

Orleans Parish Criminal Sheriff's Office
2800 Gravier Street
New Orleans, Louisiana 70119

Modification No. 02
ACB-7-I-0059

This modification number 02 to Intergovernmental Service Agreement ACB-7-I-0059 makes the following change.

Include under Financial Provisions the following line item:

The jail will provide a box lunch for detainees for JPATS flights.

The box lunch is at the cost of \$2.50 each.

For the INS:

Roger E. Fregeau
Roger E. Fregeau
Contracting Officer

Date: 9/16/02

For the Parish:

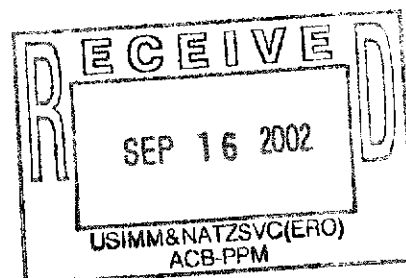
Charles C. Foti, Jr.
Signature
CHARLES C. FOTI, JR.

Name

ORLEANS PARISH CRIMINAL SHERIFF

Title

Date: 9/10/2002



Orleans Parish Criminal Sheriff's Office
2800 Gravier Street
New Orleans, Louisiana 70119

Modification No. 01
IGSA B-ACD-96-6070

This modification number 01 to Intergovernmental Service Agreement B-ACD-96-6070 makes the following changes, effective 10/01/96:

A. The Agreement number is hereby changed from B-ACD-96-6070 to **ACB-7-I-0059**.

B. The new Contracting Officer name and address are as follows:

Roger E. Fregeau, Contracting Officer
U. S. Immigration & Naturalization Service
70 Kimball Avenue
South Burlington, Vermont 05403-6813
Telephone No. b2Low

C. The new Payment address on page 2 of the Agreement is as follows:

U. S. Immigration & Naturalization Service
70 Kimball Avenue
South Burlington, Vermont 05403-6813
Attn: Finance
Telephone No. (802) 660-1127

For the INS:



Roger E. Fregeau
Contracting Officer
Immigration & Naturalization Service
70 Kimball Avenue
South Burlington, VT 05403-6813

Date: 12/16/96

INTERGOVERNMENTAL SERVICE AGREEMENT

IGSA# B-ACD 96-6070

PURPOSE

The purpose of the Intergovernmental Service agreement is to establish a formal binding relationship between the United States Immigration and Naturalization Service and the Orleans Parish Criminal Sheriff's Office (hereafter referred to as the "Provider") for the detention and care of aliens.

SUPPORT AND MEDICAL SERVICES

The Provider agrees to accept and provide for the secure custody, care, and safekeeping of detainees in accordance with the State and local laws, standards, policies, procedures, or court orders applicable to the operations of the facility.

The Provider agrees to provide detainees with the same level of medical care and services provided local prisoners including the transportation and security for prisoners requiring removal from the facility for emergency medical services. All costs associated with hospital or health care services provided outside the facility will be paid directly by the government.

MINIMUM STANDARDS

The Provider agrees to meet the following minimum standards:

1. 24 hour supervision;
2. Full compliance with applicable fire and/or life safety codes, and has appropriate smoke/fire detection equipment installed in the facility;
3. A minimum of three meals in a 24 hour period (including two hot meals) are provided at regular meal times during each 24 hour period, with no more than 14 hours between the evening meal and breakfast;
4. Appropriate 24 hour emergency medical care, and emergency evacuation procedures;
5. When detained overnight, each detainee will be provided a mattress and, when appropriate, a blanket.

FACILITY LOCATION

The Provider shall provide detention services for aliens at the following institution(s): [name/address of each institution]

Orleans Parish Criminal Sheriff's Office
2800 Gravier Street
New Orleans, Louisiana 70119

INSPECTION

The Provider agrees to allow periodic inspections of the facility by INS Jail Inspectors. Findings will be shared with the facility administrator in order to promote improvements to facility operations or conditions of confinement.

FINANCIAL PROVISIONS

The per diem rate under this agreement is \$21.00 per manday. The rate covers one person per day. The Government may not be billed for two days when an alien is admitted one evening and removed the following morning. The Provider may bill for the day of arrival but not for the day of departure. The rate for "airport" cases (defined as 7 days or less in detention) will be \$21.00 per day.

The Provider shall prepare and submit an itemized invoice for services provided each month, in arrears. The invoice is to be submitted to the following location:

Chief Patrol Agent
United States Border Patrol
P.O. Box 6218
New Orleans, LA 70174

Payments under this agreement shall be effected after receipt of a correct and proper invoice, by the following office:

Immigration & Naturalization Service
311 N. Stemmons Freeway (ROBUD)
Dallas, TX 75207

This agreement shall be in effect upon execution by both parties, and shall remain in effect unless terminated in writing, by either party. Should conditions of an unusual nature occur making it impractical or undesirable to continue to house aliens, the Provider may suspend or restrict the use of the facility by giving written notice to the Service. Such notice should be provided 60 days in advance of the effective date of a formal termination and at least 30 days in advance of suspension or restriction of use unless an emergency situation requires the immediate relocation of aliens.

The Provider may initiate a request for a rate increase or decrease by notifying the Service in writing at least 60 days prior to the desired effective date. Any rate increase must be justified in writing to the local INS office prior to being approved. Changes in rates or other terms and/or conditions of this agreement shall be effected by the issuance of either an amendment to this agreement, or the by the execution of a new agreement.

CONTACT PERSONS

The Provider is advised to contact the following representative(s) at the local Service office for assistance in matters related to this agreement:

[Redacted] b6,b7c Patrol Agent In Charge
P.O. Box 6218
New Orleans, LA 70174
[Redacted] b2Low

The Service may contact the following representative of the Provider for assistance in matters related to this agreement:

Name : Margaret Cooney
Title: Intake Billing Officer
Phone: [Redacted] b6

SIGNATURES and EXECUTION

Charles [Signature] 6/16/96
Authorized Representative of the Provider date signed

Thomas M. Bannick 6-11-96 ER
DD&P Approval - ERO date signed

ACDBUD [Signature] 6/22/96
Contracting Officer - CRO 7/9/96
date signed