiliated business had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held?  YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken.		
16)	For the past (5) tax years, has this business failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges? YES NO X If yes, provide details for each such year. Provide a detailed response to all questions checked 'YES'. If you need more space, photocopy the appropriate page and attach it to the questionnaire.		
17	Conflict of Interest:  a) Please disclose any conflicts of interest as outlined below. NOTE: If no conflicts exist, please expressly state "No conflict exists."  (i) Any material financial relationships that your firm or any firm employee has that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.  No conflict exists		
	(ii) Any family relationship that any employee of your firm has with any County public servant that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.  No conflict exists		
	(iii) Any other matter that your firm believes may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County.  No conflict exists		

	b)	Please describe any procedures your firm has, or would adopt, to assure the County that a conflict of interest would not exist for your firm in the future.
		CMO is required to fill a conflict of interest statement annually. This statement is reviewed annually by representatives of Cornell University.
Α.	exp	ude a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive erience in your profession. Any prior similar experiences, and the results of these experiences, must be ntified.
	luci	iuneu.
	Hav YES	ve you previously uploaded the below information under in the Document Vault?  NO X
	YES	Topoda Weet Indiade.
	i)	Date of formation; 03/31/2014
	ii)	Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner. If none, explain.
		Owned by Cornell University - not for profit
	iii)	Name, address and position of all officers and directors of the company. If none, explain.
		Dr. Norm Ducharme - Chief Medical Officer Dr. John Pigott - Clinic Director Jill Nordberg - Practice Manager
Vo o	fficers a	and directors from this company have been attached.
	iv)	State of incorporation (if applicable); NY
	v)	The number of employees in the firm;
	vi)	Annual revenue of firm; 3200000
	vii)	Summary of relevant accomplishments  Cornell Ruffian Equine Specialists is the only full service equine hospital on Long Island, NY. As a branch of Cornell University, we have a reputation of providing the highest level of specialty care. Our clientele is diverse, encompassing Olympic athletes, world class race horses, national level performance horses and everyday companions.  Our mission is to serve the horse by providing state-of-the-art care through a team-oriented approach
		that delivers advanced diagnostics, innovative treatment options, and compassionate care. We are

here to work with your primary care veterinarian to optimize your horses' health and performance, no matter what discipline or vocation of choice. Our expertise in medicine, surgery, sports medicine, and emergency care is world-renowned and available to you 24 hours a day, 7 days a week.

Our team consists of leaders in their respective fields who are supported by a dedicated and highly skilled team of licensed veterinary technicians, barn crew and f

- viii) Copies of all state and local licenses and permits.
  - 3 File(s) Uploaded: Dr. Ducharme License.pdf, Dr. Pigott DEA License.pdf, Dr. Pigott's License.pdf
- B. Indicate number of years in business.

5

C. Provide any other information which would be appropriate and helpful in determining the Proposer's capacity and reliability to perform these services.

Cornell Ruffian Equine Specialists is the only full service equine hospital on Long Island, NY. As a branch of Cornell University, we have a reputation of providing the highest level of specialty care. Our clientele is diverse, encompassing Olympic athletes, world class race horses, national level performance horses and everyday companions.

D. Provide names and addresses for no fewer than three references for whom the Proposer has provided similar services or who are qualified to evaluate the Proposer's capability to perform this work.

Company	Client and referring veterinarian		
Contact Person	Dr. Nancy Buonpane		
Address	29 Walker Place		
City	Melville	State/Province/Territory	NY
Country	US		
Telephone	(516) 770-3524		
Fax #			
E-Mail Address	drnancydvm@gmail.com		

Company	Dr. James Hunt and Associates		
Contact Person	Dr. James Hunt		
Address	P.O. Box 030452		
City	Elmont	State/Province/Territory	NY
Country	US		
Telephone	(516) 807-0475		
Fax #			
E-Mail Address	huntdvm@gmail.com		

Company	Client		
Contact Person	Rick Schosberg		
Address	2150 Hempstead Turnpike		
City	Elmont	State/Province/Territory	NY
Country	US		
Telephone	(516) 528-1360		
Fax #			
E-Mail Address	jnn25@cornell.edu		

I, Norm Ducharme willfully or fraudulently made in conr any affiliated entities non-responsible	, hereby acknowledge that a materially false statement ection with this form may result in rendering the submitting business entity and/or e, and, in addition, may subject me to criminal charges.			
knowledge, information and belief; the submission of this form; and that	, hereby certify that I have read and understand all the upplied full and complete answers to each item therein to the best of my nat I will notify the County in writing of any change in circumstances occurring after all information supplied by me is true to the best of my knowledge, information inty will rely on the information supplied in this form as additional inducement to ing business entity.			
CERTIFICATION				
A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES.				
Name of submitting business:	Cornell University - Cornell Ruffian Equine Specialists			
Electronically signed and certified at the date and time indicated by: Dr. Norm Ducharme [JNN25@CORNELL.EDU]				
Chief Medical Officer				
Title				
02/26/2020 08:56:44 AM				
Date				

## Cornell Ruffian Equine Specialists

111 Plainfield Ave.
Elmont, NY 11003
p. 516 488.4510
f. 516 488.4917
www.ruffian.corneli.edu
comellruffian@comell.edu

## Appendix B

## **Program Description and Staffing**

FEIN Number: 150532082

## Parties authorized to discuss proposal:

- Dr. Norm Ducharme
- Jill N. Nordberg

## Staffing Bio's:

- All staff bios are listed on our website at www.ruffian.cornell.edu.
- The bios listed below are of our primary care specialists. We staff primary specialists that on a rotating basis are available and on-call 24/7/365. We also have 4 interns per year. These also are veterinarians that are available and on-call 24/7/365 on a rotating schedule. We have licensed veterinary technicians that provide round the clock care to all of our patients. We have animal attendants that focus on the husbandry of each patient and their specific needs. We have front office personnel that handle all of our accounts and the daily audits of our patient files.

## 1. John Pigott, DVM, MS, DACVS

Dr. John Pigott is a specialist veterinary surgeon and 2009 graduate of the College of Veterinary Medicine at Cornell University. He completed his equine surgery residency training at The Ohio State University and has performed research in equine orthopedics, regenerative medicine and upper airway disorders. Before moving to CRES, Dr. Pigott was employed by a private practice referral hospital in Wisconsin where he worked in both elective and emergency orthopedic and soft tissue surgery, advanced imaging and lameness. Dr. Pigott joined the team at CRES in 2015 and has notable expertise in orthopedic surgery, sinus surgery, complicated lameness, advanced imaging and regenerative medicine. He has an extensive history as a competitor in the hunter/jumper field, and utilizes this unique knowledge daily as he approaches cases across disciplines. As a recognized specialist, Dr. Pigott is an invited speaker at both national and international conferences on the topics of regenerative medicine, lameness and orthopedics.

## 2. Norm G. Ducharme, DMV, MSc, DACVS

Dr. Norm Ducharme, James Law Professor of Large Animal Surgery at the Cornell Unicollege of Veterinary Medicine, is Chief Medical Officer at Cornell Ruffian Equine Spec

board-certified large animal surgeon at Cornell University Hospital for Animals (CUHA) and CRES, he has dedicated much of his clinical and research effort to understanding the equine upper airway. His research has focused on methods of identifying and quantifying dynamic upper airway obstructions, defining the anatomical structures and their function, and developing surgical and other methods for treating equine upper airway diseases. He graduated from veterinary college at the University of Montreal in 1979 and completed his internship and residency at Cornell University's College of Veterinary Medicine in 1982. He received his Master of Science degree from the University of Guelph and became a Diplomate of the American College of Veterinary Surgeons (ACVS) in 1985. Ducharme was medical director at CUHA from 1990 to 2014. Ducharme served as president and chair of the board of the ACVS from 2005 to 2007 and was inducted in the University of Kentucky Hall of Fame for Equine research in 2016.

## 3. Michelle L. Delco, DVM, PhD, DACVS

Dr. Michelle Delco received her DVM from Cornell University College of Veterinary Medicine in 2002. After completing a residency in Equine Surgery at University of California, Davis to become board certified by the American College of Veterinary Surgeons, Dr. Delco served as an Assistant Professor of Equine Surgery at Kansas State University. In 2008, she joined a private equine referral practice near Seattle, WA, where her primary focus was minimally invasive surgery and the diagnosis and treatment of complicated sports injuries in equine athletes. In 2012, Dr. Delco was awarded a research fellowship supported by the National Institutes of Health and returned to Cornell University to pursue her PhD degree in the Graduate Field of Comparative Biomedical Sciences, with minor fields of study in Biomedical Engineering and Biochemistry, Molecular & Cell Biology. In 2016 she was awarded a 5-year National Institutes of Health Clinical Scientist Career Development Award (K08). After completing her PhD, Dr. Delco was appointed Assistant Research Professor in the Department of Clinical Sciences at Cornell University College of Veterinary Medicine, and also serves as a Large Animal Staff Surgeon for the Cornell University Hospital for Animals in Ithaca, NY, and an Equine Surgeon at Cornell Ruffian Equine Specialists.

## 4. Edward Earley DVM, AVDC/Eq

Dr. Edward Earley of Large Animal Dentistry and Oral Surgery at Cornell University College of Veterinary Medicine, provides dental services at Cornell Ruffian Equine Specialties. As a board certified Equine Dentist and Oral Surgeon, he treats a wide range of clinical conditions utilizing orthodontic, periodontal, endodontic, restorative, oral medicine and oral surgery procedures. He promotes minimal, conservative and focal odontoplasty (floating) correlated to a specific oral diagnosis which helps to promote longevity of the equine dentition. Dr. Earley has a developing interest in research for the increasingly prevalent disease of EOTRH (Equine Odontoclastic Tooth Resorption and Hypercementosis). As a graduate from the College of Veterinary Medicine at Michigan State University in 1985, he moved to North Central Pennsylvania and established a veterinary practice in Williamsport. In 2004, he started advanced training in Equine Dentistry through the Alternate Pathway Program of the Academy of Veterinary Dentistry (AVD). In 2008, he completed the program and became an AVD Equine Fellow. In 2010, Dr. Earley started a Non-Species Specific Alternate Pathway Residency Program at Cornell University. In 2014, he became a founding Equine Diplomate of the American Veterinary Dental College (AVDC/Eq). Over the years he has participated if committees through the American Association of Equine Practitioners (AAEP), AVD a AVDC/Eq to promote and develop Equine Dentistry within the Veterinary Profession.

## 5. Lisa A. Fortier, DVM, PhD

Lisa A. Fortier, DVM, PhD, Dipl. ACVS, is currently a professor of Large Animal Surgery at Cornell University's College of Veterinary Medicine. Fortier received her DVM from Colorado State University, and completed her PhD and surgical residency training at Cornell University. She has received numerous awards from organizations including the International Cartilage Repair Society, the Orthopaedic Research Society, and Cornell's Pfizer Award for Research Excellence. Fortier serves on several scientific journal advisory boards, NIH review panels, the Morris Animal Research Council, and is President of the International Cartilage Repair Society. She has exceptionally mentored numerous veterinary students, undergraduates, graduate students, and surgical residents whom many have gone onto prestigious programs. Fortier continues to strive for excellence in her research, surgical expertise, and mentorship.

## 6. Alan J. Nixon, BVSc, MS, DACVS

Dr. Alan Nixon has been practicing veterinary orthopedic surgery since 1979 with a focus on cartilage, bone, tendon and ligament diseases. He received his veterinary degree from the University of Sydney in 1978 and completed a surgical residency and research degree at Colorado State University in 1983. After five years in the Department of Surgical Sciences at the University of Florida, he came to Cornell University in 1988. He is certified by the American College of Veterinary Surgeons.

## 7. Jill N. Nordberg, BS LVT

Practice Manager at CRES as well as a licensed technician who oversees the anesthesia department.

Our mission is to serve the horse by providing state-of-the-art care through a team-oriented approach that delivers advanced diagnostics, innovative treatment options, and compassionate care. We are here to work with your primary care veterinarian to optimize your horses' health and performance, no matter what discipline or vocation of choice. Our expertise in medicine, surgery, sports medicine, and emergency care is world-renowned and available to you 24 hours a day, 7 days a week.

Our team consists of leaders in their respective fields who are supported by a dedicated and highly skilled team of licensed veterinary technicians, barn crew and friendly reception staff. All horses are seen by a veterinary specialist who has the skill and training to meet your horses' specific health care needs. We are committed to resolving your horses' health or performance concerns and pledge to effectively communicate with professionalism and empathy.



# Cornell Ruffian Equine Specialists

We are unable to provide verified financial statements for this purpose. Considering we are state funded institution we do not have records of that on site here at Cornell Ruffian.

### **COUNTY OF NASSAU**

## CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all member officers of limited liability companies (attach additional sheets if necessary):  First Name	Elmont		State/Province/Territory: _	NY	Zip/Postal Code:	11003
3. Type of Business: Other (specify) Not For Profit  4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or county body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all member officers of limited liability companies (attach additional sheets if necessary):  First Name Last Name Nordberg  MI Suffix  Address 111 Plainfield Ave  City Elmont State/Province/Territory: NY Zip/Postal Code: Country  Position Practice Manager	y: <u>US</u>					
4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or cobody, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all member officers of limited liability companies (attach additional sheets if necessary):  First Name Last Name MI Address 111 Plainfield Ave City Elmont State/Province/Territory: NY Zip/Postal Code: Country Position Practice Manager	y's Vendor Ide	ntification Number				
body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all member officers of limited liability companies (attach additional sheets if necessary):  First Name Last Name MI Address City City Country Position  Last Name Address Dill Suffix Suffix Attach additional sheets if necessary):  Suffix Suffix Attach additional sheets if necessary):	3. Type of Business: Other (specify) Not For Profit					
Last Name MI Address Address City Country Position  Nordberg Suffix Suffix Suffix Suffix Suffix State/Province/Territory: NY Zip/Postal Code: Practice Manager	4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or comparable body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all members and officers of limited liability companies (attach additional sheets if necessary):					
MI Address City Country Position  Suffix  Suffix  Suffix  State/Province/Territory: NY Zip/Postal Code:  Practice Manager	ıme Jill					
Address City Elmont Country Position  The practice Manager  State/Province/Territory: NY Zip/Postal Code:  Practice Manager	me Nordb	erg				
City Elmont State/Province/Territory: NY Zip/Postal Code: Country US Position Practice Manager	4445	1 6: 11 6	Suffix			
Country US Position Practice Manager	-		Otati (D. ) (T. )	h 13 /		
Position Practice Manager			State/Province/Territory	: <u>NY</u>	Zip/Postal Code:	11003
First Name John		e Manager				
First Name John						
#	-					
Last Name Pigott MI Suffix	me Pigott		0.45			
MI Suffix Address 111 Plainfield Ave	111 DI	ainfield Ave	Sumix	-		
			State/Province/Territory	· NV	Zin/Postal Code:	11003
Country US			Glaton rounder remiery	-	Zip/i Ostal Code.	11003
Position Clinic Director	Elmon					

No shareholders, members, or partners have been attached to this form.

6. List all affiliated and related companies and their relationship to the firm entered on line 1. above (if none, enter "None"). Attach a separate disclosure form for each affiliated or subsidiary company that may take part in the performance of this contract. Such disclosure shall be updated to include affiliated or subsidiary companies not previously disclosed that participate in the performance of the contract.

Not wastigoble of CDEC other than Compute the Computer of the Computer of the CDEC of the Computer of the CDEC of
Not applicable at CRES other than Cornell University
7. List all lobbyists whose services were utilized at any stage in this matter (i.e., pre-bid, bid, post-bid, etc.). If none, ente "None." The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.
Are there lobbyists involved in this matter? YES NO X
(a) Name, title, business address and telephone number of lobbyist(s):
None at CRES
Notice at ONLS
(b) Describe lobbying activity of each lobbyist. See below for a complete description of lobbying activities.  Not Applicable  (c) List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New
York State):
None
Hone
9 VEDICATION. This postion much be signed by a mississ of all the second and the
8. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.
The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.
Electronically signed and certified at the date and time indicated by: Norm Ducharme [JNN25@CORNELL.EDU]

Dated:

Title:

02/28/2020 01:12:57 PM

Chief Medical Officer

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

### CONTRACT FOR SERVICES

THIS AGREEMENT, (together with the schedules, appendices, attachments and exhibits, if any, this "Agreement"), dated as of the date (the "Effective Date") that this Agreement is executed by Nassau County, is entered into by and between (i) Nassau County, a municipal corporation having its principal office at 1550 Franklin Avenue, Mineola, New York 11501 (the "County"), acting for and on behalf of the Nassau County Police Department having its principal office at 1490 Franklin Avenue, Mineola, New York 11501 (the "Department") and (ii) Cornell University, on behalf of Cornell Ruffian Equine Specialists, having an office at 111 Plainfield Avenue, Elmont, New York 11003 (the "Contractor").

#### WITNESSETH:

WHEREAS, the County desires to hire the Contractor to perform the services described in this Agreement; and

WHEREAS, the Contractor desires to perform the services described in this Agreement; and

WHEREAS, this is a personal service contract within the intent and purview of Section 2206 of the County Charter;

NOW, THEREFORE, in consideration of the promises and mutual covenants contained in this Agreement, the parties agree as follows:

- 1. <u>Term.</u> This Agreement shall commence on January 1, 2019 and terminate on December 31, 2021, unless sooner terminated in accordance with the provisions of this Agreement; provided, however, that upon the mutual consent of the County and the Contractor this Agreement may be renewed for two (2) additional one (1) year periods.
- 2. <u>Services</u>. (a) The services to be provided by the Contractor under this Agreement shall consist of equine veterinarian services for the Department's Police Service Horses (the "<u>Services</u>"). The Services shall include, but not be limited to:
  - (i) diagnostic exams;
  - (ii) emergency medical care:
  - (iii) emergency surgery;
  - (iv) all required medications and vaccinations;
  - (v) all required medical testing, including, but not limited to, x-rays and sonograms; and
  - (vi) other related services to promote the health and well-being of the horses assigned to the Department's Mounted Unit.
- 3. Payment. (a) Amount of Consideration. The maximum amount to be paid to the Contractor as full consideration for the Contractor's Services under this Agreement shall not exceed the sum of Sixty Thousand Dollars (\$60,000.00) (the "Maximum Amount"), which shall be payable in accordance with the fee schedule for Services attached hereto as "Appendix A." Appendix A may be modified upon the prior written approval of the Department to add medications and/or Services determined to be necessary by the Department and Contractor to prevent, diagnose, or treat an illness, injury, condition, disease, or its symptoms. Under no circumstances will the Contractor be required to provide Services in excess of the Maximum Amount.

- (b) <u>Vouchers</u>; <u>Voucher Review</u>, <u>Approval and Audit</u>. Payments shall be made to the Contractor in arrears and shall be contingent upon (i) the Contractor submitting a claim voucher (the "Voucher") in a form satisfactory to the County, that (a) states with reasonable specificity the services provided and the payment requested as consideration for such services, (b) certifies that the services rendered and the payment requested are in accordance with this Agreement, and (c) is accompanied by documentation satisfactory to the County supporting the amount claimed, and (ii) review, approval and audit of the Voucher by the Department and/or the County Comptroller or his or her duly designated representative (the "Comptroller").
- (c) <u>Timing of Payment Claims</u>. The Contractor shall submit claims no later than three (3) months following the County's receipt of the services that are the subject of the claim and no more frequently than once a month.
- (d) No Duplication of Payments. Payments under this Agreement shall not duplicate payments for any work performed or to be performed under other agreements between the Contractor and any funding source including the County.
- (e) <u>Payments in Connection with Termination or Notice of Termination</u>. Unless a provision of this Agreement expressly states otherwise, payments to the Contractor following the termination of this Agreement shall not exceed payments made as consideration for services that were (i) performed prior to termination, (ii) authorized by this Agreement to be performed, and (iii) not performed after the Contractor received notice that the County did not desire to receive such services.
- 4. Independent Contractor. The Contractor is an independent contractor of the County. The Contractor shall not, nor shall any officer, director, employee, servant, agent or independent contractor of the Contractor (a "Contractor Agent"), be (i) deemed a County employee, (ii) commit the County to any obligation, or (iii) hold itself, himself, or herself out as a County employee or Person with the authority to commit the County to any obligation. As used in this Agreement the word "Person" means any individual person, entity (including partnerships, corporations and limited liability companies), and government or political subdivision thereof (including agencies, bureaus, offices and departments thereof).
- 5. No Arrears or Default. The Contractor is not in arrears to the County upon any debt or contract and it is not in default as surety, contractor, or otherwise upon any obligation to the County, including any obligation to pay taxes to, or perform services for or on behalf of, the County.
- 6. Compliance with Law. (a) Generally. The Contractor shall comply with any and all applicable Federal, State and local Laws, including, but not limited to those relating to conflicts of interest, human rights, a living wage, disclosure of information and vendor registration in connection with its performance under this Agreement. In furtherance of the foregoing, the Contractor is bound by and shall comply with the terms of Appendix EE attached hereto and with the County's registration protocol. As used in this Agreement the word "Law" includes any and all statutes, local laws, ordinances, rules, regulations, applicable orders, and/or decrees, as the same may be amended from time to time, enacted, or adopted.

- (b) <u>Nassau County Living Wage Law.</u> Pursuant to LL 1-2006, as amended, and to the extent that a waiver has not been obtained in accordance with such law or any rules of the County Executive, the Contractor agrees as follows:
  - (i) Contractor shall comply with the applicable requirements of the Living Wage Law, as amended;
  - (ii) Failure to comply with the Living Wage Law, as amended, may constitute a material breach of this Agreement, the occurrence of which shall be determined solely by the County. Contractor has the right to cure such breach within thirty days of receipt of notice of breach from the County. In the event that such breach is not timely cured, the County may terminate this Agreement as well as exercise any other rights available to the County under applicable law.
  - (iii) It shall be a continuing obligation of the Contractor to inform the County of any material changes in the content of its certification of compliance, attached to this Agreement as Appendix L, and shall provide to the County any information necessary to maintain the certification's accuracy.
- (c) Records Access. The parties acknowledge and agree that all records, information, and data ("Information") acquired and/or created in connection with performance or administration of this Agreement shall be used and disclosed solely for the purpose of performance and administration of the contract or as required by law. The Contractor acknowledges that Contractor Information in the County's possession may be subject to disclosure under Article 6 of the New York State Public Officer's Law ("Freedom of Information Law" or "FOIL"). In the event that such a request for disclosure is made, the County shall make reasonable efforts to notify the Contractor of such request prior to disclosure of the Information so that the Contractor may take such action as it deems appropriate.
- (d) Prohibition of Gifts. In accordance with County Executive Order 2-2018, the Contractor shall not offer, give, or agree to give anything of value to any County employee, agent, consultant, construction manager, or other person or firm representing the County (a "County Representative"), including members of a County Representative's immediate family, in connection with the performance by such County Representative of duties involving transactions with the Contractor on behalf of the County, whether such duties are related to this Agreement or any other County contract or matter. As used herein, "anything of value" shall include, but not be limited to, meals, holiday gifts, holiday baskets, gift cards, tickets to golf outings, tickets to sporting events, currency of any kind, or any other gifts, gratuities, favorable opportunities or preferences. For purposes of this subsection, an immediate family member shall include a spouse, child, parent, or sibling. The Contractor shall include the provisions of this subsection in each subcontract entered into under this Agreement.
- (e) <u>Disclosure of Conflicts of Interest</u>. In accordance with County Executive Order 2-2018, the Contractor has disclosed as part of its response to the County's Business History Form, or other disclosure form(s), any and all instances where the Contractor employs any spouse, child, or parent of a County employee of the agency or department that contracted or procured the goods and/or services described under this Agreement. The Contractor shall have a continuing obligation, as circumstances arise, to update this disclosure throughout the term of this Agreement.
  - 7. Ownership of Information. All County Information provided to Contractor by the

County shall remain the property of the County. All reports, documents or information created by Contractor on behalf of the County shall be deemed the property of the County. Upon the County's request, completion of Services, or termination of this Agreement, all such County Information, reports, documents or information shall be returned to the County, provided however, that Contractor retains the right to copy such reports, documents or information created by Contractor on behalf of the County.

- 8. <u>Minimum Service Standards</u>. Regardless of whether required by Law: (a) The Contractor shall, and shall cause Contractor Agents to, conduct its, his or her activities in connection with this Agreement so as not to endanger or harm any Person or property.
- (b) The Contractor shall deliver Services under this Agreement in a professional manner consistent with the best practices of the industry in which the Contractor operates. The Contractor shall take all actions necessary or appropriate to meet the obligation described in the immediately preceding sentence, including obtaining and maintaining, and causing all Contractor Agents to obtain and maintain, all approvals, licenses, and certifications ("Approvals") necessary or appropriate in connection with this Agreement.
- 9. <u>Indemnification; Defense; Cooperation.</u> (a) The Contractor shall be solely responsible for and shall indemnify and hold harmless the County, the Department and its officers, employees, and agents (the "<u>Indemnified Parties</u>") from and against any and all liabilities, losses, costs, expenses (including, without limitation, attorneys' fees and disbursements) and damages ("<u>Losses</u>"), directly arising out of the negligence or willful misconduct in the course of providing the Services under this Agreement by the Contractor or a Contractor agent; <u>provided, however</u>, that the Contractor shall not be responsible for that portion, if any, of a Loss that is caused by the negligence of the County.
- (b) The Contractor shall, upon the County's demand, promptly and diligently defend, at the Contractor's own risk and expense, any and all suits, actions, or proceedings which may be brought or instituted against one or more Indemnified Parties for which the Contractor is responsible under this Section, and, further to the Contractor's indemnification obligations, the Contractor shall pay and satisfy any judgment, decree, loss or settlement in connection therewith.
- (c) The Contractor shall, and shall cause Contractor Agents to, cooperate with the County and the Department in connection with the investigation, defense or prosecution of any action, suit or proceeding in connection with this Agreement, including the acts or omissions of the Contractor and/or a Contractor Agent in connection with this Agreement.
  - (d) The provisions of this Section shall survive the termination of this Agreement.
- 10. Insurance. (a) Types and Amounts. The Contractor shall obtain and maintain throughout the term of this Agreement, at its own expense: (i) one or more policies for commercial general liability insurance, which policy(ies) shall name "Nassau County" as an additional insured and have a minimum single combined limit of liability of not less than One Million Dollars (\$1,000,000.00) per occurrence and Two Million Dollars (\$2,000,000.00) aggregate coverage, (ii) if contracting in whole or part to provide professional services, one or more policies for professional liability insurance, which policy(ies) shall have a minimum single limit liability of not less One Million Dollars (\$1,000,000.00) per claim (iii) compensation insurance for the benefit of the Contractor's employees ("Workers' Compensation Insurance"), which insurance is in compliance with the New York State Workers' Compensation Law, and (iv) such additional insurance as the County may from time to time specify.

- (b) Acceptability; Deductibles; Subcontractors. All insurance obtained and maintained by the Contractor pursuant to this Agreement shall be (i) written by one or more commercial insurance carriers licensed to do business in New York State and acceptable to the County, and which is (ii) in form and substance acceptable to the County. The Contractor shall be solely responsible for the payment of all deductibles to which such policies are subject. The Contractor shall require any subcontractor hired in connection with this Agreement to carry insurance with the same limits and provisions required to be carried by the Contractor under this Agreement.
- (c) <u>Delivery; Coverage Change; No Inconsistent Action</u>. Prior to the execution of this Agreement, copies of current certificates of insurance evidencing the insurance coverage required by this Agreement shall be delivered to the Department. Not less than thirty (30) days prior to the date of any expiration or renewal of, or actual, proposed or threatened reduction or cancellation of coverage under, any insurance required hereunder, the Contractor shall provide written notice to the Department of the same and deliver to the Department renewal or replacement certificates of insurance. The Contractor shall cause all insurance to remain in full force and effect throughout the term of this Agreement and shall not take or omit to take any action that would suspend or invalidate any of the required coverages. The failure of the Contractor to maintain Workers' Compensation Insurance shall render this contract void and of no effect. The failure of the Contractor to maintain the other required coverages shall be deemed a material breach of this Agreement upon which the County reserves the right to consider this Agreement terminated as of the date of such failure.
- 11. Assignment; Amendment; Waiver; Subcontracting. This Agreement and the rights and obligations hereunder may not be in whole or part (i) assigned, transferred or disposed of, (ii) amended, (iii) waived, or (iv) subcontracted, without the prior written consent of the County Executive or his or her duly designated deputy (the "County Executive"), and any purported assignment, other disposal or modification without such prior written consent shall be null and void. The failure of a party to assert any of its rights under this Agreement, including the right to demand strict performance, shall not constitute a waiver of such rights.
- 12. <u>Termination</u>. (a) <u>Generally</u>. This Agreement may be terminated (i) for any reason by the County upon thirty (30) days' written notice to the Contractor, (<u>ii</u>) for "Cause" by the County immediately upon the receipt by the Contractor of written notice of termination, (<u>iii</u>) upon mutual written Agreement of the County and the Contractor, and (<u>iv</u>) in accordance with any other provisions of this Agreement expressly addressing termination.

As used in this Agreement the word "Cause" includes: (i) a breach of this Agreement; (ii) the failure to obtain and maintain in full force and effect all Approvals required for the services described in this Agreement to be legally and professionally rendered; and (iii) the termination or impending termination of federal or state funding for the services to be provided under this Agreement.

- (b) By the Contractor. This Agreement may be terminated by the Contractor for any reason upon ninety (90) days written notice to the County. Termination under this subsection shall be effected by the Contractor delivering to the commissioner or other head of the Department (the "Commissioner"), at least ninety (90) days prior to the termination dateA copy of the notice given to the Commissioner shall be given to the Deputy County Executive who oversees the administration of the Department (the "Applicable DCE") on the same day that notice is given to the Commissioner.
- (c) Contractor Assistance upon Termination. In connection with the termination or impending termination of this Agreement the Contractor shall, regardless of the reason for

termination, take all actions reasonably requested by the County (including those set forth in other provisions of this Agreement) to assist the County in transitioning the Contractor's responsibilities under this Agreement. The provisions of this subsection shall survive the termination of this Agreement.

- 13. Accounting Procedures; Records. The Contractor shall maintain and retain, for a period of six (6) years following the later of termination of or final payment under this Agreement, complete and accurate records, documents, accounts and other evidence, whether maintained electronically or manually ("Records"), pertinent to performance under this Agreement. Records shall be maintained in accordance with Generally Accepted Accounting Principles and, if the Contractor is a non-profit entity, must comply with the accounting guidelines set forth in the federal Office of Management & Budget Circular A-122, "Cost Principles for Non-Profit Organizations." Such Records shall at all times be available for audit and inspection by the Comptroller, the Department, any other governmental authority with jurisdiction over the provision of services hereunder and/or the payment therefore, and any of their duly designated representatives. The provisions of this Section shall survive the termination of this Agreement.
- 14. <u>Limitations on Actions and Special Proceedings against the County</u>. No action or special proceeding shall lie or be prosecuted or maintained against the County upon any claims arising out of or in connection with this Agreementunless:
- (a) <u>Notice</u>. At least thirty (30) days prior to seeking relief the Contractor shall have presented the demand or claim(s) upon which such action or special proceeding is based in writing to the Applicable DCE for adjustment and the County shall have neglected or refused to make an adjustment or payment on the demand or claim for thirty (30) days after presentment. The Contractor shall send or deliver copies of the documents presented to the Applicable DCE under this Section to each of (i) the Department and the (ii) the County Attorney (at the address specified above for the County) on the same day that documents are sent or delivered to the Applicable DCE. The complaint or necessary moving papers of the Contractor shall allege that the above-described actions and inactions preceded the Contractor's action or special proceeding against the County.
- (b) <u>Time Limitation</u>. Such action or special proceeding is commenced within the earlier of (i) one (1) year of the first to occur of  $(\underline{A})$  final payment under or the termination of this Agreement, and  $(\underline{B})$  the accrual of the cause of action, and  $(\underline{ii})$  the time specified in any other provision of this Agreement.
- 15. Work Performance Liability. The Contractor is and shall remain primarily liable for the successful completion of all work in accordance this Agreement irrespective of whether the Contractor is using a Contractor Agent to perform some or all of the work contemplated by this Agreement, and irrespective of whether the use of such Contractor Agent has been approved by the County.
- 16. <u>Consent to Jurisdiction and Venue; Governing Law.</u> Unless otherwise specified in this Agreement or required by Law, exclusive original jurisdiction for all claims or actions with respect to this Agreement shall be in the Supreme Court in Nassau County in New York State and the

parties expressly waive any objections to the same on any grounds, including venue and <u>forum non conveniens</u>. This Agreement is intended as a contract under, and shall be governed and construed in accordance with, the Laws of New York State, without regard to the conflict of laws provisions thereof.

- 17. Notices. Any notice, request, demand or other communication required to be given or made in connection with this Agreement shall be (a) in writing, (b) delivered or sent (i) by hand delivery, evidenced by a signed, dated receipt, (ii) postage prepaid via certified mail, return receipt requested, or (iii) overnight delivery via a nationally recognized courier service, (c) deemed given or made on the date the delivery receipt was signed by a County employee, three (3) business days after it is mailed or one (1) business day after it is released to a courier service, as applicable, and (d)(i) if to the Department, to the attention of the Commissioner at the address specified above for the Department, (ii) if to an Applicable DCE, to the attention of the Applicable DCE (whose name the Contractor shall obtain from the Department) at the address specified above for the County, (iii) if to the Comptroller, to the attention of the Comptroller at 240 Old Country Road, Mineola, NY 11501, and (iv) if to the Contractor, to the attention of the person who executed this Agreement on behalf of the Contractor at the address specified above for the Contractor, or in each case to such other persons or addresses as shall be designated by written notice.
- 18. All Legal Provisions Deemed Included; Severability; Supremacy. (a) Every provision required by Law to be inserted into or referenced by this Agreement is intended to be a part of this Agreement. If any such provision is not inserted or referenced or is not inserted or referenced in correct form then (i) such provision shall be deemed inserted into or referenced by this Agreement for purposes of interpretation and (ii) upon the application of either party this Agreement shall be formally amended to comply strictly with the Law, without prejudice to the rights of either party.
- (b) In the event that any provision of this Agreement shall be held to be invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions shall not in any way be affected or impaired thereby.
- (c) Unless the application of this subsection will cause a provision required by Law to be excluded from this Agreement, in the event of an actual conflict between the terms and conditions set forth above the signature page to this Agreement and those contained in any schedule, exhibit, appendix, or attachment to this Agreement, the terms and conditions set forth above the signature page shall control. To the extent possible, all the terms of this Agreement should be read together as not conflicting.
- (d) Each party has cooperated in the negotiation and preparation of this Agreement. Therefore, in the event that construction of this Agreement occurs, it shall not be construed against either party as drafter.
- 19. <u>Section and Other Headings</u>. The section and other headings contained in this Agreement are for reference purposes only and shall not affect the meaning or interpretation of this Agreement.
- 20. Administrative Service Charge. The Contractor agrees to pay the County an administrative service charge of Two Hundred Sixty-six Dollars (\$266.00) for the processing of this Agreement pursuant to Ordinance Number 74-1979, as amended by Ordinance Number 128-2006. The administrative service charge shall be due and payable to the County by the Contractor upon signing this Agreement.

- 21. Executory Clause. Notwithstanding any other provision of this Agreement:
- (a) <u>Approval and Execution</u>. The County shall have no liability under this Agreement (including any extension or other modification of this Agreement) to any Person unless (i) all County approvals, third party approvals and other governmental approvals have been obtained, including, if required, approval by the County Legislature, and (ii) this Agreement has been executed by the County Executive (as defined in this Agreement).
- (b) Availability of Funds. The County shall have no liability under this Agreement (including any extension or other modification of this Agreement) to any Person beyond funds appropriated or otherwise lawfully available for this Agreement, and, if any portion of the funds for this Agreement are from the state and/or federal governments, then beyond funds available to the County from the state and/or federal governments.
- 22. Entire Agreement. This Agreement represents the full and entire understanding and agreement between the parties with regard to the subject matter hereof and supersedes all prior agreements (whether written or oral) of the parties relating to the subject matter of this Agreement.

[Remainder of Page Intentionally Left Blank.]

IN WITNESS WHEREOF, the Contractor and the County have executed this Agreement as of the Effective Date.

CORNELL UNIVERSITY
//. {
By: Mossi Delaco
Name: NORM 6 Duchanne
Title: Chief redical officed
Date: 6/27/2019
NASSAU COUNTY
OK.
Ву:
Name:
Title: County Executive
□ Deputy County Executive
Date:

PLEASE EXECUTE IN  $\underline{BLUE}$  INK

On the 27 day of	STATE OF NEW YORK)
On the 27 day of varve in the year 20/2 before me personally came very 6 0 con receives in the County of / County / C	<b>/</b>
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depose and say that he or she resides in the County of	TOMPKINSOD
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executed the above instrument; and that he or she signed his or her name thereto pursuant to	County Executive of the County of Nassau, the municipal corporation described bearing at the
	executed the above instrument; and that he or she signed his or her name thereto pursuant to
Section 205 of the County Government Law of Nassau County.	Section 205 of the County Government Law of Nassau County.

**NOTARY PUBLIC** 

# Cornell Ruffian Equine Specialists

111 Plainfield Ave.
Elmont, NY 11003
p. 516 488.4510
f. 516 488.4917
www.rufflan.cornell.edu
cornellrufflan@cornell.edu

#### Appendix A

#### Cost Proposal

The items listed below are our 2018 price estimates. We have listed some specific prices for items as well as estimates. We stress that some of these are estimates as each case is individualized to the history, illness and what is recommended for treatment. Each case after examination will have a thorough estimate detailed to the client based on the specific needs of the patient. Each year we also conduct an annual price increase for most all services. This price increase typically is around 3-4%.

\*We do not perform farm calls. All procedures/examinations are performed on site at our facility. We do not provide ambulatory services.

#### Administrative and Board Fees:

- Hospital Admission Fee \$54
- Hospitalization Daily Fee \$52
- Professional Service Levels 1 5 \$73 \$442, each case is specific to the daily needs of the patient. This
  is a daily charge.
- Emergency Fees Daytime: \$170, Afterhours: \$270

#### **Examination Fees:**

- Examination Physical \$110
- Examination Colic \$270
- Examination Medical \$220
- Examination Dental \$260
- Examination Rectal \$58
- Examination Ophthalmology \$220
- Examination Lameness Level A E \$260 572 (does not include the cost of nerve blocks)
- Examination Cardiac \$220

#### Anesthesia Fees:

- Local Anesthesia (nerve blocks, local infusion) \$46
- General Anesthesia We charge based on time under general anesthesia:
  - o 1 hour 5 hours, \$460 \$1020



- Arterial Blood Gases \$52
- Assisted Recovery most all cases will have an assisted recovery performed \$110
- Standing Sedation \$270

#### **Routine Surgery Estimates:**

- Colic Surgery Routine \$6000-7000
- Colic Surgery Resection Component \$8000-10,000
- Colic Surgery Small Intestinal/Complex \$12,000 +
- Dental Extraction \$1500-2000
  - o This prices varies depending on the case and can only be determined after evaluation
- Arthroscopy One Joint \$2500-2700
- Arthroscopy -- Infected Joint \$3000-3500
- Laceration Repair
  - o Small \$500-600
  - Large under general anesthesia \$1500
    - Depends on case and if the horse will tolerate performing the repair standing under sedation
- Hernia Repair \$1200-1500
- Tumor removal \$500-700
- Enucleation \$1500-1700 (standing)

#### Basic Sedation/Antibiotic Charges:

We charge out per mL that is given to our patients. This goes for all antibiotics as well. If a horse needs more/less that affects the price, I am listing standard doses for a 1000lb horse.

- Xylazine 250mg \$12
- Detomidine 5mg \$15.13
- Butorphanol 5mg-\$11.22
- Morphine 10mg \$17,11
- Potassium Penicillin 25ml \$47.67 (standard dosing is to receive this 4x day)
- Gentamicin 30mL \$19.60
- Flunixin Meglumine 10mL \$11.32

#### Diagnostics/Therapeutics:

- Radiographs \$54/view
- Ultrasound Abdominal \$300
- Ultrasound Cardiac \$270
- Ultrasound Musculoskeletal \$270
- Ultrasound Thorax \$270
- Endoscopy Upper Airway \$104-166



- MRI → Single Site \$2800
- Bone Scan Half Body \$1300-1500
- Bone Scan Full Body \$2100-2300
- Shockwave Treatment \$600-700
- Regenerative Laser Therapy \$88/treatment

#### **Laboratory Services:**

We run all routine labs in house and send most all other samples to Cornell Diagnostic Laboratory in Ithaca.

- CRES CBC \$67.60
- CRES Chemistry \$127.40
- CRES PCV/TP \$14
- Cornell Culture & Sensitivity \$136
- Cornell Histopatholoy \$133

#### Other Items:

- IV Catheter \$75
- IV Fluids \$9.66/L
- IV Fluid Administration Set \$85.98
- Daily Ice \$88/foot
- Euthanasia Fee \$128 for a standard dose
- Cremation Fees -- Group = \$800 , Private = \$2100

Again, this is a snapshot of our services/products and the prices that are associated with them. We generally give each of our patients/clients an estimate of their total care with us. All invoices will have each day itemized so it is completed reviewable by the client.

We do offer a 20% discount for all working service horses. This discount applies to services only.



#### Appendix EE

#### **Equal Employment Opportunities for Minorities and Women**

The provisions of this Appendix EE are hereby made a part of the document to which it is attached.

The Contractor shall comply with all federal, State and local statutory and constitutional anti-discrimination provisions. In addition, Local Law No. 14-2002, entitled "Participation by Minority Group Members and Women in Nassau County Contracts," governs all County Contracts as defined herein and solicitations for bids or proposals for County Contracts. In accordance with Local Law 14-2002:

- (a) The Contractor shall not discriminate against employees or applicants for employment because of race, creed, color, national origin, sex, age, disability or marital status in recruitment, employment, job assignments, promotions, upgradings, demotions, transfers, layoffs, terminations, and rates of pay or other forms of compensation. The Contractor will undertake or continue existing programs related to recruitment, employment, job assignments, promotions, upgradings, transfers, and rates of pay or other forms of compensation to ensure that minority group members and women are afforded equal employment opportunities without discrimination.
- (b) At the request of the County contracting agency, the Contractor shall request each employment agency, labor union, or authorized representative of workers with which it has a collective bargaining or other agreement or understanding, to furnish a written statement that such employment agency, union, or representative will not discriminate on the basis of race, creed, color, national origin, sex, age, disability, or marital status and that such employment agency, labor union, or representative will affirmatively cooperate in the implementation of the Contractor's obligations herein.
  - (c) The Contractor shall state, in all solicitations or advertisements for employees, that, in the performance of the County Contract, all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status.
  - (d) The Contractor shall make best efforts to solicit active participation by certified minority or women-owned business enterprises ("Certified M/WBEs") as defined in Section 101 of Local Law No. 14-2002, for the purpose of granting of Subcontracts.
  - (e) The Contractor shall, in its advertisements and solicitations for Subcontractors, indicate its interest in receiving bids from Certified M/WBEs and the requirement that Subcontractors must be equal opportunity employers.
  - (f) Contractors must notify and receive approval from the respective Department Head prior to issuing any Subcontracts and, at the time of requesting such authorization, must submit a signed Best Efforts Checklist.
  - (g) Contractors for projects under the supervision of the County's Department of Public Works shall also submit a utilization plan listing all proposed Subcontractors so that, to the greatest extent feasible, all Subcontractors will be approved prior to commencement of work. Any additions

or changes to the list of subcontractors under the utilization plan shall be approved by the Commissioner of the Department of Public Works when made. A copy of the utilization plan any additions or changes thereto shall be submitted by the Contractor to the Office of Minority Affairs simultaneously with the submission to the Department of Public Works.

- (h) At any time after Subcontractor approval has been requested and prior to being granted, the contracting agency may require the Contractor to submit Documentation Demonstrating Best Efforts to Obtain Certified Minority or Women-owned Business Enterprises. In addition, the contracting agency may require the Contractor to submit such documentation at any time after Subcontractor approval when the contracting agency has reasonable cause to believe that the existing Best Efforts Checklist may be inaccurate. Within ten working days (10) of any such request by the contracting agency, the Contractor must submit Documentation.
- (i) In the case where a request is made by the contracting agency or a Deputy County Executive acting on behalf of the contracting agency, the Contractor must, within two (2) working days of such request, submit evidence to demonstrate that it employed Best Efforts to obtain Certified M/WBE participation through proper documentation.
- (j) Award of a County Contract alone shall not be deemed or interpreted as approval of all Contractor's Subcontracts and Contractor's fulfillment of Best Efforts to obtain participation by Certified M/WBEs.
- (k) A Contractor shall maintain Documentation Demonstrating Best Efforts to Obtain Certified Minority or Women-owned Business Enterprises for a period of six (6) years. Failure to maintain such records shall be deemed failure to make Best Efforts to comply with this Appendix EE, evidence of false certification as M/WBE compliant or considered breach of the County Contract,
- (l) The Contractor shall be bound by the provisions of Section 109 of Local Law No. 14-2002 providing for enforcement of violations as follows:
- a. Upon receipt by the Executive Director of a complaint from a contracting agency that a County Contractor has failed to comply with the provisions of Local Law No. 14-2002, this Appendix EE or any other contractual provisions included in furtherance of Local Law No. 14-2002, the Executive Director will try to resolve the matter.
- b. If efforts to resolve such matter to the satisfaction of all parties are unsuccessful, the Executive Director shall refer the matter, within thirty days (30) of receipt of the complaint, to the American Arbitration Association for proceeding thereon.
- c. Upon conclusion of the arbitration proceedings, the arbitrator shall submit to the Executive Director his recommendations regarding the imposition of sanctions, fines or penalties. The Executive Director shall either (i) adopt the recommendation of the arbitrator (ii) determine that no sanctions, fines or penalties should be imposed or (iii) modify the recommendation of the arbitrator, provided that such modification shall not expand upon any sanction

recommended or impose any new sanction, or increase the amount of any recommended fine or penalty. The Executive Director, within ten days (10) of receipt of the arbitrators award and recommendations, shall file a determination of such matter and shall cause a copy of such determination to be served upon the respondent by personal service or by certified mail return receipt requested. The award of the arbitrator, and the fines and penalties imposed by the Executive Director, shall be final determinations and may only be vacated or modified as provided in the civil practice law and rules ("CPLR").

(m) The contractor shall provide contracting agency with information regarding all subcontracts awarded under any County Contract, including the amount of compensation paid to each Subcontractor and shall complete all forms provided by the Executive Director or the Department Head relating to subcontractor utilization and efforts to obtain M/WBE participation.

Failure to comply with provisions (a) through (m) above, as ultimately determined by the Executive Director, shall be a material breach of the contract constituting grounds for immediate termination. Once a final determination of failure to comply has been reached by the Executive Director, the determination of whether to terminate a contract shall rest with the Deputy County Executive with oversight responsibility for the contracting agency.

Provisions (a), (b) and (c) shall not be binding upon Contractors or Subcontractors in the performance of work or the provision of services or any other activity that are unrelated, separate, or distinct from the County Contract as expressed by its terms.

The requirements of the provisions (a), (b) and (c) shall not apply to any employment or application for employment outside of this County or solicitations or advertisements therefor or any existing programs of affirmative action regarding employment outside of this County and the effect of contract provisions required by these provisions (a), (b) and (c) shall be so limited.

The Contractor shall include provisions (a), (b) and (c) in every Subcontract in such a manner that these provisions shall be binding upon each Subcontractor as to work in connection with the County Contract.

As used in this Appendix EE the term "Best Efforts Checklist" shall mean a list signed by the Contractor, listing the procedures it has undertaken to procure Subcontractors in accordance with this Appendix EE.

As used in this Appendix EE the term "County Contract" shall mean (i) a written agreement or purchase order instrument, providing for a total expenditure in excess of twenty-five thousand dollars (\$25,000), whereby a County contracting agency is committed to expend or does expend funds in return for labor, services, supplies, equipment, materials or any combination of the foregoing, to be performed for, or rendered or furnished to the County; or (ii) a written agreement in excess of one hundred thousand dollars (\$100,000), whereby a County contracting agency is committed to expend or does expend funds for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon. However, the term "County Contract" does not include agreements or orders for the following services: banking services, insurance policies or contracts, or contracts with a County contracting agency for the sale of bonds, notes or other securities.

As used in this Appendix EE the term "County Contractor" means an individual, business enterprise, including sole proprietorship, partnership, corporation, not-for-profit corporation, or any other person or entity other than the County, whether a contractor, licensor, licensee or any other party, that is (i) a party to a County Contract, (ii) a bidder in connection with the award of a County Contract, or (iii) a proposed party to a County Contract, but shall not include any Subcontractor.

As used in this Appendix EE the term "County Contractor" shall mean a person or firm who will manage and be responsible for an entire contracted project.

As used in this Appendix EE "Documentation Demonstrating Best Efforts to Obtain Certified Minority or Women-owned Business Enterprises" shall include, but is not limited to the following:

- a. Proof of having advertised for bids, where appropriate, in minority publications, trade newspapers/notices and magazines, trade and union publications, and publications of general circulation in Nassau County and surrounding areas or having verbally solicited M/WBEs whom the County Contractor reasonably believed might have the qualifications to do the work. A copy of the advertisement, if used, shall be included to demonstrate that it contained language indicating that the County Contractor welcomed bids and quotes from M/WBESubcontractors. In addition, proof of the date(s) any such advertisements appeared must be included in the Best Effort Documentation. If verbal solicitation is used, a County Contractor's affidavit with a notary's signature and stamp shall be required as part of the documentation.
- b. Proof of having provided reasonable time for M/WBE Subcontractors to respond to bid opportunities according to industry norms and standards. A chart outlining the schedule/time frame used to obtain bids from M/WBEs is suggested to be included with the Best Effort Documentation
- c. Proof or affidavit of follow-up of telephone calls with potential M/WBE subcontractors encouraging their participation. Telephone logs indicating such action can be included with the Best Effort Documentation
- d. Proof or affidavit that M/WBE Subcontractors were allowed to review bid specifications, blue prints and all other bid/RFP related items at no charge to the M/WBEs, other than reasonable documentation costs incurred by the County Contractor that are passed onto the M/WBE.
- e. Proof or affidavit that sufficient time prior to making award was allowed for M/WBEs to participate effectively, to the extent practicable given the timeframe of the County Contract.
- f. Proof or affidavit that negotiations were held in good faith with interested M/WBEs, and that M/WBEs were not rejected as unqualified or unacceptable without sound business reasons based on (1) a thorough investigation of M/WBE qualifications and capabilities reviewed against industry custom and standards and (2) cost of performance The basis for rejecting any M/WBE deemed unqualified by the County Contractor shall be included in the Best Effort Documentation

- g. If an M/WBE is rejected based on cost, the County Contractor must submit a list of all sub-bidders for each item of work solicited and their bid prices for the work.
- h. The conditions of performance expected of Subcontractors by the County Contractor must also be included with the Best Effort Documentation
- i. County Contractors may include any other type of documentation they feel necessary to further demonstrate their Best Efforts regarding their bid documents.

As used in this Appendix EE the term "Executive Director" shall mean the Executive Director of the Nassau County Office of Minority Affairs; provided, however, that Executive Director shall include a designee of the Executive Director except in the case of final determinations issued pursuant to Section (a) through (l) of these rules.

As used in this Appendix EE the term "Subcontract" shall mean an agreement consisting of part or parts of the contracted work of the County Contractor.

As used in this Appendix EE, the term "Subcontractor" shall mean a person or firm who performs part or parts of the contracted work of a prime contractor providing services, including construction services, to the County pursuant to a county contract. Subcontractor shall include a person or firm that provides labor, professional or other services, materials or supplies to a prime contractor that are necessary for the prime contractor to fulfill its obligations to provide services to the County pursuant to a county contract. Subcontractor shall not include a supplier of materials to a contractor who has contracted to provide goods but no services to the County, nor a supplier of incidental materials to a contractor, such as office supplies, tools and other items of nominal cost that are utilized in the performance of a service contract.

Provisions requiring contractors to retain or submit documentation of best efforts to utilize certified subcontractors and requiring Department head approval prior to subcontracting shall not apply to inter-governmental agreements. In addition, the tracking of expenditures of County dollars by not-for-profit corporations, other municipalities, States, or the federal government is not required.

## Appendix L

### Certificate of Compliance

In compliance with Local Law 1-2006, as amended (the "Law"), the Contractor hereby certifies the following:

1.	The chief executive officer of the Contractor is:
	PORMAND & Duchanne (Name)
	111 Plantield ave (Address) 516-488-4510/607-275-6648 (Telephone Number)
2,	The Contractor agrees to either (1) comply with the requirements of the Nassau County Living Wage Law or (2) as applicable, obtain a waiver of the requirements of the Law pursuant to section 9 of the Law. In the event that the Contractor does not comply with the requirements of the Law or obtain a waiver of the requirements of the Law, and such Contractor establishes to the satisfaction of the Department that at the time of execution of this Agreement, it had a reasonable certainty that it would receive such waiver based on the Law and Rules pertaining to waivers, the County will agree to terminate the contract without imposing costs or seeking damages against the Contractor
3.	In the past five years, Contractor has has found by a court or a government agency to have violated federal, state, or local laws regulating payment of wages or benefits, labor relations, or occupational safety and health. If a violation has been assessed against the Contractor, describe below:
4.	In the past five years, an administrative proceeding, investigation, or government body-initiated judicial actionhashas not been commenced against or relating to the Contractor in connection with federal, state, or local laws regulating payment of wages or benefits, labor relations, or occupational safety and health. If such a proceeding, action, or investigation has been commenced, describe below:

	·
5.	Contractor agrees to permit access to work sites and relevant payroll records by authorized County representatives for the purpose of monitoring compliance with the Living Wage Law and investigating employee complaints of noncompliance.
it is tr	by certify that I have read the foregoing statement and, to the best of my knowledge and belief, i.e, correct and complete. Any statement or representation made herein shall be accurate and
true as	s of the date stated below.
6	27/2019 Jun Colore
Dated	Signature of Chief Executive Officer
	NORM 6 Ducharme

Name of Chief Executive Officer

Sworn to before me this

Notary Public

PENNY L. BROWN
Notary Public, State Of New York
No. 4949205
Qualified in Tompkins County
Commission Expires April 3, 20



ANDREW M. CUOMO GOVERNOR

CLARISSA M. RODRIGUEZ

CHAIR

Office of the Secretary
Compliance With Workers' Compensation Law

I, Kim McCarroll, Secretary for the Workers' Compensation Board, DO HEREBY Certify that:

Name:

Cornell University

WCB#:

W376008

Tax ID #:

15-0532082

Qual Date:

10/31/1928

has secured compensation to its employees as a self-insurer in the following manner:

Pursuant to Section 50, subdivision 3 of the Workers' Compensation Law.

The status of the self-insurer was effective as noted above and remains in full force.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Workers' Compensation Board this 1st day of March 2018.

MM MCCARRO
SECRETARY

Status Confirmed By

Office of Self Insurance

(518) 402-0247 SelfInsurance@wcb.ny.gov 3/1/2018



ANDREW M. CUOMO

GOVERNOR

CLARISSA M. RODRIGUEZ

CHAIR

#### NOTICE OF COMPLIANCE

AS SELF-INSURER UNDER THE NEW YORK STATE DISABILITY AND PAID FAMILY LEAVE BENEFITS LAW

Disability Benefits 🖾

Paid Family Leave 🛂

Employer:

Cornell University

Carrier ID #.:

B354009

FEIN:

15-0532082

Qualification Date (DB):

2/28/1961

Qualification Date (PFL):

1/1/2018

The above named employer is in compliance with the New York State Disability and Paid Family Leave Benefits Law with respect to all of his or her employees by approved self-insurance or a combination of self-insurance and insurance with an authorized carrier(s).

The status of the employer as a self-insurer was effective as noted above and remains in full force.

Status Confirmed By

## Office of Self Insurance

(518) 402-0247 SelfInsurance@wcb.ny.gov 3/1/2018