

WAUSHARA
COUNTY

WAUSHARA COUNTY JAIL
HUBER PACKET



WAUSHARA COUNTY SHERIFF'S OFFICE
430 EAST DIVISION STREET
WAUTOMA, WI 54982

Waushara County Sheriff's Office

Jeff Nett, Sheriff

430 East Division Street

Wautoma, WI 54982

920-787-3321

Fax: 920-787-7685

Emergency Management 920-787-6571

Jail 920-787-6591

Courthouse Security 920-787-6611

To Whom It May Concern:

It is my responsibility to maintain the Waushara County Jail as a secure facility which is safe for both inmates and correctional officers. One goal of the correctional officers at the Jail is to maintain communication between our facility, inmates and employers in an effort to ensure that everyone has their needs met.

I expect that all parties involved will follow the rules that have been established at the Jail. Those inmates that chose not to follow the rules will be disciplined without consideration of the affect it may have on their employment. I hope that by working together this does not have to happen. In addition to following the rules, I expect you to treat the other inmates, their property and the correctional officers with respect.

The forms that are included with this letter should be read and thoroughly understood before you begin serving your sentence. To ensure that your ability to be released for work is not delayed the employment forms in this packet should be completely filled out and returned to the Waushara County Jail at least one week prior to reporting to serve your sentence. This will enable the staff to verify that the information is correct and within the guidelines that have been established. The other sheets will be discussed and completed with you by the correctional officer on duty when you arrive to begin serving your sentence.

You will be supplied with other information including a rule book when you arrive at the Jail. If at any time you do not understand the rules or procedures, I would encourage you to discuss the situation with a correctional officer or myself. Hopefully, knowing the rules will help you avoid being disciplined for rule violations.

You should report to the Main Jail at 430 E. Division St. on your report date to begin serving your sentence and bring at a minimum \$35.00 (No Personal Checks) for the required Booking Fee.

Thank you for your cooperation in helping to make the Waushara County Jail a safe and secure facility.

Sincerely,

Lt. Heather Wittig,
Jail Administrator
Waushara County Jail

WAUSHARA COUNTY SHERIFF'S OFFICE

Waushara County Jail

You have been sentenced to the Waushara County Jail. **It is your responsibility to read and follow all of the Jail rules.** You may have been granted Huber privileges for employment, child care, education, work search, etc. Huber release is a **privilege** and any violation of Jail rules could result in the loss of privileges including Huber or loss of good time. Misconduct or Huber violations will not be tolerated.

All sentenced inmates reporting to serve their sentence must pay the \$35.00 Booking Fee per Waushara County Ordinance #520.

Failure to pay this fee will suspend your Huber privilege until payment is made.

Non-working Sentenced inmates must pay the "Stay for Pay" fee of \$12.50 per day of your sentence. Your account will be billed each day- similar to the Huber billing.

Failure to cooperate or intentionally avoiding to pay this fee will result in loss of Good Time.

Huber inmates may have one (1) full-time job only.

A minimum of 32 hours of work per week is required to pay your Huber fees.

Jobs may be located in Waushara County (or an adjacent county with prior approval from the Huber officer), inmates may require GPS (self employed, jobs with travel, no supervision, past problems, etc).

*Huber inmates will be allowed to work and travel **No More than** 6 days each week, 60 hours **total**.

*You must sit in the jail at least one (1) day each week.

*You will be allowed out of the jail **no more** than 12 hours per day. This includes your travel time.

*Inmates whose work requires working 7 days a week **may require** the GPS program (must be approved).

*The Waushara Co. Jail's GPS program is not intended for "house arrest" to serve your sentence.

For inmates that are employed, Huber Fees (Room and Board) at the present time is \$17.50 per day including tax or \$245.00 for two (2) weeks.

A minimum of two (2) weeks Huber fees (\$245.00), along with the \$35.00 Booking Fee **(\$280.00 total)** must be paid before you will be released for work.

If you are approved for the GPS program, the "GPS Huber Package" is \$27.50 per day or \$385.00 plus the Booking Fee (\$35.00) for two weeks Huber fees **(\$420.00 total)**.

You must maintain this two (2) week advance payment on your Huber account at all times.

Your payroll check **must** be mailed to the Waushara County Jail for deposit into the Inmate Trust account per Wisconsin ss. 303.08(3) and until your account is paid in full.

Those with Direct Deposit Payroll will need to make arrangements with jail staff prior to reporting.

You are required to submit a weekly/biweekly pay stub to verify your hours worked and amount paid.

Huber inmates or their driver(s) **must** provide the Huber officer with a photo copy of their driver's license, vehicle registration, and proof of auto insurance including the insurance agent's name and telephone number. All information must remain valid and current during your sentence.

This must be provided before the inmate will be allowed any travel to Huber privileges, and any other appointments.

Failure to submit completed required Huber forms will delay your release to work or Huber.

When reporting to jail, Inmates will submit to a Urine Analysis (UA) and Breath Test (PBT). Non-compliance, or testing positive to drugs and/or alcohol, will fail to qualify you for the Huber program until a "negative" test is obtained. Secondary tests will be conducted by request for a fee at jail staff's discretion. *Your Probation Agent will be notified of 'positive' drug results.

Unemployed inmates must bring a Photo ID card, and a Social Security card when reporting to serve their sentence. Failure to provide the above listed ID will delay your ability to actively seek work until said ID is provided. Most employers require two forms of ID before employment will begin as well.

Inmates with Huber are responsible for their Medical needs. For inmates with medications, it is suggested that you contact the Jail nurse (usually in the mornings Monday thru Friday) at least one week before reporting to jail.

Inform the medical staff of your medical condition(s) and specific medications you are taking along with any other medical needs which need approval before you report to jail.

Some medications are not allowed in the jail.

This will help avoid delays in the daily medication distribution by staff.

Inmates with medical appointments must submit proof of appointments to the jail staff and are subject to verification and approval.

When reporting to jail to begin your sentence, you may bring only the items on this list:

- Appropriate clothing as needed for work or work search (lockers are small).
- Money for the Booking Fee.
- Appropriate money for Huber fees.
- Additional money for Canteen account to purchase needed items.

-All personal letters must be sent and/or received thru the United States Postal Service.

-Magazines, books and periodicals must be ordered from a subscription service and sent to the jail thru the subscription company or a book store. Friends or family can not send/bring these items to the jail.

-Property of any type or form will not be accepted at any time for any inmate.

-Personal care items such as soap, toothpaste, tooth brush, shampoo, etc. must be purchased thru the jail canteen as well as additional underwear items.

Money dropped off for your account AFTER you have been admitted into the jail must be deposited in the Kiosk in the lobby of the Sheriff's department. Cash and most credit/debit cards are accepted.

Any other information may be found in the Inmate Rules and Regulation book that you will receive after you begin your sentence or you may ask a correctional officer to assist you.

WAUSHARA COUNTY JAIL

Rules & Regulations for Huber Law Inmates

Initial

#78: You are allowed to have only one full time job. Your employer must supply proof of all required insurance and complete necessary paperwork before you will be allowed to go to work.

#79: All your earnings (entire paycheck) will be turned over to the Huber Officer per State Statute 303.08(3).

#80: You are to go directly to and from work or Huber appointment, by the shortest route without delay. You are **NOT** allowed to stop anywhere without prior authorization from a correctional officer.

#81: You are not allowed to conduct personal visitation while released on Huber.

#82: You are **NOT** to consume intoxicating beverages or be under the influence of illegal drugs. You may be subject to random testing at any time.

#83: You are not allowed to take anything in or out of the Waushara County Jail without authorization of the correctional officer on duty.

#84: If you should willfully fail to report to or return from work or Huber appointment, or should you absent yourself from said Huber activity at any time, you will be considered an escapee under section 946.42(1) or (2) of the Wisconsin State Statutes and may be prosecuted for escape.

#85: A correctional officer on duty will record your time when you leave and return to the Jail each day. It is also the inmate's responsibility to keep track of the amount of time you are out of the jail. Release of more than the 10 hour/day 60hour 6 day/week or GPS program's 12 hour/day - 84 hour 7 day/week release time requirement without prior authorization from staff may subject you to disciplinary actions.

#86: You are responsible for getting to and from work. You are required to provide proof of auto insurance and a valid drivers license for transportation. You must maintain these requirements while assigned to the Waushara County Jail. The same requirements apply to another person if you ride with them.

#87: You are **NOT** allowed to work or travel outside of Waushara County without prior approval.

#88: Violation of any of the above rules or any Waushara County Jail rule may result in the loss of Huber privileges and/or loss of any good time earned.

#89: You will make your bunk before you leave for work or Huber appointment and keep your bed area clean.

#90: You will keep yourself neat and clean at all times. You will take a shower when you return from work.

#91: You are allowed to work **NO MORE** than 6 days/ 60 hours each week. This time includes your travel time as well as any approved appointments besides work. (Or 5 – 12 hour work days)

#92: If your employment requires that you work 7 days each week, you must be on the GPS program.

I have read or had read to me the above rules. The correctional officer has answered any and all questions that I had so that I now understand each of these rules.

Inmate Signature

Correctional Officer Signature

Date

Waushara County Jail

430 E. Division St.

Wautoma, WI 54982

Phone: 920-787-6591 Fax: 920-787-6524

TO THE EMPLOYER: The below listed individual has been sentenced to serve a jail term at the Waushara County Jail under the provisions of Wisconsin state statute 303.08 "Huber Law". This agreement must be filled out completely, and returned to the Waushara County Jail. Incomplete, or inaccurate paperwork may result in the suspension of work release privileges until information can be verified by Waushara County Jail staff.

NAME OF EMPLOYEE (LAST, FIRST, MI): _____

PLACE OF EMPLOYMENT: _____

EMPLOYER'S ADDRESS: _____
_____, WI (ZIP CODE) _____

EMPLOYER'S PHONE: _____ FAX# _____

IRS EMPLOYER ID #: _____ WI DEPT OF REVENUE I.D. # _____

WORKERS COMP INSURANCE? Y N COMPANY NAME: _____

DATE OF HIRE _____ NEXT DATE OF PAY: _____ RATE OF PAY: _____

PAYDAY IS: [] WEEKLY [] EVERY OTHER WEEK [] MONTHLY

EMPLOYEE'S NORMAL WORKING HOURS ARE: START: _____ END: _____
(DO NOT INCLUDE TRAVEL TIME)

NORMAL WORK DAYS ARE: (PLEASE CIRCLE): Su M T W Th F Sa

EMPLOYEE'S DIRECT SUPERVISOR: _____ PHONE: _____

If employment is terminated, we agree to notify the Waushara County Jail staff as soon as possible. We further agree to notify the Waushara County Jail if the employee is late, does not arrive, departs at a time that is different from the schedule, or is required to work overtime. Upon request, we will agree to forward copies of any time cards, or payroll records to the Waushara County Jail, should further work attendance history be required. We also agree to forward a weekly schedule of the employees hours, no later than Saturday for the following work week. Further we agree to forward all earnings for individuals serving 20 days or more directly to the Waushara County Jail. Inmates serving less than 20 days must pay all Huber board prior to work release.

*****DO NOT WRITE BELOW THIS LINE*****

DATE REC'D ___ / ___ / ___ EMPLOYMENT VERIFIED: _____

WORK SCHEDULE VERIFIED _____

[] APPROVED [] DENIED BY _____ DATE ___ / ___ / ___

COMMENTS:

WAUSHARA COUNTY JAIL

HUBER/WORK RELEASE INFORMATION SHEET

NAME (LAST, FIRST, MI) _____

DATE OF BIRTH _____ SS# _____

ADDRESS: _____ PHONE NUMBER: _____
(Physical Address **NOT** Route Number or P.O. Box)

CITY: _____ STATE: _____

EMPLOYER NAME: _____ PHONE NUMBER: _____

ADDRESS: _____

CITY: _____ Supervisor _____

DATE OF HIRE _____ WAGE _____

WORK DAYS (PLEASE CIRCLE) Sun Mon Tue Wed Thu Fri Sat

WORK HOURS: START _____ QUITTING TIME _____

I agree to abide by the rule and regulations set forth by the Waushara County Jail. I understand that failure to abide by these rules may be grounds for disciplinary or administrative action which may include loss of Huber/Work Release privileges.

If information is not complete or correct, your release for work may be denied or delayed.

Inmate Signature _____ Date _____

*****DO NOT WRITE BELOW THIS LINE*****

Date and initial when complete.

Employment verified _____

Employment Agreement received _____

10-29 _____ Huber Board: [] Pre-pay [] Payroll garnishment [] NA

Copy to Huber Officer: Date _____ By _____

Date In: _____ Date on Huber: _____ Release Date: _____

Total Days on Huber: _____ = \$ _____

Travel Time permitted one way _____

Release Time _____ Return Time _____

Days: Sun Mon Tue Wed Thu Fri Sat ///Varies

Waushara County Jail

430 E. Division St. Wautoma, WI 54982
Phone: 920-787-6591 Fax: 920-787-6524

Weekly Work Schedule

This form must be completely filled in and returned to Waushara County Jail no later than the Saturday proceeding the work week. Any forms that are not completely filled out will be rejected. Schedules returned late may not be processed prior to scheduled work time.

Inmate Name _____

Employer _____

	<u>DATE</u>	<u>START</u>	<u>FINISH</u>
Sunday	_____	_____	to _____
Monday	_____	_____	to _____
Tuesday	_____	_____	to _____
Wednesday	_____	_____	to _____
Thursday	_____	_____	to _____
Friday	_____	_____	to _____
Saturday	_____	_____	to _____

All inmates must be at a verifiable work site. **If the nature of the inmate's employment dictates that he/she will be working at numerous work sites, the times and places must be attached to this schedule.** Inmates who are not at the correct site face administrative or disciplinary sanctions that may include suspension of their work release privilege. Travel time will be determined by Waushara County Jail staff, therefore **DO NOT** include travel time as part of the work schedule.

I attest the above information is true and correct. As the authorized supervisor for the above listed inmate, I agree to inform Waushara County Jail staff of any and all absences from the work site.

Print and Sign _____ Date _____
(Work Supervisor)

Title _____ Phone _____

Need a Bag Lunch? Y N

(Inmate Signature)

INMATE & EMPLOYER: Read and understand both sides of this form.

Huber/Work Release/Child Care Guidelines

EMPLOYERS and INMATES PLEASE READ AND FOLLOW: The following are Huber/Work Release/Child Care rules for inmates at the Waushara County Jail. Exceptions to the rules are made for exigent circumstances only, and must be approved by the Jail Administrator, or designee.

1. Inmates are permitted release from jail no more than six days per week (*unless approved for GPS*).
2. Inmates are restricted to 60 hours of release time per week maximum, no more than 12 hours in one day (5/12 hour work days allowed with approval *unless approved for the GPS program*).
3. Inmates will not be permitted to work the following holidays. These days in are in addition to the Inmate's normal sit-in day. Exceptions may be made for exigent circumstances if a **written request** is received from the employer 1 week in advance of the holiday, and must be approved by the Jail Administrator. The holidays include: New Year's Day, Easter, Memorial Day, July 4th, Labor Day, Thanksgiving, Christmas Eve, Christmas Day and New Years Eve. **

Rules that apply specifically to work include:

- a. Employers must report all absences from the work site to the Jail staff including, any tardiness, sick absences, leaving for unapproved appointments, etc.
4. If the inmate is terminated or laid off, the employer must notify the Jail staff immediately.
5. Overtime will be permitted only with prior notification to Jail staff. If an inmate is required for overtime please call 920-787-6591. Written verification of overtime required, must be faxed and/or presented to staff upon return to the jail that day (must be on company stationary from a supervisor).
6. The employer assumes all risks and liabilities for any injury to an inmate while working.
7. Self-employed inmates must remain current with all Huber fees or the privilege will be terminated.
8. Time out of jail must be work related at all times. The remainder of time out of jail must be for direct travel to and from the jail only, without delay. There will be no personal visitation at any time.

Rules that apply specifically to Child Care include:

9. Child Care will only be permitted if it is explicitly addressed on the commitment papers.
10. Child Care will not be permitted in addition to employment.
11. Child Care will take place at an established residence that has a working land phone. You are to remain at this residence during your release time. Any exceptions must be approved in advance by Correctional staff and a Stop Pass must be obtained and completed.
12. The only person(s) allowed at the residence when you are there will be your children except for up to 15 minutes at the beginning and the ending of your day for child exchange.
13. Inmates serving a sentence from a county other than Waushara being released for Child Care must pay all Huber Fees.
14. The Jail may require written verification from the employers of other persons sharing Child Care responsibilities.

Your cooperation with these rules is required. If you have any questions, please call the Waushara County Jail at 920-787-6591.

** Huber Inmates may be considered for holiday work, if they meet the following criteria:

15. Must be a resident of the jail thirty (30) consecutive days prior to the holiday in question.
 - a) Can not have any recorded jail rule violations for the thirty (30) days preceding the holiday.
 - b) A written request from the employer indicating that the inmate is needed for work on the holiday in question must be received one (1) week prior to the holiday.

*****OFFICE USE ONLY*****

DATE RECEIVED _____ RECEIVED BY _____

DATE ENTERED _____ ENTERED BY _____

ITEMS REQUIRED TO EXERCISE HUBER PRIVILEGES

CHECK LIST FOR INMATE (**YOU KEEP THIS LIST**) - BEFORE REPORTING TO SERVE JAIL SENTENCE.

DATE I REPORT TO JAIL: _____ TIME: _____ (FOUND ON JOC OR PREARRANGED BY STAFF)

- _____ I HAVE READ AND UNDERSTAND THE **ENTIRE** HUBER PACKET
- _____ I HAVE READ, UNDERSTAND, AND **SIGN** THE HUBER RULES
- _____ \$35.00 BOOKING FEE (NO PERSONAL CHECKS) *****REQUIRED IN ORDER TO EXERCISE HUBER*****
- _____ EMPLOYMENT INFORMATION COMPLETED AND SIGNED BY EMPLOYER
ALL FIELDS, INCLUDING TAX NUMBER AND PROOF OF WORKMAN'S COMP INSURANCE MUST BE INCLUDED.
- _____ SELF EMPLOYED INMATES MUST ALSO PROVIDE PROOF OF LEGITIMATE BUSINESS ALONG WITH LAST 2 YEARS OF W2 SELF EMPLOYMENT TAX INFORMATION.
- _____ WORK SCHEDULE FOR FIRST 2 WEEKS IN JAIL COMPLETED & SIGNED BY EMPLOYER
- _____ HAVE DIRECT DEPOSIT STOPPED WHILE SERVING JAIL SENTENCE (IF UNABLE, MUST BE APPROVED)
EMPLOYER MUST SEND PAYROLL CHECK TO THE WAUSHARA COUNTY JAIL.

- _____ I UNDERSTAND THAT I CAN ONLY EXERCISE ONE FORM OF HUBER. (WORK / SCHOOL / CHILDCARE).
- _____ STUDENTS MUST PROVIDE PROOF OF ENROLLMENT AND CLASS SCHEDULES.
- _____ CHILD CARE SUBJECTS MUST REQUEST SPECIAL FORM FROM JAIL STAFF – APPROVAL REQUIRED.

- _____ VEHICLE INSURANCE – MUST BRING PROOF
- _____ VEHICLE LICENSE AND REGISTRATION. – MUST BRING PROOF
- _____ DRIVER INFO (VALID DRIVERS LICENSE) – MUST BRING PROOF
 - _____ INMATE DRIVER
 - _____ I DO NOT HAVE A VALID DRIVERS LICENSE.
 - _____ OTHER DRIVER(S) *MUST REPORT IN PERSON TO THE JAIL WITH PROOF.*
- _____ I WILL HAVE A VEHICLE AT THE JAIL _____ YES _____ NO

- _____ IF SENTENCE IS 20 DAYS OR LESS, HUBER FEES MUST BE PAID IN FULL TO WORK.
(SEE JAIL STAFF FOR AMOUNT PRIOR TO REPORT DATE)
- _____ HAVE PROPER AMOUNT OF "2 WEEKS OF HUBER FEES" AS REQUIRED (NO PERSONAL CHECKS).
 - _____ STANDARD HUBER FEES (\$245.00) *Note: this does not include the mandatory booking fee.*
 - _____ GPS HUBER FEES (\$385.00) *Note: this does not include the mandatory booking fee.*

- _____ PHOTO ID CARD AND SOCIAL SECURITY CARD. *(UNEMPLOYED INMATES MUST ALSO HAVE THIS)*

- _____ I HAVE NOT TAKEN OR INJECTED **ILLEGAL** DRUG(S) IN THE LAST 30 DAYS. *(TESTING IS REQUIRED)*
- _____ MEDICATIONS AND OR MEDICAL APPOINTMENTS *(REQUIRE WRITTEN PROOF & SUBJECT TO APPROVAL)*

- _____ WORK CLOTHES *(LOCKERS AT JAIL ARE SMALL, BRING MINIMAL CLOTHING)*

- _____ I HAVE MADE CONTACT WITH GPS COORDINATOR FOR GPS PROGRAM INFO IF JOB / TRAVEL IS BEYOND WAUSHARA COUNTY AND/OR SELF EMPLOYED AND/OR MUST WORK 7 DAYS PER WEEK.
CONTACT MUST BE DONE AT LEAST 2 WEEKS PRIOR TO REPORT DATE.
(ANY EMPLOYMENT OR HUBER MAY REQUIRE GPS PROGRAM – SUBJECT TO JAIL STAFF APPROVAL)

- _____ SUBMITTED ALL COMPLETED HUBER PACKET INFO FOR APPROVAL TO THE JAIL **AT LEAST 7 DAYS PRIOR TO REPORT DATE.**

DATE ALL PAPERWORK SUBMITTED TO JAIL STAFF: _____

*THE ABOVE IS NOT LIMITED AND MAY INCLUDE OTHER REQUIREMENTS OR CONDITIONS BY WCJ
TRANSFER INMATES MAY ALSO BE SUBJECT TO OTHER REQUIREMENTS OR CONDITIONS BY WCJ*

WAUSHARA COUNTY JAIL 920-787-6591
APPLICATION TO TRANSFER HUBER TO ANOTHER COUNTY

Inmate Name (Last, First, MI): _____

DOB: _____ Contact Phone Number: _____

Complete Address (must have physical address): _____

Request to transfer Huber:

From Waushara County to: _____ County.

From _____ County to Waushara County.

Sentencing Charges: _____ Length of Sentence: _____

Date Scheduled to report to Jail: _____ Release Date: _____

Employer: _____ Phone _____

Complete Address _____

Work Hours _____ Wage _____

Supervisor _____ Phone _____

Length of Employment _____

I understand that my acceptance as a Huber/Work Release Transfer is conditional and that such status may be terminated with or without cause. Furthermore, I understand that if my status as a transfer to another county from Waushara County is terminated, I will lose/forfeit my Huber/Work Release privileges for the remainder of my sentence.

Signed by Inmate: _____ Date _____

*** *****

Reply: Agency, please reply to the Waushara County Jail by fax at 920-787-6524

Accept as a Transfer Deny as a Transfer Officer _____

Report Date and Time _____

List other info or conditions _____
