

REGULAR MEETING OF THE BOARD OF TRUSTEES
January 14, 2019

ROLL CALL FOR REGULAR MEETING: Present: Mayor Clyde Rabideau
Trustees: Paul Van Cott, Patrick Murphy, Richard Shapiro and Melinda Little.
Also present: Village Manager, John Sweeney, Village Treasurer, Elizabeth Benson and
Community Development Director, Jamie Konkosi , Chief Operator Water/Waste Water
Kevin Pratt, Superintendent of Public Works Jeff Dora and Village Clerk, Kareen Tyler.

Everyone stood for the pledge of allegiance.

AUDITING:

Chair Rabideau called for a motion to approve payment for the 2019 budget
\$ 744,364.76 voucher number 11040443 to 11040642 complete detail of these
vouchers is attached and made part of these minutes.

Motion: Van Cott Second: Murphy

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

Chair Mayor Rabideau called for a motion to approve minute of 1-2-2019

Motion: Little Second: Murphy

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

PUBLIC COMMENT PERIOD:

Tim Fortune, Downtown Advisory Board recommended Melinda Little and Jeremiah St.
Louis to the Downtown Advisory Board

CORRESPONDENCE: Letter from First Night, Saranac Lake Youth Center Funding
Request and Annual Report, Well Water Report, Police Department Year End
Summary, Email BOCES Waterline

Chair Rabideau called for motion to accept and place on file the above referenced
correspondence.

Motion: Van Cott Second: Shapiro

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

ITEMS FOR BOARD ACTION:

Bill 2-2019 Hire Administrative Assistant Cassandra Hopkins

A copy of the bill is attached and made part of these minutes

Chair Mayor Rabideau called for a motion.

Motion: Little Second: Shapiro

Roll Call: Little yes Murphy recused himself Shapiro yes Van Cott recuse himself
Rabideau yes

**Bill 3-2019 Authorization for Representative to Execute Grant Agreement Water
Pollution Control Plant Study NYS EFC Planning Grant #80922**

A copy of the bill is attached and made part of these minutes

Chair Mayor Rabideau called for a motion.

Motion: Shapiro Second: Murphy

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

Bill 4-2019 Authorization and Appropriations of Local Match 20% (\$6,000) for Water Pollution Control Plant Study NYS EFC #80922

A copy of the bill is attached and made part of these minutes

Chair Mayor Rabideau called for a motion.

Motion: Little Second: Shapiro

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

Bill 5-2019 SEQR Type II Determination Water Pollution Control Plant Study #80922

A copy of the bill is attached and made part of these minutes

Chair Mayor Rabideau called for a motion.

Motion: Van Cott Second: Little

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

Bill 6-2019 Approve Use of Water Well System Reserve

A copy of the bill is attached and made part of these minutes

Chair Mayor Rabideau called for a motion.

Motion: Van Cott Second: Murphy

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

Bill 7-2019 Authorize RFP for 2019 Wastewater Treatment Plant Disinfection and Secondary Process Upgrades

A copy of the bill is attached and made part of these minutes

Chair Mayor Rabideau called for a motion.

Motion: Little Second: Shapiro

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

Bill 8-2019 Authorize Street Light Acquisition Letter

A copy of the bill is attached and made part of these minutes

Chair Mayor Rabideau called for a motion.

Motion: Little Second: Murphy

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

Bill 9-2019 Call for a Public Hearing for Volunteer Fire Contract

A copy of the bill is attached and made part of these minutes

Chair Mayor Rabideau called for a motion.

Motion: Little Second: Van Cott

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

Bill 10-2019 Appoint Melinda Little and Jeremiah St. Louis to the Downtown Advisory Board

A copy of the bill is attached and made part of these minutes

Chair Mayor Rabideau called for a motion.

Motion: Murphy Second: Shapiro

Roll Call: Little recused herself Murphy yes Shapiro yes Van Cott yes

Bill 11-2019 Call for a Public Hearing Regarding an Application to CDBG Economic Development Program on Behalf of Saranac Lake Resort

A copy of the bill is attached and made part of these minutes

Chair Mayor Rabideau called for a motion.

Motion: Van Cott Second: Murphy

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

Bill 12-2019 Municipal Shared Solar Agreement

A copy of the bill is attached and made part of these minutes

Chair Mayor Rabideau called for a motion.

Motion: Murphy Second: Little

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

OLD BUSINESS:

No old business

NEW BUSINESS:

Kevin Pratt, Chief Operator Water/Waste Water- Well Report

ITEMS FOR DISCUSSION:

Jeff Dora, Superintendent of Public Works - Road Work Scheduled for Spring

EXECUTIVE SESSION:

Chair Rabideau called for a motion to enter into executive session for – Proposed, Pending or Current Ligation and the proposed acquisition/sale/lease of real property when publicity might affect value

Motion: Murphy Second: Little

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

Chair Rabideau called for a motion to return to regular session.

Motion: Little Second: Shapiro

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

No Motions from Executive Session

MOTION TO ADJOURN

Chair Mayor Rabideau called for a motion to adjourn

Motion: Murphy Second: Van Cott

Roll Call: Little yes Murphy yes Shapiro yes Van Cott yes

Respectfully submitted,
Kareen Tyler, Village Clerk

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved							
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account	Disc. Amt.
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.		Disc. %			
11040442	ELECTRIC CHARGES 2018-2019	0000000134	NATIONAL GRID	19,507.02	12/20/2018								
12/20/2018		47602	06/13/2018				2019	00001	22579	12/20/2018	0.00	0200.0000	0.00
							12				0.00		0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
1	3 MAIN			0			0.0000		1,615.48	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
2	MECHANICS GARAGE			0			0.0000		87.82	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
3	MECHANICS GARAGE			0			0.0000		85.23	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
4	MECHANICS GARAGE			0			0.0000		85.23	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
6	FIRE DEPT			0			0.0000		514.55	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
7	DPW GARAGE			0			0.0000		415.95	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
8	SAND/SALT SHED			0			0.0000		87.15	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
9	STREET LIGHTS			0			0.0000		21.55	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
10	OFF STREET PARKING			0			0.0000		42.54	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
11	PARKS			0			0.0000		101.47	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
12	REC AREAS			0			0.0000		42.46	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
13	BEACH			0			0.0000		42.04	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
14	PISGAH			0			0.0000		2,046.40	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
16	HYDRO			0			0.0000		21.23	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
17	SOURCE OF SUPPLY			0			0.0000		4,428.81	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
18	SEWER			0			0.0000		379.24	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
19	B'DALE LIFT			0			0.0000		528.39	0.00	0.00	0.00	
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost		Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
20	WWTP			0			0.0000		8,961.48	0.00	0.00	0.00	

P/R SRS NRM 12/21/18

1,037.67

12/21/2018

12/21/2018

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account	
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.	
11040443	P/R SRS NRM 12/21/18			0000000126		NYS EMPLOYEES						
12/21/2018	999						2019	00999	1691	12/21/2018	0200.0000	
12/21/2018	20181221002				1		12		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R SRS NRM 12/21/18				0			0.0000	1,037.67	0.00	0.00	0.00
11040444	P/R SRS LNS 12/21/18			0000000126		NYS EMPLOYEES			797.00		12/21/2018	12/21/2018
12/21/2018	999						2019	00999	1691	12/21/2018	0200.0000	
12/21/2018	20181221003				2		12		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R SRS LNS 12/21/18				0			0.0000	797.00	0.00	0.00	0.00
11040445	P/R ERS ARREAR 12/21/18			0000000126		NYS EMPLOYEES			37.88		12/21/2018	12/21/2018
12/21/2018	999						2019	00999	1691	12/21/2018	0200.0000	
12/21/2018	20181221004				3		12		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R ERS ARREAR 12/21/18				0			0.0000	37.88	0.00	0.00	0.00
11040446	P/R RETIREPOLC 12/21/18			0000000693		NYS POLICEMANS & FIREMANS			123.44		12/21/2018	12/21/2018
12/21/2018	999						2019	00999	1693	12/21/2018	0200.0000	
12/21/2018	20181221005				4		12		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R RETIREPOLC 12/21/18				0			0.0000	123.44	0.00	0.00	0.00
11040447	P/R BCBS 12/21/18			0000005003		EXCELLUS HEALTH PLAN - GROUP			2,628.22		12/21/2018	12/21/2018
12/21/2018	999						2019	00010	23854	12/21/2018	0200.0000	
12/21/2018	20181221013				5		12		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R BCBS 12/21/18				0			0.0000	2,628.22	0.00	0.00	0.00
11040448	P/R DUES-PBA 12/21/18			0000312000		POLICE BENEVOLENT ASSOC.			412.50		12/21/2018	12/21/2018
12/21/2018	999						2019	00010	23857	12/21/2018	0200.0000	
12/21/2018	20181221014				6		12		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DUES-PBA 12/21/18				0			0.0000	412.50	0.00	0.00	0.00
11040449	P/R LIFE INSUR 12/21/18			0000029180		PRUDENTIAL INSURANCE CO			12.77		12/21/2018	12/21/2018
12/21/2018	999						2019	00010	23856	12/21/2018	0200.0000	
12/21/2018	20181221017				7		12		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R LIFE INSUR 12/21/18				0			0.0000	12.77	0.00	0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

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Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account		
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.		
11040450	P/R DENTAL-SEI 12/21/18			0000000162					70.42		12/21/2018	12/21/2018	
12/21/2018	999						2019	00010	23851	12/21/2018	0200.0000		
12/21/2018	20181221023				8		12			0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DENTAL-SEI 12/21/18				0				0.0000	70.42	0.00	0.00	0.00
11040451	P/R NYS DEF CP 12/21/18			0000006465					3,418.71		12/21/2018	12/21/2018	
12/21/2018	999						2019	00999	1695	12/21/2018	0200.0000		
12/21/2018	20181221024				9		12			0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R NYS DEF CP 12/21/18				0				0.0000	3,418.71	0.00	0.00	0.00
11040452	P/R DENTAL-STA 12/21/18			0000002551					129.93		12/21/2018	12/21/2018	
12/21/2018	999						2019	00010	23852	12/21/2018	0200.0000		
12/21/2018	20181221026				10		12			0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DENTAL-STA 12/21/18				0				0.0000	129.93	0.00	0.00	0.00
11040453	P/R CITIZN1-DD 12/21/18			DIRDEP					300.00		12/21/2018	12/21/2018	
12/21/2018	999						2019	00999	1696	12/21/2018	0200.0000		
12/21/2018	20181221030				11		12			0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R CITIZN1-DD 12/21/18				0				0.0000	300.00	0.00	0.00	0.00
11040454	P/R AFLAC DIS 12/21/18			0000015087					61.15		12/21/2018	12/21/2018	
12/21/2018	999						2019	00010	23855	12/21/2018	0200.0000		
12/21/2018	20181221034				12		12			0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC DIS 12/21/18				0				0.0000	61.15	0.00	0.00	0.00
11040455	P/R AFLAC CAN 12/21/18			0000015087					254.74		12/21/2018	12/21/2018	
12/21/2018	999						2019	00010	23855	12/21/2018	0200.0000		
12/21/2018	20181221035				13		12			0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC CAN 12/21/18				0				0.0000	254.74	0.00	0.00	0.00
11040456	P/R AFLAC ACCI 12/21/18			0000015087					206.40		12/21/2018	12/21/2018	
12/21/2018	999						2019	00010	23855	12/21/2018	0200.0000		
12/21/2018	20181221036				14		12			0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC ACCI 12/21/18				0				0.0000	206.40	0.00	0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved					
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.
11040457	P/R AFLAC DENT 12/21/18	0000015087	AFLAC NEW YORK	27.78	12/21/2018	12/21/2018					
12/21/2018	999				2019	00010		00010	23855	12/21/2018	0200.0000
12/21/2018	20181221037		15		12					0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	P/R AFLAC DENT 12/21/18		0		0.0000	27.78	0.00	0.00	0.00		
11040458	P/R AFLAC SDIS 12/21/18	0000015087	AFLAC NEW YORK	188.63	12/21/2018	12/21/2018					
12/21/2018	999				2019	00010		00010	23855	12/21/2018	0200.0000
12/21/2018	20181221038		16		12					0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	P/R AFLAC SDIS 12/21/18		0		0.0000	188.63	0.00	0.00	0.00		
11040459	P/R AFLACDEATH 12/21/18	0000015087	AFLAC NEW YORK	1.98	12/21/2018	12/21/2018					
12/21/2018	999				2019	00010		00010	23855	12/21/2018	0200.0000
12/21/2018	20181221039		17		12					0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	P/R AFLACDEATH 12/21/18		0		0.0000	1.98	0.00	0.00	0.00		
11040460	P/R FSA-HEALTH 12/21/18	0000002296	VSL-PRIMEPAY	509.22	12/21/2018	12/21/2018					
12/21/2018	999				2019	00999		00999	1694	12/21/2018	0200.0000
12/21/2018	20181221045		18		12					0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	P/R FSA-HEALTH 12/21/18		0		0.0000	509.22	0.00	0.00	0.00		
11040461	P/R DIR DEP C1 12/21/18	DIRDEP	DIRECT DEPOSIT	2,135.68	12/21/2018	12/21/2018					
12/21/2018	999				2019	00999		00999	1696	12/21/2018	0200.0000
12/21/2018	20181221050		19		12					0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	P/R DIR DEP C1 12/21/18		0		0.0000	2,135.68	0.00	0.00	0.00		
11040462	P/R DIR DEP C2 12/21/18	DIRDEP	DIRECT DEPOSIT	1,930.00	12/21/2018	12/21/2018					
12/21/2018	999				2019	00999		00999	1696	12/21/2018	0200.0000
12/21/2018	20181221051		20		12					0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	P/R DIR DEP C2 12/21/18		0		0.0000	1,930.00	0.00	0.00	0.00		
11040463	P/R DIR DEP S1 12/21/18	DIRDEP	DIRECT DEPOSIT	2,443.40	12/21/2018	12/21/2018					
12/21/2018	999				2019	00999		00999	1696	12/21/2018	0200.0000
12/21/2018	20181221055		21		12					0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	P/R DIR DEP S1 12/21/18		0		0.0000	2,443.40	0.00	0.00	0.00		

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved							
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account		
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.		
11040464	P/R DIR DEP S2 12/21/18			DIRDEP	DIRECT DEPOSIT				2,024.50	12/21/2018	12/21/2018		
12/21/2018	999						2019	00999	1696	12/21/2018	0200.0000		
12/21/2018	20181221056				22		12			0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DIR DEP S2 12/21/18				0				0.0000	2,024.50	0.00	0.00	0.00
11040465	P/R AFLAC SICK 12/21/18			0000015087	AFLAC NEW YORK				89.90	12/21/2018	12/21/2018		
12/21/2018	999						2019	00010	23855	12/21/2018	0200.0000		
12/21/2018	20181221057				23		12			0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC SICK 12/21/18				0				0.0000	89.90	0.00	0.00	0.00
11040466	P/R AFLAC LIFE 12/21/18			0000015087	AFLAC NEW YORK				86.57	12/21/2018	12/21/2018		
12/21/2018	999						2019	00010	23855	12/21/2018	0200.0000		
12/21/2018	20181221058				24		12			0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC LIFE 12/21/18				0				0.0000	86.57	0.00	0.00	0.00
11040467	P/R ST.LAWRENC 12/21/18			0000003487	ST. LAWRENCE COUNTY SHERIFF				148.26	12/21/2018	12/21/2018		
12/21/2018	999						2019	00010	23853	12/21/2018	0200.0000		
12/21/2018	20181221063				25		12			0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R ST.LAWRENC 12/21/18				0				0.0000	148.26	0.00	0.00	0.00
11040468	P/R DANNEMORA 12/21/18			DIRDEP	DIRECT DEPOSIT				212.00	12/21/2018	12/21/2018		
12/21/2018	999						2019	00999	1696	12/21/2018	0200.0000		
12/21/2018	20181221064				26		12			0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DANNEMORA 12/21/18				0				0.0000	212.00	0.00	0.00	0.00
11040469	P/R FEDERAL TAX 12/21/18			FEDFIC	COMMUNITY BANK EFT				9,605.42	12/21/2018	12/21/2018		
12/21/2018	999						2019	00999	1697	12/21/2018	0200.0000		
12/21/2018	20181221FED				27		12			0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R FEDERAL TAX 12/21/18				0				0.0000	9,605.42	0.00	0.00	0.00
11040470	P/R FICA TAX 12/21/18			FEDFIC	COMMUNITY BANK EFT				12,345.12	12/21/2018	12/21/2018		
12/21/2018	999						2019	00999	1697	12/21/2018	0200.0000		
12/21/2018	20181221FICA				28		12			0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R FICA TAX 12/21/18				0				0.0000	12,345.12	0.00	0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved							
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account	
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Disc. %	Disc. Amt.		
11040471	P/R MEDICARE TAX 12/21/18	FEDFIC	COMMUNITY BANK EFT	2,887.16	12/21/2018	12/21/2018							
12/21/2018	999						2019	00999	1697	12/21/2018		0200.0000	
12/21/2018	20181221MEDC				29		12			0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R MEDICARE TAX 12/21/18				0				0.0000	2,887.16	0.00	0.00	0.00
11040472	P/R STATE TAX 12/21/18	0000000482	NYS TAX DEPARTMENT	4,449.00	12/21/2018	12/21/2018							
12/21/2018	999						2019	00999	1692	12/21/2018		0200.0000	
12/21/2018	20181221STA				30		12			0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R STATE TAX 12/21/18				0				0.0000	4,449.00	0.00	0.00	0.00
11040473	POTABLE DRINKING WATER-WWTP	0000004937	CRYSTAL ROCK LLC	37.38	01/14/2019	01/14/2019							
12/26/2018		47444	06/21/2018				2019	00001				0200.0000	
12/11/2018	17711568121118	M			1					0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	POTABLE DRINKING WATER-WWTP			M	0				0.0000	37.38	0.00	0.00	0.00
11040474	NAME TAGS. RIP PROOF PAPER. FOLDERS	0000000025	W.B. MASON CO., INC.	89.77	01/14/2019	01/14/2019							
12/26/2018		48090	12/14/2018				2019	00001				0200.0000	
12/17/2018	I61767045				1					0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	NAME TAGS, RIP PROOF PAPER, FOLDERS				0				0.0000	89.77	0.00	0.00	0.00
11040475	SEWER MAIN PROJECT 4184	0000002086	AES NORTHEAST	2,897.89	01/14/2019	01/14/2019							
12/26/2018		41660	01/20/2014				2019	00009				0200.0000	
12/16/2018	11863	M			1					0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
3	CONSTRUCTION PHASE-4184			M	0				0.0000	2,897.89	0.00	0.00	0.00
11040476	I&I STUDY PROJ 4693	0000002086	AES NORTHEAST	24,930.00	01/14/2019	01/14/2019							
12/26/2018		47800	07/13/2018				2019	00009				0200.0000	
12/16/2018	11862	M			1					0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	I&I STUDY PROJ 4693			M	0				0.0000	24,930.00	0.00	0.00	0.00
11040477	POSTAGE MACHINE LEASE	0000000147	PITNEY-BOWES GLOBAL	158.34	01/14/2019	01/14/2019							
12/26/2018		47635	06/29/2018				2019	00001				0200.0000	
12/14/2018	3307721345				1					0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	POSTAGE MACHINE LEASE				1				158.3400	158.34	0.00	0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved					
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.
11040478	BATHROOM SPRAY REFILLS	0000000172	SHARE CORPORATION	356.20	01/14/2019						
12/26/2018				48057	12/12/2018		2019	00001			0200.0000
12/14/2018	76697							1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	BATHROOM SPRAY REFILLS		0		0.0000	356.20	0.00	0.00	0.00		
11040479	COPIER LEASE-PD	0000001572	SYMQUEST GROUP, INC.	80.22	01/14/2019						
12/26/2018				47626	06/19/2018		2019	00001			0200.0000
12/22/2018	32848999			M				1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	COPIER LEASE-PD	M	0		0.0000	80.22	0.00	0.00	0.00		
11040480	REMOTE NET METERING	0000003068	BARTON & LOGUIDICE, D.P.C.	3,801.50	01/14/2019						
12/26/2018				46529	10/11/2017		2019	00001			0200.0000
12/14/2018	100900			M				1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	REMOTE NET METERING	M	0		0.0000	3,801.50	0.00	0.00	0.00		
11040481	SERVICE HEATING SYSTEM @ 3 MAIN	0000004045	J HOGAN REFRIGERATION & MECHANICAL, INC.	6,352.29	01/14/2019						
12/26/2018				48049	12/18/2018		2019	00001			0200.0000
11/28/2018	43516							1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	SERVICE HEATING SYSTEM @ 3 MAIN		0		0.0000	6,352.29	0.00	0.00	0.00		
11040482	AIR HANDLER & BOILER. FILTER REPLACEMENT	0000004045	J HOGAN REFRIGERATION & MECHANICAL, INC.	355.70	01/14/2019						
12/26/2018				48050	12/17/2018		2019	00001			0200.0000
								1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	AIR HANDLER & BOILER, FILTER REPLACEMENT		0		0.0000	355.70	0.00	0.00	0.00		
11040483	SERVICE CHARGE FOR COPIERS-WWTP. GARAG	0000001572	SYMQUEST GROUP, INC.	37.31	01/14/2019						
12/26/2018				48098	12/14/2018		2019	00001			0200.0000
12/14/2018	1331139			M				1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	SERVICE CHARGE FOR COPIERS-WWTP, GARAGE	M	0		0.0000	37.31	0.00	0.00	0.00		
11040484	PROPANE FOR TREATMENT PLANT	0000002229	AMERIGAS PROPANE LP	523.47	01/14/2019						
12/26/2018				48097	12/14/2018		2019	00001			0200.0000
								1		0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Disc. %	Non Disc.	Disc. Amt.
11040484	PROPANE FOR TREATMENT PLANT	0000002229	AMERIGAS PROPANE LP									
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	PROPANE FOR TREATMENT PLANT				0			0.0000	523.47	0.00	0.00	0.00
11040485	SERVICE HRT TOOLS	0000005017	GARRISON FIRE & RESCUE CORP						1,417.10		01/14/2019	
12/26/2018		45052	12/14/2018				2019	00001				0200.0000
11/30/2018	60089							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	SERVICE HRT TOOLS				0			0.0000	1,417.10	0.00	0.00	0.00
11040486	REPEATER FOR MT PISGAH	0000000092	CHAMPLAIN COMMUNICATIONS INC.						6,727.74		01/14/2019	
12/26/2018		45042	09/20/2018				2019	00001				0200.0000
12/18/2018	1849							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	REPEATER FOR MT PISGAH				0			0.0000	6,727.74	0.00	0.00	0.00
11040487	CHRISTMAS TREE FOR BERKLEY	0000003509	MOODY TREE FARM						250.00		01/14/2019	
12/26/2018		48053	12/12/2018				2019	00001				0200.0000
11/28/2018	001							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	CHRISTMAS TREE FOR BERKLEY				0			0.0000	250.00	0.00	0.00	0.00
11040488	MOBILE PLAN CENTER. PLAN CLAMPS	0000003506	COMMERCIAL SALES						678.00		01/14/2019	
12/26/2018		48071	12/14/2018				2019	00001				0200.0000
12/14/2018	255591-3							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	MOBILE PLAN CENTER, PLAN CLAMPS				0			0.0000	678.00	0.00	0.00	0.00
11040489	MUD FLAP REFLECTOR STRAPS	0000002347	CLARK'S TRUCK CENTER						59.85		01/14/2019	
12/26/2018		47952	12/10/2018				2019	00001				0200.0000
								1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	MUD FLAP REFLECTOR STRAPS				0			0.0000	59.85	0.00	0.00	0.00
11040490	FISHER QUADRANT ASSEMBLY	0000003284	EVERGREEN AUTO CENTER						794.57		01/14/2019	
12/26/2018		47953	12/17/2018				2019	00001				0200.0000
12/17/2018	2668							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	FISHER QUADRANT ASSEMBLY				0			0.0000	794.57	0.00	0.00	0.00
11040491	STANDARD BATTERY PACK	0000003406	AXON ENTERPRISE, INC.						124.00		01/14/2019	
12/26/2018		47230	09/07/2018				2019	00001				0200.0000

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved								
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Disc. %	Non Disc.	Cash Account	Disc. Amt.
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.		Disc. %				
11040491	STANDARD BATTERY PACK	0000003406	AXON ENTERPRISE, INC.											
							1			0.00		0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	STANDARD BATTERY PACK				0				0.0000	124.00	0.00	0.00		0.00
11040492	STATE INSPECTIONS FOR LIGHT DUTY VEHICLE	0000005165	CARCUZZI CAR CARE CENTER							21.00			01/14/2019	
12/26/2018		46902	06/01/2018				2019	00001						0200.0000
12/18/2018	72342	M					1				0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	STATE INSPECTIONS FOR LIGHT DUTY VEHICLES			M	0				0.0000	21.00	0.00	0.00		0.00
11040493	RAW WATER & WATER QUALITY TESTING-WTP	0000003167	BENEFACOR FUNDING CORP							120.00			01/14/2019	
12/26/2018		44220	06/01/2016				2019	00001						0200.0000
							1				0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	RAW WATER & WATER QUALITY TESTING-WTP				0				0.0000	120.00	0.00	0.00		0.00
11040494	SPDES REQUIRED LAB TESTING-WWTP	0000003167	BENEFACOR FUNDING CORP							500.00			01/14/2019	
12/26/2018		45848	06/01/2017				2019	00001						0200.0000
							1				0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	SPDES REQUIRED LAB TESTING-WWTP				0				0.0000	500.00	0.00	0.00		0.00
11040495	GLOVES. JACKET. BRACKET	0000005321	GRAINGER, INC.							207.50			01/14/2019	
12/26/2018		48059	12/10/2018				2019	00001						0200.0000
12/11/2018	9028654912						1				0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	GLOVES, JACKET, BRACKET				0				0.0000	207.50	0.00	0.00		0.00
11040496	SODIUM ALUMINATE FOR TREATMENT OF PHOS	0000004062	HOLLAND COMPANY, INC,							3,776.82			01/14/2019	
12/26/2018		45846	06/01/2017				2019	00001						0200.0000
12/12/2018	14792						1				0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	SODIUM ALUMINATE FOR TREATMENT OF PHOSPHORUS-WWTP				0				0.0000	3,776.82	0.00	0.00		0.00
11040497	FRONT WINDSHIELD	0000004821	VANTAGE EQUIPMENT LLC							1,079.51			01/14/2019	
12/26/2018		47432	11/05/2018				2019	00001						0200.0000
							1				0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	FRONT WINDSHIELD				0				0.0000	1,079.51	0.00	0.00		0.00
11040498	BLANKET PO FOR FIRST AID SUPPLIES	0000000207	CINTAS CORPORATION							36.36			01/14/2019	

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Check No.	Disc. %	Non Disc.	Disc. Amt.
11040498	BLANKET PO FOR FIRST AID SUPPLIES	000000207	CINTAS CORPORATION									
12/26/2018				46903	06/01/2018		2019	00001				0200.0000
12/12/2018	5012488641							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	BLANKET PO FOR FIRST AID SUPPLIES				0			0.0000	36.36	0.00	0.00	0.00
11040499	DUES. CONFERENCE-GIBLIN	0000001521	NORTHERN ADK CEO ASSOC									
12/26/2018				48089	12/10/2018		2019	00001				0200.0000
12/10/2018	CE1000411-2019							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	DUES, CONFERENCE-GIBLIN				0			0.0000	305.00	0.00	0.00	0.00
11040500	W-2'S, 1099 FORMS	0000000621	NOTABLE CORPORATION									
12/26/2018				48091	12/10/2018		2019	00001				0200.0000
12/10/2018	215595							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	W-2'S, 1099 FORMS				0			0.0000	153.94	0.00	0.00	0.00
11040501	MONITORING STORM WATER PER NYSDEC	0000001860	NORTH WOODS ENGINEERING									
12/26/2018				45690	04/24/2017		2019	00001				0200.0000
12/12/2018	17025-06			M				1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	MONITORING STORM WATER PER NYSDEC			M	0			0.0000	562.50	0.00	0.00	0.00
11040502	GOLD FOIL & SEALS	0000000025	W.B. MASON CO., INC.									
12/26/2018				48085	12/07/2018		2019	00001				0200.0000
12/10/2018	I61535677							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	GOLD FOIL & SEALS				0			0.0000	3.99	0.00	0.00	0.00
11040503	ANSWERING MACHINE. CLAMPS. WALL RACK. HI	0000000025	W.B. MASON CO., INC.									
12/26/2018				48061	12/07/2018		2019	00001				0200.0000
12/10/2018	I61523878							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	ANSWERING MACHINE, CLAMPS, WALL RACK, HEAD SETS				0			0.0000	304.29	0.00	0.00	0.00
11040504	TIME CARDS	0000001149	COMPASS PRINTING PLUS									
12/26/2018				48088	12/12/2018		2019	00001				0200.0000
12/12/2018	51850							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	TIME CARDS				0			0.0000	112.50	0.00	0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Disc. %	Disc. Amt.	
11040505	FIRE TRUCK BOND AND INTEREST PAYMENTS	0000001652	CHASE BANK NYC	1,746.88	12/26/2018							
12/26/2018					06/01/2018		2019	00888	167	12/26/2018		0200.0000
12/24/2018	53593550						12			0.00	0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
2	FIRE TRUCK BOND AND INTEREST PAYMENTS			0			0.0000	1,746.88	0.00	0.00	0.00	
11040506	WWTP INTERNET 202-805619901-001	0000000961	TIME WARNER CABLE	55.00	12/26/2018							
12/26/2018					06/01/2018		2019	00001	22580	12/26/2018		0200.0000
12/13/2018	805619901121318						12			0.00	0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
1	WWTP INTERNET 202-805619901-001			0			0.0000	55.00	0.00	0.00	0.00	
11040507	TELEPHONE CHARGES	0000005308	MAGNA5	2,178.02	12/26/2018							
12/26/2018					12/10/2018		2019	00001	22581	12/26/2018		0200.0000
12/10/2018	5075153						12			0.00	0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
1	TELEPHONE CHARGES			0			0.0000	2,178.02	0.00	0.00	0.00	
11040508	WEBSITE HOSTING & SERVER MAINTENANCE FC	0000003444	JESSE JAMES CREATIVE, INC.	3,150.00	01/14/2019							
12/26/2018					12/12/2018		2019	00001				0200.0000
11/29/2018	JJ6012						1			0.00	0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
1	WEBSITE HOSTING & SERVER MAINTENANCE FOR 1 YR			0			0.0000	3,150.00	0.00	0.00	0.00	
11040509	REPLACE CIRCUIT BOARD ON BAY DOOR	0000000141	OVERHEAD DOOR CO	110.00	01/14/2019							
12/26/2018					12/12/2018		2019	00001				0200.0000
11/21/2018	10252						1			0.00	0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
1	REPLACE CIRCUIT BOARD ON BAY DOOR			0			0.0000	110.00	0.00	0.00	0.00	
11040510	RESTOCK MEDICAL KIT	0000000207	CINTAS CORPORATION	50.17	01/14/2019							
12/26/2018					12/10/2018		2019	00001				0200.0000
12/12/2018	5012488640						1			0.00	0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
1	RESTOCK MEDICAL KIT			0			0.0000	50.17	0.00	0.00	0.00	
11040511	MEMBERSHIP DUES	0000002537	SKI AREAS OF NEW YORK, INC.	50.00	01/14/2019							
12/26/2018					12/10/2018		2019	00001				0200.0000
12/10/2018	001						1			0.00	0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.	
1	MEMBERSHIP DUES			0			0.0000	50.00	0.00	0.00	0.00	

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved					
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.
11040512	OFFICE SUPPLIES. LOG BOOKS	FOSTER	FOSTER, GARRETT	127.53	01/14/2019						
12/26/2018		46941	12/10/2018		2019	00001					
12/09/2018	472526	M			1						
						0.00	0.00			0.00	
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	OFFICE SUPPLIES, LOG BOOKS	M	0		0.0000	127.53	0.00	0.00	0.00		
11040513	COPY PAPER	0000000902	SARANAC LAKE CENTRAL SCHOOL DISTRICT	105.60	01/14/2019						
12/26/2018		48087	12/06/2018		2019	00001					
12/06/2018	014-19A				1						
						0.00	0.00		0.00		
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	COPY PAPER		0		0.0000	105.60	0.00	0.00	0.00		
11040514	DENTAL INS DECEMBER 2018	0000000162	SERVICE EMPLOYEES BENEFIT FUND	903.27	01/14/2019						
12/26/2018		48086	12/01/2018		2019	00001					
12/20/2018	DECEMBER				1						
						0.00	0.00		0.00		
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	DENTAL INS DECEMBER 2018		0		0.0000	903.27	0.00	0.00	0.00		
11040515	DRI WEBSITE PAGE	0000003444	JESSE JAMES CREATIVE, INC.	1,200.00	01/14/2019						
12/26/2018		47916	12/13/2018		2019	00001					
11/28/2018	JJ6001				1						
						0.00	0.00		0.00		
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	DRI WEBSITE PAGE		0		0.0000	1,200.00	0.00	0.00	0.00		
11040516	DISPOSAL OF GRIT. SCREENINGS & SLUDGE	0000000628	FR. COUNTY SOLID WASTE	972.00	01/14/2019						
12/26/2018		47445	06/21/2018		2019	00001					
					1						
						0.00	0.00		0.00		
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	DISPOSAL OF GRIT, SCREENINGS & SLUDGE		0		0.0000	972.00	0.00	0.00	0.00		
11040517	LANDFILL ATHLETIC FIELD DESIGN	0000003068	BARTON & LOGUIDICE, D.P.C.	483.57	01/14/2019						
12/26/2018		44096	05/31/2016		2019	00001					
12/06/2018	100681	M			1						
						0.00	0.00		0.00		
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	LANDFILL ATHLETIC FIELD DESIGN	M	0		0.0000	483.57	0.00	0.00	0.00		
11040518	GLOVES. AMMONIA. CAPS	0000001198	USA BLUE BOOK	366.29	01/14/2019						
12/27/2018		47823	12/10/2018		2019	00001					
					1						
						0.00	0.00		0.00		
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	GLOVES, AMMONIA, CAPS		0		0.0000	366.29	0.00	0.00	0.00		

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved					
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.
11040519	LABEL TAPE, INDEX CARDS	0000000025	W.B. MASON CO., INC.	18.97	01/14/2019						
12/27/2018			48092	12/14/2018			2019	00001			0200.0000
								1		0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	LABEL TAPE, INDEX CARDS			0			0.0000	18.97	0.00	0.00	0.00
11040520	GREASE CONTROL	0000001198	USA BLUE BOOK	869.03	01/14/2019						
12/27/2018			48051	12/17/2018			2019	00001			0200.0000
12/17/2018	764228							1		0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	GREASE CONTROL			0			0.0000	869.03	0.00	0.00	0.00
11040521	ANNUAL DUES AND CONFERENCE 03/03-07/19	0000001521	NORTHERN ADK CEO ASSOC	305.00	01/14/2019						
12/27/2018			48070	12/12/2018			2019	00001			0200.0000
12/04/2018	002							1		0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	ANNUAL DUES AND CONFERENCE 03/03-07/19			0			0.0000	305.00	0.00	0.00	0.00
11040522	2018-19 IT SERVICES	0000003381	ADIRONDACK TECHS. LLC	424.96	01/14/2019						
12/27/2018			47715	08/01/2018			2019	00001			0200.0000
12/12/2018	2896							1		0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	2018-19 IT SERVICES			0			0.0000	424.96	0.00	0.00	0.00
11040523	CLIP BOARDS, PAPER TOWELS, BINDER, DIVIDE	0000000025	W.B. MASON CO., INC.	391.65	01/14/2019						
12/27/2018			47521	11/30/2018			2019	00001			0200.0000
12/03/2018	I61283805							1		0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	CLIP BOARDS, PAPER TOWELS, BINDER, DIVIDERS			0			0.0000	391.65	0.00	0.00	0.00
11040524	CALENDAR	0000000025	W.B. MASON CO., INC.	6.59	01/14/2019						
12/27/2018			48074	12/05/2018			2019	00001			0200.0000
12/06/2018	I61448748							1		0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	CALENDAR			0			0.0000	6.59	0.00	0.00	0.00
11040525	D BATTERIES	0000000025	W.B. MASON CO., INC.	22.29	01/14/2019						
12/27/2018			48075	12/05/2018			2019	00001			0200.0000
12/06/2018	I61448959							1		0.00	0.00
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	D BATTERIES			0			0.0000	22.29	0.00	0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Check Date	Disc. %	Non Disc.	Disc. Amt.
11040526	TONER. INK FOR PRINTERS	0000000025	W.B. MASON CO., INC.	335.96	01/14/2019							
12/27/2018				48077	12/05/2018		2019	00001				0200.0000
12/06/2018	I61449046							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	TONER, INK FOR PRINTERS				0			0.0000	335.96	0.00	0.00	0.00
11040527	WEAR PLATES. CHEVRON CHAINS. SHEILDS, GU	0000002347	CLARK'S TRUCK CENTER	2,310.85	01/14/2019							
12/27/2018				47947	12/03/2018		2019	00001				0200.0000
12/10/2018	157048							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	WEAR PLATES, CHEVRON CHAINS, SHEILDS, GUARDS				0			0.0000	2,310.85	0.00	0.00	0.00
11040528	COATS	0000004852	TAYLOR RENTAL CENTER	1,311.07	01/14/2019							
12/27/2018				47528	11/28/2018		2019	00001				0200.0000
12/08/2018	254946-2							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	COATS				0			0.0000	1,311.07	0.00	0.00	0.00
11040529	ANNUAL DUES-BENSON. SAYLES. SWEENEY. OK	0000000569	NYS GFOA	620.00	01/14/2019							
12/27/2018				48082	12/06/2018		2019	00001				0200.0000
								1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	ANNUAL DUES-BENSON, SAYLES, SWEENEY, OKELLY				0			0.0000	620.00	0.00	0.00	0.00
11040530	ENVELOPES. LETTERHEAD. NAME CARDS	0000001149	COMPASS PRINTING PLUS	543.00	01/14/2019							
12/27/2018				48096	12/13/2018		2019	00001				0200.0000
								1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	ENVELOPES. LETTERHEAD, NAME CARDS				0			0.0000	543.00	0.00	0.00	0.00
11040531	INS PREMIUM JANUARY 2019	0000005003	EXCELLUS HEALTH PLAN - GROUP	45,242.61	01/14/2019							
12/27/2018				48095	12/10/2018		2019	00001				0200.0000
12/10/2018	19840289							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	INS PREMIUM JANUARY 2019				0			0.0000	45,242.61	0.00	0.00	0.00
11040532	PRESCRIPTION INS JANUARY 2019-65+	0000003159	EXCELLUS HEALTH PLAN	2,528.64	01/14/2019							
12/27/2018				48094	12/10/2018		2019	00001				0200.0000
12/10/2018	19862335							1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	PRESCRIPTION INS JANUARY 2019-65+				0			0.0000	2,528.64	0.00	0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Check Date	Disc. %		Disc. Amt.
11040533	HEALTH INS PREMIUM JANUARY 2019-65+	0000004085	EXCELLUS BLUECROSS BLUESHIELD	1,632.33	01/14/2019							
12/27/2018		48093	12/10/2018	2019 00001		0200.0000						
12/10/2018	19861701			1		0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	HEALTH INS PREMIUM JANUARY 2019-65+		0		0.0000	1,632.33	0.00	0.00	0.00			0.00
11040534	ELECTRIC CHARGES 2018-2019	0000000134	NATIONAL GRID	9,841.07	01/03/2019							
01/03/2019		47602	06/13/2018	2019 00001		0200.0000						
				1		0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
5	POLICE DEPT		0		0.0000	63.21	0.00	0.00	0.00			0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
9	STREET LIGHTS		0		0.0000	9,770.11	0.00	0.00	0.00			0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
11	PARKS		0		0.0000	7.75	0.00	0.00	0.00			0.00
11040535	2019 TOWN & COUNTY TAXES	0000005075	TOWN OF ST. ARMAND	1,356.46	01/14/2019							
01/03/2019		48152	01/02/2019	2019 00001		0200.0000						
				1		0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	2019 TOWN & COUNTY TAXES		0		0.0000	1,356.46	0.00	0.00	0.00			0.00
11040536	GAS CHARGES	0000004979	WEX BANK	3,483.67	01/14/2019							
01/03/2019		48154	01/01/2019	2019 00001		0200.0000						
12/31/2018	57247515			1		0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	GAS CHARGES		0		0.0000	3,483.67	0.00	0.00	0.00			0.00
11040537	OPERATOR CABLE, BRACKET, FIX DOOR	0000000141	OVERHEAD DOOR CO	296.00	01/14/2019							
01/03/2019		48110	01/02/2019	2019 00001		0200.0000						
12/26/2018	10332			1		0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	OPERATOR CABLE, BRACKET, FIX DOOR		0		0.0000	296.00	0.00	0.00	0.00			0.00
11040538	RACK CARDS	0000002115	ID VILLE	542.42	01/14/2019							
01/03/2019		46942	12/10/2018	2019 00001		0200.0000						
12/21/2018	3449505			1		0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	RACK CARDS		0		0.0000	542.42	0.00	0.00	0.00			0.00
11040539	BOLTS, NUTS, WASHERS	0000000901	MIDSTATE INDUSTRIAL SUPPLY	540.32	01/14/2019							
01/03/2019		47956	12/18/2018	2019 00001		0200.0000						

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved							
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account		
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.		
11040539	BOLTS, NUTS, WASHERS	0000000901	MIDSTATE INDUSTRIAL SUPPLY										
12/19/2018	18-56655						1			0.00	0.00		
											0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	BOLTS, NUTS, WASHERS				0				0.0000	540.32	0.00	0.00	0.00
11040540	FILL PROPANE TANKS	0000000290	HYDE FUEL CO., INC.										
01/03/2019		47965	12/21/2018				2019	00001		25.73	01/14/2019		
12/21/2018	138719						1				0.00	0.00	0.00
													0200.0000
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	FILL PROPANE TANKS				0				0.0000	25.73	0.00	0.00	0.00
11040541	P/R SRS NRM 1/04/19	0000000126	NYS EMPLOYEES										
01/04/2019	999						2019	00999		1,153.58	01/04/2019	01/04/2019	01/04/2019
01/04/2019	20190104002			1			1			1698	0.00	0.00	0.00
													0200.0000
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R SRS NRM 1/04/19				0				0.0000	1,153.58	0.00	0.00	0.00
11040542	P/R SRS LNS 1/04/19	0000000126	NYS EMPLOYEES										
01/04/2019	999						2019	00999		897.00	01/04/2019	01/04/2019	01/04/2019
01/04/2019	20190104003			2			1			1698	0.00	0.00	0.00
													0200.0000
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R SRS LNS 1/04/19				0				0.0000	897.00	0.00	0.00	0.00
11040543	P/R ERS ARREAR 1/04/19	0000000126	NYS EMPLOYEES										
01/04/2019	999						2019	00999		37.88	01/04/2019	01/04/2019	01/04/2019
01/04/2019	20190104004			3			1			1698	0.00	0.00	0.00
													0200.0000
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R ERS ARREAR 1/04/19				0				0.0000	37.88	0.00	0.00	0.00
11040544	P/R RETIREPOLC 1/04/19	0000000693	NYS POLICEMANS & FIREMANS										
01/04/2019	999						2019	00999		110.19	01/04/2019	01/04/2019	01/04/2019
01/04/2019	20190104005			4			1			1700	0.00	0.00	0.00
													0200.0000
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R RETIREPOLC 1/04/19				0				0.0000	110.19	0.00	0.00	0.00
11040545	P/R BCBS 1/04/19	0000005003	EXCELLUS HEALTH PLAN - GROUP										
01/04/2019	999						2019	00010		2,855.73	01/04/2019	01/04/2019	01/04/2019
01/04/2019	20190104013			5			1			23861	0.00	0.00	0.00
													0200.0000
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R BCBS 1/04/19				0				0.0000	2,855.73	0.00	0.00	0.00
11040546	P/R DUES-PBA 1/04/19	0000312000	POLICE BENEVOLENT ASSOC.										
										412.50	01/04/2019	01/04/2019	01/04/2019

VILLAGE OF SARANAC LAKE

Voucher Detail Report

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Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account		
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.		
11040546	P/R DUES-PBA 1/04/19			0000312000		POLICE BENEVOLENT ASSOC.							
01/04/2019	999						2019	00010	23864	01/04/2019	0200.0000		
01/04/2019	20190104014				6			1		0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DUES-PBA 1/04/19				0				0.0000	412.50	0.00	0.00	0.00
11040547	P/R LIFE INSUR 1/04/19			0000029180		PRUDENTIAL INSURANCE CO			12.77		01/04/2019	01/04/2019	
01/04/2019	999						2019	00010	23863	01/04/2019	0200.0000		
01/04/2019	20190104017				7			1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R LIFE INSUR 1/04/19				0				0.0000	12.77	0.00	0.00	0.00
11040548	P/R DENTAL-SEI 1/04/19			0000000162		SERVICE EMPLOYEES BENEFIT FUND			54.98		01/04/2019	01/04/2019	
01/04/2019	999						2019	00010	23858	01/04/2019	0200.0000		
01/04/2019	20190104023				8			1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DENTAL-SEI 1/04/19				0				0.0000	54.98	0.00	0.00	0.00
11040549	P/R NYS DEF CP 1/04/19			0000006465		NYS DEFERRED COMPENSATION COMPENSATION PLAN #6465			3,579.49		01/04/2019	01/04/2019	
01/04/2019	999						2019	00999	1702	01/04/2019	0200.0000		
01/04/2019	20190104024				9			1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R NYS DEF CP 1/04/19				0				0.0000	3,579.49	0.00	0.00	0.00
11040550	P/R DENTAL-STA 1/04/19			0000002551		STANDARD INSURANCE CO OF NEW YORK			139.65		01/04/2019	01/04/2019	
01/04/2019	999						2019	00010	23859	01/04/2019	0200.0000		
01/04/2019	20190104026				10			1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DENTAL-STA 1/04/19				0				0.0000	139.65	0.00	0.00	0.00
11040551	P/R CITIZN1-DD 1/04/19			DIRDEP		DIRECT DEPOSIT			300.00		01/04/2019	01/04/2019	
01/04/2019	999						2019	00999	1703	01/04/2019	0200.0000		
01/04/2019	20190104030				11			1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R CITIZN1-DD 1/04/19				0				0.0000	300.00	0.00	0.00	0.00
11040552	P/R AFLAC DIS 1/04/19			0000015087		AFLAC NEW YORK			61.15		01/04/2019	01/04/2019	
01/04/2019	999						2019	00010	23862	01/04/2019	0200.0000		
01/04/2019	20190104034				12			1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC DIS 1/04/19				0				0.0000	61.15	0.00	0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved							
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account		
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Check Date	Disc. %	Disc. Amt.		
										Non Disc.			
11040553	P/R AFLAC CAN 1/04/19			0000015087	AFLAC NEW YORK				254.74	01/04/2019	01/04/2019		
01/04/2019	999						2019	00010	23862	01/04/2019	0200.0000		
01/04/2019	20190104035				13			1		0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC CAN 1/04/19				0				0.0000	254.74	0.00	0.00	0.00
11040554	P/R AFLAC ACCI 1/04/19			0000015087	AFLAC NEW YORK				206.40	01/04/2019	01/04/2019		
01/04/2019	999						2019	00010	23862	01/04/2019	0200.0000		
01/04/2019	20190104036				14			1		0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC ACCI 1/04/19				0				0.0000	206.40	0.00	0.00	0.00
11040555	P/R AFLAC DENT 1/04/19			0000015087	AFLAC NEW YORK				27.78	01/04/2019	01/04/2019		
01/04/2019	999						2019	00010	23862	01/04/2019	0200.0000		
01/04/2019	20190104037				15			1		0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC DENT 1/04/19				0				0.0000	27.78	0.00	0.00	0.00
11040556	P/R AFLAC SDIS 1/04/19			0000015087	AFLAC NEW YORK				188.63	01/04/2019	01/04/2019		
01/04/2019	999						2019	00010	23862	01/04/2019	0200.0000		
01/04/2019	20190104038				16			1		0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC SDIS 1/04/19				0				0.0000	188.63	0.00	0.00	0.00
11040557	P/R AFLACDEATH 1/04/19			0000015087	AFLAC NEW YORK				1.98	01/04/2019	01/04/2019		
01/04/2019	999						2019	00010	23862	01/04/2019	0200.0000		
01/04/2019	20190104039				17			1		0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLACDEATH 1/04/19				0				0.0000	1.98	0.00	0.00	0.00
11040558	P/R FSA-HEALTH 1/04/19			0000002296	VSL-PRIMEPAY				512.28	01/04/2019	01/04/2019		
01/04/2019	999						2019	00999	1701	01/04/2019	0200.0000		
01/04/2019	20190104045				18			1		0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R FSA-HEALTH 1/04/19				0				0.0000	512.28	0.00	0.00	0.00
11040559	P/R DIR DEP C1 1/04/19			DIRDEP	DIRECT DEPOSIT				2,135.68	01/04/2019	01/04/2019		
01/04/2019	999						2019	00999	1703	01/04/2019	0200.0000		
01/04/2019	20190104050				19			1		0.00	0.00		
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DIR DEP C1 1/04/19				0				0.0000	2,135.68	0.00	0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Check Date	Disc. %		Disc. Amt.
11040560	P/R DIR DEP C2 1/04/19			DIRDEP	DIRECT DEPOSIT				1,930.00		01/04/2019	01/04/2019
01/04/2019	999						2019	00999	1703	01/04/2019		0200.0000
01/04/2019	20190104051				20			1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DIR DEP C2 1/04/19				0			0.0000	1,930.00	0.00	0.00	0.00
11040561	P/R DIR DEP S1 1/04/19			DIRDEP	DIRECT DEPOSIT				2,443.40		01/04/2019	01/04/2019
01/04/2019	999						2019	00999	1703	01/04/2019		0200.0000
01/04/2019	20190104055				21			1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DIR DEP S1 1/04/19				0			0.0000	2,443.40	0.00	0.00	0.00
11040562	P/R DIR DEP S2 1/04/19			DIRDEP	DIRECT DEPOSIT				2,024.50		01/04/2019	01/04/2019
01/04/2019	999						2019	00999	1703	01/04/2019		0200.0000
01/04/2019	20190104056				22			1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DIR DEP S2 1/04/19				0			0.0000	2,024.50	0.00	0.00	0.00
11040563	P/R AFLAC SICK 1/04/19			0000015087	AFLAC NEW YORK				89.90		01/04/2019	01/04/2019
01/04/2019	999						2019	00010	23862	01/04/2019		0200.0000
01/04/2019	20190104057				23			1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC SICK 1/04/19				0			0.0000	89.90	0.00	0.00	0.00
11040564	P/R AFLAC LIFE 1/04/19			0000015087	AFLAC NEW YORK				86.57		01/04/2019	01/04/2019
01/04/2019	999						2019	00010	23862	01/04/2019		0200.0000
01/04/2019	20190104058				24			1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R AFLAC LIFE 1/04/19				0			0.0000	86.57	0.00	0.00	0.00
11040565	P/R ST.LAWRENC 1/04/19			0000003487	ST. LAWRENCE COUNTY SHERIFF				141.03		01/04/2019	01/04/2019
01/04/2019	999						2019	00010	23860	01/04/2019		0200.0000
01/04/2019	20190104063				25			1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R ST.LAWRENC 1/04/19				0			0.0000	141.03	0.00	0.00	0.00
11040566	P/R DANNEMORA 1/04/19			DIRDEP	DIRECT DEPOSIT				212.00		01/04/2019	01/04/2019
01/04/2019	999						2019	00999	1703	01/04/2019		0200.0000
01/04/2019	20190104064				26			1		0.00	0.00	0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	P/R DANNEMORA 1/04/19				0			0.0000	212.00	0.00	0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Disc. %	Non Disc.	Disc. Amt.
11040567	P/R FEDERAL TAX 1/04/19	FEDFIC	COMMUNITY BANK EFT	10,455.01	01/04/2019	01/04/2019						
01/04/2019	999				2019	00999		1704	01/04/2019		0200.0000	
01/04/2019	20190104FED		27		1				0.00		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	P/R FEDERAL TAX 1/04/19		0		0.0000	10,455.01	0.00	0.00	0.00			0.00
11040568	P/R FICA TAX 1/04/19	FEDFIC	COMMUNITY BANK EFT	13,309.74	01/04/2019	01/04/2019						
01/04/2019	999				2019	00999		1704	01/04/2019		0200.0000	
01/04/2019	20190104FICA		28		1				0.00		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	P/R FICA TAX 1/04/19		0		0.0000	13,309.74	0.00	0.00	0.00			0.00
11040569	P/R MEDICARE TAX 1/04/19	FEDFIC	COMMUNITY BANK EFT	3,112.82	01/04/2019	01/04/2019						
01/04/2019	999				2019	00999		1704	01/04/2019		0200.0000	
01/04/2019	20190104MEDC		29		1				0.00		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	P/R MEDICARE TAX 1/04/19		0		0.0000	3,112.82	0.00	0.00	0.00			0.00
11040570	P/R STATE TAX 1/04/19	0000000482	NYS TAX DEPARTMENT	4,752.37	01/04/2019	01/04/2019						
01/04/2019	999				2019	00999		1699	01/04/2019		0200.0000	
01/04/2019	20190104STA		30		1				0.00		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	P/R STATE TAX 1/04/19		0		0.0000	4,752.37	0.00	0.00	0.00			0.00
11040571	BLANKET PO FOR DECEMBER 2018	0000000192	AUBUCHON HARDWARE	786.59	01/07/2019	01/14/2019						
01/07/2019		48010	11/10/2018		2019	00001					0200.0000	
12/31/2018	DECEMBER				1				0.00		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	BLANKET PO FOR DECEMBER 2018		0		0.0000	786.59	0.00	0.00	0.00			0.00
11040572	BLANKET PO FOR DECEMBER 2018	0000000602	OLYMPIC AUTO & TRUCK SUPPLY	2,812.97	01/07/2019	01/14/2019						
01/07/2019		47946	12/01/2018		2019	00001					0200.0000	
12/31/2018	DECEMBER	M			1				0.00		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	BLANKET PO FOR DECEMBER 2018	M	0		0.0000	2,812.97	0.00	0.00	0.00			0.00
11040573	TELEPHONE-PD	0000001953	VERIZON WIRELESS	195.25	01/07/2019	01/14/2019						
01/07/2019		48162	01/23/2019		2019	00001					0200.0000	
12/23/2018	9820916837				1				0.00		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	TELEPHONE-PD		0		0.0000	195.25	0.00	0.00	0.00			0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved					
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.
11040574	TELEPHONE CHARGES	0000001953	VERIZON WIRELESS	179.02	01/14/2019						
01/07/2019				48161	12/23/2018		2019	00001			0200.0000
12/23/2018	9820900704							1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	TELEPHONE CHARGES		0		0.0000	179.02	0.00	0.00	0.00		
11040575	DIAL BEFORE YOU DIG REQUESTS	0000005188	DIG SAFELY NEW YORK INC	25.00	01/14/2019						
01/07/2019				48156	12/31/2018		2019	00001			0200.0000
12/31/2018	18121021							1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	DIAL BEFORE YOU DIG REQUESTS		0		0.0000	25.00	0.00	0.00	0.00		
11040576	INTERNET FOR PD	0000000961	TIME WARNER CABLE	60.00	01/14/2019						
01/07/2019				48157	12/28/2018		2019	00001			0200.0000
12/28/2018	804413101122818							1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	INTERNET FOR PD		0		0.0000	60.00	0.00	0.00	0.00		
11040577	2019 TOWN & COUNTY TAXES	0000000593	TOWN OF NORTH ELBA	1,613.05	01/14/2019						
01/07/2019				48158	01/01/2019		2019	00001			0200.0000
								1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	2019 TOWN & COUNTY TAXES		0		0.0000	1,613.05	0.00	0.00	0.00		
11040578	2019 TOWN & COUNTY TAXES	0000000186	TOWN OF HARRIETSTOWN	3,244.30	01/14/2019						
01/07/2019				48159	01/01/2019		2019	00001			0200.0000
								1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	2019 TOWN & COUNTY TAXES		0		0.0000	3,244.30	0.00	0.00	0.00		
11040579	GAS	0000000486	GRIFFITH ENERGY	750.36	01/14/2019						
01/07/2019				48160	12/12/2018		2019	00001			0200.0000
								1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	GAS		0		0.0000	750.36	0.00	0.00	0.00		
11040580	BINDERS, POST IT, COLORED CARD STOCK	0000000025	W.B. MASON CO., INC.	62.95	01/14/2019						
01/07/2019				48148	12/27/2018		2019	00001			0200.0000
12/28/2018	162052988							1		0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	BINDERS, POST IT, COLORED CARD STOCK		0		0.0000	62.95	0.00	0.00	0.00		

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Disc. %	Non Disc.	Disc. Amt.
11040581	PRESERVE NY ARCHITECTURE SVCS-3 MAIN ST	0000003386	LANDMARK CONSULTING	7.125.00	01/14/2019							
01/07/2019												
12/29/2018	1702-01	48155	01/04/2019	2019 00001								
				1		0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	PRESERVE NY ARCHITECTURE SVCS-3 MAIN ST		0		0.0000	7,125.00	0.00	0.00	0.00			
11040582	CONVEYOR TRANSITION PLATE	0000002230	TENCO INDUSTRIES INC.	68.71	01/14/2019							
01/07/2019		47957	12/18/2018	2019 00001								
12/19/2018	6452180			1		0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	CONVEYOR TRANSITION PLATE		0		0.0000	68.71	0.00	0.00	0.00			
11040583	BLANKET PO FOR DECEMBER 2018	0000000305	NEWPORT CREDIT	312.32	01/14/2019							
01/07/2019		48006	12/01/2018	2019 00001								
				1		0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	BLANKET PO FOR DECEMBER 2018		0		0.0000	312.32	0.00	0.00	0.00			
11040584	BLANKET PO FOR DECEMBER 2018	0000000079	HULBERT'S TRI-LAKE SUPPLY	175.54	01/14/2019							
01/07/2019		48007	12/01/2018	2019 00001								
				1		0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	BLANKET PO FOR DECEMBER 2018		0		0.0000	175.54	0.00	0.00	0.00			
11040585	WEBSITE CONTENT WRITING	0000003511	KITTLE, SHAUN	1.140.00	01/14/2019							
01/07/2019		47623	08/10/2018	2019 00001								
01/03/2019	001	M		1		0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	WEBSITE CONTENT WRITING	M	0		0.0000	1,140.00	0.00	0.00	0.00			
11040586	HYDRAULIC MOTOR	0000002519	EMPIRE HYDRAULICS & MACHINE	237.15	01/14/2019							
01/07/2019		47970	01/04/2019	2019 00001								
01/04/2019	71895			1		0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	HYDRAULIC MOTOR		0		0.0000	237.15	0.00	0.00	0.00			
11040587	OIL FILTER. RESISTOR HEATER	0000005226	HIGH PEAKS FORD	64.93	01/14/2019							
01/07/2019		47971	01/04/2019	2019 00001								
				1		0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	OIL FILTER, RESISTOR HEATER		0		0.0000	64.93	0.00	0.00	0.00			

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved					
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.
11040588	BLANKET PO FOR DECEMBER 2018	0000005341	TRADE CREDIT SERVICES	687.90	01/14/2019						
01/07/2019		48009	12/01/2018		2019	00001					0200.0000
							1		0.00	0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	BLANKET PO FOR DECEMBER 2018		0		0.0000	687.90	0.00	0.00	0.00		
11040589	BLANKET PO FOR DECEMBER 2018	0000000901	MIDSTATE INDUSTRIAL SUPPLY	975.59	01/14/2019						
01/07/2019		48012	12/01/2018		2019	00001					0200.0000
							1		0.00	0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	BLANKET PO FOR DECEMBER 2018		0		0.0000	975.59	0.00	0.00	0.00		
11040590	ANNUAL SUPPLY OF SODA ASH	0000001539	SLACK CHEMICAL CO, INC	642.80	01/14/2019						
01/07/2019		45852	06/01/2017		2019	00001					0200.0000
12/19/2018	377160						1		0.00	0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	ANNUAL SUPPLY OF SODA ASH		0		0.0000	642.80	0.00	0.00	0.00		
11040591	ANNUAL SUPPLY OF SODA ASH FOR CORROSIO	0000001539	SLACK CHEMICAL CO, INC	316.20	01/14/2019						
01/07/2019		47448	06/21/2018		2019	00001					0200.0000
12/19/2018	377160						1		0.00	0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	ANNUAL SUPPLY OF SODA ASH FOR CORROSION CONTROL		0		0.0000	316.20	0.00	0.00	0.00		
11040592	ANNUAL SODIUM HYPOCHLORITE FOR DISINFEC	0000001539	SLACK CHEMICAL CO, INC	651.71	01/14/2019						
01/07/2019		44223	06/01/2016		2019	00001					0200.0000
12/26/2018	377265						1		0.00	0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	ANNUAL SODIUM HYPOCHLORITE FOR DISINFECTION OF WATER		0		0.0000	651.71	0.00	0.00	0.00		
11040593	FLOOR CLEANER, TRASH BAGS	0000000025	W.B. MASON CO., INC.	99.37	01/14/2019						
01/07/2019		48048	12/20/2018		2019	00001					0200.0000
12/27/2018	I62005342						1		0.00	0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	FLOOR CLEANER, TRASH BAGS		0		0.0000	99.37	0.00	0.00	0.00		
11040594	TRASH DISPOSAL	0000000628	FR. COUNTY SOLID WASTE	778.90	01/14/2019						
01/08/2019		47687	07/19/2018		2019	00001					0200.0000
							1		0.00	0.00	0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
1	TRASH DISPOSAL		0		0.0000	778.90	0.00	0.00	0.00		

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Disc. %	Disc. Amt.	
11040595	DISPOSAL OF GRIT, SCREENINGS & SLUDGE	000000628	FR. COUNTY SOLID WASTE	219.00	01/14/2019							
01/08/2019		47445	06/21/2018		2019	00001	1			0.00	0.00	0200.0000
												0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	DISPOSAL OF GRIT, SCREENINGS & SLUDGE		0		0.0000	219.00	0.00	0.00	0.00			
11040596	BLANKET PO FOR DECEMBER 2018	000000005	STURDY SUPPLY	274.91	01/14/2019							
01/08/2019		48008	12/01/2018		2019	00001	1			0.00	0.00	0200.0000
												0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	BLANKET PO FOR DECEMBER 2018		0		0.0000	274.91	0.00	0.00	0.00			
11040597	BLANKET PO FOR DECEMBER 2018	0000001639	CURTIS LUMBER CO. INC.	1,015.61	01/14/2019							
01/08/2019		48011	12/01/2018		2019	00001	1			0.00	0.00	0200.0000
												0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	BLANKET PO FOR DECEMBER 2018		0		0.0000	1,015.61	0.00	0.00	0.00			
11040598	BLANKET PO FOR DECEMBER 2018	0000004852	TAYLOR RENTAL CENTER	454.35	01/14/2019							
01/08/2019		48013	12/01/2018		2019	00001	1			0.00	0.00	0200.0000
												0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	BLANKET PO FOR DECEMBER 2018		0		0.0000	454.35	0.00	0.00	0.00			
11040599	KT-EXTENDER, CARBIDE CURB SHOE	0000003508	TRUIS INC.	4,165.47	01/14/2019							
01/08/2019		47938	11/27/2018		2019	00001	1			0.00	0.00	0200.0000
12/27/2018	S1053075											0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	KT-EXTENDER, CARBIDE CURB SHOE		0		0.0000	4,165.47	0.00	0.00	0.00			
11040600	TIRE REPAIR SUPPLIES, WHEEL WEIGHTS, CLEA/	0000000123	NY TECH SUPPLY, INC.	435.20	01/14/2019							
01/08/2019		47949	12/05/2018		2019	00001	1			0.00	0.00	0200.0000
12/05/2018	C10518998											0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	TIRE REPAIR SUPPLIES, WHEEL WEIGHTS, CLEANER, VALVES		0		0.0000	435.20	0.00	0.00	0.00			
11040601	DOGI POT DISPENSERS, BAGS	0000002332	BELSON OUTDOORS	698.90	01/14/2019							
01/08/2019		48047	12/20/2018		2019	00001	1			0.00	0.00	0200.0000
12/28/2018	171231											0.00
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	DOGI POT DISPENSERS, BAGS		0		0.0000	698.90	0.00	0.00	0.00			

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Disc. %	Disc. Amt.	
11040602	HYDRAULIC GAUGE. WATER VALVE	0000002250	PEIRCE EAGLE EQUIPMENT CO.	206.44	01/14/2019							
01/09/2019				47973	01/07/2019		2019	00001				0200.0000
01/07/2019	1818229						1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	HYDRAULIC GAUGE, WATER VALVE				0			0.0000	206.44	0.00	0.00	0.00
11040603	COMPLETE UNITY GAIN ANTENNAS. CONNECTO	0000000092	CHAMPLAIN COMMUNICATIONS INC.	118.00	01/14/2019							
01/09/2019				47954	12/17/2018		2019	00001				0200.0000
12/17/2018	1847						1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	COMPLETE UNITY GAIN ANTENNAS, CONNECTOR				0			0.0000	118.00	0.00	0.00	0.00
11040604	PISGAH FEDEX TO NYS-TUBING	0000001149	COMPASS PRINTING PLUS	21.81	01/14/2019							
01/09/2019				48153	12/17/2018		2019	00001				0200.0000
12/17/2018	51921						1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	PISGAH FEDEX TO NYS-TUBING				0			0.0000	21.81	0.00	0.00	0.00
11040605	DIESEL	0000001762	ADIRONDACK ENERGY	4,918.93	01/14/2019							
01/09/2019				48163	12/04/2018		2019	00001				0200.0000
							1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	DIESEL				0			0.0000	4,918.93	0.00	0.00	0.00
11040606	PHYSICALS. DRUG SCREENS	0000005253	MOUNTAIN MEDICAL SERVICES, PLLC.	1,010.00	01/14/2019							
01/09/2019				48164	01/01/2019		2019	00001				0200.0000
01/01/2019	2672K1798			M			1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	PHYSICALS, DRUG SCREENS			M	0			0.0000	1,010.00	0.00	0.00	0.00
11040607	INS PREMIUM FOR JANUARY 2019	0000004830	LINCOLN LIFE & ANNUITY	201.12	01/14/2019							
01/09/2019				48165	12/27/2018		2019	00001				0200.0000
01/01/2019	JANUARY						1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	INS PREMIUM FOR JANUARY 2019				0			0.0000	201.12	0.00	0.00	0.00
11040608	FORM BOARDS FOR SHORING	0000001198	USA BLUE BOOK	1,278.59	01/14/2019							
01/09/2019				48054	12/13/2018		2019	00001				0200.0000
12/27/2018	770571						1		0.00	0.00	0.00	
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	FORM BOARDS FOR SHORING				0			0.0000	1,278.59	0.00	0.00	0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved							
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account	Disc. Amt.
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Disc. %			
11040609	DEXTRON TRANS OIL	0000005387	POLSINELLO FUELS, INC.	824.00	01/14/2019								
01/09/2019				47969	01/03/2019		2019	00001					0200.0000
01/02/2019	697859							1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	DEXTRON TRANS OIL				0			0.0000	824.00	0.00	0.00		0.00
11040610	CUTTING EDGE WITH BOLTS	0000003284	EVERGREEN AUTO CENTER	162.00	01/14/2019								
01/09/2019				47972	01/07/2019		2019	00001					0200.0000
01/07/2019	2791							1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	CUTTING EDGE WITH BOLTS				0			0.0000	162.00	0.00	0.00		0.00
11040611	FUEL OIL	0000001762	ADIRONDACK ENERGY	13.397.55	01/14/2019								
01/09/2019				48151	12/04/2018		2019	00001					0200.0000
								1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	FUEL OIL				0			0.0000	13,397.55	0.00	0.00		0.00
11040612	NOZZLE W/HOSE	0000005226	HIGH PEAKS FORD	93.75	01/14/2019								
01/09/2019				47966	12/26/2018		2019	00001					0200.0000
12/26/2018	21267							1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	NOZZLE W/HOSE				0			0.0000	93.75	0.00	0.00		0.00
11040613	SNOW TIRES-LARGE DUMP	0000000793	WARREN TIRE SERVICE CENTER	470.19	01/14/2019								
01/09/2019				47964	12/21/2018		2019	00001					0200.0000
12/27/2018	105030							1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	SNOW TIRES-LARGE DUMP				0			0.0000	470.19	0.00	0.00		0.00
11040614	POLICY PREMIUM-FIRE	0000003510	GSB	2,877.00	01/14/2019								
01/09/2019				48150	12/27/2018		2019	00001					0200.0000
12/27/2018	133503116							1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	POLICY PREMIUM-FIRE				0			0.0000	2,877.00	0.00	0.00		0.00
11040615	MONTHLY HRS-FSA ADMINISTRATION	0000002302	PRIMEPAY LLC	750.00	01/14/2019								
01/09/2019				47650	07/06/2018		2019	00001					0200.0000
12/31/2018	33279928			M				1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	MONTHLY HRS-FSA ADMINISTRATION			M	0			0.0000	750.00	0.00	0.00		0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Check No.	Disc. %		Disc. Amt.
11040616	DENTAL INS JANUARY 2019	000000162	SERVICE EMPLOYEES BENEFIT FUND	867.45	01/14/2019							
01/10/2019		48168	01/10/2019		2019	00001						
01/07/2019	JANUARY				1							
						0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	DENTAL INS JANUARY 2019		0		0.0000	867.45	0.00	0.00	0.00			
11040617	SIDE WINDOW.MARKER LIGHTS	0000004887	JOE JOHNSON EQUIPMENT LLC	148.76	01/14/2019							
01/10/2019		47930	11/16/2018		2019	00001						
					1							
						0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	SIDE WINDOW,MARKER LIGHTS		0		0.0000	148.76	0.00	0.00	0.00			
11040618	ADS.NOTICES-DEV BOARD	0000000006	ADIRONDACK DAILY ENTERPRISE	48.66	01/14/2019							
01/10/2019		48169	12/31/2018		2019	00001						
12/31/2018	343656				1							
						0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	ADS,NOTICES-DEV BOARD		0		0.0000	48.66	0.00	0.00	0.00			
11040619	FUEL OIL	0000001762	ADIRONDACK ENERGY	4,963.01	01/14/2019							
01/10/2019		48166	12/19/2018		2019	00001						
					1							
						0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	FUEL OIL		0		0.0000	4,963.01	0.00	0.00	0.00			
11040620	ELECTRIC CHARGES 2018-2019	0000000134	NATIONAL GRID	163.39	01/14/2019							
01/10/2019		47602	06/13/2018		2019	00001						
					1							
						0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
16	HYDRO		0		0.0000	21.23	0.00	0.00	0.00			
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
18	SEWER		0		0.0000	142.16	0.00	0.00	0.00			
11040621	YEARLY CONTRACT FOR UNIFORM SERVICE	0000002556	CENTURY LINEN & UNIFORM	298.05	01/14/2019							
01/10/2019		45401	06/01/2017		2019	00001						
					1							
						0.00						
						0.00						
						0.00						
Detail Item	Item Description	Taxable	Quantity	Unit	Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.			
1	YEARLY CONTRACT FOR UNIFORM SERVICE		0		0.0000	298.05	0.00	0.00	0.00			
11040622	INJECTION VALVE. MICROSCOPE SLIDES	0000001198	USA BLUE BOOK	193.28	01/14/2019							
01/10/2019		47824	12/19/2018		2019	00001						
					1							
						0.00						
						0.00						
						0.00						

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.		Pay Due	Approved						
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account	
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Check No.	Disc. %	Non Disc.	Disc. Amt.	
11040622	INJECTION VALVE. MICROSCOPE SLIDES	0000001198	USA BLUE BOOK										
Detail Item	Item Description		Taxable	Quantity	Unit				Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	INJECTION VALVE, MICROSCOPE SLIDES			0					0.0000	193.28	0.00	0.00	0.00
11040623	DEEP SOCKETS	0000002347	CLARK'S TRUCK CENTER										
01/10/2019		47962	12/18/2018				2019	00001		49.85		01/14/2019	
12/26/2018								1			0.00	0.00	0200.0000
Detail Item	Item Description		Taxable	Quantity	Unit				Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	DEEP SOCKETS			0					0.0000	49.85	0.00	0.00	0.00
11040624	HYDRAULIC SENSOR	0000004833	PRINOTH LLC										
01/10/2019		47960	12/19/2018				2019	00001		82.16		01/14/2019	
12/21/2018	1805010574							1			0.00	0.00	0200.0000
Detail Item	Item Description		Taxable	Quantity	Unit				Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	HYDRAULIC SENSOR			0					0.0000	82.16	0.00	0.00	0.00
11040625	DIAPHRAGM PUMP REPAIR KIT	0000005321	GRAINGER, INC.										
01/10/2019		47961	12/20/2018				2019	00001		159.94		01/14/2019	
12/20/2018	9037992899							1			0.00	0.00	0200.0000
Detail Item	Item Description		Taxable	Quantity	Unit				Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	DIAPHRAGM PUMP REPAIR KIT			0					0.0000	159.94	0.00	0.00	0.00
11040626	COPIER LEASE. MAINTENANCE-BIZHUBS	0000001572	SYMQUEST GROUP, INC.										
01/10/2019		48076	12/06/2018				2019	00001		464.19		01/14/2019	
12/31/2018	32896575	M						1			0.00	0.00	0200.0000
Detail Item	Item Description		Taxable	Quantity	Unit				Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	COPIER LEASE, MAINTENANCE-BIZHUBS		M	0					0.0000	464.19	0.00	0.00	0.00
11040627	INSTALL PRV @ 3 MAIN-SVC CALL	0000004045	J HOGAN REFRIGERATION & MECHANICAL, INC.										
01/10/2019		47524	12/26/2018				2019	00001		1,592.27		01/14/2019	
								1			0.00	0.00	0200.0000
Detail Item	Item Description		Taxable	Quantity	Unit				Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	INSTALL PRV @ 3 MAIN-SVC CALL			0					0.0000	1,592.27	0.00	0.00	0.00
11040628	DENTAL PREMIUM JAN 2019-ADMIN	0000002551	STANDARD INSURANCE CO OF NEW YORK										
01/10/2019		48147	12/14/2018				2019	00001		772.14		01/14/2019	
12/14/2018	JANUARY							1			0.00	0.00	0200.0000
Detail Item	Item Description		Taxable	Quantity	Unit				Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	DENTAL PREMIUM JAN 2019-ADMIN			0					0.0000	772.14	0.00	0.00	0.00
11040629	DENTAL PREMIUM JAN 2019	0000002551	STANDARD INSURANCE CO OF NEW YORK										
01/10/2019		48146	12/14/2018				2019	00001		275.75		01/14/2019	
								1					0200.0000

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved							
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account	Disc. Amt.
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Check No.	Disc. %			
11040629	DENTAL PREMIUM JAN 2019			0000002551									
12/14/2018	JANUARY									0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	DENTAL PREMIUM JAN 2019				0				0.0000	275.75	0.00	0.00	0.00
11040630	OAK ROOM RESERVATION 01/09/19-DRI WORK G			0000000537									
01/10/2019				47918						150.00		01/14/2019	
01/09/2019	001												0200.0000
													0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	OAK ROOM RESERVATION 01/09/19-DRI WORK GROUPS				0				0.0000	150.00	0.00	0.00	0.00
11040631	POLICY CHANGE			0000000137									
01/10/2019				48109						2.20		01/14/2019	
12/18/2018	215909												0200.0000
													0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	POLICY CHANGE				0				0.0000	2.20	0.00	0.00	0.00
11040632	EFC-AWS D0-17611			0000002089									
01/10/2019				48144						360.400.00		01/14/2019	
12/18/2018	4506												0200.0000
													0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	EFC-AWS				0				0.0000	360,400.00	0.00	0.00	0.00
11040633	WWTP-EFC-C5-5516-01			0000002089									
01/10/2019				48145						3,412.50		01/14/2019	
12/18/2018	1377												0200.0000
													0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	WWTP-EFC-C5-5516-01				0				0.0000	3,412.50	0.00	0.00	0.00
11040634	CHARGES FOR W. FLYNN TRAINING 01/09-10/19			0000003010									
01/14/2019				48182						188.00		01/14/2019	
01/09/2019	994950												0200.0000
													0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	CHARGES FOR W. FLYNN TRAINING 01/09-10/19				0				0.0000	188.00	0.00	0.00	0.00
11040635	AQUASTAT RELAY FOR LODGE BOILER			0000000290									
01/14/2019				48167						357.73		01/14/2019	
01/02/2019	26936												0200.0000
													0.00
Detail Item	Item Description			Taxable	Quantity	Unit			Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.
1	AQUASTAT RELAY FOR LODGE BOILER				0				0.0000	357.73	0.00	0.00	0.00
11040636	ADS. NOTICES			0000000006									
										299.50		01/14/2019	

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Req. No.	Req. Date	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved					
Voucher Date	Batch	Recur Months	Refund Year	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account	Disc. Amt.
Invoice Date	Invoice No.			Taxable	Ref No	Approved By	Period	Contract No.		Disc. %			
11040636	ADS. NOTICES			0000000006	ADIRONDACK DAILY ENTERPRISE								
01/14/2019				48172	12/31/2018		2019	00001					0200.0000
12/31/2018	343592							1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	ADS, NOTICES				0			0.0000	299.50	0.00	0.00		0.00
11040637	FLAT FLANGE ADAPTER			0000002250	PEIRCE EAGLE EQUIPMENT CO.				193.44		01/14/2019		
01/14/2019				47963	12/21/2018		2019	00001					0200.0000
01/03/2019	1818172							1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	FLAT FLANGE ADAPTER				0			0.0000	193.44	0.00	0.00		0.00
11040638	ANNUAL CONTRIBUTION			0000000367	SARANAC LAKE VOLUNTEER				46,100.00		01/14/2019		
01/14/2019				48173	01/10/2019		2019	00001					0200.0000
01/09/2019	001							1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	ANNUAL CONTRIBUTION				0			0.0000	46,100.00	0.00	0.00		0.00
11040639	REIMBURSE TRAINING CHARGES-W. FLYNN			0000002505	SARANAC LAKE POLICE DEPARTMENT				500.00		01/14/2019		
01/14/2019				47232	01/10/2019		2019	00001					0200.0000
01/10/2019	001							1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	REIMBURSE TRAINING CHARGES-W. FLYNN				0			0.0000	500.00	0.00	0.00		0.00
11040640	2018/2019 LABOR SERVICES			0000003318	ROEMER, WALLENS, GOLD & MINEAUX LLP				1,800.00		01/14/2019		
01/14/2019				47281	06/01/2018		2019	00001					0200.0000
01/01/2019	JAN			A				1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	2018/2019 LABOR SERVICES			A	0			1,800.0000	1,800.00	0.00	0.00		0.00
11040641	REC AREAS ELECTRIC			0000000134	NATIONAL GRID				21.23		01/14/2019		
01/14/2019				48170	01/03/2019		2019	00001					0200.0000
01/03/2019	13925-19104							1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
1	REC AREAS ELECTRIC				0			0.0000	21.23	0.00	0.00		0.00
11040642	ELECTRIC CHARGES 2018-2019			0000000134	NATIONAL GRID				3,678.92		01/14/2019		
01/14/2019				47602	06/13/2018		2019	00001					0200.0000
								1		0.00	0.00		0.00
Detail Item	Item Description			Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.		Disc. Amt.
11	PARKS				0			0.0000	21.23	0.00	0.00		0.00

VILLAGE OF SARANAC LAKE

Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved							
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Non Disc.	Cash Account	
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Disc. %	Non Disc.	Disc. Amt.	
11040642	ELECTRIC CHARGES 2018-2019	0000000134	NATIONAL GRID										
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
17	SOURCE OF SUPPLY			0			0.0000	3,581.94	0.00	0.00	0.00		
Detail Item	Item Description		Taxable	Quantity	Unit		Unit Cost	Ext. Cost	Disc. %	Non Disc.	Disc. Amt.		
18	SEWER			0			0.0000	75.75	0.00	0.00	0.00		
Total Vouchers reported:				201								Total GL Detail Reported	744,364.76
											Total Amount All Vouchers	744,364.76	

Fund	Cash Item		----- Direct Pay -----					Total
			Regular	Prepaid	Wire Transfer	Outstanding	Paid	
001 - GENERAL FUND								
	0200.0000	VILLAGE	179,239.65	0.00	0.00	0.00	0.00	179,239.65
		Fund Total	179,239.65	0.00	0.00	0.00	0.00	179,239.65
004 - WATER FUND								
	0200.0000	VILLAGE	390,312.82	0.00	0.00	0.00	0.00	390,312.82
		Fund Total	390,312.82	0.00	0.00	0.00	0.00	390,312.82
005 - SEWER FUND								
	0200.0000	VILLAGE	46,909.20	0.00	0.00	0.00	0.00	46,909.20
		Fund Total	46,909.20	0.00	0.00	0.00	0.00	46,909.20
010 - TRUST AND AGENCY FUND								
	0200.0000	VILLAGE	100,075.20	0.00	0.00	0.00	0.00	100,075.20
		Fund Total	100,075.20	0.00	0.00	0.00	0.00	100,075.20
119 - INI STUDY								
	0200.0000	VILLAGE	24,930.00	0.00	0.00	0.00	0.00	24,930.00
		Fund Total	24,930.00	0.00	0.00	0.00	0.00	24,930.00
212 - LWCS SEWERPROJECTS								
	0200.0000	VILLAGE	2,897.89	0.00	0.00	0.00	0.00	2,897.89

VILLAGE OF SARANAC LAKE Voucher Detail Report

Voucher No.	Stub- Description	Vendor Code	Vendor Name	Voucher Amt.	Pay Due	Approved					
Voucher Date	Batch	Req. No.	Req. Date	PO No.	PO Date	Ordered By	Fisc Year	Check ID	Check No.	Check Date	Cash Account
Invoice Date	Invoice No.	Recur Months	Refund Year	Taxable	Ref No	Approved By	Period	Contract No.	Disc. %	Non Disc.	Disc. Amt.
Fund	Cash Item										
				Regular	Prepaid	Wire Transfer			Outstanding	Paid	Total
	Fund Total			2,897.89	0.00	0.00			0.00	0.00	2,897.89
Grand Totals				744,364.76	0.00	0.00			0.00	0.00	744,364.76
Grand Total Regular, Prepaid, Wire Transfer and Direct Pay				744,364.76							
Fund				Regular	Prepaid	Wire Transfer			Outstanding	Paid	Total
001 - GENERAL FUND			VILLAGE	179,239.65	0.00	0.00			0.00	0.00	179,239.65
004 - WATER FUND			VILLAGE	390,312.82	0.00	0.00			0.00	0.00	390,312.82
005 - SEWER FUND			VILLAGE	46,909.20	0.00	0.00			0.00	0.00	46,909.20
010 - TRUST AND AGENCY FUND			VILLAGE	100,075.20	0.00	0.00			0.00	0.00	100,075.20
119 - INI STUDY			VILLAGE	24,930.00	0.00	0.00			0.00	0.00	24,930.00
212 - LWCS SEWERPROJECTS			VILLAGE	2,897.89	0.00	0.00			0.00	0.00	2,897.89
Grand Totals				744,364.76	0.00	0.00			0.00	0.00	744,364.76
Grand Total Regular, Prepaid, Wire Transfer and Direct Pay				744,364.76							

ABSTRACT OF CLAIMS FOR VILLAGE OF SARANAC LAKE

The claims set forth bearing numbers _____ to _____ have been audited and allowed by us being the Mayor & Trustees of the Village Board.

Mayor/Trustee: _____ Date: _____

TO THE TREASURER OF THE VILLAGE

You are hereby authorized and directed to pay to the order of the following vendors the various amounts in payment of Claims hereinafter set forth, numbered the same as above inclusive, which have been audited and allowed and are chargeable to the fund and appropriation account as designated.

To: Saranac Lake Village Board
From: First Night Saranac Lake Board

December 7, 2018

First Night is writing to ask that the Village of Saranac Lake consider sponsoring the fireworks display that has been a key part of this annual community celebration of the New Year since 2006.

New Year's Eve has many time honored traditions: making resolutions, getting together with family, toasting the New Year and watching fireworks whether live or on TV. We at First Night have been creating a new tradition of attending the community event with a variety of entertainment throughout the evening, topped off with a fireworks display over Lake Flower at midnight. This part of the evening is open to all residents, party-goers and First Night attendees. No admission button to First Night required.

When the First Night event started, the village was relatively quiet on New Years' Eve, with no family celebrations, open restaurants, etc. The annual celebration is now a popular event and many business establishments benefit from residents' and visitors' enjoyment of the scheduled activities. We have worked hard to make the celebration available to all ages and income levels by limiting button prices [our main source of revenue], keeping children's participation free, and offering volunteer slots in lieu of paying for buttons.

We are proposing that the Village of Saranac Lake take over this portion of the New Year's Eve celebration. As you know we use the same fireworks company, Santore's Fireworks, which you use for the July 4th fireworks. Our production expenses rise every year (in spite of our best efforts to keep them steady) and attendance can vary from year to year, often based on weather. We are considering cutting the fireworks out of our budget in order to be able to continue to provide first-rate programming for First Night. We would really appreciate it if the Village could take over this portion on the New Year's Eve celebration. We currently spend \$2,500 on fireworks which is about 7% of our budget.

Thank you for your consideration of this matter.



Susan Patterson, Board Chair



Saranac Lake Youth Center

PO Box 1003 Saranac Lake, NY 12983
518-891-5846 saranaclakeyouth@gmail.com

We provide a healthy, substance free, supervised environment for teenagers; offering programs which develop social skills, personal growth and responsibility in a fun and supportive atmosphere.

Village of Saranac Lake 2019 Funding Request

Aleacia Landon
Director

Jaime
Armstrong
President

Cris Winters
Vice President

Susan Arnold
Treasurer

Peggy
Wiltberger
Secretary

Diane Roberts

We thank you so very much for your ongoing support for our youth. The Saranac Lake Youth Center respectfully **requests the Village of Saranac Lake to provide funding in the amount of \$6,000** for the Saranac Lake Youth Center to help meet our operational expenses in 2019. The majority of youth that come to the Center reside in the Village of Saranac Lake.

The Saranac Lake Youth Center has served the youth, ages 11-18, of the Saranac Lake Central School District since 1982. The center offers programs for all area youth, **but it is particularly vital to many of our disadvantaged youth.** Whether it is a second home, or just a fun place to meet friends, the youth entering the center find an atmosphere of support and encouragement, with clear structure, where they can explore new activities, develop relationships and learn life skills and very importantly, stay off the streets and out of trouble.

The Board of Directors and youth fundraising raised over \$11,000 this calendar year. We have sent out a funding appeal letter, had 50/50 raffles at the home football games, sold holiday wreaths, and held the Olga Memorial Footrace with the Rotary Club which was a wonderful success. **Outweighing these gains however is a decrease of funds from previous years from our largest funding source, the Franklin County Youth Bureau.** With our increasing number of youth at our center, we must make sure we have adequate staffing and continue to provide enriching programs.

The Center has been operating since October 2010 with a part-time Director and the support of our volunteers, who put in hundreds of hours of work to help keep this Center open. The Center is not able to offer a competitive salary or health insurance. **Due to the increased attendance, the Center had to hire a part-time assistant in 2017 to make sure the Center maintained a proper adult to youth ratio.** Our assistant has since resigned to take a full-time job elsewhere and we have not found a replacement as the Center is not able to offer a competitive salary, full-time hours, or health insurance. We have volunteers now to maintain the proper ratio but having another employee allows us more flexibility in programming and to be open more during the year.

The Youth Center is thriving with a great location, great physical space and structured programming, including an active Youth Council. We are **open all year** and during the 2017-2018 school year, **185 different youth** used the Center. We average from 15-30 kids per day. We provide daily snacks like grilled cheese, peanut butter & jelly sandwiches, deli sandwiches, baked goods, yogurt and fruits & vegetables to all of the kids. The Board of Directors is working very hard to seek out grant opportunities and major fundraising events. We have trimmed our budget as much as is reasonable. **Please support the children of the families that you represent.**

A successful Youth Center benefits the whole community, helping teens develop the skills to become our next parents, citizens and leaders. Attached is our 2019 budget that clearly spells out our need for increased and continued funding. If you need additional information, please let me know. **Thank you** so much for your time and consideration.

Respectfully,

Aleacia Landon, Director



Saranac Lake
Youth Center is a
partner agency of
United Way of the
Adirondack
Region, Inc

Saranac Lake Youth Center Budget 2019						
Projected Income				Projected Expenses		
Contributions				Program Services		
Annual Letter		\$ 7,000.00		Program Supplies		\$ 2,000.00
Stewart's Match		\$ 2,000.00		Consumable Supplies		\$ 1,500.00
Lutheran Church		\$ 500.00		Electric		\$ 600.00
St. Luke's Church		\$ 500.00		Durable Equipment		\$ 1,000.00
High Peaks Church		\$ 500.00		Internet/phone		\$ 1,000.00
Methodist Church		\$ 500.00		Propane/heating		\$ 400.00
Community Friends		\$ 500.00		Rent		\$ 13,020.00
Can-AM Rugby		\$ 250.00		Repairs Facility		\$ 400.00
Rotary Grant		\$ 400.00		Total Program Services		\$ 19,920.00
SL Elks Lodge		\$ 250.00				
Kiwanis Club		\$ 250.00		Operational Expenses		
Women's Civic Chamber		\$ 200.00		Meals and Entertainment		\$ 200.00
Adirondack United Way		\$ 2,500.00		Dues and Subscriptions		\$ 200.00
Adirondack Foundation		\$ 1,000.00		Disability Insurance		\$ 200.00
Cloudsplitter Foundation		\$ 2,000.00		Liability Insurance		\$ 1,000.00
Fundraisers		\$ 5,000.00		Board Insurance		\$ 900.00
Total Contributions		\$ 23,350.00		Worker's Comp Insurance		\$ 800.00
				Licenses and Permits		\$ 75.00
Government Grants				Postage and Delivery		\$ 500.00
Franklin County Youth Bureau		\$ 10,000.00		Advertising/Marketing		\$ 250.00
Essex County Youth Bureau		\$ 1,000.00		Accounting		\$ 1,300.00
Town of Harriestown		\$ 5,000.00		Background Checks		\$ 600.00
Town of North Elba		\$ 1,000.00		Total Operational Expenses		\$ 6,025.00
Village of Saranac Lake		\$ 5,000.00				
Total Government Grants		\$ 22,000.00		Payroll Expenses		
				Director 30hr./wk		\$ 20,000.00
Total Income		\$ 45,350.00		Part-time Assistant 10hr./wk		\$ 5,040.00
				Payroll Taxes		\$ 3,000.00
				Total Payroll Expenses		\$ 28,040.00
				Total Expenses		\$ 53,985.00



Saranac Lake Youth Center

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We provide a healthy, substance free, supervised environment for teenagers; offering programs which develop social skills, personal growth and responsibility in a fun and supportive atmosphere.

Annual Report 2018

Major Accomplishments and Extra Community Activities

The Saranac Lake Youth Center received **4,015 visits from January 1 – December 20, 2018**. The Youth Center was open for **206** days during this time. The Youth Center has served **150** individual youth since summer hours started at the end of June 2018 and **185** individual youth for the 2017-2018 school year. Approximately **15** individual adults also visit the Center to work with youth. The visits breakdown as follows: **1,069** High School Youth visits, **2,790** Middle School Youth visits and **156** Other visits which consist of mentors bringing special needs teens in to socialize with other teenagers. The center had a daily average of **18.9** for this time period. Free snacks are provided on a daily basis to all youth, with an emphasis on healthy snacks such as fruits, vegetables, smoothies, sandwiches, cheese sticks, milk, juice, and yogurt. The Center hosted its annual Thanksgiving Dinner for youth and our staff/Board members/volunteers. It was held at the First United Methodist Church in Saranac Lake to allow for more space and a better cooking facility. This was a traditional dinner made by staff and Board members that consisted of turkey, stuffing, glazed ham, mashed potatoes, gravy, cranberry sauce, pickles & olives, our "turkey" veggie platter, apple cider, pies, cheesecakes and cookies!

This has been a busy year for the Saranac Lake Youth Center! We saw our basketball hoop purchased with funds from the Lutheran Church Women and installed in the back room! We also had a large screen TV donated by the Methodist Church to use for the gaming consoles as well as beautiful furniture donated by a community member for our front lounge area.

Every month our youth were involved in some community activity, volunteering or doing fun things right at the Youth Center. In February, during Winter Carnival, the Youth Center hosted the Scavenger Hunt for middle and high school kids. They also participated in the Arctic Golf Build-an-Obstacle course by building a giant reptile. They took 3rd place in the contest! On St. Patrick's Day, the Youth Center marched in the Saranac Lake St. Patrick's Day parade and then enjoyed ice cream at Stewart's Shops. From mid-March to mid-April, Youth Council ran a collection drive to gather items to benefit youth in the Franklin County Foster Care Program. In April, several youth baked cookies for the community Martin Luther King, Jr. celebration and showing of the film, *Selma*. In May, six middle school youth gave back to the community by participating in the United Way Day of Caring. They picked up a large amount of trash around the block from Woodruff Street to Church Street in Saranac Lake, including the Skatepark and William Morris Park surrounding the Adirondack Carousel. Also in May, some middle school

youth participated in the Village Clean-up by picking up trash in the same areas as the previous event and including the grassy area and parking lot at Nori's Village Market. When the youth were done they competed in a Middle School Game/Tournament Day which was really well attended. Youth played in Pool, Foosball and Keys to the Castle tournaments for four hours with champions having their name put on a plaque in the lounge area. In early June, the kids enjoyed field trips to Romano's Saranac Lanes for bowling & pizza and to the Adirondack Carousel for free rides & popcorn! We had 3 youth volunteer at the Kiwanis Bike Rodeo on June 2nd, helping small children through the obstacle course. For the last day of school on June 22nd, the center was open from 9:00 am – 6:00 pm for all ages. 30 youth enjoyed the longer hours as well as pizza, cake and ice cream! The Youth Center was open for 6 weeks during the summer. We had 2 youth speak at the Franklin County Suicide Prevention Coalition to give a youth's perspective on how the Coalition can best serve the youth in the area and spread suicide prevention awareness. Throughout the first half of the year several youth have volunteered serving dinner at the Community Dinner held weekly at the Methodist Church. In August we had our annual Olga Memorial Footrace, which is our biggest fundraiser. In September we had Youth Council elections and sold 50/50 raffle tickets at the home football games. Two youth also volunteered to help the Franklin County Suicide Prevention Coalition to distribute merchandise at the Saranac Lake Farmer's Market. Youth volunteered to help decorate the field for the Homecoming football game in mid-October. They also did face-painting. On October 22nd kids baked cookies for a LGBTQ Know Your Rights forum. On October 31st we had a huge Halloween party with 50 youth in attendance! The kids passed out candy to younger kids and held a pumpkin carving contest as well as a costume contest. Also in October, our Youth Council voted to donate \$40 to United Way. This was money received from their bottle deposit returns. In November, the youth decorated for fall and our annual Thanksgiving Dinner was held. In December, youth decorated for the holidays and Youth Council planned our Christmas Party which was held on December 20th. A middle school youth taught some kids and adults a choreographed dance to a Carol of the Bells remix that was performed at the party. The Center was closed for the holidays starting December 21st through January 1st.

Obstacles:

Obstacles that have hindered progress toward obtaining objectives:

- a. Position of Executive Directorship is part time.
- b. We currently do not have a Program Assistant.
- c. With limited funding, we cannot afford to provide employee health insurance or competitive salaries.

Steps taken to overcome obstacles:

- a. Strengthening Board of Director members by networking and inviting new members to attend our monthly meeting as guests. We have recently added two new Board members. One new member has an extensive background in fundraising and the other new member is a psychologist that specializes in helping people with addictions.
- b. We have reached out to NCCC for volunteers and have met with and given a tour of our facility to personnel in order to be put on the approved site list for a Spring & Fall intern in the process of attaining a degree in Human Services or Child & Family Services.
- c. Increasing our publicity and PR efforts by sending in pictures and articles to the local newspaper.
- d. Increased board fundraising efforts with the Olga Memorial Footrace as well as continuing with the annual appeal letter and selling of holiday wreaths.

- e. Speaking at village and county meetings to appeal for greater funding.
- f. We had a beautiful new pool table and new pool sticks donated from local community members.
- g. Hundreds of volunteer hours from Board members and other volunteers to keep the center open improve center organization and outreach.
- h. Increased networking within the community.
- i. Mountain Lake Academy has brought youth and staff on numerous occasions to use the space after-hours to perform community service and to play.
- j. We maintain a website at <http://saranaclakeyouth.wixsite.com/slyc> and update our Facebook page regularly.

Board of Directors:

- a. The Board of Directors is responsible for monitoring the Director.
- b. The Board of Directors meets once a month for approximately 1 to 2 hours. The Director reports to the Board of Directors during this time.
- c. Board Members help out with fundraising and activities.
- d. Board members help to chaperone events.

Evaluation Methods:

- a. The Director writes monthly self-monitoring reports.
- b. Statistical Form/Attendance Sheets
- c. The Director reports directly to the Board of Directors
- d. The Board of Directors does an annual Executive Director evaluation.
- e. The Center's operations and programming is evaluated annually by the Franklin County Youth Bureau.

Efforts to secure ongoing or additional sources of funding:

- a. Recent youth fundraising efforts in 2018 included returning collected bottles/cans for the bottle deposits. This money goes toward our Youth Council. Youth also sold 50/50 raffle tickets at the home football games.
- b. The Center sold holiday wreaths again for the third year. The Director and Board members had a booth at the Sparkle Village Craft Fair to sell wreaths partially decorated by youth as well as angel ornaments made by the youth.
- c. Spring fundraising letter was sent in early May and response is increasing. Our goal is to develop a valuable mailing list for the Center and continue a semi-annual appeal in the community. Fall 2018 letter was unable to be sent out due to Director's family medical emergency. Board decided to change the semi-annual appeal letter dates to January and the beginning of August in order to prevent overlap with the United Way fundraising campaign.
- d. The Director attended a Village of Saranac Lake board meeting to request increased funding. Funding requests were sent to Towns, including nearby towns that haven't given money to the Center in recent years.
- e. Funding requests are sent out to churches and local civic organizations.
- f. The Board of Directors is looking into new grant opportunities outside of the area, while continuing to apply for local grants such as United Way of the Adirondack Region, Stewart's Holiday Match, Adirondack Foundation, Cloudsplitter Foundation, Charles R. Wood Foundation, and the Pearsall Foundation.
- g. The Center participated in #NYGivesDay for the third time in November and held a #GivingTuesday Facebook fundraiser as well. The Center is trying to increase online/mobile funding through social media and increased awareness of the center.

Aleacia Landon
Executive Director
Saranac Lake Youth Center
PO Box 1003
29 Woodruff Street
Saranac Lake, NY 12983

RAPOF

John Sweeney

From: Fred Bickford
Sent: Thursday, December 27, 2018 12:32 PM
To: John Sweeney; CLawton
Cc: ccormier; Kevin Pratt
Subject: letter on iron levels in Saranac Lake Well PW-1
Attachments: 2018-12-27 iron letter.pdf

12/27/18

To: John Sweeney, Village of Saranac Lake; Chris Lawton, Barton & Loguidice

From: Fred Bickford, HydroSource Associates

Re: letter on iron levels in Saranac Lake Well PW-1

Gentlemen - The attached PDF file is a letter we sent earlier today to Kevin Pratt, continuing our response to the information Kevin has given us on iron levels in Well PW-1. We expect to have a phone discussion of the options with Kevin sometime in the next day or two. Please call Claude or me if you have questions. Fred



HydroSource Associates, Inc.

Post Office Box 609 • 50 Winter Street • Ashland, NH 03217

Telephone: (603) 968-3733 • fax: (603) 968-7605

website: www.teamhydrosorce.com

December 27, 2018

Kevin Pratt, WWTP Operator
Village of Saranac Lake
95 Van Buren Street
Saranac Lake, NY 12983

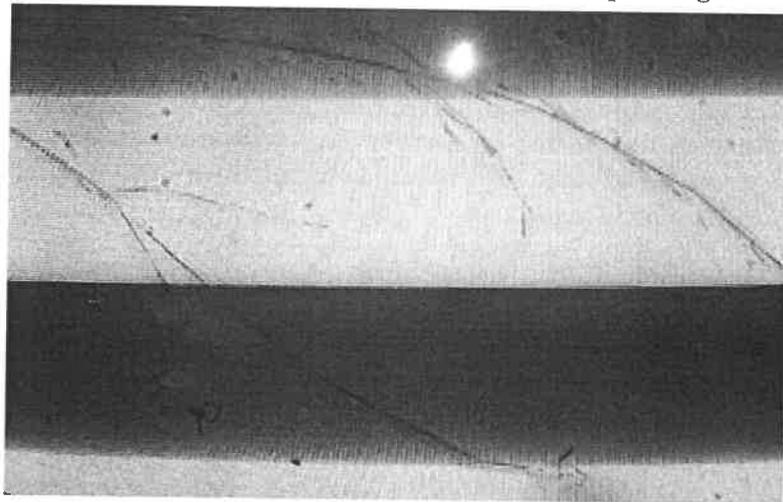
Dear Kevin:

We have been discussing the iron problem you have been seeing in Well PW-1. To recap the situation, you told us last summer that you had begun getting complaints about iron problems from some parts of the distribution system. You tested both wells, and found an iron concentration of 0.40 mg/l from a water sample taken from Well PW-1, much higher than the level of 0.059 mg/l seen at the end of the 72-hour test that was run when we were getting the wells permitted in 2009. In contrast, iron in Well PW-2 was below the lab detection level of 0.02 mg/l in 2009, and remained low in your recent sampling.

Last week, you sent us a microscopic image of a water sample from PW-1, part of which is shown as Figure 1. The structures visible in the image resemble textbook illustrations of filamentous iron-fixing bacteria, which consist of masses of very thin, branching fibers.

The bacteria live on dissolved ferrous (Fe^{2+}) iron. They are capable of oxidizing the iron to produce ferric (Fe^{3+}) iron, and they live on the energy that is released by the oxidation reaction. Ferric iron is largely insoluble in the range of pH and Eh conditions found in aquifers and wells, and the result of the bacterially-facilitated oxidation reaction is a gradual accumulation of very fine-grained ferric iron sludge captured in branching filaments like the ones shown in your photograph. Over time, these can build up to form gelatinous filament masses in the well screen, and sometimes extending some distance out into the aquifer around the screen (and sometimes substantially blocking flow).

Figure 1 - PW-1 Water Sample Microscope Image



The bacteria don't need much dissolved oxygen to thrive if the Eh/pH conditions favor the oxidation reaction. A concentration of 0.1 mg/l would be sufficient, especially in a high-yielding well where a large volume of water is rushing past the site of the bacterial colony. However, the rate of buildup of the filamentous slime might be faster at higher concentrations of dissolved (ferrous) iron.

If this is the source of the iron problems, then it seems likely that the rate at which PW-1 delivers fine-grained iron precipitate to the distribution system is highly variable. Assuming that the average concentration of dissolved iron remains similar to what it was 10 years ago (0.059 mg/l), then of course the average rate of contribution to the system cannot be much higher than that. What may happen is that a mass of filamentous iron gradually builds up in the well, but eventually becomes unstable. Then, when chunks of the bacterial colony break off, and get pumped into the system, total iron concentrations temporarily spike. The largest contributions could occur near the start of a pumping cycle, when there is a sudden velocity increase, and loose clumps of bacterial sludge become detached from the screen.

To help confirm this hypothesis, we suggest that you run the following test. Pump Well PW-1 to waste for 24 hours. Collect water samples for lab analysis after one hour, eight hours, and 24 hours. At each sampling time, collect one filtered sample (for analysis of dissolved iron) and one unfiltered sample (analysis of total iron). Use a 45-micron filter for the filtered sample. Also get a turbidity analysis on each unfiltered sample. After we see the results of that testing, we can make detailed recommendations on dealing with the problem.

Here is what we expect to recommend based on what we know so far. We think you should clean the well to remove the iron sludge that has accumulated on the screen, and shock-chlorinate it to kill off the colony of iron bacteria. Cleaning will require removal of the pump, to allow insertion of a swab or surge block to physically remove the built-up bacterial sludge. If the pump has to be removed anyway, it probably makes sense to go ahead with full redevelopment of the well. That will probably include pump-and-surge development like that employed right after the wells were first constructed, but it will also include shock-chlorination (possibly supplemented by some other chemical treatment) at some stage in the process. The drill contractor should make his own diagnosis of the best approach, in consultation with us if that is what you prefer.

In specifying redevelopment tasks for PW-1, our first interest should be in removing as much as possible of the fine-grained iron sludge that may be partly filling pore space in the aquifer surrounding the screen, and killing off the iron bacterial colony. We need to eliminate the bacteria occupying that volume as completely as possible, though it should be understood that the bacteria can't be wiped out permanently. The colony can be expected to re-establish itself, and periodic control efforts will be necessary. It sounds like the well's specific capacity has not fallen, which is a good sign because it means that the bacteria have so far produced only limited restriction of the aquifer's transmissivity. However, it is important not to wait too long to deal with this kind of problem, because transmissivity losses can become permanent if the bacterial sludge is allowed to remain in place for too long.

Another option would be to go ahead with shock-chlorination without redeveloping the well. This would be done after the previously described effort to get water samples for lab analysis of dissolved and total iron. Following chlorination, and then pumping the well to waste for some time thereafter, additional sampling for analysis of dissolved and total iron would be done to allow judgment of the effectiveness of the chlorination action.

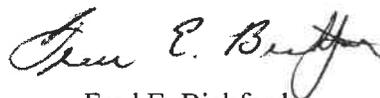
We have also discussed two additional site-specific factors in our efforts to understand the iron problem.

- We know that 2011 floods caused substantial riverbed erosion, and redistribution of sediments along the length of the adjacent reach of the river. This could have produced some changes in the connection between the river and the aquifer, which in turn could produce subtle changes in water chemistry. Such changes would likely be temporary, but it could take some time (perhaps many months) for a new water chemistry equilibrium to become established.
- The recent drought probably caused the average water level to fall lower than it has been for many years in the wetlands areas bordering the river. This could result in exposure of near-surface volumes of peat and organic-rich sediment to oxygenated conditions for the first time in years. Seepage of precipitation or water leaking from the riverbed through this newly exposed material could result in increased acidity of the water moving into the deeper aquifer. The solubility of iron increases with increasing acidity, allowing the water to dissolve more iron from the sediments the water is moving through as it moves deeper, so this kind of effect could increase the food supply of the iron-oxidizing bacteria around the well. If the drought had caused a pH change that increased the iron concentration of surface recharge sources, this effect would also likely be temporary.

Although the two factors discussed above are identified as potentially temporary, our suspicion is that the buildup of iron bacteria in PW-1 should be considered a potentially chronic issue that may have to be managed periodically, even though external factors may occasionally aggravate it.

After you have had a chance to review this, it would be good if Claude and I could have a phone conversation with you to go over the details of how you might proceed from here.

Sincerely,



Fred E. Bickford
Hydrogeologist



Saranac Lake Police Department

1 Main Street
Saranac Lake, NY 12983-1795



Telephone: (518) 891-4428
Fax: (518) 891-6321

SARANAC LAKE POLICE DEPARTMENT

2018 YEAR END SUMMARY REPORT

2018 Year end Statistics:

Calls for Service*	2487
Arrests	172
MHL Arrests	32
Accidents	107

*Calls for service do not include walk-ins at the station, traffic stops, parking tickets, other interaction with the public which does not necessitate documentation.

The Saranac Lake Police Department provides 24/7 police coverage in the Village of Saranac Lake. The department is currently staffed by a Chief-of-Police, 3 Sergeants and 8 Patrolmen. The department continues to provide various services to the community, including, but not limited to:

SCHOOLS:

- Members participated in a pre-prom mock DWI educational presentation at the high school.
- Assisted STOP DWI by conducting interactive activities with high school students.
- Providing DARE to Saranac Lake Central School Elementary students.
- Coordinate with staff regarding any and all concerns regarding school/student safety.
- Coordinate and participate in K9 sweeps of school lockers.
- Participate and police the emergency evacuation drill.

SPECIAL EVENTS:

- 2018 First Night
- Winter Carnival – Fireworks, Parade, Events
- St. Patrick Day Parade
- Olympic Watch Party
- Olympians Parade
- Saranac Lake Central School Vigil
- ANZAC Day
- Memorial Day Services
- Special Olympics Torch Run
- 90 miler canoe Race

Governor's visit – Community Development Announcement
Fourth of July Fireworks
Downtown Halloween
Veterans Day – Parade and Ceremony
Christmas Kiddie Parade
Christmas Tree Lighting

There were no notable incidents during any of these events.

RACES

Winter Carnival Fun Run
Olga Memorial foot race
Turkey Trot
Special Olympics Torch Run
Planned Parenthood Run

The department is a partner in the Franklin County Task Force to Combat Drug Addiction, Domestic Violence Task Force, Essex County Animal Cruelty Task Force, STOP DWI and the Community Relations Board.

2018 was a successful year in the area of methamphetamine enforcement with several investigations leading to arrests and significant narcotics confiscations. The assignment of a patrolman to conduct investigations has significantly enhanced the department's ability to investigate a variety of cases and close them by arrest. The DARE program continues to be a popular service that we provide to the children of our school district. Additionally, 2018 saw the transfer of Patrolman Travis Farmer and the hiring of Patrolman William Flynn. The department continues to update and replace old and outdated equipment while keeping up with the newest training techniques. The department was successful in policing numerous community activities (listed above) with no notable incidents or arrests.

I am also pleased to report a decrease in the crime rate index (see attached NYS Division of Criminal Justice Services Index Crimes 2013-2017). There are many variables that are associated with increases and decreases in crime, however, the actions of the police department are arguably one of the most significant. The clearance of cases by arrest has a deterrent effect and places repeat offenders under the supervision of probation and/or parole. As seen below the department has made over 900 arrests in the last 4 years, an average of 226.75 per year and 18.9 per month. This is a notable amount of arrests and indicative of the decrease in crime.

Saranac Lake Police Department Activity 2015 thru 2018:

Year	Calls for Service	Arrests	Accident Investigations
2015	2746	246	106
2016	3007	241	113
2017	3056	248	149
2018	2487	172	109

The department, in partnership with the community, looks forward to continued success in 2019.

NYS DIVISION OF CRIMINAL JUSTICE SERVICES

INDEX CRIMES REPORTED TO POLICE: 2013 - 2017

County	PD	Year	Incomplete/ # of Months Rptd	Index Total	Violent Crime					Property Crime			
					Violent Total	Murder	Rape	Robbery	Agg. Assault	Property Total	Burglary	Larceny	MV Theft
Franklin	Franklin County Park PD	2013		1	0	0	0	0	0	1	0	1	0
Franklin	Franklin County Park PD	2014		0	0	0	0	0	0	0	0	0	0
Franklin	Franklin County Park PD	2015		0	0	0	0	0	0	0	0	0	0
Franklin	Franklin County Park PD	2016		0	0	0	0	0	0	0	0	0	0
Franklin	Franklin County Park PD	2017		0	0	0	0	0	0	0	0	0	0
Franklin	Franklin County Sheriff	2013		1	0	0	0	0	0	1	0	1	0
Franklin	Franklin County Sheriff	2014		0	0	0	0	0	0	0	0	0	0
Franklin	Franklin County Sheriff	2015		0	0	0	0	0	0	0	0	0	0
Franklin	Franklin County Sheriff	2016		0	0	0	0	0	0	0	0	0	0
Franklin	Franklin County Sheriff	2017		0	0	0	0	0	0	0	0	0	0
Franklin	Franklin County State Police	2013		413	28	0	9	0	19	385	99	269	17
Franklin	Franklin County State Police	2014		409	30	0	1	1	28	379	63	301	15
Franklin	Franklin County State Police	2015		411	50	0	36	1	13	361	84	268	9
Franklin	Franklin County State Police	2016		337	59	0	43	1	15	278	59	211	8
Franklin	Franklin County State Police	2017		370	53	1	37	1	14	317	89	214	14
Franklin	Malone Vg PD	2013		196	4	0	0	2	2	192	28	161	3
Franklin	Malone Vg PD	2014		189	3	0	2	1	0	186	33	152	1
Franklin	Malone Vg PD	2015		244	23	0	8	2	13	221	37	180	4
Franklin	Malone Vg PD	2016		196	30	0	12	1	17	166	23	143	0
Franklin	Malone Vg PD	2017		163	27	0	12	1	14	136	31	100	5
Franklin	Saranac Lake Vg PD	2013		179	26	1	1	1	23	153	30	117	6
Franklin	Saranac Lake Vg PD	2014		126	9	0	1	0	8	117	27	88	2
Franklin	Saranac Lake Vg PD	2015		92	6	0	2	1	3	86	10	75	1
Franklin	Saranac Lake Vg PD	2016		88	13	0	1	0	12	75	7	67	1
Franklin	Saranac Lake Vg PD	2017		61	15	0	8	2	5	46	4	38	4
Franklin	Tupper Lake Vg PD	2013		86	3	0	0	0	3	83	22	59	2
Franklin	Tupper Lake Vg PD	2014		126	11	0	2	3	6	115	25	86	4
Franklin	Tupper Lake Vg PD	2015		94	9	0	7	1	1	85	18	67	0
Franklin	Tupper Lake Vg PD	2016		85	6	0	3	1	2	79	8	68	3
Franklin	Tupper Lake Vg PD	2017		94	5	0	0	1	4	89	12	74	3
Franklin	County Total	2013		876	61	1	10	3	47	815	179	608	28
Franklin	County Total	2014		850	53	0	6	5	42	797	148	627	22
Franklin	County Total	2015		841	88	0	53	5	30	753	149	590	14
Franklin	County Total	2016		706	108	0	59	3	46	598	97	489	12
Franklin	County Total	2017		688	100	1	57	5	37	588	136	426	26

RAPOR

John Sweeney

From: Mari Cecil
Sent: Monday, January 07, 2019 11:17 AM
To: Marlene.Martin, Matt.Haggerty, John Sweeney
Cc: Emily Sortevik; Taylor Woolf; Stacy Vincent; Shaun Lawrence; Stephen Shafer; 'Rob Gray'; Patrick Hourihan; kr.
Subject: Project: Franklin-Essex-Hamilton BOCES Additions & Reconstruction Phase 1 - Pre - Construction Waterline Coordination 2017-127 PH1

Marlene, Matt and John –

Happy New Year.

Franklin, Essex, Hamilton Boces received bids for the Addition and Reconstruction Work for the Adirondack Educational Center and have awarded the contracts to the contractors.

We are planning on having a waterline extension coordination meeting on Tuesday, January 15, 2019 at 10:00 am in the large conference room at AEC. This meeting is specifically for the waterline extension to this facility. We are hoping that a representative from each of your agencies will be available to attend. At this meeting will anticipate reviewing the contractor's schedule for the completion of the work and to review any specific information you may wish to review.

Please let me and Rob Gray know if you are available at this day and time.

Thanks, we look forward to hearing from you.

Mari L. Cecil, NCARB, AIA, CSI | *Senior Principal/Architect/NYS Certified Code Enforcement Officer*

BCA ARCHITECTS & ENGINEERS
327 Mullin Street | Watertown, New York 13601
tel 315.782.8130 | mobile 315.783-9563
[website](#)

WATERTOWN | ITHACA | SARATOGA

Project Name: Franklin-Essex-Hamilton BOCES Additions & Reconstruction Phase 1
Project Number: 2017-127 PH1

**Business of the Village Board
Village of Saranac Lake**

SUBJECT: Authorize Hire Admin Assist

Date: 1-14-19

DEPT OF ORIGIN:

Manager

Bill # 2 -2019

DATE SUBMITTED 12-27-18

EXHIBITS: _____

APPROVED AS TO FORM:

Village Attorney

Village Administration

EXPENDITURE
REQUIRED: \$

AMOUNT
BUDGETED: \$

APPROPRIATION
REQUIRED:

SUMMARY STATEMENT

Authorize the Village Manager to Hire Cassandra Hopkins provisionally for Administrative Assistant position, as per Union CBA.

RECOMMENDED ACTION

Approval of Resolution

MOVED BY: Little SECONDED BY: Shapiro

VOTE ON ROLL CALL:

MAYOR RABIDEAU

yes

TRUSTEE LITTLE

yes

TRUSTEE MURPHY

recused

TRUSTEE SHAPIRO

yes

TRUSTEE VANCOTT

recused

**RESOLUTION AUTHORIZING THE VILLAGE MANAGER TO OFFER EMPLOYMENT TO
CASSANDRA HOPKINS FOR ADMINISTRATIVE ASSISTANT**

WHEREAS, The Village of Saranac Lake has received Civil Service approval to offer Administrative Assistant position to Cassandra Hopkins.

WHEREAS, Upon success completion of the necessary pre-employment testing for the position as required by Civil Service,

WHEREAS, the position is a Civil Service Position and is required successfully pass required testing.

WHEREAS, Authorize Village Manager to provisionally hire Cassandra Hopkins the position of Administrative Assistant.

NOW, THEREFORE BE IT RESOLVED, The Village of Saranac Lake Board of Trustees authorizes the Village Manager upon successful of pre-employment test approval to appoint Cassandra Hopkins Administrative Assistant.

**Business of the Village Board
Village of Saranac Lake**

SUBJECT: Authorization for Representative to Execute Grant Agreement
FOR AGENDA OF 1-14-19

DEPT OF ORIGIN: Manager BILL # 3-2019

DATE SUBMITTED: 1-4-19 EXHIBITS: yes

APPROVED AS TO FORM:

Village Attorney

Village Administration

EXPENDITURE REQUIRED: \$	AMOUNT BUDGETED: \$0.00	APPROPRIATION REQUIRED: \$
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SUMMARY STATEMENT

Authorize Village Manager to execute agreement with NYS Environmental Facilities for Planning Grant
80922 Village of Saranac Lake Water Pollution Control Plant Study Grant

RECOMMENDED ACTION

APPROVAL OF RESOLUTION

MOVED BY: Shapiro SECONDED BY: Murphy

VOTE ON ROLL CALL:

MAYOR RABIDEAU

TRUSTEE LITTLE

YES

TRUSTEE MURPHY

YES

TRUSTEE SHAPIRO

YES

TRUSTEE VANCOTT

YES

**Authorization for Representative to Execute Grant Agreement
NYS Environmental Facilities Corporation
Engineering Planning Grant Agreement**

WHEREAS, The Village of Saranac Lake had submitted grant application for Water Pollution Control Plant Study NYS Environmental Facilities Corporation

WHEREAS, The Village of Saranac Lake was awarded Planning Grant #80922 Water Pollution Control Plant Study Engineering Study Report in the amount of \$30,000.00 to review overall condition of facilities, buildings and processes at the Waste Water Treatment Plant.

WHEREAS, The Village of Saranac Lake will be required to document and authorize the local match funding requirements of 20%

NOW, THEREFORE BE IT: Resolved that the Village of Saranac Lake Board of Trustees designate the Village Manager is authorized to execute a Grant Agreement with the NYS Environmental Facilities Corporation and any and all other contracts, documentation and instruments necessary to bring about the Project and to fulfill the Village of Saranac Lake obligations under the Engineering Planning Grant Agreement.

Authorization and appropriation of Local Match 20% (\$6,000.00)
NYS Environmental Facilities Corporation
Engineering Planning Grant Agreement

WHEREAS, The Village of Saranac Lake had submitted grant application for Water Pollution Control Plant Study to NYS Environmental Facilities Corporation

WHEREAS, The Village of Saranac Lake was awarded Planning Grant #80922 Water Pollution Control Plant Study in the amount of \$30,000.00 to review Waste Water Pollution Control Facility.

WHEREAS, The Village of Saranac Lake will be required to document and authorize the local match funding requirements of 20%. \$6,000.00 in the 2019/2020 budget for waste water

NOW, THEREFORE BE IT: Resolved that the Village of Saranac Lake Board of Trustees authorizes and appropriates a minimum of 20% as required by the Engineering Planning Grant Program for the Planning Grant # 80922 Water Pollution Control Plant Study project Under the Engineering Planning Grant Program. This local match must be at least 20% of the grant award of \$30,000.00. The Maximum local share appropriated in the 2019/2020 budget will be subject to any changes agreed to by the Village Manager shall not exceed \$6,000.00. The total estimated maximum project cost is \$36,000.00. The Village Manager may increase this local match through the use of in-kind services without further approval from the Village of Saranac Lake.

**NEW YORK STATE DEPARTMENT OF
ENVIRONMENTAL CONSERVATION**

625 Broadway
Albany, New York 12233-1010
www.dec.ny.gov

**NEW YORK STATE ENVIRONMENTAL
FACILITIES CORPORATION**

625 Broadway
Albany, New York 12207-2997
www.efc.ny.gov

Mr. John Sweeney
Village Manager
Village of Saranac Lake
39 Main St
Saranac Lake, NY 12983

DEC 21 2018

Re: Planning Grant: #80922
Village of Saranac Lake Water Pollution Control Plant Study

Dear Mr. Sweeney:

In 2011, Governor Cuomo launched the Regional Economic Development Councils and the Consolidated Funding Application (CFA) to provide each region with the tools to create and implement their own roadmap for economic prosperity and job creation. This community-based model uses local assets to drive local economic growth and has resulted in unprecedented partnerships and collaboration that are building a reinvigorated economy.

After seven successful rounds, the 2018 CFA made over \$750 million in economic development resources available from over thirty programs across ten state agencies. The agency programs provide resources for projects focused on community development and job creation, tourism, waterfront revitalization, energy and environmental improvements, sustainability, and low-cost financing. The Department of Environmental Conservation (DEC) and the Environmental Facilities Corporation (EFC) are proud to have contributed \$3 million to this year's CFA.

We are pleased to inform you that the above-referenced project has been selected to receive up to \$30,000 from the Wastewater Infrastructure Engineering Planning Grant (EPG) Program through the New York Clean Water State Revolving Fund. The actual amount of funding you will receive will be reflected in your grant agreement. If you applied for funding from other programs or other state agencies, you will receive information from those programs/agencies separately.

We are looking forward to working with you on your project. Please confirm that you are interested in using this funding for your project by sending your confirmation (or declination) and the name and contact information of the authorized project representative to the EFC at epg@efc.ny.gov within three weeks of the date of this letter. If we do not hear from you within this timeframe, we may withdraw the funding.



For your information, the *Project Checklist of Supporting Documents Needed for Grant Agreement with EFC* is attached. It is important to review this information carefully in order for you to remain on schedule and enter into a grant agreement with EFC. There are several steps that must be completed and we suggest that you begin working immediately on the procurement of engineering services for the preparation of the Engineering Report. If you have already procured engineering services, please forward the contract documents to EFC and begin working on the supporting documentation.

Please be aware that the grant requires that you make good faith efforts to obtain thirty percent participation by New York State certified Minority and/or Women Owned Business Enterprises and six percent participation from Service-Disabled Veteran-Owned Business Enterprises for contracted work that exceeds \$25,000. Additionally, this award requires that you provide a minimum twenty percent local match of the grant amount. For more information, visit www.efc.ny.gov/epg.

Upon receipt of your confirmation that you choose to accept this grant, your project coordinator, Mr. Jason Denno, will be reaching out to you to assist with completing all the required submittals necessary to execute a grant agreement with EFC. Unless otherwise notified by EFC, please note that the Village of Saranac Lake must execute a grant agreement with EFC no later than December 31, 2019 or the grant award may be forfeited.

If you should have any questions, please contact EFC at epg@efc.ny.gov or call (518) 402-7396.

Sincerely,



Basil Seggos
Commissioner



Sabrina M. Ty
President and CEO

Enclosure



CWSRF Engineering Planning Grants

Checklist of Supporting Documents Needed for Grant Agreement

- | <input checked="" type="checkbox"/> <u>Supporting Documentation Submitted to NYSEFC</u> | <u>Date of Document</u> |
|--|--------------------------------|
| <input type="checkbox"/> Board Resolutions
Board resolutions designating the Authorized Representative, Local Match, and SEQR Determination. See the Sample Resolution Language at www.efc.ny.gov/epg . | |
| <input type="checkbox"/> Authorized Representative Resolution
Board resolution designating an Authorized Representative for the project. | _____ |
| <input type="checkbox"/> Local Match Resolution
Board resolution authorizing and obligating local match funds. | _____ |
| <input type="checkbox"/> State Environmental Quality Review (SEQR) Act Resolution
Completion of Environmental Quality Review (SEQR) Act requirements and Board resolution declaring SEQR findings or determinations. | _____ |
| <input type="checkbox"/> Executed Engineering Agreement
All contracts must be signed by both parties, and must contain the scope of work and fee. | _____ |
| <input type="checkbox"/> Required Contract Language from State Financial Assistance Programs – Non-Construction Bid Packet
Inclusion of the “State Financial Assistance Programs – Non-Construction Bid Packet” Required Contract Language for professional service contracts over \$25,000. The Bid Packet can be found at www.efc.ny.gov/bid-packets . | |
| <input type="checkbox"/> Compliance with New York State Minority/Women-owned Business Enterprises (MWBE), New York State Service-Disabled Veteran-Owned Business (SDVOB), and Equal Employment Opportunity (EEO) Requirements
The combined M/WBE goal will be 30%. The SDVOB goal will be 6%. | |
| <input type="checkbox"/> MWBE-EEO Workplan (For contracts over \$25,000) | _____ |
| <input type="checkbox"/> Approvable MWBE Utilization Plan/Waiver Request (For contracts over \$25,000) | _____ |
| <input type="checkbox"/> Approvable SDVOB Utilization Plan/Waiver Request (For contracts over \$25,000) | _____ |
| <input type="checkbox"/> EEO Policy and EEO Staffing Plan (For all contracts) | _____ |
| <input type="checkbox"/> Lobbying Certification 40 CFR 34 (For contracts over \$100,000) | _____ |
| <input type="checkbox"/> Budget & Plan of Finance
Detailed final budget and plan of finance including all third party funding agreements, and satisfaction of the minimum 20% local match requirement. Use the Budget and Plan of Finance Form at www.efc.ny.gov/epg . | _____ |

**Business of the Village Board
Village of Saranac Lake**

SUBJECT: SEQR Type II Determination Water Pollution Control Plant Study #80922
FOR AGENDA OF 1-14-19

DEPT OF ORIGIN: Manager BILL # 5-2019

DATE SUBMITTED: 1-4-19 EXHIBITS:

APPROVED AS TO FORM:

Village Attorney

Village Administration

EXPENDITURE
REQUIRED:

AMOUNT
BUDGETED:

APPROPRIATION
REQUIRED:

SUMMARY STATEMENT

Whereas the Village of Saranac Lake has requested and been granted an Environmental Planning Grant for Water Pollution Control Plant Study #80922 in the amount of \$30,000.00. Whereas the Village has determined that the SEQR determination for the EPG Planning Grant is a Type II Action: Information collection including basic data collection and research, water quality and pollution studies, traffic counts, engineering studies, surveys, subsurface investigations and soils studies that do not commit the agency to undertake, fund or approve any Type I or Unlisted action AND Conduction concurrent environmental, engineering, economic, feasibility and other studies and preliminary planning and budgetary processes necessary to the formulation of a proposal for action, provided those activities do not commit the agency to commence, engage in or approve such actions

RECOMMENDED ACTION

APPROVAL OF RESOLUTION

MOVED BY: Van Cott SECONDED BY: Little

VOTE ON ROLL CALL:

MAYOR RABIDEAU _____

TRUSTEE LITTLE YES

TRUSTEE MURPHY YES

TRUSTEE SHAPIRO YES

TRUSTEE VANCOTT YES

**SEQR Type II Determination
NYS Environmental Facilities Corporation
Engineering Planning Grant Agreement #80922**

WHEREAS, The Village of Saranac Lake had submitted grant application for Water Pollution Control Plant Study to NYS Environmental Facilities Corporation

WHEREAS, The Village of Saranac Lake was awarded Planning Grant #80922 Water Pollution Control Plant Study in the amount of \$30,000.00 to review Water Pollution Control Plant Study.

WHEREAS, 6NYCRR Section 617.5 (title 6 of the New York Codes of Rules and Regulations) under the State Environmental Quality Review Act (SEQR) provides that certain actions identified in subdivision (c) of that section are not subject to environmental review under the Environmental Conservation Law;

NOW, THEREFORE BE IT: Resolved that the Village of Saranac Lake Board of Trustees hereby determines that the proposed Water Pollution Control Plant Study engineering report Planning Grant #80922 project is a Type II action in accordance with 6 NYCRR Section 617.5(c) Information collection including basic data collection and research, water quality and pollution studies, traffic counts, engineering studies, surveys, subsurface investigations and soils studies that do not commit the agency to undertake, fund or approve any Type I or Unlisted action AND Conduction concurrent environmental, engineering, economic, feasibility and other studies and preliminary planning and budgetary processes necessary to the formulation of a proposal for action, provided those activities do not commit the agency to commence, engage in or approve such actions

**VILLAGE OF SARANAC LAKE BOARD OF TRUSTEES
RESOLUTION AUTHORIZING INCREASING
THE GENERAL FUND BUDGET AND
AUTHORIZING THE USE & TRANSFER OF FUNDS FROM
THE WATER WELL SYSTEM RESERVE**

SUBJECT: APPROVE USE OF RESERVE FOR AGENDA OF 1/14/19

DEPT OF ORIGIN: JOHN SWEENEY BILL # 6-2019

DATE SUBMITTED: 1/9/19 EXHIBITS: HydroSource 12/27/18 letter

APPROVED AS TO FORM:

Village Attorney

Village Administration

EXPENDITURE	AMOUNT	APPROPRIATION
REQUIRED: \$100,000	BUDGETED: \$0.00	REQUIRED: \$100,000

SUMMARY STATEMENT

Authorize the Village Treasurer to increase the General Fund Budget and to transfer up to \$100,000 from the Water Well System Reserve to the General Fund to cover the cost of the process of redevelopment of the wells to address iron bacteria present. The use of the reserve is subject to Permissive Referendum.

RECOMMENDED ACTION

APPROVAL OF RESOLUTION.

MOVED BY: Van Cott SECONDED BY: Murphy

VOTE ON ROLL CALL:

MAYOR RABIDEAU _____

TRUSTEE LITTLE YES

TRUSTEE MURPHY YES

TRUSTEE SHAPIRO YES

TRUSTEE VANCOTT YES

**VILLAGE OF SARANAC LAKE BOARD OF TRUSTEES
RESOLUTION AUTHORIZING INCREASING
THE GENERAL FUND BUDGET AND
AUTHORIZING THE USE & TRANSFER OF FUNDS FROM
THE WATER WELL SYSTEM RESERVE**

WHEREAS, the Village of Saranac Lake Board of Trustees has previously established a Type Capital Reserve Fund known as the “Water Well System Reserve” pursuant to section 6-c [6-g] of the General Municipal Law as amended, and

WHEREAS, the Village of Saranac Lake Board of Trustees seek to address redevelopment of the wells due to presence of iron bacteria is, and

WHEREAS, the estimated cost is not to exceed \$100,000, and

WHEREAS, the use of any funds from the Water Well System Reserve is subject to Permissive Referendum,

NOW, THEREFORE BE IT RESOLVED, authorization is hereby given to the Treasurer to increase the General Fund Budget by \$100,000 to cover the costs of the redevelopment of the wells, and

BE IT FURTHER RESOLVED, that the Village Treasurer is authorized to transfer up to \$100,000 from the Water Well System Reserve to cover the cost of the redevelopment, and

BE IT FURTHER RESOLVED, that the Village Clerk is authorized to make public notice for the intended use of the reserve subject to Permissive Referendum.



HydroSource Associates, Inc.

Post Office Box 609 • 50 Winter Street • Ashland, NH 03217

Telephone: (603) 968-3733 • fax: (603) 968-7605

website: www.teamhydrosorce.com

December 27, 2018

Kevin Pratt, WWTP Operator
Village of Saranac Lake
95 Van Buren Street
Saranac Lake, NY 12983

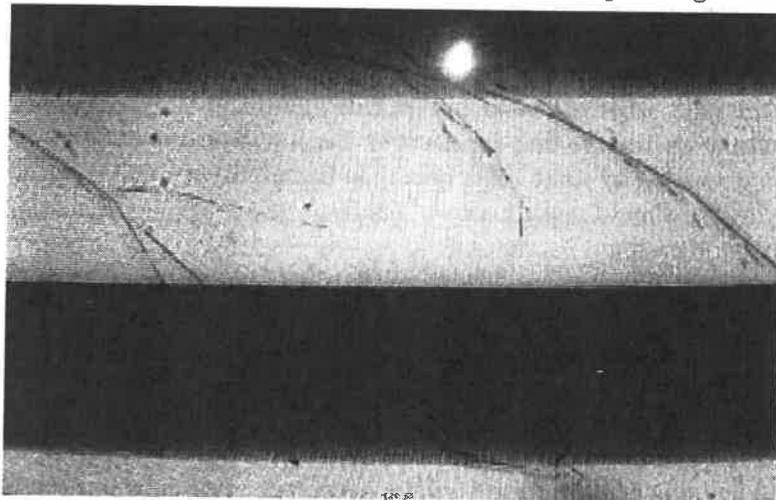
Dear Kevin:

We have been discussing the iron problem you have been seeing in Well PW-1. To recap the situation, you told us last summer that you had begun getting complaints about iron problems from some parts of the distribution system. You tested both wells, and found an iron concentration of 0.40 mg/l from a water sample taken from Well PW-1, much higher than the level of 0.059 mg/l seen at the end of the 72-hour test that was run when we were getting the wells permitted in 2009. In contrast, iron in Well PW-2 was below the lab detection level of 0.02 mg/l in 2009, and remained low in your recent sampling.

Last week, you sent us a microscopic image of a water sample from PW-1, part of which is shown as Figure 1. The structures visible in the image resemble textbook illustrations of filamentous iron-fixing bacteria, which consist of masses of very thin, branching fibers.

The bacteria live on dissolved ferrous (Fe^{2+}) iron. They are capable of oxidizing the iron to produce ferric (Fe^{3+}) iron, and they live on the energy that is released by the oxidation reaction. Ferric iron is largely insoluble in the range of pH and Eh conditions found in aquifers and wells, and the result of the bacterially-facilitated oxidation reaction is a gradual accumulation of very fine-grained ferric iron sludge captured in branching filaments like the ones shown in your photograph. Over time, these can build up to form gelatinous filament masses in the well screen, and sometimes extending some distance out into the aquifer around the screen (and sometimes substantially blocking flow).

Figure 1 - PW-1 Water Sample Microscope Image



The bacteria don't need much dissolved oxygen to thrive if the Eh/pH conditions favor the oxidation reaction. A concentration of 0.1 mg/l would be sufficient, especially in a high-yielding well where a large volume of water is rushing past the site of the bacterial colony. However, the rate of buildup of the filamentous slime might be faster at higher concentrations of dissolved (ferrous) iron.

If this is the source of the iron problems, then it seems likely that the rate at which PW-1 delivers fine-grained iron precipitate to the distribution system is highly variable. Assuming that the average concentration of dissolved iron remains similar to what it was 10 years ago (0.059 mg/l), then of course the average rate of contribution to the system cannot be much higher than that. What may happen is that a mass of filamentous iron gradually builds up in the well, but eventually becomes unstable. Then, when chunks of the bacterial colony break off, and get pumped into the system, total iron concentrations temporarily spike. The largest contributions could occur near the start of a pumping cycle, when there is a sudden velocity increase, and loose clumps of bacterial sludge become detached from the screen.

To help confirm this hypothesis, we suggest that you run the following test. Pump Well PW-1 to waste for 24 hours. Collect water samples for lab analysis after one hour, eight hours, and 24 hours. At each sampling time, collect one filtered sample (for analysis of dissolved iron) and one unfiltered sample (analysis of total iron). Use a 45-micron filter for the filtered sample. Also get a turbidity analysis on each unfiltered sample. After we see the results of that testing, we can make detailed recommendations on dealing with the problem.

Here is what we expect to recommend based on what we know so far. We think you should clean the well to remove the iron sludge that has accumulated on the screen, and shock-chlorinate it to kill off the colony of iron bacteria. Cleaning will require removal of the pump, to allow insertion of a swab or surge block to physically remove the built-up bacterial sludge. If the pump has to be removed anyway, it probably makes sense to go ahead with full redevelopment of the well. That will probably include pump-and-surge development like that employed right after the wells were first constructed, but it will also include shock-chlorination (possibly supplemented by some other chemical treatment) at some stage in the process. The drill contractor should make his own diagnosis of the best approach, in consultation with us if that is what you prefer.

In specifying redevelopment tasks for PW-1, our first interest should be in removing as much as possible of the fine-grained iron sludge that may be partly filling pore space in the aquifer surrounding the screen, and killing off the iron bacterial colony. We need to eliminate the bacteria occupying that volume as completely as possible, though it should be understood that the bacteria can't be wiped out permanently. The colony can be expected to re-establish itself, and periodic control efforts will be necessary. It sounds like the well's specific capacity has not fallen, which is a good sign because it means that the bacteria have so far produced only limited restriction of the aquifer's transmissivity. However, it is important not to wait too long to deal with this kind of problem, because transmissivity losses can become permanent if the bacterial sludge is allowed to remain in place for too long.

Another option would be to go ahead with shock-chlorination without redeveloping the well. This would be done after the previously described effort to get water samples for lab analysis of dissolved and total iron. Following chlorination, and then pumping the well to waste for some time thereafter, additional sampling for analysis of dissolved and total iron would be done to allow judgment of the effectiveness of the chlorination action.

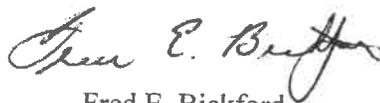
We have also discussed two additional site-specific factors in our efforts to understand the iron problem.

- We know that 2011 floods caused substantial riverbed erosion, and redistribution of sediments along the length of the adjacent reach of the river. This could have produced some changes in the connection between the river and the aquifer, which in turn could produce subtle changes in water chemistry. Such changes would likely be temporary, but it could take some time (perhaps many months) for a new water chemistry equilibrium to become established.
- The recent drought probably caused the average water level to fall lower than it has been for many years in the wetlands areas bordering the river. This could result in exposure of near-surface volumes of peat and organic-rich sediment to oxygenated conditions for the first time in years. Seepage of precipitation or water leaking from the riverbed through this newly exposed material could result in increased acidity of the water moving into the deeper aquifer. The solubility of iron increases with increasing acidity, allowing the water to dissolve more iron from the sediments the water is moving through as it moves deeper, so this kind of effect could increase the food supply of the iron-oxidizing bacteria around the well. If the drought had caused a pH change that increased the iron concentration of surface recharge sources, this effect would also likely be temporary.

Although the two factors discussed above are identified as potentially temporary, our suspicion is that the buildup of iron bacteria in PW-1 should be considered a potentially chronic issue that may have to be managed periodically, even though external factors may occasionally aggravate it.

After you have had a chance to review this, it would be good if Claude and I could have a phone conversation with you to go over the details of how you might proceed from here.

Sincerely,



Fred E. Bickford
Hydrogeologist

**Business of the Village Board
Village of Saranac Lake**

SUBJECT: Authorization RFP for 2019 Wastewater Treatment Plant Disinfection and Secondary Process Upgrades

FOR AGENDA OF 1-14-19

DEPT OF ORIGIN: Manager BILL # 7-2019

DATE SUBMITTED: 1-10-19 EXHIBITS:

APPROVED AS TO FORM:

Village Attorney

Village Administration

EXPENDITURE
REQUIRED: \$

AMOUNT
BUDGETED:

APPROPRIATION
REQUIRED:

SUMMARY STATEMENT

Authorize RFP for engineering services for 2019 Wastewater Treatment Plant Disinfection and Secondary Process Upgrades

RECOMMENDED ACTION

APPROVAL OF RESOLUTION

MOVED BY: Little SECONDED BY: Shapiro

VOTE ON ROLL CALL:

MAYOR RABIDEAU

TRUSTEE LITTLE

YES

TRUSTEE MURPHY

YES

TRUSTEE SHAPIRO

YES

TRUSTEE VANCOTT

YES

Village of Saranac Lake, New York

Request for Qualifications/Proposal: 2019 Wastewater Treatment Plant Disinfection and Secondary Process Upgrades

PROJECT NUMBER: P-WWTP UV-2019

DATE ISSUED: January 15th 2019

Program Requirements:

- New York State, Environmental Facilities Corporation

<https://www.efc.ny.gov/bid-packets> (Program Requirements and Bid Packet for Non-Construction Contracts)

- New York State, Department of Environmental Conservation

<https://www.dec.ny.gov/pubs/101565.html> (Contracts Process, Documents and Forms) All documentation and reporting requirements.

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REQUEST FOR PROPOSALS – ENGINEERING SERVICES

INTRODUCTION

A. Overview

This Request for Proposals (“RFP”) is being issued by the Village of Saranac Lake (“the Village”) for engineering planning, design and construction period services to construct treatment facilities improvements at the existing Village treatment plant to address NYS DEC requirements for effluent disinfection. The design and construction project will be funded by New York State Environmental Facilities Corporation and NYS DEC WQIP grant funds. All aspects must be compliant to their respective requirements, which are included herein as Appendix A-1 and Appendix A-2.

Companies with demonstrated experience in civil engineering projects and public funding agency administration interested in making their services available to Village of Saranac Lake are invited to respond to this RFP. “Respondents” means the companies or individuals that submit proposals in response to this RFP. It is understood that the selected Respondent acting as an individual, partnership, corporation or other legal entity, is licensed to provide such services in New York State. The Respondent shall be financially solvent and each of its members if a joint venture, its employees, agents or sub-consultants of any tier shall be competent to perform the services required under this RFP document.

The Village of Saranac Lake is seeking to encourage participation by respondents who are DBE/MBE/WBE/SDVOB , business enterprises. For the purposes of the project, the Village of Saranac Lake is requiring a documented DBE/MBE/WBE/SDVOB participation compliance & good faith effort per the NYS EFC Program requirements listed in Appendix A-1 by providing evidence of direct solicitation after contract award, but before given Notice to Proceed.

Nothing in this RFP shall be construed to create any legal obligation on the part of the Village of Saranac Lake or any respondents. The Village reserves the right, in its sole discretion, to amend, suspend, terminate, or reissue this RFP in whole or in part, at any stage. In no event shall the Village be liable to respondents for any cost or damages incurred in connection with the RFP process, including but not limited to, any and all costs of preparing a response to this RFP or any other costs incurred in reliance on this RFP. No respondent shall be entitled to repayment from the Village for any costs, expenses or fees related to this RFP. All supporting documentation submitted in response to this RFP will become the property of the Village. Respondents may also withdraw their interest in the RFP, in writing, at any point in time as more information becomes known.

B. Time of Response

Respondents will have approximately Three (3) weeks to provide a response to this RFP. The Village will review the proposals and respond within one (1) week of RFP closure, after Village Board Meetings are held.

1. RFP Posted: **Tuesday, January 15st, 2019**
2. Statements Due: **Friday, February 8th by 2:00 pm.**
3. Proposal Review: **February 11th - February 15th 2018**
4. Contract Awarded estimated: **February 18th 2018 (Special Board Meeting)**

C. Term of Contract

Any contract awarded pursuant to this RFP solicitation shall comply with the Village of Saranac Lake SPDES permit NY0021733 requirements. Contract shall be for a minimum three (3) year period, expiring upon completion of the projects' administrative close out and completion of the scope of work described herein. In addition, specific dates therein are identified as:

December 31st 2020 Engineering Plans, Specifications and Construction Schedule for the implementation of disinfection.

December 31st 2022 Completion of construction of the treatment facilities in accordance with the DEC approved schedule.

May 1st 2023 Commence operation of the system and comply with the final effluent limitations for Fecal Coliform and Total Residual Chlorine.

D. Funding Agency Requirements

Award recipients must follow the guidance provided by New York State Environmental Facilities Corporation and NYS DEC WQIP requirements, which some excerpts are included in this RFP as Appendix A-1 and Appendix A-2 for reference. All Respondents must demonstrate capability to adhere to the following Funding Agencies' requirements:

- <http://www.dec.ny.gov/pubs/101565.html>
- <https://www.efc.ny.gov/bid-packets>
- **Davis Bacon Related Acts (DBRA) Compliance**
- **Disadvantaged Business Enterprises (DBE), Minority Women Business Enterprise (MWBE) Compliance and Service-Disabled Veteran-Owned Business Enterprise (SDVOB).**
- **Equal Employment Opportunity (EEO) Compliance**
- **Anti-Lobbying Policy**
- **Non-Collusive Bidding Certification (Appendix H)**
- **Vendor Responsibility Questionnaire (Appendix F)**

Respondents are strongly encouraged to read these regulations prior to submitting their response to this RFP. Dates and schedules provided by the above funding agencies will be incorporated into project scope of work and schedule requirements.

PROFESSIONAL SERVICE REQUIREMENTS

A. Scope of Work

The Village of Saranac Lake seeks proposals from qualified respondents to provide engineering, planning, design and construction services for capital improvements to the existing Village of Saranac Lake wastewater treatment plant. The project consists of improvements to the secondary process that include the additional secondary clarifier, return sludge, waste sludge, and flow distribution to clarifiers. These improvements along with the primary requirement for construction of new disinfection facilities to meet NYS DEC requirements is the project as described and found in Appendix K of this RFP. The project is summarized as follows:

- Replacement effluent pipe upsized for current design flows.
- Replacement outfall structure for connection of the replacement effluent pipe to the existing outfall pipe.
- Replacement effluent flume upsized for current design flows and located at an appropriate hydraulic elevation for new clarifier and disinfection system and design flood elevations.
- Final clarifier replacement (smaller 60 ft diameter existing) with a larger clarifier 80 ft in diameter.
- Recommissioning or repurposing of existing 60 ft diameter clarifier.
- Replacement of the distribution box that directs and splits flows between the clarifiers.
- Relocation of the RAS and WAS sludge pumping facilities and replacement of the aged sludge pumps.
- Disinfection, effluent flume, and sludge pumping is proposed to be located in a new building located in proximity to the current 80 ft diameter clarifier.

Overview of Engineer responsibilities:

- **General Requirements:**
 - Engineer shall produce and manage the Project Schedule and be responsible for own deliverables to be complete such that reasonable time is allotted for, which is assumed to be **four hundred (400)** days of construction.
 - Engineer shall be responsible for Project Management & coordinate at a minimum of (1) project meetings a month for each phase of the project with all stakeholders.
 - All permitting activities must be included for submission to involved regulatory agencies. Engineer will be responsible for producing documents to support all necessary permits, filling out and filing of applications.
 - Program Management for Funding Program compliance through the lifecycle of the project.
 - *Include "Mileage" fees in this LS category.*
- **Survey & Mapping**
 - Provide aerial mapping, ground control survey, and boundary survey.

- Provide all supplemental mapping of existing utilities and features necessary for the completing the project.
- **Schematic Designs:** *(30% completion to completely support permitting processes)*
 - Any required surveys, Preliminary Designs and Schematic Designs shall be completed at the end of this deliverable and will be sufficient to complete any and all local permitting requirements completed.
 - A basis of design document must be compiled as a part of the schematic design process, submitted and approved by NYS DEC prior to completion of final design of wastewater treatment improvements.
- **Final Designs:** *(100% complete & approvable for Regulatory/Funding Agency reviews)*
 - Final Design Phase deliverable shall include all necessary drawings and specifications for the project to be approved by APA, NYS DEC, local highway, NYS DOT **and any others as required** for the purposes of Bidding.
 - All Construction Documents shall be compliant by APA, NYS DEC, local highway, NYS DOT, Army Corps and Funding Program requirements, contain clarifications to construction bidders for compliance with these agencies **and any others as required.**
- **Bidding Phase:** *(incl. Program Compliant "Construction Documents")*
 - Respondents shall include service for providing bidding services for the project that is compliant with Funding Program requirements and provides the Village with the best value and ability to meet the project constraint schedule and budget.
 - Respondents shall organize and lead the Pre-Bid Meeting and keep Meeting Minutes and respond to any and all Request for Information (RFIs).
 - *Include "Printing" and "Postage" fees in this LS category.*
- **Construction Administration:**
 - Respondents shall organize and lead the Preconstruction Meeting and keep Meeting Minutes during all Construction Phase and Post Construction activities.
 - Respondents shall provide services during construction administration to ensure that the project is Funding Program compliant by requiring any and all reports be provided along with payment applications in the form of monthly submittals.
 - Respondents shall also ensure the project meets the established schedule and budget constraints.
 - Respondent shall include biweekly project meetings during the construction period, estimated to be 400 days of construction for the purposes of this RFP.
- **Post Construction:**
 - Respondents shall ensure that the project is constructed as designed and meets all codes and regulations.
 - Respondents shall also ensure that all project close out documents are complete and in order for auditing and/or archival.
 - Respondent shall provide asbuilt survey for the construction project.
 - Respondent shall provide Manufacturers and NYS DEC compliant plant specific Operations and Maintenance Manual update to the existing document on file with NYS DEC.

- **Resident Project Representative (RPR) Services:**
 - Respondents shall provide costs for conducting the RPR Services. For the purpose of this RFP allow for 400 days of construction.
 - **Provide this RPR services Cost Proposal as HOURLY rates, not a Lump Sum basis.**
- **Reimbursables: (Limited to Cost + 10%)**
 - *Geotechnical Evaluations (as required)*
 - *Archaeological Evaluations (as required)*
 - *Surveys (as required)*

B. Quality of Work

All work shall follow recognized professional practices and standards and meet the specifications required by local, state and federal approval of the project's plans and specification prior to advertising the project for construction bidding.

C. Records

The design professional is to maintain all books, documents, papers, account records and other evidence pertaining to this work and to make such materials available at their respective offices at all reasonable times during the agreement and for a period up to seven **(7) years** from the date of final payment under the agreement. Throughout the project, the respondent will be required to coordinate with the Village via regular project meetings and other electronic project management software.

All reports, documents, information, presentations, electronic drawings, and other materials prepared by the award recipient in connection with this Agreement are the Owner's sole property in which the award recipient has no proprietary or other rights or interests. All reports, documents, information and any materials or equipment furnished to the award recipient by the Owner shall remain the sole property of the owner and except for the award recipient's limited possession of the purpose of carrying out the Work, shall be returned to the Owner at the conclusion of the Agreement. **Nothing written in this paragraph, however, will be interpreted to forbid the award recipient from retaining a single copy of the information for its files.**

D. Additional Requirements

Professional services shall comply with all codes, standards, regulations, and workers' safety rules that are administered by federal agencies (HUD, EPA, OSHA, and DOT), state agencies (State OSHA, DNR, and DCH), and any other local regulations and standards (i.e. local ordinance and building codes) that may apply.

SUBMITTAL REQUIREMENTS

A. Preliminary Requirements:

1. *Certificate of Authority (Corporation) or Certificate of Existence (ex: Professional Limited Liability Company or “PLLC”) issued by the NY Secretary of State
2. *Evidence of Insurance: Commercial General Liability with limits not less than \$2,000,000; Workers Compensation and Employers Liability with limits not less than \$500,000; and, Automobile Liability with limits not less than \$1,000,000 per occurrence.
3. *References: At least three (3) references of related projects, including date of project, contact person and phone number, and a brief description of the project.
4. *Conflict of Interest Statement & Supporting Documentation: Respondent shall disclose any professional or personal financial interests that may be a conflict of interest in representing the Village. In addition, all Respondents shall further disclose arrangement to derive additional compensation from various investment and reinvestment products, including financial contracts.
5. *Non-Collusion Bidding Affidavit: Provide completed, signed & notarized form back with Response
6. *Iran Divestment Act Compliance Form: Provide completed & signed form back with Response

**RFP RESPONSE WILL BE CONSIDERED INCOMPLETE AND NOT SCORED IF THESE ITEMS ARE NOT PROVIDED IN COMPLETION*

B. Letter of Interest

Submit a Cover Letter of Interest signed by a duly authorized officer or representative of the Respondent, not to exceed two pages in length. The Letter of Interest must also include the following information:

- The principal place of business and the contact person, title, telephone/fax numbers and email address.
- A brief summary of the qualifications of the Respondent and team.
- Description of organization (i.e. Professional Corporation, or Professional Limited Liability Company).
- The names and business addresses of all Principals of the Respondent. For purposes of this RFP “Principals” shall mean persons possessing an ownership interest in the Respondent.
- If the Respondent is a partially owned or fully-owned subsidiary of another organization, identify the parent organization and describe the nature and extent of the parent organization’s approval rights, if any, over the activities of the Respondent.
- If the Respondent is a partially owned or fully-owned subsidiary of another organization, identify the parent organization and describe the nature and extent of the parent organization’s approval rights, if any, over the activities of the Respondent.

- The Certification attached hereto at the end of this RFP and incorporated herein by reference must be signed by Respondent and attached to the Letter of Interest

C. Main Proposal

The purpose of the proposal is to demonstrate the qualifications, project approach and capacity of the Respondents in conformity with the requirements of this RFP. As such, the substance of proposals will carry more weight than their form or manner of presentation. The proposal should demonstrate the qualifications of the firm and of the particular staff to be assigned to this project. It should also specify an approach that will meet the request for proposals requirements.

The proposal should address all the points outlined in the request for proposals. The proposal should be prepared simply and economically, providing a straightforward, concise description of the proposer's capabilities to satisfy the requirements of the request for proposals. While additional data may be presented, the following items must be included; this represents the criteria against which the proposal will be evaluated.

1. **Qualifications Proposal:** Provide a synopsis of the years of experience and detailed qualifications in performing the range of municipal Wastewater treatment disinfection and secondary process upgrades on various project types in compliance with applicable standards, including team's resumes. Respondents should provide narrative examples of a minimum of three (3) projects in detail that are similar in nature to projects described in the RFP (see "References"). References for similar projects and portfolio vignettes will be reviewed to evaluate the level of experience.
2. **Technical Proposal:**
 - a. **Project Management Plan:** Discuss approach to the project in terms of understanding of the established Scope and Deliverables execution, with regard to any constraints identified in this RFP, to include funding requirements. Provide a plan for engaging the Village's project team and regulatory agencies required. Provide the number of full-time and part-time employees, partnerships or sub consultants proposed and their value to the project.
 - b. **Schedule:** Capacity to complete the scope of work within the defined period of performance. The successful Respondent will have a detailed project schedule & work plan to illustrate the ability complete the work with respect to constraints, either stated or assumed. The Schedule Proposal must include a Gantt chart to illustrate your proposed schedule.
 - c. **Funding Agency Experience:** Respondents should state whether they are an DBE/MBE/WBE/SDVOB or Section 3 business enterprise; if so, provide a copy of a current DBE/MBE/WBE/SDVOB certification letter. Respondents may also cite previous project experience in working with DBE firms, cite any existing partnerships with DBEs or cite the planned DBE partnerships relevant to addressing requirements of this project & RFP. If Respondents are planning to cite proposed DBE partnerships for this project (e.g., no existing contract vehicle), please provide contact information for reference checks with the appropriate point of contact for validation.

3. Cost Proposal:

- a. Cost will not be the primary factor in the selection of firm. The proposed price will be graded based upon the following formula:
 - Average Bid / Your Price = X (whereby X cannot exceed 100%)
 - X *15 points = Points awarded based on cost

- b. This should include the lump sum/unit rates for different Tasks. Respondents should include a description of the costs and detail proposals for *cost savings* in their Proposal. Labor cost estimates will include payments of prevailing wage rates as determined by the NYS Department of Labor and Industries as applicable (such as Survey work for example).

EVALUATION CRITERIA AND SCORING

In evaluating responses to this Request for Proposal, the Village will score base on best value taking into consideration the experience, technical approach, and costs that are being proposed by the Respondent. The following Evaluation Criteria will be considered in reviewing submittals:

The point system is to evaluate the experience and capacity of the Respondent.

1. Respondents will be awarded up to **20 points** for **Experience**, including professional qualifications, staffing, and client references.
2. Respondents will be awarded up to **40 points** for a description of services and technical approach for the Engineering Planning Grant.
3. Respondents will be awarded up to **25 points** for **Pricing and proposed Cost Savings**.
4. Respondents will be awarded up to **15 points** for the completeness of the proposal in accordance with the RFP and NYS EFC funding requirement..

SELECTION PROCESS

The Selection Committee comprised of the Village and resources from Essex County staff will review qualifications in accordance with the evaluation criteria set forth herein. Proposals that are submitted timely and comply with the mandatory requirements of the RFP will be evaluated in accordance with the terms of the RFP. Any professional services contracts resulting from this RFP will not necessarily be awarded to the Respondent with the lowest price. Instead, professional services shall be awarded to vendor whose proposal received the most points in accordance with criteria set forth in RFP.

QUESTIONS

Questions regarding this RFP should be submitted in writing via email to Kevin Pratt at wwtp@saranaclakeny.gov between the hours of 0900 – 1500 only. Any RFI responses will in turn be made available to all Respondents as they are received by means of direct emails; RFI's will not be posted publically as typical for conventional Bid Registry's.

Site Visits regarding the project should be submitted via phone call to Kevin Pratt, the Village Chief Operator @ (518) 891-3037 between the hours of 0800 – 1400 only.

SUBMITTAL DUE DATE

Responses to this RFP are due by 2:00pm on February 8, 2019. RFP responses must be submitted via electronic PDF sent to the following email:

CLERK@SARANACLAKENY.GOV

The Village will not be responsible for correct time and date stamped receipt of proposal. If you run into technical difficulties providing your response by the web link above, it is also acceptable to submit your RFP responses in PDF form (via USB flash-drive) in the mail to the RFP point of contact:

Contact: Kareen Tyler, Village Clerk

(Address) Village of Saranac Lake, 39 Main St, 2nd Floor, Saranac Lake, NY 12983

Each Respondent shall receive a confirmation of their submission via email, regardless of manner of RFP response. Respondents are advised to adhere to the Submittal Requirements. Failure to comply with the instructions of this RFP will be cause for rejection of submittals. **NO HARD COPIES WILL BE ACCEPTED.**

RFP SUBMITTAL REQUIREMENTS CHECKLIST

FORMS FROM RFO PACKAGE TO RETURN:

RFP Submittal Requirements Checklist (*Provide Checklist with RFP Response*)

*Appendix C: References (Minimum 3 related projects)

*Appendix D: Conflict of Interest Statement & Supporting Documentation

*Appendix E: Certification of Authority

- Aka, Certificate of Good Standing (Corporation) or Certificate of Existence (Limited Liability Company) issued by the Secretary of State (If Respondent is a joint venture, a Certificate of Good Standing or Certificate of Existence, as applicable, must be submitted for each entity comprising the joint venture.)

*Appendix F: Vendor Responsibility Questionnaire (if over \$100K in proposed contract value)

*Appendix G: W-9 Form

*Appendix H: Non-Collusive Bidding Certification

*Appendix I: Iran Divestment Act Compliance Form

*Appendix K: Deliverables Table with proposed costs

FOR THE RESPONDENT TO PROVIDE:

Letter of Interest

Qualifications Proposal:

- Description of Company
- Capacity of Company
- State License and or Certification

Technical Proposal:

- Project Management Plan (*Describe your approach in detail*)
- Schedule Proposal (*Provide in a Gantt Chart format*)
- Experience with DBE/MBE/WBE, Local Hiring, HUD Section 3, if applicable

Pricing Proposal Description

*Evidence of Insurance

*These documents must be submitted and complete before the Village will review the remainder of the proposal:

APPENDIX A-1: NYS EFC PROGRAM REQUIREMENTS

APPENDIX A-2: NYS DEC PROGRAM REQUIREMENTS

APPENDIX B: PROJECT PLANNING AREA

APPENDIX C: ENGINEER REFERENCES

APPENDIX D: CONFLICT OF INTEREST STATEMENT

_____ (“Respondent”)

Conflict of Interest Statement

The owner(s), corporate members or employees of [Respondent], shall derive any personal profit or gain, directly or indirectly, by reason of his or her participation with the [the Village of Saranac Lake]. Each individual shall disclose to the [the Village of Saranac Lake] any personal interest or direct relationship which he or she may have and shall refrain from participation in any decision making in related manners.

Any owner, corporate member or employee of [Respondent] who is an officer, board member, a committee member or staff member of a related organization shall identify his or her affiliation with such agency or agencies; further, in connection with any policy committee or board action specifically associated with [the Village of Saranac Lake], he/she shall not participate in the decision affecting that entity and the decision must be made and/or ratified by the full board.

At this time, I am a Board member, a committee member, or an employee of the following organizations/companies:

Now this is to certify that I, except as described below, am not now nor at any time during the past year have been:
1) A participant, directly or indirectly, in any arrangement, agreement, investment, or other activity with any vendor, supplier, or other party; doing business with the [the Village of Saranac Lake] which has resulted or could result in person benefit to me.

2) A recipient, directly or indirectly, of any salary payments or loans or gifts of any kind or any free service or discounts or other fees from or on behalf of any person or organization engaged in any transaction with the [the Village].

Any exceptions to 1 or 2 above are stated below with a full description of the transactions and of the interest, whether direct or indirect, which I have (or have had during the past year) in the persons or organizations having transactions with the [the Village of Saranac Lake].

Respondent: _____

Date: _____

Signature: _____

Printed name: _____

Address: _____

Telephone: _____

APPENDIX E: CERTIFICATE OF AUTHORITY

APPENDIX F: VENDOR RESPONSIBILITY QUESTIONNAIRE

APPENDIX G: W-9 FORM

APPENDIX H: NON-COLLUSION AFFIDAVIT

APPENDIX I: IRAN DIVESTMENT ACT COMPLIANCE

APPENDIX J: INTENTIONALLY LEFT BLANK

APPENDIX K: SCHEDULE OF VALUES FOR COST PROPOSAL

Consultant to provide a schedule of values consistent with the scope of work described in the Overview of Engineering Responsibilities. Identify the roles of each team member and the hours allocated to the project by phase and task.

APPENDIX L: DRAFT FORM OF CONTRACT (EJCDC)
(NOT USED)

**APPENDIX M: VILLAGE OF SARANAC LAKE WASTEWATER
TREATMENT PLANT SECONDARY PROCESS AND DISINFECTION
EVALUATION**



**Environmental
Facilities Corporation**

ANDREW M. CUOMO
Governor

SABRINA M. TY
President and CEO

Program Requirements and Bid Packet for Non-Construction Contracts

(For Treatment Works and Drinking Water projects funded with NYS Clean Water State Revolving Fund or Drinking Water State Revolving Fund and Non-Treatment Works projects funded with NYS Clean Water State Revolving Fund)

Effective October 1, 2017

**New York State Environmental Facilities Corporation
625 Broadway, Albany, NY 12207-2997
P: (518) 402-6924 F: (518) 402-7456
www.efc.ny.gov**

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ATTACHMENTS (REQUIRED FORMS)

- Attachment 1 - EEO Policy Statement
- Attachment 2 - EEO Staffing Plan
- Attachment 3 - EEO Workforce Employment Utilization Report
- Attachment 4 - Monthly MWBE Contractor Compliance Report
- Attachment 5 - MWBE Utilization Plan
- Attachment 6 - MWBE Waiver Request
- Attachment 7 - EPA Form 6100-2 - DBE Subcontractor Participation Form
- Attachment 8 - EPA Form 6100-3 - DBE Subcontractor Performance Form
- Attachment 9 - EPA Form 6100-4 - DBE Subcontractor Utilization Form
- Attachment 10 - Lobbying Certification

PART 1:

HOW TO USE THIS DOCUMENT

The New York State Environmental Facilities Corporation ("EFC") implements the New York State Revolving Fund ("SRF") for both Clean Water and Drinking Water projects.

This Program Requirements and Bid Packet for Non-Construction Contracts document contains (1) a brief description of New York State and federal program requirements for Contracts and Subcontracts funded in whole or part by the New York State Clean Water and Drinking Water SRFs, (2) required language for such Contracts and Subcontracts to satisfy the SRF program requirements, including required forms, and (3) guidance materials to assist entities in complying with these requirements.

PROGRAM REQUIREMENTS

The following requirements apply to Treatment Works and Drinking Water projects funded with the NYS Clean Water State Revolving Fund or Drinking Water State Revolving Fund as well as Non-Treatment Works projects funded with the NYS Clean Water State Revolving Fund:

- Participation of Minority- and Women-Owned Business Enterprises ("MWBE") and Equal Employment Opportunities ("EEO") pursuant to New York State Executive Law, Article 15-A and New York Code of Rules and Regulations, Title 5 (5 NYCRR) Parts 140-145 (Regulations of the Commissioner of Economic Development);
- Participation by Disadvantaged Business Enterprises ("DBE") in United States Environmental Protection Agency ("EPA") Programs pursuant to 40 Code of Federal Regulations (CFR) Part 33;
- Equal Employment Opportunities pursuant to Title VI of the Civil Rights Act of 1964 and 40 CFR Part 7;
- Non-discrimination requirements pursuant to Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Section 13 of the Federal Water Pollution Control Act Amendments of 1972;
- Encouragement of participation of Service-Disabled Veteran-Owned Business Enterprises ("SDVOB") in accordance with New York State Executive Law, Article 17-B and 9 NYCRR Part 252;
- Requirements regarding suspension and debarment pursuant to 2 CFR Part 180, 2 CFR Part 1532, 29 CFR § 5.12, State Labor Law § 220-b, and State Executive Law § 316; and,
- Restrictions on Lobbying pursuant to 40 CFR Part 34.

EFC or its authorized representatives, and other governmental entities as applicable, reserve the right to conduct occasional site inspections to monitor compliance with SRF program requirements.

This document is not intended to be inclusive of all applicable legal requirements and there may be other legal requirements that need to be included in a particular Contract or Subcontract that are not set forth here. Accordingly, EFC recommends that Recipients, Contractors, Subcontractors, and any other involved entities consult their legal counsel for advice on compliance with all applicable laws, including but not limited to local laws. This document is not intended to be legal advice.

Refer to the EFC website at www.efc.ny.gov for the latest version of the bid packet to ensure that the most recent forms and contract language are being used.

REQUIRED CONTRACT LANGUAGE

Part 2 of this document is the Required Contract Language. All of the language in Part 2 must be inserted in to all Contracts and Subcontracts funded in whole or in part with SRF funds, in order for SRF Recipients, Contractors, and Subcontractors to comply with the above-listed SRF program requirements.

GUIDANCE MATERIALS

Part 3 of this document sets forth Guidance Materials intended to assist SRF Recipients, Contractors, and Subcontractors in complying with the foregoing SRF program requirements, as applicable.

The Guidance Materials are for informational purposes only and are not intended to be used as contractual language. Please do not incorporate the Guidance Materials into any Contracts or Subcontracts.

COMMONLY USED TERMS

The following commonly used terms are defined herein as follows:

“Contract” means an agreement between a Recipient and a Contractor.

“Contractor” means all bidders, prime contractors, Service Providers, and consultants as hereinafter defined, unless specifically referred to otherwise.

“Service Provider” means any individual or business enterprise that provides one or more of the following: legal, engineering, financial advisory, technical, or other professional services, supplies, commodities, equipment, materials, or travel.

“Subcontract” means an agreement between a Contractor and a Subcontractor.

“Subcontractor” means any individual or business enterprise that has an agreement, purchase order, or any other contractual arrangement with a Contractor.

“Recipient” means the party, other than EFC, to a grant agreement or a project finance agreement with EFC through which funds for the payment of amounts due thereunder are being paid in whole or in part.

“State” means the State of New York.

“Treatment Works” is defined in Clean Water Act (CWA) Section 212.

“Nonpoint Source Projects” and **“Green Infrastructure Projects”** are defined in CWA Section 319.

“Estuary Management Program Project” is defined in CWA Section 320.

PART 2:

REQUIRED CONTRACT LANGUAGE

SECTION 1 REQUIREMENTS AND PROCEDURES FOR BUSINESS PARTICIPATION OPPORTUNITIES FOR FEDERAL DISADVANTAGED BUSINESS ENTERPRISES AND NEW YORK STATE CERTIFIED MINORITY- AND WOMEN- OWNED BUSINESS ENTERPRISES AND EQUAL EMPLOYMENT OPPORTUNITIES FOR MINORITY GROUP MEMBERS AND WOMEN

The Equal Employment Opportunities requirements of this section apply to Contracts and Subcontracts greater than \$10,000, with the exception of the EEO Workforce Employment Utilization Report requirement which applies to construction Contracts and Subcontracts greater than \$25,000.

The Minority- and Women- Owned Business Enterprises ("MWBE") and Disadvantaged Business Enterprises ("DBE") requirements of this section apply to Contractors and Subcontractors working pursuant to: (1) Contracts for labor, services (including, but not limited to, legal, financial, and other professional services), supplies, equipment, materials, or any combination of the foregoing, greater than \$25,000; (2) Contracts that are initially under this threshold but subsequent change orders or contract amendments increase the Contract value to above \$25,000; and, (3) change orders greater than \$25,000.

Disregard this section if it does not apply to this Contract or Subcontract.

I. General Provisions

A. Contractors and Subcontractors are required to comply with the following provisions:

1. New York State Executive Law Article 15-A and 5 NYCRR Parts 140-145 ("MWBE Regulations") for all State contracts as defined therein, with a value (1) in excess of \$25,000 for labor, services (including, but not limited to, legal, financial, and other professional services), supplies, equipment, materials, or any combination of the foregoing, or (2) in excess of \$100,000 for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon.
2. 40 CFR Part 33 ("Federal DBE Regulations") for contracts under EPA financial assistance agreements, as those terms are defined therein.
3. Title VI of the Civil Rights Act of 1964 and 40 CFR Part 7 ("Title VI") for any program or activity receiving federal financial assistance, as those terms are defined therein.
4. Section 504 of the Rehabilitation Act of 1973 ("Section 504") for any program or activity receiving federal financial assistance, as those terms are defined therein.
5. The Age Discrimination Act of 1975 ("Age Discrimination Act") for any program or activity receiving federal financial assistance, as those terms are defined therein.
6. Section 13 of the Federal Water Pollution Control Act ("Clean Water Act") Amendments of 1972 ("Section 13") for any program or activity receiving federal financial assistance under the Clean Water Act, as those terms are defined therein.

- B. The Contractor and Subcontractor shall not discriminate on the basis of race, color, national origin or sex in the performance of this Contract. The Contractor and Subcontractor shall carry out applicable requirements of 40 CFR Part 33 in the award and administration of contracts awarded under EPA financial assistance agreements. Failure by the Contractor and Subcontractor to carry out these**

requirements is a material breach of this Contract which may result in the termination of this Contract or other legally available remedies.

- C. Contractors and Subcontractors shall have instituted grievance procedures to assure the prompt and fair resolution of complaints when a violation of Title VI of the Civil Rights Act of 1964 or Title 40 CFR Part 7 is alleged.
- D. Failure to comply with all of the requirements herein may result in a finding by the Recipient that the Contractor is non-responsive, non-responsible, and/or has breached the Contract, leading to the withholding of funds or such other actions, liquidated damages pursuant to subsection III(F) of this section, or enforcement proceedings as allowed by the Contract.
- E. If any terms or provisions herein conflict with Executive Law Article 15-A, the MWBE Regulations, Federal DBE Regulations, or Title VI, such law and regulations shall supersede these requirements.
- F. Upon request from the Recipient's Minority Business Officer ("MBO") and/or EFC, Contractor will provide complete responses to inquiries and all MWBE and EEO records available within a reasonable time. For purposes of this section, MBO means the duly authorized representative of the SRF Recipient for MWBE and EEO purposes.

II. Equal Employment Opportunities (EEO)

- A. Each Contractor and Subcontractor performing work on the Contract shall undertake or continue existing EEO programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status. For these purposes, EEO shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, or termination and rates of pay or other forms of compensation.
- B. Contractor represents that it has submitted an EEO policy statement to Recipient prior to the execution of this Contract.
- C. Contractor represents that it's EEO policy statement includes the following language:
 - 1. The contractor will not discriminate on the basis of race, creed, color, national origin, sex, age, disability, or marital status against any employee or applicant for employment, will undertake or continue existing programs of affirmative action to ensure that minority group members and women are afforded equal employment opportunities without discrimination and will make and document its conscientious and active efforts to employ and utilize minority group members and women in its work force on Contracts relating to SRF projects.
 - 2. The Contractor shall state in all solicitations or advertisements for employees that, in the performance of the Contract relating to this SRF project, all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status.
 - 3. The Contractor shall request each employment agency, labor union, or authorized representative of workers with which it has a collective bargaining or other agreement or understanding, to furnish a written statement that such employment agency, labor union, or representative will not discriminate on the basis of race, creed, color, national origin, sex, age, disability or marital status, and that such union or representative will affirmatively cooperate in the implementation of the Contractor's obligations herein.
- D. The Contractor will include the provisions of Subdivisions II(A), II(C), and II(E) in every Subcontract in such a manner that the requirements of these subdivisions will be binding upon each Subcontractor as to work in connection with the Contract.
- E. The Contractor shall comply with the provisions of the Human Rights Law (Executive Law Article 15), Title VI, Section 504, Age Discrimination Act, Section 13, and all other State and Federal

statutory and constitutional non-discrimination provisions. The Contractor and Subcontractors shall not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest.

F. Required EEO Forms

1. EEO Staffing Plan

To ensure compliance with this section, the Contractor represents that it has submitted prior to execution of this Contract an EEO Staffing Plan to the Recipient's MBO to document the composition of the proposed workforce to be utilized in the performance of the Contract by the specified categories listed, including ethnic background, gender, and federal occupational categories.

2. EEO Workforce Employment Utilization Report ("Workforce Report")

- a. The Contractor shall submit a Workforce Report, and shall require each of its Subcontractors to submit a Workforce Report to the Recipient, in such format as shall be required by EFC on a quarterly basis during the term of the Contract.
- b. Separate forms shall be completed by Contractor and any Subcontractor.
- c. In limited instances, the Contractor may not be able to separate out the workforce utilized in the performance of the Contract from the Contractor's and/or Subcontractor's total workforce. When a separation can be made, the Contractor shall submit the Workforce Report and indicate that the information provided related to the actual workforce utilized on the Contract. When the workforce to be utilized on the Contract cannot be separated out from the Contractor's and/or Subcontractor's total workforce, the Contractor shall submit the Workforce Report and indicate that the information provided is the Contractor's total workforce during the subject time frame, not limited to work specifically under the Contract.

III. Business Participation Opportunities for MWBEs

A. Contract Goals

1. For purposes of this Contract, EFC establishes the following goals for New York State certified MWBE participation ("MWBE Combined Goals") based on the current availability of qualified MBEs and WBEs.

Program	MWBE Combined Goal*
CWSRF, DWSRF, & Green Innovation Grant Program	20%
NYS Water Infrastructure Improvement Act Grants (also receiving EFC loan)	Clean Water project 23% Drinking Water project 26%
NYS Intermunicipal Grants (also receiving EFC loan)	Clean Water project 24% Drinking Water project 24%
NYS financial assistance only	30%
Engineering Planning Grant	30%

*May be any combination of MBE and/or WBE participation

2. For purposes of providing meaningful participation by MWBEs on the Contract and achieving the MWBE Contract Goals established in Section III-A hereof, the Contractor should reference the directory of New York State Certified MWBEs found at the following internet address: <https://ny.newnycontracts.com>.

3. The Contractor understands that only sums paid to MWBEs for the performance of a commercially useful function, as that term is defined in 5 NYCRR § 140.1, may be applied towards achievement of applicable MWBE participation goals. For construction-related services Contracts or Subcontracts, the portion of the Contract or Subcontract with an MWBE serving as a supplier, and so designated in ESD's Directory, that shall be deemed to represent the commercially useful function performed by the MWBE shall be 60% of the total value of the Contract or Subcontract. The portion of a Contract or Subcontract with an MWBE serving as a broker, as denoted by NAICS code 425120, that shall be deemed to represent the commercially useful function performed by the MWBE shall be the monetary value for fees, or the markup percentage, charged by the MWBE. Where MWBE Contract Goals have been established herein, pursuant to 5 NYCRR § 142.8, the Contractor must document "good faith efforts" to provide meaningful participation by MWBEs as Subcontractors or suppliers in the performance of the Contract. In accordance with Section 316-a of Article 15-A and 5 NYCRR § 142.13, the Contractor acknowledges that if it is found to have willfully and intentionally failed to comply with the MWBE participation goals set forth in the Contract, such a finding constitutes a breach of Contract and the Contractor shall be liable to the Recipient for liquidated or other appropriate damages, as set forth herein.

B. MWBE Utilization Plan

1. The Contractor represents and warrants that Contractor has submitted an MWBE Utilization Plan to the Recipient prior to the execution of this Contract.
2. The Contractor agrees to use such MWBE Utilization Plan for the performance of MWBEs on the Contract pursuant to the prescribed MWBE goals set forth in Section III-A of this section.
3. The Contractor further agrees that a failure to submit and/or use such MWBE Utilization Plan shall constitute a material breach of the terms of the Contract. Upon the occurrence of such a material breach, the Recipient shall be entitled to any remedy provided herein, including but not limited to, a finding that the Contractor is not responsive.
4. Contractor must report any changes to the Utilization Plan after Contract award and during the term of the Contract to the Recipient's MBO. Contractor shall indicate the changes to the MBO in the next Monthly MWBE Contractor Compliance Report after the changes occurred. At EFC's discretion, an updated MWBE Utilization Plan form and good faith effort documentation may be required to be submitted. When a Utilization Plan is revised due to execution of a change order, the change order should be submitted to the MBO with the revised Utilization Plan.
5. The Contractor shall submit copies of all fully executed subcontracts, agreements, and purchase orders that are referred to in the MWBE Utilization Plan to the MBO within 30 days of their execution.

C. Requests for Waiver

1. If the Contractor, after making good faith efforts, is unable to comply with MWBE goals, the Contractor may submit a Request for Waiver to the Recipient documenting good faith efforts by the Contractor to meet such goals. If the documentation included with the waiver request is complete, the Recipient shall forward the request to EFC for evaluation, and EFC will issue a written notice of acceptance or denial within twenty (20) days of receipt.
2. If the Recipient, upon review of the MWBE Utilization Plan and updated Quarterly MWBE Contractor Compliance Reports determines that the Contractor is failing or refusing to comply with the MWBE Contract Goals and no waiver has been issued in regards to such non-compliance, the Recipient may issue a notice of deficiency to the Contractor. The Contractor must respond to the notice of deficiency within seven (7) business days of receipt. Such response may include a request for partial or total waiver of MWBE Contract Goals.

D. Monthly MWBE Contractor Compliance Report (“Monthly MWBE Report”)

The Contractor agrees to submit a report to the Recipient by the third business day following the end of each month over the term of this Contract documenting the payments made and the progress towards achievement of the MWBE goals of the Contract. The Monthly MWBE Report must be supplemented with proof of payment by the Contractor to its Subcontractors (e.g., copies of both sides of a cancelled check) and proof that Subcontractors have been paid within 30 days of receipt of payment from the Recipient. The final Monthly MWBE Report must reflect all Utilization Plan revisions and change orders.

E. Required Federal DBE Forms

1. **EPA Form 6100-3 - DBE Subcontractor Performance Form**
Contractor represents that it has submitted the Form 6100-3 to all of its Subcontractors, all of its Subcontractors have completed the form, and that Contractor submitted such completed forms to Recipient with its bid submission.
2. **EPA Form 6100-4 - DBE Subcontractor Utilization Form**
Contractor represents that it has completed the Form 6100-4 and submitted such completed form to Recipient with its bid submission.
3. **EPA Form 6100-2 - DBE Subcontractor Participation Form**
Contractor represents that it has distributed a Form 6100-2 to its MWBE Subcontractors for completion prior to execution of this Contract.

F. Liquidated Damages - MWBE Participation

In accordance with Section 316-a of Article 15-A and 5 NYCRR §142.13, if it has been determined by the Recipient or EFC that the Contractor has willfully and intentionally failed to comply with the MWBE participation goals, the Contractor shall be obligated to pay to Recipient liquidated damages or other appropriate damages, as specified herein and as determined by the Recipient or EFC.

Liquidated damages shall be calculated as an amount not to exceed the difference between:

1. All sums identified for payment to MWBEs had the Contractor achieved the approved MWBE participation goals; and,
2. All sums actually paid to MWBEs for work performed or materials supplied under this Contract.

The Recipient and EFC reserve the right to impose a lesser amount of liquidated damages than the amount calculated above based on the circumstances surrounding the Contractor’s non-compliance.

In the event a determination has been made by the Recipient or EFC which requires the payment of damages identified herein and such identified sums have not been withheld, Contractor shall pay such damages to the Recipient within sixty (60) days after they are assessed unless prior to the expiration of such sixtieth day, the Contractor has filed a complaint with the Empire State Development Corporation – Division of Minority and Women’s Business Development (“ESD”) pursuant to Subdivision 8 of Section 313 of the Executive Law in which event the damages shall be payable if the Director of ESD renders a decision in favor of the Recipient.

SECTION 2 PARTICIPATION OPPORTUNITIES FOR NEW YORK STATE CERTIFIED SERVICE-DISABLED VETERAN-OWNED BUSINESSES

New York State Executive Law Article 17-B and 9 NYCRR Part 252 provide for more meaningful participation in public procurement by certified Service-Disabled Veteran-Owned Businesses ("SDVOBs"), thereby further integrating such businesses into New York State's economy. EFC recognizes the need to promote the employment of service-disabled veterans and to ensure that certified service-disabled veteran-owned businesses have opportunities for maximum feasible participation in the performance of EFC contracts.

In recognition of the service and sacrifices made by service-disabled veterans and in recognition of their economic activity in doing business in New York State, Contractors are strongly encouraged and expected to consider SDVOBs in the fulfillment of the requirements of the Contract. Such participation may be as Subcontractors or suppliers, as protégés, or in other partnering or supporting roles.

Contractor is encouraged to make good faith efforts to promote and assist in the participation of SDVOBs on the Contract for the provision of services and materials. The directory of New York State Certified SDVOBs can be viewed at: <http://ogs.ny.gov/Core/SDVOBA.asp>

Contractor is encouraged to contact the Office of General Services' Division of Service-Disabled Veteran's Business Development at 518-474-2015 or VeteransDevelopment@ogs.ny.gov to discuss methods of maximizing participation by SDVOBs on the Contract.

SECTION 3 REQUIREMENTS REGARDING SUSPENSION AND DEBARMENT

The requirements of this section apply to all Contracts and Subcontracts.

Contractor and any Subcontractors shall comply with, Subpart C of 2 CFR Part 180 as implemented and supplemented by 2 CFR Part 1532. The Contractor is not a debarred or suspended party under 2 CFR Part 180 or 2 CFR Part 1532, or 29 CFR § 5.12. Neither the Contractor nor any of its Subcontractors have contracted with, or will contract with, any debarred or suspended party under the foregoing regulations.

The Contractor and any Subcontractors have not been deemed ineligible to submit a bid on or be awarded a public contract or subcontract pursuant to Article 8 of the State Labor Law, specifically Labor Law § 220-b. In addition, neither the Contractor nor any Subcontractors have contracted with, or will contract with, any party that has been deemed ineligible to submit a bid on or be awarded a public contract or subcontract under Labor Law § 220-b.

In addition, the Contractor and any Subcontractors have not been deemed ineligible to submit a bid and have not contracted with and will not contract with any party that has been deemed ineligible to submit a bid under Executive Law § 316.

SECTION 4 RESTRICTIONS ON LOBBYING

The requirements of this section apply to all Contracts and Subcontracts greater than \$100,000. Disregard this section if it does not apply to this Contract or Subcontract.

The Contractor and any Subcontractor executing a Contract or Subcontract in excess of \$100,000 agree to provide to the Recipient an executed Certification Regarding Lobbying pursuant to 40 CFR Part 34 ("Lobbying Certification") in the form attached hereto as Attachment 10, consistent with the prescribed form provided in Appendix A to 40 CFR Part 34.

PART 3: GUIDANCE MATERIALS

APPLICABILITY OF PROGRAM REQUIREMENTS

This chart contains a listing of the SRF program requirements contained within this document, as well as the following details regarding each requirement: (1) its applicability, i.e., what types of contracts/subcontracts, particular monetary thresholds if applicable; (2) a section reference to the Required Contract Language that applies from Part 2; and (3) a section reference to the Guidance that applies from this Part.

Requirement	Applicability	Section of Required Contract Language from Part 2	Section of Appropriate Guidance from Part 3
Minority- and Women- Owned Business Enterprises (M/WBE) and Disadvantaged Business Enterprises (DBE)	Contractors and Subcontractors working pursuant to: (1) Contracts for labor, services (including, but not limited to, legal, financial, and other professional services), supplies, equipment, materials, or any combination of the foregoing, greater than \$25,000; (2) Contracts that are initially under this threshold but subsequent change orders or Contract amendments increase the Contract value above \$25,000; and, (3) Change orders greater than \$25,000	1	1
Equal Employment Opportunities (EEO)	Contracts and Subcontracts greater than \$10,000, with the exception of the EEO Workforce Employment Utilization Report requirement which applies to construction Contracts and Subcontracts greater than \$25,000	1	1
Service-Disabled Veteran-Owned Businesses (SDVOB)	Not required, but strongly encouraged	2	2
Suspension and Debarment	All Contracts and Subcontracts	3	3
Restrictions on Lobbying	All Contracts and Subcontracts greater than \$100,000	4	4

SECTION 1 GUIDANCE FOR THE REQUIREMENTS AND PROCEDURES FOR BUSINESS PARTICIPATION OPPORTUNITIES FOR FEDERAL DISADVANTAGED BUSINESS ENTERPRISES AND NEW YORK STATE CERTIFIED MINORITY- AND WOMEN-OWNED BUSINESS ENTERPRISES AND EQUAL EMPLOYMENT OPPORTUNITIES FOR MINORITY GROUP MEMBERS AND WOMEN

I. Summary of EEO, MWBE, and DBE Forms

A. Forms to be Submitted Prior to Contract Execution

1. EEO Policy Statement

To be submitted by the Contractor to the Recipient's Minority Business Officer ("MBO") prior to Contract execution. The "MBO" refers to the duly authorized representative of the SRF Recipient for MWBE and EEO purposes. This form is attached hereto as Attachment 1. See Required Contract Language, Section 1(II).

2. EEO Staffing Plan

To be submitted by the Contractor to the MBO prior to Contract execution. This form is attached hereto as Attachment 2. See required Contract Language, Section 1(II).

3. EPA Form 6100-3 – DBE Subcontractor Performance Form

To be submitted by the Contractor to the MBO with its bid submission. This form is attached hereto as Attachment 8. See Required Contract Language, Section 1(III)(E).

4. EPA Form 6100-4 – DBE Subcontractor Utilization Form

To be submitted by the Contractor to the MBO with its bid submission. This form is attached hereto as Attachment 9. See Required Contract Language, Section 1(III)(E).

5. EPA Form 6100-2 – DBE Subcontractor Participation Form

To be submitted by the Subcontractors to the MBO prior to Contract execution. The Contractor must provide the form to the Subcontractors for completion. The Contractor should also submit documentation (e.g., email, letter, certified mail receipt) to the MBO that the 6100-2 form was made available to the MWBE Subcontractors. This form is attached hereto as Attachment 7. See Required Contract Language, Section 1(III)(E).

6. MWBE Utilization Plan

To be submitted by the Contractor to the MBO after the bid opening, but in no case more than ten (10) business days after the Contractor receives notice from the Recipient that the Contractor has submitted a low bid. This form is attached hereto as Attachment 5. See Required Contract Language, Section 1(III)(B).

B. Forms to be Submitted During the Term of the Contract

1. EEO Workforce Employment Utilization Report ("Workforce Report")

To be submitted by the Contractor to the MBO on a quarterly basis during the term of the Contract. An exemplar form with instructions is attached hereto as Attachment 3. The actual Excel fillable form for Contractors and Subcontractors to complete will be e-mailed to MBOs by EFC at the start of the Contract term. See Required Contract Language, Section 1(II)(G).

2. Request for Partial or Total Waiver

If applicable, to be submitted by the Contractor to the MBO at any time during the term of the Contract, but not later than prior to the submission of a request for final payment on the

Contract. This form is attached hereto as Attachment 6. See Required Contract Language, Section 1(III)(C).

3. Monthly MWBE Contractor Compliance Report (“Monthly MWBE Report”)

To be submitted by the Contractor to the MBO by the third business day following the end of each month over the term of the Contract. This form is attached hereto as Attachment 4. See Required Contract Language, Section 1(III)(D).

II. Business Participation Opportunities for MWBEs

A. Contract Goals

The goals provided herein (Required Contract Language, Section 1(III)(A)) are effective as of October 1, 2017. MWBE participation goals for a contract will be based on the goals in place at the time of the execution date of each respective contract, unless otherwise specified. In certain instances, the goals may vary, such as with projects co-funded by EFC and other state/federal agencies. With some co-funded projects, EFC may defer to the MBE and WBE participation goals and program established by those agencies.

Please contact EFC if you have any questions about the applicable MWBE participation goals for your contract.

B. Good Faith Efforts

The Contractor must make good faith efforts to develop an adequate MWBE Utilization Plan and must continue such good faith efforts in order to meet applicable MWBE participation goals. The Contractor shall maintain documentation of good faith efforts to solicit participation of MWBE firms for SRF-funded projects. If a Contractor is unable to meet contract MWBE participation goals, and submits a Request for Waiver, documentation of such good faith efforts must accompany the request. See Required Contract Language, Section 1(III)(C).

Contractor should also continue good faith efforts to seek opportunities for MWBE participation during the life of the contract even if proposed goals have been achieved.

Examples of documentation of good faith efforts are set forth below:

- Information on the scope of work related to the contract, such as a copy of the schedule of values from the bid submission, and specific steps taken to reasonably structure the scope of work to break out tasks or equipment needs for the purpose of providing opportunities for subcontracting with, or obtaining supplies or services from, MBEs or WBEs.
- Printed screenshots of the directory of Certified Minority- and Women- Owned Business Enterprises (“MWBE directory”) on ESD’s website on a Statewide basis, if appropriate, for both MBEs and WBEs that provide the services or equipment necessary for the contract. Contact the MBO for assistance in performing a proper search including identifying a sufficient number of solicitations to show that good faith effort was made.
- Copies of timely solicitations and documentation (e.g., faxes and emails) that the Contractor offered relevant plans, specifications, or other related materials to MBE and WBE firms on ESD’s MWBE directory to participate in the work, with the responses.
- A log prepared by the Contractor in a sortable spreadsheet documenting the Contractor’s solicitation of MBEs and WBEs for participation as Subcontractors or suppliers pursuant to a contract. The log should consist of the list of MBE and WBE firms solicited, their contact information, the type of work they were solicited to perform (or equipment to provide), how the solicitation was made (fax, phone, email) and the contact information, the contacts name and the outcome. If a bid was

received, the bid price should also be included in the log. See a sample log format below:

Date	M/WBE Type	Company	Scope of work	Contact Name	Phone/ Email	Solicitation Format	MWBE Response	Negotiation Required?	Selected? If not, Explain

If no response was received to an initial solicitation, at least one follow-up solicitation should be made in a different format than the first, e.g. fax followed by phone call. Any bids received from non-MWBE firms for the same areas MWBEs were solicited should also be tracked on the log.

- Copies of the EPA 6100-3 and 6100-4 forms that are required with the bid submission. A properly completed EPA 6100-3 form is good indication of a contact to an MWBE and their response to the contact. If solicitations do not result in obtaining sufficient participation of MWBE firms due to non-responsiveness, please contact the MBO or EFC MWBE representative for support.
- Copies of any advertisements of sufficient duration to effectively seek participation of certified MBE and WBEs timely published in appropriate general circulation, trade and MWBE oriented publications, together with listing and dates of publication of such advertisements. EFC recommends the use of the NYS Contract Reporter that is free to all Contractors - <https://www.nyscr.ny.gov/>. A log should be kept of the responses to the ads, similar to the log for MWBE firm solicitation and should include the non-MWBE firms that responded and the bid prices. Any negotiations should be documented in the log.
- Documents demonstrating that insufficient MBEs or WBEs are reasonably available to perform the work.
- A written demonstration that the Contractor offered to make up any inability to meet the project MWBE participation goals in other contracts and/or agreements performed by the Contractor on another SRF funded project.
- The date of pre-bid, pre-award, or other meetings scheduled by the Recipient, if any, and the contact information of any MBEs and WBEs who attended and are capable of performing work on the project.
- Any other information or documentation that demonstrates the Contractor conducted good faith efforts to provide opportunities for MWBE participation in their work. For instance, Prime Contractors and MBOs should develop a list of MWBE firms that have expressed interest in working on SRF-funded projects
- The use of certified DBE and small businesses certified through the US Small Business Administration (SBA) may be considered as a demonstration of Good Faith Efforts.

C. MWBE Utilization Plan

1. The MWBE Utilization Plan must be submitted to the Recipient's MBO after the bid opening, but in no case more than ten (10) business days after the Contractor receives notice from the Recipient that the Contractor has submitted a low bid.
2. The MBO will evaluate a completed MWBE Utilization Plan. If the MBO finds the Utilization Plan sufficient, it will be forwarded to EFC for review. If the MBO finds the Utilization Plan insufficient, the MBO will work with the Contractor to address deficiencies

before submitting to EFC for review. A written notice of acceptance or deficiency will be issued by EFC within 20 business days of receipt of the Utilization Plan. Upon receipt of a notice of deficiency from either the MBO or EFC, the Contractor shall respond with a written remedy to such notice within seven (7) business days of receipt.

3. In coordination with the MBO, EFC will accept an MWBE Utilization Plan upon consideration of many factors, including the following:
 - a. The MWBE Utilization Plan indicates that the proposed goals for the project will be achieved;
 - b. A Contractor, who is a certified MBE or WBE, will be credited for up to 100% of the category of their certification. However, good faith efforts to seek participation in the other category are also required; and,
 - c. Adequate documentation to demonstrate good faith efforts and/or support a specialty equipment/services waiver as described below in Section II(E).
4. EFC reserves the right to request additional information and/or documentation to support the adequacy of the MWBE Utilization Plan.
5. Within 10 days of EFC's acceptance of a MWBE Utilization Plan, EFC will post the approved Utilization Plan on the EFC website.
6. In coordination with the MBO, EFC may issue conditional acceptance of Utilization Plans pending submission of additional documentation that demonstrates there will be an increase in MWBE participation.

D. Eligibility for MWBE Participation Credit

1. To receive MWBE participation credit, Contractors or Subcontractors performing work that have been identified in an approved MWBE Utilization Plan must be certified as an MBE or WBE by ESD.
2. Prime Contractors may also include second or lower tier Subcontractors (Subcontractors hired by Subcontractors) on their MWBE Utilization Plan.
3. Credit for MWBE participation shall be granted only for MWBE firms performing a commercially useful business function according to custom and practice in the industry.
 - a. Factors to be used in assessing whether an MWBE is performing a commercially useful function include:
 - i. The amount of work subcontracted;
 - ii. Industry practices;
 - iii. Whether the amount the MWBE is to be paid under the contract is commensurate with the work it is to perform;
 - iv. The credit claimed towards MWBE utilization goals for the performance of the work by the MWBE; and,
 - v. Any other relevant factors.
 - b. "Commercially useful functions" normally include:
 - i. Providing technical assistance to a purchaser prior to a purchase, during installation, and after the supplies or equipment are placed in service;
 - ii. Manufacturing or being the first tier below the manufacturer of supplies or equipment;
 - iii. Providing functions other than merely accepting and referring requests for supplies or equipment to another party for direct shipment to a Contractor; or,
 - iv. Being responsible for ordering, negotiating price, and determining quality and quantity of materials and supplies.
 - c. For construction-related services Contracts or Subcontracts, the following rules apply when calculating MWBE utilization:
 - i. The portion of a Contract or Subcontract with an MWBE serving as a manufacturer that shall be deemed to represent the commercially useful function performed by the MWBE shall be 100% of the total value of the Contract or Subcontract.
 - ii. the portion of a Contract or Subcontract with an MWBE serving as a supplier (as denoted by a NAICS code beginning with 423 or 424, or a

NIGP code that does not begin with the number 9), and so designated in ESD's Directory, that shall be deemed to represent the commercially useful function performed by the MWBE shall be 60% of the total value of the Contract or Subcontract.

- iii. the portion of a Contract or Subcontract with an MWBE serving as a broker (as denoted by NAICS code 425120) that shall be deemed to represent the commercially useful function performed by the MWBE shall be the monetary value for fees, or the markup percentage, charged by the MWBE.
- 4. No credit will be granted for MWBEs that do not perform a commercially useful function. An MWBE does not perform a commercially useful function if its role adds no substantive value and is limited to that of an extra participant in a transaction, contract, or project through which funds are passed in order to obtain the appearance of participation.

E. Requests for Waiver

1. If the Contractor's application of good faith efforts does not result in the utilization of MWBE firms to achieve the aforementioned goals or a specialty equipment/service waiver is requested, the Contractor may request a full or partial waiver of MWBE participation goals by completing a Request for Waiver form, attaching appropriate documentation of good faith efforts, and submitting same to the MBO. See also Required Contract Language, Section 1(III)(C). Even if an MWBE waiver is granted, EEO information must still be submitted.
2. The MBO and EFC will review each waiver request based on the good faith effort criteria presented above and the documentation submitted with the waiver request. EFC will not issue any automatic waivers from MWBE responsibilities.
3. In cases where EFC accepts a full or partial waiver of MWBE participation goals, the waiver request will be posted to EFC's website.
4. Specialty Equipment/Service Waiver: A specialty equipment/service waiver may be granted in cases where:
 - a. equipment is made by only one non-MWBE manufacturer,
 - b. the technical specifications call for equipment that is not available through an MWBE supplier;
 - c. the equipment is constructed on site by specially trained non-MWBE labor;
 - d. the service is not available through an MWBE (such as work done by National Grid);
 - e. the service is proprietary in nature (such as use of certain computer software necessary for control systems); or,
 - f. the service cannot be subcontracted (such as litigation services).

If the contract includes specialty equipment or services, and documentation is submitted demonstrating that there are no MWBE firms capable of completing this portion of the contract, the specialty amount of the contract may be deducted from the total contract amount to determine the MWBE Eligible Amount and the goals will be applied to the MWBE Eligible Amount. This determination is made at the discretion of the MBO and EFC.

Example:
\$200,000 - \$50,000 = \$150,000
(Contract) (Specialty equipment/service) (MWBE Eligible Amount)
The MWBE goal is applied to the MWBE Eligible Amount.

A request for this specialty equipment/service deduction can be completed by filling out a Request for Waiver form and submitting it to the MBO. The request must include a copy of the page from the contract where the equipment/ service is described and the cost of each item. Additional documentation may be requested by the MBO or EFC.

III. Subcontractor's Responsibilities

Subcontractors should:

1. Maintain their MWBE certifications, and notify the Contractor and MBO of any change in their certification status.
2. Notify the Contractor of any MWBE Subcontractors they hire so they may be included on the Contractor's Utilization Plan.
3. Respond promptly to solicitation requests by completing and submitting bid information in a timely manner.
4. Maintain business records that should include, but not be limited to, contracts/agreements, records of receipts, correspondence, purchase orders, and canceled checks.
5. Complete and submit the EPA Form 6100-3 - DBE Subcontractor Performance Form to the Contractor prior to submission of the Contractor's bid to the Recipient.
6. Complete and return EPA Form 6100-2 - DBE Subcontractor Participation Form to the Recipient prior to Contractor's execution of the contract.
7. Ensure that a required EEO Policy Statement and applicable MWBE requirements are included in each subcontract.
8. Notify the MBO and EFC when contract problems arise, such as non-payment for services or when the Subcontractor is not employed as described in the MWBE Utilization Plan.

IV. Protests/Complaints

Contractors or Subcontractors who have any concerns, issues, or complaints regarding the implementation of the SRF MWBE & EEO Program, or wish to protest should do so in writing to the MBO and EFC. The MBO, in consultation with EFC, will review the circumstances described in the submission, investigate to develop additional information, if warranted, and determine whether action is required. If the Contractor or Subcontractor believes the issue has not been resolved to their satisfaction, they may appeal in writing to EFC for consideration.

V. Waste, Fraud and Abuse

Subcontractors, Contractors, or Recipients who know of or suspect any instances of waste, fraud, or abuse within the MWBE & EEO Program should notify the project MBO and EFC immediately. Additionally, suspected fraud activity should be reported to the USEPA – Office of Inspector General Hotline at (888) 546-8740, the New York State Office of Inspector General at (800) 367-4448, or the ESD Compliance Office at (212) 803-3266.

SECTION 2 GUIDANCE FOR NEW YORK STATE CERTIFIED SERVICE-DISABLED VETERAN-OWNED BUSINESS ENTERPRISES (“SDVOB”) PARTICIPATION OPPORTUNITIES

Contractor may contact the Office of General Services' Division of Service-Disabled Veteran's Business Development at 518-474-2015 or VeteransDevelopment@ogs.ny.gov to discuss methods of maximizing participation by SDVOBs on the Contract. The directory of New York State Certified SDVOBs can be viewed at: <http://ogs.ny.gov/Core/SDVOBA.asp>

Please contact EFC if you have any questions about utilizing SDVOBs on the Contract.

SECTION 3 GUIDANCE FOR REQUIREMENTS REGARDING SUSPENSION AND DEBARMENT

A list of debarred and suspended contractors, pursuant to 2 CFR Parts 180 and 1532 and 29 CFR § 5.12, is available on the US Department of Labor's website at <https://www.sam.gov/portal/public/SAM/>.

A list of contractors and subcontractors deemed ineligible to submit a bid on or be awarded a public contract or subcontract, pursuant to Article 8 of the State Labor Law, is available on the New York State Department of Labor's website at <http://labor.ny.gov/workerprotection/publicwork/PDFs/debarred.pdf>

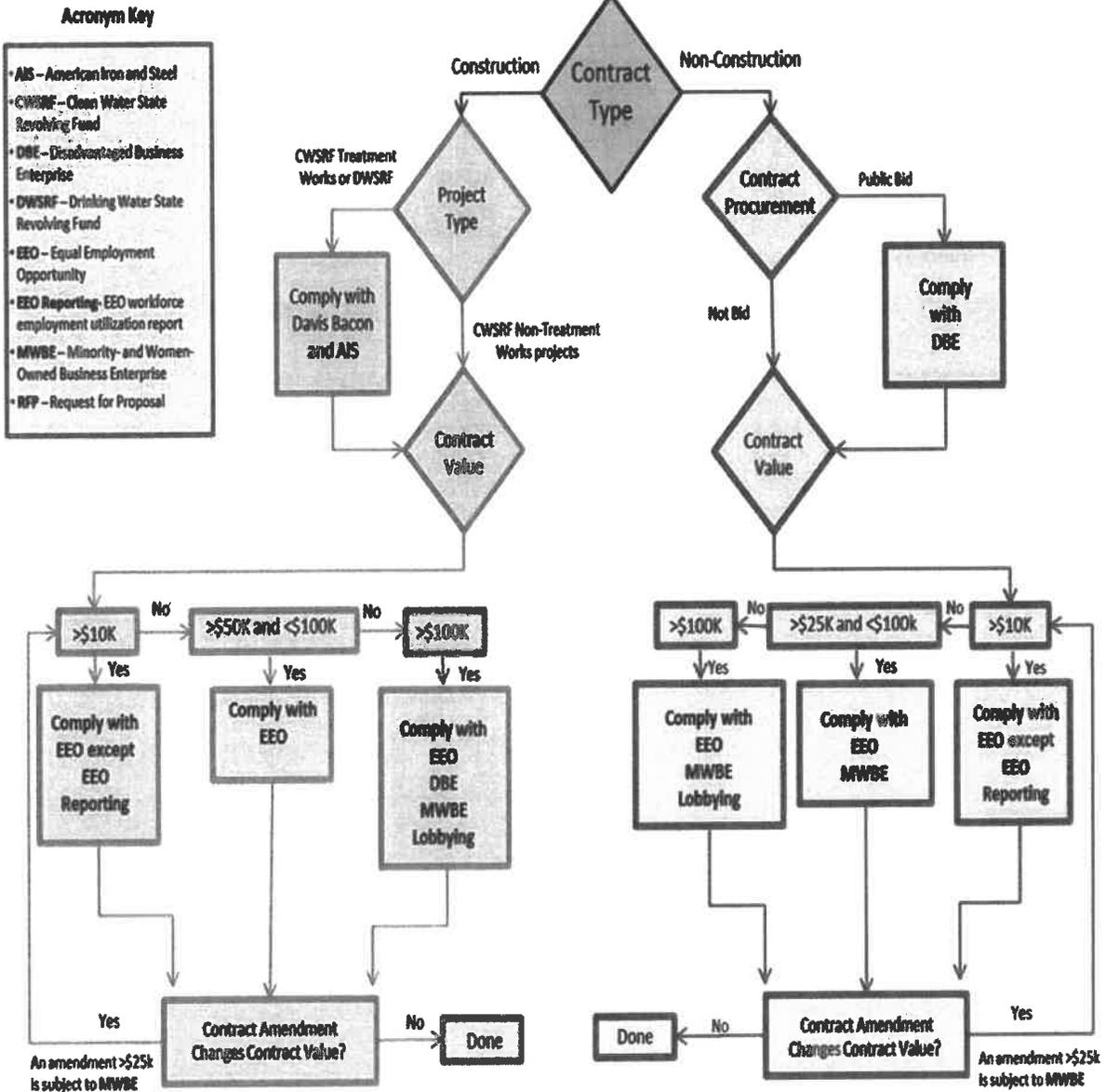
A list of contractors deemed ineligible to submit a bid is maintained by Empire State Development's Division of Minority and Women's Business Development.

SECTION 4 GUIDANCE FOR RESTRICTIONS ON LOBBYING

Each Contractor and any Subcontractor that has a Contract or Subcontract exceeding \$100,000 shall provide to the Recipient a completed Certification Regarding Lobbying pursuant to 40 CFR Part 34 ("Lobbying Certification") in the form attached hereto as Attachment 10 consistent with the prescribed form provided in Appendix A to 40 CFR Part 34. The form provides a certification that the Contractor or Subcontractor will not expend appropriated federal funds to pay any person for influencing or attempting to influence an officer or employee of any agency, Member of Congress, officer or employee of Congress or any employee of any Member of Congress in accordance with the provisions of 40 CFR Part 34, and to maintain such certification for their own records. It is noted that disbursement of funds may be withheld until the Lobbying Certification form has been received by the Recipient.

SECTION 5

PROGRAM CONTRACT REQUIREMENT DECISION TREE



SECTION 6 SUMMARY OF CONTRACTOR REQUIREMENTS FOR SRF-FUNDED PROJECTS

Forms can be found as attachments to this document or online at www.efc.ny.gov

Forms should be submitted electronically via email or through EFC's dropbox

To be submitted with this bid:

- EEO Policy Statement
- Documented Proof that EPA Form 6100-2 - DBE Subcontractor Participation Form was given to MWBE Subcontractors
- EPA Form 6100-3 - DBE Subcontractor Performance Form
- EPA Form 6100-4 - DBE Subcontractor Utilization Form
- Lobbying Certification

**Refer to Part 3
Guidance Section
Section 1
Section 1
Section 1
Section 1
Section 4**

To be submitted prior to or upon Contract award:

- Executed Contracts, Subcontracts, agreements, and purchase orders
- MWBE Utilization Plan and/or Waiver Request
- EEO Staffing Plan

**Section 1
Section 1**

Ongoing documentation & tasks:

- EEO Workforce Utilization Report
- Submit Monthly MWBE Reports to MBO
- Maintain proof of payments for MWBE Subcontractors
- Ensure that all Subcontracts contain Part 2: Required Contract Language

**Section 1
Section 1
Section 1**

Attachment 1
New York State Environmental Facilities Corporation
EQUAL EMPLOYMENT OPPORTUNITY POLICY STATEMENT
NEW YORK STATE REVOLVING FUND (SRF)

I, _____, am the authorized representative of _____.
Name of Representative Name of Contractor/Service Provider
I hereby certify that _____ will abide by the equal employment
Name of Contractor/Service Provider
opportunity (EEO) policy statement provisions outlined below.

- (i) The Contractor will not discriminate on the basis of race, creed, color, national origin, sex, age, disability, or marital status against any employee or applicant for employment, will undertake or continue existing programs of affirmative action to ensure that minority group members and women are afforded equal employment opportunities without discrimination and will make and document its conscientious and active efforts to employ and utilize minority group members and women in its work force on Contracts relating to SRF projects.
- (ii) The Contractor shall state in all solicitations or advertisements for employees that, in the performance of the Contract relating to this SRF project, all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status.
- (iii) The Contractor shall request each employment agency, labor union, or authorized representative of workers with which it has a collective bargaining or other agreement or understanding, to furnish a written statement that such employment agency, labor union, or representative will not discriminate on the basis of race, creed, color, national origin, sex, age, disability or marital status, and that such union or representative will affirmatively cooperate in the implementation of the Contractor's obligations herein.
- (iv) The Contractor shall comply with the provisions of the Human Rights Law (Article 15 of the Executive Law), including those relating to non-discrimination on the basis of prior criminal conviction and prior arrest, and with all other State and federal statutory and constitutional non-discrimination provisions, including Titles VI and VII of the Civil Rights Act of 1964, 40 CFR Part 7, 41 CFR Part 60-1 Subpart A, 41 CFR Part 60-4, Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975. The Contractor and Subcontractors shall not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status or domestic violence victim status.
- (v) The Contractor will include the provisions of subdivisions (i) through (iv) in every Subcontract in such a manner that the requirements of these subdivisions will be binding upon each Subcontractor as to work in connection with the Contract.

X

Contractor/Service Provider Representative

**Attachment 2
New York State Environmental Facilities Corporation
Equal Employment Opportunity (EEO) Staffing Plan**

Municipality:	County:	SRF Project No.:	Contract ID:
Service Provider Name:		Date:	

Report Includes – Please select one from the options below:

- Workforce utilized on this contract
- Contractor/subcontractor's total workforce

Reporting Entity – Please select one from the options below:

- Prime Service Provider
- Subcontractor

Job Categories	Hispanic/Latino		Not Hispanic or Latino											
			Male						Female					
	Male	Female	White	Black/African American	Native Hawaiian/Other Pacific Islander	Asian	Native American/Alaska Native	Two or More Races	White	Black/African American	Native Hawaiian/Other Pacific Islander	Asian	Native American/Alaska Native	Two or More Races
Senior Level Officials/Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Mid-Level Officials/Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Skilled Craftsmen	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives Semi-Skilled	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers & Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Journeypersons														
Apprentices														
Trainees														

Electronic Signature of Service Provider: I certify that the information submitted herein is true, accurate and complete to the best of my knowledge.

Name (Please Type): _____ Date: _____

Attachment 2
New York State Environmental Facilities Corporation
Equal Employment Opportunity (EEO) Staffing Plan
INSTRUCTIONS

All Service Providers (including legal, engineering, financial advisory or other professional services, and labor) and each subcontractor identified in the bid or proposal must complete an EEO Staffing Plan and submit it no later than the date of execution of the contract to the Recipient's Minority Business Officer (MBO). Where the work force to be utilized in the performance of the contract can be separated out from the contractor's or subcontractors' total work force, the contractor shall complete this form *only for the anticipated work force to be utilized on the contract*. Where the work force to be utilized in the performance of the contract cannot be separated out from the contractor's or subcontractors' total work force, the contractor shall complete this form for the contractor's or subcontractors' *total work force*.

RACE/ETHNIC IDENTIFICATION: Definitions of race and ethnicity for purposes of completion of this form are as follows:

- **Hispanic or Latino** - A person having origins in Cuba, Mexico, Puerto Rico, South or Central America.
- **White** - A person having origins of Europe, the Middle East, or North Africa.
- **Black or African-American** - A person having origins in any of the black racial groups of Africa.
- **Native Hawaiian or Other Pacific Islander** - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent
- **American Indian or Alaska Native** – A person having origins in any of the original peoples of North, Central, and South America and who maintain tribal affiliation or community attachment.
- **Two or More Races** - All persons who identify with more than one of the above (Non-Hispanic or Latino) five races.

DESCRIPTION OF JOB CATEGORIES: The major job categories used in EEO Staffing Plan are as follows:

- **Senior Level Officials and Managers** - Individuals residing in the highest levels of organizations who plan, direct and formulate policies, set strategy and provide the overall direction of enterprises/organizations for the development and delivery of products or services.
- **Mid-Level Officials and Managers** - Individuals who receive directions from the Senior Level management and serve as managers, other than those who serve as Senior Level Officials and Managers, including those who oversee and direct the delivery of products, services or functions at group, regional or divisional levels of organizations.
- **Professionals** - Most jobs in this category require bachelor and graduate degrees, and/or professional certification. In some instances, comparable experience may establish a person's qualifications.
- **Technicians** - Jobs in this category include activities that require applied scientific skills, usually obtained by post-secondary education of varying lengths, depending on the particular occupation, recognizing that in some instances additional training, certification, or comparable experience is required.
- **Sales Workers** - These jobs include non-managerial activities that wholly and primarily involve direct sales.
- **Administrative Support Workers** - These jobs involve non-managerial tasks providing administrative and support assistance, primarily in office settings.
- **Skilled Craftsmen** – Includes higher skilled occupations in construction (building trades craft workers and their formal apprentices) and natural resource extraction workers. Examples of these types of positions include: boilermakers; brick and stone masons; carpenters; electricians; painters.
- **Operatives Semi-Skilled** - Most jobs in this category include intermediate skilled occupations and include workers who operate machines or factory-related processing equipment. Most of these occupations do not usually require more than several months of training. Examples include: textile machine workers.
- **Laborers & Helpers** - Jobs in this category include workers with more limited skills who require only brief training to perform tasks that require little or no independent judgment.
- **Service Workers** - Jobs in this category include food service, cleaning service, personal service, and protective service activities.

See the bid packet at www.efc.ny.gov or your designated MBO for further guidance.

Attachment 3
Instructions for Completing and Submitting the
Equal Employment Opportunity Workforce Utilization Report

The Equal Employment Opportunity (“EEO”) Workforce Utilization Report (“Report”) is used by contractors and subcontractors to report the actual workforce utilized in the performance of the contract broken down by job title for a particular reporting period. When the workforce utilized in the performance of the contract can be separated out from the contractor’s and/or subcontractor’s total workforce, the contractor and/or subcontractor shall submit a Report of the workforce utilized on the contract. When the workforce to be utilized on the contract cannot be separated out from the contractor’s and/or subcontractor’s total workforce, information on the contractor’s and/or subcontractor’s total workforce shall be included in the Report.

Instructions for Completing the Report

1. **Reporting Entity.** Check off the appropriate box to indicate if the entity completing the Report is the contractor or a subcontractor.
2. **Federal Employer Identification Number (“FEIN”).** Enter the FEIN assigned by the Internal Revenue Service (“IRS”) to the contractor or subcontractor for which the Report has been prepared. If the contractor or subcontractor uses a social security number instead of a FEIN, leave this field blank. The contractors and subcontractors for recipients of a grant only (such as an Engineering Planning Grant (EPG), a Water Infrastructure Improvement Act (WIIA) grant, or an Intermunicipal Grant Program (IMG) grant) do not need to fill out this section of the Report.
3. **Name.** Enter the name of the contractor or subcontractor for which the Report has been prepared.
4. **Address.** Enter the address of the contractor or subcontractor for which the Report has been prepared.
5. **Contract Number.** Enter the number of contract that the Report applies to, if applicable.
6. **Reporting Period / Month.** Check off the box that corresponds to the applicable quarterly or monthly (not both) reporting period for this Report. The Report is to be submitted on a monthly basis for construction contracts, and a quarterly basis based on the calendar quarter for all other contracts, during the life of the contract.
7. **Workforce Identified in Report.** Check off the appropriate box to indicate if the workforce being reported is just for the contract or the contractor’s or subcontractor’s total workforce.
8. **Preparer’s Name, Preparer’s Title, Date.** Enter the name and title for the person completing the Report, enter the date upon which the Report was completed, and check the box accepting the name entered into the Report as the digital signature of the preparer.
9. **Occupation Classifications (SOC Major Group) and SOC Job Title.** First, enter the applicable Occupation Classification (SOC Major Group) so a dropdown menu appears under SOC Job Title. Choose the SOC Job Title that best describes the worker.
10. **EEO Job Title and SOC Job Code.** The EEO Job Title and the SOC Job Code will automatically populate in the spreadsheet based upon the Occupation Classifications (SOC Major Group) and SOC Job Title selected. Please do not modify the information populated in these fields.

11. **Race/Ethnic Identification.** Race/ethnic designations do not denote scientific definitions of anthropological origins. For the purposes of this Report, an employee must be included in the group to which he or she appears to belong, identifies with, or is regarded in the community as belonging. However, no person should be counted in more than one race/ethnic group. The race/ethnic categories for this Report are:
- **WHITE** (not of Hispanic origin) all persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
 - **BLACK/AFRICAN AMERICAN** a person, not of Hispanic origin, who has origins in any of the black racial groups of the original peoples of Africa.
 - **HISPANIC/LATINO** a person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
 - **ASIAN, NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER** a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands.
 - **NATIVE AMERICAN/ALASKAN NATIVE** a person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.
12. **Number of Employees and Number of Hours.** Enter the number of employees and the total number of hours worked by such employees for each SOC Job Title under the columns corresponding to the gender and racial/ethnic groups with which the employees most closely identify.
13. **Total Compensation.** Enter the total compensation paid to all employees for each SOC Job Title, each gender, and each racial/ethnic group. Contractors and subcontractors should report only compensation for work on the contract paid to employees during the period covered by the Report. Compensation should include only sums which must be reported in Box 1 of IRS Form W-2. The contractors and subcontractors for recipients of a grant only (such as an EPG, a WIIA, or an IMG grant) do not need to fill out this section of the Report.
14. **For EFC Use Only.** This section is for EFC use only and does not need to be filled out by the contractor/subcontractor.

Instructions for Submitting the Report

The Report is to be submitted on a monthly basis for construction contracts, and a quarterly basis based on the calendar quarter for all other contracts, during the life of the contract.

EFC will provide a Report form in Excel format to the Recipient's Minority Business Officer ("MBO"). The Recipient's MBO is responsible for providing the Report form to all contractors. Each contractor is responsible for providing the Report form to all subcontractors.

Reports are to be submitted electronically in Excel format, using the Report form provided, within ten (10) days of the end of each month or quarter, whichever is applicable. For example, the January monthly Report for a construction contract is due by February 10th and the January – March quarterly Report for a non-construction contract is due by April 10th.

Once the Report form has been completed, each contractor/subcontractor must submit the Report form to EFC and the Recipient's MBO. The Report form must be submitted to EFC according to the following instructions:

1. Go to www.efc.ny.gov/eeoreporting.
2. Enter the requested information pursuant to the instructions on the page. Make sure to choose the correct applicable funding program (Clean Water State Revolving Fund (SRF), Drinking Water SRF, non-SRF Grant Only (e.g. EPG, WIIA, IMG)) and the correct reporting period (reporting

quarter for non-construction OR reporting month for construction). Enter the reporting period of the data, not the date it's submitted.

3. Submit your Report(s) pursuant to the instructions on the page.
4. If you are a contractor, use the naming convention provided by EFC (in the "For EFC Use Only" section of the Report form) for naming the file for upload (i.e., Funding Program – Project Number– Contractor short name (up to fifteen characters) – MWBE ID). The funding programs include CW (clean water SRF), DW (drinking water SRF), and GO (non-SRF grant only). If you are a subcontractor, use the naming convention provided by EFC and replace the contractor's short name with the first fifteen characters of the subcontractor's name, omitting any spaces or special characters.

Questions

If you have questions about or require assistance completing or submitting the Report, please contact EFC at mwbe@efc.ny.gov or 518-402-6924.

Attachment 4
New York State Environmental Facilities Corporation
Monthly Minority- & Women- Owned Business Enterprise (MWBE) Contractor Compliance Report
("Monthly MWBE Report")

Instructions:

- Contractors are to complete the report in Word version and email to the Recipient's Minority Business Officer ("MBO") on a monthly basis.
- If you require additional pages, you may find them on EFC's website at www.efc.ny.gov.
- **All MWBE Subcontractors for this contract MUST be listed on the form regardless of whether they were paid this month.**
- Please save Report as "MReport – (Project No). – (Municipality) – (Firm Name) – (Date)" and send the Word version of this document.
- Proofs of payment in the amounts shown below must be transmitted to the MBO with the report.

Municipality:		County:		Contract ID:		Month:		Year:		
Project No.:		GIGP/EPG No:		Registration No. (NYC only):						
Prime Contractor/Service Provider:				Award Date:		Start Date:		Date all MWBE subs paid in full:		
Signature of Contractor: <input type="checkbox"/> I certify that the information submitted herein is true, accurate and complete to the best of my knowledge and belief.									Date:	
Last Month's Contract Amt: \$		MWBE Eligible Amt: \$ (Goals are applied to this amount and includes eligible change orders, amendments & waivers)		EFC MWBE Goals			Total Paid to Prime			
Revised Contract Amt: \$				MBE: %	WBE: %	Total: %	MBE Amt: \$		WBE Amt: \$	Total Amt: \$
NYS Certified MWBE Contractor & Subcontractor		Please Specify Any Revisions this Month.		Subcontractor Total Amount		Payments this Month	Previous Payments	Total Payments Made to Date		
				Original	Revised					
Name: Fed. Employer ID#: Select Only One: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: Select Only One: <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A		<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED								
Name: Fed. Employer ID#: Select Only One: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: Select Only One: <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A		<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED								
Name: Fed. Employer ID#: Select Only One: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: Select Only One: <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A		<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED								

Attachment 4
New York State Environmental Facilities Corporation
Monthly Minority- & Women- Owned Business Enterprise (MWBE) Contractor Compliance Report
("Monthly MWBE Report")

NYS Certified MWBE Contractor & Subcontractor	Please Specify Any Revisions this Month.	Subcontractor Contract Amount		Payments this Month	Previous Payments	Total Payments Made to Date
		Original	Revised			
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED					
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED					
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED					
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED					
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED					

Attachment 4
New York State Environmental Facilities Corporation
Monthly Minority- & Women- Owned Business Enterprise (MWBE) Contractor Compliance Report
("Monthly MWBE Report")

NYS Certified MWBE Contractor & Subcontractor	Please Specify Any Revisions this Month.	Subcontractor Total Amount		Payments this Month	Previous Payments	Total Payments Made to Date
		Original	Revised			
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED					
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED					
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED					
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED					
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED					
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED					

Attachment 4
New York State Environmental Facilities Corporation
Monthly Minority- & Women- Owned Business Enterprise (MWBE) Contractor Compliance Report
("Monthly MWBE Report")

Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker __% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED				
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker __% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED				
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker __% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED				
Name: Fed. Employer ID#: <u>Select Only One:</u> <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other: <u>Select Only One:</u> <input type="checkbox"/> Broker __% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	<input type="checkbox"/> Subcontractor is REMOVED <input type="checkbox"/> NEW Subcontractor <input type="checkbox"/> Subcontract Amt. INCREASED <input type="checkbox"/> Subcontract Amt. DECREASED				
Additional Pages can be found at www.efc.ny.gov TOTAL					
Please explain any revisions and note the scope of work that new subcontractors will be providing. Please note that change orders over \$25K may require that good faith efforts be made to obtain additional MWBE participation:					

Attachment 5
NYS Environmental Facilities Corporation
Minority- & Women- Owned Business Enterprise (MWBE) Utilization Plan

Instructions for Contractors & Service Providers:

Contractors and Service Providers must complete Sections 2 and 3. **Submit the completed, signed (electronic signature box checked and dated) form in Microsoft Word format to the Recipient's designated Minority Business Officer (MBO) no later than the date of contract execution.** Incomplete forms will be found deficient. If more than 10 subcontractors are used, additional pages for Section 3 can be found on EFC's website.

If the prime contract is being performed by the parties to a Joint Venture, Teaming Agreement, or Mentor-Protégé Agreement that includes a certified MWBE, please contact EFC for assistance.

MWBE firms must be certified by the NYS Empire State Development Corporation (ESD) in order to be counted towards satisfaction of MWBE participation goals. The utilization of certified MWBEs for non-commercially useful functions may not be counted towards utilization of certified MWBEs in the Utilization Plan. Please note whether a firm is serving as a broker or supplier on the contract. A broker is denoted by NAICS code 425120 and is designated as a broker in ESD's MWBE Directory. A supplier is denoted by a NAICS code beginning with 423 or 424, or a NIGP code that does not begin with the number 9, and is designated as a supplier in ESD's MWBE Directory. If a firm is serving as a broker, please additionally provide the percentage of the broker's commission on the contract.

See the Bid Packet at www.efc.ny.gov or consult your designated MBO for further guidance.

Instructions for Minority Business Officers (MBO):

The MBO must complete Section 1. The MBO may designate an Authorized Representative to complete and submit quarterly payment reports on its behalf, and, if so designated, the MBO's Authorized Representative must also complete Section 1. The Authorized Representative may only submit quarterly payment reports on behalf of the MBO and may not submit any other required forms or reports for the MBO. The MBO must complete Section 1 even if designating an Authorized Representative. **Submit the completed, signed (electronic signature box checked and dated) form in Microsoft Word format via e-mail to your EFC MWBE Representative.**

The subject heading of the e-mail to the EFC MWBE Representative should follow the format "UP, Project Number, Contractor." EFC will review the Utilization Plan and notify the MBO via e-mail of its acceptance or denial.

Within 10 days of EFC's acceptance of a Utilization Plan, EFC will post the approved Utilization Plan on the EFC website.

Attachment 5
NYS Environmental Facilities Corporation
Minority- & Women- Owned Business Enterprise (MWBE) Utilization Plan

SECTION 1: MUNICIPAL INFORMATION			
Recipient/Municipality:		County:	
Project No.:	GIGP/EPG No.:	Contract ID:	Registration No. (NYC only):
Minority Business Officer:		Email:	Phone #:
Address of MBO:			
Electronic Signature of MBO: <input type="checkbox"/> I certify that the information submitted herein is true, accurate and complete to the best of my knowledge and belief.			Date:
<i>Complete if applicable:</i>			
Authorized Representative:		Title:	
Authorized Rep. Company:		Email:	Phone #:
Electronic Signature of Authorized Rep.: <input type="checkbox"/> I certify that the information submitted herein is true, accurate and complete to the best of my knowledge and belief.			Date:

SECTION 2: PRIME CONTRACTOR / SERVICE PROVIDER INFORMATION				
Firm Name:			Contract Type: <input type="checkbox"/> Construction <input type="checkbox"/> Other Services	
Prime Firm is Certified as: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> N/A <input type="checkbox"/> Other: Please repeat information in the Utilization Plan below (Section 3). If dual certified, you must select either MBE or WBE.				
Address:		Phone #:	Fed. Employer ID #:	
Description of Work:				
Award Date:	Start Date:	Completion Date:	MWBE GOAL Total	PROPOSED MWBE Participation
Total Contract Amount: \$			MBE: % \$	MBE: % \$
MWBE Eligible Contract Amount: \$ (MWBE Goals are applied to this amount and includes all change orders, amendments, & waivers)			WBE: % \$	WBE: % \$
			Total: % \$	Total: % \$

Attachment 5
NYS Environmental Facilities Corporation
Minority- & Women- Owned Business Enterprise (MWBE) Utilization Plan

SECTION 3: M/WBE SUBCONTRACTOR INFORMATION				
This Submittal is:		<input type="checkbox"/> The First/Original Utilization Plan <input type="checkbox"/> Revised Utilization Plan #:		
NYS Certified M/WBE Subcontractor Info		Contract Amount:		For EFC Use:
		MBE (\$)	WBE (\$)	
Name:	Fed. Employer ID#:			
Address:	Phone #:			
Scope of Work:	Email:			
Select Only One: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other:	Start Date:			
Select Only One: <input type="checkbox"/> Broker __% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	Completion Date:			
Full Contract Amount: \$				
Name:	Fed. Employer ID#:			
Address:	Phone #:			
Scope of Work:	Email:			
Select Only One: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other:	Start Date:			
Select Only One: <input type="checkbox"/> Broker __% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	Completion Date:			
Full Contract Amount: \$				
Name:	Fed. Employer ID#:			
Address:	Phone #:			
Scope of Work:	Email:			
Select Only One: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other:	Start Date:			
Select Only One: <input type="checkbox"/> Broker __% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	Completion Date:			
Full Contract Amount: \$				
Name:	Fed. Employer ID#:			
Address:	Phone #:			
Scope of Work:	Email:			
Select Only One: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other:	Start Date:			
Select Only One: <input type="checkbox"/> Broker __% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	Completion Date:			
Full Contract Amount: \$				

Attachment 5
NYS Environmental Facilities Corporation
Minority- & Women- Owned Business Enterprise (MWBE) Utilization Plan

SECTION 3: M/WBE SUBCONTRACTOR INFORMATION continued				
Name:	Fed. Employer ID#:			
Address:	Phone #:			
Scope of Work:	Email:			
Select Only One: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other:	Start Date:			
Select Only One: <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	Completion Date:			
Full Contract Amount: \$				
Name:	Fed. Employer ID#:			
Address:	Phone #:			
Scope of Work:	Email:			
Select Only One: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other:	Start Date:			
Select Only One: <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	Completion Date:			
Full Contract Amount: \$				
Name:	Fed. Employer ID#:			
Address:	Phone #:			
Scope of Work:	Email:			
Select Only One: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other:	Start Date:			
Select Only One: <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	Completion Date:			
Full Contract Amount: \$				
Name:	Fed. Employer ID#:			
Address:	Phone #:			
Scope of Work:	Email:			
Select Only One: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> Other:	Start Date:			
Select Only One: <input type="checkbox"/> Broker ___% <input type="checkbox"/> Supplier <input type="checkbox"/> N/A	Completion Date:			
Full Contract Amount: \$				
SIGNATURE				
Electronic Signature of Contractor: <input type="checkbox"/> I certify that the information submitted herein is true, accurate and complete to the best of my knowledge and that all MWBE subcontractors will perform a commercially useful function.				Date:
Name (Please Type):				

Attachment 6
New York State Environmental Facilities Corporation
Minority & Women Owned Business Enterprise (MWBE) Waiver Request Form

Instructions for Contractors & Service Providers:

Contractors and Service Providers must complete Sections 2, 3, and 4. **Submit the completed, signed (electronic signature box checked and dated) form in Microsoft Word format to the Recipient's designated Minority Business Officer (MBO).** Incomplete forms will be found deficient.

See the Bid Packet at www.efc.ny.gov or consult your designated MBO for further guidance.

Instructions for Minority Business Officers (MBO):

The MBO must complete Section 1. **Submit the completed, signed (electronic signature box checked and dated) form in Microsoft Word format via e-mail to your EFC MWBE Representative.** The subject heading of the e-mail to the EFC MWBE Representative should follow the format "Waiver Request, Project Number, Contractor." EFC will review and notify the MBO via e-mail of its acceptance or denial.

If a partial MWBE waiver is requested, an MWBE Utilization Plan must also be submitted for the amount of proposed MWBE participation.

SECTION 1: MUNICIPAL INFORMATION			
Recipient/Municipality:		County:	
Project No.:	GIGP/EPG No.:	Contract ID:	Registration No. (NYC only):
Minority Business Officer (MBO):		Email:	Phone #:
Address of MBO:			
Signature of MBO:			Date:
<input type="checkbox"/> I certify that the information submitted herein is true, accurate and complete to the best of my knowledge and belief.			

SECTION 2: PRIME CONTRACTOR / SERVICE PROVIDER INFORMATION			
Firm Name:		Contract Type: <input type="checkbox"/> Construction <input type="checkbox"/> Other Services	
Prime Firm is Certified as: <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> N/A <input type="checkbox"/> Other:			
Address:		Phone #:	Fed. Employer ID #:
Contact Information of Firm Representative Authorized to Discuss Waiver Request:			
Name:	Title:	Phone #:	E-mail:
Description of Work:		EFC MWBE GOAL Total	
Award Date:	Start Date:	Completion Date:	MBE: % \$
Total Contract Amount: \$			WBE: % \$
MWBE Eligible Contract Amount: \$			Total: % \$
(MWBE Goals are applied to this amount and includes all change orders, amendments, & waivers)			

Attachment 6
New York State Environmental Facilities Corporation
Minority & Women Owned Business Enterprise (MWBE) Waiver Request Form

SECTION 3: TYPE OF MWBE WAIVER REQUESTED

1. **Full Waiver** (No MWBE participation)
2. **Partial Waiver** (Less than the MWBE goals; indicate below the proposed MWBE participation)

PROPOSED MWBE Participation

MBE: % \$

WBE: % \$

Total: % \$

3. **Specialty Equipment/Services Waiver** (Must be of SIGNIFICANT cost - list of equipment and cost must be attached in addition to the supporting documentation outlined below)

SECTION 4: SUPPORTING DOCUMENTATION

To be considered, the Request for Waiver Form must be accompanied by the documentation requested in items 1 – 9, as listed below. If a Specialty Equipment Waiver is requested, it must be accompanied by the documentation requested in items 1 - 13. If a Specialty Services Waiver is requested, it must be accompanied by the items requested in items 1 – 9 and item 14. Copies of the following information and all relevant supporting documentation must be submitted along with the request. Please contact EFC for assistance, including sample documentation.

1. A letter of explanation setting forth your basis for requesting a partial or total waiver and detailing the good faith efforts that were made.
2. Copies of advertisements in any general circulation, trade association, and minority- and women-oriented publications in which you solicited MWBEs for the purposes of complying with your participation goals, with the dates of publication.
3. Screenshots of search results (by business description or commodity code) from Empire State Development Corporation's (ESD) MWBE Directory of all certified MWBEs that were solicited for purposes of complying with your MWBE participation goals.
4. Copies of faxes, letters, or e-mails sent to MWBE firms to solicit participation and their responses.
5. A log of solicitation results, consisting of the list of MWBE firms solicited for the contract and the outcome of the solicitations. The log should be broken out into separate areas for each task that is solicited (e.g., trucking, materials, electricians) and clearly provide a rationale for firms included on the completed Utilization Plan as well as for those not chosen. The log should show: that each MWBE firm was contacted twice by two different methods (e.g., fax and phone); who was spoken to; what was said; and the final outcome of the solicitation.
6. A description of any contract documents, plans, or specifications made available to MWBEs for purposes of soliciting their bids and the date and manner in which these documents were made available. Specifically, include information on the scope of work in the contract and a breakout of tasks or equipment, such as

Attachment 6
New York State Environmental Facilities Corporation
Minority & Women Owned Business Enterprise (MWBE) Waiver Request Form

a schedule of values for a construction contract or a proposal or excerpt from a professional services agreement.

7. Documentation of any negotiations between you, the Contractor, and the MWBEs undertaken for purposes of complying with your MWBE participation goals.
8. Any other information you deem relevant which may help us in evaluating your request for a waiver. Examples may include sign-in sheets from any pre-bid meetings where MWBE firms were invited, attendance at MWBE forums, etc.
9. EFC and the MBO reserve the right to request additional information and/or documentation.

Additional Documentation for Requests for Specialty Equipment Waivers:

10. Copies of the appropriate pages of the technical specification related to the equipment showing the choices for manufacturers or other information that limits the choice of vendor.
11. Letter, e-mail or screenshot of website from the manufacturer listing their distributors in NYS and the locations.
12. Screenshots of ESD's MWBE Directory searches for the manufacturer and distributor showing that they are not found in the Directory.
13. An invoice or purchase order showing the value of the equipment.

Additional Documentation for Requests for Specialty Service Waivers:

14. A letter of explanation containing information about the scope of work and why no MWBE firms could be subcontracted to provide that service.

Note: Unless a Total Waiver has been granted, Firms will be required to submit all reports and documents pursuant to the provisions set forth in the procurement and/or contract, as deemed appropriate by EFC, to determine MWBE compliance. In cases where EFC accepts a full or partial waiver of MWBE participation goals, the waiver request will be posted to EFC's website.

SIGNATURE

Electronic Signature of Contractor:

I certify that the information submitted herein is true, accurate and complete to the best of my knowledge.

Name: (Please Type):

Date:

Attachment 7
United States Environmental Protection Agency
Form 6100-2
DBE Subcontractor Participation Form



OMB Control No: 2090-0030
 Approved: 8/13/2013
 Approval Expires: 8/31/2015

**Disadvantaged Business Enterprise (DBE) Program
 DBE Subcontractor Participation Form**

An EPA Financial Assistance Agreement Recipient must require its prime contractors to provide this form to its DBE subcontractors. This form gives a DBE¹ subcontractor² the opportunity to describe work received and/or report any concerns regarding the EPA-funded project (e.g., in areas such as termination by prime contractor, late payments, etc.). The DBE subcontractor can, as an option, complete and submit this form to the EPA DBE Coordinator at any time during the project period of performance.

Subcontractor Name		Project Name	
Bid/ Proposal No.	Assistance Agreement ID No. (if known)	Point of Contact	
Address			
Telephone No.		Email Address	
Prime Contractor Name		Issuing/Funding Entity:	

Contract Item Number	Description of Work Received from the Prime Contractor Involving Construction, Services, Equipment or Supplies	Amount Received by Prime Contractor

¹ A DBE is a Disadvantaged, Minority, or Woman Business Enterprise that has been certified by an entity from which EPA accepts certifications as described in 40 CFR 33.204-33.205 or certified by EPA. EPA accepts certifications from entities that meet or exceed EPA certification standards as described in 40 CFR 33.202.

² Subcontractor is defined as a company, firm, joint venture, or individual who enters into an agreement with a contractor to provide services pursuant to an EPA award of financial assistance.

Attachment 8
United States Environmental Protection Agency
Form 6100-3
DBE Subcontractor Performance Form



OMB Control No: 2090-0030
 Approved: 8/13/2013
 Approval Expires: 8/31/2015

**Disadvantaged Business Enterprise (DBE) Program
 DBE Subcontractor Performance Form**

This form is intended to capture the DBE¹ subcontractor's² description of work to be performed and the price of the work submitted to the prime contractor. An EPA Financial Assistance Agreement Recipient must require its prime contractor to have its DBE subcontractors complete this form and include all completed forms in the prime contractors bid or proposal package.

Subcontractor Name		Project Name	
Bid/ Proposal No.	Assistance Agreement ID No. (if known)	Point of Contact	
Address			
Telephone No.		Email Address	
Prime Contractor Name		Issuing/Funding Entity:	

Contract Item Number	Description of Work Submitted to the Prime Contractor Involving Construction, Services, Equipment or Supplies	Price of Work Submitted to the Prime Contractor

DBE Certified By: <input type="radio"/> DOT <input checked="" type="radio"/> SBA <input checked="" type="radio"/> Other: _____	Meets/ exceeds EPA certification standards? <input checked="" type="radio"/> YES <input type="radio"/> NO <input type="radio"/> Unknown
---	--

¹ A DBE is a Disadvantaged, Minority, or Woman Business Enterprise that has been certified by an entity from which EPA accepts certifications as described in 40 CFR 33.204-33.205 or certified by EPA. EPA accepts certifications from entities that meet or exceed EPA certification standards as described in 40 CFR 33.202.

² Subcontractor is defined as a company, firm, joint venture, or individual who enters into an agreement with a contractor to provide services pursuant to an EPA award of financial assistance.

**Disadvantaged Business Enterprise (DBE) Program
 DBE Subcontractor Performance Form**

I certify under penalty of perjury that the forgoing statements are true and correct. Signing this form does not signify a commitment to utilize the subcontractors above. I am aware of that in the event of a replacement of a subcontractor, I will adhere to the replacement requirements set forth in 40 CFR Part 33 Section 33.302 (c).

Prime Contractor Signature	Print Name
Title	Date

Subcontractor Signature	Print Name
Title	Date

The public reporting and recordkeeping burden for this collection of information is estimated to average three (3) hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

Attachment 9
United States Environmental Protection Agency
Form 6100-4
DBE Subcontractor Utilization Form

**Disadvantaged Business Enterprise (DBE) Program
DBE Subcontractor Utilization Form**

This form is intended to capture the prime contractor's actual and/or anticipated use of identified certified DBE¹ subcontractors² and the estimated dollar amount of each subcontract. An EPA Financial Assistance Agreement Recipient must require its prime contractors to complete this form and include it in the bid or proposal package. Prime contractors should also maintain a copy of this form on file.

Prime Contractor Name		Project Name	
Bid/ Proposal No.	Assistance Agreement ID No. (if known)	Point of Contact	
Address			
Telephone No.		Email Address	
Issuing/Funding Entity:			

I have identified potential DBE certified subcontractors	<input checked="" type="radio"/> YES	<input type="radio"/> NO	
If yes, please complete the table below. If no, please explain:			
Subcontractor Name/ Company Name	Company Address/ Phone/ Email	Est. Dollar Amt	Currently DBE Certified?

Continue on back if needed

¹ A DBE is a Disadvantaged, Minority, or Woman Business Enterprise that has been certified by an entity from which EPA accepts certifications as described in 40 CFR 33.204-33.205 or certified by EPA. EPA accepts certifications from entities that meet or exceed EPA certification standards as described in 40 CFR 33.202.

² Subcontractor is defined as a company, firm, joint venture, or individual who enters into an agreement with a contractor to provide services pursuant to an EPA award of financial assistance.



OMB Control No: 2090-0030
Approved: 8/13/2013
Approval Expires: 8/31/2015

**Disadvantaged Business Enterprise (DBE) Program
DBE Subcontractor Utilization Form**

I certify under penalty of perjury that the forgoing statements are true and correct. Signing this form does not signify a commitment to utilize the subcontractors above. I am aware of that in the event of a replacement of a subcontractor, I will adhere to the replacement requirements set forth in 40 CFR Part 33 Section 33.302 (c).

Prime Contractor Signature	Print Name
Title	Date

The public reporting and recordkeeping burden for this collection of information is estimated to average three (3) hours per response. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

Attachment 10
New York State Environmental Facilities Corporation
CERTIFICATION REGARDING LOBBYING
FOR
CONTRACTS, GRANTS, LOANS, AND
COOPERATIVE AGREEMENTS
40 CFR Part 34

SRF Project No.: _____

The undersigned certifies, to the best of his or her knowledge and belief, that:

- (1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- (2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- (3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

By: _____
Name: _____
Title: _____
Date: _____
Contract ID: _____

**ATTACHMENT A-1
PROGRAM SPECIFIC TERMS AND CONDITIONS**

**Standard Clauses for All New York State
Department of Environmental Conservation Contracts**

The parties to the attached contract, license, lease, grant, amendment or other agreement of any kind (hereinafter "the contract" or "this contract") agree to be bound by the following clauses which are hereby made a part of the contract. The word "Contractor" herein refers to any party to the contract, other than the New York State Department of Environmental Conservation (hereinafter "Department").

A) AGENCY SPECIFIC TERMS AND CONDITIONS

I. Postponement, suspension, abandonment or termination by the Department: Within 15 days of receipt of notice, the Contractor shall deliver to the Department all data, reports, plans, or other documentation related to the performance of this contract, including but not limited to source codes and specifications, guarantees, warranties, as-built plans and shop drawings. In any of these events, the Department shall make settlement with the Contractor upon an equitable basis as determined by the Department which shall fix the value of the work which was performed by the Contractor prior to the postponement, suspension, abandonment or termination of this contract. This clause shall not apply to this contract if the contract contains other provisions applicable to postponement, suspension or termination of the contract.

II. Conflict of Interest

(a) **Organizational Conflict of Interest** - To the best of the Contractor's knowledge and belief, the Contractor warrants that there are no relevant facts or circumstances which could give rise to an organizational conflict of interest, as herein defined, or that the Contractor has disclosed all such relevant information to the Department.

(1) An organizational conflict of interest exists when the nature of the work to be performed under this contract may, without some restriction on future activities, impair or appear to impair the Contractor's objectivity in performing the work for the Department.

(2) The Contractor agrees that if an actual, or potential organizational conflict of interest is discovered at any time after award, whether before or during performance, the Contractor will immediately make a full disclosure in writing to the Department. This disclosure shall include a description of actions which the Contractor has taken or proposes to take, after consultation with the Department, to avoid, mitigate, or minimize the actual or potential conflict.

(3) To the extent that the work under this contract requires access to personal, proprietary or confidential business or financial data of persons or other companies, and as long as such data remains proprietary or confidential, the Contractor shall protect such data from unauthorized use and disclosure and agrees not to use it to compete with such companies.

(b) **Personal Conflict of Interest** - The following provisions with regard to management or professional level employee personnel performing under this contract shall apply until the earlier of the termination date of the affected employee(s) or the duration of the contract.

(1) A personal conflict of interest is defined as a relationship of an employee, subcontractor employee, or consultant with an entity that may impair or appear to impair the objectivity of the employee, subcontractor employee, or consultant in performing the contract work. The Contractor agrees to notify the Department immediately of any actual or potential personal conflict of interest with regard to any such person working on or having access to information regarding this contract, as soon as Contractor becomes aware of such conflict. The Department will notify the Contractor of the appropriate action to be taken.

(2) The Contractor agrees to advise all management or professional level employees involved in the work of this contract, that they must report any personal conflicts of interest to the Contractor. The Contractor must then advise the Department which will advise the Contractor of the appropriate action to be taken.

(3) Unless waived by the Department, the Contractor shall certify annually that, to the best of the Contractor's knowledge and belief, all actual, apparent or potential conflicts of interest, both personal and organizational, as defined herein, have been reported to the Department. Such certification must be signed by a senior executive of the Contractor and submitted in accordance with instructions provided by the Department. Along with the annual certification, the Contractor shall also submit an update of any changes in any conflict of interest plan submitted with its proposal for this contract. The initial certification shall cover the one-year period from the date of contract award, and all subsequent certifications shall cover successive annual periods thereafter. The certification is to be submitted no later than 45 days after the close of the previous certification period covered.

(4) In performing this contract, the Contractor recognizes that its employees may have access to data, either provided by the Department or first generated during contract performance, of a sensitive nature which should not be released without Department approval. If this situation occurs, the Contractor agrees to obtain confidentiality agreements from all affected employees working on requirements under this contract including subcontractors and consultants. Such agreements shall contain provisions which stipulate that each employee agrees not to disclose, either in whole or in part, to any entity external to the Department, Department of Health or the New York Department of Law, any information or data provided by the Department or first generated by the Contractor under this contract, any site-specific cost information, or any enforcement strategy without first obtaining the written permission of the Department. If a Contractor, through an employee or otherwise, is subpoenaed to testify or produce documents, which could result in such disclosure, the Contractor must provide immediate advance notification to the Department so that the Department can authorize such disclosure or have the opportunity to take action to prevent such disclosure. Such agreements shall be effective for the life of the contract and for a period of five (5) years after completion of the contract.

(c) Remedies - The Department may terminate this contract in whole or in part, if it deems such termination necessary to avoid an organizational or personal conflict of interest, or an unauthorized disclosure of information. If the Contractor fails to make required disclosures or misrepresents relevant information to the Department, the Department may terminate the contract, or pursue such other remedies as may be permitted by the terms of Clause I of this Attachment or other applicable provisions of this contract regarding termination.

(d) The Contractor will be ineligible to make a proposal or bid on a contract for which the Contractor has developed the statement of work or the solicitation package

(e) The Contractor agrees to insert in each subcontract or consultant agreement placed hereunder (except for subcontracts or consultant agreements for well drilling, fence erecting, plumbing, utility hookups, security guard services, or electrical services) provisions which shall conform substantially to the language of this clause, including this paragraph (e), unless otherwise authorized by the Department.

III. **Dispute Resolution**

The parties agree to the following steps, or as many as are necessary to resolve disputes between the Department and the Contractor.

(a) The Contractor specifically agrees to submit, in the first instance, any dispute relating to this contract to the designated individual, who shall render a written decision and furnish a copy thereof to the Contractor.

(1) The Contractor must request such decision in writing no more than fifteen days after it knew or should have known of the facts which are the basis of the dispute.

(2) The decision of the designated individual shall be the final DEC determination, unless the Contractor files a written appeal of that decision with the designated appeal individual ("DAI") within twenty days of receipt of that decision.

(b) Upon receipt of the written appeal, the DAI, will review the record and decision. Following divisional procedures in effect at that time, the DAI will take one of the following actions, with written notice to the Contractor.

(1) Remand the matter to the program staff for further negotiation or information if it is determined that the matter is not ripe for review; or

(2) Determine that there is no need for further action, and that the determination of the designated individual is confirmed; or

Contract Number: _____

- (3) Make a determination on the record as it exists.
- (c) The decision of the DAI shall be the final DEC decision unless the Contractor files a written appeal of that decision with the Chair of the Contract Review Committee ("CRC") within twenty days of receipt of that decision.

The designated individual to hear disputes is:

Joe DiMura, Director, Bureau of Water Compliance

(Name and Title)

New York State Department of Environmental Conservation

(Address1)

625 Broadway, 4th Floor, Albany, New York 12233-3506

(Address2)

(518) 402-8117

(Telephone)

The designated appeal individual to review decisions is:

Alan Fuchs, Director, Bureau of Flood Protection and Dam Safety

(Name and Title)

New York State Department of Environmental Conservation

(Address1)

625 Broadway, 4th Floor, Albany, New York 12233-3504

(Address2)

(518) 0428185

(Telephone)

The Chair of the Contract Review Committee is:

Department of Environmental Conservation

Nancy W. Lussier, Chair

Contract Review Committee

625 Broadway

Albany, NY 12233-5010

Telephone: (518) 402-9228

- (d) Upon receipt of the written appeal, the Chair of the CRC, in consultation with the members of the CRC and the Office of General Counsel, will take one of the following actions, or a combination thereof, with written notice to the Contractor.
- (1) Remand the matter to program staff for additional fact finding, negotiation, or other appropriate action; or
- (2) Adopt the decision of the DAI; or
- (3) Consider the matter for review by the CRC in accordance with its procedures.
- (e) Following a decision to proceed pursuant to (d) 3, above, the Chair of the CRC shall convene a proceeding in accordance with the CRC's established contract dispute resolution guidelines. The proceeding will provide the Contractor with an opportunity to be heard.
- (f) Following a decision pursuant to (d) 2 or (d) 3, the CRC shall make a written recommendation to the Deputy Commissioner for Administration who shall render the final DEC determination.
- g) At any time during the dispute resolution process, and upon mutual agreement of the parties, the Office of Hearings and Mediation Services (OHMS) may be requested to provide mediation services or other appropriate means to assist in resolving the dispute. Any findings or recommendations made by the OHMS will not be binding on either party.

Contract Number: _____

- (h) Final DEC determinations shall be subject to review only pursuant to Article 78 of the Civil Practice Law and Rules.
- (i) Pending final determination of a dispute hereunder, the Contractor shall proceed diligently with the performance of the Contract in accordance with the decision of the designated individual. Nothing in this Contract shall be construed as making final the decision of any administrative officer upon a question of law.
- (j) (1) Notwithstanding the foregoing, at the option of the Contractor, the following shall be subject to review by the CRC: Disputes arising under Article 15-A of the Executive Law (Minority and Women Owned Business participation), the Department's determination with respect to the adequacy of the Contractor's Utilization Plan, or the Contractor's showing of good faith efforts to comply therewith. A request for a review before the CRC should be made, in writing, within twenty days of receipt of the Department's determination.
- (2) The CRC will promptly convene a review in accordance with Article 15-A of the Executive Law and the regulations promulgated thereunder.

IV. Tax Exemption

Pursuant to Tax Law Section 1116, the State is exempt from sales and use taxes. A standard state voucher is sufficient evidence thereof. For federal excise taxes, New York's registration Number 14740026K covers tax-free transactions under the Internal Revenue Code.

V. Litigation Support

In the event the Department becomes involved in litigation related to the subject matter of this contract, the Contractor agrees to provide background support and other litigation support, including but not limited to depositions, appearances, and testimony. Any compensation paid to the Contractor under this paragraph will be negotiated and based on the rates established in the contract, or as may otherwise be provided in the contract. No compensation for such support will be paid if the litigation is the result of the Contractor's misconduct, negligence or omissions.

VI. Inventions or Discoveries

Any invention or discovery first made in performance of this Contract shall be the property of the Department, unless otherwise provided in the contract. The Contractor agrees to provide the Department with any and all materials related to this property. At the Department's option, the Contractor may be granted a non-exclusive license.

VII. Intellectual Property and Copyright Materials

Title to and the right to determine the disposition of any copyrights, or copyrightable materials or intellectual property FIRST produced or created in the performance of this Project remains with the Contractor provided that the Contractor agrees to grant to the Department an irrevocable, royalty-free, non-exclusive right to reproduce, translate, and use all such material for its own purposes.

VIII. Patent and Copyright Protection

If any patented or copyrighted material is involved in or results from the performance of this Contract, this Article shall apply.

- (a) The Contractor shall, at its expense, defend any suit instituted against the Department and indemnify the Department against any award of damages and costs made against the Department by a final judgment of a court of last resort based on the claim that any of the products, services or consumable supplies furnished by the Contractor under this Contract infringes any patent, copyright or other proprietary right; provided the Department gives the Contractor:
 - (1) prompt written notice of any action, claim or threat of infringement suit, or other suit, and
 - (2) the opportunity to take over, settle or defend such action at the Contractor's sole expense, and
 - (3) all available information, assistance and authority necessary to the action, at the Contractor's sole expense.

The Contractor shall control the defense of any such suit, including appeals, and all negotiations to effect settlement, but shall keep the Department fully informed concerning the progress of the litigation.

- (b) If the use of any item(s) or parts thereof is held to infringe a patent or copyright and its use is enjoined, or Contractor believes it will be enjoined, the Contractor shall have the right, at its election and expense to take action in the following order of precedence:
- (1) procure for the Department the right to continue using the same item or parts thereof;
 - (2) modify the same so that it becomes non-infringing and of at least the same quality and performance;
 - (3) replace the item(s) or parts thereof with noninfringing items of at least the same quality and performance;
 - (4) if none of the above remedies are available, discontinue its use and eliminate any future charges or royalties pertaining thereto. The Contractor will buy back the infringing product(s) at the State's book value, or in the event of a lease, the parties shall terminate the lease. If discontinuation or elimination results in the Contractor not being able to perform the Contract, the Contract shall be terminated.
- (c) In the event that an action at law or in equity is commenced against the Department arising out of a claim that the Department's use of any item or material pursuant to or resulting from this Contract infringes any patent, copyright or proprietary right, and such action is forwarded by the Department to the Contractor for defense and indemnification pursuant to this Article, the Department shall copy all pleadings and documents forwarded to the Contractor together with the forwarding correspondence and a copy of this Contract to the Office of the Attorney General of the State of New York. If upon receipt of such request for defense, or at any time thereafter, the Contractor is of the opinion that the allegations in such action, in whole or in part, are not covered by the indemnification set forth in this Article, the Contractor shall immediately notify the Department and the Office of the Attorney General of the State of New York in writing and shall specify to what extent the Contractor believes it is and is not obligated to defend and indemnify under the terms and conditions of this Contract. The Contractor shall in such event protect the interests of the Department and State of New York and secure a continuance to permit the State of New York to appear and defend its interests in cooperation with Contractor as is appropriate, including any jurisdictional defenses which the Department and State shall have.
- (d) The Contractor shall, however, have no liability to the Department under this Article if any infringement is based upon or arises out of:
- (1) compliance with designs, plans, or specifications furnished by or on behalf of the Department as to the items;
 - (2) alterations of the items by the Department;
 - (3) failure of the Department to use updated items provided by the Contractor for avoiding infringement;
 - (4) use of items in combination with apparatus or devices not delivered by the Contractor;
 - (5) use of items in a manner for which the same were neither designed nor contemplated; or
 - (6) a patent or copyright in which the Department or any affiliate or subsidiary of the Department has any direct or indirect interest by license or otherwise.
- (e) The foregoing states the Contractor's entire liability for, or resulting from, patent or copyright infringement or claim thereof.

IX. Freedom of Information Requests

The Contractor agrees to provide the Department with any records which must be released in order to comply with a request pursuant to the Freedom of Information Law. The Department will provide the contractor with an opportunity to identify material which may be protected from release and to support its position.

X. Article 15-Requirements

**PARTICIPATION BY MINORITY GROUP MEMBERS AND WOMEN WITH RESPECT TO STATE CONTRACTS:
REQUIREMENTS AND PROCEDURES**

1. General Provisions

- A. The Department is required to implement the provisions of New York State Executive Law Article 15-A and 5 NYCRR Parts 142-144 ("MWBE Regulations") for all State contracts as defined therein, with a value (1) in excess of \$25,000 for labor, services, equipment, materials, or any combination of the foregoing or (2) in excess of \$100,000 for real property renovations and construction.
- B. The Contractor to the subject contract (the "Contractor" and the "Contract," respectively) agrees, in addition to any other nondiscrimination provision of the Contract and at no additional cost to the New York State Department (the "Department"), to fully comply and cooperate with the Department in the implementation of New York State Executive Law Article 15-A. These requirements include equal employment opportunities for minority group members and women ("EEO") and contracting opportunities for certified minority and women-owned business enterprises ("MWBEs"). Contractor's demonstration of "good faith efforts" pursuant to 5 NYCRR §142.8 shall be a part of these requirements. These provisions shall be deemed supplementary to, and not in lieu of, the nondiscrimination provisions required by New York State Executive Law Article 15 (the "Human Rights Law") or other applicable federal, state or local laws.
- C. Failure to comply with all of the requirements herein may result in a finding of non-responsiveness, non-responsibility and/or a breach of contract, leading to the withholding of funds or such other actions, liquidated damages pursuant to Section VII of this Article or enforcement proceedings as allowed by the Contract.

2. Contract Goals

- A. For purposes of this procurement, the Department hereby establishes an overall goal of 20% for Minority and Women-Owned Business Enterprises ("MWBE") participation, 10 % for Minority-Owned Business Enterprises ("MBE") participation and 10 % for Women-Owned Business Enterprises ("WBE") participation (based on the current availability of qualified MBEs and WBEs).
- B. For purposes of providing meaningful participation by MWBEs on the Contract and achieving the Contract Goals established in Section II-A hereof, Contractor should reference the directory of New York State Certified MWBEs found at the following internet address; <https://ny.newnycontracts.com/FrontEnd/VendorSearchPublic.asp> or email: mwbecertification@esd.ny.gov

Additionally, the Contractor is encouraged to contact the Division of Minority and Woman Business Development ((518) 292-5250; (212) 803-2414; or (716) 846-8200) to discuss additional methods of maximizing participation by MWBEs on the Contract.

- C. Where MWBE goals have been established herein, pursuant to 5 NYCRR §142.8, Contractor must document "good faith efforts" to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract. In accordance with Section 316-a of Article 15-A and 5 NYCRR §142.13, the Contractor acknowledges that if Contractor is found to have willfully and intentionally failed to comply with the MWBE participation goals set forth in the Contract, such a finding constitutes a breach of contract and the Contractor shall be liable to the Department for liquidated or other appropriate damages, as set forth herein.

3. Equal Employment Opportunity (EEO)

- A. Contractor agrees to be bound by the provisions of Article 15-A and the MWBE Regulations promulgated by the Division of Minority and Women's Business Development of the State of Economic Development (the "Division"). If any of these terms or provisions conflict with applicable law or regulations, such laws and regulations shall supersede these requirements. Contractor shall comply with the following provisions of Article 15-A:
1. Contractor and Subcontractors shall undertake or continue existing EEO programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status. For these purposes, EEO shall apply in the areas of recruitment, employment, job assignment, promotion, upgrading, demotion, transfer, layoff, or termination and rates of pay or other forms of compensation.

2. The Contractor shall submit an EEO policy statement to the Department within seventy two (72) hours after the date of the notice by Department to award the Contract to the Contractor.
3. If Contractor or Subcontractor does not have an existing EEO policy statement, the Department may provide the Contractor or Subcontractor a model statement. This statement can be found at the link provided in Section 8.
4. The Contractor's EEO policy statement shall include the following language:
 - a. The Contractor will not discriminate against any employee or applicant for employment because of race, creed, color, national origin, sex, age, disability or marital status, will undertake or continue existing EEO programs to ensure that minority group members and women are afforded equal employment opportunities without discrimination, and shall make and document its conscientious and active efforts to employ and utilize minority group members and women in its work force.
 - b. The Contractor shall state in all solicitations or advertisements for employees that, in the performance of the contract, all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status.
 - c. The Contractor shall request each employer Department, labor union, or authorized representative of workers with which it has a collective bargaining or other agreement or understanding, to furnish a written statement that such employer Department, labor union, or representative will not discriminate on the basis of race, creed, color, national origin, sex age, disability or marital status and that such union or representative will affirmatively cooperate in the implementation of the Contractor's obligations herein.
 - d. The Contractor will include the provisions of Subdivisions (a) through (c) of this Subsection 4 and Paragraph "E" of this Section III, which provides for relevant provisions of the Human Rights Law, in every subcontract in such a manner that the requirements of the subdivisions will be binding upon each subcontractor as to work in connection with the Contract.
 - e. **EEO Contract Goals** for the purposes of this procurement, the Department hereby establishes a goal of **10%** Minority Labor Force Participation, **10%** Female Labor Force Participation.

B. Staffing Plan Form

To ensure compliance with this Section, the Contractor shall submit a staffing plan to document the composition of the proposed workforce to be utilized in the performance of the Contract by the specified categories listed, including ethnic background, gender, and Federal occupational categories. Contractors shall complete the Staffing plan as part of the MWBE Utilization Plan and submit at the time of award of the contract.

C. Workforce Employment Utilization Report Form ("Workforce Report")

1. Once a contract has been awarded and during the term of Contract, Contractor is responsible for updating and providing notice to the Department of any changes to the previously submitted Staffing Plan. This information is to be submitted on a quarterly basis during the term of the Contract to report the actual workforce utilized in the performance of the Contract by the specified categories listed including ethnic background, gender, and Federal occupational categories. The Workforce Report must be submitted to report this information.
2. Separate forms shall be completed by Contractor and any subcontractor performing work on the Contract.
3. In limited instances, Contractor may not be able to separate out the workforce utilized in the performance of the Contract from Contractor's and/or subcontractor's total workforce. When a separation can be made, Contractor shall submit the Workforce Report and indicate that the information provided related to the actual workforce utilized on the Contract. When the workforce to be utilized on the contract cannot be separated out from Contractor's and/or subcontractor's total workforce, Contractor shall submit the Workforce Report and indicate that the information provided is Contractor's total workforce during the subject time frame, not limited to work specifically under the Contract.

- D. Contractor shall comply with the provisions of the Human Rights Law, all other State and Federal statutory and constitutional non-discrimination provisions. Contractor and subcontractors shall not discriminate against any employee or applicant for employment because of race, creed (religion), color, sex, national origin, sexual orientation, military status, age, disability, predisposing genetic characteristic, marital status or domestic violence victim status, and shall also follow the requirements of the Human Rights Law with regard to non-discrimination on the basis of prior criminal conviction and prior arrest.

4. MWBE Utilization Plan

- A. The Contractor represents and warrants that Contractor has submitted an MWBE Utilization Plan either prior to, or at the time of, the execution of the contract.
- B. Contractor agrees to use such MWBE Utilization Plan for the performance of MWBEs on the Contract pursuant to the prescribed MWBE goals set forth in Section III-A of this Appendix.
- C. Contractor further agrees that a failure to submit and/or use such MWBE Utilization Plan shall constitute a material breach of the terms of the Contract. Upon the occurrence of such a material breach, Department shall be entitled to any remedy provided herein, including but not limited to, a finding of Contractor non-responsiveness.

5. Waivers

- A. For Waiver Requests Contractor should use Waiver Request Form.
- B. If the Contractor, after making good faith efforts, is unable to comply with MWBE goals, the Contractor may submit a Request for Waiver form documenting good faith efforts by the Contractor to meet such goals. If the documentation included with the waiver request is complete, the Department shall evaluate the request and issue a written notice of acceptance or denial within twenty (20) days of receipt.
- C. If the Department, upon review of the MWBE Utilization Plan and updated Quarterly MWBE Contractor Compliance Reports determines that Contractor is failing or refusing to comply with the Contract goals and no waiver has been issued in regards to such non-compliance, the Department may issue a notice of deficiency to the Contractor. The Contractor must respond to the notice of deficiency within seven (7) business days of receipt. Such response may include a request for partial or total waiver of MWBE Contract Goals.

6. Quarterly MWBE Contractor Compliance Report

Contractor is required to submit a Quarterly MWBE Contractor Compliance Report Form to the Department by the 10th day following each end of quarter over the term of the Contract documenting the progress made towards achievement of the MWBE goals of the Contract.

7. Liquidated Damages - MWBE Participation

- A. Where Department determines that Contractor is not in compliance with the requirements of the Contract and Contractor refuses to comply with such requirements, or if Contractor is found to have willfully and intentionally failed to comply with the MWBE participation goals, Contractor shall be obligated to pay to the Department liquidated damages.
- B. Such liquidated damages shall be calculated as an amount equaling the difference between:
 - 1. All sums identified for payment to MWBEs had the Contractor achieved the contractual MWBE goals; and
 - 2. All sums actually paid to MWBEs for work performed or materials supplied under the Contract.
 - 3.
- C. In the event a determination has been made which requires the payment of liquidated damages and such identified sums have not been withheld by the Department, Contractor shall pay such liquidated damages to the Department within sixty (60) days after they are assessed by the Department unless prior to the expiration of such sixtieth day, the Contractor has filed a complaint with the Director of the Division of Minority and Woman Business Development pursuant to Subdivision 8 of Section 313 of the Executive Law in which event the liquidated damages shall be payable if Director renders a decision in favor of the Department.

8. Forms

The following forms referenced in Article IX 3-A-3, 3B, 3C and 5A can be found at <http://www.dec.ny.gov/about/48854.html>

XI. Iran Divestment Act Requirements

By entering into this Agreement, Contractor certifies in accordance with State Finance Law §165-a that it is not on the "Entities Determined to be Non-Responsive Bidders/Offerers pursuant to the New York State Iran Divestment Act of 2012" ("Prohibited Entities List") posted at: <http://www.ogs.ny.gov/about/reggs/docs/ListofEntities.pdf>

Contractor further certifies that it will not utilize on this Contract any subcontractor that is identified on the Prohibited Entities List. Contractor agrees that should it seek to renew or extend this Contract, it must provide the same certification at the time the Contract is renewed or extended. Contractor also agrees that any proposed Assignee of this Contract will be required to certify that it is not on the Prohibited Entities List before the contract assignment will be approved by the State.

During the term of the Contract, should the state agency receive information that a person (as defined in State Finance Law §165-a) is in violation of the above-referenced certifications, the state agency will review such information and offer the person an opportunity to respond. If the person fails to demonstrate that it has ceased its engagement in the investment activity which is in violation of the Act within 90 days after the determination of such violation, then the state agency shall take such action as may be appropriate and provided for by law, rule, or contract, including, but not limited to, imposing sanctions, seeking compliance, recovering damages, or declaring the Contractor in default.

The state agency reserves the right to reject any bid, request for assignment, renewal or extension for an entity that appears on the Prohibited Entities List prior to the award, assignment, renewal or extension of a contract, and to pursue a responsibility review with respect to any entity that is awarded a contract and appears on the Prohibited Entities list after contract award.

XII. Americans with Disability Act

In the event the monies defined herein are to be used for the development of facilities, the Contractor shall comply with all requirements for providing barrier-free access for the handicapped as established by Article 4A of the New York State Public Buildings Law, Americans with Disability Act, and relevant sections of the New York State Uniform Fire Prevention and Building Code.

XIII. Public Access to Facilities

If applicable to the project, the Contractor agrees to allow public access to any facilities developed with monies defined herein on the same basis to all residents of New York State for a period not less than five (5) years after the date of final payment under this Contract or five (5) years after the date that the final payment was due. Failure to comply with the provisions of this clause shall be considered an abandonment of the Project.

XIV. Project Insurance Considerations

The Contractor agrees to procure and maintain at its own expense and without expense to the Department until final acceptance by the Department of the services covered by this Contract, insurance of the kinds and amounts applicable to the project work plan, hereinafter provided by insurance companies licensed to do business in the State of New York, covering all operations under this Contract. Any delay or time lost as a result of the Contractor not having insurance required by the Contract shall not give rise to a delay claim or any other claim against the Department.

Upon execution of this Contract, the Contractor shall furnish to the Department a certificate or certificates, in form satisfactory to the Department, showing that it has complied with this Article, which certificate or certificates shall provide that the policies shall not be changed or canceled until thirty (30) days written notice has been given to the Department. The certificate shall list the Department and the State of New York as additional insureds, except with respect to worker's compensation and disability coverage. An endorsement in writing added to and made part of the insurance contract for the purpose of changing the original terms such that the Department and the State of New York are added as additional insured. In addition, the applicable insurance policy number(s) referenced on the ACCORD form must be referenced on the endorsement. A copy of the endorsement page, showing the Department and the State of New York as additional insured, must be provided to the Department. This Contract shall be void and of no effect unless the Contractor procures the required insurance policies and maintains them until acceptance of the work. The kinds and amounts of insurance required are as follows:

1. Policy covering the obligations of the Contractor in accordance with the provisions of the Worker's Compensation Law, Employers Liability, and Disability Benefits.

The *only* forms which are accepted as proof of Workers' Compensation Insurance are as follows:

<u>FORM #</u>	<u>FORM TITLE</u>
C-105.2	Certificate of Workers' Compensation Insurance
CE-200	Certificate of Attestation of Exemption – (no employees)
U-26.3	State Insurance Fund Version of the C-105.2 form
SI-12	Certificate of Workers' Compensation Self-Insurance
GSI-105.2	Certificate of Participation in Worker's Comp Group Self-Insurance

The *only* forms which are accepted as proof of Disability Benefit Insurance are as follows:

<u>FORM #</u>	<u>FORM TITLE</u>
DB-120.1	Certificate of Disability Benefit Insurance
DB-120.2	Certificate of Participation in Disability Benefits Group Self-insurance
DB-155	Certificate of Disability Benefit Self-Insurance
CE-200	Certificate of Attestation of Exemption – (no employees)

An ACORD form is **NOT** an acceptable proof of Workers' Compensation coverage. **ALL OF THE ABOVE REFERENCED FORMS, EXCEPT CE-200, SI-12 & DB-155 MUST NAME:** The New York State Department of Environmental Conservation, Division/Program of Water
625 Broadway, Albany, NY 12233-3500, as the Entity Requesting Proof of Coverage (Entity being listed as the Certificate Holder).

Additional information can be obtained at the Worker's Compensation website:
<http://www.wcb.ny.gov/content/main/Employers/Employers.jsp>

2. Commercial General Liability Insurance with a limit of not less than \$1,000,000 each occurrence. Such insurance shall cover liability arising from premises operations, independent contractors, products-completed operations, broad form property damage, personal and advertising injury, cross liability assumed in a contract (including tort liability of another assumed in a contract).

3. Comprehensive Business Automobile Liability Insurance with a limit of not less than \$1,000,000 each accident. Such insurance shall cover liability arising out of any automobile including owned, leased, hired and non owned automobiles.

4. The Contractor shall require that any subcontractors hired, carry insurance with the same limits and provisions as provided herein.

XV. Amendment/Extensions

The Contract may be amended and/or extended by mutual written consent of all parties. Amendment forms will be incorporated into this Contract and will not take effect until approved by all applicable State agencies and final approval by the Office of the State Comptroller, if applicable. Contract amendments may be conditioned upon funds being re-appropriated in the State Budget each state fiscal year to the Department.

XVI. Environmental Protection Fund Acknowledgement

If applicable, in recognition of a portion of the Department funds utilized for any work completed under this Contract, the Contractor agrees to acknowledge in any communication to the public, that such funding was provided from the Environmental Protection Fund as administered by the New York State Department of Environmental Conservation.

Contract Number: _____

XVII. Vendor Responsibility

- A. The Contractor shall at all times during the Contract term remain responsible. The Contractor agrees, if requested by the Commissioner or his or her designee, to present evidence of its continuing legal authority to do business in New York State, integrity, experience, ability, prior performance, and organizational and financial capacity.
- B. The Department recommends that vendors file a required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at http://www.osc.state.ny.us/vendrep/vendor_index.htm or go directly to the VendRep System online at <https://portal.osc.state.ny.us>.
- C. Vendors must provide their New York State Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672 or by email at ciohelpdesk@osc.state.ny.us. Vendors opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website www.osc.state.ny.us/vendrep or may contact the Department of the Office of the State Comptroller's Help Desk for a copy of the paper form.
- D. Upon written notice to the Contractor, and a reasonable opportunity to be heard with appropriate Department officials or staff, the Contract may be terminated by the Commissioner or his or her designee at the Contractor's expense where the Contractor is determined by the Commissioner or his or her designee to be non-responsible. In such event, the Commissioner or his or her designee may complete the contractual requirements in any manner he or she may deem advisable and pursue available legal or equitable remedies for breach.

XVIII. Permits

- A. If applicable, the Contractor agrees to obtain all required permits, including but not limited to, local, state and federal permits prior to the commencement of any project related work. The Contractor agrees that all work performed in relation to the project by the Contractor or its agents, representatives, or contractors will comply with all relevant federal, state and local laws, rules, regulations and standards, zoning and building codes, ordinances, operating certificates for facilities, or licenses for an activity.
- B. With respect to the project, the contractor certifies that is has complied, and shall continue to comply with all requirements of the State Environmental Quality Review Act (SEQRA). The Contractor agrees to provide all environmental documents as may be required by the Department. The Contractor has notified, and shall continue to notify, the Department of all actions proposed for complying with the environmental review requirements imposed by SEQRA.

XIX. Approvals

The Contractor agrees that the project will be performed in accordance with the condition of any applicable administrative, judicial or governmental orders or approvals.

XX. Site Access

If applicable, the Contractor represents it has or will obtain title to or sufficient interest in the project site, including rights-of-way and necessary easements, before the start of the project to ensure undisturbed use and possession for purposes of construction and completion of the project, as well as operation of the project throughout its useful life. The Department requires an affirmation from the contractor's attorney as proof of title or sufficient interest in the project site.

XXI. Cost Overruns

If applicable, any cost overruns will not be paid by the Department and the Department is not committed to seeking additional appropriations or re-appropriation of funds and will not be responsible for the maintenance and operation of any facility which may be developed or equipment which may be purchased with the funds herein identified.

XXII. Construction Plans

It is the Contractor's responsibility (if applicable to the Project) to have all construction contract plans, specifications and cost estimates certified by a professional engineer licensed to practice in the State of New York. All certified plans and specifications shall become part of this Contract and shall be kept on the project site at all times.

Contract Number: _____

XXIII. Payment and Reporting

- A. The Contractor agrees to fully fund the Project and then seek reimbursement from the Department for eligible project costs. The Department will not process final payment for this Contract, until the Department determines that the project was completed satisfactorily and upon receipt of all required final close-out payment documentation in accordance with the direction and requirements described in Attachment D.

- B. The Contractor will be entitled to receive reimbursement payments for work, projects, and/or services rendered as detailed and described in Attachment C and Attachment D of this Contract. Claims for reimbursement must be accompanied by such receipts and documents verifying expenditures as may be required by the Department and by the Comptroller. Satisfactory documentation shall include, but is not limited to, signed copies of payment vouchers or invoices, canceled checks/or the latest cumulative work-in-place estimate for each construction Contract, and any further documentation as may be required by the Department and/or the Comptroller. The Department reserves the right, in its sole discretion, to determine if the reimbursement request and accompanying documentation submitted by the Contractor is in satisfactory form and substance. A final payment determination will be based upon the Department's review of the Contractor's final voucher submission and reporting as described in Attachment D.

XXIV. On-Site Inspections

The State, Department or authorized representatives will conduct a review of the Project funded from this Contract, which may include on-site inspections, at a time that is satisfactory to the Department.

CERTIFICATE OF AUTHORITY

I, _____
(Officer other than officer executing proposal documents)

certify that I am the _____ of the _____
(Title) (Name of Contractor)

_____ a corporation, duly organized and in good standing under the

(Law under which organized, e.g., the New York Business Corporation Law)

named in the foregoing agreement; that _____
(Person executing proposal documents)

who signed said agreement on behalf of the Contractor was, at the time of execution,
_____ of the Contractor; that said agreement was duly signed for
(Title of such person)

and in behalf of said Contractor by authority of its Board of Directors, thereunto duly authorized, and that
such authority is in full force and effect at the date hereof.

Signature Corporate Seal

STATE OF NEW YORK) SS.:
COUNTY OF ESSEX)

On this _____ day of _____, 20____, before me personally came _____
_____ to me known, and known to me to be the _____

(Title) of _____ the corporation described in
and which executed the above certificate, who being by me duly sworn did depose and say that he, the said _____
_____ resides at _____, and that he is _____
_____ of said corporation and knows the corporate seal of the said corporation; that the
seal affixed to the above certificate is such corporate seal and that it was so affixed by order of the Board of
Directors of said corporation, and that he signed his name thereto by like order.

Notary Public County

**NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIRE
FOR-PROFIT BUSINESS ENTITY**

You have selected the For-Profit Non-Construction questionnaire which may be printed and completed in this format or, for your convenience, may be completed online using the New York State VendRep System.

COMPLETION & CERTIFICATION

The person(s) completing the questionnaire must be knowledgeable about the vendor's business and operations. An owner or officer must certify the questionnaire and the signature must be notarized.

NEW YORK STATE VENDOR IDENTIFICATION NUMBER (VENDOR ID)

The Vendor ID is a ten-digit identifier issued by New York State when the vendor is registered on the Statewide Vendor File. This number must now be included on the questionnaire. If the business entity has not obtained a Vendor ID, contact the IT Service Desk at ITServiceDesk@osc.state.ny.us or call 866-370-4672.

DEFINITIONS

All underlined terms are defined in the "New York State Vendor Responsibility Definitions List," found at www.osc.state.ny.us/vendrep/documents/questionnaire/definitions.pdf. These terms may not have their ordinary, common or traditional meanings. Each vendor is strongly encouraged to read the respective definitions for any and all underlined terms. By submitting this questionnaire, the vendor agrees to be bound by the terms as defined in the "New York State Vendor Responsibility Definitions List" existing at the time of certification.

RESPONSES

Every question must be answered. Each response must provide all relevant information which can be obtained within the limits of the law. However, information regarding a determination or finding made in error which was subsequently corrected is not required. Individuals and Sole Proprietors may use a Social Security Number but are encouraged to obtain and use a federal Employer Identification Number (EIN).

REPORTING ENTITY

Each vendor must indicate if the questionnaire is filed on behalf of the entire Legal Business Entity or an Organizational Unit within or operating under the authority of the Legal Business Entity and having the same EIN. Generally, the Organizational Unit option may be appropriate for a vendor that meets the definition of "Reporting Entity" but due to the size and complexity of the Legal Business Entity, is best able to provide the required information for the Organizational Unit, while providing more limited information for other parts of the Legal Business Entity and Associated Entities.

ASSOCIATED ENTITY

An Associated Entity is one that owns or controls the Reporting Entity or any entity owned or controlled by the Reporting Entity. However, the term Associated Entity does not include "sibling organizations" (i.e., entities owned or controlled by a parent company that owns or controls the Reporting Entity), unless such sibling entity has a direct relationship with or impact on the Reporting Entity.

STRUCTURE OF THE QUESTIONNAIRE

The questionnaire is organized into eleven sections. Section I is to be completed for the Legal Business Entity. Section II requires the vendor to specify the Reporting Entity for the questionnaire. Section III refers to the individuals of the Reporting Entity, while Sections IV-VIII require information about the Reporting Entity. Section IX pertains to any Associated Entities, with one question about their Officials/Owners. Section X relates to disclosure under the Freedom of Information Law (FOIL). Section XI requires an authorized contact for the questionnaire information.

**NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIRE
FOR-PROFIT BUSINESS ENTITY**

I. LEGAL BUSINESS ENTITY INFORMATION			
<u>Legal Business Entity Name*</u>		<u>EIN</u>	
Address of the <u>Principal Place of Business</u> (street, city, state, zip code)		<u>New York State Vendor Identification Number</u>	
		Telephone ext.	Fax
Email		Website	
Additional <u>Legal Business Entity Identities</u> : If applicable, list any other <u>DBA</u> , <u>Trade Name</u> , <u>Former Name</u> , <u>Other Identity</u> , or <u>EIN</u> used in the last five (5) years and the status (active or inactive).			
Type	Name	EIN	Status
1.0 <u>Legal Business Entity Type</u> – Check appropriate box and provide additional information:			
<input type="checkbox"/> <u>Corporation</u> (including <u>PC</u>)		Date of Incorporation	
<input type="checkbox"/> <u>Limited Liability Company (LLC or PLLC)</u>		Date of Organization	
<input type="checkbox"/> <u>Partnership</u> (including <u>LLP</u> , <u>LP</u> or <u>General</u>)		Date of Registration or Establishment	
<input type="checkbox"/> <u>Sole Proprietor</u>		How many years in business?	
<input type="checkbox"/> Other		Date Established	
If Other, explain:			
1.1 Was the <u>Legal Business Entity</u> formed or incorporated in New York State?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If 'No,' indicate jurisdiction where <u>Legal Business Entity</u> was formed or incorporated and attach a <u>Certificate of Good Standing</u> from the applicable jurisdiction or provide an explanation if a <u>Certificate of Good Standing</u> is not available.			
<input type="checkbox"/> United States State _____			
<input type="checkbox"/> Other Country _____			
Explain, if not available:			
1.2 Is the <u>Legal Business Entity</u> publicly traded?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," provide <u>CIK Code</u> or Ticker Symbol			
1.3 Does the <u>Legal Business Entity</u> have a <u>DUNS</u> Number?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," Enter <u>DUNS</u> Number			

*All underlined terms are defined in the "New York State Vendor Responsibility Definitions List," which can be found at www.osc.state.ny.us/vendrep/documents/questionnaire/definitions.pdf.

**NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIRE
FOR-PROFIT BUSINESS ENTITY**

I. LEGAL BUSINESS ENTITY INFORMATION

1.4 If the Legal Business Entity's Principal Place of Business is not in New York State, does the Legal Business Entity maintain an office in New York State? Yes No
 N/A
 (Select "N/A," if Principal Place of Business is in New York State.)

If "Yes," provide the address and telephone number for one office located in New York State.

1.5 Is the Legal Business Entity a New York State certified Minority-Owned Business Enterprise (MBE), Women-Owned Business Enterprise (WBE), New York State Small Business (SB) or a federally certified Disadvantaged Business Enterprise (DBE)? Yes No

If "Yes," check all that apply:

- New York State certified Minority-Owned Business Enterprise (MBE)
- New York State certified Women-Owned Business Enterprise (WBE)
- New York State Small Business (SB)
- Federally certified Disadvantaged Business Enterprise (DBE)

1.6 Identify Officials and Principal Owners, if applicable. For each person, include name, title and percentage of ownership. Attach additional pages if necessary. If applicable, reference to relevant SEC filing(s) containing the required information is optional.

Name	Title	Percentage Ownership <i>(Enter 0% if not applicable)</i>

**NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIRE
FOR-PROFIT BUSINESS ENTITY**

II. REPORTING ENTITY INFORMATION

2.0 The Reporting Entity for this questionnaire is:

Note: Select only one.

Legal Business Entity

Note: If selecting this option, "Reporting Entity" refers to the entire Legal Business Entity for the remainder of the questionnaire. (SKIP THE REMAINDER OF SECTION II AND PROCEED WITH SECTION III.)

Organizational Unit within and operating under the authority of the Legal Business Entity

SEE DEFINITIONS OF "REPORTING ENTITY" AND "ORGANIZATIONAL UNIT" FOR ADDITIONAL INFORMATION ON CRITERIA TO QUALIFY FOR THIS SELECTION.

Note: If selecting this option, "Reporting Entity" refers to the Organizational Unit within the Legal Business Entity for the remainder of the questionnaire. (COMPLETE THE REMAINDER OF SECTION II AND ALL REMAINING SECTIONS OF THIS QUESTIONNAIRE.)

IDENTIFYING INFORMATION

a) Reporting Entity Name

Address of the Primary Place of Business (street, city, state, zip code)

Telephone

ext.

b) Describe the relationship of the Reporting Entity to the Legal Business Entity

c) Attach an organizational chart

d) Does the Reporting Entity have a DUNS Number?

Yes No

If "Yes," enter DUNS Number

e) Identify the designated manager(s) responsible for the business of the Reporting Entity.
For each person, include name and title. Attach additional pages if necessary.

Name

Title

**NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIRE
FOR-PROFIT BUSINESS ENTITY**

INSTRUCTIONS FOR SECTIONS III THROUGH VII

For each "Yes," provide an explanation of the issue(s), relevant dates, the government entity involved, any remedial or corrective action(s) taken and the current status of the issue(s). For each "Other," provide an explanation which provides the basis for not definitively responding "Yes" or "No." Provide the explanation at the end of the section or attach additional sheets with numbered responses, including the Reporting Entity name at the top of any attached pages.

III. LEADERSHIP INTEGRITY	
<i>Within the past five (5) years, has any current or former reporting entity official or any individual currently or formerly having the authority to sign, execute or approve bids, proposals, contracts or supporting documentation on behalf of the reporting entity with any government entity been:</i>	
3.0 <u>Sanctioned</u> relative to any business or professional permit and/or license?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other
3.1 <u>Suspended, debarred, or disqualified</u> from any government contracting process?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other
3.2 The subject of an <u>investigation</u> , whether open or closed, by any <u>government entity</u> for a civil or criminal violation for any business-related conduct?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other
3.3 Charged with a misdemeanor or felony, indicted, granted immunity, convicted of a crime or subject to a <u>judgment</u> for: a) Any business-related activity; or b) Any crime, whether or not business-related, the underlying conduct of which was related to truthfulness?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other
For each "Yes" or "Other" explain:	

IV. INTEGRITY – CONTRACT BIDDING	
<i>Within the past five (5) years, has the reporting entity:</i>	
4.0 Been <u>suspended</u> or <u>debarred</u> from any <u>government contracting process</u> or been <u>disqualified</u> on any government procurement, permit, license, concession, franchise or lease, including, but not limited to, <u>debarment</u> for a violation of New York State Workers' Compensation or Prevailing Wage laws or New York State Procurement Lobbying Law?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.1 Been subject to a denial or revocation of a government prequalification?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.2 Been denied a contract award or had a bid rejected based upon a <u>non-responsibility finding</u> by a <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.3 Had a low bid rejected on a <u>government contract</u> for failure to <u>make good faith efforts</u> on any <u>Minority-Owned Business Enterprise, Women-Owned Business Enterprise or Disadvantaged Business Enterprise</u> goal or <u>statutory affirmative action requirements</u> on a previously held contract?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.4 Agreed to a voluntary exclusion from bidding/contracting with a <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.5 Initiated a request to withdraw a bid submitted to a <u>government entity</u> in lieu of responding to an information request or subsequent to a formal request to appear before the <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
For each "Yes," explain:	

**NEW YORK STATE
VENDOR RESPONSIBILITY QUESTIONNAIRE
FOR-PROFIT BUSINESS ENTITY**

V. INTEGRITY – CONTRACT AWARD	
<i>Within the past five (5) years, has the reporting entity:</i>	
5.0 Been <u>suspended</u> , cancelled or <u>terminated for cause</u> on any <u>government contract</u> including, but not limited to, a <u>non-responsibility finding</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.1 Been subject to an <u>administrative proceeding</u> or civil action seeking specific performance or restitution in connection with any <u>government contract</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.2 Entered into a formal monitoring agreement as a condition of a contract award from a <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
For each "Yes," explain:	

VI. CERTIFICATIONS/LICENSES	
<i>Within the past five (5) years, has the reporting entity:</i>	
6.0 Had a revocation, <u>suspension</u> or <u>disbarment</u> of any business or professional permit and/or license?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.1 Had a denial, decertification, revocation or forfeiture of New York State certification of <u>Minority-Owned Business Enterprise</u> , <u>Women-Owned Business Enterprise</u> or federal certification of <u>Disadvantaged Business Enterprise</u> status for other than a change of ownership?	<input type="checkbox"/> Yes <input type="checkbox"/> No
For each "Yes," explain:	

VII. LEGAL PROCEEDINGS	
<i>Within the past five (5) years, has the reporting entity:</i>	
7.0 Been the subject of an <u>investigation</u> , whether open or closed, by any <u>government entity</u> for a civil or criminal violation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.1 Been the subject of an indictment, grant of immunity, <u>judgment</u> or conviction (including entering into a plea bargain) for conduct constituting a crime?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.2 Received any OSHA citation and Notification of Penalty containing a violation classified as <u>serious</u> or <u>willful</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.3 Had a <u>government entity</u> find a willful prevailing wage or supplemental payment violation or any other willful violation of New York State Labor Law?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.4 Entered into a consent order with the New York State Department of Environmental Conservation, or received an enforcement determination by any <u>government entity</u> involving a violation of federal, state or local environmental laws?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.5 Other than previously disclosed: a) Been subject to fines or penalties imposed by <u>government entities</u> which in the aggregate total \$25,000 or more; or b) Been convicted of a criminal offense pursuant to any administrative and/or regulatory action taken by any <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
For each "Yes," explain:	

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VIII. FINANCIAL AND ORGANIZATIONAL CAPACITY	
8.0 Within the past five (5) years, has the <u>Reporting Entity</u> received any <u>formal unsatisfactory performance assessment(s)</u> from any <u>government entity</u> on any contract?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," provide an explanation of the issue(s), relevant dates, the <u>government entity</u> involved, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.	
8.1 Within the past five (5) years, has the <u>Reporting Entity</u> had any <u>liquidated damages</u> assessed over \$25,000?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," provide an explanation of the issue(s), relevant dates, contracting party involved, the amount assessed and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.	
8.2 Within the past five (5) years, have any <u>liens or judgments</u> (not including UCC filings) over \$25,000 been filed against the <u>Reporting Entity</u> which remain undischarged?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," provide an explanation of the issue(s), relevant dates, the Lien holder or Claimant's name(s), the amount of the <u>lien(s)</u> and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.	
8.3 In the last seven (7) years, has the <u>Reporting Entity</u> initiated or been the subject of any bankruptcy proceedings, whether or not closed, or is any bankruptcy proceeding pending?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," provide the bankruptcy chapter number, the court name and the docket number. Indicate the current status of the proceedings as "Initiated," "Pending" or "Closed." Provide answer below or attach additional sheets with numbered responses.	
8.4 During the past three (3) years, has the <u>Reporting Entity</u> failed to file or pay any tax returns required by <u>federal</u> , state or local tax laws?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," provide the taxing jurisdiction, the type of tax, the liability year(s), the tax liability amount the <u>Reporting Entity</u> failed to file/pay and the current status of the tax liability. Provide answer below or attach additional sheets with numbered responses.	
8.5 During the past three (3) years, has the <u>Reporting Entity</u> failed to file or pay any New York State unemployment insurance returns?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," provide the years the <u>Reporting Entity</u> failed to file/pay the insurance, explain the situation and any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.	
8.6 During the past three (3) years, has the <u>Reporting Entity</u> had any <u>government audit(s)</u> completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
a) If "Yes," did any audit of the <u>Reporting Entity</u> identify any reported significant deficiencies in internal control, fraud, illegal acts, significant violations of provisions of contract or grant agreements, significant abuse or any <u>material disallowance</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes" to 8.6 a), provide an explanation of the issue(s), relevant dates, the <u>government entity</u> involved, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.	

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IX. ASSOCIATED ENTITIES	
<i>This section pertains to any entity(ies) that either controls or is controlled by the <u>reporting entity</u>. (See definition of "<u>associated entity</u>" for additional information to complete this section.)</i>	
9.0 Does the <u>Reporting Entity</u> have any <u>Associated Entities</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Note: All questions in this section must be answered if the <u>Reporting Entity</u> is either:</p> <ul style="list-style-type: none"> - An <u>Organizational Unit</u>; or - The entire <u>Legal Business Entity</u> which controls, or is controlled by, any other entity(ies). <p>If "No," SKIP THE REMAINDER OF SECTION IX AND PROCEED WITH SECTION X.</p>	
9.1 Within the past five (5) years, has any <u>Associated Entity Official</u> or <u>Principal Owner</u> been charged with a misdemeanor or felony, indicted, granted immunity, convicted of a crime or subject to a <u>judgment</u> for:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>a) Any business-related activity; or</p> <p>b) Any crime, whether or not business-related, the underlying conduct of which was related to truthfulness?</p>	
If "Yes," provide an explanation of the issue(s), the individual involved, his/her title and role in the <u>Associated Entity</u> , his/her relationship to the <u>Reporting Entity</u> , relevant dates, the <u>government entity</u> involved, any remedial or corrective action(s) taken and the current status of the issue(s).	
9.2 Does any <u>Associated Entity</u> have any currently undischarged <u>federal</u> , New York State, New York City or New York local government <u>liens</u> or <u>judgments</u> (not including UCC filings) over \$50,000?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If "Yes," provide an explanation of the issue(s), identify the <u>Associated Entity</u> 's name(s), <u>EIN</u> (s), primary business activity, relationship to the <u>Reporting Entity</u> , relevant dates, the Lien holder or Claimant's name(s), the amount of the <u>lien</u> (s) and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.	
9.3 Within the past five (5) years, has any <u>Associated Entity</u> :	
a) Been <u>disqualified</u> , <u>suspended</u> or <u>debarred</u> from any <u>federal</u> , New York State, New York City or other New York local government <u>contracting process</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) Been denied a contract award or had a bid rejected based upon a <u>non-responsibility finding</u> by any <u>federal</u> , New York State, New York City, or New York local <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c) Been <u>suspended</u> , <u>cancelled</u> or <u>terminated for cause</u> (including for <u>non-responsibility</u>) on any <u>federal</u> , New York State, New York City or New York local <u>government contract</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d) Been the subject of an <u>investigation</u> , whether open or closed, by any <u>federal</u> , New York State, New York City, or New York local <u>government entity</u> for a civil or criminal violation with a penalty in excess of \$500,000?	<input type="checkbox"/> Yes <input type="checkbox"/> No
e) Been the subject of an indictment, grant of immunity, <u>judgment</u> , or conviction (including entering into a plea bargain) for conduct constituting a crime?	<input type="checkbox"/> Yes <input type="checkbox"/> No
f) Been convicted of a criminal offense pursuant to any administrative and/or regulatory action taken by any <u>federal</u> , New York State, New York City, or New York local <u>government entity</u> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
g) Initiated or been the subject of any bankruptcy proceedings, whether or not closed, or is any bankruptcy proceeding pending?	<input type="checkbox"/> Yes <input type="checkbox"/> No
For each "Yes," provide an explanation of the issue(s), identify the <u>Associated Entity</u> 's name(s), <u>EIN</u> (s), primary business activity, relationship to the <u>Reporting Entity</u> , relevant dates, the <u>government entity</u> involved, any remedial or corrective action(s) taken and the current status of the issue(s). Provide answer below or attach additional sheets with numbered responses.	

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X. FREEDOM OF INFORMATION LAW (FOIL)	
<p>10. Indicate whether any information supplied herein is believed to be exempt from disclosure under the Freedom of Information Law (FOIL). Note: A determination of whether such information is exempt from FOIL will be made at the time of any request for disclosure under FOIL.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>If "Yes," indicate the question number(s) and explain the basis for the claim.</p>	

XI. AUTHORIZED CONTACT FOR THIS QUESTIONNAIRE		
Name	Telephone	Fax
	ext.	
Title	Email	

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Certification

The undersigned: (1) recognizes that this questionnaire is submitted for the express purpose of assisting New York State government entities (including the Office of the State Comptroller (OSC)) in making responsibility determinations regarding award or approval of a contract or subcontract and that such government entities will rely on information disclosed in the questionnaire in making responsibility determinations; (2) acknowledges that the New York State government entities and OSC may, in their discretion, by means which they may choose, verify the truth and accuracy of all statements made herein; and (3) acknowledges that intentional submission of false or misleading information may result in criminal penalties under State and/or Federal Law, as well as a finding of non-responsibility, contract suspension or contract termination.

The undersigned certifies that he/she:

- is knowledgeable about the submitting Business Entity’s business and operations;
- has read and understands all of the questions contained in the questionnaire;
- has not altered the content of the questionnaire in any manner;
- has reviewed and/or supplied full and complete responses to each question;
- to the best of his/her knowledge, information and belief, confirms that the Business Entity’s responses are true, accurate and complete, including all attachments, if applicable;
- understands that New York State government entities will rely on the information disclosed in the questionnaire when entering into a contract with the Business Entity; and
- is under an obligation to update the information provided herein to include any material changes to the Business Entity’s responses at the time of bid/proposal submission through the contract award notification, and may be required to update the information at the request of the New York State government entities or OSC prior to the award and/or approval of a contract, or during the term of the contract.

Signature of Owner/Official _____

Printed Name of Signatory _____

Title _____

Name of Business _____

Address _____

City, State, Zip _____

Sworn to before me this _____ day of _____, 20__;

Notary Public

CERTIFICATION OF COMPLIANCE WITH THE IRAN DIVESTMENT ACT

As a result of the Iran Divestment Act of 2012 (the "Act"), Chapter 1 of the 2012 Laws of New York, a new provision has been added to State Finance Law (SFL) § 165-a and New York General Municipal Law § 103-g, both effective April 12, 2012. Under the Act, the Commissioner of the Office of General Services (OGS) will be developing a list of "persons" who are engaged in "investment activities in Iran" (both are defined terms in the law) (the "Prohibited Entities List"). Pursuant to SFL § 165-a(3)(b), the initial list is expected to be issued no later than 120 days after the Act's effective date at which time it will be posted on the OGS website.

By submitting a bid in response to this solicitation or by assuming the responsibility of a Contract awarded hereunder, each Bidder/Contractor, any person signing on behalf of any Bidder/Contractor and any assignee or subcontractor and, in the case of a joint bid, each party thereto, certifies, under penalty of perjury, that once the Prohibited Entities List is posted on the OGS website, that to the best of its knowledge and belief, that each Bidder/Contractor and any subcontractor or assignee is not identified on the Prohibited Entities List created pursuant to SFL § 165-a(3)(b).

Additionally, Bidder/Contractor is advised that once the Prohibited Entities List is posted on the OGS Website, any Bidder/Contractor seeking to renew or extend a Contract or assume the responsibility of a Contract awarded in response to this solicitation must certify at the time the Contract is renewed, extended or assigned that it is not included on the Prohibited Entities List.

During the term of the Contract, should the County receive information that a Bidder/Contractor is in violation of the above-referenced certification, the County will offer the person or entity an opportunity to respond. If the person or entity fails to demonstrate that he/she/it has ceased engagement in the investment which is in violation of the Act within 90 days after the determination of such violation, then the County shall take such action as may be appropriate including, but not limited to, imposing sanctions, seeking compliance, recovering damages or declaring the Bidder/Contractor in default.

The County reserves the right to reject any bid or request for assignment for a Bidder/Contractor that appears on the Prohibited Entities List prior to the award of a contract and to pursue a responsibility review with respect to any Bidder/Contractor that is awarded a contract and subsequently appears on the Prohibited Entities List.

I, _____, being duly sworn, deposes and says that he/she is the _____ of the _____ Corporation and that neither the Bidder/Contractor nor any proposed subcontractor is identified on the Prohibited Entities List.

SIGNED

SWORN to before me this _____
day of _____, 20__

Notary Public

NON-COLLUSIVE BIDDING CERTIFICATION

1. By submission of this bid, the undersigned bidder and each person signing on behalf of such bidder certifies and in the case of a joint bid each party thereto certifies as to its own organization — UNDER PENALTY OF PERJURY, that to the best of the undersigned's knowledge and belief:

(a) The prices in this bid have been arrived at independently without collusion, consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor;

(b) Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly, to any other bidder or to any competitor; and

(c) No attempt has been made or will be made by the bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

2. The undersigned acknowledges and agrees that a bid shall not be considered for award nor shall any award be made where any of the above have not been complied with; provided however, that if in any case the bidder cannot make the foregoing certification, the bidder shall so state and shall furnish with the bid a signed statement which sets forth in detail the reasons therefor. Where one or more of the above has/have not been complied with, the bid shall not be considered for award nor shall any award be made unless the political subdivision, public department, agency or official thereof to which the bid is made, or his designee, determines that such disclosure was not made for the purpose of restricting competition.

3. The undersigned also acknowledges and agrees that the fact that a bidder (a) has published price lists, rates, or tariffs covering items being procured, (b) has informed prospective customers of proposed or pending publication of new or revised price lists for such items, or (c) has sold the same items to other customers at the same prices being bid, does not constitute, without more, a disclosure within the meaning of paragraph 1 above.

4. The undersigned further acknowledges and agrees that any bid hereafter made to any political subdivision of the state or any public department, agency or official thereof by a bidder which is a corporation or a limited liability company for work or services performed or to be performed or goods sold or to be sold, where competitive bidding is required by statute, rule, regulation, or local law, and where such bid contains the certification referred to in paragraph 1 of this certificate, shall be deemed to have been authorized by the board of directors of the bidder, and such authorization shall be deemed to include the signing and submission of the bid and the inclusion therein of the certificate as to non-collusion as the act and deed of the corporation or limited liability company.

Name of Bidder: _____
(print full legal name)

Date Signed: _____ Signature: _____

Name of Person Signing Certificate: _____
(print full legal name of signer)

Bidder is (check one): an individual, a limited liability partnership, a limited liability company,
 other entity (specify): _____

Notes. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
2. The treaty article addressing the income.
3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
4. The type and amount of income that qualifies for the exemption from tax.
5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

1. You do not furnish your TIN to the requester,
2. You do not certify your TIN when required (see the Part II instructions on page 3 for details),

3. The IRS tells the requester that you furnished an incorrect TIN,

4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate instructions for the Requester of Form W-9 for more information.

Also see *Special rules for partnerships* above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See *Exemption from FATCA reporting code* on page 3 and the instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; do not leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.

c. **Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation.** Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.

d. **Other entities.** Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.

e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1—An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2—The United States or any of its agencies or instrumentalities
- 3—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4—A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5—A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- 7—A futures commission merchant registered with the Commodity Futures Trading Commission
- 8—A real estate investment trust
- 9—An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10—A common trust fund operated by a bank under section 584(a)
- 11—A financial institution
- 12—A middleman known in the investment community as a nominee or custodian
- 13—A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for . . .	THEN the payment is exempt for . . .
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹ See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
- B—The United States or any of its agencies or instrumentalities
- C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including national principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
- G—A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940
- I—A common trust fund as defined in section 584(a)
- J—A bank as defined in section 581
- K—A broker
- L—A trust exempt from tax under section 664 or described in section 4947(a)(1)
- M—A tax exempt trust under a section 403(b) plan or section 457(g) plan

Notes. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Notes. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Notes. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see *Exempt payee code* earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below.

1. **Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983.** You must give your correct TIN, but you do not have to sign the certification.

2. **Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983.** You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.

3. **Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.

4. **Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).

5. **Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions.** You must give your correct TIN, but you do not have to sign the certification.

³ You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

⁴ List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see *Special rules for partnerships* on page 2.

*Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4480 or submit Form 14039.

For more information, see Publication 4635, *Identity Theft Prevention and Victim Assistance*.

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via email. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@ftc.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
1. Individual	The individual
2. Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account ¹
3. Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
4. a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee ¹ The actual owner ¹
5. Sole proprietorship or disregarded entity owned by an individual	The owner ¹
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i)(A))	The grantor ¹
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity ¹
9. Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
10. Association, club, religious, charitable, educational, or other tax-exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i)(B))	The trust

¹ List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

² Circle the minor's name and furnish the minor's SSN.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on this form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

NON-COLLUSIVE BIDDING CERTIFICATION

1. By submission of this bid, the undersigned bidder and each person signing on behalf of such bidder certifies and in the case of a joint bid each party thereto certifies as to its own organization — UNDER PENALTY OF PERJURY, that to the best of the undersigned's knowledge and belief:

(a) The prices in this bid have been arrived at independently without collusion, consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor;

(b) Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the bidder and will not knowingly be disclosed by the bidder prior to opening, directly or indirectly, to any other bidder or to any competitor; and

(c) No attempt has been made or will be made by the bidder to induce any other person, partnership or corporation to submit or not to submit a bid for the purpose of restricting competition.

2. The undersigned acknowledges and agrees that a bid shall not be considered for award nor shall any award be made where any of the above have not been complied with; provided however, that if in any case the bidder cannot make the foregoing certification, the bidder shall so state and shall furnish with the bid a signed statement which sets forth in detail the reasons therefor. Where one or more of the above has/have not been complied with, the bid shall not be considered for award nor shall any award be made unless the political subdivision, public department, agency or official thereof to which the bid is made, or his designee, determines that such disclosure was not made for the purpose of restricting competition.

3. The undersigned also acknowledges and agrees that the fact that a bidder (a) has published price lists, rates, or tariffs covering items being procured, (b) has informed prospective customers of proposed or pending publication of new or revised price lists for such items, or (c) has sold the same items to other customers at the same prices being bid, does not constitute, without more, a disclosure within the meaning of paragraph 1 above.

4. The undersigned further acknowledges and agrees that any bid hereafter made to any political subdivision of the state or any public department, agency or official thereof by a bidder which is a corporation or a limited liability company for work or services performed or to be performed or goods sold or to be sold, where competitive bidding is required by statute, rule, regulation, or local law, and where such bid contains the certification referred to in paragraph 1 of this certificate, shall be deemed to have been authorized by the board of directors of the bidder, and such authorization shall be deemed to include the signing and submission of the bid and the inclusion therein of the certificate as to non-collusion as the act and deed of the corporation or limited liability company.

Name of Bidder: _____
(print full legal name)

Date Signed: _____ Signature: _____

Name of Person Signing Certificate: _____
(print full legal name of signer)

Bidder is (check one): an individual, a limited liability partnership, a limited liability company,
 other entity (specify): _____

CERTIFICATION OF COMPLIANCE WITH THE IRAN DIVESTMENT ACT

As a result of the Iran Divestment Act of 2012 (the "Act"), Chapter 1 of the 2012 Laws of New York, a new provision has been added to State Finance Law (SFL) § 165-a and New York General Municipal Law § 103-g, both effective April 12, 2012. Under the Act, the Commissioner of the Office of General Services (OGS) will be developing a list of "persons" who are engaged in "investment activities in Iran" (both are defined terms in the law) (the "Prohibited Entities List"). Pursuant to SFL § 165-a(3)(b), the initial list is expected to be issued no later than 120 days after the Act's effective date at which time it will be posted on the OGS website.

By submitting a bid in response to this solicitation or by assuming the responsibility of a Contract awarded hereunder, each Bidder/Contractor, any person signing on behalf of any Bidder/Contractor and any assignee or subcontractor and, in the case of a joint bid, each party thereto, certifies, under penalty of perjury, that once the Prohibited Entities List is posted on the OGS website, that to the best of its knowledge and belief, that each Bidder/Contractor and any subcontractor or assignee is not identified on the Prohibited Entities List created pursuant to SFL § 165-a(3)(b).

Additionally, Bidder/Contractor is advised that once the Prohibited Entities List is posted on the OGS Website, any Bidder/Contractor seeking to renew or extend a Contract or assume the responsibility of a Contract awarded in response to this solicitation must certify at the time the Contract is renewed, extended or assigned that it is not included on the Prohibited Entities List.

During the term of the Contract, should the County receive information that a Bidder/Contractor is in violation of the above-referenced certification, the County will offer the person or entity an opportunity to respond. If the person or entity fails to demonstrate that he/she/it has ceased engagement in the investment which is in violation of the Act within 90 days after the determination of such violation, then the County shall take such action as may be appropriate including, but not limited to, imposing sanctions, seeking compliance, recovering damages or declaring the Bidder/Contractor in default.

The County reserves the right to reject any bid or request for assignment for a Bidder/Contractor that appears on the Prohibited Entities List prior to the award of a contract and to pursue a responsibility review with respect to any Bidder/Contractor that is awarded a contract and subsequently appears on the Prohibited Entities List.

I, _____, being duly sworn, deposes and says that he/she is the _____ of the _____ Corporation and that neither the Bidder/Contractor nor any proposed subcontractor is identified on the Prohibited Entities List.

SIGNED

SWORN to before me this _____
day of _____, 20__

Notary Public

**Business of the Village Board
Village of Saranac Lake**

SUBJECT: Authorize Street Light Acquisition Letter Date: 01/14/19

DEPT OF ORIGIN: Village Manager

Bill # 8-2019

DATE SUBMITTED: 01/11/19

EXHIBITS: Yes

APPROVED AS TO FORM:

Village Attorney

Village Administration

EXPENDITURE AMOUNT APPROPRIATION REQUIRED
REQUIRED: \$12,120.00 BUDGETED: \$ \$12,120.00
SUMMARY STATEMENT:

Authorize Street Light Acquisition Letter to National Grid

MOVED BY: Little SECONDED BY: Murphy

VOTE ON ROLL CALL:

MAYOR RABIDEAU _____

TRUSTEE SHAPIRO YES

TRUSTEE MURPHY YES

TRUSTEE VAN COTT YES

TRUSTEE LITTLE YES

**RESOLUTION TO AUTHORIZE STREET LIGHT ACQUISITION LETTER TO
NATIONAL GRID**

WHEREAS, the Village of Saranac Lake currently is reviewing Street Light Acquisition; and

WHEREAS, To maintain current proposal with National Grid, The Village is required to notify National Grid of its intent to continue acquisition prior to January 19, 2019; and

WHEREAS, The Village is currently still reviewing proposals from qualified applicants for street light acquisition; and

WHEREAS, The Village submittal of this letter is non-binding; and

NOW, THEREFORE BE IT RESOLVED, the Board of Trustees approves and authorizes the Village Manager to submit the Street Light Acquisition Letter for National Grid.



Village of Saranac Lake 39 Main Street, 2nd Floor Suite 9 • Saranac Lake, NY 12983-2294 • Phone: (518) 891- 4150 • www.saranaclakeny.gov

January 14, 2019

Richard Burns
National Grid - Regional Account Services
20 Pine St
Potsdam, NY 13676

Re: Street Light Acquisition Pricing Proposal
Bill Account No. Village of Saranac Lake

Dear Mr. Burns:

I, along with the Village Board of Trustees, have reviewed your letter of July 25, 2018 regarding National Grid's offer for the Village of Saranac Lake to purchase the street lighting within the Village. This is to notify you that the Village of Saranac Lake does intend to move forward with the acquisition and requests that National Grid prepare a Purchase and Sales Agreement and Pole Attachment Agreement for Street Lighting Attachments for the Village's consideration.

Thank you for your efforts on this project.

Sincerely,

John M. Sweeney

Village of Saranac Lake

July 25, 2018

Mr. John M. Sweeney
 Village Manager
 Village of Saranac Lake
 39 Main Street 2nd Floor Suite 9
 Saranac Lake, NY 12983-2294

Re: Street Light Acquisition Pricing Proposal
 Bill Account No. 17752-93109
 (Reference No. 20738-79108)

Dear Mr. Sweeney:

Niagara Mohawk Power Corporation d/b/a National Grid (the “Company”) provides this pricing proposal to Village of Saranac Lake (the “Village”) in response to its letter dated the Village requesting the estimated price to purchase all street lights serving the Village within its taxing district, as reflected by the above-captioned account and reference numbers. In accordance with the New York Public Service Commission’s (the “Commission”) March 15, 2018 Order in Case 17-E-0238 (the “Rate Order”), the estimated, non-negotiable, purchase price at net book value (“NBV”)¹ for the street lights, supporting infrastructure, associated electric circuitry (exclusive of infrastructure used to serve other customers), as well as the transition and transaction costs, is \$363,249.00.² The sales price is an estimate. Per the Commission’s Order, the Company will calculate the final NBV at the time of closing, and adjust (up or down) the sales price to the actual NBV at closing.

The Company developed the estimated NBV sales price using the Village’s billing inventory of 452 street light assets within the municipality’s tax district, the original cost to install the lights, and the accrued depreciation of those assets. Based on the foregoing, the street lights have the estimated NBV, as of the date of this letter, identified in the itemized pricing proposal below. As authorized by the Commission, the itemized pricing proposal also includes firm security, transaction and transition costs. The security represents the Company’s estimated cost to install all required disconnect devices, and it must be in a form acceptable to the Company. If the Village fails to install the required disconnect devices within 24 months of the sale, the Company will perform such work and retain the security. The transaction costs consist of: transfer taxes; recording fees; and mortgage indenture release fees. Likewise the transition costs consist of: costs related to internal system inventory updates; billing data changes; and data updates associated with the sale.

Pricing Proposal Itemized Cost Information	
Original Cost	\$595,238.00
Depreciation	\$244,109.00
Estimated Net Book Value	\$351,129.00
Transaction and Transition Costs	\$12,120.00
Proposed Estimated Purchase Price at NBV	\$363,249.00
Disconnect Device Security	\$183,100.00

← Potential Audit Cost

¹ The NBV street light sales methodology approved by the Commission does not create a precedent with respect to street light sales occurring after the term of the Company’s rate plan ending March 31, 2021.

² The proposed purchase price does not include the disconnect device security that the customer is required to provide in a form acceptable to the Company for purposes of ensuring the disconnect devices are installed within 24 months.

This pricing proposal is offered on an “as-is, where-is” basis, and therefore does not include any reconfiguration work or removal costs.³ Upon transferring the assets, the Village would receive energy-only service from the Company under Service Classification No. 3 of the Company’s PSC No. 214 Outdoor Lighting Tariff (the “Tariff”). The Village would thereafter be solely responsible for the safe operation, maintenance, and repair of the street lights. As an alternative to acquiring the street lights within its jurisdiction, the Village may consider converting the existing roadway luminaire lights to energy-efficient LEDs in compliance with the Tariff. The cost to the Village for such a conversion is shown in the table below, and the converted lights would still be owned, operated, and maintained by the Company.

Estimated LED Conversion Costs	
Estimated Costs per unit	\$39.02
Company-Owned Roadway Luminaires	411
Total Estimated LED Conversion Cost	\$16,036.11

As authorized by the Rate Order, the Company also offers an energy-efficiency incentive to assist municipalities with the conversion of Company-owned or customer-owned street lights to efficient LEDs. The incentive, which is available on a first-come first-served basis and subject to an annual cap, is between \$50 and \$100 per fixture. To assist the municipality in evaluating its LED conversion options, the Company calculated the estimated energy-efficiency incentive below. The actual incentive, however, may differ, and will only be transmitted to the municipality upon completion of the LED conversion and verification of the new LED inventory. The New York State Energy Research and Development Authority (“NYSERDA”) as well as the New York Power Authority (“NYPA”) may also be able to provide technical and financing support.⁴

Energy-Efficiency Incentive (Based on 100% Conversion)	
Estimated Incentive	\$22,160.00

This sales offer will remain open for **180 days** from the date of this letter. If the Village wishes to move forward with the acquisition, the Company will prepare a Purchase and Sales Agreement and License Agreement for Street Lighting Attachments for the Village’s consideration. Once the Company and the Village have executed the agreements, the Company must file them with the Commission for review and approval pursuant to Public Service Law § 70. Alternatively, if the Village would rather consider a different approach, such as the above-mentioned LED conversion option, please let me know.

Thank you for the opportunity to work with you on this project. If you require additional information or seek to move forward with either project please call me at (315) 267-5247.

Sincerely,



Richard L. Burns
 Manager, Community & Customer
 CC: Courtney Maxon

³ At the Village’s request, the Company can provide an estimate of the costs to perform the reconfiguration and removal work.

⁴ The contact for NYSEDA is Brad Tito. He can be reached at (212) 971-5342 (ext. 3545) or bradford.tito@nyserda.ny.gov. The contact for NYPA is Joseph Rende, Director of Business Development, Customer Energy Solutions. He can be reached at (914) 287-3431 or joseph.rende@nypa.gov.

John Sweeney

From: Burns, Richard L. <~~Richard.Burns@nationalgrid.com~~>
Sent: Wednesday, January 02, 2019 1:51 PM
To: John Sweeney
Cc: Maxon, Courtney
Subject: FW: Streetlight Asset Value/Conversion Cost
Attachments: 20180515NationalGridLED_ConversionProgram.pdf;
20180515NationalGridOutdoorLightingTariffModifications.pdf; Village of Saranac Lake
Streetlight Asset - Conversion Costs 2018 07 25.pdf

Good afternoon.

I'm writing to follow up on the Company's July 25, 2018 pricing proposal for sale of the Company's streetlighting assets to the Village of Saranac Lake.

National Grid has not received a written request from the Village to move forward with the acquisition to date.

The Company's letter states that the pricing proposal is valid for 180 days from the date of the letter, which means the current proposal expires on January 21, 2019. After that date, the Village will have to request an updated pricing proposal. According to the asset sale process, the Village can't request another proposal until one year after the initial request. The Village's initial request was dated May 17, 2018, which means the Village could request a new proposal at any time after May 17, 2019.

I wanted to reach out as we approach the 180 day deadline- let me know if there's anything more I can assist with.

Rich Burns
Manager
Community & Customer Management
National Grid
20 Pine Street
Potsdam, NY 13676
Phone 315.267.5247
Fax 315.268.6206
Richard.Burns@nationalgrid.com

Learn more about how National Grid is Investing in Upstate NY

Please consider the environment before printing this email.

From: Burns, Richard L.
Sent: Wednesday, July 25, 2018 11:19 AM
To: John Sweeney (manager@saranacklakeny.gov)
Cc: Maxon, Courtney
Subject: Streetlight Asset Value/Conversion Cost

John-

The attached is also going out via US mail. This is in response to the Village's request for the value of National Grid's streetlight system.

In addition to the asset value, there is also an estimate for the cost to convert the Company's existing lights to LED, and an estimated incentive from National Grid that would be available to the Village should you choose to have the Company do the conversion. I'm also attaching a couple informational pieces, one regarding the changes to National Grid's streetlight Tariff, and another regarding the LED conversion process for Company-owned roadway lighting.

I am going to reach out to our streetlight team to update the information I provided last fall regarding the options for Lapan Highway lights, although if the Village wishes to acquire or convert the entire system, the attached proposal would include Lapan Highway.

Please let me know if you have any questions.

Rich Burns
Manager
Community & Customer Management
National Grid
20 Pine Street
Potsdam, NY 13676
Phone 315.267.5247
Fax 315.268.6206
Richard.Burns@nationalgrid.com

Learn more about how National Grid is Investing in Upstate NY

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You may report the matter by contacting us via our [UK Contacts Page](#) or our [US Contacts Page](#) (accessed by clicking on the appropriate link)

Please ensure you have adequate virus protection before you open or detach any documents from this transmission. National Grid plc and its affiliates do not accept any liability for viruses. An e-mail reply to this address may be subject to monitoring for operational reasons or lawful business practices.

For the registered information on the UK operating companies within the National Grid group please use the attached link: <https://www.nationalgrid.com/group/about-us/corporate-registrations>

**Business of the Village Board
Village of Saranac Lake**

SUBJECT: Public Hearing Volunteer Fire Department Contract FOR AGENDA OF 1-14-19

DEPT OF ORIGIN: Manager BILL # 9-2019

DATE SUBMITTED: 1-10-19 EXHIBITS:

APPROVED AS TO FORM:

Village Attorney

Village Administration

EXPENDITURE
REQUIRED: \$

AMOUNT
BUDGETED:

APPROPRIATION
REQUIRED:

SUMMARY STATEMENT

Call for Public Hearing 2019 Volunteer Fire Department Contract. January 28, 2019 5:30 pm during the Regular Board of Trustee Meeting

RECOMMENDED ACTION

APPROVAL OF RESOLUTION

MOVED BY: Little SECONDED BY: Van Cott

VOTE ON ROLL CALL:

MAYOR RABIDEAU

TRUSTEE LITTLE

YES

TRUSTEE MURPHY

YES

TRUSTEE SHAPIRO

YES

TRUSTEE VANCOTT

YES

AGREEMENT

THIS AGREEMENT, made effective the 1st day of January 2018,

BETWEEN: VILLAGE OF SARANAC LAKE, INC., a municipal corporation duly organized and existing under the laws of the State of New York with principal offices located at 39 Main Street, Saranac Lake, New York, (hereinafter designated as the "Village"),

and

SARANAC LAKE VOLUNTEER FIRE COMPANY, INC., a not-for-profit corporation duly organized and existing under the laws of the State of New York with principal offices located at Broadway, Saranac Lake, New York (hereinafter designated as the "Fire Company"). Contract to be in place and fully in effect from January 1, 2018 thru December 31, 2019.

WITNESSETH:

WHEREAS, the Village maintains a Fire Department pursuant to the provisions of New York Village Law Article 10 for the purpose of providing and furnishing within the Village's corporate limits (a) fire protection and (b) emergency services, including but not limited to emergency rescue in cases of accidents, calamities, alarms of fire, personal injuries and other emergencies in connection with which the services of firemen and emergency rescue personnel would be required; and

WHEREAS, the Fire Company has heretofore been organized, established and incorporated with the approval of the Village's Board of Trustees pursuant to Village Law §10-1004 for the purpose of providing volunteer members to operate the Village's Fire Department and provide such fire protection and emergency services in accordance with and subject to the requirements of applicable State and Federal laws, rules and regulations, including but not limited to New York Village Law Article 10; and

WHEREAS, the Village annually appropriates funds in its municipal budget to finance the operations of its Fire Department; and

WHEREAS, there has been duly established in Franklin County Town of Harrietstown and in Essex County Towns of St. Armand and North Elba, Fire Protection Districts embracing territory in each said Town; and

WHEREAS, contracts with said Towns, as Trustees for their respective fire Protection Districts, have heretofore been entered into by the Village providing for the furnishing to said districts and the properties therein fire protection pursuant to General Municipal Law Article 10; and

WHEREAS, the Fire Company has approved and consented to said agreements; and

the Fire Company represents that its members are qualified, trained and capable of providing and furnishing such services and that the Fire Company and its members possess the leadership and professionalism necessary to properly and competently perform such services; and

WHEREAS, a public hearing has been held pursuant to Village Law 4-412(b) following proper notice as required thereby; and

WHEREAS, the Village and the Fire Company desire to set forth their respective rights and

2018-2019 Village Contract updated January 11, 2019

responsibilities relative to the operation of the Village's Fire Department and the furnishing of (a) fire protection and emergency services within the corporate limits of the Village and (b) fire protection and emergency rescue in the town fire protection districts with which the Village contracts for such services.

NOW THEREFORE, in consideration of the mutual terms, conditions and covenants herein, the receipt of good and valuable consideration, the receipt and sufficiency of which is acknowledged by both parties, the parties hereby agree as follows:

1. The monies required to be paid or expended by said Towns under the terms of the contracts with the Village shall be apportioned between the Village and the Fire Company as follows: The Village agrees to pay the Fire Company the annual sum of Ninety-two Thousand and Two hundred dollars (\$92,200.00) during the term of this contract. Said annual sum shall be paid in two equal installments with the first such installment being paid on April 1, and the second such installment being paid on October 1.

2. The Village does hereby engage and retain the Fire Company, and the Fire Company hereby agrees to provide all necessary qualified, trained and competent personnel, to furnish:

(a) Fire protection and emergency services (including but not limited to emergency rescue) within the corporate limits of the Village in cases of accidents, calamities, alarms of fire, personal injuries and other emergencies in connection with which the services of firemen, fire equipment, and emergency rescue personnel and equipment would be required; and

(b) Fire protection pursuant to Article 10 of the General Municipal Law to the town fire protection districts for which the Village has entered into a contract therefore and which has been approved by the Fire Company pursuant to General Municipal Law §209-d, and/or

(c) Emergency rescue and first aid squad relief pursuant to General Municipal Law §209-b to the town fire protection districts for which the Village has entered into a contract therefore and which the Fire Company pursuant to General Municipal Law §209-d has approved.

3. In consideration of the services to be provided and furnished by the Fire Company, the Village agrees to:

(a) Provide suitable space in the Village's firehouse for the Fire Company and its members to use and occupy, and in which to store their own equipment, in connection with the fire company's performance of this agreement;

(b) Provide communications equipment and dispatching facilities;

(c) Provide and pay for the costs of insurance coverage as follows:

(1) Worker's compensation insurance for the members of the Fire Company and any other fire department personnel including but not limited to paid fire drivers;

(2) Public liability insurance insuring the Village and the Fire Company in an amount of not less than \$1 million dollars per occurrence, single limit for bodily injury for death and/or property damage;

(3) Fire, casualty and multi-peril insurance insuring the firehouse and all of the contents thereof owned by the Village.

(d) As part of the consideration paid by the Village to the Fire Company under this Agreement, in addition to the cash payment to be made, and in furtherance of a proper Village purpose, this Agreement includes the value of the Village providing regular maintenance and repairs to all fire department and Fire Company vehicles, apparatus and equipment including but not limited to annual hose testing, ladder testing, air pack servicing/inspection and extrication tools servicing/inspection.

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4. In addition to the services to be provided and furnished by the Fire Company, the Fire Company agrees to:

(a) Provide the Village with a copy of the Fire Company's Federal tax return each year after the said return has been filed with the IRS;

(b) Provide, prepare, maintain and file all report forms and other documents required by State and/or Federal law, rule or regulation, as well as those customarily kept by municipal fire departments in the State of New York and as requested by the Village;

(c) Provide qualified, competent, trained and experienced personnel to perform and furnish the services required of the Fire Company under this agreement;

(d) Comply with and abide by all lawful rules, regulations and directives of the Village's Board of Trustees, so long as said rules, regulations and directives do not directly contradict the Fire Company's certificate of incorporation or its by-laws;

(e) Comply with and abide by all applicable State and Federal laws, rules and regulations governing the performance and rendition of the services to be furnished under this agreement subject to funding by the Village.

(f) Obtain and keep in full force and effect any and all licenses, permits and certificates required by any government authority having jurisdiction over the rendition and performance of the services to be furnished by the Fire Company under this agreement; and

(g) Promptly advise the Village of all damages to property of the Village or of others, or of injuries incurred by persons (including but not limited to members of the Fire Company), in any manner relating, either directly or indirectly to the performance of this agreement.

5. All policies of insurance to be provided by the Village and/or the Fire Company shall provide that the same may not be cancelled except upon twenty (20) days prior written notice to the Village and Fire Company. The Village shall provide written proof of such insurance to the Fire Company at the time of the execution of this agreement, and whenever such insurance coverage are renewed during the term of this agreement.

6. It is understood and agreed that ownership in and title to any equipment, supplies, materials, vehicles, apparatus, appliances, goods and/or other personal or real property purchased or otherwise acquired with Village funds shall be with and remain with the Village and the Fire Company shall make no claim of any kind or nature therein or thereto. It is understood and agreed that ownership in and title to any equipment, supplies, materials, vehicles, apparatus, appliances, goods and/or other personal or real property purchased or otherwise acquired with Fire Company funds, including funds paid to the Fire Company by the Village pursuant to paragraph 1 (a) of this Agreement, shall be with and remain with the Fire Company and the Village shall make no claim of any kind or nature therein or thereto.

7. This agreement shall expire at the end of the day of December 31, 2019.

8. This agreement may be terminated without cause by either party upon 180 days prior written notice. In the event this agreement is terminated by either party, and the Village has paid monies to the Fire Company pursuant to paragraph 1 above, the Fire Company shall promptly refund the remaining monies to the Village. To arrive at the refund amount, a proration shall be used based on the termination date and the number of days remaining in the payment period as described in paragraph 1 above.

9. The Fire Company and its members, while engaged in the performance of their duties in providing the services to town fire protection districts, shall have the same rights, privileges and immunities as if performing the same inside the corporate limits of the Village.

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10. The Village and the Fire Company each agrees to indemnify, hold harmless and defend the other from all damages, claims, judgments, losses, costs and expenses, including but not limited to attorneys fees, which may after this agreement may at any time be incurred, suffered, sustained by or imposed upon the other by third parties, by reason of acts or omissions of the other, arising out of, by virtue of, or incident to the services contemplated to be provided by the other under this agreement, including but not limited to bodily injury, sickness, disease, death, or destruction of tangible property which is caused in whole or in part solely by the act or omission of the Village or Fire Company, or anyone directly employed by one or the other. Whenever any loss, cost, damage or expense covered by this paragraph is paid in whole or in part by insurance proceeds, then the party so insured releases the other party from any liability they have on account of such loss, cost, damage or expenses to the extent of the amount recovered by reason of such insurance, and waives right or subrogation which might otherwise exist in or accrue to any person on account of it, provided that such release of liability and waiver of the right of subrogation shall not be operative in any case where the effect is to invalidate such insurance coverage or to increase its cost, except as otherwise provided by law including but not limited to General Municipal Law 205-b and 205-g.

11. The services to be furnished and rendered under this agreement by the Fire Company shall be available to any and all residents of the Village and/or the town fire protection districts without regard to race, color, creed, sex, religion, national or ethnic origin, handicap, or source of payment.

13. The Fire Company shall establish and maintain complete and accurate books, records, documents, accounts and other evidence directly pertinent to performance under this contract (hereinafter collectively "the Records"). The Records must be kept for the balance of the calendar year in which they were made and for six (6) additional years thereafter. The Village Treasurer and/or Manager, the State Comptroller, the Attorney General or any other person or entity authorized to conduct an examination, shall have access to the Records during normal business hours at an office of the Fire Company within the State of New York, or, if no such office is available, at a mutually agreeable and reasonable venue within the State, for the term specified above for the purposed of inspection, auditing and copying. The Village shall take reasonable steps to protect from public disclosure any of the records which are exempt from disclosure under Section 87 of the Public Officers Law (the "Statute") provided that; (a) the Fire company shall timely inform an appropriate Village official, in writing, that said records should not be disclosed; and said records shall be sufficiently identified; and (b) designation of said records as exempt under the statute is reasonable. Nothing contained herein shall diminish, or in any way adversely affect, the Village's right to discovery in any pending or future litigation.

14. The Village shall have no liability under this contract to the Fire Company or to any other person or entity beyond the amount funds appropriated and available for this contract.

15. This agreement may not be assigned, subcontracted, transferred, conveyed, sublet or otherwise disposed of in whole or in part, by the Fire Company, without the prior written consent of the Village, and any attempts to assign the contract without the Village's written consent are null and void.

16. Whenever the term "Fire Company" is used in this agreement, such term shall include and apply to all members, employees, officers, directors and agents, if any, of the Fire Company.

17. This agreement may not be amended, modified or renewed except by written agreement signed by the Fire Company and the Village.

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18. This agreement is the entire agreement between the parties, and the same shall be construed in accordance with the laws of the State of New York.

19. In the event that, for any reason, a new contract is not executed and effective at the end of the term of this Agreement, then the Parties hereto acknowledge that the terms of this Agreement will continue for a period not to exceed sixty (60) days or as long as the Parties hereto are engaging in contract negotiations, whichever is longer. Upon the termination of or failure of contract negotiations, the Agreement shall terminate, if not agreed upon, and the parties shall negotiate a new agreement. Nothing however, shall impair the rights of the parties to negotiate and agree to a new agreement retroactive to the termination date of this agreement or any extension thereof pursuant to Village Law 4-412(9)(c).

IN WITNESS WHEREOF, the parties hereto have duly executed and delivered this Agreement effective the day and year first above written.

FOR: **VILLAGE OF SARANAC LAKE**

BY: _____
ITS: _____

FOR: **SARANAC LAKE VOLUNTEER FIRE COMPANY, INC**

BY: _____
ITS: _____

**Business of the Village Board
Village of Saranac Lake**

SUBJECT: DAB Members

Date: 01/14/19

DEPT OF ORIGIN: Community Dev.

Bill # 10-2019

DATE SUBMITTED: 01/11/18

EXHIBITS:

APPROVED AS TO FORM:

Village Attorney

Village Administration

EXPENDITURE
REQUIRED: \$

AMOUNT
BUDGETED: \$

APPROPRIATION
REQUIRED: \$

SUMMARY STATEMENT:

A resolution to appoint Jeremiah St. Louis and Melinda Little to the Downtown Advisory Board.

MOVED BY: Murphy SECONDED BY: Shapiro

VOTE ON ROLL CALL:

MAYOR RABIDEAU

TRUSTEE SHAPIRO

yes

TRUSTEE MURPHY

yes

TRUSTEE VAN COTT

yes

TRUSTEE LITTLE

recuse

RESOLUTION TO APPOINT MEMBERS TO THE DOWNTOWN ADVISORY BOARD

WHEREAS, the Village of Saranac Lake Downtown Advisory Board has a vacancy as a result of the resignation of Peter Wilson; and

WHEREAS, the Bylaws of the Downtown Advisory Board state that there shall be one ex-officio member who shall be a member of the Village Board of Trustees who shall act as a liaison between the Advisory Board and the Village Board of Trustees; and

WHEREAS, the Downtown Advisory Board does not currently include ex-officio members;

NOW, THEREFORE BE IT RESOLVED, the Board of Trustees hereby appoints Jeremiah St. Louis to the Downtown Advisory Board for a term that is in accordance with the Bylaws.

BE IT FURTHER RESOLVED, that Melinda Little is hereby appointed as ex-officio member of the Downtown Advisory Board.

Jeremiah St. Louis, MBA

Building Owner: 69 Main Street – SLNY 12983 | Business Owner: SLove Health Club | 518-354-8492 | jeremiah@SLoveHealthClub.com|

December 20, 2019

Downtown Advisory Board
Village of Saranac Lake
39 Main Street,
Saranac Lake NY 12983

Dear Downtown Advisory Board:

My name is Jeremiah St. Louis and would like to formally request consideration in filling the current Downtown Advisory Board vacancy. Presently, I'm the owner of the historic building at 69 Main Street as of July 2017 and also the owner of now, SLove Health Club (formerly part of the Salon Mirage Spa and Fitness Center Combination). My academic life focused heavily on business, earning my Bachelor's degree in Business Administration and finishing up my studies with an MBA from the College of St. Rose in 2010.

After a stint in corporate finance post-college, my wife and I decided to move back to the Adirondacks in 2013 (I was an Onchiota native growing up). My specialties since 2008 have been in real estate as a property owner and landlord, Division II Pitching Coach at the College of St. Rose, Portfolio Investments and Administration for Ayco (a subsidiary of Goldman Sachs: Managed Accounts and Muni Bond Account fundings, client contact and support, proprietary investment strategies, etc). Additionally, I held the role of an operations manager and sales contact for Haselton Lumber, and before committing full time to revamping our new building and modernizing our new business on main street, I was refining my craftsman skills as a carpenter for Cascade Builders.

My hope is that my variety of interests and background could potentially offer a new and insightful perspective on the trajectory of the downtown area. I already find myself in my own practices, managing my building and business in ways that parallel the overall goals of the DAB locally. We both are after the preservation of charm, nostalgia, and historical value and reference, while simultaneously attempting to modernize programs, efficiencies, varieties of services and destinations, while hopefully decreasing our own costs and at the same time, increasing value for the local or non-local business patrons.

Should the board find my skillset and perspective to be fundamentally sound and within the board's rubric of sitting personnel, I would be very happy to discuss the vacancy and expectations in further detail at the board's convenience. I appreciate your time and consideration and look forward to hearing from you.

Sincerely Yours,



Jeremiah St. Louis
Owner: 69 Main Street
Owner: SLove Health Club, llc

**RESOLUTION CALLING FOR A PUBLIC HEARING
TO COLLECT PUBLIC INPUT REGARDING AN APPLICATION TO THE CDBG
ECONOMIC DEVELOPMENT PROGRAM ON BEHALF OF SARANAC LAKE
RESORT**

WHEREAS, the NYS CDBG Economic Development program provides federal funds to local governments to support economic development projects that involve the creation or retention of permanent jobs that benefit low-and-moderate-income persons; and

WHEREAS, CDBG Economic Development funding is provided for activities such as business attraction, expansion, and retention projects; and

WHEREAS, the Village Board of Trustees is considering the submission of an application through the NYS CDBG Economic Development program on behalf of the Saranac Lake Resort which is requesting up to \$750,000 for furniture, fixtures, equipment and inventory;

NOW, THEREFORE, BE IT RESOLVED, the Village Board hereby sets a public hearing for Monday, January 28, 2019 at 5:30PM in the Redford Room at Adirondack Health, 2233 State Route 86, Saranac Lake, NY 12983 for the purpose of gathering public input about the proposed CDBG Economic Development grant application on behalf of the Saranac Lake Resort.

**VILLAGE OF SARANAC LAKE
ESSEX COUNTY, NEW YORK**

PUBLIC HEARING NOTICE

The Village of Saranac Lake intends on submitting an application on behalf of the Saranac Lake Resort to the New York State Office of Homes & Community Renewal (HCR) for a NYS Community Development Block Grant (CDBG) Program Economic Development Grant on or about *February 1, 2019*. The application may be considered for an economic development activity and will include the administration and program delivery of such. The Village will apply for a grant in an amount not to exceed \$750,000 to assist a local business in creating approximately 71 positions.

Assistance under the CDBG Program must meet one of three national objectives: benefit to low and moderate-income persons, elimination of slums and blight or urgent needs affecting the health and safety of the community. No less than seventy percent (70%) of grant funds must be used for activities benefiting low and moderate-income persons and a minimum of fifty-one percent (51%) of the jobs that are created as a result of an economic development award must be made available to persons from low and moderate-income households.

A Public Hearing will be held at: the Redford Room, Adirondack Health, 2333 State Route 86, Saranac Lake, NY 12983 on January 28, 2019 at 5:30 P.M. to afford an opportunity for discussion and comment on local economic development needs and to obtain the views of citizens, public agencies and other interested parties on the needs of the jurisdiction for the proposed CDBG application. Comments on the CDBG Program or the proposed project will be received at this time. The hearing is being conducted pursuant to 24 CFR Part 570.486 and in compliance with the requirements of the Housing and Community Development Act of 1974, as amended.

All interested persons are encouraged to attend the January 28th Public Hearing and comment upon the CDBG Application or submit written comments to the Village Offices at 39 Main Street, Saranac Lake, NY 12983 by January 31, 2019. Please contact the Village Office at (518) 891-4150 x202 if special accommodations are required for your attendance.

Dated: _____

_____, Village Clerk
Village of Saranac Lake, New York

**Business of the Village Board
Village of Saranac Lake**

SUBJECT: Municipal Shared Solar Agreement

Date: 01/14/19

DEPT OF ORIGIN: Village Manager

Bill # 12-2019

DATE SUBMITTED: 01/11/19

EXHIBITS: Yes

APPROVED AS TO FORM:

Village Attorney

Village Administration

EXPENDITURE
REQUIRED: \$

AMOUNT
BUDGETED: \$

APPROPRIATION
REQUIRED: \$

SUMMARY STATEMENT:

A resolution to enter into Municipal Shared Solar Agreement with Franklin County.

MOVED BY: Murphy SECONDED BY: Little

VOTE ON ROLL CALL:

MAYOR RABIDEAU

TRUSTEE SHAPIRO

yes

TRUSTEE MURPHY

yes

TRUSTEE VAN COTT

yes

TRUSTEE LITTLE

yes

**RESOLUTION TO ENTER IN TO SHARED SOLAR PURCHASE POWER
AGREEMENT (PPA) WITH FRANKLIN COUNTY**

WHEREAS, the Village of Saranac Lake currently has Shared Services Agreements with Franklin County; and

WHEREAS, Franklin County and its contractor has developed a Solar Farm and proposes to offer to Municipalities the ability to offset its current power purchases with excess power produced from the Solar Farm; and

WHEREAS, Franklin County has offered a Shared Solar Energy Purchase Power Agreement which allows VIA Remote Net Metering to transfer meters to Franklin County as the Host Billing Account for Meters Located within Franklin County; and

WHEREAS, The Village proposes to transfer account #17752-93109, Street Lighting Account to Franklin County for purchase of power at \$0.079 per Kilowatt Hour; and

WHEREAS, The Potential for monthly savings if excess power is available is estimated at \$1300.00 per month based upon projections of current costs and usage; and

NOW, THEREFORE BE IT RESOLVED, the Board of Trustees approves the Shared Solar Energy Agreement with Franklin County and authorizes the Village Manager to sign all documents needed for the transfer of National Grid acct # 17752-93109.

INTERMUNICIPAL AGREEMENT
FOR SHARED SOLAR ENERGY

THIS AGREEMENT, made this ____ day of _____, 2019, by and between
**THE COUNTY OF FRANKLIN, a municipal corporation located at 355 West Main Street,
Malone, New York 12953:** (hereinafter called "Host") and

The (Village, Town, School District) of _____ a municipal
corporation of the State of New York, having its principal location
at _____, (hereinafter referred to as "Customer").

WITNESSETH:

WHEREAS, both Host and Customer may enter into cooperative agreements pursuant to Article 5-G of the New York General Municipal Law under which the parties can cooperate in the procurement of electricity generated by solar photovoltaic systems ("Solar Energy"); and

WHEREAS, Host has entered into one or more power purchase agreements ("PPA") under Article 9 of the New York State Energy Law whereby it will cause a private company ("Developer") to furnish, install and interconnect to the power grid a photovoltaic electric generation system that will produce Solar Energy in exchange for purchasing all of the Solar Energy that is produced by the system and sent into the grid through Host's meter; and

WHEREAS, pursuant to the PPA, all of the Solar Energy will be produced at a separately metered site remote from Host's location where it will be transmitted into the grid through a meter held in the name of Host thereby producing a remote net meter credit ("RNM Credit") that can be allocated by Host to certain satellite accounts ("Satellite Meters") that are registered with the public utility in Host's name; and

WHEREAS, Host has endeavored to qualify with certain requirements of the New York State Public Service Commission ("PSC") with respect to "grandfathering" its PPA under a RNM Credit program whereby credits are issued on a "monetary basis" at the incumbent public utility's retail rate for supply and delivery prevailing at the location of the Host meter with the expectation that the value of the RNM Credit will be greater than the cost of producing and transmitting Solar Energy into the grid pursuant to the PPA thereby creating a positive difference in value associated with RNM Credits assigned to Satellite Meters; and

WHEREAS, Article 5-G of the New York State General Municipal Law authorizes municipal corporations to contract together to perform that which each municipal corporation is authorized to perform individually; and

WHEREAS, Host and Customer are empowered to collectively purchase Solar Energy and to contract with public utilities for the supply and delivery of electricity and RNM Credits

and the parties desire to reduce their respective costs for energy by entering into this Agreement for the acquisition and use of Solar Energy and its attributes including monetary RNM Credits:

NOW, THEREFORE IT IS AGREED AS FOLLOWS:

1. The Host and Customer have identified those certain National Grid Corporation ("National Grid") meters of Customer set forth in Exhibit A attached hereto which shall be transferred to Host as a Satellite Meter to be held in Host's name for the purpose of applying RNM Credits to the charges set forth on the National Grid bill for each meter. After applying RNM Credits to the charges on the subject bill, Host shall create a bill for each identified meter setting forth the net charges that remain after deducting the RNM Credit, and charging the net metering charges at 7.9 cents per kWh. The Host and customer each acknowledge that depending on the energy created by the solar project, that there may be no credits available, and that the billing cycle rate may be the established NIMO rate. Customer and Host shall jointly instruct National Grid to transfer all liability for the meter and the cost of service related to each meter listed on Exhibit A to Host. A proposed letter to National Grid instructing it to change the Customer accounts is attached hereto as Exhibit B.

2. The address for delivery of National Grid's bills for electricity supplied to Customer in connection with the meters set forth in Exhibit A shall be as follows:

a. Agreement For Shared Solar Energy
C/O Franklin County Manager's Offices
355 West Main Street
Malone, New York 12953

3. Customer agrees to pay the costs of the utility bills for each identified meter, in a timely manner in accordance with its normal operating procedures.

4. Customer agrees to indemnify and hold harmless the Host for any and all costs associated with the supply of electricity by National Grid. Additionally, the customer agrees that they shall be solely responsible for any expense associated with upgrades, repairs or maintenance required for the electrical service meters transferred under this agreement, and shall hold the Host harmless, and indemnify the Host for any expenses related to any such expense.

5. The parties acknowledge that the manner in which RNM Credits are applied to Customer's particular bills or accounts is determined by the rules and tariff of the local utility company. Host shall endeavor to apply RNM Credits against the delivery portion of the Customer charges to the maximum extent possible within the constraints imposed by the local utility.

6. Either party may change which satellite meters that will be designated to receive RNM Credits on an annual basis in accordance with the local public utility rules. Host may upon reasonable notice to Customer reallocate RNM Credits among satellite meters.

7. This Agreement shall be coterminous within the PPA. Neither party may terminate this Agreement except for cause after 180 days prior written notice to the other.

8. This Agreement may be executed in any number of counterparts, each of which shall be deemed an original and all of which counterparts taken together shall constitute one and the same instrument.

9. Notices:

a. If to Host: Agreement For Shared Solar Energy
C/O Franklin County Manager's Offices
355 West Main Street
Malone, New York 12953

b. If to Customer: Village, Town, School District) of _____ a municipal corporation

10. By their signatures on this document, the parties confirm that the governing bodies of Host and Customer have authorized this Agreement for the purpose of purchasing electricity.

By: The County of Franklin

By: Village, Town, School District) of _____

Exhibit A

List of Satellite Meters

Exhibit B

Franklin County Managers Office Letterhead

National Grid
Customer Service Center

Syracuse, New York

RE: Transfer of Service

To Whom it May Concern:

Attached is a completed and signed application for services to be provided to a nonresidential customer. Please transfer the electricity service for the described location to:

Agreement For Shared Solar Energy
C/O Franklin County Manager's Offices
355 West Main Street
Malone, New York 12953

Please direct any questions to: Donna Kissane
Franklin County Manager
355 West Main Street
Malone, New York 12953

Thank you.
Donna Kissane, Franklin County Manager

By: _____