

# TOWN OF HARRISON VILLAGE OF HARRISON

## ALFRED F. SULLA, JR. MUNICIPLE BUILDING 1 HEINEMAN PLACE HARRISON, NEW YORK 10528



JACKIE GREER
Town/Village Clerk

Telephone: (914) 670-3030 Fax: (914) 835-2009

TO:

Supervisor Dionisio

Councilpersons Sciliano, Leader, Evangelista, Brown

FROM: Jackie Greer, Town Clerk

DATE: May 23, 2022

SUBJ: Website Upgrade

I would like to request on the next agenda a one-time fee of \$5,000 for a Town Website Re-Design. We have done this in the past, 5 years ago, Covid delayed this current request. Mike Piccini and I have spoken to Civic Plus the company we have been using for last 11 years and feel this is the best option for us at this time. Funding is available in account 001-1900-100-4407.

Please let me know if you have any questions.

# Standard Website Services Town of Harrison, NY (Town Website Re-Design)

#### **Initial Services**

Phase 1: Website Design

- Create New, Custom Homepage Design & Layout
- Create Subpage Design & Layout
- Modify Design with Client Input until Approved

Phase 2: Site Implementation

- Identify Global Navigation, Cascading Navigation, Mega-Menus
- Implement Design within CMS
- Develop Landing Pages Per Approved Design

Phase 3: Content Development

Update Website Navigation in Coordination with Client

Phase 4: Website Deployment

- Final Site Review and Link Checking
- Install & Activate related modules
- DNS Activities

**Total Project One-Time Cost:** 

\$5,000





CivicPlus

302 South 4th St. Suite 500 Manhattan, KS 66502

Quote #: Date: Q-23862-1 3/29/2022 1:48 PM

Expires On:

6/27/2022

Product:

CivicEngage

Client:

Harrison NY - CivicEngage

Bill To:

Harrison NY - CivicEngage

SALESPERSON	Phone	EMAIL	DELIVERY METHOD	PAYMENT METHOD
Alex Webb	×	alex.webb@civicplus.com		Net 30

### CivicEngage - Statement of Work

QTY	Product Name	DESCRIPTION	PRODUCT TYPE
1.00	Drupal 7 Redesign - CivicEngage Open	Drupal Website Redesign - CivicEngage Open	One-time

List Price - Year 1 Total	USD 10,000.00	
Total Investment - Year 1	USD 5,000.00	
Annual Recurring Services - Year 2	USD 0.00	

Total Days of Quote:278

- 1. This Statement of Work ("SOW") shall be subject to the terms and conditions of the Harrison NY CivicEngage Statement of Work signed by and between the Parties ("the Agreement"). By signing this SOW, Client expressly agrees to the terms and conditions of the Agreement, as though set forth herein.
- 2. Client will be invoiced for the Total Investment Year 1 (the sum of one-time costs and a prorated portion of the Annual Recurring Services) upon signing and submission of this SOW. The Annual Recurring Services subscription fee for the Products (as described above) included in this SOW are prorated and co-termed to align with the Client's current billing schedule and the Annual Recurring Services amount will subsequently be added to Client's Term and regularly scheduled annual invoices under the terms of the Agreement.
- 3. Each year this SOW is in effect, a technology investment and benefit fee, as agreed to in the Agreement, will be applied to the Annual Recurring Services subscription fee.

Signature Page to follow.

Acceptance	
By signing below, the parties are agreeing to be bound by the Agreement terms and conditions	ne covenants and obligations specified in this SOW and the
IN WITNESS WHEREOF, the parties have caused this SOV the dates below.	V to be executed by their duly authorized representatives as o
Client	CivicPlus
Ву:	Ву:
Name:	Name:
Title:	Title:
Date:	Date:

#### **Contact Information**

\*all documents must be returned: Master Service Agreement, Statement of Work, and Contact Information Sheet.

Organization		URL	
Street Address			
Address 2			
City	State	Postal Code	
CivicPlus provides telephone supp Emergency Support is provided o ensuring CivicPlus has current up	n a 24/7/365 basis for representa	n –7pm Central Time, Monday-Friday (excluding holidays). ives named by the Client. Client is responsible for	
Emergency Contact & Mobile P	hone		
Emergency Contact & Mobile P	hone		
Emergency Contact & Mobile P	hone		
Billing Contact		E-Mail	
Phone	Ext.	Fax	
Billing Address			
Address 2			
City	State	Postal Code	
Tax ID #		Sales Tax Exempt #	
Billing Terms	140	Account Rep	
Info Required on Invoice (PO or J	ob #)		
Are you utilizing any external fund	ding for your project (ex. FEMA, C	ARES): Y [ ] or N [ ]	
Please list all external sources:			
Contract Contact		Email	
Phone	Ext.	Fax	
Project Contact	32	Email	
Phone	Ext.	Fax	
CONTRACTOR OF THE CONTRACTOR O			