

BATAVIA CITY COUNCIL CONFERENCE MEETING

City Hall - Council Board Room One Batavia City Centre April 22, 2024 at 7:00 p.m.

AGENDA

| T | $-C_{\alpha}I$ | 1 +~ | Order |
|---|----------------|------|--------|
| 1 | 1 21 | | v maen |

- II. Invocation Councilmember Bialkowski
- III. Pledge of Allegiance
- IV. Public Comments
- V. Council Response to Public Comments

VI. Communications

- a. Brighton Securities Shred Day 5/24/24
- b. Memorial Day Parade 5/27/24
- c. GLOW OUT Pride Parade and Festival- 6/8/24
- d. Kiwanis Club 5K Road Race 7/4/24
- e. GO ART Music & Art Festival 7/6/24
- f. GLOW Corporate Cup 5K 8/1/24
- g. U Connect Care Overdose Awareness Day 8/28/24
- h. Alzheimer's Association Walk 9/14/24

VII. Council President Report

- Announcement of the next City Council Meeting to be held on Monday, May 13, 2024 at 7:00 p.m. at the City Hall Council Board Room, 2nd Floor, City Centre
- VIII. Memorial For Edward LaValley at Yard Waste Station Discussion
 - IX. Audit Committee Appointments
 - X. Board of Assessment Review (BAR) Appointments
- XI. Tree Bid Awards
- XII. Introduce SEQR Forms / Coordinated Review Process Cohocton/Walnut
- XIII. Eli Fish Access Agreement
- XIV. Restore NY Application to Apply

XV. Restore NY – Request to Hold Public Hearing***

XVI. K-9 Committed Fund Balance

XVII. Creek Park Committed Fund Balance

XVIII. Zoning Code Update Committed Fund Balance

XIX. Capital Project Closeouts

XX. Edward Byrne Memorial Justice Assistance Grant Award

XXI. Police Department – Surplus Equipment - Shotguns

XXII. Adjournment

^{***}Move to Tonight's Business Agenda





MEMORANDUM

To:

Rachael Tabelski, City Manager

From:

Heidi J. Parker, Clerk-Treasurer

Date:

4/16/24

Subject:

Event Summary

Below please find the summary for the events to be reviewed by City Council on April 22, 2024:

Brighton Securities Shred Day – 5/24/24

There were no costs from the departments.

Memorial Day Parade – 5/27/24

Estimated cost from the police department is \$1,028 and from Bureau of Maintenance is \$1,789.51. There were no costs from the other departments.

GLOW OUT Pride Parade and Festival – 6/8/24

Estimated cost from the police department is \$600 and from Bureau of Maintenance is \$430.24. There were no costs from the other departments.

Kiwanis Club 5K Road Race - 7/4/24

Estimated cost from the police department is \$600. There were no costs from the other departments.

GO ART Music & Art Festival – 7/6/24

Estimated cost from the Bureau of Maintenance is \$430.24. There were no costs from the other departments.

GLOW Corporate Cup – 8/1/24

Estimated cost from the police department is \$828. There were no costs from the other departments.

U Connect Care Overdose Awareness Day – 8/28/24

There were no costs from the departments.

Bureau of Clerk/Treasurer One Batavia City Centre Batavia, New York 14020 Phone: 585-345-6305 Fax: 585-343-9221

www.batavianewyork.com



Phone: 585-345-6305

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Fax: 585-343-9221



Walk to End Alzheimer's - 9/14/24

There were no costs from the departments.

**NOTE – Event sponsors are responsible for costs that may be incurred because of their event and have been made aware of estimated costs, if any. For final approval, all applicants must submit a certificate of liability insurance to the Clerk's Office prior to the event date.



Official Use Only:

Batavia. New York 14080

(585) 345-6300



CITY OF BATAVIA CLERK-TREASURER

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

| Event Sponsor Big Han Securities | > | <u>.</u> | | | | | | |
|---|------------|--------------------|--------|------------|--------------------------------------|---------------------------|--|--|
| Type of Event Shreet Day | | | | | | | | |
| Day and Date of Event 5/24/24 - Friday | | | | | | | | |
| Time of Event (don't include set up time here – just actual event time) 12-3pm | | | | | | | | |
| Location of Event 2/2 E. Man St Bac | tave | <u> </u> | _/> | 1620° | | | | |
| Details of Event (be as specific as possible!) 131 | 4 An | neal | free | dam | ent dost | natur 7 | | |
| disposal day where the public | :5 Er | موي . | to | con. | tacthessi | v drop | | |
| off of and dispare of old | _ | | | | | | | |
| Contact Information: Primary contact: Name Chr. The Great: Phone # 185.340.228# Mailing address 212F Man St Barrer, NY 19020 — E-mail address Cyracy & Italy seafer com * Events will be posted on the City's website calenda for more information or registration, if applicable, note | ar. If the | Mich 585. Mm | yyy. | te you wo | Whom seemin | ude that people can visit | | |
| Will there be alcohol at your event? Yes |) | No | D) | f | yes, complete | the following: | | |
| Type of alcoholic beverage to be served: Lie | iquor [| _ | | Wine 🗆 |) Beer | | | |
| Will you be providing alcohol to your group? | ∕es 🗆 | No | | | | | | |
| Will you be selling alcohol to your group? | ′es 🔲 | No | 9 | | e certificate <u>W</u> ıor Legal. | ILL BE required | | |
| Will people be allowed to bring alcohol to the event? | ′es □ | No | | | | | | |
| Who will be applying to the NYS Liquor Authority for | r the per | mit to s | ell? | | | | | |
| Is the Sponsor requesting waiver of the Open Conta | ainer lav | v per §3 | 34-7 c | f the City | Code? Yes | No 🖸 | | |

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. **

Page 1 of 7

City of Batavia Event Application

| EVENT INFORMATI | ON (required | I): | | | | | |
|--|--------------------------|--|--|---|---|--------------------|-------------|
| Set up date: <u>5/2 9</u> | 1/24 | | Set | up time: 11:30 | Am | | - |
| Tear down date: 5/2 | 24/24 | | Tea | down time: <u>3・</u> 3 | OPM | | - |
| PLEASE LIST ALL | DATES / TIME | ES AND CF | OWD INFORM | ATION BELOW: | | | |
| Date: <u>5/24/24</u> | St | art time: _ | 12:00 PM | | End time: 3.0 | OPM | |
| Estimated crowd size | : 50 through | nshout te | # of Vendor | s/Displays | # · · · · · · · · · · · · · · · · · · · | | |
| WILL THE EVENT IN | • | | | | • | | |
| Block Party: Parade: Run or Walk: Music: Street Closure(s): Other: | Yes | No DI No DI No | (MAP OF DESI). MAP OF DESI). SITE DRAWIN (MAP OF CLO) | EET CLOSURE MUST RED ROUTE MUST RED ROUTE MUST IG OF STAGE OR D SED STREETS AND RED ROUTE MUST | BE ATTACHED) BE ATTACHED) J LOCATION ATTA DROP LOCATION | • | , |
| Fireworks or Hazard | lous Materials | ? Yes | □ No □ | Carnival or Ar | nusement Rides? | Yes 🔲 No | |
| Name of Corr | npany Providing Above |): | | Company Contact/Represen | tative | () Phone # | |
| | | | , % | .,, | | , | |
| | Address, Street | et | | | City | Zip Code | |
| Music: Live | Group 🔲 | Recorde | iq\D1 🗖 | | y 60 P | | |
| | | . * | | 1 | , t | (:.) | |
| Name of Com | opany Providing Above | : | -, | Company Contact/Represent | | -Phone # | |
| | Address, Stree | et | · | | City | Zip Code | |
| | | ` ,, | <u> </u> | <u> </u> | | | <u> </u> |
| CITY SERVICES SUF | Tho | City reserv | es the right as | part of the permitti | na process to rea | uire the applicant | |
| City Code 66-15, | D-2 to pa | ay for addit | ional operationa | of costs of the City | associated with the | e event. | |
| FOR EVENTS IN ADDITIONAL GA | CITY PARKS ARBAGE MUS | S, GARBAG ST BE BAG | E PICK-UP WII GED AND REN | L BE MADE ONL' | Y TO GARBAGE (EMISES BY EVEN | CANS ON SITE. | |
| ELECTRIC: | | | | , | | | |
| Will electric be neede | ed for the eve | nt? | Yes 🔲 | No 🔟 | | | |
| What will you be pro- | viding electric | to? | | | | | |
| | | | | | | | |
| Will generators be us | sed? | Yes 🔲 I | No 🗹 see | Special Events In: | spection ~ list fo | or compliance* | |
| lf yes, INCL | UDE SITE D | RAWING II | NDICATING PL | ACEMENT/LOCA | TION OF GENER | ATOR | |
| SIZE OF GEN | IERATOR(S) | | FUEL S | OURCE - GAS - [| 🕽 - DIESEL - 🗀 - F | PROPANE - | |

| TENTS/CANOPIES/POP-UPS: See appendices for compliance checklist – all tents will be Inspe | cted ** | • | _ | |
|--|--------------|--------------|-------------|-----------|
| 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 Yes | <u>u</u> | No No | |
| NOTE – Appropriate anchoring is required for all tents, canopies, and popup structures | | | | |
| Please list size(s) of Tents/Canopies or other temporary structures erected* 1 - LOXIO | 20p-1 | p te | nt | |
| 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): | | | E | |
| ANY EVENT REQUIRING A STREET CLOSURE REQUIRES 90 DAY ADVANCE | NOTIC | 3 | | |
| 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 n | nay be a | dditional | costs) | |
| Block parties must allow local traffic and driveways cannot be blocked. Initial here: | | (if hosti | ing blo | ck party) |
| POLICE | | | | |
| Will City Police Officers be requested for the event? Yes D No D | | | | |
| If yes, what type of request? Traffic control ☐ Security ☐ Community Policing ☐ Other ☐: Specify | | | | |
| FINAL DETERMINATION FOR NUMBER OF POLICE OFFICERS and UTILIZATION WILL BE AT THE DISCRETION OF THE CITY | | | | |

- 1. 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
- 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.
- 10. Additional operational costs of the City, as determined by City Departments, must be paid by the event sponsor at the conclusion of the event. The application fee is due at time of submission and is non-refundable.
- 11. Vendor/participants must also follow all inspection/temporary structure rules found in the appendices (pg 6-7)
- 12. For block parties, sponsors must notify all affected neighbors and local traffic/driveway access must be maintained.

Hold Harmless Agreement

13. 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.

| of Batavia, its employees, officers and age attorney's fees, court costs, and all other s become obligated to pay on account of any arising or alleged to have arisen out of the issued by the City of Batavia or by any | risponsor, shall indemnify, hold harmless, assume liability for and defend the City ents from any and all damages, costs and expenses including but not limited to, sums which the City of Batavia its employees, officers and agents may pay or and every demand; claim or assertion of liability, or any claim founded thereon, activities described in this special event application and sanctioned by the permit act or omission of the 12-6-2 (Organizer/Sponsor), its officers, or directors in relation to activities described in this application and ent permit. |
|--|---|
| 4/1/24 Bate: | Marin Securities Name of Event Sponsor: Christian Gregory Name of Event Sponsor: Christian Gregory Name - Printed or Typed |
| The rules and information contained within | this application have been read and will be adhered to. |
| Date: | Signature of Applicant: |
| Please forward this application to: | City Clerk's Office Attention: Events Applications Department One Batavia City Centre |

Batavia, New York 14020



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/28/2023

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

| PRODUCER | CONT | ract E: Kristen Gilf | us | | | | | |
|---|---------------|--|----------------------------|--|--------------------|-------------|--|--|
| Haylor, Freyer & Coon, Inc. PO Box 4743 | | PHONE (A/C, No, Ext): 315-451-1500 FAX (A/C, No): 315-362-5747 | | | | | | |
| Syracuse NY 13221 | I C MAN | E-MAIL ADDRESS: certificates@haylor.com | | | | | | |
| 3740436 147 10221 | ADDI | INSURER(S) AFFORDING COVERAGE NAIC # | | | | | | |
| | la constant | | | | | | | |
| INSURED | DDICHTONCE | INSURER A : Ohio Security Insurance Co. 240 INSURER B : Aspen American Insurance Company 434 | | | | | | |
| Brighton Securities Corp | | | nerican insu | ance Company | | 43460 | | |
| 1703 Monroe Ave | INSUF | RER C : | | | | | | |
| Rochester NY 14618 | INSUF | RER D : | | | | _ | | |
| | INSUR | RER E : | | | | | | |
| | INSUR | RER F : | | | | | | |
| COVERAGES CERTIFICATE NUMB | | | | REVISION NUMBER: | | | | |
| THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. | | | | | | | | |
| INSR TYPE OF INSURANCE INSD WYD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMI | rs | | | |
| A X COMMERCIAL GENERAL LIABILITY Y Y BZS245 | | 6/30/2023 | 6/30/2024 | EACH OCCURRENCE | \$ 2,000 | 000 | | |
| CLAIMS-MADE X OCCUR | | : | 0,00,202 | DAMAGE TO RENTED | † | | | |
| CEAIMS-MADE 17 OCCOR | | | l [| PREMISES (Ea occurrence) | \$ 2,000 | | | |
| | | | | MED EXP (Any one person) | \$ 15,00 | | | |
| | | | 1 | PERSONAL & ADV INJURY | \$ 2,000 | | | |
| GEN'L AGGREGATE LIMIT APPLIES PER: | | | ſ | GENERAL AGGREGATE | \$4,000 | ,000 | | |
| POLICY X PRO- X LOC | | | | PRODUCTS - COMP/OP AGG | \$ 4,000 | ,000 | | |
| OTHER: | | <u> </u> | | | \$ | | | |
| A AUTOMOBILE LIABILITY BZS245 | 8084540 | 6/30/2023 | 6/30/2024 | COMBINED SINGLE LIMIT (Ea accident) | s 1,000 | ,000 | | |
| ANY AUTO | | | | BODILY INJURY (Per person) | S | | | |
| OWNED SCHEDULED AUTOS ONLY AUTOS | | | | BODILY INJURY (Per accident | s | | | |
| ✓ HIRED ✓ NON-OWNED | | | | PROPERTY DAMAGE | s | | | |
| AUTOS ONLY AUTOS ONLY | | j | | (Per accident) | s | - | | |
| A X UMBRELLALIAB X OCCUR Y Y USO245 | 58084540 | 6/30/2023 | 6/30/2024 | FACILOCOURRENOS | 1 | 000 | | |
| | 30004340 | 0/30/2020 | 0/30/2024 | EACH OCCURRENCE | \$ 1,000 | | | |
| CEAIWIS-WIADE | | | - | AGGREGATE | \$ 1,000 | ,000 | | |
| DED X RETENTION \$ 10,000 WORKERS COMPENSATION | | | | PER OTH- | \$ | | | |
| AND EMPLOYERS' LIABILITY | | | ļ | STATUTE ER | | | | |
| ANYPROPRIETOR/PARTNER/EXECUTIVE N/A | | | | E.L. EACH ACCIDENT | S | | | |
| (Mandatory in NH) | | | | E.L. DISEASE - EA EMPLOYER | s | | | |
| If yes, describe under DESCRIPTION OF OPERATIONS below | | | | E.L. DISEASE - POLICY LIMIT | s | | | |
| B Professional Liability LR00QX | (123 | 4/11/2023 | 4/11/2024 | Each Claim limit Aggregate limit | \$1,000 \$1,000 | | | |
| | | <u> </u> | | | | | | |
| DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) General Liability Additional Insured & Waiver of Subrogation form# BP7996 07/10 Umbrella policy follows General Liability form | | | | | | | | |
| | | | | | | | | |
| CERTIFICATE HOLDER | CAN | CELLATION | | | | | | |
| Proof of Insurance Only | THE | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. | | | | | | |
| | | ORIZED REPRESEN | | | | | | |



Official Use Only:

2024-20

Event Application #:

City of Batavia Batavia, New York 14020 (585) 345-6300

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

| (A separate perm | it illust i | DE 15: | sueu | ioi ea | ich item | requestea | | |
|---|---------------|------------------|-------------|-----------------------------|-------------------|-----------------------------------|----------|---|
| Event Sponsor <u>UHUDE SOUCH A</u> | | | | | | | | |
| Type of Event Memorial Day | 3 Po | u | ada | Z | | | | |
| Day and Date of Event Mombay 1 | lay | 2- | 140 | , 2 | 024 | | | |
| Time of Event (don't include set up time here – ju | ر st actua | l eve | nt tim | e) | 9:00 | am- | 10:0 |)Oam |
| Location of Event East owne Plaz | a | 훈, | AN | a | Plac | e Park | lino | Lot |
| Details of Event (be as specific as possible!) | mnu | a | 9 | w | ade | hon | orir | ia Veterans |
| and first Responders. | | | ` | | | | | <u> </u> |
| · · | | | | | | | | |
| Contact Information: Primary contact: Name Phone # 585-34-3-44-1 Mailing address One Patrovia City Cent E-mail address bows ki @ yahoo com * Events will be posted on the City's website caler for more information or registration, if applicable, r | ndar. If | there | kgo is a | 18to 185 10to webs | -345 W in@b | Udur) - Le33: Datavian | rewyo | ວເ ຮ ູ Co ຕ de that people can visit |
| Will there be alcohol at your event? Yes | | | No | X | | If yes, cor | nplete t | he following: |
| Type of alcoholic beverage to be served: | Liquor | | | | Wine | | Beer | |
| Will you be providing alcohol to your group? | Yes | | No | A | | | | |
| Will you be selling alcohol to your group? | Yes | | No | M | | nce certific quor Leg a | | _L BE required |
| Will people be allowed to bring alcohol to the event? | Yes | | No | M | | | | |
| Who will be applying to the NYS Liquor Authority | for the | perm | it to s | ell? | | | | |
| Is the Sponsor requesting waiver of the Open Co | ntainer | law _l | per § | 34-7 | of the Ci | ity Code? | Yes 🛚 | No 🗖 |

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.

Page 1 of 7

City of Batavia 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 INFORMATION (required): | _ |
|--|--|
| Set up date: May 2.7th, 202+ Set up ti | me:_8:00 am |
| Tear down date: Tear down | wn time: <u>N</u> a |
| PLEASE LIST ALL DATES / TIMES AND CROWD INFORMATI | ON BELOW: |
| Date: 5 27 24 Start time: 8:00 am | End time: 10:00 am |
| Estimated crowd size: $3,000$ # of Vendors/Di | splays <u> </u> |
| WILL THE EVENT INCLUDE: | |
| Parade: Yes M No (MAP OF DESIRED Run or Walk: Yes No M (MAP OF DESIRED Music: Yes M No (SITE DRAWING O Street Closure(s): Yes No (MAP OF CLOSED | CLOSURE MUST BE ATTACHED) O ROUTE MUST BE ATTACHED) O ROUTE MUST BE ATTACHED) OF STAGE OR DJ LOCATION ATTACHED) STREETS AND DROP LOCATION OF BARRICADES) O ROUTE MUST BE ATTACHED) |
| Fireworks or Hazardous Materials? Yes 🔲 No 🕱 | Carnival or Amusement Rides? Yes No |
| Name of Company Providing Above: Com | pany Contact/Representative Phone # |
| Address, Street | City Zip Code |
| Music: Live Group Mar Recorded/DJ | Sily 2.40 Gode |
| Some parade participants | () |
| Name of Company Providing Above: Com | pany Conlact/Representative Phone # |
| Address, Street | Cily Zip Code |
| CITY SERVICES SUPPORT: | |
| | of the permitting process, to require the applicant sts of the City associated with the event. |
| FOR EVENTS IN CITY PARKS, GARBAGE PICK-UP WILL B ADDITIONAL GARBAGE MUST BE BAGGED AND REMOV | E MADE ONLY TO GARBAGE CANS ON SITE. ED FROM PREMISES BY EVENT SPONSOR. |
| ELECTRIC: | |
| Will electric be needed for the event? Yes □ No | |
| What will you be providing electric to? | |
| Will generators be used? Yes ☐ No ☐ *see Spec | cial Events Inspection ✓ list for compliance* |
| If yes, INCLUDE SITE DRAWING INDICATING PLACE | MENT/LOCATION OF GENERATOR |
| SIZE OF GENERATOR(S) FUEL SOUR | RCE - GAS - 🗆 - DIESEL - 🗀 - PROPANE - 🚨 |

| Will Tents/Canopies or of | | | | | | nspected ** | | |
|--|--|-------------------------------------|----------------------------------|-------------------------------|--------------------------|-------------|----------|----------|
| vviii a bounce nouse or o | ther membrane str ther air supported | | | | | Yes Yes | | No No |
| NOTE – Appropriate ancl up structures | horing is required f | or all tents, c | anopies, and | l pop- | | | | |
| Please list size(s) of Tent | s/Canopies or othe | er temporary | structures er | rected* | | | | |
| | ANCHORII | NG INTO P | A <i>VEMENT</i> | IS PROHI | BITED! | | | |
| If anchoring | in grass, soil areas | s please cont | act the NYS | Dig Safe# | at: 1-800 | -962-7962 | or 811 | l |
| STREET CLOSURE(S): | | | <u> </u> | | | | | |
| ANYEV | ENT REQUIRING A | STREET CLO | OSURE REQU | JIRES 90 DA | Y ADVAN | ICE NOTIC | 3 | |
| Will street(s) need to be co | losed for the event | ? Yes | No 🗆 | Reason: | Par | rade | | |
| List Street(s) and Cross S East Main Ed Street to be closed | Street(s) that will l | be affected: QZQ ー j | 3anxS | | & | Bank | S+. | |
| Street to be closed | | | | | & Streets | | | |
| Street to be closed | | - | | | & Streets | | | |
| Street to be closed | | | | | & | | - | |
| Will street barricades b | ne requested from | tha City? | vos M | | | a 10 | | . |
| vviii su cet barricades t | be requested from | the Oity? | ies A | No 🔲 | How Ma | ily? HS | re | gu |
| Will traffic cones be re- | • | • | | No 🗖 | How Ma | • | | |
| | (Drop off locations | | | | | | | |
| | BANNERS / SIGI TO STREET BARRICADES | NS OR OTHER DEC S, TRAFFIC CONES | CORATIONS ARE S, LIGHT POLES, | NOT TO BE ATT OR ANY OTHER | ACHED CITY PROPE | RTY | | |
| | | | | | | | dditiona | l costs |
| | | el requested | for the even | | 301011. 1111 | | | 1 60000 |
| Are there any other city ma | | el requested | for the even | | | | | |
| | | el requested | for the even | | | | | |
| | aterials or personn | | | | | | | |
| Are there any other city ma | aterials or personn | | | | | | | |
| Are there any other city ma | aterials or personn ocal traffic and d | riveways car | nnot be blo | cked. Initia | | | | |
| Are there any other city ma | aterials or personn ocal traffic and d | riveways car | nnot be blo | | | | | |
| Are there any other city made and the second | ocal traffic and derequested for the | riveways can | nnot be blo | cked. Initia | al here: | | | |
| Are there any other city ma Block parties must allow I POLICE Will City Police Officers be | ocal traffic and derequested for the | riveways can | nnot be blo | cked. Initia | al here: | | | |
| Are there any other city made and the second | ocal traffic and derequested for the | riveways car event? Yes | nnot be blo | cked. Initia | al here: _ Policing [| | | |
| Are there any other city made and the second | ocal traffic and derequested for the | event? Yes Secur | NUMBER C | Cked. Initia | al here: _ |] — | | |
| Are there any other city materials and the Block parties must allow I POLICE Will City Police Officers be If yes, what type of request Other : Specify | ocal traffic and decreased for the traffic control FINAL DETERMINATION | event? Yes Secur | NUMBER C | Cked. Initia | office | RS FY. | (if hos | |
| Are there any other city management of the Block parties must allow I POLICE Will City Police Officers be If yes, what type of request Other : Specify | ocal traffic and decreased for the traffic control FINAL DETERMIN | event? Yes Secur | NUMBER C | Cked. Initia | office |] — | (if hos | |
| Are there any other city management of the policy of the p | ocal traffic and decreased for the traffic control FINAL DETERMINATION | event? Yes Secur | NUMBER C | Cked. Initia | office | RS FY. | (if hos | |

- 1. 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. Additional operational costs of the City, as determined by City Departments, must be paid by the event sponsor at the conclusion of the event. The application fee is due at time of submission and is non-refundable.
- 11. Vendor/participants must also follow all inspection/temporary structure rules found in the appendices (pg 6-7)
- 12. For block parties, sponsors must notify all affected neighbors and local traffic/driveway access must be maintained.
- 13. 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.

Please forward this application to:

City Clerk's Office Attention: Events Applications Department One Batavia City Centre Batavia, New York 14020



(585) 345-6300



FEB 1 6 2024

CITY OF BATAVIA CLERK-TREASURER

Official Use Only:

2024-12

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

| Event Sponsor GLOW OUT! | | | | | | | | |
|---|---------------------|----------------|----------------------------|------------------------|--------------------|--|--|--|
| Type of Event Pride Parade and Festival | | | | | | | | |
| Day and Date of Event Saturday, June 8, 2024 | | | | | | | | |
| Time of Event (don't include set up time here – just actual event time) 4 pm - 10 pm Liberty St. for parade line-up Jackson Square and Jackson St. between Main and Ellicott | | | | | | | | |
| Location of Event Streets for the festival | :-up 3 | | بارد الر | iare i | and Jac | | | |
| Details of Event (be as specific as possible!) If | approve | d, w | e wil | l lin | e up fo | r the parade in the parking | | |
| lan on Liberty St., alongside the First Presby | terian | Churc | h. Fo | od t | rucks a | nd the health/vendor fair will | | |
| be set up on Jackson Street, with the performa | nces and | d org | aniza | tion | 's tabl | es in Jackson Square. | | |
| Contact Information: Primary contact: Name John Couri Phone # 774-644-0491 Mailing address 120 Grandview Terrace, Batavia E-mail address johncouri@icloud.com | | <u> </u> | Sara \ 716-89 131 Ti | /acin 03-09 racy | 01 | Batavia | | |
| * Events will be posted on the City's website caler for more information or registration, if applicable, | ndar. If note we | there bsite | is a here | webs | ite you glowout | would like to include that people can visit | | |
| Will there be alcohol at your event? Yes | ۵ | | No | X | | 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 | X | | | | |
| Will you be selling alcohol to your group? | Yes | | No | X | | nce certificate <u>WILL BE</u> required iquor Legal. | | |
| Will people be allowed to bring alcohol to the event? | Yes | | No | X | | | | |
| Who will be applying to the NYS Liquor Authority | for the | perm | nit to s | sell? | | | | |
| Is the Sponsor requesting waiver of the Open Co | ontainer | law | per § | 34-7 | of the C | City Code? Yes ☐ No ☐ | | |

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. **

Page 1 of 7

City of Batavia Event Application

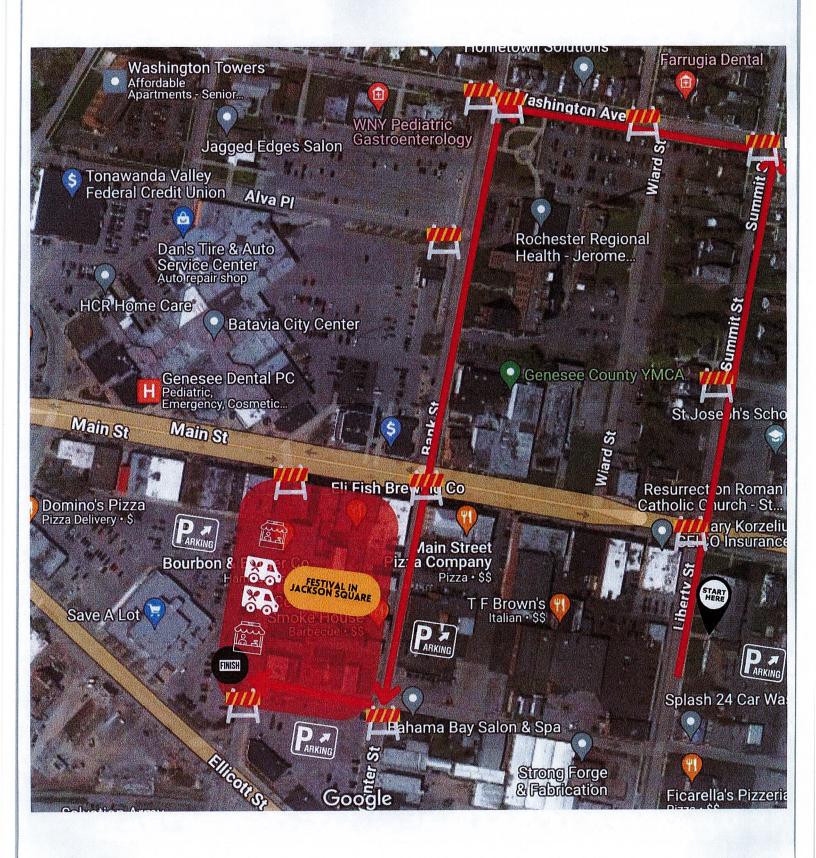
| EVENT INFORMAT | ION (require | d): | | | | | | | |
|--|-----------------------------|----------------------------|--|---|--|-----------------------------------|--|--|--|
| Salar Garage | v. 1/2 | | <u>//</u> | t up time: K | | | | | |
| Tear down date: Saturday, 6/8 Tear down time: 10 pm - Midnight | | | | | | | | | |
| PLEASE LIST ALL | DATES / TIN | IES AND C | ROWD INFOR | MATION BEI | _O W ; | | | | |
| Date: Saturday, 6/8 | <u>.</u> 9 | Start time: _ | 4 pm | | End time: 10 |) pm | | | |
| Estimated crowd size | e:650 | | # of Vendo | ors/Displays _ | 30 | | | | |
| WILL THE EVENT I | NCLUDE: | | | | | | | | |
| Block Party: Parade: Run or Walk: Music: Street Closure(s): Other: | Yes Yes Yes Yes Yes Yes Yes | No 🔄 No 🗔 No 🗔 No 🗔 No 🔲 | (MAP OF DES (MAP OF DES (SITE DRAW) (MAP OF CLO | SIRED ROUTE SIRED ROUTE ING OF STAGI OSED STREET | RE MUST BE ATTACHE. MUST BE ATTACHED) MUST BE ATTACHED) E OR DJ LOCATION AT S AND DROP LOCATIO MUST BE ATTACHED) | TACHED) ON OF BARRICADES) | | | |
| Fireworks or Hazard | dous Material | s? Yes | □ No 🗵 | Carniva | al or Amusement Rides | s? Yes 🔲 No 🔯 | | | |
| Name of Co. | mpany Providing Abo | ve: | | Company Contac | t/Representative | () Phone # | | | |
| | Address, Str | pe t | | | City | Zip Code | | | |
| Music: Live | Group 🔲 | Record | ed/DJ 🔽 | | | | | | |
| | Entertainmen | | | Scotty DiMa | | (585) 409-9519 | | | |
| Name of Sol | 4 Verona | | | Company Contac | Batavia | Phone # 14020 | | | |
| | Address, Str | | | | City | Zip Code | | | |
| CITY SERVICES SU City Code 66-15, FOR EVENTS IN ADDITIONAL G. | , D-2 The to p | oay for addii S, GARBAG | tional operatior SE PICK-UP W | nal costs of th | permitting process, to role City associated with E ONLY TO GARBAGIOM PREMISES BY EV | the event. E CANS ON SITE. | | | |
| ELECTRIC: | | | | | | | | | |
| Will electric be need | led for the eve | ent? | Yes 🛚 | No 🛄 | | | | | |
| What will you be pro | oviding electri | | ting and sound greement with | eguipment. N a local busi | We learned from last ness to use their ele | year and will establish ctricity. | | | |
| Will generators be u | sed? | Yes 🔲 | No 🗵 *see | Special Eve | ents Inspection 🗸 list | t for compliance* | | | |
| If yes, INC | LUDE SITE (| DRAWING I | NDICATING P | LACEMENT | LOCATION OF GENE | ERATOR | | | |
| SIZE OF GE | NERATOR(S |) | FUEL | SOURCE - G | AS - 🗆 - DIESEL - 🔾 | - PROPANE - 🔲 | | | |

| TENTS/CANOPIES/POP-UPS: See appendice | es for com | pliance o | heck | dist – a | all tent | s will b | e insped | ted ** | | | |
|---|------------------------------|-------------------|--------------|----------------|----------|------------------------------|-------------|--------------|----------|---------------|-------------|
| Will Tents/Canopies or other membrane structure Will a bounce house or other air supported structure. | | | | | ? | | | Yes Yes | | No No | X |
| NOTE – Appropriate anchoring is required fo up structures | r all tents | , canopie | es, an | ıd pop | - | | | | | | |
| Please list size(s) of Tents/Canopies or other | tempora | ry structu | ires e | erected | · | | | · | | | |
| ANCHORIN | G INTO | PAVEM | IEN1 | 'IS P | ROHI | BITEL |)! | | | | |
| If anchoring in grass, soil areas | please co | ontact the | NYS | S Dig S | Safe # | at: 1-8 | 300-962- | -7962 | or 811 | l | |
| STREET CLOSURE(S): | - | | | | | | | - | | - | |
| ANY EVENT REQUIRING A | STREET (| CLOSURE | REC | UIRES | 90 D | AY AD | VANCE N | VOTIC | 5 | | |
| Will street(s) need to be closed for the event? | Yes | ⊠ No | |) Re | eason: | <u>Para</u> | ade and | <u>healt</u> | h/vend | <u>or fai</u> | .r |
| ist Street(s) and Cross Street(s) that will b Festival: Jackson St. | e affecte Main Str | | | | | & | Ellico | tt Str | eet | | |
| Street to be closed Parade: Liberty St. | School S | Street | | | Cross | ss Streets Washington Avenue | | | | | |
| Street to be closed Washington Avenue | Summit S | Street | | | Cross | Streets & | Bank Street | | | | |
| Bank Street | School S | Street | | | Cross | Streets | Jackson | n St. | | <u>-</u> | |
| Street to be closed | | | | | Cross | Streets | | | | | |
| Will street barricades be requested from t | he City? | Yes | X | No | | How | Many? | 20 | | | |
| Will traffic cones be requested from the C | - | Yes Litems mus | ☑ t be id | No entified | on the | | Many? | | | | |
| BANNERS SIGN TO STREET BARRICADES. | S OR OTHER | DECORATION | ONS AR | E NOT T | O BE AT | TACHED | σ, | | | | |
| Are there any other city materials or personne | el request | ed for the | eve | nt? lo | lentify | below | : (there m | ay be a | dditione | al costs) | |
| Block parties must allow local traffic and dr | iveways | cannot l | oe ble | ocked | . Initi | al her | e: | | (if hos | ting blo | ock pa |
| OLICE | | | | | | | | | | | |
| Will City Police Officers be requested for the | event? | Yes ⊠ | No | | | | | | | | |
| if yes, what type of request? Traffic control 🗵 Other 🖵: Specify | | curity 🗖 | | Com | munity | Polici | ng 🖾 | | | | |
| FINAL DETERMIN and UTILIZATION | | | | | | | | | | | |

- 1. 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
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- 12. For block parties, sponsors must notify all affected neighbors and local traffic/driveway access must be maintained.
- 13. 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 Ha | rmless Agreement |
|---|---|
| of Batavia, its employees, officers and agents from any attorney's fees, court costs, and all other sums which become obligated to pay on account of any and every darising or alleged to have arisen out of the activities descissued by the City of Batavia or by any act or omis | directors in relation to activities described in this application and |
| 2/15/2 mf | Sura (and |
| | Authorized Signature, Title Sara Vaci Name – Printed or Typed |
| The rules and information contained within this application of the rules and information contained within this application of the rules and information contained within this application of the rules and information contained within this application of the rules and information contained within this application of the rules and information contained within this application of the rules and information contained within this application of the rules are rules and information contained within this application of the rules are rules and the rules are rules and the rules are rules and the rules are rules | on 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

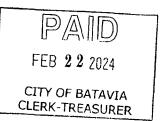




Official Use Only:

2024-14

City of Batavia Batavia. New York 14020 (585) 345-6300



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

| Event Sponsor | KIWAN | 115 | CLU | 1.113 | OF | | SATA | UM | | | | | <u>.</u> | |
|---|---|--|---------------------------|---|----------|-----------------------------|------------------|-----------------------|--------------|--------------|-------|----------------|-------------|---|
| Type of Event | 5K | 120A | 0 R | 4CE | : = | | | | | | | | | |
| Day and Date of Event | THU | 4250 | AY | J | ucg | / | 4,2 | 024 | <i>i</i> | | | | | |
| Time of Event (don't include | | | | | | | | | | 11: | 00 | Am | | |
| Location of Event | START | A | UD | FIL | 21SF | 1 | AT | CENT | EN | MA | 1- | PAR | K | |
| Details of Event (be as spec | ific as possible | 1) RI | CHW | ony) | | B | wh, | (C) C | wr | 3AN | < n | VIN | K, (B) | |
| ON JINE TO EVE | ENGREEN | D | ON | EVI | ERG | RE | EN 1 | O N. | . SP | RUC | E, (| Bor | <u>/N</u> . | |
| SPAULE TO EAS WASHINGTON (5) O. Contact Information: Primary contact: Name Phone # 585 Mailing address _ 643 E-mail address _ 0.0 | A PUMS YDG 7287 WHIN PUMSEY ED ho | G-TON G-Y J- J- J-Mai e calen | 70 Ifrali Licon dar. If | <i>f</i> ∈. <i>l</i> <u>S</u> there | econ | dary OA 51 d (webs | contact UN (35 3 | (P) or Kyp S6 - | 1624 2001 |) | ves | tuk fuer | _ t_com | i |
| Will there be alcohol at you | r event? | Yes | | | No | 4 | | If yes, | com | olete t | he fo | llowing | | |
| Type of alcoholic beverage | to be served: | | Liquor | | | • | Wine | | | Beer | | | , | |
| Will you be providing alcoho | ol to your group | ? | Yes | | No | \$ | | | | | | | | |
| Will you be selling alcohol to | o your group? | | Yes | | No | 敿 | | nce ce iquor l | | | L BE | <u>E</u> requi | red | |
| Will people be allowed to br the event? | ing alcohol to | | Yes | | No | M | | | | | | | | |
| Who will be applying to the | N YS Liquor Au | thority | for the | perm | nit to s | sell? | | | 2/A | | | | | |
| Is the Sponsor requesting v | | | | | | | | | | | | | (| |

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. **

Page 1 of 7

City of Batavia Event Application

| EVENT INFORMATION | ON (required): | | | | |
|--|---|--|---|--|----------------|
| Set up date: | My 4, 2024 | Set up time: | 7:00 Am | | |
| Tear down date: | July 4, 2024 | Tear down time | e: 11:00-12:00 | PM | |
| PLEASE LIST ALL | DATES / TIMES AND C | ROWD INFORMATION B | ELOW: | | |
| Date: 7/4/2 | 2024 Start time: | 7:30 Anj | End time: | 11.30 Am | |
| Estimated crowd size | : <u>200</u> | # of Vendors/Displays | - /A | | |
| WILL THE EVENT IN | ICLUDE: | | | | |
| Block Party: Parade: Run or Walk: Music: Street Closure(s): Other: | Yes No No No Yes No | (MAP OF DESIRED ROU (MAP OF DESIRED ROU (SITE DRAWING OF STA (MAP OF CLOSED STRE | EURE MUST BE ATTACHE TE MUST BE ATTACHED TE MUST BE ATTACHED AGE OR DJ LOCATION AT EETS AND DROP LOCATIO TE MUST BE ATTACHED |)) TACHED) ON OF BARRICADES) | |
| Fireworks or Hazard | dous Materials? Yes | s □ No 煤 Carn | ival or Amusement Ride | s? Yes 🔲 No | Ø' |
| Name of Con | mpany Providing Above: | Company Co | ntact/Representative | () Phone # | |
| | | | | | |
| Musica Livre | Address, Street | ded/DJ □ | City | Zip Code | |
| Music: Live | e Group 🔲 Recor | ded/DJ | | | |
| Name of Con | mpany Providing Above: | Company Co | ntact/Representative | Phone # | |
| | Address, Street | | City | Zip Code | |
| CITY SERVICES SU | BDODT. | | | | , . |
| City Code 66-15 | The City rese to pay for add | erves the right, as part of th ditional operational costs of AGE PICK-UP WILL BE MA AGGED AND REMOVED F | f the City associated with ADE ONLY TO GARBAG | the event. | |
| ELECTRIC: | | | | | |
| Will electric be need | ded for the event? | Yes 🗖 No 🗆 | 1 | | |
| What will you be pro | oviding electric to? | Possibly for | - timing comp | Dany. May | |
| Will generators be u | used? Yes | No 🕅 *see Special I | Events Inspection 🗸 lis | at for compliance* | |
| If yes, INC | LUDE SITE DRAWING | S INDICATING PLACEME | NT/LOCATION OF GEN | ERATOR | |
| SIZE OF GE | ENERATOR(S) | FUEL SOURCE | - GAS - 🗀 - DIESEL - 🗆 | . PROPANE - 🗆 | |

| TENTS/CANOPIES/POP-UPS: See appendices for compliance checklist – all tents will be inspected ** |
|---|
| Will Tents/Canopies or other membrane structures be erected at event? Yes No D Will a bounce house or other air supported structures be erected at event? Yes No M |
| NOTE – Appropriate anchoring is required for all tents, canopies, and popup structures |
| Please list size(s) of Tents/Canopies or other temporary structures erected* 9 x 9 Canopy |
| 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 D Reason: NACE COUTE ON CITY STREETS, SEE ATTACHED MAP |
| List Street(s) and Cross Street(s) that will be affected: (BTAVCT) PICHMOND Ellicoff AVE & State (FINISH) Street to be closed (FINISH) Street to be closed Cross Streets Cross Streets RICHMONN Cross Streets & |
| Street to be closed Cross Streets |
| Will street barricades be requested from the City? Yes Many? 2 |
| 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) |
| Block parties must allow local traffic and driveways cannot be blocked. Initial here: (if hosting block party) |
| POLICE |
| Will City Police Officers be requested for the event? Yes ₩ No □ |
| If yes, what type of request? Traffic control ★ Security □ Community Policing □ Other □: Specify |
| FINAL DETERMINATION FOR NUMBER OF POLICE OFFICERS |

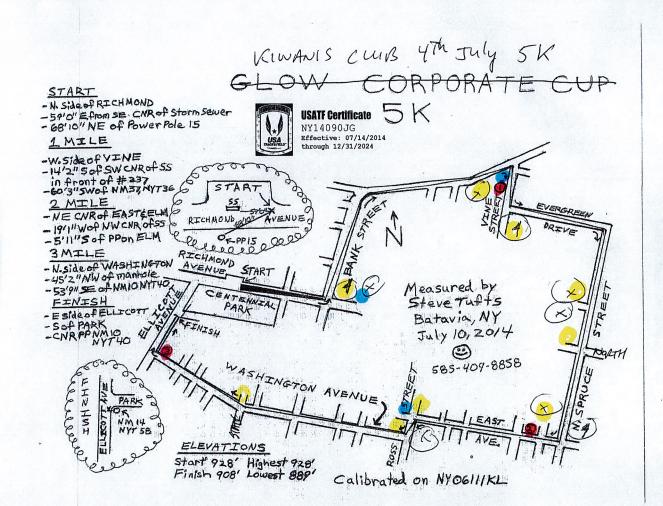
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- 12. For block parties, sponsors must notify all affected neighbors and local traffic/driveway access must be maintained.

Hold Harmless Agreement

13. 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.

| Kiwithis Club Bataviathe organizer/spons | sor, shall indemnify, hold harmless, assume liability for and defend the City |
|--|---|
| of Batavia, its employees, officers and agents from | m any and all damages, costs and expenses including but not limited to, |
| | which the City of Batavia its employees, officers and agents may pay or |
| | very demand, claim or assertion of liability, or any claim founded thereon, |
| arising or alleged to have arisen out of the activitie | es described in this special event application and sanctioned by the permit |
| | r omission of the Kiwauis Club (Organizer/Sponsor), its |
| | rs, or directors in relation to activities described in this application and |
| sanctioned by the issuance of a special event per | mit. |
| 2/22/2024 | KIWAMS CLUB OF BATAVIA |
| Date: | Name or Eyent Sporsor. Cy King, fresident |
| | DAVID A. RUMSEY |
| | Name – Printed or Typed |
| The rules and information contained within this ap | oplication have been read and will be adhered to. |
| Date: | Signature of Applicant: |
| Please forward this application to: | City Clerk's Office |
| | Attention: Events Applications Department |

One Batavia City Centre Batavia, New York 14020





Official Use Only:



City of Batavia Batavia. New York 14020 (585) 345-6300



MAR 1 3 2024

CITY OF BATAVIA CLERK-TREASURER

Event Application Fee - \$25.00 (non-refundable) (A separate permit must be issued for each item requested) Inc. (60 AR Event Sponsor (70005 Type of Event Day and Date of Event Time of Event (don't include set up time here - just actual event time) Location of Event Jackson Square Details of Event (be as specific as possible!) TWO MUSIC dren's craft Contact Information: Primary contact: Secondary contact: Name ain St. Batavia Satavia Mailing address E-mail address gina lock * Events will be posted on the City's website calendar. If there is a website you would like to include that people can visit for more information or registration, if applicable, note website here: WWW.opart.org Will there be alcohol at your event? Ø Yes No If yes, complete the following: Type of alcoholic beverage to be served: N Liquor Wine Beer Will you be providing alcohol to your group? Will you be selling alcohol to your group? Yes Insurance certificate WILL BE required with Liquor Legal. Will people be allowed to bring alcohol to Yes the event? Who will be applying to the NYS Liquor Authority for the permit to sell?

** 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 INFORMATION (required): |
|--|
| Set up date: 07 067024 Set up time: 7am - 10 am |
| Tear down date: 6706 2024 Tear down time: 9pm - 11pm |
| PLEASE LIST ALL DATES / TIMES AND CROWD INFORMATION BELOW: |
| Date: 07 01 2023 Start time: 10 am End time: 10 pm |
| Estimated crowd size: # 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: Vondo (5) Yes No (MAP OF DESIRED ROUTE MUST BE ATTACHED) |
| Fireworks or Hazardous Materials? Yes No Carnival or Amusement Rides? Yes No |
| Name of Company Providing Above: Company Contact/Representative Phone # |
| Music: Live Group Mark Recorded/DJ Gregory Hallock 555 343-9313 Name of Company Providing Above: Gompany Gontact/Representative Batavia 14020 Address, Street City 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? <u>Musicians + Vendors</u> |
| Will generators be used? Yes ☑ *see Special Events Inspection ✓ list for compliance* |
| If yes, INCLUDE SITE DRAWING INDICATING PLACEMENT/LOCATION OF GENERATOR SIZE OF GENERATOR(S) $(a_1000 - 7_1000)$ FUEL SOURCE - GAS - \boxtimes - DIESEL - \square - PROPANE - \square |

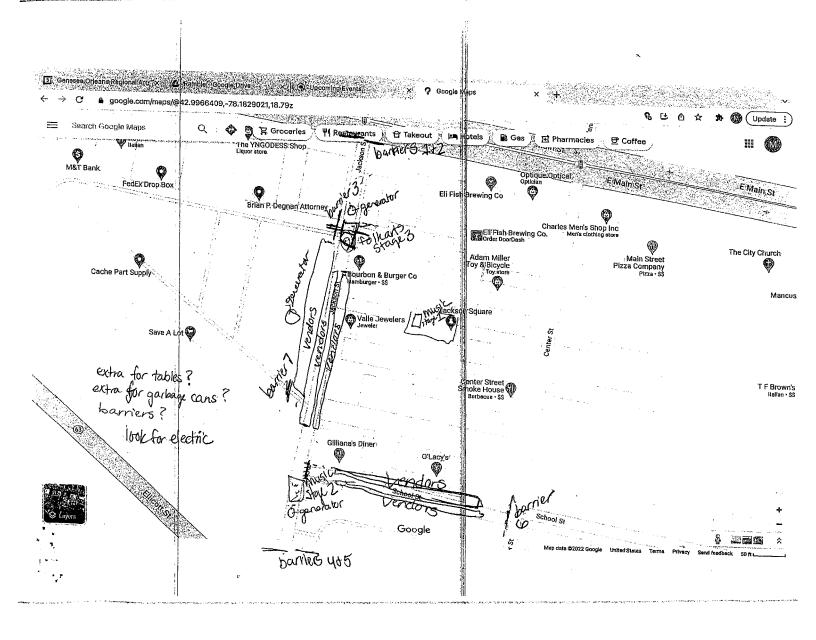
| TENTS/CANOPIES/POP-UPS: See appendices for compliance checklist – all tents will a | be inspected ** | | |
|--|---|----------------|-----------------|
| Will Tents/Canopies or other membrane structures be erected at event? Will a bounce house or other air supported structures be erected at event? | | Mo No | $\overline{}$ |
| NOTE – Appropriate anchoring is required for all tents, canopies, and popup structures | | | |
| Please list size(s) of Tents/Canopies or other temporary structures erected* | 20,20 | x20, | 30×4 |
| ANCHORING INTO PAVEMENT IS PROHIBITED! | | | |
| If anchoring in grass, soil areas please contact the NYS Dig Safe # at: 1-800 | 962-7962 or 81 | 11 | |
| STREET CLOSURE(S): | *************************************** | | |
| ANY EVENT REQUIRING A STREET CLOSURE REQUIRES 90 DAY ADVAI | NCE NOTICE | | |
| Will street(s) need to be closed for the event? Yes ☑ No ☐ Reason: ← | ent is hap | peni'ng | 2 01 |
| List Street(s) and Cross Street(s) that will be affected: Tackson Street School Street Tackson Street Street to be closed Street to be closed Tackson Street Tookson Str | Ellicott Center S | Street | <u>+</u> |
| Street to be closed Cross Streets | | | |
| Street to be closed Cross Streets | ~ | | _ |
| Will street barricades be requested from the City? Yes 🔼 No 🔲 How Many | ? _8_ | | |
| Will traffic cones be requested from the Gity? Yes 🖃 No 🔼 How Many (Drop off locations of requested items must be identified on the site drawing) | | | well the terms. |
| BANNERS / SIGNS OR OTHER DECORATIONS ARE NOT TO BE ATTACHED TO STREET BARRICADES, TRAFFIC CONES, LIGHT POLES, OR ANY OTHER CITY PROPE | RTY | | |
| Are there any other city materials or personnel requested for the event? Identify below: Ticnic tables, garbage cans | (there may be add | itional costs, |) |
| POLICE | | | |
| Will City Police Officers be requested for the event? Yes No 🛣 | | | |
| · | D 0 | | |
| FINAL DETERMINATION FOR NUMBER OF POLICE OFFICE and UTILIZATION WILL BE AT THE DISCRETION OF THE CIT | | | |

- 1. 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. Additional operational costs of the City, as determined by City Departments, must be paid by the event sponsor at the conclusion of the event. The application fee is due at time of submission and is non-refundable.
- 11. Vendor/participants must also follow all inspection/temporary structure rules found in the appendices (pg 6-7)
- 12. For block parties, sponsors must notify all affected neighbors and local traffic/driveway access must be maintained.

Hold Harmless Agreement

13. 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.

| GO ART! the expenience shall indomnify held have less account lightly for and defend the City |
|--|
| 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, |
| attomey'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 60 ART! (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. |
| 01/18/2024 GO ART! |
| Date: A plante of Event Sponsor. |
| Lyony A. Halloth Executive Director |
| Authorized Signature, Title |
| Gregory A. Hallock |
| Name Printed or Typed |
| The rules and information contained within this application have been read and will be addered to. |
| |
| 011812027 HUGIN /- FULLY |
| Gigniture of Applicant: |
| Places forward this combination to: |
| Please forward this application to: / / /Qity Clerk's Office |
| Attention: Events Applications Department |
| One Batavia City Centre |
| Batavia. New York 14020 |





Official Use Only:

2024-13

City of Batavia Batavia. New York 14020 (585) 345-6300



CITY OF BATAVIA CLERK-TREASURER

Event Application Fee - \$25.00 (non-refundable) (A separate permit must be issued for each item requested) **Event Sponsor** Day and Date of Event Time of Event (don't include set up time here – just actual event time) **Location of Event** Details of Event (be as specific as possible!) Contact Information Primary contact: Secondary contact Name Phone # Mailing address ast Mainstreat atavia E-mail address Steven. Ker Qalow Ymca. org * Events will be posted on the City's website calendar. If there is a website you would like to include that people can visit for more information or registration, if applicable, note website here: <u>alow conformate Cup, or</u> Will there be alcohol at your event? 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 Nο Insurance certificate WILL BE required with Liquor Legal. Will people be allowed to bring alcohol to Yes No the event? Who will be applying to the NYS Liquor Authority for the permit to sell? Is the Sponsor requesting waiver of the Open Container law per §34-7 of the City Code? Yes No 🔲

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.

Page 1 of 7

^{**} 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 | ON (required | d): | | _ | _ | |
|---|----------------------------------|------------------------------|--|---|--|------------------------------|
| Set up date: 7/ | 29/2 | 4 | Set u | ıp time: | ?am_ | |
| Tear down date: | 8/2/2 | 24 | Tear | down time: | mornin | 4 |
| PLEASE LIST ALL | DATES / TIM | ES AND C | ROWD INFORM | ATION BELO | N : | J |
| Date: 8/1/24 | s | tart time: _ | 12:00 p | <u></u> | End time: 10 |):00 pin |
| Estimated crowd size | 1,20 | 0 | # of Vendors | /Displays | 50 Tent | <u>`</u> |
| WILL THE EVENT IN | ICLUDE: | | | | | |
| Block Party: Parade: Run or Walk: Music: Street Closure(s): | Yes U Yes W Yes W Yes W | No A No D No D No D | (MAP OF DESII (MAP OF DESII (SITE DRAWIN (MAP OF CLOS | RED ROUTE MO RED ROUTE MO G OF STAGE O SED STREETS A | MUST BE ATTACHED) UST BE ATTACHED) UST BE ATTACHED) OR DJ LOCATION ATTA | ACHED) |
| Other: Fireworks or Hazard | Yes Ious Material | No □ s? Yes | (MAP OF DESII | • | <i>UST BE ATTACHED)</i> r Amusement Rides? | Yes □ No 🕾 |
| Name of Con | npany Providing Abov | re: | | Company Contact/Rep | presentative | Phone # |
| | Address, Str | eet | | | City | Zip Code |
| Mervill L | Group A | | led/DJ 🔲 - | John Company Contact/Rep | Riter | (SB) 344-332 |
| ZI Masse | Plac Address, Str | eet | | Ba | tavia | 14020 Zip Code |
| CITY SERVICES SUI | PPORT: | | | | 7400.00 | |
| City Code 66-15, | | | | | mitting process, to red City associated with th | |
| FOR EVENTS IN ADDITIONAL G | CITY PARK ARBAGE MU | S, GARBAG IST BE BAG | GE PICK-UP WIL | L BE MADE C OVED FROM | ONLY TO GARBAGE PREMISES BY EVE | CANS ON SITE. NT SPONSOR. |
| ELECTRIC: | | | | | | |
| Will electric be need | ed for the eve | ent? | Yes 🕍 | No 🗆 | | , |
| What will you be pro | viding electri | c to? | Music | Stage | and PA | system |
| Will generators be us | sed? | Yes 🗆 | No X *see S | Special Event | s Inspection 🗸 list f | or compliance* |
| If yes, INC | LUDE SITE [| DRAWING | INDICATING PL | ACEMENT/LC | CATION OF GENER | RATOR |
| SIZE OF GE | NERATOR(S |) | FUEL S | OURCE - GAS | S - 🗆 - DIESEL - 🔾 - | PROPANE - 🗆 |

| TENTS/CANOPIES/POP-UPS: See appendices for compliance checklist – all tents will be inspected ** |
|---|
| 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 No |
| NOTE – Appropriate anchoring is required for all tents, canopies, and popup structures |
| Please list size(s) of Tents/Canopies or other temporary structures erected* Zux16 mobile stage plus dozens of tents of various sizes. |
| 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: Fase of setup. Confestion relief, Safety of participants. |
| List Street(s) and Cross Street(s) that will be affected: Cot Avenue Woshington Avenue & Richmond Avenue |
| Situation be plosed New York Place Cross Streets Street to be closed Street to be closed Cross Streets Street to be closed |
| Will street barricades be requested from the City? Yes No How Many? 10 2-11 with Park |
| Will traffic cones be requested from the City? (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) Goal for Start is to have traffic on Richmend Sealed off |
| by 5:30 so participants feel safe on their way to the 6:00 start. |
| Block parties must allow local traffic and driveways cannot be blocked. Initial here: (if hosting block party) |
| POLICE |
| Will City Police Officers be requested for the event? Yes ✗ No □ |
| If yes, what type of request? Traffic control Security Community Policing Other Security Fants yes ban on Bank St. |
| FINAL DETERMINATION FOR NUMBER OF POLICE OFFICERS and UTILIZATION WILL BE AT THE DISCRETION OF THE CITY. |

- 1. 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. Additional operational costs of the City, as determined by City Departments, must be paid by the event sponsor at the conclusion of the event. The application fee is due at time of submission and is non-refundable.
- 11. Vendor/participants must also follow all inspection/temporary structure rules found in the appendices (pg 6-7)
- 12. For block parties, sponsors must notify all affected neighbors and local traffic/driveway access must be maintained.
- 13. 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 |
|---|
| GOW YMCA, the organizer/sponsor, shall indemnify, hold harmless, assume liability for and defend the Cit |
| 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 o |
| 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 perm |
| issued by the City of Batavia or by any act or omission of the 600 YMCA (Organizer/Sponsor), it |
| 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. |
| 1/29/2024 GGOW YMCA |
| Name of Event Sponsor: |
| 1/1 =01/ 1/1/4//\bullet \bullet |

The rules and information contained within this 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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/29/2024

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 have ADDITIONAL INSURED provisions or be endorsed.

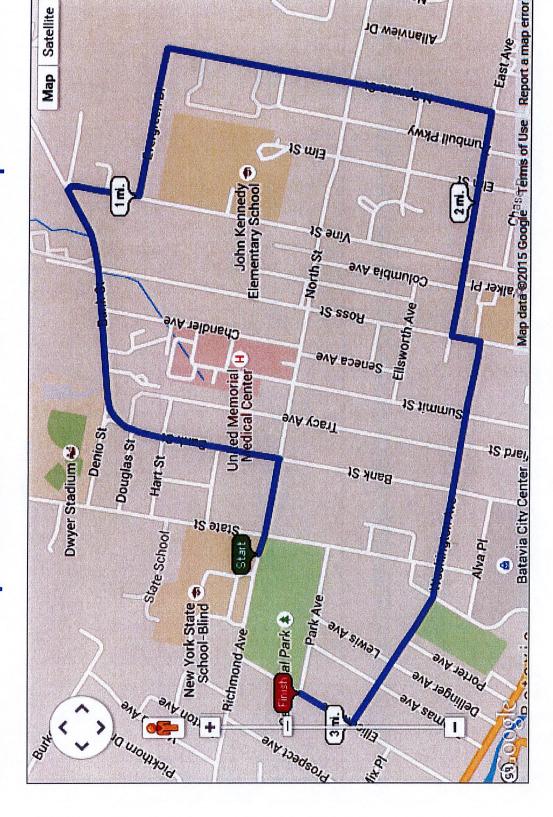
| If SUBROGATION IS WAIVED, subject to the terms and conditions of the po this certificate does not confer rights to the certificate holder in lieu of sucl | | | | | | | | | | | |
|---|---|------|-----|----------------------|---|--|----------------------------|---|-----------------|----------------|--|
| PRODUCER | | | | | | CONTACT Donna Hummel | | | | | |
| Tompkins Insurance Agencies, Inc | | | | | | PHONE (000) 204 2000 | | | | | |
| 90 Main Street | | | | | | (A/C, No, Ext): (A/C, No): (A/C, No): | | | | | |
| 30 Wall Steel | | | | | | ADDRESS: Graning Companies Com | | | | | |
| Batavia NY 14020 | | | | | | INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Indemnity Co | | | | | |
| INSURED | | | | | Manage Comment | | | | | 18058 25011 | |
| GLOW Young Men's Christian Association, Inc. | | | | | INSURER B: Wesco insurance Company INSURER C: | | | | | 23011 | |
| | 209 EAST MAIN STREET | | | | INSURER C : | | | | | | |
| | | | | | INSURER E : | | | | | | |
| BATAVIA | | | | NY 14020 | INSURE | | | | | _ | |
| COVERAGES CER | | | ATE | NUMBER: 23-24 Master | REVISION NUMBER: | | | | | | |
| THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. | | | | | | | | | | | |
| INSR LTR | TYPE OF INSURANCE | INSD | WVD | POLICY NUMBER | | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMIT | | | |
| | COMMERCIAL GENERAL LIABILITY | | | | | | | EACH OCCURRENCE DAMAGE TO RENTED | * | 0,000 | |
| | CLAIMS-MADE X OCCUR | | | | | | | PREMISES (Ea occurrence) | s 100, | | |
| | | | | | | | | MED EXP (Any one person) | \$ 5,00 | 0 | |
| Α | | Y | | PHPK2598266 | | 09/01/2023 | 09/01/2024 | PERSONAL & ADV INJURY | • | 0,000 | |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | 1 | | | GENERAL AGGREGATE | \$ 3,000 | 0,000 | |
| | POLICY PRO- | | | | | | | PRODUCTS - COMP/OP AGG | \$ 3,000 | | |
| | OTHER: | | | | | | | Employee Benefits COMBINED SINGLE LIMIT | | | |
| | AUTOMOBILE LIABILITY | | | | | | | (Ea accident) | \$ 1,000 | 0,000 | |
| | ANY AUTO OWNED SCHEDULED | | | DUDUGEGGGG | ļ | | | BODILY INJURY (Per person) | \$ | | |
| Α | AUTOS ONLY AUTOS | | | PHPK2598266 | İ | 09/01/2023 | 09/01/2024 | BODILY INJURY (Per accident) | <u> </u> | | |
| | HIRED AUTOS ONLY AUTOS ONLY | | | | | ĺ | | PROPERTY DAMAGE (Per accident) | \$ | | |
| | | | | | | | | Underinsured motorist | \$ 1,000 | 0,000 | |
| | WINDERELLA LIAB COCCUR | | | | Ì | | | EACH OCCURRENCE | \$ 5,000 | · | |
| Α | EXCESS LIAB CLAIMS-MADE | | | PHUB880119 | 09/01/2 | 09/01/2023 | 09/01/2024 | AGGREGATE | \$ 5,000 | 0,000 | |
| | DED RETENTION \$ 10,000 | | | | | | | | \$ | | |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | N/A | | | | | | PER OTH- STATUTE ER | | | |
| В | ANY PROPRIETOR/PARTNER/EXECUTIVE | | | WWC3690100 | | 01/01/2024 | 01/01/2025 | E.L. EACH ACCIDENT | s 100,0 | 000 | |
| _ | OFFICER/MEMBER EXCLUDED? (Mandatory in NH) | " | | | i | 0 1/0 1/2024 | 0 110 112020 | E.L. DISEASE - EA EMPLOYEE | \$ 100,0 | | |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | | E.L. DISEASE - POLICY LIMIT | \$ 500,0 | 000 | |
| | Professional Liability | | | | Ī | | Each Incident Limit | \$1,00 | 00,000 | | |
| Α | . Foresterial Electricity | | | PHPK2598266 | ŀ | 09/01/2023 | 09/01/2024 | Aggregate | \$3,00 | 00,000 | |
| DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) | | | | | | | | | | | |
| | | | | | - | - | | ided the cale as earlies with a | | | |
| | Certificate holder is listed as Additional Insured as per written contract and per Endorsement PI GLD HS NY to the extent provided therein regarding the following event: | | | | | | | | | | |
| GI C | | | | | | | | | | | |
| GLC | GLOW Corporate Cup to be held Thursday, August 1, 2024 | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| CERTIFICATE HOLDER CANCELLATION | | | | | | | | · , = · · · · · · · · · · · · · · · · · | | | |
| UEF | TIFICATE FIOLDER | | | <u>-</u> | UNITO | LLATION | | | | | |
| | | | | | | JLD ANY OF TH | E ABOVE DE | SCRIBED POLICIES BE CAN | CELLED | BEFORE | |
| | | | | | | THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN | | | | | |
| | City of Batavia | | | | ACCORDANCE WITH THE POLICY PROVISIONS. | | | | | | |
| One City Centre | | | | | | AUTHORIZED REPRESENTATIVE | | | | | |
| | | | | | | AUTHORIZED REPRESENTATIVE | | | | | |

Tours 5. Byce

Batavia

NY 14020

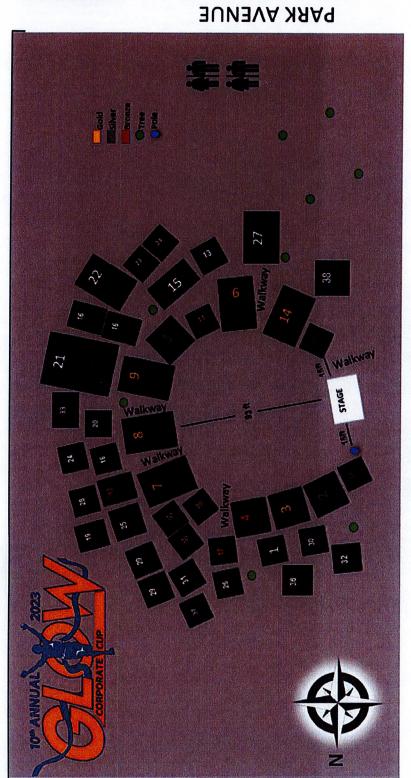
Proposed 5K Course Map - 2024



-neveN



RICHMOND AVENUE



ELLICOTT AVENUE

| 1 Takeform 10x10 | 13 LeRoy Village Green 12x12 25 Massive 12X12 | 25 Massive 12X12 | 37 Western NY Energy 10x10 |
|-------------------------------------|--|------------------------------------|----------------------------|
| 2 Toyota 20x20 S | 14 Liberty Pumps 20x30 G | 26 GCC 10X10 | 38 YMCA |
| 3 Batavia Downs 20x20 G | 15 Batavia City Schools 10x20 | 27 Farm Credit East 20X30 | STAGE 24x16 |
| 4 ARC of Genesee Orleans 20220 B | 16 GVEP (2) 10X20 | 28 Batavia Housing Authority 10x10 | |
| 5 SunGrow 20x20 S | 17 Genesee Patrons 10X10 B | 29 Amada Tool America (2) 12X12 | |
| 6 UMMC 20x30 G | 18 Sharpe Training 10x10 | 30 Genesee Dental 10x10 | |
| 7 Tompkins 20x30 G | 19 Bontrager 10x15 | 31 GCASA 10x10 | |
| 8 Merrill Lynch 20x30 P | 20 GCEDC 10X10 | 32 Person Centered Services 12x12 | |
| 9 Freed Maxick 20x30 G | 21 Genesee County 30X40 | 33 U of R 10X20 | |
| 10 Lawley/TVFCU (3)10x10 G | 22 City of Batavia 20X30 | 34 WBTA 10X10 S | |
| 11 Five Star 10x10 G | 23 Genesee County Chamber (2)10x10 | 35 USGypsum 12X12 S | |
| 12 Crossfit Silver Fox/Oxbo 10x20 B | 24 Agri Business Child Dev. 12x12 36 Fishers 14x14 | 36 Fishers 14x14 | |



(585) 345-6300

PAID

APR - 8 2024

CITY OF BATAVIA CLERK-TREASURER

Official Use Only:

2024—22

Event Application #:

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

| Event Sponsor U Connect Care (formerly GCASA) | | | | | | | | | |
|---|--------|---|----|----------|---------------------------------|--|--|--|--|
| Type of Event Overdose Awareness Day | | | | | | | | | |
| Day and Date of Event Wed. August 28th | | | | | | | | | |
| Fime of Event (don't include set up time here – just actual event time) 3-7 pm | | | | | | | | | |
| Details of Event (be as specific as possible!) A Wareness Event - Speakers, resource tables, live bund in the paylian | | | | | | | | | |
| Contact Information: Primary contact: Name SVE GAGN- Phone # 5.65 - 356-8078 Mailing address 513D East Main St. Batavia E-mail address Sagne & Connect care org Events will be posted on the City's website calendar. If there is a website you would like to include that people can visit for more information or registration, if applicable, note website here: Connect care org | | | | | | | | | |
| Will there be alcohol at your event? Yes | u | | No | Xi | If yes, complete the following: | | | | |
| Type of alcoholic beverage to be served: | Liquor | | | ŕ | Wine ☐ Beer ☐ | | | | |
| Will you be providing alcohol to your group? | Yes | a | No | X | , - | | | | |
| 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 | | No | × | | | | | |
| Who will be applying to the NYS Liquor Authority for the permit to sell? | | | | | | | | | |
| Is the Sponsor requesting waiver of the Open Container law per §34-7 of the City Code? Yes \(\Boxed{1}\) No | | | | | | | | | |

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.

Page 1 of 7

City of Batavia 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 INFORMATION (required): |
|---|
| Set up date: Wed. Aug 28, 2024 Set up time: 1 Pm |
| Tear down date: Wed. Aug 28, 2024 Tear down time: 730 pm |
| PLEASE LIST ALL DATES / TIMES AND CROWD INFORMATION BELOW: |
| Date: $8.28.34$ Start time: $3\rho m$ End time: $7\rho m$ |
| Estimated crowd size: # of Vendors/Displays |
| WILL THE EVENT INCLUDE: |
| Block Party: Yes No (MAP OF STREET CLOSURE MUST BE ATTACHED) 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 (MAP OF DESIRED ROUTE MUST BE ATTACHED) |
| Fireworks or Hazardous Materials? Yes 🔲 No 😰 Carnival or Amusement Rides? Yes 🔲 No 🛄 |
| Name of Company Providing Above: Company Contact/Representative Phone # |
| Address, Street City Zip Code |
| Music: Live Group 🖫 Recorded/DJ 🛄 |
| Groove Neil Gagne 585 750-3428 |
| Name of Company Providing Above: Company Contact/Reglesentative Phone # 5509 HWSeS Wil LK Rd BUTANA 14020 Address, Street City Zip Code |
| CITY SERVICES SUPPORT: |
| City Code 66-15, D-2 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? MUSIC EQUIPMENT /PA System for speakers |
| Will generators be used? Yes D No D *see Special Events Inspection * list for compliance* If yes, INCLUDE SITE DRAWING INDICATING PLACEMENT/LOCATION OF GENERATOR |
| SIZE OF GENERATOR(S) FUEL SOURCE - GAS - 🗆 - DIESEL - 🗘 - PROPANE - 🗘 |
| Page 2 of 7 City of Batavia Event Application |

| TENTS/CANOPIES/POP-UPS: See appendices for compliance checklist – all tents will be inspected ** |
|---|
| 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 □ |
| NOTE – Appropriate anchoring is required for all tents, canopies, and pop- up structures |
| Please list size(s) of Tents/Canopies or other temporary structures erected* 10 X15 - Standard Sixes |
| 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 |
| 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) |
| Block parties must allow local traffic and driveways cannot be blocked. Initial here: (if hosting block party) |
| POLICE |
| Will City Police Officers be requested for the event? Yes ☐ No ☐ |
| If yes, what type of request? Traffic control ☐ Security ☐ Community Policing ☐ Other ☐: Specify |
| FINAL DETERMINATION FOR NUMBER OF POLICE OFFICERS and UTILIZATION WILL BE AT THE DISCRETION OF THE CITY. |

Page 3 of 7 City of Batavia Event Application

PLEASE NOTE:

- 1. 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/Alteys 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
- 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. Additional operational costs of the City, as determined by City Departments, must be paid by the event sponsor at the conclusion of the event. The application fee is due at time of submission and is non-refundable.
- 11. Vendor/participants must also follow all inspection/temporary structure rules found in the appendices (pg 6-7)
- 12. For block parties, sponsors must notify all affected neighbors and local traffic/driveway access must be maintained.

Hold Harmless Agreement

13. 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.

| attorney's fees, court costs, and all other sum become obligated to pay on account of any an- arising or alleged to have arisen out of the activ- issued by the City of Batavia or by any ac- | onsor, shall indemnify, hold harmless, assume liability for and defend the City from any and all damages, costs and expenses including but not limited to, as which the City of Batavia its employees, officers and agents may pay or devery demand, claim or assertion of liability, or any claim founded thereon, vities described in this special event application and sanctioned by the permit or omission of the | | | | |
|--|--|--|--|--|--|
| 3/14/2024 | UConnectCare | | | | |
| Date: | Neme of Event Sponsor: | | | | |
| | Director of Grants Management | | | | |
| • | Authorized Signature, Title | | | | |
| | any Kasel | | | | |
| • | Name - Printed or Typed | | | | |
| The rules and information contained within this | application have been read and will be adhered to. | | | | |
| 3.14.24 | Luc Hane | | | | |
| Dete: | Signature of Applicant: | | | | |
| Please forward this application to: | City Clarit's Office | | | | |
| > L | Attention: Events Applications Department | | | | |
| | One Batavia City Centre | | | | |
| | Batavia, New York 14020 | | | | |
| | | | | | |

Page 4 of 7
City of Batavia Event Application



Official Use Only:

2024-11

City of Balaria Balaria, New York 14020 1585] 345-6300



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

| Event Sponsor ALZHEIMER' | s A | SSC | C. | AT | ion WNY |
|--|---------------------------------|---------------------|-------------|---------------------------|--|
| Type of Event WALK TO E | ND_ | Α | 12 | he | imer's - SEPTEMBER 14th 2024 Saturday |
| Day and Date of Event Saturdo | | | | | |
| Time of Event (don't include set up time here - ju | | | | | <u> </u> |
| Location of Event Centenni | | | | | |
| Details of Event (be as specific as possible!) | Wa @ | 11< Ce | · | <u>ا.</u> دىم | 5-2 mile with event |
| Tents, Stuge, refrushm | ents | 1 | Por | +~ | Pottes 300-500 people |
| Contact Information: Primary contact: Name Lynn Hught S Phone # 71 b - 870 - 820 b Mailing address 6400 Sheridan Drick Sur E-mail address 15ught S@ 12.00 * Events will be posted on the City's website cale for more information or registration, if applicable, | Anhus My 142: ndar. If | ا العام there | ьнь is a | Li She Iwes webs | contact: I we steat the westeat the standard of the steat the standard suite 326 Annherst wy 14221 I to the standard s |
| Will there be alcohol at your event? Yes | | | No | X | 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 | X | |
| Will you be selling alcohol to your group? | Yes | a | No | × | 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 Authority | y for the | perm | nit to | sell? | N/A |
| Is the Sponsor requesting waiver of the Open C | ontainer | law | per { | §34-7 | of the City Code? Yes 🗆 No 🔀 |

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.

Page 1 of 7

City of Batavia 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 INFORMATION | (required): | | | |
|--|--|--|---|---------------------|
| Set up date: Friday Tear down date: ? | Sept 13th | Set up time: | 8 Am - 4pm | |
| Tear down date: | TBD | Tear down time: | TBO | |
| PLEASE LIST ALL DAT | ES / TIMES AND CR | OWD INFORMATION BE | LOW: | |
| Date: 9/14/2024 | 4 Start time: | 9 Am | End time: <u>Ιρ</u> | m |
| Estimated crowd size: | 300 - 500 | # of Vendors/Displays _ | 10 | |
| WILL THE EVENT INCL | .UDE: | • | | |
| Parade: Ye Run or Walk: Ye Music: Ye Street Closure(s): Ye | es No XI es No XI es XI No es XI No es XI No es No XI es No XI es No XI es XI No | (MAP OF DESIRED ROUT) (MAP OF DESIRED ROUT) (SITE DRAWING OF STAGE | E MUST BE ATTACHED) GE OR DJ LOCATION ATTAC TS AND DROP LOCATION (| • |
| Fireworks or Hazardous | s Materials? Yes | ☐ No ☐ Carniv | al or Amusement Rides? | Yes 🗓 No 🗷 |
| Name of Company | / Providing Above: | Company Conta | ct/Representative | Phone # |
| | roup 🔲 Recorde | asudi, 90 @ra | oly buthester.er.com (|) |
| | n /c | сотрану соща | cVRepresentative . | Phone # |
| | Address, Street | | City | Zip Code |
| CITY SERVICES SUPPO | ORT: | | | |
| City Code 66-15, D-: FOR EVENTS IN CIT ADDITIONAL GARE | to pay for addition TY PARKS, GARBAG | onal operational costs of t E PICK-UP WILL BE MAD | permitting process, to require the City associated with the DE ONLY TO GARBAGE COM PREMISES BY EVEN | event. ANS ON SITE. |
| ELECTRIC: | | | · | |
| Will electric be needed t | for the event? | Yes X No 🗆 | | |
| What will you be providi | ing electric to? | Sound System | + Microphi | yıı |
| Will generators be used | 7 Yes 🗋 N | √o >see Special Ev | ents Inspection 🗸 list for | compliance* |
| If yes, INCLUD | DE SITE DRAWING IN | IDICATING PLACEMENT | /LOCATION OF GENERA | TOR |
| SIZE OF GENER | RATOR(S) | FUEL SOURCE - (| GAS - 🛛 - DIESEL - 🔾 - P | ROPANE - 🗆 |

Page 2 of 7 City of Batavia Event Application

| TENTS/CANOPIES/POP-UPS: See appendices for compliance checklist – all tents will | be inspected ** |
|--|------------------------------------|
| 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 💆 |
| NOTE – Appropriate anchoring is required for all tents, canopies, and popup structures | |
| Please list size(s) of Tents/Canopies or other temporary structures erected* | |
| See attach 2023 Tents/To | ables / chair a Stuse |
| See attach 2023 Tents/To new vendor being (RFP) 2024 | |
| ANCHORING INTO PAVEMENT IS PROHIBITE | |
| 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 AL | DVANCE 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 Street | |
| & | |
| 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 | w Many? |
| Will traffic cones be requested from the City? Yes No Do How (Drop off locations of requested items must be identified on the site dr | w Many? <u>24</u> ewing) |
| BANNERS / SIGNS OR OTHER DECORATIONS ARE NOT TO BE ATTACHE TO STREET BARRICADES, TRAFFIC CONES, LIGHT POLES, OR ANY OTHER CITY | |
| | |
| Are there any other city materials or personnel requested for the event? Identify below | W: (there may be additional costs) |
| | |
| Block parties must allow local traffic and driveways cannot be blocked. Initial he | ere: (if hosting block party) |
| | (in reduing block party) |
| POLICE | |
| Will City Police Officers be requested for the event? Yes 💥 No 🗖 | |
| | ining [] |
| If yes, what type of request? Traffic control Security Community Politorer Control For Walk Ro | |
| | |
| FINAL DETERMINATION FOR NUMBER OF POLICE OF and UTILIZATION WILL BE AT THE DISCRETION OF TH | |
| and UTILIZATION WILL DE AT THE DISCRETION OF TH | IE OIT. |

Page 3 of 7 City of Batavia Event Application

PLEASE NOTE:

- 1. 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 V June Comme
- 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 Compiled With At All Times And In All Regards
- 9. No paint or other markings may be placed on the street surface.
- 10. Additional operational costs of the City, as determined by City Departments, must be paid by the event sponsor at the conclusion of the event. The application fee is due at time of submission and is non-refundable.
- 11. Vendor/participants must also follow all inspection/temporary structure rules found in the appendices (pg 6-7)
- 12. For block parties, sponsors must notify all affected neighbors and local traffic/driveway access must be maintained.
- 13. 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

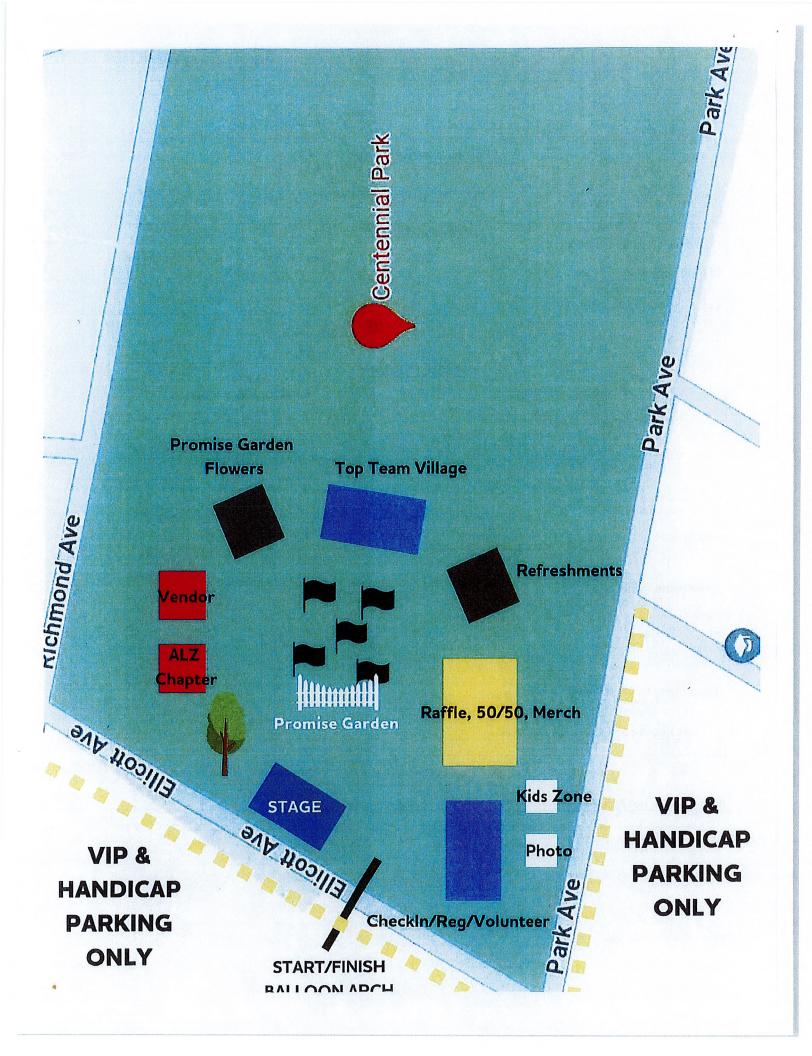
| of Batavia, its employees, officers and age | r/sponsor, shall indemnify, hold harmless, assume liability for and defend the City ents from any and all damages, costs and expenses including but not limited to, |
|---|---|
| | sums which the City of Batavia its employees, officers and agents may pay or y 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 |
| | act or omission of the ALZHEIMER'S Assoc Way (Organizer/Sponsor), its |
| members, agents, employees, volunteers sanctioned by the issuance of a special ev | , officers, or directors in relation to activities described in this application and ent permit. |
| 1/2/2024 | ALTHEIMER'S ASSOC. Why Walk TO END ALZ |
| Dale: | Name of Event Sponsor: |
| | Lynnuestrett, Sr Dinich of Denelopment Lynn. Westcott |
| | Lynn. Westcott |
| | Name Printed or Typed |
| | this application have been read and will be adhered to. |
| // 2 / d o d \/ Dels: | Signature of Applicant: |
| Please forward this application to: | City Clerk's Office |

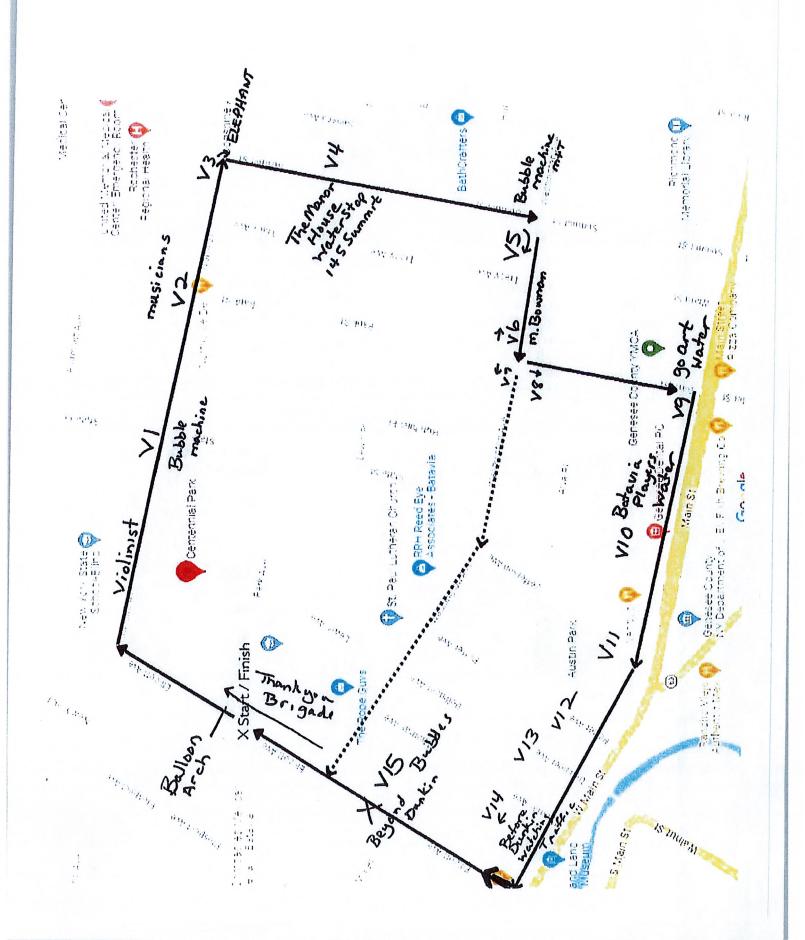
Attention: Events Applications Department

One Batavia City Centre Batavia, New York 14020

Page 4 of 7
City of Batavia Event Application

ALZHEIMER'S ASSOC





STERLING TENTS & AWNINGS 150 Pearl St. Batavia, NY 14020 585-343-3726 585-343-4999 (FAX)

2023



www.sterlingtents.com

ALZHEIMER'S RENTED EQUIPMENT AT CENTENNIAL PARK SEPTEMBER 16, 2023

| 1-20x40 Tents w/2 sides | @ | \$ 525.00 each |
|-------------------------------------|------------|----------------|
| 2-20x30 Tents w/2 sides | @ | \$ 465.00 each |
| 220x20 Tents w/2 sides | @ | \$ 410.00 each |
| 3-15x15 Tents w/2 sides | @ | \$ 255.00 each |
| 1-8x8 Stage (under 15x15 near power | er source) | \$ 115.00 |
| 40-8' Banquet Tables | @ 1 | 1.25 each |
| 80-Brown Wood Chairs | @ 1. | 60 each |

The table & chair prices include the delivery and pick up, but not the set up or takedown. That is the responsibility of the customer or caterer



Phone: 585-345-6313

www.batavianewyork.com

Fax: 585-343-9221



Memorandum

To: Rachael Tabelski, City Manager

From: Lisa Neary, Deputy Director of Finance

Date: April 8, 2024

Subject: Audit Advisory Board

As part of the City of Batavia's audit process, the City appoints three city residents and councilmembers to the Audit Advisory Board for the purpose of reviewing the City's financial audit and to provide recommendations to the council as the Board sees fit.

Our three City residents were appointed in 2022 for a term that expires after the audit of the fiscal year ending March 31, 2024. This year three Councilmembers requested to serve for the current one year term that expires after the audit of the fiscal year ending March 31, 2024; Councilmember Bialkowski, Councilmember Richmond and Councilmember Schmidt.

Attached is a resolution to appoint the Audit Advisory Board.

Please let me know if you have any questions.

#-2024 A RESOLUTION TO APPOINT MEMBERS TO VARIOUS CITY COMMITTEES/ BOARDS

Motion of Councilmember

WHEREAS, certain vacancies exist on various City Committees/Boards; and

NOW, THEREFORE, BE IT RESOLVED, by the Council of the City of Batavia that the following appointments be made:

| Audit | Ad | vis | ory | В | oar | ď |
|-------|----|-----|-----|---|-----|---|
| | | | | | | |

Nicholas Harris Marc Staley

Paul Battaglia

Councilmembers:

F. Robert Bialkowski Richard Richmond

Tammy Schmidt

Seconded by Councilmember and on roll call

For the audit years ending 3/31:

2022 **- 2024** 2022 **- 2024**

2022 - 2024

For the audit year ending 3/31:

2024 2024

2024



Phone: 585-345-6305

www.batavianewyork.com

Fax: 585-343-9221



Memorandum

To: Rachael Tabelski, City Manager

From: Heidi J. Parker, Clerk-Treasurer

Date: April 10, 2024

Subject: Appointments to Board of Assessment Review (BAR)

Currently, there are two vacancies on the Board of Assessment Review (BAR).

Dwight Thornton applied to be reappointed however he had already served two terms. Mr. Thornton had to wait three months and there were no other applicants to take his position. His term expired on September 30, 2023 and he can be re-appointed.

A second qualified applicant applied. Pier Cipollone is a local resident, former councilmember, and Batavia Development Corporation President.

Both applications were sent to Councilmembers Briggs and Schmidt for review and approval to be considered at the next conference agenda. Both applicants currently reside in the City of Batavia.

It is recommended that Council approve the reappointment of Dwight Thornton and appointment of Pier Cipollone to the Board of Assessment Review until September 30, 2028.

#XX-2024 RESOLUTION TO APPOINT MEMBERS TO VARIOUS CITY COMMITTEES/ BOARDS

Motion of Councilmember

WHEREAS, certain vacancies exist on various City Committees/Boards.

NOW, THEREFORE, BE IT RESOLVED, by the Council of the City of Batavia that the following appointments be made:

Board of Assessment Review (BAR)

Dwight Thornton September 30, 2028

Pier Cipollone September 30, 2028

Seconded by Councilmember and on roll call



Phone: 585-345-6325

www.batavianewyork.com

Fax: 585-343-1385



Memorandum

To: Rachael Tabelski – City Manager

From: Scott Allen - Supt. of Maintenance

Date: March 20, 2024

Subject: Tree Trimming and Removal Bid

Please be advised that the City has received bids for Tree Trimming and Removal #2024-05. Bids were publicly opened on March 18 at 11:00 AM at City Hall.

Four bids were received. The lowest responsible bidder is The Tree Doctor Inc. of Clarence, NY. For the sum of \$39,600.00

This project is a unit price contract for annual trimming and removal of City trees as budgeted in the FY24/25 City Budget. The City has budgeted \$31,500 for tree trimming and removal and will maintain expenses inside the approved budget.

The term of the contract expires on March 31, 2025. The contract has a provision for two, one-year extensions if mutually agreed upon by the contractor and the City, so the contract can be extended to March 31, 2027.

I recommend selecting The Tree Doctor Inc., of Clarence, NY for the tree trimming and removal contract for \$39,600.

#XX-2024 A RESOLUTION TO ENTER INTO AN AGREEMENT WITH THE TREE DOCTOR INC. FOR THE TRIMMING AND REMOVAL OF CITY TREES CONTRACT #2024-05

Motion of Councilmember

WHEREAS, Tree trimming and removal services funded in Fiscal year 2024/2025 City Budget; and

WHEREAS, a competitive bid was made by The Tree Doctor Inc. of Clarence, NY to provide services as specified in the contract document titled Trimming & Removal of City Tree #2024-05 for the sum of \$39,600.00; and

WHEREAS, there were four (4) bidders and the Tree Doctor Inc. is the lowest responsible bidder; and

WHEREAS, The Tree Doctor Inc. and the City may mutually agree to extend this contract for two one-year terms as provided in the contract documents; and

NOW, THEREFORE, BE IT RESOLVED, by the City Council of the City of Batavia that the City Council President is hereby authorized on behalf of the City to execute an agreement with The Tree Doctor Inc. for the annual service of Trimming & Removal of City Trees and two one-year extensions if mutually agreed upon.

Seconded by Councilmember and on the roll call



Tree Trimming & Removal March 18, 2024 @ 11:00 A.M.

BID #2024-05

| Bid Amount | D 10,090,00 | B 42,700,00 | \$ 39, 600.00 | \$ 40, 150,00 | | | |
|------------|--------------------|------------------------|---------------|-------------------|--|--|--|
| Company | Terry Tree Service | High Fallstree Service | | AJ's Tree Service | | | |

Received by: KUNUUM

Witnessed by: But I'll

CITY OF BATAVIA, NY BID #2024-05 FOR: TREE TRIMMING & REMOVAL **MARCH 18, 2024** @ 11:00 A.M. **COMPANY NAME/ADDRESS/** PHONE /FAX NUMBERS/EMAIL **CONTACT PERSON** Phone: Email: Sgardner ra Terry Tree. com Phone: Fax: treedoctor consulting. con Email: 14031 Phone: 1585 @ highFalls.com Email: Dan. Phone: 716-708-1282 Email: Sche as shee Source, com Phone: Fax: Email: Phone: Fax: Email: Phone: Fax: Email: Phone: Fax: Email:

SECTION 300. PROPOSAL (UNIT PRICE BASIS)

TO: CITY OF BATAVIA BATAVIA, NEW YORK

The undersigned, in compliance with the invitation for bids for the

TRIMMING AND REMOVAL OF TREES THROUGHOUT THE CITY OF BATAVIA, NEW YORK (BID # 2024-05)

declares that he has examined the Plans and Specifications with related documents and the site of the proposed work, has read and comprehends all of the provisions of the Plans, Specifications, and Contract Documents, and is aware of all the requirements of the work in a sufficient manner to submit a valid bid, and being familiar with all of the conditions surrounding the construction of the proposed project, hereby proposes to furnish all labor, materials, supplies, tools, and equipment and to perform the work in accordance with the Contract Documents.

In submitting this bid the undersigned declares that said bid has been arrived at by the bidder independently and has been submitted without collusion with any other vendor of materials, supplies, or equipment of the type described in the invitation for bids and the contents of the bid have not been communicated by the bidder or its surety on any bond furnished herewith prior to the official opening of the bid.

The undersigned certifies that he has authority for the company to sign this bid proposal. $i \in \mathcal{C}_{k}^{(k)}$

The undersigned agrees that if awarded the contract he will:

- 1) Commence work under this Contract on or before a date to be specified in a written Notice to Proceed from the City of Batavia to provide regular or emergency trimming or removal work as needed throughout the Contract period, which extends through March 31, 2025. (NOTE: See Section 700.2 Term for contract extension for up to two (2) additional years.) Emergency work for this contract is defined as the removal of a tree or limbs that pose an immediate threat to life or property. This would involve only one or a small number of trees. It is not intended to include more extensive work such as major damage caused by wind or ice storm, which would be subject to negotiation for hourly rates, and the City would reserve the right to utilize other contractors in lieu of or in addition to the contractor awarded the contract referenced herein. The undersigned also agrees to pay for each consecutive calendar day thereafter as provided in Section 247 of the Information and General Conditions.
- Abide by the New York State Department of Labor laws regarding payment of prevailing wages. Payroll records may be requested by the City to verify compliance.
- 3) Perform said work described in the Specifications and shown on the Plans for the unit prices as shown on the Schedule of Bid Items. The City may delete or add specific tree removals and/or trimmings in order to meet budget restrictions or availability of

funds.

4) The undersigned agrees to accept the aforesaid unit bid prices in compensation for any additions or deductions caused by variation in quantities due to more accurate measurement or by any changes or alterations in the Plans or Specifications of the work and for use in the computation of the value of the work performed for monthly estimates.

Chris Nicastro

Printed Name

The Tree Doctor

Company Name

4752 Shisler Rd.

Address

Clarence NY 14031 City, State, Zip

THE FOLLOWING DOCUMENTATION SHALL BE COMPLETED/FURNISHED BY EACH BIDDER AND SUBMITTED WITH THE PROPOSAL AT TIME OF BID OPENING.

Whether or not he/she is now or ever has been engaged in any work similar to that a. covered by the Specifications herein.

The Tree Doctor was awarded and completed this bid in the past.

b. The years in which such work was performed.

2018-2020

Such other information that will show the Bidder's ability to carry out the required work c. and to secure adequate financing for carrying out all responsibilities required by these Specifications.

We are a full skrvice tree care company with over 2,000 regular clients.

d. A list of equipment and personnel proposed for use in the performance of this Contract.

1. A list of equipment and personner proposed for disc in more

2 - 90' Spider lifts.

3 - Track machine | loaders

1 - 2750 Stump gindr

Multiple trucks + trailers for transport

Full Staff

A history of performance of similar work with other clients

A history of performance of similar work with other clients, including names, telephone, and address of contact reference persons - provide four (4) minimum.

Neil Marzot - Town of Davien (716) 474-3595, Jack Feltz - National Grid (716) 867-3097 Mike Arhstrong - Stefford Country Club (585)301-6218 Scott Dodson - Park Country Club (716)818-1126

(Attach addition sheets, information, or documents as necessary and identify to which statement it corresponds.)

SECTION 300. QUESTIONNAIRE FORM FOR CITY CONTRACT NO. 2024-05 (TO BE FILLED IN BY BIDDER AND PRESENTED WITH BID PROPOSAL)

| ANSWER IS NO, I KEN. | ATTENTATTE | YANDEX | ONS? YES PLAIN EACI | I EXCEPTION |
|-------------------------|---|----------|------------------------|-------------|
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| | *************************************** | | | · |
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| | | | | |

| One thousand | nine | hundred | ninety | dollars | 100 | \$ 1,990. | 03 |
|--------------|------|---------|--------|---------|-----|--------------------|-----------|
| | | | - 1 | | | THE REAL PROPERTY. | THE COLOR |

payable to the City of Batavia, New York. In case this Proposal is accepted by the City of Batavia, New York and the undersigned fails to execute the Contract in conformity with the Contract Documents and furnish bond, as specified therein, within ten (10) days after notification of the Award of Contract, then the monies represented by such bid bond or certified check shall be regarded as liquidated damages and shall be forfeited and become the property of the City of Batavia, New York.

The undersigned agrees that this bid shall be good and may not be withdrawn for a period of at least thirty (30) calendar days after the scheduled closing time of receiving bids.

| Dated:_ | 3 | 18 | 24 | |
|---------|---|----|----|--|
| | | | | The Tree Doctor, Inc. |
| | | | | Legal Name of Business |
| | | | | Signature: |
| | | | | Chris Nicastro Name (Printed or Typed) |
| | | | | Manager Salesman |

Contractor Mailing Address:

4752 Ghisler Rd Clarence, NY 14031

If a Corporation

| deff Phalps | , Presiden |
|-------------|-------------|
| | , Secretary |
| | , Treasure |

NON-COLLUSIVE BIDDING CERTIFICATION

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of knowledge and belief:

(1) The prices in this bid have been arrived at independently without collusion, consultation, communication, or agreement for the purpose of restricting competition, as to any matter relating

to such prices with any other bidder or with any competitor;

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

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

competition.

The herein certification is made pursuant to General Municipal Law, Section 103-d (Ch. 675 Taxxe of 1966)

| 073, Laws of 1900). | |
|---|--|
| (For Use by Indi | viduals and Partnerships) |
| The undersigned, | , being the individual or partner a, affirms that the foregoing certification is true, |
| | |
| Date | Signature |
| Any bid herein made to the City of E services performed or to be performed, or go required and where such bid contains the cer to have been authorized by the Board of Dirauthorization shall be deemed to include the therein of the certificate as to non-collusion The herein certificate is made pursua 675, Laws of 1966). | nt to General Municipal Law, Section 103-d (Ch, being an officer of the corporate bidder, affirms that the foregoing statement and . |
| (SEAL OF THE CORPORATION) | The Tree Doctor |
| | Corporate Bidder |
| | By Jeff Phelps |
| | By <u>Jeff Phelps</u> Title <u>President</u> |
| | Date 3 18 24 |

SCHEDULE OF BID ITEMS BID # 2024-05 TRIMMING & REMOVAL OF CITY TREES

| | 1 | T | T | | ~ | |
|-------------|-----------------------|------|----------------------------------|---|------------|-------------------|
| ITEM NO. | APPROX QTY. (*) | UNIT | DESCRIPTION (Diameter) | <u>UNIT BID PRI</u> WRITTEN WORDS | CE FIG. | TOTAL AMT. BID |
| 1 | 2 | EA. | Tree Removal 12.0-15.0 Inches | Two hundred+ 00 | 200 | 400 |
| 2 | 2 | EA. | Tree Removal 15.1-18.5 Inches | Five hundred fifty + 00 | 550 | 1100 |
| 3 | 8 | EA. | Tree Removal 18.6-24.5 Inches | Eight hundred + 00 | 800 | 6400 |
| 4 | 7 | EA. | Tree Removal 24.6-30.5 Inches | One thousand - 100 | 1000 | 7000 |
| 5 | 6 | EA. | Tree Removal 30.6-36.5 Inches | one thousand two hundred fifty + 00 100 | 1250 | 7500 |
| 6 | 2 | EA. | Tree Removal 36.6-42.5 Inches | Two thousand two Nundred + 00 | 2200 | 4400 |
| 7 | 2 | EA. | Tree Removal 42.6-48.5 Inches | Two thousand three hundred + | 2300 | 4600 |
| 8 | 2 | EA. | Tree Removal over 48.6 Inches | Three thousand two Nundred + 00 | 3200 | 6400 |
| 9 | 12 | EA. | Tree Trimming | one hundred fifty 4 00 | 150 | 1800 |

Notes:

(*) The City may add additional trees in the Notice to Proceed as well as throughout the contract period, which extends through March 31, 2025 (w/two-year extension). Actual quantities have not been determined but its estimated value of work is approximate \$ 30,000.

| GRAND TOTAL ALL BID ITEMS 1 - 6 | |
|--|---------------------|
| (WRITTEN WORDS) Thirty nine thousand six hundred and 100 | (FIGURES) 39,600.00 |

SECTION 400. CONTRACT

| THIS AGREEMENT, mad | e this the | day of_ | | 2024, |
|---|------------------|--|---------------------|-------------------|
| by and between the CITY OF BAT | AVIA, hereina | after referred to | as the City and | |
| The Tree D | octor : | Inc. | | , an |
| individual, a partnership, or a corp | oration (cross o | out two that dor | ot apply) of the | |
| Town of C | lavence | , County of | Erie | and State |
| of New York hereinafter ca | | | | |
| WITNESSETH: that i | for and in cons | ideration of the | payments and agreer | nents |
| hereinafter mentioned, to be made a the City to commence and complet follows: | and performed | by the City, the | Contractor hereby a | orees with |
| | | | THROUGHOUT | • |
| <u>C</u> | IIY OF BAT | AVIA, NEW Y | <u>ORK</u> | |
| eng amang an antang ang manang ang ang ang ang ang ang ang ang an | | TO COLO DO SERVICIO DE LA COLO DE | hereinaf | <u>ter</u> called |
| the Project, for the sum of: | rty nine | thousand | six hundred | |
| the Project, for the sum of: This | | Dollars \$ | 39,600.00 | |
| | | | | |

and all extra work in connection therewith, under the terms as stated in the Information and General Conditions of Contract; and at his (its or their) own proper cost and expense to furnish all the materials, supplies, machinery, equipment, tools, superintendence, labor, insurance, and other accessories and services necessary to complete the said project in accordance with the conditions and prices stated in the Proposal, Information and General Conditions, Specifications, Supplemental General Conditions, and Special Conditions of the Contract, the plans, which include all maps, plats, prints, and other drawings and printed or written explanatory matter thereof; as prepared by the Director of Public Works/City Engineer, all of which are made a part hereof and collectively evidence and constitute the contract.

The Contractor herby agrees to commence work under this contract in a written Notice to Proceed from the City to be available for regular or emergency trimming or removal work as needed throughout the contract period, which extends through March 31, 2027. (NOTE: See Section 700.2 Term for Contract extension for up to two (2) additional years.) The Contractor further agrees to pay, as liquidated damages, the sum for each consecutive calendar day thereafter as hereinafter provided in Section 247 of the Information and General Conditions.

The City agrees to pay the Contractor for the performance of the contract, subject to additions and deductions, in accordance with and subject to the provisions embodied in the documents made a part of this contract.

IN WITNESS WHEREOF, this contract has been executed by the City, acting by and through the Council President, and the Contractor has duly executed this agreement on the day and year written above.

Assistance of the brancount and which is

| | By: President, City Council | |
|--------|--|-----|
| | (Affix corporate seal(L of Contractor, if a corporation) | S.) |
| | By: Fresident | |
| | ACKNOWLEDGMENT BY CO-PARTNERSHIP CONTRACTOR | |
| | STATE OF NEW YORK) | |
| | County of E(le) | |
| | On this 3 day of March, 20 34, before me person came and appeared Jeffrey Phalps, to me known and known to me to be | ре |
| | the person who executed the above instrument, who, being duly sworn by me, did for himself depose and say that he is a member of the firm of | • |
| | the Tree Socio Inc., consisting of himself and | |
| | the foregoing instrument in the firm name of | ted |
| | and that he ha | ad |
| | authority to sign same, and he did duly acknowledge to me that he executed the same as the ac | |
| | and deed of said firm of | |
| thetre | e Dondo-Tucfor the uses and purposes mentioned therein. | |
| | ANDREA WINNEY Notary Public, State of New York No. 01W6138082 Qualified in Erie County My Comm. Expires December 12, 2025 Notary Public | nou |

ACKNOWLEDGMENT BY INDIVIDUAL CONTRACTOR

| STATE OF NEW YORK) | | |
|--|-------------------------|----------------------------|
| County of) | | |
| On this day of | ,20 | , before me |
| personally came | | to me known and |
| known to me to be the person described in, and | who executed the foreg | oing instrument and |
| severally acknowledged that he executed the sa | me. | |
| | | |
| | | |
| | Note | ary Public |
| | | |
| | | |
| ACKNOWLEDGMENT BY CON | NTRACTOR, IF A COF | <u>RPORATION</u> |
| STATE OF NEW YORK) | | |
| County of Live) | | |
| On this $\sqrt{3}$ day of $\sqrt{4}$ | , 20_ 2 k | , before me |
| On this 13 day of March personally came Jelly Phalps | to me kno | own, who being duly |
| sworn, did depose and say that he is the $_$ | When | |
| of the Tree Doctor Inc | 4 | The |
| corporation described in and which executed th | e foregoing instrument; | that he knew the seal of |
| said corporation; that the seal affixed to said in | strument was such corp | orate seal; that it was so |
| affixed by the order of the Board of Directors o | f said corporation, and | that he signed his name |
| thereto by like order. | | |
| | N | |
| ANDREA WINNEY | | 1 1 - |
| Notary Public, State of New York No. 01W6138062 Qualified in Erie County | Mhdre | e Winney |
| My Comm. Expires December 12, 20_2 | Not | tary Public |

SECTION 500 - CERTIFICATE OF CITY ATTORNEY

I, <u>George Van Nest</u>, the duly authorized and acting legal representative of the City of Batavia do hereby certify as follows:

I have examined the foregoing contract and surety bonds and the manner of execution thereof, and I am of the opinion that each of the aforesaid agreements appears to have been duly executed by the proper parties thereto acting through their duly authorized representatives; that said representatives by signing, represent that they have full power and authority to execute said agreements on behalf of the respective parties named thereon; and that the foregoing agreements constitute valid and legally bind obligations upon the parties executing the same in accordance with terms, conditions, and provisions thereof.

| Dated: | |
|-------------|--|
| | |
| (Signature) | |

| HOLD DOCUMENT UP TO THE LIGHT TO VIEW TRUE WATERMARK M&T Bank Buffalo, NY 14240 | FICIAL CHECK | HOLD DOCUMENT UP TO THE LIGHT TO VIEW 103066 | TRUE WATERMARK 6720 - 2 |
|---|--------------------|--|-----------------------------------|
| THE TREE DOCTOR INC | DATE | 03/14/2024 | Security Features Delais on Backs |
| PAY TO THE ORDER OF CITY OF BATAVIA | | \$1,990.00 | Back. |
| ***ONE THOUSAND NINE HUNDRED NINETY and | 00/100***USDollars | | |
| #63 - Clarence | (| Judish a May | THORIZEO SIGNATURE |



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/13/2024

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(les) must have ADDITIONAL INSURED provisions or 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).

| PROI | DUCER | | | | PHONE (585)591-3910 (A/C, No): (585)591-3911 | | | | | |
|---------------------------------------|--|--------------|-------|---|--|---|------------------------|---|---------------------------|-----------|
| AC. | Associates of NY Inc | | | | PARTIE TO STATE OF THE STATE OF | | | | 91-3917 | |
| 111 | 98 Alexander Rd | | | | E-MAIL ADDRESS: iphelps@acins.agency | | | | | |
| | | | | | INSURER(S) AFFORDING COVERAGE | | | | | NAIC # |
| Attic | za | | | NY 14011 | | RA : Erie Ins | | | | 26263 |
| INSU | RED | | | | INSURE | RB: New Yo | rk State Insu | rance Fund | | |
| | The Tree Doctor Inc | | | | INSURE | RC: | | | | |
| | 4752 Shisler Rd | | | | INSURE | RD: | | | | |
| | | | | | INSURE | RE: | | | | |
| | Clarence | | | NY 14031-2127 | INSURE | RF: | | ···· | | |
| CO | /ERAGES CER | TIFIC | ATE | NUMBER: | | | | REVISION NUMBER: | | |
| IN | IS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RECRTIFICATE MAY BE ISSUED OR MAY COLUSIONS AND CONDITIONS OF SUCH | QUIR | EME! | NT, TERM OR CONDITION THE INSURANCE AFFORD | OF AN | Y CONTRACT THE POLICIE REDUCED BY I | OR OTHER S DESCRIBE | DOCUMENT WITH RESPEC | JI 10 | WHICH IND |
| INSR | TYPE OF INSURANCE | ADDL INSD | SUBR | POLICY NUMBER | | POLICY EFF (MM/DD/YYYY) | POLICY EXP | LIMITS | 3 | |
| LTR | COMMERCIAL GENERAL LIABILITY | negi./ | ***** | | | | | | \$ 1,00 | 0,000 |
| | CLAIMS-MADE X OCCUR | | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 1,00 | 0,000 |
| | X Contractual | | | | | | | MED EXP (Any one person) | \$ 5,00 | 0 |
| Α | | | | Q39-6950053 | ļ | 03/19/2024 | 03/19/2025 | | \$ 1 ,00 | 0,000 |
| • | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | 1 | | | GENERAL AGGREGATE | \$ 2,00 | 0,000 |
| | POLICY X PRO- | | | | | | | PRODUCTS - COMP/OP AGG | \$ 2,00 | 0,000 |
| | OTHER: | | | | | | | | \$ | |
| | AUTOMOBILE LIABILITY | | | | | | | COMBINED SINGLE LIMIT (Ea accident) | \$ 1,00 | 0,000 |
| | X ANY AUTO | | | | | | | | \$ | |
| Α | OWNED SCHEDULED AUTOS | | | Q03-6940003 | | 03/19/2024 | 03/19/2025 | BODILY INJURY (Per accident) | | |
| · | NON-OWNED | | | | | | | (Per accident) | \$ | |
| | AUTOU SINCE | | | | | | | | \$ | |
| | X UMBRELLA LIAB X OCCUR | | | | | | | EACH OCCURRENCE | \$ 1,00 | 00,000 |
| Α | EXCESS LIAB CLAIMS-MADE | | | Q27-6970018 | | 03/19/2024 | 03/19/2025 | AGGREGATE | \$ 1,00 | 00,000 |
| | DED X RETENTION \$ 10,000 | | | | | | | | \$ | |
| | WORKERS COMPENSATION | | | | | | | X PER OTH- STATUTE ER | | |
| ь | ANY PROPRIETOR/PARTNER/EXECUTIVE Y NO OFFICER/MEMBER EXCLUDED? | N/A Z1292 | | Z12921193 | 12021103 | | 04/01/2025 | 2.2. 2 | \$ 1,00 | |
| В | (Mandatory in NH) | | | Z12021100 | | - "- "- " | 04/01/2020 | E.L. DISEASE - EA EMPLOYEE | | |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | | E.L. DISEASE - POLICY LIMIT | \$ 1,00 | 0,000 |
| Α | Contractors Equipment Coverage Contractors Rented/lease Equip | | | Q39-6950053 | | 03/19/2024 | 03/19/2025 | | \$170 | 0,000 |
| DES | CRIPTION OF OPERATIONS / LOCATIONS / VEHICL | ES (A | CORD | 101, Additional Remarks Schedu | le, may b | e attached if mor | e space la requir | ed) | | |
| | | | | | | | | | | |
| CEI | RTIFICATE HOLDER | | | | CANC | ELLATION | | | | |
| City of Batavia 1 Batavia City Centre | | | | | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. | | | | LED BEFORE ELIVERED IN | |
| | (Potovio | | | NY 14020 | | RIZED REPRESE کومیت آمکینامد | NTA TIVE | | | |

Fax: (585)345-1385 ACORD 25 (2016/03) Email:zalwardT@BATAVIANEWYORK.COM

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/13/2024

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(les) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on the pertificate does not conformable to the certificate holder in lieu of such endorsement(s).

| L | this certificate does not comer rights to the certificate fielder in fied or s | | | | | ACCUTACT. | | | | | |
|-------------------------------|--|---|--------------|------------------------|--|--|---|---|--|----------------|------------|
| PRO | PRODUCER | | | | | CONTACT Irene Phelps | | | | | |
| IAC | AC Associates of NY Inc (Attica) | | | | | | PHONE (585)591-3910 FAX (AIC, No. Ext): (585)591-3911 | | | | |
| 1111 | 98 | Alexander Rd | | | | E-MAIL ADDRESS: iphelps@acins.agency | | | | | |
| | | | | | | INSURER(S) AFFORDING COVERAGE | | | | | NAIC # |
| Atti | Attica NY 14011 | | | | | | RA: Erie Ins | | | | 26263 |
| | JRED | | | | | | Rв; New Yo | | | | |
| | | The Tree Doctor Inc | | | | INSURE | | | · · · · · · · · · · · · · · · · · · · | | |
| | | 4752 Shisler Rd | | | | | | | | | |
| | | 4732 Stilster Flu | | | | INSURE | | | | | |
| | | Clavanao | | | NY 14031-2127 | INSURE | | | | | |
| <u></u> | | Clarence | TIFL | CATE | | INSURE | RF: | | REVISION NUMBER: | | |
| 100 | VER | RAGES CER IS TO CERTIFY THAT THE POLICIES | | | NUMBER: | VE BEE | N ISSUED TO | THE INSUR | | HE PO | ICY PERIOD |
| I C | IDIC. | ATED. NOTWITHSTANDING ANY RI IFICATE MAY BE ISSUED OR MAY USIONS AND CONDITIONS OF SUCH | PERT POLI | REME FAIN, CIES. | NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE | OF AN ED BY | Y CONTRACT THE POLICIE REDUCED BY | TOR OTHER ES DESCRIBE PAID CLAIMS | DOCUMENT WITH RESPE | ст то | WHICH THIS |
| INSR LTR | T | TYPE OF INSURANCE | ADDL | SUBR | POLICY NUMBER | | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMIT | 8 | |
| - | X | COMMERCIAL GENERAL LIABILITY | | | | | | | EACH OCCURRENCE | \$ 1,00 | 0,000 |
| | | CLAIMS-MADE X OCCUR | | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 1,00 | 0,000 |
| | X | Contractual | | | | | | | MED EXP (Any one person) | \$ 5,00 | 10 |
| Α | - | - Contractor | | ١. | Q39-6950053 | | 03/19/2023 | 03/19/2024 | PERSONAL & ADV INJURY | s 1,00 | |
| ^ | - | JN'L AGGREGATE LIMIT APPLIES PER: | | | 400 000000 | | V3. 13.2323 | | GENERAL AGGREGATE | \$ 2,00 | |
| | GE | | İ | İ | | | | | | \$ 2,00 | |
| | | | | | | | | | PRODUCTS - COMPIOP AGG | \$ 2,00 | 0,000 |
| - | | OTHER: TOMOBILE LIABILITY | | | | | | | COMBINED SINGLE LIMIT (Ea accident) | \$ 1.00 | 0.000 |
| | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | ANY AUTO | | | | | | | (Ea accident) BODILY INJURY (Per person) | \$ | 0,000 |
| | OWNED SCHEDULED | | | 000 0040000 | | 03/19/2023 | 00400004 | | \$ | | |
| | 쓵 | AUTOS ONLY AUTOS | İ | | Q03-6940003 | | 03/19/2023 | 03/19/2024 | PROPERTY DAMAGE (Per accident) | \$ | |
| | | HIRED AUTOS ONLY X AUTOS ONLY | | | | | | | (Per accident) | \$ | |
| | - | 12/ | <u> </u> | | | | | | | | 20.000 |
| | Ķ | UMBRELLA LIAB X OCCUR | |] | | ĺ | | **** | EACH OCCURRENCE | | 00,000 |
| Α | X | EXCESS LIAB CLAIMS-MADE | | i | Q27-6970018 | - | 03/19/2023 | 03/19/2024 | AGGREGATE | \$ 1,00 | 00,000 |
| | <u> </u> | DED X RETENTION \$ 10,000 | | | | | | | ✓ PER OTH- | \$ | |
| | AND | RKERS COMPENSATION DEMPLOYERS' LIABILITY Y/N | | | | | | | X PER STATUTE OTH- | | |
| В | ANY | PROPRIETOR/PARTNER/EXECUTIVE (****) | N/A | | Z12921193 | | 04/01/2023 | 04/01/2024 | E.L. EACH ACCIDENT | \$ 1,00 | |
| | (Mar | ndatory in NH) | | | | | 04/01/2020 | | E.L. DISEASE - EA EMPLOYEE | | |
| | DES | s, describe under CRIPTION OF OPERATIONS below | | | | | | | E.L. DISEASE - POLICY LIMIT | \$ 1,00 | 0,000 |
| Α | | ntractors Equipment Coverage Intractors Rented/lease Eqiup | | | Q39-6950053 | | 03/19/2023 | 03/19/2024 | | \$170 | 000,0 |
| DES | CRIP | TION OF OPERATIONS / LOCATIONS / VEHICL | ES (A | CORD | 101, Additional Remarks Schedul | e, may b | e attached if mor | e space is requir | ed) | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| CEI | | CATE HOLDER | | | | CANC | ELLATION | | | | |
| CEI | X III | TCATE HOLDER | | | | CAIT | LLLATION | | | | |
| | City of Batavia | | | | | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. | | | | | |
| | | 1 Batavia City Centre | | | | | RIZED REPRESEI | NTA TIVE | | | |
| _I Batavia NY 14020 | | | | | | | | | | | |

Fax:(585)345-1385 ACORD 25 (2016/03) Email_ZALWARDT@BATAVIANEWYORK.COM

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Phone: 585-345-6330

www.batavianewyork.com

Fax: 585-343-8182



Memorandum

To:

Honorable City Council

From:

Rachael J. Tabelski, City Manager

Date:

April 15, 2024

Subject:

Cohocton/Walnut Water Main Replacement- SEQR/Intent to Declare Lead Agency

In accordance with the New York State Environmental Quality Review (SEQR) I recommend that the City of Batavia serve as lead agency to conduct an environmental review of the Cohocton/Walnut Water Main Replacement Project. The project involves replacement of approximately 3,900 +/- linear feet of existing 12" water lines along nearby utility lines, and approximately 2,300 +/- linear feet of existing 8" water lines along Walnut Street, as well as the installation of approximately 800+/- linear feet of new water lines connecting Walnut Street to the Southern portion of Franklin Street.

The City has hired Labella Engineers to prepare the Part 1 Environmental Assessment Form (EAF). Labella will notify Involved Agencies of the City's declaration of Lead Agency distribute the competed Part 1 EAF for review and comment.

Project Background

The City intends to replace an aged 10" water main known as "the Cohocton" as well as the 8" Walnut water main with a 12" water pipes.

We have had on record 22 breaks on these lines 19 on walnut and 3 on the Cohocton. The City will replace approximately 6980ft. of pipe, or approximately 1 1/3 miles, to complete this project. To assist with the cost of replacing these water lines the City can apply for a WIIA grant. The Environmental Facilities Corporation is now accepting applications for the next round of Water Infrastructure Improvement (WIIA) & Intermunicipal Grant (IMG) funding. There is \$325 million available this round. Applications are due by 5 p.m. on June 14.

EFC and the NYS Department of Health (DOH) will evaluate all applications for projects received based on factors including protection of public health and water quality; median household income;



City of Batavia

Phone: 585-345-6330

www.batavianewyork.com

Fax: 585-343-8182

population served; governmental and community support; environmental justice considerations; and the readiness of the project to proceed.

The City of Batavia DPW has been working with GHD engineers and has achieved 90% design on the project. We still need to complete the SEQR and easement work associated with the project, but feel that that this project will be a good candidate for WIIA funding.

The total estimated cost of the project is \$3.1M. WIIA eligible drinking water projects may receive grant funding in the amount of 60% of net eligible project costs, limited to \$5M. 60% of the project cost equals \$1,860,000. The City will be responsible for the remaining \$1,240,000 and would finance this portion.

#XX-2024 CITY OF BATAVIA

COHOCTON WATER MAIN REPLACEMENT PROJECT SEQR RESOLUTION – INTENT TO DECLARE LEAD AGENCY STATUS

Motion of Councilmember

WHEREAS, in accordance with the New York State Environmental Quality Review (SEQR) regulations, the City Council of the City of Batavia hereby announces its intent to serve as Lead Agency to conduct an environmental review of proposed watermain improvements; and

WHEREAS, the proposed project involves replacement of approximately "3,900 +/-linear feet of existing 12" water lines along nearby utility lines, and approximately 2,300 +/-linear feet of existing 8" water lines along Walnut Street, as well as the installation of approximately 800+/- linear feet of new water lines connecting Walnut Street to the Southern portion of Franklin Street.; and

WHEREAS, the City Council has determined that the proposed action is an unlisted action as defined under SEQR; and

WHEREAS, the City Council has commissioned LaBella Associates DPC to prepare Part 1 of the Environmental Assessment Form regarding the project.

NOW THEREFORE, BE IT FURTHER RESOLVED, the City Council will notify the Involved Agencies of its intention to act as Lead Agency for this project and will provide them with a copy of the completed Part 1 of the Full Environmental Assessment Form for review during the 30-day comment period.

Seconded by Councilmember and on roll call

Rachael Tabelski, City Manager

| STATE OF NEW YORK: | |
|-------------------------------------|---|
| COUNTY OF GENESEE: Ss | |
| CITY OF BATAVIA: | |
| I, Rachael Tabelski, City Manager | of the City of Batavia, Genesee County, New York, |
| DO HEREBY CERTIFY that I have compa | red the foregoing resolution duly adopted by the City |
| | , day of, 2024, with the original thereof a correct and true copy of said resolution and of the |
| DATED: | 2024 |
| (SEAL) | |
| | |

Full Environmental Assessment Form Part 1 - Project and Setting

Instructions for Completing Part 1

Part 1 is to be completed by the applicant or project sponsor. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification.

Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information; indicate whether missing information does not exist, or is not reasonably available to the sponsor; and, when possible, generally describe work or studies which would be necessary to update or fully develop that information.

Applicants/sponsors must complete all items in Sections A & B. In Sections C, D & E, most items contain an initial question that must be answered either "Yes" or "No". If the answer to the initial question is "Yes", complete the sub-questions that follow. If the answer to the initial question is "No", proceed to the next question. Section F allows the project sponsor to identify and attach any additional information. Section G requires the name and signature of the applicant or project sponsor to verify that the information contained in Part 1 is accurate and complete.

A. Project and Applicant/Sponsor Information.

| Name of Action or Project: City of Batavia - 2024 WIIA Grant Application - Cohocton Water Main Replacement | | | |
|--|--------------------------------------|---------------------------------|--|
| Project Location (describe, and attach a general location map): Proposed project is located at the southern portion in the City of Batavia, within Genesee between Treadeasy Avenue and Walnut Street will be within the areas of construction. | County, New York. Portions | of Walnut Street and a corridor | |
| Brief Description of Proposed Action (include purpose or need): | | | |
| The City of Batavia proposes the replacement of 3,900 +/- linear feet of existing 12" water linear feet of existing 8" water lines along Walnut Street, as well as the installation of appostreet to the Southern portion of Franklin Street. | | | |
| | | | |
| Name of Applicant/Sponsor: | Talanhanay | | |
| • | Telephone: (585) 345-6345 | | |
| City of Batavia (Rachael. J. Tabelski, City Manager) | E-Mail: rtabelski@batavianewyork.com | | |
| Address: One Batavia City Centre | | | |
| City/PO: Batavia | State: NY | Zip Code: ₁₄₀₂₀ | |
| Project Contact (if not same as sponsor; give name and title/role): | Telephone: | • | |
| | E-Mail: | | |
| Address: | | | |
| City/PO: | State: | Zip Code: | |
| Property Owner (if not same as sponsor): | Telephone: | | |
| | E-Mail: | | |
| Address: | | | |
| City/PO: | State: | Zip Code: | |

B. Government Approvals

| B. Government Approvals, assistance.) | Funding, or Spor | nsorship. ("Funding" includes grants, loans, to | ax relief, and any other | er forms of financial | |
|---|--|---|---|-----------------------|--|
| Government E | ntity | If Yes: Identify Agency and Approval(s) Required | Applicat (Actual or | | |
| a. City Counsel, Town Board or Village Board of Truste | | | | | |
| b. City, Town or Village Planning Board or Commis | □Yes ☑ No ssion | | | | |
| c. City, Town or Village Zoning Board of A | □Yes ☑ No ppeals | | | | |
| d. Other local agencies | ☑ Yes□No | Local DPW - highway work permit; Depew Lancaster&Western RR; CSX RR - Easement/land | Spring/Summer 2024 use agreement & RR xi | ng | |
| e. County agencies | Z Yes□No | Genesee County Planning - 239-m review; Genesee County DOH - water lines; | Spring/Summer 2024 | | |
| f. Regional agencies | □Yes☑No | | | | |
| g. State agencies | ☑ Yes□No | EFC - WIIA Grant; NYSDEC - poss wetlands; NYSDOH - water lines; NYSDOT - highway work | Spring/Summer 2024 permit | | |
| h. Federal agencies | ☑ Yes □No | USFWS & USACE - poss wetlands; | Spring/Summer 2024 | | |
| i. Coastal Resources. i. Is the project site within | a Coastal Area, o | or the waterfront area of a Designated Inland W | aterway? | □Yes ☑ No | |
| ii. Is the project site locate iii. Is the project site within | | with an approved Local Waterfront Revitalizat Hazard Area? | ion Program? | □ Yes☑No □ Yes☑No | |
| C. Planning and Zoning | | | | | |
| C.1. Planning and zoning ac | | | | | |
| only approval(s) which must • If Yes, complete sect | be granted to enab tions C, F and G. | nendment of a plan, local law, ordinance, rule ble the proposed action to proceed? aplete all remaining sections and questions in F | _ | □Yes ☑ No | |
| C.2. Adopted land use plans. | C.2. Adopted land use plans. | | | | |
| a. Do any municipally- adopte where the proposed action v | | age or county) comprehensive land use plan(s) | include the site | ✓Yes□No | |
| | | ecific recommendations for the site where the p | roposed action | □Yes ☑ No | |
| | | ocal or regional special planning district (for exated State or Federal heritage area; watershed r | | □Yes ☑ No | |
| c. Is the proposed action locat or an adopted municipal far If Yes, identify the plan(s): | ted wholly or parti rmland protection | ally within an area listed in an adopted munici plan? | pal open space plan, | ∐Yes , No | |
| | | | | | |

| The second secon | |
|--|---|
| C.3. Zoning | |
| a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. If Yes, what is the zoning classification(s) including any applicable overlay district? Project area consists of existing water lines located within the road right-of-way as well as along utility lines and a railroad. The porti | ✓ Yes No |
| to be installed is located along a railroad. | on or new water lines |
| b. Is the use permitted or allowed by a special or conditional use permit? | ☐ Yes Z No |
| c. Is a zoning change requested as part of the proposed action? If Yes, | ☐ Yes Z No |
| i. What is the proposed new zoning for the site? | |
| C.4. Existing community services. | |
| a. In what school district is the project site located? Batavia City School District | |
| b. What police or other public protection forces serve the project site? City of Batavia Police Dept. | |
| c. Which fire protection and emergency medical services serve the project site? City of Batavia Fire Dept. | |
| d. What parks serve the project site? None | |
| D. Project Details | |
| D.1. Proposed and Potential Development | |
| a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, components)? Water Main Replacement/Installation | include all |
| right-of-way as well a | of City of Batavia road |
| b. Total acreage to be physically disturbed? c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? https://example.com/restriction-way as well a owned by Niagara M. New York Central Lin Mohawk Valley Railro | ohawk dba Nat'l Grid, les, and Genesee & |
| c. Is the proposed action an expansion of an existing project or use? | ✓ Yes No |
| i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, I square feet)? % 13+/- Units: Units: replacement water line proposed expansion and identify the units (e.g., acres, miles, I square feet)? | lus 6,200 If of |
| d. Is the proposed action a subdivision, or does it include a subdivision? If Yes, | □Yes Z No |
| i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types) | |
| ii. Is a cluster/conservation layout proposed?iii. Number of lots proposed? | □Yes □No |
| iv. Minimum and maximum proposed lot sizes? Minimum Maximum | |
| e. Will the proposed action be constructed in multiple phases? i. If No, anticipated period of construction: ii. If Yes: +/-6 months | ☐ Yes Z No |
| Total number of phases anticipated | |
| Anticipated commencement date of phase 1 (including demolition) month year Anticipated completion date of final phase month year | |
| Generally describe connections or relationships among phases, including any contingencies where progress determine timing or duration of future phases: | of one phase may |
| | |

| | et include new resid | | | | ☐Yes Z No |
|---|------------------------|-----------------------|-------------------------|--|--|
| If Yes, show num | bers of units propos | | | | |
| | One Family | Two Family | Three Family | Multiple Family (four or more) | |
| Initial Phase | | | | | |
| At completion | | | | | |
| of all phases | | | | | |
| | | | | | |
| | osed action include i | new non-residentia | al construction (inclu | ding expansions)? | □Yes ☑ No |
| If Yes, | | | , | | |
| i. Total number | of structures | | | | |
| ii. Dimensions (| in feet) of largest pr | oposed structure: | height; | width; andlength | |
| iii. Approximate | extent of building s | pace to be heated | or cooled: | square feet | |
| h. Does the propo | sed action include of | construction or oth | er activities that will | result in the impoundment of any | ☐Yes Z No |
| | | | | goon or other storage? | _ _ |
| If Yes, | | | | | |
| i. Purpose of the | | | | | |
| ii. If a water imp | oundment, the princ | ipal source of the | water: | ☐ Ground water ☐ Surface water strea | ms Other specify: |
| | | | | | |
| iii. If other than w | vater, identify the ty | pe of impounded/o | contained liquids and | I their source. | |
| | · C .1 | 1 | 37.1 | 2112 | |
| iv. Approximate | size of the proposed | I impoundment. | Volume: | million gallons; surface area: _ height; length | acres |
| v. Dimensions of | the proposed dam | or impounding sur | ucture: | height; length | 4> |
| vi. Construction i | metnod/materiais ic | or the proposed da | m or impounding sur | ucture (e.g., earth fill, rock, wood, con- | crete): |
| | | | | | |
| D 2 Designet One | 42 | | | | |
| D.2. Project Ope | | | | | |
| | | | | iring construction, operations, or both? | ☐Yes ☑ No |
| | | tion, grading or ins | stallation of utilities | or foundations where all excavated | |
| materials will re | emain onsite) | | | | |
| If Yes: | | | | | |
| i. What is the pu | rpose of the excavat | tion or dredging? | | | |
| ii. How much mat | terial (including roc | k, earth, sediments | s, etc.) is proposed to | be removed from the site? | |
| • Volume | (specify tons or cub | ic yards): | | | |
| Over wh | at duration of time? | | | | |
| • Over what duration of time? iii. Describe nature and characteristics of materials to be excavated or dredged, and plans to use, manage or dispose of them. | | | | | |
| | | | | | |
| * ******* ** 1 | * 1 1 1 1 | | | | —————————————————————————————————————— |
| | onsite dewatering o | r processing of ex- | cavated materials? | | YesNo |
| If yes, describ | e | | | | |
| | | | | | |
| v. What is the tot | tal area to be dredge | ed or excavated? _ | | acres | |
| vi. What is the ma | aximum area to be v | worked at any one | time? | acres | |
| | | | r dredging? | feet | — —. |
| | vation require blasti | | | | ∐Yes ∏No |
| ix. Summarize site | e reclamation goals | and plan: | | | |
| | | | | | · |
| | | | | | |
| | | | | | |
| b. Would the prop | osed action cause of | r result in alteratio | n of, increase or dec | rease in size of, or encroachment | √ Yes No |
| | ng wetland, waterbo | | | • | |
| If Yes: | | • | · | | |
| i. Identify the we | etland or waterbody | which would be a | affected (by name, w | ater index number, wetland map numb | er or geographic |
| description): T | he NYSDEC Environm | nental Resource Map | per shows several map | pped State and/or Federally-regulated wetlar | nds within the vicinity of |
| | | | | neation performed and will obtain all necess | ary wetland permits |
| tr | om NYSDEC/USACE/ | USFWS, if determine | ed to be necessary. | | |

| ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, placem alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in sq. As currently planned, the project would involve excavation for 12" pipe (3.5' +/- wide trench) for approximately | uare feet or acres: |
|---|------------------------------|
| As currently planned, the project would involve excavation for 12" pipe (3.5' +/- wide trench) for approximately mapped USFWS designated wetland (Approximately 525 SF or 0.01 AC in total). The area would include stopped USFWS designated wetland (Approximately 525 SF or 0.01 AC in total). | one bedding and backfill ove |
| top of 12" pipe. | |
| iii. Will the proposed action cause or result in disturbance to bottom sediments? If Yes, describe: | □Yes Z No |
| iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation? | ☐ Yes Z No |
| If Yes: • acres of aquatic vegetation proposed to be removed: | |
| expected acreage of aquatic vegetation remaining after project completion: | |
| purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): | |
| | |
| proposed method of plant removal: | |
| if chemical/herbicide treatment will be used, specify product(s): Describe the product of the product o | |
| v. Describe any proposed reclamation/mitigation following disturbance: Wetland area will be returned and restored to pre-construction conditions. | |
| | |
| c. Will the proposed action use, or create a new demand for water? If Yes: | ☐Yes Z No |
| i. Total anticipated water usage/demand per day: gallons/day | |
| ii. Will the proposed action obtain water from an existing public water supply? | □Yes □No |
| If Yes: | |
| Name of district or service area: | |
| Does the existing public water supply have capacity to serve the proposal? | ☐ Yes☐ No |
| Is the project site in the existing district? In the project site in the existing district? | ☐ Yes ☐ No |
| Is expansion of the district needed? Provide the provide of the second of the se | ☐ Yes ☐ No |
| Do existing lines serve the project site? Will line output on existing district he appears to exceed t | ☐ Yes☐ No |
| iii. Will line extension within an existing district be necessary to supply the project?If Yes: | □Yes □No |
| Describe extensions or capacity expansions proposed to serve this project: | |
| Source(s) of supply for the district: | |
| iv. Is a new water supply district or service area proposed to be formed to serve the project site? If, Yes: | ☐ Yes☐No |
| Applicant/sponsor for new district: | |
| Date application submitted or anticipated: | |
| Proposed source(s) of supply for new district: | |
| v. If a public water supply will not be used, describe plans to provide water supply for the project: | |
| vi. If water supply will be from wells (public or private), what is the maximum pumping capacity: | gallons/minute. |
| d. Will the proposed action generate liquid wastes? If Yes: | ☐ Yes Z No |
| i. Total anticipated liquid waste generation per day: gallons/day | |
| i. Total anticipated liquid waste generation per day: gallons/day ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, describe all approximate volumes or proportions of each): | |
| | |
| iii. Will the proposed action use any existing public wastewater treatment facilities?If Yes: | □Yes□No |
| Name of wastewater treatment plant to be used: Name of district: | |
| Name of district: Does the existing wastewater treatment plant have capacity to serve the project? | ☐ Yes ☐No |
| • Is the project site in the existing district? | ☐ Yes ☐ No |
| • Is expansion of the district needed? | ☐ Yes ☐ No |

| Do existing sewer lines serve the project site? Will a line extension within an existing district be necessary to serve the project? | | □Yes□No □Yes□No |
|--|--|---|
| If Yes: | | |
| Describe extensions or capacity expansions proposed to serve this project: | | |
| iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? If Yes: | | □Yes□No |
| Applicant/sponsor for new district: Date application submitted or anticipated: | | |
| What is the receiving water for the wastewater discharge? | | |
| v. If public facilities will not be used, describe plans to provide wastewater treatment for the projection receiving water (name and classification if surface discharge or describe subsurface disposal property). | ect, including spec lans): | ifying proposed |
| vi. Describe any plans or designs to capture, recycle or reuse liquid waste: | | |
| | | |
| e. Will the proposed action disturb more than one acre and create stormwater runoff, either from n sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or source (i.e. sheet flow) during construction or post construction? | non-point | ✓ Yes □ No |
| *** | of land. All areas wil | rily disturb +/-1.0 acre I be re-seeded or |
| | re-paved once consi No new impervious s anticipated. | truction is complete. surface area is |
| iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/strugroundwater, on-site surface water or off-site surface waters)? | ictures, adjacent pr | roperties, |
| If to surface waters, identify receiving water bodies or wetlands: NA | | |
| • Will stormwater runoff flow to adjacent properties? iv. Does the proposed plan minimize impervious surfaces, use pervious materials or collect and re- | | ☐ Yes ☑ No ☐ Yes ☑ No |
| f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, in combustion, waste incineration, or other processes or operations? If Yes, identify: | cluding fuel | □Yes ☑ No |
| i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles) | | |
| ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, | | |
| iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation |) | |
| g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air I | Facility Permit, | □Yes Z No |
| or Federal Clean Air Act Title IV or Title V Permit? | | |
| If Yes: i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically ambient air quality standards for all or some parts of the year) | fails to meet | □Yes□No |
| ii. In addition to emissions as calculated in the application, the project will generate: | | |
| •Tons/year (short tons) of Carbon Dioxide (CO ₂) | | |
| •Tons/year (short tons) of Nitrous Oxide (N ₂ O) | | |
| •Tons/year (short tons) of Perfluorocarbons (PFCs) | | |
| •Tons/year (short tons) of Sulfur Hexafluoride (SF ₆) | (IECa) | |
| Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflourocarbons Tons/year (short tons) of Hazardous Air Pollutants (HAPs) | (fifes) | |

| h. Will the proposed action generate or emit methane (inch landfills, composting facilities)? If Yes: | uding, but not limited to, sewage treatment plants, | Yes No | |
|---|---|--------------------|--|
| i. Estimate methane generation in tons/year (metric): ii. Describe any methane capture, control or elimination melectricity, flaring): | | generate heat or | |
| i. Will the proposed action result in the release of air pollut quarry or landfill operations? If Yes: Describe operations and nature of emissions (e.g., d | | ∏Yes ∏ No | |
| j. Will the proposed action result in a substantial increase in new demand for transportation facilities or services? If Yes: i. When is the peak traffic expected (Check all that apply a Randomly between hours of to |): ☐ Morning ☐ Evening ☐ Weekend | ∐Yes [] No | |
| iii. Parking spaces: Existing Proposed Net increase/decrease iv. Does the proposed action include any shared use parking? Yes No v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing access, describe: vi. Are public/private transportation service(s) or facilities available within ½ mile of the proposed site? Yes No vii Will the proposed action include access to public transportation or accommodations for use of hybrid, electric Yes No or other alternative fueled vehicles? viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing Yes No pedestrian or bicycle routes? | | | |
| k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? If Yes: i. Estimate annual electricity demand during operation of the proposed action: ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/local utility, or other): iii. Will the proposed action require a new, or an upgrade, to an existing substation? □Yes□No | | | |
| Nours of operation. Answer all items which apply. i. During Construction: | ii. During Operations: Monday - Friday: Saturday: Sunday: Holidays: 24/7 Sunday: 24/7 4/7 | | |

| m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? If yes: i. Provide details including sources, time of day and duration: During construction, ambient noise levels will likely rise. However, this will be temporary in nature and during daytime hours. | Ø Yes □No |
|--|--------------------|
| ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? Describe: | ☐ Yes Z No |
| n. Will the proposed action have outdoor lighting? If yes: i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures: | ∏Yes Z No |
| ii. Will proposed action remove existing natural barriers that could act as a light barrier or screen? Describe: | ☐ Yes ☐ No |
| o. Does the proposed action have the potential to produce odors for more than one hour per day? If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: | ☐ Yes ☑ No |
| p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? If Yes: i. Product(s) to be stored ii. Volume(s) per unit time (e.g., month, year) iii. Generally, describe the proposed storage facilities: | □ Yes ☑ No |
| q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? If Yes: i. Describe proposed treatment(s): | ☐ Yes ☑No |
| | |
| ii. Will the proposed action use Integrated Pest Management Practices? r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? If Yes: i. Describe any solid waste(s) to be generated during construction or operation of the facility: | ☐ Yes ☐No☐ Yes ☑No |
| Construction: tons per (unit of time) Operation: tons per (unit of time) ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste: Construction: | |
| Operation: iii. Proposed disposal methods/facilities for solid waste generated on-site: | |
| Construction:Operation: | |

| s. Does the proposed action include construction or modification of a solid waste management facility? Yes No If Yes: i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or other disposal activities): ii. Anticipated rate of disposal/processing: • Tons/month, if transfer or other non-combustion/thermal treatment, or | | | | | |
|---|---|----------------------------------|-----------------------|--|--|
| Tons/hour, if combustion or thermal iii. If landfill, anticipated site life: | treatment | , | | | |
| t. Will the proposed action at the site involve the common waste? If Yes: | t. Will the proposed action at the site involve the commercial generation, treatment, storage, or disposal of hazardous ☐Yes ☑No waste? | | | | |
| ii. Generally describe processes or activities involving | hazardous wastes or constitu | uents: | | | |
| iii. Specify amount to be handled or generatedt iv. Describe any proposals for on-site minimization, rec | tons/month cycling or reuse of hazardou | s constituents: | | | |
| v. Will any hazardous wastes be disposed at an existing If Yes: provide name and location of facility: | | cility? | □Yes□No | | |
| If No: describe proposed management of any hazardous | wastes which will not be set | nt to a hazardous waste facilion | ty: | | |
| E. Site and Setting of Proposed Action | | | | | |
| E.1. Land uses on and surrounding the project site | | | | | |
| a. Existing land uses. i. Check all uses that occur on, adjoining and near the project site. Urban Industrial Commercial Residential (suburban) Rural (non-farm) Forest Agriculture Aquatic Other (specify): Utility lines and railroad ii. If mix of uses, generally describe: | | | | | |
| | | | | | |
| b. Land uses and covertypes on the project site. | VA-1-1 | | | | |
| Land use or Covertype | Current Acreage | Acreage After Project Completion | Change (Acres +/-) | | |
| Roads, buildings, and other paved or impervious surfaces | +/-0.2 | +/-0.2 | 0 | | |
| Forested | | | | | |
| Meadows, grasslands or brushlands (non- agricultural, including abandoned agricultural) | | | | | |
| Agricultural (includes active orchards, field, greenhouse etc.) | | | | | |
| Surface water features | | | | | |
| (lakes, ponds, streams, rivers, etc.) | | | | | |
| Wetlands (freshwater or tidal) | | | | | |
| Non-vegetated (bare rock, earth or fill) | | | | | |
| Other Describe: grassy areas along roadways, utility lines and railroad tracks | +/-0.8 | +/-0.8 | 0 | | |

| c. Is the project site presently used by members of the community for public recreation? i. If Yes: explain: | □Yes☑No |
|--|-----------------------------|
| d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? If Yes, | ∐Yes☑No |
| i. Identify Facilities: | |
| e. Does the project site contain an existing dam? | ☐ Yes Z No |
| If Yes: | |
| i. Dimensions of the dam and impoundment: | |
| • Dam height: feet | |
| Dam length: Surface area: feet acres | |
| Surface area: acres Volume impounded: gallons OR acre-feet | |
| ii. Dam's existing hazard classification: | |
| iii. Provide date and summarize results of last inspection: | |
| | |
| The Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, or does the project site adjoin property which is now, or was at one time, used as a solid waste management facility. If Yes: | ☐Yes ☑ No cility? |
| i. Has the facility been formally closed? | ☐Yes☐ No |
| • If yes, cite sources/documentation: | |
| ii. Describe the location of the project site relative to the boundaries of the solid waste management facility: | |
| iii. Describe any development constraints due to the prior solid waste activities: | |
| . Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? Yes: | ☐ Yes ☑ No |
| i. Describe waste(s) handled and waste management activities, including approximate time when activities occur | red: |
| Detential contamination history III-s there have been added in the land of the | |
| Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? Yes: | □Yes ☑ No |
| i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: | □Yes□No |
| Yes – Spills Incidents database Provide DEC ID number(s): | |
| Yes − Environmental Site Remediation database Provide DEC ID number(s): Neither database | |
| If site has been subject of RCRA corrective activities, describe control measures: | |
| | Z Yes□No |
| ii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? Syes, provide DEC ID number(s): 819011, 819019, C819019, C819023, C819021, 819016 | |
| ii. Is the project within 2000 feet of any site in the NYSDEC Environmental Site Remediation database? Syes, provide DEC ID number(s): 819011, 819019, C819019, C819023, C819021, 819016 v. If yes to (i), (ii) or (iii) above, describe current status of site(s): | |

| v. Is the project site subject to an institutional control | limiting property uses? | ☐ Yes Z No |
|---|--|-------------------------|
| If yes, DEC site ID number: Describe the type of institutional control (e.g. | | |
| Describe any use limitations: Describe any engineering controls: | | |
| Will the project affect the institutional or eng Explain: | gineering controls in place? | □Yes□No |
| | | |
| E.2. Natural Resources On or Near Project Site a. What is the average depth to bedrock on the project | aita9 | |
| | site? At least 15 feet (Per soil borings | |
| b. Are there bedrock outcroppings on the project site? If Yes, what proportion of the site is comprised of bedrock outcroppings on the project site? | rock outcroppings?% | ☐ Yes Z No |
| c. Predominant soil type(s) present on project site: | Rhinebeck silt loam +/-30 % | |
| | Mohawk channery silt loam +/-20 % | |
| | Lamson sandy loam +/-20 % | |
| | project site? Average:+/-9.5 feet (Per soil borings) | |
| e. Drainage status of project site soils: Well Drained Moderately V Poorly Drain | Well Drained: | |
| | | |
| f. Approximate proportion of proposed action site with | | |
| | ☐ 10-15%: <u>+/-15</u> % of site ☐ 15% or greater: <u>+/-5</u> % of site | |
| g. Are there any unique geologic features on the project If Yes, describe: | et site? | □Yes☑No |
| 11 103, 4030/100. | | |
| h. Surface water features.i. Does any portion of the project site contain wetland ponds or lakes)? | s or other waterbodies (including streams, rivers, | ✓ Yes□No |
| ii. Do any wetlands or other waterbodies adjoin the proof of Yes to either i or ii, continue. If No, skip to E.2.i. | oject site? | Z Yes□No |
| iii. Are any of the wetlands or waterbodies within or a state or local agency? | djoining the project site regulated by any federal, | ∠ Yes □No |
| iv. For each identified regulated wetland and waterbod | ly on the project site, provide the following information: Classification | |
| Lakes or Ponds: Name | Classification | |
| Wetlands: Name Federal Waters | Approximate Size tbd | |
| Wetland No. (if regulated by DEC) v. Are any of the above water bodies listed in the most waterbodies? | | □Yes Z No |
| | or listing as impaired: | |
| i. Is the project site in a designated Floodway? | | □Yes ☑ No |
| j. Is the project site in the 100-year Floodplain? | | Z Yes □No |
| k. Is the project site in the 500-year Floodplain? | | ✓ Yes No |
| l. Is the project site located over, or immediately adjoinIf Yes:i. Name of aquifer: Principal Aquifer, Primary Aquifer | ing, a primary, principal or sole source aquifer? | ✓ Yes □No |
| | | |

| m. Identify the predominant wildlife species to Typical urban/suburban species native | that occupy or use the project to Genesee County. | site: | |
|--|--|---|-------------------|
| n. Does the project site contain a designated sit If Yes: i. Describe the habitat/community (composit | • | | ☐Yes Z No |
| ii. Source(s) of description or evaluation: iii. Extent of community/habitat: Currently: Following completion of project as present or loss (indicate + or -): o. Does project site contain any species of plant endangered or threatened, or does it contain If Yes: | nt or animal that is listed by the any areas identified as habitat | acres acres acres acres | ☐ Yes ☑ No |
| i. Species and listing (endangered or threatened) None flagged by the NYSDEC EAF Mapper, however According to a determination generated using the USI | the Northern Long-Eared Bat (NL | EB), an endangered species, was flagge nticipated to have 'No Effect' on the NLE | d by the USFWS. |
| p. Does the project site contain any species of special concern?If Yes: i. Species and listing: | | | □Yes☑No |
| q. Is the project site or adjoining area currently If yes, give a brief description of how the property | used for hunting, trapping, fi osed action may affect that us | shing or shell fishing? e: | □Yes☑No |
| E.3. Designated Public Resources On or Ne | ar Project Site | | |
| a. Is the project site, or any portion of it, locate Agriculture and Markets Law, Article 25-A If Yes, provide county plus district name/num | A, Section 303 and 304? | district certified pursuant to | ∐Yes ∏ No |
| b. Are agricultural lands consisting of highly probabilities i. If Yes: acreage(s) on project site? ii. Source(s) of soil rating(s): | roductive soils present? | | ∐Yes √ No |
| c. Does the project site contain all or part of, o Natural Landmark? If Yes: i. Nature of the natural landmark: ii. Provide brief description of landmark, incl | Biological Community | ☐ Geological Feature | ∐Yes Z No |
| d. Is the project site located in or does it adjoin If Yes: i. CEA name: ii. Basis for designation: iii. Designating agency and date: | | | □Yes √ No |

| e. Does the project site contain, or is it substantially contiguous to, a b which is listed on the National or State Register of Historic Places, of Office of Parks, Recreation and Historic Preservation to be eligible of If Yes: i. Nature of historic/archaeological resource: Archaeological Site ii. Name: iii. Brief description of attributes on which listing is based: | or that has been determined by the Commission or listing on the State Register of Historic Plants | ☑Yes□No oner of the NYS aces? | | |
|---|---|--|--|--|
| f. Is the project site, or any portion of it, located in or adjacent to an are archaeological sites on the NY State Historic Preservation Office (S) | | ✓ Yes □No | | |
| g. Have additional archaeological or historic site(s) or resources been i If Yes: i. Describe possible resource(s): ii. Basis for identification: | | ☐ Yes ☑ No Consultation w/ SHPO is ongoing | | |
| h. Is the project site within fives miles of any officially designated and publicly accessible federal, state, or local scenic or aesthetic resource? If Yes: i. Identify resource: DeWitt Recreation Area ii. Nature of, or basis for, designation (e.g., established highway overlook, state or local park, state historic trail or scenic byway, etc.): Local Park | | | | |
| iii. Distance between project and resource: +/-1.5 r i. Is the project site located within a designated river corridor under the | | ☐ Yes 7 No | | |
| Program 6 NYCRR 666? If Yes: i. Identify the name of the river and its designation: | | □ Yes ™ INO | | |
| ii. Is the activity consistent with development restrictions contained in | 6NYCRR Part 666? | □Yes □No | | |
| F. Additional Information Attach any additional information which may be needed to clarify yo If you have identified any adverse impacts which could be associated measures which you propose to avoid or minimize them. | . • | pacts plus any | | |
| G. Verification I certify that the information provided is true to the best of my knowled | edge. | | | |
| Applicant/Sponsor Name City of Batavia - Rachael Tabelski | Date | · | | |
| Signature | Title City Manager | | | |
| | | | | |



Disclaimer: The EAF Mapper is a screening tool intended to assist project sponsors and reviewing agencies in preparing an environmental assessment form (EAF). Not all questions asked in the EAF are answered by the EAF Mapper. Additional information on any EAF question can be obtained by consulting the EAF Workbooks. Although the EAF Mapper provides the most up-to-date digital data available to DEC, you may also need to contact local or other data sources in order to obtain data not provided by the Mapper. Digital data is not a substitute for agency determinations.



Sources: Esri, HERE, Garmin, USGS, Intermap, INCREMENT P RCan, Esri Japan, METI, Esri China (Hong-Kong), Esri Korea, Esri Thailand), NGCC, Ic) OpenStreetMap contributors, and the GIS User COMMONTLY, Esri, HERE, Garmin, INCX, USGS, NPS

| B.i.i [Coastal or Waterfront Area] | No |
|--|---|
| B.i.ii [Local Waterfront Revitalization Area] | No |
| C.2.b. [Special Planning District] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h [DEC Spills or Remediation Site - Potential Contamination History] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.i [DEC Spills or Remediation Site - Listed] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.iii [Within 2,000' of DEC Remediation Site] | Yes |
| E.1.h.iii [Within 2,000' of DEC Remediation Site - DEC ID] | 819011, 819019, C819019, C819023, C819021, 819016 |
| E.2.g [Unique Geologic Features] | No |
| E.2.h.i [Surface Water Features] | Yes |
| E.2.h.ii [Surface Water Features] | Yes |
| E.2.h.iii [Surface Water Features] | Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook. |
| E.2.h.iv [Surface Water Features - Wetlands Name] | Federal Waters |
| E.2.h.v [Impaired Water Bodies] | No |
| E.2.i. [Floodway] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.2.j. [100 Year Floodplain] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.2.k. [500 Year Floodplain] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |

| E.2.I. [Aquifers] | Yes |
|---|---|
| E.2.I. [Aquifer Names] | Principal Aquifer, Primary Aquifer |
| E.2.n. [Natural Communities] | No |
| E.2.o. [Endangered or Threatened Species] | No |
| E.2.p. [Rare Plants or Animals] | No |
| E.3.a. [Agricultural District] | No |
| E.3.c. [National Natural Landmark] | No |
| E.3.d [Critical Environmental Area] | No |
| E.3.e. [National or State Register of Historic Places or State Eligible Sites] | Yes - Digital mapping data for archaeological site boundaries are not available. Refer to EAF Workbook. |
| E.3.e.ii [National or State Register of Historic Places or State Eligible Sites - Name] | |
| E.3.f. [Archeological Sites] | Yes |
| E.3.i. [Designated River Corridor] | No |
| | |



www.batavianewyork.com

Fax: 585-343-8182



Memorandum

To: Honorable City Council

From: Rachael J. Tabelski, City Manager

Date: April 10, 2024

Subject: Access License Agreement with AGRV Properties Inc. (Eli Fish)

AGRV Properties Inc. a New York State corporation located at 109 Main Street, Batavia New York (Eli Fish) is the owner of the premises adjacent to City owned property Jackson Square.

On February 10, 2020 the City of Batavia sold a portion of Jackson Square to AGRV Properties to construct an outdoor patio. A 12 ft by 50 ft parcel of property abutting Jackson Square was sold for \$840 at fair market value.

AGRV Properties constructed the patio and an exterior decorative fence was inadvertently paced just across the property line on City property during construction.

The decorative fence does not infringe on the Jackson Square property and is an asset to the area known as Jackson square to separate the private property from the City property.

AGRV had a survey completed and the City Attorney drafted a revocable license agreement (attached).

To address this issue, the license agreement will grant a revocable license to maintain the licensed premises at its current location and possession insofar as it is located on City Property. If the license is terminated AGRV will promptly remove the fence and restore the premise to its prior condition. AGRV shall maintain the property and hold the City harmless for any cost, claim, expense or liability incurred with regard to the license.

I recommend that the City Council of the City of Batavia authorize the access license agreement with AGRV Properties Inc.

A RESOLUTION TO APPROVE AN ACCESS LICENSE AGREEMENT WITH AGRV PROPERTIES INC. (ELI FISH)

Motion of Councilmember

WHEREAS, the City of Batavia sold a 12 ft. by 50 ft. parcel of land abutting Jackson Square to AGRV Properties Inc. on February 20th 2020 to construct an outdoor patio; and

WHEREAS, the City of Batavia has inspected the construction and has found that the decorative fence outlining the patio was inadvertently constructed several inches over AGRV's property on City Property, commonly known as Jackson Square; and

WHEREAS, the City of Batavia and AGRV Properties Inc. agree to the terms of a revocable license agreement to maintain the licensed premises at its current location and possession insofar as it is located on City Property; and

WHEREAS, If the license is terminated ACRA Properties Inc. will promptly remove the fence and restore the premise to its prior condition; and

WHEREAS, AGRV shall maintain the property and holds the City harmless for any cost, claim, expense or liability incurred with regard to the license; and

WHEREAS, the Agreement between AGRV Properties Inc. will be effective upon signature of the agreement.

NOW, THEREFORE, BE IT RESOLVED, that the City Council President for the City of Batavia is hereby authorized to sign a Access License Agreement with AGRV Properties Inc..

Seconded by Councilmember and on roll call

LICENSE AGREEMENT

THIS AGREEMENT is made the __ day of March, 2024, by and between THE CITY OF BATAVIA, NEW YORK, a municipal corporation with offices located at 1 West Main Street, Batavia, New York 14020 (the "Grantor") and AGRV PROPERTIES, INC., a New York State corporation with offices at 109 Main Street, Batavia, New York 14020 (the "Grantee").

WHEREAS, Grantor is the owner of premises commonly known as Jackson Square; and

WHEREAS, Grantee is the owner of adjoining premises commonly known as 109 Main Street, Batavia, New York; and

WHEREAS, the Grantee has maintained a fenced in patio partially on the premises owned by Grantor; and

WHEREAS, an instrument survey of the premises of Grantor prepared by Gregory W. Townsend, dated February 22, 2024, a copy of which is attached hereto and made a part hereof shows the common boundary line between the above two parcels and the approximate location of the fenced in patio as maintained by Grantee on the premises of Grantor (the "Licensed Premises").

NOW, THEREFORE, in consideration of One Dollar in hand received by Grantor from Grantee, and the mutual covenants contained herein, the parties hereto agree as follows:

- 1. Grantor hereby grants to Grantee a revocable license to maintain the Licensed Premises in its present location and position insofar as it is located on the premises of Grantor. In the event that Grantor terminates the license, it shall provide thirty (30) days written notice to Grantee. Upon termination, Grantee shall promptly remove the fence and restore the licensed premises to its prior condition within a reasonable time period.
- 2. Grantee hereby waives and agrees any claim against the premises of Grantor other than as granted by this agreement.
- 3. Grantee agrees that all costs and expenses of maintaining the Licensed Premises and all risks and liabilities associated with the Licensed Premises are and shall continue to be the responsibility of Grantee and Grantee hereby agrees to defend, indemnify and hold Grantor harmless for any cost, claim, expense or liability, including but not limited to reasonable attorney's fees, incurred by Grantor with regard to said Licensed Premises.

IN WITNESS WHEREOF, this agreement has been signed on the date indicated above. **GRANTORS:** THE CITY OF BATAVIA, NEW YORK By: _____ **GRANTEES:** AGRV PROPERTIES, INC. Ву: _____ STATE OF NEW YORK) COUNTY OF GENESEE) ss.: On this ___ day of March, 2024, before me, personally appeared ___ personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his capacity, and that by his signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument. **Notary Public** STATE OF NEW YORK) COUNTY OF GENESEE) ss.: On this day of March, 2024, before me, personally appeared personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his capacity, and that by his signature on the instrument, the individual, or the person upon behalf of which the individual acted, executed the instrument.

Notary Public

| "UNAUTHORIZED ALTERATION OR ADMITIONS TO A SURVEY MAP BEJANNE A ULCHESE LAND SURVEY MAP BEJANNE A ULCHESE LAND STREET SURVEY MAP BEJANNE WORK STATE EXPLANION LAW," "ONLY COPIES FROM THE ORIGINAL OF THIS | MAIN STRE | ET (99.0' | R.O.W.) | GREGORY W. TC Licensed Land 435 East Main Batavia, New York Phone (583) 344 Email: gwtownsendsorv | Surveyor Street k 14020 4-1331 |
|---|---|--|---|---|---|
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| SUBSCUENT OWNERS." | Brick Building R/O 105 OF BATAMA, INC. UBER 828, PAGE 962 Tox Map No. 84.049-1-23 | Brick Building #109-111 R/O AGRV PROPERTIES, INC. LIBER 916, PAGE 263 Tox Map No. | Brick Building R/O TOMPKINS AGENCIES UBER 904, P Tax Map Nc. 84 | , INC. AGE 880 | STREET |
| PARCEL INSET | 11.59 | | | | 3R |
| CONTAINING 0.013+/- ACRE | Brick Building | Brick Building 1.5' x 68.0' Easement For Roof Gutters | R/O DAVIS WHEEL LIBER 298, P Tox Map No. 84 | AGE 494 | CENTER |
| · | R/O 13 JACKSON SQUARE LLC LIBER 905, PAGE 509 Tox Map No. 84.049-1-24 Bidg. Cor. 4.4 N. & Dr. Liner, JOI. 1.5. | Bidg. Cor. 7.7 N. & On Une Covered Deck Brick Herick Covered Fig. Cove | Bldg. Cor. 8.2 N. & On Line Starage Areo INST. #DE2! Tax Map No. E PARCEL SURVE | 0181668 34.0491-28 YED | |
| REAL PROPERTY TAX S | ERVICES | R/C CITY OF BATAVIA | | Z. | ** |
| APPROVED BY | | į | | - | |
| | BATAVIA PLANNING BOAI | REFEREN SURVEY MA SEPTEMBI SURVEY MA OCTOBER SURVEY MA DATED SE | AP NO. 15-315 BY GREGOR ER 11, 2015 AP NO. 02-262-A BY DAVI 6, 2003 AP NO. 02-262-R BY GREG PTEMBER 18, 2014 AP NO. 14-50 BY GREGOR | D S. LAMENDOLA, L. ORY W. TOWNSEND, | .S., DATED L.S., LAST |
| ENGINEER | · | NOTES: - The Parcel - The Parcel | Surveyed is to be merged w Surveyed is part of land bel | ith Tax Map No. 84.049 onging to the City of B | 9-1 -2 5 atavia |
| FILED IN GENESEE COI | UNTY CLERK'S OFFICE AS: | MERGEI PART O IN THE | ARY SÜRVEY SHOWING OF LANDS OF THE FORIGINAL VILLAGE CITY OF BATAVIA, OF NEW YORK | E CITY OF BATAV E LOT NO. 25. | VIA, BEING SITUATE |
| • | | SIRIE | OF REW TOTAL | | |
| COUNTY CLERK | | MARCH | 13, 2020 | . 20-104/ | E 1" = 30' |



www.batavianewyork.com

Fax: 585-343-8182



Memorandum

To:

Honorable Council Members

From:

Rachael Tabelski

Date:

April 11, 2024

Subject:

Restore NY Grant

The City of Batavia is eligible to submit a round 8 Restore NY grant, and I recommend that the City Council consider supporting the application for 214-216 E. Main Street for rehabilitation and renovation.

The project is in the center of downtown would offer updated new commercial and residential spaces. 214-216 E. Main Street, owned by Rick Mancuso, was an applicant for the City's original DRI project but was not awarded funding.

The project will invest \$1M-\$1.5M and will consist of two buildings comprising 9,900 and 24,000 sq. ft. respectively. Exterior work will include facades upgrades, and internal renovations will focus on rehabilitating 6 upper floor apartments, and creation of 5-8 new units depending on architectural review.

This priority project will be transformational and propel Batavia's ongoing downtown revitalization momentum.

In addition to being located in the City's DRI priority project zone, the 214 & 216 E. Main are within the boundaries of both a BOA and former Empire Zone. The proposed project is also adjacent to three other DRI projects that have been completed or will be completed within the next year.

I recommend, City Council advance the following two resolutions.

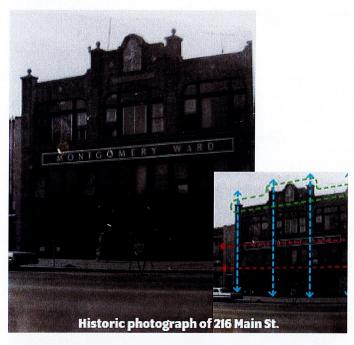
- 1. Approval to Apply for Re-Store NY
- 2. Set a Public Hearing for May 13, 2024



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A RESOLUTION TO SUBMIT AN APPLICATION FOR THE ROUND 7 RESTORE NY COMMUNITIES INITIATIVE MUNICIPAL GRANT PROGRAM

Motion of Councilmember

WHEREAS, the Empire State Development Corporation is requesting funding proposals for the eighth round of the Restore NY Municipal Grant program; and

WHEREAS, grant funds are available for projects to demolish/deconstruct and/or rehabilitate/reconstruct vacant, abandoned, surplus and/or condemned residential, commercial and/or mixed-use buildings; and

WHEREAS, an important goal of Restore NY is to revitalize urban centers, rural areas, and disadvantaged communities. It is anticipated that upon completion, the projects funded by Restore NY grants will attract individuals, families, and industry and commercial enterprises to the municipality. It is further anticipated that the improved community and business climate will result in an increased tax base thereby improving municipal finances and the wherewithal to further grow the municipality's tax and resource base, lessening its dependence on state aid; and

WHEREAS, cities with populations less than 40,000 can apply for up to \$2,000,000 in grant funding;

NOW THEREFORE, LET IT BE RESOLVED by the City of Batavia Council that it hereby authorizes submission of a Restore NY grant application not to exceed \$2,000,000 for the 214-216 E Main Street project in downtown Batavia.

BE IT FURTHER RESOLVED, that the City Manager of the City of Batavia, Genesee County, New York, is hereby authorized as the official representative of the City of Batavia to execute and submit the Restore NY application, all understandings and assurances contained therein, and is also hereby authorized to execute any grant agreements or documentation to implement the grant.

BE IT FURTHER RESOLVED, that project meets the following objectives:

- (1) The project is consistent with the City of Batavia Comprehensive Plan, Downtown Revitalization Initiative (DRI) Strategic Investment Plan, and Brownfield Opportunity Area (BOA) Plan.
 - (2) The proposed financing for the project is appropriate and committed.
- (3) The project facilitates effective and efficient use of existing and future public resources so as to promote both economic development and preservation of community resources.
- (4) The project develops and enhances infrastructure and/or other facilities in a manner that will attract, create and sustain employment opportunities where applicable.

Seconded by Councilmember and on the roll call

RESOLUTION TO SCHEDULE A PUBLIC HEARING FOR THE ROUND 8 RESTORE NY COMMUNITIES INITIATIVE MUNICIPAL GRANT PROGRAM

Motion of Councilmember

WHEREAS, the Empire State Development Corporation is requesting funding proposals for the eighth round of the Restore NY Municipal Grant program; and

WHEREAS, grant funds are available for projects to demolish/deconstruct and/or rehabilitate/reconstruct vacant, abandoned, surplus and/or condemned residential, commercial and/or mixed-use buildings; and

WHEREAS, an important goal of Restore NY is to revitalize urban centers, rural areas, and disadvantaged communities. It is anticipated that upon completion, the projects funded by Restore NY grants will attract individuals, families, and industry and commercial enterprises to the municipality. It is further anticipated that the improved community and business climate will result in an increased tax base thereby improving municipal finances and the wherewithal to further grow the municipality's tax and resource base, lessening its dependence on state aid; and

WHEREAS, cities with populations less than 40,000 can apply for up to \$2,000,000 in grant funding;

WHEREAS, a public hearing on the application and properties involved in the application is required prior to submission.

NOW THEREFORE, LET IT BE RESOLVED by the City of Batavia Council that it hereby schedules a public hearing for the Round 8 Restore NY application for May 13, 2024 at 7 p.m. at City Hall, One Batavia City Centre, Batavia, NY, 14020.

BE IT FURTHER RESOLVED, that a Notice of said hearing will be published for three consecutive days in the Batavia Daily News.

BE IT FURTHER RESOLVED, that it will include the following property assessment list:

| Site | Size (sq. ft) | Building Type | Project Type | Building Category |
|--------------------------------------|-----------------|-----------------------|----------------------------------|-------------------|
| 214 East Main St 216 East Main St | 7,500 20,000 | Commercial Comm./Res. | Rehabilitation Rehabilitation | |

Seconded by Councilmember and on the roll call



www.batavianewyork.com

Fax: 585-343-9221



Memorandum

To: Rachael Tabelski, City Manager

From: Lisa Neary, Deputy Director of Finance

Date: April 3, 2024

Subject: K-9 Committed Fund Balance

On August 12, 2019, City council authorized the City to establish a K-9 program including allowing for the receipt of donations and aid to fund the program. In June of 2020, Council agreed, at the recommendation of the City's audit firm, to create a K-9 program Committed Fund Balance to keep donations received for the program, net of expenses, in a separate fund to be used solely for funding the program.

For the fiscal year ending 3/31/24, the City received \$12,178.67 in donations and expensed \$1,977.97 in the K-9 program, thus there will be an increase of \$10,200.70 to the K-9 Committed Fund Balance. The balance of the K-9 Committed Fund Balance at 3/31/23 was \$13,353.56 with the addition of \$10,200.70 the K-9 Committed Fund Balance will be \$23,554.26 at 3/31/24.

Attached please find a resolution supporting this action. This will be effective March 31, 2024. I'm available at any time if you have any questions.

A RESOLUTION TO AUTHORIZE THE ADDITION OF FUNDS TO K-9 COMMITTED FUND BALANCE

Motion of Councilmember

WHEREAS, the Council for the City of Batavia authorized on August 12, 2019 the establishment of a Police Department K-9 program and authorized the receiving of donations and aid in funding the program; and

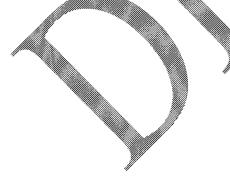
WHEREAS, the City of Batavia received \$12,178.67 in donations for the K-9 program in the fiscal year ending 3/31/2024; and

WHEREAS, the City of Batavia had \$1,977.97 in expenses for the K-9 program in the fiscal year ending 3/31/2024; and

WHEREAS, the K-9 Committed Fund balance had a balance at 3/31/23 of \$13,353.56.

NOW, THEREFORE, BE IT RESOLVED, that the City Council of the City of Batavia, effective 3/31/24, does authorize the addition of funds to the K-9 committed fund balance in the amount of \$10,200.70 (\$12,178.67 less \$1,977.97) leaving a balance of \$23,554.26 for future use in running the K-9 program.

Seconded by Councilmember and on roll call





www.batavianewyork.com

Fax: 585-343-9221



Memorandum

To:

Rachael Tabelski, City Manager

From:

Lisa Neary, Deputy Director of Finance

Date:

March 28, 2024

Subject:

Committed Fund Balance - Creek Park

In October 2023, a resolution (#97-2023) was passed committing fund balance in the amount of \$15,000 to support an environmental study of the Creek Park area. The City then contracted with Roux Engineering and Geology to prepare a limited Phase II Environmental Investigation and report.

\$15,000 has been paid to Roux in the fiscal year ending March 31, 2024 and therefore, I am requesting council to approve the release of and the transfer of committed fund balance in the amount of \$15,000 to unassigned fund balance, effective March 31, 2024.

Please let me know if you have any questions.

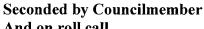
A RESOLUTION TRANSFERRING \$15,000 FROM COMMITTED FUND BALANCE TO UNASSIGNED FUND BALANCE OF CREEK PARK FUNDS FOR AN **ENVIRONMENTAL STUDY**

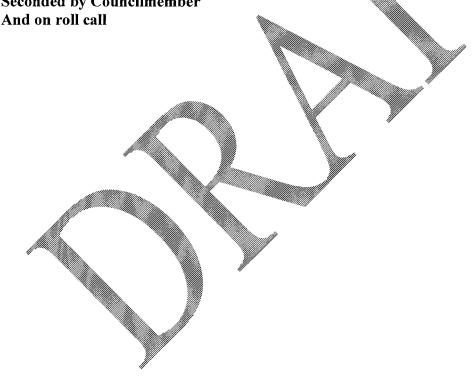
Motion of Councilmember

WHEREAS, the City of Batavia committed fund balance in the amount of \$15,000 in October of 2023, Resolution #97-2023, for an environmental study of the Creek Park area to help facilitate the development of that area; and

WHEREAS, the City of Batavia contracted with and paid \$15,000 to Roux Engineering and Geology to prepare the limited Phase II Environmental Investigation on the Creek Park area.

NOW, THEREFORE, BE IT RESOLVED, that the Council of the City of Batavia does hereby release the commitment of Creek Park funds and transfer \$15,000 from committed General Fund balance to unassigned General Fund balance, effective 3/31/2024.







www.batavianewyork.com

Fax: 585-343-9221



Memorandum

To: Rachael Tabelski, City Manager

From: Lisa Neary, Deputy Director of Finance

Date: April 1, 2024

Subject: Committed Fund Balance – Zoning Code Update

In October 2023, a resolution (#94-2023) was passed committing fund balance in the amount of \$75,000 to support a land use planning and zoning code update. The City then contracted with Labella Associates for professional services for the project of zoning code update and future land use planning.

As of the year ending March 31, 2024, the City has expensed \$2,215.61 to Labella for these services; therefore, I am requesting council to approve the release of \$2,215.61 and the transfer of committed fund balance in the same amount, to unassigned fund balance, effective March 31, 2024.

Please let me know if you have any questions.

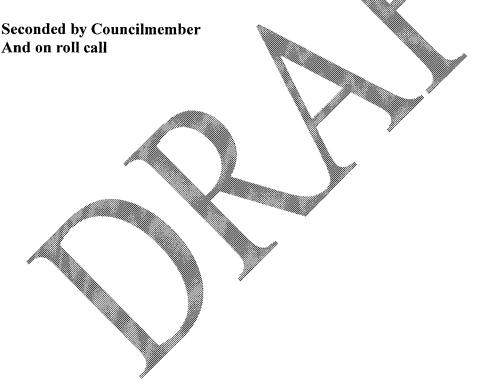
A RESOLUTION TO RELEASE AND TRANSFER \$2,215.61 FROM COMMITTED FUND BALANCE TO UNASSIGNED FUND BALANCE FOR ZONING CODE UPDATE AND FUTURE LAND USE PLANNING

Motion of Councilmember

WHEREAS, the City of Batavia committed fund balance in the amount of \$75,000 in October of 2023, Resolution #94-2023, for a zoning code update and future land use planning for the City, as brought forth in the 2017 Comprehensive Plan Update; and

WHEREAS, the City of Batavia contracted with and paid \$2,215.61 to Labella Associates through the City's fiscal year ending March 31, 2024 for this purpose.

NOW, THEREFORE, BE IT RESOLVED, that the Council of the City of Batavia does hereby release \$2,215.61 of the commitment of Zoning Code update and Future Land Use Planning funds and transfer that amount from committed General Fund balance to unassigned General Fund balance, effective 3/31/2024.





Phone: 585-345-6313 Fax: 585-343-9221

www.batavianewyork.com



Memorandum

To:

Rachael Tabelski, City Manager

From:

Lisa Neary, Deputy Director of Finance

Date:

March 28, 2024

Subject:

Closing capital projects for year end

In an effort to keep our capital project fund up-to-date and current, it is necessary to close out certain capital projects that are completed at this time. Those capital projects are listed as follows:

ERP – General Fund #181803 ERP – Water Fund and Sewer Fund #180003 Spartan Fire Pumper #220003 Hart, Fairmont & Norris Complete Streets Project #230002

Both the ERP-General Fund and the Spartan Fire Pumper projects have negative balances and therefore Administrative and Fire reserve transfers into the Capital Fund in the amount of \$16,738.08 and \$21,730.34, respectively, are needed in order to properly close them out.

Attached please find a resolution in support of these actions.

#XX - 2024 A RESOLUTION TO CLOSE OUT CAPITAL PROJECTS

Motion of Councilmember

WHEREAS, The City of Batavia should periodically close capital projects which are completed; and

WHEREAS, projects completed at this time that require official closing are listed as follows:

| #181803 | ERP – General Fund |
|---------|--|
| #180003 | ERP – Water and Sewer Fund |
| #220003 | Spartan Fire Pumper |
| #230002 | Hart, Fairmont & Norris Complete Streets Project |

WHEREAS, in order to close the ERP – General Fund project, a transfer of \$16,738.08 from Administrative Reserves to the capital fund will be required, previously approved by council on the City's annual capital project resolution; and

WHEREAS, in order to close the Spartan Fire Pumper project, a transfer of \$21,730.34 from the fire department reserves to the capital fund will be required; and

WHEREAS, the City Council authorizes the City Manager to make the recommended transfers and close out the specified capital projects effective March 31, 2024.

NOW, THEREFORE, BE IT RESOLVED, by the Council of the City of Batavia that the above referenced transfers and capital projects be closed effective March 31, 2024.

Seconded by Councilmember and on roll call



City of Batavia

Memorandum

To: Rachael Tabelski City Manager

From: Shawn Heubusch, Police Chief

Date: April 3, 2024

Subject: New York State FY 2019 Edward Byrne Memorial Justice Assistance Grant (JAG)

I am pleased to inform you that The City of Batavia Police Department was awarded \$36,400 to support our License Plate Reader program from the NYS Byrne Memorial JAG Program.

The funding will used to purchase, install and support license plate reader cameras throughout the City to aid in investigations for crime deterrence.

Please see the attached grant award notice.

Police Department 10 Main Street Batavia, New York 14020



Phone: 585-345-6350 Fax: 585-344-1878

Records: 585-345-6303

Detective Bureau: 585-345-6370 www.batavianewyork.com

A RESOLUTION TO AMEND THE 2024-2025 POLICE DEPARTMENT BUDGET TO REFLECT THE RECEIPT OF A NEW YORK STATE FY 2019 EDWARD BYRNE MEMORIAL JUSTICE ASSISTANCE GRANT (JAG) IN THE AMOUNT OF \$36,400

Motion of Councilmember

WHEREAS, the City of Batavia Police Department has received a Edward Byrne Memorial Justice Assistance Grant (JAG) in the amount of \$36,400 to support the purchase of License Plate Reader (LPR) cameras to aid in investigations and crime deterrence; and

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

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 2024-2025 budget:

Increase expenditure accounts

Grant Equipment

A.04.3120.3120 299-241204

\$ 36,400,00

Increase revenue accounts

Federal Aid, crime control

A.00.0000.0000 4320-241204

\$ 36,400.00

Seconded by Councilmember and on roll call



KATHY HOCHUL Governor ROSSANA ROSADO Commissioner CILLIAN FLAVIN
Deputy Commissioner

Grant Award Notice

| Grantee/Contractor: City of Batavia / Batavia Police Department | Date: 4/2/2024 |
|---|-----------------------------|
| Program Name: | Award Amount: |
| Law Enforcement Equipment | \$36,400 ¹ |
| Signatory Name and Title: | Term Dates: |
| Shawn Heubusch, Chief | TBD |
| Email: sheubusch@batavianewyork.com | Contract Number: T632890 |

Program Description: To support the purchase of LPR cameras to aid in investigations and crime deterrence.

The following additional information is provided as required when grants are supported with federal funding:

Federal Award Identification Information

Award Name: New York State FY 2019 Edward Byrne Memorial Justice Assistance Grant (JAG)

Program Application

Federal Award Number: 2019-DJ-BX-0017

Name of the Federal Award Agency: Bureau of Justice Assistance (BJA)

Federal Award Lapse Date: 9/30/2025 Total Amount of Federal Award: \$ 8,576,883 Federal Fiscal Year of Funds: FFY 19

Catalog of Federal Domestic Assistance (CFDA) Title and Number: 16.738 Edward Byrne Memorial

Justice Assistance Grant Program

| | Grant Questions | | |
|---|---|--|--|
| | Primary Contact | Secondary Contact | |
| | Meagan Armstrong, Public Safety Grants Representative | Joe Lostritto, Public Safety Grants Representative | |
| 1 | NYS Division of Criminal Justice Services | NYS Division of Criminal Justice Services | |
| | Office of Program Development and Funding | Office of Program Development and Funding | |
| | Phone: 518.485.5569 | Phone: 518.485.7662 | |
| L | Email: meagan.armstrong@dcjs.ny.gov | Email: joe.lostritto@dcjs.ny.gov | |

¹ This funding is provided by the Division of Criminal Justice Services (DCJS) with federal funds through the Bureau of Justice Assistance. Grantees receiving these funds will be subject to federal rules, regulations, and reporting requirements.

Thank you for all the work you do. We look forward to working with you in our continued efforts to safeguard the health and safety of all New York residents and visitors.





Memorandum

To:

Rachael Tabelski, City Manager

From:

Shawn Heubusch, Police Chief

Date:

April 12, 2024

Subject:

Surplus of police equipment for disposal

Per the City of Batavia Purchasing Manual, property valued over \$1,000.00 must be declared surplus by resolution of City Council prior to being disposed of.

The attached draft resolution is for the surplus of seven Benelli shotguns. The shotguns have been taken out of service as part of the overhaul of our weapons program and will no longer be utilized and therefore are considered surplus at this time.

I request the proceeds from any sales to be placed into the Police Equipment Reserve Fund to offset the costs of future equipment purchases.

Please advise if you should have any questions or concerns regarding this MEMO.

Thank you.



RESOLUTION TO DECLARE POLICE DEPARTMENT EQUIPMENT SURPLUS FOR THE PURPOSE OF DISPOSAL

Motion of Councilmember

WHEREAS, The Police Department has declared the equipment listed below surplus; and

WHEREAS, the City of Batavia requires a surplus declaration of property to be made prior to disposal or sale of equipment; and

WHEREAS, the Police Department desires to use the proceeds from selling the equipment listed below in order to offset the purchase of future equipment needs by placing the proceeds into the Police Equipment Reserve account.

NOW THEREFORE, BE IT RESOLVED, by the Council of the City of Batavia that the City Manager be and hereby is authorized to declare the following as surplus for the purpose of disposal:

| MAKE | MODEL | SERIAL# |
|-----------------|------------|-----------------|
| BENELLI Shotgun | M1 SUPER90 | M288710 |
| BENELLI Shotgun | M1 SUPER90 | M28 8739 |
| BENELLI Shotgun | M1 SUPER90 | M288713 |
| BENELLI Shotgun | M1 SUPER90 | M288746 |
| BENELLI Shotgun | M1 SUPER90 | M339550 |
| BENELLI Shotgun | M1 SUPER90 | M288711 |
| BENELLI Shotgun | M1 SUPER90 | M288745 |

NOW, THEREFORE, BE IT FURTHER RESOLVED, that the City Council of the City of Batavia does hereby authorize the transfer of the proceeds from the sale of said equipment to the Police Equipment Reserve Fund.

Seconded by Councilmember and on roll call