

CLARENCE FIRE DISTRICT NO. 1

CELL PHONE POLICY

I. POLICY STATEMENT:

The Board of Fire Commissioners of Clarence Fire District No. 1 believes it is essential to carry out the function of emergency services within the Clarence Fire District. Certain individuals have/and maintain for their use, cellular communication. It is for this reason that the Board of Fire Commissioners believes it is inherent in their responsibility to provide emergency services pursuant to Section 176 of Town Law, that the Fire District provides a cell phone stipend for these individuals. In January 2013, the Board of Fire Commissioners conducted a thorough study of the Cellular Phone Policy. It was determined that providing a stipend in lieu of providing District-owned cell phones was in the best interest of the Fire District and provided substantial cost savings.

The following items were considered and entered into the decision to revise the Policy:

- 1) Overall reduction in monthly charges;
- 2) Elimination of the need to maintain phones, including equipment problems and replacement of equipment;
- 3) Elimination of the need to change phones annually with the change in personnel;
- 4) Elimination of the need for the Treasurer to devote extensive time in auditing calls and additional charges on a monthly basis;
- 5) Overall convenience for those individuals who are covered by this Policy;
- 6) Per IRS Guidance (IRS-2011-93, September 14, 2011), employers who reimburse employees for business use of their personal cell phones, tax-free treatment is available without burdensome recordkeeping requirements.

II. OBJECTIVE:

The primary objective of this policy is to establish guidelines relevant to cell phones.

III. GUIDELINES:

- A. The responsibility to determine the individuals eligible for cell phone stipend lies with the Board of Fire Commissioners.
- B. Commissioners, Chief, and Assistant Chiefs will be compensated at rate of \$50 per month and Captains, Fire Police Captain, EMS Captain, Building Manager, District Secretary and District Treasurer will be compensated at \$40 per month
- C. District-owned cell phone shall be maintained for the ambulance (#8).

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- D. Per month stipend shall be provided to those individuals in Section III, Paragraph B and at rate stated and shall be payable on a quarterly basis.
- E. Individuals receiving the stipend assume responsibility and are liable for compliance with all laws relating to the use of cell phones while driving a vehicle.
- F. The stipend is intended to reimburse designated users for the “business use” portion of their personal cell phone. It is not intended to fund the entire cost of the device or to pay the entire cost of the cell phone bill.
- G. Designated users shall be reasonably accessible (via cell phone) to Fire District personnel to be eligible for the quarterly stipend.
- H. The Fire District assumes no responsibility or liability for the designated user’s cell phones.
- I. To receive payment, individuals shall complete the “Cellular Phone Stipend” form (copy attached to this policy) and submit to the Fire District Treasurer. The Board of Fire Commissioners shall audit claims and approve payments at the Fire District meeting following the end of each quarter (April, July, October, January).

This policy is adopted February 12, 2018 and supersedes any previous versions of this policy. Revised on 3/11/19. Additional revisions were approved on 1/4/21.

By order of the Board of Fire Commissioners, Clarence Fire District No. 1

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CELLULAR PHONE STIPEND

Please complete and submit this form to the Fire District Treasurer at the end of each quarter. The Board of Fire Commissioners shall approve payments at the District meetings of April, July, October and January for the prior quarter's use of personal cell phone.

Commissioners, Chief, and Assistant Chiefs will be compensated at rate of \$50 per month. Captains, Fire Police Captain, EMS Captain, District Secretary and District Treasurer will be compensated at \$40 per month.

Please print information.

Name: _____

Title: _____

Cell Phone Number: _____

Quarter Period Filing: (Circle One)

1st
Jan-March

2nd
April-June

3rd
July-Sept

4th
Oct-Dec

Current Year: _____

Total Stipend: _____

Claimant's Certification:

I, _____, certify that this charge is true and correct for the time period indicated. No part has been paid or satisfied by the District previously and the amount claimed is actually due me per Fire District policy.

Signature: _____ Date: _____