

OFFICE OF THE SUPERVISOR

Town of Somers

WESTCHESTER COUNTY, N.Y.

Telephone
(914) 277-3637
Fax
(914) 276-0082

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589

RICK MORRISSEY
SUPERVISOR



**SOMERS TOWN BOARD
WORK SESSION
THURSDAY, MAY 5, 2016 6:00pm**

www.somersny.com

6:00PM – Executive Session

7:00pm Work Session

6:00pm – Executive Session – Personnel

A. **PLEDGE OF ALLEGIANCE:**

7:00pm **WORK SESSION:**

PUBLIC COMMENT

Please limit your comments to no more than 3 minutes.

B. **PARKS & RECREATION:**

1. Authorize the following per April 28, 2016 memo from Steven Ralston, Superintendent of Parks and Recreation:
 - a. Request to allocate \$12,000 from Rec Fees to complete the work for replacement of the basketball court lights in the amount of \$11,620.00 plus \$380.00 contingency.
 - b. Hiring of Tyler Silva as Seasonal Maintenance Worker at an hourly rate of \$12.00.

**SOMERS TOWN BOARD
WORK SESSION
THURSDAY, MAY 5, 2016 6:00pm**

C. TOWN BOARD:

1. Annual MS4 Report by Syrette Dym, Town Planner.
2. Authorize the Supervisor to execute the following:
 - a. Agreement with Westchester County in the amount not to exceed \$325,000 to partially fund the costs for Northern Westchester Regional Stormwater Retrofit Engineering Study.
 - b. Application to NYSDOH for approval of plans for public water supply improvement for the Avalon Somers LLC effective May 3, 2016.
3. Discussion with Robert Russell and Efrem Citarella of the Bureau of Fire Prevention regarding any road surface servicing three or more homes be assigned a road name by the Town for easily identifiable vehicle access.
4. Authorize additional \$3,600.00 escrow for the SEQRA Review of the Somers Crossing Application per April 29, 2016 request from Fred Wells, Tim Miller Associates.
5. Authorize Supervisor to execute Consent Judgment in the matter of Coolidge Somers ag. Town of Somers, per April 25, 2016 memo from Roland Baroni, Town Attorney.

D. FINANCIAL: - No additional business.

E. HIGHWAY: - No additional business.

F. PERSONNEL:

1. Current Vacancies:
 - Somers Energy Environment Committee
 - Affordable Housing Board (3 – unexpired 2 year terms ending 7/11/2015)
 - Parks & Recreation – (1 – 3 year term ending 3/9/2019)
2. Upcoming Vacancies:
3. Acknowledge the resignation of Ms. Lauren McDonald Carway from the Somers Partners in Prevention effective April 11, 2016 (Term ending 12/31/2017)

**SOMERS TOWN BOARD
WORK SESSION
THURSDAY, MAY 5, 2016 6:00pm**

4. Appoint Dr. Jerry Stern to the Somers Energy Environment Committee.
5. Appoint Ms. Michele Werney to the Parks and Recreation Board to fill the unexpired term ending March 9, 2019.

G. PLANNING & ENGINEERING:

1. For review and comment:
The Crossroad at Baldwin Place – site plan

H. POLICE: - No additional business.

I. PROPOSED CONSENSUS AGENDA:

1. Authorize amendment to the Emergency Evacuation Procedures for the Town House by including the Carbon Monoxide Alarm per request from William Premuroso, Fire Inspector.
2. Authorize return of the following bonds:
 - a. \$200.00 Delloruso - Delluorusso/DeVito Stormwater Management and Erosion and Sediment Control Permit – 47.08-1-28.
3. Accept the following bonds:
 - a, \$500.00 Mastrantoni (Gibbons) Stormwater management and Erosion and Sediment Control and Tree Permit.
4. Authorize selling of 2 Town Owned properties to Mr. Douglas Lee – 6 Hemlock Drive 5.15-3-37 and 3 Geranium Drive 5.15-3-40 in the amount of \$4,820.00.
5. Authorize sale of Paper Road known as Bud Court to Rena M. Riccardi in the amount of \$2,500.00.
6. Authorize sale of lot located at 11 Geranium Drive known as 5.15-3-44 in the amount of \$1,500.00 to Mr. Joseph Curry
7. Authorize 30 day Waiver for the issuance of a new liquor license to 202 Steakhouse.

**SOMERS TOWN BOARD
WORK SESSION
THURSDAY, MAY 5, 2016 6:00pm**

8. Authorize additional \$500.00 onetime compensation pay to Patricia Nicolosi for extra work performed between January 15, 2016 to March 11, 2016 due to shortage of staff, per March 25, 2016 memo from Teresa Stegner, Assessor.
9. Declare May as National Trust for National Historic Preservation Month in the Town of Somers.
10. Authorize Supervisor to execute agreement with The Leahy Company for a complete review of the Towns' Experience Ratings for July 2013 – July 2016.

2016 CALENDAR

May 12, 2016	7:00pm	Town Board Regular Meeting
June 2, 2016	7:00pm	Town Board Work Session
June 9, 2016	7:00pm	Town Board Regular Meeting
July 14, 2016	7:00pm	Combined Work Session & Regular Meeting
August 4, 2016	7:00pm	Combined Work Session & Regular Meeting

5/3/2016 3:00 PM

Z:\Supervisor\bsherry\Barbara\My Documents\agenda\2016 Agenda\May 5, 2016 Work Session.docx

Somers Department of Parks & Recreation

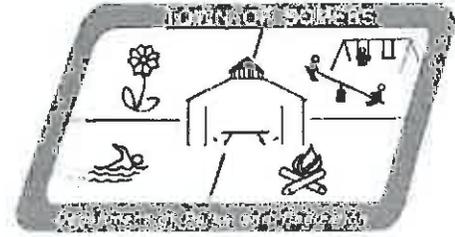
PO Box 46 Somers, New York 10589

OFF: (914)-232-8441

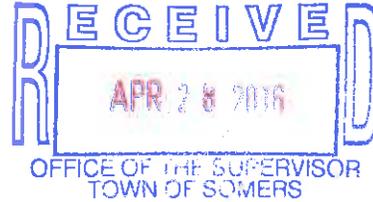
FAX: (914)-232-8548

Steven Ralston
Superintendent

*May Agenda
EC-TBCTA
Fur
4/28/16 BR*



April 28, 2016



To: Town Board

From: Steven Ralston
Superintendent of Parks and Recreation

Re: Request for Approval

Request permission to allocate \$12,000 (including \$380.00 contingency) from Recreation Fee account to complete the work included in the attached A Amp proposal for replacement of the basketball court lights.

This project was reviewed and unanimously approved by the Park Board at their April 27 meeting.

Thank you for your consideration

C: Town Clerk
Director of Finance
Park Board



P.O. Box 386
 Baldwin Place, NY 10505
 914-621-4482

ESTIMATE

Date	Estimate #
4/13/2016	3676

Name/Address
 Somers Parks and Recreation Dept.
 PO Box 46
 Somers, NY 10589

Project	
Description	Qty
<p>WORK AT THE BASKETBALL COURT</p> <p>* SUPPLY AND INSTALL TWO (2) NEW STEEL, 25 FOOT POLES WITH TWO (2) NEW LED STADIUM LIGHT FIXTURES ON EACH POLE.</p> <p>* SUPPLY AND INSTALL CONCRETE BASES AND PROPER BONDING FOR THE TWO POLES.</p> <p>* SUPPLY AND INSTALL IN-GROUND QUAZITE BOX AT POLE CLOSEST TO PANEL FOR UNDERGROUND SPLICING OF THE TWO POLES.</p> <p>* INCLUDES REMOVAL OF EXISTING POLE AND FIXTURE.</p> <p>NOTES: * FIXTURES INCLUDED IN THIS COST ARE ALTERNATIVE TO NORIBACHI SHOEBOX AND WILL BE PROVIDED AT NO ADDITIONAL MARKUP. * THERE WILL BE AN ADDITIONAL CHARGE OF \$1,075.00 TO USE THE NORIBACHI FIXTURES SPECIFIED BY STEVE.</p> <p>Sales Tax</p> <p><i>Include timer</i></p>	
We look forward to working with you !	<p>Total \$11,620.00</p>

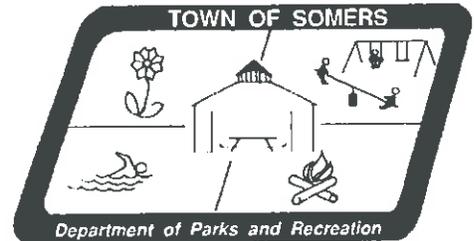
Somers Department of Parks & Recreation

PO Box 46 Somers, New York 10589

OFF: (914)-232-8441

FAX: (914)-232-8548

Steven Ralston
Superintendent



April 28, 2016



To: Town Board

From: Steven Ralston
Superintendent of Parks and Recreation

Re: Request for Approval

Request permission to hire the following, as Seasonal Maintenance Worker at \$12.00 per hour, to begin May 20, 2016.

Tyler Silva
4 Woodcrest Terrace
Amawalk, NY 10501

Following approval, I will forward all necessary paperwork and tax information to the Finance Office.

C: Town Clerk
Park Board
Director of Finance

TOWN BOARD

Town of Somers

WESTCHESTER COUNTY, N.Y.

Supervisor
RICK MORRISSEY

Town Council
ANTHONY J. CIRIECO
RICHARD CLINCHY
WILLIAM FAULKNER
THOMAS A. GARRITY

Town Clerk
PATRICIA KALBA

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589
(914) 277-3637
(914) 277-3323
FAX (914) 276-0082



May 16, 2016

New York State Department of Environmental Conservation- Central Office
Division of Water-4th Floor
625 Broadway
Albany, NY 12233-3505

Dear MS4 Permit Coordinator:

Enclosed you will find the following in relation to the Town of Somers Phase II Stormwater Annual Report covering the MS4 reporting period of March 10, 2015 through March 9, 2016 of the Phase II Stormwater Program:

- Municipal Compliance Certification Form;
- Stormwater Management Program Annual Report (SWMPAR);
- Stormwater Management Program Annual Report Presentation

The Town's annual report and annual report presentation are available for viewing on the Town of Somers website. If you have any questions or concerns, please do not hesitate to contact me at (914)277-5366.

Sincerely,

Rick Morrissey
Town Supervisor

Att.
w/o attachments
ecc: Town Board
Town Clerk

20-
175-TC-TH
4/29/16
DYM

TOWN OF SOMMERS PHASE II ANNUAL STORMWATER REPORT

GP-0-10-002

March 9, 2015-March 10, 2016

RECEIVED
APR 29 2016
K. Dym
OFFICE OF THE SUPERVISOR
TOWN OF SOMMERS

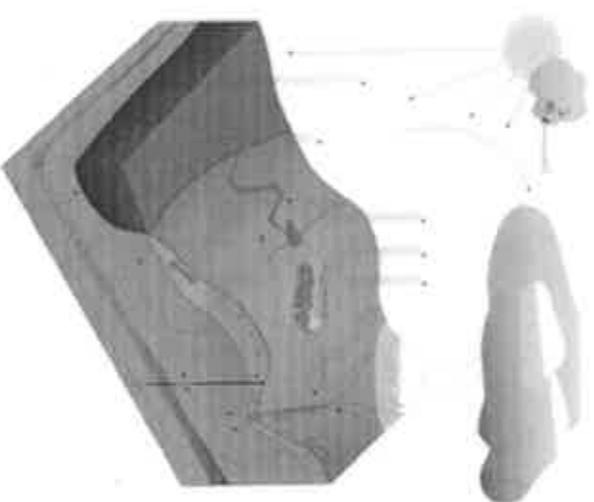


Presented by: Syrette Dym, AICP

May 5, 2016

Somers Hydrology

- Located within 4 watershed basins (NYC Watershed)
 - Amawalk Basin
 - New Croton Basin
 - Croton Falls Basin
 - Muscoot Basin
- 12 Subwatersheds
- 66 Stream Miles
- 3 Planned Lake Communities
 - Lake Lindolndale
 - Lake Purdy's
 - Lake Shenorock





Somers Water Quality

- Different areas of the community have different water quality concerns
 - Lake Shenorock (TSS/Phosphorus/Bacteria)
 - Muscoot River (TSS/Phosphorus/Wetland)
- The 4 watershed basins are phosphorus restricted.
 - Croton Watershed Phosphorus TMDL
- There are waterbodies on the state priority waterbody list due to concern with pathogens, metals, and nutrients.
- Waterbodies are also listed on the NYS DEC 303(d) list of impaired waters.



PHASE II STORMWATER PROGRAM REQUIREMENTS

(Minimum Control Measures)

1. **Public Education and Outreach**
2. **Public Participation/Involvement**
3. **Illicit Discharge, Detection and Elimination (IDDE)**
4. **Construction Site Runoff Control**
5. **Post-Construction Runoff Control**
6. **Pollution Prevention/Good Housekeeping**



Public Education and Outreach

2015/2016

Topics

- Construction Sites
- Illicit Discharge Detection and Elimination
- Green Infrastructure/Better Site Design/Low Impact Development
- Phosphorus, Silt, Sediment

Target Audiences

- Residential
- Contractors
- Developers
- General Public
- Board and Committee Members

Public Education and Outreach

2015/2016

Strategies Implemented

- Training of Construction Site Operators (4 Trained)
- Kiosks and Displays (0 Locations)
- TV Spot/Cable Access (Ongoing)

**Materials Available in Somers Town House, Somers
Library and on the Town Website.**

Public Education and Outreach

2015/2016

Evaluating/Measuring Progress

- Number of Applications now including low impact development/better site design elements is increasing.
- Information pamphlets and brochures are being picked up.

Public Involvement/Participation

2015/2016

Strategies Implemented

- Cleanup Events (1)
- Community Hotline
- Community Meetings (50 attendees)
- Public Hearings
- Annual Report posting on web and viewing via cable access channel.



Public Involvement/Participation

2015/2016

Evaluating/Measuring Progress

- Discussion of stormwater related issues at public meetings and public hearing participation continues.
- Bags of garbage collected during the Spring clean-up event were added to by additional bags collected from citizen initiated Somers Litter Task Force clean-up event.
- Education of Contractors at all construction sites (18) occurred.

Illicit Discharge, Detection, Elimination

2015/2016

Strategies Implemented

- All Outfalls Mapped (564).
- Five outfalls were dry weather screened.
- Building maintenance, parking lots, cross connections, and septic maintenance were targeted for inspection.
- No illicit discharges were found.

Illicit Discharge, Detection, Elimination

2015/2016

Strategies Implemented

- Storm sewershed mapping has been completed.
- Information is available via GIS.
- 50% of staff in relevant positions/departments have received IDDE training.
- Town developed and adopted a septic system notification of maintenance and repair law.
- There were 928 septic systems cleaned and inspected from March through December 2015. Although information is not available at this time for the first quarter of 2016, if it is similar to that of the first quarter of 2015 at 141, it would be a total of 1,069 septic systems cleaned during the reporting period.

Illicit Discharge, Detection, Elimination

2015/2016

Evaluating/Measuring Progress

- Number of illicit discharges detected/eliminated is zero due to staff education, inspection, tracking and reporting.**
- Reporting and record keeping continues to improve.**

Construction / Post-Construction Control

2015/2016

Strategies Implemented

- SWPPP (Stormwater Pollution Prevention Plan) review procedures are in place**
- 13 SWPPP's reviewed during reporting period**
- Procedure to receive public comments (5) is in place**
- Contractors are provided education and training about the local SWPPP process.**

Construction Site Stormwater Runoff Control

2015/2016

Strategies Implemented

- 5 Construction projects authorized for disturbance of one acre or more.**
- 5 Active construction projects disturbing one acre or more in Town.**
- All active construction sites were inspected.**
- All active construction sites were inspected more than once.**
- All inspectors use an approved plan consistent with the NYS Construction Stormwater Inspection Manual.**
- The public has access to SWPPPs.**

Construction Site Stormwater Runoff Control

2015/2016

Evaluating/Measuring Progress

- All construction projects submitted SWPPPs and the reporting forms used by the Engineering Department were revised to be consistent with the State reporting forms.
- Stormwater control and associated BMPs (Best Management Practices) continues to be a focus regarding project approval.

Post-Construction Stormwater Management

2015/2016

Strategies Implemented

- 10 infiltration basins, 50 open channels, and 10 other practices inspected and maintained.
- 266 area Catchbasins inventoried, inspected and maintained.
- Not using GIS to track post-construction BMPs
- Local Law, Comprehensive Planning, Zoning and Planning Board review procedures have been used to implement low impact development/better site design elements.

Post-Construction Stormwater Management

2015/2016

Strategies Implemented (Continued)

- Somers is a member of CKWIC (Croton Kensico Watershed Intermunicipal Coalition) which developed a 5-Year Regional Stormwater Retrofit Program approved by NYSDEC and a member of EOHWC (East of Hudson Watershed Corp.) which is an LDC (Local Development Corporation) formed to implement those projects.

- 114 CKWIC Stormwater Retrofits were implemented.

Evaluating/Measuring Progress

- The new catchbasin reporting procedure that was previously instituted is still being utilized.
- New reporting procedures for other stormwater BMP maintenance should be implemented.



Stormwater Management-Municipal Operations

2015/2016

Operations/Activities/Facilities and Self-Assessment

- Street Maintenance
- Winter Road Maintenance
- Salt Storage
- Municipal Construction and Land Disturbance
- Winter Road Maintenance
- Right of Way Maintenance
- Parks and Open Space
- Municipal Buildings
- Stormwater System Maintenance
- Vehicle and Fleet Maintenance
- Etc.

Stormwater Management-Municipal Operations

2015/2016

Strategies Implemented

- Due to zero use of sand, no parking lots were swept
- Road sweeping yielded 52 cubic yards of material
- Inspected and cleaned 266 catch basins
- Inspected and cleaned post construction control practices
- Spot weed control in beds were the only herbicide applications.
- Last stormwater management trainings held 04/30/2015
- One municipal employees received training
- 50% of municipal employees who need training received it

Stormwater Management-Municipal Operations

2015/2016

Evaluating/Measuring Progress

- Reporting procedures for municipal departments responsible for good housekeeping have been altered to ensure maintenance of Town facilities and maintenance activities are accounted for.
- Highway Department is computerized but would be more efficient if data entry occurred in the field.

Additional Watershed Improvement Strategies

2015/2016

Strategies Implemented

- Education program to address phosphorus is in place
- Deliverables from County Outreach and Education Program
- 100% of the Towns conveyance system has been mapped, additional features have been mapped.
- A stormwater conveyance system inspection and maintenance plan program is in place and will be expanded.
- Program to track on-site wastewater treatment systems that have been inspected and maintained under development.
- Post-construction program is in place
- 5-Year Retrofit program is underway
 - Year 1 - 68 Projects; 64 completed
 - Year 2 - 21 Projects; 19 completed; 2 in construction
 - Year 3 - 46 Projects; 22 completed; 3 in construction
 - Year 4 - 79 Projects; 6 completed; 6 in construction
 - Year 5 - 23 Projects; 3 completed; 3 in construction
 - Year 6 - 9 Projects; 0 completed
- Turf management program policy has been instituted



**For More Information On Somers'
Stormwater Program**

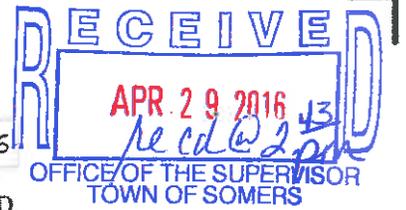
Planning and Engineering Office

(914)277-5366

www.somersny.com

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2016



SPDES ID
N Y R 2 0 A 4 0 5

**This cover page must be completed by the report preparer.
Joint reports require only one cover page.**

Choose one:

This report is being submitted on behalf of an individual MS4.

Fill in SPDES ID in upper right hand corner.

Name of MS4

T o w n o f S o m e r s

OR

This report is being submitted on behalf of a Single Entity

(Per Part II E of GP-0-10-002)

Name of Single Entity

OR

This is a joint report being submitted on behalf of a coalition.

Provide SPDES ID of each permitted MS4 included in this report. Use page 2 if needed.

Name of Coalition

SPDES ID
N Y R 2 0 A

MS4 Annual Report Cover Page

MCC form for period ending March 9, 2 0 1 6

Provide SPDES ID of each permitted MS4 included in this report.

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MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2 0 1 6

Name of MS4 Town of Somers

SPD F S ID

N Y R 2 0 A 4 0 5

Section 2 - Contact Information**Important Instructions - Please Read**Contact information must be provided for each of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duly Authorized Representative (Information for this contact must only be submitted if a Duly Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VIII.A.2.c).
4. The Stormwater Management Program (SWMP) Coordinator (Individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duly Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duly Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name	MI	Last Name
R i c k		M o r r i s s e y
Title		
T o w n S u p e r v i s o r		
Address		
3 3 5 R o u t e 2 0 2		
City	State	Zip
S o m e r s	N Y	1 0 5 8 9 -
eMail		
r m o r r i s s e y @ s o m e r s n y . c o m		
Phone	County	
(9 1 4) 2 7 7 - 3 6 3 7	W e s t c h e s t e r	

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2016

Name of MS4 Town of Somers

SPDES ID									
N	Y	R	2	O	A	4	0	5	

Section 2 - Contact Information

Important Instructions - Please Read

Contact information must be provided for gggh of the following positions as indicated below:

1. Principal Executive Officer, Chief Elected Official or other qualified individual (per GP-0-08-002 Part VI.J).
2. Duty Authorized Representative (Information for this contact must only be submitted if a Duty Authorized Representative is signing this form)
3. The Local Stormwater Public Contact (required per GP-0-08-002 Part VII.A.2.c & Part VII.A.2.e).
4. The Stormwater Management Program (SWMP) Coordinator (individual responsible for coordination/implementation of SWMP).
5. Report Preparer (Consultants may provide company name in the space provided).

A separate sheet must be submitted for each position listed above unless more than one position is filled by the same individual. If one individual fills multiple roles, provide the contact information once and check all positions that apply to that individual.

If a new Duty Authorized Representative is signing this report, their contact information must be provided and a signature authorization form, signed by the Principal Executive Officer or Chief Elected Official must be attached.

For each contact, select all that apply:

- Principal Executive Officer/Chief Elected Official
- Duty Authorized Representative
- Local Stormwater Public Contact
- Stormwater Management Program (SWMP) Coordinator
- Report Preparer

First Name Syrece Mi Last Name Dym

Title Town Director of Planning

Address 335 Route 202

City Somers State NY Zip 10589

eMail sdym@somersny.com

Phone (914) 277-5356 County Westchester

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID
N Y R 2 0 A 4 0 5

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? Yes No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name
C r o t c h K e n s i c o W a t e r s h e d I n t e r -

Partner Coalition Name (cont.)
m u n i c i p a l C o a l i t i o n

SPDES Partner ID - If applicable
N Y R 2 0

Address
3 3 5 R o u t e 2 0 2

City
S o m e r s

State
N Y

Zip
1 0 5 8 9 -

eMail
s d y m @ s o m e r s n y . c o m

Phone
(9 1 4) 2 7 7 - 5 3 6 6

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G.? Yes No

What tasks/responsibilities are shared with this partner (e.g. MM1 School Programs or Multiple Tasks)?

- MM1 M u l t i p l e T a s k s
- MM2 M u l t i p l e T a s k s
- MM3
- MM4
- MM5
- MM6

Additional tasks/responsibilities

- Watershed Improvement Strategy Best Management Practices required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

Pesting of PSA's (phosphorus), Education Website (Phosphorus), pet waste pickup campaign, education flyers re: Salt/water quality magnetic pads etc.

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2016

Name of MS4 Town of Somers

SPDES ID
N Y R 2 0 A 4 0 5

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? Yes No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name
C r o t o n K e n s i c o W a t e r s h e d I n t e r -

Partner/Coalition Name (cont.)
M u n i c i p a l C o a l i t i o n

SPDES Partner ID - If applicable
N Y R 2 0

Address
3 3 5 R o u t e 2 0 2

City
S o m e r s

State Zip
N Y 1 0 5 8 9 -

eMail
s d y m @ s o m e r s n y . c o m

Phone
(9 1 4) 2 7 7 - 3 6 3 7

Legally Binding Agreement in accordance with GP-0-08-002 Part IV.C.2? Yes No

What tasks/responsibilities are shared with this partner (e.g. M1 School Programs or Multiple Tasks)?

- MM1
- MM2
- MM3 O n - S i t e W a s t e w a t e r S y s t e m s
- MM4
- MM5 R e t r o f i t P r o g r a m
- MM6

Additional tasks/responsibilities

- Watershed Improvement Strategy Best Management Practices* required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

Conveyance System Mapping (IX3); Onsite Wastewater inspection and Maintenance Program (IX3b) and Stormwater Retrofit Program (IX5b).

MS4 Municipal Compliance Certification (MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID
N Y R 2 0 A 4 0 5

Section 3 - Partner Information

Did your MS4 work with partners/coalition to complete some or all permit requirements during this reporting period? Yes No

If Yes, complete information below.

Submit a separate sheet for each partner. Information provided in other formats will not be accepted. If your MS4 cooperated with a coalition, submit one sheet with the name of the coalition. It is not necessary to include a separate sheet for each MS4 in the coalition.

If No, proceed to Section 4 - Certification Statement.

Partner/Coalition Name
E a s t o f H u d s o n W a t e r s h e d C o r p .

Partner/Coalition Name (con't.)
SPDES Partner ID - If applicable
N Y R 2 0

Address
P O B o x 1 7 6

City State Zip

eMail
i n f o @ e c h w c . o r g

Phone Legally Binding Agreement in accordance with GP-0-08-002 Part IV.G? Yes No

What tasks/responsibilities are shared with this partner (e.g. MMI School Programs or Multiple Tasks)?

- MM1
- MM2
- MM3
- MM4
- MM5
- MM6

Additional tasks/responsibilities

- Watershed Improvement Strategy Best Management Practices required for MS4s in impaired watersheds included in GP-0-08-002 Part IX.

MS4 Municipal Compliance Certification(MCC) Form

MCC form for period ending March 9, 2016

Name of MS4

SPDES ID
N Y R 2 0 A 4 0 5

Section 4 - Certification Statement

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

This form must be signed by either a principal executive officer or ranking elected official, or duly authorized representative of that person as described in GP-0-08-002 Part VIJ.

First Name MI Last Name

Title (Clearly print title of individual signing report)

Signature

Date

Send completed form and any attachments to the DEC Central Office at:

MS4 Permit Coordinator
Division of Water
4th Floor
625 Broadway
Albany, New York 12233-3505

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4 Coalition

SPDES ID
N Y R 2 0 A 4 0 5

Minimum Control Measure 1. Public Education and Outreach

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. Targeted Public Education and Outreach Best Management Practices

Check all topics that were included in Education and Outreach during this reporting period:

- Construction Sites
- General Stormwater Management Information
- Household Hazardous Waste Disposal
- Illicit Discharge Detection and Elimination
- Infrastructure Maintenance
- Smart Growth
- Storm Drain Marking
- Green Infrastructure/Better Site Design/Low Impact Development
- Other:
- Pesticide and Fertilizer Application
- Pet Waste Management
- Recycling
- Riparian Corridor Protection/Restoration
- Trash Management
- Vehicle Washing
- Water Conservation
- Wetland Protection
- None

other: P h o s p h o r u s , s i l t , s e d i m e n t

2. Specific audiences targeted during this reporting period:

- Public Employees
- Residential
- Businesses
- Restaurants
- Other:
- Contractors
- Developers
- General Public
- Industries
- Agricultural

other: B o a r d a n d C o m m i t t e e M e m b e r s

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4 Coalition Town of Somers

SPDES ID
N Y R 2 0 A 4 0 5

4. Evaluating Progress Toward Measurable Goals MCM 1

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Incorporation of low impact development techniques and best management practices into applications regarding environmental permits, site plans and subdivisions. Education regarding phosphorus impacts to water quality from septic systems and lawn landscaping practices is also included in permit decisions.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Planning and Engineering Department undertakes environmental determinations, and reviews applications for environmental permitting (steep slopes, wetland, stormwater & erosion and sediment control, land disturbance, etc.) and land development (subdivisions and site plans). Since the implementation of the Town's outreach and education program, these submissions include consideration of water quality best management practices and low impact development techniques.

C. How many times was this observation measured or evaluated in this reporting period?

5 0

(ex: samples/participants/events)

D. Has your MS4 made progress toward this Measurable Goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town increasingly uses our website and cable access T.V. channel to get the message out. E-blasts are also utilized. A new schedule of activities is to be produced.

MS4 Annual Report Form

This report is being submitted for the reporting period ending **March 9, 2016**

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

N Y R 2 0 A 4 0 5

Name of MS4 Coalition Town of Soars

Minimum Control Measure 2. Public Involvement/Participation

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. What opportunities were provided for public participation in implementation, development, evaluation and improvement of the Stormwater Management Program (SWMP) Plan during this reporting period? Check all that apply:

<input checked="" type="radio"/> Cleanup Events	# Events	1
<input type="radio"/> Comments on SWMP Received	# Comments	
<input checked="" type="radio"/> Community Hotlines	Phone # (9 1 4) 2 7 7 - 5 3 6 6	
Phone # () -	Phone # () -	
Phone # () -	Phone # () -	
Phone # () -	Phone # () -	
Phone # () -	Phone # () -	
<input checked="" type="radio"/> Community Meetings	# Attendees	5 0
<input type="radio"/> Plantings	Sq. Ft.	
<input type="radio"/> Storm Drain Markings	# Drains	
<input type="radio"/> Stakeholder Meetings	# Attendees	
<input type="radio"/> Volunteer Monitoring	# Events	
<input checked="" type="radio"/> Other: P u b l i c H e a r i n g s		

2. Was public notice of availability of this annual report and Stormwater Management Program (SWMP) Plan provided?

Yes No

<input type="radio"/> List-Serve	# in List	
<input type="radio"/> Newspaper Advertising	# Days Run	
<input checked="" type="radio"/> TV Radio Notices	# Days Run	3 1
<input checked="" type="radio"/> Other: T o w n B o a r d M e e t i n g		

Web Page URL: Enter URL(s) on the following two pages.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

NYR20A405

Name of MS4 Coalition Town of Somers

2. URL(s) con't.:

Please provide specific address(es) where notice(s) can be accessed - not home page.

URI
<http://www.somersny.com/pages/somersny/planning/stormwater>

URI
<http://www.somersny.com/pages/somersmeetingvideos/tmvideos>

URI
<http://www.somersny.com/pages/somersNY/webdocs/minagenda>

URI

URI

URI

URI

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

NYR20A405

Name of MS4 Coalition: Town of Somers

3. Where can the public access copies of this annual report, Stormwater Management Program SWMP) Plan and submit comments on those documents?

Enter address/contact info and select radio button to indicate which document is available and whether comments may be submitted at that location. Submit additional pages as needed.

● MS4 Coalition Office

● Annual Report ● SWMP Plan ● Comments

Department

Planning and Engineering

Address

335 Route 202

City

Somers

NY

Zip

10589 -

Phone

(914) 277-5366

● Library

● Annual Report ● SWMP Plan ○ Comments

Address

80 Primrose Street

City

Somers

NY

Zip

10589 -

Phone

(914) 232-5717

● Other

● Annual Report ● SWMP Plan ● Comments

Address

Town Clerk - 335 Route 202

City

Somers

NY

Zip

10589 -

Phone

(914) 277-3323

● Web Page URI:

○ Annual Report ○ SWMP Plan ○ Comments

http://www.somersny.com/pages/somersny/planning/stormwater

Please provide specific address of page where report can be accessed - not home page.

● eMail

● Comments

sdymsomersny.com

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4 Coalition

Town of Seneca

SPDES ID

NYR20A405

4.a. If this report was made available on the internet, what date was it posted?

Leave blank if this report was not posted on the internet.

04 / 29 / 2016

4.b. For how many days was/will this report be posted?

365

If submitting a report for single MS4, answer 5.a.. If submitting a joint report, answer 5.b..

5.a. Was an Annual Report public meeting held in this reporting period?

Yes No

If Yes, what was the date of the meeting?

05 / 05 / 016

If No, is one planned?

Yes No

5.b. Was an Annual Report public meeting held for all MS4s contributing to this report during this reporting period?

Yes No

If No, is one planned for each?

Yes No

6. Were comments received during this reporting period?

If Yes, attach comments, responses and changes made to SWMP in response to comments to this report.

Yes No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4 Coalition

Town of Somers

SPDES ID

N Y R 2 0 A 4 0 5

7. Evaluating Progress Toward Measurable Goals MCM 2

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Involvement in public hearing, submission of comments regarding development applications, participation in Town-Wide Clean-up, education of contractors at construction sites and education of applicants through environmental determination process and permitting process.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Twelve public hearings were held during the reporting period. Comments related to stormwater quality were made at each of them. The public hearings are related to site plan and preliminary and final subdivision approval, wetland permits and DEIS and FEIS approvals. There was no Earth Day celebration, but a townwide roadside cleanup was held from April 12-26, 2015, coinciding with the citizen initiated Somers Litter Task Force over a ten day period. A total of 351 bags of garbage

C. How many times was this observation measured or evaluated in this reporting period?

1 7 5

D. Has your MS4 made progress toward this measurable goal during this reporting period? Yes No**E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?** Yes No**F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).**

Continue to disseminate information, conduct town-wide clean-up, continue contractor education on site and provide education to applicants for environmental permits.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

NYR20A405

Name of MS4 Coalition: Town of Somers

Minimum Control Measure 3. Illicit Discharge Detection and Elimination

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report? [][]

1. Enter the number and approx. percent of outfalls mapped: [][] 564 # [][] 100 %

2. How many of these outfalls have been screened for dry weather discharges during this reporting period (outfall reconnaissance inventory)? [][] 20

3.a. What types of generating sites/sewersheds were targeted for inspection during this reporting period?

- Auto Recyclers
- Building Maintenance
- Churches
- Commercial Carwashes
- Commercial Laundry Dry Cleaners
- Construction Vehicle Washouts
- Cross-Connections
- Distribution Centers
- Food Processing Facilities
- Garbage Truck Washouts
- Hospitals
- Improper RV Waste Disposal
- Industrial Process Water
- Other:
- Landscaping (Irrigation)
- Marinas
- Metal Plating Operations
- Outdoor Fluid Storage
- Parking Lot Maintenance
- Printing
- Residential Carwashing
- Restaurants
- Schools and Universities
- Septic Maintenance
- Swimming Pools
- Vehicle Fueling
- Vehicle Maint./Repair Shops
- None

Roadways

Sewersheds:

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016
If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

SPDES ID

N Y R 2 0 A 4 0 5

Name of MS4/Coalition Town of Somers

3.b. What types of illicit discharges have been found during this reporting period?

- Broken Lines From Sanitary Sewer
- Cross Connections
- Failing Septic Systems
- Floor Drains Connected To Storm Sewers
- Illegal Dumping
- Other:
- Industrial Connections
- Inflow/Infiltration
- Pump Station Failure
- Sanitary Sewer Overflows
- Straight Pipe Sewer Discharges
- None

4. How many illicit discharges/potential illegal connections have been detected during this reporting period? 0

5. How many illicit discharges have been confirmed during this reporting period? 0

6. How many illicit discharges/illegal connections have been eliminated during this reporting period? 0

7. Has the storm sewershed mapping been completed in this reporting period? Yes No
If No, approximately what percent was completed in this reporting period? 0 %

8. Is the above information available in GIS? Yes No
Is this information available on the web? Yes No

If Yes, provide URI(s):
Please provide specific address of page where map(s) can be accessed - not home page.

URI

URI

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Town of Somers

SPDES ID
N Y R 2 0 A 4 0 5

12. Evaluating Progress Toward Measurable Goals MCM 3

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

Continue implementation of illicit discharge ordinance and form septic system maintenance law. Maintain hotline to receive reports related to illicit discharges.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

The Town had no illicit discharges during the reporting period. There were no calls to the hotline. The Town does have a septic system maintenance law, consistent with what was approved by DEC. There were 928 septic systems cleaned and inspected from March through December 2015. Although information is not available at this time for the first quarter of 2016, if it is similar to that of the first quarter of 2015 at 141, it would be a total of 1,069 septic systems cleaned during the reporting period.

C. How many times was this observation measured or evaluated in this reporting period?

3 6 5

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

The Town will continue to use the hotline and field inspections to detect illicit discharges. When such discharges are found, they will continue to be reported and filed with the County Health Department. During the 2016-2017 reporting period, the Town will continue to obtain septic system monitoring data.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition

SPDES ID
N Y R 2 0 A 4 0 5

Minimum Control Measures 4 and 5.
Construction Site and Post-Construction Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1a. Has each MS4 contributing to this report adopted a law, ordinance or other regulatory mechanism that provides equivalent protection to the NYS SPDES General Permit for Stormwater Discharges from Construction Activities? Yes No

1b. Has each Town, City and/or Village contributing to this report documented that the law is equivalent to a NYSDEC Sample Local Law for Stormwater Management and Erosion and Sediment Control through either an attorney certification or using the NYSDEC Gap Analysis Workbook? Yes No NT

If Yes, Towns, Cities and Villages provide date of equivalent NYS Sample Local Law.
 09/2004 03/2006 NT

2. Does your MS4/Coalition have a SWPPP review procedure in place? Yes No

3. How many Construction Stormwater Pollution Prevention Plans (SWPPPs) have been reviewed in this reporting period?

4. Does your MS4/Coalition have a mechanism for receipt and consideration of public comments related to construction SWPPPs? Yes No NT

If Yes, how many public comments were received during this reporting period?

5. Does your MS4/Coalition provide education and training for contractors about the local SWPPP process? Yes No

6. Identify which of the following types of enforcement actions you used during the reporting period for construction activities, indicate the number of actions, or note those for which you do not have authority:

- | | | | | | | | | |
|--|---|---|--|---|--|--|---|---|
| <input checked="" type="radio"/> Notices of Violation | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td>1</td></tr></table> | | | | | 1 | <input type="radio"/> No Authority |
| | | | | 1 | | | | |
| <input type="radio"/> Stop Work Orders | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Criminal Actions | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Termination of Contracts | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |
| <input checked="" type="radio"/> Administrative Fines | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input checked="" type="radio"/> Civil Penalties | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input checked="" type="radio"/> Administrative Orders | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input checked="" type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Enforcement Actions or Sanctions | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |
| <input type="radio"/> Other | # | <table border="1"><tr><td></td><td></td><td></td><td></td><td></td></tr></table> | | | | | | <input type="radio"/> No Authority |
| | | | | | | | | |

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition:

SPDES ID
N Y R 2 0 A 4 0 5

Minimum Control Measure 4. Construction Site Stormwater Runoff Control

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. How many construction projects have been authorized for disturbances of one acre or more during this reporting period?

2. How many construction projects disturbing at least one acre were active in your jurisdiction during this reporting period?

3. What percent of active construction sites were inspected during this reporting period? NT
 %

4. What percent of active construction sites were inspected more than once? NT
 %

5. Do all inspectors working on behalf of the MS4s contributing to this report use the NYS Construction Stormwater Inspection Manual? Yes No NT

6. Does your MS4/Coalition provide public access to Stormwater Pollution Prevention Plans (SWPPPs) of construction projects that are subject to MS4 review and approval? Yes No NT

If your MS4 is Non-Traditional, are SWPPPs of construction projects made available for public review? Yes No

If Yes, use the following page to identify location(s) where SWPPPs can be accessed.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4 Coalition

SPDES ID

N Y R 2 0 A 4 0 5

7. Evaluating Progress Toward Measurable Goals MCM 4

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The measurable goal was to require each development project to submit an approvable stormwater pollution prevention plan. Twelve construction projects were reviewed and seven projects were approved before the Planning Board. Each of these projects plus an additional one required the submission of a SWMPP. In addition, the reporting forms used by the engineering technician are those that were revised to be consistent with the state reporting forms.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

All application submissions included a SWMPP as required in accordance with the Somers Town Code. SWMPP's for projects currently under construction are used to monitor construction.

C. How many times was this observation measured or evaluated in this reporting period?

(ex. 1 samples/participants/events)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to require submission of SWMPPs and use them to monitor construction. (ongoing)

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4 Coalition

Town of Somers

SPDES ID

N Y R 2 0 A 4 0 5

- 4a. Are the MS4s contributing to this report involved in a regional/watershed wide planning effort? Yes No
- 4b. Does the MS4 have a banking and credit system for stormwater management practices? Yes No
- 4c. Do the SWMP Plans for each MS4 contributing to this report include a protocol for evaluation and approval of banking and credit of alternative siting of a stormwater management practice? Yes No
- 4d. How many stormwater management practices have been implemented as part of this system in this reporting period?

		1
--	--	---
- 5. What percent of municipal officials/MS4 staff responsible for program implementation attended training on Low Impace Development (LID), Better Site Design (BSD) and other Green Infrastructure principles in this reporting period?

	1	0
--	---	---

 %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPODES ID blank.

Name of MS4 Coalition:

SPODES ID:
N Y R 2 0 A 4 0 5

6. Evaluating Progress Toward Measurable Goals MCM 5

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

The Town is improving its GIS capabilities and will be in a position to update mapping on an ongoing basis.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Hand held devices were not used, however the paper forms were utilized and some computer logging of information occurred. Two hundred sixty-six (266) catch basins were inspected and maintained by inside vacuum truck during the MS4 reporting period with a total of 79 cubic yards of material removed. Areas outside surrounding the catch basin and gutters were cleaned and yielded 85 cubic yards of material. Roads were swept in southwest Somers and the Twin Knolls area and 52 cubic

C. How many times was this observation measured or evaluated in this reporting period?

100.1 sample/participants/evals

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to inspect and maintain stormwater infrastructure throughout the town, focusing on priority watershed areas. Establish a computer tracking system for inspection and maintenance of BMPs (other than catch basins) for the Highway Department.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4 Coalition

SPDES ID
N Y R 2 0 A 4 0 5

Minimum Control Measure 6. Stormwater Management for Municipal Operations

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

1. Choose/list each municipal operation/facility that contributes or may potentially contribute Pollutants of Concern to the MS4 system. For each operation/facility indicate whether the operation/facility has been addressed in the MS4's/Coalition's Stormwater Management Program(SWMP) Plan and whether a self-assessment has been performed during the reporting period. A self-assessment is performed to: 1) determine the sources of pollutants potentially generated by the permittee's operations and facilities; 2) evaluate the effectiveness of existing programs and 3) identify the municipal operations and facilities that will be addressed by the pollution prevention and good housekeeping program, if it's not done already.

<u>Operation/Activity/Facility</u>	<u>Addressed in SWMP?</u>		<u>Self-Assessment</u> <u>Operation/Activity/Facility</u> <u>performed within the past 3</u> <u>years?</u>	
	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Street Maintenance.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Bridge Maintenance.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Winter Road Maintenance.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Salt Storage.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Solid Waste Management.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
New Municipal Construction and Land Disturbance..	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Right of Way Maintenance.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Marine Operations.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Hydrologic Habitat Modification.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Parks and Open Space.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Municipal Building.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Stormwater System Maintenance.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Vehicle and Fleet Maintenance.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No
Other.....	<input type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Yes	<input type="radio"/> No

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4 Coalition

SPDES ID

2. Provide the following information about municipal operations good housekeeping programs:

- Parking Lots Swept (Number of acres X Number of times swept) # Acres
- Streets Swept (Number of miles X Number of times swept) # Miles
- Catch Basins Inspected and Cleaned Where Necessary #
- Post Construction Control Stormwater Management Practices Inspected and Cleaned Where Necessary #
- Phosphorus Applied In Chemical Fertilizer # Lbs.
- Nitrogen Applied In Chemical Fertilizer # Lbs.
- Pesticide/Herbicide Applied (Number of acres to which pesticide/herbicide was applied X Number of times applied to the nearest tenth.) # Acres

3. How many stormwater management trainings have been provided to municipal employees during this reporting period?

4. What was the date of the last training? / /

5. How many municipal employees have been trained in this reporting period?

6. What percent of municipal employees in relevant positions and departments receive stormwater management training? %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4 Coalition

SPDES ID
N Y R 2 0 A 4 0 5

7. Evaluating Progress Toward Measurable Goals MCM 6

Use this page to report on your progress and project plans toward achieving measurable goals identified in your Stormwater Management Program Plan (SWMPP), including requirements in Part III.C.1. Submit additional pages as needed.

A. Briefly summarize the Measurable Goal identified in the SWMPP in this reporting period.

To institute better reporting in the form of inspections and maintenance work by the Somers Highway Department, its contractors and the Somers Parks and Recreation Department.

B. Briefly summarize the observations that indicated the overall effectiveness of this Measurable Goal.

Both Departments maintained appropriate records. The Highway Department information is computerized, however it would be more efficient to have the computerization take place in the field rather than through data entry in the office via "work tickets". All pertinent information is available for each stormwater activity that is undertaken.

C. How many times was this observation measured or evaluated in this reporting period?

(ex.: samples/participants/overalls)

D. Has your MS4 made progress toward this measurable goal during this reporting period?

Yes No

E. Is your MS4 on schedule to meet the deadline set forth in the SWMPP?

Yes No

F. Briefly summarize the stormwater activities planned to meet the goals of this MCM during the next reporting cycle (including an implementation schedule).

Continue to work towards electronic conveyance of pollution prevention activities.

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6
 If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition Town of Somers

SPDES ID
N Y R 2 0 A 4 0 5

Additional Watershed Improvement Strategy Best Management Practices

The information in this section is being reported (check one):

- On behalf of an individual MS4
- On behalf of a coalition

How many MS4s contributed to this report?

MS4s must answer the questions or check NA as indicated in the table below.

MS4 Description	Answer	Check NA	(FOC)
NYC EOH Watershed			
Traditional Land Use	1,2,3,4,5,6,7a-d,8a,8b,9	10,11,12	Phosphorus
Traditional Non-Land Use	1,2,3,4,7a-d,8a,8b,9	5,10,11,12	Phosphorus
Non-Traditional	1,2,77a-d,8a,8b,9	3,4,5,10,11,12	Phosphorus
Onondaga Lake Watershed			
Traditional Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Non-Traditional	1,6,7a-d,8a,9	2,3,4,5,8b,10,11,12	Phosphorus
Greenwood Lake Watershed			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Oyster Bay			
Traditional Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,4,7a-d,9,10,11,12	2,3,5,6,8a,8b	Pathogens
Non-Traditional	1,4,7a-d,9	2,3,4,5,8a,8b,10,11,12	Pathogens
Peconic Estuary			
Traditional Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Traditional Non-Land Use	1,4,7a-d,8a,9,10,11,12	2,3,5,6,8b	Pathogens and Nitrogen
Non-Traditional	1,4,7a-d,8a,9	2,3,4,5,8b,10,11,12	Pathogens and Nitrogen
Oscawana Lake Watershed			
Traditional Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Traditional Non-Land Use	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
Non-Traditional	1,4,6,7a-d,8a,9	2,3,5,8b,10,11,12	Phosphorus
IJ 27 Embayments			
Traditional Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Traditional Non-Land Use	1,2,3,4,7a-d,9,10,11,12	5,6,8a,8b	Pathogens
Non-Traditional	1,2,3,4,7a-d,9	5,6,8a,8b,10,11,12	Pathogens

1. Does your MS4/Coalition have an education program addressing impacts of phosphorus/nitrogen/pathogens on waterbodies? Yes No N/A

2. Has 100% of the MS4/Coalition conveyance system been mapped in GIS? Yes No N/A

If N/A, go to question 3.

If No, estimate what percentage of the conveyance system has been mapped so far. %

Estimate what percentage was mapped in this reporting period. %

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2016

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4/Coalition:

SPDES ID
N Y R 2 0 A 4 0 5

3. Does your MS4/Coalition have a Stormwater Conveyance System (infrastructure) Inspection and Maintenance Plan Program? Yes No N/A

4. Estimate the percentage of on-site wastewater treatment systems that have been inspected and maintained or rehabilitated as necessary in this reporting period? %

5. Has your MS4/Coalition developed a program that provides protection equivalent to the NYSDEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001) to reduce pollutants in stormwater runoff from construction activities that disturb five thousand square feet or more? Yes No N/A

6. Has your MS4/Coalition developed a program to address post-construction stormwater runoff from new development and redevelopment projects that disturb greater than or equal to one acre that provides equivalent protection to the NYS DEC SPDES General Permit for Stormwater Discharges from Construction Activities (GP-0-08-001), including the New York State Stormwater Design Manual Enhanced Phosphorus Removal Standards? Yes No N/A

7a. Does your MS4/Coalition have a retrofitting program to reduce erosion or phosphorus/nitrogen/pathogen loading? Yes No N/A

7b. How many projects have been sited in this reporting period?

7c. What percent of the projects included in 7b have been completed in this reporting period? %

7d. What percent of projects planned in previous years have been completed? %

No Projects Planned

8a. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper fertilizer application on municipally owned lands? Yes No N/A

8b. Has your MS4/Coalition developed and implemented a turf management practices and procedures policy that addresses proper disposal of grass clippings and leaves from municipally owned lands? Yes No N/A

MS4 Annual Report Form

This report is being submitted for the reporting period ending March 9, 2 0 1 6

If submitting this form as part of a joint report on behalf of a coalition leave SPDES ID blank.

Name of MS4 Coalition

SPDES ID

N	Y	R	2	0	A	4	0	5
---	---	---	---	---	---	---	---	---

- 9. Has your MS4/Coalition developed and implemented a program of native planting?
 Yes No N/A

- 10. Has your MS4/Coalition enacted a local law prohibiting pet waste on municipal properties and prohibiting goose feeding?
 Yes No N/A

- 11. Does your MS4/Coalition have a pet waste bag program?
 Yes No N/A

- 12. Does your MS4/Coalition have a program to manage goose populations?
 Yes No N/A

Town of Somers MS4 Report 2015-2016.

Full Narrative of Questions with Answers Partly Hidden in Hard Copy

MCM 1 Page 4 of 4 – Question 4.B.

The Planning and Engineering Department undertakes environmental determinations, and reviews applications for environmental permitting (steep slopes, wetland, stormwater & erosion and sediment control, land disturbance, etc.) and land development (subdivisions and site plans). Since the implementation of the Town's outreach and education program, these submissions include consideration of water quality best management practices and low impact development techniques. These techniques do not arise through the planning process, but rather from the onset of an application. Educational materials were disseminated.

MCM 2 Page 6 of 6 - Question 7. E.

Twelve public hearings were held during the reporting period. Comments related to stormwater quality were made at each of them. The public hearings are related to site plan and preliminary and final subdivision approval, wetland permits and DEIS and FEIS approvals. There was no Earth Day celebration, but a townwide roadside cleanup was held from April 12-26, 2015 coinciding with the citizen initiated Somers Litter Task Force clean up period. A total of 351 bags of garbage were collected from April, 2015 through November, 2015. Education of construction site operators occurred at all 14 active construction sites and there were over 175 inspections of these construction sites during the reporting period.

MCM 3 Page 4 of 4 – Question 12.B.

The Town had no illicit discharges during the reporting period. There were no calls to the hotline. The Town does have a septic system maintenance law, consistent with what was approved by DEC. There were 928 septic systems cleaned and inspected from March through December 2015. Although information is not available at this time for the first quarter of 2016, if it is similar to that of the first quarter of 2015 at 141, it would be a total of 1069 septic systems cleaned during the reporting period. Although information is not available at this time for the number of septic systems cleaned and inspected from March 2015 through the first quarter of 2016, if it is similar to that of the period from March 2014 to March 2015, it would be a total of 1,407 septic systems cleaned during the reporting period. These observations were monitored every day. The Town previously worked with DEC to secure a contract, hired a consultant and completed its own conveyance mapping and facilitated the initiation or completion of this process for CKWIC member communities during the prior reporting period.

MCM 5 Page 3 of 3 – Question 6.F.

Hand held devices were not used, however the paper forms were utilized and some computer logging of information occurred. Two hundred sixty-six (266) catch basins were inspected and maintained by inside vacuum truck during the MS4 reporting period with a total of 79 cubic yards of material removed. Areas outside surrounding the catch basins and gutters were cleaned and yielded 85 cubic yards of material. Roads were swept in southwest Somers and the Twin Knolls area and 52 cubic yards of material was collected.

COUNTY OF WESTCHESTER IMPORTANT INSURANCE REQUIREMENTS

Contracts returned to the Department of Planning must be held until the correct insurance is submitted. The most common reason a contract is delayed is because of incomplete insurance attached to the contract. Please check these items:

- General Liability - minimum of \$1 million

**NOTE: WESTCHESTER COUNTY MUST BE NAMED
ADDITIONAL INSURED.**

- Automotive Liability - Minimum of \$1 million
- Workers Compensation/Employers Liability * - Minimum of \$100,000.00
Must be on Form C 105.2
- For Consultants Only – Must Provide Consultant Professional Liability
\$1 million

**FOR FURTHER INFORMATION CALL
CARLA PRIOLEAU
995-2406**

- * Where an applicant claims to not be required to carry either a Workers' Compensation Policy or Disability Benefits Policy, or both, the employer must complete NYS form CE-200, available to download at: www.web.state.ny.us (click on Employers/Businesses, then Business Permits/Licenses/Contracts to see instruction manual).

If the employer is self-insured for Worker's Compensation, he/she should present a certificate from the New York State Worker's Compensation Board evidencing that fact (Either SI-12, Certificate of Workers' Compensation Self-Insurance, or GSI-105.2, Certificate of Participation in Workers' Compensation Group Self-Insurance).



Robert P. Astorino
County Executive

Department of Planning
Edward Burroughs, AICP
Commissioner

April 28, 2016

Hon. Rick Morrissey, Supervisor
Town of Somers
335 Route 202
Somers, NY 10589

CONTRACT NUMBER: C-PL-16-420
CONTRACT TITLE: Fund a Portion of the Eligible Cost Associated with the East of Hudson Coalition's Stormwater Retrofit Engineering Study
AMOUNT: \$325,000.00
TERM: Upon Execution – Five Years From Execution

Dear Supervisor Morrissey:

Attached to this e-mail, please find a copy of the contract for your Westchester County Department of Planning project. In order to execute this agreement, please follow these steps:

1. Print out the agreement;
2. Please date Page 1 with the date the contract is signed.
3. Please sign your name and type the title on the line below the signature on page 13;
4. The Acknowledgment must be signed and notarized;
5. The Certificate of Authority must be completed and signed by someone other than the person signing the contract, and notarized;

432 Michaelian Office Building
148 Martine Avenue
White Plains, New York 10601

Telephone: (914) 995-4400

Fax: (914) 995-9093

Website: westchestergov.com



Hon. Rick Morrissey, Supervisor
April 28, 2016
Page 2

6. **A Certificate of Insurance, as per Schedule C, indicating the amounts of insurance coverage should be sent;**
7. Return the signed contract to me.
8. **Please provide an e-mail address in order to send an executed copy of your contract once the contract has been signed by the Commissioner of Planning and the Law Department, an electronic copy will be returned to the designated e-mail address.**

Thank you for your cooperation. Please call me if you have any questions. My number is 995-2406.



Carla Prioleau
Contracts Manager

CP/
Enclosures

THIS INTERMUNICIPAL AGREEMENT, dated _____, 201_
by and between,

THE COUNTY OF WESTCHESTER, a municipal corporation of the State of New York, having an office and place of business in the Michaelian Office Building, 148 Martine Avenue, White Plains, New York 10601 (“Westchester” and/or the “County”); and

THE TOWN OF SOMERS, a municipal corporation of the State of New York, having an office and place of business at 335 Route 202, Somers, New York 10589 (the “Municipality”), on behalf of the **EAST OF HUDSON WATERSHED COALITION** (the “Coalition”).

W I T N E S S E T H:

WHEREAS, Westchester and the Municipality are parties to the 1997 Watershed Memorandum of Agreement, including as an attachment thereto the East of Hudson (“EOH”) Water Quality Investment Program Contract (the “Program Contract”) by and between the New York City Department of Environmental Protection (“NYCDEP”) and the County, (together the “MOA”), along with the City of New York (the “City”), the State of New York (the “State”), the United States Environmental Protection Agency (the “USEPA”), the Catskill Watershed Corporation, the Coalition of Watershed Towns, and certain other municipal and environmental parties; and

WHEREAS, pursuant to the MOA, the City paid Westchester THIRTY-EIGHT MILLION (\$38,000,000) DOLLARS to create a fund, known as the East of Hudson Water Quality Investment Program Fund, which now includes earnings thereon (the “EOH WQIP Fund”), to support a program of water quality investments east of the Hudson River in order to protect New York City’s drinking water supply; and

WHEREAS, pursuant to the MOA, including without limitation the surviving clauses of the Program Contract, the EOH WQIP Fund monies may be distributed by the County for specified water quality improvement projects as enumerated therein and/or as NYCDEP may authorize (each an “Eligible Project”); and

WHEREAS, the Municipality, on behalf of the Coalition, has requested that the County release up to THREE HUNDRED TWENTY FIVE THOUSAND (\$325,000) DOLLARS from the EOH WQIP Fund to partially fund the Coalition’s costs for a Stormwater Retrofit Engineering Study which will include the development of a five-year regional retrofit plan for “Years 6-10” of the Coalition’s Stormwater Retrofit Program as required by New York State Department of Environmental Conservation SPDES Permit GP-0-15-003 for the Croton watershed located within the New York City Drinking water supply system (the “Study”) more fully described in Schedule “A” attached hereto and made a part hereof; and

WHEREAS, the Northern Westchester Watershed Committee (“NWWC”), supports the expenditure of THREE HUNDRED TWENTY FIVE THOUSAND (\$325,000) DOLLARS in EOH Funds for the Project, and on July 21, 2015 adopted a resolution formalizing that support; and

WHEREAS, on September 22, 2015, the NYCDEP issued a letter to the County granting its approval of the use of EOH WQIP Funds in an amount not to exceed \$325,000 to fund a portion of the cost of the Study; and

WHEREAS, in order to properly spend monies from the EOH WQIP Fund, Westchester and the Municipality must comply with the procedures as set forth in the MOA and all federal, state and local laws, rules and regulations, including the Laws of Westchester County. This includes, among other things, compliance with the right of objection procedures specified in paragraph 107(c) of the MOA, which require that Westchester notify a designated group, consisting of EOH parties to the MOA, State agencies, and environmental organizations, of its intention to use a portion of the EOH WQIP Fund, and requires that Westchester consider any comments or objections raised by those parties before it proceeds to spend the EOH WQIP Fund monies; and

WHEREAS, the Westchester County Department of Planning, which acts as the Administrator of the EOH WQIP Funds, issued the right of objection letter to the requisite parties on October 5, 2015 stating Westchester's intent to access and distribute the EOH WQIP Funds to the Municipality, on behalf of the Coalition, for the purpose of partially funding the Study, and no objections were received during the objection period as defined in paragraph 107(f) of the MOA. Therefore, Westchester has complied fully with this procedure as required by the MOA; and

WHEREAS, the Westchester County Board of Legislators (the "Board"), on the 8th day of February, 2016 by Act No. 2-2016 authorized the transfer of the EOH WQIP Funds, into a County Trust Account in order to finance a portion of the cost of the Study; and

WHEREAS, the Board, on the 8th day of February, 2016 by Act No. 3-2016 and pursuant to Section 119-o of the General Municipal Law, authorized the County to enter into this intermunicipal agreement (the "IMA"), with the Municipality, on behalf of the Coalition, for the purpose of using the EOH WQIP Funds to finance a portion of the cost of the Study; and

WHEREAS, on April 28, 2016, the Westchester County Board of Acquisition & Contract ("BAC") authorized the County to enter into this IMA, for the purpose of using the EOH WQIP Funds to finance a portion of the cost of the Study; and

WHEREAS, the Municipality, on behalf of the Coalition, represents that it has received all necessary approvals from its governing body; and

WHEREAS, having received all necessary approvals from their respective governing bodies, the County and the Municipality, on behalf of the Coalition, desire to set forth the procedures and their respective rights and responsibilities relative to the distribution of the EOH WQIP Funds for purpose of financing a portion of the cost of the Study, as described herein.

NOW, THEREFORE, in consideration of the promises and the mutual obligations of the parties hereto, the parties agree as follows:

I. RIGHTS AND RESPONSIBILITIES OF WESTCHESTER:

A. The County, acting by and through its Department of Planning (“Planning”) will disburse from the EOH WQIP Fund an amount not to exceed THREE HUNDRED TWENTY FIVE THOUSAND (\$325,000) DOLLARS (the “EOH Funds”) for the purpose of the Study.

The EOH Funds will be disbursed in order to fund a portion of the eligible costs incurred by or on behalf of the Municipality and Coalition for the Study as more fully set forth in Schedule “A” which is attached hereto and forms a part hereof.

B. It is expressly acknowledged and agreed that Westchester shall have no further responsibility for the funding, approval, implementation or completion of the Study, it being further acknowledged and agreed that Westchester’s sole obligation pursuant to the MOA, and this IMA, other than the administrative obligations described below, shall be the distribution of the EOH Funds. The County does not provide or extend any warranty of fitness or workmanship for any work undertaken in connection with, or paid under, this IMA.

In no event is the County obligated to extend any funds beyond those included in the EOH Funds. Payment hereunder by the County shall operate as a release to the County from any and all obligations or liabilities in connection herewith to the Municipality, the Coalition, or any property owner(s), contractor(s) or subcontractor(s) hereunder.

II. REPRESENTATIONS, WARRANTIES AND GUARANTEES OF THE MUNICIPALITY:

The Municipality expressly represents warrants and guarantees that:

(a) it is a municipal corporation duly organized, validly existing under the laws of the State of New York; the execution and performance of this IMA by the Municipality has been duly authorized by its governing body; this IMA, and any other documents required to be delivered by the Municipality when so delivered, will constitute, the legal, valid and binding obligations of the Municipality enforceable against the Municipality in accordance with their respective terms; and the Municipality's governing body has adopted a resolution authorizing execution of this IMA, and any other documents required to be delivered by the Municipality;

(b) the person signing this IMA on behalf of the Municipality has full authority to bind the Municipality to all of the terms and conditions of this IMA pursuant to the authority granted by the Municipality's governing body, as noted above.

(c) it is familiar and will comply with the MOA, as well as, all general and special Federal, State, municipal and local laws, ordinances and regulations, if any, that may in any way affect the performance of this IMA, including without limitation, General Municipal Law Section 103;

(d) the Municipality is fully able to comply with its obligations hereunder, including without limitation, the obligation to provide defense and indemnity to the County and the consummation of the transactions contemplated by this IMA and the performance of the Municipality's obligations hereunder will not result in any breach of or constitute a default under other instruments or documents to which the Municipality is a party or by which it may be bound or affected.

The Municipality acknowledges the County is acting in reliance on the above statements.

III. RIGHTS AND RESPONSIBILITIES OF THE MUNICIPALITY:

A. In connection with implementation of the Study, the Municipality hereby acknowledges and agrees that:

(a) it shall expend the EOH Funds allocated to it pursuant to this IMA solely for the purposes of funding eligible costs for the Study and that it shall further comply with all terms of this IMA and the MOA and its supplemental agreements in connection with the expenditure of monies from the EOH Funds; and

(b) with respect to the Study, the Municipality shall be responsible for compliance with all applicable requirements of the MOA, and the Municipality agrees to participate and comply with the VENDEX approval process as defined in the MOA and Program Contract, Section 18 Entitled "Vendex"; and

(c) it shall be responsible for the implementation and completion of the Study, including the obtaining of all necessary approvals, including without limitation compliance with the State Environmental Quality Review Act ; and

B. The Municipality hereby acknowledges and agrees that, in the event it is unable to expend all of the monies distributed hereunder by the termination hereof, all such unexpended monies, included interest earned thereon, shall be remitted to the County, within thirty (30) days of receipt of a written request from the County, to be returned to the EOH WQIP Fund or the County Trust Account established by Act Nos. 145-1996 and 165-1996, as appropriate.

C. The Municipality hereby acknowledges and agrees that, should the County make a determination that EOH Funds were expended by the Municipality in an improper manner of for purposes other than as set forth herein, the Municipality shall repay to the County the total amount of such improperly expended funds within thirty (30) days of receipt of the written request of the County. Notwithstanding the foregoing, it is expressly acknowledged and agreed that the County is neither obligated to seek such repayment, nor is required to institute collection proceedings against the Municipality. It is expressly agreed

and acknowledged that the County may, in its sole discretion, assign the foregoing rights to the NYCDEP.

D. The Municipality shall maintain copies of all invoices and other such information which details the services performed and expenditures made for a period of 7 years after the program has ended.

E. The Municipality hereby acknowledges and agrees that for purposes of compliance with this IMA, the Supervisor of the Municipality or his/her duly authorized designee shall serve as liaison to Westchester and shall be available to provide status information on the Study.

F. The Municipality shall be solely responsible for its compliance with the requirements of the MOA, all applicable Federal, State and local laws, regulations and ordinances applicable to the Municipality, its officials, officers, and employees, and with respect to the performance of this IMA, including without limitation, the Study, and shall procure and maintain, in full force and effect for the term of this IMA, all applicable permits, licenses and approvals from all governmental authorities having jurisdiction required for the lawful performance of its obligations hereunder.

G. In addition to, and not in limitation of the insurance requirements contained in Schedule "B" entitled "Standard Insurance Provisions", attached hereto and made a part hereof, the Municipality hereby acknowledges and agrees:

(a) that it shall indemnify and hold harmless the County, its elected officials, officers, employees and agents from and against any and all liability, damage, claims, actions, demands, costs, judgments, fees, attorneys' fees or loss arising directly or indirectly out of this IMA, including without limitation, the acts or omissions hereunder by the Municipality or third parties under the direction or control of the Municipality; and

(b) to provide defense for and defend, at its sole expense, any and all claims, demands or causes of action directly or indirectly arising out of this IMA and to bear all other costs and expenses related thereto.

H. The Municipality hereby acknowledges and agrees that it shall defend and indemnify the County for any environmental damages arising out of or in any way connected with this IMA, including without limitation, construction of the Study, which environmental damages shall include, without limitation, all claims, damages, losses, penalties, fines, liabilities (including strict liability), encumbrances, liens, costs and expenses of investigation and defense if any, whether or not such claim is ultimately defeated, and of any good faith settlement or judgment, of whatever kind or nature, contingent or otherwise, matured or unmatured, foreseeable or unforeseeable, including without limitation reasonable attorney's fees and disbursements and consultants' fees, any of which are incurred as the result of the existence of Hazardous Waste, as that term is defined in 6 NYCRR Part 371, upon, beneath, or about the site of the Study(s) or migrating or threatening to migrate to or from the site of the Study(s), or any violation of applicable present and future statutes, regulations, rules, ordinances, codes, licenses, permits, orders, approvals, plans, authorizations, concessions, franchises, and similar items, of all government agencies, departments, commissions, boards, bureaus, or instrumentalities of the United States, the State of New York and the political subdivisions thereof; and all applicable judicial, administrative, and regulatory decrees, judgments, and orders relating to the protection of human health or the environment, regardless of when any such environmental damages arose.

I. In full compliance with Section 107(e) of the MOA, the Municipality hereby acknowledges and agrees that it shall keep, maintain, and preserve at its principal office throughout the term of this IMA, full and detailed books, accounts, and records pertaining to the performance of this IMA including, without limitation, all bills, invoices, payrolls and other data evidencing and create and maintain at its principal office throughout the term of this IMA a

repository of information regarding the Study, as may be necessary for a fair public assessment of the Study. The Municipality shall ensure that the County or its designee shall have the right to inspect and audit said repository.

All of the provisions of this Section **III** shall survive the expiration or other termination of this IMA.

IV. TERM:

This IMA shall commence upon execution (the "Commencement Date") and terminate five (5) years after the Commencement Date, unless terminated sooner in accordance with the provisions hereof.

V. MISCELLANEOUS:

A. This IMA, including all attachments hereto, contains the entire agreement between the parties with respect to the subject matter hereof and supersedes all prior understandings, if any, with respect thereto. This IMA may not be modified, changed or supplemented except by written instrument signed by the parties hereto, subject to receipt of all necessary legal approvals. This IMA shall apply to and bind any successor(s) in interest of the respective parties.

B. If any term or provision of this IMA is held by a court of competent jurisdiction to be invalid or void or unenforceable, the remainder of the terms and provisions of this IMA will in no way be affected, impaired, or invalidated, and to the extent permitted by applicable law, any such term, or provision will be restricted in applicability or reformed to the minimum extent required for such to be enforceable. This provision will be interpreted and enforced to give effect to the original written intent of the parties prior to determination of such invalidity or unenforceability.

C. It is acknowledged and agreed that any defined terms contained in the initial "Whereas Clauses" are incorporated by reference into the body of this IMA.

D. No party hereto shall make any assignment of their respective rights and responsibilities hereunder, without the prior written consent of all other parties hereto. Any assignment or attempt to assign, without the prior written consent of the parties hereto shall be void.

E. This IMA shall be construed and enforced in accordance with the laws of the State of New York. In addition, the parties hereby agree that for any cause of action arising out of this IMA shall be brought in the County of Westchester.

F. Pursuant to Section 308.01 of the Laws of Westchester County, it is the goal of the County to use its best efforts to encourage, promote and increase the participation of business enterprises owned and controlled by persons of color or women in contracts and projects funded by all departments of the County. Under this IMA it is recognized and understood that the County encourages the Municipality to act similarly.

The Municipality acknowledges and agrees that Westchester maintains a zero tolerance policy prohibiting all forms of harassment or discrimination against its employees by co-workers, supervisors, vendors, Contractor(s) or others.

G. This IMA shall not be enforceable until executed by all of the parties and approved by the Office of the Westchester County Attorney.

H. In the event of any material noncompliance with the terms hereof, including without limitation, use of the funds disbursed hereunder for ineligible costs, or failure to submit required reports, which remains uncured for thirty (30) days after service on the Municipality of written notice thereof (the "Cure Period"), the County, at its option, may seek any and all appropriate legal and/or equitable remedies, including, but not limited to, damages, reasonable attorney's fees, disbursements and court costs in such amounts as shall be allowed by the court.

The Commissioner of Planning, in his sole discretion, may agree to stay any such enforcement beyond Cure Period, provided however that the County determines that the Municipality is diligently and continuously acting to cure said noncompliance. Without limiting the foregoing, upon written notice to the Municipality, repeated non-compliance by the Municipality of any particular duty or obligation under this Agreement will be deemed a material breach of this Agreement justifying termination for cause hereunder without requirement for further opportunity to cure. Notice will be effective as set forth herein.

I. It is recognized and understood that the Municipality is not an agent of the County and in accordance with such status, the Municipality, any contractor(s), and all of their respective officers, agents, employees, representatives and servants shall at all times during the term of this IMA neither hold themselves out as, nor claim to be acting in the capacity of officers, employees, agents, representatives or servants of the County, nor make any claim, demand or application for any right or privilege applicable to the County, including without limitation, rights or privileges derived from workers compensation coverage, unemployment insurance benefits, social security coverage and retirement membership or credit.

J. The Municipality hereby acknowledges that any provision of this IMA which requires consent of the County shall be subject to receipt by the County of any and all necessary legal approvals.

K. Failure of the County to insist, in any one or more instances, upon strict performance of any term or condition herein contained shall not be deemed a waiver or relinquishment for the future of such term or condition, but the same shall remain in full force and effect.

L. This IMA may be executed simultaneously in several identical copies, each of which shall be an original and all of which shall constitute but one and the same agreement.

M. Except as may be expressly set forth herein, nothing herein is intended or shall be construed to confer upon or give any third party or its successors and assigns any rights, remedies or basis for reliance upon, under or by reason of this IMA. Notwithstanding the foregoing, it is expressly acknowledged and agreed that the NYCDEP is an express third party beneficiary hereunder.

N. The parties each agrees to execute and deliver such further instruments and to seek such additional authority as may be required to carry out the intent and purpose of this IMA.

O. The captions are inserted only as a matter of convenience and for reference and in no way define, limit or describe the scope of this IMA nor the intent of any provision thereof.

VI. NOTICES:

All notices of any nature referred to in this IMA shall be in writing and either sent by registered or certified mail postage pre-paid, or delivered by hand or overnight courier, or sent by facsimile (with acknowledgment received and a copy of the notice sent by registered or certified mail, postage pre-paid), as set forth below or to such other addresses as the respective parties hereto may designate in writing. Notice shall be effective on the date of receipt. Notices shall be sent to all of the following:

To the County:

Commissioner
Department of Planning
Michaelian Office Building
148 Martine Avenue
White Plains, New York 10601

with a copy to:

County Attorney
Michaelian Office Building
148 Martine Avenue
White Plains, New York 10601

To the Municipality:

Supervisor
Town of Somers
335 Route 202
Somers, New York 10589

Any changes or additions to the designations made in this Section VI. shall be made in writing and delivered to the other parties in accordance herewith.

IN WITNESS WHEREOF, the parties have executed this IMA as of the day and year first above written.

COUNTY OF WESTCHESTER

By: _____
Name: Edward Borough
Title: Commissioner of Planning

TOWN OF SOMERS

By: _____
Name: Rick Morrissey
Title: Town Supervisor

AGREED TO AND APPROVED BY:

EAST OF HUDSON WATERSHED COALITION

By: _____
Name: _____
Title: _____

Approved as to form and
manner of execution:

County Attorney
The County of Westchester
K:\ac:EOH/Somers/EOHCoalitionStormwaterRetrofitEngineeringStudy

MUNICIPALITY'S ACKNOWLEDGEMENT

STATE OF NEW YORK)

ss.:

COUNTY OF WESTCHESTER)

On the ____ day of _____, 201 before me, the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument, and acknowledged to me that he executed the same in his capacity, and that by his signature on the instrument, the individual or the person upon behalf of which the individual acted, executed the instrument.

Notary Public, Westchester County

SCHEDULE "A"

STUDY DESCRIPTION

This study will include the development of a five-year regional retrofit plan for Years 6-10 of the Coalition's Stormwater Retrofit Program as required by NYSDEC SPDES Permit GP-0-15-003 for the Croton watershed located within the New York City drinking water supply system. The plan will:

- Analyze lessons learned from years 1-5 of the Stormwater Retrofit Program
- Identify the best locations for cost effective stormwater retrofit practices
- Recommend requirements for siting retrofits
- Evaluate "Green Infrastructure" techniques

The total project cost is \$620,000 of which up to \$325,000 will be funded through the EOH Funds and the balance through funds provided by EOH Coalition member Towns in Putnam and Dutchess Counties.

SCHEDULE "B"

STANDARD INSURANCE PROVISIONS (MUNICIPALITY)

1. Prior to commencing work, the Municipality shall obtain at its own cost and expense the required insurance from insurance companies licensed in the State of New York, carrying a Best's financial rating of A or better, and shall provide evidence of such insurance to the County of Westchester, as may be required and approved by the Director of Risk Management of the County. The policies or certificates thereof shall provide that thirty days prior to cancellation or material change in the policy, notices of same shall be given to the Director of Risk Management of the County of Westchester by registered mail, return receipt requested, for all of the following stated insurance policies. All notices shall name the Municipality and identify the agreement.

If at any time any of the policies required herein shall be or become unsatisfactory to the County, as to form or substance, or if a company issuing any such policy shall be or become unsatisfactory to the County, the Municipality shall upon notice to that effect from the County, promptly obtain a new policy, submit the same to the Department of Risk Management of the County of Westchester for approval and submit a certificate thereof. Upon failure of the Municipality to furnish, deliver and maintain such insurance, the agreement, at the election of the County, may be declared suspended, discontinued or terminated. Failure of the Municipality to take out, maintain, or the taking out or maintenance of any required insurance, shall not relieve the Municipality from any liability under the agreement, nor shall the insurance requirements be construed to conflict with or otherwise limit the contractual obligations of the Municipality concerning indemnification. All property losses shall be made payable to and adjusted with the County.

In the event that claims, for which the County may be liable, in excess of the insured amounts provided herein are filed by reason of any operations under the agreement, the amount of excess of such claims or any portion thereof, may be withheld from payment due or to become due the Municipality until such time as the Municipality shall furnish such additional security covering such claims in form satisfactory to the County of Westchester.

2. The Municipality shall provide proof of the following coverage (if additional coverage is required for a specific agreement, those requirements will be described in the "Special Conditions" of the contract specifications):

(a) Workers' Compensation. Certificate form C-105.2 (9/07) or State Fund Insurance Company form U-26.3 is required for proof of compliance with the New York State Workers' Compensation Law. State Workers' Compensation Board form DB-120.1 is required for proof of compliance with the New York State Disability Benefits Law. Location of operation shall be "All locations in Westchester County, New York."

Where an applicant claims to not be required to carry either a Workers' Compensation Policy or Disability Benefits' Policy, or both, the employer must complete affidavit form WC/DB-100 (revised 9/07), sign and notarize the form, and send to the NYS

Workers' Compensation Board for (stamped) approval. The stamped approval (valid for 1 year) should then be provided to the County of Westchester with all other insurance documentation.

If the employer is self-insured for Worker's Compensation, he/she should present a certificate from the New York State Worker's Compensation Board evidencing that fact (Either SI-12, Certificate of Workers' Compensation Self-Insurance, or GSI-105.2, Certificate of Participation in Workers' Compensation Group Self-Insurance).

(b) Employer's Liability with minimum limit of \$100,000.00.

(c) Commercial General Liability Insurance with a minimum limit of liability per occurrence of \$1,000,000.00 for bodily injury and \$100,000.00 for property damage or a combined single limit of \$1,000,000.00 (c.s.l.), naming the County of Westchester as an additional insured. This insurance shall indicate the following coverages:

- (i) Premises - Operations.
- (ii) Broad Form Contractual.

(d) Automobile Liability Insurance with a minimum limit of liability per occurrence of \$1,000,000.00 per occurrence for bodily injury and a minimum limit of \$100,000.00 per occurrence for property damage or a combined single limit of \$1,000,000.00 unless otherwise indicated in the contract specifications. This insurance shall include for bodily injury and property damage the following coverages:

- (i) Owned automobiles.
- (ii) Hired automobiles.
- (iii) Non-owned automobiles.

3. All policies of the Municipality shall be endorsed to contain the following clauses:

(a) Insurers shall have no right to recovery or subrogation against the County of Westchester (including its employees and other agents and agencies), it being the intention of the parties that the insurance policies so effected shall protect both parties and be primary coverage for any and all losses covered by the above-described insurance.

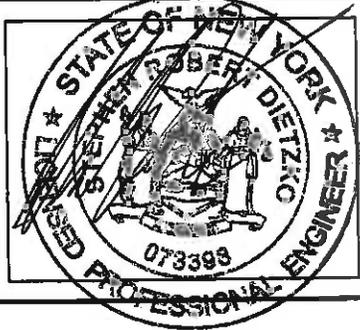
(b) The clause "other insurance provisions" in a policy in which the County of Westchester is named as an insured, shall not apply to the County of Westchester.

(c) The insurance companies issuing the policy or policies shall have no recourse against the County of Westchester (including its agents and agencies as aforesaid) for payment of any premiums or for assessments under any form of policy.

(d) Any and all deductibles in the above described insurance policies shall be assumed by and be for the account of, and at the sole risk of, the Municipality.

NEW YORK STATE DEPARTMENT OF HEALTH
Bureau of Water Supply Protection

**Application for Approval of Plans for
Public Water Supply Improvement**

Applicant Town of Somers Avalon Somers, LLC	Location of works (C,V,T) Town of Somers	County Westchester	Water District (specific area served) Town of Somers (Amawalk-Shenorock)
Type of ownership <input checked="" type="checkbox"/> Municipal <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Private - Other <input type="checkbox"/> Authority <input type="checkbox"/> Interstate <input type="checkbox"/> Industrial <input type="checkbox"/> Water Works Corp. <input type="checkbox"/> Private - Institutional <input type="checkbox"/> Federal <input type="checkbox"/> International <input type="checkbox"/> Board of Education <input type="checkbox"/> State <input type="checkbox"/> Native American Reservation			
<input type="checkbox"/> Modifications to existing system. If checked, provide PWS ID # <u>NY</u>			
New System. If checked, provide capacity development (viability) analysis*			
If this project involves a new system, new water district, or a district extension provide boundary description location details in digital format on CD or Floppy Disk. If digital boundary location details are not available provide a text description. <input type="checkbox"/> Digital GIS Data Provided <input type="checkbox"/> Digital CAD Data Provided <input type="checkbox"/> Other Digital Data Provided <input type="checkbox"/> Text Description Provided <input checked="" type="checkbox"/> N/A			
Funding Source <input checked="" type="checkbox"/> Private <input type="checkbox"/> DWSRF** <input type="checkbox"/> Federal <input type="checkbox"/> Other _____			
If DWSRF is checked, provide DWSRF # _____			
Estimated Project Cost Source \$ _____ Treatment \$ _____ Storage \$ _____ Distribution \$ <u>200,000</u> Pumping \$ _____ Engineering \$ <u>20,000</u> Legal/Permitting \$ <u>10,000</u> Total \$ <u>230,000</u>			
Type of Project <input type="checkbox"/> Source <input type="checkbox"/> Corrosion Control <input type="checkbox"/> U.V. Light Disinfection <input checked="" type="checkbox"/> Distribution <input type="checkbox"/> Transmission <input type="checkbox"/> Pumping Unit <input type="checkbox"/> Fluoridation <input type="checkbox"/> Storage <input type="checkbox"/> Chlorination <input type="checkbox"/> Other Treatment <input type="checkbox"/> Other			
Project Description: <u>Proposed construction of 2104 LF of 8-inch dia. DIP water pipe, hydrants, and fittings.</u>			
Population Total population of Service area <u>4,466</u> % population actually served <u>100%</u> % population served affected by project <u>6.0%</u>			
Latest total consumption data (in MGD) Avg. day <u>0.17</u> Year <u>2015</u> Max. day <u>0.367</u> Year <u>2015</u> Peak hr. <u>0.516</u> Year <u>2015</u>		14. NYS Professional Licensed Engineer Stamp & Signature *** 	
Name of design engineer <u>Stephen Dietzko, P.E., Milone & MacBroom, Inc.</u>			
Address <u>99 Realty Drive, Cheshire, CT, 06410</u>		Telephone No. <u>203-271-1773</u>	
E-Mail <u>steved@miloneandmacbroom.com</u>		Fax No. <u>203-272-9733</u>	
Name and title of applicant or designated representative <u>Rick Morrissey, Supervisor</u> <u>Matthew B. Whalen, Senior Vice President</u> <u>Town of Somers</u> <u>Avalon Somers, LLC</u>			
Address <u>305 Route 202, Somers, NY 10589</u>		<u>1499 Post Road, 2nd Floor, Fairfield, CT 06824</u>	
Signature of applicant <u>Rick Morrissey</u> Date <u>5/3/16</u>		Signature of applicant <u>Matthew B. Whalen</u> Date _____	
NOTE: All applications must be accompanied by 3 sets of plans, 3 sets of specifications and an engineer's report describing the project in detail. The project must first be discussed with the appropriate city, county, district or regional public health engineer. Signature by a designated representative <i>must</i> be accompanied by a letter of authorization. * Additional information regarding capacity development may be found at: http://www.health.state.ny.us/nysdoh/water/main.htm **Current DWSRF project listings may be found at: http://www.health.state.ny.us/nysdoh/water/main.htm ***By affixing the stamp and signature the Design Engineer agrees that the plans and specifications have been prepared in accordance with the most recent version of the recommended standards for water works and in accordance with the NYS Sanitary Code.			

*April Agenda
EC-TBTE TH
4/4/16 bjo*

Telephone
(914) 277-8228
Fax
(914) 277-3790

BUREAU OF FIRE PREVENTION

Town of Somers

WESTCHESTER COUNTY, N.Y.

SOMERS TOWN HOUSE
ANNEX
337 ROUTE 202
SOMERS, NY 10589

EFREM CITARELLA
CHIEF



MEMO TO: Town Board

FROM: Bureau of Fire Prevention

RE: Private Roads – Revised

DATE: April 4, 2016

In the past, the Somers Volunteer Fire Department has responded to calls for both fire and medical on private roads and in more instances than not, it was an extremely difficult task to locate the exact dwelling where the emergency was. At our Bureau meeting on March 9, we discussed this issue and the Bureau of Fire Prevention proposes that moving forward any private road servicing three or more houses be assigned a road name by the Town for easily identifiable emergency vehicle access.

**TIM
MILLER
ASSOCIATES, INC.**

10 North Street, Cold Spring, NY 10516

(845) 265-4400

May Agenda ec - all 4/29/16



April 29, 2016

Ms. Syrette Dym, Town Planner
Somers Town Hall
335 Route 202
Somers, NY 10589

RE: SEQRA Review Services: Boniello Land and Realty, LTD - Somers Crossing Application

Dear Ms. Dym:

The latest and unforeseen agency responses to the EIS review for Somers Crossing indicate that added effort will be necessary to complete the SEQR process. We anticipate additional work on the draft findings to address the latest revisions of the team relative to stormwater issues and to finalize the findings and draft a resolution for the Town Board's consideration. We will continue to coordinate this work with the Town, Town's consultants and the applicant's team.

We respectfully request that additional escrow be obtained in the amount of \$3600.00 from the applicant for us to properly complete the scope of work assigned to us.

Authorization below will serve as acceptance of this request.

We are grateful to be asked to provide professional services to the Town of Somers in the review of this project.

Sincerely yours,

Frederick Wells
Senior Vice President
TIM MILLER ASSOCIATES, INC.

Accepted

Date

May Agenda
EC-TC-TR
FLA 4/22/16
DJP

STEPHENS, BARONI, REILLY & LEWIS, LLP

ATTORNEYS AND COUNSELORS AT LAW

ROLAND A. BARONI, JR.
STEPHEN E. LEWIS

NORTHCOURT BUILDING
175 MAIN STREET

WHITE PLAINS, NY 10601

(914) 761-0300

(914) 683-5185

NORTHERN WESTCHESTER OFFICE
OLD POST ROAD PROFESSIONAL BUILDING
CROSS RIVER, NEW YORK 10518

SERVICE NOT ACCEPTED
BY FAX OR E-MAIL

COUNSEL
GERALD D. REILLY
JOSEPH P. ERIOLE

FAX (914) 761-0983

FAX (914) 683-1323

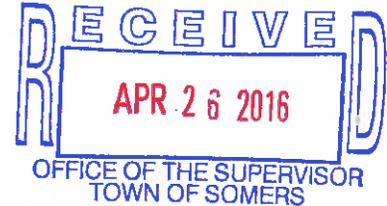
E-MAIL: sbrl@sbrllaw.com April 25, 2016

CONFIDENTIAL

To: Supervisor Rick Morrissey & Town Board

From: Roland A. Baroni, Jr.

Re: Tax Certiorari Settlement



Subject to your authorization, Teresa Stegner and I have concluded settlement of the subject case on the basis as outlined:

I. Coolidge Somers (157-163 Route 202)

Section 16.13, Block 1, Lot 7

Assessment Year	Assessed Valuation Reduced From	Assessed Valuation Reduced To	Amount of Reduction
2009	\$193,700.	\$157,100.	\$36,600.
2010	\$193,700.	\$154,500.	\$39,200.

Please consider authorization as follows:

“Authorize the Town’s Attorneys to execute a Consent Judgment in the following matter: Coolidge Somers ag. Town of Somers - Index No. 22032/09 et al.”

Roland A. Baroni, Jr.

RABjr/wf

cc: Patricia Kalba, Town Clerk
Teresa Stegner, Assessor

Barbara Sherry

TE 12/31/17

May Denise
From: Denise Schirmer
Sent: Monday, April 11, 2016 4:07 PM
To: Barbara Sherry
Subject: Somers Partners in Prevention Resignation

Hi Barbara,

For you.

We do have a resident that has been attending our meetings on a regular basis. If she is interested in taking this position I will let you know so arrangements can be made to have her interviewed by the Town Board.

Thank you.

Denise

From: McDonald, Lauren
Sent: Monday, April 11, 2016 3:56 PM
To: Denise Schirmer; 'jkcucch@aol.com'
Subject:

Hi Kathy and Denise,

I am writing because I need to step down from my position as board member. I am finding it impossible to attend meetings or to participate much at all. My uncle has stabilized but remains very ill. In addition to coordinating his care he has an apartment building that he owns and I have needed to take on the management of it and the tenants. I don't know how long I will be in this situation, but for now I have to focus on him. I would continue to help Denise with emails and calls regarding the website or local people needing treatment advise if you were interested in my maintaining that role. I would also review the power point for the presentation if you are still interested Kathy.

I have really enjoyed my time as a part of this group and have met many people who are working hard to improve our community and the lives of the people in it. I am very glad to have met both of you and hope to be able to work with you both again in the future.

Best regards,
Lauren

Lauren McDonald Carway, ---

May Agenda
EC-TB TETA
4/29/16 BJO

RECEIVED
APR 29 2016
OFFICE OF THE SUPERVISOR
TOWN OF SOMERS
SOMERS TOWN HOUSE
885 ROUTE 902
SOMERS, NY 10589
www.somersny.com

PLANNING AND ENGINEERING DEPARTMENTS

Town of Somers
WESTCHESTER COUNTY, N.Y.

Telephone
(914) 277-5366
Fax
(914) 277-4093

Steven Woelfle
Principal Engineering Technician
swoelfle@somersny.com



Syrette Dym, AICP
Town Planner
sdym@somersny.com

Plans on file in the Supervisor's office

Date: April 28, 2016
To: Town Board
ARB
Fire Prevention Bureau
Highway
From: Planning Department
Re: The following is submitted for your review and comment.

File
Director of Planning
Consultant Town Engineer
Consultant Town Planner

Project Name: The Crossroads at Baldwin Place
Plan: See Cover Letter
Dated: April 27, 2016
Prepared by: Insite Engineering

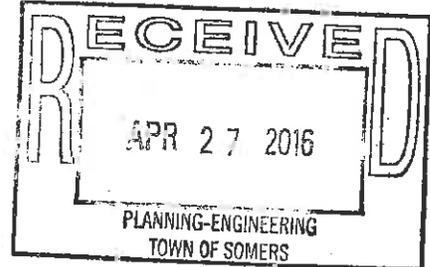
Referral is made under the provisions of the following regulations:

- 1. Informal Discussion: _____
- 2. Final Subdivision Approval: _____
- 3. Preliminary Subdivision: _____
- 4. Site Plan: _____ X _____
- 5. Wetland Activity Permit:
Administrative _____
Planning Board _____
- 6. Steep Slope Permit:
Administrative _____
Planning Board _____



April 27, 2016

Town of Somers Planning Board
335 Route 202
Somers, New York 10589



RE: The Crossroads at Baldwin Place
57 U.S. Route 6
Tax Map # 4.20-1-3.1

Dear Chairman Currie and Members of the Board:

Enclosed please find fourteen (14) copies of the following in support of the site plan application and associated permits for the above referenced project:

- Site Plan Drawing Set, 10 sheets, last revised April 27, 2016.

Since appearing before the Board on April 13th our office has updated the enclosed drawing set to illustrate the schematic layout of the proposed sidewalk and sewer improvements along US Route 6. In addition, the applicant has again contacted the Watershed Inspector General's office regarding the application.

We look forward to discussing the application at the May 11th Planning Board meeting. Based on the information provided to the Town, we believe the Town is in a position to re-adopt the previous Negative Declaration, and send a positive referral to the Town Board with respect to the Zoning Text Amendment.

If you have any questions or comments regarding this information, please do not hesitate to contact our office.

Very truly yours,

INSITE ENGINEERING, SURVEYING & LANDSCAPE ARCHITECTURE, P.C.

By: 
Richard D. Williams, Jr., PE
Senior Project Engineer

RDW/amh

cc: K. Kearney, The Kearney Realty and Development Group, Inc., w/enclosures
R. Noonan, Housing Action Council, Inc., w/enclosures

Insite File No. 15335.100

3 Garrett Place, Carmel, New York 10512 (845) 225-9680 Fax (845) 225-9717
www.insite-eng.com

Z:\E\15335100\Correspondence\Admin\2016\042716PB.doc

Barbara Sherry

From: Denise Schirmer
Sent: Friday, April 22, 2016 10:08 AM
To: Barbara Sherry
Cc: William Premuroso
Subject: Addition to the Emergency Evacuation Procedures for the Town House
Attachments: BFP - CO Alarms.docx

Hi Barbara,

At the request of Bill Premuroso, the attached has to be added to the Emergency Evacuation Procedures for the Town House after the Fire Alarm System section and before the Fire Extinguishers section.

Thanks.

Denise

May Agenda
ec-~~13~~ TC TA 4/28/16 bjp

CARBON MONOXIDE ALARM

The Town House is protected on all levels with Carbon Monoxide (CO) Alarms. These devices are not connected to the fire alarm system. When a Carbon Monoxide Alarm sounds with red lights flashing, 911 is to be called and the building evacuated by activating the fire alarm system by pulling a manual fire alarm box next to the exits. Upon evacuation, the fire wardens should check and see if any employees are experiencing any symptoms of CO poisoning (headache, nausea, vomiting, disorientation, etc.).

OFFICE OF THE SUPERVISOR

Telephone
(914) 277-3637
Fax
(914) 276-0082

Feb 11, 2016 Agenda
EC - TBTC TA
2/5/16 RJ
Town of Somers

WESTCHESTER COUNTY, N.Y.

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589

RICK MORRISSEY
SUPERVISOR



February 2, 2016

MEMO

TO: All Town House and Annex Employees
FROM: Barbara J. Sherry
Secretary to the Supervisor
RE: Emergency Evacuation Procedures

Attached is the revised *Emergency Evacuation Procedures* for the Town House. In addition I have also attached a page of instruction in the event of a bomb threat phone call. Please review these documents thoroughly for your safety as well as everyone else in our building.

If you have any questions, please contact me at your convenience.

C: Town Board, Town Clerk, Town Attorney,
Historical Society, Police Chief Driscoll,
NYS Police, Somers Fire Dept. & Somers Library
R. Spadaccia, USI Northeast
PERMA

RM/bjs

Z:\Supervisor\bsherry\Barbara\My Documents\Evacuation Plan Town 2.11.2016.docx

**TOWN OF SOMERS
EMERGENCY EVACUATION PLAN**

FOR THE

**TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589**

PURPOSE

To comply with the New York State Fire Code, this plan will establish a method of systematic, safe and orderly evacuation of the building by its occupants in case of fire or other emergency, in the least possible time, by the nearest safe means of egress; also to establish the use of available fire appliances (including the sounding of alarms) as have been provided to control or extinguish a fire and to safeguard life.

OBJECTIVE

To provide proper education through a written program for all occupants, to assure the prompt reporting of a fire, the proper response to fire alarms, and the immediate initiation of fire safety procedures to safeguard life and contain fire until the arrival of the Fire Department.

FIRE WARDEN'S and DEPUTY FIRE WARDEN'S DUTIES

- 1) The fire warden and deputy fire warden shall be familiar with the fire safety plan, the location of exits, and the location and operation of the fire alarm system.
- 2) In the event of fire or fire alarm, the fire warden shall ascertain the location of the fire and direct the evacuation of the floor in accordance with the following guidelines:
 - a) Fire wardens and their deputies shall see that all occupants are notified of the fire and that they immediately execute the fire safety plan.
 - b) Evacuation from the second and third floors shall be via the stairs leading to the main door, or the side exit door past the employee's lounge
 - c) Should the stairs be contaminated by fire or smoke, the emergency fire exit shall be used. The second floor emergency fire exit is through the window leading to the fire escape from the Planning/Engineering

department. The third floor emergency exit is through the window leading to the fire escape in the Historical Society President's office.

- d) To operate the fire escape ladder, lift off hook and lower the ladder to the ground making sure your feet are clear of the ladder to prevent injury.
 - e) The fire warden shall determine that an alarm has been transmitted. This is done by activating the fire alarm system pull station, dialing 911 from any telephone including the pay phone, or calling the Fire Department directly at 248-5555.
- 3) Fire wardens are responsible for seeing that all persons on the floor are notified of a fire and are evacuated. A search must be conducted in the lavatories to ensure there are no occupants there.
 - 4) After evacuation, fire wardens shall perform a headcount to ensure that all regular occupants known to have occupied the floor have been evacuated. All occupants shall report to the assembly point located in front of the building. If the weather is inclement, the assembly point will be the entrance lobby of the Annex building.
 - 5) After evacuation of the floor, attempt to control the spread of fire by closing doors
 - 6) Attempt to control the fire until the arrival of the fire department **providing the fire is small and conditions do not pose a personal hazard. (See fire extinguisher guide, appended)**

EMPLOYEE/OCCUPANTS INSTRUCTION

- 1) All employees and members of the Historical Society shall participate and cooperate in carrying out provisions of the fire safety plan.
- 2) In the event of fire or fire alarm, you are directed to immediately evacuate the building via the nearest fire exit on the first floor. Occupants on the second and third floors shall use the stairs leading to the main floor, or the emergency fire exits.
- 3) The emergency exit on the second floor is the window leading to the fire escape in the Planning/Engineering department.

The emergency fire exit on the third floor is the window leading to the fire escape in the Historical Society President's office.

- 4) After exiting the building, all persons shall go to the assembly point located in front of the building. Do not attempt to re-enter the premises until the all-clear signal has been given. During inclement weather go to the Annex building.

APPENDIX B (Con't.)

HOW TO OPERATE A PORTABLE FIRE EXTINGUISHER

There are four basic steps to operating a portable fire extinguisher. An easy way to remember the procedure is to think of the word "PASS".

PULL the pin: Holding the extinguisher with the nozzle pointing away from you, release the locking mechanism. In most cases, this means pulling out the pin located below the trigger.

AIM low: Standing 6 to 8 feet away from the fire, point the extinguisher nozzle at the base of the fire (the lowest point of the fire nearest you). Extinguishers are designed to be operated in an upright position. Always hold the extinguisher vertically. Never cradle it horizontally or at an angle in your arms.

SQUEEZE the trigger: Squeeze the trigger slowly and evenly. This will release the extinguishing agent and expel it through the nozzle.

SWEEP side to side: As the extinguishing agent is expelled, sweep the nozzle side to side, driving the fire back. As the fire closest to you goes out, you may move closer to the fire and continue the sweeping motion until the fire is extinguished. Remember, hold the extinguisher upright. If the fire does not diminish immediately, get out of the building!

After the fire appears to be extinguished, watch the fire area. If the fire breaks out again, and you have not fully discharged your extinguisher, repeat the process. Keep in mind that the discharge time of a portable fire extinguisher can be very short. If you cannot extinguish the fire completely leave the area immediately and wait for the fire department to arrive.

2/1/2016 10:33 AM

Z:\Supervisor\bsherry\Barbara\My Documents\Evacuation Plan Town 2.11.2016.docx

Telephone
(914) 277-3323

FAX
(914) 277-3960

TOWN CLERK'S OFFICE

TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589

Town of Somers

WESTCHESTER COUNTY, N.Y.



KATHLEEN R. PACELLA
Town Clerk

RESOLUTION

RESOLVED, that the Town Board does hereby acknowledge the update of the Emergency Evacuation Plan for the Somers Town House.

I hereby certify that the foregoing copy of resolution was adopted by the Town Board of the Town of Somers at a regular monthly meeting held on June 13, 2003.

Dated: June 16, 2003

Kathleen R. Pacella
Town Clerk

cc: Supervisor
Director of Finance

*C - Town House Employees
Select Board*

TELEPHONE
(914) 277-3637
FAX
(914) 276-0082

OFFICE OF THE SUPERVISOR

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, N.Y. 10589

Town of Somers

WESTCHESTER COUNTY, N.Y.



June 23 2003

MARY BETH MURPHY
SUPERVISOR

MEMO

TO: All Town House and Annex Employees

FROM: Barbara J. Jackson *Barbara J. Jackson*
Secretary to the Supervisor

RE: Emergency Evacuation Procedures

Attached is the revised *Emergency Evacuation Procedures* for the Town House. In addition I have also attached a page of instruction in the event of a bomb threat phone call. Please review these documents thoroughly for your safety as well as everyone else in our building.

If you have any questions, please contact me at your convenience.

MBM/bj

C: Town Board, Town Clerk, Town Attorney,
Historical Society, Police Chief Driscoll,
NYS Police, Somers Fire Dept. & Somers Library
R. Spadaccia, USI Northeast
R. Randazzo, PERMA

Z:\Supervisor\bjackson\Barbara\My Documents\evacplan.2

PLANNING AND ENGINEERING DEPARTMENTS

Town of Somers
WESTCHESTER COUNTY, N.Y.

SOMERS TOWN HOUSE
535 ROUTE 902
SOMERS, NY 10589
www.somersny.com

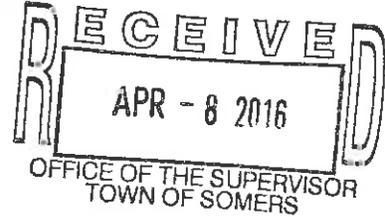
Telephone
(914) 277-5366
Fax
(914) 277-4093

May
April 14
Asenda
ec-all 4/8/16 bjp
Steven Woeffle
Principal Engineering Technician
swoeffle@somersny.com



Steve Dym, AICP
Town Planner
sdym@somersny.com

Date: April 8, 2016
To: Town Board
From: Steven Woeffle *SW*
Principal Engineering Technician



RE: Dellorusso/DeVito Stormwater Management and Erosion and Sediment
Control Permit #ASMESC2013-39
T#1: 47.08-1-28
Release of Erosion Control Bond
Check Received September 20, 2013

This office has no objection to the return of the Erosion Control Bond in the amount of \$200.

Please return to:

Michelle Dellorusso
7 Linda Lane
Katonah, NY 10536

SW/wg
cc: Town Clerk
Director of Finance
Michelle Dellorusso

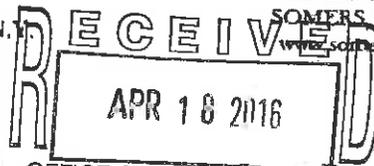
PLANNING AND ENGINEERING DEPARTMENTS

Telephone
(914) 277-5366
Fax
(914) 277-4093

Town of Somers

WESTCHESTER COUNTY, N.Y.

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589
www.somersny.com



OFFICE OF THE SUPERVISOR
TOWN OF SOMERS

sdsm@somersny.com

Steven Wocfle
Principal Engineering Technician
swocfle@somersny.com

May Agenda
EC - TBCTA
FLN 4/18/16 bp

Date: April 15, 2016

To: Director of Finance T10(914)

From: Wendy Getting *wg*
Senior Office Assistant

RE: **Erosion Control Bond**
Gibbons Stormwater Management and Erosion and Sediment Control
and Tree Permit
TM: 6.19-1-35

Attached is a check in the amount of \$500.00 posted Mastrantoni Brothers Inc., 10 Boxwood Drive, Mahopac, NY 10541 in payment of an Erosion Control Bond for Gibbons.

Att.

cc: Town Board
Town Clerk

Somers Parks & Recreation Board

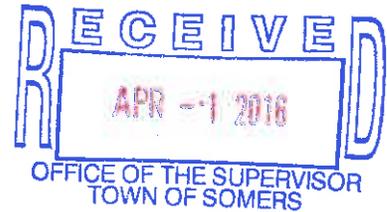
PO Box 46 Somers, New York 10589

OFF: (914)-232-8441

FAX: (914)-232-8548

James Papa
Chairman

SC - TBTC
TA 4/4/16
JP



TO: Town Board

FROM: James Papa, Parks and Recreation Board Chairman

RE: 3 Geranium Drive and 6 Hemlock Drive

DATE: April 4, 2016

At our monthly meeting on March 30, 2016, the Parks and Recreation Board reviewed and discussed a request from Douglas Lee of 4 Hemlock Drive to purchase two Town owned parcels (3 Geranium Drive and 6 Hemlock Drive) of undeveloped land adjacent to his property. Since the lots would not be able to be used for recreation purposes, the Parks and Recreation Board has no objection to the purchase.

TEL: 914-277-3323
FAX: 914-277-3960

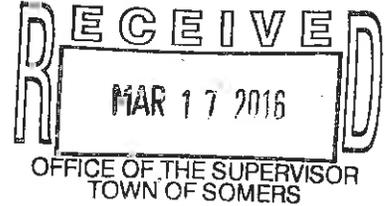
TOWN CLERK'S OFFICE

Town House
335 Route 202
Somers, N.Y. 10589

Town of Somers

WESTCHESTER COUNTY, N.Y.

PATRICIA KALBA
TOWN CLERK



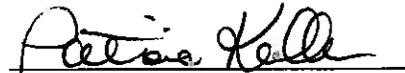
*EC-TB
TC
TA
3/17/16 bjs*

RESOLUTION

RESOLVED, that the Town Board does hereby refer Mr. Douglas W. Lee's the request to purchase two (2) Town Owned parcels, Section: 5.15 Block: 3 Lot: 37 and Section: 5.15 Block: 3 Lot: 40, to Parks and Recreation, Superintendent of Highways, Planning and Engineering for their review and comment.

I hereby certify that the foregoing copy of resolution was unanimously adopted by the Town Board of the Town of Somers at a Regular Meeting held on March 10, 2016.

Dated: March 14, 2016


Town Clerk

Cc: Supervisor
Director of Finance
Superintendent of Parks and Recreation
Superintendent of Highway
Principal Engineering Technician

** See attached email
SW*

Steve Woelfle

From: Steve Woelfle
Sent: Tuesday, February 09, 2016 10:51 AM
To: Wendy Getting
Subject: FW: Douglas Lee of 4 Hemlock Drive Lincolndale | Purchase of 2 Town Owned Lots

Please print and file

Steven Woelfle
Town of Somers-Engineering Dept.

Phone: (914) 277-5366
Fax: (914) 277-4093
Cell: (914) 804-6612

From: Steve Woelfle
Sent: Tuesday, February 09, 2016 10:50 AM
To: Tammi Savva <tsavva@somersny.com>; Rick Morrissey <supervisor@somersny.com>
Cc: Teresa Stegner <tstegner@somersny.com>
Subject: RE: Douglas Lee of 4 Hemlock Drive Lincolndale | Purchase of 2 Town Owned Lots

Took a look at these properties. They are steep and wooded. Each lot is 6000 sf in area.

I don't see any need for the Town to keep these lots.

Thanks

Steven Woelfle
Town of Somers-Engineering Dept.

Phone: (914) 277-5366
Fax: (914) 277-4093
Cell: (914) 804-6612

From: Tammi Savva
Sent: Friday, January 22, 2016 11:24 AM
To: Steve Woelfle <swoelfle@somersny.com>
Cc: Wendy Getting <wgetting@somersny.com>
Subject: Douglas Lee of 4 Hemlock Drive Lincolndale | Purchase of 2 Town Owned Lots

Hi Steve,

Douglas Lee of 4 Hemlock Drive, Lincolndale (h-914.248.7026; c-914.490.4522) is interested in purchasing 2 lots adjacent to his property. He said the properties are owned by the Town and they were obtained through a foreclosure. Attached is a map showing the lots he is interested in purchasing. Please assess the properties for any possible Town future use and make a determination if there will be a sale.

Mr. Lee said if you need him to be there when you evaluate the property he would be happy to meet with you.

Thank you,
Tammi Savva

TEL: 914-277-3323
FAX: 914-277-3960

TOWN CLERK'S OFFICE

Town of Somers

WESTCHESTER COUNTY, N.Y.

Town House
335 Route 202
Somers, N.Y. 10589

PATRICIA KALBA
TOWN CLERK

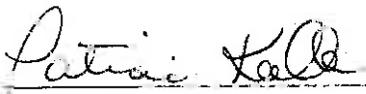


RESOLUTION

RESOLVED, that the Town Board does hereby refer Mr. Douglas W. Lee's the request to purchase two (2) Town Owned parcels, Section: 5.15 Block: 3 Lot: 37 and Section: 5.15 Block: 3 Lot: 40, to Parks and Recreation, Superintendent of Highways, Planning and Engineering for their review and comment.

I hereby certify that the foregoing copy of resolution was unanimously adopted by the Town Board of the Town of Somers at a Regular Meeting held on March 10, 2016.

Dated: March 14, 2016


Town Clerk

Cc: Supervisor
Director of Finance
Superintendent of Parks and Recreation ✓
Superintendent of Highway
Principal Engineering Technician

Barbara Sherry

From: Teresa Stegner
Sent: Friday, March 04, 2016 2:58 PM
To: Barbara Sherry
Subject: RE: D Lee - 4 Hemlock Drive

Barabara.

I would value each parcel at \$2,410, or \$4,820 total, based on a value of \$17,500 an acre. This is the same price we charged the Perry's when they purchased the property on Brick Hill Road.

It is based on sales of similar vacant parcels sold as lots used mainly as a buiffer from the neighbors. I then applied a "useability" factor for the restrictions imposed by the town limiting the owner's "bundle of rights" on property use.

Teresa Stegner, IAO
Assessor
Town of Somers
(914) 277-3504

From: Barbara Sherry
Sent: Thursday, March 03, 2016 6:29 PM
To: Teresa Stegner <tstegner@somersny.com>; Steve Woelfle <swoelfle@somersny.com>
Subject: D Lee - 4 Hemlock Drive

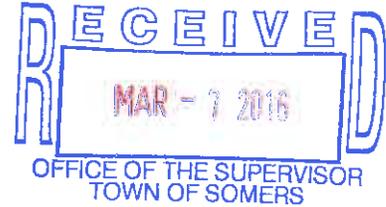
Teresa – could you please provide a \$ amount for these two lots:

Steve – could I get a pretty picture

TY
Barbara

EC -
TBTCTA
Finance
& Welfare
3/7/16 bjo

Douglas W. Lee
PO Box 293
4 Hemlock Drive
Lincolndale, NY 10540
Tel: 914 248 7026



Town of Somers
335 Route 202
Somers, NY 10589
Attn: Town Supervisor Rick Morrissey and Somers Town Board

March 6, 2016

Re: Purchase of Parcels #37, #40 – Hemlock and Geranium Drive, Lake Lincolndale –
Town of Somers

Dear Mr. Morrissey and Somers Town Board,

I am interested in purchasing from the Town of Somers two parcels of undeveloped land that are immediately adjacent to the property I currently own (Parcel # 38). I plan to maintain this land in its natural state as a buffer between my existing property and the adjacent residence. I will adhere to the town resolution of October 20, 1993, which was provided to me. No structures will be built, nor any trees removed. The only improvements considered will be the removal of invasive plant species, cutting vines covering trees and restoring the forest by planting additional native species.

The Town Engineer has inspected the parcels and has agreed to their sale. I have been in contact with the Town Assessor to reach a fair and equitable purchase price comparable to recent sales of town owned properties to other individuals.

Please consider my offer of \$4,800.00 total for the purchase of both parcels #37 and #40.

Thank you for your attention and consideration to this matter. I look forward to your response.

Yours truly,

A handwritten signature in black ink that reads "Douglas W. Lee".

Douglas W. Lee



TOWN OF SOMERS
SUBDIVISION PLAT

DATE: 05.15

SCALE: 1" = 40'

NORTH

LOT	AREA (SQ. FT.)	AREA (SQ. YD.)
1	1,234	0.28
2	1,234	0.28
3	1,234	0.28
4	1,234	0.28
5	1,234	0.28
6	1,234	0.28
7	1,234	0.28

PROJECT: []
 SHEET: [] OF []
 DRAWN BY: []
 CHECKED BY: []
 DATE: []

March 10
Agenda
EC - TBCTA
3/7/16 bjs

Douglas W. Lee
PO Box 293
4 Hemlock Drive
Lincolndale, NY 10540
Tel: 914 248 7026



Town of Somers
335 Route 202
Somers, NY 10589
Attn: Ms. Tammi Savva

March 6, 2016

Re: Purchase of Parcels #37, #40 – Hemlock and Geranium Drive, Lake Lincolndale –
Town of Somers

Dear Ms. Savva,

As discussed I am sending the letter for the land purchase from the Town for submission
to Mr. Morrissey and the Town Board.

Thank you for all your help.

I'll look forward to hearing back from you with the response.

Yours truly,

Douglas W. Lee

May Agenda
EC - all pp
4/26/16

PLANNING AND ENGINEERING DEPARTMENTS

Town of Somers
WESTCHESTER COUNTY, N.Y.

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589
www.somersny.com

Telephone
(914) 277-5366
Fax
(914) 277-4093

Steven Woelfle
Principal Engineering Technician
swoelfle@somersny.com



Syrette Dym, AICP
Town Planner
sdym@somersny.com

Date: April 26, 2016

To: Town Board

From: Steven Woelfle *SW*
Principal Engineering Technician

Thomas E Chiaverini *TC*
Superintendent of Highways

RE: Request to Purchase Town Owned Paper Road known as
"Bud Court"

Pursuant to the Town Board resolution dated April 15, 2016 regarding the above-mentioned subject, we have no objection.

SW/TC/wg

cc: Town Clerk
Tax Assessor

Z:\PE\General files\Town Facilities&Property\Misc Town Prop\Bud Court 4.25.2016.doc

OPEN SPACE COMMITTEE

Telephone
(914) 277-5582
Fax
(914) 277-3790

Town of Somers
WESTCHESTER COUNTY, N.Y.

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589

MICHAEL BARNHART
CHAIRMAN



MEMO TO: Town Board

FROM: Open Space Committee

RE: Bud Court

DATE: April 26, 2016

At our monthly meeting on April 21, 2016, the Committee reviewed and discussed the Rena Riccardi of 4 Juniper Drive request to purchase a Town-owned paper road known as "Bud Court". The Committee had no objections.

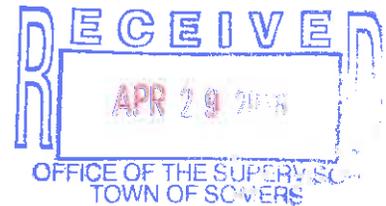
Somers Parks & Recreation Board

PO Box 46 Somers, New York 10589

OFF: (914)-232-8441

FAX: (914)-232-8548

James Papa
Chairman



TO: Town Board

FROM: James Papa, Parks and Recreation Board Chairman

RE: Bud Court

DATE: April 29, 2016

On April 27, 2016, the Board reviewed and discussed a request from Rena Riccardi of 4 Juniper Drive to purchase a Town-owned paper road known as "Bud Court". The Board has no objections to the purchase.

Barbara Sherry

To: Town Board
Subject: FW: Request to purchase "Bud Court"

Barbara J. Sherry
Secretary to the Supervisor
Rick Morrissey, Supervisor
Town of Somers
335 Route 202
Somers, NY 10589
phone: (914) 277-3637
fax: (914) 276-0082
bsherry@somersny.com

From: Teresa Stegner
Sent: Thursday, April 07, 2016 2:03 PM
To: Barbara Sherry <bsherry@somersny.com>
Subject: RE: Request to purchase "Bud Court"

Barbara,

\$1,000 seems as little low. The piece is .249 acres and I have been using \$17,500 an acre which would put the value at \$4,358. However, it is not an already established tax parcel, so they would need to have a survey done and a deed created which will likely cost them about \$2,000. I would say \$2,300 - \$2,500 would be a reasonable price.

Teresa Stegner, IAO
Assessor
Town of Somers
(914) 277-3504

From: Barbara Sherry
Sent: Monday, April 04, 2016 4:29 PM
To: Teresa Stegner <tstegner@somersny.com>
Cc: Rick Morrissey <supervisor@somersny.com>
Subject: FW: Request to purchase "Bud Court"

May I have your thoughts on the offered price to purchase a paper road.
Thank you.

Barbara J. Sherry
Secretary to the Supervisor
Rick Morrissey, Supervisor
Town of Somers
335 Route 202
Somers, NY 10589
phone: (914) 277-3637

TEL: 914-277-3323
FAX: 914-277-3960

TOWN CLERK'S OFFICE

Town of Somers

WESTCHESTER COUNTY, N.Y.

Town House
335 Route 202
Somers, N.Y. 10589

PATRICIA KALBA
TOWN CLERK



RESOLUTION

RESOLVED, that the Town Board does hereby refer a request from Ms. Rena M. Riccardi to purchase Town Owned Paper Road known as "Bud Court" to Parks and Recreation Department, Engineering Department, Highway Department and the Open Space Committee for their review and comment.

I hereby certify that the foregoing copy of resolution was unanimously adopted by the Town Board of the Town of Somers at a Regular Meeting held on April 14, 2016.

Dated: April 15, 2016


Town Clerk

Cc: Supervisor
Director of Finance
Superintendent Parks and Recreation
Principal Engineering Technician
Superintendent of Highways
Open Space Committee

Barbara Sherry

From: Rena Riccardi <renariccardi@comcast.net>
Sent: Sunday, April 03, 2016 10:08 PM
To: Barbara Sherry
Subject: Fwd: Request to purchase "Bud Court"
Attachments: IMG_0189.JPG; IMG_0188.JPG; Survey.pdf; Riccardi Request to Purchase Bud Court.docx

Dear Barbara,

Attached please find, A letter to Rick Morrissey, Town Supervisor, requesting to purchase "Bud Court" (paper road), survey, and photos of same.

Please advise if you require anything additional.

Thank you.

Rena Riccardi

()

----- Forwarded message -----

From: Rena Riccardi <renariccardi@comcast.net>
Date: Sat, Apr 2, 2016 at 3:13 PM
Subject: Photos of Bud Court
To: HOME <home@comcast.net>

Sent from my iPhone

Rena M. Riccardi
4 Juniper Drive
Lake Lincolndale, NY 10541
(914 772-1005 - c

April 2, 2016

Rick Morrissey
Supervisor, Town of Somers
335 Route 202
Somers, NY 10589

Re: Request to purchase Bud Court (paper road)

Mr. Morrissey,

I recently spoke with Steven Woelfle, Town Engineer regarding my desire to purchase Bud Court, a paper road adjacent to the home/property I recently purchased. He felt my request was realistic and recommended I send a written request to you.

Purchasing Bud Court would allow me to complete and pave the preexisting circle driveway that currently sits, partially on Bud Court. Herewith, please find property survey and photos.

In the photo with the telephone pole near midline, between the shrub and the first fence post, is a preexisting (small gray stone) property marker showing approximately 10 feet of the preexisting circular driveway retaining wall on Bud Court.

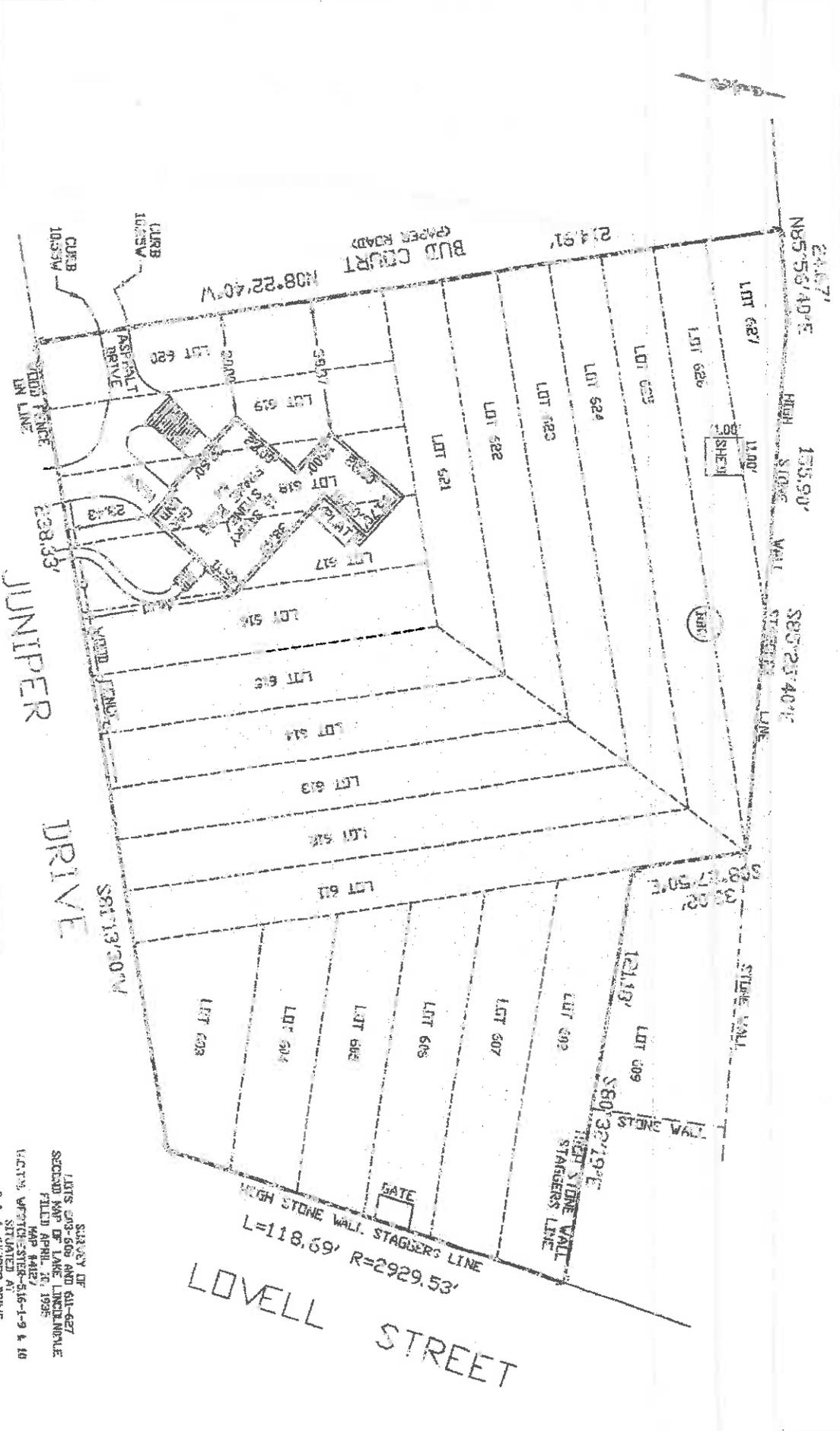
The previous owners and now I, maintain the property. The road does not provide access to public land. My neighbor on the opposite side of Bud Court has no objection to my request to purchase the land.

I would like to offer \$1,000.00 to purchase said land.

I look forward to hearing from you regarding this request.

Thank you,
Rena M. Riccardi
rena.riccardi@gmail.com
(914) 772-1005

HAVING BEEN CONSIDERED AND APPROVED BY THE BOARD OF SUPERVISORS OF THE COUNTY OF WESTCHESTER, NEW YORK, AND THE COMMISSIONERS OF THE LAND OFFICE OF THE STATE OF NEW YORK, IN WITNESS WHEREOF, THE SAID BOARD OF SUPERVISORS AND THE SAID COMMISSIONERS OF THE LAND OFFICE HAVE CAUSED THESE PLANS TO BE RECORDED IN THE OFFICE OF THE CLERK OF THE COUNTY OF WESTCHESTER, NEW YORK, ON THIS 15TH DAY OF APRIL, 1995.



THIS SURVEY IS DEPENDENT UPON THE FOLLOWING PARTIAL SURVEYS:

- 1. PARTIAL SURVEY OF THE LOTS BEING SURVEYED BY THE LATE JOHN J. RICCARDI, DATED APRIL 15, 1995.
- 2. PARTIAL SURVEY OF THE LOTS BEING SURVEYED BY THE LATE JOHN J. RICCARDI, DATED APRIL 15, 1995.
- 3. PARTIAL SURVEY OF THE LOTS BEING SURVEYED BY THE LATE JOHN J. RICCARDI, DATED APRIL 15, 1995.
- 4. PARTIAL SURVEY OF THE LOTS BEING SURVEYED BY THE LATE JOHN J. RICCARDI, DATED APRIL 15, 1995.
- 5. PARTIAL SURVEY OF THE LOTS BEING SURVEYED BY THE LATE JOHN J. RICCARDI, DATED APRIL 15, 1995.
- 6. PARTIAL SURVEY OF THE LOTS BEING SURVEYED BY THE LATE JOHN J. RICCARDI, DATED APRIL 15, 1995.
- 7. PARTIAL SURVEY OF THE LOTS BEING SURVEYED BY THE LATE JOHN J. RICCARDI, DATED APRIL 15, 1995.
- 8. PARTIAL SURVEY OF THE LOTS BEING SURVEYED BY THE LATE JOHN J. RICCARDI, DATED APRIL 15, 1995.
- 9. PARTIAL SURVEY OF THE LOTS BEING SURVEYED BY THE LATE JOHN J. RICCARDI, DATED APRIL 15, 1995.
- 10. PARTIAL SURVEY OF THE LOTS BEING SURVEYED BY THE LATE JOHN J. RICCARDI, DATED APRIL 15, 1995.



TITLE SURVEY RICCARDI ENGINEER AT 2 & 4 JUNIPER DRIVE, MAHOPAC WESTCHESTER COUNTY, NEW YORK	
DATE: 7/15/95	SCALE: 1"=40'
151-398-9713 CELL 631-617-8701 FAX	

LOTS 628-638 AND 631-637
 SECOND MAP OF LAKE LINCOLN MOBILE
 FILED APRIL 16, 1995
 MAP 14427
 SITUATED AT
 2 & 4 JUNIPER DRIVE
 MAHOPAC
 TOWN OF SEWERS
 WESTCHESTER COUNTY, NEW YORK





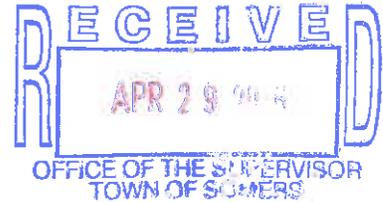
Somers Parks & Recreation Board

PO Box 46 Somers, New York 10589

OFF: (914)-232-8441

FAX: (914)-232-8548

James Papa
Chairman



TO: Town Board

FROM: James Papa, Parks and Recreation Board Chairman

RE: 11 Geranium Drive

DATE: April 29, 2016

At our monthly meeting on April 27, 2016, the Parks and Recreation Board reviewed and discussed a request from Joseph Curry of 7 Geranium Drive to purchase a Town-owned parcel located at 11 Geranium Drive. The Board has no objections to the purchase.

PLANNING AND ENGINEERING DEPARTMENTS

Telephone
(914) 277-5366
Fax
(914) 277-4093

Town of Somers
WESTCHESTER COUNTY, N.Y.

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589
www.somersny.com

Steven Woelfle
Principal Engineering Technician
swoelfle@somersny.com



Syreille Dyu, AICP
Town Planner
sdya@somersny.com

Date: April 26, 2016

To: Town Board

From: Steven Woelfle *SU*
Principal Engineering Technician

Thomas E Chiaverini *TEC*
Superintendent of Highways

RE: Request to Purchase Town Owned Parcel
11 Geranium Drive
TM: 5.15-3-44

Pursuant to the Town Board resolution dated April 15, 2016 regarding the above-mentioned subject, we have no objection.

SW/TC/wg
cc: Town Clerk
Tax Assessor

Z:\PE\General files\Town Facilities&Property\Misc Town Prop\11 Geranium Drive 4.25.2016.doc

OPEN SPACE COMMITTEE

Telephone
(914) 277-5582
Fax
(914) 277-3790

Town of Somers
WESTCHESTER COUNTY, N.Y.

SOMERS TOWN HOUSE
335 ROUTE 202
SOMERS, NY 10589

MICHAEL BARNHART
CHAIRMAN



MEMO TO: Town Board

FROM: Open Space Committee

RE: 11 Geranium Drive

DATE: April 26, 2016

At its monthly meeting on April 21, 2016, the Committee reviewed and discussed a request from Joseph Curry of 7 Geranium Drive to purchase a Town-owned parcel located at 11 Geranium Drive. Mr. Curry indicated that he intended to remove vegetation and downed trees in an effort to "clean up" the property. However, these are important elements of a forested condition, which the Committee favors to preserve the natural condition of the property and to avoid erosion issues as well as the possibility of future development. Consequently, the Open Space Committee does not recommend sale of the property.

TEL: 914-277-3323
FAX: 914-277-3960

TOWN CLERK'S OFFICE

Town of Somers

WESTCHESTER COUNTY, N.Y.

Town House
335 Route 202
Somers, N.Y. 10589

PATRICIA KALBA
TOWN CLERK



RESOLUTION

RESOLVED, that the Town Board does hereby refer a request from Mr. Joseph Curry to purchase Town Owned Property, Section: 5.15, Block: 3, Lot: 44, 11 Geranium Drive to Parks and Recreation Department, Engineering Department, Highway Department and the Open Space Committee for their review and comment.

I hereby certify that the foregoing copy of resolution was unanimously adopted by the Town Board of the Town of Somers at a Regular Meeting held on April 14, 2016.

Dated: April 15, 2016


Town Clerk

Cc: Supervisor
Director of Finance
Superintendent Parks and Recreation
Principal Engineering Technician
Superintendent of Highways
Open Space Committee

Request to Purchase Town Owned Parcel in Lincoln Dale Section 5.15-3-44, 11 Geranium Drive



Barbara Sherry

From:
Sent: Tuesday, March 29, 2016 3:45 PM
To: Barbara Sherry
Subject: Re: 11 Geranium Drive

Ms Sherry,
Yes please proceed. Thank you
Sent via BlackBerry from T-Mobile

From: Barbara Sherry <bsherry@somersny.com>
Date: Tue, 29 Mar 2016 18:15:44 +0000
To: j...
Subject: 11 Geranium Drive

Good Afternoon Mr. Curry,

As previously stated by Supervisor Morrissey we are in receipt of your request to purchase 11 Geranium Drive. For you information, the Tax I.D. number for 11 Geranium Drive is 5.15-3-44 and not 45. If it is ok with you I will make the correction and we will continue forward with the process.

Barbara J. Sherry
Secretary to the Supervisor
Rick Morrissey, Supervisor
Town of Somers
335 Route 202
Somers, NY 10589
phone: (914) 277-3637
fax: (914) 276-0082
bsherry@somersny.com

Barbara Sherry

From: Joseph Curry
Sent: Monday, March 28, 2016 1:35 PM
To: Rick Morrissey
Cc: Barbara Sherry; Tammi Savva
Subject: 5.15-3-45 aka 11 Geranium Drive

Good Afternoon Mr. Morrissey,

I hope all is well with you. My name is Joseph Curry & I live at 7 Geranium Drive for the past 2 years. I really like the Town & services provided to me are very good, in particular the Department of Public Works they do a great job at all times of day & night snow plowing.

The reason for my note is; I would like to make an offer to purchase the vacant lot 5.15-3-~~43~~⁴⁴ the Town currently owns that adjoins my 5.15-3-43. My intentions are to clean up the property there is a lot of under growth comprising of downed trees etc. I do not intend to build. I would like to offer \$1500.00. Please let me know if this is acceptable to the Town Board.

Thank you

Best Regards
Joseph Curry
7 Geranium Drive
Mahopac NY 10541

TEL: 914-277-3323
FAX: 914-277-3960

TOWN CLERK'S OFFICE

Town of Somers

WESTCHESTER COUNTY, N.Y.

Town House
335 Route 202
Somers, N.Y. 10589

PATRICIA KALBA
TOWN CLERK



April 25, 2016

State of New York
Executive Department
Division of Alcoholic Beverage Control
State Liquor Authority
80 South Swan Street, Suite 900
Albany, NY 12210-8002

RE: 202 Steakhouse, LLC
202 Steakhouse
2 Old Tomahawk Street
Yorktown Heights, New York 10598

To Whom It May Concern:

Please be advised that the Town of Somers does hereby authorize waiving the 30 day waiting period for the issuance of a new liquor license to 202 Steakhouse, LLC, 2 Old Tomahawk Street Yorktown Heights, New York 10598 (formally Somers 202 Restaurant and Grill).

I have enclosed a copy of their application for your reference, which was hand delivered to my office on April 21, 2016.

If you have any further questions regarding this matter, please do not hesitate to call my office.

Sincerely,

Patricia Kalba
Town Clerk
Town of Somers

Cc: Tim Demaj timmy059@aol.com
Andrea O'Brien andrea@liquorauthority.org

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____



State Liquor Authority

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

(Page 1 of 2)

1. Date Notice Was Sent: April 21, 2016 1a. Delivered by: Personal Delivery with Proof of Receipt

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:
 New Application Renewal Alteration Corporate Change Removal Class Change

For New applicants, answer each question below using all information known to date.
 For Renewal applicants, set forth your approved Method of Operation only.
 For Alteration applicants, attach a complete written description and diagrams depicting the proposed alteration.
 For Corporate Change applicants, attach a list of the current and proposed corporate principals.
 For Removal applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation.
 For Class Change applicants, attach a statement detailing your current license type and your proposed license type.



This 30-Day Advance Notice is Being Provided to the Clerk of the following Local Municipality or Community Board:

3. Name of Municipality or Community Board: Town of Somers

Applicant/Licensee Information

4. License Serial Number, if Applicable: pending Expiration Date, if Applicable: pending

5. Applicant or Licensee Name: 202 Steakhouse LLC

6. Trade Name (if any): 202 Steakhouse

7. Street Address of Establishment: 2 Old Tomahawk Street

8. City, Town or Village: Yorktown Heights, NY Zip Code: 10598

9. Business Telephone Number of Applicant/Licensee: 917-684-6880

10. Business Fax Number of Applicant/Licensee: none

11. Business E-mail of Applicant/Licensee: timmy039@aol.com

12. Type(s) of Alcohol sold or to be sold: Beer & Cider Wine, Beer & Cider Liquor, Wine, Beer & Cider

13. Extent of Food Service: Full food menu; Full Kitchen run by a chef or cook Menu meets legal minimum food availability requirements; Food prep area at minimum

14. Type of Establishment: Restaurant

15. Method of Operation: (Check all that apply)
 Seasonal Establishment juke box Disc Jockey Recorded Music Karaoke
 Live Music (Give details: i.e. rock bands, acoustic, jazz, etc.): rock bands, acoustic, jazz
 Patron Dancing Employee Dancing Exotic Dancing Topless Entertainment
 Video/Arcade Games Third Party Promoters Security Personnel
 Other (specify): N/A

16. Licensed Outdoor Area: (Check all that apply)
 None Patio or Deck Rooftop Garden/Grounds Freestanding Covered Structure
 Sidewalk Cafe Other (specify): _____

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____



State Liquor Authority

Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a Local Municipality or Community Board
(Page 7 of 8)

17. List the floor(s) of the building that the establishment is located on:
18. List the room number(s) the establishment is located in within the building, if appropriate:
19. Is the premises located within 500 feet of three or more on-premises liquor establishments? Yes No
20. Will the license holder or a manager be physically present within the establishment during all hours of operation? Yes No
21. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the license.
22. Does the applicant or licensee own the building in which the establishment is located? Yes (if Yes SKIP 23-26) No

Owner of the Building in Which the Licensed Establishment is Located

23. Building Owner's Full Name:
24. Building Owner's Street Address:
25. City, Town or Village: State: Zip Code:
26. Business Telephone Number of Building Owner:

Representative or Attorney representing the Applicant in Connection with the application for a license to traffic in alcohol at the establishment identified in this notice

27. Representative/Attorney's Full Name:
28. Street Address:
29. City, Town or Village: State: Zip Code:
30. Business Telephone Number of Representative/Attorney:
31. Business Email Address:

I am the applicant or hold the license or am a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under Penalty of Perjury - that the representations made in this form are true.

32. Printed Name: Title:

Signature: X

Barbara Sherry

From: Bob Kehoe
Sent: Friday, March 25, 2016 2:50 PM
To: Barbara Sherry
Cc: Rick Morrissey
Subject: RE: Pat Nicolosi Over Time work coverage payments

Barbara,

For April TB meeting.

Thanks,

Bob

From: Rick Morrissey
Sent: Friday, March 25, 2016 10:53 AM
To: Bob Kehoe
Subject: FW: Pat Nicolosi Over Time work coverage payments

Bob:

Please find attached back up information for an OTT payment for Pat Nicolosi. I authorize the payment as presented.

Thanks,

Rick Morrissey, MPA

Town Supervisor
Town of Somers
335 Route 202
Somers, NY 10589
Ph: 914-277-3637
Fax: 914-276-0082
supervisor@somersny.com
www.somersny.com

From: Teresa Stegner
Sent: Friday, March 25, 2016 10:35 AM
To: Rick Morrissey
Subject: Pat Nicolosi Over Time work coverage payments

Rick,

Per our discussion, I would like to recommend that Pat Nicolosi be paid an amount above her usual salary for the time the Assessor's Office was short staffed. I have attached copies of her timesheets showing the additional 12.75 hours she worked above her normally scheduled hours..

What the timesheets do not accurately reflect is the amount of time Pat spent outside of her normal schedule. Pat typically works in the morning to early afternoon Monday through Thursday. In the eight weeks since Barbara Brandt left on January 15th (and the two weeks prior as Barbara was out 3 days), Pat worked every Wednesday afternoon, some Friday mornings and/or afternoons, one full day when I was ill, and several other afternoons I attended meetings. Through all of this, the office had full coverage other than an occasional 30 minute lunch break while I was out of the office. The office experienced no significant closures during the entire time we were short staffed. I strongly feel that Pat deserves something extra for her hard work and inconvenience.

I recommend she be given a \$500 compensation for her extra effort.

Teresa Stegner, IAO
Assessor
Town of Somers
(914) 277-3504

May Agenda
EC - TB 5/3/16
TC
TH BP

Preservation Month 2016

May is Preservation Month, and this year we're celebrating with three words that say it all: This. Place. Matters.

Everyone has places that are important to them. Places they care about. Places that matter. *This Place Matters* is national campaign that encourages people to celebrate the places that are meaningful to them and to their communities.

This campaign isn't just about photography. It's about telling the stories of the places we can't live without. Through *This Place Matters*, we hope to encourage and inspire an ongoing dialogue about the importance of place and preservation in all of our lives.

At the National Trust, we believe that Preservation Month is an excellent opportunity to shine a spotlight on all the special places that are important to you. To help you celebrate, we're sharing some exciting new tips and tricks so you can take your *This Place Matters* campaign to the next level this May. Follow the steps below to get started!

What places matter to you?

Tell us which places matter most to you, and we'll help to tell the world!

[Link: <https://savingplaces.org/tpm-instructions>]

1. Download your *This Place Matters* [Link: </thisplacematterstoolkit>] materials [Link: </thisplacematterstoolkit>] including signs, social media shareables, and a campaign toolkit.
2. Take photos at the places that matter most to you.
3. Share your photos online with the hashtag #ThisPlaceMatters.
4. Stay tuned to @SavingPlaces on Instagram [Link: <https://instagram.com/savingplaces/>] and Twitter [Link: <https://twitter.com/savingplaces>] as we spotlight our favorites.



This Place Matters

Toolkit & Signage [Link: http://my.preservationnation.org/site/Survey?ACTION_REQUIRED=URI_ACTION_USER_REQUESTS&SURVEY_ID=21320]

[http://my.preservationnation.org/site/Survey?](http://my.preservationnation.org/site/Survey?ACTION_REQUIRED=URI_ACTION_USER_REQUESTS&SURVEY_ID=21320)

[ACTION_REQUIRED=URI_ACTION_USER_REQUESTS&SURVEY_ID=21320](http://my.preservationnation.org/site/Survey?ACTION_REQUIRED=URI_ACTION_USER_REQUESTS&SURVEY_ID=21320)]

Want to create a campaign for a place you love? We have the tips and tools to get you started!

DOWNLOAD [LINK: [HTTP://MY.PRESERVATIONNATION.ORG/SITE/SURVEY?ACTION_REQUIRED=URI_ACTION_USER_REQUESTS&SURVEY_ID=21320](http://my.preservationnation.org/site/Survey?ACTION_REQUIRED=URI_ACTION_USER_REQUESTS&SURVEY_ID=21320)]

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WHO WE ARE WHAT WE DO SAVE A PLACE JOIN US

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About the National Trust for Historic Preservation

The National Trust for Historic Preservation, a privately funded nonprofit organization, works to save America's historic places.

Chartered by Congress in 1949, the organization is now supported entirely by private contributions. We take direct on-the-ground action when historic buildings and sites are threatened. Our work helps build vibrant, sustainable communities. We advocate with governments to save America's heritage. We strive to create a cultural legacy as diverse as the nation itself so that all of us can take pride in our part of the American story.

Thanks to more than 300,000 members and supporters, and partnerships with hundreds of preservation organizations from coast to coast, the National Trust is recognized as the leader of the historic preservation movement in the United States.

The National Trust for Historic Preservation:

- Provides cutting-edge leadership on pressing preservation priorities.
- Operates a network of historic sites, including such treasures as South Carolina's Drayton Hall, the nation's oldest plantation home open to the public, and Connecticut's Philip Johnson Glass House, a pioneering icon of modern architecture.
- Advocates with governments to save America's heritage.
- Provides leadership, education and resources to preservation leaders and grassroots advocates nationwide.



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The National Trust for Historic Preservation, a privately funded nonprofit organization, works to save America's historic places.

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P 202.588.6000 T 800.944.6847 F 202.588.6038

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May Agenda

THE LEAHY COMPANY, INC.

Workers' Compensation Consultants Since 1974

April 8, 2016

Mr. Robert Kehoe
Director of Finance
Town of Somers
335 Route 202
Somers, NY 10589

EC -
TB
TC
TA
5/2/16 by

Dear Bob:

As you know The Leahy Company worked with Town of Somers in 1993, 1996, and most recently beginning in 2013. Our objective was to review your workers' compensation premiums, specifically looking for errors that caused over-charges.

As a result of our work, Town of Somers received premium refunds totaling \$44,134 from your workers' compensation policies. These refunds were due to corrections we made to your premium calculations.

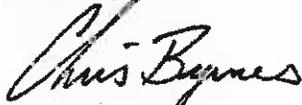
Town of Somers has four new Ratings published by the New York Compensation Insurance Rating Board that can be reviewed (the last Experience Rating that we reviewed was effective 7/1/12):

<u>Effective Date</u>	<u>Rating</u>
7/1/13	.86
7/1/14	.92
7/1/15	1.08
7/1/16	Soon to be published

Given The Leahy Company's prior success, it seems reasonable to assume that these more recent ratings may also be incorrect. There is every reason to believe that the Town is due another refund. If not, you pay us nothing.

I have taken the liberty of enclosing a Letter of Agreement for your review. I will call you in a couple of days to answer any questions, or you may reach me at (914) 241-7300 or at chris@leahycompany.com.

Sincerely,



Christopher B. Byrnes
Account Manager

Enclosure

GETTING STARTED

**WORKERS' COMPENSATION
PREMIUM RECOVERY SERVICE**

In order for The Leahy Company to pursue your refund, we need the following:

- sign the enclosed Letter of Agreement, and*
- prepare and sign **Five Letters of Authority** (sample attached). Each letter must be **on your original letterhead** and each **signed as an original**.*
- If possible**, also provide us with copies of some or all of the documents listed below – this will speed the process but is **not mandatory**.*
 - *7/1/15 - 16 Policy **
 - *7/1/14 - 15 Final Audit ***
 - *7/1/13 - 14 Final Audit ***

** Only the pages showing the premium calculations (classifications, payrolls, discounts, etc) are necessary.*

*** Not the auditor's worksheet - just the calculations that determine the "earned" or final premium.*

THE LEAHY COMPANY, INC.

Workers Compensation Consultants Since 1974

LETTER OF AGREEMENT

April 8, 2016

Mr. Robert Kehoe
Director of Finance
Town of Somers
335 Route 202
Somers, NY 10589

Dear Mr. Kehoe

This letter will serve as the entire agreement relative to our Workers' Compensation Insurance Premium Recovery Service.

Our firm will conduct a complete review of your premium calculations including experience rating modifications, classification codes, rates, payroll allocations, discounts and other modifiers, applicable to the 7/1/16-17 policy period and all prior policy periods as permitted by the carrier(s) and rating authority(ies). The purpose of the review is to identify and correct any errors, thereby generating refunds, reduced premiums, or credits from your carrier(s). Once identified, we will obtain amended experience rating modifications and have them and all other corrections applied by your carrier(s).

Our fee is 50% of the actual refunds, reduced premiums, or credits that you receive as a result of our work on your behalf. IF THERE IS NO RECOVERY - THERE IS NO FEE. You will not be invoiced until you receive a check, credit or reduced premium from your carrier(s). At that time, our 50% fee is due, net upon presentation. Past due invoices will incur a finance charge equal to 1.5% per month (18% per annum) on the unpaid balance. All collection or legal fees incurred in the collection of our fee from you will be added to the sums due.

Sincerely yours,
THE LEAHY COMPANY, INC.



Christopher B. Byrnes
Account Manager

AGREED TO & ACCEPTED BY:

Signature _____

Name _____

Title _____

Date _____

LETTER OF AUTHORITY

DATE

TO: All Interested Insurance Companies and Rating Authorities

Please release any and all information regarding our workers' compensation insurance as requested by The Leahy Company, Inc. This includes, but is not limited to, experience rating worksheets, file histories, unit statistical reports, audits, renewal policies, loss runs/claims data, retrospective accountings, statements of account, etc.

The requested data should be sent directly to The Leahy Company, Inc.

Thank you for your assistance.

Sincerely,

NAME
TITLE

THE LEAHY COMPANY, INC.

Workers' Compensation Consultants Since 1974

LETTER OF AGREEMENT

September 18, 2012

Ms. Mary Beth Murphy
Town Supervisor
Town of Somers
335 Route 202
Somers, NY 10589

Dear Ms. Murphy:

This letter will serve as the entire agreement relative to our Workers' Compensation Insurance Premium Recovery Service.

Our firm will conduct a complete review of your premium calculations including experience rating modifications, classification codes, rates, payroll allocations, discounts and other modifiers, applicable to the 7/1/12-13 policy period and all prior policy periods as permitted by the carrier(s) and rating authority(ies). The purpose of the review is to identify and correct any errors, thereby generating refunds, reduced premiums, or credits from your carrier(s). Once identified, we will obtain amended experience rating modifications and have them and all other corrections applied by your carrier(s).

Our fee is 50% of the actual refunds, reduced premiums, or credits that you receive as a result of our work on your behalf. IF THERE IS NO RECOVERY - THERE IS NO FEE. You will not be invoiced until you receive a check, credit or reduced premium from your carrier(s). At that time, our 50% fee is due, net upon presentation. Past due invoices will incur a finance charge equal to 1.5% per month (18% per annum) on the unpaid balance. All collection or legal fees incurred in the collection of our fee from you will be added to the sums due.

Sincerely yours,
THE LEAHY COMPANY, INC.

Christopher B. Byrnes

Christopher B. Byrnes
Account Manager

AGREED TO & ACCEPTED BY:

Signature *Mary Beth Murphy*

Name MARY BETH MURPHY

Title SUPERVISOR

Date JAN. 17, 2013

53 South Moger Avenue • Mount Kisco, New York 10549-2211

Tel: 914-241-7300 • Fax: 914-241-4452 • Email: workerscomp@leahycompany.com

www.leahycompany.com

— THE LEAHY COMPANY, INC. —

Workers' Compensation Consultants Since 1974

Addendum to Letter of Agreement

between

Town of Somers
and
The Leahy Company, Inc.

The Letter of Agreement signed on January 17, 2013 is hereby amended to include the current policy period (7/1/13-14).

<u>Christopher B. Byrne</u>	NAME	<u>Rich Manssey</u>
<u>Account Manager</u>	TITLE	<u>Supervisor</u>
<u>June 5, 2014</u>	DATE	<u>June 17, 2014</u>
The Leahy Company, Inc.		Town of Somers

63 South Moger Avenue • Mount Kisco, New York 10549-2211

Tel: 914-241-7300 • Fax: 914-241-4452 • Email: workerscomp@leahycompany.com

www.leahycompany.com

Barbara Sherry

From: Bob Kehoe
Sent: Wednesday, April 27, 2016 3:11 PM
To: Rick Morrissey
Cc: Barbara Sherry
Subject: Workers Comp review proposal
Attachments: SKMBT_42316042713540.pdf

Rick,

We have worked with The Leahy group previously with good results. They are proposing to review our Experience rating for 2013-2016.

They would share in 50% of actual refunds or reduced premiums. The same agreement we had in the past. If there is no savings to the Town there is no fee to Leahy.

Their agreement is attached along with the prior agreement.

I would like you to consider putting this on the May agenda for consideration by the Board.

Bob