



**SEDGWICK COUNTY, KANSAS
PURCHASING DIVISION**

525 N. Main, Suite 823 ~ Wichita, KS 67203

Phone: 316 660-7258 Fax: 316 383-7055

<http://sedgwickcounty.org/finance/purchasing.asp>

REQUEST FOR BID

#17-0020

VENDING MACHINE SERVICES For ADULT DETENTION FACILITY

February 2, 2017

Sedgwick County, Kansas (hereinafter referred to as "county") is seeking bids for Vending Machine Services for the Adult Detention Facility. If your firm is interested in submitting a bid, please do so in accordance with the instructions contained within the attached Request for Bid. **Bids are due no later than Tuesday February 14, 2017 at 1:45pm CST.**

Carefully review this Request for Bid. It provides specific technical information necessary to aid participating firms in formulating a thorough response. Should you elect to participate, submit (1) one original and (2) two electronic copies (USB Drive) of the entire document and return to the Sedgwick County Purchasing Division, 525 N. Main, Suite 823, Wichita, Kansas 67203 with any supplementary materials **NO LATER THAN 1:45 p.m. CST, Tuesday February 14, 2017**. Bids must be sealed in an envelope and marked with the firm's name and address, proposal number, proposal opening date, and proposal opening time. Late responses will not be accepted and will not receive award consideration. The time clock stamp in the Purchasing Department will determine the time of receipt.

All contact concerning this solicitation shall be made through the Division of Purchasing. Bidders shall not contact county employees, department heads, using agencies, evaluation committee members or elected officials with questions or any other concerns about the solicitation. Questions, clarifications and concerns shall be submitted to the Division of Purchasing in writing. Failure to comply with these guidelines may disqualify the Bidder's response.

Sincerely,

Kristen McGovern
Senior Purchasing Agent

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I. Purpose

Sedgwick County, located in south-central Kansas, is one of the most populous of Kansas' 105 counties with a population estimated at more than 508,000 persons. It is the sixteenth largest in area, with 1,008 square miles, and reportedly has the second highest per capita wealth among Kansas' counties. Organizationally, the County is a Commission/Manager entity, employs nearly 2,800 persons, and hosts or provides a full range of municipal services, e.g. – public safety, public works, criminal justice, recreation, entertainment, cultural, human/social, and education.

Sedgwick County is seeking bids for Vending Machine Services for the Adult Detention Facility located at 141 W. Elm Wichita, Kansas 67203, in accordance with the specifications outlined, for Sedgwick County Sheriff's Office.

II. Submittals

Carefully review this Request for Bid. It provides specific technical information necessary to aid participating firms in formulating a thorough response. Should you elect to participate, submit one (1) original **AND** two (2) electronic copy (USB Drive) of the entire document with any supplementary materials to:

Kristen McGovern
Senior Buyer
Sedgwick County Division of Purchasing
525 N. Main, Suite 823
Wichita, KS 67203

SUBMITTALS are due NO LATER THAN 1:45 p.m. CDT, TUESDAY, February 14, 2017. Responses must be sealed and marked on the lower left-hand corner with the firm name and address, bid number, and bid due date. Late or incomplete responses will not be accepted and will not receive consideration for final award.

Bid responses will be acknowledged and read into record at bid opening which will occur at 2:00 p.m. CDT, on the due date.

III. Scope of Work

Provide, transport, deliver, load, install, and maintain all aspects of service which includes all handling of cash and coins for 6 vending machines as required:

- A. (4) Four soda vending machines. (3) Three beverage machines are restricted to 20 ounce plastic bottles only. One (1) machine to dispense 12 ounce cans.
- B. Snack vending machines will not include any cold items or any item requiring refrigeration. No microwavable items. Limited to candy bars, chips, dry goods or prepackaged foods.
- C. Establish a consistent schedule for deliveries and maintenance agreed upon and approved in writing from the Sheriff's Office.
- D. Machines are to be cash or change only. No credit cards/debit accepted.
- E. Background checks will be conducted on all employees by the Sedgwick County Sheriff's Office.
- F. All staff will wear company uniform and ID badge for identification purposes.
- G. Staff shall not maintain on their person at any time during service of this contract any contraband defined in [Appendix A](#) and submit an application for access, also located in [Appendix A](#).
- H. Provide quarterly sales and commission check to the Finance Department 525 N. Main Suite 823 Wichita, Kansas 67203.
- I. Price increases must be substantiated and provided in writing 30 days prior to the proposed price increase. Invoices of actual cost can be requested at any given time throughout the term of this contract. The Sheriff's Office has sole discretion of any proposed pricing changes for the term of this contract.
- J. The award of this contract will be based on the best value for the Sheriff's Office.

IV. Sedgwick County's Responsibility

- Provide information, as legally allowed, in possession of the county, which relates to the county's requirements or which is relevant to this project.
- Designate a person to act as the County Contract Manager with respect to the work to be performed under this contract.

V. Bid Terms

A. Questions and Contact Information

Any questions regarding this document must be submitted in writing to Kristen McGovern at Kristen.McGovern@sedgwick.gov by 5:00 p.m. CDT February 8, 2017. Any questions of a substantive nature will be answered in written form as an addendum and posted on the purchasing website at www.sedgwickcounty.org/finance/purchasing.asp, under view current RFQs and RFPs; to the right of the RFB number by 5:00 p.m. CDT February 10, 2017. Firms are responsible for checking the website and acknowledging any addendums on their bid response form.

B. Minimum Qualifications

This section lists the criteria to be considered in evaluating the ability of firms interested in providing the service(s) and/or product(s) specified in this Request for Bid. Firms must meet or exceed these qualifications to be considered for award. Bids submitted must reflect in detail their inclusion as well as the degree to which they can be provided. Any exceptions to the requirements listed should be clearly detailed in proposer's response.

Bidders shall:

1. Have proper certification(s) or license(s) for the services/product specified in this document.
2. Ensure that project work meets all local, state and federal laws, regulations and ordinances.
3. Have the capacity to acquire all required permits, bonds, escrows or insurances.
4. Provide appropriate project supervision and quality control procedures.
5. Have appropriate material, equipment and labor to perform job safely and efficiently. *All costs associated with meeting this requirement will be the sole responsibility of the vendor.*

C. Evaluation Criteria

An award will be made to the lowest responsible and responsive bidder and best value to the County.

D. Request for Bid Timeline

The following dates are provided for information purposes and are subject to change without notice. Contact the Division of Purchasing at (316) 660-7255 to confirm any and all dates.

Distribution of Request for Bid to interested parties	February 2, 2017
Clarification, Information and Questions submitted in writing by 5:00 p.m. CDT	February 8, 2017
Addendum Issued	February 10, 2017
Sealed Bid due before 1:45pm CDT	February 14, 2017
Evaluation Period	February 14-21, 2017
Board of Bids and Contracts Recommendation	February 23, 2017
Board of County Commission Award	March 1, 2017

E. Contract Period and Payment Terms

A contractual period will begin following Board of County Commissioners (BoCC) approval of the successful firm(s) for (3) Three years with (2) Two One (1) year options to renew.

Either party may cancel its obligations herein upon thirty-day (30) prior written notice to the other party. It is understood that funding may cease or be reduced at any time, and in the event that adequate funds are not available to meet the obligations hereunder, either party reserves the right to terminate this agreement upon thirty (30) days prior written notice to the other. Payment will be remitted following receipt of monthly detailed invoice.

Payment and Invoice Provisions

http://www.sedgwickcounty.org/purchasing/payment_and_invoice_provisions.pdf

F. Insurance Requirements

Liability insurance coverage indicated below must be considered as primary and not as excess insurance. Contractor shall furnish a certificate evidencing such coverage, with County listed as an additional insured, except for professional liability, workers’ compensation and employer’s liability. **Certificate shall be provided prior to award of contract.** Certificate shall remain in force during the duration of the project/services and will not be canceled, reduced, modified, limited, or restricted until thirty (30) days after County receives written notice of such change. All insurance must be with an insurance company with a minimum BEST rating of A-VIII and licensed to do business in the State of Kansas (**must be acknowledged on the bid/proposal response form**).

NOTE: If any insurance is subject to a deductible or self-insured retention, written disclosure must be included in your proposal response and also be noted on the certificate of insurance.

It is the responsibility of Contractor to require that any and all approved subcontractors meet the minimum insurance requirements. Contractor shall obtain the above referenced certificate(s) of insurance, and in accordance with this Agreement, provide copies of such certificates to County.

Workers’ Compensation:

Applicable coverage per State Statutes

Employer’s Liability Insurance: \$100,000.00

Commercial General Liability Insurance:

Bodily Injury:

Each Occurrence \$500,000.00

Aggregate \$500,000.00

Property Damage:

Each Occurrence \$500,000.00

Aggregate \$500,000.00

Personal Injury:

Each Occurrence \$500,000.00

General Aggregate \$500,000.00

Automobile Liability-Owned, Non-owned and Hired

Each Occurrence Bodily Injury and Property damage \$500,000.00

General Aggregate \$500,000.00

Special Risks or Circumstances:

Entity reserves the right to modify these requirements, including limits, based on the nature of the risk, prior experience, insurer, coverage, or other special circumstances.

G. Indemnification

To the fullest extent of the law, the provider, its subcontractor, agents, servants, officers or employees shall indemnify and hold harmless Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, from any and all claims brought by any person or entity whatsoever, arising from any act, error, or omission of the provider during the provider's performance of the agreement or any other agreements of the provider entered into by reason thereof. The provider shall indemnify and defend Sedgwick County, including, but not limited to, its elected and appointed officials, officers, employees and agents, with respect to any claim arising, or alleged to have arisen from negligence, and/or willful, wanton or reckless acts or omissions of the provider, its subcontractor, agents, servants, officers, or employees and any and all losses or liabilities resulting from any such claims, including, but not limited to, damage awards, costs and reasonable attorney's fees. This indemnification shall not be affected by any other portions of the agreement relating to insurance requirements. The provider agrees that it will procure and keep in force at all times at its own expense insurance in accordance with these specifications.

H. Confidential Matters and Data Ownership

The successful proposer agrees all data, records and information, which the proposer, its agents and employees, which is the subject of this bid, obtain access, remains at all times exclusively the property of Sedgwick County. The successful proposer agrees all such data, records, plans and information constitutes at all times proprietary information of Sedgwick County. The successful proposer agrees that it will not disclose, provide, or make available any of such proprietary information in any form to any person or entity. In addition, the successful proposer agrees it will not use any names or addresses contained in such data, records, plans and information for the purpose of selling or offering for sale any property or service to any person or entity who resides at any address in such data. In addition, the successful proposer agrees it will not sell, give or otherwise make available to any person or entity any names or addresses contained in or derived from such data, records and information for the purpose of allowing such person to sell or offer for sale any property or service to any person or entity named in such data. Successful proposer agrees it will take all reasonable steps and the same protective precautions to protect Sedgwick County's proprietary information from disclosure to third parties as with successful proposer's own proprietary and confidential information. Proposer agrees that all data, regardless of form that is generated as a result of this Request for Bid is the property of Sedgwick County.

I. Bid Conditions

http://www.sedgwickcounty.org/purchasing/pdf_files/Bid%20Terms%20%20Conditions.pdf

General Contract Provisions

http://www.sedgwickcounty.org/purchasing/pdf_files/General%20Contractual%20Provisions.pdf

Mandatory Contract Provisions

http://www.sedgwickcounty.org/purchasing/pdf_files/Mandatory%20Contractual%20Provisions.pdf

Sample Contract

http://www.sedgwickcounty.org/purchasing/pdf_files/Sample%20Contract.pdf

VI. Required Response Content

Bid response should include the following:

- 1. Any exclusions clearly delineated.**
- 2. Completed and signed Bid Response Form.**
- 3. Completed Pricing Template**

VII. Response Form

REQUEST FOR BID
RFB #17-0020

VENDING MACHINE SERVICES For ADULT DETENTION FACILITY

The undersigned, on behalf of the Bidder, certifies that: (1) this offer is made without previous understanding, agreement or connection with any person, firm, or corporation submitting a bid on the same project; (2) is in all respects fair and without collusion or fraud; (3) the person whose signature appears below is legally empowered to bind the firm in whose name the bidder is entered; (4) they have read the complete Request for Bid and understands all provisions; (5) if accepted by the County, this bid is guaranteed as written and amended and will be implemented as stated; and (6) mistakes in writing of the submitted bid will be their responsibility.

NAME _____

DBA/SAME _____

CONTACT _____

ADDRESS _____ CITY/STATE _____ ZIP _____

PHONE _____ FAX _____ HOURS _____

STATE OF INCORPORATION or ORGANIZATION _____

COMPANY WEBSITE ADDRESS _____ E-MAIL _____

NUMBER OF LOCATIONS _____ NUMBER OF PERSONS EMPLOYED _____

TYPE OF ORGANIZATION: Public Corporation _____ Private Corporation _____ Sole Proprietorship _____

Partnership _____ Other (Describe): _____

BUSINESS MODEL: Small Business _____ Manufacturer _____ Distributor _____ Retail _____

Dealer _____ Other (Describe): _____

Not a Minority-Owned Business: _____ Minority-Owned Business: _____ (Specify Below)

___ African American (05) ___ Asian Pacific (10) ___ Subcontinent Asian (15) ___ Hispanic (20)

___ Native American (25) ___ Other (30) - Please specify _____

Not a Woman-Owned Business: _____ Woman-Owned Business: _____ (Specify Below)

___ Not Minority -Woman Owned (50) ___ African American-Woman Owned (55)

___ Asian Pacific-Woman Owned (60) ___ Subcontinent Asian-Woman Owned (65) ___ Hispanic Woman Owned (70)

___ Native American-Woman Owned (75) ___ Other – Woman Owned (80) – Please specify _____

ARE YOU REGISTERED TO DO BUSINESS IN THE STATE OF KS: _____ Yes _____ No

INSURANCE REGISTERED IN THE STATE OF KS WITH MINIMUM BEST RATING OF A-VIII: _____ Yes

_____ No

Yes, I would like to be on the emergency vendor list.

No, I would not like to be on the emergency vendor list.

After Hours Phone #: _____ Emergency Contact Name: _____

After Hours Fax #: _____

ACKNOWLEDGE RECEIPT OF ADDENDA: All addendum(s) are posted to our RFQ/RFP web page and it is the vendor's responsibility to check and confirm all addendum(s) related to this document by going to www.sedgwickcounty.org/finance/purchasing.asp .

NO. _____, DATED _____; NO. _____, DATED _____; NO. _____,

DATED _____

In submitting a response to this document, vendor acknowledges acceptance of all sections of the entire document and has clearly delineated and detailed any exceptions.

Signature _____ Title _____

Print Name _____ Dated _____

VIII. Pricing Template

Please provide pricing for the following items. This list serves strictly as an example and is not limited to the items listed in this template.

<u>Example Product</u>	<u>Price per Each</u>
12 Ounce Can Assorted Soft Drinks	
20 Ounce plastic bottle assorted soft drinks	
Water 20 ounce plastic bottle	
Candy bar	
Chips Assorted flavors 1 ½ to 2 ounce size bags	
	Percentage Amount
Commission of Sales percentage to Sedgwick County to be paid Quarterly	

Appendix A.

Application for Access to the Secured Area of the Sedgwick County Adult Detention Facility

Sedgwick County Sheriff's Office

141 W. Elm

Wichita, KS 67203

PLEASE FILL IN ALL BLANKS ON THIS APPLICATION.

- Complete the Access Application.
- Read and sign the Acknowledgement of Risk Agreement to Abide by Rules and Regulations, Agreement to Honor Confidentiality, Consent to Medical Care.
- Read and sign the Dress Code Acknowledgement and Agreement.
- Read Kansas State Statute K.S.A. 21-5914 and contraband definitions in reference to trafficking contraband in a penal institution. Sign the Acknowledgment and Agreement.

INCLUDE A COPY OF YOUR DRIVER'S LICENSE OR OTHER IDENTIFICATION IF YOU DO NOT DRIVE.

PREA (Prison Rape Elimination Act) Training-1.5 hours in the Detention Facility Training Room. MUST BE COMPLETED BY ALL INDIVIDUALS WHO WILL HAVE ACCESS TO THE SECURED PART OF THE FACILITY!

After we receive your completed application, the Sheriff's Office will conduct a background check. Once your background has been approved, we will contact you or your employer to complete PREA Training and get an ID badge made.

You may drop off your application in person or mail to:

**Sedgwick County Sheriff's Office
Attn: Inmate Coordinator
141 W. Elm
Wichita, Ks. 67203**

All forms must be completed in full! If you have any questions please call 660-7513.

Automatic Disqualifiers:

- Convicted of a felony crime within seven years.
- Convicted of a misdemeanor crime within two years.
- Convicted of a sex crime.
- No picture ID.
- Under the age of 18.

Nothing in this document prohibits a person from being excluded at discretion of the Jail Administrator.

SEDGWICK COUNTY DETENTION FACILITY ACCESS APPLICATION

Project start: Date _____

Name (Last) _____ First _____ Middle _____

Other Names Used/Maiden _____

Social Security # _____ Race _____ Gender _____

Date of Birth _____ Place of Birth City/State/County _____

Address _____ City _____ State _____ Zip Code _____

Mailing Address, if Different _____

Home Phone _____ Cell Phone _____ Work Phone _____

E-mail Address _____

Length of Time at Current Residence _____

Previous Address _____

Driver's License # _____ State Issued _____

Emergency Contact Name _____

Home Phone _____ Cell Phone _____ Work Phone _____

Current Employer/Address _____

Current Employer Phone # _____ Length of Employment _____

Have you been convicted of a felony within the last seven years? _____

Have you been convicted of a misdemeanor within the past two years? _____

Have you been convicted of a sex crime? _____

If the answer to any of the above questions is yes, complete the following (use the back of this form if necessary):

Misdemeanor crime: _____

Approximate Date Disposition: _____ Location of Offense: _____

Felony crime: _____

Approximate Date Disposition: _____ Location of Offense: _____

Sex crime: _____

Approximate Date Disposition: _____ Location of Offense: _____

I authorize the Sedgwick County Sheriff's Office to complete a background check.

Signature: _____ Date: _____

ACKNOWLEDGEMENT OF RISK, GENERAL WAIVER & AGREEMENT TO HOLD HARMLESS AND INDEMNIFY

I, _____, hereby request permission to enter in to the Sedgwick County Detention Facility or affiliated locations. I understand that there are significant risks involved in entering in a detention facility and these risks have been adequately explained to me. I agree that, in return for the training and experience that will be provided to me by allowing me to, enter the Sedgwick County Detention Facility, I will hold harmless and indemnify the Sedgwick County Sheriff's Office. Further, I hereby waive any claims of any nature that I may have against the Sedgwick County Sheriff's Office or any of its employees, officers and /or agents for any personal injury, property loss, or property damage arising from or in connection with my entrance into the facility.

AGREEMENT TO ABIDE BY RULES AND REGULATIONS

I, _____, understand that I will be under the control and direction of the Sedgwick County Sheriff's Office, the Sheriff, or their designee(s) while in the detention facility. I agree to comply with all policies, rules and regulations of the Sedgwick County Sheriff's Office, including all security directives, and I understand that failure to comply can mean my entrance into the facility may be curtailed, postponed or discontinued by the Sedgwick County Sheriff's Office.

AGREEMENT TO HONOR CONFIDENTIALITY OF OFFENDERS

I, _____, will not use any information I learn about persons in the custody or under the supervision of the Sedgwick County Sheriff's Office for any reason without prior written approval from the Sedgwick County Sheriff's Office.

CONSENT TO EMERGENCY MEDICAL CARE

I, _____, understand that, in the event I need immediate medical care while on the grounds of any detention facility, I consent to being treated by a treatment provider available at the facility and/or to receiving first aid assistance until I can be removed safely to a civilian medical care facility.

_____/_____/_____/_____
Signature Date Witness Date

SEDGWICK COUNTY DETENTION FACILITY

Dress Code Acknowledgement and Agreement

All individuals that will be entering the secured section of the Sedgwick County Detention Facility or affiliated locations must be dressed appropriately. The following is not appropriate attire for entering the secured section of the Sedgwick County Detention Facility.

- See-through clothing
- Clothing which allows cleavage to show
- Tank tops
- Bare feet (shoes must be worn at all times)
- Braless attire (females shall wear bras)
- Unbuttoned shirts
- Shorts
- Skirts shorter than 3" above the knees
- High-slit skirts
- Attire having a message(s) which is detrimental to the safety and security of the facility.
- Excessively tight fitting clothing or clothing made with spandex
- Low rise (Hip Hugger) pants
- Any combination of clothing that exposes the midriff
- Other attire that is deemed detrimental to the safety and security of the facility as determined by the on-duty Sheriff's Office staff.

Signature: _____ Date: _____

SEDGWICK COUNTY DETENTION FACILITY
Contraband – Acknowledgement and Agreement

I hereby acknowledge that I have read and understand K.S.A. 21-5914 Trafficking in Contraband and the items prohibited by the detention facility. I understand that a violation of the statute is a criminal offense. I agree not to introduce or attempt to introduce contraband upon the grounds of or into the facility. If I do so, the Sheriff's Office will exclude me from the facility.

Date _____

Printed Name _____

Signature _____

21-5914. Traffic in contraband in a correctional institution or care and treatment facility.

(a) Traffic in contraband in a correctional institution or care and treatment facility is, *without* the consent of the administrator of the correctional institution or care and treatment facility:

- (1) Introducing or attempting to introduce any item into or upon the grounds of any correctional institution or care and treatment facility;
- (2) taking, sending, attempting to take or attempting to send any item from any correctional institution or care and treatment facility;
- (3) any unauthorized possession of any item while in any correctional institution or care and treatment facility;
- (4) distributing any item within any correctional institution or care and treatment facility;
- (5) supplying to another who is in lawful custody any object or thing adapted or designed for use in making an escape; or
- (6) introducing into an institution in which a person is confined any object or thing adapted or designed for use in making any escape.

(b) Traffic in contraband in a correctional institution or care and treatment facility is a:

- (1) Severity level 6, nonperson felony, except as provided in subsection (b)(2) or (b)(3);
- (2) severity level 5, nonperson felony if such items are:
 - (A) Firearms, ammunition, explosives or a controlled substance which is defined in K.S.A. 21-5701, and amendments thereto, except as provided in subsection (b)(3);
 - (B) defined as contraband by rules and regulations adopted by the secretary of corrections, in a state correctional institution or facility by an employee of a state correctional institution or facility, except as provided in subsection (b)(3);
 - (C) defined as contraband by rules and regulations adopted by the secretary for aging and disability services, in a care and treatment facility by an employee of a care and treatment facility, except as provided in subsection (b)(3); or

(D) defined as contraband by rules and regulations adopted by the commissioner of the juvenile justice authority, in a juvenile correctional facility by an employee of a juvenile correctional facility, except as provided by subsection (b)(3); and

(3) severity level 4, nonperson felony if:

(A) Such items are firearms, ammunition or explosives, in a correctional institution by an employee of a correctional institution or in a care and treatment facility by an employee of a care and treatment facility; or

(B) a violation of subsection (a)(5) or (a)(6) by an employee or volunteer of the department of corrections, or the employee or volunteer of a contractor who is under contract to provide services to the department of corrections.

(c) The provisions of subsection (b)(2)(A) shall not apply to the possession of a firearm or ammunition in a parking lot open to the public if the firearm or ammunition is carried on the person while in a vehicle or while securing the firearm or ammunition in the vehicle, or stored out of plain view in a locked but unoccupied vehicle.

(d) As used in this section:

(1) “Correctional institution” means any state correctional institution or facility, conservation camp, state security hospital, juvenile correctional facility, community correction center or facility for detention or confinement, juvenile detention facility or jail;

(2) “care and treatment facility” means the state security hospital provided for under K.S.A. 76-1305 et seq., and amendments thereto, and a facility operated by the Kansas department for aging and disability services for the purposes provided for under K.S.A. 59-29a02 et seq., and amendments thereto; and

(3) “lawful custody” means the same as in K.S.A. 21-5912, and amendments thereto.

Credits

Laws 2010, ch. 136, § 139, eff. July 1, 2011; Laws 2011, ch. 30, § 40, eff. July 1, 2011; Laws 2014, ch. 115, § 21, eff. July 1, 2014; Laws 2015, ch. 16, § 1, eff. July 1, 2015.

CONTRABAND

THE ADMINISTRATION OF THE SEDGWICK COUNTY DETENTION FACILITY PROHIBITS THESE ITEMS FROM THE FACILITY:

- o Any item not authorized by facility policies and procedures, state law and federal law;
- o Guns or firearms of any type, or the components, diagrams, or plans thereof;
- o Ammunition, explosives, or the diagrams, formulas or plans thereof;
- o Knives, tools, and materials such as sandpaper, whetstones or similar items used to make such knives or tools;
- o Hazardous or poisonous chemicals, flammable liquids and gases or formulas thereof;
- o Escape paraphernalia such as ropes, grappling hooks, hacksaw blades, jewelers' wire, bar spreaders, maps, lock picks, handcuff keys, or similar devices which could be used to aid an escape;
- o Identification documents or individual photographs of the inmate of the style suitable for the production of identification documents;
- o Documents, plans, diagrams, or schematics that refer to secure electrical systems, escape alarms, overhead lighting, facility power supply, gate operations, body alarms, radio communications, and similar systems;
- o Narcotics or other controlled substances, including any synthetic narcotic, drug, stimulant, sleeping pill, barbiturate, or medicine, prescription or non-prescription, which was not dispensed or approved by the facility health authority. Medicines dispensed or approved by the health authority shall be considered contraband if not consumed or utilized in the manner prescribed;
- o Intoxicants, including but not limited to liquor or alcoholic beverages;
- o Currency, in the form of paper, checks, money orders, coins, stamps or similar instruments with monetary value;
- o Hypodermic needles, hypodermic syringes, nasal inhalers or other devices or any component thereof which could be used to inject substances into the body;
- o Food items;
- o Sexually explicit material, as defined by General Order 113.02, section I-D;
- o Cameras, recording devices, one or two-way transmitting devices, and similar devices and components, thereof, including tapes, batteries, unless pre authorized by the correctional facility; and
- o Any other item deemed to be contraband by Sheriff's Office staff.