



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST

(Revised: 6/9/2014)

Board Clerk Use Only

Meeting Date: 3/19/15
Agenda Item #: C.10
Est. Start Time: 9:30 am
Date Submitted: 3/4/15

Agenda Title: **Acting as the governing body of the Multnomah County Library District, consent to approve an intergovernmental agreement amendment with Multnomah County.**

Note: Title should not be more than 2 lines but sufficient to describe the action requested. Title on APR must match title on Ordinance, Resolution, Order or Proclamation.

Requested Meeting Date: March 19, 2015 **Time Needed:** Consent
Department: Library **Division:** Library Administration
Contact(s): Becky Cobb
Phone: 503-988-5499 **Ext.** 85499 **I/O Address:** 317/ADM/DIROF
Presenter Name(s) & Title(s): None.

General Information

1. What action are you requesting from the Board?

Convene as the governing body of the Multnomah County Library District and approve an amendment to Intergovernmental Agreement (IGA) 56000000150 with Multnomah County.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

The Library Assets Transfer Agreement, authorized December 18, 2014, provides for an amendment to the County-MCLD IGA to add insurance and indemnification provisions. The proposed amendment provides insurance and indemnification terms.

3. Explain the fiscal impact (current year and ongoing).

The amendment terms require MCLD to contribute its portion of insurance premiums and to reimburse County for any uninsurable costs. The Library as a Department currently participates in the Risk Management Fund and contributes departmental budgeted funds to the Risk Management Fund for these services.

4. Explain any legal and/or policy issues involved.

The amendment was contemplated through the Library Assets Transfer Agreement and is a housekeeping measure.

5. Explain any citizen and/or other government participation that has or will take place.

N/A.

Required Signature

**Elected
Official or
Department**

Director: Vailey Oehlke /s/ **Date:** 3/4/15

Note: Please submit electronically. Insert names of your approvers followed by /s/ - we no longer use actual signatures. Please insert date approved.