

I. Purpose:

To provide a policy governing the use of wireless communication devices by City of Cottonwood employees and to provide allowance guidelines, criteria and conditions for business use of personally owned wireless communication devices.

As a general rule, the City of Cottonwood shall not own or otherwise provide wireless communication devices or services to its employees. The exception to this rule is cellular phones owned for short-term events, emergency or disaster recovery purposes, or for on-call personnel. This administrative guideline will also help ensure consistency among City departments using cellular phones and wireless devices.

II. Employee Owned Wireless Communication Devices Guidelines:

- A. City employees are allowed to use discounted plans for government employees from Verizon wireless or other wireless carriers.
- B. All personal wireless communication devices and accessories are the employee's responsibility and not the liability of the City.
- C. The City of Cottonwood will provide a wireless communication device allowance to those employees who have a documented official City business need for a communication device, and who continue to meet eligibility requirements.
- D. The City of Cottonwood does not purchase any wireless communication devices for employees.
- E. The City of Cottonwood provides an allowance to officials and employees who work in areas or on assignments where standard telephones or other forms of electronic communications equipment are not always readily available and where such use will benefit the City and its citizens

III. Maximum Allowances:

- A. The monthly wireless allowance shall not exceed the employee's monthly wireless plan charges. The City will pay an allowance equal to the lesser of the employees' monthly plan or **\$40** per month for cellular phone service.
- B. The Wireless Communication Device allowance is for phones that allow secure access to City of Cottonwood's e-mail environment. This additional allowance is equal to the lesser of one half of the employee's monthly plan charge or **\$25**.
- C. If internet accessibility is essential to conduct City business via a Wireless Communication Device, then an additional allowance not to exceed **\$15** shall be provided.

- D. Employees may request allowance for any combination of services; however the maximum monthly reimbursement shall not exceed **\$80**. The wireless allowance may be subject to taxation and will be added to the employees' gross income.
- IV. Oversight Responsibility:
- A. Individual departments shall be responsible for oversight of employee wireless usage and shall monitor and review such usage periodically to ensure that use is appropriate and that prudent fiscal management guidelines are followed.
- B. This periodic review shall include an assessment of each authorized employee's continued need to use wireless devices for business purposes.
- C. Wireless Communication Device accounts shall be randomly audited by the City's Finance Division by requesting the statement summary of the account.
- V. Allowance Procedures:
- A. All requests for wireless communication devices allowance will require the completion of a "*Request for Wireless Communication Device Allowance*" form, approved in advance by the General Manager and the City Manager, then forwarded to the Finance Division.
- B. Any employee eligible for an allowance and currently in possession of a City owned wireless communication device shall sign an "*Assumption of Liability*" form, re-assigning all responsibility for the service from the City of Cottonwood to the employee.
- C. It is recommended that wireless communication devices and contracts be obtained through Verizon Wireless to take full advantage of their IN program, and the governmental discounts provided by the carrier.
- D. All wireless communication device bills will be sent to the employee's home.
- E. All employees receiving an allowance shall provide all information requested by the Finance Division for audit purposes within ten (10) calendar days.
- VI. Policy Violations:
- A. Failure to follow this policy may result in loss of wireless communication device allowance and may result in disciplinary action, up to and including termination of employment.
- B. Allowance will be suspended for employees not complying with the Finance Division's audit requests and will not be provided with back allowance.

VII. Personal Use of City Provided Wireless Device Guidelines - While the City generally will not provide wireless phones to employees, there are some exceptions to this rule:

- A. The City will own and retain a certain number of cell phones for emergency, on-call, or disaster recovery purposes.
- B. In the instances where the City is providing a wireless communication device:
 - 1. Employee use of City wireless communication devices is limited to official City business only.
 - 2. There shall be limited personal use of City wireless communication devices **except** in response to family emergencies or unforeseen work schedule changes.

VIII. Procedures:

- A. All requests for City provided wireless communication device will require completion of a "*Request for City Issued Wireless Communication Device*" form approved in advance by the department head and the City Manager, then forwarded to the Finance Department.
- B. All purchases of City issued wireless communication devices will be through State of Arizona contract, unless a more advantageous contract is negotiated through an outside provider.
- C. All cellular telephone bills will be sent to the Finance Division.
- D. The employee responsible for the cellular telephone will review each monthly cellular telephone bill for accuracy.

IX. Policy Violations:

- A. Failure to follow this policy may result in loss of wireless communication device privileges and, for employees may result in disciplinary action, up to and including termination of employment.
- B. Excessive non-work usage of a City owned wireless communication device shall be reviewed by the employee's supervisor to determine whether continued access to a cellular telephone is in the City's interest.

**City of Cottonwood
Wireless Communication Device Allowance Agreement**

I understand that I am receiving an allowance provided by the City of Cottonwood in order to make my work easier and more productive.

I will be allowed to use discounted plans for government employees from Verizon wireless or any other service provider.

The City of Cottonwood does not purchase any wireless communication devices for employees.

I understand that the personal wireless communication devices and accessories are not provided by the City, but are my responsibility and not the liability of the City.

The City of Cottonwood will provide a wireless communication device allowance to those employees who have a documented official City business need for a communication device, and who continue to meet eligibility requirements.

Under no circumstance will my allowance be greater than my wireless communication device plan.

I will immediately notify my supervisor and the City of Cottonwood Finance Division of any changes that may affect my allowance.

I will follow the established Wireless Communication Device Policy. I understand that failure to do so may result in loss of privileges and, as a City employee, disciplinary action, up to and including termination of employment.

I have received, read, understand, and agree to comply with the City of Cottonwood Wireless Communication Device Policy.

Officer/Employee Name (Print)

Signature

Date

Received by the Finance Division

Signature

Date

**City of Cottonwood
Request for Wireless Communication Device Allowance**

To: Administrative Services

From: _____ Department

Subject: Request for Wireless Communication Device Allowance

I request that the following employee be provided an allowance for their wireless communication device.

Temporary allowance: _____ Length of time: _____ Permanent allowance: _____

Employee name: _____

Employee title: _____

Reason(s) for the amount of the request:

Allowance amount requested:

\$40 _____ Cellular Phone

\$65 _____ Blackberry

\$15 _____ Wireless Internet Access (additional allowance)

Approved: _____ Disapproved: _____

Employee Signature

General Manager Signature

City Manager Signature

Administrative Services General Manager Signature

Transfer of Billing Responsibilities E-mail/Faxback Form

Corporate to Personal/Employee Assumption of Liability rev02062007



This form will allow you to transfer billing responsibilities for a Verizon Wireless mobile telephone number currently held by your employer to you.

- 1) Complete all the applicable fields below.
- 2) If you are eligible, or required, to change your calling plan (or if the line you are transferring is the primary line on a Family SharePlan, or is the *only* secondary line on a Family SharePlan), please review the available calling plans on the Verizon Wireless website at verizonwireless.com. After selecting a calling plan, complete the fields in the Calling Plan Change section below.
- 3) Read the terms and conditions of this Transfer of Billing Responsibilities Form.
- 4) Read and accept the Terms and Conditions of the Verizon Wireless Customer Agreement. You may obtain a copy of the Customer Agreement from your Organization or Verizon Wireless representative or online at verizonwireless.com (enter in Customer Agreement in the search field).
- 5) When returning this form via e-mail you must click the box above the signature line below to acknowledge your electronic acceptance of these terms. Save a copy of the form and upload it to the Verizon Wireless Secure Document Gateway at <https://b2b.verizonwireless.com/tbmb/formuploader> (address must be manually typed in to your browser). The form should then be e-mailed to **RanchoBSC@nw.verizonwireless.com**. E-mails will only be accepted from your Organization's email domain. Once the form is received, a confirmation e-mail notice will be sent to the requester's e-mail box.
- 6) If e-mail process is not available, return this form via Fax, have both parties sign and print at the bottom of this form and fax this form to: (866) 857-3667

Note: Completion timelines for the Assumption of Liability request is 3-5 business days.

Account Information (Assuming Customer)

Wireless Number to be Transferred:		Create New Billing Account: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Assuming Customer Name:		Add to Existing Account Number (if applicable):		
Billing Address: (No PO Boxes)		Date of Birth:	Social Security #:	
Billing Address (Cont):		E-Mail Address:		
City:	State:	Zip Code:	Driver's License Number:	State:
Primary Address for Use (if different than billing) Note: No P.O. Boxes:		Home Phone:		
City:	State:	Zip Code:	Work Phone:	

Calling Plan Change - If Required (Assuming Customer)

Calling Plan Name:	Home Airtime Minutes:	Monthly Access Fee:	<input type="checkbox"/> 12 Months <input type="checkbox"/> 24 Months
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Organization Release of Liability (Relinquishing Customer)

- The account identified must be current (no past due balance) before Verizon Wireless can transfer it to another party.
- The individual signing this Transfer of Liability on behalf of Organization represents that they have the legal capacity to bind Organization.
- Organization remains responsible for all charges incurred until the line is transferred.
- By signing this form, or checking the box below, Organization agrees to release liability for the mobile telephone number indicated above. If returning via email, the Organization representative must include their name and date.

If you received this form electronically and are returning via e-mail, please check the box to the left to acknowledge your electronic acceptance of these terms.

Signed:	Title:	
Name:	Date:	Current Corporate Account Number:

Personal/Employee Assumption of Liability (Assuming Customer)

- Upon processing of the transfer of billing responsibilities, a new personal account will be established for you, for this mobile telephone number for which you agree to assume all financial responsibility.
- Establishment of your new personal account is dependent upon a credit check. Some of your personal information above will be used in conjunction with that credit check. A deposit may be required to establish this account.
- Your new personal account requires a minimum of an annual service agreement and you may be subject up to a \$175 Early Termination Fee pursuant to the terms and conditions of both the Transfer of Billing Responsibilities and the Customer Agreement.
- If you are receiving discounted monthly access fees as a benefit of your employment: You understand that this discount is based on your organization's agreement with Verizon Wireless, and that from time to time, your discount rate may be adjusted in accordance with your organization's agreement. You agree that, if you are otherwise subject to an Early Termination Fee, you will not be permitted to terminate your service without being liable for such Early Termination Fee solely because of a change in your rates resulting from a discount adjustment to which your organization has agreed.
- You understand that certain information relating to your service, including your name, your mobile telephone number and total monthly charge may be released to your organization.
- Verizon Wireless reserves the right to require proof of your employment (Company ID badge or pay stub). If a review of your employment status reveals that you are not, or are no longer, an employee of your organization, Verizon Wireless reserves the right to remove this discount and move you to a commercially available calling plan or to a non-discounted service plan for the remainder of your line term commitment.

If you received this form electronically and are returning via e-mail, please check the box to the left to acknowledge your electronic acceptance of these terms and the Customer Agreement.

Signed:	Print Name:	Date:
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City of Cottonwood
Request for City Issued Wireless Communication Device

To: Administrative Services

From: _____ Department

Subject: Request for City Issued Wireless Communication Device

I request that the City of Cottonwood provide a wireless communication device for departmental use only.

Temporary allowance: _____ Length of time: _____ Permanent allowance: _____

Department: _____

Reason(s) for the request:

Type of phone requested:

_____ Cellular Phone

_____ Wireless Communication Device

_____ Include Wireless Internet Access

Approved: _____ Disapproved: _____

General Manager Signature

City Manager Signature

Administrative Services General Manager Signature

City of Cottonwood
City Owned Wireless Communication Device User Agreement

I understand that I am using a wireless communication device that has been issued to me by the City of Cottonwood in order to make my work easier and more productive.

I will restrict my personal calls to emergencies only.

I will follow the established Wireless Communication Device Policy. I understand that failure to do so may result in loss of privileges, and as a City employee could result in disciplinary action, up to and including termination of employment.

I agree that if I violate the terms of this Agreement, I will notify and reimburse the City of Cottonwood for all incurred charges and any fees related to the collection of those charges.

I agree that if I leave City of Cottonwood employment or public office, I will return my wireless communication device and all appropriate documentation and accessories to my supervisor or to the City Manager, as may be appropriate.

I will use the City-issued wireless communication device with the highest degree of personal and professional integrity and ethics, recognizing my responsibility to the public and the City organization.

I have received, read, understand, and agree to comply with the City of Cottonwood Wireless Communication Device Policy.

City Employee Name (Print)

Signature

Date