UNAUTHORIZED TRANSIENT CAMPS ON MDOT PROPERTY

SITUATIONS AND SOLUTIONS



Camp Issues

Littering to the extent that it impedes MDOTs ability to do work.



Fire Dangers



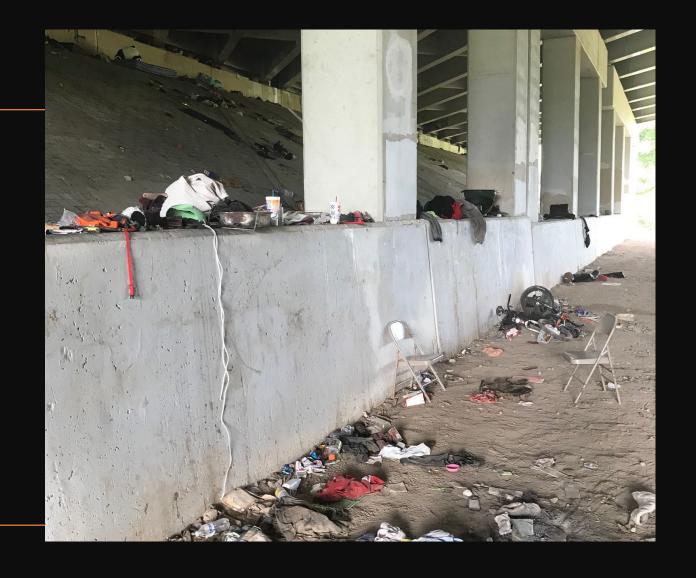
Fire Dangers

- Infrastructure damage
- Utility damage
- Personal injury
- Toxins released
- Accumulation of biohazards

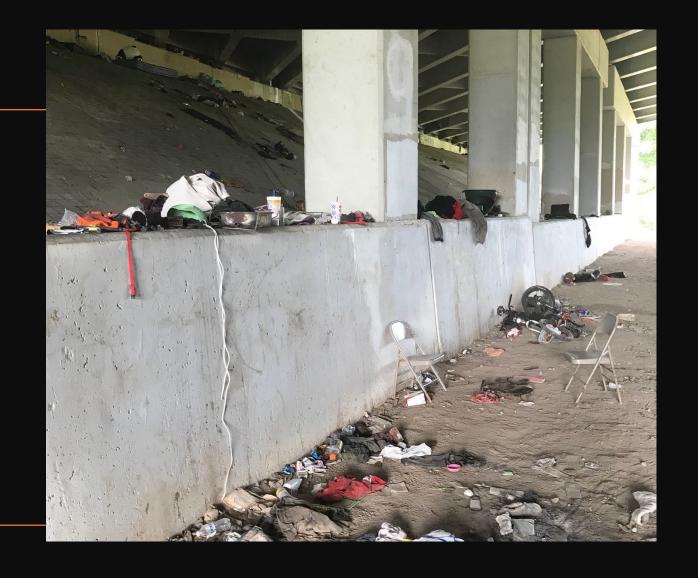


Health Hazards Affecting Everyone

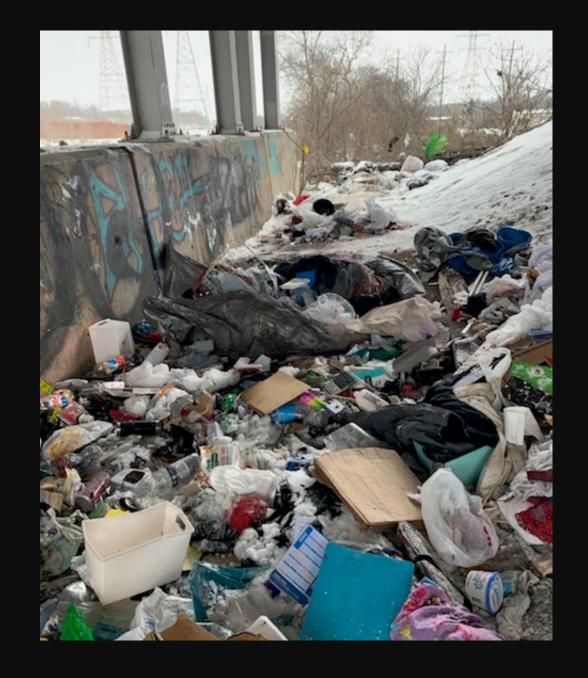
- Pedestrians
- Neighbors
- Bridge inspectors
- Maintenance workers
- Law enforcement
- Environment



- Drug Use
- Dirty Needles
- Criminal Activity
- Assaults



- Drug Use
- Dirty Needles
- Criminal Activity
- Assaults



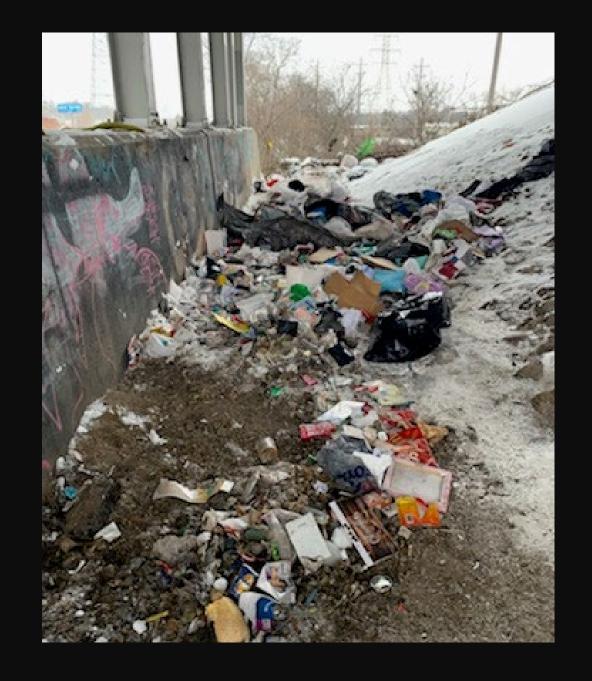
- Drug Use
- Dirty Needles
- Criminal Activity
- Assaults



- Drug Use
- Dirty Needles
- Criminal Activity
- Assaults



- Drug Use
- Dirty Needles
- Criminal Activity
- Assaults



Expensive

The cost of the removal, cleanup and deterrents are not cheap. The budget used for the process comes from our road maintenance budget.



Sample cleanup invoice

PDR of West Michigan

6030 Clyde Park Ave SW Ste F Byron Center, MI 49315 US 6166475514

abby.young@pauldavis.com WestMichigan.PaulDavis.com

> BILL TO GPMI-22-0071-C Michigan Department Of Transportation 250 28th st sw Grand Rapids, MI 49548 USA

SHIP TO
GPMI-22-0071-C
Michigan Department Of
Transportation
250 28th st sw
Grand Rapids, MI 49548 USA

INVOICE# DATE TOTAL DUE DUE DATE TERMS ENCLOSED	740	6	01/31/2022	\$9,035.00	01/31/2022	Due on receipt	
	INV	/OICE#	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED

	*Invoice - Contents/Laundry Com	Revenue Invoiced Contents/Laundry Commercial	1	9,035.00	9,035.00
DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT

BALANCE DUE

\$9,035.00

Invoice

Tresspass Letter of Authorization



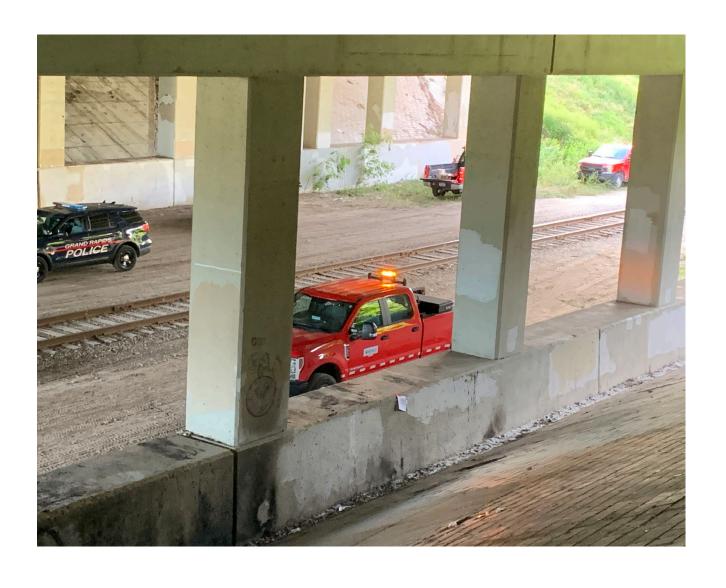
TRESPASS LETTER OF AUTHORIZATION (Each address requires a separate letter)

Business Name/Occupant:	
Property Address:	
Contact Person:	Phone:
E-Mail:	
Other Emergency Contact:	Phone:
I have experienced these problems at my property due t	o presence of unauthorized persons (mark all that apply):
\square Defecating/Urinating \square Drinking \square Illegal Lodgin	ng Littering 🗆 Illegal Drug Activity 🗆 Vandalism
☐ Disorderly Conduct/Noise Complaints Other:	
This activity affects me/my property in the following wa	ry(s):
☐ Property Damage ☐ Loss of Business/Customers ☐	Loss in Property Value Other:
As OWNER / AGENT / RESIDENT / TENANT of the Police Department assist in dealing with trespassers at the	e property located above, I request that officers of the Grand Rapi his location for the next twelve-month period,
Beginning on: and	continuing through:
Any person who is: • Not a tenant or resident of this property, or	
 Not a customer or employee present during the 	normal operating hours of the business on this property, or
 Not otherwise permitted upon this property for permission. 	legitimate purposes, is trespassing on my property without my
(List on the back of this form all residents or other	er individuals who are authorized to be on the property)
authorize the GRPD to enforce any violations of the	to leave the property. If they refuse to do so, or return thereafter, I e law on the property. My agent or I will cooperate in the prosecution rosecution and will appear in court to testify if necessary.
Signature:	Date:
Please include your mailing address if it is different from	n the property location address:
Name:	
Address:	
City / State / Zip	

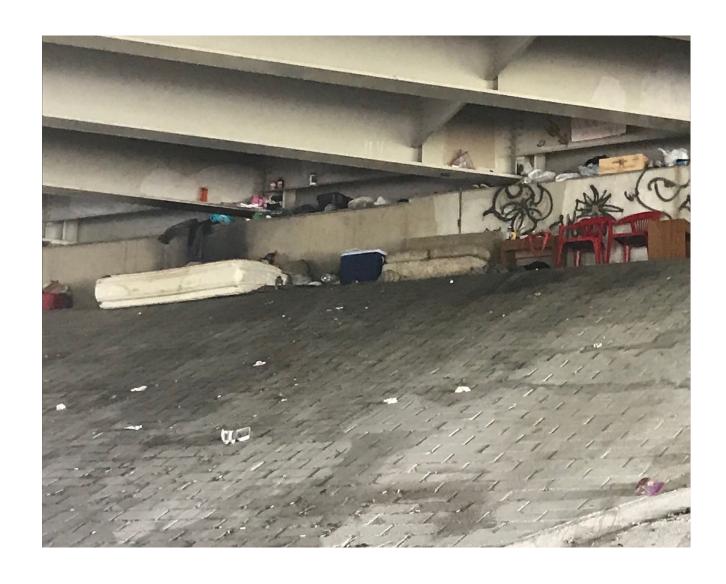
Instructions: FAX this letter back to (616) 456-8051 or scan and email it to Lt. Patrick Merrill at pmerrill@qrcity.us You may also mail the form, or carry it into the police department at the address shown below. Mark your calendar to submit a new form within one year, if the need still exists.

Grand Rapids Police Department
1 MONROE CENTER NW
GRAND RAPIDS, MI 49503
TEL (616) 456-3363 FAX (616) 456-8051

Secure



Clean



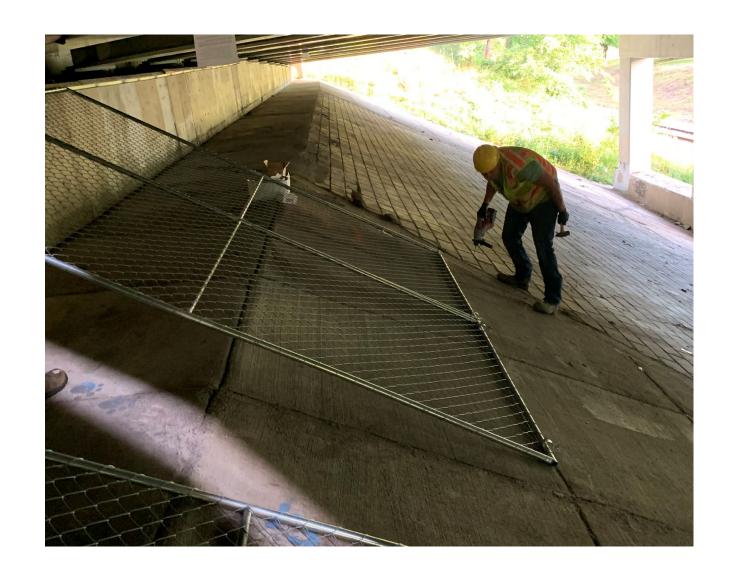
Sanitize



Stage

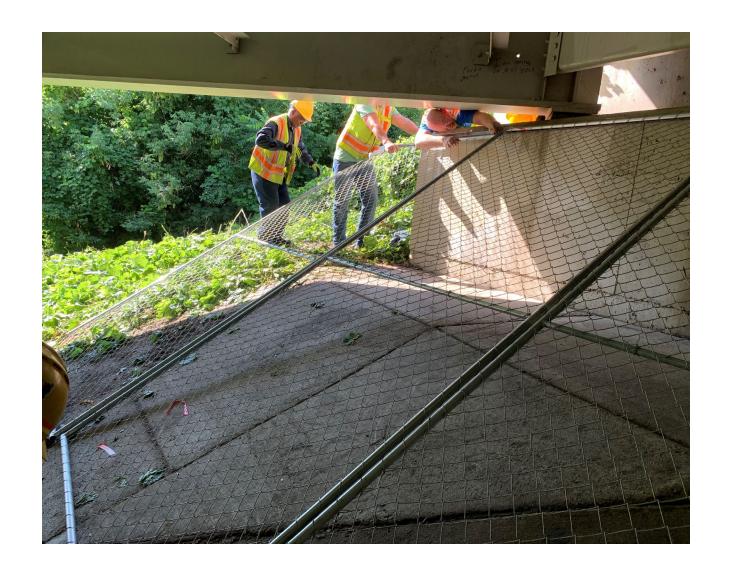






Construct





Complete



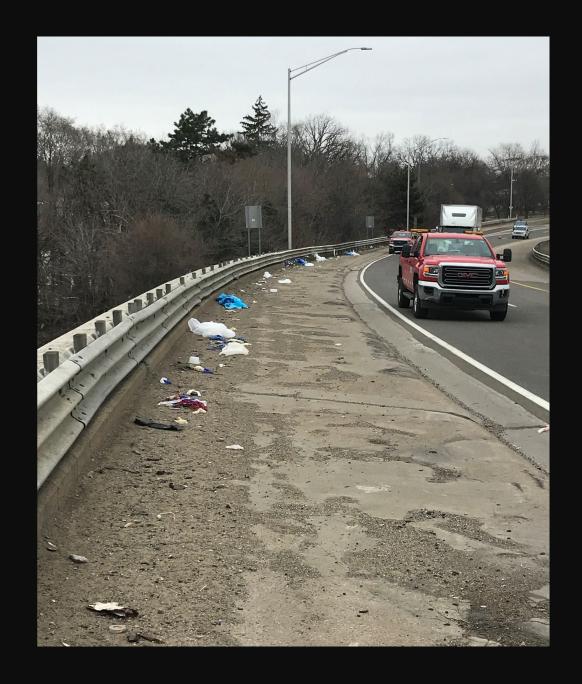
Medical Waste



Medical Waste



Medical Waste



Medical and Hazardous Waste Subcontract

Michigan Department of Transportation

DUOTATION REQUEST FOR SERVICE OR EQUIPMEN

Page 1 of

T IS PROPOSED, SUBJECT TO TH TURNISH THE EQUIPMENT OR SE total Subcontract Amount: \$	FOR LAN	TOR'S WAGES ARE INCLUDE DOT and the Michigan Sta	te Trans	JNIT BID PRIC	CE. ommission against all		
T IS PROPOSED, SUBJECT TO TH URNISH THE EQUIPMENT OR SE 'otal Subcontract Amount.' \$ The vendor shall save harmle.	RVICE(S) LISTED ABOVE. OPERA \$24,999.00 ss and indemnify the State, M or private property and for inju	TOR'S WAGES ARE INCLUDE DOT and the Michigan Sta	te Trans	JNTY OR MUI JNIT BID PRIC	\$0.00 \$0.00 \$24,999.00 NICIPALITY TO DE.		
Biohazard Area Cleanup (Approxima T IS PROPOSED, SUBJECT TO TH URNISH THE EQUIPMENT OR SE Total Subcontract Amount: \$	RVICE(S) LISTED ABOVE. OPERA \$24,999.00	TOR'S WAGES ARE INCLUDE	D IN THE U	JNTY OR MUI JNIT BID PRI	\$0.00 \$0.00 \$24,999.01 NICIPALITY TO DE.		
Biohazard Area Cleanup (Approxima				JNTY OR MUI	\$0.0 \$0.0 \$24,999.0 NICIPALITY TO		
Biohazard Area Cleanup (Approxima					\$0.0 \$0.0 \$24,999.0		
					\$0.0		
					\$0.0		
	e Cost Fer Event)	19		1,300	\$24,999.0		
TYPE	OF WORK / SERVICE	QUANTI 19	TY	JNIT COST 1,300	TOTAL COST		
3	Routine		\$24,999.00				
NUMBER OF BIDS RECEIVED	SOURCE OF FUNDING			ENGINEERS ESTIMATE			
NUMBER OF YEARS OF CONTRAC	N/A	VEHICANAL.	\$24,999.				
New NUMBER OF YEARS OF CONTRAC	T NUMBER OF OPTIONS FOR F	DENEWAL		n: 02/22/21 ER YEAR	To: 12/31/21		
NEW CONTRACT OR RENEWAL?	RENEWALS: ORIGINAL STAN	MPED DATE OF APPROVAL		W CONTRACT: TERM OF CONTRACT			
All Trunklines							
Estimated Response Time: 4-12 Hou							
Bio Supervisor: \$130 per Hour Bio Technician: \$925 per Hour Service Call: \$225 per Event PPE Package: \$45 Each Bio Hazard Box & Liner: \$125 Each Bio Hazard Trash Bags: \$40 Each Service Truck: \$75 per Hour Dumoster: \$450-5800	•						
DETAILED DESCRIPTION OF EQUI Cleaning and Disposal of Biohazardo	PMENT OR SERVICES us Materials at MDOT Managed Area	as					
AUTHORIZED SIGNATURE							
			eq	aphient or ser	vices(s) as described.		
MDOT REGION ENGINEER OR DESIGNEE				e contract age	ncy is hereby authorized he named contractor for vices(s) as described.		
AUTHORIZED SIGNATURE				and other ex	cpenses involved.		
ADDRESS 6030 Clyde Park Ave SW Suite F Byron Center, MI 49315				or a servic	e, is furnished by the vendor is responsible enance, labor, materials		
Paul Davis Restoration of West Michigan				responsibilit When equir	y of the vendor. oment and an operator,		
CONTRACTOR NAME	0		200	parts to equ	ipment is the		
Snaw (Bym				due to mech	understood that, when nanical failure, any and nd/or replacement of		
AUTHORIZED SIGNATURE				operator, wi	If be in proper operating nen delivered for use by		
ADDRESS 1500 Scribner Ave NW Grand Rapids, MI 49504			a.	All equipme	nt furnished without an		
			100	Condition	s of Equipment:		
			200				
ADDRESS 1500 Scribner Ave NW				1	UZIZZIZ1		
Kent County Road Commission ADDRESS 1500 Scribner Ave NW	Kurt Fritz	TION MAINTENANCE COORDI			DATE 02/22/21		

PROVERBS 31 vs 8-9

"Speak up for those who cannot speak for themselves, for the rights of all who are destitute".

"Speak up and judge fairly; defend the rights of the poor and needy".