

AGREEMENT

This Agreement, made and entered into on _____, 20____, by and between the Yellowstone County Sheriff, hereinafter called the "SHERIFF", and the City of Billings, Montana, hereinafter called the "CITY".

WITNESSETH:

Whereas, the SHERIFF is desirous of using the CITY's Computer Facility to support their existing law enforcement data processing requirements; and

Whereas, the CITY maintains and operates a Computer Facility with appropriate capabilities, capacity and security; and

Whereas, the CITY is willing to allow the SHERIFF to have access to the Computer Facility at all normal operating times which are seven (7) days a week, twenty-four (24) hours a day except for necessary back-ups and maintenance.

NOW, THEREFORE, IN CONSIDERATION OF THE MUTUAL COVENANTS AND AGREEMENTS between the parties hereto, it is mutually agreed that:

1. The CITY will provide to the Yellowstone County Sheriff's department the following described computer access, disk storage, computer processing, system/data backups, and maintenance support to support their existing Law Enforcement data processing system:
 - A. Communication capabilities allowing 24 hr computer access;
 - B. On-site & Off-site disk storage shared with Billings Police Dept.;
 - C. Computer processing, program maintenance, operations to support data processing system, system replication & backups, disaster/recovery services;
2. The SHERIFF agrees to pay CITY the sum of One Hundred and Forty-five Thousand, Seven Hundred and Thirty-four (\$145,734) specified in Paragraph Three below. This charge is based on actual computer usage for the period of January 1, 2017 thru December 31, 2017.
3. This Agreement shall be in effect for twelve (12) months beginning July 1, 2018, and continuing until June 30, 2019.
4. Payment shall be made in two(2)equal installments of \$72,867.00. The first installment is due and payable on or before October 20, 2018, and the second is due and payable on or before April 15, 2019.

AGREEMENT DATED _____, 20_____.

YELLOWSTONE COUNTY

CITY OF BILLINGS

BY: [Signature]
Sheriff

Mayor

[Signature]
Chair, County Commissioners

City Clerk

ATTEST: [Signature]
Clerk and Recorder

[Signature]
City Attorney

Approved as to Form:

[Signature]
County Attorney