## TOWN BOARD WORK SESSION JULY 10, 2017 6:00 P.M.

## <u>AGENDA</u>

Please turn off all cell phones, pagers and electronic devices. Assistive Listening Devices available for hearing impaired.

Pledge of Allegiance Moment of Silent Reflection

Agenda Approval

Abstract – Geiben

Approval of Minutes: 06/26/17 - PHs, RTBM

Department Head Concerns:

Finance:

Budget Adjustments - Town Hall Union

Old Business:

Sanborn Business Assoc. Portable Lighted Sign – Catalano

Water Line Project – Seaman

Standard Work Day Reporting Resolution – Broderick

General Release Agreement –NYPA Reservoir Bridge Rehabilitation – Broderick

Upper Mountain Fire Co. Roster Deletion – Broderick

Inter-Municipal Agreement – Joint Emergency Response Team – Broderick

Medical Bill Payment – Norwich – Broderick

Dog Sheltering Agreement – Town of Wilson – Broderick

Privilege of the Floor/Public Concerns

## **UPCOMING MEETINGS:**

Zoning Board, July13 @ 6:30 PM Environmental Commission, July 17 @ 7 PM Planning Board, July 20 @ 7:00 PM RTBM, July 24 @ 6:00 PM

Date: 07/05/2017 Time: 4:55:55PM

## **Budget Revision Edit List**

Town Of Lewiston

User: MBLAZI

Page: 1

iscalYear	DIST.	ION NO. SUM	DATE ACCOUNT NO.	CALENDA	R REFERENCE	DESCRIPTION	MOUNT
2965 2017	00000114		07/10/2017	7/2017	New Unio	Adjust budget for Union Medical Benefits	0.00
	001	D	B00-9070-0800-		<b>5</b> 4 11 <b>5 </b>	UNION WELFARE BENEFITS POLICE	8,006.00
	002	D	B00-9060-0800-	.0200	Detail Desc.: Tranfse	r budget for benefits paid thru u	
		_	200 0000 0000		Detail Desc.: Transser budget for benefits paid that it	-8,006.00	
	003	D	A00-9070-0800-	-0000		UNION WELFARE BENEFITS	39,432.00
	004	D	A00 0000 0000	0000	Detail Desc.: Tranfse	r budget for benefits paid thru u	00,402.00
	004	D	W00-8090-0900-		Detail Desc : Tranfoc	HOSPITAL & MEDICAL INS	-39,432.00
	005	D	B00-9070-0800-	0000	Detail Desc Hallise	UNION WELFARE BENEFITS	20.002.00
	000		D00 0000 0000		Detail Desc.: Tranfse	r budget for benefits paid thru u	29,903.00
	000	D	B00-9060-0800-		Detail Dess : Treefe	HOSPITAL & MEDICAL INS	-29,903.00
	007	D	SS1-9070-0800-	-0000	Detail Desc.: Trantse	I DUGGET for benefits paid thru u	
					Detail Desc.: Tranfse	r budget for benefits paid thru u	3,426.00
	800	D	SS1-9060-0800-	-0000		MEDICAL INSURANCE	-3,426.00
latch 2,965 Totals					Detail Desc.: Tranfse	r budget for benefits paid thru u	
							0.00
			_				0.00
	2017	DIST.  2017 000001  001  002  003  004  005  006  007  008	DIST. SUM  2017 00000114  001 D  002 D  003 D  004 D  005 D  006 D  007 D  008 D	DIST. SUM ACCOUNT NO.  2017 00000114 07/10/2017 001 D B00-9070-0800- 002 D B00-9060-0800- 003 D A00-9070-0800- 004 D A00-9060-0800- 005 D B00-9060-0800- 006 D B00-9060-0800- 007 D SS1-9070-0800- 008 D SS1-9060-0800-	DIST. SUM ACCOUNT NO.  2017 00000114 07/10/2017 7/2017 001 D B00-9070-0800-0200  002 D B00-9060-0800-0200  003 D A00-9070-0800-0000  004 D A00-9060-0800-0000  005 D B00-9070-0800-0000  006 D B00-9060-0800-0000  007 D SS1-9070-0800-0000  008 D SS1-9060-0800-0000	DIST. SUM ACCOUNT NO.  2017 00000114 07/10/2017 7/2017 New Unio 001 D B00-9070-0800-0200  Detail Desc.: Tranfse  002 D B00-9060-0800-0200  Detail Desc.: Tranfse  004 D A00-9060-0800-0000  005 D B00-9060-0800-0000  006 D B00-9060-0800-0000  007 D SS1-9070-0800-0000  Detail Desc.: Tranfse  008 D SS1-9060-0800-0000  Detail Desc.: Tranfse  Detail Desc.: Tranfse  Detail Desc.: Tranfse  Detail Desc.: Tranfse	DIST. SUM ACCOUNT NO.  2017 00000114 07/10/2017 7/2017 New Unio Adjust budget for Union Medical Benefits UNION WELFARE BENEFITS POLICE UNION WELFARE BENEFITS POLICE Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS - POLICE Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS - POLICE Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MEDICAL INS Detail Desc.: Tranfser budget for benefits paid thru u HOSPITAL & MED

Copy: T.B., attip Finance



ANDREW M. CUOMO Governor

MATTHEW J. DRISCOLL

FRANK P. CIRILLO, SR/WA
Regional Director

June 22, 2017

Bob Nablo, Crew Chief Lewiston Water Department P.O. Box 109 Model City, NY 14107 Of attype 7/7/17 Engineer H2D

RE: THE NEW YORK POWER AUTHORITY RESERVOIR
BRIDGE REHABILITATION, BINS 1039729 AND 1043890
I-190 INTERSTATE AND NY ROUTE 265 OVER POWER RESERVOIR
TOWNS OF LEWISTON AND NIAGARA, NIAGARA COUNTY
PIN 5019.17, D900013

Dear Mr. Nablo:

Enclosed are four (4) copies of the General Release Agreement, in the amount of \$128,928.47, to provide compensation and closeout the current contract for the work completed on the subject project. The work was completed by the Town of Lewiston Water Department, the expense of which is reimbursable as per the New York State Department of Transportation Utility Reimbursement Procedure Manual. Each copy of the agreement must be signed and duly executed by an authorized representative of the Town of Lewiston.

Please return each signed and executed copy of the agreement to Dwight Mateer, Regional Utilities Engineer, 100 Seneca Street, Buffalo, NY 14203 by **July 27, 2017**.

Questions regarding these forms can be directed to Dwight Mateer, Regional Utilities Engineer, at (716) 847-3954 or via e-mail at Dwight.Mateer@dot.ny.gov.

Sincerely,

William P. Zimmerman, P.E.

Engineering Support Unit Manager

·By:

Dwight Mateer, P.E. Regional Utilities Engineer

WPZ/DDM/EJC/MMB/IIg

**Enclosures: General Release Agreement** 

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