

BATAVIA CITY COUNCIL BUSINESS MEETING

City Hall - Council Board Room One Batavia City Centre Monday, August 13, 2018 7:00 PM

AGENDA

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I.	('all	to	Order
1.		···	Oluci

- II. Invocation Council President Jankowski
- III. Pledge of Allegiance
- IV. Approval of July 2018 Minutes
- V. Approval of June 2018 Financials
- VI. Assignment of Agenda Items

VII. Communications

- a. Liquor License Kelly's Holland Inn, Fishtales Hideaway and Sunnys
- b. Community Action Children's Carnival Friday, August 17th
- c. Eli Fish Brewing Co Clam Bake Friday, August 31st
- d. The YNGoddess Shop Fundraiser Sunday, September 9th
- e. Eli Fish Brewing Co Oktoberfest Friday, September 28th
- f. Batavia Rotary 5K Run/Walk Saturday, October, 27th
- g. Batavia Bulldawgs Youth Football and Cheer

VIII. Council President Report

- a. Announcement of the City Council Business Meeting to be held on Monday, September 10, 2018 at 7:00 p.m. at the City Hall Council Board Room, 2nd Floor, City Centre.
- IX. City Attorney's Report
- X. City Manager's Report
- XI. Committee Reports
- XII. Public Comments
- XIII. Council Responses to Public Comments

- XIV. Unfinished Business
- XV. New Business
 - #69-2018 A Resolution to Amend the 2018-2019 Police Department Budget to Reflect the Receipt of a STOP-DWI Grant Amendment in the amount of \$1,668.07 to address the Crimes of Driving while Intoxicated and/or Driving While Ability Impaired by Drugs
 - #70-2018 A Resolution to Authorize Inter-Municipal Agreement Between the Town of Batavia and the City of Batavia to Install Additional Antennas
- XVI. Adjournment

GENERAL FUND CITY OF BATAVIA FOR PERIOD ENDED - June 30, 2018

DESCRIPTION	ORIGINAL BUDGET	ADJUSTED BUDGET		YTD TOTAL	% OF BUDGET		YTD 2017-2018	YTD Change %		Change \$	
Revenues Real Property Taxes	\$ 5,389,947.00	\$ 5,389,947.00	\$	5,389,946.82	100.00%	\$	5,204,843.57	3.56%	Ş	185,103	
	s -	\$ -	\$	-		\$		00.000/	S	45.070	
Payments in Lieu of Tax	\$ 58,570.00	\$ 58,570.00	\$ \$	57,942.77	98.93%	\$ \$	41,964.33 25,861.14	38.08% -9.01%	\$ \$	15,978 (2,330)	
Interest & Pen. on Tax Sales and Use Tax	\$ 230,000.00 \$ 6.155,000.00	\$ 230,000.00 \$ 6,155,000.00	\$ \$	23,530.88	10.23% 0.00%	\$	25,001.14	-9.0176	\$	(2,330)	
Utility Gross Receipts Tax	\$ 6,155,000.00 \$ 180,000.00	\$ 180,000.00	S	39,284,25	21.82%	\$	14,518.58	170.58%	Š	24,766	
Cable TV Franchise	\$ 180,000.00	\$ 180,000.00	S	33,204.20	0.00%	Š		***************************************	Š		
Clerk/Treasurer Fees	\$ 37,000.00	\$ 37,000.00	\$	4,504.10	12.17%	\$	4,671.50	-3.58%	\$	(167)	
Charges for Tax Redemption	\$ -	\$ -	Š	•	,	\$	450.00	-100.00%	\$	(450)	
Marriage Licenses	\$ 3,000.00	\$ 3,000.00	\$	1,442.50	48.08%	\$	1,025.00	40.73%	\$	418	
Other Gen Govern Dept Inc.	\$ -	\$ -	\$	-		\$	•		\$		
Police Fees	\$ 2,800.00	\$ 2,800.00	\$	730.10	26.08%	\$	425.50	71.59%	\$	305	
Dog Seizure Fees	\$ 600.00	\$ 600.00	\$	150.00	25.00%	\$	260.00	-42.31%	\$	(110)	
Other Public Safety Dept Inc	\$ -	\$ -	\$	0.405.00	20.770/	\$ \$	209.40 8.691.00	-100.00% 9.25%	\$ \$	(209) 804	
Vital Statistics Fees Public Works Services	\$ 33,000.00	\$ 33,000.00 \$ -	\$	9,495.00	28.77%	S	0,081.00	9.2376	\$	004	
Fines & Forfeited Bail	\$ 155,000.00	\$ 155,000,00	ç	23.128.50	14.92%	S	31,603.50	-26.82%	Š	(8,475)	
Maintenance Fee - Ice Rink	\$ 38,566.00	\$ 38.566.00	Š	20,120.00	0.00%	Š	•	20.02.0	Š	,,,,,,	
Park User Fees	\$ 4,000.00	\$ 4,000.00	Š	3,285.00	82.13%	Š	2,590.00	26.83%	\$	695	
Special Recreat. Fac Charges	\$ 22,500.00	\$ 22,500.00	\$	•	0.00%	\$	-		\$	-	
Other Culture & Rec income	\$ -	\$ 4,000.00	\$	•	0.00%	S	-		\$	-	
Zoning Fees	\$ 1,000.00	\$ 1,000.00	\$	400.00	40.00%	\$	700.00	-42.86%	\$	(300)	
Code Violation Charges	\$ 25,500.00	\$ 25,500.00	\$	-	0.00%	\$	6,816.96	-100.00%	\$	(6,817)	
Home & Comm Srvc RBDG	S -	\$ -	\$	-		S	·		\$		
EMS Program	\$ 9,750.00	\$ 9,750.00	\$	660.00	6.77%	S	(10,985.00)	-106.01%	S	11,645	
Interest and Earnings	\$ 3,000.00	\$ 3,000.00	\$	1,253.25	41.78%	S	917.72	36.56%	S	336 653	
Interest and Earnings Reserves		\$ - \$ 70,075.00	\$ \$	2,844.35	25 240/	\$ \$	2,191.59 21,788.02	29.78% -18.91%	\$ \$	(4,120)	
Rental of Real Property Rental, other - facility usage	\$ 70,075.00 \$ 750.00	\$ 70,075.00 \$ 750.00	S	17,667.89 2.435.08	25.21% 324.68%	S	155.00	1471.02%	5	2.280	
Business/Occup. Licenses	\$ 5,000.00	\$ 5,000.00	S	610.00	12.20%	S	420.00	45.24%	Š	190	
Games of Chance	\$ 350.00	\$ 350.00	Š	-	0.00%	Š	120.00	10.2 770	Š	-	
Bingo Licenses	\$ 2,500.00	\$ 2,500.00	Š	249.66	9.99%	Š	311.71	-19.91%	\$	(62)	
Dog Licenses	\$ 11,500.00	\$ 11,500.00	S	3,403.50	29.60%	\$	3,798.50	-10.40%	\$	(395)	
Licenses, Other	\$ 900.00	\$ 900.00	S	339.89	37.77%	\$	795.59	-57.28%	\$	(456)	
Bldg/Alter Permits	\$ 37,000.00	\$ 37,000.00	S	13,257.00	35.83%	\$	13,210.10	0.36%	\$	47	
	\$ 3,500.00	\$ 3,500.00	\$	700.00	20.00%	\$	370.00	89.19%	\$	330	
	\$ 3,800.00	\$ 3,800.00	S	897.00	23.61%	\$	848.00	5.78%	S	49	
	\$ 6,000.00 \$ 35,000.00	\$ 6,000.00 \$ 35,000.00	S	3,855.00	64.25%	\$ \$	3,840.00	0.39% -5.74%	\$ \$	15 (505)	
	\$ 35,000.00 \$ 500.00	\$ 35,000.00 \$ 500.00	S	8,300.00 180.00	23.71% 36.00%	S	8,805.00 725.00	-75.17%	3 S	(545)	
•	\$ 1,000.00	\$ 1,000.00	S	100.00	0.00%	S	723.00	97 3.11 70	Š	(545)	
Minor Sales	\$ 900.00	\$ 900.00	Š	159.47	17.72%	Š	176.40	-9.60%	Š	(17)	
Sale of Real Property	S -	\$ -	Š	-		Š	-	0.00.0	Š	•	
Sale of Equipment	s -	\$ -	Š	-		S	-		S	-	
Insurance Recoveries	S -	\$ -	S	•		S	-		S	-	
Other Comp for Loss	s -	S -	S	2,171.37		\$	37.78	5647.41%	\$	2,134	
, 10.0 1 110. 1 0.p.	\$ -	\$ -	S	550.00		\$	-		S	550	
Healthcare Premiums	\$ 77,740.00	\$ 77,740.00	S	9,991.82	12.85%	\$	8,541.06	16.99%	S	1,451	
	\$ 20,900.00	\$ 20,900.00	S	400.00	0.00%	\$	-		S	100	
Gifts and Donations VLT	\$ 440,000.00	\$ - \$ 444,300.00	S	100.00 440,789.00	99.21%	\$ \$	440.789.00	0.00%	S S	100	
	\$ 1,000.00	\$ 1,000.00	S	30,576.00	3057.60%	S	440,769.00	0.0076	Š	30,576	
	\$ 1,750,975.00	\$ 1,750,975.00	S	1,504,868.00	85.94%	Š	1,504,868.00	0.00%	Š	-	
•	\$ 135,000.00	\$ 135,000.00	Š	116,592.78	86.37%	Š	142,294.49	-18.06%	\$	(25,702)	
Real Property Tax Admin	s -	\$ -	S	•		\$	•		\$	•	
State Aid - Record Mgmt	\$-	\$ -	S	•		\$	•		S	-	
	S -	S -	\$	•		S	•		\$	•	
State Aid - Public Safety	S -	\$ 15,270.56	\$	(11,380.41)	-74.53%	\$	(622.19)	1729.09%	S	(10,758)	
	\$ 561,720.00	\$ 561,720.00	\$	•	0.00%	\$	•		Ş	•	
State Aid - Other Transport. Recreation Program	s - \$ 19,772.00	\$ - \$ 19,772.00	\$ \$	•	0.00%	\$ \$	3.442.00	-100.00%	\$ \$	(3,442)	
_	\$ 150,000.00	\$ 150,000.00	\$	(262,158.12)	-174.77%	\$	3,442.00	-100.0076	\$	(262,158)	
	\$.50,000.00 \$ -	S -	Š	(202,130.12)	-114.7176	Š	(49,590.45)	-100.00%	Š	49,590	
	š -	š -	Š	•		Š	(14,775.00)	-100.00%	\$	14,775	
	\$ -	\$ -	Š	-		Š	-		\$	•	
State Aid - Home&Comm Srvc	S -	\$ 28,000.00	\$	•	0.00%	\$	38,500.00	-100.00%			
	\$ 4,330.00	\$ 4,330.00	\$	•	0.00%	S	•		\$	•	
	s -	\$ -	S	-		\$	•		\$	-	
Fed Aid - Planning Studies RBC		\$ -	\$			S			S		
	\$ -	\$ 244,361.06	\$	(4.38)	0.00%	\$	(857.33)	-99.49%	\$	853	
-	\$ - \$ 175,000.00	\$ 50,000.00 \$ 175,000.00	\$ \$	- 19,644.85	0.00% 11.23%	\$ S	•		\$ S	19.645	
	\$ 421,950.00	\$ 435,618.00	3 S	19,044.00	0.00%	S	259,428.00	-100.00%	S	(259,428)	
	\$ 250,000.00	\$ 254,000.00	\$	-	0.00%	\$		1.00.0070	Š	-	
	\$ 16,716.395.00	\$ 17,079,994.62	S	7,462,392.92	43.69%	\$	7,724,053.47	-3.39%	\$	(261,661)	

8/6/20183:40 PM DRAFT **GENERAL FUND**

CITY OF BATAVIA

FOR PERIOD ENDED - June 30, 2018

DESCRIPTION		ORIGINAL BUDGET	ADJUSTED BUDGET			YTD TOTAL	% OF L BUDGET		YTD 2017-2018	YTD Change %	Change \$	
Expenses												
City Council	S	•	\$		\$	6,387.18	13.11%	\$	7,198.76	-11.27%	\$	(812)
City Manager	\$		\$		\$	12,854.27	7.73%	\$	31,678.37	-59.42%	\$	(18,824)
Finance	S		\$	• • • •	\$	32,023.94	28.38%	\$	28,544.29	12.19%	\$	3,480
Administrative Services	S		\$		\$	124,210.58	34.42%	\$	135,816.50	-8.55%	S	(11,606)
Clerk-Treasurer	S		\$		\$	27,791.09	19.60%	\$	29,894.82	-7.04%	\$	(2,104)
City Assessment	\$		\$		\$	42,069.11	27.61%	\$	29,404.91	43.07%	\$	12,664
Legal Services	\$	•	\$		\$	45,557.47	20.63%	\$	46,200.60	-1.39%	\$	(643)
Personnel	\$	•	\$		\$	22,570.31	15.96%	\$	29,244.01	-22.82%	\$	(6,674)
Engineering	\$		\$		\$	3,530.54	6.74%	\$	40.005.00	70.000/	\$	3,531
Elections	S		\$		\$	24,830.00	100.00%	\$	13,885.00	78.83%	\$ \$	10,945
Public Works Admin	S	•	S	•	\$	19,526.33	17.99%	\$	17,463.92	11.81%		2,062 90,784
City Facilities	S		\$		\$	143,280.69	35.80%	S	52,496.79 42.664.92	172.93% 9.02%	\$ \$	3,848
Information Systems	S		\$		\$	46,513.08	34.56%	S	42,004.92	9.02%	3 \$	3,040
Contingency	\$	125,000.00	\$ \$		\$	•	0.00%	S	•		\$	_
Property Loss Police	S S	2 770 020 00	\$ \$		\$ \$	702,403.27	18.36%	S	742,267.93	-5.37%	\$	(39,865)
Fire	S	3,778,030.00 3,622,490.00	ş S		S	1,020,749.01	26.10%	5	739.464.62	38.04%	\$	281,284
Control of Dogs	S		\$		\$	1,020,749.01	70.04%	\$	897.94	11.54%	S	104
Inspection	S	317,270.00	S		S	59.206.97	18.66%	S	62,637.16	-5.48%	\$	(3,430)
Vital Statistics	S	18,920.00	S		Š	3,247.15	17.16%	Š	3,146.39	3.20%	Š	101
Maintenance Admin	Š	189,310.00	\$		Š	40.002.83	20.80%	Š	37,885.10	5.59%	Š	2,118
Street Maintenance	Š		Š		Š	138,192.68	22.71%	Š	121,445.19	13.79%	Š	16,747
Public Works Garage	Š	451,030.00	Š		Š	80,664.85	17.82%	\$	158,973.75	-49.26%	Š	(78,309)
Snow Removal	Š		Š		Š	12.758.29	2.44%	\$	8,026.91	58.94%	S	4,731
Street Lights/Traf Signals	Š		\$		S	51,345.77	18.17%	\$	46,242.37	11.04%	S	5,103
Sidewalk Repairs	Š		Š		S	20,549.00	7.19%	S	•		5	20,549
Parking Lots	S		S		\$	•	0.00%	\$	•		S	-
Community Development	\$	20,000.00	S	61,205.29	\$	900.00	1.47%	\$	15,874.68	-94.33%	\$	(14,975)
Economic Development	\$	110,000.00	S	110,000.00	\$	110,000.00	100.00%	S	16,768.44	555.99%	\$	93,232
Council on Arts	S	2,250.00	S	6,250.00	\$	6,250.00	100.00%	\$	6,250.00	0.00%	S	•
Parks	\$	577,400.00	\$	581,400.00	\$	115,380.64	19.85%	\$	104,806.64	10.09%	\$	10,574
Summer Recreation	\$	78,610.00	S	80,800.99	\$	5,370.56	6.65%	S	7,434.51	-27.76%	\$	(2.064)
Youth Services	\$	185,495.00	\$	185,495.00	\$	30,319.79	16.35%	S	26,191.95	15.76%	\$	4.128
Historic Preservation	\$	5,450.00	\$		\$	79.37	1.46%	5	18.18	336.58%	\$	61
Celebrations	\$	•	\$		\$	5,326.81	34.48%	S	7,600.70	-29.92%	\$	(2,274)
Planning & Zoning Boards	\$	•	\$		\$	329.77	10.64%	\$	169.63	94.41%	\$	160
Storm Sewers	\$		\$		\$	83,208.81	34.06%	\$	23,629.74	252.14%	\$	59,579
Refuse & Recycling	\$	•	\$	• • • • • • • • • • • • • • • • • • • •	\$	6,424.34	9.94%	\$	6,076.37	5.73%	\$	348
Street Cleaning	S		\$,	\$	20,132.63	17.54%	\$	13,907.45	44.76%	\$	6,225
Medical Insurance	\$		\$		\$	•		\$	423,815.81	-100.00%	S	(423,816)
Debt Service	\$		S	592,258.00	Ş	65,141.38	11.00%	\$	69,171.38	-5.83%	S	(4.030)
Energy Lease	\$	80,117.00	\$		\$	•	0.00%	\$	•		Ş	•
Transfer for capital projects	\$	2 247 222 22	S		\$	- 470 040 00	00 000	S	222 622 26	EZE 4.60	\$	1 055 000
Transfer to other funds	Ş		S		\$	2,178,610.00	98.26%	S	322,690.00	575.14%	\$	1,855,920
Capital Reserves	\$	143,000.00	\$	143,000.00	\$	•	0.00%	\$	259,428.00	-100.00%	\$	(259,428)
TOTAL EXPENSES	S	16,716,395.00	S	17,240,886.27	\$	5,308,740.05	30.79%	\$	3,689,313.73	43.90%	\$	1,619,426
Operating Income (Loss)	\$	•	\$	(160,891.65)	\$	2,153,652.87		\$	4,034,739.74	-46.62%	\$	(1,881,087)

WATER FUND CITY OF BATAVIA FOR PERIOD ENDED - June 30, 2018

DESCRIPTION		ORIGINAL BUDGET		ADJUSTED BUDGET		YTD TOTAL	% OF BUDGET		YTD 2017-2018	YTD Change %
D										_
Revenues Metered Water Sales	s	2,606,349.00	s	2,606,349.00	s	87,220,43	3.35%	•	185,199,64	-52.90%
Bulk Water Sales	\$	15.000.00	\$	15,000.00	S	4.410.56	29.40%	-	4.174.52	5.65%
Water Service Charges	\$	2,500.00	\$	2,500.00	Š	145.00	5.80%	-	260.00	-44.23%
Capital improvement fee	S	155.000.00	Š	155,000.00	Š	39.594.68	25.54%	-	36.043.19	9.85%
Int/Pen-Water Rents	Š	35,000.00	Š	35,000.00	S	5,279.25	15.08%	-	4,689,16	12.58%
County Contract	Š	1,400,250.00	Š	1,400,250.00	Š	-	0.00%	-	•	
Interest and Earnings	Š	1.500.00	Š	1,500.00	Š	977.43	65.16%	-	693.41	40.96%
Interest and Earnings-Reserve	S	1,000.00	Š	1,000.00	Š	1.790.68	55.75.75	Š	1.138.59	57.27%
Rental of Real Property	\$	550,000.00	Š	550,000.00	S		0.00%	-	.,	
Sale of scrap	Š	1,000.00	Š	1,000.00	S	•	0.00%	-		
Sale of equipment	Š	.,000.00	Š	.,000,00	S	-		Š		
Gain on disposition of asset	Š	•	Š	-	S	-		Š	•	
Insurance recoveries	Š	•	Š		S	•		Š	_	
Other Compensation for Loss	Š	•	Š		Š	•		Š	_	
Refund of Prior Year Expense	Š		Š		S			Š	-	
Healthcare premiums	Š	13,700.00	Š	13,700.00	Š	•	0.00%	Š	_	
Healthcare revenue	Š	2.280.00	Š	2,280.00	S	•	0.00%	S	_	
Unclassified revenue	Š	4.000.00	Š	4,000.00	Š	962,26	24.06%	5	882.80	9.00%
Federal Aid -Community Dev	Š		Š	•	Š	40.109.66		S		
Interfund transfers	Š		Š	•	Š	•		S	-	
Reserve revenue	Š	15.000.00	Š	15,000,00	Š		0.00%	S	102.902.00	-100.00%
Total Revenue	\$	4,801,579.00	\$	4,801,579.00	\$	180,489.95	3.76%	S	335,983.31	-46.28%
Expenses										
Contingency	\$	15.000.00	s	15,000.00	s	_	0.00%	e	_	0.00%
Water Admin	S	2.514.240.00	\$	2,543,890,11	Š	64,795.53	2.55%	•	64.303.53	0.77%
Pump Station & Filtration	5	1,234,810.00	S	1,236,392.40	Š	210,870.94	17.06%	-	210,965.88	-0.05%
Water Distribution	S	390,600,00	S	390.600.00	Š	50,184,25	12.85%	-	66,848.03	-24.93%
Medical Insurance	S	000,000.00	s		Š	-	12.0070	Š	32.817.53	-100.00%
Debt Service bonds	5	98,143.00	s	98.143.00	Š	1.161.23	1.18%	\$	(945.11)	-222.87%
Energy lease	5	19,118,00	Š	19,118.00	Š	1,101.20	0.00%	-		
Transfers for capital projects	\$	10,110.00	Š		Š	_	0.0070	Š		
Transfer to Other Funds	S	430,100,00	Š	430,100,00	Š	246,850,00	57.39%	Š	43.820.00	463,33%
Capital Reserves	\$	99,568.00	Š	99.568.00	S	,	•	Š	102.902.00	-100.00%
Total Expense	Š	4,801,579.00	S	4,832,811.51	Š	573,861.95	11.87%	-	520,711,86	10.21%
·		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			•	•		•		
Operating Income (Loss)	\$	•	\$	(31,232.51)	\$	(393,372.00)			(\$184,728.55)	112.95%

Consumption

*consumption in 1,000 gallons

y genuna						
	2018	Difference	<u>2017</u>	<u>Difference</u>	<u>2016</u>	<u>Difference</u>
April	64,475	-24.38%	85,260	24.35%	68,563	-0.48%
May	19,675	3.54%	19,002	-8.64%	20,800	2.27%
June	19,221	-4.14%	20,052	-0.13%	20,079	-4.85%
July	64,039	-20.29%	80,338	18.33%	67,894	-4.29%
August		0.00%	20,345	-4.41%	21,283	-1.57%
Sept		0.00%	21,676	-12.43%	24,753	11.38%
Oct		0.00%	81,229	-20.75%	102,492	22.17%
Nov		0.00%	21,127	-5.34%	22,319	3.31%
Dec		0.00%	20,189	-8.28%	22,012	3.60%
Jan		0.00%	73,227	-0.03%	73,246	-8.30%
Feb		0.00%	20,215	-2.11%	20,650	-0.90%
March _		0.00%	21,212	2.73%	20,648	-4.32%
Total	167,410	-18.20%	483,872	-0.18%	484,739	2.23%

SEWER FUND CITY OF BATAVIA

FOR PERIOD ENDED - June 30, 2018

DESCRIPTION		ORIGINAL BUDGET	•	ADJUSTED BUDGET		YTD TOTAL	% OF BUDGET		YTD 2017-2018	YTD Change %
Revenues										
Sewer Rents	\$	2,520,471.00	\$	2,520,471.00	\$	400,699.86	15.90%	\$	408,279.36	-1.86%
Sewer Surcharge	\$	-	\$	-	\$	2,474.15		\$	11,526.48	-78.54%
Septage	\$	•	\$	•	\$	29,499.97		\$	•	#DIV/0!
Int/Pen-Sewer Rents	\$	24,000.00	\$	24,000.00	\$	3,358.75	13.99%	\$	3,113.07	7.89%
Interest and earnings	\$	2,000.00	\$	2,000.00	\$	1,660.12	83.01%	\$	1,459.10	13.78%
Interest & Earnings Cap. Rsv	\$	•	\$	-	\$	2,506.65		\$	1,749.44	43.28%
Sale of scrap	\$	•	\$	•	\$	26.00		\$	429.90	-93.95%
Sale of equipment	\$	•	\$	•	\$	-		\$	•	
Other Compensation for Loss	5	-	S	-	\$	-		\$	•	
Refunds of prior years expend.	\$	-	\$	•	\$	•		\$	•	
Healthcare premiums	\$	2,300.00	\$	2,300.00	\$	-	0.00%	\$	•	
Healthcare revenue	\$	1,830.00	\$	1,830.00	\$	•	0.00%	\$	•	
Unclassified revenue	\$	70,000.00	S	70,000.00	\$	22,284.68	31.84%	\$	41,017.60	-45.67%
Interfund transfers inc	\$	•	\$	•	S	-		\$	•	
Reserve revenue	\$	15,000.00	\$	15,000.00	\$	•	0.00%	\$	680,000.00	-100.00%
Total Revenues	\$	2,635,601.00	\$	2,635,601.00	\$	462,510.18	17.55%	\$	1,147,574.95	-59.70%
Expenses										
Contingency	\$	15,000.00	\$	15,000.00	\$	-	0.00%	\$	•	
Loss on Sale of Assets	\$	•	\$	-	\$	-		\$	•	
Wastewater Admin	\$	306,140.00	3	312,086.95	\$	57,556.10	18.44%	\$	64,173.68	-10.31%
Sanitary Sewers	\$	396,015.00	\$	587,015.00	\$	67,408.76	11.48%	\$	67,200.22	0.31%
Wastewater Treatment	\$	763,430.00	\$	765,235.71	\$	136,637.18	17.86%	\$	131,545.64	3.87%
Medical Insurance	\$	•	\$	•	\$	-		\$	27,918.36	-100.00%
Debt Service	\$	475,965.00	\$	475,965.00	\$	6,989.07	1.47%	\$	(6,053.08)	-215.46%
Energy lease	\$	7,931.00	\$	7,931.00	\$	-	0.00%	\$	•	
Transfer to Other Funds	\$	206,120.00	\$	206,120.00	\$	200,120.00	97.09%	\$	31,880.00	527.73%
Transfers for Capital projects	\$	-	\$	•	\$	•		\$	•	
Capital Reserves	\$	465,000.00	\$	465,000.00	5	•	0.00%	5	680,000.00	-100.00%
Total Expenses	\$	2,635,601.00	\$	2,834,353.66	\$	468,711.11	16.54%	\$	996,664.82	-52.97%
Operating Income (Loss)	\$	•	\$	(198,752.66)	\$	(6,200.93)		\$	150,910.13	-104.11%

Consumption

*consumption in 1,000 gallons

	2018	Difference	<u>2017</u>	Difference	<u>2016</u>	<u>Difference</u>
April	99,047	-3.82%	102,986	-3.97%	107,238	1.26%
May	50,726	0.58%	50,435	8.07%	46,669	-17.05%
June	19,222	-4.05%	20,034	-0.18%	20,070	-3.96%
July	101,349	2.60%	98,780	-5.89%	104,963	-3.36%
Aug			50,948	3.19%	49,374	-18.74%
Sept			21,627	-12.20%	24,633	11.22%
Oct			102,366	-16.53%	122,632	3.43%
Nov			55,905	-1.80%	56,928	-9.09%
Dec			20,164	-8.12%	21,945	3.60%
Jan			103,665	-1.68%	105,431	-10.34%
Feb			51,260	8.53%	47,230	-15.63%
March			21,211	2.84%	20.626	-4.39%
Tctal	270,344	0.69%	699,381	-3.90%	727,739	-5.74%

CITY CENTRE FUND CITY OF BATAVIA

FOR PERIOD ENDED - June 30, 2018

DESCRIPTION	-	ORIGINAL BUDGET	•	ADJUSTED BUDGET		YTD TOTAL	% OF BUDGET	YTD 2017-2018	YTD Change %
Revenues									
Mall Merchants Contributions	\$	202,832.00	\$	202,832.00	\$	101,416.10	50.00%	\$ -	
Interest/Penalty	\$	-	S	-	\$	272.01		\$ -	
Interest and Earnings	\$	-	\$	-	\$	11.32		\$ •	
Rental, Other - Facility Usage	\$	-	\$	-	\$	-		\$ •	
Healthcare Premiums	\$	998.00	\$	998.00	\$	-	0.00%	\$ -	
Unclassified revenue	\$	-	\$	-	\$	170.00		\$ •	
Interfund Transfers In	\$	-	\$	•	\$	•		\$ -	
Total Revenues	\$	203,830.00	\$	203,830.00	\$	101,869.43	49.98%	\$ -	
Expenses									
Administration	\$	172,582.00	\$	172,582.00	S	31,150.48	18.05%	\$ -	
Contingency	S	8,345.00	S	8,345.00	\$	-	0.00%	\$ -	
Depreciation	\$	-	\$	-	S	•		\$ -	
Debt Service	S	-	S	•	\$	-		\$ -	
Transfers to other funds	\$	22,903.00	\$	22,903.00	\$	22,903.00	100.00%	\$ •	
	\$	-	\$	-	\$	•		\$ •	
Total Expenses	\$	203,830.00	\$	203,830.00	\$	54,053.48	26.52%	\$ -	
Operating Income (Loss)	\$	-	\$	-	\$	47,815.95		\$ •	

WORKERS COMPENSATION FUND CITY OF BATAVIA FOR PERIOD ENDED - June 30, 2018

DESCRIPTION	ORIGINAL BUDGET	ADJUSTED BUDGET		YTD TOTAL	% OF BUDGET	YTD 2017-2018		YTD Change %
Revenues								
Workers Compensation	\$ 270,230.00	\$ 270,230.00	\$	271,166.00	100.35%	\$	323,390.00	-16.15%
Interest and earnings	\$ -	\$ -	\$	245.98		\$	152.39	61.41%
Interest and earnings - Cap Rsrvs	\$ -	\$ -	\$	344.20		\$	191.62	79.63%
Insurance Recoveries	\$ -	\$ -	\$	-		\$	•	
Refunds of Prior Years Expend	\$ -	\$ -	\$	-		\$	•	
Reserve revenue	\$ -	\$ -	\$	-		\$	75,000.00	-100.00%
Total Revenues	\$ 270,230.00	\$ 270,230.00	\$	271,756.18	100.56%	\$	398,734.01	-31.85%
Contractual Expense	\$ 17,500.00	\$ 17,500.00	\$	-	0.00%	\$	10,000.00	-100.00%
Workers Comp Benefits	\$ -	\$ -	\$	-		\$	-	
Workers Comp Board Assess.	\$ 25,000.00	\$ 25,000.00	\$	-	0.00%	\$	•	
Workers Comp -Admin	\$ 4,540.00	\$ 4,540.00	\$	-	0.00%		-	
Workers Comp - Police	\$ 122,980.00	\$ 122,980.00	\$	52,477.25	42.67%		5,114.83	925.98%
Workers Comp - Fire	\$ 77,430.00	\$ 77,430.00	\$	31,134.42	40.21%	\$	6,794.01	358.26%
Workers Comp DPW	\$ 22,780.00	\$ 22,780.00	\$	57,819.05	253.81%	\$	12,507.66	362.27%
Trasnfer to reserves	\$ -	\$ •	\$	-		\$	•	
Total Expenses	\$ 270,230.00	\$ 270,230.00	\$	141,430.72	52.34%	\$	34,416.50	310.94%
Operating Income/(Loss)	\$ •	\$ •	\$	130,325.46		\$	364,317.51	-64.23%

HEALTH INSURANCE FUND CITY OF BATAVIA

FOR PERIOD ENDED - June 30, 2018

ORIGINAL DESCRIPTION BUDGET		,	ADJUSTED BUDGET		YTD TOTAL	% OF BUDGET	YTD 2017-2018		YTD Change %	
Revenues Interfund Transfers In	s	2.355.350.00	s	2.355,350.00	s	2,377,317.00	100.93%	s	_	
Interest and earnings	Š	2,000,000.00	Š	-	Š	756.94	100.5570	\$	-	
	\$	-	\$	•	\$	•		S	-	
	S	•	\$	-	\$	-		\$	-	
Total Revenues	\$	2,355,350.00	\$	2,355,350.00	\$	2,378,073.94	100.96%	\$	-	
Medical Insurance	S	2,355,350.00	\$	2,355,350.00	\$	398,194.69	16.91%	s	-	
	\$	-	\$	· · ·	\$			\$	-	
	\$	•	\$	-	\$	-		\$	-	
Total Expenses	\$	2,355,350.00	\$	2,355,350.00	\$	398,194.69	16.91%	\$	-	
Operating Income/(Loss)	\$	-	\$	•	\$	1,979,879.25		\$	-	

Community Action Children's Carnival

There are no costs from the departments.

Batavia Brewing / Eli Fish Clam Bake

There are no costs from the departments.

The YNGoddess Shop Fundraiser

There are no costs from the departments.

Batavia Brewing / Eli Fish Oktoberfest

There are no costs from the departments.

Batavia Rotary 5K Run/Walk

Estimated costs from the police department are \$184. There are no other costs from the other departments.

Batavia Bulldawgs Youth Football and Cheer

This is just informational to let Council know what parks are being requested for football and does not require approval from departments. This is also to make Council aware of their request to top dress areas of the field to level it to prevent tripping. They will do the work and there is no cost to the City.

NEIL WEINBERG

Auorney at Law 5800 Main Street Williamsville, New York 14221 (716) 626-1600 Fax (716) 626-1515

July 10, 2018

VIA CERTIFIED MAIL - RETURN RECEIPT

City of Batavia One Batavia City Centre Batavia, NY 14020

Re: Fishtales Hideaway, LLC

Dear Sir / Madam:

Enclosed please find New York State Liquor Authority Standardized Notice Form for Providing 30 Day Advanced Notice to a Local Municipality or Community Board for the above referenced matter.

This Notice is an Amendment to the Notice Form dated April 30, 2018 which corrects the name of the LLC Member reflecting Ryan Fannin as the Member.

Thank you.

Very truly yours,

WEIL WEINBER

NW/lm enc.

onla-rev 01/22/16 OFFICE USE ONLY	
Oplia-rev 01/22/16 Original Office USE ONLY Original Amended Date	49
SARGE JULIUS	viding <u>30-Day Advanced Notice</u> to a <u>all Municipality or Community Board</u>
Authority	(Page 1 of 2 of Form)
	Return Receipt
2. Select the type of Application that will be filed with the Authority for an On-Premises Alco	_
New Application Renewal Alteration Corporate Change Removal	Class Change
For New applicants, answer each question below using all information known to date. For Renewal applicants, set forth your approved Method of Operation only.	
For Alteration applicants, attach a complete written description and diagrams depicting th	
For Corporate Change applicants, attach a list of the current and proposed corporate princ For Removal applicants, attach a statement of your current and proposed addresses with ti	•
For Class Change applicants, attach a statement detailing your current license type and you	
his 30-Day Advance Notice is Being Provided to the Clerk of the following Local Munic	cipality or Community Board
. Name of Municipality or Community Board: City of Batavia	
Applicant/Licensee Information	
License Serial Number, if Applicable: Expiration Da	ite, if Applicable:
. Applicant or Licensee Name: Fishtales Hideaway, LLC	
. Trade Name (if any):	
7. Street Address of Establishment: 107 Evans Street	
City, Town or Village: Batavia	,NY Zip Code: 14020
. Business Telephone Number of Applicant/Licensee: 716 510 6396	
O. Business Fax Number of Applicant/Licensee:	
Business E-mail of Applicant/Licensee: Tmfannin@gmail.com	
2. Type(s) of Alcohol sold or to be sold: Beer & Cider Wine, Beer & Cider	Liquor, Wine, Beer & Cider
3. Extent of Food Service: Full food menu; Menu meets legal Food prep area at	minimum food availability requirements: minimum
14. Type of Establishment: Restaurant (Full Kitchen & Full Menu required	
15. Method of Operation: Seasonal Establishment Juke Box Disc Jockey	Recorded Music
(Check all that apply) Live Music (Give details: i.e. rock bands, acoustic, jazz, etc.):	
Patron Dancing Employee Dancing Exotic Danci	ng Topless Entertainment
☐ Video/Arcade Games ☐ Third Party Promoters	Security Personnel
Other (specify):	
6 Negered Dutdoor Area: ☐ None ☑ Patio or Deck ☐ Rooftop ☐ Garden/Groun	nds Freestanding Covered Structure
6. Licensed Outdoor Area: Check all that apply) Sidewalk Cafe Other (specify):	

opla-rev 01/22/16		OFFICE USE ONLY			49
	Original te Liquor thority	Amended Date Standardized NOTICE	FORM (O-Day Advanced Notice to a pality or Community Board (Page 2 of 2 of Form)
17. List the floor(s) of the b	ouilding that the	establishment is located on: Fi	rst		
18. List the room number(building, if appropriate	•	ent is located in within the			
19. Is the premises located	within 500 feet (of three or more on-premises i	quor esta	blishments? OYe	s No
20. Will the license holder	or a manager be	physically present within the e	stablishm	ent during all hour	s of operation?
21. If this is a transfer appl	ication (an existin	ng licensed business is being p	urchased)	provide the name	and serial number of the licensee.
22. Does the applicant or l	Icensee own the	building in which the establish	ment is lo	cated? O Yes (If	Yes SKIP 23-26)
	Owner of th	e Building in Which the Licer	sed Esta	blishment Is Locat	red
23. Building Owner's Full (Name: LAJ	amz, LLC			
24. Building Owner's Street	et Address: 81	01 Conlon Rd.			
25. City, Town or Village:	Leroy		State:	NY	Zip Code : 14482
26. Business Telephone N	umber of Buildin	g Owner: 585 802 2110			
		or Attorney representing the se to traffic in alcohol at the			
27. Representative/Attorn	ey's Full Name:	Neil Weinberg			
28. Street Address:	5800 Main Stree	et			
29. City, Town or Village:	Williamsville		State:	New York	Zip Code : 14221
30. Business Telephone No	umber of Represe	entative/Attorney: 716 626 16	00		
31. Business Email Addres.	s: NweInberg@	nweinberglaw.com			
In this form are in	n conformity with understand that	am a principal of the legal ent representations made in sub- representations made in this f in disapproval of the applicati	nitted do	cuments relied upo Iso be relled upon,	and that false representations
By my sign	nature, I affirm - u	nder Penalty of Perjury - that	the repre	sentations made In	this form are true.
32. Printed Name: Ryan	Fannin		T	tle Member	
Signature: X	~	<u> </u>			<u></u>
J					Page 3

rev05042	2018
1	Authority

	OFFICE	USE ONLY	
Original Original	○ Amended	Date	

49

Standardized <u>NOTICE FORM</u> for Providing <u>30-Day Advance Notice</u> to a Local Municipality or Community Board

	to a Local Ividii	incipality of Coli	mindrity board
1. Date Notice was Sent:	7/16/2018	1a. Delivered by:	Certified Mail Return Receipt Requested
2. Select the type of Application that	•	– ity for an On-Premises Al	Icoholic Beverage License:
New Application	ewal O Alteration O Cor	porate Change O Rem	noval O Class Change O Method of Operation Change
For Renewal applicants, ans For Alteration applicants, at For Corporate Change applicants, atta For Removal applicants, atta For Class Change applicants,	tach a complete written descr cants, attach a list of the curre ich a statement of your currer attach a statement detailing	ription and diagrams depi ent and proposed corpora nt and proposed addresse your current license type	icting the proposed alteration(s)
This 30-Day Advance Notice is	Being Provided to the Cler	k of the Following Loc	al Municipality or Community Board:
3. Name of Municipality or Commu	nity Board: City of Ba	tavia, New york	 k
Applicant/Licensee Information		<u>·</u>	-
4. Licensee Serial Number (if applic	able): 3008166	Ex	spiration Date (if applicable): 09/30/2020
S. Applicant or Licensee Name:	Gerard S. Potrzebowsk	<u> </u>	
6. Trade Name (if any): Kelly's	Holland, Inn		
7. Street Address of Establishment	25 Evans Street		
8. City, Town or Village: Batavi	 a	1,	NY Zip Code: 14020
9. Business Telephone Number of A	Applicant/Licensee: (585) 3	343-9726	
10. Business E-mail of Applicant/Lid	ensee:		
11. Type(s) of alcohol sold or to be	sold: O Beer & Cider	Wine, Beer & Cide	er O Liquor, Wine, Beer & Cider
12. Extent of Food Service:			
O Full food menu; full kitcher	run by a chef or cook 🛛 O N	Лепи meets legal minimu	um food availability requirements; food prep area at minimu
13. Type of Establishment: Bar/7	avern		
(check all that apply)	vasonal Establishment ve Music (give details i.e., rock	Juke Box Disc Jock	
☐ Pa	tron Dancing 🔲 Employed	e Dancing 🔲 Exotic D	Dancing Topless Entertainment
☑ Vi	deo/Arcade Games	ird Party Promoters [Security Personnel
OI	her (specify):	· · · · · - · · · · · · · · · · · · · ·	
15. Licensed Outdoor Area:	_		en/Grounds Freestanding Covered Structure
Sid	dewalk Cafe	ecify): [

da-rev03292018	:	OFFICE U	ISE ONLY	-		
	Original	Amended	Date			
-						
.6. List the floor(s) of the building t	hat the establishme	ent is located on: 1st				
7. List the room number(s) the est	ablishment is locate	ed in within the building	g, if appropriate:			
8. Is the premises located within 5	00 feet of three or	more on-premises liquo	er establishments?	. ○Yes ⊙ No		
9. Will the license holder or a man	ager be physically p	resent within the estab	lishment during all ho	urs of operation?	⊙ Yes C) No
20 If this is a transfer application (a	in existing licensed	business is being purcha	ased) provide the name	e and serial number of	f the licensee:	
	Name			Serial Num	her	
21. Does the applicant or licensee o		which the establishment	t is located? ••• Yes	(if YES, SKIP 23-26)	O _{No}	
	Owner of the I	Building in Which the	: Licensed Establishr	ment is Located		
2. Building Owner's Full Name:				,		
 3. Building Owner's Street Address	::					
4. City, Town or Village:	<u> </u>		State:	7	Zip Code:	
5. Business Telephone Number of	Building Owner:				-	
	tion for a License	Attorney Representin to Traffic in Alcohol				
7. Representative/Attorney's Stree	t Address:					-
8. City, Town or Village:			State:		Zip Code:	
9. Business Telephone Number of I	Renresentative/Atto	ornev:				
). Business E-mail Address of Repri		<u> </u>				
v. business e-mail Address of Repri	esemonve/Attome	f·				· · ·
Representations in the Authority whe	this form are in co en granting the lic	der or a principal of the onformity with represence. I understand the ins may result in disap	sentations made in s lat representations r	submitted documen made in this form wi	ts relied upon II also be relie	by ed
By my signature	e, I affirm - under	Penalty of Perjury - I	that the representat	ions made in this fo	rm are true.	
1. Printed Principal Name: Ge	erard S. Potrze	ebowski	Title: Sc	ole Proprietor		

	250	***	40
revi	ЮU	4ZL	,,,

<u> </u>	OFFICI	E USE ONLY
Original C	Amended	Date

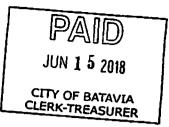
49

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

to a Local Maincipanty of Community bools
1. Date Notice was Sent: 8 1 18 1a. Delivered by:
2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:
O New Application Renewal O Alteration O Corporate Change O Removal O Class Change O Method of Operation Change
For New applicants, answer each question below using all information known to date For Renewal applicants, answer all questions For Alteration applicants, attach a complete written description and diagrams depicting the proposed alteration(s) For Corporate Change applicants, attach a list of the current and proposed corporate principals For Removal applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation For Class Change applicants, attach a statement detailing your current license type and your proposed license type For Method of Operation Change applicants, although not required, if you choose to submit, attach an explanation detailing those changes
This 30-Day Advance Notice is Being Provided to the Clerk of the Following Local Municipality or Community Board:
3. Name of Municipality or Community Board: BATAVIA CITY COUNCIL
Applicant/Licensee Information:
4. Licensee Serial Number (if applicable): 3105174 Expiration Date (if applicable): 8131 18
5. Applicant or Licensee Name: M 6 SONULES LLC
6. Trade Name (if any): SUNNYS (IOSTAUNAL + OUNGE
7. Street Address of Establishment: 12 BAHAUIA CITY CONTR
8. City, Town or Village: BAHUA , NY Zip Code: 14020
9. Business Telephone Number of Applicant/Licensee: 585-343-4578
10. Business E-mail of Applicant/Licensee: MIKESKINZ Q VATO. COM
11. Type(s) of alcohol sold or to be sold: O Beer & Cider O Wine, Beer & Cider Vine, Beer & Cider
12. Extent of Food Service:
Full food menu; full kitchen run by a chef or cook O Menu meets legal minimum food availability requirements; food prep area at minimum
13. Type of Establishment: Responsible 13. Type of Establishment:
14. Method of Operation: Seasonal Establishment Juke Box Disc Jockey Recorded Music Karaoke
(check all that apply)
Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment
☐ Video/Arcade Games ☐ Third Party Promoters ☐ Security Personnel
Other (specify):
15. Licensed Outdoor Area: None Patio or Deck Grounds Freestanding Covered Structure (check all that apply)
Sidewalk Cafe Other (specify):

opla-rev03292018	Original O	OFFICE USE ONLY Amended Date		
16. List the floor(s) of the building	g that the establishment is to	ocated on:	Floor	
17. List the room number(s) the e	stablishment is located in w	ithin the building, if appropri	ate:	
18. Is the premises located within	1 500 feet of three or more o	n-premises liquor establishm	ients? O Yes 🕱 No	
19. Will the license holder or a m	anager be physically present	within the establishment du	ring all hours of operation?	Yes O No
20. If this is a transfer application	(an existing ticensed busines	ss is being purchased) provide	e the name and serial number	of the licensee:
	Name		Serial No	umber
21. Does the applicant or licenses	e own the building in which t	he establishment is located?	Yes (if YES, SKIP 23-26)	⊘ No
	Owner of the Buildin	ng in Which the Licensed E	istablishment is Located	
22. Building Owner's Full Name:			·	
23. Building Owner's Street Addre	255:			
24. City, Town or Village:		State:		Zip Code:
			icant in Connection with the blishment Identified in this	
26. Representative/Attorney's Ful	Name:			•
27. Representative/Attorney's Str	eet Address:			
28. City, Town or Village:		State:		Zip Code:
29. Business Telephone Number of	of Representative/Attorney:			
30. Business E-mail Address of Re	presentative/Attorney:			
Representations the Authority w	in this form are in conform hen granting the license.	nity with representations in I understand that represer	ity that holds or is applying made in submitted documentations made in this form the application or revocation	ents relied upon by will also be relied
By my signati	ure, I affirm - under Penal	ty of Perjury - that the rep	presentations made in this	form are true.
31. Printed Principal Name:	CHRISTINA RO	sé	Title: OWNE	٤
Principal Signature: _	040	2		





Official Use Only:

2018 - 23

DATE: 06/15/2018 GENERAL RECEIPTS RECEIPT TYPE: 2590

237400

TIME: 15:39:01

Event Application Fee - \$25.00 (non-refundable) #

25, 00

(v. separate permit m	45. 56 1		w 101 c	Man contraditionist NTA CO. 100
Event Sponsor Community Oction	090	rka	nS	3 Genesee
Type of Event Children's Carniva	1			
Date of Event Friday August 17	<u>. 201</u>	8		
Time of Event (don't include set up time here – just	st actua	l eve	nt tim	e) 10 am - 2 pm
Location of Event Lambert Park		_		<u> </u>
Details of Event (be as specific as possible!)	pprov	i J	a as	encies come together, set up
name ovall or ochurty booths,				
phy games do crafts, get val	uable	11	18c	motion
Contact Information: Primary contact:		9	Secon	idary contact:
Name USAP Withmeder Phone # 343-7198 1 y 116 E-mail address [Withmeder(a) cacquinc.o	<u></u>	-		Jaskonski @ caogina org
* Events will be posted on the City's website caler can visit for more information or registration, if app				
Will there be alcohol at your event? Yes	٥		No	If yes, complete the following:
Type of alcoholic beverage to be served:	Liquor			Wine Beer
Will you be providing alcohol to your group?	Yes		No	
Will you be selling alcohol to your group?	Yes		No	Insurance certificate WILL BE required with Liquor Legal.
Will people be allowed to bring alcohol to the event?	Yes	a	No	
Who will be applying to the NYS Liquor Authority	for the	perm	nit to s	sell?

It is the Applicant's responsibility to police the area during the gathering to make sure all Alcohol Beverage Control rules are followed. Also, after the event Applicant is responsible to dispose of all empty bottles and debris.

^{**} If you are contracting with a group to sell alcohol during your event on city property, separate insurance is required from them with Liquor Legal in addition to your insurance. **

EVENT INFORMATION (required):
Set up date: August 17, 301 8 Set up time: 8 00 am
Tear down date: (fugust 17, 2018 Tear down time: D:00 pm
PLEASE LIST ALL DATES / TIMES AND CROWD INFORMATION BELOW:
Date: Jugust 17,0018 Start time: 10:00 gm End time: 0:00 pm
Estimated crowd size: 100 # of Vendors/Displays 20-30
WILL THE EVENT INCLUDE:
Parade: Yes No (MAP OF DESIRED ROUTE MUST BE ATTACHED) Run or Walk: Yes No (MAP OF DESIRED ROUTE MUST BE ATTACHED) Music: Yes No (MAP OF CLOSED STREETS AND DROP LOCATION OF BARRICADES) Other: Yes No (MAP OF DESIRED ROUTE MUST BE ATTACHED)
Fireworks or Hazardous Materials? Yes No Carnival or Amusement Rides? Yes No Carnival or Amusement Rides? Yes No Carnival or Amusement Rides?
Name of Company Providing Above Phone # Company Contact/Representative Phone #
Address, Sirect City Zip Code
Music: Live Group ☐ Recorded/DJ ☐
Name of Company Providing Above Double Company Contact/Representative Phone 8
Albian 14411
Address, Street Cdy Zip Code
CITY SERVICES SUPPORT:
The City reserves the right, as part of the permitting process, to require the applicant to pay for additional operational costs of the City associated with the event.
FOR EVENTS IN CITY PARKS, GARBAGE PICK-UP WILL BE MADE ONLY TO GARBAGE CANS ON SITE. ADDITIONAL GARBAGE MUST BE BAGGED AND REMOVED FROM PREMISES BY EVENT SPONSOR.
ELECTRIC:
Will electric be needed for the event? Yes ☑ No □
What will you be providing electric to? Bruncehause, For food?
Will generators be used? Yes No Z If yes, INCLUDE SITE DRAWING INDICATING PLACEMENT/LOCATION OF GENERATOR
SIZE OF GENERATOR(S) FUEL SOURCE - GAS - 🗆 - DIESEL - 🗅 - PROPANE - 🗅

TENTS/CANOPIES:
Will Tents/Canopies or other membrane structures be erected at event? Will a bounce house or other air supported structures be erected at event? Yes I No I
Please list size(s) of Tents/Canopies or other temporary structures erected. 10x10 canopies approx 20-25
ANCHORING INTO PAVEMENT IS PROHIBITED!
If anchoring in grass, soil areas please contact the NYS Dig Safe # at: 1-800-962-7962 or 811
STREET CLOSURE(S):
ANY EVENT REQUIRING A STREET CLOSURE REQUIRES 90 DAY ADVANCE NOTICE
Will street(s) need to be closed for the event? Yes No Reason:
List Street(s) and Cross Street(s) that will be affected:
Street to be closed Cross Streets
Street to be closed Cross Streets
Street to be closed Cross Streets
Street to be closed Cross Streets
Will street barricades be requested from the City? Yes No How Many?
Will traffic cones be requested from the City? Yes No How Many? (Drop off locations of requested items must be identified on the site drawing)
BANNERS / SIGNS OR OTHER DECORATIONS ARE NOT TO BE ATTACHED TO STREET BARRICADES, TRAFFIC CONES, LIGHT POLES, OR ANY OTHER CITY PROPERTY
Are there any other city materials or personnel requested for the event? Identify below: (there may be additional costs)
POLICE
Will City Police Officers be requested for the event? Yes ☐ No ☐
FINAL DETERMINATION FOR NUMBER OF POLICE OFFICERS and UTILIZATION WILL BE AT THE DISCRETION OF THE CITY.

PLEASE NOTE:

- Be as specific as possible in the description so we have the best understanding of your event. Also, be clear
 as to what you would like provided by the City. Applications should be submitted at least 30 days in
 advance.
- 2. Fire hydrants, Cross Streets/Alleys and Store Fronts **Shall Not Be Blocked** by any Vehicle or Concession at any time.
- 3. An Emergency Vehicle Safety Lane Must be Maintained at All times at All Locations
- 4. Fuel Containers Must be of an Approved type and Must be Properly Secured
- 5. Deep Fryers Must Be Approved. Commercial Types Require a Type "K" Portable Fire Extinguisher
- 6. All Food Vendors Must Have a Type ABC Fire Extinguisher. All Fire Extinguishers Must Be Inspected Within The Last Year. A Valid Health Department Permit Must Be Displayed.
- No grease or substance of any kind may be discharged upon the streets, sidewalks, or into the storm drains and/or sewers
- 8. City Sign Ordinances Shall Be Complied With At All Times And In All Regards
- 9. No paint or other markings may be placed on the street surface.
- Any overtime and/or material costs in excess of \$500, as determined by City Departments, must be paid by the event sponsor or other party
- 11. The application fee is due at time of submission of the application and is non-refundable.
- 12. If approved, a Certificate of Liability Insurance of at least \$1,000,000 naming the City of Batavia as an additional insured for at least the day(s) of the event must be submitted to the City Clerk prior to the event date.

J	Hold Harmless Agreement
the City of Batavia, its employees, officers a not limited to, attorney's fees, court costs, a agents may pay or become obligated to pay any claim founded thereon, arising or alleg application, and sanctioned by the permit	(sponsor, shall indemnify, hold harmless, assume liability for and defend and agents from any and all damages, costs and expenses including but and all other sums which the City of Batavia its employees, officers and y on account of any and every demand, claim or assertion of liability, or ged to have arisen out of the activities described in this special event it issued by the City of Batavia or by any act or omission of the prisor), its members, agents, employees, volunteers, officers, or directors ication and sanctioned by the issuance of a special event permit.
10-14-18	Community action of Ocleans & Genesee
Date	Rusa P. Witiney - Case Manages
	Susa P. Witiney Case Manager Lisa P. Withmeyer Case Manager Lisa P. Withmeyer Case Manager
The rules and information contained within the Late Date	his application have been read and will be adhered to
Please forward this application to:	City Clerk's Office Attention: Events Applications Department One Batavia City Centre

Batavia, New York 14020



Official Use Only:

2018-29 Event Application 8

Event Application Fee - \$25.00 (non-refundable) (A separate permit must be issued for each item requested)

Event Sponsor Baraun Brea	ה'נו	r (S	2	2~ Y	. /	<u> </u>	TSh.	rewine	g CO.	
Type of Event	2_		•	_				/27/2016	7.EHE:	14:14:0
Date of Event Miday /	7	sust	<u>ر</u> م	3/ S	<u>ァ</u>			RECEIPTS TYPE: 2590		
Time of Event (don't include set up time her						<u> 1/ حُ</u>	Ven	# 6-85 	6-Food	<u> 65</u>
Location of Event <u>JACKSON</u> Sq	41	nc					_			
Details of Event (be as specific as possible)) 									
ive Music, games, do	من	KS+	- L	20d	<u></u>					
										· · · · · · · · · · · · · · · · · · ·
Contact Information:										
Primary contact:			2	econ	dary	contact	<u>:</u>			
Name Shamon Mote			_		m	ATT	Garz	,		
Phone # <u>95-343-0008</u>		<u> </u>	_		٤	919	- 882	- <i>3</i> 371		
E-mail address Shamun eveligion	<u> </u>	ייייייייייייייייייייייייייייייייייייי	<i>o</i> ~_		ma	110	دري	4 BACWIN	s. wm	
* Events will be posted on the City's website can visit for more information or registration,	cale if ap	ndar. If plicable,	there note	is a web	webs site h	ite you ere; <u>&/</u>	would li いい。C	ke to include い <i>らいん</i>	that peop	le :0~
Will there be alcohol at your event?	Yes	প্র		No			If yes,	complete the	efollowing	ı:
Type of alcoholic beverage to be served:		Liquor				Wine		Beer ≯	1	
Will you be providing alcohol to your group	?	Yes	Ø	No						
Will you be selling alcohol to your group?		Yes	Ø	No			iquor L	tificate <u>WILL</u> egal.	.BE requ	ired
Will people be allowed to bring alcohol to the event?		Yes		No	Ą					
Who will be applying to the NYS Liquor Aut	hority	y for the	pem	rit to	seli?		<u>y</u>			
t is the Applicant's menonsibility to police th	0 2/0	a durina	tha ~	ather	ina to	make :	euro all i	Urohol Reve	rane Conti	mi

It is the Applicant's responsibility to police the area during the gathering to make sure all Alcohol Beverage Control rules are followed. Also, after the event Applicant is responsible to dispose of all empty bottles and debris.

^{**} If you are contracting with a group to sell alcohol during your event on city property, separate insurance is required from them with Liquor Legal in addition to your insurance. **

EVENT INFORMATION (required):
Set up date: 8/31/18 Set up time: NOON
Tear down date: 9/1/18 Tear down time: 11:00 Am
PLEASE LIST ALL DATES / TIMES AND CROWD INFORMATION BELOW:
Date:
Estimated crowd size: 200 # of Vendors/Displays
WILL THE EVENT INCLUDE:
Parade: Yes 🗋 No 🕾 (MAP OF DESIRED ROUTE MUST BE ATTACHED)
Run or Walk: Yes 🗋 No 🛣 (MAP OF DESIRED ROUTE MUST BE ATTACHED)
Music: Yes 🔀 No 🗌 (SITE DRAWING OF STAGE OR DJ LOCATION ATTACHED)
Street Closure(s): Yes 🔲 No 🔏 (MAP OF CLOSED STREETS AND DROP LOCATION OF
BARRICADES) Other: Yes □ No 124 (MAP OF DESIRED ROUTE MUST BE ATTACHED)
Cuter. Tes (NO E (MAP OF BESINED ROOTE MOST BE ATTACHED)
Fireworks or Hazardous Materials? Yes 🔲 No 🗳 Carnival or Amusement Rides? Yes 🔲 No 👍
TBA
Rame of Company Providing Above Company Contact/Representative Phone #
Address: Street Cay Zip Code
Music: Live Group 💢 Recorded/DJ 🗖
TRA
Name of Company Providing Above Company Contact/Representative Phone #
Address, Street City Zip Code
CITY SERVICES SUPPORT:
The City reserves the right, as part of the permitting process, to require the
City Code 66-15, D-2 applicant to pay for additional operational costs of the City associated with the
event.
FOR EVENTS IN CITY PARKS, GARBAGE PICK-UP WILL BE MADE ONLY TO GARBAGE CANS ON SITE. ADDITIONAL GARBAGE MUST BE BAGGED AND REMOVED FROM PREMISES BY EVENT SPONSOR.
ELECTRIC:
Will electric be needed for the event? Yes ☑ No □
What will you be providing electric to? Sound, lights
Will generators be used? Yes □ No ☑
If yes, INCLUDE SITE DRAWING INDICATING PLACEMENT/LOCATION OF GENERATOR
SIZE OF GENERATOR(S) FUEL SOURCE - GAS - 🗆 - DIESEL - 🗀 - PROPANE - 🔾

TENTS/CANOPIES:											
Will Tents/Canopies or other membrane structures be erected at event? Yes № No Will a bounce house or other air supported structures be erected at event? Yes № No											
Please list size(s) of Tents/Canopies or other temporary structures erected. [6 x 10]											
ANCHORING INTO PAVEMENT IS PROHIBITED!											
If anchoring in grass, soil areas please contact the NYS Dig Safe # at: 1-800-9)62-7962 or	811									
STREET CLOSURE(S):											
Will street(s) need to be closed for the event? Yes No Reason:	DE NOTICE										
List Street(s) and Cross Street(s) that will be affected:	_										
Street to be closed Cross Streets											
Street to be closed Cross Streets											
Street to be closed Cross Streets											
Street to be closed Cross Streets											
Will street barricades be requested from the City? Yes ☐ No 幫 How Many?	·										
Will traffic cones be requested from the City? Yes No How Many (Drop off locations of requested items must be identified on the site drawing)	·										
BANNERS / SIGNS OR OTHER DECORATIONS ARE NOT TO BE ATTACHED TO STREET BARRICADES. TRAFFIC CONES, LIGHT POLES, OR ANY OTHER CITY PROPE	RIY										
Are there any other city materials or personnel requested for the event? Identify below:	(there may be a	addition	al costs)								
POLICE											
Will City Police Officers be requested for the event? Yes ☐ No 🖾											
FINAL DETERMINATION FOR NUMBER OF POLICE OFFICER											

PLEASE NOTE:

- Be as specific as possible in the description so we have the best understanding of your event. Also, be clear
 as to what you would like provided by the City. Applications should be submitted at least 30 days in
 advance.
- 2. Fire hydrants, Cross Streets/Alleys and Store Fronts **Shall Not Be Blocked** by any Vehicle or Concession at any time.
- 3. An Emergency Vehicle Safety Lane Must be Maintained at All times at All Locations
- 4. Fuel Containers Must be of an Approved type and Must be Properly Secured
- 5. Deep Fryers Must Be Approved. Commercial Types Require a Type "K" Portable Fire Extinguisher
- 6. All Food Vendors Must Have a Type ABC Fire Extinguisher. All Fire Extinguishers Must Be Inspected Within The Last Year. A Valid Health Department Permit Must Be Displayed.
- 7. No grease or substance of any kind may be discharged upon the streets, sidewalks, or into the storm drains and/or sewers
- 8. City Sign Ordinances Shall Be Complied With At All Times And In All Regards
- 9. No paint or other markings may be placed on the street surface.
- Any overtime and/or material costs in excess of \$500, as determined by City Departments, must be paid by the event sponsor or other party
- 11. The application fee is due at time of submission of the application and is non-refundable.
- 12. If approved, a Certificate of Liability Insurance of at least \$1,000,000 naming the City of Batavia as an additional insured for at least the day(s) of the event must be submitted to the City Clerk prior to the event date.

faciq Brewing col	Hold Harmless Agreement
the organize	r/sponsor, shall indemnify, hold harmless, assume liability for and defend
not limited to, attorney's fees, court costs, agents may pay or become obligated to pa any claim founded thereon, arising or alle	and agents from any and all damages, costs and expenses including but and all other sums which the City of Batavia its employees, officers and by on account of any and every demand, claim or assertion of liability, or ged to have arisen out of the activities described in this special event
	it issued by the City of Batavia or by any act or omission of the onsor), its/members, agents, employees, volunteers, officers, or directors
	lication and sanctioned by the issuance of a special event permit.
7-27-18	Eli/Fish Brewing
Date:	Name of Event Sponsor
	- Menlying member
	Authorized Signature, Tale DNATHAN MAGEIC
	Name - Printed or Typed
The rules and information contained within	this application have been read and will be adhered to.
7-27-18	
Oste	Signature of Applicant
Please forward this application to:	City Clerk's Office
• •	Attention: Events Applications Department
	One Batavia City Centre
	Ratavia New York 14020

SPECIAL EVENT APPLICATION DEPARTMENT APPROVAL SUMMARY

FOR OFFICIAL CITY USE ONLY

Danadmant Becommandations		NL USE ONLY	
Department Recommendations:	Approved	Denied Additional C	osts Department Initials
DPW (if applicable)			
FireDept. (if applicable).		Difference	
Police Dept (napplicable)			
M rec	ommendation is denied	l, please attach a brief explana	don a series and a
The state of the s	OFFICIA	IL USE ONLY	
Dote Recoved		Council Ac	tion: (Approved / Orsapproved)
Date of Council Action		insura:	ice Received (if applicable)
The Control of the Co	A STATE OF THE STA	STREET, CONTROL OF STREET, CO. C. SANGER ST. TARACTOR	the second state of the se
Event Application #:			
Event Application #.			
Department:			
	List Department Name Here		
Department Approval			
	YES	NO	
DPW			
Fire			
Police			
Department Cost Estimate:			
w oppiecous			
Estimate based on: Fillable table - type	HOUR PRESENTED BOOK		
Committee Committee on the Assistant Committee Car SEST MAND			A CONTROL OF THE PROPERTY OF T
If Application not Approved, Pr	ovide Reason Here:	Filable table – type your response here	Charles Sherry Towns & Control of the Control of th
Submitted By:			
	Na	ne / Tale	Date Submitted



DETE: 01/10/2018
DEMERAL RECEIPTS
RECEIPT TYPE: 1590
AHDEMAT H 240908
AMOUNT FAIL

25,00

THE 455.28

Official Use Only:

2018 -27 Event Application #

Event Application Fee - \$25.00 (non-refundable) (A separate permit must be issued for each item requested)

			/-	-71 .	1 , 50 (1			
Event Sponsor	sche	<u>x</u>	_/_	(Ne	= Yugares Shop			
Type of Event								
Date of Event September 9, 2018 - Sunday								
Time of Event (don't include set up time here – ju	st actual	i eve	ent tim	e) <u> </u>	2:30-3:00 pw			
Location of Event 7.3 Lian Ct	<u>510en</u>	12	K	NGY	ct to the chop			
Details of Event (be as specific as possible!)	chic	Хe	2	bV	na takeout. This			
is a tundral ser for	<u> </u>	<u>U</u>	126	<u>َ ل</u> ا	Tenebruso as he is			
Fighting Lung cance	٧							
Contact Information: Primary contact:		5	Secon	dary	contact:			
Name Christine Crocker Phone #	<u></u>	-	_\	<u> </u>	Intoretti 297-0017			
* Events will be posted on the City's website cale can visit for more information or registration, if ap								
Will there be alcohol at your event? Yes	۵		No	虹	If yes, complete the following:			
Type of alcoholic beverage to be served:	Liquor				Wine Beer			
Will you be providing alcohol to your group?	Yes		No	4				
Will you be selling alcohol to your group?	Yes		No	Ġ	Insurance certificate WILL BE required with Liquor Legal.			
Will people be allowed to bring alcohol to the event?	Yes	0	No	瓯				
Who will be applying to the NYS Liquor Authority	for the	pern	nit to s	sell?				

It is the Applicant's responsibility to police the area during the gathering to make sure all Alcohol Beverage Control rules are followed. Also, after the event Applicant is responsible to dispose of all empty bottles and debris.

^{**} If you are contracting with a group to sell alcohol during your event on city property, separate insurance is required from them with Liquor Legal in addition to your insurance. **

EVENT INFORMAT	ION (n	equire	ed):														
Set up date: 500	49.	20	18				Set	up time	: <u>`</u>								_
Tear down date:	ept.	7.2	90)		•	Tear	down	time: _	3	:30	pn					
PLEASE LIST ALL	DATES	S / TIN	IES A	ND CI	ROW	D INF	ORM	IOITA	N BEL	.OW:							
Date:		;	Start ti	ime: _		. .					End	time: _					_
Estimated crowd size	e:			-	#	of Ve	endors	s/Disp	lays								
WILL THE EVENT I	NCLUI	DE:															
Parade: Run or Walk: Music: Street Closure(s):	Yes Yes Yes Yes	0000	No No No	电电电池	(MA (SIT (MA BAI	P OF E DR P OF RRICA	DESII AWING CLOS (DES)	RED R G OF S SED ST	OUTE : STAGE REET:	MUST OR D. S AND	BE AT BE AT J LOCA DROP	TACHE ATION A LOCAT	D) ATTA(TION (
Other: Fireworks or Hazard	Yes dous M	☐ lateria	No ls?	Yes	(MA	No.					<i>BE AT</i> useme		•	Yes	۵	No	ø
													()			
Name of Con	npany Prov	iding Aboi	re:	-			•	Company	Contact/Re	epresenta	trva			PI	one #		_
 	Ac	oress, Str	bef								Cdy				Zip Co	de	_
Music: Live	e Grou	р	R	ecord	ed/D.	J (
Name of Con	noany Prov	rtina Abai	<u> </u>				,	Company	Contact/Re	one senta	איל		()	one #		_
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•		,			J		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
	Ad	chess Str	eet				-			- (Cay		-	-	Zıp Co	te .	_
CITY SERVICES SU	PPOR	T:					_						•				
City Code 66-15	, D-2		olicant								ng prod f the Ci						
FOR EVENTS IN ADDITIONAL GA																	_
ELECTRIC:							<u>-</u>			<u></u>							_
Will electric be need	led for	the ev	rent?			Yes		No									
What will you be pro	viding	electr	ic to?	_									_				
Will generators be u	sed?		Yes	0	No	<u>U</u>											
If yes, INC	LUDE	SITE	DRAW	/ING I	NDIC	ATIN	IG PL	ACEN	IENT/I	LOCA	TION	OF GE	NER/	ATOR			
SIZE OF GE	NERA'	ror(s	5)			FL	JEL S	OURC	E - G.	AS - [O - DIE	SEL -	. F	ROPA	NE -	. 🗆	

TENTS/CANOPIES:									
Will Tents/Canopies or other membrane structures be erected at event? Yes Will No									
Please list size(s) of Tents/Canopies or other temporary structures erected. Suall canopy over 8 foot table in case of vain.									
ANCHORING INTO PAVEMENT IS PROHIBITED!									
If anchoring in grass, soil areas please contact the NYS Dig Safe # at: 1-800-962-7	'962 or 81	1							
STREET CLOSURE(S):									
ANY/EVENT/REQUIRING A STREET; CLOSURE REQUIRES:90 DAY, ADVANCE:NO	DTICE								
Will street(s) need to be closed for the event? Yes No Reason:									
Link Oder all all Company of the August Annual Company of the August Annua	 								
List Street(s) and Cross Street(s) that will be affected:									
Street to be closed Cross Streets &									
Street to be closed Cross Streets									
Street to be closed Cross Streets									
Street to be closed Cross Streets									
Will street barricades be requested from the City? Yes ☐ No ☐ How Many?									
Will traffic cones be requested from the City? Yes No How Many? (Drop off locations of requested items must be identified on the site drawing)									
BANNERS / SIGNS OR OTHER DECORATIONS ARE NOT TO BE ATTACHED TO STREET BARRICADES, TRAFFIC CONES, LIGHT POLES, OR ANY OTHER CITY PROPERTY									
Are there any other city materials or personnel requested for the event? Identify below: (there	may be add	litional e	costs)						
POLICE									
Will City Police Officers be requested for the event? Yes No									
FINAL DETERMINATION FOR NUMBER OF POLICE OFFICERS and UTILIZATION WILL BE AT THE DISCRETION OF THE CITY.									

PLEASE NOTE:

- Be as specific as possible in the description so we have the best understanding of your event. Also, be clear
 as to what you would like provided by the City. Applications should be submitted at least 30 days in
 advance.
- Fire hydrants, Cross Streets/Alleys and Store Fronts <u>Shall Not Be Blocked</u> by any Vehicle or Concession at any time.
- 3. An Emergency Vehicle Safety Lane Must be Maintained at All times at All Locations
- 4. Fuel Containers Must be of an Approved type and Must be Properly Secured
- 5. Deep Fryers Must Be Approved. Commercial Types Require a Type "K" Portable Fire Extinguisher
- 6. All Food Vendors Must Have a Type ABC Fire Extinguisher. All Fire Extinguishers Must Be Inspected Within The Last Year. A Valid Health Department Permit Must Be Displayed.
- No grease or substance of any kind may be discharged upon the streets, sidewalks, or into the storm drains and/or sewers
- 8. City Sign Ordinances Shall Be Complied With At All Times And In All Regards
- 9. No paint or other markings may be placed on the street surface.
- 10. Any overtime and/or material costs in excess of \$500, as determined by City Departments, must be paid by the event sponsor or other party
- The application fee is due at time of submission of the application and is non-refundable.
- 12. If approved, a Certificate of Liability Insurance of at least \$1,000,000 naming the City of Batavia as an additional insured for at least the day(s) of the event must be submitted to the City Clerk prior to the event date.

	-lold Harmless Agreement					
not limited to, attorney's fees, court costs, ar agents may pay or become obligated to pay any claim founded thereon, arising or allega application and sanctioned by the permit was a company (Organizer/Spor	sponsor, shall indemnify, hold harmless, assume liability for and defend and agents from any and all damages, costs and expenses including but all other sums which the City of Batavia its employees, officers and on account of any and every demand, claim or assertion of liability, or ed to have arisen out of the activities described in this special event issued by the City of Batavia or by any act or omission of the nsor), its members, agents, employees, volunteers, officers, or directors cation and sanctioned by the issuance of a special event permit.					
1/21/10 Chrotine Concles/The Yngober						
· · · · · ·	Authorized Signature, Table					
	Charles of Langue 1888 Charles of Langue 1888					
The rules and information contained within th	his application have been read and will be adhered to. Signature of Applicant					
Please forward this application to:	City Clerk's Office Attention: Events Applications Department One Batavia City Centre Batavia. New York 14020					

SPECIAL EVENT APPLICATION DEPARTMENT APPROVAL SUMMARY

FOR OFFICIAL CITY USE ONLY

		<u>ICIAL USE ONL</u>	<u>. Y</u>	į
Department Recommendations:				
DDIA (Z. a. a. Francis)	Approved	Denied	Additional Costs	Department Initials
DPW (if applicable)				
Fire Dept. (if applicable)				
Police Dept. (if applicable)				
If reco	ommendation is de	nied, please atta	ch a brief explanation	
	055	ICIAL LISE ON		
	<u>OFF</u>	<u>ICIAL USE ONL</u>	<u>. r</u>	ĺ
Date Received			Council Action: (Approved / Disapproved)
Date of Council Action:			Insurance Re	ceived (if appicable)
•				
Event Application #:				
Department:	List Department Name	Here		
Department Approval				
	YES		0	
DPW			_	
Fire				
Police		C	3	
Department Cost Estimate:			- 	
Estimate based on: Fuable table - type ;	your response here			
	respected title			
If Application not Approved, Pro	ovide Reseas Ha	FO' Ediable table to a	our menanci hom	
n Application not Applicated, Fit	viue iteasuii Ne	ве. гначе (аше — туре)	your response nere	
Submitted By:				
		Name / Title		Date Submitted



Official Use Only:

2018-25 Event Application 8

Event Application Fee - \$25.00 (non-refundable) (A separate permit must be issued for each item requested)

Event Sponsor Batavia	201	LY	<u>C</u>	<u>lu</u>	b			
Type of Event 5K RUN/	Wa	<u> </u>				• · · · · · · · · · · · · · · · · · · ·		
Date of Event October 27th 2018 Sat.								
Time of Event (don't include set up time her	e – ju	st actual	l eve	nt tim	e)	6 PM		
Location of Event 65 Harves	rer	Ave	<u>-</u>	~ \$	574	rt / finish location		
Details of Event (be as specific as possible)_1	rick	0(To	OT	5k run through all		
3 cemeteries ON Harvis	740	Aye.	<u> </u>	Ch	44i7	TY EVENT TO TAISE MONEY		
for Butavia Rotory. INC.	lude	5 A	Co	25TU	me	CONTYST AND BUT Supplied		
Contact Information: Primary contact:	fis.	ለ .				contact:		
Name Douglas Forsyth (Race Direc	201		La	.UY	ie Mastin (Club President		
Phone # 716-343-0125 (E-mail address AfarsyTh 143@ G	Mail	.com	-	630 Pavi		Sparks Rd NY 14525		
* Events will be posted on the City's website can visit for more information or registration,								
Will there be alcohol at your event?	Yes	y		No		If yes, complete the following:		
Type of alcoholic beverage to be served:		Liquor				Wine 🔲 Beer 🔀		
Will you be providing alcohol to your group	?	Yes	Ø	No				
Will you be selling alcohol to your group?		Yes	0	No	5	Insurance certificate <u>WILL BE</u> required with Liquor Legal.		
Will people be allowed to bring alcohol to the event?		Yes		No				
Who will be applying to the NYS Liquor Aut	thority	for the	pern	nit to s	sell?	Douglas Forsyth		
It is the Applicant's responsibility to police the rules are followed. Also, after the event Application		_	_		-			

** If you are contracting with a group to sell alcohol during your event on city property, separate insurance is required from them with Liquor Legal in addition to your insurance. **

EVENT INFORMATI	ION (required) :					
Set up date:	27-20	18	\$	Set up time:	5-PM		-
Tear down date: 10	-27-20	18	1	ear down time	e: 8- PM		
PLEASE LIST ALL I	DATES / TIME	S AND CR	ROWD INFO	RMATION B	BELOW:		
Date: 10 -27-7	2018 St	art time: _	6-0	M	_ End time	8-PM	-
Estimated crowd size	e: <u>150</u>		# of Vend	lors/Display:	NOWE SO	FAY	
WILL THE EVENT IF	NCLUDE:						
Parade: Run or Walk: Music: Street Closure(s): Other:	Yes	No Dar No Dar No Dar No Dar No Dar	(MAP OF DI (SITE DRAV (MAP OF CI BARRICADI	ESIRED ROU VING OF STA LOSED STRE ES)	TE MUST BE ATTACH TE MUST BE ATTACH IGE OR DJ LOCATION ETS AND DROP LOC TE MUST BE ATTACH	HED) NATTACHED) ATION OF	
Fireworks or Hazard	dous Materials	? Yes	□ No [Camiv	val or Amusement Ri	des? Yes 🔲 No	
Name of Con	npany Providing Above			Company Cont	act/Representative	() Phane #	•
	Address, Stree				City	Zip Codo	_
Music: Live	e Group	Recorde	ed/DJ		Cay	()	
Name of Com	pany Providing Above			Company Conta	act/Representative	Phone #	
	Address, Stree				Cdy	žíp Cođe	•
CITY SERVICES SU	PPORT:			<u></u>			•
City Code 66-15,		icant to pay			e permitting process, al costs of the City as		
						AGE CANS ON SITE. EVENT SPONSOR.	
ELECTRIC:							
Will electric be need	led for the eve	ent?	Yes	Ma No □	1		
What will you be pro	oviding electric	to? _	ights	- COMP	wter - prin	ITE (_
Will generators be u	sed?	Yes 💯	No 🔲				_
If yes, INC	LUDE SITE D	RAWING I	NDICATING	PLACEMEN	NT/LOCATION OF G	ENERATOR	
SIZE OF GE	NERATOR(S)	2000	₩_ FUE	L SOURCE	- GAS - 🕼 - DIESEL	🗆 - PROPANE - 🗓	

TENTS/CANOPIES:			
Will Tents/Canopies or other membra Will a bounce house or other air supp			Yes ☑ No ☐ Yes ☐ No ☑
Please list size(s) of Tents/Canopies			
10 by 10 EZ UP TEN	uts. To court	registration 1	abios And
ANCHO	ORING INTO PAVEMENT	IS PROHIBITED!	
If anchoring in grass, soil ar	reas please contact the NYS	Dig Safe # at: 1-800-962	-7962 or 811
STREET CLOSURE(S):	- 1.50 70H2 40H0 (
ANY EVENT REQUIRIN	IG A STREET CLOSURE REQU	JIRES 90 DAY ADVANCE	NOTICE
Will street(s) need to be closed for the	,,,	Reason: for	The satir of
the runners. If the	Onlin	be closed the	v welequist a
List Street(s) and Cross Street(s) that	at will be affected: 65 Herris Fa	Ave & H	owerd st
Howard ST	All	&	
Webster XVE	All	Cross Streets	
Buell Street to be closed	AI	Cross Streets	
Street to be closed		Cross Streets	<u></u>
Will street barricades be requested from	om the City? Yes 🥦 No	o 🔲 How Many?	5
Will traffic cones be requested from th	ne City? Yes 🔀 Notions of requested items must be idea		15-25
	/ SIGNS OR OTHER DECORATIONS ARE CADES, TRAFFIC CONES, LIGHT POLES.		
Are there any other city materials or p	personnel requested for the e	vent? Identify below: (the	re may be additional costs)
NOT AT ALS TIM	nc		
POLICE			
Will City Police Officers be requested	for the event? Yes N	10 🗖	
	RMINATION FOR NUMBER (

PLEASE NOTE:

- Be as specific as possible in the description so we have the best understanding of your event. Also, be clear
 as to what you would like provided by the City. Applications should be submitted at least 30 days in
 advance.
- 2. Fire hydrants, Cross Streets/Alleys and Store Fronts Shall Not Be Blocked by any Vehicle or Concession at any time.
- 3. An Emergency Vehicle Safety Lane Must be Maintained at All times at All Locations
- 4. Fuel Containers Must be of an Approved type and Must be Properly Secured
- 5. Deep Fryers Must Be Approved. Commercial Types Require a Type "K" Portable Fire Extinguisher
- 6. All Food Vendors Must Have a Type ABC Fire Extinguisher. All Fire Extinguishers Must Be Inspected Within The Last Year. A Valid Health Department Permit Must Be Displayed.
- No grease or substance of any kind may be discharged upon the streets, sidewalks, or into the storm drains and/or sewers
- 8. City Sign Ordinances Shall Be Complied With At All Times And In All Regards
- 9. No paint or other markings may be placed on the street surface.
- 10. Any overtime and/or material costs in excess of \$500, as determined by City Departments, must be paid by the event sponsor or other party
- 11. The application fee is due at time of submission of the application and is non-refundable.
- 12. If approved, a Certificate of Liability Insurance of at least \$1,000,000 naming the City of Batavia as an additional insured for at least the day(s) of the event must be submitted to the City Clerk prior to the event date.

Hold Harmless Agreement

Batevia Roxy Clob, the organizer/sponsor, shall indemnify, hold harmless, assume liability for and defend the City of Batavia, its employees, officers and agents from any and all damages, costs and expenses including but not limited to, attorney's fees, court costs, and all other sums which the City of Batavia its employees, officers and agents may pay or become obligated to pay on account of any and every demand, claim or assertion of liability, or any claim founded thereon, arising or alleged to have arisen out of the activities described in this special event application and sanctioned by the permit issued by the City of Batavia or by any act or omission of the Batavia Corp. Clob (Organizer/Sponsor), its members, agents, employees, volunteers, officers, or directors in relation to activities described in this application and sanctioned by the issuance of a special event permit.

BATAVIA ROTATY Club

Name of Event Sponsor

Race Director

Douglas Forsyth

Name - Printed or Typed

The rules and information contained within this application have been read and will be adhered to.

6-2-2018

Please forward this application to:

City Clerk's Office

Attention: Events Applications Department

One Batavia City Centre Batavia, New York 14020

To whom,

With regards to road blockage, the need to have police presence is fairly important. More so then having the roads closed. The start of the race will be at 6 pm and sunset is 6:12 that day. To add to part of the attraction we planned it that way. We have kept the race to back roads on purpose to avoid as much traffic as possible. When this race was run in the past the highest traffic risk was on Harvester ave between the Batavia cemetery entrance and Howard St. I would like to cone off 10 feet of Harvester Ave for runners to make it safely through that area. Other potential hots spots would be the intersections of Florence Ave and Howard St, Edwards St. and Buell St. and the southern exit of the St. Joes Cemetery and Buell St. In these spots I would like traffic to be blocked or at least some have volunteers flagging traffic to warn them of the runners. I have attached a map with the proposed traffic safety requests. Thank you so much for your considerations. Please call or email any time with questions.

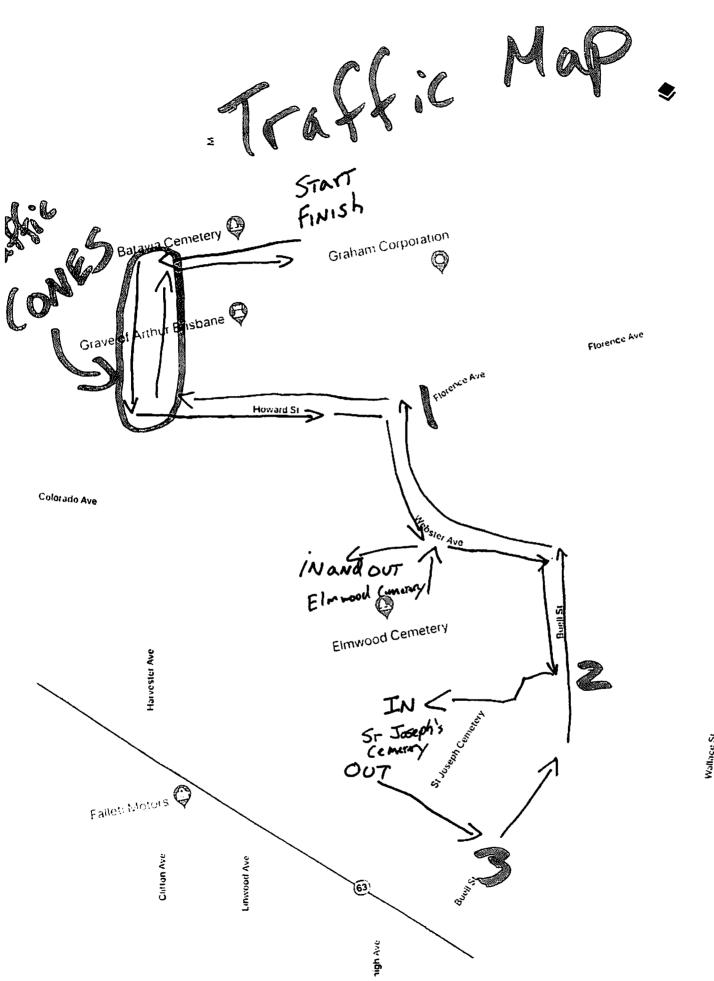
Douglas Forsyth

Dforsyth143@gmail.com

716-343-0125-cell

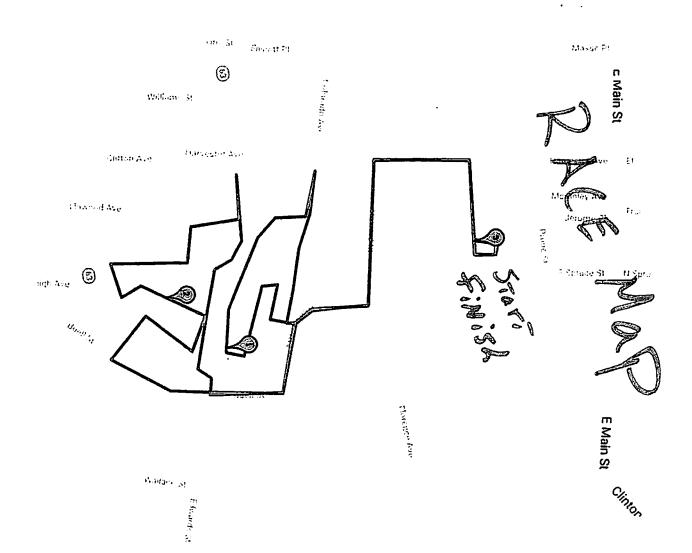
Summary of Requests:

- 1. Cone off Harvester Ave between the Batavia Cemetery and Howard St.
 - a. This allows runners to safely be on the road without closing the road
- 2. Block or warn traffic at 3 locations.
 - a. Florence Ave and Howard St.
 - b. Edwards St and Buell St.
 - c. Buell St and St.Joseph's Cemetery entrance.



Edward:







Official Use Only:

2018 - 30

Event Application Fee - \$25.00 (non-refundable)

(A separate permit must be issued for each item requested)//27/2013

TIME: 14:13:24

Event Sponsor Batavia Brewi	19	CO	mρ	2N;	/ / Elifish Browing CO.
Type of Event OK-tober-fest			•		RECEIPT # 240828
Date of Event 9/28/p - Fnd	áy				AMUUNI FALU 23,20
Time of Event (don't include set up time here – ju	st actua	al eve	nt tim	e) [a	-11 Event 6-830-Rood 6-9 Mu.
Location of Event Jack Son Square					
Details of Event (be as specific as possible!)					
live Music, games,	de	cio	KS	+	food
Contact Information: Primary contact:	<u> </u>		Secon	idary	contact:
Name Shanon May le Phone # 585-343-0008 E-mail address Shanon@ FliFSh Breu	<u></u>		ma	.#	Czray
* Events will be posted on the City's website cale can visit for more information or registration, if ap					
Will there be alcohol at your event? Yes	M		No		If yes, complete the following:
Type of alcoholic beverage to be served:	Liquo	r 🗆			Wine 🔲 Beer 🙇
Will you be providing alcohol to your group?	Yes	×	No		
Will you be selling alcohol to your group?	Yes	Ø	No		Insurance certificate WILL BE required with Liquor Legal.
Will people be allowed to bring alcohol to the event?	Yes		No	R	•
Who will be applying to the NYS Liquor Authority	for the	e pern	nit to	sell?	108

** If you are contracting with a group to sell alcohol during your event on city property, separate insurance is required from them with Liquor Legal in addition to your insurance. **

It is the Applicant's responsibility to police the area during the gathering to make sure all Alcohol Beverage Control rules are followed. Also, after the event Applicant is responsible to dispose of all empty bottles and debris.

EVENT INFORMATI	ON (require	d):							
Set up date:	8/8			Set u	p time:	NOON			
Tear down date: 9/6	19/18			Tear	down time: _	11:00	Am		
PLEASE LIST ALL	DATES / TIN	IES AND	CROWD	INFORM	ATION BEL	.ow:			
Date: 9/28/18	•	Start time	: <u>6:0</u>	so pm		End	time: <u> </u>	:00 p	im
Estimated crowd size	: <u>200</u> 5		# 0	f Vendors	/Displays _	<u>ø</u> _			
WILL THE EVENT II	NCLUDE:								
Parade: Run or Walk: Music: Street Closure(s): Other:	Yes	No C No C No C	(MAP (SITE (MAP BARF	OF DESIR DRAWING OF CLOS RICADES)	RED ROUTE G OF STAGE ED STREET	MUST BE AT MUST BE AT FOR DJ LOC TS AND DROF MUST BE AT	TACHED) ATION ATTA LOCATION	•	
Fireworks or Hazard	dous Materia	ls? Y	es 🔲	No Z	Camival	or Amuseme	ent Rides?	Yes [No [_
Name of Con	pany Providing Abov	ve.			ompany Contact/R	tepresentative	() Phon	c #
	•								
Music: Live	Address, Str e Group 🖄 2 🔏	•	orded/DJ	٥		Cay		Z.	ip Code
Name of Con	ipany Providing Abov	/e		c	ompany Contact/R	eprosentative		Phone	9#
	Address, Str	Bel				City		Z _q	p Code
CITY SERVICES SU	PPORT:							· v···	
City Code 66-15,		olicant to				ermitting pro osts of the C			he
FOR EVENTS IN ADDITIONAL GA	CITY PARKS RBAGE MU	S, GARBA ST BE BA	AGE PICK AGGED A	-UP WILL ND REMO	BE MADE	ONLY TO G	ARBAGE (S BY EVEN	CANS ON NT SPON	SITE. SOR.
ELECTRIC:									
Will electric be need	led for the ev	vent?	Y	es 🕱	No 🗆				
What will you be pro	viding electr	ic to?	Sou	nd,	light	<u>S</u>			
Will generators be u	sed?	Yes 🗆	No \$	4					
if yes, INC	LUDE SITE	DRAWIN	G INDICA	TING PL	ACEMENT	LOCATION	OF GENER	RATOR	
SIZE OF GE	NERATOR(S	5)		_ FUEL S	OURCE - G	SAS - 🗆 - DI	ESEL - 🛘 -	PROPAN	1E - 🗆

TENTS/CANOPIES:										
-	Will Tents/Canopies or other membrane structures be erected at event? Yes X No C Will a bounce house or other air supported structures be erected at event? Yes No X									
Please list size(s) of Tents/Canopies or other temporary st	ructures erected.									
ANCHORING INTO PAVE	MENT IS PROHIBITED!									
If anchoring in grass, soil areas please contact th	e NYS Dig Safe # at: 1-800-96	i2-7962 or 811								
STREET CLOSURE(S):			-11							
ANY EVENT REQUIRING A STREET CLOSUR	RE REQUIRES 90 DAY ADVANCE	NOTICE								
Will street(s) need to be closed for the event? Yes	No 🕍 Reason:									
List Street(s) and Cross Street(s) that will be affected:	&									
Street to be closed	Cross Streets									
Sireet to be closed	Cross Streets									
Sireer to be closed	Cross Streets									
Street to be closed	Cross Streets									
Will street barricades be requested from the City? Yes	No Many?									
Will traffic cones be requested from the City? Yes	No Many? ust be identified on the site drawing)									
BANNERS / SIGNS OR OTHER DECORATION STREET BARRICADES, TRAFFIC CONES, LIGH	TIONS ARE NOT TO BE ATTACHED HT POLES: OR ANY OTHER CITY PROPERT	Y								
Are there any other city materials or personnel requested for	or the event? Identify below: (t	here may be addition	al costs)							
NIA										
POLICE										
Will City Police Officers be requested for the event? Yes	□ No ఏ									
FINAL DETERMINATION FOR NU and UTILIZATION WILL BE AT TH										

PLEASE NOTE:

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 as to what you would like provided by the City. Applications should be submitted at least 30 days in
 advance.
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- 5. Deep Fryers Must Be Approved. Commercial Types Require a Type "K" Portable Fire Extinguisher
- 6. All Food Vendors Must Have a Type ABC Fire Extinguisher. All Fire Extinguishers Must Be Inspected Within The Last Year. A Valid Health Department Permit Must Be Displayed.
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- 9. No paint or other markings may be placed on the street surface.
- Any overtime and/or material costs in excess of \$500, as determined by City Departments, must be paid by the event sponsor or other party
- 11. The application fee is due at time of submission of the application and is non-refundable.
- 12. If approved, a Certificate of Liability Insurance of at least \$1,000,000 naming the City of Batavia as an additional insured for at least the day(s) of the event must be submitted to the City Clerk prior to the event date.

Botavia Brewing co/	Hold Harmless Agreement er/sponsor, shall indemnify, hold harmless, assume liability for and defend
not limited to, attorney's fees, court costs agents may pay or become obligated to pany claim founded thereon, arising or all application and sanctioned by the periodic form of the court of the periodic form.	er/sponsor, shall indemnify, hold harmless, assume liability for and defend is and agents from any and all damages, costs and expenses including but it, and all other sums which the City of Batavia its employees, officers and pay on account of any and every demand, claim or assertion of liability, or leged to have arisen out of the activities described in this special event mit issued by the City of Batavia or by any act or omission of the sponsor), its members, agents, employees, volunteers, officers, or directors oplication and sanctioned by the issuance of a special event permit.
7/27/18	Eli-Fish Browing Co
/ Date.	Shannon Moute Frent Coordinator
	Shanon Moute Name = Printed or Typed
The rules and information contained within	n this application have been read and will be adhered to.
7/ <u>37/18</u>	Staren Rate
Please forward this application to:	City Clerk's Office Attention: Events Applications Department
	One Batavia City Centre
	Batavia, New York 14020

SPECIAL EVENT APPLICATION DEPARTMENT APPROVAL SUMMARY

FOR OFFICIAL CITY USE ONLY

		IAEUSE ONLY	
Department Recomme	ndations:	Denied Additional C	osts Department Initials
DPW (if applicable)			
Fire Dept. (if applicable			
Police Dept. (if applicat			
		57	4
	If recommendation is deni	ed, please attach a brief explana	tion
	OFFIC	IAL USE ONLY	
Dame -	Received	Council Ac	tion : (Approved / Disapproved)
Dete of C	ouncil Action	Input	nco Received (if applicable)
Event Application #:			
D			
Department:	List Department Name He	re .	
Donardwort Approval			
Department Approval	YES	NO	
DPW			
Fire	ā	ā .	
Police			
	•		
Department Cost Estin	nate:		
.,,			
Estimate based on: F#lab	le table – lypo your response hare		
		通過 互紅外形分。2002年 2月10日	
If Application not Appre	oved, Provide Reason Here	: Filable tablo – lyne your menonen nom:	
The state of the s		And the second s	The state of the s
Submitted By:	•		
oumilieu by:		Name / Tálo	Date Submitted



Official Use Only:

F1 - 2018

PEQUEST FROM BULLDAWGS
TO TEP DRESS ARCAS OF
THE FIELD TO LEVEL
TO PILAVENUT TRIPPING.
THE WILL DO WORK NO
COST TO CITY.

Event Application Fee - \$25.00 (non-refundable) (A separate permit must be issued for each item requested)

Event Sponsor_	BAT	AVZA	Buccon	<u> کی د</u>	m	TH	Tax	MBA	يد ا	ं टास्क्र	<u> </u>	
Type of Event _	Yanty	FUTBA		HENSPE		5 /~	-			_		
Date of Event _	8/18	1/25	9/8	%	5_	ļ¢	1/6					
Time of Event (d	on't includ	e set up tir	ne here – ju	st actual	ever	nt time	e)	91	<u>m -</u>	GPM		
Location of Ever	nt <u>LZ</u>	كامن	Park	_								-
Details of Event	(be as spe	cific as po	ssible!)	yanth		mote	<u> </u>	300	16 <u>5</u>			
						_	<i>,</i>					
Contact Informa Primary contact:	tion:				<u>s</u>	econ	dary	contact	<u>:</u>			
Name John	REZ	GL હ				K×~	Ju	FOR.	153			
Phone # 716	- 228-	5787			-				13-3			
E-mail address 🛓		<u>walli</u> GMAZI		BALL	-	KX	<u> </u>	<u> </u>	<u> </u>	GMIZE	Co.	<u>~1</u>
* Events will be po can visit for more									would li	ke to inclu	de that	people
Will there be alc	ohol at you	ır event?	Yes			No	S ¥		If yes,	complete	the follo	owing:
Type of alcoholic	c beverage	to be sen	ved:	Liquor				Wine		Beer		
Will you be prov	iding alcoh	ol to your	group?	Yes		No	8					
Will you be sellin	ng alcohol	to your gro	oup?	Yes		No	S		nce cer iquor L	tificate <u>WI</u> egal.	LL BE	required
Will people be a the event?	llowed to b	ring alcoh	oi to	Yes		No	S					
Who will be appl	lying to the	NYS Liqu	or Authority	y for the	perm	nit to s	sell?		-			
It is the Applicant	's responsi	bility to po	lice the area	a during (the g	atheri	ing to	make s	ure all A	Alcohol Be	verage	Control

rules are followed. Also, after the event Applicant is responsible to dispose of all empty bottles and debris.

** If you are contracting with a group to sell alcohol during your event on city property, separate insurance is required

** If you are contracting with a group to sell alcohol during your event on city property, separate insurance is required from them with Liquor Legal in addition to your insurance. **

Set up date: 🤽 🦎	15 %	1/15	10/6		Set up	time:	7:30 AM		
Tear down date:	vn date:		Tear d	own time:	7 PM				
PLEASE LIST ALL	DATES / TI	MES A	ND CF	ROWD IN	FORMA	TION BEL	ow:		
Date: 		Start t	ime: _	7:	30 M	۸	End time: _	7 RM	
Estimated crowd size	e: 150 Y	<u> </u>	_	# of V	endors/I	Displays	سالم		
WILL THE EVENT I	NCLUDE:								
Parade: Run or Walk: Music: Street Closure(s): Other:	Yes	No No No No		(MAP OF (SITE DE (MAP OF BARRIC	DESIRE RAWING CLOSE ADES)	ED ROUTE I OF STAGE D STREETS	MUST BE ATTACHE MUST BE ATTACHE OR DJ LOCATION A S AND DROP LOCAT MUST BE ATTACHE	D) ATTACHED) TION OF)
Fireworks or Hazar	dous Materia	als?	Yes	□ No	8	Carnival	or Amusement Ride	s? Yes	□ No
Nema of Con	neany Providing Ab	200			Con	mpany Contact/Re	prenagpiatus	()	hane #
Name or Co	audiny Proteining Au	W.			ÇG	npany comocone	гр востине Постине		rane "
Music: Live	Address S e Group		Record	ed/DJ			Cay		Zф Соне
Name of Con	npeny Providing Abi	buo:			Cor	npany Contact/Re	PRANA del Salaca		lique #
	and the second second				00.	TOTAL CONTROL OF			
	Address. S	treet					Cdy		Zur Corle
CITY SERVICES SU	PPORT:								
City Code 66-15	, D-2 ap						ermitting process, to osts of the City asso		
							ONLY TO GARBAC M PREMISES BY E		
ELECTRIC:					_				
Will electric be need	ded for the e	vent?		Yes	83	No 🗆			
What will you be pro	oviding elec	tric to?	s. 11 20	Score	BONRO	, ccw	cossem s	emo	
Will generators be t	used?	Yes		No 😭					
If ves. INC	LUDE SITE	DRAV	VING	INDICATI	NG PLA	CEMENT/	LOCATION OF GE	NERATOR	2
,,								_	-

TENTS/CANOPIES:										
Will Tents/Canopies or other membrane structures be erected at event? Yes No □ Will a bounce house or other air supported structures be erected at event? Yes No □ No □										
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Will street(s) need to be closed for the event? Yes ☐ No 1	Reason:									
List Street(s) and Cross Street(s) that will be affected:										
Stroot to be closed	& Cross Streets									
Street to be closed	& Cross Sueets									
Street to be closed	Cross Stroots									
Street to be closed	Cross Streets									
Will street barricades be requested from the City? Yes \(\Quad \) No	How Many?									
Will traffic cones be requested from the City? (Drop off locations of requested items must be identified to the control of th	————									
BANNERS / SIGNS OR OTHER DECORATIONS ARE A TO STREET BARRICADES, TRAFFIC CONES, LIGHT POLES, C										
Are there any other city materials or personnel requested for the ev	ent? Identify below: (there may be additional costs)									
POLICE										
Will City Police Officers be requested for the event? Yes N	o b									
FINAL DETERMINATION FOR NUMBER O										

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- 12. If approved, a Certificate of Liability Insurance of at least \$1,000,000 naming the City of Batavia as an additional insured for at least the day(s) of the event must be submitted to the City Clerk prior to the event date.

Hold Harmless Agreement

BATANTA BLUDINGS,, the organizer/sponsor, shall indemnify, hold harmless, assume liability for and defend the City of Batavia, its employees, officers and agents from any and all damages, costs and expenses including but not limited to, attorney's fees, court costs, and all other sums which the City of Batavia its employees, officers and agents may pay or become obligated to pay on account of any and every demand, claim or assertion of liability, or any claim founded thereon, arising or alleged to have arisen out of the activities described in this special event application and sanctioned by the permit issued by the City of Batavia or by any act or omission of the activities described in this application and sanctioned by the issuance of a special event permit.

7-N-18

BANNA BULDANGS

Name of Event Sponsor

Augusted Signature Tele

Toth REZGLE

Name - Previous of Typod

The rules and information contained within this application have been read and will be adhered to.

7-10-18 Date

Please forward this application to:

City Clerk's Office

Attention: Events Applications Department

One Batavia City Centre Batavia, New York 14020

SPECIAL EVENT APPLICATION DEPARTMENT APPROVAL SUMMARY

FOR OFFICIAL CITY USE ONLY

	OFF	ICIAL USE ONL	<u>.Y</u>	
Department Recommendations:				Consider and Indials
DPW (if applicable)	Approved	Denied □	Additional Costs	Department Initials
Fire Dept. (if applicable)				
Police Dept. (if applicable)				
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If reco	ommendation is de	enied, please atta	ch a brief explanation	
	<u>OFF</u>	ICIAL USE ONL	<u>.Y</u>	
Date Racewed			Council Action: (App	roved / Disapproved)
Date of Council Action			Insurance Recei	red (if applicable)
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Event Application #:				
Department:				
-	List Department Name	a l lera		
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Department Approval	YES	N	10	
DPW	٦		ž	
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Department Cost Estimate:				
If applicable			_	
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Submitted By:				
		Namo / Trie	-	Date Subretted

Client#: 44705

BATABULL

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

ACORD... 7/05/2018 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S). AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT NAME: PRODUCER ESP INSURANCE BROKERAGE LLC PHONE (A/C, No. Ext) FAX (AIC, No) 306 Main Street Worcester, MA 01608 INSURER(S) AFFORDING COVERAGE NAIC # 19380 INSURED INSURER B : AIG Insura BATAVIA BULLDAWGS FOOTBALL AND CHEER INSURER C **PO BOX 254** INSURER D : Batavia, NY 14021 INSURER E : INSURER F COVERAGES **CERTIFICATE NUMBER: REVISION NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS EXCLUSIONS AND CONDITIONS OF SUCH POLICIES LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS ADDL SUBR POLICY EFF POLICY EXP (MM/DD/YYYY) [(MM/DD/YYYY) TYPE OF INSURANCE POLICY NUMBER X COMMERCIAL GENERAL LIABILITY 187008660 03/16/2018 03/16/2019 EACH OCCURRENCE 51,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) 5 300,000 CLAIMS-MADE X OCCUR MED EXP (Any one person) PERSONAL & ADV NULRY \$1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER SENERAL AGGREGATE £1,000,000 PRO-JECT £1,000,000 PRODUCTS - COMPJOP AGG POLICY OTHER. COMBINED STYPLE JAMES AUTOMOBILE LIABILITY (£a accident) BCD:LY IN IURY (Per person) ANY AUTO ALL OWNED SCHEDULED AUTOS NON-OWNED BCDILY :N)URY (Per accident) PROPERTY DAMAGE HIRED AUTOS UMBRELLA LIAB EACH OCCURRENCE OCCUR **EXCESS LIAB** AGGREGATE CLAIMS-MADE RETENTIONS CBC WORKERS COMPENSATION FER OTH AND EMPLOYERS' LIABILITY

ANY PROPRIETORIPARTHERIEXECUTIVE

OFFICERMEMBER EXCLUDED? EIL EACH ACCIDENT S N / A (Mandatory in NH) EL DISEASE EN EMPLOYEE S if yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT 03/16/2018 03/16/2019 SEE REMARKS SRG0009133720 В A&H DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) THE CERTIFICATE HOLDER is added as an additional insured with respects to general liability coverage but only with respect to liability arising out of the operations of the named insureds league. Sexual Abuse / Molestation limits are as follows: \$1,000,000 EACH OCCURRENCE / \$1,000,000 AGGREGATE THIS POLICY DOES NOT EXCLUDE CONCUSSIONS (See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION
City of Batavia 1 Batavia City Centre Batavia, NY 14020	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE
i	Perce Harris Hamen

#69-2018

A RESOLUTION TO AMEND THE 2018-2019 POLICE DEPARTMENT BUDGET TO REFLECT THE RECEIPT OF A STOP-DWI GRANT AMENDMENT IN THE AMOUNT OF \$1,668.07 TO ADDRESS THE CRIMES OF DRIVING WHILE INTOXICATED AND/OR DRIVING WHILE ABILITY IMPAIRED BY DRUGS

Motion of Councilperson

WHEREAS, the City of Batavia Police Department has received additional grant funding in the amount of \$1,668.07 from THE GENESEE COUNTY STOP-DWI PROGRAM TO COMBAT IMPAIRED DRIVING BY FUNDING SPECIALIZED PATROL FUNCTIONS DURING SPECIFIC CRACKDOWN PERIODS; and

WHEREAS, to properly account for the expenditure of this money, a budget amendment needs to be made; and

NOW THEREFORE, BE IT RESOLVED, by the Council of the City of Batavia that the City Manager be and hereby is authorized to make the following budget amendment to the 2018-2019 budget to cover various initiatives to combat alcohol and drug related traffic offenses:

Effective July 9, 2018, amend the 2018-19 budget:

Increase expenditure accounts

001.3120.0101.1171 \$ 1.668.07

Increase revenue accounts

1.1.3389.1171 \$ 1,668.07

Seconded by Councilperson and on roll call

#70-2018

A RESOLUTION TO AUTHORIZE INTER-MUNICIPAL AGREEMENT BETWEEN THE TOWN OF BATAVIA AND THE CITY OF BATAVIA TO INSTALL ADDITIONAL ANTENNAS

Motion of Councilperson

WHEREAS, an agreement between the Town of Batavia, a municipal corporation of the State of New York, with offices located at Town Hall, 3833 West Main St., Rd., Batavia, New York, (hereinafter "Town"), and the City of Batavia, a municipal corporation of the State of New York, with offices located at City Hall, One Batavia City Centre, Batavia, New York; and

WHEREAS, the City owns a water tower ("Water Tower") situated on a parcel of land identified as tax map parcel no. 71.13-3-1.111 (the "Land") and leases certain areas on the Water Tower to owners of antenna equipment, and

WHEREAS, there is room on the Water Tower for the placement of additional antennas; and

WHEREAS, the Town is in the process of acquiring and installing a new water meter reading radio antenna system, and desires to utilize available space on the Water Tower to install antennas which are a part of the system; and

WHEREAS, this system will benefit the City as their master meters will be read by the system and available to the City at any reading frequency they desire.

NOW, THEREFORE, BE IT RESOLVED in consideration of the mutual covenants and agreements the City Council President of the City of Batavia is hereby authorize to sign the Inter-Municipal Agreement with the Town of Batavia so the City will be able to utilize the additional antennas without cost.

Seconded by Councilperson and on roll call