TOWN OF THOMPSON -Regular Meeting Agenda-

TUESDAY, APRIL 07, 2020

7:00 PM MEETING

**DUE TO THE COVID-19 PANDEMIC THIS MEETING WILL BE STREAMED LIVE ON ZOOM TO JOIN: PLEASE SEE OUR TOWN WEBSITE: www.townofthompson.com OR FACEBOOK @ TOWN OF THOMPSON NY

CALL TO ORDER
ROLL CALL
PLEDGE TO THE FLAG

APPROVAL OF PREVIOUS MINUTES:

March 17th, 2020 Regular Town Board Meeting

PUBLIC COMMENT

CORRESPONDENCE:

- Sullivan County Treasurer's Office: 4th Quarter Mortgage Tax Payment, Check #3029, dated 03/23/20 for \$118,167.59
- Country-Wide Insurance Company: Recovery for Light Pole Damage, DOL: 03/15/18, Check #11567532, dated 03/05/20 for \$9,560.09
- Argo Group: Letter dated 03/18/2020 from Tim Carter, Executive Vice President Re: Business Insurance relating to Coronavirus (COVID-19)

AGENDA ITEMS:

- 1) POSTPONEMENT OF ANNUAL 2020 COUNTYWIDE ROADSIDE "LITTER PLUCK" EVENT
- 2) SPRING CLEANUP PROGRAM: 04/25/20 TO 05/09/20 DISCUSS POSTPONEMENT OR CANCELLATION
- 3) PARKSIDE ESTATES (F/K/A LAKEVIEW ESTATES): REQUEST TO NAME PRIVATE ROADS LEAF LN & CORAL DR
- 4) HIGHWAY DEPARTMENT: REVIEW & APPROVE BIDS 1) FIBER-REINFORCED BITUMINOUS-MEMBRANE SURFACE TREATMENT AND 2) VEHICLE & EQUIPMENT REPLACEMENT PARTS
- 5) EMERALD GREEN SEWAGE COLLECTION SYSTEM REHABILITION PROJECT: APPROVE CHANGE ORDER #2 FOR ADDITIONAL COST OF \$126,361.50
- 6) HARRIS SEWER DISTRICT FORCE MAIN & PUMP STATION REPLACEMENT PROJECT: RESOLUTION FOR LEAD AGENCY DESIGNATION & AUTHORIZE CIRCULATION OF NOTICE OF INTENT TO INVOLVED/INTERESTED AGENCIES
- 7) AUTHORIZE BUDGET TRANSFER OF \$94,500.00 FROM HARRIS SEWER DISTRICT (SSH) TO THE CAPITAL FUND (H) FOR THE PRELIMINARY DESIGN OF THE PUMP STATION AND FORCE MAIN UPGRADES
- 8) REPORT ON BOND ROLLOVERS
- 9) UPDATE: SCHEDULING OF PLANNING BOARD MEETINGS AND ZONING BOARD OF APPEALS MEETINGS
- 10) BILLS OVER \$2,500.00

- 11) BUDGET TRANSFERS & AMENDMENTS
- 12) ORDER BILLS PAID
- 13) UPDATE: CORONAVIRUS (COVID-19) PANDEMIC

OLD BUSINESS NEW BUSINESS

REPORTS: SUPERVISOR, COUNCILMEN, & DEPARTMENT HEADS

PUBLIC COMMENT ADJOURN

County of Sullivan MORTGAGE TAX 100 North Street, P.O. Box 5012 Monticello, N.Y. 12701

JP MORGAN CHASE MONTICELLO ST JOHNS STREET MONTICELLO, NY

Check Number

3029

| | 1919 Pri 1812 St. 1925 (1936) | |
|---------------|-------------------------------|--------------|
| Vendor Number | Check Date | Check Amount |
| 3020 | 03/23/2020 | \$118,167.59 |

One Hundred Eighteen Thousand One Hundred Sixty-Seven and 59/100 Dollars

Pay To The Order Of

3020 TOWN OF THOMPSON 4052 ROUTE 42 MONTICELLO, NY 12701

County Treasurer

1:0223001731 # 30 29# ?89?95408#

County of Sullivan - MORTGAGE TAX

P.O. Box 5012 Monticello, N.Y. 12701

| INV | OICE DATE | INVOICE NO | | J. DOX 0012 | MOTRICEIO, N. T. 12701 |
|-------------|----------------|------------------------------|---|-------------|------------------------------|
| 03/23/ | 2020 | INVOICE NO. TREAS03232018 | DESCRIPTION MORTGAGE TAX OCT 2019 - DEC 2019 | | INVOICE AMOUNT 118,167.59 |
| 100,20, | 2020 | 11121000202010 | PO# | | 118,167.59 |
| | N. | | G/L Account: TA-00058-00237 | | |
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| Saternale | enders No. wos | rosulari. | Vendor Name Check No. Check | eck Date | Charle A |
| Turning Co. | 3020 | TO | | 22/2020 | Check Amount |
| L | | | VVIX OF FRONTESON 3028 03/ | 23/2020 | \$118,167.59 |



Town of Thompson General Ledger Detail Transaction Report Fiscal Year 2018

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| Total for Fund A000 Grand Total | YTD Total for A000.3005.000 | | 4th Quarter Mortgage Tax | 3rd Quarter Mortgage Tax | | 2nd Qtr Mortgage Tax - County check #2903 | | County ck#2882 | | Rebuild BY Journal | YEAR FORWARD BALANCE | A000.3005.000 | | Account Number |
|------------------------------------|-----------------------------|----------------|--------------------------|--------------------------|---------------|---|----------------|-------------------------------|----------------|--------------------|----------------------|---------------|-----------------------|---------------------|
| | 3005.000 | | 12 | 12 | | k #2903 9 | | о | | | | MORTGAGE TAX | АМ | Account Description |
| | MORTGAGE TAX | | 12/31/2018 | 12/31/2018 | | 9/21/2018 | | 6/19/2018 | | 1/1/2018 | | | Journal Date Type/Num | ion |
| | | | JE105756 | JE105756 | | CR104701 County check #2903 | | CR104279 1st Qtr Mortgage Tax | | BY1-1 | | | Type/Num | |
| | | Mth 12 | YEAR END | YEAR END | Mth 9 | check #2903 | Mth 6 | fortgage Tax | Mth 1 | | | | Reference | |
| | | Total | | | Total | | Total | | Total | | | | | |
| (\$160,000.00) (\$160,000.00) | (\$160,000.00) | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | (\$160,000.00) | (\$160,000.00) | | | Budget Amount | |
| \$0.00 \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | | Debit | |
| \$329,169.92 \$329,169.92 | \$329,169.92 | \$100,685.20 | \$50,944.28 | \$49,740.92 | \$76,426.33 | \$76,426.33 | \$152,058.39 | \$152,058.39 | \$0.00 | \$0.00 | | | Credit | |
| \$0.00 \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | | Enc/Liq | |
| (\$329,169.92) (\$329,169.92) | (\$329,169.92) | (\$100,685.20) | | | (\$76,426.33) | | (\$152,058.39) | | \$0.00 | | \$0.00 | | Act Exp | |



Town of Thompson General Ledger Detail Transaction Report Fiscal Year 2019

| Total for Fund A000 Grand Total | YTD Total for A000.3005.000 | Year End Entry #2 | Budget Transfers & Amendments - Town Board Meeting 02/19/2020 | Mortgage tax | | Mortgage tax April - June 2019 | | Mortgage tax | | Rebuild BY Journal | YEAR FORWARD BALANCE | A000.3005.000 | | Account Number |
|------------------------------------|----------------------------------|-------------------------|---|----------------|---------------|--------------------------------|---------------|-------------------------------|----------------|--------------------|----------------------|---------------|---------------|---------------------|
| | | 12 | 3oard 12 | 12 | | 9 | | 6 | | _ | | MORTGAGE TAX | AM | Account Description |
| | MORTGAGE TAX | 12/31/2019 | 12/31/2019 | 12/24/2019 | | 9/24/2019 | | 6/24/2019 | | 1/1/2019 | | | Journal Date | |
| | | JE107487 | BE107295 | CR107044 | | CR106667 | | CR106228 S | | BY1-1 | | | Type/Num | |
| | Mth 12 | 4th Qtr Mortgage Tax | | County ck#3008 | Mth 9 | County ck#2987 | Mth 6 | CR106228 Sullivan Cty ck#2966 | Mth 1 | | | | Reference | |
| | Total | | | | Total | | Total | | Total | | | | | |
| (\$280,000.00) (\$280,000.00) | (\$30,000.00) (\$280,000.00) | \$0.00 | (\$30,000.00) | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | (\$250,000.00) | (\$250,000.00) | | | Budget Amount | |
| \$0.00 \$0.00 | \$0.00 \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | | Debit | |
| \$283,695.71 \$283,695.71 | \$173,521.64 \$283,695.71 | \$118,167.59 | \$0.00 | \$55,354.05 | \$62,241.53 | \$62,241.53 | \$47,932.54 | \$47,932.54 | \$0.00 | \$0.00 | | | Credit | |
| \$0.00 \$0.00 | \$0.00 \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | | Enc/Liq | |
| (\$283,695.71) (\$283,695.71) | (\$173,521.64) (\$283,695.71) | | | | (\$62,241.53) | | (\$47,932.54) | | \$0.00 | | \$0.00 | | Act Exp | |

COUNTRY-WIDE INSURANCE COMPANY DRAWEE:

Wells Fargo Bank, N.A.

PAY

TO

40 WALL STREET . NEW YORK, NY 10005-2301

1156753

CLAIMS ACCOUNT

CLMT: TOWN OF, THOMPSON

03/05/20

CLAIM# 000335350-002 INSD: LI, BINGHUA

THE AMOUNT OF

2498072

\$9,560.09

VOID AFTER 180 DAYS FROM DATE OF ISSUE

11567532

THE 254 ROUTE 17K SUITE 201 ORDER ATTENTION: KRISTEN STEELE NEWBURGH, NY 12550-8300

TOWN OF, THOMPSON

PAYEE: TOWN OF, THOMPSON

NINE THOUSAND FIVE HUNDRED SIXTY AND 09/100*

COUNTRY - WIDE INSURANCE **40 WALL STREET**

NEW YORK, NY 10005-2301

CLAIM NUMBER: 000335350-002

DATE OF LOSS: 03/15/18

DATE:

03/05/20

INSURED: LI, BINGHUA

AMOUNT:

9,560.09

USER: LAUNGANI

PAYEE:

TOWN OF, THOMPSON

CLAIMANT: TOWN OF, THOMPSON

DESCRIPTION:

PD SETTLEMENT

FILE# 335350

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties. Claim#

TOT31518

Date of Loss

3/15/2018

Description

Light Pole Hit

Payment Breakdown

| Description Light Pole | <u>Amount</u> \$9,560.09 | TRRAC Comments |
|-------------------------------|-----------------------------|---------------------------------|
| Sub - Total | \$9,560.09 | |
| Adminstrative Fee | \$1,912.02 | |
| Total Costs | \$11,472.11 | |
| Check Amount | \$9,560.09 | Did not reimburse admin fee |

Claim Status

| Recovery Complete File to be closed | X |
|--|---|
| Partial Payment, additional recovery pending | |





Invoice

| Date | Invoice # |
|------------|-----------|
| 03/19/2020 | 5376 |

Bill To Keith Rieber Town Of Thompson 4052 State Route 42 Monticello, NY 12701 United States

| | | Terms | | | | | |
|---|------------|-------|------------|--|--|--|--|
| Description | Recovery | Rate | Amount | | | | |
| laim # TOT31518 - Date of Loss: 3/15/2018 | \$9,560.09 | 0.20% | \$1,912.02 | | | | |
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| | | | \$1,912.02 | | | | |
| | Total | Total | | | | | |



March 18, 2020

Town Of Thompson 4052 Route 42 Monti, NY 12701

Dear Argonaut Insurance Company Policy Holder:

In accordance with a Call For Special Report Pursuant to Section 308, New York Insurance Law: Business Interruption and Related Coverages Written in New York, Argonaut Insurance Company is required to notify all applicable policy holders that have property insured under their policy that is situated in the State of New York. This notice relates directly to the Coronavirus (COVID-19) pandemic and more specifically, how insurance coverage provided by your policy with Argonaut Insurance Company addresses this situation regarding Business Income and related coverage forms.

The following provisions of your policy may affect coverage with respect to the Coronavirus (COVID-19). However, actual determination of coverage depends on the relevant facts and circumstances of each claim. Carefully read your entire policy, including the endorsements attached to your policy. If you have questions, please contact your producer, agent or insurer.

- Covered Causes Of Loss: The Covered Causes of Loss are determined by the Causes Of Loss Form made part of your Commercial Property Coverage Part with respect to the described premises. Causes Of Loss Forms include:
 - Causes Of Loss Basic Form: This form provides coverages with respect to certain specified causes of loss including, fire, lightning, explosion, windstorm or hail and other causes of loss, subject to applicable exclusions and limitations.
 - Causes Of Loss Broad Form: This form provides coverage with respect to the same causes of loss as the Basic Causes of Loss Form and includes the additional causes of loss, including weight of snow, ice or sleet, water damage and other causes of loss, subject to applicable exclusions and limitations.
 - Causes Of Loss Special Form: The Covered Causes of Loss are established as direct physical loss unless the loss is excluded or limited in your policy.
- Virus Or Bacteria Exclusion Endorsement: Pursuant to this endorsement, there is
 no coverage for loss or damage caused directly or indirectly by any virus, bacterium
 or other microorganism that induces or is capable of inducing physical distress,
 illness or disease.
- Additional Coverages: To the extent that loss or damage is not excluded, the following Additional Coverages when attached to your policy provide:



- Business Income: Coverage is provided for the actual loss of Business Income you sustain due to the necessary suspension of your operations during the period of restoration. The suspension must be caused by direct physical loss or damage to property at premises which are described in the Declarations and for which a Business Income Limit Of Insurance is shown in the Declarations. The loss or damage must be caused by or result from a Covered Cause of Loss. Unless otherwise noted, coverage for Business Income losses begin 72 hours after the time of direct physical loss or damage and ends on the earlier of the date when the property at the described premises should be repaired, rebuilt or replaced with reasonable speed and similar quality or the date when business is resumed at a new permanent location.
- Extra Expense: Coverage is provided for the necessary expenses you incur during the period of restoration that you would not have incurred if there had been no direct physical loss or damage to property caused by or resulting from a Covered Cause of Loss. Unless otherwise noted, coverage for Extra Expenses that that begin immediately after the time of direct physical loss or damage and ends on the earlier of the date when the property at the described premises should be repaired, rebuilt or replaced with reasonable speed and similar quality or the date when business is resumed at a new permanent location.
- Civil Authority: When a Covered Cause of Loss causes damage to property other than property at the described premises, coverage is provided for the actual loss of Business Income you sustain, and actual and necessary Extra Expense, if provided, caused by action of civil authority that prohibits access to the described premises. Unless otherwise noted, Civil Authority coverage for Business Income will begin 72 hours after the time of the first action of civil authority that prohibits access to the described premises and will apply for a period of up to four consecutive weeks from the date on which such coverage began. Unless otherwise noted, Civil Authority coverage for Extra Expense will begin immediately after the time of the first action of civil authority that prohibits access to the described premises and will end four consecutive weeks after the date of that action; or when your Civil Authority Business Coverage for Business Income ends; whichever is later.

Sincerely,

Tim Carter

Executive Vice President, U.S.

Deputy Clerk (Town of Thompson)

From:

marilee (clerk-town of thompson) <marilee@townofthompson.com>

Sent:

Thursday, April 02, 2020 10:04 AM

To:

Deputy Clerk (Town of Thompson) (Deputy Clerk (Town of Thompson))

Subject:

FW: Parkside Estates Street Names (FKA Lakeview Estates)

Attachments:

COUNTY STREET NAME APPROVAL 2020-03-30.pdf

From: Joel Kohn [mailto:joel@jkexpediting.com]

Sent: Tuesday, March 31, 2020 6:51 PM **To:** Supervisor (Town of Thompson)

Cc: marilee@townofthompson.com; Mossberggroup@gmail.com **Subject:** Parkside Estates Street Names (FKA Lakeview Estates)

Good afternoon Bill,

As discussed on the phone, Lakeview Estates had to change their name as there is another Lakeview Estates in the Town of Fallsburg.

See attached approval from the County on the proposed street names for Parkside Estates, please add it to the next Town Board agenda.

If you have any questions please do not hesitate to contact me.

Thanks

Joel Kohn

JK Expediting Services 63 Liberty St. P.O. Box 369 Monticello NY 12701 845-796-9110 Joel@jkexpediting.com



911 Addresses for new project

Stone, Jennifer D. <Jennifer.Stone@co.sullivan.ny.us>

Mon, Mar 30, 2020 at 2:57 PM

To: Joel Kohn <joel@jkexpediting.com>

Cc: Assessor - Thompson <assessor@townofthompson.com>, Charter/Spectrum - Lauren <Lauren.Sedlacek@charter.com>, "Customer Service (custserv@nyseg.com)" <custserv@nyseg.com>, "DBMC-NY-WHTPL-E911@verizon.com" <DBMC-NY-WHTPL-E911@verizon.com" <DBMC-NY-WHTPL-E911@verizon.com", "Eric Horton - CEO, Town of Thompson" <ehorton@townofthompson.com>, "Kelly, Michael J." <Michael.Kelly@co.sullivan.ny.us>, "Montaruli, Michael A - White Plains, NY (michael.a.montaruli@usps.gov)" <michael.a.montaruli@usps.gov>, "Rau, Alex G." <Alex.Rau@co.sullivan.ny.us>, "Sauer, Richard J" <Richard.Sauer@co.sullivan.ny.us>

EDWARD HOMENICK

DIRECTOR



TEL. 845-807-0221

FAX 845-807-0232

COUNTY OF SULLIVAN REAL PROPERTY TAX SERVICES

SULLIVAN COUNTY GOVERNMENT CENTER

100 NORTH STREET

PO BOX 5012

MONTICELLO, NY 12701

To Whom It May Concern,

This letter will serve as notification that the following road name(s) have been approved by this office for use within the 911 Address System for Sullivan County. The approved road name(s) are, as shown on and identified on the attached image:

Leaf Ln (in green on the attached image)

Coral Dr (in red on the attached image)

These road names have been approved for use within a private community known as:

Parkside Estates

And being in the Town of Thompson and on a parcel identified for tax assessment purposes as 8.-1-31.1.

Please submit a copy of this letter, along with a written request for the road to be approved by the Town of Thompson via resolution, to the Town Clerk at your earliest convenience. Please note, this office *must* be provided with a copy of the signed resolution and a map of the named roads before these roads can be added to the 911 system and/or used for addressing purposes.

If you have any questions please feel free to contact the 911 addressing department. Thank you for your cooperation and understanding while we work to provide our residents with the best emergency service response possible.

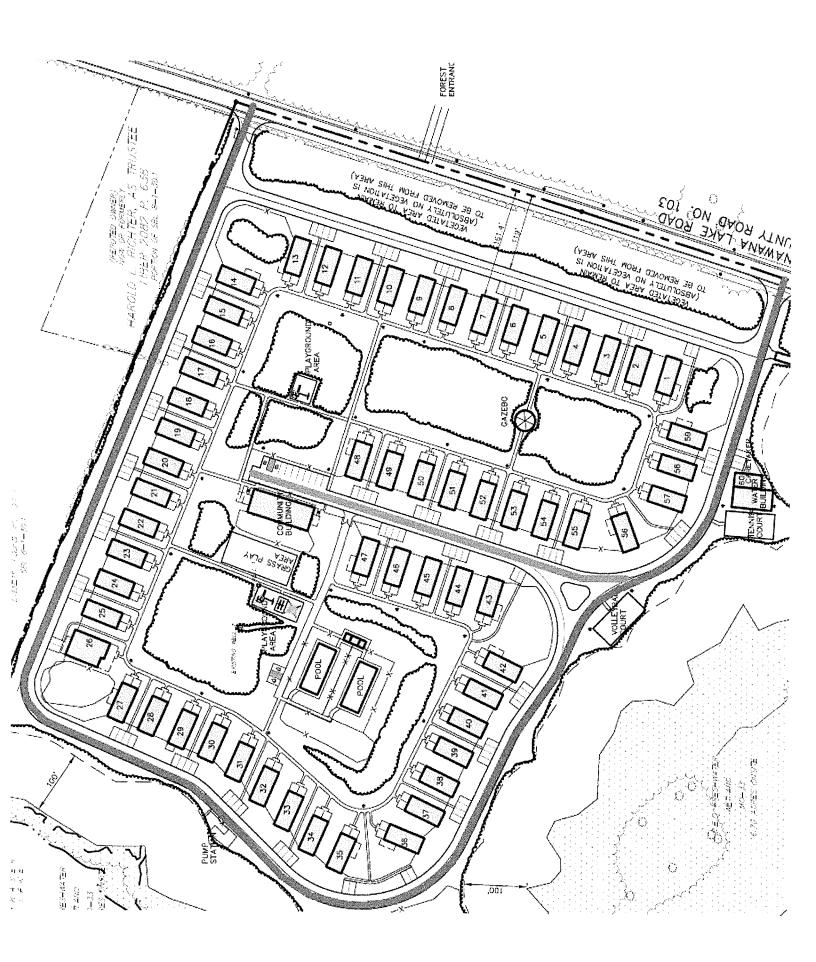
[Quoted text hidden]

2 attachments



Parkside Estates Road Name Approval Site Plan.JPG 427K

Pages from 2019-03-15 SITE PLAN.PDF 579K



Deputy Clerk (Town of Thompson)

From:

marilee (clerk-town of thompson) <marilee@townofthompson.com>

Sent:

Thursday, April 02, 2020 10:07 AM

To:

Deputy Clerk (Town of Thompson) (Deputy Clerk (Town of Thompson))

Subject:

FW: Emerald Green Collection project Change order etal

Attachments:

change order 2 with backup - unexecuted_03-30-20.pdf

From: William J. Rieber, Jr. [mailto:supervisor@townofthompson.com]

Sent: Tuesday, March 31, 2020 12:44 PM

To: John Pavese; melindak22@gmail.com; schocker71@gmail.com; Scott Mace

Cc: Marilee Calhoun; Mike Messenger; 'Norbert Andryszak'

Subject: FW: Emerald Green Collection project Change order etal

- Attached is a change order for the Emerald Green Job. The additional costs are +/- \$126,000, most of which is extensive hard rock excavation. None of this is a surprise and internally we have been discussing it for months. ALL numbers have been negotiate DOWN substantially. Mike, Norbert, Dave and I are in agreement that we should approve this and move σn. I will put it on for approval at Tuesday's TB meeting. I have copied Norbert on this should you want to reach out to him via email with any questions. We have no further rock exposure so these should be good numbers.
- This job is coming in about \$1.2m lower than expectations, mainly due to slip lining many of the lines.
- It looks like Osterhout is ready to start work next week and get the job finished up. Mainly restoration work at this point.
- Sewer and water work is allowed under the most recent Executive order by the Governor.

Bill

William J. Rieber, Jr. Supervisor Town of Thompson 845-794-2500 Ext. 306 845-794-8600 — Fax

Email: supervisor@townofthompson.com



From: Norbert Andryszak [mailto:nandryszak@mhepc.com]

Sent: Monday, March 30, 2020 2:58 PM

To: William J. Rieber, Jr. <supervisor@townofthompson.com>

Cc: Michael Messenger <mmessenger@townofthompson.com>; David Fritts <DFritts@mhepc.com>

Subject: Emerald CO 2

Bill/Mike

Please find the attached draft change order 2 with summary for your preliminary review. Dave and I would like to jump on a conference call with you to go over in detail. Any availability tomorrow? Dave will send invite w call in #. Hope all is well.

Thanks

Norbert

NO. 2



CHANGE ORDER

| OWNER's Project No. | ENGINEER's Project No. 18-701 |
|---|---|
| Project: Town of Thompson- Emerald Green Sewage Collect | tion System Rehabilitation Project |
| (Contrac 2G) | |
| | |
| Contract For: General Construction | Contract Date: 22-Aug-19 |
| | |
| TO: H.Osterhoudt Excavati | ing Inc |
| CONTRACTOR | ing, inc. |
| | |
| You are directed to make the changes noted below in subject Co | ontract: |
| | Town of Thompson |
| | OWNER |
| | Ву: |
| | William J. Rieber |
| | Title: Supervisor |
| | Dated: |
| Noture of Changes | |
| Nature of Changes: 1) See Attached Summary for additional work breakdown (\$126) | 361 50) 2) Extension of the contract time |
| of completion due to excessive rock excavation and winter weatt | her conditions. The contract is extended by |
| 201 days to allow for restoration work. New Time of Completion H.Osterhoudt) | is 30 June 2020. (See attached request - |
| | |
| Enclosures: | |
| 1) Request 4R,5R,6R,7 - H.Osterhoudt 2) Summary- MHE 3)Ex | tension Request - Osterhoudt |
| Those changes result in the fallowing of in the fallowing | 4.5. |
| These changes result in the following adjustment of Contrac | ct Price: |
| Contract Price Prior to This Change Order | \$855,319.00 |
| Net Change Resulting from This Change Order | 126,361.50 |
| | 120,301.30 |
| Current Contract Price Including This Change Order | \$ 981,680.50 |

These changes result in the following adjustment of Contract Time:

| Contract Time Prior to This Change Order | 120 days |
|--|---|
| Net Change Resulting from This Change Order | 201 days |
| Current Contracting Time Including This Change Order | 321 days |
| New Time of Completion Date is | 30-Jun-20 |
| Recommendation from Engineer: | |
| | McGoey, Hauser & Edsall Consulting Engineers, D.P.C. |
| | Ву: |
| Ð | Date: |
| The Above Changes are Approved at the Above Referenced Change in Contract Price and Contract Time: | H.Osterhoudt Excavating, Inc. |
| | Ву: |
| | Date: |
| | |



MARK J. EDSALL, P.E., P.P. (NY, NJ & PA)
MICHAEL W. WEEKS, P.E. (NY, NJ & PA)
MICHAEL J. LAMOREAUX, P.E. (NY, NJ, PA, VT, VA & CT)
PATRICK J. HINES
LYLE R. SHUTE, P.E., LEED-AP (NY, NJ, PA)

Regional Office 111 Wheatfield Drive, Suite 1 Milford, Pennsylvania 18337

(570) 296-2765 fax: (570) 296-2767

e-mail: mhepa@mhepc.com

Principal Emeritus: RICHARD D. McGOEY, P.E. (NY & PA) WILLIAM J. HAUSER, P.E. (NY, NJ & PA)

Town of Thompson Emerald Green – Sewer Rehabilitation Project (18-701) Contract 2G (H. Osterhoudt)

Summary - Change Order #2

Increase of the unit price for rock excavation by \$200.00/cubic yard.

Total of 466 cubic yards @ \$200.00/cubic yard = \$93,200.00

Additional cost for paving/roadway reconstruction performed on Chester Court, beyond the contract quantity due to the widening of the sewer trench and the removal of rock.

See attached request #7 = \$10,740.00

<u>Item 3:</u> Additional cost associated with unmarked watermain break #3 (Stratford Road). See attached request #6R = \$7,388.35

Additional cost for downtime on Cardiff Lane due to a waterline conflict and relocation of the proposed sanitary manhole.

See attached request #4R = \$2,770.63

Additional cost for the installation of an outside drop in sanitary manhole 907. This was performed in order to raise the invert of the pipe run in lieu of removal/hammering of in place rock.

See attached request #5R = \$12,262.52

Change Order total: \$126,361,50

H. Osterhoudt Excavating **CHANGE ORDER** REQUEST 11 Spring Street No. 7 Phone: Ellenville, NY 12428 Fax: TITLE; Change Order Request 12/09/2019 DATE: PROJECT: Emerald Green Sewer Main Replacement TO: CONTRACT/PO: 2G Attn: Norbert Andryszak ORIG: Concealed Condition McGoey Hauser & Edsall 33 Airport Center Drive Suite 202 New Windsor, NY 12553 DESCRIPTION Additional paving due to rock and additional trench width - as discussed. Trench Paving at \$220/For- 180.00/+00. Additional Subbase \$48/CY This is for paving that was completed on Chester. More paving is to be completed. Num Item Description Ref **Qty Unit** Unit Price Amount 1 PAVING Trench Paving 49.000 Ton 8,820.00 2 SUBBASE Additional Subbase 40.000 Cu. Yd. 48.00 1,920.00 Item Total: \$10,740.00 Total: \$0.00 Total: \$10,740.00 NOTE: Quantities of pavement amd subbase verified by MHE in the field

Date:

Date:

H. Osterhoudt Excavating

CHANGE ORDER REQUEST

11 Spring Street Ellenville, NY 12428

Phone: Fax:

No.

6R

TITLE:

Change Order Request

DATE: 12/20/2019

PROJECT:

Emerald Green

Sewer Main Replacement

TO:

Attn: Norbert Andryszak McGoey Hauser & Edsall 33 Airport Center Drive

Suite 202

New Windsor, NY 12553

CONTRACT/PO: 2G

DESCRIPTION

Watermain Repair - Stratford Road

Labor Only

| Num | Item | Description | Ref | Qty | Unit | Unit Price | Amount |
|-----|-------|------------------|-----|-------------|------|------------|--|
| 1 | LABOR | Watermain Repair | | 1.000 | LS | 7,388.35 | 7,388.35 |
| | | | | | | • | anni de la company de la la company de la co |
| | | | | Item Total: | | \$7,388.35 | |
| | | | | | To | otal: | \$0.00 |
| | | | | | To | otal: | \$7,388.35 |

| APPROV. | AL MAIL A DO | |
|---------|--------------------|-----|
| Ву: | VIIII | Ву: |
| | Kristen Osterhoudt | |
| Doğay | 12/20/19 | |

| Ву: | |
|-----|--|
| | |
| | |
| | |
| | |

Emerald Green

Contract # 2G

H. Osterhoudt Excavating, Inc.

Change Order Request #6 Watermain Break- Stratford

Labor

| Crew: | Per Ho | our: |
|-------------------------|--------|--------|
| Supervisor | \$ | - |
| Operator | \$ | 110.77 |
| Operator | \$ | 110.77 |
| Laborer | \$ | 89.73 |
| Laborer | \$ | 89.73 |
| Flagger | \$ | 83.38 |
| Excavator - Case | \$ | 114.53 |
| Loader - Volvo | \$ | 47.00 |
| Truck on Site | \$ | 125.00 |
| Trench Roller - Whacker | \$ | 28.28 |
| | \$ | 799.19 |

| Description | Quantity | Unit | Uni | t Cost |
|-------------------------|-------------|--------------|------|----------|
| 10/17- Watermain repair | 8 | Hours | \$ | 6,393.52 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | i ju | |
| | 70/ 61 | | ۲, | 6,393.52 |
| | 7% Overhead | | \$ | 447.55 |
| | 8% Profit | | \$ | 547.29 |
| | | Labor Total: | \$ | 7,388.35 |

H. Osterhoudt Excavating

CHANGE ORDER REQUEST

11 Spring Street Ellenville, NY 12428

Phone: Fax; No.

5R

TITLE:

Change Order Request

DATE: 12/20/2019

PROJECT:

Emerald Green

Sewer Main Replacement

TO:

Attn: Norbert Andryszak McGoey Hauser & Edsall 33 Airport Center Drive

Suite 202

New Windsor, NY 12553

CONTRACT/PO: 2G

DESCRIPTION

SMH 9 D7 Exterior Drop

Includes all labor, material and downtime for redesign.

| Num | Item | Description | Ref | Qty | Unit | Unit Price | Amount |
|-----|------|--------------------------|-----|-------|--------|------------|-------------|
| 1 | SMH | Exterior Drop - Labor | | 1.000 | L\$ | 10,158.98 | 10,158.98 |
| 2 | SMH | Exterior Drop - Material | | 1.000 | LS | 2,103.54 | 2,103.54 |
| | | | | | ltem T | otal: | \$12,262.52 |
| | | | | | T | otal: | \$0.00 |
| | | | | | T | otal: | \$12.262.52 |

| APPROV | AL, / \\ \\ \\ \\ | 11 |
|--------|--------------------|----|
| Ву: | V (MUL) | |
| | Kristen Osterhoudt | 2/ |
| Date: | 10/20/19 | |

| Ву: | |
|-----|--|
| | |

Date:

Emerald Green

Contract # 2G

H. Osterhoudt Excavating, Inc.

Change Order Request #5

Exterior Drop

Labor

| Crew: | Per Hour: | |
|-------------------------|-----------|--------|
| Supervisor | \$ | - |
| Operator | \$ | 110.77 |
| Operator | \$ | 110.77 |
| Laborer | \$ | 89.73 |
| Laborer | \$ | 89.73 |
| Flagger | \$ | 83.38 |
| Excavator - Case | \$ | 114.53 |
| Loader - Volvo | \$ | 47.00 |
| Truck on Site | \$ | 125.00 |
| Trench Roller - Whacker | \$ | 28.28 |
| | \$ | 799.19 |

| Description | Quantity | Unit | Unit Cost |
|--|-------------|--------------|--------------|
| 10/8- Down Time for design change, Excav. for new invert. | 5 | Hours | \$ 3,995.95 |
| 10/9- Formed and poured around drop invert | 6 | Hours | \$ 4,795.14 |
| | | | |
| | | | |
| | | | · |
| | | | \$ 8,791.09 |
| | 7% Overhead | | \$ 615.38 |
| | 8% Profit | | \$ 752.52 |
| | | Labor Total: | \$ 10,158.98 |

Emerald Green

Contract # 2G

H. Osterhoudt Excavating, Inc.

Change Order Request #5

Exterior Drop

Material

| Material | Quantity | Unit | Un | it Cost | Sı | ıb-Total |
|----------------------------|-------------|-----------------|---------------------|---------|---|----------|
| Core Drill- Machine Rentel | 1 | LS | \$ | 650.00 | \$ | 650.00 |
| A&R Concrete- Boots | 1 | LS | \$ | 55.10 | \$ | 55.10 |
| Schmidts | 1 | LS | \$ | 345.20 | \$ | 345.20 |
| Sullivan Concrete | 1 | LS | \$ | 770.00 | \$ | 770.00 |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | V. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18 | |
| | 7% Overhead | | | ţ | \$ 2 | |
| | 8% Profit | | | | ې د | 127.42 |
| | P | | ichipatica e | | ~~~~ | 155.82 |
| | Į. | Material Total: | FORTING THE SECTION | | \$ | 2,103.54 |





SCHMIDTS WHOLESALE, INC.

P.O. BOX 5100 MONTICELLO, NY 12701 WWW.SCHMIDTSWHOLESALE.COM

Phone 845-794-5900 Fax 845-794-6142

Page 1/1

Sold To

H OSTERHOUDT EXCAVATING 11 SPRING STREET ELLENVILLE NY 12428 H OSTERHOUDT EXCAVATING

11 SPRING STREET ELLENVILLE NY 12428

| Telephone# 845- | 647 0004 | | |
|-------------------------|------------------------|----------------------------|-----------------------------------|
| Customer # Order Date | Soles Order # Buyer | Telephone# | |
| 0015728 10/08/2019 | 9 086991 Buyer | Customer: 1910 # BROOKS | Ship Via Salesman P/U MONTICEL 35 |
| Invoice // Invoice Date | Ship Date Freight Tern | ns Job Number | Terme 33 |
| 086991 10/09/2019 | 0 10/08/19 PREPAI | D | NET 10TH PROX |

| (See 1 | | | | | | - | INET TOT | H PROX |
|------------------------------|---------|--|-------------|------------------------------------|----------------------|----------|---|--------------------|
| II. | ORD ORD | ONTY | QNTY B/O | PRODUCT NUMBER DESC | RIPTION | | NET PRICE | EXTENSION |
| 0.00 0.00 0.00 0.00 | | | | | | Yi. | | |
| 1 | 1 2 | 2 | | 97097080064 PRECO PL 3-5 MINU | IES RIDE TO | Ea | 39.82 | \$79.64 |
| 3 | 1 | | | 9/123825222 8 X 8 G3 | 08 PVC R-T SEWER WYE | Ea | 106.4007 | \$106.40 |
| 4 | - | 1 | | | | errer er | Maria de Cara | |
| 5 | 1 | a | | ELL B X 9 67123826810 8" G628 B | VC R-T SEWER REPAIR | | | \$64.81 \$41.11 |
| | | | | CPLG (NO | STOP) | | 91/10/2 | 541.11 |
| ***** | | 00000000000000000000000000000000000000 | | | | | | |
| | | 2000 | | | | | | |
| | | | | F - 기계약(| | | | |
| | | | 7.00 | | | | | |
| | | | | | | | | |
| 2.202 | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | Rrass material with | | | | |

Brass material with a lead content over 0.25% cannot be used in potable water systems per the Safe Drinking Water Act.

Terms & Conditions We do not accept returns on brass material that have a lead content over 0.25%. Merchandise 345.20
Freight 0.00
Misc Charges 0.00
Sub Total 345.20
Taxable 345.20
Tax (01) 27.62
TOTAL \$372.82

Sent Copy

Pay By 11/10/2019

Writer: LLN

Sullivan Concrete, Inc. 420 Bernas Road Cochecton, NY 12726

845-932-8075

Invoice

Bill To:

ROCK MTN FARMS/OSTERHOUDT 11 SPRING ST ELLENVILLE, NY 12428 Invoice: Date: 602-00004215

Sep 11/19

Customer Job: PO Number:

11 SPRING STREET ELLENVILLE

Quantity UoM Description Rate Amount 7.00 Y3 4000-1 #1 STONE 110.00 770.00 00106572, Subtotal: 770.00 .00 Cartage: GST: 61,60 PST/SST: .00 Emerald Green Total: 831.60

H. Osterhoudt Excavating

CHANGE ORDER REQUEST

11 Spring Street Ellenville, NY 12428

Phone: Fax: No.

4R

TITLE:

Change Order Request

DATE: 12/20/2019

PROJECT:

Emerald Green

Sewer Main Replacement

TO:

Attn: Norbert Andryszak McGoey Hauser & Edsall 33 Airport Center Drive

Suite 202

New Windsor, NY 12553

CONTRACT/PO: 2G

DESCRIPTION

Down Time - Due to utility conflict on Cardiff Lane

Please see attached CIC #3 as submitted on 10/14/19

| Num | Item | Description | Ref Qty | Unit | Unit Price | Amount |
|-----|-----------|------------------|---------|-------------|------------|----------------------|
| 1 | Down Time | Utility Conflict | 1.000 | LS | 2,770.63 | 2,770.63 |
| | | | | Item Total: | | \$2,770.63 |
| | | | | | Total: | \$0.00 \$2,770.63 |

| VAL | | |
|--------------------|--------------------|--------------------------------|
| | By: | |
| Kristen Osterhoudt | | |
| 12/20/19 | Date: | |
| | Kristen Osterhoudt | By: Kristen Osterhoudt Date: |

Emerald Green

Contract # 2G

H. Osterhoudt Excavating, Inc.

Change Order Request #4

.Utility Conflict (Cardiff Lane) - See CIC #3

Labor

| Crew: | Per Ho | our: |
|-------------------------|--------|--------|
| Supervisor | \$ | - |
| Operator | \$ | 110.77 |
| Operator | \$ | 110.77 |
| Laborer | \$ | 89.73 |
| Laborer | \$ | 89.73 |
| Flagger | \$ | 83.38 |
| Excavator - Case | \$ | 114.53 |
| Loader - Volvo | \$ | 47.00 |
| Truck on Site | \$ | 125.00 |
| Trench Roller - Whacker | \$ | 28.28 |
| | \$ | 799.19 |

| | Quantity | Unit | Unit Cost |
|--|-------------|--------------|---------------------------------|
| 10/14-Down Time due to Utility Conflict on Car | 3 | Hours | \$ 2,397.57 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | TOURS THE SE DESIGNATION OF THE |
| | | | \$ 2,397.57 |
| | 7% Overhead | | \$ 167.83 |
| | 8% Profit | | \$ 205.23 |
| | | Labor Total: | \$ 2,770.63 |



H. Osterhoudt Excavating

11 Spring St. Ellenville, NY 12428

845/647-9084, 845/647-8304 (F) Email: HOcon29@aol.com

March 19, 2020

Town of Thompson 4052 Route 42 Monticello, NY 12701

C/O: Mr. Norbert Andryszak

McGoey, Hauser & Edsall Consulting Engineers, D.P.C.

111 Wheatfield Drive, Suite 1

Milford, PA. 18337

Re:

Request for Time Extension

Emerald Green PS#9 Collection Project

Contract #: 18-701

Dear Mr. Andryszak,

We request that the Town grant a contract extension for the aforementioned project due to the following:

- 1. Additional Rock Excavation.
- 2. Winter weather conditions.

We anticipate that all work will be complete by the end of June. At this time we are requesting the contract completion date to be extended to June 30, 2020.

Please contact me with any questions or concerns.

Kristen Osterhoudt

Project Manager

Deputy Clerk (Town of Thompson)

From: marilee (clerk-town of thompson) <marilee@townofthompson.com>

Sent: Thursday, April 02, 2020 10:05 AM

To: Deputy Clerk (Town of Thompson) (Deputy Clerk (Town of Thompson))

Subject: FW: Harris Sewer District

Attachments: SEQRA involved agencies.docx; Harris Full Form EAF.pdf

From: Matthew Sickler [mailto:msickler@mhepc.com]

Sent: Wednesday, April 01, 2020 3:32 PM **To:** Michael Mednick; 'William J. Rieber, Jr.' **Cc:** Mike Lamoreaux; 'Marilee Calhoun' **Subject:** RE: Harris Sewer District

Michael,

I have attached the EAF part 1 of the EAF and a list of the involved agencies for circulation.

Please let me know what else you need at this point.

Thanks,

Matt

McGoey, Hauser & Edsall Consulting Engineers, D.P.C. 111 Wheatfield Drive, Suite 1 Milford, PA 18337

Matthew J. Sickler P.E.

Office: (570) 296-2765 Fax: (570) 296-2767

msickler@mhepc.com | www.mhepc.com

From: Michael Mednick < michael@michaelmednick.com>

Sent: Wednesday, April 1, 2020 11:20 AM

To: 'William J. Rieber, Jr.' <supervisor@townofthompson.com>; Matthew Sickler <msickler@mhepc.com> **Cc:** Mike Lamoreaux@mhepc.com>; 'Marilee Calhoun' <marilee@townofthompson.com>

Subject: RE: Harris Sewer District

Will do.....Matt please forward me the information so I can prepare a lead agency resolution for the board and a list of involved /interested agencies to send the notice to. Thanks......Michael

From: William J. Rieber, Jr. [mailto:supervisor@townofthompson.com]

Sent: Wednesday, April 1, 2020 11:01 AM

To: 'Matthew Sickler'

Cc: 'Mike Lamoreaux'; Marilee Calhoun; Michael Mednick

Subject: RE: Harris Sewer District

Yes, please coordinate with Michael Mednick.

Michael: I am meeting with Marilee tomorrow to do the agenda. I will put it on but please prepare the appropriate motions, etal so she can include in the agenda packet.

Bill

William J. Rieber, Jr.
Supervisor
Town of Thompson
845-794-2500 Ext. 306
845-794-8600 – Fax

Email: supervisor@townofthompson.com



From: Matthew Sickler [mailto:msickler@mhepc.com]

Sent: Tuesday, March 31, 2020 2:57 PM

To: William J. Rieber, Jr. < supervisor@townofthompson.com>

Cc: Mike Lamoreaux < mlamoreaux@mhepc.com>

Subject: Harris Sewer District

Bill,

To complete the CWSRF finance application by June 26, 2020 we need to start the SEQRA process. We have completed Part 1 of the EAF and can send it by Thursday for next week's meeting agenda if that works for you. You will need a resolution to adopt lead agency status and circulate the notice of intent to involved/interested agencies. Should I get in touch with Michael Mednick directly to coordinate that?

Thanks, and as always feel free to call my cell, 914-489-3286, if you have any questions.

Matt

McGoey, Hauser & Edsall Consulting Engineers, D.P.C. 111 Wheatfield Drive, Suite 1 Milford, PA 18337

Matthew J. Sickler P.E.

Office: (570) 296-2765 Fax: (570) 296-2767

msickler@mhepc.com | www.mhepc.com

Town of Thompson

Harris Sewer force main and pump station replacement Project

List of involved agencies:

Sullivan County Division of Public Works 100 North St. P.O. Box 5012 Monticello, NY 12701

NYS DEC

21 South Putt Corners Road, New Paltz, NY 12561-1696

NYS EFC

625 Broadway Ste 7,

Albany, NY 12207

USDA

Richard Mayfield, State Director The Galleries of Syracuse 441 South Salina Street, Suite 357 Syracuse, NY 13202-2541

Full Environmental Assessment Form Part 1 - Project and Setting

Instructions for Completing Part 1

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

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

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

A. Project and Applicant/Sponsor Information.

| Name of Action or Project: | | | | |
|--|---------------------------------------|---------------------------------------|--|--|
| Harris Sewer Force Main and Pump Station Replacement | | | | |
| Project Location (describe, and attach a general location map): | | | | |
| Town of Thompson, NY | | | | |
| Brief Description of Proposed Action (include purpose or need): | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | |
| The installation and replacement of approximately 3.5 miles of sewer force main one new pump station. | along with the replacement of three p | ump stations and the installation of | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Name of Applicant/Sponsor: Telephone: (845) 794-2500 | | | | |
| Town of Thompson | | | | |
| Address | supervisor@t | E-Mail: supervisor@townofthompson.com | | |
| Address: 4052 Route 42 | | | | |
| City/PO: Monticello | State: NY | Zip Code: 12701 | | |
| Project Contact (if not same as sponsor; give name and title/role): | Telephone: (570) 296 | Telephone: (570) 296-2765 | | |
| Jeremy Valentine (Project Manager) | | E-Mail: jvalentine@mhepc.com | | |
| Address: | | | | |
| 111 Wheatfield Drive, suite 1 | | | | |
| City/PO: | State: | Zip Code: | | |
| Milford | PA | 18337 | | |
| Property Owner (if not same as sponsor): | Telephone: | Telephone: E-Mail: | | |
| | E-Mail: | | | |
| Address: | | | | |
| City/PO: | State: | Zip Code: | | |
| | | Zip Code. | | |

B. Government Approvals

| B. Government Approvals, Funding, or Sport assistance.) | nsorship. ("Funding" includes grants, loans, t | ax relief, and any othe | er forms of financial |
|--|---|---|-------------------------|
| Government Entity | If Yes: Identify Agency and Approval(s) Required | Application Date (Actual or projected) | |
| a. City Counsel, Town Board, ☐Yes☑No or Village Board of Trustees | | | |
| b. City, Town or Village ☐Yes ☑No Planning Board or Commission | | | |
| c. City, Town or ☐Yes☑No Village Zoning Board of Appeals | | | |
| d. Other local agencies ☐Yes☑No | | | |
| e. County agencies ☑Yes□No | Sullivan County Department of Public Works=Construction Permit | 9/1/2020 projected | |
| f. Regional agencies Yes No | | | |
| g. State agencies ✓ Yes ☐ No | NYSDEC=Sewer Ext & SWPPP, EFC=Funding, NYSDOT=Construction Permit | EFC-6/26/2020 proj. DE NYS DOT 9/1/2020 proj | EC-7/1/2020 proj i |
| h. Federal agencies ☑Yes□No | USDA = Funding | 7/15/2020 proj | |
| | or the waterfront area of a Designated Inland W with an approved Local Waterfront Revitaliza n Hazard Area? | · | □Yes☑No □Yes☑No □Yes☑No |
| C. Planning and Zoning | | | |
| C.1. Planning and zoning actions. | | | |
| Will administrative or legislative adoption, or an only approval(s) which must be granted to enable If Yes, complete sections C, F and G. If No, proceed to question C.2 and con | mendment of a plan, local law, ordinance, rule ole the proposed action to proceed? Inplete all remaining sections and questions in F | · · | □Yes ☑ No |
| C.2. Adopted land use plans. | | · | |
| a. Do any municipally- adopted (city, town, village or county) comprehensive land use plan(s) include the site where the proposed action would be located? | | | |
| If Yes, does the comprehensive plan include specific recommendations for the site where the proposed action would be located? | | | |
| b. Is the site of the proposed action within any le Brownfield Opportunity Area (BOA); design or other?) If Yes, identify the plan(s): NYS Major Basins:Upper Delaware | ocal or regional special planning district (for exated State or Federal heritage area; watershed i | kample: Greenway; nanagement plan; | ∠ Yes No |
| | | | |
| c. Is the proposed action located wholly or partion or an adopted municipal farmland protection If Yes, identify the plan(s): | ially within an area listed in an adopted munici plan? | pal open space plan, | ∐Yes☑No |
| | | | |

| C.3. Zoning | |
|---|--|
| a. Is the site of the proposed action located in a municipality with an adopted zoning law or ordinance. If Yes, what is the zoning classification(s) including any applicable overlay district? Highway Commercial-1, Highway Commercial-2, Village of Monticello | ☑Yes□No |
| b. Is the use permitted or allowed by a special or conditional use permit? | Z Yes□No |
| c. Is a zoning change requested as part of the proposed action? If Yes, i. What is the proposed new zoning for the site? | □Yes ☑ No |
| C.4. Existing community services. | |
| a. In what school district is the project site located? Monticello Central School District | |
| b. What police or other public protection forces serve the project site? State Police Troop F Station, Liberty, NY | |
| c. Which fire protection and emergency medical services serve the project site? Monticello Fire Department | With the Colonia of t |
| d. What parks serve the project site? N/A | |
| D. Project Details | |
| D.1. Proposed and Potential Development | |
| a. What is the general nature of the proposed action (e.g., residential, industrial, commercial, recreational; if mixed, components)? The project is a municipal project, including sewer pump stations and sewer force mains. | include all |
| b. a. Total acreage of the site of the proposed action? b. Total acreage to be physically disturbed? c. Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor? 1.1 acres | |
| c. Is the proposed action an expansion of an existing project or use? i. If Yes, what is the approximate percentage of the proposed expansion and identify the units (e.g., acres, miles, square feet)? % | ☐ Yes☑ No housing units, |
| d. Is the proposed action a subdivision, or does it include a subdivision? If Yes, i. Purpose or type of subdivision? (e.g., residential, industrial, commercial; if mixed, specify types) | □Yes ☑ No |
| ii. Is a cluster/conservation layout proposed? iii. Number of lots proposed? iv. Minimum and maximum proposed lot sizes? Minimum Maximum | □Yes□No |
| e. Will the proposed action be constructed in multiple phases? i. If No, anticipated period of construction: months ii. If Yes: | Z Yes□No |
| Total number of phases anticipated Anticipated commencement date of phase 1 (including demolition) Anticipated completion date of final phase Generally describe connections or relationships among phases, including any contingencies where progress determine timing or duration of future phases: Phase II will not start until Phase I has been completed. | _ |
| | |

| f. Does the project | t include new resid | ential uses? | | | □Yes☑No |
|-----------------------------|----------------------------------|---|---------------------------|---|--------------------------|
| | bers of units propo | | | | TI COMINO |
| | One Family | Two Family | Three Family | Multiple Family (four or more) | |
| Initial Phase | | | | | |
| At completion | | ************************************** | | | |
| of all phases | | | | *************************************** | |
| g. Does the propo | sed action include | new non-residentia | al construction (inclu | ding expansions)? | ☑ Yes □ No |
| i. Total number | of structures | 4 | | | |
| ii. Dimensions (| in feet) of largest pr | roposed structure: | 8 height; or cooled: | 10 width; and 12 length square feet | |
| h. Does the propo | sed action include | construction or oth | er activities that will | result in the impoundment of any | □Yes Z No |
| | s creation of a wate | r supply, reservoir | , pond, lake, waste la | goon or other storage? | |
| If Yes, | impoundment: | | | | |
| ii. If a water imp | impoundment:oundment, the prince | cipal source of the | water: | Ground water Surface water stream | as Other specify: |
| | | - | | | із Дотнег вресту. |
| iii. If other than w | vater, identify the ty | pe of impounded/ | contained liquids and | I their source. | |
| iv. Approximate | size of the propose | d impoundment. | Volume: | million gallons; surface area: | acres |
| v. Dimensions o | f the proposed dam | or impounding str | ucture: | height; length | |
| vi. Construction | method/materials f | or the proposed da | m or impounding str | ructure (e.g., earth fill, rock, wood, conc | rete): |
| **** | | | | | |
| D.2. Project Op | erations | | | | |
| a. Does the propo | sed action include | any excavation, mi | ining, or dredging, du | uring construction, operations, or both? | V Yes No |
| (Not including | general site prepara | ition, grading or in | stallation of utilities | or foundations where all excavated | |
| materials will r | emain onsite) | | | | |
| | rnose of the every | ation or dredging? | The installation of the a | ewer force main and the pump stations. | |
| ii. How much ma | terial (including roo | ck. earth. sediment | s. etc.) is proposed to | be be removed from the site? | |
| • Volume | (specify tons or cul | oic yards): 30 cubic | vards | s so removed from the site: | |
| Over wh | at duration of time? | ? 2 years | | | |
| | | | | ed, and plans to use, manage or dispose | of them. |
| Top soil and s | oil excavated for the p | ump stations will be | removed from site. | | |
| iv. Will there be | onsite dewatering of | or processing of ex | cavated materials? | | V Yes No |
| | c. There is the possi | ibility of dewatering p | | k and boring process. Any dewatering proce | ss will follow all |
| | applicable NYSDI | EC requirements. | | | oo mii jollow dii |
| v. What is the to | tal area to be dredge | ed or excavated? | | 4 acres | |
| vi. What is the m | aximum area to be | worked at any one | time? | less than 1 acre acres | |
| vii. What would b | e the maximum dep | pth of excavation c | or dredging? | 14 feet | r |
| viii. Will the exca | vation require blast | ing? | | | ∐Yes ∑ No |
| The executated | crees will be rectored | and plan: | d | | |
| THE EXCAVALED | areas will be restored | rto their conditions p | nor to any excavation. | | |
| | | | | | |
| b. Would the prop | oosed action cause o | or result in alteration | on of, increase or dec | rease in size of, or encroachment | ☐Yes ☑ No |
| Into any existing If Yes: | ig wettand, waterbo | ody, shoreline, bea | ch or adjacent area? | | |
| | etland or waterbody | y which would be | affected (by name, w | rater index number, wetland map numbe | r or geographic |
| description): | • | | | | . or geograpine |
| | | White the same of | | | |
| | | | | | |

| ii. Describe how the proposed action would affect that waterbody or wetland, e.g. excavation, fill, plan alteration of channels, banks and shorelines. Indicate extent of activities, alterations and additions in | cement of structures, or n square feet or acres: |
|--|--|
| iii. Will the proposed action cause or result in disturbance to bottom sediments? If Yes, describe: | □Yes□No |
| iv. Will the proposed action cause or result in the destruction or removal of aquatic vegetation? | ☐ Yes ☐ No |
| If Yes: • acres of aquatic vegetation proposed to be removed: | |
| expected acreage of aquatic vegetation remaining after project completion: | |
| purpose of proposed removal (e.g. beach clearing, invasive species control, boat access): | |
| nronosed method of plant removal: | |
| proposed method of plant removal: if chemical/herbicide treatment will be used, specify product(s): Describe any proposed real-method (six) of the product (six). | |
| v. Describe any proposed reclamation/mitigation following disturbance: | |
| | |
| c. Will the proposed action use, or create a new demand for water? If Yes: | □Yes Z No |
| i. Total anticipated water usage/demand per day: gallons/day | |
| ii. Will the proposed action obtain water from an existing public water supply? If Yes: | □Yes □No |
| Name of district or service area: | |
| Does the existing public water supply have capacity to serve the proposal? | ☐ Yes ☐ No |
| • Is the project site in the existing district? | ☐ Yes☐ No☐ Yes☐ No |
| Is expansion of the district needed? | ☐ Yes☐ No |
| Do existing lines serve the project site? | ☐ Yes☐ No |
| iii. Will line extension within an existing district be necessary to supply the project? If Yes: | ☐Yes ☐No |
| Describe extensions or capacity expansions proposed to serve this project: | |
| Source(s) of supply for the district: | |
| iv. Is a new water supply district or service area proposed to be formed to serve the project site? | П УасПы |
| If, Yes: | ☐ Yes☐No |
| Applicant/sponsor for new district: | |
| Date application submitted or anticipated: | |
| Proposed source(s) of supply for new district: | |
| v. If a public water supply will not be used, describe plans to provide water supply for the project: | |
| vi. If water supply will be from wells (public or private), what is the maximum pumping capacity: | gallons/minute. |
| d. Will the proposed action generate liquid wastes? | ☐ Yes Z No |
| If Yes: | |
| i. Total anticipated liquid waste generation per day: gallons/day ii. Nature of liquid wastes to be generated (e.g., sanitary wastewater, industrial; if combination, described | |
| approximate volumes or proportions of each): | e an components and |
| | |
| iii. Will the proposed action use any existing public wastewater treatment facilities? If Yes: | ☐ Yes ☐No |
| Name of wastewater treatment plant to be used: Name of district: | |
| Name of district: Does the existing wastewater treatment plant have capacity to serve the project? | ☐ Yes ☐ No |
| • Is the project site in the existing district? | ☐ Yes ☐No ☐ Yes ☐No |
| • Is expansion of the district needed? | ☐ Yes ☐No |
| | |

| Do existing sewer lines serve the project site? | □Yes □No |
|---|---|
| Will a line extension within an existing district be necessary to serve the project? | □Yes□No |
| If Yes: | toma |
| Describe extensions or capacity expansions proposed to serve this project: | |
| Describe extensions of capacity expansions proposed to serve this project. | |
| | |
| iv. Will a new wastewater (sewage) treatment district be formed to serve the project site? | □Yes □No |
| If Yes: | |
| Applicant/sponsor for new district: | |
| Date application submitted or anticipated: | |
| What is the receiving water for the wastewater discharge? | |
| v. If public facilities will not be used, describe plans to provide wastewater treatment for the project, including speci | ifving proposed |
| receiving water (name and classification if surface discharge or describe subsurface disposal plans): | nyme proposes |
| | |
| vi. Describe any plans or designs to capture, recycle or reuse liquid waste: | |
| The Describe any plans of designs to capture, recycle of fease figure waste. | *************************************** |
| | |
| e. Will the proposed action disturb more than one acre and create stormwater runoff, either from new point | □Yes ☑ No |
| sources (i.e. ditches, pipes, swales, curbs, gutters or other concentrated flows of stormwater) or non-point | |
| source (i.e. sheet flow) during construction or post construction? | |
| If Yes: | |
| i. How much impervious surface will the project create in relation to total size of project parcel? | |
| Square feet oracres (impervious surface) | |
| Square feet or acres (parcel size) | |
| ii. Describe types of new point sources. | |
| - Posterior types of their point sources. | |
| iii. Where will the stormwater runoff be directed (i.e. on-site stormwater management facility/structures, adjacent pr | ronerties |
| groundwater, on-site surface water or off-site surface waters)? | operaes, |
| 5 · · · · · · · · · · · · · · · · · · · | |
| | |
| If to surface waters, identify receiving water bodies or wetlands: | |
| | |
| | |
| Will stormwater runoff flow to adjacent properties? | □Yes□No |
| | □Yes□No |
| f. Does the proposed action include, or will it use on-site, one or more sources of air emissions, including fuel | Z Yes □No |
| combustion, waste incineration, or other processes or operations? | K 1.62 - 1.40 |
| If Yes, identify: | |
| i. Mobile sources during project operations (e.g., heavy equipment, fleet or delivery vehicles) | |
| heavy equipment | |
| ii. Stationary sources during construction (e.g., power generation, structural heating, batch plant, crushers) | |
| | |
| iii. Stationary sources during operations (e.g., process emissions, large boilers, electric generation) | |
| | |
| g. Will any air emission sources named in D.2.f (above), require a NY State Air Registration, Air Facility Permit, | □Yes ☑ No |
| or Federal Clean Air Act Title IV or Title V Permit? | |
| If Yes: | |
| i. Is the project site located in an Air quality non-attainment area? (Area routinely or periodically fails to meet | □Yes□No |
| ambient air quality standards for all or some parts of the year) | |
| ii. In addition to emissions as calculated in the application, the project will generate: | |
| •Tons/year (short tons) of Carbon Dioxide (CO ₂) | |
| •Tons/year (short tons) of Nitrous Oxide (N ₂ O) | |
| •Tons/year (short tons) of Perfluorocarbons (PFCs) | |
| | |
| •Tons/year (short tons) of Sulfur Hexafluoride (SF ₆) | |
| •Tons/year (short tons) of Carbon Dioxide equivalent of Hydroflourocarbons (HFCs) | |
| Tons/year (short tons) of Hazardous Air Pollutants (HAPs) | |

| h. Will the proposed action generate or emit methane (including, but not limited to, sewage treatment plants, landfills, composting facilities)? If Yes: i. Estimate methane generation in tons/year (metric): ii. Describe any methane capture, control or elimination measures included in project design (e.g., combustion to g electricity, flaring): | Yes No |
|---|------------------------------------|
| i. Will the proposed action result in the release of air pollutants from open-air operations or processes, such as quarry or landfill operations? If Yes: Describe operations and nature of emissions (e.g., diesel exhaust, rock particulates/dust): | ∏Yes ⊘ No |
| j. Will the proposed action result in a substantial increase in traffic above present levels or generate substantial new demand for transportation facilities or services? If Yes: i. When is the peak traffic expected (Check all that apply): | Yes |
| iv. Does the proposed action include any shared use parking? v. If the proposed action includes any modification of existing roads, creation of new roads or change in existing vi. Are public/private transportation service(s) or facilities available within ½ mile of the proposed site? vii Will the proposed action include access to public transportation or accommodations for use of hybrid, electric or other alternative fueled vehicles? viii. Will the proposed action include plans for pedestrian or bicycle accommodations for connections to existing pedestrian or bicycle routes? | ☐Yes☐No ☐Yes☐No ☐Yes☐No |
| k. Will the proposed action (for commercial or industrial projects only) generate new or additional demand for energy? If Yes: i. Estimate annual electricity demand during operation of the proposed action: ii. Anticipated sources/suppliers of electricity for the project (e.g., on-site combustion, on-site renewable, via grid/lother): iii. Will the proposed action require a new, or an upgrade, to an existing substation? | ☐Yes☑No ocal utility, or ☐Yes☐No |
| 1. Hours of operation. Answer all items which apply. ii. During Operations: • Monday - Friday: 8am to 5 pm • Monday - Friday: 24 hours • Saturday: N/A • Saturday: 24 hours • Sunday: N/A • Sunday: 24 hours • Holidays: N/A • Holidays: 24 hours | |

| m. Will the proposed action produce noise that will exceed existing ambient noise levels during construction, operation, or both? If yes: | ☐ Yes Z No |
|---|------------------------------------|
| i. Provide details including sources, time of day and duration: | |
| ii. Will the proposed action remove existing natural barriers that could act as a noise barrier or screen? Describe: | □Yes□No |
| n. Will the proposed action have outdoor lighting? If yes: | Z Yes □No |
| i. Describe source(s), location(s), height of fixture(s), direction/aim, and proximity to nearest occupied structures: There will be lights on the pump station buildings, pointed downwards. | |
| Will proposed action remove existing natural barriers that could act as a light barrier or screen? Describe: No existing light barriers or screens will be removed for the construction of the pump stations and force main. | ☐ Yes Ø No |
| o. Does the proposed action have the potential to produce odors for more than one hour per day? If Yes, describe possible sources, potential frequency and duration of odor emissions, and proximity to nearest occupied structures: | ☑ Yes □No |
| The sewer pump stations will have vents and there is the potential for odors to be produced 24 hours a day 365 days a year, approximately 450 ft. away from the Benmosche pump station. There is already a pump station at that location and odors have not be | The closest house is een an issue. |
| p. Will the proposed action include any bulk storage of petroleum (combined capacity of over 1,100 gallons) or chemical products 185 gallons in above ground storage or any amount in underground storage? If Yes: i. Product(s) to be stored | □Yes ☑ No |
| ii. Volume(s) per unit time (e.g., month, year) iii. Generally, describe the proposed storage facilities: | |
| q. Will the proposed action (commercial, industrial and recreational projects only) use pesticides (i.e., herbicides, insecticides) during construction or operation? If Yes: | ☐ Yes ☑ No |
| i. Describe proposed treatment(s): | |
| | |
| ii. Will the proposed action use Integrated Pest Management Practices? | ☐ Yes ☐No |
| r. Will the proposed action (commercial or industrial projects only) involve or require the management or disposal of solid waste (excluding hazardous materials)? If Yes: | Yes No |
| i. Describe any solid waste(s) to be generated during construction or operation of the facility: | |
| • Construction: tons per (unit of time) | |
| • Operation: tons per (unit of time) ii. Describe any proposals for on-site minimization, recycling or reuse of materials to avoid disposal as solid waste: | |
| • Construction: | |
| Operation: | |
| iii. Proposed disposal methods/facilities for solid waste generated on-site: Construction: | |
| Operation: | |

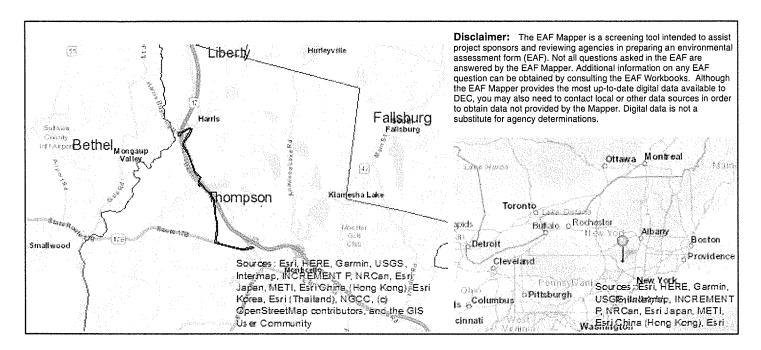
| s. Does the proposed action include construction or modi | fication of a solid waste m | anagement facility? | Yes 🗸 No | |
|---|------------------------------|--------------------------------|-----------------------|--|
| If Yes: | | - | | |
| i. Type of management or handling of waste proposed for the site (e.g., recycling or transfer station, composting, landfill, or | | | | |
| other disposal activities): | | | | |
| ii. Anticipated rate of disposal/processing: | • .• • | | | |
| Tons/month, if transfer or other non-off Tons/hour, if combustion or thermal | | ent, or | | |
| iii If landfill anticipated site life: | reatment | | | |
| iii. If landfill, anticipated site life: | years | | | |
| t. Will the proposed action at the site involve the comme | rcial generation, treatment, | storage, or disposal of hazard | ous 🗌 Yes 📈 No | |
| waste? If Yes: | | | | |
| i. Name(s) of all hazardous wastes or constituents to be | concreted bandled on man | annual of Contiller. | | |
| i. Pame(s) of all hazardous wastes of constituents to be | generated, nationed of mai | naged at facility. | | |
| | | | | |
| ii. Generally describe processes or activities involving h | azardous wastes or constit | uents: | | |
| | | | | |
| | | | | |
| iii. Specify amount to be handled or generatedto | ons/month | | | |
| iv. Describe any proposals for on-site minimization, rec | yeling or reuse of hazardou | us constituents: | | |
| | | | | |
| v. Will any hazardous wastes be disposed at an existing | offsite hazardous waste fa | acility? | □Yes□No | |
| If Yes: provide name and location of facility: | CHOICO HADAI GOGD WASIO IC | ionity. | | |
| | | | | |
| If No: describe proposed management of any hazardous wastes which will not be sent to a hazardous waste facility: | | | | |
| | | | | |
| | | | | |
| E. Site and Setting of Proposed Action | | | | |
| E. Sice and Setting of Froposed Action | | | | |
| E.1. Land uses on and surrounding the project site | | | | |
| a. Existing land uses. | | | | |
| i. Check all uses that occur on, adjoining and near the | project site | | | |
| ☑ Urban ☐ Industrial ☐ Commercial ☐ Resid | ential (suburban) Ru | ral (non-farm) | | |
| Forest Agriculture Aquatic Other | (specify): | (| | |
| ii. If mix of uses, generally describe: | | | | |
| | | | | |
| | | | | |
| b. Land uses and covertypes on the project site. | | | | |
| Land use or | Current | Acreage After | Chanas | |
| Covertype | Acreage | Project Completion | Change (Acres +/-) | |
| Roads, buildings, and other paved or impervious | 110.00.50 | 110ject Completion | (Acies 17-) | |
| surfaces | 1 | 1 | 0 | |
| • Forested | | | | |
| Meadows, grasslands or brushlands (non- | | | | |
| agricultural, including abandoned agricultural) | 5.3 | 5.3 | 0 | |
| Agricultural | | | | |
| (includes active orchards, field, greenhouse etc.) | | | | |
| Surface water features | | | | |
| (lakes, ponds, streams, rivers, etc.) | | | | |
| Wetlands (freshwater or tidal) | | | | |
| Non-vegetated (bare rock, earth or fill) | | | | |
| | | | | |
| Other Describe: | | | | |
| Describe: | | | | |
| | | | | |

| c. Is the project site presently used by members of the community for public recreation? i. If Yes: explain: | □Yes☑No |
|--|------------------------|
| d. Are there any facilities serving children, the elderly, people with disabilities (e.g., schools, hospitals, licensed day care centers, or group homes) within 1500 feet of the project site? If Yes, | Z Yes□No |
| i. Identify Facilities: Catskill Regional Medical Center | |
| e. Does the project site contain an existing dam? If Yes: | □Yes ☑ No |
| i. Dimensions of the dam and impoundment: | |
| Dam height: feet | |
| Dam length: feet | |
| Surface area: acres | |
| Volume impounded: gallons OR acre-feet | |
| ii. Dam's existing hazard classification: | |
| iii. Provide date and summarize results of last inspection: | |
| f. Has the project site ever been used as a municipal, commercial or industrial solid waste management facility, | ☐ Yes Z No |
| or does the project site adjoin property which is now, or was at one time, used as a solid waste management facilif Yes: | ity? |
| i. Has the facility been formally closed? | ☐Yes☐ No |
| If yes, cite sources/documentation: | |
| ii. Describe the location of the project site relative to the boundaries of the solid waste management facility: | |
| Lessertoe the location of the project site relative to the boundaries of the solid waste management facility: | |
| iii. Describe any development constraints due to the prior solid waste activities: | |
| iii. Describe any development constraints due to the prior solid waste activities: g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes: | ☐ Yes Z No |
| iii. Describe any development constraints due to the prior solid waste activities: g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? | ☐ Yes Z No |
| iii. Describe any development constraints due to the prior solid waste activities: g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes: i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred. n. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? | ☐ Yes Z No |
| iii. Describe any development constraints due to the prior solid waste activities: g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes: i. Describe waste(s) handled and waste management activities, including approximate time when activities occurred. n. Potential contamination history. Has there been a reported spill at the proposed project site, or have any remedial actions been conducted at or adjacent to the proposed site? if Yes: i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site | □Yes ☑ No d: |
| iii. Describe any development constraints due to the prior solid waste activities: g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes: i. Describe waste(s) handled and waste management activities, including approximate time when activities occurre remedial actions been conducted at or adjacent to the proposed site? If Yes: i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: Yes – Spills Incidents database Provide DEC ID number(s): 1405179 Yes – Environmental Site Remediation database Provide DEC ID number(s): | Yes No d: Yes No |
| iii. Describe any development constraints due to the prior solid waste activities: g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes: i. Describe waste(s) handled and waste management activities, including approximate time when activities occurre remedial actions been conducted at or adjacent to the proposed site? If Yes: i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: Yes - Spills Incidents database Provide DEC ID number(s): 1405179 Provide DEC ID number(s): | Yes No d: Yes No |
| iii. Describe any development constraints due to the prior solid waste activities: g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes: i. Describe waste(s) handled and waste management activities, including approximate time when activities occurre remedial actions been conducted at or adjacent to the proposed site? If Yes: i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: Yes – Spills Incidents database Provide DEC ID number(s): 1405179 Yes – Environmental Site Remediation database Provide DEC ID number(s): | Yes No d: Yes No |
| iii. Describe any development constraints due to the prior solid waste activities: g. Have hazardous wastes been generated, treated and/or disposed of at the site, or does the project site adjoin property which is now or was at one time used to commercially treat, store and/or dispose of hazardous waste? If Yes: i. Describe waste(s) handled and waste management activities, including approximate time when activities occurre remedial actions been conducted at or adjacent to the proposed site? If Yes: i. Is any portion of the site listed on the NYSDEC Spills Incidents database or Environmental Site Remediation database? Check all that apply: Yes - Spills Incidents database Provide DEC ID number(s): 1405179 Yes - Environmental Site Remediation database Neither database i. If site has been subject of RCRA corrective activities, describe control measures: | Yes No d: Yes No |

| v. Is the project site subject to an institutional control | l limiting property uses? | | ☐ Yes Z No |
|--|---|------------------------|---|
| If yes, DEC site ID number: Describe the type of institutional control (e.g. | deed restriction or easement): | | |
| Describe any use limitations: Describe any engineering controls: | · · | | |
| | | | |
| Will the project affect the institutional or eng Explain: | | | ☐Yes ☐No |
| | | | |
| | | | |
| E.2. Natural Resources On or Near Project Site | | | |
| a. What is the average depth to bedrock on the project | | < 7 feet | |
| b. Are there bedrock outcroppings on the project site? If Yes, what proportion of the site is comprised of bed | rock outcroppings? | 1_% | ☑ Yes □No |
| c. Predominant soil type(s) present on project site: | Wellsboro | 50 % | |
| | Chesshire Lackawanna | 40 % | |
| J W/L-4 :- 4L J - 4L 4- 4L 4- 4.1.1 - (1 | | 10 % | *************************************** |
| d. What is the average depth to the water table on the | | eet | |
| e. Drainage status of project site soils: Well Draine | | | |
| ✓ Moderately ✓ Poorly Drain | ned <u>90</u> % of site | | |
| f. Approximate proportion of proposed action site with | | 40 % of site | |
| | ✓ 10-15%:✓ 15% or greater: | | |
| g. Are there any unique geologic features on the projection | | | ☐ Yes Z No |
| If Yes, describe: | of Site: | | TI LEZININO |
| | | | |
| h. Surface water features. | | | |
| i. Does any portion of the project site contain wetland | ds or other waterbodies (including st | reams, rivers, | ☑ Yes□No |
| ponds or lakes)? ii. Do any wetlands or other waterbodies adjoin the pr | roject site? | | Z Yes□No |
| If Yes to either i or ii , continue. If No, skip to E.2.i. | 0,000,010,0 | | K i es Tirro |
| iii. Are any of the wetlands or waterbodies within or a | idjoining the project site regulated by | y any federal, | Z Yes□No |
| state or local agency? iv. For each identified regulated wetland and waterbook | d the the the | B 1 1 8 | |
| • Streams: Name 815-208, 815-141, 81 | dy on the project site, provide the fol | Classification B, B(T) | |
| Lakes or Ponds: Name | | Classification | |
| | eral Waters, Federal Waters, | Approximate Size | |
| Wetland No. (if regulated by DEC) v. Are any of the above water bodies listed in the mos waterbodies? | t recent compilation of NYS water q | uality-impaired | □Yes ☑ No |
| If yes, name of impaired water body/bodies and basis | for listing as impaired: | | *** |
| i. Is the project site in a designated Floodway? | | | |
| - | | | Yes No |
| j. Is the project site in the 100-year Floodplain? | | | ✓Yes □No |
| k. Is the project site in the 500-year Floodplain? | | | ☑ Yes □ No |
| l. Is the project site located over, or immediately adjoint If Yes: | ning, a primary, principal or sole sou | irce aquifer? | ✓ Yes □No |
| i. Name of aquifer: Principal Aquifer | | | |
| | | | · · |

| m. Identify the predominant wildlife species that occupy or use the project site: | |
|---|--------------------------|
| Deer, rabbit, raccoons, opossums | |
| wildlife species native to fields and lightly | |
| wooded areas. | |
| n. Does the project site contain a designated significant natural community? If Yes: i. Describe the habitat/community (composition, function, and basis for designation): | ∐Yes Z No |
| | |
| ii. Source(s) of description or evaluation: | |
| iii. Extent of community/habitat: | |
| • Currently: acres | |
| Following completion of project as proposed: acres | |
| • Gain or loss (indicate + or -):acres | |
| o. Does project site contain any species of plant or animal that is listed by the federal governmendangered or threatened, or does it contain any areas identified as habitat for an endangered If Yes: i. Species and listing (endangered or threatened): Bald Eagle | or threatened species? |
| p. Does the project site contain any species of plant or animal that is listed by NYS as rare, or special concern? | as a species of ☐Yes☑No |
| If Yes: i. Species and listing: | |
| q. Is the project site or adjoining area currently used for hunting, trapping, fishing or shell fishi If yes, give a brief description of how the proposed action may affect that use: | ng? □Yes☑No |
| E.3. Designated Public Resources On or Near Project Site | |
| a. Is the project site, or any portion of it, located in a designated agricultural district certified pu Agriculture and Markets Law, Article 25-AA, Section 303 and 304? If Yes, provide county plus district name/number: SULL004 | rsuant to ☑Yes ☐No |
| b. Are agricultural lands consisting of highly productive soils present? i. If Yes: acreage(s) on project site? ii. Source(s) of soil rating(s): | _Yes Z No |
| c. Does the project site contain all or part of, or is it substantially contiguous to, a registered Natural Landmark? If Yes: | ational □Yes ☑No |
| i. Nature of the natural landmark: | iture te size/extent: |
| d. Is the project site located in or does it adjoin a state listed Critical Environmental Area? If Yes: i. CEA name: Periode and | ∏Yes ∑ No |
| ii. Basis for designation: | |
| iii. Designating agency and date: | |

| e. Does the project site contain, or is it substantially contiguous to, a bu which is listed on the National or State Register of Historic Places, o Office of Parks, Recreation and Historic Preservation to be eligible for If Yes: i. Nature of historic/archaeological resource: Archaeological Site ii. Name: iii. Brief description of attributes on which listing is based: | r that has been determined by the Commission | Yes No oner of the NYS ces? |
|--|--|-----------------------------|
| f. Is the project site, or any portion of it, located in or adjacent to an archaeological sites on the NY State Historic Preservation Office (SF | IPO) archaeological site inventory? | Z Yes □No |
| g. Have additional archaeological or historic site(s) or resources been in If Yes: i. Describe possible resource(s): ii. Basis for identification: | | ∐Yes☑No |
| h. Is the project site within fives miles of any officially designated and scenic or aesthetic resource? If Yes: i. Identify resource: ii. Nature of, or basis for, designation (e.g., established highway overleasts); | | ☐Yes ☑No |
| etc.): | niles. | |
| i. Is the project site located within a designated river corridor under the Program 6 NYCRR 666? If Yes: i. Identify the name of the river and its designation: | e Wild, Scenic and Recreational Rivers | ☐ Yes No |
| ii. Is the activity consistent with development restrictions contained in | 6NYCRR Part 666? | □Yes □No |
| F. Additional Information Attach any additional information which may be needed to clarify you If you have identified any adverse impacts which could be associated measures which you propose to avoid or minimize them. | | pacts plus any |
| G. Verification I certify that the information provided is true to the best of my knowle | dge. | |
| Applicant/Sponsor Name | Date | |
| Signature | Title | |
| | | |



| B.i.i [Coastal or Waterfront Area] | No |
|---|---|
| B.i.ii [Local Waterfront Revitalization Area] | No |
| C.2.b. [Special Planning District] | Yes - Digital mapping data are not available for all Special Planning Districts. Refer to EAF Workbook. |
| C.2.b. [Special Planning District - Name] | NYS Major Basins:Upper Delaware |
| E.1.h [DEC Spills or Remediation Site - Potential Contamination History] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.i [DEC Spills or Remediation Site - Listed] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.i [DEC Spills or Remediation Site - Environmental Site Remediation Database] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.1.h.iii [Within 2,000' of DEC Remediation Site] | No |
| E.2.g [Unique Geologic Features] | No |
| E.2.h.i [Surface Water Features] | Yes |
| E.2.h.ii [Surface Water Features] | Yes |
| E.2.h.iii [Surface Water Features] | Yes - Digital mapping information on local and federal wetlands and waterbodies is known to be incomplete. Refer to EAF Workbook. |
| E.2.h.iv [Surface Water Features - Stream Name] | 815-208, 815-141, 815-236 |
| E.2.h.iv [Surface Water Features - Stream Classification] | B, B(T) |
| E.2.h.iv [Surface Water Features - Wetlands Name] | Federal Waters |
| E.2.h.v [Impaired Water Bodies] | No |
| E.2.i. [Floodway] | Yes |
| E.2.j. [100 Year Floodplain] | Yes |

| E.2.k. [500 Year Floodplain] | Yes |
|--|--|
| E.2.I. [Aquifers] | Yes |
| E.2.I. [Aquifer Names] | Principal Aquifer |
| E.2.n. [Natural Communities] | No |
| E.2.o. [Endangered or Threatened Species] | Yes |
| E.2.o. [Endangered or Threatened Species - Name] | Bald Eagle |
| E.2.p. [Rare Plants or Animals] | No |
| E.3.a. [Agricultural District] | Yes |
| E.3.a. [Agricultural District] | SULL004 |
| E.3.c. [National Natural Landmark] | No |
| E.3.d [Critical Environmental Area] | No |
| E.3.e. [National or State Register of Historic Places or State Eligible Sites] | Digital mapping data are not available or are incomplete. Refer to EAF Workbook. |
| E.3.f. [Archeological Sites] | Yes |
| E.3.i. [Designated River Corridor] | No |

At a regular meeting of the Town Board of the Town of Thompson held at the Town Hall, 4052 Route 42, Monticello, New York on April 7 2020

RESOLUTION FOR THE TOWN OF THOMPSON'S DECLARATION FOR LEAD AGENCY FOR HARRIS SEWER FORCE MAIN AND PUMP STATION REPLACEMENT PROJECT WITH CWSRF FINANCING

WHEREAS, the Town Board of the Town of Thompson has previously determined that repairs and upgrades are needed for the sewer force main and pump station replacement for the Harris Sewer District and have had engineering plans for such upgrades prepared by the Town Engineers; and

WHEREAS, the Town has received and reviewed a full environmental assessment form for the Harris Sewer Force main and pump station project; and

WHEREAS, this project includes the installation and replacement of approximately 3.5 miles of sewer force main along with the replacement of three pump stations and the istallation of one new pump station and in order to pay for this project the Town is seeking financing from the CWSRF and;

WHEREAS, the Town wishes to be lead agency in connection with the environmental review for these potential revisions.

NOW, THEREFORE, BE IT RESOLVED, that the Town of Thompson will take all steps necessary to become lead agency in connection with the environmental review pursuant to SEQRA and that all proper notices will be sent out to any interested agencies in connection with the further environmental review of the proposed Harris Sewer Force Main and Pump Station Replacement Project with CWSRF financing.

Moved by: Seconded by:

Adopted on Motion: April 7, 2020

The members of the Town Board voted as follows:

Supervisor WILLIAM J. RIEBER, JR Yes [X] No []
Councilman Scott Mace Yes [X] No []
Councilman John Pavese Yes [X] No []
Councilperson Melinda Meddaugh Yes [] No [] Abstain
Councilman Ryan Schock Yes [] No [] 1

STATE OF NEW YORK) COUNTY OF SULLIVAN) SS:

The undersigned, Town Clerk of the Town of Thompson, does hereby certify that the resolution annexed hereto to authorize the Town of Thompson to become lead agency was adopted by said Town Board on August 15, 2006, a majority of all Board members voting in favor thereof, and the same has been compared with the original on file in my office and is a true and correct copy of aid original and is in full force and effect.

| IN WITNESS WHEREOF, I have hereunto set my hand and seal on | |
|---|------------|
| | 2006. |
| | |
| | Town Clerk |

Deputy Clerk (Town of Thompson)

From:

marilee (clerk-town of thompson) <marilee@townofthompson.com>

Sent:

Thursday, April 02, 2020 10:06 AM

To:

Deputy Clerk (Town of Thompson) (Deputy Clerk (Town of Thompson))

Subject:

FW: For Board Meeting

From: Melissa DeMarmels (Comptroller Town of Thompson) [mailto:comptroller@townofthompson.com]

Sent: Tuesday, March 31, 2020 11:28 AM **To:** 'Supervisor Rieber'; Marille Calhoun

Subject: For Board Meeting

Good Morning,

Hope you both are still healthy and well!

We are going to need approval by the board to transfer \$94,500 from Harris Sewer district (SSH) to the capital fund (H) for the preliminary design of the pump station and force main upgrades.

Please include this on the agenda for April 7th's meeting.

Thank you,

Melissa DeMarmels

Comptroller

Town of Thompson

Phone: (845)794-2500 Ext 307

Fax: (845)-794-8600

www.townofthompson.com