

TOWN OF THOMPSON

-Meeting Agenda-

TUESDAY, AUGUST 07, 2018

7:30 P.M.

CALL TO ORDER

ROLL CALL

PLEDGE TO THE FLAG

APPROVAL OF PREVIOUS MINUTES: July 17, 2018 Regular Town Board Meeting

PUBLIC COMMENT:

CORRESPONDENCE:

- **Town Clerk Calhoun:** Letter dated 07/17/18 to Norton Rose Fulbright US LLP Re: \$1,500,000 Bonding for Kiamesha Lake Sewer District Tributary Sewerline Replacement Project.
- **Town Clerk Calhoun:** Letter dated 07/19/18 to Mr. Chaim Miller Re: Response to (FOIL) Request for Property Records Pertaining to Kaufman Colony, 171 Kaufman Road, Monticello, SBL #12.-1-5.7.
- **NYS Senator John J. Bonacic:** Letter dated 07/27/18 to Deputy Administrator Patrice Chester Re: State and Municipal Facilities Capital Program Grant Project Selection for \$75,000.00.
- **Helen Collier Mauch, Esq. of Zarin & Steinmentz:** Letter dated 07/20/18 to Supervisor Rieber & Director Carnell Re: E.V. Hotel Sewer Connection.
- **Charter Communications:** Letter with Check #06595982 for \$40,499.18 – 1st Quarter Franchise Fee (01/01/18-03/31/18).
- **NYS Dept. of Taxation & Finance:** Division of Homeland Security – Check dated 07/26/18 in the amount of \$8,058.71 – FEMA for Winter Storm Stella (March 2017) and NYS Gaming Commission – Check dated 07/27/18 in the amount of \$469,242.30 – Resorts World Casino Distribution 1st Quarter.
- **NYS Dept. of Taxation & Finance, ORPTS:** Notice of Final State Equalization Rate for 2018 is 86.00 dated 07/19/18.
- **NYS DOH:** Letters dated 07/23/18 & 07/26/18 to Supervisor Rieber Re: Notification of Boil Water Order and Notification to Rescind Boil Water Order for the Melody Lake Acres Water District.
- **Adedayo Adewole, P.E., NYS DEC:** (3) Letters dated 07/12/18, 07/19/18 & 07/19/18 to Supervisor Rieber and Town Board Re: Annual Compliance Inspection Reports for Kiamesha Lake WWTP on 06/11/18, Emerald Green STP on 06/25/18 & Sackett Lake STP on 06/25/18.

AGENDA ITEMS:

- 1) **Establish Date for Public Hearing on Proposed Local Law No. 06: Zone Change Request – Arthur Glick Truck Sales, Inc.,** Old Route 17, Monticello, SBL #31.-1-62.1 from SR to HC-2 Zone
- 2) **Resorts World Casino:** Discuss and Approve Resolution to Extend Temporary Certificate of Occupancy
- 3) **CBIZ Valuation Group:** Discuss and Approve Agreement for Asset Inventory Services
- 4) **Approval to Cancel the August 21st, September 4th & 18th Town Board Meetings and to Reschedule Town Board Meetings to August 28th at 7PM and September 11th at 5PM**
- 5) **Discuss Changing Town Board Meeting Times with Work Sessions for October – December, 2018**
- 6) **2018 Spring Cleanup:** Report by Town Clerk Marilee J. Calhoun
- 7) **NYS DOT:** Discuss Maintenance Agreement for Exit 105B Westbound Interchange
- 8) **Discuss 2019 Town Budget Meetings and Procedures**
- 9) **Sullivan Renaissance:** Report on Project Status
- 10) **Sullivan County Workers Comp. Self Insurance Program Calculation Changes:** Report by Supervisor Rieber
- 11) **Bills Over \$2,500.00**
- 12) **Budget Transfers & Amendments**
- 13) **Order Bills Paid**

REPORTS: SUPERVISOR, COUNCILMEN & DEPARTMENT HEADS

OLD BUSINESS

NEW BUSINESS

PUBLIC COMMENT:

ADJOURN

MARILEE J. CALHOUN
Town Clerk

KELLY M. MURRAN
Deputy Town Clerk

Town of Thompson

TOWN HALL
4052 Route 42
Monticello, NY 12701-3221

Telephone (845) 794-2500 Ext.302
Fax (845) 794-8600

July 17, 2018

Norton Rose Fulbright US LLP
Mr. Randolph J. Mayer
1301 Avenue of the Americas
New York, New York 10019-6022

Re: Town of Thompson, Sullivan County, New York
Kiamesha Lake Sewer District – 202-b – \$1,500,000 Bonds
File No.: 10604802.

Dear Mr. Mayer:

Enclosed please find the following documents pertaining to the above referenced matter:

1. Certified Copy of the Order Calling Public Hearing.
2. Notice of Public Hearing.
3. Affidavit of Posting.
4. Printer's Original Affidavit of Publication.
5. Certified Copy of the Public Interest Order.
6. Certified Copy of the Bond Resolution.
7. Legal Notice of Estoppel.
8. Printer's Original Affidavit of Publication of the Legal Notice of Estoppel.
9. Proof of Recording of the Public Interest Order in the County Clerk's Office.

Thank you for your help in this matter and please contact myself or Ms. Melissa DeMarmels should you have any questions or require anything further.

Sincerely



Marilee J. Calhoun
Town Clerk

MJC:
Encl.

PC: Melissa DeMarmels, Town Comptroller
 Hon. William J. Rieber, Jr., Town Supervisor & Town Board Members
File Copy

MARILEE J. CALHOUN
Town Clerk

KELLY M. MURRAN
Deputy Town Clerk

Town of Thompson

TOWN HALL
4052 Route 42
Monticello, NY 12701-3221

Telephone (845) 794-2500 Ext.302
Fax (845) 794-8600

July 19, 2018

Mr. Chaim Miller

Re: Freedom of Information Law (FOIL) Request
Property Records: Kaufman Colony, 171 Kaufman Road, Monticello, SBL #12.-1-5.7

Dear Mr. Miller:

I am in receipt of your (FOIL) request, which was received in this office on July 18th, 2018 in regards to the above-mentioned property. I forwarded your request to the Building/Code Enforcement Office to obtain the requested information.

According to the Building/Code Enforcement Office, the requested information should be available by Friday, July 27th, 2018. As soon as the information is ready I will contact you and advise of the cost. Please be advised that the cost of the documents will be .25 cents per page and there will be an additional charge for larger sized copies of maps, plans etc. that would have to be sent out and also for postage should the documents be mailed.

In the event that this request is being denied in part or whole you have the right to appeal such decision within 30-days of the denial. Appeals should be directed to Town Attorney Michael B. Mednick, PO Box 612, Monticello, New York 12701.

Thank you for your attention to this matter and feel free to contact me should you have any questions.

Sincerely,



Marilee J. Calhoun
Town Clerk

MJC:

PC: Hon. William J. Rieber, Jr., Supervisor and Town Board
Mr. Michael B. Mednick, Town Attorney
Mrs. Paula E. Kay, Deputy Town Attorney
Mr. James Carnell, Jr., Building/Code Enforcement

JOHN J. BONACIC
SENATOR, 42ND DISTRICT

CHAIR
COMMITTEES ON
JUDICIARY
RACING, GAMING & WAGERING

DEPUTY REPUBLICAN CONFERENCE LEADER
FOR STATE/FEDERAL RELATIONS



THE SENATE
STATE OF NEW YORK

COMMITTEES
ALCOHOLISM
BANKS
CHILDREN & FAMILIES
FINANCE
HOUSING, CONSTRUCTION
& COMMUNITY DEVELOPMENT
RULES

July 27 2018

Ms. Patrice Chester
Deputy Administrator
Town of Thompson
4052 Route 42
Monticello, NY 12701

RE: State and Municipal Facilities Capital Program Grant \$75,000

Dear Ms. Chester:

I am pleased to inform you that I have selected your project for a grant through the State and Municipal Facilities Capital Program in the amount of \$ 75,000.

The Governor's office, Dormitory Authority of the State of New York (DASNY), and other appropriate state agencies will review and consent to this grant, provided it meets the Eligibility Criteria for the State and Municipal Facilities Capital Program, which I am enclosing for your reference.

Please carefully review, complete entirely, sign and return the enclosed two page application as soon as possible. If you wish to receive the form as a fillable .pdf file to complete and return, please email Barbara Clifford (clifford@nysenate.gov) and she will send it to you. Be advised, you will be notified by DASNY when the grant has been activated. You **SHOULD NOT** expend any funds toward this project until you receive a signed contract from DASNY.

Be assured, I will continue to work to secure funds for important projects like yours. Please keep me updated on your project's progress.

If you have any questions regarding this funding, please do not hesitate to contact my office.

Sincerely,

A handwritten signature in black ink that reads "John J. Bonacic".

JOHN J. BONACIC
State Senator

JJB/ajw:bac
Enclosures



**STATE AND MUNICIPAL FACILITIES PROGRAM
PRELIMINARY APPLICATION**

Project Category: State and Municipal Economic Development * Environmental*
* projects in these categories may require additional information and approval/certification

SECTION 1: DATA SHEET / GENERAL INFORMATION

A. Project Name: Thompson Town Park Bathroom Replacement

Project Location: Thompson Town Park, 179 Town Road, Town of Thompson

B. Applicant Organization:

Legally Incorporated Name: Town of Thompson

Street (not P.O. Box): 4052 State Route 42

City: Monticello

Zip: 12701

County: Sullivan

Phone: (845) 794-2500 Ext: 304 Fax: (845) 794-8600 E-mail: pchester@townofthompson

Contact Name & Title: Patrice Chester, Deputy Administrator

Federal Taxpayer I.D./Charity Reg.# (Non-profits Only): 14-6002141

1. Type of Organization:

Municipality

Local Development Corporation or Industrial Dev. Agency

Not-for-Profit

University/Educational Org.

Business Corporation

Other (please describe) _____

2. Is the organization currently seeking or receiving any other New York State assistance for this project? (If your answer is "yes", please provide a detailed explanation on an attached separate sheet.)

No Yes

3. Name of project beneficiary if not applicant:

SECTION 2: PROJECT DESCRIPTION

A. Project Description and Amount See Attached

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

2. Please list the amount of funding anticipated to be received from the State and Municipal Facilities Program for this project.

\$ **\$75,000**

3. Project Start Date:

4-1-2019

Anticipated Date of Project Completion:

6-15-2019

SECTION 3: PROJECT BUDGET, DISBURSEMENT SCHEDULE, & OPERATING COSTS				
A. Use of Funds	Complete the following Project Budget detailing the proposed sources and uses of funds (attach additional sheets if necessary).			
<u>USE OF FUNDS</u>	<u>SOURCES</u>			<u>TOTAL</u>
	State	In-Kind / Equity / Sponsor Contribution	Other sources	
Direct Costs:	\$	\$	\$	\$
Replace Structures	\$75,000	\$172,500		\$247,500
Demolition		\$5,000		\$5,000
Indirect/Soft Costs:				
Engineering		\$23,000		\$23,000
Total:	\$75,000	\$205,500	\$	\$275,500
B. Please describe other sources of funds and if they have been secured. The amount over \$75,000 will be paid from the town's general fund				
C. Does the project require environmental or other regulatory permits?			<input checked="" type="radio"/> No <input type="radio"/> Yes <input type="radio"/> NA	
Have they been secured?			<input type="radio"/> No <input type="radio"/> Yes <input checked="" type="radio"/> NA	
D. Has any State or local government agency reviewed the project under the State Environmental Quality Review Act (SEQRA) or is such review necessary to obtain any governmental approvals?			<input type="radio"/> No <input type="radio"/> Yes <input checked="" type="radio"/> NA	
E. Please describe the ongoing operating costs required to maintain the proposed project and the sources of these funds. Regular maintenance will be included in the town's annual budget				
SECTION 4: ELIGIBILITY FOR TAX-EXEMPT FINANCING				
1. Do you believe your project is eligible for tax-exempt financing under the Federal Internal Revenue Service code?			<input type="radio"/> No <input checked="" type="radio"/> Yes	
2. Has the applicant or proposed recipient of funds previously received financing from the sale of tax-exempt bonds? If yes, attach a schedule describing the details of such financing.			<input checked="" type="radio"/> No <input type="radio"/> Yes	
3. Does the applicant or proposed recipient of funds anticipate applying for financing for this project from the sale of other tax-exempt bonds?			<input checked="" type="radio"/> No <input type="radio"/> Yes	
4. Have any funds been expended or obligations incurred to date on that portion of the project for which this application is made? If yes, attach a schedule showing details of such disbursements (date, purpose, payee, etc.).			<input checked="" type="radio"/> No <input type="radio"/> Yes	
5. Does the applicant or proposed recipient of funds plan to occupy 100% of the project facility? If no, attach a schedule explaining the planned occupancy.			<input type="radio"/> No <input checked="" type="radio"/> Yes	

Signature of Applicant: _____

Date: _____



ZARIN &
STEINMETZ

Matthew J. Acocella
Katelyn E. Ciolino •
David J. Cooper
Jody T. Cross •
Marsha Rubin Goldstein
Helen Collier Mauch •
Zachary R. Mintz •
Erik P. Pramschufel •
Daniel M. Richmond
Kate Roberts
Brad K. Schwartz
Lisa F. Smith •
David S. Steinmetz •
Edward P. Teyber •
Michael D. Zarin

July 20, 2018

Via Email and Regular Mail

Supervisor William J. Rieber, Jr.
Town Hall
4052 Route 42
Monticello, New York 12701

James Carnell
Town Hall
4052 Route 42
Monticello, New York 12701

Re: EV Hotel Sewer Connection

Dear Bill and Jim:

We are writing on behalf of EPR Concord II, L.P., EPT Concord II, LLC and Adelaar Developer, LLC (the “EPR Entities”) in connection with Empire Resorts Real Estate II, LLC’s (“Empire”) plan to connect the EV Hotel facilities to an existing 12-inch sanitary line in Resort Entry Road (the “Proposed Connection”). As you know, the Town’s engineer, MH&E, expressed concern regarding the Proposed Connection and recommended that the EV Hotel facilities be connected at a sanitary sewer manhole that was provided off Thompsonville Road for connection of the EV Hotel sanitary sewer.

We understand that, despite MH&E’s recommendation, the Town approved the Proposed Connection, which will involve disturbance to the recently constructed Resort Entry Road. On behalf of the EPR Entities, we respectfully request that the Town and its engineers ensure that Empire restore Resort Entry Road and any affected landscaping, utilities, lighting, grading, etc. to their existing condition, and that the Town require Empire to take proper measures to prevent potential issues associated with such disturbance, including, but not limited to, issues relating to settlement of the reconstructed portion of Resort Entry Road.

We recommend that the Town carefully review Empire’s specifications for trenching in the existing road and require K-Crete to minimize settlement issues later on. In the event that the Proposed Connection causes settlement issues in the future, the area will need to be patched and repaved. In addition, the existing landscaping, utilities, irrigation, lighting and

■ Also admitted in DC
• Also admitted in CT
▲ Also admitted in NJ
♦ Also admitted in MD

grading conditions should be taken into consideration and avoided/protected and repaired/replaced to their original condition by Empire.

The EPR Entities expressly disclaim any responsibility for costs relating to the Proposed Connection, including, but not limited to, potential future issues with Resort Entry Road or the existing infrastructure lines in the area of the Proposed Connection that may arise as a result of the Proposed Connection. To the extent that there are any costs associated with the Proposed Connection or future improvements that are required as a result thereof, which are absorbed by the Adelaar Roadway or other Adelaar Special Districts, such costs should be allocated by the respective Special District solely to Empire.

Should you have any questions or wish to discuss this matter further, please feel free to contact me.

Very truly yours,

ZARIN & STEINMETZ



By: Helen Collier Mauch

cc: Paul Turvey, Esq.
Joe Kennedy
Paula Elaine Kay, Esq.
Michael B. Mednick, Esq.
George Duke, Esq.
Keith Kabeary



ZARIN &
STEINMETZ

RECEIVED

JUL 20 2018

TOWN OF THOMPSON
PLANNING BOARD
ZONING BOARD

July 20, 2018

Matthew J. Acocella
Katelyn E. Ciolino •
David J. Cooper
Jody T. Cross •
Marsha Rubin Goldstein
Helen Collier Mauch •
Zachary R. Mintz •
Erik P. Pramschufer •
Daniel M. Richmond
Kate Roberts
Brad K. Schwartz
Lisa F. Smith •
David S. Steinmetz •
Edward P. Teyber •
Michael D. Zarin

• Also admitted in DC
• Also admitted in CT
• Also admitted in NJ
• Also admitted in MD

Via Email and Regular Mail

Supervisor William J. Rieber, Jr.
Town Hall
4052 Route 42
Monticello, New York 12701

James Carnell
Town Hall
4052 Route 42
Monticello, New York 12701

Re: EV Hotel Sewer Connection

Dear Bill and Jim:

We are writing on behalf of EPR Concord II, L.P., EPT Concord II, LLC and Adelaar Developer, LLC (the "EPR Entities") in connection with Empire Resorts Real Estate II, LLC's ("Empire") plan to connect the EV Hotel facilities to an existing 12-inch sanitary line in Resort Entry Road (the "Proposed Connection"). As you know, the Town's engineer, MH&E, expressed concern regarding the Proposed Connection and recommended that the EV Hotel facilities be connected at a sanitary sewer manhole that was provided off Thompsonville Road for connection of the EV Hotel sanitary sewer.

We understand that, despite MH&E's recommendation, the Town approved the Proposed Connection, which will involve disturbance to the recently constructed Resort Entry Road. On behalf of the EPR Entities, we respectfully request that the Town and its engineers ensure that Empire restore Resort Entry Road and any affected landscaping, utilities, lighting, grading, etc. to their existing condition, and that the Town require Empire to take proper measures to prevent potential issues associated with such disturbance, including, but not limited to, issues relating to settlement of the reconstructed portion of Resort Entry Road.

We recommend that the Town carefully review Empire's specifications for trenching in the existing road and require K-Crete to minimize settlement issues later on. In the event that the Proposed Connection causes settlement issues in the future, the area will need to be patched and repaved. In addition, the existing landscaping, utilities, irrigation, lighting and

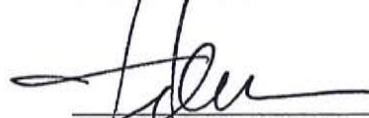
grading conditions should be taken into consideration and avoided/protected and repaired/replaced to their original condition by Empire.

The EPR Entities expressly disclaim any responsibility for costs relating to the Proposed Connection, including, but not limited to, potential future issues with Resort Entry Road or the existing infrastructure lines in the area of the Proposed Connection that may arise as a result of the Proposed Connection. To the extent that there are any costs associated with the Proposed Connection or future improvements that are required as a result thereof, which are absorbed by the Adelaar Roadway or other Adelaar Special Districts, such costs should be allocated by the respective Special District solely to Empire.

Should you have any questions or wish to discuss this matter further, please feel free to contact me.

Very truly yours,

ZARIN & STEINMETZ



By: Helen Collier Mauch

cc: Paul Turvey, Esq.
Joe Kennedy
Paula Elaine Kay, Esq.
Michael B. Mednick, Esq.
George Duke, Esq.
Keith Kabeary

21311
 12405 Powerscourt Dr
 St. Louis, MO 63131
 (314)965-0555

STUB 1 OF
 CHECK DATE: 07/17/18

NO. 06595982

DATE	INVOICE NO.	DESCRIPTION	INVOICE AMOUNT	DEDUCTIONS	AMOUNT PAID
01/31/18	Q201801	Franchise Fee	13,272.28		13,272.28
02/28/18	Q201802	Franchise Fee	13,283.61		13,283.61
03/31/18	Q201803	Franchise Fee	13,943.29		13,943.29
1st QTR 2018 -					
Total Budget				\$ 140,000	
ON TARGET					

4466353 TOWN OF THOMPSON-13

WARNING: ORIGINAL DOCUMENT HAS VISIBLE FIBERS, INVISIBLE FLUORESCENT FIBERS & CHEMICAL REACTIVE PAPER.

Charter
 COMMUNICATIONS
 12405 Powerscourt Drive
 St. Louis, MO 63131-3674
Charter Communications is an Equal Opportunity Employer/Contractor

80-1769/0815
 US BANK
 MEMPHIS, MO

NO. 06595982

4466353 DATE 07/17/18 AMOUNT \$****40,499.18

PAY FORTY THOUSAND FOUR HUNDRED NINETY NINE AND 18/100*****

TO TOWN OF THOMPSON-13
 THE TOWN HALL
 ORDER 4052 ROUTE 42 N
 OF MONTICEELO NY 12701

Thomas M. Deegan
 AUTHORIZED SIGNATURE

THE FACE OF THIS CHECK HAS A VOID FEATURE PANTOGRAPH, A MICROTYPE BORDER AND A SECURITY BACKER.

⑈06595982⑈ ⑆081517693⑆3507002677⑈

TOWN OF THOMPSON-13
TOWN HALL
4052 ROUTE 42 N
MONTICEELO , NY 12701

RE: Quarterly Franchise Fee Payment

Dear Sir or Madam:

Enclosed please find our franchise fee remittance covering the period from January 1, 2018 to March 31, 2018, for Charter Communications ("Charter"). This franchise fee computation has been prepared in accordance with the terms and conditions of our local cable television franchise agreement, or if Charter is operating under a state issued franchise in your community, in accordance with the requirements of the state franchising law. This payment specifically complies with all of Charter's contractual and/or statutory duties, and includes the required percentage, flat rate, or per sub payment, and includes all required categories or revenue.

This payment was calculated as follows:

Franchise Fee Base	\$809,983.63
Franchise Fee (as defined in Agreement):	5.00 %
Fee Adjustment (see detail)	\$0.00
Fee Due	<u>\$40,499.18</u>

Please contact your Government Relations representative or send an email directly to CharterFranchiseNotices@chartercom.com for any address updates or corrections.

We would also like to remind you of an alternative to US mail-delivered paper checks for franchise fee payments. You now have the option of signing up for an electronic direct payment process for franchise fees, assuring a more efficient and timely manner of receiving your funds. If you would like to pursue the electronic payment process, please contact your Government Relations representative for instructions. We believe this convenient method will be of significant value to you.

Charter Communications is proud to serve your community and our customers with cable television service. Please feel free to contact our office Corp_mm_franchise_fees@chartercom.com if any additional information is required.

Sincerely,



Steve Lottmann
Divisional Controller

15076 - 04466353 - 54232

Enclosure

**ATTACHMENT CONTAINS TRADE SECRET INFORMATION AND IS CONFIDENTIAL & PROPRIETARY
- NOT FOR PUBLIC DISCLOSURE**



Town of Thompson
General Ledger Detail Transaction Report
Fiscal Year 2017

Account Number	Account Description	Journal Date	Type/Num	Reference	Budget Amount	Debit	Credit	Enc/Liq	Act Exp
B000.1170.000	FRANCHISE FEES								
YEAR FORWARD BALANCE									
ORIGINAL APPROPRIATION									
1ST QTR									
	AM	1/1/2017	BY1-1	BY 01/01/2017	(\$133,900.00)	\$0.00	\$0.00	\$0.00	\$0.00
				Mth 1	(\$133,900.00)	\$0.00	\$0.00	\$0.00	\$0.00
		8/9/2017	CR103227		\$0.00	\$0.00	\$34,788.27	\$0.00	\$0.00
				Mth 8	\$0.00	\$0.00	\$34,788.27	\$0.00	(\$34,788.27)
		10/31/2017	CR103308		\$0.00	\$0.00	\$40,879.97	\$0.00	\$0.00
				Mth 10	\$0.00	\$0.00	\$40,879.97	\$0.00	(\$40,879.97)
		12/31/2017	JE103772		\$0.00	\$0.00	\$48,171.92	\$0.00	\$0.00
				Mth 12	\$0.00	\$0.00	\$48,171.92	\$0.00	(\$48,171.92)
	FRANCHISE FEES				(\$133,900.00)	\$0.00	\$123,840.16	\$0.00	(\$123,840.16)
	YTD Total for B000.1170.000								
	Total for Fund B000				(\$133,900.00)	\$0.00	\$123,840.16	\$0.00	(\$123,840.16)
	Grand Total				(\$133,900.00)	\$0.00	\$123,840.16	\$0.00	(\$123,840.16)

+ 4205385
165894.01
 3199401



**Town of Thompson
General Ledger Detail Transaction Report
Fiscal Year 2018**

Account Number	Account Description	AM	Journal Date	Type/Num	Reference	Budget Amount	Debit	Credit	Enc/Liq	Act Exp
B000.1170.000	FRANCHISE FEES									
YEAR FORWARD BALANCE										
Rebuild BY Journal		1	1/1/2018	BY1-1	Mth 1 Total	(\$140,000.00)	\$0.00	\$0.00	\$0.00	\$0.00
Charter Communications ckt#06478137 - 4th qtr		5	5/9/2018	CR104140	Charter Communications	\$0.00	\$0.00	\$42,053.85	\$0.00	\$0.00
					Mth 5 Total	\$0.00	\$0.00	\$42,053.85	\$0.00	(\$42,053.85)
	YTD Total for B000.1170.000				FRANCHISE FEES	(\$140,000.00)	\$0.00	\$42,053.85	\$0.00	(\$42,053.85)
	Total for Fund B000					(\$140,000.00)	\$0.00	\$42,053.85	\$0.00	(\$42,053.85)
	Grand Total					(\$140,000.00)	\$0.00	\$42,053.85	\$0.00	(\$42,053.85)

State of New York

REMITTANCE ADVICE for CHECK NO. 06536828

A

NOTICE: To access remittance information on any one of your NYS payments, visit <https://esupplier.sfs.ny.gov/>

Agency Code and Description	Tele Inquiry No	Voucher No	Payee Reference/Invoice No	Ref/Inv Date	Payment Amount
DHS01 Division of Homeland Secur	518/486-6011	31397ST	4322 STATE SHARE PW 383V0	07/25/18	8,058.71

*Fema for winter storm Stella
March, 2017*

GOV'T ENTITIES, VENDORS, NOT-FOR-PROFITS:

Non-Negotiable

Check Total

\$8,058.71

Go to <http://www.osc.state.ny.us/epay/index.htm> for Electronic Payments information

DETACH HERE BEFORE CASHING



PLEASE CASH WITHIN 180 DAYS

THIS DOCUMENT HAS MULTIPLE SECURITY FEATURES INCLUDING HEAT SENSITIVE, COLOR CHANGING INK ON THE BACK OF THE DOCUMENT

02435253

State of New York

Check No. 06536828

\$8,058.71

DEPARTMENT OF TAXATION AND FINANCE
DIVISION OF THE TREASURY

29-55
213

A

JULY 26, 2018

DHS01

KNOW YOUR ENDORSER

Pay to the Order of: **THOMPSON TOWN OF**

\$8,058.71

Thomas P. DiNapoli
Thomas P. DiNapoli
State Comptroller

KeyBank N.A.

Nonic Manion
Nonic Manion
Exec. Deputy Commissioner, Dept. of Taxation and Finance

⑈06536828⑈ ⑆021300556⑆ 320993202789⑈

001489 A 06536828 DHS01

STATE OF NEW YORK
DEPARTMENT OF TAXATION AND FINANCE
DIVISION OF THE TREASURY
PO BOX 22119
ALBANY, NEW YORK 12201-2119



U.S. POSTAGE PITNEY BOW



ZIP 12207 \$ 000.47
02 1W
0001404347 JUL 27 20

THOMPSON TOWN OF
4052 STATE ROUTE 42
MONTICELLO

NY 12701-3221

State of New York

A

REMITTANCE ADVICE for CHECK NO. 06540332

NOTICE: To access remittance information on any one of your NYS payments, visit <https://esupplier.sfs.ny.gov/>

Agency Code and Description	Tele Inquiry No	Voucher No	Payee Reference/Invoice No	Ref/Inv Date	Payment Amount
GAM01 NYS Gaming Commission		00021625	Resorts Distrib 1st Qtr 18/19	07/23/18	469,242.30

GOV'T ENTITIES, VENDORS, NOT-FOR-PROFITS:

Non-Negotiable

Check Total

\$469,242.30

Go to <http://www.osc.state.ny.us/epay/index.htm> for Electronic Payments information

DETACH HERE BEFORE CASHING



PLEASE CASH WITHIN 180 DAYS

THIS DOCUMENT HAS MULTIPLE SECURITY FEATURES INCLUDING HEAT SENSITIVE, COLOR CHANGING INK ON THE BACK OF THE DOCUMENT

Security Features Included: ED Details on back

02441724

State of New York

Check No. 06540332

\$469,242.30

DEPARTMENT OF TAXATION AND FINANCE
DIVISION OF THE TREASURY

29-55
213

A

JULY 27, 2018

GAM01

KNOW YOUR ENDORSER

Pay to the
Order of:

THOMPSON TOWN OF

\$469,242.30

Thomas P. DiNapoli
Thomas P. DiNapoli
State Comptroller

KeyBank N.A.

Nonie Manion
Nonie Manion
Exec. Deputy Commissioner, Dept. of Taxation and Finance

⑈06540332⑈ ⑆021300556⑆ 320993202789⑈

REMOVE SIDE EDGES FIRST
DO NOT CUT, CREASE AND TEAR THIS STUB ALONG PERFORATION

SEE REVERSE SIDE FOR OPENING INSTRUCTIONS

001856 A 06540332 GAM01

STATE OF NEW YORK
DEPARTMENT OF TAXATION AND FINANCE
DIVISION OF THE TREASURY
PO BOX 22119
ALBANY, NEW YORK 12201-2119



U.S. POSTAGE PITNEY BOWE

ZIP 12207 \$ 000.47
02 1W
0001404347 JUL 30 2018

THOMPSON TOWN OF
4052 STATE ROUTE 42
MONTICELLO

NY 12701-3221

Certificate of the Final State Equalization Rate
for the 2018 Assessment RollMr. William Rieber , Supervisor
Town of Thompson
Town Hall
4052 Route 42
Monticello, NY 12701 3221County of Sullivan
Town of Thompson
Municipal Code: 484600
Final State Equalization Rate: * 86.00 *

I, Brian F. Moon, hereby certify that on July 19, 2018 the State Office of Real Property Tax Services established a final State equalization rate of 86.00 for the above named municipality.

Brian F. Moon
Real Property Analyst 2

Note: Since your municipality did not file a complaint with respect to the tentative rate, the final equalization rate is the same as the tentative rate. Notice of the final rate will be filed with the clerk of the county legislative body and in the office of the State Comptroller.

Mr. Van B. Krzywicki , Appointed Assessor
Town of Thompson
Town Hall
4052 Route 42
Monticello, NY 12701 3221

2018 Equalization Rate Status

Municipal Code	Municipal Name	(A) 2017 State Equalization Rate	(B) 2018 State Equalization Rate and Status	(C) Percentage Change in Estimate of Full Value
482000	Town of Bethel	69.75	68.00 Final	2.57%
482200	Town of Callicoon	69.00	66.45 Final	3.84%
482400	Town of Cochection	79.00	77.00 Final	2.60%
482600	Town of Delaware	100.00	100.00 Final	1.69%
482800	Town of Fallsburgh	64.00	59.50 Final	7.56%
483000	Town of Forestburgh	7.64	100.00 Final	-4.40%
483200	Town of Fremont	66.50	66.50 Final	0.00%
483400	Town of Highland	100.00	100.00 Final	0.00%
483600	Town of Liberty	78.50	75.00 Final	4.67%
483800	Town of Lumberland	100.00	100.00 Final	0.00%
484000	Town of Mamakating	65.40	63.78 Final	2.54%
484200	Town of Neversink	3.80	3.80 Final	0.00%
484400	Town of Rockland	73.50	68.65 Final	7.06%
484600	Town of Thompson	88.00	86.00 Final	2.33%
484800	Town of Tusten	54.00	54.00 Final	0.00%

Column C is the percentage change in the estimate of full value between the 2017 State equalization rate and the 2018 State equalization rate due to the change in full value standard.

This percentage change is important because county and school taxes are apportioned according to a municipality's share of the full value of the county or the school. A municipality will be apportioned a larger share of the tax levy if its full value increases by a larger percentage than others, or if its full value decreases less than the decrease for other municipalities in the county or school.

The information shown in columns B and C is subject to change as the other tentative rates are established in the county and as rates are finalized after the completion of rate complaint processing. You will be sent a complete report when we have established 2018 State equalization rates for all municipalities in your county.



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

July 26, 2018

William Rieber
Town of Thompson
4052 Route 42
Monticello, NY 12701

Rescinded

Re: Melody Lake Acres
Town of Thompson
Boil Water Orders

Dear Mr. Rieber:

Water sample results for samples collected at the above-mentioned facility on July 23, 2018 and July 24, 2018, indicated the water supply to be of satisfactory bacteriological quality at the time of sampling. The Boil Water Order issued by this department on July 23, 2018 is hereby rescinded and normal use of this supply may resume.

Public notification must be made in a manner reasonably calculated to reach all persons served by the water supply within 24 hours. One or more of the following forms of delivery are acceptable:

- 1) local broadcast media such as radio or television
- 2) hand delivery of notice to persons served by the water system
- 3) posting the notice in conspicuous locations throughout the area served by the water system

If you have any questions regarding this matter please contact this office at (845) 794-2045.

Sincerely,

Chris J. Coddington
District Director

CJC:vla

cc: Michael Messenger



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

July 23, 2018

William Rieber
Town of Thompson
4052 Route 42
Monticello, NY 12701

Re: Melody Lake Acres
Town of Thompson
Boil Water Order

Dear Mr. Rieber:

You are hereby directed to discontinue use of this water supply for human consumption, and post the enclosed "Boil Water Order" until the Department has determined that adequate correction and/or controls are in place and that the water is of an acceptable bacteriological quality.

As a result, you are hereby directed to discontinue normal use of this water supply as a potable source of drinking water, and post the enclosed "Boil Water Order" at all taps until otherwise notified by this office.

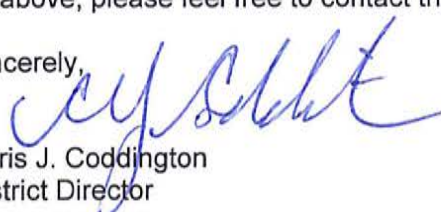
Public notification must be made in a manner reasonably calculated to reach all persons served by the water supply within 24 hours. One or more of the following forms of delivery are acceptable:

- 1) local broadcast media such as radio or television
- 2) hand delivery of notice to persons served by the water system
- 3) posting the of the notice in conspicuous locations throughout the area served by the water system

In addition, the results of microbiological analysis from **water samples collected on two (2) consecutive days** must be submitted to this office **no later than August 1, 2018**, or as otherwise directed by the Department to confirm satisfactory water quality prior to rescinding the Boil Water Order. **Systems using chlorine disinfection must include the chlorine residual at the time of sampling on the chain of custody form submitted to the lab. You can write it next to the exact location of the sample.**

If you have any questions concerning the above, please feel free to contact this office at (845) 794-2045.

Sincerely,



Chris J. Coddington
District Director

CJC:cjz
Enclosure
cc: Michael Messenger



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

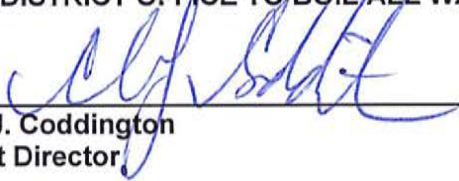
SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

BOIL WATER ORDER ISSUED ON JULY 23, 2018

Loss of pressure in Melody Lake Acre's water supply

BOIL YOUR WATER BEFORE USING

CUSTOMERS OF THE MELODY LAKE ACRE'S WATER SUPPLY IN THE TOWN OF THOMPSON, NEW YORK, ARE HEREBY ORDERED BY THE NEW YORK STATE DEPARTMENT OF HEALTH, MONTICELLO DISTRICT OFFICE TO BOIL ALL WATER FOR DRINKING AND CULINARY PURPOSES.


Chris J. Coddington
District Director

Sometime after 4:30 pm on Sunday July 22, 2018, the water system lost pressure at the above noted location due to power outage. When the distribution pipes and mains lose pressure it increases the chance that untreated water and harmful microbes could enter the system.

DO NOT DRINK THE WATER WITHOUT BOILING IT FIRST. Bring all water to a boil, let it boil for one minute, and let it cool before using, or use bottled water certified for sale by the New York State Department of Health. Boiled or bottled water should be used for drinking, making ice, brushing teeth, washing dishes, and food preparation **until further notice**. Boiling kills most bacteria and other organisms in the water.

Harmful microbes in drinking water can cause diarrhea, cramps, nausea, headaches, or other symptoms. They may pose a special health risk for infants, some elderly, and people with severely compromised immune systems. The symptoms above are not just caused by organisms in drinking water. If you experience any of these symptoms and they persist, you may want to seek medical advice.

What is being done?

Power and water pressure have been restored. You will be informed when tests confirm that no harmful bacteria are in the system and you no longer need to boil your water.

For more information, please contact Michael Messenger at the Town of Thompson Water & Sewer Department at 845-794-5280 or the New York State Department of Health at 845-794-2045.

Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this notice in a public place or distributing copies by hand or mail.

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Water, Region 3
100 Hillside Avenue, Suite 1W, White Plains, NY 10603
P: (914) 428-2505 | F: (914) 428-0323
www.dec.ny.gov

July 12, 2018

Town of Thompson
Supervisor Rieber and Town Board
Town Hall
4052 Route 42
Monticello, NY12701

Re: **Annual Compliance Inspection**
Kiamesha Lake Wastewater Treatment Plant
SPDES Permit No.: NY0030724

Dear Town Officials:

On June 11, 2018, a compliance inspection of the above referenced facility was performed for the purpose of evaluating compliance with the State Pollutant Discharge Elimination System (SPDES) Permit and Article 17 of the Environmental Conservation Law. Please refer to the attached copy of the inspection report for detailed information and note the satisfactory rating.

There was a reported incident of toxic load discharge into the wastewater treatment plant in February 2018 that resulted in the upset of the biological process and effluent violation of SPDES permit parameters of Total Suspended Solids, Ultimate Oxygen Demand, and Nitrogen, Ammonia (N). A similar incident also reoccurred in July 2018 and in this case the party responsible for the toxic load discharge to the wastewater treatment plant was identified.

Note that appropriate measures must be taken to prohibit the discharge of toxic or unauthorized wastewater into the collection system. Therefore, submit to the Department by August 1, 2018 a long-term plan to educate and monitor potential or active industrial dischargers to the WWTP to prevent a recurrence of these incidents.

Your cooperation in operating and maintaining this facility, complying with your SPDES Permit and the protection of New York's waters is appreciated. Should you have any questions, please contact me at (914) 428-2505, Ext 365.

Annual Compliance Inspection
Kiamesha Lake Wastewater Treatment Plant
SPDES Permit No.: NY0030724

Page 2

Very truly yours,

A handwritten signature in black ink, appearing to read 'Adedayo Adewole', written in a cursive style.

Adedayo Adewole, P.E.
Professional Engineer 1 (Environmental)

cc: Shohreh Karimipour, P.E., Regional Water Engineer
Michael Messenger, Superintendent, Town of Thompson Water & Sewer Dept.



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
 DIVISION OF WATER
MUNICIPAL WASTEWATER FACILITY INSPECTION REPORT - COMPREHENSIVE (Part I)

Purpose of Inspection Comprehensive		DEC Region 3	Date of Inspection 06/11/18
SPDES No. NY0030724	Facility Name Kiamesha Lake WWTP		Location (C,T,V) (T) Thompson
County Sullivan	Name of Inspector Adedayo Adewole	Part II Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Summary Rating: Satisfactory			
Weather Conditions: Sunny, 70s			
Rating Codes: S = Satisfactory U = Unsatisfactory M = Marginal NI = Not Inspected NA = Not Applicable			
Items	Rating	Comments (Note units out of operation/outstanding operation/etc.)	
A. General			
1. Buildings/Grounds/Housekeeping	S		
2. Flow Metering	S	Calibrated 05/17	
3. Stand-by Power	S	Routinely Tested	
4. Alarm Systems	S		
5. Odors/Odor Control	S		
6. Influent Impact on Operations	S		
7. Preventive Maintenance	S		
8.			
B. Preliminary/Primary			
1. Influent Pumps	NA		
2. Bar Screen/Comminutor	S	Mechanical Screen	
3. Disposal of Grit/Screenings	S	Grit Classifier	
4. Grit Removal	S	Grit Chamber	
5. Settling Tanks			
6. Scum/Sludge Removal			
7. Effluent			
8.			
C. Secondary/Tertiary			
1. Oxidation Ditches	S	Oxidation Ditches 1 & 2 offline	
2. Secondary Clarifiers	S	One unit offline for rehabilitation.	
3. Polishing Pond	NA	Offline	
4. Sand Filters	S		
5. Post Aeration	S		
6.			
7.			
8.			
D. Effluent			
1. Disinfection	NA		
2. Effluent Condition	S		
3. Receiving Water Condition	S		
4.			
E. Sludge Handling/Disposal			
1. Digesters	S	Aerobic Digesters	
2. Sludge Pumps	S		
3. Sludge Dewatering	S	Gravity Thickener Plate and Plate Press	
4. Sludge Disposal	S		
5. Sludge Drying Beds	S		
Signature of Inspector: <i>Adedayo Adewole</i>		Title: PE 1 (Environmental)	Date: 06/11/18
Name of Facility Representative: Michael Messenger		Title: Chief Operator	Date: 06/11/18

MUNICIPAL WASTEWATER FACILITY INSPECTION REPORT - COMPREHENSIVE (Part II)

Facility Name	SPDES Number	Comments
Kiamesha Lake WWTP	NY0030724	
<p>A. Collection System</p> <p>(1) <u>100</u> % Separate _____ % Combined</p> <p>(2) Did sewer overflows occur upstream of the plant in the past year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>(3) Reason for overflow(s).</p> <p>(4) Was overflow sewage chlorinated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A</p> <p>(5) Were there any unpermitted overflows/bypasses? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A</p> <p>(6) Were appropriate agencies notified promptly, when required, of each overflow? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A</p> <p>(7) Is the capability for bypass designed into the plant? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A If so, list units which can be bypassed.</p> <p>(8) Does sewage by-pass the plant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A Define conditions under which bypass occurs (e.g. what flow):</p> <p> Bypass frequency (times per year): _____ Average duration of bypass (hours): _____</p> <p>(9) Infiltration/Inflow problems, e.g., is sewage ordinance enforced with respect to illegal stormwater connections? Explain as needed (include reference to corrective action or lack thereof).</p> <p>(10) Is there a BMP/Wet Weather Operations Plan? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>(11) Number of pump stations in system: <u>9</u> Number inspected this inspection: <u>1</u> Comments (consider access, ventilation, lighting, emergency power, safety, etc): Adelaar Pump Station #1 - Two pumps Emergency Generator</p>		
<p>B. Industrial Waste</p> <p>(1) Are industrial waste loadings causing problems at this facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Explain as needed (describe nature of problem an extent and adequacy of measures to address the problem):</p> <p>(2) Is there a sewer use ordinance? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Date: <u>1987</u></p> <p> Based on Model: _____ Is it being enforced to control Industrial Waste? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A</p> <p>(3) Does this facility accept septage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A How much?</p> <p> How is it introduced?</p>		

C. Laboratory Information

(1) Is the permittee using an ELAP certified laboratory? Yes No N/A
 Details:

(2) Is a commercial laboratory used? Yes No N/A
 Lab Name: OCL (ELAP # 10142)

Lab Address: 35 Goshen Turnpike, Bloomingburg, NY

(3) Pertaining to SPDES Self-Monitoring:
 (a) Does the permittee have a written sampling plan? Yes No N/A
 If yes, are they following their plan? Yes No N/A
 (b) Is testing done for all parameters at required frequency and punctually reported? Yes No N/A
 (c) Do sampling techniques meet requirements and intent of permit? Yes No N/A
 (d) Are EPA-approved procedures used? Yes No N/A
 (e) Is calibration and maintenance of instrumentation and equipment satisfactory? Yes No N/A
 (f) Is quality control used? (Spiked/duplicate samples) Yes No N/A
 (g) Should sampling frequencies/types be modified? Yes No N/A
 If yes, please explain:

(h) Are lab records satisfactory? Yes No N/A
 (i) Is a minimum of 3 years data kept? Yes No N/A

(4) Pertaining to Process Control:
 (a) Is testing performed for all necessary parameters? Yes No N/A
 (b) Is testing performed at necessary frequencies? Yes No N/A
 (c) Are procedures technically sound? Yes No N/A
 (d) Is sampling adequate? Yes No N/A

Activated Sludge Facility:

(e) Does the facility operator test for the following:
 MLSS? Yes No N/A
 Dissolved Oxygen? Yes No N/A
 Settleability? Yes No N/A
 Microscopic Analysis of Sludge? Yes No N/A
 Final Clarifier Sludge Blanket Depth? Yes No N/A
 Process Control "Target Values"? Yes No N/A

(f) Does the facility operator calculate the following process control parameters:
 MCRT? Yes No N/A
 Sludge Age? Yes No N/A
 (g) Is the testing applied towards process control adjustments? Yes No N/A

(h) What approach (if any) is used to determine changes in:
 Sludge Age?
 MLSS

Waste Sludge Flow?

(i) Was laboratory information used to prepare the DMR and Monthly Operating Report properly? Yes No N/A

(5) Explanation as needed for any of the above:

D. Personnel Information

(1) Is staffing and training adequate? (Consider all aspects, including management/supervision, operations, laboratory, maintenance, safety, availability of training, development of staff, etc). Yes No N/A

(2) Certified Operators:

Chief Operator - Name, Certificate Number, Grade, Renewal Date:

Michael Messenger 13049 3A 10/01/2020

Assistant Operator - Name, Certificate Number, Grade, Renewal Date:

Keith Reiber 14113 3A 04/01/2020

(3) Is operational staff certified at the appropriate level(s)? Yes No N/A
Explain if needed:

(4) Do facility operators have renewal certification and/or training records? Yes No N/A

(5) Plant Classification: 3A

(6) Plant Score: 67

(7) Explain as needed for any of the above:

E. Additional Information

(1) Is treatment facility properly operated and maintained? Yes No N/A
Details:

(2) Check Adequate/Inadequate as appropriate:

- (a) Preventive maintenance schedules exist and are followed? Adequate Inadequate
- (b) Records are kept for maintenance, repairs and replacement? Adequate Inadequate
- (c) Spare parts inventory is maintained? Adequate Inadequate
- (d) O&M Manual exists and is available? Adequate Inadequate
- (e) O&M Manual kept up-to-date? Adequate Inadequate
- (f) As-built plans and specifications exist and are available? Adequate Inadequate
- (g) Manufacturers' O&M specifications exist and are available? Adequate Inadequate
- (h) Other records kept as needed (e.g. flow recorder charts)? Adequate Inadequate
- (i) Alarm system for power or equipment failures is properly maintained and tested? Adequate Inadequate
- (j) Standby power system exists and is routinely tested? Adequate Inadequate

(3) Current copy of Part I and Part II of SPDES permit on premises? Yes No N/A

(4) Has facility been subject of complaints (odors, others)? Yes No N/A
If yes, describe:

(5) Is sludge disposal satisfactory and are required permits in force? Yes No N/A

(a) Name and location of sludge disposal site (and/or name and permit number of scavenger):

Cassello Organics, MA-113

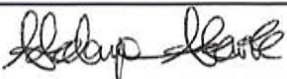
(b) Is there an alternate sludge disposal site or contingency plan? Yes No N/A
If yes, please describe:

- (6) Does facility have effective administrative structure and adequate financial systems (e.g. Repair Reserve Fund, Uniform Accounting System)? Yes No N/A
- (7) Is progress on compliance schedule(s) (e.g. Upgrading, CSO, Pretreatment) satisfactory? Yes No N/A
- (8) Explanation as needed for any of the above:

Consent order compliance schedule under implementation for SSES and Process Control Optimization.

F. Inspector Comments

Toxic load discharge into the wastewater treatment plant in February 2018 resulted in the upset of the biological process and effluent violation of SPDES permit parameters of Total Suspended Solids, Ultimate Oxygen Demand, and Nitrogen, Ammonia (N).

Signature of Inspector: 	Title: PE 1 (Environmental)	Date: 06/11/18
Name of Facility Representative: Michael Messenger	Title: Chief Operator	Date: 06/11/18

New York State Department of Environmental Conservation

Division of Water, Region 3

100 Hillside Avenue – Suite 1W, White Plains, New York 10603-2860

Phone: (914) 428-2505 • Fax: (914) 428-0323

Website: www.dec.ny.gov



Joe Martens
Commissioner

July 19, 2018

Town of Thompson
Town Hall
4052 Route 42
Monticello, NY 12701
Attn: Supervisor & Town Board

Re: **Annual Compliance Inspection**
Emerald Green Sewage Treatment Plant
SPDES#: NY-0035645

Dear Officials:

The inspection of the referenced facility was performed on June 25, 2018, for the purpose of evaluating compliance with the State's Pollutant Discharge Elimination System (SPDES) Permit and Article 17 of the Environmental Conservation Law.

At the time of inspection, the facility was **operating in a satisfactory manner**. Please refer to the attached copies of the inspection report and inspector comments for more detailed information.

Your cooperation in operating and maintaining this facility is appreciated. Please contact me at the above number if you have any questions.

Sincerely,



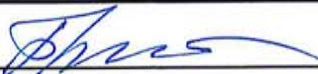
Vladimir Berezanskiy, Environmental Engineering Technician 3

cc: Shohreh Karimipour, P.E. - Regional Water Engineer



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF WATER

MUNICIPAL WASTEWATER FACILITY INSPECTION REPORT - COMPREHENSIVE (Part I)

Purpose of Inspection Compliance		DEC Region 3	Date of Inspection 7/12/18
SPDES No. NY0035645	Facility Name Emerald Green STP		Location (C,T,V) Tompson
County Sullivan	Name of Inspector Vladimir Berezanskiy		Part II Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Summary Rating: Satisfactory			
Weather Conditions: Sunny, 80's			
Rating Codes: S = Satisfactory U = Unsatisfactory M = Marginal NI = Not Inspected NA = Not Applicable			
Items	Rating	Comments (Note units out of operation/outstanding operation/etc.)	
A. General			
1. Buildings/Grounds/Housekeeping	S		
2. Flow Metering	S	Calibrated 5/22/18	
3. Stand-by Power	NA		
4. Alarm Systems	NA		
5. Odors/Odor Control	S		
6. Influent Impact on Operations	M	In heavy rain	
7. Preventive Maintenance	S		
8.			
B. Preliminary/Primary			
1. Influent Pumps	NA		
2. Bar Screen/Comminutor	S		
3. Disposal of Grit/Screenings	NA		
4. Grit Removal	NA		
5. Settling Tanks	S		
6. Scum/Sludge Removal	S		
7. Effluent	S		
8.			
C. Secondary/Tertiary			
1. Trickling Filters -2	S		
2. Final Clarifier	S		
3. Post aeration	S		
4.			
5.			
6.			
7.			
8.			
D. Effluent			
1. Disinfection	S	Seasonal	
2. Effluent Condition	S		
3. Receiving Water Condition	S		
4.			
E. Sludge Handling/Disposal			
1. Digesters	S	Anaerobic	
2. Sludge Pumps	S		
3. Sludge Dewatering	S	Drying beds	
4. Sludge Disposal	S		
5.			
Signature of Inspector: 		Title: E.E.T.3	Date: 7/12/18
Name of Facility Representative: Keith Rieber		Title: Assistant Superintendent	Date: 7/12/18

MUNICIPAL WASTEWATER FACILITY INSPECTION REPORT - COMPREHENSIVE (Part II)

Facility Name	SPDES Number	Comments
Emerald Green STP	NY0035645	

A. Collection System

- (1) 100 % Separate _____ % Combined
- (2) Did sewer overflows occur upstream of the plant in the past year? __Yes XNo __N/A
- (3) Reason for overflow(s).
- (4) Was overflow sewage chlorinated? __Yes __No XN/A
- (5) Were there any unpermitted overflows/bypasses? __Yes __No XN/A
- (6) Were appropriate agencies notified promptly, when required, of each overflow? __Yes __No XN/A
- (7) Is the capability for bypass designed into the plant? XYes __No __N/A
 If so, list units which can be bypassed.
 Sand filters
- (8) Does sewage by-pass the plant? __Yes XNo __N/A
 Define conditions under which bypass occurs (e.g. what flow):
- Bypass frequency (times per year): - _____
 Average duration of bypass (hours): - _____
- (9) Infiltration/Inflow problems, e.g., is sewage ordinance enforced with respect to illegal stormwater connections?
 Explain as needed (include reference to corrective action or lack thereof).
- (10) Is there a BMP/Wet Weather Operations Plan? XYes __No __N/A
- (11) Number of pump stations in system: 10 _____
 Number inspected this inspection: - _____
 Comments (consider access, ventilation, lighting, emergency power, safety, etc):

B. Industrial Waste

- (1) Are industrial waste loadings causing problems at this facility? __Yes XNo __N/A
 Explain as needed (describe nature of problem an extent and adequacy of measures to address the problem):
- (2) Is there a sewer use ordinance? XYes __No __N/A
 Date: _____
- Based on Model: _____
 Is it being enforced to control Industrial Waste? __Yes XNo __N/A
- (3) Does this facility accept septage? __Yes XNo __N/A
 How much?
- How is it introduced?

C. Laboratory Information

(1) Is the permittee using an ELAP certified laboratory? Yes No N/A

Details:

(2) Is a commercial laboratory used? Yes No N/A

Lab Name: OCL Analytical Services ELAP # 10510

Lab Address: 35 Goshen Tpke, Bloomingburg, NY 12721

(3) Pertaining to SPDES Self-Monitoring:

(a) Does the permittee have a written sampling plan? Yes No N/A

If yes, are they following their plan? Yes No N/A

(b) Is testing done for all parameters at required frequency and punctually reported? Yes No N/A

(c) Do sampling techniques meet requirements and intent of permit? Yes No N/A

(d) Are EPA-approved procedures used? Yes No N/A

(e) Is calibration and maintenance of instrumentation and equipment satisfactory? Yes No N/A

(f) Is quality control used? (Spiked/duplicate samples) Yes No N/A

(g) Should sampling frequencies/types be modified? Yes No N/A

If yes, please explain:

(h) Are lab records satisfactory? Yes No N/A

(i) Is a minimum of 3 years data kept? Yes No N/A

(4) Pertaining to Process Control:

(a) Is testing performed for all necessary parameters? Yes No N/A

(b) Is testing performed at necessary frequencies? Yes No N/A

(c) Are procedures technically sound? Yes No N/A

(d) Is sampling adequate? Yes No N/A

Activated Sludge Facility:

(e) Does the facility operator test for the following:

MLSS? Yes No N/A

Dissolved Oxygen? Yes No N/A

Settleability? Yes No N/A

Microscopic Analysis of Sludge? Yes No N/A

Final Clarifier Sludge Blanket Depth? Yes No N/A

Process Control "Target Values"? Yes No N/A

(f) Does the facility operator calculate the following process control parameters:

MCRT? Yes No N/A

Sludge Age? Yes No N/A

(g) Is the testing applied towards process control adjustments?

Yes No N/A

(h) What approach (if any) is used to determine changes in:

Sludge Age?

Waste Sludge Flow?

(i) Was laboratory information used to prepare the DMR and Monthly Operating Report properly?

Yes No N/A

(5) Explanation as needed for any of the above:

D. Personnel Information

(1) Is staffing and training adequate? (Consider all aspects, including management/supervision, operations, laboratory, maintenance, safety, availability of training, development of staff, etc). Yes No N/A

(2) Certified Operators:

Chief Operator - Name, Certificate Number, Grade, Renewal Date:

Michael Messenger - 13049; 3A; 2020-10-01

Assistant Operator - Name, Certificate Number, Grade, Renewal Date:

Keith Rieber - 14113; 3A; 2020-04-01

(3) Is operational staff certified at the appropriate level(s)?

Yes No N/A

Explain if needed:

(4) Do facility operators have renewal certification and/or training records?

Yes No N/A

(5) Plant Classification: _____

(6) Plant Score: _____

(7) Explain as needed for any of the above:

E. Additional Information

(1) Is treatment facility properly operated and maintained?

Yes No N/A

Details:

(2) Check Adequate/Inadequate as appropriate:

(a) Preventive maintenance schedules exist and are followed?

Adequate Inadequate

(b) Records are kept for maintenance, repairs and replacement?

Adequate Inadequate

(c) Spare parts inventory is maintained?

Adequate Inadequate

(d) O&M Manual exists and is available?

Adequate Inadequate

(e) O&M Manual kept up-to-date?

Adequate Inadequate

(f) As-built plans and specifications exist and are available?

Adequate Inadequate

(g) Manufacturers' O&M specifications exist and are available?

Adequate Inadequate

(h) Other records kept as needed (e.g. flow recorder charts)?

Adequate Inadequate

(i) Alarm system for power or equipment failures is properly maintained and tested?

Adequate Inadequate

(j) Standby power system exists and is routinely tested?

Adequate Inadequate

(3) Current copy of Part I and Part II of SPDES permit on premises?

Yes No N/A

(4) Has facility been subject of complaints (odors, others)?

Yes No N/A

If yes, describe:

(5) Is sludge disposal satisfactory and are required permits in force?

Yes No N/A

(a) Name and location of sludge disposal site (and/or name and permit number of scavenger):

Casella Organics

(b) Is there an alternate sludge disposal site or contingency plan?

Yes No N/A

If yes, please describe:

- (6) Does facility have effective administrative structure and adequate financial systems (e.g. Repair Reserve Fund, Uniform Accounting System)? Yes No N/A
- (7) Is progress on compliance schedule(s) (e.g. Upgrading, CSO, Pretreatment) satisfactory? Yes No N/A
- (8) Explanation as needed for any of the above:

F. Inspector Comments

Signature of Inspector: 

Title: E.E.T.3

Date: 7/12/18

Name of Facility Representative: Keith Rieber

Title: Assistant Superintendent

Date: 7/12/18

New York State Department of Environmental Conservation

Division of Water, Region 3

100 Hillside Avenue – Suite 1W, White Plains, New York 10603-2860

Phone: (914) 428-2505 • Fax: (914) 428-0323

Website: www.dec.ny.gov



Joe Martens
Commissioner

July 19, 2018

Town of Thompson
Town Hall
4052 Route 42
Monticello, NY 12701
Attn: Supervisor & Town Board

Re: **Annual Compliance Inspection**
Sackett Lake Sewage Treatment Plant
SPDES#: NY0030716

Dear Officials:

The inspection of the referenced facility was performed on June 25, 2018, to evaluating compliance with the State's Pollutant Discharge Elimination System (SPDES) Permit and Article 17 of the Environmental Conservation Law.

At the time of inspection, the facility was **operating in a satisfactory manner**. Please refer to the attached copies of the inspection report and inspector comments for more detailed information.

Your cooperation in operating and maintaining this facility is appreciated. Please contact me at the above number if you have any questions.

Sincerely,



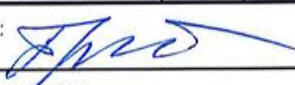
Vladimir Berezanskiy, Environmental Engineering Technician 3

cc: Shohreh Karimipour, P.E. - Regional Water Engineer



NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF WATER

MUNICIPAL WASTEWATER FACILITY INSPECTION REPORT - COMPREHENSIVE (Part I)

Purpose of Inspection Compliance		DEC Region 3	Date of Inspection 7/12/18
SPDES No. NY0030716	Facility Name Sackett Lake STP	Location (C,T,V) Tompson	
County Sullivan	Name of Inspector Vladimir Berezanskiy	Part II Attached? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Summary Rating: Satisfactory			
Weather Conditions: Sunny, 80's			
Rating Codes: S = Satisfactory U = Unsatisfactory M = Marginal NI = Not Inspected NA = Not Applicable			
Items	Rating	Comments (Note units out of operation/outstanding operation/etc.)	
A. General			
1. Buildings/Grounds/Housekeeping	S		
2. Flow Metering	S	Calibrated 5/22/18	
3. Stand-by Power	NA		
4. Alarm Systems	NA		
5. Odors/Odor Control	S		
6. Influent Impact on Operations	M	In heavy rain	
7. Preventive Maintenance	S		
8.			
B. Preliminary/Primary			
1. Influent Pumps	NA		
2. Bar Screen/Comminutor	S		
3. Disposal of Grit/Screenings	NA		
4. Grit Removal	NA		
5. Settling Tanks	S		
6. Scum/Sludge Removal	S		
7. Effluent	S		
8.			
C. Secondary/Tertiary			
1. Trickling Filters -2	S		
2. Final Clarifier	S		
3. Post aeration	S		
4.			
5.			
6.			
7.			
8.			
D. Effluent			
1. Disinfection	S	Seasonal	
2. Effluent Condition	S		
3. Receiving Water Condition	S		
4.			
E. Sludge Handling/Disposal			
1. Digesters	S	Anaerobic	
2. Sludge Pumps	S		
3. Sludge Dewatering	S	Drying beds	
4. Sludge Disposal	S		
5.			
Signature of Inspector: 		Title: E.E.T.3	Date: 7/12/18
Name of Facility Representative: Keith Rieber		Title: Assistant Superintendent	Date: 7/12/18

MUNICIPAL WASTEWATER FACILITY INSPECTION REPORT - COMPREHENSIVE (Part II)

Facility Name	SPDES Number	Comments
Sackett Lake STP	NY0030716	

A. Collection System

- (1) 100 % Separate _____ % Combined
- (2) Did sewer overflows occur upstream of the plant in the past year? XYes No N/A
- (3) Reason for overflow(s).
7/9/18 - Clog
- (4) Was overflow sewage chlorinated? Yes XNo N/A
- (5) Were there any unpermitted overflows/bypasses? Yes XNo N/A
- (6) Were appropriate agencies notified promptly, when required, of each overflow? XYes No N/A
- (7) Is the capability for bypass designed into the plant? XYes No N/A
If so, list units which can be bypassed.
Settling tanks
- (8) Does sewage by-pass the plant? Yes XNo N/A
Define conditions under which bypass occurs (e.g. what flow):
- Bypass frequency (times per year):
Average duration of bypass (hours):
- (9) Infiltration/Inflow problems, e.g., is sewage ordinance enforced with respect to illegal stormwater connections? Yes XNo N/A
Explain as needed (include reference to corrective action or lack thereof).
- (10) Is there a BMP/Wet Weather Operations Plan? XYes No N/A
- (11) Number of pump stations in system: 3
Number inspected this inspection:
Comments (consider access, ventilation, lighting, emergency power, safety, etc):

B. Industrial Waste

- (1) Are industrial waste loadings causing problems at this facility? Yes XNo N/A
Explain as needed (describe nature of problem an extent and adequacy of measures to address the problem):
- (2) Is there a sewer use ordinance? XYes No N/A
Date: _____
Based on Model: _____
Is it being enforced to control Industrial Waste? Yes XNo N/A
- (3) Does this facility accept septage? Yes XNo N/A
How much?

How is it introduced?

C. Laboratory Information

(1) Is the permittee using an ELAP certified laboratory? Yes No N/A

Details:

(2) Is a commercial laboratory used? Yes No N/A

Lab Name: OCL Analytical Services ELAP # 10510

Lab Address: 35 Goshen Tpke, Bloomingburg, NY 12721

(3) Pertaining to SPDES Self-Monitoring:

(a) Does the permittee have a written sampling plan? Yes No N/A

If yes, are they following their plan? Yes No N/A

(b) Is testing done for all parameters at required frequency and punctually reported? Yes No N/A

(c) Do sampling techniques meet requirements and intent of permit? Yes No N/A

(d) Are EPA-approved procedures used? Yes No N/A

(e) Is calibration and maintenance of instrumentation and equipment satisfactory? Yes No N/A

(f) Is quality control used? (Spiked/duplicate samples) Yes No N/A

(g) Should sampling frequencies/types be modified? Yes No N/A

If yes, please explain:

(h) Are lab records satisfactory? Yes No N/A

(i) Is a minimum of 3 years data kept? Yes No N/A

(4) Pertaining to Process Control:

(a) Is testing performed for all necessary parameters? Yes No N/A

(b) Is testing performed at necessary frequencies? Yes No N/A

(c) Are procedures technically sound? Yes No N/A

(d) Is sampling adequate? Yes No N/A

Activated Sludge Facility:

(e) Does the facility operator test for the following:

MLSS? Yes No N/A

Dissolved Oxygen? Yes No N/A

Settleability? Yes No N/A

Microscopic Analysis of Sludge? Yes No N/A

Final Clarifier Sludge Blanket Depth? Yes No N/A

Process Control "Target Values"? Yes No N/A

(f) Does the facility operator calculate the following process control parameters:

MCRT? Yes No N/A

Sludge Age? Yes No N/A

(g) Is the testing applied towards process control adjustments? Yes No N/A

(h) What approach (if any) is used to determine changes in:

Sludge Age?

Waste Sludge Flow?

(i) Was laboratory information used to prepare the DMR and Monthly Operating Report properly? Yes No N/A

(5) Explanation as needed for any of the above:

D. Personnel Information

(1) Is staffing and training adequate? (Consider all aspects, including management/supervision, operations, laboratory, maintenance, safety, availability of training, development of staff, etc). Yes No N/A

(2) Certified Operators:

Chief Operator - Name, Certificate Number, Grade, Renewal Date:

Michael Messenger - 13049; 3A; 2020-10-01

Assistant Operator - Name, Certificate Number, Grade, Renewal Date:

Keith Rieber - 14113; 3A; 2020-04-01

(3) Is operational staff certified at the appropriate level(s)? Yes No N/A
 Explain if needed:

(4) Do facility operators have renewal certification and/or training records? Yes No N/A

(5) Plant Classification: _____

(6) Plant Score: _____

(7) Explain as needed for any of the above:

E. Additional Information

(1) Is treatment facility properly operated and maintained? Yes No N/A
 Details:

(2) Check Adequate/Inadequate as appropriate:

- (a) Preventive maintenance schedules exist and are followed? Adequate Inadequate
- (b) Records are kept for maintenance, repairs and replacement? Adequate Inadequate
- (c) Spare parts inventory is maintained? Adequate Inadequate
- (d) O&M Manual exists and is available? Adequate Inadequate
- (e) O&M Manual kept up-to-date? Adequate Inadequate
- (f) As-built plans and specifications exist and are available? Adequate Inadequate
- (g) Manufacturers' O&M specifications exist and are available? Adequate Inadequate
- (h) Other records kept as needed (e.g. flow recorder charts)? Adequate Inadequate
- (i) Alarm system for power or equipment failures is properly maintained and tested? Adequate Inadequate
- (j) Standby power system exists and is routinely tested? Adequate Inadequate

(3) Current copy of Part I and Part II of SPDES permit on premises? Yes No N/A

(4) Has facility been subject of complaints (odors, others)? Yes No N/A

If yes, describe:

(5) Is sludge disposal satisfactory and are required permits in force? Yes No N/A

(a) Name and location of sludge disposal site (and/or name and permit number of scavenger):


Casella Organics

(b) Is there an alternate sludge disposal site or contingency plan? Yes No N/A

If yes, please describe:

- (6) Does facility have effective administrative structure and adequate financial systems (e.g. Repair Reserve Fund, Uniform Accounting System)? Yes No N/A
- (7) Is progress on compliance schedule(s) (e.g. Upgrading, CSO, Pretreatment) satisfactory? Yes No N/A
- (8) Explanation as needed for any of the above:

F. Inspector Comments

Signature of Inspector: 	Title: E.E.T.3	Date: 7/12/18
Name of Facility Representative: Keith Rieber	Title: Assistant Superintendent	Date: 7/12/18

AI

ARTHUR GLICK

Old Route 17, Monticello, NY S/B/L: 13.-1-62.1
Arthur Glick, Owner
Michael Davidoff, Lawyer

Mr. Davidoff shows the Board the Map of where the parcels are located. The parcel where the trucks are stored is zoned HC and we are just asking that this other parcel become HC zoned too.

Kathleen Lara – Why are you looking to combine these lots? Mr. Glick – We are in the midst of adding a larger franchise and might need to use that parcel.

A motion for a recommendation to send back to the Town Board for a zoning change was made by Michael Croissant and seconded by Kathleen Lara
4 in favor; 0 opposed

GEORGE & PATRICIA CULLIN

Swinging Bridge Estates Road, Monticello, NY S/B/L: 41.-11-2.6/2.3
George & Patricia Cullin

Mr. Cullin – I would like to combine my two lots into one lot. I also would like a variance so I don't have to move my car port. Richard McGoey – Does the Board have the right to waive those requirements for an accessory structure? Paula Kay – What are we waiving? Jim Carnell – The front yard setback. The property line is in the center of the road. Matthew Sush – Is it a temporary structure? Paula Kay – No, it's an accessory structure. Paula Kay reads the Town Code. Paula Kay – Yes, we can waive it.

A motion for lot combination was made by Matthew Sush and seconded by Michael Croissant
4 in favor; 0 opposed

A motion to waive the front yard setback was made by Kathleen Lara and seconded by Matthew Sush
4 in favor; 0 opposed

A motion to close the meeting at 7:28 pm was made by Kathleen Lara and seconded by Matthew Sush
4 In favor; 0 opposed
Respectfully submitted,

Debbie Mitchell

Debbie Mitchell

Secretary
Town of Thompson Planning Board



CBIZ VALUATION GROUP, LLC

June 19, 2018



Proposal for Property Appraisal Services
for Capital Asset Inventory and Valuation Services to:

Town of Thompson



CBIZ Valuation Group

Section	Page
PROPOSAL FOR SERVICES	3
ENGAGEMENT FEES AND CLIENT ACCEPTANCE.....	8
CBIZ VALUATION GROUP TEAM	10
APPENDIX A: TERMS & CONDITIONS.....	14
APPENDIX B: PROPERTY SCHEDULE.....	20
APPENDIX C: SAMPLE REPORTS	22



About CBIZ Valuation Group

CBIZ Valuation Group, LLC is one of the largest full-service valuation firms in the United States.



Our Specialties

- Property valuation services
- Business & tangible asset valuations
- Financial advisory
- Litigation support services



Our Clients

- Governmental
- Health care
- Utilities
- Manufacturing facilities
- Religious & non-profit
- Risk sharing consortiums
- Fortune 1000 companies

We specialize in designing and executing valuation programs to assist in addressing various insurance reporting requirements.

CBIZ Valuation Group, LLC is a wholly owned subsidiary of CBIZ, Inc. (NYSE:CBZ)

CBIZ, Inc.

An \$800 million, publicly traded company delivering top-level financial and employee business services to organizations of all sizes, as well as individual clients.



Provides national caliber expertise combined with highly personalized service delivered at the local level.



More than 100 offices and 4,600 associates in major metropolitan areas and suburban cities throughout the U.S.



CBIZ Valuation Group

TOWN OF THOMPSON
JUNE 19, 2018

CBIZ Valuation Group, LLC

1009 Lenox Drive, Suite 105
Lawrenceville, NJ 08648 • www.cbiz.com/valuation
Ph: 609.896.0300 • F: 262.677.2130

June 19, 2018

Ms. Melissa DeMarmels
Comptroller
Town of Thompson
4052 Route 42
Monticello, NY 12701

Re: Capital Asset Inventory and Valuation Services

Dear Ms. DeMarmels:

We are pleased to submit our proposal to provide professional capital asset inventory, data collection and valuation services to the Town of Thompson ("Town"). Our proposal has been prepared based on our understanding of your needs and our experience in assisting similar entities for similar purposes.

PROPOSAL FOR SERVICES

PURPOSE OF ENGAGEMENT

It is our understanding that our analysis will be used by management of the Town (hereafter, collectively referred to as "Management") to assist with capital asset reporting needs as they relate to financial reporting and property insurance reporting. The effective date of the valuation will be December 31, 2017 for financial reporting and the last day of site of site inspection for insurance purposes. We are not being engaged to make specific purchase or sale recommendations. The purpose of the proposed engagement is to provide professional valuation consulting services to address:

- **Capital Asset Reporting:** Prepare reports that can be utilized by Management in its effort to meet its financial reporting requirements as they relate to capital asset reporting for GASB-34. We encourage Management to share this proposal with its independent auditor to ensure the proposed scope and methodology will be consistent with its capital asset accounting policies.
- **Property Insurance Reporting:** Prepare reports to be utilized by Management in its effort to meet its insurable value reporting requirements.

SCOPE & METHODOLOGY

The scope of the proposed consulting services is limited to the following tangible assets and is subject to the Terms and Conditions outlined in this proposal.



TOWN OF THOMPSON
JUNE 19, 2018

- **Machinery & Equipment – Capital Assets:** Assets with an estimated unit acquisition cost greater than \$5,000 (the Town's capitalization threshold) will be inventoried and valued individually. As available, we will capture the following information for these assets: location, department, description, manufacturer, model, serial number, acquisition date (estimated or actual), asset/tag number and replacement cost. Barcode tags will be uniformly applied to non-tagged assets, as applicable.
- **Buildings, Land, Land Improvements, Infrastructure & Capital Projects (for financial reporting):** Acquisition costs and dates for buildings, land parcels, land improvements and capital projects will be incorporated in our analysis based on information provided by Management.
- **Buildings & Structures (for insurance reporting):** CVG will complete a limited scope physical inspection and valuation of buildings identified on the attached property addendum. All buildings and structures meeting the inspection criteria that have a permanent foundation and a roof will be inspected and valued. During the inspections, basic construction components including COPE data will be observed and collected. Square footage will be calculated using a combination of physically measuring the buildings, conducting take-offs of blueprints, and information made available by the Town. Digital photos will be taken of each structure inspected and incorporated into our reports and work files. For each structure inspected, CVG will collect specific data elements to include the following, as applicable:
 - Building name
 - Address
 - Latitude/longitude
 - Digital photos
 - Building construction class (ISO)
 - Gross square footage
 - Basement square footage
 - Number of stories
 - Occupancy
 - Year built
 - Roofing materials
 - Roof geometry
 - Exterior wall type
 - Building services
 - Elevators
 - Automatic fire alarms
 - Manual fire alarms
 - Sprinkler fire protection
 - Security alarms
 - Additions/renovations
- **Electronic Reconciliation:** CVG will attempt to do a limited reconciliation of our findings to the Town's existing fixed asset register by performing an electronic tag and serial number match. In order to complete the match process, Management will be required to provide its current fixed asset register with a cost balance that matches their last fixed reporting period in an Excel format. The data should include the tag or barcode number, asset description, manufacturer, model, serial number, acquisition date, acquisition cost, and useful life for each asset. If Management cannot provide this documentation and requires CVG to recreate it, additional fees will apply.

ENGAGEMENT EXCLUSIONS

The scope of this engagement excludes the following items:

- Laptop computers
- Musical instruments
- Licensed vehicles
- Uniforms
- Portable communications equipment
- Intangible assets
- Software
- Records
- Drawings
- Consumables
- Supplies
- Stores
- Spare parts
- Fine arts
- Third party property
- Property not accessible or not located in client facilities during the fieldwork portion of the engagement.

CLIENT PARTICIPATION

CVG will provide Management with an engagement management plan outlining their required participation to ensure the success of this engagement. In order to deliver our work product in a timely manner, we request that the following be provided by Management prior to starting the fieldwork portion of the engagement:

- A primary contact for this engagement;
- A primary contact that can provide unrestricted access to each building;
- Copies of the most recent valuation report, CAFR and capital project schedule; and
- Applicable security access badges and/or documents needed to access facilities.

SCHEDULE

Upon receipt of signed authorization, we will work with Management to determine a mutually agreed-upon start date for commencement of the fieldwork portion of this engagement. This engagement will require cooperation, continued access, and timely receipt of requested information from Management. Our reports will be available approximately 45-60 days from the completion of the fieldwork.

STANDARDS OF VALUE

The standards of value applicable to this engagement will include:

- **Original/Acquisition Cost:** The amount of money originally paid to acquire an asset. It generally includes costs such as transportation, set-up charges, taxes, engineering and architectural fees.
- **Replacement Cost New (RCN):** The cost required to produce a property of like kind and materials at one time in accordance with current market prices for materials, labor and manufactured equipment, contractors' overhead, profit and fees, but without provisions for overtime or bonuses for labor and premiums for materials. Our conclusions of value will include deductions for standard insurance exclusions (i.e., underground piping, foundations, footings, excavation, grading, etc.).

COSTING METHODOLOGY

Our valuation will utilize various techniques to develop cost conclusions. The sources may include the use of proprietary and third-party software, proprietary databases, technical pricing subscriptions, various publications and client-supplied information (purchase orders, capital project costs, financial statements, etc.). We will determine acquisition cost utilizing the following costing methods:

- **Direct Costing:** Where practical, we will match asset costs based on recorded information provided by Management.
- **Standard Costing:** Costs not readily determined through the use of client-supplied information will receive an estimated cost based on a “standard cost” (a known average installed cost for a like unit, estimating acquisition date).
- **Normal Costing:** Where neither direct nor standard costing can be utilized to determine acquisition cost, it will be estimated based on current cost of reproduction new, indexed by a reciprocal factor of the price increase from the estimated date of acquisition to the date of valuation.

DEPRECIATION METHODOLOGY

The depreciation methodology utilized is as follows:

- **Straight-Line Method:** The method of calculating depreciation by dividing the cost, less salvage, by the number of fiscal periods of useful life.
- **First-of-the-Month (Full Month) Convention:** Assets are treated as being placed into service on the first day of the month they are acquired, even if they were actually purchased after the first of the month. For additions, depreciation is calculated for a full month in the month the asset was acquired.

For disposals, no depreciation is calculated in the month of disposition; rather it is calculated through the last day of the month prior to disposal. Different depreciation methods or conventions are subject to an additional charge.

DELIVERABLES

Our work product will consist of our standard reports and will be provided in an Adobe Acrobat format. Final reports will include the following and will be expressly subject to the Terms and Conditions found within this proposal:

- Transmittal Letter reviewing the scope, methodology and valuation conclusions
- Accounting Summary Reports
- Accounting Detail Reports
- Depreciation Reports
- Insurance Summary Reports
- Insurance Detail Reports
- Standard Master Data File (Excel format) containing the information collected



OPTIONAL SERVICES

CVG offers a variety of optional services that are designed to enhance and assist in maintaining our proposed service offering. Optional services available include:

Barcode Tags

CVG can provide barcode tags that can be used during the initial inventory and tagging engagement and can be used by the Town for tagging any additions that might be acquired in the future. CVG's tags are durable coated polyester in Code 39 format. Tags are available in rolls of 1,000.

Electronic Spreadsheet Update Service

This service offers Management an electronic method of updating its valuation and fixed asset inventory records. Using CVG's preformatted electronic data sheet, which will include the Town's current fixed asset database in an Excel format for reference, Management or related staff can enter changes (additions, deletions, transfers, donations and capital projects) and submit these changes annually to CVG via email. CVG will then review the submitted changes and append them to your most recent valuation data file. CVG will then calculate updated depreciation totals and issue updated reports. Trends will also be applied to the insurable values contained in the file for insurable value updating purposes.



ENGAGEMENT FEES AND CLIENT ACCEPTANCE

Our estimated fees, including expenses to provide professional data collection and valuation services are listed below. Our fee estimates are based on the property schedule and square footage found in Appendix B, as reported by Management.

SERVICES

Please initial the services to be included in the contract.

Service	Fee	Initials
Inventory and Valuation of locations listed on the attached property addendum	\$10,400*	

**Our fees are predicated on the attached Property Addendum. If additional buildings are encountered, fees are subject to change based on the additional work effort required to complete the engagement.*

Optional Services

Service	Fee	Initials
Barcode Tags (Quantity of tags desired: _____)	\$250 per 1,000	
2018 Electronic Spreadsheet Update Service	\$1,000	

The fees for the professional services outlined within this agreement shall remain in effect for a period not greater than 90 days from the date of this proposal. As a publicly traded company, CVG retains client records and work files for a period of seven (7) years.

If conditions beyond our control are encountered, or if the scope of the engagement is expanded beyond its original requirements such that we will require additional time and fees not presently estimated in our work plan, we will notify you before proceeding to arrange a mutually-acceptable revision in our fees. CVG reserves the right to increase fees annually 3% to 5% per year to offset increases in wages, travel and other project related costs. If a decision is made by you to discontinue work on an engagement, our fees will be based upon the actual professional hours and expenses incurred as of that date. Services requested after the issuance of our reports, such as meetings, planning, testimony and other services will be billed separately at our normal hourly rates and in accordance with our normal expense practices. Fees for valuation report updates will be based upon our standard hourly rates plus expenses incurred.

We will progress bill up to 80% as work is completed. 20% will be withheld until final reports are delivered. Our invoices are payable within 30 days of presentation. Invoices not paid within 45 days shall be considered delinquent. Delinquent invoices shall be subject to a late charge equal to the lesser of one and one half percent (1.5%) per month, or the maximum amount allowed by state law. Disputes pertaining to billing matters must be put in writing within 20 days upon the receipt of the invoice. CBIZ Valuation Group, LLC reserves the right to suspend or terminate this engagement for the Town's failure to make timely payment. Should any invoice remain unpaid beyond 60 days, professional activity will cease until payment is received.



marilee (clerk-town of thompson)

From: William J. Rieber, Jr. <supervisor@townofthompson.com>
Sent: Wednesday, July 25, 2018 4:39 PM
To: Marilee Calhoun
Cc: Michael Mednick; Paula Elaine Kay, Esq.; pchester@townofthompson.com; jcarnell@townofthompson.com; Mike Messenger; Rich Benjamin; comptroller@townofthompson.com; John Pavese; melindak22@gmail.com; Peter Briggs; Scott Mace
Subject: Town Board schedules
Attachments: William J Rieber Jr .vcf

Marilee:

This is what I am coming up with for TB meetings through September:

August 21st CANCEL

Sept. 4th CANCEL (Hunting License time and you will just be back from vacation and labor day weekend)

Sept. 18th CANCEL (Yom Kippur)

Set Meeting August 28th at 7 :00

Short meeting- Pay bills, etc. I will be away the week before.

Set Meeting September 11th at 5:00

Can't do the 10th because it is Rosh Hoshanna; If we start at 5 we can

be done by 7 for 911 services at MFD

Beginning with the October 2nd meeting I would like to start at 6:30 with work session, open the regular meeting about 7 to try to get things done earlier. We could try this through the end of the year to see how it works.

Can anyone with an opinion weigh in please.

Bill

<p>William J. Rieber Jr. Town of Thompson Supervisor Office (845) 794-2500 Ext. 306 Cell (914) 799-0387 supervisor@townofthompson.com 4052 Route 42 Monticello, N.Y. 12701</p> 

marilee (clerk-town of thompson)

From: Deputy Clerk (Town of Thompson) <deputyclerk@townofthompson.com>
Sent: Friday, June 22, 2018 12:41 PM
To: 'marilee (clerk-town of thompson)'
Subject: Spring Clean Up Totals 2018

Marilee

Based on the information I received from the Landfill, there were 268 tickets turned in totaling 93.42 tons. Of the 268 tickets, 55 tickets totaled 700 pounds or more. The County allowed the Town of Thompson 96 tons for the year 2018 which leaves 2.58 tons remaining.

Kelly Murran
Town of Thompson
Deputy Town Clerk
4052 State Route 42
Monticello, New York 12701-3221
Tel.: (845) 794-2500 Ext. 300
Fax: (845) 794-8600



William J. Rieber, Jr.
Town Supervisor

Town Board Members
Scott Mace, Deputy
Peter Briggs
John Pavese
Melinda Meddaugh

4052 Route 42, Monticello, N.Y. 12701

Telephone (845) 794-2500

Fax (845) 794-8600

July 31, 2018

Bills over \$2,500.00

We are requesting permission to pay the attached invoice for an event for the summer camp, including a water slide, miniature golf and an obstacle course.

Spencer Daniels Agency Inc. Invoice #E01750 \$3,060.00

PROCUREMENT: There is only one other company locally, Party Master, that provides this type of entertainment. Phone messages were left for Party Master requesting a quote and the type of items they have available and the calls were not returned. In addition, Spencer Daniels is providing free delivery, set up, take down and staff which is reflected in their discount.

APPROVED BY TOWN BOARD _____

SPENCER DANIELS AGENCY INC.

Entertainment & Productions Specialists

Contract / Invoice Client Copy / Office Copy

740 Glen Wild Rd.
Woodridge, NY 12789
PH: (845) 693-4576 / Fax: (845) 693-4583
www.spencerdaniels.com
info@spencerdaniels.com

Client: The Town of Thompson

Client Information

Client Account No. A00749
Client: The Town of Thompson
4052 Route 42
Monticello, NY 12701
Phone: (845) 794-2500 xt306
Fax: (845) 794-8600
Cell: () -
Email: kschaefer@townofthompson.com
Company Rep: Karen, Schaefer

Event Information

Event No. E01750
Date of Event: 08/07/2018
End Date of Event: 08/07/2018
Type of Show: Summer Camp
Show is For: campers
Print Date: 07/23/2018
Start Time: 11:00 am
End Time: 3:00 pm
Total# hrs: 4

Site Location

Town of Thompson Park	Old Liberty Rd., Monticello, NY 12701	Karen, Schaefer	(845) 794-2500
-----------------------	---------------------------------------	-----------------	----------------

Rental / Service Items

Name	Price	Qty	Total
Giant Obstacle Course 3pc	\$1,700.00	1.00	\$1,700.00
Attendants up to 4 hours	\$150.00	4.00	\$600.00
18ft. Giant Wet / Dry Slide	\$1,700.00	1.00	\$1,700.00
9 hole inflatable Mini Golf Complete	\$995.00	1.00	\$995.00
Delivery, fuel fee, set up & take down	\$150.00	1.00	\$150.00

Comments

This contract has been updated and pricing changed to reflect a \$1200.00 cost for the water slide (have taken off an additional \$500 from the previous contract. Please confirm date and time. If the date should need to be changed due to possible inclement weather, there will not be any additional charges for fees for this. SDA will change the date and services. Services (items) may have to be change out depending upon date change if there is one. Otherwise all items are guaranteed for August 7, 2018

We have given approx a 40% discount off the regular pricing. payment can be made on the day of or a check can be mailed in.

SPENCER DANIELS AGENCY INC.

Entertainment & Productions Specialists

740 Glen Wild Rd.
Woodridge, NY 12789
PH: (845) 693-4576 / Fax: (845) 693-4583
www.spencerdaniels.com
info@spencerdaniels.com

Contract / Invoice Client Copy / Office Copy

Client: The Town of Thompson

Client Account No: A00749 Event No: E01750
Date of Event: 08/07/2018 Type of Show: Summer Camp

Note: To process credit card payments there is a 4% bookkeeping fee.

Subtotal of Above Services:	\$5,145.00
Sales:	\$411.60
Subtotal:	\$5,556.60
Discount:	\$2,496.60
Total:	\$3,060.00
Paid:	\$0.00
Balance:	\$3,060.00
Retainer Fee:	
Overtime Fee Per Person Per Hour:	\$0.00

Gratuity Not Included

NOTE: If the event extends beyond the scheduled time, an overtime fee of \$0 per hour will be charged.

Client has read and understands the aforesaid terms of this Agreement on all of the following Pages. Signing one or more copies of this Agreement is an acknowledgement of all terms and conditions.

Signed by Client: The Town of Thompson



Date: 7/31/18

Company Representative: Karen Schaefer

Terms and Conditions on following pages

Please remit payment on receipt of this invoice.

Thank You for Using The Spencer Daniels Agency

SPENCER DANIELS AGENCY INC.

Entertainment & Productions Specialists

Contract / Invoice Client Copy / Office Copy

740 Glen Wild Rd.
Woodridge, NY 12789
PH: (845) 693-4576 / Fax: (845) 693-4583
www.spencerdaniels.com
info@spencerdaniels.com

Client: The Town of Thompson

1. Performance fee agreed upon by the Spencer Daniels Agency Inc. and the client is \$3,060.00,
2. This agreement must be signed, dated and returned to The Spencer Daniels Agency Inc. within (15) days of the Contract / Invoice printed date (this is not the event date), to secure the date and personnel for this event. A retainer fee in the amount of 50% of the total contract \$0.00 is required within the same (15) fifteen days. The Balance due after retainer is paid, is due one week prior to the day of the event, unless otherwise instructed or agreed upon.
3. Client is liable to The Spencer Daniels Agency Inc. for any damage to any equipment used at the event resulting from vandalizing or negligent action by the Client and/or any of the persons attending or sponsoring the activity or event (see safety rules sheet attached if applicable).
4. Any personnel provided by The Spencer Daniels Agency Inc. shall enforce disciplinary measures for just cause and carry out instructions as to the details prescribed by the client, selection of music and manner of performance.
5. Meals are to be provided for all The Spencer Daniels Agency Inc.'s staff at all catered events.
6. The Client agrees to indemnify, defend and hold harmless "The Spencer Daniels Agency Inc." with respect to any claims, deductibles, causes of action, losses, damages, costs, demands, judgments, expenses (including attorney's fees and other professional fees and expenses, together with interest at the statutory rate for same), including but not limited to any injury or damage to the Client, or any injury or damage to any patron, employee, independent contractor, subcontractor, invitee, guest, licensee or the like of the Client, or to any third party, arising as a result of the enterprise of this contract; and for any other licensee, or the like of the Client, or to any third party, arising as a result of the enterprise of this contract; and for any other liability incurred by "The Spencer Daniels Agency Inc." as a result of the failure of the Client to perform or observe any of its obligations under this agreement, any representations, warranties, indemnities, covenants, or agreements made pursuant to this contract.
7. Although "The Spencer Daniels Agency Inc." has the standard 2M business liability insurance, it is always suggested that the Client obtain at its sole cost and expense, sufficient and proper liability insurance coverage.
8. If for any reason beyond our control this performance does not happen we will not be responsible for any and all fees exceeding this contract, but the client will be responsible for the full amount due. Cancellation due to weather must be made by either party within eight hours prior to the report time of the event as listed in the contract. There will be no substitutions without the Spencer Daniels Agency Inc.'s consent in writing, in advance. All changes must be made in writing or will not be guaranteed. If this contract is not signed and returned with the appropriate retainer the performance listed will not be guaranteed.
9. The Spencer Daniels Agency Inc. is to appear on all advertising posters, media releases and programs as needed and if needed as specified in the contract notes. No performance or program or any part thereof is to be reproduced, including but not limited to reproduction by broadcasting, videotaping or tape recording, without written permission of The Spencer Daniels Agency Inc. also if specified in the "Contract Notes".
10. Purchaser and or Client agrees that for a period of (2) years and one day from the date(s) of this contract, engagement and or assignment, the client and or purchaser cannot and will not hire any staff independently supplied by The Spencer Daniels Agency Inc. without going through the The Spencer Daniels Agency Inc., and or any return engagements for the above services or any other services that The Spencer Daniels Agency Inc. offers, all staff shall be engaged and contracted through Artists Agent (The Spencer Daniels Agency Inc.) **This does not mean that you are obligated to hire The Spencer Daniels Agency Inc. again but cannot hire any artists, staff, employees, sub-contractors, consultants, shows, acts, etc. that are or were supplied by The Spencer Daniels Agency Inc. directly.
11. In the event of sickness or any other legitimate inability to fulfill this contract, the Artists Agent agrees to substitute similar service.

SPENCER DANIELS AGENCY INC.

Entertainment & Productions Specialists

740 Glen Wild Rd.
Woodridge, NY 12789
PH: (845) 693-4576 / Fax: (845) 693-4583
www.spencerdaniels.com
info@spencerdaniels.com

Contract / Invoice Client Copy / Office Copy

Client: The Town of Thompson

12. All Retainers are nonrefundable. Rescheduling & recontracting within thirty (30) days of cancellation or less is acceptable for transferring the said retainer on the same event. Retainers are not transferable without written consent of The Spencer Daniels Agency Inc.
13. All artists are independent contractors. All sub contractors assume all responsibility for withholding tax, social security, state tax, public liability, workers compensation insurance's and the like.
14. In the event the Purchaser to this agreement defaults in their obligations as listed on this contact, the Purchaser shall be liable to The Spencer Daniels Agency Inc. for all reasonable expenses incurred, including attorney's fees, for the enforcement of the obligation signed and created by this agreement.
15. The Client agrees to furnish and be responsible for all supervision as might be discussed and or written in "Contract Notes" or riders or proposals as related to this contract.
16. Any disputes arising under this contract shall be brought in the Supreme Court of the State of New York in and for the County of Sullivan.
17. The validity and interpretation of this Contract shall be governed by the laws of the State of New York.

Signed by Client: The Town of Thompson



Date: 7/31/18



Action Toward Independence

Attention

All Veterans & Their Families



WOUNDED WARRIOR
PROJECT



A Day of Family Fun and Activities for ALL !!!

- | | | |
|------------------|----------------------|-----------------|
| Gifts and Prizes | Vendor Tables | BBQ Buffet |
| Kid Zone | Shooting Competition | Land Nav Course |
| Service Dog Wash | Fly Fishing Demo | Guided Hikes |

WHEN: AUGUST 24TH 2018

WHERE: FORESTBURGH SCOUT CAMP

TIME: 1000 - 1400

RESERVATIONS REQUIRED

PLEASE RSVP TO

JEFF WHITLOCK 845-794-4228

FT