

KENNETH SCHMITT
Town Supervisor

TOWN OF CARMEL
TOWN HALL

ANN SPOFFORD
Town Clerk

FRANK D. LOMBARDI
Town Councilman
Deputy Supervisor

60 McAlpin Avenue
Mahopac, New York 10541

KATHLEEN KRAUS
Receiver of Taxes

JOHN D. LUPINACCI
Town Councilman
SUZANNE MC DONOUGH
Town Councilwoman
JONATHAN SCHNEIDER
Town Councilman

Tel. (845) 628-1500 • Fax (845) 628-6836
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MICHAEL SIMONE
Superintendent of Highways
Tel. (845) 628-7474

TOWN BOARD WORK SESSION
Wednesday, August 13, 2014 7:00pm

Pledge of Allegiance – Moment of Silence

Town Board Work Session:

1. Michael Carnazza, Building & Codes Enforcer – Consider Request to Correct and Clean up Various Abandoned Residential Properties within the Town of Carmel as per the Town Code Section 114-15
2. Consider Submission of DASNY (Dormitory of the State of New York) Grant for Camarda Park Utilities Project (\$200,000)
3. Highway Department - Consider Accepting Proposal and Authorizing Payment – Atlantic Pavement Marking
4. Consider Request for Fireworks Display – Carmel Fire Department Annual Carnival August 30, 2014
5. Consider Waiver of Application Fee for Sound Amplification Permit – Mahopac-Carmel Chamber of Commerce Community Street Festival, October 5, 2014
6. Consider Approval and Authorizing Distribution Lake Mahopac Park District Newsletter
7. Consider Waiving the Notice Requirement in Section 64 of the New York State ABC Law with Respect to a Liquor License for “The Carriage House Restaurant and Tavern II” Inc. 887 Route 6, Mahopac, NY

- **Public Comment (Three (3) Minutes on Agenda Items Only)**
- **Town Board Member Comments**

Open Forum:

- **Public Comments on New Town Related Business (Three (3) Minutes Maximum per Speaker for Town Residents, Property Owners & Business Owners Only)**
- **Town Board Member Comments**
- **Adjournment**

Executive Session:

1. Glenn Droese, Town Assessor - Certiorari Litigation
2. Joseph Charbonneau, Special Legal Counsel –Town of Carmel v Putnam Community Foundation

Michael G. Carnazza
Director of Code Enforcement



60 McAlpin Avenue
Mahopac, New York 10541

Kenneth Schmitt
Supervisor



MEMORANDUM

☒ Work Session 8/13/14

☐ Agenda _____

To: Supervisor Kenneth Schmitt
Town Board

From: Michael Carnazza, Building Inspector

Date: August 7, 2014

Re: Property Cleanups for Lepore, Deufemia, DeFrancesco, Schulz, Wells Fargo, Martinez, Lupis, Wagner, Sheehan, and Vataj

Please be advised that we have made several attempts to contact each of the above mentioned property owners to clean their property under the Property Maintenance Code of the Town of Carmel but have not complied with our orders or we were unable to contact the owners.

Under section 114-15, the Building Inspector is hereby authorized and empowered to correct or cause to be corrected such violation, subject to the approval of the Town Board of the Town of Carmel.

Lepore-28 Cross Hill Rd., Mahopac Tm#74.42-1-69 Vacant house. Not maintained.

Deufemia- 71 Ann Rd., Carmel Tm#54.14-1-53 Vacant house. High grass. Pool not secured.

DeFrancesco- 7 Bass Rd., Mahopac Tm#85.11-1-13 Vacant house. High grass. Pool not secured.

Schulz- 50 Breckenridge Rd., Mahopac Tm#74.16-1-33 Vacant house. Not maintained. House not secured. Potential

Wells Fargo (Bank Owned)- 95 Chestnut Ridge Rd., Mahopac, Tm#43.17-1-2. Vacant house. High grass.

Martinez- 39 Colonial Dr., Mahopac, Tm#75.11-2-48 Vacant house. Not maintained.

Lupis- 66 Ellen Ave., Mahopac Tm#75.59-1-9 Vacant house. Not maintained.

Wagner- 27 Everett Rd., Carmel Tm#44.19-2-17 Vacant house. Not maintained

Sheehan- 31 Munich Rd., Carmel Tm#77.13-2-31 Vacant house. Not maintained

Vataj- 53 Harkin Rd., Carmel Tm#54.14-1-59 Vacant house. Not maintained. Mowing ½ of property. Coyotes seen by neighbors on property.

I would like to get approval to remedy the violations on the properties by obtaining bids for said work.

Thank you for your consideration in this matter.



TOWN OF CARMEL RECREATION & PARKS DEPARTMENT
SYCAMORE PARK, 790 LONG POND ROAD
MAHOPAC, NEW YORK 10541

JAMES R. GILCHRIST, CPRP, DIRECTOR

TELEPHONE: (845) 628-7888 FAX: (845) 628-2820

EMAIL: carmelrecreation@ci.carmel.ny.us

WEB: <http://www.carmelny.org>

#2

☒ Work Session 8/13/14

☐ Agenda _____

DATE: August 5, 2014

MEMO TO: Carmel Town Board ✓
Carmel Town Hall

FROM: James R. Gilchrist, CPRP
Director, Recreation and Parks

SUBJECT: Installation of Multi-Purpose Facility at Camarda Park (DASNY Grant – Project ID #6188)

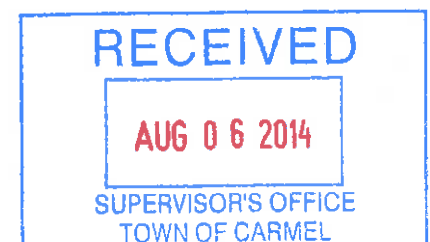
REFERENCE: 1) July 15, 2014 Dormitory Authority State of New York memo to Mr. Ken Schmitt
2) July 22 e-mail from Rob Vara (copy attached)

As you are aware, the Town of Carmel has been approved to receive a State and Municipal Facilities Program grant (SAM) in the amount of \$200,000.00 which will be used for the subject project.

A Town Board resolution is required to authorize Supervisor Schmitt to execute any necessary documents, similar to the one that was done for capital improvements to the Chamber Park and Camarda Park (copy attached). Please add this item to the August 13 work session agenda and contact me with any questions.

/sms
attachments

Multi-Purpose Bldg memo



"Town Unity through Recreation"

Gilchrist, Jim

From: Pasquerello, Anne
Sent: Tuesday, July 22, 2014 1:02 PM
To: Vara, Rob; Gilchrist, Jim
Cc: Schmitt, Kenneth; Franzetti, Richard
Subject: RE: 07-22-2014 DASNY Grant- Project ID # 6188

Rob,
The Supervisor will be placing this item on the August 13th Work Session

Anne Pasquerello

Confidential Assistant to Town Supervisor
Carmel Town Hall
60 McAlpin Avenue
Mahopac, NY 10541
Office: 845-628-1500 ext. 137
Fax: 845-628-6836

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From: Vara, Rob
Sent: Tuesday, July 22, 2014 12:52 PM
To: Gilchrist, Jim
Cc: Schmitt, Kenneth; Franzetti, Richard; Pasquerello, Anne
Subject: 07-22-2014 DASNY Grant- Project ID # 6188

Jim, As we discussed today, this matter must be placed on a Town Board work session to Authorize the Supervisor to execute any documents necessary.

Anne, The Board did a very similar resolution for the \$150,000.00 grant that we submitted for the Dug Out improvements at Camarda and the Playground Improvements at Chamber Park. The date of that Resolution was March 20, 2014.

Once that resolution is complete, I will arrange to have Ken sign the Project Information Sheet and transmit it back to DASNY with appropriate documentation.

As a side matter, the title of the Grant is "Renovation of an All Purpose Facility at Camarda Park". That description is incorrect. Jim and I have retitled the project to "Installation of Multi-Purpose Facility at Camarda Park"

Robert Vara
Engineering Projects Coordinator
Town of Carmel
Carmel Town Hall

#14

RESOLUTION AUTHORIZING SUBMISSION OF GRANT APPLICATION TO DORMITORY AUTHORITY OF THE STATE OF NEW YORK-STATE AND MUNICIPAL FACILITIES PROGRAM

RESOLVED that the Town Board of the Town of Carmel hereby authorizes the submission of a Grant Application to the New York State Dormitory Authority regarding its State and Municipal Facilities Improvement Program for proposed capital improvements to Mahopac Chamber Park and Camarda Park within the Town of Carmel; and

BE IT FURTHER RESOLVED that Town Supervisor Kenneth Schmitt is hereby authorized to execute any and all necessary documentation required in connection with the aforesaid grant application.

Resolution

Offered by: _____

Seconded by: _____

<u>Roll Call Vote</u>	<u>YES</u>	<u>NO</u>
Jonathan Schneider	_____	_____
John Lupinacci	_____	_____
Suzanne McDonough	_____	_____
Frank Lombardi	_____	_____
Kenneth Schmitt	_____	_____

scan/email: Supervisor/TBd
Gilchrist
Legal Counsel

July 15, 2014

Mr. Ken Schmitt
Supervisor
Town of Carmel
60 McAlpin Avenue
Mahopac, NY 10541

Re: *State and Municipal Facilities Program ("SAM")*
Renovation of an All Purpose Facility at Camarda Park
Project ID: #6188

Dear Mr. Schmitt:

As you know, the Town of Carmel has been approved by the State to receive a State and Municipal Facilities Program ("SAM") grant for the above-referenced project in the amount of \$200,000 (the "Grant"). DASNY will be administering this Grant.

Enclosed you will find the "**Project Information Sheet**" for your SAM Grant. Please complete the four (4) sections in the attached Project Information Sheet, as well as sign and date the Project Information Sheet certifying that the information you provided to DASNY is true and correct. Please mail the signed original, as soon as possible, to:

DASNY
Attn: Grants Administration
515 Broadway
Albany, New York 12207

For your convenience, a sample return letter is attached to assist you when assembling the Package to return to DASNY.

Once DASNY receives the Project Information Sheet, a Grant Administrator may contact you to set up a conference call between DASNY and the Town of Carmel to discuss the project and how we will proceed.

In the meantime, please review the enclosed list of **Frequently Asked Questions**. This list was designed to answer many of the questions that you may have about the Grant process. **Please keep this document to use as a reference during the administration of the Grant.**

CORPORATE HEADQUARTERS

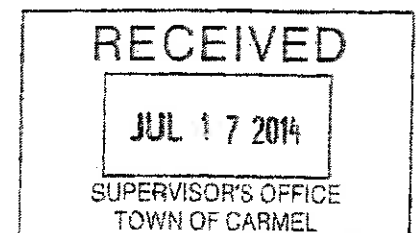
515 Broadway
Albany, New York 12207-2984
T 518.257.3000
F 518.257.3100

NEW YORK OFFICE

One Penn Plaza, 52nd Floor
New York, New York 10119-0098
T 212.273.5000
F 212.273.5121

BUFFALO OFFICE

539 Franklin Street
Buffalo, New York 14202-1109
T 716.884.9780
F 716.884.9787



www.dasny.org

Should you have any questions concerning the enclosed documentation, please call (518) 257-3177 and someone from Grants Administration will contact you.

Very truly yours,



Sarah D. Antonacci
Grant Administrator

Enc.

cc (w/out enc.): Adrian Swierczewski, NYS Division of the Budget
Elyse Griffin, NYS Division of the Budget
Robert F. Mujica, NYS Senate Finance Committee
Sara Richards, Esq., DASNY

PLEASE PRINT ON ORGANIZATIONAL ("GRANTEE") LETTERHEAD

DASNY

Attn: Grants Administration

515 Broadway

Albany, New York 12207

RE: *State and Municipal Facilities Program ("SAM")*
Renovation of an All Purpose Facility at Camarda Park
Project ID: #6188

Dear Grants Administration:

Enclosed please find the following documents in connection with the SAM Grant awarded to our organization:

1. Project Information Sheet;
2. Deed or Lease;
3. Evidence of committed funding sources; and
4. SEQRA documentation.

If any further information is needed or if you have any questions, please give [Grantee Contact Person] a call at () .

Signature

Print Name

Title

Enclosures

**STATE AND MUNICIPAL FACILITIES CAPITAL PROGRAM
(SAM)
PROJECT INFORMATION SHEET**

SECTION 1: GENERAL INFORMATION**A. Project Name:**

Project Location:

B. Organization:

Legally Incorporated Name:

Street (not P.O. Box):

City: Zip: County:

Phone: Ext: Fax: E-mail:

Contact Name & Title:**Federal Taxpayer I.D./Charity Reg.# (Non-profits Only):**

1. Type of Organization:

- | | |
|---|---|
| <input type="checkbox"/> Municipality | <input type="checkbox"/> Local Development Corporation or Industrial Development Agency |
| <input type="checkbox"/> Not-for-Profit | <input type="checkbox"/> University/Educational Organization |
| <input type="checkbox"/> Business Corporation | <input type="checkbox"/> Other (please describe) _____ |

2. Is the organization currently seeking or receiving any other New York State assistance for this project? ☐ No ☐ Yes

If Yes, please provide a detailed explanation on an attached separate sheet.

SECTION 2: PROJECT DESCRIPTION**Project Description and Amount**

1. Please attach a separate sheet with a detailed description of the specific capital project that will be undertaken and funded pursuant to this Grant.

2. Project Start Date: _____ Anticipated Date of Project Completion: _____

3. Please list the anticipated amount of funding to be received from the SAM Program for this project.
\$ _____

4. Will any entity other than the Corporate entity set forth in Section 1, above, be paying any project related costs? ☐ No ☐ Yes
If Yes, please attach a separate sheet setting forth the costs to be paid by another entity, as well as a description of the relationship between the Grantee and the other entity.

5. Does the Applicant own the site where the project will be located? ☐ No ☐ Yes
If No, please attach a separate sheet describing the control the Applicant has over the Project site.

Attach a copy of the deed or other indicia of municipal ownership, lease or other document evidencing site control by the Applicant

6. Does the applicant plan to occupy 100% of the project facility? ☐ No ☐ Yes
If No, attach a schedule explaining the planned occupancy.

7. If an organization other than the Grantee will have an interest in the equipment or real property purchased with Grant funds, please attach a separate sheet describing the legal relationship between the Grantee and the organization.

8. Does the project require environmental or other regulatory permits? If Yes, please specify type: ☐ No ☐ Yes

Have they been secured? ☐ No ☐ Yes ☐ NA

If No, please specify why:

9. Has any State or local government agency reviewed the project under the State Environmental Quality Review Act (SEQRA)? ☐ No ☐ Yes ☐ NA

If Yes, please set forth the lead agency for the review and provide a copy of the negative declaration, findings statement, or Type II memo issued by the lead agency.

SECTION 3: ELIGIBILITY FOR TAX-EXEMPT FINANCING

1. Has the applicant previously received financing from the sale of tax-exempt bonds? ☐ No ☐ Yes
If Yes, attach a schedule describing the details of such financing.

2. Does the applicant anticipate applying for financing for this project from the sale of other bonds? ☐ No ☐ Yes

3. Have any funds been expended or obligations incurred to date on that portion of the project for which this application is made? ☐ No ☐ Yes

If Yes, attach a schedule showing details of such disbursements (date, purpose, payee, etc.).

SECTION 4: PROJECT BUDGET

Complete the following Project Budget detailing the proposed sources and uses of funds (attach additional sheets if necessary) that will be utilized to complete the Project. State the source of the funding, and any contingencies that need to be satisfied prior to accessing the funds.

Please include evidence of committed funding sources to be used to complete the project as described. This may include a copy of letter(s) of credit, award letters, a resolution from the governing board of the Grantee committing to provide the balance of the funds, or a combination of the above.

<u>USE OF FUNDS</u>	<u>SOURCES</u>						<u>TOTAL</u>
	State		In-Kind /Equity /Sponsor		Other sources (Please specify each source and include commitment letter or other evidence that funds have been secured)		
Tasks	Entity Name	Amount	Source Name	Amount	Entity Name	Amount	
Total:							

I hereby certify that the information in this Project Information Sheet is true and correct in all material respects, and I understand that the Dormitory Authority of State of New York and other entities that may be involved in the grant process are relying on this information in the course of the reviews that are required under Federal and State law.

Signature of Authorized Officer

Date _____

Print Name _____

Title

Print Form

Grant Programs
Frequently Asked Questions

This list is designed to answer many of the questions that you, the Grantee, may have about the Grant Programs administered by DASNY. If, after reviewing this list, you have additional questions, please call us at (518) 257-3177.

I. *Process Questions*

A. Questions regarding the Grant awards and the role of DASNY

Q.A1: How was my Grant awarded?

A.A1: For most programs, your Grant was awarded by the Senate or the Assembly and will be administered by DASNY. Eligibility under other programs and the Grant awards made under programs such as HECap and EXCEL, were formula-based. DASNY does not play a role in the selection of Grantees or in determining the amount of the Grant award for any of the programs.

Q.A2: What is DASNY's role in the Grant administration process?

A.A2: DASNY's role in the process is twofold. First, the New York State Assembly, Senate and the Division of the Budget have asked DASNY to administer the Grant Programs by undertaking a review of each Grant funded Project to be certain that the Grant may be financed with the proceeds of DASNY bonds; the Project may be funded under the Grant Program; and the Grantee is otherwise eligible to receive Grant funds. Once the Grant has been approved for processing, DASNY will enter into a Grant Disbursement Agreement with each Grantee. Once the Grant Disbursement Agreement is fully executed, DASNY will process requisitions for eligible costs upon submission of certified requisitions by the Grantee. (Please note that for the HECap Program, payments will be made by the Office of the State Comptroller).

Second, DASNY issues bonds and uses the proceeds of the bonds to finance the Grants. In some instances, the bond proceeds are used to reimburse the State of New York for funds previously transferred to DASNY for the purpose of financing the Grants.

B. Grant Processing Prior to Final Approval

Q.B1: What happens now that DASNY has received the Grant Preliminary Application or Project Information Sheet for our Project?

A.B1: General Review:

DASNY reviews each Preliminary Application or Project Information Sheet for compliance with the enabling legislation for the Grant Programs and applicable tax laws. DASNY will also review documentation evidencing site control, corporate authority, evidence of committed funding to pay for the entire Project as described, and other matters. In addition, a review as required by the State Environmental Quality Review Act will be undertaken. During the course of the review process, you will be asked to complete certain forms and return them to DASNY. Please do so promptly, as delays in returning these forms will delay the process and, ultimately, the disbursement of Grant funds to you.

Pregualification:

Effective August 1, 2013, not-for-profit organizations are required to register and prequalify on the New York State Grants Gateway (www.grantsreform.ny.gov) in order to receive Grant funds. State entities will post upcoming and available funding opportunities on this website. The Grants Gateway will also provide grantees a secure online repository to store and share commonly requested documents.

Incorporation Documentation:

Please note that in order to verify that we enter into a Grant Disbursement Agreement with the appropriate Grantee, we will need to review the incorporation papers or the charter for the Grantee organization and verify that the Grantee is authorized to do business in the State of New York. If the Grantee has a D/B/A, we will need the paperwork establishing the D/B/A as well.

Site Control:

In addition, we will need documentation to establish that the Grantee has appropriate site control at the premises where the Grant funded Project will occur and where Grant proceeds will be spent. If the Grantee will use Grant proceeds to purchase a facility, we will need to see the contract of sale before we will be able to complete our review, along with other documentation as may be requested by DASNY. If the Grantee owns the facility, we will need to see the deed. If the Grantee leases the facility, we will need to review the lease, and the term of the lease must be for at least five (5) years and extend a reasonable period of time after the capital improvements to the facility are scheduled to be completed.

In some circumstances, a lease term of less than five (5) years is acceptable where the Grant will be utilized to purchase moveable equipment or furnishings.

Financial Review:

For most programs, DASNY must verify the existence of committed funding resources sufficient to complete the Project as described. For these programs, acceptable proof of such funding commitments may include the following: commitment letters from a bank or other lending institution; evidence of other Grant awards; a board resolution committing funds to complete the Project accompanied by recent audited financial statements; or other documentation acceptable to DASNY that confirms that funding exists to complete the Project as proposed.

Bond Counsel Review/Governmental Approvals:

Once all information has been returned to DASNY, we will review it in consultation with our bond counsel and may call you to discuss further. Once we have determined that your Project complies with relevant statutory provisions and all paperwork is in order, DASNY will arrange for final governmental approvals as set forth by the particular Grant Program. The timing of the final governmental approval varies depending upon the particular Grant Program and other factors, and can take several weeks to several months.

When DASNY is notified that the requisite governmental approvals have been obtained, two copies of the Grant Disbursement Agreement will be forwarded to the Grantee for execution.

Q.B2: Why must we complete a letter certifying that the Grant funds will not be used for programs that might have some religious components?

A.B2: It could be a violation of federal law to use public funds to finance religious programs or programs that may favor one religion over another. As the issuer of the bonds, DASNY must take great care to ensure that it is in compliance with all applicable Federal and State laws, including tax laws and regulations promulgated by the Securities and Exchange Commission.

Q.B3: Is there a deadline for when the Grantee Certification, due diligence documents, or other materials must be returned DASNY?

A.B3: There is no deadline per se, but please be advised that your Preliminary Application or Project Information Sheet will not be processed without these documents.

Q.B4: My financial institution and/or other entity providing funds for the Project has requested a letter from DASNY confirming that the grant funds are available for the approved Project. Can DASNY provide such a letter?

A.B4: No. Since DASNY does not award the grants, DASNY cannot guarantee that any particular grant will ultimately receive final legislative approval, three way approval, or funding approval. In addition, the Grant Disbursement Agreements are contingent upon DASNY receiving the funds necessary to make payment on the grant. To the extent that such funds are not available to DASNY from the State or from the proceeds of a bond issuance, payment will not be made.

C. Processing of the Grant Disbursement Agreement.

Q.C1: When will I receive a Grant Disbursement Agreement from DASNY?

A.C1: The Grant Disbursement Agreement is the contract between DASNY and the Grantee setting forth the terms pursuant to which the Grant funds will be disbursed. When DASNY is notified that the requisite final governmental approvals have been obtained, two copies of the Grant Disbursement Agreement will be forwarded to the Grantee for execution.

Q.C2: What parts of the Grant Disbursement Agreement must be returned to DASNY?

A.C2: The Grantee must complete both Grant Disbursement Agreements and include the following: Project Description (enter task, an anticipated time frame and the estimated Project completion date); the Project Budget (enter the sources of all the funding that will be used to finance the Project); an Opinion of Counsel in the form set forth in the Grant Disbursement Agreements; execute and date all of the Grant Disbursement Agreements provided (the signatures should be original on all Grant Disbursement Agreements), and return all copies to DASNY to complete the process. Please note that if the Project described in the Grant Disbursement Agreement differs from the Project as described in the Preliminary Application or the Project Information Sheet, or if your attorney is unable to provide the opinion in the form provided in the Grant Disbursement Agreement, the processing of the Grant may be delayed.

Once the Grant Disbursement Agreement is fully executed and costs have been incurred in connection with the Project, you may begin to submit requests for reimbursement utilizing the forms included with the Grant Disbursement Agreement.

Q.C3: When do I receive my money?

A.C3: The Grant Programs administered by DASNY are reimbursement programs; that is, you must actually incur Project costs and have paid those expenses or have been invoiced by your contractor for work actually completed before receiving reimbursement from Grant proceeds. Once expenses have been incurred and/or paid, you will submit one or more requisitions to DASNY, using the forms included with your Grant Disbursement Agreement (the contract between DASNY and the Grantee) along with such supporting documentation as may be required by DASNY. Please note that in cases where payment on invoice is requested, the Grantee must establish a segregated bank account

into which Grant funds will be deposited and from which Grant funded Project costs will be paid. See section below regarding the requisition process for more information.

II. Reimbursable Costs

A. Deposits, Retainers, Professional Service Fees, and Storage of Materials

Q.A1: Can I use the Grant money for a down payment or a deposit to a contractor or vendor or for a retainer fee to a professional such as an architect or an engineer?

A.A1: No. Grant funds may only be used to pay for work actually undertaken and completed upon the approved Project and for materials received at the Project site. However, you will be able to submit for reimbursement of a down payment or deposit once you have received documentation from your contractor that the payment has been applied to the value of the work completed to date and is no longer being held as a deposit, or once the job has been completed and the contractor bills you for the balance of the job.

Q.A2: Can I use the Grant money to make a payment to my attorney for work related to my Project?

A.A2: Generally, no. Attorney's fees do not qualify as a capital work pursuant to Federal and State laws. If the fees were incurred in connection with the closing of real property acquired with Grant proceeds, however, these costs may be reimbursable.

Q.A3: Can I use the Grant money to make a down payment or make option payments for real property?

A.A3: No. However, you will be able to submit for reimbursement of these costs once the real property is acquired. For more information regarding the acquisition of real property, please see the section below entitled "Acquisition of Real Property."

Q.A4: Can I use the Grant money for payment of the materials stored off-site that my contractor has billed me for?

A.A4: You may not submit for reimbursement of materials stored off-site. All materials are required to be received at the approved project location(s) prior to submission for reimbursement.

B. Payment for Internal Labor

Q.B1: In order to save money, we used internal labor to undertake the Project described in the Grant Preliminary Application. Is this acceptable?

A.B1: Generally, costs associated with internal labor are not reimbursable with Grant proceeds. Therefore, costs incurred by the Grantee for custodial services; maintenance of equipment; salaries of facilities management personnel; security personnel; director or other high level Project oversight, or other similar expenditures may not be reimbursed with Grant funds.

Q.B2: We would like to use the Grant funds to pay the salary of the person who will be administering the Grant for our organization. Is this allowable?

A.B2: No. As explained above, internal costs may be reimbursed only in certain circumstances. Salaries of administrative personnel do not qualify.

C. Payments on a Lease, Mortgage, or to Pay Existing Debt

Q.C1: May Grant funds be used to make lease payments on equipment?

A.C1: No. Grant funds may only be used to purchase equipment and may not be used to make lease payments or pay down existing debt incurred to finance the purchase of equipment.

Q.C2: May we use Grant funds to make mortgage payments, pay off an existing mortgage, or make other debt service payments?

A.C2: No. As explained above, this would be considered working capital, as opposed to a capital cost. While Grant funds may be used to purchase property from a seller, they may not be used to make mortgage payments or pay off an existing mortgage.

D. Acquisition of Real Property

Q.D1: Can I use the Grant money to make a down payment or make option payments for real property?

A.D1: No. However, you will be able to submit for reimbursement of these costs once the real property is acquired.

Q.D2: Our Project involves the purchase of real property and it is our intention to utilize the Grant proceeds to pay for all or a portion of the purchase price. What documentation must be provided to DASNY in order for us to pay or be reimbursed for the purchase price?

A.D2: Prior to disbursing public funds for the acquisition of real property, DASNY will need an appraisal confirming the value of the property to be acquired, as well as other documentation supporting the costs paid to the seller in connection with the transaction.

As part of DASNY's review process, the Grantee must provide a summary appraisal for the property to be acquired. The appraisal must have been completed by an independent appraiser, and must comply in all respects with the requirements of the Uniform Standards of Professional Appraisal Practice ("USPAP"). DASNY requires all Grantees purchasing real property with grant funds to speak with an analyst in DASNY's Office of Real Property as early in the process as possible so that the proper appraisal documentation can be obtained and reviewed.

Prior to disbursement of grant funds for a real property purchase, DASNY will also need to review the contract of sale; a closing statement; a title insurance policy, and a copy of all checks drawn on grant funds. DASNY may also need to review other documentation, as deemed necessary by DASNY.

Q. D3: Can we purchase the property prior to our receipt of the Grant proceeds or do we need to wait?

A.D3: A Grantee may acquire real property prior to their receipt of their Grant proceeds provided such acquisition occurs on or after the date the Preliminary Application was signed and/or the effective date of the enabling statute. The purchase price for real property acquired by a Grantee prior to the date the Preliminary Application was signed or prior to the effective date of the enabling legislation is not eligible for reimbursement.

The Grant proceeds may be used to pay-off a bridge loan or a mortgage in its entirety, if clear documentation is provided to show that the Grantee intended at the time of purchase to pay off such bridge loan or mortgage with the Grant proceeds. It is strongly recommended that when acquiring real property that the Grantee contact DASNY as soon as possible to discuss the use of the Grant proceeds for real property acquisition.

In order to reimburse the Grantee for a property acquisition, regardless of whether the acquisition occurs before or after the execution of a Grant Disbursement Agreement, a summary appraisal meeting the requirements set forth in A.D2, above, must be provided to DASNY for review. If the appraisal does not meet USPAP requirements, DASNY will be unable to reimburse for the property acquisition without a new appraisal being undertaken.

In addition, the other documentation described in A.D2, above, must also be provided to DASNY prior to disbursement of grant funds.

Q.D4: Is there a way to obtain the Grant funds prior to the closing on real property to avoid taking out interim financing?

A.D4: For real property acquisitions ONLY, DASNY has the ability to wire funds one day prior to the scheduled closing to a designated escrow agent (usually the Grantee's attorney) pursuant to an escrow agreement. The escrow agent would be authorized to release the Grant funds at the closing only upon submission of certain documentation to DASNY including the executed deed, title insurance policy, and copies of all checks drawn

against the Grant funds and paid at closing. If you are using the Grant funds for a real property purchase, please note that you will need to notify DASNY as soon as possible, as it will take some time to work out the process for such a transfer.

E. Costs Constituting Working Capital

Q.E1: Our organization runs on a very tight budget and we believe the Grant money should be used to assist us in making our rent payments or in paying the utility bills at our site. Is this an allowable use of Grant funds?

A.E1: No. Such costs would be considered working capital, or operating costs, as opposed to a capital cost. Federal and State laws mandate that Grant funds be spent on capital work only.

Q.E2: May we use Grant funds to pay for certain maintenance or repair costs?

A.E2: No. As explained above, this would be considered working capital, as opposed to a capital cost. Please note that maintenance and repair costs are not reimbursable even if the Grant was awarded for the purpose of upgrading and/or replacing a particular system. For example, suppose a Grant was awarded for the purpose of replacing a boiler. In addition to replacing the boiler, the contractor also tests the entire heating system, makes necessary repairs, and replaces worn parts. While the costs for replacing the boiler would be reimbursable, the cost of testing and repairing the heating system would not be.

Q.E3: May we use Grant funds to purchase office supplies such as paper, pens, postage, and similar items if they would be used in connection with the Project?

A.E3: No. Such costs would be considered working capital, or operating costs, as opposed to a capital cost. As explained above, Grant funds may only be spent on capital costs.

Q.E4: May we use Grant funds to purchase a maintenance plan, service agreement or extended warranty for our Project?

A.E4: No. Such costs would be considered working capital, or operating costs, as opposed to a capital cost. As explained above, Grant funds may only be spent on capital costs. Grant funds may not be used to pay for service agreements or extended warranties unless they were required by the terms of the contract with the vendor to be purchased at the time of equipment purchase and are reflected as such on the equipment invoice.

Q.E5: May we use Grant funds to pay for training costs for equipment acquired with Grant proceeds?

A.E5: Grant funds may only be used to pay for training costs incurred to "train the trainer" on specialized equipment or software applications. That is, the Grant funds may be used to pay the costs incurred to train one person within the Grantee organization who will be

responsible to train the other users. If training expenses are incurred to train groups of users, or to train users on general use software, then these costs are operational in nature and may not be reimbursed with Grant proceeds.

F. New Yorkers Must Benefit

Q.F1: Our organization has offices in another State as well as in New York. May Grant funds be used to improve our facilities in the other State?

A.F1: No. Grant funds must be used for Projects that will be located in the State of New York and benefit New Yorkers.

III. *The Requisition Process*

A. Timing Questions

Q.A1: We started work on the Project before we submitted our Preliminary Application or Project Information Sheet. May we submit a requisition for work undertaken before the Preliminary Application date?

A.A1: Yes, so long as 1) the Project to be financed in part utilizing Grant proceeds was not completed as of the date the Preliminary Application was signed; 2) the costs were incurred after the effective date the Grant Program was enacted; and 3) such costs are directly related to the approved Project. However, DASNY reserves the right to reject requisitions for costs that appear to have been incurred far in advance of the actual construction of the Project or far in advance of the Preliminary Application date. We will consider such costs on a case-by-case basis. Generally, however, we do not reimburse for costs incurred more than two (2) years prior to the date of the Grant Disbursement Agreement.

Q.A2: How often may I submit a requisition for payment?

A.A2: There is no limit on the number or frequency of submissions. DASNY has two payment dates per month, and Grantees may receive payment once per month.

Q.A3: Is there a time limit as to when I can submit a requisition?

A.A3: Yes. The Grant Disbursement Agreement terminates three (3) years from the date DASNY executes the Grant Disbursement Agreement. All requisitions must be submitted, in form satisfactory to DASNY, prior to the termination date in order to be reimbursed. In addition, we would not expect to reimburse for costs incurred more than two (2) years prior to the date the Grant Disbursement Agreement was executed.

You may submit your first requisition once the Grant Disbursement Agreement is fully executed. Please do not submit a requisition before the fully executed Grant Disbursement Agreement is returned to you.

Q.A4: How long will it take to receive payment after I submit a requisition?

A.A4: DASNY attempts to pay all requisitions submitted with the proper supporting documentation within six (6) weeks from the date the requisition is submitted. Please note that in the event that insufficient documentation is provided, or if DASNY requires additional documentation to support a requisition, it could take longer. In addition, for many programs DASNY must voucher the funds from the State in order to make payment on a requisition. While typically such funds are received such that payment can be made within six (6) weeks of submittal, please be advised that DASNY will be unable to make payment on the requisitions until funds from the State are received.

B. Submission of Requisitions

Q.B1: What backup documentation must I submit with my requisition?

A.B1: Certain exhibits to the Grant Disbursement Agreement must be returned to DASNY in connection with each requisition for reimbursement. Please note that two (2) Authorized Officers of the Grantee must sign the Dual Certification in support of each requisition. In addition, copies of **invoices** provided by the contractor must be provided. *Quotes, proposals, estimates, purchase orders, and other such documentation do NOT qualify as invoices.*

In addition, readable copies of both the front and back of canceled checks or other satisfactory proof of payment **MUST** be included with the request for reimbursement. Please see A.B2, below, for more information.

All checks must be drawn on an account of the Grantee and not an affiliate, subsidiary, or parent organization. If a check is drawn on an account with a name that is different from the Grantee, it will delay the reimbursement process. Please note that for payment on invoice, checks must be drawn on the segregated account as discussed in Section IIIC.

If funds are requisitioned for the purchase of a vehicle, the New York State Vehicle Registration Documents and title must be submitted along with the requisition forms. Before DASNY can reimburse you, we will also need a W-9 form from the Grantee, along with wire instructions if a wire transfer of funds is requested. Current wire instructions must be provided with every requisition.

Q.B2: My bank does not provide copies of canceled checks, so I can't provide them. Does this pose any problems?

A.B2: If you cannot get copies of canceled checks, you may instead provide a copy of the front of the check, along with a copy of a bank statement clearly showing that payment was made by the Grantee to the contractor. In addition, DASNY requires the Grantee to certify that the documents submitted in connection with the requisition are accurate

copies of the original documents as presented to, and cashed by, the contractor or vendor.

Q.B3: What backup documentation must be provided when payment is made by credit card?

A.B3: If the card was a corporate credit card, we need a copy of the statement showing the charge, the invoice for the materials purchased, and a copy of the canceled check paying the statement in full. We do not recommend using a personal credit card to pay for Grant Project related costs. This may require additional processing time and could delay payment. If, however, payments have been made using a personal credit card, we will need to see the individual's credit card statement, the invoice for the materials purchased, and a copy of the canceled check showing the Grantee reimbursed the individual for the Grant Project related items.

Please note that Project expenses that have been incurred by a Grantee using a credit card are NOT eligible for payment on invoice.

Q.B4: I paid my contractor in cash for work related to my Project. Does this pose any problems?

A.B4: Yes. DASNY must receive adequate proof of payment prior to releasing Grant funds and we will not reimburse the Grantee for costs paid in cash. The preferred method of payment is by check as evidenced by a copy of a Grantee's canceled check made payable directly to the contractor or vendor.

Q.B5: My contractor did not give me an invoice, so I cannot provide one with the requisition. Is this a problem?

A.B5: Yes. You will need to provide an invoice from the contractor along with proof of payment in order to be reimbursed for Project expenditures. Please ask each contractor for an invoice when work is undertaken in connection with the Project.

Q.B6: My contractor requested that we make the check payable to him personally, and not to the corporate entity. Is this acceptable?

A.B6: No. Payment should be made to the corporate entity that performed the work and provided the invoice. For example, if an invoice is received from "Jack's Contracting, Inc.," the check should be payable to "Jack's Contracting, Inc." and not to "Jack Smith."

Q.B7: Another entity has actually paid for the construction costs relating to my Project and is looking to us for reimbursement. Does this pose any problems?

A.B7: Yes. DASNY may only utilize Grant proceeds to reimburse a Grantee for costs related to their Project that were actually incurred by the Grantee and not another entity. The Grantee is the entity that should be incurring Project costs, paying those costs from their

own bank or checking account, and then requesting reimbursement. If another entity paid for the Project costs and the Grantee is seeking reimbursement for those costs, there will likely be a delay in processing the requisition. Please contact DASNY for more information if you have a specific question regarding Project payments made by another entity.

Q.B8: What if I do not submit the proper information with my requisition?

A.B8: If the proper information is not included with your requisition request, DASNY will not make payment. You will be informed, in writing, of the portions of the requisition for which we are unable to make payment and the reason(s) why payment was denied. Please note that it is the Grantee's responsibility to submit requisitions that are properly assembled and clearly delineate allowable costs to be paid for with Grant proceeds; it is not the responsibility of DASNY staff to make sense of a disorganized submission. If the requisition is not readily understandable, the entire requisition package will be returned to the Grantee for resubmission prior to payment.

Q.B9: Is there someone available to assist my organization with assembling a requisition?

A.B9: As indicated above, it is the Grantee's responsibility to submit requisitions that are properly assembled and clearly delineate allowable costs to be paid for with Grant proceeds. While members of our Accounts Payable, Grants Administration, and Counsel's Office staff are available to answer specific questions about a requisition, we cannot assume the Grantee's responsibility to locate the documentation necessary to support costs to be paid for with Grant proceeds or evidencing proof of payment; matching proof of payment to invoiced costs; inferring the services or materials provided where the documentation does not clearly provide an explanation; and other such tasks.

C. Payment on Invoice

Q.C1: We are a not-for-profit organization and do not have the funds to make payment in the first instance. Is there a way to access the Grant funds to pay the costs as they are incurred?

A.C1: The Grant Programs are intended to be reimbursement programs. However, we recognize that it may be difficult for some organizations to pay for Project costs upfront. If that is the case, pursuant to the terms of the Grant Disbursement Agreement, you will need to provide DASNY with documentation evidencing that a segregated account has been established by the Grantee into which Grant funds will be deposited. Eligible expenses incurred in connection with the Project to be financed with Grant funds must be paid out of this account. All work being paid on invoice must be completed prior to disbursement of Grant proceeds. The funds in the segregated account shall not be used for any purpose other than making payments to a contractor or vendor for costs in connection with the Grant funded Project. The Grantee must provide proof of disbursement of Grant funds to the respective contractor and/or vendor in a form

acceptable to DASNY, within sixty (60) days of the date that Grant funds are disbursed to the Grantee to pay for such costs. DASNY will not make any additional disbursements from Grant funds until such time as proof of payment is provided.

Q.C2: When seeking payment on invoice, what must we submit to access the Grant funds?

A.C2: You will need to submit an invoice from your contractor/vendor for the completed work undertaken on the Project. All Project related work being paid on invoice must be completed prior to the disbursement of Grant proceeds. All Grant funds paid on invoice must be deposited into the segregated account established by the Grantee (see prior question and answer) and all eligible expenses incurred in connection with the Project to be financed with Grant funds must be paid out of this segregated account. The funds in the segregated account shall not be used for any purpose other than making payments to a contractor or vendor for costs incurred in connection with the Grant funded Project. When you receive payment on invoice, you must show proof of disbursement of all funds from the segregated account to the contractor before DASNY will pay any additional payment requests.

In certain instances, DASNY may issue a two party check payable to both the Grantee and the contractor or make other payment arrangements acceptable to DASNY and the Grantee.

The Grantee must provide proof of disbursement of Grant funds to the respective contractor and/or vendor in a form acceptable to DASNY, within sixty (60) days of the date that Grant funds are disbursed to the Grantee to pay for such costs. DASNY will not make any additional disbursements from Grant funds until such time as proof of payment is provided.

IV. Project Changes After the Grant Disbursement Agreement has been Executed

Q1: My Project is going to take longer than we originally estimated. How can I get an extension of time to complete the Project?

A1: By its terms, the Grant Disbursement Agreement automatically terminates without further notice or action on the part of DASNY three (3) years from the date it is executed by DASNY. DASNY, in its sole and absolute discretion, may consent to an extension of the termination date. Such extension may be granted upon the DASNY's receipt in writing, PRIOR to the date the Grant Disbursement Agreement will terminate, of: 1) an explanation of the circumstances leading to the delay in the Project; 2) the current status of the Project; and 3) a new Project completion date. To request an extension please write to DASNY, Attention: Grant Administration.

- Q2:** What do we do if we need to shift costs from one Project task to another after the Grant Disbursement Agreement has been executed and the Project is underway?
- A2:** We understand that it is sometimes difficult to accurately predict a Project's actual cost and that costs within a Project may change over time. Please write to DASNY, Attention: Grant Administration, and explain the circumstances leading to the requested reallocation. In certain circumstances, DASNY may require that you provide a copy of the proposed revised budget and/or a revised Project description.
- Q3:** What if we want to use the Grant funds to pay for costs other than those described in the Preliminary Application or Project Information Sheet?
- A3:** If you would like to use the Grant funds for a Project other than that set forth in the Preliminary Application or Project Information Sheet, you must notify DASNY as soon as possible. If the change is minor in scope, DASNY may be able to approve the change. If, however, the change is major in the opinion of DASNY, we may need to obtain Legislative approval. Please contact DASNY to discuss the proposed change and we will assist you. Please note that any request for Project change may delay the process.

Pasquerello, Anne

From: Gfolchetti [REDACTED]
Sent: Tuesday, August 05, 2014 11:33 AM
To: Pasquerello, Anne
Subject: Fwd: Resolution - Atlantic Pavement
Attachments: Atlantic Pavement Marking.pdf; ATT00001.htm

#3

☒ Work Session 8/13/14

☐ Agenda _____

FYI. For 8/13/14 work session agenda

Gregory L. Folchetti
Costello & Folchetti, LLP
1875 Route Six/P.O. Box 1200
Carmel, NY 10512
845-225-1900
845-228-4228 Facsimile
Sent from my iPhone

Begin forwarded message:

From: "Maxwell, Mary Ann" <[REDACTED]>
Date: August 5, 2014 at 11:12:59 AM EDT
To: "[REDACTED]" <[REDACTED]>
Cc: "Michael Simone" <[REDACTED]>, "Tenefrancia, Michelle" <[REDACTED]>
Subject: Resolution - Atlantic Pavement

Greg,

See attached as backup for resolution authorizing payment to Atlantic Pavement Marking.

Thanks....Mary Ann

Mary Ann Maxwell
Town Comptroller
Town of Carmel
(845) 628-1500 ext 175
Fax (845) 628-7085
mam@ci.carmel.ny.us

Authorized Official's Signatures

TOWN OF CARMEL60 MCALPIN AVE
MAHOPAC, NY 10541**PO Number :** 10006
Date : 05/29/2014
Page: 1 of 1**Purchase Order****Vendor :** 0000000336
ATLANTIC PAVEMENT MARKING
15 INDUSTRIAL ROAD
PROSPECT, CT 06712**Ship To:**
TOWN OF CARMEL
HIGHWAY DEPT.
55 MCALPIN AVENUE
MAHOPAC, NY 10541
Phone # (845) 628-7474**Bill To:**
TOWN OF CARMEL
HIGHWAY DEPT.
55 MCALPIN AVENUE
MAHOPAC, NY 10541
Phone # (845) 628-7474**Description:** SPRING LINE PAINTING

Qty.	Unit	Description	Unit Price	Amount
		SPRING LINE PAINTING		15,500.00
		100.3310.0045		
		(GENERAL FUND.SIGN CONTROL.SIGN STREET LINES)		
Total:				\$15,500.00

Ordered By: HWYCLERK2 Req. Date: 05/01/2014 Req. No: 6056 Approved By/Date:

Authorized Official

Date

ATLANTIC PAVEMENT MARKING, INC.

15 Industrial Rd
Prospect CT 06712
203-758-0800

Invoice

Date	Invoice #
7/1/2014	3477

Bill To
Town of Carmel Town Hall McAlpin Ave Mahopac, NY 10541

Ship To

P.O. No.	Terms
	Net 30 days

Description	Quantity	Unit Price	Amount
LINESTRIPING-DOUBLE YELLOW CENTERLINE PER MILE	39	364.00	14,196.00
LINESTRIPING-SINGLE YELLOW CENTERLINE PER MILE	2.4	219.00	525.60
LINESTRIPING-WHITE EDGE LINE PER MILE	0.5	219.00	109.50
Total			\$14,831.10

COMING TUES 5/27
8 AM



5-21-14
cy
203-758-0800

PURCHASING AND CENTRAL SERVICES
Telephone No.: (845) 808-1610 Fax No.: (845) 808-1914

Contract Award Notification Extension

Title: PAINTING OF REFLECTORIZED PAVEMENT STRIPES ON COUNTY HIGHWAYS

Contract Period: September 1, 2012 – August 31, 2013

Renewal Period: September 1, 2013 – August 31, 2014

BID No: RFB-33-12

Authorized User: County Agencies, All Political Subdivisions

Description: PAINTING OF REFLECTORIZED PAVEMENT STRIPES ON COUNTY HIGHWAYS

Contractor Information ATLANTIC PAVEMENT MARKING, INC.
15 INDUSTRIAL RD.
PROSPECT, CT 06712
(203) 758-0800

PURCHASING AGENT: Alex Maggita **DATE:** 7/1/13

DEPARTMENT HEAD: J. T. [Signature] **DATE:** 7/1/13

COUNTY AUDITOR: Nicholas Depina-Slasky **DATE:** 7/2/13

COUNTY EXECUTIVE: Maryellen O'Neil **DATE:** 7-3-13

BUDGET LINE # (S) 02 - 103310 00 - 54647

RESULTS

PAINTING OF REFLECTORIZED PAVEMENT STRIPES ON COUNTY HIGHWAYS

SAFETY MARKING, INC.
460 BOSTWICK AVENUE
BRIDGEPORT, CT 06605

ATLANTIC PAVEMENT MARKING, INC.
15 INDUSTRIAL RD.
PROSPECT, CT 06712

ITEM NO.	DESCRIPTION	PAY UNIT	EST. QUANTITY	UNIT BID PRICE	SUBTOTAL	EST. QUANTITY	UNIT BID PRICE	SUBTOTAL
640.2	WHITE PAINT RELECTORIZED PAVEMENT STRIPES --20 MILS	Mile	250	\$215.00	\$53,750.00	250	\$219.00	\$54,750.00
				PER SIDE			PER ONE SIDE OF ROAD	
640.21	YELLOW PAINT REFLECTORIZED PAVEMENT STRIPES --20 MILS	Mile	250	\$199.00	\$49,750.00	250	\$182.00	\$45,500.00
				PER LINE			PER LINE	
P699	MOBILIZATION	Each	3	\$750.00	\$2,250.00	3	\$500.00	\$1,500.00
TOTAL BID PRICE ALL ITEMS					\$105,750.00			\$101,750.00
ITEM NO.	DESCRIPTION	PAY UNIT	EST. QUANTITY	UNIT BID PRICE	SUBTOTAL	EST. QUANTITY	UNIT BID PRICE	SUBTOTAL
640.22	WHITE PAINT REFLECTORIZED PAVEMENT LETTTERS --20 MILS	Each	20	\$25.00	\$500.00	20	\$30.00	\$600.00
640.23	WHITE PAINT REFLECTORIZED PAVEMENT SYMBOLS --20 MILS	Each	10	\$45.00	\$450.00	10	\$60.00	\$600.00
P640.24	WHITE PAINT REFLECTORIZED STOP LINES, HATCH LINES, CROSSWALKS AND CROSSBARS--20 MILS	S.F.	500	\$1.00	\$500.00	500	\$0.80	\$400.00
P640.25	YELLOW PAINT REFLECTORIZED HATCH LINES --20 MILS	S.F.	500	\$1.00	\$500.00	500	\$0.80	\$400.00
P699	MOBILIZATION	EACH	3	\$750.00	\$2,250.00	3	\$400.00	\$1,200.00
TOTAL BID PRICE FOR ALL ITEMS					\$4,200.00			\$3,200.00

LOW BIDDER

Please note Safety Marking doubled the subtotal for Yellow ReflectORIZED Pavement Stripes-correct subtotal above-not \$99,500 as listed in bid proposal.

BID TERM

September 1, 2013 - August 31, 2014

COUNTY OF PUTNAM - PURCHASING
BUILDING NO.3., 110 OLD ROUTE 6, CARMEL, NY 10512
TELEPHONE: 845-808-1610 / TELEFAX: 845-808-1914

TITLE: PAINTING OF STRIPES ON COUNTY ROADS

BID NUMBER: RFB-33-12

PARTICULAR BID SPECIFICATIONS**PAINTING REFLECTORIZED PAVEMENT STRIPES ON COUNTY HIGHWAYS****I. GENERAL:**

All final, interim, and temporary markings shall be furnished and applied in locations directed by the Commissioner in accordance with the Manual of Uniform Traffic Control Devices and the Standard Specifications, Construction and Materials prepared by the New York State Department of Transportation Office of Engineering, dated May 1, 2008 with all errata and updates, and in particular, provisions of Section 640, unless modified by these Particular Specifications.

It shall be the responsibility of the Bidder, before submitting a bid, to make himself fully familiar with the work to be done. A contractor will be barred from pleading misunderstanding or deception because of estimates of quantities, character of scope of work, location of other conditions surrounding the same.

Work is to begin within five (5) working days of receipt of a Purchase Order.

II. SAFETY & MAINTENANCE OF TRAFFIC:

The contractor shall be responsible for conducting operations with all precautions for the safety of the traveling public and its own employees.

Hard hats and orange colored reflective safety vests shall be worn by all personnel working along County highways.

The striping machine shall carry warning signs, supplied by the Bidder, which are adequate in size and clearly visible. A truck, supplied by the Bidder, with warning signs shall follow the striping machine at an adequate distance in order to prevent traffic from tracking wet pavement markings. The Bidder shall place traffic cones on the wet centerline and remove the cones when the centerline is dry.

Flagmen and signs supplied by the Bidder, in accordance with the aforesaid Manual of Uniform Traffic Control Devices shall be used wherever necessary.

The Bidder shall maintain traffic at all times and with as little interference or inconvenience as possible. No County Highway or portion thereof may be closed to traffic at any time.

The Bidder shall take such other safety measures as may be ordered by the Commissioner of Highways & Facilities or his designated representative.

COUNTY OF PUTNAM - PURCHASING BUILDING NO.3., 110 OLD ROUTE 6, CARMEL, NY 10512 TELEPHONE: 845-808-1610 / TELEFAX: 845-808-1914		PAGE: 24
TITLE: PAINTING OF STRIPES ON COUNTY ROADS	BID NUMBER: RFB-33-12	

III. PERFORMANCE BOND:

The Bidder shall, at least thirty (30) days in advance of the start of operations provide a satisfactory Performance Bond, issued to the County of Putnam, issued by a New York State Licensed Insurance Company, in the amount of \$5,000.00, which shall remain in full force and effect until completion of all pavement striping.

IV. DURATION, AWARD BASIS, QUANTITIES, CONTRACTOR QUALIFICATIONS:

This bid shall be in effect from **September 1, 2012 – August 31, 2013**

The contract will be awarded to the lowest responsible bidder meeting these specifications for each of the pavement striping and pavement marking (stop bars, crosswalks, symbols, etc.) categories.

Actual quantities ordered under this contract will be determined by the Commissioner of Highways & Facilities or his authorized agent.

Only contractors experienced with traffic line painting for NYSDOT or at least five (5) Counties are eligible to bid on this work.

Truck mounted equipment with at least two spray guns shall be used.

V. WORK PERIODS:

Painting shall be done Mondays through Fridays and not on a holiday or the day before or after a Holiday. The major painting work shall be done approximately between May 15th and October 15th. However, due to the necessities of maintenance and construction of the County highways, smaller quantities may be needed from time to time.

VI. ROAD AND WEATHER CONDITIONS:

For water based paint, no painting shall be undertaken when the temperature is below 50 degrees Fahrenheit. No water based painting shall be undertaken when the relative humidity is greater than 85%. No water based painting shall be undertaken during period of rain or if rain is imminent unless specifically approved by the Commissioner of Highways & Facilities. Waterborne traffic paint shall not be applied if rain is expected within 4 hours after application.

The Putnam County Department of Highways & Facilities shall be responsible for cleaning the pavement before striping.

The Bidder shall notify the Commissioner at least 48 hours prior to starting operations in order for the County to provide any required road cleaning.

COUNTY OF PUTNAM - PURCHASING
BUILDING NO.3., 110 OLD ROUTE 6, CARMEL, NY 10512
TELEPHONE: 845-808-1610 / TELEFAX: 845-808-1914

TITLE: PAINTING OF STRIPES ON COUNTY ROADS

BID NUMBER: RFB-33-12

VII. LAYOUT:

The Putnam County Department of Highways & Facilities shall provide all layouts for pavement marking and the required lane width. All edge lines shall be placed as measured from the centerline.

VIII. WAGES:

The Bidder agrees to pay a minimum wage which shall be equal to the hourly wage as scheduled by the State of New York Department of Labor, for the various classes of occupations required for the indicated work. Such schedule shall include the prevailing wage rates in effect in the County of Putnam in accordance with the provisions of Section 220-D of the New York State Labor Law.

IX. MATERIAL DELIVERY & STORAGE:

All paint required shall be delivered to the County Highway Facility at 842 Fair Street in the Town of Patterson. Paint shall be delivered in 55-gallon drums prior to the start of work. The County shall be given 24-hour notice before any delivery of paint or beads.

The County will provide outside storage for paint and will provide a forklift to assist with truck unloading only if prior notice of a delivery is given. Inside storage of reflectorized glass beads will be provided if prior notice is given.

The Contractor will remove all excess materials and empty paint drums within sixty (60) days after the completion of the season's final application. By providing storage, the County is not liable for any damages, theft or any other losses that could be incurred by the Contractor who must maintain insurance on the stored materials and clean up any spills that may occur.

X. QUALITY CONTROL:

The Bidder should only use striping equipment equipped with "Flow Meters" and "Foot Distance Meters" for calibrating and measuring the work performed.

The Bidder will take all necessary and reasonable precautions to insure that motorists using the highways being striped do not get paint on their vehicles. In such event, the bidder will directly respond to and rectify all verifiable incidents of paint damage on such vehicles.

XI. QUALITY ASSURANCE:

The Bidder shall be responsible for all complaints from the public arising out of the striping of the County highways. The Bidder must have a "Field Complaint Procedure" in place. A copy of the "Field Complaint Procedure" should be submitted with the bid.

COUNTY OF PUTNAM - PURCHASING
BUILDING NO.3., 110 OLD ROUTE 6, CARMEL, NY 10512
TELEPHONE: 845-808-1610 / TELEFAX: 845-808-1914

TITLE: PAINTING OF STRIPES ON COUNTY ROADS

BID NUMBER: RFB-33-12

XII. INSPECTION:

The Bidder shall advise the Commissioner of Highways & Facilities at least 24 hours before any application is to be done or before resuming work after a delay or postponement. The Commissioner, or his authorized representative, will inspect the applications of paint on the County Highways & Facilities.

The Commissioner or his authorized representative shall have the authority to stop work, at any time when, in his opinion, the material, workmanship, operation or end product is unsatisfactory or does not comply with N.Y.S.D.O.T. Standard Specifications Section 640-3 as amended or any safety requirement. In case of a Stop Work Order, work shall not be resumed until authorized by the Commissioner or his authorized representative.

Should workmanship not meet the specifications, the Commissioner of Highways & Facilities may, at his own discretion, terminate the contract.

The Commissioner or his designated inspector shall have the right to enter the Contractor's equipment and to read painting unit flow and mileage gauges at any time during work within the County.

XIII. RECORDS AND PAYMENT:

The Commissioner or his designated inspector, shall be given a daily report prepared by the Contractor that summarizes the day's work. For each road painted, said report shall show: beginning and ending point, length in miles, lineal feet of painted line applied, gallons of paint and pounds of beads used. The striping machine operator shall verify all daily reports with the County and shall sign said reports.

The required paint wet film thickness application rate for this contract is 20 mils (approximately 20 gallons per 4 inch wide line per mile).

The report shall compare the actual quantities of materials used with the theoretical quantities required by the specified application rates. The County reserves the right to withhold payment from the Contractor for any day's work for which a daily report is not provided.

No payment will be made during the course of each mobilization. Payment will be made for all work after completion of that work, provided such work is satisfactory to the County Engineer. Prior to any payments being made, the Contractor shall submit certification that all labor and material have been paid in full. Copies of certified payrolls are required with each invoice.

COUNTY OF PUTNAM - PURCHASING BUILDING NO.3., 110 OLD ROUTE 6, CARMEL, NY 10512 TELEPHONE: 845-808-1610 / TELEFAX: 845-808-1914		PAGE: 27
TITLE: PAINTING OF STRIPES ON COUNTY ROADS	BID NUMBER: RFB-33-12	

XIV. STOP LINES, HATCH LINES, CROSSWALKS AND CROSSBARS (Items No. P640.24 and P640.25):

All provisions of Section 640 shall apply to these items of work, except that Items 640.20 and 640.21 shall be used to pay for only centerlines, lane lines, and edge lines (measured in miles to the closest hundredth, not feet).

Stop lines, hatch lines, crosswalk markings and crossbars shall be paid for under Item Nos. P640.24 and P640.25, and shall be measured to the nearest tenth of a square foot of area painted, by calculating the product of the length and width of the markings applied.

XV. MOBILIZATION (Item No. P699):

The Contractor shall provide a lump sum price for each mobilization requested by the County.

A mobilization shall be defined as the Contractor responding to a single request by the County to paint traffic lines in Putnam County, regardless of quantity. Once all work requested by the County under the mobilization is completed and the Contractor has left the County, that mobilization will be considered completed. Subsequent requests for work by the County will be subject to a new mobilization fee. (The County may add work during the on-going mobilization before the Contractor has left the County without being subject to new mobilization charges.)

The price bid for mobilization shall cover all of the Contractor's costs for supplying labor, equipment and materials to complete the work requested by the County associated with a single request. The Contractor shall begin work for a particular mobilization within five (5) workdays of written notice to proceed. Once mobilized, the Contractor shall work exclusively and continuously on the work requested by the County until completed.

COUNTY OF PUTNAM - PURCHASING BUILDING NO.3., 110 OLD ROUTE 6, CARMEL, NY 10512 TELEPHONE: 845-808-1610 / TELEFAX: 845-808-1914		PAGE: 28
TITLE: PAINTING OF STRIPES ON COUNTY ROADS	BID NUMBER: RFB-33-12	

PAINTING REFLECTORIZED PAVEMENT STRIPES ON COUNTY HIGHWAYS

PROPOSAL SHEET

ITEM NO.	DESCRIPTION	PAY UNIT	EST. MILES OF LINE*	UNIT BID PRICE	SUBTOTAL
640.20	White Paint Reflectorized Pavement Stripes – 20 mils	Mile	250	\$ _____	\$ _____
640.21	Yellow Reflectorized Pavement Stripes – 20 mils	Mile	250	\$ _____	\$ _____
P699	Mobilization	EACH	3	\$ _____	\$ _____
TOTAL BID PRICE FOR ALL ITEMS					\$ _____

640.22	White Paint Reflectorized Pavement Letters – 20 mils	EACH	20	\$ _____	\$ _____
640.23	White Paint Reflectorized Pavement Symbols – 20 mils	EACH	10	\$ _____	\$ _____
P640.24	White Paint Reflectorized Stop Lines, Hatch Lines, Crosswalks and Crossbars – 20 mils	S.F.	500	\$ _____	\$ _____
P640.25	Yellow Paint Reflectorized Hatch Lines – 20 mils	S.F.	500	\$ _____	\$ _____
P699	Mobilization	EACH	3	\$ _____	\$ _____
TOTAL BID PRICE FOR ALL ITEMS					\$ _____

*EST. MILES OF LINE INCLUDES TOTAL MILES OF EACH SIDE OF THE ROAD FOR WHITE STRIPES AND EACH YELLOW STRIPE FOR CENTER LINES.

This Invitation to Bid document is prepared in Microsoft Word Office (Office for Windows 2003) format. Any alterations to this document made by the Offeror may be grounds for rejection of the proposal, cancellation of any subsequent award, or any other legal remedies available to the County of Putnam.

ALESSANDRO MAZZOTTA
Director



MARYELLEN ODELL
County Executive

PURCHASING

June 27, 2013

Atlantic Pavement Marking Inc.
15 Industrial Road
Prospect, CT 06712

Re: RFB-33-12 Painting of Reflectorized Pavement Stripes on County Roads
Bid Period: 09/1/12 - 08/31/13

Dear Sir/Madame:

The above-referenced bid is due to expire on 8/31/13. Putnam County would like to extend the bid for the following term, September 1, 2013 - August 31, 2014. All terms and conditions of the proposal will remain in effect throughout the revised term.

If you agree to the extension, please sign below and return to me as soon as possible. (Fax or Mail)

COMPANY NAME:

Atlantic Pavement Marking Inc.

ADDRESS:

15 Industrial Road
Prospect, CT 06712

BY:

(Signature Line)

DONALD B. SMITH COUNTY GOVERNMENT CAMPUS
COUNTY OF PUTNAM ~ 40 Gleneida Ave.-1st Floor-Room 105 ~ CARMEL, NEW YORK 10512
(845) 808-1088 Fax (845) 808-1914

Pasquerello, Anne

From: Spofford, Ann
Sent: Wednesday, August 06, 2014 11:46 AM
To: Pasquerello, Anne
Subject: FW: RE:CFD Fireworks
Attachments: carmel.pdf; FireworksCarnival.jpg

#4

Hi Anne,

Pursuant to our telephone conversation, I am forwarding herewith the Carmel Fire Department's application to display fireworks for the consideration of the Town Board.

Ann Spofford

Town Clerk
Carmel Town Hall
60 McAlpin Avenue
Mahopac, NY 10541
Phone: 845.628.1500
Fax: 845.628.7434

☒ Work Session 8/13/14

☐ Agenda _____

This communication may be confidential and is intended for the sole use of the addressee(s). No use or reproduction of the information provided is permitted without the written consent of the Town of Carmel. If you are not the intended recipient, you should not copy, disclose or take any action in reliance on this communication. If you have received this communication in error, please notify the sender by reply e-mail and delete the message and any attached documents.

From: [REDACTED]
Sent: Wednesday, August 06, 2014 11:35 AM
To: Spofford, Ann
Subject: RE:CFD Fireworks

Anne:

On Saturday August 30, the Carmel Fire Department will be having a Fireworks display at our annual carnival at Shoprite Plaza. We have secured approval from Hillcrest Commons to use their property for this action. We have a contract with Garden State Fireworks thru Ace Tent and Amusement Company who are providing our rides.

Attached is information for the permit process required by the Town of Carmel. Any addition information you may need please do not hesitate to call me.

Carl Greenwood
Carmel Fire Dept.
Carnival Committee



FIRE PERMIT APPLICATION

SPONSOR:

CARMEL FIRE DEPARTMENT
94 GLENEIDA AVENUE
CARMEL, NY

PYROTECHNICIANS

ANTHONY CAPICOTTI #PR-618
EUGENE CAPICOTTO #PR548

FIREWORKS COMPANY

GARDEN STATE FIREWORKS, INC.

WE CERTIFY THAT THE ABOVE PYROTECHNICIANS HAVE A VALID LICENSE
ISSUED BY NEW YORK STATE DEPARTMENT OF LABOR

DATE & TIME

AUGUST 30, 2014 APPROXIMATE TIME 9:00 PM

LOCATION

LOT E-21 ACCESS ROAD
CARMEL, NY

LIST OF MATERIALS ENCLOSED



MANNER OF STORAGE

IN LOCKED COMPANY TRUCK ON SITE DAY OF DISPLAY UNTIL TIME OF SET UP
AND FIRE

DIAGRAM ENCLOSED

ENCLOSURES

BATFE LICENSE

LIABILITY INSURANCE CERTIFICATE

AUTOMOBILE INSURANCE CERTIFICATE

COMPENSATION INSURANCE CERTIFICATE ENCLOSED.

CERTIFICATE OF EXEMPTION NEW YORK STATE WORKERS COMPENSATION

DRAYTON INSURANCE BROKERS, INC.

2500 CENTER POINT ROAD, SUITE 301 POST OFFICE BOX 94067
BIRMINGHAM, ALABAMA 35215 BIRMINGHAM, ALABAMA 35220
TELEPHONE: (205) 854-5806

FAX: (205) 854-5899

CERTIFICATE OF INSURANCE

NO. 414187

We certify that insurance is afforded as stated below. This Certificate does not affirmatively or negatively amend, extend or alter the coverage afforded by the insurance policy and the insurance afforded is subject to all the terms, exclusions and conditions of the policy.

INSURER Admiral Insurance Company **POLICY NO.** CA000016477-03

NAMED INSURED Garden State Fireworks, Inc. Pyritz Pyrotechnics Group, LLC
New Vernon Fireworks 4224 Arcata Way, Suite F
August & Nunzio Santore N. Las Vegas, NV 89030
P.O. Box 403, Carlton Road
Millington, NJ 08901

POLICY TERM March 1, 2014 to March 1, 2015; Both Days 12:01 A.M. Standard Time

COVERAGE Commercial General Liability: ☒ Occurrence Basis ☐ Claims Made Basis

LIMIT OF LIABILITY \$5,000,000 each occurrence, \$10,000,000 general aggregate, \$6,000,000 products/completed operations aggregate
The limit of liability shall not be increased by the inclusion of more than one insured or additional insured.

INSURED OPERATIONS Public fireworks display and special effects contractor

It is certified that, if named below, this policy includes as Additional Insureds 1) the sponsor(s), promoter(s), organizer(s) (including other entities having similar interests), of insured pyrotechnic events and/or 2) the owner(s) of real property (or barges) at which insured pyrotechnic events are held and/or 3) the owner(s), manager(s), tenant(s), mortgagee(s) (including other entities having similar interests), of buildings, stadiums, arenas and similar facilities at which insured pyrotechnic events are held and/or 4) the licensing or permitting authority, or other authority having jurisdiction, issuing licenses/permits for insured pyrotechnic events and/or 5) any other entity for which the insurance is required to be afforded under written contract. Coverage applies only as respects the legal liability of such Additional Insured(s) for bodily injury and property damage caused by the operations of the Named Insured. The insurance afforded any Additional Insured does not include coverage for any bodily injury or property damage arising from the failure of such Additional Insured to fulfill its obligations specified in its contract with the Named Insured.

The Insured has fully complied with the requirements of N.J.S.A. 21:3-5 by providing a surety bond in the amount of \$2,500 from Service Insurance Company, Inc., West Orange, NJ. This general liability insurance is not provided to comply with the terms of N.J.S.A. 21:3-5. It is not an alternative to, or a co-surety with, the required bond, nor does it afford an additional or supplemental bond, nor excess limits over the required bond. By accepting status as Additional Insured on this policy, on the basis set out herein, the Additional Insured acknowledge and agree that this policy is not a bond, or an alternative to a bond, issued under the terms of N.J.S.A. 21:3-5.

NAME(S) OF ADDITIONAL INSURED(S)

CARMEL FIRE DEPARTMENT, INC.
94 GLENEIDA AVENUE
CARMEL, NY 10512

COMMISSIONER'S OF FIRE
DISTRICT #1, BOX 1238
CARMEL, NY 10512

TOWN OF CARMEL
60 McALPIN AVENUE
MAHOPAC, NY 10541

WB RESIDENTIAL COMMUNITITES
HILLCREST COMMONS
3101 HEIGHTS LANE
CARMEL, NY 10512

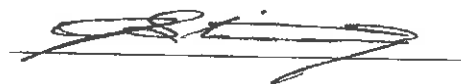
DISPLAY LOCATION
LOT E-21 ACCESS ROAD

DISPLAY DATE(S)
AUGUST 30, 2014

It is certified that this policy requires a 30 day mutual notice of cancellation between the Insurer and the Named Insured. In the event of such cancellation we will endeavor to mail 10 days written notice to the Additional Insured(s), whose name and address is shown hereon, but failure to mail such notice shall impose no obligation or liability of any kind upon the insurer and/or the undersigned.

DRAYTON INSURANCE BROKERS, INC.

JULY 25, 2014





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/14/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Ryder Rosacker McCue & Huston (MGD by Hull & Compa 509 W Koenig St Grand Island NE 68802	CONTACT NAME: Kristy Wolfe PHONE (AC, No, Ext): 308-382-2330 FAX (AC, No): 308-382-7109 E-MAIL: kwolfe@ryderinsurance.com INSURER(S) AFFORDING COVERAGE INSURER A: SCOTTSDALE INS CO INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED Garden State Fireworks Inc. 383 Carlton Road PO Box 403 Millington NJ 07946	NAIC # 41297

COVERAGES

CERTIFICATE NUMBER: 1786725631

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> Excess Hired <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			CAS0089826	3/13/2014	3/13/2015	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE AGGREGATE
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

Municipal Excess Liability Joint Insurance Fund
9 Campus Drive Ste 16
Parsippany NJ 07054

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Jodi Sauer



**Certificate of Attestation of Exemption
From New York State Workers' Compensation
and/or Disability Benefits Insurance Coverage**

****This form cannot be used to waive the workers' compensation rights or obligations of any party.****

The applicant may use this Certificate of Attestation of Exemption ONLY to show a government entity that New York State specific workers' compensation and/or disability benefits insurance is not required. The applicant may NOT use this form to show another business or that business's insurance carrier that such insurance is not required.

Please provide this form to the government entity from which you are requesting a permit, license or contract. This Certificate will not be accepted by government officials one year after the date printed on the form.

**In the Application of
(Legal Entity Name and Address):**

GARDEN STATE FIREWORKS, INC.
DBA: SAME AS ABOVE
OX 403 383 CARLTON ROAD
MILLINGTON, NJ 07946
PHONE: 908-647-1086 FEIN: XXXXX6574

**Business Applying For:
OTHER: NEW YORK STATE DEPARTMENT OF LABOR**

From: NEW YORK STATE DEPARTMENT OF LABOR

Workers' Compensation Exemption Statement:

The above named business is certifying that it is **NOT REQUIRED TO OBTAIN NEW YORK STATE SPECIFIC WORKERS' COMPENSATION INSURANCE COVERAGE** for the following reason:

The business is a two person owned corporation, with those individuals owning all of the stock and holding all offices of the corporation (each individual must hold an office and own at least one share of stock). Other than the two corporate officers/owners, there are no employees, day labor, leased employees, borrowed employees, part-time employees, other stockholders, unpaid volunteers (including family members) or subcontractors.

Corporate Officers: NUNZIO J. SANTORE President, AUGUST N. SANTORE Vice President

Disability Benefits Exemption Statement:

The above named business is certifying that it is **NOT REQUIRED TO OBTAIN NEW YORK STATE STATUTORY DISABILITY BENEFITS INSURANCE COVERAGE** for the following reason:

The business **MUST** be either: 1) owned by one individual; OR 2) is a partnership (including LLC, LLP, PLLP, RLLP, or LP) under the laws of New York State and is not a corporation; OR 3) is a one or two person owned corporation, with those individuals owning all of the stock and holding all offices of the corporation (in a two person owned corporation each individual must be an officer and own at least one share of stock); OR 4) is a business with no NYS location. In addition, the business does not require disability benefits coverage at this time since it has not employed one or more individuals on at least 30 days in any calendar year in New York State. (Independent contractors are not considered to be employees under the Disability Benefits Law.)

I, AUGUST N. SANTORE, am the Vice President with the above-named legal entity. I affirm that due to my position with the above-named business I have the knowledge, information and authority to make this Certificate of Attestation of Exemption. I hereby affirm that the statements made herein are true, that I have not made any materially false statements and I make this Certificate of Attestation of Exemption under the penalties of perjury. I further affirm that I understand that any false statement, representation or concealment will subject me to felony criminal prosecution, including jail and civil liability in accordance with the Workers' Compensation Law and all other New York State laws. By submitting this Certificate of Attestation of Exemption to the government entity listed above I also hereby affirm that if circumstances change so that workers' compensation insurance and/or disability benefits coverage is required, the above-named legal entity will immediately acquire appropriate New York State specific workers' compensation insurance and/or disability benefits coverage and also immediately furnish proof of that coverage on forms approved by the Chair of the Workers' Compensation Board to the government entity listed above.

**SIGN
HERE**

Signature:

August N. Santore

Date:

6-23-14

Exemption Certificate Number

2014-036786

Received

June 6, 2014

NYS Workers' Compensation Board

ACORD™ CERTIFICATE OF LIABILITY INSURANCE					DATE (MM/DD/YY) 05/30/2014	
PRODUCER 23451 COVER ME INSURANCE AGENCY OF NJ, INC. 610-618 W. ST. GEORGES AVENUE LINDEN, NJ 07036			THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
INSURED GARDEN STATE FIREWORKS INC PO BOX 403 MILLINGTON NJ 07946			INSURERS AFFORDING COVERAGE INSURER A: NJ CASUALTY INS. CO. INSURER B: INSURER C: INSURER D: INSURER E:		NAIC# 	
Serial # 182544						
COVERAGES THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.						
POLY LTR	ACORD INSRN	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMPIOP AGG \$
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
B		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	M59154-6-14	06/10/2014	06/10/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER EL EACH ACCIDENT \$ 1,000,000 EL DISEASE - EA EMPLOYEE \$ 1,000,000 EL DISEASE - POLICY LIMIT \$ 1,000,000
		OTHER				
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS						
CERTIFICATE HOLDER MUNICIPAL EXCESS LIABILITY JOINT INSURANCE FUND 9 CAMPUS DRIVE, SUITE 16 PARSIPPANY, NJ 07054 FAX: (908)647-6258			CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 23451 <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <i>S.R.</i> <i>Michael J. Allen</i> </div>			

mt

S. Department of Justice
Bureau of Alcohol, Tobacco, Firearms and Explosives

FEDERAL EXPLOSIVES LICENSING CENTER
(18 U.S.C. Chapter 40)

accordance with the provisions of Title XI, Organized Crime Control Act of 1970, and the regulations issued thereunder (27 CFR Part 555), you may engage in activity specified in this license or permit within the limitations of Chapter 40, Title 18, United States Code and the regulations issued thereunder, until the expiration date shown. **THIS LICENSE IS NOT TRANSFERABLE UNDER 27 CFR 555.53.** See "WARNINGS" and "NOTICES" on reverse.

Direct ATF Correspondence To: ATF - Chief, FELC
244 Needy Road
Martinsburg, WV 25405-9431

Chief, Federal Explosives Licensing Center (FELC)

8-NJ-027-20-5D-00096

Expiration Date

April 1, 2015

Name: Christopher R. ...
GARDEN STATE FIREWORKS, INC.

Premises Address (Changes? Notify the FELC at least 10 days before the change.)
383 CARLTON RD
MILLINGTON, NJ 07946-0000

Type of License or Permit

20-MANUFACTURER OF EXPLOSIVES

Purchasing Certification Statement

The licensee or permittee named above shall use a copy of this license or permit to assist a transferor of explosives to verify the identity and the license or permit status of the licensee or permittee as provided by 27 CFR Part 555. The signature of each copy must be an original signature. A faxed, scanned or e-mailed copy of the license or permit with a signature intended to be an original signature is acceptable. The signature must be that of the Federal Explosives Licensee (FEL) or a responsible person of the FEL. I certify that this is a true copy of a license or permit issued to the licensee or permittee named above, and that the business or operations specified above under "Type of License or Permit."

Mailing Address (Changes? Notify the FELC of any changes.)

GARDEN STATE FIREWORKS, INC.
PO BOX 400
MILLINGTON, NJ 07946-0000

Licensee/Permittee Responsible Person Signature

Position/Title

COPY

Printed Name

Date

ATF Form 5400.14/5400.15 Part I
Revised October 2011

Previous Edition is Obsolete

GARDEN STATE FIREWORKS, INC. 383 CARLTON RD. 07946-0000 NJ 07946-0000

Federal Explosives License (FEL) Customer Service Information

Federal Explosives Licensing Center (FELC)
244 Needy Road
Martinsburg, WV 25405-9431

Toll-free Telephone Number: (877) 283-3352
Fax Number: (304) 616-4401
E-mail: FELC@atf.gov

ATF Homepage: www.atf.gov

Change of Address (27 CFR 555.54(a)(1)). Licensees or permittees may during the term of their current license or permit remove their business or operations to a new location at which they intend regularly to carry on such business or operations. The licensee or permittee is required to give notification of the new location of the business or operations not less than 10 days prior to such removal with the Chief, Federal Explosives Licensing Center. The license or permit will be valid for the remainder of the term of the original license or permit. (The Chief, FELC, shall, if the licensee or permittee is not qualified, refer the request for amended license or permit to the Director of Industry Operations for denial in accordance with § 555.54.)

Right of Succession (27 CFR 555.59). (a) Certain persons other than the licensee or permittee may secure the right to carry on the same explosive materials business or operations at the same address shown on, and for the remainder of the term of, a current license or permit. Such persons are: (1) The surviving spouse or child, or executor, administrator, or other legal representative of a deceased licensee or permittee; and (2) A receiver or trustee in bankruptcy, or an assignee for benefit of creditors. (b) In order to secure the right provided by this section, the person or persons continuing the business or operations shall furnish the license or permit for for that business or operations for endorsement of such succession to the Chief, FELC, within 30 days from the date on which the successor begins to carry on the business or operations.

(Continued on reverse side)

Cut Here X

Federal Explosives License/Permit (FEL) Information Card

License/Permit Name: GARDEN STATE FIREWORKS, INC.

Business Name:

License/Permit Number: 8-NJ-027-20-5D-00096

License/Permit Type: 20-MANUFACTURER OF EXPLOSIVES

Expiration: April 1, 2015

Please Note: Not Valid for the Sale or Other Disposition of Explosives.

STATE OF NEW YORK - DEPARTMENT OF LABOR



ANTHONY F CAPICOTTI

**CLASS: B
NON PROXIMATE AUDIENCE ONLY**

**THIS CARD MUST BE CARRIED
WHEN USING PYROTECHNICS**

NYC & NYS CERTIFICATIONS REQUIRED IN NYC

STATE OF NEW YORK - DEPARTMENT OF LABOR
PYROTECHNICIAN CERTIFICATE OF COMPETENCE



EUGENE NAPPICOTTO

CLASS: B
NON PROXIMATE AUDIENCE ONLY
THIS CARD MUST BE CARRIED
WHEN USING PYROTECHNICS

CERT# PR-548
EXPIRES 08/16

NYC & NYS CERTIFICATIONS REQUIRED IN NYC



DMV# 6862
EYES BRO
HAIR GRY
HGT 6' 0

RETURN TO:
C UNIT
BUILDING 12
LE CAMPUS

ALBANY NY 12240

Lot E-2.1

(Per 1st Reg. 3127 & 3127A)

EXISTING SINGLE STORY
CONCRETE BLOCK BUILDING

12' WIDE EASEMENT

N/T TOWN
OF CARMEL

TOWN
REGULATED
100' WETLAND
BUFFER AND
NYSDEC
ELIGIBLE
FRESHWATER
WETLAND 100'
ADJACENT
AREA

Fireworks
Storage and Discharge
Area - On Town Land



The Greater
MAHOPAC-CARME
CHAMBER OF COMMERCE

P.O. Box 160
953 SOUTH LAKE BLVD
MAHOPAC NY 10541
845-628-5553 PH.
845-628-5962 FAX

E-MAIL: INFO@MAHOPACCARMELCHAMBER.COM
WWW.MAHOPACCARMELONLINE.COM

CHAMPION MEMBERS

Putnam
Hospital Center
HEALTHQUEST

TOMPKINS
Mahopac Bank

ADVOCATE MEMBERS

Examiner News
Mahopac News

SUPPORTING MEMBERS

Cartwright & Daughters
Tent and Party Rentals

George Hartshorn Paving

Hudson Valley
Federal Credit Union

Kidz Country

Law Offices of Joseph J. Tock

Park Ford

TD Bank

BOOSTER MEMBERS

Carmel Taxi

Comcast

The Diana Foundation

Dr. George Gorich, MD

East Road Motors

Funtime Amusements

Howard Payson Realty

MAC Creative
Plan Solutions

August 1, 2014

Town Board
Town of Carmel
60 McAlpin Avenue
Mahopac, NY 10541

Dear Town Board Members:

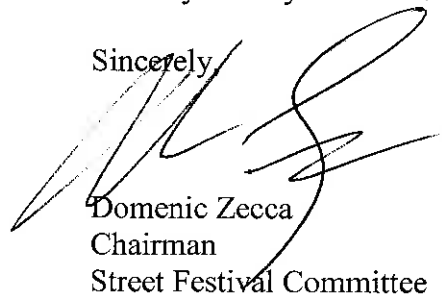
The Greater Mahopac-Carmel Chamber of Commerce will be sponsoring a Community Street Festival and Merchant Showcase on Sunday, October 5, 2014. The event will take place on Route 6N and in the Mahopac Chamber Community Park.

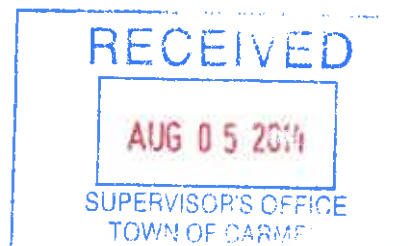
We will be applying for a permit for the use of the park.

We are also applying for a sound amplification permit. This permit usually requires a fee and we are asking the Town Board for a waiver of the fee as the Chamber is a not for profit organization.

Thank you for your consideration.

Sincerely,


Domenic Zecca
Chairman
Street Festival Committee



☒ Work Session 8/13/14

☐ Agenda _____

#5



**TOWN OF CARMEL
SOUND AMPLIFICATION PERMIT APPLICATION**

No. _____

Ann Spofford, Town Clerk
Town Hall - 60 McAlpin Avenue
Mahopac, NY 10541
845.628.1500

Applicant Name: Mahopac-Carmel Chamber of Commerce
Applicant Address: 953 South Lake Blvd, Mahopac, NY 10541
Applicant Telephone Number: 845 628 5553 - Terry

Name and Address of Owner of Premises: _____

Tompkins Mahopac Bank - 630 Rt 6
Location of Premises for which Permit is Sought: Tompkins Bank Parking Lot

Date of Event: Oct 5, 2014 Hours: From: 11Am To: 6pm

Identify Type of Sound System: Live Band Amplification

Volume of Sound to be used (measured by decibels or other efficient method): _____

as per town code

Type of Event: Street Festival Date of Application: Aug 1, 2014

No permit can be issued for any location within 500 feet of a school, courthouse or place of worship during the hours of such institutions nor within 500 feet of a hospital or institution at any time.

Issuance of this permit shall not be construed to relieve the operator of any loudspeaker device or the owner or lessee of any premises wherein the same is used, from any determination that such device is a nuisance.

Operation of any loudspeaker or similar device is prohibited before 10:00 a.m. or after 8:00 p.m. Sunday through Thursday; before 10:00 a.m. or after 11:59 p.m. on Friday and Saturday; before 10:00 a.m. or after 11:59 p.m. on Federal Holidays or any other day as designated by resolution of the Town Board.

Each permit issued by the Town Clerk shall be valid for a period not to exceed three (3) calendar days.

Subsequent to the issuance of any permit by the Clerk pursuant to this Chapter, no additional permit shall be issued for the same parcel or property, regardless of ownership thereof, prior to thirty (30) calendar days having elapsed since the expiration of the prior permit issued for said parcel or property.

I hereby acknowledge receipt of a copy of Chapter 104 of the Town of Carmel Code, Noise / Article I, Sound Amplifying and Reproducing Equipment, regulating the use of loud speakers, amplifiers and similar devices.

I have complied with the provisions §104-6(C) of this Chapter by providing written notification to the owner(s) of each improved parcel or property located within fifty (50) feet of any boundary of my property, that issuance of a sound amplification permit is being sought for said property on the dates and times shown above.

Signature: [Signature] Title: Administrator

Sworn to before me this 5 day of Aug, 2014.

[Signature]
Notary Public

SUSAN J. NUNZIATA
NOTARY PUBLIC, State of New York
No. 01NU6078143
Qualified in Westchester
and Putnam Counties
Commission Expires July 22, 2015

Police Department Review: [Signature]
Signature

Approved by: _____
Town Clerk, Town of Carmel

Date: _____

Fee Schedule

Residential - 1 Day	\$ 50.00
Commercial - 1 Day	\$100.00

Lake Mahopac

2014

The Newsletter of the Lake Mahopac Park District

www.lakemahopac.org

In this Issue:

- Chairmans Report
- Coast Guard Auxiliary
- How's the Water?
- History Corner
- Sheriff's Marine Patrol
- Who We Are

Chairmans Report: Eurasian Milfoil

If you haven't noticed,...It's Back!



We've had a good ride, for about 20 years since 1994, when triploid grass carp were introduced to Lake Mahopac, to consume an invasive aquatic plant species. Eurasian Milfoil is making a comeback, it started its reemergence late last summer. The Lake Mahopac Park District has been in contact with the New York State Dept. of Environmental Conservation (NYSDEC,) since last September concerning this issue. Triploid carp are vegetarians (ie: herbivores) and do not eat fish also, they are sterile and cannot reproduce.

There are three (3) ways to deal with milfoil, mechanical, chemical and biological.

Mechanical, such as a weed harvester, was tried for several years; it was expensive, for the machinery and personnel, noisy and ineffective for a 583.4 acre lake. **Chemical** is too expensive for a lake this size and Lake Mahopac is a domestic water supply for many residents; those two reasons are why we ruled it out. **Biological**, in the form of grass carp, was the preferred choice.

UPDATE:

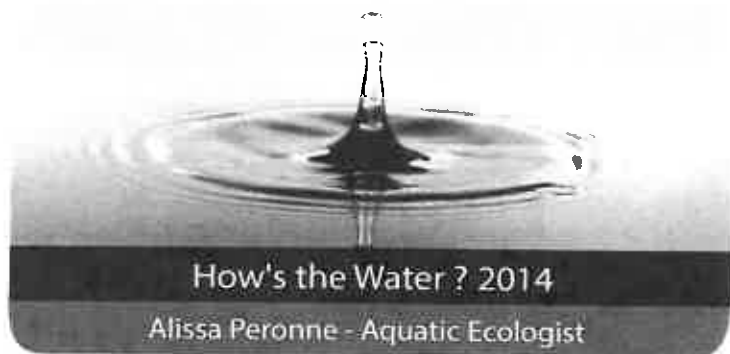
The NYSDEC will base its stocking recommendation on our 2014 Bio-Mass density study.

The milfoil will be at peak growth in mid August, which is the optimal time to do the study, by late August and early September the milfoil begins its annual die off. It is our intention to stock the carp in October or early November of 2014. We will update information, as we receive it, on our website: lakemahopac.org

BUOYS:

#6

Marker buoys are placed around the lake for a number of very good reasons. Markers indicate speed limit zones such as the channel behind Canopus Island and in the cove between Fairy Island and Mahopac Point. There are also channel markers (red & green) marking the best channel at the entrance to the Fairy Island Cove. Buoys are also placed to indicate the mandatory 100' speed and safety zones around the lake shore. Please become familiar with these important safety markers and heed their warnings.



How's the Water ? 2014

Alissa Peronne - Aquatic Ecologist

This is the nineteenth year since the grass carp have been introduced (October 1994) into Lake Mahopac for controlling the Eurasian Milfoil population. An annual summer sampling (water quality and vegetation) of Lake Mahopac has been performed every year since the introduction of the carp. The most recent sampling was conducted in August 2013 both water quality and plant biomass. Samples were collected from the same sites as in previous years.

This is the first year that Eurasian milfoil (*Myriophyllum spicatum*) has been observed in measurable amounts at most of our sampling sites. Most notable is its presence in the cove in the southwestern area of Lake Mahopac. Eurasian milfoil accounted for 30% of all vascular aquatic plants found at the sampling sites and 80% of the Eurasian milfoil collected was found in the southwestern cove. Eurasian milfoil is considered a non-native invasive plant species which out competes other favorable native plant species; leading to a lake system with low biodiversity. Eurasian milfoil in dense populations shades out and replaces other aquatic plants and is of lesser value as a >

How's the Water ? 2014 - continued

Alissa Perrone - Aquatic Ecologist

...food resource than the native plants it replaces. At high densities, it supports fewer aquatic insects which serve as a food resource for fish. Another impact on the lake is a reduction in oxygen levels when the dense population of Eurasian milfoil decays and is decomposed by organisms that need oxygen. Finally, the dense mats impede water movement and interfere with recreational activities such as swimming, boating, fishing and water skiing. Water temperature and oxygen profiles were similar to last years.

Since the introduction of carp into Lake Mahopac, oxygen profiles have remained fairly constant with subtle changes in the depth at which oxygen depletion occurs. Generally, oxygen levels range between 8 and 8.5 mg/L in the epilimnion (surface to 4m) with an anoxic hypolimnion starting between 6 and 7 meters. This year average oxygen level in the upper waters was slightly higher (8.7 mg/L) and anoxic conditions (~1 mg/L) were observed at 10 meters. The greater depth at which anoxia was first measured in the water column this year may be attributed to the regrowth of the aquatic vascular plants in Lake Mahopac. Aquatic plants act as a source of oxygen when they release oxygen into the water as a product of photosynthesis.

Generally, all other water quality variables were within the expected ranges for Lake Mahopac.



New Putnam County Sheriff's Office
Marine Patrol on Lake Mahopac

Sgt. Michael Szabo

The Putnam County Sheriff's Office has assigned its Marine Unit to patrol Lake Mahopac for the 2014 boating season. The Sheriff's Marine Unit has patrolled the Hudson River and Lake Oscawana in Putnam Valley for several years, and this season marks the first time that the operations of the Marine Unit have been expanded to include Lake Mahopac.

The mission of the Marine Unit includes conducting search and rescue operations, aiding boaters, performing boat safety inspections, and enforcing New York State navigation laws. The safety of users of the lake is the Marine Unit's top priority. >>>>

Routine calls for Marine Unit services should be directed to the Sheriff's Office at 845-225-4300. Emergency calls should be made to 911.



Invasive Species

Ed Barnett- Lake Park District Chair.

You may have heard about Zebra Mussels, which have the potential to infect Lake Mahopac. They are a tiny, invasive species, about the size of a thumb nail, that can clog intakes in water systems, boat engine cooling systems and cling to solid surfaces, such as boats, rocks and docks. Large infestations can negatively impact fishing and other elements of the lake's ecology. They appear "D" shaped with dark and light colored stripes. Zebra mussels and other invasive species, can be spread by boats going to and from infested water bodies.

If you trailer your boat to other areas, inquire locally to see if there is an infestation. In any case, when taking your boat from one water body to another, inspect to make sure that the hull, bilge, bait boxes, fishing tackle and trailer are not transporting any invasive species, whether aquatic plants or zebra mussels or their larvae. Basically, there are 5 steps: **Check, Clean, Drain, Dry and Disinfect.**

For more information on this subject and how to clean/disinfect your boat of these pests, type in your search engine, nysdec zebra mussels and see "Prevent the Spread of Aquatic Invasives." This site is the most concise with good graphics and easy to understand. If you trail your boat to other water bodies, please consider this as part of our responsibility to protect Lake Mahopac.



The Auxiliary Coast Guard

Jay Crawford - Lake Mahopac Park District

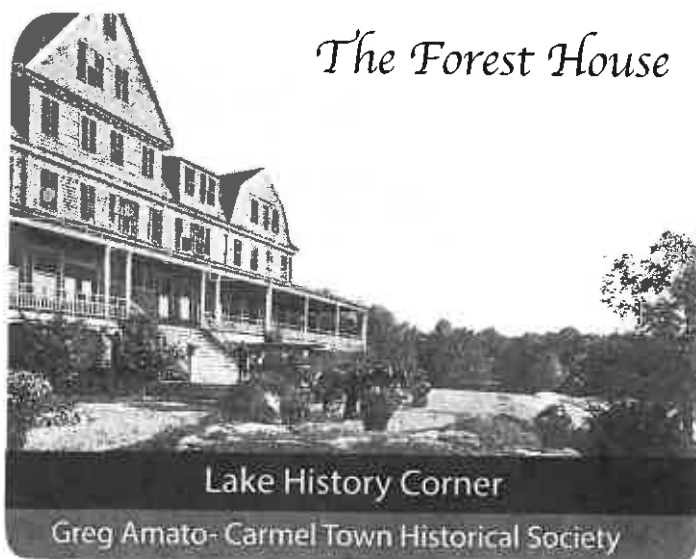
Did you know that our own Lake Mahopac Coast Guard Auxiliary not only participated in the National Coast Guard Auxiliary's Operational Excellence Program but also earned the top award? >>>>

The Operational Excellence Program represents a challenging opportunity for Auxiliary boat crews to highlight their talents and proficiencies, completing five levels of demanding tasks to a high standard, within seconds of their allotted time limits. The skill and efficiency exhibited by the team earned them a perfect score of 100 for their exemplary efforts. Chief Warrant Officer Zambrana noted with pride that the three member crew (Coxwain Jim Diplelesi and Crew members Lynn Glassman, Kevin Michael Hanley) was the only team out of 4,346 Auxiliarists across the District during the past three years to earn this prestigious award. Assisting Jim and his team was Coxswain Artie DeSiervi and crew member Elaine Pealey, whose vessel played the role of a Mahopac mariner in distress on Lake Mahopac. Congratulations to the CGA Team and thank you for your service to the Lake Mahopac Park District community!

Free Vessel Safety Check

As boat owners know, you are required by law to have certain equipment aboard when on the water. Your local U.S. Coast Guard Auxiliary will complete a free vessel safety check for your boat. If the boat has all required equipment, the CGA will provide a Vessel Safety Check decal, traditionally mounted on the boats windshield. A vessel safety check may prevent you from being fined by the Marine Police or the Coast Guard. More importantly, it may potentially save your life and the lives of your passengers.

For further information contact Arthur Desiervi, Division Commander, 845-216-1990, or Jim Dipelesi, Safety Check Officer, 845-628-6005, cell: 914-646-9721.



The Forest House

Lake History Corner

Greg Amato- Carmel Town Historical Society

July 4th, 1871 was a transforming year in the history of "The Lake," as Lake Mahopac was referred to. Until that date the primary tourist route to "The Lake" from NYC was by train on Commander Cornelius Vanderbilt's New York and Harlem Railroad to the Croton Falls depot.

Hotels and boarding houses had stage coaches, buggies, etc. waiting to transport tourists to their respective places.

At about 4 p.m. on that day, the first train with two well-filled passenger cars arrived in Lake Mahopac, from Goldens Bridge. Vanderbilt's branch line from Goldens Bridge was completed. It was "The Lake's" first direct connection to NYC via rail. This was more of a July 4th show or celebration train as regular service did not begin till the 15th of the month. Lake Mahopac already was a prized vacation destination for residents of NYC and its greater surrounding area, but train access accelerated its growth in tourism.

Until 1871 there was a rugged road around the north end of the lake that extended out to Hill Street but did not extend around the west side of the lake. During Friday and Saturday, August 24th and 25th 1871, a grand celebration was held to open the "Grand Boulevard" around the Lake. On Thursday, August 24th the celebration began with a National Salute at sunrise, a reception for the invited guests, children dancing on the lawn of the Gregory House and a dedication at noontime. At 1 p.m. the Grand Tour of the Boulevard was to start, followed by a banquet at 3 p.m. and an outdoor concert at 5 p.m. ending with an aquatic Chinese lantern illumination at 8 p.m. On Friday, August 25th a regatta on the lake was held at 10 a.m. At 1 p.m. the laying of the cornerstone for the National Museum of Natural History was laid and the closing event was a Grand Ball at the Gregory House.



*SLUICE GATE, AND OUTLET FROM LAKE MAHOPAC.
—PUTNAM CO. N.Y. 355. SEP 9TH 1885*

However, with the bankruptcy of the Improvement Company and the failure of other subsequent land companies attempts to follow through with the development of the lands around North and West side of the Lake, the Boulevards once again became rustic paths until 1893 when the Roake family built the Forest Hotel at Interlaken. The popularity of the Forest House, with accommodations for 125 people, made it necessary to put the boulevards in usable condition. The Forest House also had a favored mineral spring,

History Corner - continued

Greg Amato- Carmel Town Historical Society

"Minomah Spring," housed in a stone spring house with walks and rambles through the rocky hillside to Kirk Lake. This began the real development of the north and west sides of Lake Mahopac. In 1898, the Mahopac Golf Club was organized with 37 members. The first president was Daniel T. Bradley, who had a summer home on a portion of land that would become the Mahopac Hills community. However, its first course was leased land on the Henrick family farm, located off East Lake Boulevard. The club hired well known golf course architect Tom Bendelow, for a fee of \$25,000, to design the course. The club hired Seymour Dunn as their first golf-instructor and in essence their first golf pro. Mr. Bendelow was the son of one of England's most famous golfers and the nephew of Willie Dunn considered by many to be the 19th century's greatest golfer. The club leased 1,291 yards and 6 holes of farmland from Mr. Hendrick. Time at this location was short, as Mr. Hendrick was a religious man and objected to the playing of golf on the Sabbath. In 1900 he refused to renew the club's lease. The club then leased land from the Putnam Land Company on North Lake Boulevard, where they are currently located. The new course was opened on July 28th, 1900 with a nine hole course 2,730 yards long and an elegant new club house. The course has continued to grow and improve. One of their former Caddie Masters, Larry Laoretti, a Mahopac High School graduate, went on to become a pro-golfer and winner of the Senior Masters tournament. Whenever he came back to Mahopac Laoretti played the Mahopac course and is said to have commented that it was better than many of the professional courses he played. In 1923, an auction was held for land on the southwest side of the lake. The area initially was called the "Bungalow Colony." From a summer community, it evolved into a year round community. However, the residents thought the name was demeaning and renamed the community Mahopac Hills.

Graymanse, a Georgian colonial style residence on the Lake's north shore, was built by William Tilden in 1856. It was a replica of the late Samuel Tilden home known as Graystone-on-the-Hudson in Yonkers.

One of the magnificent characteristics of the estate was the Italian garden located on the east side of the property. The garden was maintained until c. 1960 and was used for fund raising tours by a number of local charities.

In 1893, as lands off the northern and western sides of the Lake Mahopac were developed, it became apparent that a major need existed in once again making those boulevards accessible for public travel. Though the original boulevards were put in by private funds, the residents and businesses now turned to the town to fund their revitalization. With the exception of one private land owner and the city of New York, the land owners involved in the proposed three mile boulevard consented to the building of the public roadway. Once obtaining the rights-of-way to re-build the roadway, it was agreed that the Town of Carmel would be responsible for paying \$300 for the completion of about 400 feet of it, the rest of the funding would be obtained through donations and the road would be turned over to the town in good condition and without further expense.

New Lake Website Coming!!!!!!

The Lake Park District website is undergoing renovation and the new version should be up and running in the near future. The web address will stay the same, **lakemahopac.org**. The redesign will provide the same news, information and links as with the current websight but with an improved, easier to navigate interface. In addition, the new websight will utilize engaging, new features that will allow the sharing of great photos of our beautiful lake. If you have photos that you would like to have posted to our new websight please send them to: **info@lakemahopac.org**.

Who we are.....

The Lake Mahopac Park District Advisory Board is a group of individuals appointed by the Carmel Town Board to advise the board on issues that pertain to the health and safety of the lake. The Advisory Board's activities include the monitoring of the lake level and water quality, liaisoning with the Carmel Police, the Coast Guard Auxiliary and coordinating with surrounding lake associations through the NY State Federation of Lakes Associations and the Department of Environmental Conservation.

Board Officers

Edward Barnett - Chairman
Jay Crawford - Vice Chair
Mark Robertson - Treasurer

Suzanne McDonough - Carmel Town Board Liaison
Sgt. Michael Szabo - Putnam County Sheriff's Department Liaison
James Dipelesi - US Auxilary Coast Guard Liaison

Board Members

Charlie Langlitz
James Maxwell
William Spain
Shelia Margolis

Martin Greenberg
Joe Massaro
Bill Frumkin

RECEIVED

AUG 08 2014

SUPERVISOR'S OFFICE
TOWN OF CARMEL

Town of Carmel
Clerk's Office
60 Mc Alpine Ave
Mahopac NY 10541

cc: Police Dept ✓
Supervisor ✓

7

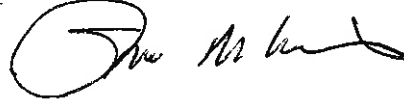
August 1, 2014 ☒ Work Session 8/13/14
☐ Agenda _____

To Ann Spofford, Town Clerk:

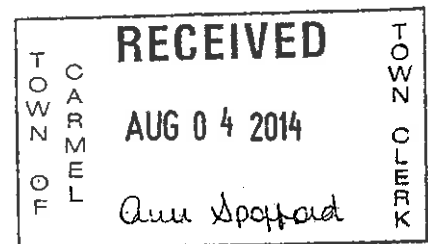
In compliance with Alcohol Beverage Control Law, Section 64, subdivision 2a, we "The Carriage House Restaurant and Tavern II" Inc. located at 887 Route 6, Mahopac, New York, 10541 in the county of Putnam, hereby notify the Clerk of our filing an application with the New York State Liquor Authority for the retail sale of alcoholic beverages on the premises.

Thank You

The Carriage House Restaurant and Tavern II



Steven Lewis (914 906-6084)
Owner/Operator



Town of Carmel
Supervisor Ken Schmitt
60 McAlpin Avenue
Mahopac NY 10541

August 12, 2014

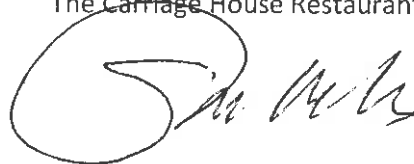
☐ Work Session _____

☐ Agenda _____

Dear Supervisor Schmitt,

As per the Alcohol Beverage Control Law, Section 64, subdivision 2a, we The Carriage House Restaurant and Tavern II Inc. have formally notified the Town of Carmel that we have applied for a liquor license with the State of NY to sell alcohol at 887 Route 6 in Mahopac in Putnam Country. We would greatly appreciate your waiver of the 30 day notification time frame to help expedite the process for our new establishment in the town.

Thank You, Sincerely
The Carriage House Restaurant and Tavern II



Owner / Operator Steven M. Lewis

(914) 906-6084



OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

APPLICATION FOR ALCOHOLIC BEVERAGE CONTROL RETAIL LICENSE (ON PREMISES) FILING CHECKLIST

APPLICANTS SHOULD KEEP A COPY OF THIS APPLICATION AND THE SUPPORTING DOCUMENTS FOR THEIR RECORDS.

This checklist has been created to better assist you with the application process. All items on the checklist must be complete and accurate. If all items in the checklist are not submitted, the application may be disapproved for Failure to Comply.

All on-premises applicants (whether applying for beer; beer & wine; or beer, wine & liquor) are required to notify the Municipality or Community Board at least 30 days prior to filing the application with the New York State Liquor Authority (per Section 110(b) of the ABC Law).

THE COMMUNITY BOARD/MUNICIPALITY NOTICE FORM AND PROOF OF DELIVERY MUST BE SUBMITTED WITH THIS APPLICATION.

Section 100(7) of the Alcoholic Beverage Control Law requires that Notice be posted in a conspicuous place at the entrance of the premises within 10 days of filing a new application to sell liquor at retail. This Notice does not apply to a premises that is currently licensed to sell liquor at retail. This Notice Form can be found on our website under "Notice to be Posted at Proposed Premises".

All Applicants MUST submit the following Sections of the Retail License Application when filing the application:

- | | |
|--|---|
| <input type="checkbox"/> Application (Pages 3-4) | <input type="checkbox"/> Method of Operation |
| <input type="checkbox"/> Right to Premises | <input type="checkbox"/> Personal Questionnaire (for each Principal, Lender, Donor, Joint Account Holder, etc.) |
| <input type="checkbox"/> Landlord Identification | <input type="checkbox"/> Notice of Appearance (if represented by someone other than the applicant) |
| <input type="checkbox"/> Financial Disclosure | <input type="checkbox"/> Applicant's Statement |
| <input type="checkbox"/> 500 Foot Law Statement | |
| <input type="checkbox"/> Statement of Area Plan | |
| <input type="checkbox"/> Establishment Questionnaire | |
| <input type="checkbox"/> Community Board/Municipality Notification and Proof of Delivery (using the Standardized Form, see above for more information) | |

All Applicants MUST submit the following Supporting Documents when filing the application:

- ☐ Bond, Form L-9 (signed by the applicant and expiring at the end of the initial licensing term)
- ☐ Detailed Diagrams which include Interior and Block Plot (aerial view of the building showing & labeling nearby businesses/residences) See Diagram instructions and Examples at the end of this application.
- ☐ Investment Records showing the source and availability of the funds to be used for the venture
- ☐ Lease/Deed/Contracts (any applicable for this venture) You must provide proof that you have full control over the premises to be licensed.
- ☐ Letter of request to waive the 2 bathroom rule (if only 1 bathroom)
- ☐ Maximum Occupancy Certificate (if requesting the Bathroom Waiver)
- ☐ Menu
- ☐ Photo Identification for all applicant Principals (copies only)
- ☐ Photos of applicant Principals
- ☐ Photos of the proposed premises (exterior and interior-including kitchen area)
- ☐ Proof of Citizenship for all applicant principals NOT currently licensed with the NYS Liquor Authority (ex: copy of Birth Certificate, US Passport, Certificate of Naturalization, Permanent Resident Card)

All Applicants MUST submit the following Supporting Documents before a license can be issued (Conditions of Approval):

- | | |
|---|---|
| <input type="checkbox"/> Assumed Name Filing Receipt (if DBA is used) | <input type="checkbox"/> Newspaper Affidavit |
| <input type="checkbox"/> Certificate of Authority to Collect Sales Tax | <input type="checkbox"/> Photos of the premises showing ready to open and operate |
| <input type="checkbox"/> Certificate of Occupancy | Worker's Compensation & Disability Insurance Policy numbers AND |
| <input type="checkbox"/> NYS Department of State Corporate Filing Receipt | <input type="checkbox"/> carrier names OR a Certificate of Attestation of Exemption from coverage |

State of New York
Executive Department
Division of Alcoholic Beverage Control
State Liquor Authority

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a Local Municipality or Community Board

(Page 1 of 2 of Form)

1. Date Notice was Sent: (mm/dd/yyyy)
2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License
- ☒ New Application ☐ Renewal ☐ Alteration ☐ Corporate Change

This 30-Day Advance Notice is Being Provided to the Clerk of the following Local Municipality or Community Board

3. Name of Municipality or Community Board

Applicant/Licensee Information

4. License Serial Number, if not a New Application: Expiration Date, if not a New Application:
5. Applicant or Licensee Name:
6. Trade Name (if any):
7. Street Address of Establishment:
8. City, Town or Village: ,NY Zip Code:
9. Business Telephone Number of Applicant/Licensee:
10. Business Fax Number of Applicant/Licensee:
11. Business E-mail of Applicant/Licensee:

For New applicants, provide description below using all information known to date.
For Alteration applicants, attach complete description and diagram of proposed alteration(s).
For Current Licensees, set forth approved Method of Operation only.
Do Not Use This Form to Change Your Method of Operation.

12. Type(s) of Alcohol sold or to be sold: ("X" One) ☐ Beer Only ☐ Wine & Beer Only ☒ Liquor, Wine & Beer
13. Extent of Food Service: ("X" One) ☒ Restaurant (Sale of food primarily; Full food menu; Kitchen run by chef) ☐ Tavern/Cocktail Lounge/Adult Venue/Bar (Alcohol sales primarily; Meets legal minimum food availability requirements)
14. Type of Establishment: ("X" all that apply)
- | | | | | | |
|---|---|--|-----------------------------------|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Recorded Music | <input type="checkbox"/> Live Music | <input type="checkbox"/> Disc Jockey | <input type="checkbox"/> Juke Box | <input type="checkbox"/> Karaoke Bar | <input type="checkbox"/> Stage Shows |
| <input type="checkbox"/> Patron Dancing (small scale) | <input type="checkbox"/> Cabaret, Night Club (Large Scale Dance Club) | <input type="checkbox"/> Catering Facility | | | |
| <input type="checkbox"/> Capacity of 600 or more patrons | <input type="checkbox"/> Topless Entertainment | <input checked="" type="checkbox"/> Restaurant | <input type="checkbox"/> Hotel | | |
| <input type="checkbox"/> Recreational Facility (Sports Facility/Vessel) | <input type="checkbox"/> Club (e.g. Golf Club/Fraternal Org.) | <input type="checkbox"/> Bed & Breakfast | | | |
| <input type="checkbox"/> Seasonal Establishment | | | | | |
15. Licensed Outdoor Area: ("X" all that apply)
- | | | | | |
|--|---|----------------------------------|---|---|
| <input checked="" type="checkbox"/> None | <input type="checkbox"/> Patio or Deck | <input type="checkbox"/> Rooftop | <input type="checkbox"/> Garden/Grounds | <input type="checkbox"/> Freestanding Covered Structure |
| <input type="checkbox"/> Sidewalk Cafe | <input type="checkbox"/> Other (specify): | <input type="text"/> | | |

State of New York
Executive Department
Division of Alcoholic Beverage Control
State Liquor Authority

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

**Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a
Local Municipality or Community Board**
(Page 2 of 2 of Form)

16. List the floor(s) of the building that the establishment is located on:
17. List the room number(s) the establishment is located in within the building, if appropriate:
18. Is the premises located with 500 feet of three or more on-premises liquor establishments? ☐ Yes ☒ No
19. Will the license holder or a manager be physically present within the establishment during all hours of operation? ☒ Yes ☐ No
20. Does the applicant or licensee own the building in which the establishment is located? ("X" One) ☒ Yes (If Yes SKIP 21-24) ☐ No

Owner of the Building in Which the Licensed Establishment is Located

21. Building Owner's Full Name:
22. Building Owner's Street Address:
23. City, Town or Village: State: Zip Code:
24. Business Telephone Number of Building Owner:

**Attorney Representing the Applicant in Connection with the Applicant's License Application Noted as Above for the
Establishment Identified in this Notice**

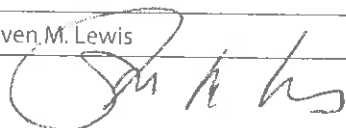
25. Attorney's Full Name:
26. Attorney's Street Address:
27. City, Town or Village: State: Zip Code:
28. Business Telephone Number of Attorney:
29. Business Email Address of Attorney:

I am the applicant or hold the license or am a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under **Penalty of Perjury** - that the representations made in this form are true.

30. Printed Name: Title:

Signature: X



OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

LICENSE 29**APPLICATION FOR ALCOHOLIC BEVERAGE CONTROL RETAIL LICENSE (ON PREMISES)**

It is not necessary to employ any person, agency or organization to assist you in filing this application. Beware of persons claiming to be able to assist you in securing action on your application. The payment of money or other thing of value for the use of influence, or promise of influence in obtaining a license is a violation of law and offenders will be prosecuted.

1. APPLICANT

Name of Applicant :

(Sole Proprietor, Partnership, Corporation, LLC, LLP, LP, etc.)

The Carriage House Restaurant and Tavern II Inc.

Trade Name(DBA): (see instructions) ** must be provided if premises will be called by any name other than as listed in the "Name of Applicant"

Carriage House Restaurant and Tavern II

Premises Street Address:

887 Route 6

City: Mahopac

, NY

Zip Code:

10541

County:

Putnam

Telephone Number of Premises (include area code):

845 803-8728

Mailing Address (if different than above):

City:

State:

Zip Code:

E-mail address (required):

2. CONTACT (if other than applicant)

Name of Contact:

☐ Attorney☐ Representative☐ Contact Person

Office Address:

City:

State:

Zip Code:

Telephone Number of Office (include area code):

E-mail address (required):

Is this application filed under the Attorney Certification Program? ☐ YES ☒ NO**3. For SEASONAL licenses only - beginning and ending months:****4. LICENSE TYPE:**
(see schedule of fees)**CODE:****5. Number of ADDITIONAL BARS (if any):**
(see instructions)**6. TOTAL PAYMENT DUE:****7. Federal Tax ID #:****7a. Certificate of Authority Permit#:**

[OFFICE USE ONLY]

DATE FILED:

SERIAL #:

continued on next page