

**TOWN OF KENT
TOWN BOARD MEETING
Tuesday, April 23, 2019**

Executive Session – 6:15 p.m.

to discuss collective negotiations pursuant to article fourteen of the civil service law and the medical, financial, credit or employment history of a particular person or corporation.

Public Hearing – 7:00 p.m.

Proposed local law for maintenance of ancient roads

(Please note, due to unanticipated circumstances, this public hearing will be opened to accept written comments only, and it is expected that it will be adjourned until the May 7th meeting)

Workshop –

1. Pledge of Allegiance
2. Fire Inspector – operating permits for Fireworks Extravaganza and Lakeview Community Church
3. Lake Carmel Fire Department – updates to 2018 service award list
4. Lake Carmel Park District – Porta John quotes for LCPD and Recreation, sand for beaches, new member to advisory board
5. Lake Tibet – Carp quotes, beaver control contract
6. Recreation – seasonal worker, Start Smart Workers
7. Town Clerk – adjust Record of Activities (ROA) for member of the Planning Board
8. Code Enforcer – correct violations at TM# 22.58-1-29
9. Arbor Day grant
10. Announcements
11. Public Comment

Meeting

1. Roll Call
2. Vote on the following:
 - a. Approve operating permit for Fireworks Extravaganza
 - b. Approve operating permit for Lakeview Community Church
 - c. Approve updates to 2018 service award list for LCFD
 - d. Approve contract for Royal Flush
 - e. Approve contract for Stroker Trucking
 - f. Approve new member for LCPDAB
 - g. Approve contract Northeastern Aquatics
 - h. Approve contract for NY Wildlife Control
 - i. Approve hire of Recreation seasonal worker
 - j. Approve hire of Start Smart workers
 - k. Approve adjustment to ROA for S. Wilhelm
 - l. Contract to correct violations at TM# 22.58-1-29
 - m. Accept Arbor Day grant
 - n. Appoint counsel for Planning Board
 - o. Appoint counsel for ZBA
3. Vouchers and Claims
4. Correspondence
5. Public comment



Town of Kent Building Department OPERATING PERMIT

This Operating Permit must be displayed at Premises

Application #: 33.33-1-19

Application's Name: Fireworks Extravaganza

Applicant's Address: 174 Route 17 North, Rochelle Park, NJ 07662

Contact Person: Brian Hollenback

Telephone: 800-765-6191 ext. 751

Address of Premises for which Operating Permit is requested: ☐ same as above ☒ Other (specify):
274 Lakeshore Drive East, Carmel, NY 10512

Date of Issuance: June 29, 2019 (Rain Date: July 6, 2019)

Expiration: July 7, 2019

This Operating Permit is issued to the Applicant named above to conduct the activity(ies) and/or to use the class(es) of buildings indicated below at the Premises specified above:

- ☐ Cutting & Welding Operations – International Fire Code - 3501.2
- ☐ Manufacturing, storing or handling hazardous materials in quantities exceeding those listed in Tables 5003.1.1(1), 5003.1.1(2), 5003.1.1(3) or 5003.1.1(4), of the International Fire Code (see 19 NYCRR Part 1225); as described in the Application.
- ☒ Conducting a hazardous process or activity; as described in the International Fire Code 104.1 & 2301.1
- ☒ Use of pyrotechnic devices in assembly occupancies; as described in the Application
- ☒ Use of a building containing one or more areas of public assembly with an occupant load of 100 persons or more; as described in the Application.
- ☐ Use of a building whose use or occupancy classification has been determined by Town of Kent Building Department as posing a substantial potential hazard to public safety; as described in the Application.

The conditions, surroundings and arrangements for the activity(ies) and/or use(es) subject to this Operating Permit shall be in accordance with all applicable laws, ordinances, regulations and the conditions (if any) mentioned below. The Premises shall be subject to periodic inspection by Town of Kent Building Department to ensure compliance with all applicable laws, ordinances, regulations and conditions. The Operating Permit is subject to revocation for failure to comply with any applicable law, ordinance, regulation or condition. This Operating Permit shall expire on the earlier of the Expiration Date specified above or on the date of revocation pursuant to the preceding sentence. CONDITIONS (continue on attached sheets, if necessary):

TOWN OF KENT BUILDING DEPARTMENT

By: Nicholas J. Cecere
Nicholas J. Cecere – Fire Inspector

Town of Kent
25 Sybil's Crossing
Kent Lakes NY 10512

Application #: 33.33-1-19

OPERATING PERMIT APPLICATION FORM

Page 1 of 3

Part I Applicant/Building Information

Applicant's Name: FIREWORKS EXTRAVAGANZA
Applicant's Address: 174 ROUTE 17 NORTH, ROCHELLE PARK, NJ 07662
Contact Person: BRIAN HOLLENBACK Telephone: 1-800-765-2264 EXT 751
Address of Premises for which Operating Permit is requested: ☐ same as above
☒ Other (specify): 274 LAKESHORE DRIVE EAST, CARMEL, NY 10512
Tax Map Number: 33.33-1-19 Current Occupancy Class: M/A

Part II Type Operating Permit

An Operating Permit is required to conduct any activity or to use any class of building listed below. **Please indicate the type(s) of Operating Permit(s) requested by checking each applicable box.** (If you require assistance, or would like more information, contact the Town of Kent Building Department at 845-225-3900.)

- ☐ Manufacturing, storing or handling hazardous materials in quantities exceeding those listed in Tables 2703.1.1(1), 2703.1.1(2), 2703.1.1(3) or 2703.1.1(4), of the Fire Code of New York State (see 19 NYCRR Part 1225); (**See Appendix A.**) Identify the materials and quantities and describe the manner in which the materials will be manufactured, stored or handled (attach additional sheets if necessary):

- ☐ Conducting a hazardous process or activity (including but not limited to, any commercial or industrial operation which produces combustible dust as a byproduct, fruit and crop ripening, and waste handling; (**See Appendix B.**) Describe the process(es) or activity(ies) to be conducted (attach additional sheets if necessary):

- ☒ Use of pyrotechnic devices in assembly occupancies; (**See Appendix C.**) Describe the proposed use (attach additional sheets if necessary):

SEE ATTACHED SHEETS

- ☐ Use of a building containing one or more areas of public assembly with an occupant load of 100 persons or more (**See Appendix D.**) Describe the proposed use (attach additional sheets if necessary):

Town of Kent
25 Sybil's Crossing
Kent Lakes NY 10512

Application #: 33.33-1-17

OPERATING PERMIT APPLICATION FORM

Part II (continued)

Page 2 of 3

- ☐ Temporary Sales Events (attach a plan drawn to scale showing the general location of the building and / or lot where the temporary sales event is)
- _____
- _____
- ☐ Use of a building whose use or occupancy classification has been determined by Town of Kent Building Department as posing a substantial potential hazard to public safety. **(See Appendix E.)** Describe the proposed use (attach additional sheets if necessary):
- _____
- _____

Part III Premises/Building Information

1. Date of last Inspection of Premises? July 2018.
2. Has a Certificate of Occupancy been issued for the premises?
- ☐ YES Type: ☐ Permanent ☐ Temporary Date of Issuance:
- ☒ NO
3. Date(s) of issuance of previous Certificate(s) of Occupancy? (If any):
4. Are there currently any open Building Permits associated with the premises? ☐ YES ☒ NO
- If yes, please describe (attach additional sheets if necessary):
- _____
- _____
5. Have any violations to the Uniform Code been issued in relation to the Premises? ☐ YES ☒ NO
- If yes, please describe (attach additional sheets if necessary):
- _____
- _____
6. Have any variances to the Uniform Fire Prevention and Building Code been granted in relation to these premises?
- ☐ YES ☒ NO If yes please describe (attach additional sheets if necessary): (Include Variance Decision Number)
- _____
- _____

Town of Kent
25 Sybil's Crossing
Kent Lakes NY 10512

Application #:

33.33-1-19

OPERATING PERMIT APPLICATION FORM

Part III (continued)

Page 3 of 3

7. Additional Comments:

N/A

SIGNATURE OF APPLICANT

I hereby certify that the foregoing information (and all information in attached sheets, if any) is true and complete.

Signature of Applicant or Authorized Representatives Signature

Date

Name (and Title, if applicable of person signing Application (Please print)

Part IV

To be completed by *Town of Kent Building and or Fire Inspector*

Inspection Required ☒ YES

☐ NO

Inspections Performed ☐ YES

☒ NO

Date of Inspection:

N/A

Tests or Reports required verifying compliance?

☐ YES

☐ NO

If YES, have Tests or Reports been received?

☐ YES

☒ NO

Description:

Application(s) Approved:

☒ YES

☐ NO

Operating Permit Issued By: NICHOLAS J. CECERE - FIRE INSPECTOR

Date Operating Permit Issued: JUNE 29, 2019

Date Operating Permit Expires: JULY 7, 2019

Type/Description of Operating Permit: FIREWORKS DISPLAY

Conditions of Operating Permit (list conditions here AND in the space provided in the Operating Permit):

SITE INSPECTION IS REQUIRED DURING SET UP OF DISPLAY & PRIOR TO START OF DISPLAY

Additional Comments:

N/A



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/29/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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

PRODUCER Britton Gallagher One Cleveland Center, Floor 30 1375 East 9th Street Cleveland OH 44114		CONTACT NAME: PHONE (A/C, No, Ext): 216-658-7100 FAX (A/C, No): 216-658-7101 E-MAIL ADDRESS:	
INSURED J & J Computing Inc. dba Fireworks Extravaganza 174 Route 17 North Rochelle Park NJ 07662		INSURER(S) AFFORDING COVERAGE INSURER A: Everest National Insurance Company INSURER B: Maxum Indemnity Company INSURER C: New York State Insurance Fund INSURER D: INSURER E: INSURER F:	
7098		NAIC # 10120 26743	

COVERAGES**CERTIFICATE NUMBER:** 744608896**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			S18ML00022-181	11/9/2018	11/9/2019	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS			S18CA00013 -181	11/9/2018	11/9/2019	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			EXC6017449-08	11/9/2018	11/9/2019	EACH OCCURRENCE \$4,000,000 AGGREGATE \$4,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A		N/A	W21440821 (NY)	5/12/2018	5/12/2019	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$Unlimited E.L. DISEASE - EA EMPLOYEE \$Unlimited E.L. DISEASE - POLICY LIMIT \$Unlimited

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Additional Insured extension of coverage is provided by above referenced General Liability policy where required by written agreement. Lake Carmel Park District, Theater in the Barn, their officers, agents and employees
Town of Kent and the Town of Kent its Board Officers, employees, and volunteers are additional insured as respects a fireworks display on June 29th, 2019 (Rain Date July 7th, 2019) at East Lakeshore Drive Lake Carmel, NY 10512.

CERTIFICATE HOLDER**CANCELLATION**

Town of Kent
Maureen Fleming
25 Sybils Crossing
Kent Lakes NY 10512

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Town of Kent
25 Sybil's Crossing
Kent Lakes NY 10512

Application #: _____

OPERATING PERMIT APPLICATION FORM

Page 1 of 4

Part I Applicant/Building Information

Applicant's Name: Lakeview Community Church
Applicant's Address: 387 Rt 52, Carmel, Ny 10512
Contact Person: Debra Larocchia Telephone: 845 661-2533
Address of Premises for which Operating Permit is requested: ☒ same as above

☐ Other (specify): _____

Tax Map Number: _____ Current Occupancy Class: _____

Part II Type Operating Permit

An Operating Permit is required to conduct any activity or to use any class of building listed below. Please indicate the type(s) of Operating Permit(s) requested by checking each applicable box. (If you require assistance, or would like more information, contact the Town of Kent Building Department at 845-225-3900.

- ☐ Manufacturing, storing or handling hazardous materials in quantities exceeding those listed in Tables 2703.1.1(1), 2703.1.1(2), 2703.1.1(3) or 2703.1.1(4), of the Fire Code of New York State (see 19 NYCRR Part 1225); (See Appendix A.) Identify the materials and quantities and describe the manner in which the materials will be manufactured, stored or handled (attach additional sheets if necessary):

- ☐ Conducting a hazardous process or activity (including but not limited to, any commercial or industrial operation which produces combustible dust as a byproduct, fruit and crop ripening, and waste handling; (See Appendix B.) Describe the process(es) or activity(ies) to be conducted (attach additional sheets if necessary):

- ☐ Use of pyrotechnic devices in assembly occupancies; (See Appendix C.) Describe the proposed use (attach additional sheets if necessary):

- ☐ Use of a building containing one or more areas of public assembly with an occupant load of 100 persons or more (See Appendix D.) Describe the proposed use (attach additional sheets if necessary):

RECEIVED
TOWN OF KENT
BUILDING DEPARTMENT
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Town of Kent
25 Sybil's Crossing
Kent Lakes NY 10512

Application #: _____

OPERATING PERMIT APPLICATION FORM

Part II (continued)

Page 2 of 4

- ☒ Temporary Sales Events (attach a plan drawn to scale showing the general location of the building and / or lot where the temporary sales event is)

Community Tag Sale on Sat. 6/1 with rain date of 6/8 (if needed).

- ☐ Use of a building whose use or occupancy classification has been determined by Town of Kent Building Department as posing a substantial potential hazard to public safety. (See Appendix E.) Describe the proposed use (attach additional sheets if necessary):

Part III Premises/Building Information

1. Date of last inspection of Premises? _____

2. Has a Certificate of Occupancy been issued for the premises?

☐ YES
☐ NO

Type: ☐ Permanent ☐ Temporary

Date of Issuance: _____

3. Date(s) of issuance of previous Certificate(s) of Occupancy? (If any): _____

4. Are there currently any open Building Permits associated with the premises?
If yes, please describe (attach additional sheets if necessary):

☐ YES

☐ NO

5. Have any violations to the Uniform Code been issued in relation to the Premises?

☐ YES

☐ NO

If yes, please describe (attach additional sheets if necessary):

6. Have any variances to the Uniform Fire Prevention and Building Code been granted in relation to these premises?

☐ YES

☐ NO If yes please describe (attach additional sheets if necessary): (Include Variance Decision Number)

Town of Kent
25 Sybil's Crossing
Kent Lakes NY 10512

Application #: _____

OPERATING PERMIT APPLICATION FORM

Part III (continued)

Page 3 of 4

7. Additional Comments:

SIGNATURE OF APPLICANT

I hereby certify that the foregoing information (and all information in attached sheets, if any) is true and complete.

Debra Larocque

Signature of Applicant or Authorized Representatives Signature

4/3/19
Date

Debra Larocque, Church Administrator
Name (and Title, if applicable of person signing Application (Please print)

Part IV

To be completed by Town of Kent Building and or Fire Inspector

Inspection Required ☐ YES ☐ NO

Inspections Performed ☐ YES ☐ NO

Date of Inspection: _____

Tests or Reports required verifying compliance? ☐ YES ☐ NO

If YES, have Tests or Reports been received? ☐ YES ☐ NO
Description: _____

Application(s) Approved: ☐ YES ☐ NO

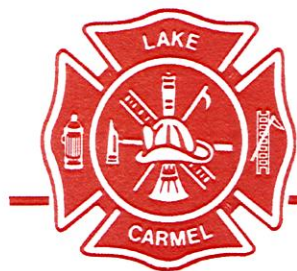
Operating Permit Issued By: _____

Date Operating Permit Issued: _____ Date Operating Permit Expires: _____

Type/Description of Operating Permit: _____

Conditions of Operating Permit (list conditions here AND in the space provided in the Operating Permit):

Additional Comments:



LAKE CARMEL FIRE DEPARTMENT INC.

851 ROUTE 52, CARMEL, NY 10512-9953

March 29, 2019

Yolanda D Cappelli
Town of Kent
25 Sybil's Crossing
Kent Lakes, NY 10512

Dear Ms. Cappelli,

This letter is to inform the town of a correction to our previous notification. Following an audit of the 2018 points system we found that two of our members were incorrectly reported.

Shawn Madsen was not previously on the list of qualified members that was sent to the town in January. Upon review of the points for 2018 Mr. Madsen in fact qualified for 2018

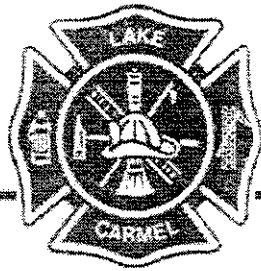
Brendan Tully was on the previous list sent to the town but upon review he didn't qualify for 2018 and his name must be removed.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Wm Walters".

William Walters
President

WW/rsII



LAKE CARMEL FIRE DEPARTMENT INC.

851 ROUTE 52, CARMEL, NY 10512-9953

Yolanda D Cappelli
Town of Kent
25 Sybil's Crossing
Kent Lakes, N Y 10512
Jan. 7, 2018

Ms Cappelli:

We the undersigned certify that the enclosed list includes all members who have successfully qualified for the Service Awards Program for the year 2018. Please have the list approved in writing by the town Supervisor and return all original documentation to the Lake Carmel Fire Department. It will then be forwarded to the plan administrators so that they can update their records.

Thank You


William Walters, President, LCFD


TJ Donohue, Chief, LCFD

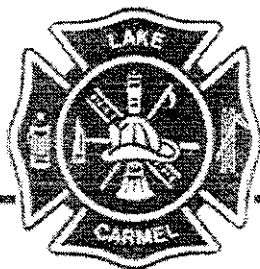

Elizabeth Bachmann, Secretary, LCFD

As per town resolution adopted on Nov. 27, 2018 , the town of Kent accepts the enclosed list for the Service Awards Program for the year of 2018.

I, Yolanda D Cappelli, Town Clerk of the Town of Kent, County of Putnam, State of New York, do hereby certify that this list was accepted by the Town of Kent Board at their meeting of _____ 2018.

Yolanda D Cappelli, Town Clerk

Maureen Fleming, Town Supervisor



LAKE CARMEL FIRE DEPARTMENT INC.

851 ROUTE 52, CARMEL, NY 10512-9953

Members of the Lake Carmel Fire Department who qualified for the Service Awards Program for 2018.

ADAMS, J.
BACHMANN, E.
BELLMIO, T.
BELLMIO, T.A.
BENSON, BOB
BENSON, ROBERT
BENSON, RYAN
BISHOP, M.
BRADSHAW, M.
CECERE, N
CHURCHILL, D.
CRANSTON, J
DELLARIPA, C
DONOHUE, TJ.
DZUBAK, M
EHRET, T
FIORENTINO, V.
FITZSIMMONS, M.
FORBES, W.
FRY, C.
GAFFNEY, J.
GALLAGHER, J.
HALLISEY, E
HAMMOND, D.
HILL, D
KEANE, G.
KECK, E
KEHER, J
LAUNZINGER, K.

LEWIS, C.
LEWIS, J.
LOWNDES, D
MADSEN, L.
MADSEN, M.
McCARTHY, F
MENT, E.
MORIN, R.
NORCINI, J.
O'ROURKE, D.
RIESDORPH, H.
RIVERA, C.
RODDA, M.
RODRIGUEZ, L.
ROSE, J.
ROSE, M.
RYAN, P.
SCHAEFFLER JR, E.
SCHAEFFLER, E.
SCHLEGEL, R.
SCOTT, E.
SHANNON, C.
SHANNON, R. II.
STADLER, L.
SULLIVAN, T.
THARAS, J.
TULLY, B.
WAHLERS, N.
WALTERS, W.

Tamara Harrison

From: Lcpd Clerk
Sent: Thursday, April 11, 2019 10:12 AM
To: Maureen Fleming
Cc: jared kuczenski; Tamara Harrison; Recreation
Subject: Agenda Item: Porta John Quotes for Lake Carmel Park District and Town of Kent Parks and Recreation
Attachments: 2019 Porta John Quotes.pdf

I would like to have the attached quotes from Royal Flush and Reliable Onsite placed on the next town board agenda for review. Quotes were also requested from A1/A-John and Danbury Porta Potty Crew but were not received.

I am requesting that Royal Flush be hired as the vendor for both the Lake Carmel Park District and the Parks and Recreation Department.

Thank you.



Heidi Link

Town of Kent, NY

Lake Carmel Park District Clerk

25 Sybil's Crossing

Kent Lakes, NY 10512

Telephone: (845) 306-5602

Fax: (845) 225-5130

lcpdclerk@townofkentny.gov

www.townofkentny.gov/lcpd_home.htm

Park District #1 (Lake Carmel)						Recreation Department						
Lake Carmel Beach			Parks Garage		Edward Ryan Memorial Park		Huestis Park		Additional Units, Repairs & Cleanings			
Beach #3	Beach #7	Beaches #2	Beaches #4	Maintenance Garage	Location: TBD	Location: by permanent restrooms	Location: inside fenced field area by entrance gate (requires recreation personnel for delivery)	Extra unit for special events	Extra portable sink, soap & paper towels for special events	Extra maintenance, minor repairs (incl. parts) cost under \$100.00	Extra cleaning per unit	
Intersection of Lakeshore Dr East & Brewster Rd	Intersection of West Lakeshore Dr & Gilead Rd	Intersection of Lakeshore Dr East & Briarcliff Rd	Intersection of Lakeshore Dr East & Salem Rd	8 Champlain Dr	43 Park Rd		178 Farmers Mills Rd					
(2 units) cleaned twice/wk	(1 unit) cleaned twice/wk	(1 unit) cleaned once/wk	(1 unit) cleaned once/wk	(1 unit) cleaned once/wk	(1 unit) cleaned once/wk	(1 unit) cleaned once/wk	(1 unit) cleaned once/wk					
Total seasonal units (5) with locks - Units placed June 1 thru Labor Day				Year Round	May 1 - Nov. 15	Year Round	May 1 - Nov. 25	Year Round				
Royal Flush	\$70.00	\$70.00	\$55.00	\$55.00	\$55.00	\$55.00	\$55.00	\$90.00	\$60.00	\$25.00	\$15.00	
Reliable Onsite	\$316.00	\$158.00	\$70.00	\$70.00	\$70.00	\$70.00	\$70.00	\$85.00	\$95.00	No Charge	\$22.00	
AJ/A John	NOT RECEIVED											
Danbury Porta Potty Crew	NOT RECEIVED											

Tamara Harrison

From: Lcpd Clerk
Sent: Friday, April 12, 2019 10:43 AM
To: Maureen Fleming
Cc: Tamara Harrison
Subject: Cowboy Sand - Lake Carmel Beaches
Attachments: Sand Prices 2019.xlsx; 2019 Cowboy Sand Quotes.pdf

I have received quotes for the delivery of cowboy sand for the beaches in Lake Carmel. I ask that the quotes (attached) be placed on the next agenda for review by the town board. The lowest quote received is from Stroker Trucking and therefore recommend them for delivery of sand this year in Lake Carmel.

Thank you.



Heidi Link

Town of Kent, NY Lake Carmel Park District Clerk

25 Sybil's Crossing

Kent Lakes, NY 10512

Telephone: (845) 306-5602

Fax: (845) 225-5130

lcpdclerk@townofkentny.gov

www.townofkentny.gov/lcpd_home.htm

DATE Beach Sand for Lake Carmel Park District
4/12/2019 Cowbay Sand 1 mil - 70 yards total

		<u>\$ Amount Per</u> <u>Yard/Ton</u>	<u>Total # of</u> <u>Yards</u>	<u>Total \$/</u> <u>Delivered</u>
James Belsha Stroker Trucking	40 Middle Island Blvd, Middle Island, NY 11953	\$48/Yard	70	\$3,360.00
East Fishkill Garden Supply	204 NY-216, Stormville, NY 12582	\$/Yard	70	No quote recvd
Red Wing Sand & Gravel	2332 NY-82, Billings, NY 12510	\$56/ton	70	\$4,900.00
		\$ x 1.25 = \$70 x 70 yards		
Westhook Sand & Gravel	25 W Hook Rd, Hopewell Junction, NY 12533	\$54/ton \$ x 1.25 = \$67.50 x 70 yards		\$4,725.00

Loose Sand Conversion Rate: 1.25 1.25 Tons = 1 Yard
--

JAMES BELSHA
STROKER TRUCKING
40 MIDDLE ISLAND BLVD.
MIDDLE ISLAND, NY 11953
631-924-4674
516-852-9303 CELL
631-205-1381 FAX

TO: Town of Kent Lake Carmel
FROM: Stroker Trucking
RE: 70yds Cow Bay Sand \$48.00 per yael
DATE: 3/31/19

owner of Stroker Trucking

James H. Belsha

Town of Kent

Fax # / 845 225 5130

Lcpd Clerk

From: Linda Rhoades <westhooksand@aol.com>
Sent: Thursday, April 11, 2019 12:22 PM
To: Lcpd Clerk
Subject: Re: Town of Kent Lake Carmel Park District - Cowboy Sand

HEIDI..I WOULD LIKE TO GIVE YOU A PRICE.WESTHOOK CAN DO IT TO YOUR LOCATION FOR 54.00 PER TON....LET ME KNOW WHEN YOU NEED IT AND I CAN SET IT UP NO PROBLEM! THANKS...

FOR
Linda Rhoades
845-897-3316
westhooksandandgravel.com

-----Original Message-----

From: Lcpd Clerk <lcpdclerk@townofkentny.gov>
To: Linda Rhoades <westhooksand@aol.com>
Sent: Thu, Apr 11, 2019 10:19 am
Subject: FW: Town of Kent Lake Carmel Park District - Cowboy Sand

Please let me know if you are interested in submitting a quote.



www.townofkentny.gov/lcpd_home.htm

From: Lcpd Clerk
Sent: Thursday, March 28, 2019 9:03 AM
To: 'Linda Rhoades' <westhooksand@aol.com>
Subject: Town of Kent Lake Carmel Park District - Cowboy Sand

The Lake Carmel Park District (Town of Kent, NY) is looking for quotes for 70 yards of cowboy sand with delivery (2 truckloads) to Lake Carmel. Would you please let me know if you are interested in providing a price for sand including delivery?

Thank you.





Red Wing
PROPERTIES INC

675 Leetown Road, P.O. Box 408, Stormville, NY 12582
Office: (800) 724-8193 (845) 221-2224 Fax: (845) 221-0433
www.redwingsandandgravel.com

QUALITY CONSTRUCTION AGGREGATES

April 11, 2019

Heidi Link
Town of Kent, NY
Lake Carmel Park District

RE: Quote- Cowboy Sand

Dear Ms. Link,

Red Wing Properties proposes the following:

Cowboy Sand- \$56.00 per ton delivered to Carmel, NY

Regards,

Frank J. Doherty Jr.
President

ESTABLISHED IN 1969

Tamara Harrison

From: Brett Harrison
Sent: Monday, April 22, 2019 2:57 PM
To: Chris Ruthven; Lcpd Clerk; Maureen Fleming; Tamara Harrison
Subject: New Applicant

PUTNAM COUNTY NOTICE

THIS EMAIL IS FROM AN EXTERNAL SENDER! DO NOT click links, DO NOT open attachments, DO NOT forward if you were not expecting this email or if it seems suspicious in any way! REMEMBER: NEVER provide your user ID or password to anyone for any reason!

To Whom It May Concern,

It has come to our attention that Mr. Walter Recher would like to join the Lake Carmel Park District Advisory Board. Walter is a long time resident of Lake Carmel and an active volunteer at many of our events. He frequently attends our monthly meetings and always has valuable information from residents to share with us. We believe that Walter would be an excellent addition to our board and would recommend that the Town Board accept his application. Thank you for your consideration.

Regards,
Brett Harrison
Chairman, Lake Carmel Park District Advisory Board

--

Regards,
Brett H.

RECEIVED
KENT TOWN CLERK
2019 APR 05 PM 12:00

April 4, 2019

To: Kent Town Board and Lake Carmel Advisory Board Members
From: Walter J. Recher
Subject: Application Letter for Lake Carmel Advisory Board Membership

To all,

I submit for your review and consideration my application letter to join the Lake Carmel Park District Advisory Board.

As a long-time resident who was raised here in Lake Carmel and returned to live in the community 20 years ago, I have demonstrated a long-term commitment to my fellow residents to help improve the overall quality of life here in our town.

Over the past 20 years, I have committed many hours of my time to help in these efforts, working closely with the Lake Carmel Advisory Board, along with family and friends who have been involved in a variety of community events, including the annual Lake Carmel Summer Festival, Kent Cleanup Day, the Holiday Tree Lighting, July 4th Fireworks on the Lake, our Memorial Day and Veterans Day events at Lake Carmel, and the "Lake Carmel Rocks" event at the Lake Carmel Community Center.

I have also volunteered to support other important Town of Kent and Lake Carmel programs, including coaching over 20 Kent Rec sports teams, developing the Great Lake Carmel Cleanup Day Competition for local kids and developing sponsorship through local merchants, volunteering with Arts on the Lake on their Summer Concert series, cleanup efforts, and organizing teen programs, serving on the Kent Beautification Committee, and volunteering to develop a teen program at the Kent Community Center.

As I have attended and participated in virtually every Lake Carmel Park District Advisory Board meeting over the past 5 years, I have developed a clear understanding of the roles and responsibilities of being a board member, and I am well-prepared to engage with fellow LCPDA Board members to help with any and all activities, and in developing plans and initiatives that will be recommended to the Town Board.

In summary - I am very passionate about the importance of community service, and I believe apply my experience, energy and enthusiasm will be an asset to the Lake Carmel Park District Advisory Board in helping to review and recommend projects, programs and capital investments that will enhance and improve the quality of life for our residents. Moving forward, I will work tirelessly to engage friends, family, neighbors and fellow residents to volunteer and join us.

I am available to meet with you to at your earliest convenience to review my application and look forward to your response.

Thank you for your consideration.

Sincerely,

Walter J. Recher



Dorian D'Ausilio <doriandausilio@gmail.com>

Northeastern Aquatics Carp Pricing

2 messages

Carol Smith <clarksmithonriver@msn.com>
To: "doriandausilio@gmail.com" <doriandausilio@gmail.com>

Wed, Mar 27, 2019 at 6:49 PM

Hi Dorian,

Thanks for contacting me today. I generally have triploid grass carp available from early April until the end of November, but earlier season stockings are almost always preferable in my opinion.

Late May through June would be nearly ideal.

The fish are in a 11-12" average length range, which is large enough so that predation by other fish such as bass or pickerel is generally not a significant problem. Herons, ospreys, eagles and otters can still tackle them, but this is usually not too much of a concern in larger lakes.

Here is a quote based on various stocking numbers:

200-249 fish	\$13.00ea.
250-299 "	12.50ea.
300-349 "	12.00ea.
350-399 "	11.00ea.

The fish would be delivered to your site(s) at Lake Tibet at no additional charge.

Good luck with the project, and let me know if I can provide any other information.

John W. Clark
Northeastern Aquatics
845 876-3983

Dorian D'Ausilio <doriandausilio@gmail.com>
To: laketibetny@gmail.com

Wed, Mar 27, 2019 at 9:01 PM

Carp quote #1.
[Quoted text hidden]





Dorian D'Ausilio <doriandausilio@gmail.com>

Quote for Triploid Grass Carp - Lake Tibet Association - Town of Carmel1 message

Capella, Gary - NRCS-CD, Highland, NY <Gary.Capella@ny.nacdnet.net>

Mon, Apr 1, 2019 at 3:31 PM

To: "doriandausilio@gmail.com" <doriandausilio@gmail.com>

Hello Dorian,

As per our phone discussion, the Ulster County Soil and Water Conservation District offers Carp and other stocking fish on a one time basis each year.

This year's Distribution Day is Saturday June 1st, from 10:00 – 11:30am. The carp sell for \$20 each, as shown on our attached 2019 Order Form.

Additional information regarding the sale can be found on the District Website at: www.ucswcd.org.

Thank you for your interest in our sale.

Sincerely,

Gary Capella

Ulster County Soil and Water Conservation District.

This electronic message contains information generated by the USDA solely for the intended recipients. Any unauthorized interception of this message or the use or disclosure of the information it contains may violate the law and subject the violator to civil or criminal penalties. If you believe you have received this message in error, please notify the sender and delete the email immediately.

 **2019 Fish Order Form.pdf**
15K

Quote #2

2019 Fish Order Form

QUANTITY:

COST:

_____ Largemouth Bass (4"-6")	25 @ \$ 75.00	
	50 @ \$144.00	\$ _____
_____ Largemouth Bass (6-8")	25 @ \$109.00	
	50 @ \$214.00	\$ _____
_____ Catfish (6-8")	25 @ \$ 44.00	
	50 @ \$ 86.00	\$ _____
_____ Rainbow Trout (4-6")	25 @ \$ 52.00	
	50 @ \$100.00	\$ _____
_____ Crayfish	50 @ \$ 22.00	
	100 @ \$ 38.00	\$ _____
_____ Fathead Minnows	100 @ \$16.00	\$ _____
_____ Sterile Grass Carp (10-14") <i>Permit Required</i>	@ \$ 20.00 ea.	\$ _____

(above prices include sales tax)

TOTAL: \$ _____

NAME : _____

ADDRESS: _____

TELEPHONE:(day) _____ (evening) _____

Please make check payable to **Ulster Co. SWCD** and enclose with your order and send to:
Ulster Co. SWCD
5 Park Lane
Highland, NY 12528

TEAR OFF AND KEEP THIS INFORMATION

Order Deadline: Friday, May 24, 2019

Pick up Date: Saturday, June 1, 2019
Parking Lot of SWCD Office,
5 Park Lane, Highland, NY
Call for directions.
Tel: 883-7162, Ext 102.

Pick up Time: 10:00 a.m. – 11:30 a.m.

NOTE: If you are buying carp, you must have your approved permit from the DEC with you in order to pick up your fish. Please fill out the enclosed application immediately and mail it to the NYS-DEC at 21 South Putt Corners Road, New Paltz, New York 12561. Please do not delay, as the DEC is usually quite busy at this time of year. Contact the DEC Inland Fisheries Division at **845/256-3161** if you have questions regarding application, permit, pond or fish. **Thank you for your support.**



Dorian D'Ausilio <doriandausilio@gmail.com>

grass carp quote

2 messages

Lisa Schick <lisaschick@liberty.twcbc.com>
To: doriandausilio@gmail.com

Tue, Apr 2, 2019 at 10:02 AM

Hi Dorian,

Thank you for your interest in our fish stocking program. The cost of our grass carp is \$20 each, 300 carp would total \$6,000.00.

You would also have to come here to our office in Liberty to pick up the fish.

Kind regards,

Lisa Schick,

Sullivan County Soil & Water Conservation District

Dorian D'Ausilio <doriandausilio@gmail.com>
To: laketibetny@gmail.com

Tue, Apr 2, 2019 at 10:03 AM

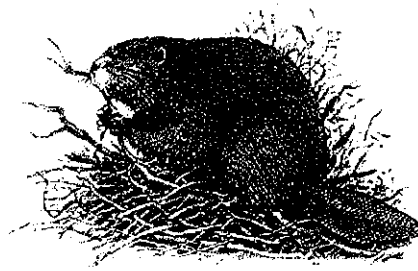
For our records... thanks.
[Quoted text hidden]

Quote #3

NY Wildlife Control

148 Fairways Crescent
Carmel, NY 10512

914 494 6253
nywildlifecontrol@gmail.com



Proposal / Work order
Lk. Tibet 002

Town of Kent
25 Sybil's Crossing
Kent lakes, NY 10512

April 19, 2019 (Friday)

Re: Beaver damage control at Lake Tibet, Kent Park District #2

- (1) Scout and evaluate beaver habitation within the lake and assess an approximate population residing within the Lake community.
- (2) Develop and maintain an adaptable plan to fulfill the requirements of the issued NYS/DEC Beaver Damage Permit to the Town of Kent for the purpose to remedy any further Beaver damage to foliage, timber and the debris blocking of the lakes spillway.
- (3) For purposes of maintaining an environment conducive to the efficient capture and minimization of beaver damage the spillway gate will have to be monitored for flow rate so that beaver activity may be induced, at specific times, based on an adaptation of methods for their capture.
- (4) Proof of capture and final remediation, as per the Permit requirements, shall be available (via photo's) upon request by the Community Board President at any time.

Total Cost : \$2850.00

Deposit upon acceptance of agreement to perform: \$ 1350.00

Balance due within 30 days of completion of all items noted above : \$ 1500.00

Total: \$ 2850.00

Frederick Manger

Approved/ Dated: X_____

NYSDEC NWCO

RECEIVED
KENT PARK DISTRICT #2
2019 APR 22 AM 11:00

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Fish and Wildlife, Bureau of Wildlife, Region 3
21 South Putt Corners Rd., New Paltz, NY 12561
P: (845) 256-3098 ext.
www.dec.ny.gov

REG YEAR PERMIT #

3	2019	11151
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NUISANCE BEAVER PERMIT

Pursuant to Environmental Conservation Law 11-0521

ISSUED TO:

Dorian D'Ausilio	Lake Tibet Park District #2
365 Pudding Street	Home: (845) 282-8209
Carmel, NY 10512	Cell: (914) 841-3079
	Email: doriand@us.ibm.com

LOCATION OF PROBLEM:

1. County: Putnam, Town: Carmel, 365 Pudding Street, WMU: 3N, Watercourse: Wetland ID: OI-63,
Peekskill Hollow Creek

NATURE OF COMPLAINT:

Commercial

ACTIONS AUTHORIZED:

Agents certified by DEC may use cable restraints, Disturb/remove beaver dam, Disturb/remove beaver lodge, Lethal removal (firearm), Lethal removal (trapping)

Issue Date: 4/10/2019	Other Permits Issued Pursuant to General	Issuing Agent:
Expiration Date: 12/31/2019	Permit GP-0-16-004: <input checked="" type="checkbox"/> Article 15 <input checked="" type="checkbox"/> Article 24	Rebecca Linkiewicz

AGREEMENT TO CONDITIONS

Failure to comply with the conditions of this permit may result in denial of future permits and may be considered a violation of New York State law. This permit may be revoked at any time.

I have read and fully understand the enclosed conditions of this permit.

Permittee Signature: _____ Date: _____



Department of
Environmental
Conservation

RECEIVED
NEW YORK STATE
2019 APR 22 AM 11:00

STANDARD CONDITIONS

1. In executing this permit you and/or your agent(s) must obey all Federal, State and local laws, regulations, and ordinances governing such actions (e.g., off-set 330 trigger, firearms discharge, trap-setting, and trap-tagging requirements) and obtain any additional permits or authorizations as required.
2. This permit does not authorize you and/or your agent(s) to trespass. This permit is valid for the location owned by the person the permit is issued to or in their right-of-way only.
3. You and/or your agent(s) must possess on your person a copy of this permit while executing this permit.
4. Agents setting traps must have a NYS Trapping License, Trapper Education Certificate, or a Nuisance Wildlife Control Operator License. Agents discharging a firearm must have a NYS Hunting License, Hunter Education Certificate or certificate of safe firearms training. Landowners are exempt from these conditions on their own land.
5. When removing a beaver dam, water levels above and below must be equalized by slow and partial breaching before the entire dam is removed.
6. All incidental captures of river otter in a closed area or outside of an open season must immediately be reported to the Regional Wildlife Office for further direction.
7. This permit does not allow for the grading, filling, excavation, or permanent alteration of any NYS-regulated wetland or protected stream unless authorized.
8. This permit may be renewed or revoked at any time by the Department.
9. You and/or your agent(s) may keep/sell beaver pelts from the start of the legal trapping season until May 15. Outside of these dates beaver must be buried.

REMARKS

1. DEC encourages the trapping of beavers during the fall/winter beaver trapping season.



Department of
Environmental
Conservation

New York State Department of Environmental Conservation

Permit under the Environmental Conservation Law (ECL) Article 24 Freshwater Wetlands;
Article 15, Title 5 Stream Disturbance; Article 15, Title 5 Excavation & Fill in Navigable Waters;
Section 401 Clean Water Act Water Quality Certification

GENERAL PERMIT GP-0-16-004 - Breaching/Removal of Beaver Dams no more than 2 years old

NYSDEC Approval

General Permit Authorized Activity: Breaching or removal of beaver dams no more than 2 years old. This permit is applicable to regulated freshwater wetlands, including the wetland adjacent area, and to protected and navigable waterways throughout New York State, excluding New York City, and Long Island.

This permit is only valid when issued concurrently with an ECL Article 11-0521 Nuisance Beaver Permit, which will specify authorization to breach or remove the beaver dam. This permit expires concurrently with the Nuisance Beaver Permit.

By acceptance of this permit, the permittee agrees that the permit is contingent upon strict compliance with the ECL, all applicable regulations, and all conditions included as part of this permit.

General Permit Authorized by: Stuart M. Fox, Deputy Chief Permit Administrator,
Permit Signed /s/ July 14, 2016
NYSDEC Division of Environmental Permits, 625 Broadway, Albany, NY 12233-1750

PERMIT CONDITIONS

1. Water levels within the beaver impoundment shall be lowered by slow and partial breaching.
2. Disturbances to the beaver dam shall be limited to the minimum necessary to lower the impoundment. Disturbances to other portions of the protected stream or wetland are prohibited.
3. Unless the accompanying Nuisance Beaver Permit authorizes use of machinery, all work must be undertaken using hand methods only.
4. If machinery is authorized, the bed or banks of the stream must not be disturbed during dam work. Machinery shall not be allowed in the stream, or on its banks where it may cause the bank to collapse. All off-road machinery shall be tracked or have low ground pressure tires.
5. To prevent the unintentional introduction or spread of invasive species, all equipment must be cleaned of mud, seeds, vegetation and other debris before entering the work area.
6. All machine-excavated beaver dam material shall be disposed of at an upland site outside the wetland and be suitably stabilized so that it cannot re-enter any waterbody, waterway or wetland area.
7. Any fish remaining in the dewatered area shall be returned to the stream, lake or wetland.
8. The permittee is responsible for supervising this project, and shall ensure that all necessary measures are employed to prevent environmental degradation and to ensure successful mitigation.
9. All necessary precautions shall be taken to preclude contamination of any wetland or waterway by suspended solids, sediments, fuels, solvents, lubricants, epoxy coatings, paints, concrete, leachate or any other environmentally deleterious materials associated with the project.
10. There shall be no unreasonable interference with navigation by the work herein authorized.
11. The State of New York (State) shall in no case be liable for any damage or injury to the structure or work herein authorized which may be caused by or result from future operations undertaken by the State for the conservation or improvement of navigation, or for other purposes, and no claim or right to compensation shall accrue from any such damage.
12. If future operations by the State require an alteration in the position of the structure or work herein authorized, or if, in the opinion of the Department of Environmental Conservation (Department) it shall cause unreasonable obstruction to the free navigation of said waters or flood flows or endanger the health, safety or welfare of the people of the State, or cause loss or destruction of the natural resources of the State, the owner may be ordered by the Department to remove or alter the structural work, obstructions, or hazards caused thereby without expense to the State, and if, upon the expiration or revocation of this permit, the structure, fill, excavation, or other modification of the watercourse hereby authorized shall not be completed, the owners, shall, without expense to the State, and to such extent and in such time and manner as the Department may require, remove all or any portion of the uncompleted structure or fill and restore to its former condition the navigable and flood capacity of the watercourse. No claim shall be made against the State on account of any such removal or alteration.
13. If upon the expiration or revocation of this permit, the project hereby authorized has not been completed, the applicant shall, without expense to the State, and to such extent and in such time and manner as the Department may require, remove all or any portion of the uncompleted structure or fill and restore the site to its former condition. No claim shall be made against the State on account of any such removal or



Department of
Environmental
Conservation

alteration.

14. The authorized project, as conditioned pursuant to the Certificate, complies with Section 301, 302, 303, 306, and 307 of the Federal Water Pollution Control Act, as amended and as implemented by the limitations, standards, and criteria of state statutory and regulatory requirements set forth in 6 NYCRR Section 608.9(a). The authorized project, as conditioned, will also comply with applicable New York State water quality standards, including but not limited to effluent limitations, best usages and thermal discharge criteria, as applicable, as set forth in 6 NYCRR Parts 701, 702, 703, and 704.

GENERAL CONDITIONS

1. Facility Inspection by The Department. The permitted site or facility, including relevant records, is subject to inspection at reasonable hours and intervals by an authorized representative of the Department to determine whether the permittee is complying with this permit and the ECL. Such representative may order the work suspended pursuant to ECL 71- 0301 and SAPA 401(3). The permittee shall provide a person to accompany the Department's representative during an inspection to the permit area when requested by the Department.
A copy of this permit must be available for inspection by the Department at all times at the project site. Failure to produce a copy of the permit upon request by a Department representative is a violation of this permit.
2. Relationship of This Permit to Other Department Orders and Determinations. Unless expressly provided for by the Department, issuance of this permit does not modify, supersede or rescind any order or determination previously issued by the Department or any of the terms, conditions or requirements contained in such order or determination.
3. Applications for Permit Renewals, Modifications or Transfers. The permittee must request any permit renewal, modification or transfer of this permit. Any renewal, modification or transfer granted by the Department must be in writing.
4. Permit Modifications, Suspensions and Revocations by the Department. The Department reserves the right to modify, suspend or revoke this permit.

NOTIFICATION OF OTHER PERMITTEE OBLIGATIONS

1. Item A: Permittee Accepts Legal Responsibility and Agrees to Indemnification. The permittee, excepting state or federal agencies, expressly agrees to indemnify and hold harmless the Department, its representatives, employees, and agents ("DEC") for all claims, suits, actions, and damages, to the extent attributable to the permittee's acts or omissions in connection with the permittee's undertaking of activities in connection with, or operation and maintenance of, the facility or facilities authorized by the permit whether in compliance or not in compliance with the terms and conditions of the permit. This indemnification does not extend to any claims, suits, actions, or damages to the extent attributable to DEC's own negligent or intentional acts or omissions, or to any claims, suits, or actions naming the DEC and arising under Article 78 of the New York Civil Practice Laws and Rules or any citizen suit or civil rights provision under federal or state laws.
2. Item B: Permittee's Contractors to Comply with Permit. The permittee is responsible for informing its independent contractors, employees, agents and assigns of their responsibility to comply with this permit, including all special conditions while acting as the permittee's agent with respect to the permitted activities, and such persons shall be subject to the same sanctions for violations of the Environmental Conservation Law as those prescribed for the permittee.
3. Item C: Permittee Responsible for Obtaining Other Required Permits. The permittee is responsible for obtaining any other permits, approvals, lands, easements and rights-of-way that may be required to carry out the activities that are authorized by this permit.
4. Item D: No Right to Trespass or Interfere with Riparian Rights. This permit does not convey to the permittee any right to trespass upon the lands or interfere with the riparian rights of others in order to perform the permitted work nor does it authorize the impairment of any rights, title, or interest in real or personal property held or vested in a person not a party to the permit.



Department of
Environmental
Conservation

CERTIFICATE OF LIABILITY INSURANCE

04/19/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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

PRODUCER Select Insurance Agency, Inc. 676A White Plains Rd. Scarsdale, NY 10583-5008	914-395-3131	CONTACT Certificate Department PHONE (A/C, No, Ext): 914-395-3131 FAX (A/C, No): 914-395-0200 E-MAIL ADDRESS: Certificates@selectagency.com														
INSURED Fredrick J. Manger dba NY Wildlife Control 148 Fairway Crescent Carmel, NY 10512		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A: Markel Insurance Company</td> <td>38970</td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Markel Insurance Company	38970	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #															
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INSURER C:																
INSURER D:																
INSURER E:																
INSURER F:																

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE		ADDL INSD	SUBR WYD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X	COMMERCIAL GENERAL LIABILITY			PCG20036692-02	02/17/2019	02/17/2020	EACH OCCURRENCE	\$ 1,000,000
		CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
								MED EXP (Any one person)	\$ 5,000
								PERSONAL & ADV INJURY	\$ 1,000,000
								GENERAL AGGREGATE	\$ 2,000,000
		GEN'L AGGREGATE LIMIT APPLIES PER						PRODUCTS - COMPROP AGG	\$ 2,000,000
	X	POLICY		PROJECT	X	LOC			
		OTHER:							
		AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
		ANY AUTO OWNED AUTOS ONLY						BODILY INJURY (Per person)	\$
		HIRED AUTOS ONLY						BODILY INJURY (Per accident)	\$
								PROPERTY DAMAGE (Per accident)	\$
									\$
		UMBRELLA LIAB						EACH OCCURRENCE	\$
		EXCESS LIAB						AGGREGATE	\$
		DED							\$
		RETENTION \$							\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE	OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT	\$
		If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$
								E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Project location:
 Lake Tibet
 Kent Park District #2

RECEIVED
 2019 APR 22 AM 11

CERTIFICATE HOLDER <div style="text-align: center;">TOWN061</div> Town of Kent 25 Sybil's Crossing Kent Lakes, NY 10512	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <div style="text-align: center;"> </div>
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Tamara Harrison

From: Recreation
Sent: Monday, April 22, 2019 12:26 PM
To: Tamara Harrison
Subject: Start Smart Assistants

Tamara,

As per our discussion on Friday morning, I would like to bring on the following people as Start Smart assistants for the remainder of 2019:

DeSalvo, Adrianna
Garcia, MaryJo
Maguire, Tyler

I'd like to request that they be approved at the current rate of \$20.00 per Start Smart session worked.

If this item could be addressed at the board meeting tomorrow, Tuesday the 23rd, that would be greatly appreciated.

Thank you and please let me know if you require anything further.

Jared Kuczenski

*Acting Director of Rec & Parks
Kent Recreation & Parks
845-531-2100*

Tamara Harrison

From: Recreation
Sent: Monday, April 22, 2019 1:42 PM
To: Tamara Harrison
Subject: Hiring of Season Employee
Attachments: Application - Arvoy.pdf

Tamara,

As per our discussion on Friday, I would like to bring back James Andrew Arvoy as a seasonal employee for the spring, summer and early fall at a pay rate of \$11.50 per hour on weekdays and \$15.00 per hour on Saturdays and Sundays. His weekly hours will not exceed 40.

James is a returning employee, nonetheless I have attached his application to this e-mail should you need it.

Thank you and please let me know if you require anything further.

Jared Kuczenski

*Acting Director of Rec & Parks
Kent Recreation & Parks
845-531-2100*

Tamara Harrison

From: Lana Cappelli
Sent: Monday, April 22, 2019 1:39 PM
To: Tamara Harrison; Nancy Tagliaferro; Bill Huestis; Chris Ruthven; Jaime Mcglasson; Maureen Fleming; Paul Denbaum
Subject: ROA Wilhelm
Attachments: DOC042219.pdf

To All,

I hope everyone had a wonderful Easter holiday with their family and friends.

I received notification from NYS Local Retirement System that Stephen Wilhelm's ROA reporting needs to be adjusted from 2.56 to 2.62. It is a small change but it does requires a resolution. Please see attached.

Yolanda "Lana" Cappelli

Kent Town Clerk
25 Sybil's Crossing
Kent Lakes, NY 10512
845/225-2067 Telephone
845/306-5282 Fax
lcappelli@townofkentny.gov
www.townofkentny.gov

Resolution # Revise the Standard Work Day for Elected & Appointed Officials - Wilhelm

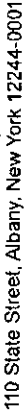
On a motion by Councilwoman McGlasson

Seconded by Councilwoman Woolley

WHEREAS, the Town of Kent had established a standard work day for its elected & appointed officials;

NOW, THEREFORE, BE IT RESOLVED, that the Town of Kent hereby wishes to revise the standard work days for its elected and appointed officials as set forth on the attached schedule and will report days worked to the New York State and Local Employee's Retirement System based on the time keeping system or the record of activities maintained and submitted by these members to the clerk of this body.

Motion carried unanimously



RS 2417-A
(Rev. 8/15)

will report the officials to the New York State and Local Retirement System based on their record of activities:

SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the _____
of _____, 20_____, _____
(Town of Kent
(Name of Employer))

_____ on this _____ day _____

(Signature of the secretary or clerk)

☐ Employer's website at _____

☐ Official sign board at _____

☐ Main entrance secretary or clerk's office at _____

Page _____ of _____ (for additional rows, attach a RS2417-B form).



CODE ENFORCEMENT

OF THE TOWN OF KENT, PUTNAM COUNTY, N.Y. 10512
845-306-5598

April 10, 2019

From: Zoning Enforcement Officer, Town of Kent:
To: Supervisor Fleming, Town board members, Town of Kent:
Subject: Violations requiring town corrective action:

Enclosed please find violation issued by the undersigned and bids for correction.

Location requiring correction and lowest bid for site:
115 Putnam Drive: \$1500.00

Site owners have not responded to Notices of Violation.

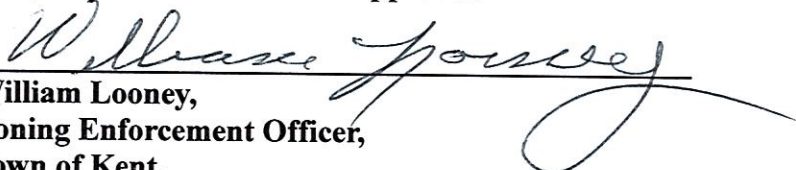
The above stated bid has been proposed by FI Adams, Inc.

Mahopac Scape's submitted a bid in the amount of \$2500.00

ATS Landscaping and Property Maintenance failed to submit a bid.

All submitted bids are enclosed.

For your consideration and approval:


William Looney,
Zoning Enforcement Officer,
Town of Kent.



Mahopac Scape's Price List 2019

12.	Seeding/Aeration	\$
13.	Rubbish Removal	\$1,650.00
14.	Business Expenses	\$ 300.00
15.	24 Hour Emergency Storm Services	\$
Total:		\$ 2,500.00

- Lawn Care is not included in the Spring clean up total. It appears on the invoice to indicate the cost for the 2019 season. Lawn Care will be provided based on the homeowner's needs.
- Please remember we are always available 24hrs a day 365!

Mahopac Scape's

Philip Scuderi: 914 424-6253
philips@mahopacscares.com

2019 Spring and Fall Season

610 Route 292
Holmes, NY 12531 Fiadamsinc@gmail.com
(845)-855-3733 (914)760-8959

FI Adams, Inc.

Estimate

For: Town of kent
kentcodes@gmail.com
115 Putnam Dr
Carmel, NY, 10512

Estimate No: 245
Date: 04/10/2019

Description	Quantity	Rate	Amount
Clean up trash around house located at 115 Putnam drive, Carmel and haul away.	1	\$1,500.00	\$1,500.00

Subtotal	\$1,500.00
TAX 0%	\$0.00
Total	\$1,500.00

Total	\$1,500.00
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**CODE ENFORCEMENT
OF
THE TOWN OF KENT, PUTNAM COUNTY, N.Y. 10512
845-306-5598
KENTCODES@GMAIL.COM
ORDER TO REMEDY VIOLATION**

COPY

Location: 115 Putnam Dr Kent, NY 10512

Map NO: 22.58-1-29

March 14, 2019

TO:

**Rose Acceptance Inc.
241 East Saginaw
East Lansing
MI 48823**

PLEASE TAKE NOTICE: THERE EXISTS A VIOLATION OF:

Town of Kent Municipal Code\Chapter 55 A Property Maintenance Code\Section 11 Subs B-1-A- Rubbish

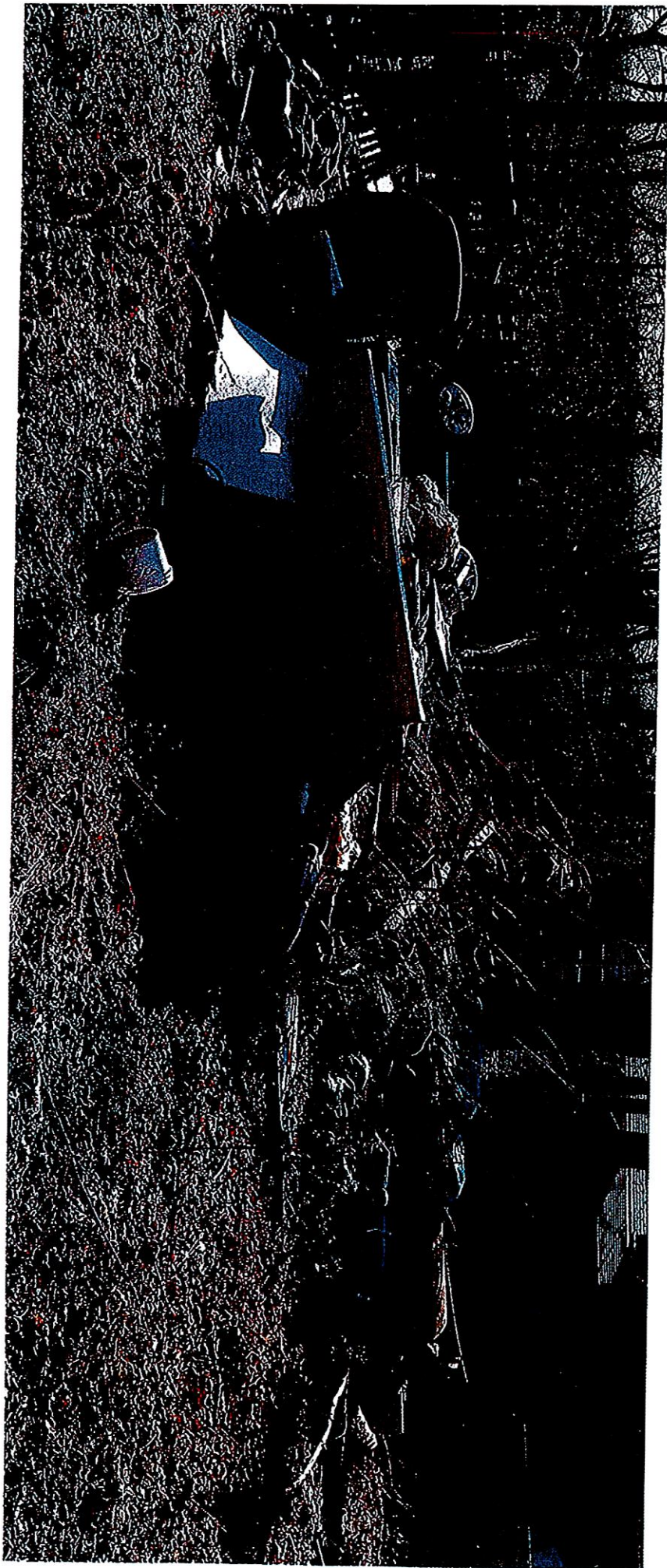
at premises hereinafter described in that:

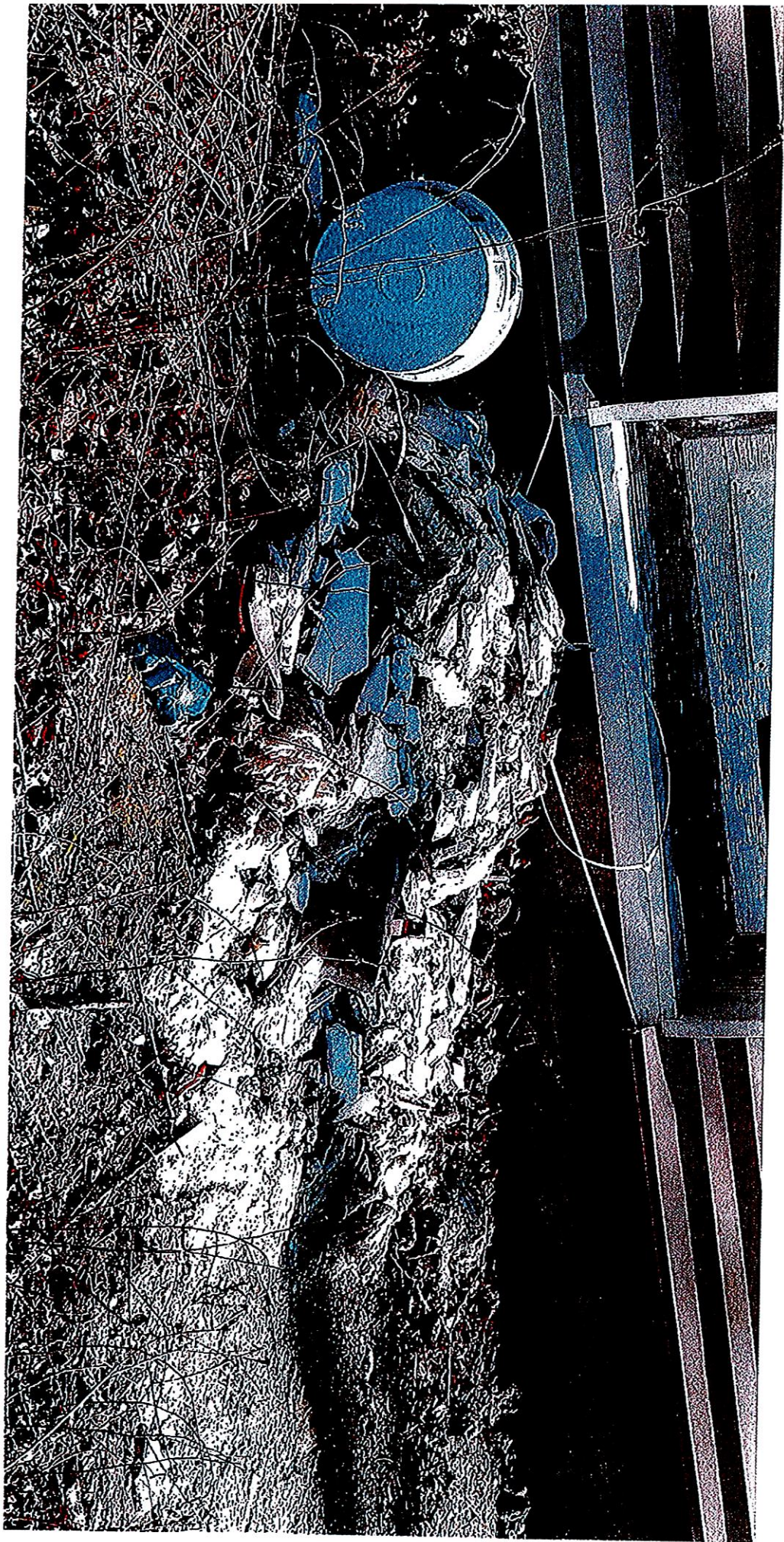
**RUBBISH: OWNER/AGENT HAS FAILED TO MAINTAIN SITE FREE OF RUBBISH AS DESCRIBED BY CODE.
OWNER/AGENT MUST REMOVE ALL SUCH DESCRIBED DEBRIS FROM SITE.**

OWNER/AGENT MUST NOTIFY THIS OFFICE WITHIN TEN DAYS OF A PROPOSAL TO REMEDY THE AFOREMENTIONED VIOLATION. IF THE REMEDY IS NOT FORTHCOMING THE TOWN OF KENT WILL CONTRACT WITH A VENDOR TO CORRECT THE VIOLATION AND THE FEE CHARGED WILL BE CHARGED TO THE PROPERTY OWNER OR THE TAX ASSESSMENT LEVIED ON THE SITE.

YOU ARE THEREFORE DIRECTED AND ORDERED to comply with the law and remedy the conditions above mentioned. Failure to remedy the conditions aforesaid and to comply with the law may constitute an offense punishable by fine or imprisonment or both.

**WILLIAM LOONEY
ZONING ENFORCEMENT OFFICER
TOWN OF KENT**







April 2, 2019

Bill Huestis
25 Sybil's Crossing
Kent Lakes, NY 10512

Dear Mr. Huestis:

Thank you for your application requesting funding under the NYS Urban Forestry Council Arbor Day Community Grant program on behalf of the Town of Kent.

We are happy to inform you that you will receive a total of **\$1,000** to proceed with the project as outlined in your application.

Please sign and return the enclosed Acceptance/Obligation Agreement, as well as a dated and signed **municipal resolution** as noted in the application requirements. We have enclosed the first check in the amount of \$500 which is 50% of your award.

Upon completion of your Arbor Day event, please submit (within 40 days after the event) the following information and the balance of your grant award will be sent to you:

- Receipts for all expenses.
- A brief report detailing your Arbor Day event and how this may facilitate an urban forestry program in your community.
- Copies of any press releases, news articles, event program and photos from event.

Enclosed please find a Council membership application in the hopes you might consider joining to take advantage of the educational and experiential benefits extended by the Council and its network of professionals and volunteers across the state.

Sincerely,

Andy

Andrew Hillman
Council Board Member and Grant Committee Chair

enclosures



NEW YORK STATE
URBAN FORESTRY COUNCIL

ACCEPTANCE/OBLIGATION AGREEMENT

I, Bill Huestis, representing the Town of Kent, hereby accept \$500 as 50% of the grant award (\$1,000 total) to acknowledge an agreement with the NYS Urban Forestry Council to fulfill the activities presented in the application for the Arbor Day Community Grant. Should the approved project activities not take place, this initial payment must be refunded to the Council by the grantee within the current calendar year.

The balance of the grant funds will be awarded after the event has taken place, and receipts for all supplies and project costs have been received within 40 days of project completion and verified by the Executive Secretary of the Council.

By signature below, each party certifies that the individuals listed in this document as representatives of the individual parties are authorized to act in their respective areas for matters related to this award. In witness whereof, the parties hereto have executed this award as of the date listed below.

Liana Gooding

Liana Gooding, Executive Secretary

4/2/19

Date

NYS Urban Forestry Council

GRANT APPLICANT, Project Contact

Title

Date

ELECTED OFFICIAL, Applicant Community

Title

Date

Yearly Membership Fees

- ☐ **Student** \$10
- ☐ **Individual** \$25
- ☐ **Non-Profit Organization** \$75

4 members per membership

(please designate a primary representative)

- ☐ **Governmental Agency** \$100

5 members per membership

(please designate a primary representative)

- ☐ **Small Business** (1-49 full time employees) \$120

6 members per membership

(please designate a primary representative)

- ☐ **Medium Business** (50-99 full time employees) \$200

10 members per membership

(please designate a primary representative)

- ☐ **Corporate** (100 full time employees) \$500

12 members per membership

(please designate a primary representative)

In addition to my membership fee, I enclose a tax-deductible contribution to the Council of:

Credit cards accepted: ☐ MC ☐ Visa

_____ Exp. Date _____

Please make all checks payable to:

New York State Urban Forestry Council

c/o Liana Gooding

P.O. Box 562 • Lima, NY 14485

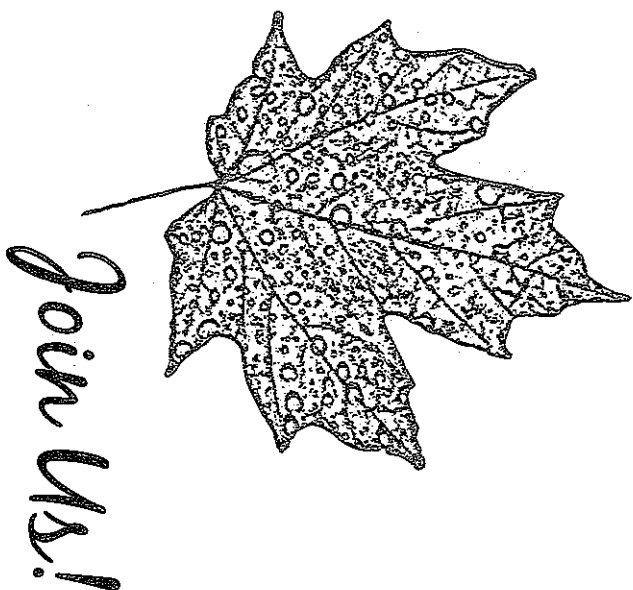
nysufc.org

The New York State Urban Forestry Council is a not-for-profit corporation under the laws of New York State and has received the 501(c)(3) tax-exempt designation from the Internal Revenue Service. Contributions to the Council are tax-deductible as provided by law.

P.O. Box 562
Lima, NY 14485



Membership APPLICATION





NEW YORK STATE URBAN FORESTRY COUNCIL

There are many types of forests in New York State — each needs a special focus and voice. The New York State Urban Forestry Council is an education and outreach program advocating efforts to create and maintain healthy urban forest ecosystems across New York State. Whether a forester, arborist, involved community member, educator, business leader, or interested individual, our Council represents members of your community who are responsible for the oversight and well being of our forest areas, even those just outside your front door or building.

Our Goals

Educate. Encourage. Find common ground.

Based on these concepts, the Council advocates for improving forestry management practices through education efforts, networking and working toward mutual goals. In order to accomplish these goals, we partner with other forestry groups to conduct workshops throughout the year and hold an annual conference to further promote our goals.

Forestry Partners, Near and Far Working together gives the NYSUFC a Statewide and National Voice.

Regional and National policies can greatly impact forestry management. That's why partnerships with the NYS Department of Environmental Conservation, The Friends of New York's Environment and the USDA Forest Service, as well as our membership in the Alliance for Community Trees allow

Caring for neighborhood trees takes all of us!

us to have a strong voice in budgetary and policy decisions throughout government.

Since our members play a critical role in promoting forestry awareness, the NYS Urban Forestry Council offers regular newsletters, and a website which provides updates on the latest issues affecting urban forestry.

We Want You

Your membership says you care about Urban Forestry.

As a growing organization that values the beauty and the benefits of maintaining our trees and forests, we value new members who share our common goals. You may be as active as you chose. With a 40 member volunteer board and paid regular staff, we encourage you to join and contribute to our advocacy efforts, or merely contribute to help the cause.

Your membership is a way for you to say that you care about this issue and you are interested in becoming a member at a level that works for you annually. We appreciate your support at any level.

For more information on who we are and how to join, please call Executive Secretary Liana Gooding at (585) 624-3385 or visit our website at nysufc.org.

Together we can ensure today that we and future generations will be able to enjoy our urban forests tomorrow.



☐ Yes, count me in as a Council Member

NAME

AFFILIATION

ADDRESS

CITY/TOWN/VILLAGE

STATE

ZIP

COUNTY

PHONE

EMAIL

Enjoy the benefits of members

Your fee for Council membership creates a stronger organization and helps us provide a tree-filled future for our state. It also brings many benefits to you.

- A discount on the annual NYS conference and various workshop registration fees
- A reduction in price for selected educational and technical resources