***Submit completed worksheet to:***

*Siskiyou County Clerk, 311 Fourth St., Rm 201, Yreka, CA 96097*

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[ ]**  |  | **Time Requested:** | **5 Minutes** | **Meeting Date:** | **8/12/2025** |
| ***OR*** |
| **Consent** | **[x]**  |  |
| **Contact Person/Department:** | **GREG ROATH, COUNTY FIRE WARDEN** | **Phone:** | **530-842-3516** |
| **Address:** | **1809 FAIRLANE ROAD, YREKA, CA 96097** |
| **Person Appearing/Title:** | **GREG ROATH, COUNTY FIRE WARDEN** |
| **Subject/Summary of Issue:** |
| CAL FIRE contracted services for extended fire protection service availability to provide emergency fire protection, emergency response, basic fire support, and dispatch services as outlined in the Agreement 2CA07278 Siskiyou County General Fire. |
| **Financial Impact:** |
| **NO** | [ ]  | *Describe why no financial impact:*       |
| **YES** | [x]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: | $615,186. |  |  |  |  |
| Fund:  | 2106 |  | Description: | General Co Fire | Org.: | 204010 | Description: |       |
| Account: | 752030 |  | Description: | AMADOR |  |
| Activity Code:  |       |  | Description: |       |  |
| Local Preference: YES [ ]  NO [ ]  |
| For Contracts – *Explain how vendor was selected:*       |
|       |
| Additional Information: |       |
|       |
| **Recommended Motion:** |
| Staff is requesting the Board approve the Fire Protection Reimbursement Agreement with CalFire and the Notice of Intent letter to Greg Roath, Unit Chief with CalFire and authorize the Chair to sign them. Under Agreement 2CA07278, the County agrees to pay $615,186.00 for CAL FIRE contracted services for staffing of the Hornbrook Station and Yreka Interagency Command Center for the term July 1st, 2025 through June 30th, 2026 |
| **Reviewed as recommended by policy:** |  | ***Special Requests*:** |
| County Counsel |       |  |  |
|  |  |  | *Certified Minute Order(s)* |       | *Quantity:* |       |
| Auditor |       |  |  |  |  |  |
|  |  |  |  |  |  |
| Personnel |       |  | *Other:* |       |
| CAO |       |  |       |

***NOTE: For consideration for placement on the agenda, the original agenda worksheet and backup material must be submitted directly to the Board Clerk (after reviewing signatures have been obtained) by 10:00 a.m. on the Monday the week prior to the Board Meeting.*** Revised 8/09/2021