

TOWN OF WALLINGFORD, CONNECTICUT

TOWN COUNCIL MEETING
Robert F. Parisi Council Chambers

TUESDAY
June 8, 2021
6:30 P.M.

AGENDA

The Town Council meeting of June 8, 2021 will take place REMOTELY only. It shall commence at 6:30 p.m. It is expected that the public will be permitted to comment on the Agenda items as instructed by the Chairman. Materials for this meeting will also be posted on the Town's website for viewing prior to the meeting. The meeting can be accessed through:

<https://global.gotomeeting.com/join/193207261>

YOU CAN ALSO DIAL IN USING YOUR PHONE:
United States (Toll Free): 1-877-309-2073
United States +1(646) 749-3129
Access Code: 193-207-261

Live stream of the meeting will also be available on the Town of Wallingford You Tube Channel:
<https://www.youtube.com/c/wallingfordgovernmenttelevision>

AGENDA

Moment of Silence

1. Pledge of Allegiance
2. Roll Call
3. Consent Agenda
 - 3a. Consider and approve Tax Refunds totaling \$1,434.28 (#920-929)
Acct. #1001001- 41020 - Tax Collector
 - 3b. Consider and approve a Transfer of Various Real Estate and Personal Property to
Suspense List – Tax Dept.
 - 3c. Consider and approve a Transfer in the amount of \$1,000 – P&Z
 - \$700 From: Dues & Fees Acct. #10010700-58810
 - \$300 From: Purchased Services Acct. #10010700-56702
 - \$1,000 To: Office Expenses & Supplies Acct. #10010700-56100

- 3d. Consider and approve a Transfer in the amount of \$90 from Dues-Fees, Acct. #10010750-58810 to Salaries & Wages, Acct. #10010750-51000 - ZBA
- 3e. Consider and approve a Transfer in the amount of \$1,500 from Contingency, Acct. #10019000-58820 to Office Expenses & Supplies, Acct. #10010750-56100 - ZBA
- 3f. Consider and approve a Transfer in the amount of \$15,500 from Regular Wages, Acct. #10020050-55100 to Cruiser Camera Systems, Acct. #TBD – Police Dept.
- 3g. Acceptance of Federal/State Highway 2020-2021 Distracted Driving High Visibility Enforcement Program and consider and approve Appropriation of funds in the amount of \$16,987.70 to Revenue Highway Safety, Acct. #1002001-45208 and to Police Overtime, Acct. #10020050-51400 – Police Dept.
- 3h. Consider and approve a Transfer in the amount of \$19,558 from Pick-up Truck 4x4, Acct. #10030000-57000-00946 to Overtime, Acct. #10030000-51400 – Public Works
- 3i. Consider and approve a Transfer in the amount of \$2,540 from Materials & Supplies, Acct. #10030000-56140 to Capital Act – Public Works
- 3j. Consider and approve a Transfer in the amount of \$320 from Maintenance of Building, Acct. #10020150-54315 to Purchased Services-Custodial Services, Acct. #10020150-56736 – Fire Dept.
- 3k. Consider and approve a Transfer in the amount of \$37,000 – Fire Dept.
 - \$20,000 From: General Wages Acct. #10020150-51000
 - 5,000 From: Overtime Acct. #10020150-51400
 - 7,000 From: Wage Differential Acct. #10020150-51450
 - 5,000 From: Other Pay Acct. #10020150-51900

 - \$37,000 To: Replacement Pay Acct. #10020150-51500
- 3l. Consider and approve a Transfer in the amount of \$1,800 from Regular Salaries & Wages, Acct. #10012000-51000 to Overtime, Acct. #10012000-51400 – Human Resources
- 3m. Consider and approve a Transfer in the amount of \$5,000 from Regular Wages, Acct. #10010401-51000 to Overtime, Acct. #10010401-51400 - Finance
- 3n. Consider and approve a Transfer in the amount of \$1,000 from Vital Statistics, Acct. #10010650-58850 to PS Index, Acct. #10010650-56758 – Town Clerk

3o. Consider and approve a Transfer in the amount of \$500 from Regular Salaries & Wages, Acct. #100106505-1000 to Overtime, Acct. #10010650-51400 – Town Clerk

3p. Acceptance of Grants and consider and approve Appropriations - BOE

\$2,706,998	To: State Grant Revenues	Fund #235
\$2,706,998	To: Program Expenditures	Fund #235

\$12,000	To: State Grant Revenues	Fund #235
\$12,000	To: Program Expenditures	Fund #235

\$55,811	To: State Grant Revenues	Fund #235
\$55,811	To: Program Expenditures	Fund #235

\$2,027,836	To: State Grant Revenues	Fund #235
\$2,027,836	To: Program Expenditures	Fund #235

\$41,618	To: State Grant Revenues	Fund #235
\$41,618	To: Program Expenditures	Fund #235

\$2,974	To: State Grant Revenues	Fund #235
\$2,974	To: Program Expenditures	Fund #235

\$3,476	To: State Grant Revenues	Fund #235
\$3,476	To: Program Expenditures	Fund #235

\$39,537	To: State Grant Revenues	Fund #235
\$39,537	To: Program Expenditures	Fund #235

\$1,254	To: State Grant Revenues	Fund #235
\$1,254	To: Program Expenditures	Fund #235

\$2,636	To: State Grant Revenues	Fund #235
\$2,636	To: Program Expenditures	Fund #235

\$3,102	To: State Grant Revenues	Fund #235
\$3,102	To: Program Expenditures	Fund #235

\$6,800	To: State Grant Revenues	Fund #235
\$6,800	To: Program Expenditures	Fund #235

3q. Consider and approve a Transfer in the amount of \$70,000 from General Plant-Structures & Improvements, Acct. #390 to Distribution Plant-Street Lighting & Signal, Acct. #373 – Electric Div.

- 3r. Consider and approve Resolution authorizing the Mayor to apply for a 2021 Small Cities Community Development Block Grant in the amount of \$1,500,000 to undertake various improvements at the Wallingford Housing Authority's 132 unit Ulbrich Heights Complex and to Authorize the Mayor to execute an Assistance Agreement with the State of Connecticut for state financial assistance if such Agreement is offered, to execute any amendments, rescissions, and revisions thereto, and to act as the authorized representative of the Town of Wallingford – Mayor
- 3s. (a) Consider and approve request to award the private out-of-district transportation bid to three lowest qualified bidders through a public bid reflecting aggregate bid pricing for 33 identified routes – BOE

(b) Consider and approve request for a bid waiver for the three selected bidders to provide quotes through the Town Purchasing Department for awarding of additional transportation routes as a result of new and/or changed student placements as described above – BOE
- 3t. Consider and approve an Agreement with the Town and Choate Rosemary Hall regarding pedestrian safety at mid-block crosswalks – Mayor
- 3u. Approval of Town Council Minutes of May 6, 2021, May 11, 2021 and May 18, 2021.
- 4. **Items Removed from the Consent Agenda**
- 5. Public Question & Answer Period
- 6. 6:30 p.m. Hold a Public Hearing to Consider and Act on the 2021 Neighborhood Assistance Program – Mayor
- 7. Consider and approve Resolution authorizing the Mayor to submit Neighborhood Assistance Applications to the State Department of Revenue Services and Summary List of programs for 2021 Neighborhood Assistance Program and to exercise any amendments, rescissions and revisions thereto and to act as the authorized representative of the Town of Wallingford – Mayor
- 8. 6:30 p.m. Hold a Public Hearing to Consider and Act on amendment to Chapter 138, Littering and Dumping Ordinance.
- 9. Discussion and possible action regarding AFSCME Co. 4, Local 1570 Police Officers Contract Tentative Agreement for three years from July 1, 2021 through June 30, 2024 – Human Resources
- 10. Discussion and possible action regarding BOE Custodian/Maintenance Union Local 1303 -60 AFL-CIO, Council 4 for three years from July 1, 2021 through June 30, 2024 – BOE

11. Discussion and Possible action regarding Facility and Fee Waiver Application – Parks & Recreation Dept.
12. Discussion and possible action on an agreement with GotSPACE LLC for the development of Data Centers – EDC
13. Executive Session pursuant to Section 1-200(6)(D) of the Connecticut General Statutes with respect to the purchase, sale and/or leasing of property – Mayor
14. Executive Session pursuant to the CGS Section 1-225(f) and Section 1-200(6)(B) regarding strategy and negotiations with respect to the pending tax appeal matter of *Bear Industries, LLC v. Town of Wallingford* – Law Dept.
15. Executive Session pursuant to CGS Section 1-200(6)(B) and Section 1-225(f) for discussion regarding pending claims and litigation involving Covanta and the Disposal Agreements – Law Dept.
16. Possible action on the tax appeal, *Bear Industries, LLC. V. Town of Wallingford* as discussed in Executive Session.
17. Consider authorization of action with respect to Covanta mediation as discussed in Executive Session – Law Dept.

In accordance with Title II of the Americans with Disabilities Act- Individuals in need of auxiliary aids for effective communication in programs and services of the Town of Wallingford are invited to make their needs and preferences known to the ADA Compliance Coordinator at 203-294-2070 five days prior to meeting date.



RECEIVED
MAYOR'S OFFICE
Town of Wallingford, Connecticut
21 JUN -1 AM 11:04

JO-ANNE L. RUSCZEK, C.C.M.C.

TAX COLLECTOR

CHERYL BRUNDAGE C.C.M.C.

ASSISTANT TO THE TAX COLLECTOR

DEPARTMENT OF FINANCE
45 SOUTH MAIN STREET
P.O. BOX 5003
WALLINGFORD, CONNECTICUT 06492
TELEPHONE (203) 294-2135
FAX (203) 294-2137

3a.

June 1, 2021

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford
Wallingford, CT 06492

Re: Refund - Account #1001001-41020 - \$1,434.28 (#920-929)

Dear Mayor Dickinson:

Attached is a list of refunds for your approval and the approval of the Town Council:

Very truly yours,

Jo-Anne L. Ruscze
Tax Collector

APPROVED:

William W. Dickinson, Jr., Mayor

James M. Bowes, Comptroller

920 D Errico Family Trust	105.96	19-0003615
921 Nissan Infiniti LT (3APTL9)	82.52	19-0078359
922 Nissan Infiniti LT (355YMY)	173.42	19-0078345
923 Depino, Edward	55.00	G.L. 2019
924 Depino, Edward	57.00	G.L. 2018
925 Tolla, Eleanor	171.84	G.L. 2017
926 Tolla, Eleanor	175.14	G.L. 2018
927 Tolla, Eleanor	218.94	G.L. 2019
928 New England Investment Group LLC	27.00	19-0010690
929 Martin, Erika L.	367.46	19-0074693
	<hr/>	
	1434.28	



Town of Wallingford, Connecticut

JO-ANNE L. RUSCZEK, C.C.M.C.

TAX COLLECTOR

CHERYL BRUNDAGE C.C.M.C.

ASSISTANT TO THE TAX COLLECTOR

DEPARTMENT OF FINANCE
45 SOUTH MAIN STREET
P.O. BOX 5003
WALLINGFORD, CONNECTICUT 06492
TELEPHONE (203) 294-2135
FAX (203) 294-2137

3b,

May 28, 2021

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford
45 South Main Street
Wallingford, CT 06492

RECEIVED
MAYOR'S OFFICE
21 MAY 28 PM 4:10

Re: Suspense List

Dear Mayor Dickinson:

I hereby certify that to the best of my knowledge and belief that each tax on the enclosed pages has not been paid, and should be transferred to the Suspense Book.

The reason for the transfer is to comply with State Statute 12-165, Municipal Suspense Tax Book, that items not collected should be placed in suspense. It is important to note that every effort will be made to collect these back taxes in full.

With your permission, and that of the Town Council, I would like to transfer these items to Suspense.

Grand List

Taxes

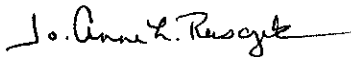
2012 Real Estate	3,141.17
2013 Real Estate	3,221.44
2014 Real Estate	3,290.93
2015 Real Estate	3,341.24
2016 Real Estate	3,420.30
2017 Real Estate	1,265.90
2018 Real Estate	1,290.22
2019 Real Estate	<u>2,784.79</u>
	21,755.99

2016 Personal Property	11,300.25
2017 Personal Property	15,901.85
2018 Personal Property	21,241.91
2019 Personal Property	<u>30,395.23</u>
	\$78,839.24

2014 Motor Vehicle Supplemental	53.74
2016 Motor Vehicle	102,173.59
2016 Motor Vehicle Supplemental	21,648.90
2017 Motor Vehicle	398.67
2017 Motor Vehicle Supplemental	278.41
2018 Motor Vehicle	1,092.90
2018 Motor Vehicle Supplemental	702.81
2019 Motor Vehicle	3,549.09
2019 Motor Vehicle Supplemental	<u>70.06</u>
	\$129,968.17

Real Estate	21,755.99
Personal Property	78,839.24
Motor Vehicle	<u>129,968.17</u>
Grand Total	\$230,563.40

Very truly yours,



Jo-Anne L Rusczyk
Tax Collector

JLR/cb
Encs.

Process Suspense Report

TOWN OF WALLINGFORD Date: 05/27/2021 Time: 10:34:36

Page: 1

Condition (s): Year: 2019, Type: 01 - RE, Order: Bill Number, Total Only: No, Recap by Dist: No

Bill #	Dst Name	Code	Reason	Date	Town Due/Susp	Dist Due/SuspSewer Due/Susp	Total
2012-01-0003061	COMMERCIAL MUSIC DISTRIBUTORS INC	NV	LAND NO VALUE	05/27/2021	10.49		
2012-01-0015147	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	776.12		
2012-01-0015148	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	107.50		
2012-01-0015149	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	1,649.24		
2012-01-0015150	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	597.82		
REAL ESTATE	# Of Acct: 5				3,141.17		
YR : 2012	TOTAL : 5				3,141.17		
2013-01-0003093	COMMERCIAL MUSIC DISTRIBUTORS INC	NV	LAND NO VALUE	05/27/2021	10.76		
2013-01-0015190	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	795.94		
2013-01-0015191	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	110.26		
2013-01-0015192	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	1,691.38		
2013-01-0015193	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	613.10		
REAL ESTATE	# Of Acct: 5				3,221.44		
YR : 2013	TOTAL : 5				3,221.44		
2014-01-0003102	COMMERCIAL MUSIC DISTRIBUTORS INC	NV	LAND NO VALUE	05/27/2021	10.99		
2014-01-0015168	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	813.12		
2014-01-0015169	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	112.64		
2014-01-0015170	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	1,727.86		
2014-01-0015171	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	626.32		
REAL ESTATE	# Of Acct: 5				3,290.93		
YR : 2014	TOTAL : 5				3,290.93		
2015-01-0003102	COMMERCIAL MUSIC DISTRIBUTORS INC	NV	LAND NO VALUE	05/27/2021	11.16		
2015-01-0015168	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	825.54		
2015-01-0015169	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	114.36		
2015-01-0015170	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	1,754.28		
2015-01-0015171	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	635.90		
REAL ESTATE	# Of Acct: 5				3,341.24		
YR : 2015	TOTAL : 5				3,341.24		
2016-01-0003102	COMMERCIAL MUSIC DISTRIBUTORS INC	NV	LAND NO VALUE	05/27/2021	11.42		
2016-01-0015168	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	845.08		
2016-01-0015169	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	117.06		
2016-01-0015170	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	1,795.80		
2016-01-0015171	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	650.94		
REAL ESTATE	# Of Acct: 5				3,420.30		
YR : 2016	TOTAL : 5				3,420.30		
2017-01-0003125	COMMERCIAL MUSIC DISTRIBUTORS INC	NV	LAND NO VALUE	05/27/2021	11.46		
2017-01-0015059	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	243.44		
2017-01-0015060	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	117.42		
2017-01-0015061	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	240.58		
2017-01-0015062	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021	653.00		
REAL ESTATE	# Of Acct: 5				1,265.90		
YR : 2017	TOTAL : 5				1,265.90		
2018-01-0003139	COMMERCIAL MUSIC DISTRIBUTORS INC	NV	LAND NO VALUE	05/27/2021	11.68		

Process Suspense Report

TOWN OF WALLINGFORD Date: 05/27/2021 Time: 10:34:36

Condition (s): Year: 2019, Type: 01 - RE, Order: Bill Number, Total Only: No, Recap by Dist: No

Bill #	Dst Name	Code	Reason	Date	Town Due/Susp	Dist Due/SuspSewer	Due/Susp	Total
2018-01-0015045	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021			248.12	
2018-01-0015046	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021			119.68	
2018-01-0015047	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021			245.20	
2018-01-0015048	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021			665.54	
REAL ESTATE	# Of Acct: 5						1,290.22	
YR : 2018	TOTAL : 5						1,290.22	
2019-01-0003124	COMMERCIAL MUSIC DISTRIBUTORS INC	NV	LAND NO VALUE	05/27/2021			11.68	
2019-01-0011091	OWNER UNKNOWN	NV	LAND NO VALUE	02/19/2021			385.32	
2019-01-0011092	OWNER UNKNOWN	NV	LAND NO VALUE	02/19/2021			58.38	
2019-01-0011093	OWNER UNKNOWN	NV	LAND NO VALUE	02/19/2021			388.24	
2019-01-0011094	OWNER UNKNOWN	NV	LAND NO VALUE	02/19/2021			148.88	
2019-01-0011095	OWNER UNKNOWN	NV	LAND NO VALUE	02/19/2021			201.42	
2019-01-0011096	OWNER UNKNOWN	NV	LAND NO VALUE	02/19/2021			5.84	
2019-01-0011097	OWNER UNKNOWN	NV	LAND NO VALUE	02/19/2021			20.43	
2019-01-0011098	OWNER UNKNOWN	NV	LAND NO VALUE	02/19/2021			172.22	
2019-01-0014972	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021			248.12	
2019-01-0014973	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021			119.68	
2019-01-0014974	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021			245.20	
2019-01-0014975	TRIPLE B DEVELOPERS INC	NV	LAND NO VALUE	05/27/2021			665.54	
2019-01-0015588	WALLINGFORD REAL ESTATE INVESTMENT	NV	LAND NO VALUE	05/25/2021			23.35	
2019-01-0015589	WALLINGFORD REAL ESTATE INVESTMENTS	NV	LAND NO VALUE	05/25/2021			23.35	
2019-01-0015590	WALLINGFORD REAL ESTATE INVESTMENTS LLC	NV	LAND NO VALUE	05/25/2021			29.19	
2019-01-0015591	WALLINGFORD REAL ESTATE INVESTMENTS LLC	NV	LAND NO VALUE	05/25/2021			37.95	
REAL ESTATE	# Of Acct: 17						2,784.79	
YR : 2019	TOTAL : 17						2,784.79	

Grand Total: 52

21,755.99

Process Suspense Report

TOWN OF WALLINGFORD Date: 05/27/2021 Time: 10:44:48
 Condition (s): Year: , Type: 02 - PP, Order: Bill Number, Total Only: No, Recap by Dist: No

Bill #	Dst Name	Code Reason	Date	Town Due/Susp	Dist Due/Susp	Total
2016-02-0040322	CALL KEN LLC		05/25/2021	97.64		97.64
2016-02-0040326	CANELLI JEWELERS LLC		05/25/2021	187.00		187.00
2016-02-0040522	IN CR SPA SERVICE LLC		05/25/2021	213.98		213.98
2016-02-0040926	GREEN IS BETTER LAWN CARE LLC		05/25/2021	323.76		323.76
2016-02-0041305	MAC CONCRETE AND CONSTRUCTION LLC		05/25/2021	892.20		892.20
2016-02-0041440	IN MORFIUS PERFORMANCE LLC		05/25/2021	1,117.46		1,117.46
2016-02-0041726	R&S LANDSCAPING AND NURSERY LLC		05/25/2021	3,758.04		3,758.04
2016-02-0041804	RSJ ASSOCIATES LLC		05/25/2021	356.88		356.88
2016-02-0041870	SHORELINE HARDSCAPES LLC	DE DECEASED	02/19/2021	151.32		151.32
2016-02-0041891	IN SITE/TECH CONTRACTORS LLC		05/25/2021	610.40		610.40
2016-02-0042396	BLUESTONE PAVING & CONCRETE LLC		05/25/2021	3,086.49		3,086.49
2016-02-0042706	ROC LAWN/CARE & GENERAL CONSTRUCTION LLC		05/25/2021	55.42		55.42
2016-02-0042709	RJ LARESE LANDSCAPING INC		05/25/2021	449.66		449.66
PERSONAL PROPERTY # Of Acct: 13				11,300.25		11,300.25
YR : 2016 TOTAL : 13				11,300.25		11,300.25
2017-02-0040003	12-16 NORTHFIELD ROAD LLC	OB OUT OF BUSINESS	05/26/2021	187.88		187.88
2017-02-0040260	BLUESTONE PAVING & CONCRETE LLC	OB OUT OF BUSINESS	05/26/2021	4,750.80		4,750.80
2017-02-0040371	IN CENTRAL CONNECTICUT PROPERTY MAINTENANC	OB OUT OF BUSINESS	05/26/2021	75.90		75.90
2017-02-0040788	FERRAUOLO TODD	OB OUT OF BUSINESS	05/26/2021	291.56		291.56
2017-02-0040912	GREEK GUY LLC THE	OB OUT OF BUSINESS	05/26/2021	724.88		724.88
2017-02-0041052	INNOVDECOR HOME IMPROVEMENT LLC	OB OUT OF BUSINESS	05/26/2021	491.04		491.04
2017-02-0041312	MAPES SUZANNE	OB OUT OF BUSINESS	05/26/2021	531.56		531.56
2017-02-0041571	IN PARAGON GLOBAL LLC	OB OUT OF BUSINESS	02/19/2021	105.40		105.40
2017-02-0041622	PIKOR FRANK	DE DECEASED	02/19/2021	269.22		269.22
2017-02-0041797	PU RESTORATIONS	OB OUT OF BUSINESS	05/25/2021	48.40		48.40
2017-02-0041824	S+C TEXAS INVESTMENTS	OB OUT OF BUSINESS	05/26/2021	7,342.16		7,342.16
2017-02-0041857	SCARPA LAUREN	DE DECEASED	02/19/2021	42.67		42.67
2017-02-0041938	SHORELINE HARDSCAPES LLC	DE DECEASED	02/19/2021	189.88		189.88
2017-02-0041972	IN STACEY T'S TREASURES LLC	OB OUT OF BUSINESS	02/19/2021	38.66		38.66
2017-02-0041982	SUPERIOR CARPET AND UPHOLSTERY	OB OUT OF BUSINESS	05/26/2021	152.94		152.94
2017-02-0042154	W&R EURO CARS LLC	OB OUT OF BUSINESS	02/19/2021	393.80		393.80
2017-02-0042312	ROC LAWN/CARE & GENERAL CONSTRUCTION LLC	OB OUT OF BUSINESS	05/26/2021	77.04		77.04
PERSONAL PROPERTY # Of Acct: 18				188.06		188.06
YR : 2017 TOTAL : 18				15,901.85		15,901.85
2018-02-0040003	12-16 NORTHFIELD ROAD LLC	OB OUT OF BUSINESS	05/26/2021	239.36		239.36
2018-02-0040260	BLUESTONE PAVING & CONCRETE LLC	OB OUT OF BUSINESS	05/26/2021	6,052.56		6,052.56
2018-02-0040401	IN CHILDREN OF THE SOUND LLC	OB OUT OF BUSINESS	02/19/2021	372.46		372.46
2018-02-0040573	DANCERS LOFT LLC	OB OUT OF BUSINESS	05/26/2021	136.47		136.47
2018-02-0040785	FERRAUOLO TODD	OB OUT OF BUSINESS	05/26/2021	10.18		10.18
2018-02-0040788	FERRAUOLO TODD	OB OUT OF BUSINESS	05/26/2021	371.60		371.60
2018-02-0040834	G & M TRADERS LLC	OB OUT OF BUSINESS	05/26/2021	718.38		718.38
2018-02-0040910	GREAT WHITE PRO CLEANING SERVICES LLC	OB OUT OF BUSINESS	05/26/2021	70.93		70.93
2018-02-0040912	INNAKIS RESTAURANT GROUP LLC	OB OUT OF BUSINESS	05/26/2021	923.58		923.58
2018-02-0041052	INNOVDECOR HOME IMPROVEMENT LLC	OB OUT OF BUSINESS	05/26/2021	1,251.08		1,251.08
2018-02-0041268	LIVING LEAN LLC	OB OUT OF BUSINESS	05/26/2021	118.52		118.52
2018-02-0041290	M & S CARGO INC	OB OUT OF BUSINESS	02/19/2021	999.76		999.76
2018-02-0041312	MAPES SUZANNE	OB OUT OF BUSINESS	05/26/2021	677.22		677.22
2018-02-0041571	IN PARAGON GLOBAL LLC	OB OUT OF BUSINESS	02/19/2021	134.28		134.28
2018-02-0041618	PHO ETHAN LLC	OB OUT OF BUSINESS	05/25/2021	1,260.82		1,260.82
2018-02-0041622	PIKOR FRANK	DE DECEASED	02/19/2021	685.98		685.98

Process Suspense Report

TOWN OF WALLINGFORD Date: 05/27/2021 Time: 10:44:48

Condition (s): Year: , Type: 02 - PP, Order: Bill Number, Total Only: No, Recap by Dist: No

Bill #	Dst Name	Code	Reason	Date	Town Due/Susp	Dist Due/Susp	Total
2018-02-0041665	PRO MOWER POWER EQUIPMENT LLC	OB	OUT OF BUSINESS	05/26/2021	86.69		86.69
2018-02-0041681	PU RESTORATIONS	OB	DECEASED	05/25/2021	61.59		61.59
2018-02-0041824	SCARPA LAUREN	DE	DECEASED	02/19/2021	54.29		54.29
2018-02-0041837	SECRET BEAUTY ESTHETIC SPA LLC	OB	OUT OF BUSINESS	05/25/2021	61.59		61.59
2018-02-0041857	SHORELINE HARDSCAPES LLC	DE	DECEASED	02/19/2021	242.00		242.00
2018-02-0041885	SLOW PUFFS LLC	OB	OUT OF BUSINESS	05/26/2021	118.22		118.22
2018-02-0041938	STACEY T S TREASURES LLC	OB	OUT OF BUSINESS	02/19/2021	49.33		49.33
2018-02-0041972	SUPERIOR CARPET AND UPHOLSTERY	OB	OUT OF BUSINESS	05/26/2021	389.70		389.70
2018-02-0041982	SWEENEY ALEX	OB	OUT OF BUSINESS	02/19/2021	501.78		501.78
2018-02-0042075	TRI STATE NOVELTIES LLC	OB	OUT OF BUSINESS	05/26/2021	344.74		344.74
2018-02-0042084	TRUMPOLD BRENDA LEE C	OB	OUT OF BUSINESS	05/26/2021	61.30		61.30
2018-02-0042188	WALLS LAWN SERVICE LLC	DE	DECEASED	02/19/2021	424.86		424.86
2018-02-0042196	WCCC LLC	OB	OUT OF BUSINESS	05/26/2021	289.13		289.13
2018-02-0042985	EDUARDO CONSTRUCTION LLC	OB	OUT OF BUSINESS	05/26/2021	144.50		144.50
2018-02-0043020	PEIRLONI SERVICES	OB	OUT OF BUSINESS	05/26/2021	547.32		547.32
2018-02-0043028	CENTRAL CONNECTICUT DISTRIBUTION LLC	OB	OUT OF BUSINESS	02/19/2021	182.44		182.44
2018-02-0043042	NORBLAST	OB	OUT OF BUSINESS	05/25/2021	1,094.64		1,094.64
2018-02-0043044	KJR TRANSPORTATION LLC	OB	OUT OF BUSINESS	05/26/2021	182.44		182.44
2018-02-0043049	COMMAND PERFORMANCE LLC	OB	OUT OF BUSINESS	05/25/2021	88.45		88.45
2018-02-0043062	PYTEL JERZY	OB	OUT OF BUSINESS	05/26/2021	729.76		729.76
2018-02-0043087	GREEN HILL CAFE	OB	OUT OF BUSINESS	05/25/2021	547.32		547.32
2018-02-0043088	BHOGAH YOGA LLC	OB	OUT OF BUSINESS	05/26/2021	110.80		110.80
2018-02-0043089	R & M AUTOMOTIVE	OB	OUT OF BUSINESS	02/19/2021	364.88		364.88
2018-02-0043149	BOUNCE BASH EVENTS LLC	OB	OUT OF BUSINESS	05/26/2021	364.88		364.88
2018-02-0043171	ROC LAWN CARE & GENERAL CONSTRUCTION LLC	OB	OUT OF BUSINESS	05/26/2021	176.08		176.08
	PERSONAL PROPERTY				21,241.91		21,241.91
YR : 2018	TOTAL : 41				21,241.91		21,241.91
2019-02-0040003	12-16 NORTHFIELD ROAD LLC	OB	OUT OF BUSINESS	05/26/2021	299.20		299.20
2019-02-0040249	BHOGAH YOGA LLC	OB	OUT OF BUSINESS	05/26/2021	192.96		192.96
2019-02-0040282	BOUNCE BASH EVENTS LLC	OB	OUT OF BUSINESS	05/26/2021	456.24		456.24
2019-02-0040286	BRACE AND LIMB OF CONNECTICUT LLC	OB	OUT OF BUSINESS	05/26/2021	51.09		51.09
2019-02-0040311	BUILD RIGHT FLY RIGHT ENTERPRISES LLC	OB	OUT OF BUSINESS	05/25/2021	18.68		18.68
2019-02-0040443	CLARK DOUGLAS	OB	OUT OF BUSINESS	05/26/2021	44.08		44.08
2019-02-0040484	CONFERENCE CENTER CONSULTING GROUP LLC				296.28		296.28
2019-02-0040586	D MEHTA LLC				100.42		100.42
2019-02-0040598	DANCERS LOFT LLC				340.36		340.36
2019-02-0040600	DANIELS FIBERGLASS LLC	OB	OUT OF BUSINESS	05/26/2021	404.00		404.00
2019-02-0040718	EDUARDO CONSTRUCTION LLC	OB	OUT OF BUSINESS	05/26/2021	225.06		225.06
2019-02-0040808	FERRARO FITNESS & NUTRITION LLC	OB	OUT OF BUSINESS	05/26/2021	706.12		706.12
2019-02-0040810	FERRAUOLO TODD	OB	OUT OF BUSINESS	05/26/2021	462.66		462.66
2019-02-0040855	G & M TRADERS LLC	OB	OUT OF BUSINESS	05/26/2021	897.88		897.88
2019-02-0040921	GREAT WHITE PRO CLEANING SERVICES LLC	OB	OUT OF BUSINESS	05/26/2021	176.60		176.60
2019-02-0040967	HEALTHY HOME AND OFFICE LLC	OB	OUT OF BUSINESS	02/19/2021	481.06		481.06
2019-02-0040992	HIDDEN POTENTIAL BOUTIQUE AND THRIFT SHOOP	OB	OUT OF BUSINESS	05/26/2021	182.44		182.44
2019-02-0041060	INNOVDECOR HOME IMPROVEMENT LLC	OB	OUT OF BUSINESS	05/26/2021	1,531.90		1,531.90
2019-02-0041192	KJR TRANSPORTATION LLC	OB	OUT OF BUSINESS	05/26/2021	227.98		227.98
2019-02-0041280	LIVING LEAN LLC	OB	OUT OF BUSINESS	05/26/2021	146.24		146.24
2019-02-0041323	MAPES SUZANNE	OB	OUT OF BUSINESS	05/26/2021	845.94		845.94
2019-02-0041478	NAKIS RESTAURANT GROUP LLC	OB	OUT OF BUSINESS	05/26/2021	1,148.04		1,148.04
2019-02-0041498	NEUCO CORP	DE	DECEASED	02/19/2021	227.98		227.98
2019-02-0041512	NEW HAVEN FOOD SERVICE DESIGNS & EQUIPMEOB	OB	OUT OF BUSINESS	05/26/2021	364.88		364.88
2019-02-0041527	NORBLAST	OB	OUT OF BUSINESS	05/25/2021	1,368.44		1,368.44
2019-02-0041564	OPNAD FUND INC	RM	RETURNED MAIL	05/25/2021	100.12		100.12

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Bill #	Dst Name	Code	Reason	Date	Town Due/Susp	Dist Due/SuspSewer Due/Susp	Total
2019-02-0041614	PEIRLIONI SERVICES	OB	OUT OF BUSINESS	05/26/2021	684.22		684.22
2019-02-0041630	PET PALS GROOMING SALON LLC	OB	OUT OF BUSINESS	05/26/2021	50.79		50.79
2019-02-0041639	PHO ETHAN LLC	OB	OUT OF BUSINESS	05/25/2021	835.14		835.14
2019-02-0041640	IN PHOENIX CLEANING & RESTORATION LLC	OB	OUT OF BUSINESS	05/26/2021	870.59		870.59
2019-02-0041644	PIKOR FRANK	DE	DECEASED	02/19/2021	857.60		857.60
2019-02-0041688	PRO MOWER POWER EQUIPMENT LLC	OB	OUT OF BUSINESS	05/26/2021	156.18		156.18
2019-02-0041703	PU RESTORATIONS	OB	OUT OF BUSINESS	05/25/2021	74.14		74.14
2019-02-0041767	IN RESOURCES FOR HUMAN DEVELOPMENT INC	OB	OUT OF BUSINESS	05/26/2021	903.25		903.25
2019-02-0041799	ROKAP INC	OB	OUT OF BUSINESS	05/26/2021	16.80		16.80
2019-02-0041803	ROSCOE'S TRAVELING SMOKEHOUSE LLC	OB	OUT OF BUSINESS	05/26/2021	456.10		456.10
2019-02-0041828	S+C TEXAS INVESTMENTS	OB	OUT OF BUSINESS	05/26/2021	8,251.72		8,251.72
2019-02-0041857	SCARPA LAUREN	DE	DECEASED	02/19/2021	68.30		68.30
2019-02-0041870	SECRET BEAUTY ESTHETIC SPA LLC	OB	OUT OF BUSINESS	05/25/2021	74.14		74.14
2019-02-0041892	SHORELINE HARDSCAPES LLC	DE	DECEASED	02/19/2021	299.50		299.50
2019-02-0041893	IN SHORELINE PACKAGING INC	OB	OUT OF BUSINESS	02/19/2021	1,563.42		1,563.42
2019-02-0041900	SIGNARAMA LLC	OB	OUT OF BUSINESS	05/26/2021	729.76		729.76
2019-02-0041919	IN SLOW PUFFS LLC	OB	OUT OF BUSINESS	05/26/2021	147.70		147.70
2019-02-0042008	SUNRISE MASONRY INC	OB	OUT OF BUSINESS	05/26/2021	33.68		33.68
2019-02-0042123	TRI STATE NOVELTIES LLC	OB	OUT OF BUSINESS	05/26/2021	430.84		430.84
2019-02-0042131	TRUMPOLD BRENDA LEE C	OB	OUT OF BUSINESS	05/26/2021	76.77		76.77
2019-02-0042175	VAZQUEZ LUIS	OB	OUT OF BUSINESS	05/26/2021	182.44		182.44
2019-02-0042242	WCCC LLC	OB	OUT OF BUSINESS	05/26/2021	543.52		543.52
2019-02-0042266	WIESE CONSTRUCTION INC	ML	MOVED LEFT NO ADDRESS	05/26/2021	1,791.98		1,791.98
	PERSONAL PROPERTY				30,395.23		30,395.23
YR : 2019					30,395.23		30,395.23
Grand Total: 121					78,839.24		78,839.24

TOTAL : 49

Grand Total: 121

78,839.24

Modify Suspense Report

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Condition (s): Year: 2019, Type: 88 - MV/MVS, Order: Bill Number, Total Only: No, Recap by Dist: No

Bill # Dst Name Code Reason Date Town Due/Susp Dist Due/SuspSewer Due/Susp Total

2014-04-0083416	JORDAN LINDSEY A			05/28/2021		5.64		
2014-04-0083417	JORDAN LINDSEY A			05/26/2021		48.10		
SUPPLEMENTAL MV	# OF Acct: 2					53.74		

YR : 2014 TOTAL : 2 53.74

2016-03-0050129	ACAMPORA MICHELE			05/26/2021		76.66		
2016-03-0050593	ADDY GODFRIED E			05/26/2021		63.38		
2016-03-0050617	ADORNO BRIAN			05/26/2021		171.87		
2016-03-0050726	AL-BATAINEH KAREN M			05/26/2021		105.92		
2016-03-0050727	AL-BATAINEH KAREN M			05/26/2021		153.31		
2016-03-0050746	ALBEE MARCY A			05/26/2021		57.10		
2016-03-0050763	ALBERTINI RICHARD L			05/26/2021		67.95		
2016-03-0050862	ALFONSO-MOREAU LIZETTE			05/26/2021		57.10		
2016-03-0050864	ALI RONAN G			05/26/2021		149.89		
2016-03-0050948	ALLEN KAITLYN A			05/26/2021		119.05		
2016-03-0051035	ALSTON RODNEY D JR			05/26/2021		71.38		
2016-03-0051157	AMES CHRISTOPHER			05/26/2021		231.26		
2016-03-0051158	AMES CHRISTOPHER			05/26/2021		212.98		
2016-03-0051214	ANDERSEN KATHERINE E			05/26/2021		151.32		
2016-03-0051243	ANDERSON JILLIAN G			05/26/2021		64.52		
2016-03-0051453	APPIAH ANDREW B			05/26/2021		301.20		
2016-03-0051454	APPIAH ANDREW B			05/26/2021		121.34		
2016-03-0051455	APPLE AUTOMOTIVE LLC			05/26/2021		67.38		
2016-03-0051456	APPLE AUTOMOTIVE LLC			05/26/2021		132.47		
2016-03-0051513	ARCANGELO SUSAN L			05/26/2021		129.90		
2016-03-0051645	ARNOLD JAMES D			05/26/2021		268.94		
2016-03-0051646	ARNOLD JAMES D			05/26/2021		264.37		
2016-03-0051657	ARNOLD SAMANTHA S			05/26/2021		4.14		
2016-03-0051691	ARROYO MIGDARIS			05/26/2021		218.98		
2016-03-0051692	ARROYO MIGDARIS			05/26/2021		73.94		
2016-03-0051801	AUDIE KEVIN J			05/26/2021		429.11		
2016-03-0051884	AVILA JAVIER			05/26/2021		231.26		
2016-03-0051885	AVILA JAVIER			05/26/2021		112.49		
2016-03-0051886	AVILA JAVIER			05/26/2021		57.96		
2016-03-0051887	AVILA JAVIER			05/26/2021		231.83		
2016-03-0052088	EAKSA ANTHONY J			05/26/2021		131.90		
2016-03-0052239	BANDERAS JENNIFER			05/26/2021		397.13		
2016-03-0052460	BARNETT JAMES A 3RD			05/26/2021		407.12		
2016-03-0052496	BARRETT AMY S			05/26/2021		137.30		
2016-03-0052504	BARRETT PETER C			05/26/2021		302.34		
2016-03-0052632	BATEMAN MARK			05/26/2021		14.28		
2016-03-0052633	BATEMAN MARK			05/26/2021		71.38		
2016-03-0052687	BATTISTA CARIMARIE I			05/26/2021		16.82		
2016-03-0052795	BEAMER JOSHUA R			05/26/2021		297.78		
2016-03-0052796	BEAMER JOSHUA R			05/26/2021		170.44		
2016-03-0052808	BEARDEN ALTON N			05/26/2021		296.92		
2016-03-0052816	BEATY JUSTIN M			05/26/2021		48.39		
2016-03-0052849	BEAUVAIS DOREEN G			05/26/2021		61.10		
2016-03-0053062	BENEDEFFO AMANDA L			05/26/2021		217.84		
2016-03-0053100	BENJAMIN ROCKWOOD T			05/26/2021		153.03		
2016-03-0053102	BENVANI ZHOOR			05/26/2021		58.53		
2016-03-0053182	BERCIER HENRI			05/26/2021		69.95		
2016-03-0053184	BERCIER HENRI			05/26/2021		212.41		
2016-03-0053500	BIRO SANDOR			05/26/2021		36.26		

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Bill #	Dst Name	Code Reason	Date	Town Due/Susp	Dist Due/SuspSewer Due/Susp	Total
2016-03-0053528	BISHOP JOSEPH A		05/26/2021	616.11		616.11
2016-03-0053593	BLACKSTONE PAUL B		05/26/2021	19.13		19.13
2016-03-0053594	BLACKSTONE PAUL B		05/26/2021	67.66		67.66
2016-03-0053595	BLACKWOOD DEBI		05/26/2021	107.92		107.92
2016-03-0053618	BLAKE MARIA		05/26/2021	121.34		121.34
2016-03-0053717	BLOWERS MELANIE		05/26/2021	243.25		243.25
2016-03-0053733	BLUESTONE PAVING AND CONCRETE LLC		05/26/2021	259.52		259.52
2016-03-0053734	BLUESTONE PAVING AND CONCRETE LLC		05/26/2021	211.84		211.84
2016-03-0053735	BLUESTONE PAVING AND CONCRETE LLC		05/26/2021	38.26		38.26
2016-03-0053736	BLUESTONE PAVING AND CONCRETE LLC		05/26/2021	102.49		102.49
2016-03-0053737	BLUESTONE PAVING AND CONCRETE LLC		05/26/2021	35.40		35.40
2016-03-0053738	BLUESTONE PAVING AND CONCRETE LLC		05/26/2021	291.78		291.78
2016-03-0053739	BLUESTONE PAVING AND CONCRETE LLC		05/26/2021	259.81		259.81
2016-03-0053740	BLUESTONE PAVING AND CONCRETE LLC		05/26/2021	316.91		316.91
2016-03-0053741	BLUESTONE PAVING AND CONCRETE LLC		05/26/2021	259.52		259.52
2016-03-0053749	BLUESTONE PAVING AND CONCRETE LLC		05/26/2021	53.10		53.10
2016-03-0054146	BOUSQUET JENNIFER A		05/26/2021	177.30		177.30
2016-03-0054158	BOVA SALVATORE M		05/26/2021	175.01		175.01
2016-03-0054159	BOVA SALVATORE M		05/26/2021	93.93		93.93
2016-03-0054165	BOWEN GREGORY R		05/26/2021	122.48		122.48
2016-03-0054166	BOWEN GREGORY R		05/26/2021	195.00		195.00
2016-03-0054273	BRAGG JOLENE R		05/26/2021	89.08		89.08
2016-03-0054395	BRIAN S TRUCK LLC		05/26/2021	71.66		71.66
2016-03-0054414	BRIGANTI DAVID C		05/26/2021	14.28		14.28
2016-03-0054535	BROOKER THERESA K		05/26/2021	109.49		109.49
2016-03-0054689	BROMWELL PATRICK		05/26/2021	310.91		310.91
2016-03-0054723	BRUZY ROBERTA A		05/26/2021	271.23		271.23
2016-03-0054995	BURNS KARYN M		05/26/2021	309.20		309.20
2016-03-0055045	BUSH KEVIN M		05/26/2021	251.24		251.24
2016-03-0055046	BUSH KEVIN M		05/26/2021	99.07		99.07
2016-03-0055101	BUTLER JANIS L		05/26/2021	11.88		11.88
2016-03-0055311	CAIN TIMOTHY A		05/26/2021	63.95		63.95
2016-03-0055405	CALLAHAN COLBY L		05/26/2021	344.31		344.31
2016-03-0055425	CALOUYAS DEAN		05/26/2021	215.15		215.15
2016-03-0055461	CAMERONE PAUL J		05/26/2021	146.46		146.46
2016-03-0055730	CARABEZ-LOPEZ MICHELLE		05/26/2021	127.90		127.90
2016-03-0055734	CARAGLIO JAMES A JR		05/26/2021	39.97		39.97
2016-03-0055735	CARAGLIO JAMES A JR		05/26/2021	117.34		117.34
2016-03-0055736	CARANGELO ANTHONY		05/26/2021	171.87		171.87
2016-03-0055835	CAREY JENNIFER		05/26/2021	96.50		96.50
2016-03-0055904	CARLSON RAYMOND A		05/26/2021	62.52		62.52
2016-03-0056562	CEI JAMES F		05/26/2021	289.21		289.21
2016-03-0056810	CELOTTO MICHELLE C		05/26/2021	113.91		113.91
2016-03-0056811	CHAMPAGNE REBECCA L		05/26/2021	306.34		306.34
2016-03-0056833	CHAMPAGNE REBECCA L		05/26/2021	77.94		77.94
2016-03-0056834	CHANT MARK S		05/26/2021	207.84		207.84
2016-03-0056835	CHANTHINITH VATSATHAPHO		05/26/2021	214.98		214.98
2016-03-0057211	CHANTHINITH VATSATHAPHO		05/26/2021	231.26		231.26
2016-03-0057392	CHOUIGULE PRAVIN A		05/26/2021	1.28		1.28
2016-03-0057494	CIMCO REFRIGERATION		05/26/2021	22.86		22.86
2016-03-0057495	CJB TRANSPORT LLC		05/26/2021	109.35		109.35
2016-03-0057496	CJB TRANSPORT LLC		05/26/2021	198.14		198.14
2016-03-0057497	CJB TRANSPORT LLC		05/26/2021	829.66		829.66
2016-03-0057498	CJB TRANSPORT LLC		05/26/2021	427.96		427.96
2016-03-0057608	CLEARY SHAUN P		05/26/2021	773.42		773.42
2016-03-0057608	CLEARY SHAUN P		05/26/2021	390.85		390.85

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Bill #	Dst Name	Code Reason	Date	Town Due/Susp	Dist Due/Susp	Total
2016-03-0057752	COFRANCESCO JEFFREY C		05/26/2021	132.47		132.47
2016-03-0057841	COLEMAN SARAH D		05/26/2021	309.20		309.20
2016-03-0057846	COLITE TARITA S		05/26/2021	38.54		38.54
2016-03-0058064	CONNOLLY THERESE L		05/26/2021	91.07		91.07
2016-03-0058065	CONNOLLY THERESE L		05/26/2021	175.30		175.30
2016-03-0058162	COOK PHILIP S 3RD		05/26/2021	71.95		71.95
2016-03-0058174	COOL FLEX LLC		05/26/2021	56.24		56.24
2016-03-0058231	CORATELLI JENNIFER L		05/26/2021	99.07		99.07
2016-03-0058283	CORNEAU CHRISTINA M		05/26/2021	80.40		80.40
2016-03-0058286	CORNEAU STEPHEN M		05/26/2021	50.19		50.19
2016-03-0058579	CREAN WALTER F		05/26/2021	40.54		40.54
2016-03-0058580	CREAN WALTER F		05/26/2021	36.54		36.54
2016-03-0058581	CREAN WALTER F		05/26/2021	61.67		61.67
2016-03-0058726	CRONKITE CYNTHIA J		05/26/2021	243.25		243.25
2016-03-0058736	CULLEN AMANDA D		05/26/2021	115.34		115.34
2016-03-0058904	CULLEN PAUL E		05/26/2021	328.90		328.90
2016-03-0058934	CUMMINGS JESSICA E		05/26/2021	220.41		220.41
2016-03-0059167	D & S TRAVEL SERVICE LLC		05/26/2021	1,898.58		1,898.58
2016-03-0059168	D & S TRAVEL SERVICE LLC		05/26/2021	3,246.71		3,246.71
2016-03-0059235	DAGOSTINO JAKE S		05/26/2021	307.20		307.20
2016-03-0059315	DALESSIO VICTORIA L		05/26/2021	45.11		45.11
2016-03-0059315	DAMATO MICHAEL J		05/26/2021	59.96		59.96
2016-03-0059376	DAMICO JULIE L		05/26/2021	101.92		101.92
2016-03-0059389	DANIELS SHERRI A		05/26/2021	55.96		55.96
2016-03-0059432	DANNENHAUER JENNIFER L		05/26/2021	161.31		161.31
2016-03-0059443	DANNENHAUER JENNIFER L		05/26/2021	135.90		135.90
2016-03-0059444	DANNENHAUER JENNIFER L		05/26/2021	151.03		151.03
2016-03-0059493	DAT CONTRACTING LLC		05/26/2021	115.06		115.06
2016-03-0059519	DAVID BRIANNA D		05/26/2021	137.90		137.90
2016-03-0059595	DAVIS TAMMY J		05/26/2021	115.34		115.34
2016-03-0059622	DEALLENDE ISIDRO		05/26/2021	14.28		14.28
2016-03-0059723	DEBLOIS MARK R		05/26/2021	298.92		298.92
2016-03-0059983	DELGRECO MASSIMO		05/26/2021	14.28		14.28
2016-03-0059984	DELGRECO MASSIMO		05/26/2021	61.38		61.38
2016-03-0060116	DELUCCIA TINA A		05/26/2021	137.90		137.90
2016-03-0060195	DEMERCHANT BRITTANY L		05/26/2021	179.55		179.55
2016-03-0060567	DIAZ JOSEPH M		05/26/2021	60.81		60.81
2016-03-0060568	DIAZ JOSEPH M		05/26/2021	125.91		125.91
2016-03-0060816	DINGWALL LEIGH A		05/26/2021	106.49		106.49
2016-03-0060973	DOCKER TRACY B		05/26/2021	52.53		52.53
2016-03-0061280	DOOLITTLE DAVID R		05/26/2021	194.43		194.43
2016-03-0061407	DOWD WILLIAM R		05/26/2021	55.96		55.96
2016-03-0061408	DOWD WILLIAM R		05/26/2021	55.96		55.96
2016-03-0061898	DWYER JOHN V		05/26/2021	77.94		77.94
2016-03-0062309	EDWARDS DOUGLAS B		05/26/2021	91.07		91.07
2016-03-0062324	EGANA JUAN J		05/26/2021	305.20		305.20
2016-03-0062374	ELIAS WILLIAM A		05/26/2021	558.72		558.72
2016-03-0062415	ELMAHFOUD ILHAM		05/26/2021	183.29		183.29
2016-03-0062427	ELRAC INC		05/26/2021	46.54		46.54
2016-03-0062500	ENNEVER SCOTT R		05/26/2021	97.36		97.36
2016-03-0062709	ERCOLANI TERESA M		05/26/2021	58.53		58.53
2016-03-0062860	ESTRIDGE TIMOTHY S		05/26/2021	279.79		279.79
2016-03-0062876	EVANCHA JANIS A		05/26/2021	245.82		245.82
2016-03-0063341	FERGUSON CHRISTA L		05/26/2021	308.34		308.34
2016-03-0063343	FERGUSON ELAINE M		05/26/2021	381.71		381.71
2016-03-0063344	FERGUSON ELAINE M		05/26/2021	145.32		145.32
2016-03-0063392	FERNANDEZ-PILATASIG JHON R		05/26/2021			

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2016-03-0063393	FERNANDEZPILATASI JHON R		05/26/2021	309.20		309.20
2016-03-0063443	FERRARO JOSEPH M		05/26/2021	23.41		23.41
2016-03-0063771	FITZGERALD SHAWN C		05/26/2021	218.98		218.98
2016-03-0063895	FMCO LLC		05/26/2021	3.82		3.82
2016-03-0063919	FOLEY JAY P		05/26/2021	195.28		195.28
2016-03-0063940	FONPAINE KARYANN		05/26/2021	3.68		3.68
2016-03-0064092	FOSTER PAUL W JR		05/26/2021	81.65		81.65
2016-03-0064105	FOUNTAIN JOEL P		05/26/2021	64.52		64.52
2016-03-0064106	FOUR SEASONS MOTOR LINES LLC		05/26/2021	19.13		19.13
2016-03-0064170	FRANCIS RUDOLPH G		05/26/2021	123.91		123.91
2016-03-0064171	FRANCIS RUDOLPH G		05/26/2021	257.81		257.81
2016-03-0064172	FRANCIS RUDOLPH G		05/26/2021	244.39		244.39
2016-03-0064173	FRANCIS RUDOLPH GEORGE		05/26/2021	729.45		729.45
2016-03-0064281	FREITES VANESSA		05/26/2021	265.80		265.80
2016-03-0064309	FRIBERG JAMES J		05/26/2021	171.87		171.87
2016-03-0064404	FULKE EDWARD B JR		05/26/2021	100.50		100.50
2016-03-0064509	GABRIELE BRIAN C		05/26/2021	67.95		67.95
2016-03-0064510	GABRIELE BRIAN C		05/26/2021	65.95		65.95
2016-03-0064623	GALE JOHN A JR		05/26/2021	73.37		73.37
2016-03-0064649	GALLAGHER EDWARD J JR		05/26/2021	354.88		354.88
2016-03-0064688	GALLO DONNA L		05/26/2021	2.00		2.00
2016-03-0064757	GANGWISCH SAIGE L		05/26/2021	89.93		89.93
2016-03-0064760	GANNETT SATELLITE INFO		05/26/2021	2.85		2.85
2016-03-0064761	GANNETT SATELLITE INFO		05/26/2021	295.78		295.78
2016-03-0064902	GARGALY ANTHONY S JR		05/26/2021	80.23		80.23
2016-03-0065292	GENTILE ANDREA M		05/26/2021	71.38		71.38
2016-03-0065294	GENTILE ANDREA M		05/26/2021	47.39		47.39
2016-03-0065347	GENTILE ANDREA M		05/26/2021	67.95		67.95
2016-03-0065488	GERARDTHIEDE GAIL J		05/26/2021	76.34		76.34
2016-03-0065489	GIANOTTI KEITH V		05/26/2021	55.10		55.10
2016-03-0065582	GOMEZ JUAN C		05/26/2021	178.44		178.44
2016-03-0065948	GONZALEZ NORMA I		05/26/2021	147.89		147.89
2016-03-0065982	GOODFRIEND MICHAEL J		05/26/2021	57.10		57.10
2016-03-0066069	GOTTSCHALK JAMES D		05/26/2021	40.37		40.37
2016-03-0066070	GOTTSCHALK JAMES D		05/26/2021	258.38		258.38
2016-03-0066071	GOTTSCHALK JAMES D		05/26/2021	179.87		179.87
2016-03-0066167	GRAHAM SHANA D		05/26/2021	491.63		491.63
2016-03-0066168	GRAHAM SHANA D		05/26/2021	137.90		137.90
2016-03-0066193	GRANGER THOMAS F		05/26/2021	145.89		145.89
2016-03-0066262	GRASSO TORLISH J		05/26/2021	203.85		203.85
2016-03-0066263	GRATE GARRED K		05/26/2021	243.25		243.25
2016-03-0066267	GRATTON JOHN E		05/26/2021	385.71		385.71
2016-03-0066272	GRAVELL JENNIFER L		05/26/2021	340.32		340.32
2016-03-0066345	GREGO VINCENT L		05/26/2021	279.22		279.22
2016-03-0066423	GREGO VINCENT L		05/26/2021	79.08		79.08
2016-03-0066424	GREGO VINCENT L		05/26/2021	109.06		109.06
2016-03-0066425	GREGO VINCENT L		05/26/2021	61.10		61.10
2016-03-0066569	GROVER RYAN P		05/26/2021	115.34		115.34
2016-03-0066619	GUAZHAMBO MARBOL LLC		05/26/2021	1,376.68		1,376.68
2016-03-0066696	GULLO PAUL W JR		05/26/2021	59.96		59.96
2016-03-0066697	GULLO PAUL W JR		05/26/2021	9.99		9.99
2016-03-0066756	GUTIERREZ JOSE A		05/26/2021	73.37		73.37
2016-03-0066757	GUTIERREZ JOSE A		05/26/2021	291.78		291.78
2016-03-0066794	H R MOTORSPORTS LLC		05/26/2021	91.93		91.93
2016-03-0066851	HAGAN KEVIN M		05/26/2021	112.49		112.49
			05/26/2021	113.91		113.91

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2016-03-0066864	HAHN SCOTT T		05/26/2021	45.39		45.39
2016-03-0066887	HALL AMANDA E		05/26/2021	302.92		302.92
2016-03-0066934	HALLAS MARC L		05/26/2021	84.51		84.51
2016-03-0067100	HANSON KRISTINA A		05/26/2021	393.70		393.70
2016-03-0067101	HANSON KRISTINA A		05/26/2021	246.96		246.96
2016-03-0067112	HARBOR MILLS ASSOCIATES LIMITED PARTNER		05/26/2021	175.01		175.01
2016-03-0067187	HARRIS MARY N		05/26/2021	363.73		363.73
2016-03-0067366	HAYDEN SEAN M		05/26/2021	185.00		185.00
2016-03-0067400	HAYNES MATTHEW L		05/26/2021	160.45		160.45
2016-03-0067462	HEATH DANA K		05/26/2021	345.17		345.17
2016-03-0067498	HECKLINGER KEVIN J		05/26/2021	52.53		52.53
2016-03-0067691	HERIOT HEATHER		05/26/2021	61.10		61.10
2016-03-0067831	HILL JEFFERY E		05/26/2021	272.65		272.65
2016-03-0067832	HILL JEFFERY E		05/26/2021	70.80		70.80
2016-03-0067869	HILTON DEBRA A		05/26/2021	115.34		115.34
2016-03-0067945	HOBERMAN MEAGAN I		05/26/2021	51.39		51.39
2016-03-0068583	HOWARD DOUGLAS A		05/26/2021	65.38		65.38
2016-03-0068605	HOWE WARD E		05/26/2021	62.52		62.52
2016-03-0068614	HOWELL TODD		05/26/2021	350.88		350.88
2016-03-0068623	HOYLE MICHAEL E		05/26/2021	402.27		402.27
2016-03-0068624	HOYLE MICHAEL E		05/26/2021	368.87		368.87
2016-03-0068682	HUCK RICHARD J		05/26/2021	77.09		77.09
2016-03-0068714	HUFFMAN JEFFERY R		05/26/2021	37.12		37.12
2016-03-0068718	HUGHES BENJAMIN E		05/26/2021	50.53		50.53
2016-03-0068815	HUNTER KATHLEEN M		05/26/2021	131.62		131.62
2016-03-0068877	HURST TERRY A		05/26/2021	43.97		43.97
2016-03-0069165	IACO LUCAS		05/26/2021	212.98		212.98
2016-03-0069166	IACO LUCAS		05/26/2021	145.32		145.32
2016-03-0069206	ICHI BAN PROPERTIES LLC		05/26/2021	87.08		87.08
2016-03-0069220	ILLINGWORTH JOYCE F		05/26/2021	336.89		336.89
2016-03-0069221	ILLINGWORTH JOYCE F		05/26/2021	621.82		621.82
2016-03-0069356	ISAACSON KIRK I		05/26/2021	606.97		606.97
2016-03-0069357	ISAACSON KIRK I		05/26/2021	157.31		157.31
2016-03-0069423	J I R MASON'S LLC		05/26/2021	95.36		95.36
2016-03-0069464	J.G. S REMODELING PLUS LLC		05/26/2021	201.85		201.85
2016-03-0069518	JACOBSON JOSEPH J		05/26/2021	170.44		170.44
2016-03-0069697	JASINSKI JOSEPH W JR		05/26/2021	388.28		388.28
2016-03-0069792	JERSPERSEN DORRYL M		05/26/2021	52.53		52.53
2016-03-0069820	JIMENEZ KELLY		05/26/2021	141.32		141.32
2016-03-0069821	JIMENEZ KELLY		05/26/2021	81.08		81.08
2016-03-0069858	JOHN BRADFORD R		05/26/2021	139.90		139.90
2016-03-0069879	JOHNSON COLLEEN M		05/26/2021	55.96		55.96
2016-03-0069886	JOHNSON DEBORAH A		05/26/2021	14.28		14.28
2016-03-0069902	JOHNSON JILL L		05/26/2021	81.08		81.08
2016-03-0069910	JOHNSON LAUREN G		05/26/2021	78.34		78.34
2016-03-0070082	JOYA OMER Z		05/26/2021	64.52		64.52
2016-03-0070279	JUAREZ HERIBERTO		05/26/2021	157.31		157.31
2016-03-0070388	KAHLER CHRISTOPHER N		05/26/2021	133.33		133.33
2016-03-0070412	KALOSKI TAMMY A		05/26/2021	113.06		113.06
2016-03-0070567	KAUSHAL ANIL		05/26/2021	6.20		6.20
2016-03-0070656	KEENEY CASSANDRA K		05/26/2021	113.34		113.34
2016-03-0070692	KELLEHER LORNA M		05/26/2021	189.00		189.00
2016-03-0070749	KELLY KYLE K		05/26/2021	222.98		222.98
2016-03-0071010	KINARD MARK T		05/26/2021	58.53		58.53
2016-03-0071112	KITTRIDGE THEODORE P		05/26/2021	14.28		14.28
2016-03-0071120	KLAUS GUNTHER KINSKI LLC		05/26/2021	83.08		83.08

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2016-03-0071202	KNIGHT MARGARET A		05/26/2021	50.53		50.53
2016-03-0071274	KOERICK ZACHARY D		05/26/2021	60.24		60.24
2016-03-0071350	KONTOTHANASIS JOHN		05/26/2021	117.91		117.91
2016-03-0071376	KOPYLEC PETER		05/26/2021	197.85		197.85
2016-03-0071379	KORAIBAN ABDELLATIF		05/26/2021	97.36		97.36
2016-03-0071648	KROEBER TAYLOR W		05/26/2021	347.74		347.74
2016-03-0071657	KROL RYAN A		05/26/2021	298.92		298.92
2016-03-0071880	LACASSE NANCY R		05/26/2021	83.08		83.08
2016-03-0072041	LAMPO STEPHEN G		05/26/2021	67.66		67.66
2016-03-0072087	LANDRY ALEXANDER W		05/26/2021	61.38		61.38
2016-03-0072088	LANDRY ALEXANDER W		05/26/2021	122.48		122.48
2016-03-0072121	LANGE GEORGE R		05/26/2021	220.41		220.41
2016-03-0072409	LAWRENCE HOLDINGS INC		05/26/2021	315.19		315.19
2016-03-0072410	LAWRENCE HOLDINGS INC		05/26/2021	258.95		258.95
2016-03-0072437	LAWRENCE-DRESCHER PATRICIA V		05/26/2021	65.95		65.95
2016-03-0072713	LEON ARTURO		05/26/2021	51.68		51.68
2016-03-0072716	LEON IZQUIERDO MANUEL A		05/26/2021	30.55		30.55
2016-03-0072724	LEONARD LAUREN E		05/26/2021	201.85		201.85
2016-03-0072729	LEONARD STEVEN M		05/26/2021	69.95		69.95
2016-03-0072909	LIBBY DOLORES J		05/26/2021	44.82		44.82
2016-03-0072984	LINBERRY JOHN K		05/26/2021	205.85		205.85
2016-03-0073025	LINT SUSAN B		05/26/2021	109.35		109.35
2016-03-0073117	LOCKARD JAMES M		05/26/2021	73.09		73.09
2016-03-0073118	LOCKE BESSIE J		05/26/2021	46.82		46.82
2016-03-0073119	LOCKE BESSIE J		05/26/2021	81.08		81.08
2016-03-0073273	LOPEZ CARLOS J		05/26/2021	173.01		173.01
2016-03-0073318	LOPEZ WILLISTON W		05/26/2021	469.08		469.08
2016-03-0073319	LOPEZ WILLISTON W		05/26/2021	55.10		55.10
2016-03-0073329	LORA JEFFERSON A		05/26/2021	202.99		202.99
2016-03-0073426	LOWES HOME CENTERS LLC		05/26/2021	288.36		288.36
2016-03-0073428	LOWES HOME CENTERS LLC		05/26/2021	1,772.38		1,772.38
2016-03-0073443	LOWES HOME CENTERS LLC		05/26/2021	516.18		516.18
2016-03-0073463	LOYD JOSEPH JR		05/26/2021	143.89		143.89
2016-03-0073464	LUBITZ THOMAS P		05/26/2021	141.04		141.04
2016-03-0073609	LUMPKIN LORAY		05/26/2021	392.85		392.85
2016-03-0073610	LUMY S STAR TRACKING LLC		05/26/2021	131.90		131.90
2016-03-0073710	LYGA STEVEN A		05/26/2021	290.92		290.92
2016-03-0073738	LYNN DOLORES R		05/26/2021	218.98		218.98
2016-03-0073804	MACCALLUM THOMAS		05/26/2021	60.53		60.53
2016-03-0073982	MAELEN DAVID VAN DER		05/26/2021	237.25		237.25
2016-03-0073983	MAESTRINI KRISCHA J		05/26/2021	63.67		63.67
2016-03-0074053	MAILLET CHRISTOPHER N		05/26/2021	66.52		66.52
2016-03-0074197	MANCINI JESSICA L		05/26/2021	147.03		147.03
2016-03-0074339	MARAK CATHY C		05/26/2021	93.93		93.93
2016-03-0074340	MARAK STEVEN G		05/26/2021	64.52		64.52
2016-03-0074492	MARNALISE ASHLEYMARIE E		05/26/2021	58.53		58.53
2016-03-0074493	MARNALISE ASHLEYMARIE E		05/26/2021	43.11		43.11
2016-03-0074615	MARTIN BRIAN L		05/26/2021	46.54		46.54
2016-03-0074616	MARTIN BRIAN L		05/26/2021	72.80		72.80
2016-03-0074715	MARTINEZ-ROMERO KAREN E		05/26/2021	564.15		564.15
2016-03-0074943	MASTRIO JODY L		05/26/2021	374.29		374.29
2016-03-0074952	MASTROIANNI JOSEPH M		05/26/2021	153.31		153.31
2016-03-0074953	MASTROIANNI JOSEPH M		05/26/2021	132.76		132.76
2016-03-0075183	MAZZOLI DANIEL JR		05/26/2021	241.25		241.25
2016-03-0075209	MCAULIFFE DANIEL R		05/26/2021	333.18		333.18
2016-03-0075209	MCAULIFFE DANIEL R		05/26/2021	119.91		119.91

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2016-03-0075214	MCAULLIFFE MATTHEW B		05/26/2021	79.94		79.94
2016-03-0075227	MCBURROWS ROBIN C		05/26/2021	197.85		197.85
2016-03-0075422	MCELROY CHAD A		05/26/2021	79.08		79.08
2016-03-0075474	MCGOURTY PADRAIG C		05/26/2021	3.03		3.03
2016-03-0075542	MCKEEHAN DANA L		05/26/2021	201.85		201.85
2016-03-0075585	MCKEVITT JOAN F		05/26/2021	197.85		197.85
2016-03-0075703	MCNAMAMY JEFFREY B		05/26/2021	288.36		288.36
2016-03-0075768	MCNAMARA KYLE J		05/26/2021	14.28		14.28
2016-03-0075887	MEDINA-GOMEZ CESAR		05/26/2021	55.10		55.10
2016-03-0076218	MEYDAG DAKOTA N		05/26/2021	57.96		57.96
2016-03-0076397	MILLICI ANTHONY J JR		05/26/2021	764.57		764.57
2016-03-0076525	MILONE JOSEPHINE M		05/26/2021	168.45		168.45
2016-03-0076526	MILONE JOSEPHINE M		05/26/2021	110.49		110.49
2016-03-0076528	MILONE ROBERT T		05/26/2021	73.17		73.17
2016-03-0076553	MINERI MICHAEL J		05/26/2021	155.88		155.88
2016-03-0076580	MIRANDA JOSHUA J		05/26/2021	251.24		251.24
2016-03-0076850	MONTEIRO ANTONIO		05/26/2021	66.52		66.52
2016-03-0076905	MOORE CHRYSYAL M		05/26/2021	131.33		131.33
2016-03-0077044	MOREIRA EUNICE J		05/26/2021	327.18		327.18
2016-03-0077107	MORIN STEPHEN E		05/26/2021	212.98		212.98
2016-03-0077108	MORMAN PAUL A		05/26/2021	57.39		57.39
2016-03-0077109	MORMAN PAUL A		05/26/2021	49.39		49.39
2016-03-0077110	MORMAN PAUL A		05/26/2021	46.25		46.25
2016-03-0077148	MORRIS JACOB A		05/26/2021	190.43		190.43
2016-03-0077231	MOSLOW DAVID W SR		05/26/2021	583.56		583.56
2016-03-0077232	MOSQUERA ANTHONY D		05/26/2021	65.38		65.38
2016-03-0077314	MRAZIK MICHAEL		05/26/2021	240.39		240.39
2016-03-0077408	MULLEN DEBORAH L		05/26/2021	257.81		257.81
2016-03-0077616	MURRAY RYAN J		05/26/2021	420.83		420.83
2016-03-0077763	NAGY FRANK A		05/26/2021	14.28		14.28
2016-03-0077764	NAGY FRANK A		05/26/2021	752.86		752.86
2016-03-0077873	NATIONS ROGER W		05/26/2021	49.39		49.39
2016-03-0078076	NEVILLE ROGER R		05/26/2021	202.42		202.42
2016-03-0078110	NEW HAVEN DONUTS INC.		05/26/2021	143.04		143.04
2016-03-0078143	NEWTON DARLENE F		05/26/2021	89.93		89.93
2016-03-0078144	NEWTON DARLENE F		05/26/2021	89.93		89.93
2016-03-0078837	NEWTON DARLENE F		05/26/2021	57.39		57.39
2016-03-0078838	NJOKU DEXTER O		05/26/2021	110.49		110.49
2016-03-0078859	NOLAN MATHEW J		05/26/2021	107.06		107.06
2016-03-0078923	NORTH EAST STEEL MACHINE		05/26/2021	510.76		510.76
2016-03-0078956	NOT YOUR MAMAS BALLS LLC		05/26/2021	233.82		233.82
2016-03-0078985	NOVAK ANDREW J		05/26/2021	378.86		378.86
2016-03-0079021	NOWELL KELLIE M		05/26/2021	85.94		85.94
2016-03-0079037	NUNEZ ENRIQUE		05/26/2021	230.97		230.97
2016-03-0079079	OATHOUT KRISTIE A		05/26/2021	109.06		109.06
2016-03-0079087	ORITZ STEVEN G		05/26/2021	86.51		86.51
2016-03-0079140	OCEAN STAR TRANS LLC		05/26/2021	946.15		946.15
2016-03-0079218	OGDEN STEPHEN M		05/26/2021	137.04		137.04
2016-03-0079353	OLSON ROWENA		05/26/2021	66.52		66.52
2016-03-0079367	OMALLEY GERALDINE M		05/26/2021	264.37		264.37
2016-03-0079612	OSULLIVAN MICHAEL J		05/26/2021	160.45		160.45
2016-03-0079704	PACHECO ANA P		05/26/2021	532.74		532.74
2016-03-0079756	PAGANO LORI T		05/26/2021	101.92		101.92
2016-03-0079865	PALLOTTO JAMES R		05/26/2021	92.50		92.50
2016-03-0079915	PALOWSKI TIFFANY		05/26/2021	386.28		386.28
2016-03-0079940	PANDIANI LISA J		05/26/2021	156.45		156.45

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2016-03-0079941	PANDIANI LISA J		05/26/2021	51.10		51.10
2016-03-0079942	PANDIANI LISA J		05/26/2021	19.70		19.70
2016-03-0080062	PAPALLO LOUIS A		05/26/2021	124.48		124.48
2016-03-0080063	PAPALLO LOUIS A		05/26/2021	71.38		71.38
2016-03-0080131	PARCESEPE ELAINA T		05/26/2021	362.21		362.21
2016-03-0080151	PARENTE MARIA E		05/26/2021	132.47		132.47
2016-03-0080359	PATEL DEEPAK K		05/26/2021	124.71		124.71
2016-03-0080524	PAUL BENJAMIN D		05/26/2021	339.17		339.17
2016-03-0080790	PENDER DANIEL K		05/26/2021	221.55		221.55
2016-03-0080791	PENDER DANIEL K		05/26/2021	125.33		125.33
2016-03-0080792	PENDER ELENA C		05/26/2021	171.87		171.87
2016-03-0080806	PENNA ANDREW P		05/26/2021	240.39		240.39
2016-03-0080840	PENTZ-THOLENAAR LUC JOHN		05/26/2021	62.07		62.07
2016-03-0080841	PENTZ-THOLENAAR LUC J		05/26/2021	118.48		118.48
2016-03-0080873	PERCOPO CAROLINE J		05/26/2021	99.07		99.07
2016-03-0081044	PERRONE JONATHAN M		05/26/2021	49.11		49.11
2016-03-0081071	PERRY GLENN S		05/26/2021	133.90		133.90
2016-03-0081090	PERRY TODD D		05/26/2021	155.88		155.88
2016-03-0081178	PETERSON CHERYL		05/26/2021	217.27		217.27
2016-03-0081179	PETERSON CHERYL		05/26/2021	43.11		43.11
2016-03-0081448	PETRAFASSI NICHOLE M		05/26/2021	141.32		141.32
2016-03-0081449	PETRAFASSI NICHOLE M		05/26/2021	392.85		392.85
2016-03-0081527	PEZZUTI JEFFREY L		05/26/2021	45.11		45.11
2016-03-0081528	PEZZUTI NICHOLAS F		05/26/2021	83.08		83.08
2016-03-0081707	PIMPINELLI ALYSSA L		05/26/2021	124.48		124.48
2016-03-0081710	PINA-RUIZ JORGE E		05/26/2021	131.04		131.04
2016-03-0081925	PLAYER CRAIG J		05/26/2021	14.28		14.28
2016-03-0082173	PONCE FAUSTO		05/26/2021	362.30		362.30
2016-03-0082174	PONCE FAUSTO		05/26/2021	189.29		189.29
2016-03-0082175	PONCE FAUSTO		05/26/2021	72.52		72.52
2016-03-0082176	PONCE FAUSTO		05/26/2021	183.86		183.86
2016-03-0082177	PONCE FAUSTO		05/26/2021	169.02		169.02
2016-03-0082178	PONCE FAUSTO		05/26/2021	75.37		75.37
2016-03-0082183	PONCE LEIDA E		05/26/2021	215.84		215.84
2016-03-0082279	PORTO GREGORY JR		05/26/2021	82.51		82.51
2016-03-0082455	PRESS DYLAN R		05/26/2021	385.72		385.72
2016-03-0082472	PRICE JANET T		05/26/2021	143.32		143.32
2016-03-0082607	PULAWSKI RYSZARD		05/26/2021	2.00		2.00
2016-03-0082608	PULAWSKI RYSZARD		05/26/2021	218.98		218.98
2016-03-0082646	PURDY DANIEL P		05/26/2021	14.28		14.28
2016-03-0082649	PURIFICATO RALPH L JR		05/26/2021	391.71		391.71
2016-03-0082692	Q RIVER LLC		05/26/2021	189.00		189.00
2016-03-0082813	QUIRIN MATTHEW C		05/26/2021	412.83		412.83
2016-03-0082840	R&S LANDSCAPING AND NURSERY LLC		05/26/2021	99.35		99.35
2016-03-0082841	R&S LANDSCAPING AND NURSERY LLC		05/26/2021	151.32		151.32
2016-03-0082895	RADFORD MICHAEL A JR		05/26/2021	397.13		397.13
2016-03-0082896	RADNOCZI THOMAS M		05/26/2021	19.13		19.13
2016-03-0082924	RAFFILE TIMOTHY M JR		05/26/2021	170.44		170.44
2016-03-0082988	RAMADEI RYAN O		05/26/2021	51.68		51.68
2016-03-0083002	RAMIREZ FELIX A		05/26/2021	152.46		152.46
2016-03-0083024	RAMOS EDGAR		05/26/2021	149.89		149.89
2016-03-0083039	RAMOS MEGHAN L		05/26/2021	53.96		53.96
2016-03-0083101	RASHBA ALEXANDRA C		05/26/2021	204.99		204.99
2016-03-0083261	REEVE HELEN A		05/26/2021	42.54		42.54
2016-03-0083302	REID TYLER W		05/26/2021	199.85		199.85
2016-03-0083490	REYNOLDS TAYLOR F		05/26/2021	14.28		14.28

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2016-03-0083506	RHODES JAMES G		05/26/2021	47.11		47.11
2016-03-0083507	RHODES JAMES G		05/26/2021	59.67		59.67
2016-03-0083633	RICHARDS VICTORIA E		05/26/2021	83.08		83.08
2016-03-0083692	RIEDINGER DAWN M		05/26/2021	493.63		493.63
2016-03-0083735	RINALDO KARI W		05/26/2021	94.50		94.50
2016-03-0083879	RIVERA-MONTALVO YADARIS		05/26/2021	69.38		69.38
2016-03-0083898	ROARK ROBERT J		05/26/2021	169.87		169.87
2016-03-0084018	ROBLES SAMANTHA J		05/26/2021	52.25		52.25
2016-03-0084074	RODD BARNES K		05/26/2021	64.44		64.44
2016-03-0084089	RODENHIZER JAMES T		05/26/2021	139.32		139.32
2016-03-0084164	RODRIGUEZ MAYRA		05/26/2021	158.45		158.45
2016-03-0084245	ROJO SALES LLC		05/26/2021	65.95		65.95
2016-03-0084246	ROJO SALES LLC		05/26/2021	77.09		77.09
2016-03-0084346	ROSA-MONTAS JOSE A		05/26/2021	153.03		153.03
2016-03-0084466	ROY ALICIA A		05/26/2021	297.21		297.21
2016-03-0084533	RUDMAN APRIL L		05/26/2021	347.17		347.17
2016-03-0084544	RUDZINSKI CATHY A		05/26/2021	260.95		260.95
2016-03-0084545	RUDZINSKI CATHY A		05/26/2021	186.72		186.72
2016-03-0084605	RUIZ-MEZA HECTOR G		05/26/2021	47.11		47.11
2016-03-0084648	RUSATE MIGUEL		05/26/2021	59.10		59.10
2016-03-0084702	RUSSO JOHN C JR		05/26/2021	153.31		153.31
2016-03-0085123	SALISBURY BRIAN C		05/26/2021	89.08		89.08
2016-03-0085461	SARRACCO CHELSEY M		05/26/2021	84.51		84.51
2016-03-0085473	SARRO NICHOLAS		05/26/2021	286.36		286.36
2016-03-0085664	SCANLON MARIE E		05/26/2021	95.93		95.93
2016-03-0085745	SCHEDE ROSE B		05/26/2021	93.93		93.93
2016-03-0086048	SECONDI ROBERT J		05/26/2021	119.91		119.91
2016-03-0086435	SHEA LISA S		05/26/2021	83.94		83.94
2016-03-0086440	SHEADES JENNIFER C		05/26/2021	85.94		85.94
2016-03-0086480	SHEFTEL SYLVIA A		05/26/2021	132.47		132.47
2016-03-0086561	SHINGLER BRIAN J		05/26/2021	14.28		14.28
2016-03-0086562	SHINGLER BRIAN J		05/26/2021	376.29		376.29
2016-03-0086563	SHINGLER BRIAN J		05/26/2021	14.28		14.28
2016-03-0086586	SHORELINE HARDSCAPES LLC	DE DECEASED	02/19/2021	76.51		76.51
2016-03-0086587	SHORELINE HARDSCAPES LLC	DE DECEASED	02/19/2021	137.90		137.90
2016-03-0086590	SHOREY DEBRA D		05/26/2021	75.94		75.94
2016-03-0086812	SIMPSON YANISHA P		05/26/2021	157.88		157.88
2016-03-0086853	SIMON NICHOLAUS S		05/26/2021	61.38		61.38
2016-03-0086854	SIMON NICHOLAUS S		05/26/2021	61.95		61.95
2016-03-0086958	SLINEY JOHN D		05/26/2021	125.05		125.05
2016-03-0087024	SMIT CATHERINE L		05/26/2021	458.23		458.23
2016-03-0087085	SMITH DONALD C		05/26/2021	105.92		105.92
2016-03-0087135	SMITH LOWELL D 3RD		05/26/2021	293.21		293.21
2016-03-0087152	SMITH RAYMOND J		05/26/2021	81.37		81.37
2016-03-0087561	SPANER SHARON R		05/26/2021	71.95		71.95
2016-03-0087613	SPEL FRANCIS X 3RD		05/26/2021	177.87		177.87
2016-03-0088203	STPIERRE DANA L		05/26/2021	114.49		114.49
2016-03-0088205	STPIERRE JEFFREY A		05/26/2021	83.94		83.94
2016-03-0088215	STRAIN KEVIN J JR		05/26/2021	61.10		61.10
2016-03-0088232	STREATER JASMINE R		05/26/2021	125.91		125.91
2016-03-0088397	SUMMA JENNIFER L		05/26/2021	67.95		67.95
2016-03-0088572	SYLVESTRE MALAINA J		05/26/2021	189.29		189.29
2016-03-0088800	TATRO KRISTINA D		05/26/2021	544.16		544.16
2016-03-0088826	TAYLOR CATHERINE A		05/26/2021	117.34		117.34
2016-03-0088895	TBG LAWN CARE LLC		05/26/2021	92.50		92.50
2016-03-0089028	TETREAULT CARRIE L		05/26/2021	189.86		189.86

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2016-03-0089197	THOMPSON ERIN M		05/26/2021	258.95		258.95
2016-03-0089222	THOMSON VINCENT J		05/26/2021	232.40		232.40
2016-03-0089238	THORPE IAN		05/26/2021	157.88		157.88
2016-03-0089475	TOMER JUSTIN M		05/26/2021	273.22		273.22
2016-03-0089599	TORRES JOSUE		05/26/2021	91.36		91.36
2016-03-0089603	TORRES LOURDES		05/26/2021	248.39		248.39
2016-03-0089692	TOWLE BRETT S		05/26/2021	127.90		127.90
2016-03-0090129	TRACY JENNIFER K		05/26/2021	279.79		279.79
2016-03-0090133	TRACY PAUL A		05/26/2021	19.13		19.13
2016-03-0090134	TRACY PAUL A CMAN		05/26/2021	111.06		111.06
2016-03-0090187	TRAVERS CATHLEEN M		05/26/2021	159.88		159.88
2016-03-0090188	TRAVERS GEORGE B 4TH		05/26/2021	99.93		99.93
2016-03-0090412	TSOURKALAS MICHAEL C		05/26/2021	89.08		89.08
2016-03-0090364	TRUE JUSTIN D		05/26/2021	47.11		47.11
2016-03-0090584	TURNER MARK R		05/26/2021	350.31		350.31
2016-03-0090808	UDU LANRE O		05/26/2021	208.99		208.99
2016-03-0091020	URQUHART KEITH D		05/26/2021	87.08		87.08
2016-03-0091402	VANAMAN GERALDINE A		05/26/2021	95.07		95.07
2016-03-0091404	VELEZ SHARAYAH L		05/26/2021	109.92		109.92
2016-03-0091404	VELEZ TIMOTHY JR		05/26/2021	106.49		106.49
2016-03-0091405	VELEZ TIMOTHY JR		05/26/2021	123.05		123.05
2016-03-0091658	VINTAGE COLLECTABLES BRICK STORE INC		05/26/2021	94.50		94.50
2016-03-0092003	VYNALEK JEFFREY R		05/26/2021	119.91		119.91
2016-03-0092004	VYNALEK JEFFREY R		05/26/2021	281.22		281.22
2016-03-0092036	WAKEFIELD CUSHMAN INC		05/26/2021	109.92		109.92
2016-03-0092082	WALKER PETER R		05/26/2021	218.98		218.98
2016-03-0092267	WALZ JUDITH A		05/26/2021	57.39		57.39
2016-03-0092358	WARREN BRANDY J		05/26/2021	91.93		91.93
2016-03-0092415	WATERBURY CHARLES H 4TH		05/26/2021	51.39		51.39
2016-03-0092543	WELBRON CHRISTOPHER A		05/26/2021	74.09		74.09
2016-03-0092574	WELSH ROBERT N		05/26/2021	108.49		108.49
2016-03-0092647	WHALEN DAVID J		05/26/2021	308.91		308.91
2016-03-0092759	WHITE VIOLENE D		05/26/2021	186.43		186.43
2016-03-0092760	WHITE VIOLENE D		05/26/2021	82.51		82.51
2016-03-0092853	WHITTAKER ROBERT M		05/26/2021	107.06		107.06
2016-03-0092909	WILCOX CHRISTINA L		05/26/2021	285.21		285.21
2016-03-0092910	WILCOX CHRISTINA L		05/26/2021	217.84		217.84
2016-03-0092936	WILKINSON JOSEPH A		05/26/2021	36.54		36.54
2016-03-0093022	WILLIAMS KYLE J		05/26/2021	177.01		177.01
2016-03-0093065	WILLIAMS-DEMANCHE MICHELLE M		05/26/2021	53.96		53.96
2016-03-0093078	WILMOT KRISTIN K		05/26/2021	479.07		479.07
2016-03-0093121	WINCH ALINE M		05/26/2021	88.51		88.51
2016-03-0093325	WOODBURY FRANCIS W JR		05/26/2021	185.00		185.00
2016-03-0093355	WOODTKE KENNETH		05/26/2021	383.14		383.14
2016-03-0093394	WORONICK GAYLE A		05/26/2021	258.95		258.95
2016-03-0093499	XIMENA MAINTENANCE LLC		05/26/2021	88.51		88.51
2016-03-0093500	XPRESS DELIVERY LLC		05/26/2021	417.12		417.12
2016-03-0093501	XPRESS DELIVERY LLC		05/26/2021	28.75		28.75
2016-03-0093661	YOUNG JOSEPH L		05/26/2021	187.86		187.86
2016-03-0093776	ZAMBRANO-FUENTES RODRIGO D		05/26/2021	53.67		53.67
2016-03-0093797	ZANIN PAMELA S		05/26/2021	52.66		52.66
2016-03-0093917	ZIEL PATRICIA M		05/26/2021	74.52		74.52
2016-03-0094060	ZYZO RAYMOND C		05/26/2021	107.92		107.92
2016-03-0094129	JR CONSTRUCTION		05/26/2021	213.84		213.84
2016-03-0094136	FERNANDEZ-PILATASIG JHON R		05/26/2021	102.84		102.84
2016-03-0094154	BELL PATRICE		05/26/2021	111.92		111.92

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2016-03-0094168	PELLICCIO CHRISTINA M		05/26/2021	179.29		179.29
2016-03-0094176	GOOT MAE ANN P		05/26/2021	43.97		43.97
2016-03-0094177	DURRANI MUHAMMAD		05/26/2021	89.08		89.08
2016-03-0094181	LEONARD SEAN R		05/26/2021	137.90		137.90
2016-03-0094197	PERRONE DIAZ JESSICA		05/26/2021	204.99		204.99
2016-03-0094209	MOORE STEVEN T		05/26/2021	171.01		171.01
2016-03-0094393	JAMAICAN GOURMET PRODUCTS INC		05/26/2021	698.62		698.62
2016-03-0094503	YOST WILLIAM R		05/26/2021	75.94		75.94
2016-03-0094522	RANDALL NEIL A		05/26/2021	119.91		119.91
2016-03-0094589	GLATT STUART J		05/26/2021	77.37		77.37
2016-03-0094603	NEILANDER DARRELL R		05/26/2021	173.87		173.87
2016-03-0094622	BRUNO ANTHONY J		05/26/2021	206.42		206.42
2016-03-0094657	SCHLETT HANNELORE A		05/26/2021	58.53		58.53
2016-03-0094682	GAFFNEY MOLLY K		05/26/2021	168.45		168.45
2016-03-0094794	MUNCK ZACHARY J		05/26/2021	23.55		23.55
2016-03-0094795	CRUZ WINDA		05/26/2021	236.39		236.39
2016-03-0094812	PAPALE FREDERIC A III OR		05/26/2021	275.79		275.79
2016-03-0094815	SABETTA ANDREW		05/26/2021	115.34		115.34
2016-03-0094816	SABETTA ANDREW J		05/26/2021	289.21		289.21
2016-03-0094818	NAZARIO DEBORAH		05/26/2021	241.82		241.82
2016-03-0094819	ROSOFF ROBERT R		05/26/2021	233.82		233.82
2016-03-0094822	HINKLEY PATRICIA E		05/26/2021	150.46		150.46
2016-03-0094823	STONE GLENN R JR		05/26/2021	99.93		99.93
	# Of Acct: 576			102,173.59		102,173.59
	MOTOR VEHICLE					
2016-04-0080006	ABATE SHANNON L		05/26/2021	226.92		226.92
2016-04-0080199	AL-BATAINEH KAREN M		05/26/2021	69.21		69.21
2016-04-0080265	ANDERSEN KATHERINE E		05/26/2021	80.85		80.85
2016-04-0080347	ARMINIO MICHAEL L		05/26/2021	23.55		23.55
2016-04-0080410	B & B TRUCKING L.L.C.		05/26/2021	19.39		19.39
2016-04-0080452	BARAKAT JESSICA T		05/26/2021	48.71		48.71
2016-04-0080505	BARNES MICHAEL A		05/26/2021	85.51		85.51
2016-04-0080506	BARNES MICHAEL A		05/26/2021	76.97		76.97
2016-04-0080520	BARRETT DANIELLE C		05/26/2021	398.36		398.36
2016-04-0080609	BELLENARE ADAM F		05/26/2021	91.36		91.36
2016-04-0080835	BRITTINGHAM DELLA L		05/26/2021	28.12		28.12
2016-04-0080836	BRITTINGHAM DELLA L		05/26/2021	51.82		51.82
2016-04-0080885	BUCKLEY WILLIAM J		05/26/2021	106.06		106.06
2016-04-0080898	BUONOCORE AMANDA A		05/26/2021	591.93		591.93
2016-04-0080899	BUONTEMPO REBECCA S		05/26/2021	279.22		279.22
2016-04-0080919	BUSH KEVIN M		05/26/2021	11.02		11.02
2016-04-0081016	CAGGIAMO JOSEPH S		05/26/2021	2.34		2.34
2016-04-0081020	CAIN TIMOTHY A		05/26/2021	9.59		9.59
2016-04-0081021	CAIN TIMOTHY J		05/26/2021	88.28		88.28
2016-04-0081032	CALLE ROBERTO C		05/26/2021	19.99		19.99
2016-04-0081036	CAMACHO ALEX D		05/26/2021	77.54		77.54
2016-04-0081037	CAMACHO ALEX D		05/26/2021	45.42		45.42
2016-04-0081059	CANTO JASON W		05/26/2021	74.77		74.77
2016-04-0081349	CINEMACAR LEASING INC		05/26/2021	238.82		238.82
2016-04-0081396	CLS 123 LLC		05/26/2021	1,073.77		1,073.77
2016-04-0081427	COLEMAN SARAH D		05/26/2021	216.67		216.67
2016-04-0081474	CONROY ROBERT P		05/26/2021	39.94		39.94
2016-04-0081475	CONROY ROBERT P		05/26/2021	99.93		99.93
2016-04-0081476	CONROY ROBERT P		05/26/2021	50.42		50.42
2016-04-0081800	DEMPSTER VANESSA A		05/26/2021	154.46		154.46
2016-04-0081861	DIGIACOMO NICHOLAS A		05/26/2021	134.16		134.16

Modify Suspense Report

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Town Due/Susp

Dist Due/SuspSewer Due/Susp

Total

Bill #	Dst Name	Code Reason	Date	Town Due/Susp	Dist Due/SuspSewer Due/Susp	Total
2016-04-0081935	DOMINY DAVID A		05/26/2021	39.74		39.74
2016-04-0081969	DOWD WILLIAM R		05/26/2021	100.47		100.47
2016-04-0081987	DRESSEL CHRISTOPHER M		05/26/2021	25.44		25.44
2016-04-0082297	EVANS IAN R		05/26/2021	62.30		62.30
2016-04-0082299	EVERSON VERONICA N		05/26/2021	410.72		410.72
2016-04-0082392	FERRIE BENJAMIN		05/26/2021	56.57		56.57
2016-04-0082516	FRESH STORE 24 LLC		05/26/2021	201.91		201.91
2016-04-0082517	FRESH STORE 24 LLC		05/26/2021	418.60		418.60
2016-04-0082518	FRESH STORE 24 LLC		05/26/2021	430.59		430.59
2016-04-0082519	FRESH STORE 24 LLC		05/26/2021	430.19		430.19
2016-04-0082523	FRIBERG JAMES J		05/26/2021	197.14		197.14
2016-04-0082535	FUENTES RAFAEL		05/26/2021	70.69		70.69
2016-04-0082627	GARGALY ANTHONY S JR		05/26/2021	29.01		29.01
2016-04-0082678	GENTILE ANDREA M		05/26/2021	212.33		212.33
2016-04-0082706	GIANOTTI KEITH V		05/26/2021	31.80		31.80
2016-04-0082749	GITTER RACHEL E		05/26/2021	2.37		2.37
2016-04-0082789	GOMES JOSE L		05/26/2021	85.39		85.39
2016-04-0082790	GOMES JOSE L		05/26/2021	50.31		50.31
2016-04-0082855	GRASSO-TORLISH JENNIFER A		05/26/2021	440.67		440.67
2016-04-0082866	GREAVES JAIME L		05/26/2021	36.77		36.77
2016-04-0082980	HARRINGTON RICHARD V JR		05/26/2021	91.65		91.65
2016-04-0083016	HAYDEN RICHARD W		05/26/2021	41.37		41.37
2016-04-0083102	HIGGINS RYAN D		05/26/2021	59.21		59.21
2016-04-0083280	HUGHES BENJAMIN E		05/26/2021	105.98		105.98
2016-04-0083433	ISENBERG ROSS W		05/26/2021	140.32		140.32
2016-04-0083517	JIMENEZ KELLY		05/26/2021	342.97		342.97
2016-04-0083544	JONES GREGORY W		05/26/2021	47.68		47.68
2016-04-0083759	KHAN AHSAN A		05/26/2021	254.95		254.95
2016-04-0083792	KNAPP HEATHER R		05/26/2021	288.01		288.01
2016-04-0083803	KOBIEROWSKI CHRISTOPHER R		05/26/2021	127.19		127.19
2016-04-0083829	KOSNOFF YONG S		05/26/2021	262.95		262.95
2016-04-0083920	LANDINO VINCENZO M		05/26/2021	171.30		171.30
2016-04-0083924	LANGE GEORGE R		05/26/2021	171.73		171.73
2016-04-0083938	LARER JAMES		05/26/2021	242.68		242.68
2016-04-0083950	LASKY JASON R		05/26/2021	91.59		91.59
2016-04-0084025	LEE REBECCA C		05/26/2021	439.58		439.58
2016-04-0084049	LEONARD SEAN R		05/26/2021	224.75		224.75
2016-04-0084062	LEVERING CHRISTOPHER L		05/26/2021	9.00		9.00
2016-04-0084141	LOPEZ WILLISTON W		05/26/2021	58.87		58.87
2016-04-0084153	LOWES HOME CENTER LLC		05/26/2021	568.12		568.12
2016-04-0084158	LUBECK KIMBERLY A		05/26/2021	258.66		258.66
2016-04-0084232	MAGYAR ANDREW J		05/26/2021	347.42		347.42
2016-04-0084258	MANCINI THERESA A		05/26/2021	99.07		99.07
2016-04-0084353	MARTOVICH JESSICA L		05/26/2021	19.50		19.50
2016-04-0084418	MASTROIANNI JOSEPH M		05/26/2021	42.77		42.77
2016-04-0084456	MCAULIFFE MATTHEW B		05/26/2021	17.33		17.33
2016-04-0084612	MEYER NICOLE G		05/26/2021	43.40		43.40
2016-04-0084648	MILLS BRIAN R		05/26/2021	79.51		79.51
2016-04-0084649	MILLS BRIAN R		05/26/2021	48.68		48.68
2016-04-0084652	MILONE ROBERT T		05/26/2021	24.18		24.18
2016-04-0084653	MILONE ROBERT T		05/26/2021	33.57		33.57
2016-04-0084700	MONTY ROBERT R JR		05/26/2021	30.83		30.83
2016-04-0084724	MORGAN SHANNON M		05/26/2021	133.81		133.81
2016-04-0084744	MOSCA KRISTEN R		05/26/2021	269.83		269.83
2016-04-0084854	NEGRINI CHRISTOPHER		05/26/2021	103.07		103.07
2016-04-0084857	NETLANDER CARSON R		05/26/2021	19.01		19.01

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Bill #	Dst Name	Code Reason	Date	Town Due/Susp	Dist Due/SuspSewer Due/Susp	Total
2016-04-0084858	NEILANDER CARSON R		05/26/2021	70.46		70.46
2016-04-0084888	NICHOLSON PATRICK J		05/26/2021	15.33		15.33
2016-04-0084889	NICHOLSON PATRICK J		05/26/2021	73.94		73.94
2016-04-0085219	OLIANO ROBERT G		05/26/2021	250.04		250.04
2016-04-0085247	ONOFRIO PATRICIA L		05/26/2021	153.31		153.31
2016-04-0085338	PANDIANI LISA J		05/26/2021	82.51		82.51
2016-04-0085478	PERCOPO CAROLINE J		05/26/2021	91.85		91.85
2016-04-0085584	PGR MANAGEMENT LLC		05/26/2021	23.52		23.52
2016-04-0085674	PONCE FAUSTO		05/26/2021	11.88		11.88
2016-04-0085732	PROSTANO RICHARD A JR		05/26/2021	124.85		124.85
2016-04-0085750	PURDY DANIEL P		05/26/2021	236.39		236.39
2016-04-0085826	RAMIREZ-AGUIRRE FRANCISCO J		05/26/2021	29.98		29.98
2016-04-0085827	RAMIREZ-AGUIRRE FRANCISCO J		05/26/2021	129.05		129.05
2016-04-0085842	RAPUANO WENDY N		05/26/2021	180.04		180.04
2016-04-0085849	RAYE CEDRIC L		05/26/2021	122.79		122.79
2016-04-0085860	RECENDIZ ELIZABETH		05/26/2021	117.28		117.28
2016-04-0085907	RHODES JAMES G		05/26/2021	71.66		71.66
2016-04-0086036	RODRIGUEZ-MODESTO GERARDO M		05/26/2021	61.04		61.04
2016-04-0086062	ROSTON DOUGLAS G		05/26/2021	59.96		59.96
2016-04-0086152	ROUDIE SUSAN A		05/26/2021	95.56		95.56
2016-04-0086204	RYERSON PAUL		05/26/2021	267.23		267.23
2016-04-0086204	SANDOVAL CHRISTOPHER J		05/26/2021	186.32		186.32
2016-04-0086393	SHINGLER BRIAN J		02/19/2021	13.99		13.99
2016-04-0086399	SHORELINE HARDCAPES LLC	DE DECREASED	05/26/2021	119.14		119.14
2016-04-0086510	SHURA MADISON C		05/26/2021	32.15		32.15
2016-04-0086543	SOPER TERESA E		05/26/2021	22.27		22.27
2016-04-0086615	SPENCER WILLIAM W		05/26/2021	48.45		48.45
2016-04-0086635	STJAMES DORIAN L		05/26/2021	46.02		46.02
2016-04-0086656	STROMSKY LISA M		05/26/2021	39.03		39.03
2016-04-0086759	SULLIVAN MARISA A		05/26/2021	260.38		260.38
2016-04-0086787	TETREAU/T CARL R		05/26/2021	127.30		127.30
2016-04-0087201	THOMPSON COREY M		05/26/2021	82.48		82.48
2016-04-0087202	VASAS CHRISTOPHER W		05/26/2021	164.45		164.45
2016-04-0087207	VASAS CHRISTOPHER W		05/26/2021	211.73		211.73
2016-04-0087296	VASS THOMAS		05/26/2021	88.22		88.22
2016-04-0087302	VINCENT SAMANTHA K		05/26/2021	119.97		119.97
2016-04-0087303	VIOMAX HEATING AND COOLING		05/26/2021	232.25		232.25
2016-04-0087315	VIOMAX HEATING AND COOLING		05/26/2021	49.59		49.59
2016-04-0087459	VITALE STANLEY N		05/26/2021	35.09		35.09
2016-04-0087471	WEAVER JEFFREY J		05/26/2021	280.93		280.93
2016-04-0087623	WEIDMANN MICHAEL W		05/26/2021	32.63		32.63
2016-04-0087624	WERRALL PAUL R		05/26/2021	113.69		113.69
2016-04-0087641	WORRELL MICHAEL C		05/26/2021	56.13		56.13
2016-04-0087702	WYNUS MICHAEL P		05/26/2021	42.63		42.63
2016-04-0087725	ZANIN WILLIAM T		05/26/2021	213.50		213.50
2016-04-0087742	ZITO AUDREY T		05/26/2021	179.87		179.87
2016-04-0087751	MA LAURENCE K		05/26/2021	78.34		78.34
2016-04-0087752	N.E.S.A.I.M. LLC		05/26/2021	490.35		490.35
2016-04-0087753	N.E.S.A.I.M. LLC		05/26/2021	137.44		137.44
2016-04-0087754	N.E.S.A.I.M. LLC		05/26/2021	181.44		181.44
2016-04-0087755	N.E.S.A.I.M. LLC		05/26/2021	460.00		460.00
2016-04-0087756	N.E.S.A.I.M. LLC		05/26/2021	218.09		218.09
2016-04-0087760	LISTORFI NICOLE A		05/26/2021	422.03		422.03
2016-04-0087784	BRISTOL-MEYERS SQUIBB COMPANY		05/26/2021	44.97		44.97
2016-04-0087813	CAMACHO ALEX D		05/26/2021	14.99		14.99
2016-04-0087813	CAMACHO ALEX D		05/26/2021	90.36		90.36

Bill #	Dst Name	Code Reason	Date	Town Due/Susp	Dist Due/SuspSewer Due/Susp	Total
2016-04-0087822	CJB TRANSPORT LLC		05/26/2021	29.01		29.01
2016-04-0087823	CJS PROPERTY PRESERVATION LLC		05/26/2021	90.50		90.50
2016-04-0087824	CONROY ROBERT P		05/26/2021	86.51		86.51
2016-04-0087845	ECKERT TARA A		05/26/2021	314.34		314.34
2016-04-0087860	GOMEZ BERNARDINO		05/26/2021	59.70		59.70
2016-04-0087873	LA KIEU N		05/26/2021	2.00		2.00
2016-04-0087880	MARQUARDT ROANNE L		05/26/2021	65.18		65.18
2016-04-0087900	MILLS BRIAN R		05/26/2021	90.99		90.99
2016-04-0087901	MILLS BRIAN R		05/26/2021	51.62		51.62
2016-04-0087903	MONTY ROBERT R JR		05/26/2021	43.88		43.88
2016-04-0088006	WYNUS MICHAEL P		05/26/2021	61.53		61.53
2016-04-0088010	ZHU XINHUA		05/26/2021	117.28		117.28
2016-04-0088018	MUNCK ZACHARY J		05/26/2021	169.90		169.90
2016-04-0088021	SEABROOK JESSICA N		05/26/2021	102.92		102.92
SUPPLEMENTAL MV	# Of Acct: 157			21,648.90		21,648.90
YR : 2016	TOTAL : 733			123,822.49		123,822.49
2017-03-0060593	DIAS ANTONIO S	DE DECEASED	02/19/2021	73.32		73.32
2017-03-0086523	SHORELINE HARDSCAPES LLC	DE DECEASED	02/19/2021	70.17		70.17
2017-03-0086524	SHORELINE HARDSCAPES LLC	DE DECEASED	02/19/2021	123.72		123.72
2017-03-0086525	SHORELINE HARDSCAPES LLC	DE DECEASED	02/19/2021	131.46		131.46
MOTOR VEHICLE	# Of Acct: 4			398.67		398.67
2017-04-0081857	DEMPSEY ASHLEY D	DE DECEASED	02/19/2021	42.96		42.96
2017-04-0083082	GIROUARD LYNNMARIE	DE DECEASED	02/19/2021	13.89		13.89
2017-04-0085826	POIRIER HERBERT N	DE DECEASED	02/19/2021	5.36		5.36
2017-04-0085827	POIRIER HERBERT N	DE DECEASED	02/19/2021	35.08		35.08
2017-04-0085828	POIRIER HERBERT N	DE DECEASED	02/19/2021	52.53		52.53
2017-04-0086763	STEPHENS CHARLES W	DE DECEASED	02/19/2021	128.59		128.59
SUPPLEMENTAL MV	# Of Acct: 6			278.41		278.41
YR : 2017	TOTAL : 10			677.08		677.08
2018-03-0060246	DEMPSEY ASHLEY D	DE DECEASED	02/19/2021	55.46		55.46
2018-03-0060546	DIAS ANTONIO S	DE DECEASED	02/19/2021	66.85		66.85
2018-03-0063755	FILES DONNA D	DE DECEASED	02/19/2021	106.84		106.84
2018-03-0065790	GIROUARD LYNNMARIE	DE DECEASED	02/19/2021	54.29		54.29
2018-03-0067649	HEINZ WALTER P	DE DECEASED	02/19/2021	17.81		17.81
2018-03-0073722	LUPONIO CRISTINA M	DE DECEASED	02/19/2021	67.43		67.43
2018-03-0081132	PERUTI CARL J	DE DECEASED	02/19/2021	21.60		21.60
2018-03-0082037	POIRIER HERBERT N	DE DECEASED	02/19/2021	40.87		40.87
2018-03-0082038	POIRIER HERBERT N	DE DECEASED	02/19/2021	74.14		74.14
2018-03-0083260	POIRIER HERBERT N	DE DECEASED	02/19/2021	70.93		70.93
2018-03-0083261	REIDELL WILLIAM J	DE DECEASED	02/19/2021	47.00		47.00
2018-03-0085528	REIDELL WILLIAM J	DE DECEASED	02/19/2021	96.62		96.62
2018-03-0086436	SCARPA LAUREN J	DE DECEASED	02/19/2021	108.88		108.88
2018-03-0086437	SHORELINE HARDSCAPES LLC	DE DECEASED	02/19/2021	59.26		59.26
2018-03-0087768	SHORELINE HARDSCAPES LLC	DE DECEASED	02/19/2021	142.16		142.16
2018-03-0093133	STEPHENS CHARLES W	DE DECEASED	02/19/2021	62.76		62.76
MOTOR VEHICLE	# Of Acct: 16			1,092.90		1,092.90
2018-04-0082402	ERICKSON JOHN W	DE DECEASED	02/19/2021	74.35		74.35
2018-04-0082403	ERICKSON JOHN W	DE DECEASED	02/19/2021	239.50		239.50
2018-04-0084323	LUPONIO CRISTINA M	DE DECEASED	02/19/2021	42.47		42.47

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Bill # Dst Name Town Due/Susp Dist Due/SuspSewer Due/Susp Total

2018-04-0087810 YOUNG LEROY J DE DECEASED 346.49
 SUPPLEMENTAL MV # Of Acct: 4 702.81

YR : 2018 TOTAL : 20 1,795.71

Bill #	Dst Name	Code	Reason	Date	Town Due/Susp	Dist Due/SuspSewer Due/Susp	Total
2019-03-0053739	BLANCHARD BARBARA A	DE	DECEASED	02/19/2021	76.19		76.19
2019-03-0060257	DEMPSEY ASHLEY D	DE	DECEASED	02/19/2021	52.83		52.83
2019-03-0060556	DIAS ANTONIO S	DE	DECEASED	02/19/2021	60.42		60.42
2019-03-0062864	ERICKSON JOHN W	DE	DECEASED	02/19/2021	113.72		113.72
2019-03-0063715	FILES DONNA D	DE	DECEASED	02/19/2021	89.91		89.91
2019-03-0064007	FLYNN ROBERT M	DE	DECEASED	02/19/2021	68.89		68.89
2019-03-0065400	GEREMIA KENNETH L	DE	DECEASED	02/19/2021	69.47		69.47
2019-03-0065720	GIROUARD LYNNMARIE	DE	DECEASED	02/19/2021	51.08		51.08
2019-03-0073755	LUPONIO CHRISTINA M	DE	DECEASED	02/19/2021	54.59		54.59
2019-03-0074167	MALAVASI LEONARD J	DE	DECEASED	02/19/2021	90.49		90.49
2019-03-0074574	MAROTTA JOSEPH P	DE	DECEASED	02/19/2021	596.06		596.06
2019-03-0075160	MATURO FILIPPO	DE	DECEASED	02/19/2021	46.70		46.70
2019-03-0076196	MERRILL MARIE L	DE	DECEASED	02/19/2021	90.49		90.49
2019-03-0077856	NASH EDITH J	DE	DECEASED	02/19/2021	188.57		188.57
2019-03-0079453	ONEY BRUCE R	DE	DECEASED	02/19/2021	92.53		92.53
2019-03-0080213	PARILLO JOSEPH A	DE	DECEASED	02/19/2021	330.14		330.14
2019-03-0080336	PASCARELLI FRANK J SR	DE	DECEASED	05/26/2021	20.43		20.43
2019-03-0081154	PERUTI CARL J	DE	DECEASED	02/19/2021	38.82		38.82
2019-03-0082057	POIRIER HERBERT N	DE	DECEASED	02/19/2021	170.18		170.18
2019-03-0082089	POLETTI LOUIS J	DE	DECEASED	02/19/2021	76.19		76.19
2019-03-0082090	POLETTI LOUIS J	DE	DECEASED	02/19/2021	65.97		65.97
2019-03-0083297	REIDELL WILLIAM J	DE	DECEASED	02/19/2021	172.22		172.22
2019-03-0084065	RODMAN KELLY A	DE	DECEASED	02/19/2021	69.47		69.47
2019-03-0085607	SCARPA LAUREN J	DE	DECEASED	02/19/2021	125.81		125.81
2019-03-0087825	STEPHENS CHARLES W	DE	DECEASED	02/19/2021	55.75		55.75
2019-03-0091658	VOOS SUSAN	DE	DECEASED	02/19/2021	58.67		58.67
2019-03-0093147	WOODS FRANCIS A	DE	DECEASED	02/19/2021	205.50		205.50
2019-03-0093244	WRIGHT JACOB J	DE	DECEASED	02/19/2021	319.92		319.92
2019-03-0093459	YOUNG LEROY J	DE	DECEASED	02/19/2021	3,549.09		3,549.09
	# Of Acct: 29						
2019-04-0080830	CAPASSO RALPH A	DE	DECEASED	05/26/2021	70.06		70.06
SUPPLEMENTAL MV	# Of Acct: 1						
YR : 2019	TOTAL : 30				3,619.15		3,619.15

Grand Total: 795 129,968.17

30,

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

Date: May 21, 2021

I. Request for: XX transfer of funds
 appropriation of funds

Fund: XX General Fund
 Other Title _____

Amount: \$ <u>700.00</u>	FROM: Title	<u>Dues & Fees</u>	Acct. No. <u>10010700-58810</u>
<u>300.00</u>		<u>Purchased Service</u>	<u>10010700-56702</u>
		<u>Secretarial</u>	

Amount: \$ <u>1000.00</u>	TO: Title	<u>Office Expenses & Supplies</u>	Acct. No. <u>10010700-56100</u>

Explanation: PER ATTACHED LETTER AS REQUIRED

Submitted by: [Signature]
Department/Division Head

Certified as to the availability of funds:
[Signature]
Comptroller

APPROVED -- subject to vote of the Town Council:
[Signature]
Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of \$ _____ as detailed and authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its meeting of _____, _____.

Town Clerk



RECEIVED
TOWN'S OFFICE
Town of Wallingford, Connecticut
21 MAY 19 PM 1:28

JAMES SEICHTER
CHAIRMAN PLANNING & ZONING COMMISSION

KEVIN J. PAGINI
TOWN PLANNER

WALLINGFORD TOWN HALL
45 SOUTH MAIN STREET
WALLINGFORD, CT 06492
TELEPHONE (203) 294-2090
FAX (203) 294-2095

May 21, 2021

William W. Dickinson, Jr., Mayor
Town of Wallingford
45 South Main Street
Wallingford, CT 06492

RE: Council Transfer
Planning & Zoning Department

Dear Mayor Dickinson:

I would ask that the following items be placed on the Town Council's Consent Agenda for their meeting of Tuesday, June 8, 2021:

Transfer of funds from the following accounts:

\$700.00 from Account #10010700-58810 – Dues and Fees
Into Account #10010700-56100 – Office Expenses and Supplies

\$300.00 from Account #10010700-56702 – Purchased Service, Secretarial
Into Account #10010700-56100 – Office Expenses and Supplies

Because of the increase in size of the Legal Notices, due to the additional log-in information for the virtual meetings, the cost of publication has surpassed our anticipated needs.

Thank you in advance for your kind consideration of this matter.

Regards,

Kevin J. Pagini
Town Planner

/ss
Attachment

TOWN OF WALLINGFORD, CONNECTICUT

3d

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

Date: May 27, 2021

I. Request for: X transfer of funds
 appropriation of funds

Fund: X General Fund
 Other Title _____

Amount: \$ 90.00 FROM: Title: Dues - Fees Acct No. 10010750 - 58810

Amount: \$ 90.00 TO: Title: Salaries + Wages Acct No. 10010750 - 51000

Explanation: PER ATTACHED LETTER AS REQUIRED

Submitted by:

[Signature]
Department/Division Head

Certified as to availability of funds:

[Signature]
Comptroller

APPROVED: --- subject to the availability of funds:

Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of \$ _____ as detailed and authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its meeting of _____, 20____.

Town Clerk



RECEIVED
MAYOR'S OFFICE
Town of Wallingford, Connecticut
21 JUN -1 PM 12:54

JAMES SEICHTER
CHAIRMAN-PLANNING & ZONING COMMISSION

KEVIN J. PAGINI
TOWN PLANNER

WALLINGFORD TOWN HALL
45 SOUTH MAIN STREET
WALLINGFORD, CT 06492
TELEPHONE (203) 294-2090
FAX (203) 294-2095

MEMORANDUM

To: Mayor Dickinson, Jr.
From: Kevin Pagini, Town Planner *KJP*
Date: May 27, 2021
Subject: Zoning Board of Appeals

RE: Town Council Meeting, June 8, 2021 – request for consideration of transfer of funds

This office is writing on behalf of the Zoning Board of Appeals regarding a request to be placed on the Town Council June 8, 2021 Meeting agenda relative to consideration of approval of the below transfer of funds (see attached forms):

Transfer of funds:

- o \$90.00 from ZBA Dues & Fees, Acct. #10010750-58810 to ZBA Salaries & Wages, Acct. #10010750-51000 to cover increased cost of Recording Secretary wages for ZBA meetings.

- o \$1,500.00 from Town Department TBD to ZBA Office Expenses & Supplies, Acct. #10010750-56100. This amount is necessary to cover Legal Notice expenses due to increase in size of Legal Notices resulting from additional log-in information for virtual meetings. It is anticipated the additional funds needed for Legal Notices from April to June 2021 will be \$1,500.00. The Zoning Board of Appeals does not have another account to transfer these additional funds from, and therefore it is necessary to request funds from another Town Department to cover the Legal Notice expenses.

Your consideration in this regard is much appreciated.

Attachment: Request forms

RECEIVED
MAYOR'S OFFICE
21 MAY 28 AM 11:35

TOWN OF WALLINGFORD, CONNECTICUT

3e

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

Date: May 27, 2021

I. Request for: transfer of funds
 appropriation of funds

Fund: General Fund
 Other Title _____

Amount: \$ 1,500.00 FROM: Title: Contingency Acct No. 10019000 - 58820

Amount: \$ 1,500.00 TO: Title: Office Exp. + Supplies Acct No. 10010750 - 56100

Explanation: PER ATTACHED LETTER AS REQUIRED

Submitted by: [Signature]
Department/Division Head

Certified as to availability of funds:
[Signature]
Comptroller

APPROVED: --- subject to the availability of funds:
[Signature]
Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of \$ _____ as detailed and authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its meeting of _____, 20____.

Town Clerk



Town of Wallingford, Connecticut

RECEIVED
MAYOR'S OFFICE
21 JUN -1 PM 12:54

JAMES SEICHTER
CHAIRMAN-PLANNING & ZONING COMMISSION

KEVIN J. PAGINI
TOWN PLANNER

WALLINGFORD TOWN HALL
45 SOUTH MAIN STREET
WALLINGFORD, CT 06492
TELEPHONE (203) 294-2090
FAX (203) 294-2095

MEMORANDUM

To: Mayor Dickinson, Jr.
From: Kevin Pagini, Town Planner *KJP*
Date: May 27, 2021
Subject: Zoning Board of Appeals

RE: Town Council Meeting, June 8, 2021 – request for consideration of transfer of funds

This office is writing on behalf of the Zoning Board of Appeals regarding a request to be placed on the Town Council June 8, 2021 Meeting agenda relative to consideration of approval of the below transfer of funds (see attached forms):

Transfer of funds:

- o \$90.00 from ZBA Dues & Fees, Acct. #10010750-58810 to ZBA Salaries & Wages, Acct. #10010750-51000 to cover increased cost of Recording Secretary wages for ZBA meetings.
- o \$1,500.00 from Town Department TBD to ZBA Office Expenses & Supplies, Acct. #10010750-56100. This amount is necessary to cover Legal Notice expenses due to increase in size of Legal Notices resulting from additional log-in information for virtual meetings. It is anticipated the additional funds needed for Legal Notices from April to June 2021 will be \$1,500.00. The Zoning Board of Appeals does not have another account to transfer these additional funds from, and therefore it is necessary to request funds from another Town Department to cover the Legal Notice expenses.

Your consideration in this regard in much appreciated.

Attachment: Request forms

RECEIVED
MAYOR'S OFFICE
21 MAY 28 AM 11:35

32

Town of Wallingford

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

Date: May 18, 2021

Request for: X Transfer of Funds
 Appropriation of Funds

Fund: General
 X Other

Amount: \$15,500 From: Regular Wages Account No: 10020050-551000

Amount: \$15,500 To: Cruiser Camera Systems Account No: TBD


Explanation: PER ATTACHED LETTER AS REQUIRED

Submitted by:



Division/Department Head

Certified as to the availability of funds:



Comptroller

APPROVED: Subject to vote of Town Council



Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of \$ _____ as detailed and authorized above and as approved by a vote of the Town Council in session hereby certified.

I hereby certify that this is the motion approved by the Town Council at its meeting of _____, 2021.

Town Clerk




Town of Wallingford, Connecticut
Department of Police Services

WILLIAM J. WRIGHT
CHIEF OF POLICE

135 NORTH MAIN STREET
WALLINGFORD, CT 06492-3718
TELEPHONE (203) 294-2828

INTEROFFICE MEMORANDUM

TO: MAYOR WILLIAM W. DICKINSON, JR.
FROM: CHIEF WILLIAM J. WRIGHT 
SUBJECT: TRANSFER REQUEST-CRUISER CAMERAS
DATE: 5/18/2021
CC:

Sir,

Pursuant to one of the directives contained within the Police Accountability Bill, we need to increase the amount of cruiser camera systems in our fleet of cruisers. In order to be fully compliant, we need to add three new systems. We have secured a quote for three systems from our vendor, WatchGuard for a total of \$15,465.00. The purchase is subject to a 30% reimbursement from the State of Connecticut.

Therefore, I am respectfully requesting that a transfer of \$15,500 be made from Regular Wages (Account No: 10020050-51000) to a new Capital account entitled Cruiser Camera Systems (Account No: TBD).

The customary financial transfer documents have been completed and a copy of this memorandum, accompanied by said transfer documents, has been provided to the finance office.

If you require anything further, please let me know.

39,

Town of Wallingford

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

Date: May 27, 2021

Request for: _____ Transfer of Funds
 X Appropriation of Funds


Fund: X General
 _____ Other

Amount: \$16,987.70 To: Revenue Highway Safety Account No: 1002001-45208

Amount: \$16,987.70 To: Police Overtime Account No: 10020050-51400


Explanation: PER ATTACHED LETTER AS REQUIRED

Submitted by:



Division/Department Head

Certified as to the availability of funds:



Comptroller

APPROVED: Subject to vote of Town Council



Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of \$ _____ as detailed and authorized above and as approved by a vote of the Town Council in session hereby certified.

I hereby certify that this is the motion approved by the Town Council at its meeting of _____, 2021.

Town Clerk



Town of Wallingford, Connecticut
Department of Police Services

WILLIAM J. WRIGHT
CHIEF OF POLICE

135 NORTH MAIN STREET
WALLINGFORD, CT 06492-3718
TELEPHONE (203) 294-2828

INTEROFFICE MEMORANDUM

TO: MAYOR WILLIAM W. DICKINSON, JR.
FROM: CHIEF WILLIAM J. WRIGHT
DATE: 5/27/21
SUBJECT: ACCEPTANCE OF GRANT FUNDS
CC: MR. JIM BOWES

21 MAY 28 PM 1:05
RECEIVED
MAYOR'S OFFICE

This agency had previously applied for a Federal/State Highway Safety grant, entitled "2020/2021 Distracted Driving High Visibility Enforcement Program". The grant, which is administered through the State Department of Transportation, is designed to increase local police staffing for the purpose of enforcing our distracted driving laws.

The grant reimburses us our overtime expenditures made pursuant to the terms of the grant program; in this case our reimbursement is \$16,987.70.

We have now received reimbursement through an electronic transfer. I write to request that the funds be accepted by the Council and deposited into the revenue account entitled: Highway Safety (Account 1002001-45208) and further, that our overtime expenditure account (Account 10020050-51400) be amended to reflect receipt of these funds as it is the account from which they were originally drawn. I have attached the requisite form for deposits and appropriations denoting the accounts to be adjusted.

Would you please place this matter on the agenda for the next scheduled Council meeting? If any further information is needed, please let me know.



Town of Wallingford, Connecticut

RECEIVED
MAYOR'S OFFICE
21 MAY 20 AM 11:30

ROBERT V. BALTRAMAITIS, P.E.
Director of Public Works

STEPHEN M. PALERMO
Superintendent of Public Works

Department of Public Works
29 Town Farm Road
Wallingford, Connecticut 06492

Telephone (203) 294-2105
Fax (203) 294-2107

MEMO

To: Mayor William W. Dickinson, Jr.

From: Rob Baltramaitis - DPW

Date: May 20, 2021

**RE: Request for Funding Transfers
To Account # 10030000-51400 Overtime**

Dear Mayor,

We respectfully request a transfer of funds from Account # 10030000-57000-00946 "Pick-up Truck 4x4" in the amount of \$19,558.00 into our Overtime account.

This amount is the unexpended balance after making our purchase. We need to replenish the overtime account as we continue to incur overtime costs for the ongoing Spring paving season, as well as weekend park maintenance.

As always, if you have any questions or require any additional information, please let me know.

Very Truly Yours,

Robert V. Baltramaitis, P.E.
DPW Director

TOWN OF WALLINGFORD

31

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford


Date: 5/28/21

- I. Request for: xx Transfer of funds
 Appropriation of funds
 General Fund
 Other Title

Amount: \$2,540.00 FROM: Title: Materials & Supplies Acct.No. 10030000-56140
 \$ _____ FROM: Title: _____ Acct. No. _____
 \$ _____ FROM: Title: _____ Acct. No. _____
 \$ _____ FROM: Title: _____ Acct. No. _____
 \$ _____ FROM: Title: _____ Acct. No. _____
 \$ _____ FROM: Title: _____ Acct. No. _____

Amount: \$2,540.00 TO: Title: Capital Account Acct. No. _____
 \$ _____ TO: Title: _____ Acct.No. _____

Explanation: PER ATTACHED LETTER AS REQUIRED

SUBMITTED BY: 
 Department/Division Head
 Robert V. Baltramaitis, Director Public Works
 Certified as to the availability of funds:


 Comptroller

APPROVED -- subject to vote of the Town Council:


 Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer of \$2,540.00 as detailed and authorized above and as approved by a vote of the Town Council in session is hereby certified.
 I hereby certify that this is the motion approved by the Town Council at its meeting of _____, 2021.

Town Clerk



TOWN OF WALLINGFORD

Department of Public Works
29 Town Farm Road
Wallingford, Connecticut 06492

Telephone (203) 294-2105
Fax (203) 294-2107

MEMORANDUM

RECEIVED
MAYOR'S OFFICE
21 MAY 28 PM 3:13

TO: Honorable William W. Dickinson Jr., Mayor
FROM: Robert V. Baltramaitis, Director of Public Works
SUBJECT: Transfer of \$2,540.00 to a Capital Account to be assigned
DATE: May 28, 2021

Dear Mayor Dickinson:

I respectfully request a transfer in the amount of \$2,540.00 to purchase a Fiberglass External Flagpole for Town Hall. We need to have a Capital Account set up in the amount of \$2,540.00 and ask that the money be transferred from our Materials and Supplies Line Item.

Materials and Supplies 10030000-56140	\$2,540.00
---------------------------------------	------------

Very truly yours,

Robert V. Baltramaitis, P.E., Director
PUBLIC WORKS DEPARTMENT

RVB/cj

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

Date: May 25, 2021

I. Request for: XX transfer of funds
 appropriation of funds

Fund: XX General Fund
 Other Title _____

Amount: \$ 320.00 FROM: Title Maintenance of Building Acct. No. 10020150-54315

Amount: \$ 320.00 TO: Title Purchased Services -
Custodial Services Acct. No. 10020150-56736

Explanation: PER ATTACHED LETTER AS REQUIRED

Submitted by: [Signature]
Department/Division Head Acting Fire Chief

Certified as to the availability of funds:

[Signature]
Comptroller

APPROVED -- subject to vote of the Town Council:

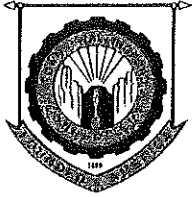
[Signature]
Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of \$ _____ as detailed and authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its meeting of _____, 20__.

Town Clerk



Town of Wallingford, Connecticut

RICHARD W. HEIDGERD
FIRE CHIEF

RECEIVED
MAYOR'S OFFICE

JOSEPH J. CZENTNAR
DEPUTY FIRE CHIEF

MAY 25

PM

SAMUEL C. WILSON
DEPUTY FIRE CHIEF

DEPARTMENT OF FIRE AND EMERGENCY SERVICES
75 MASONIC AVENUE
WALLINGFORD, CONNECTICUT 06492-3019
TELEPHONE (203) 294-2730

May 25, 2021

Mayor William Dickinson, Jr.
Town of Wallingford
45 South Main Street
Wallingford, CT 06492

Re: Transfer of Funds Fiscal Year 2020-2021

Dear Mayor,

It is necessary to transfer funds in the amount of \$320 into Account No. 10020150-56736 Purchased Services - Custodial Services due to the accepted Public Bid proposal amounts for custodial services being larger than the budgeted line amount. Funds are available to transfer from Account 10020150-54315 Maintenance of Building.

Transfer From:

Account 10020150-54315 Maintenance of Building \$320

Transfer To:

Account 10020150-56736 PS-Custodial Services \$320

If this transfer request meets with your approval, please place it on the June 8, 2021 Town Council Agenda.

Sincerely,

Joseph J. Czentnar
Deputy Fire Chief

TOWN OF WALLINGFORD, CONNECTICUT

3X

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

Date: June 1, 2021

I. Request for: XX Transfer of funds
 appropriation of funds

Fund: XX General Fund
 Other Title _____

Amount: \$ <u>20,000</u>	FROM: Title <u>General Wages</u>	Acct. NO. <u>10020150-51000</u>
\$ <u>5,000</u>	<u>Overtime</u>	<u>10020150-51400</u>
\$ <u>7,000</u>	<u>Wage Differential</u>	<u>10020150-51450</u>
\$ <u>5,000</u>	<u>Other Pay</u>	<u>10020150-51900</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Amount: \$ 37,000 TO: Title Replacement Pay Acct.NO: 10020150-51500

Explanation: PER ATTACHED LETTER AS REQUIRED

Submitted by: [Signature]
Department/Division Head

Certified as to the availability of funds:
[Signature]
Comptroller

APPROVED -- subject to vote of the Town Council:
W Dickinson
Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of \$ _____ as detailed and authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its meeting of _____, 20__.

Town Clerk



Town of Wallingford, Connecticut
RECEIVED
MAYOR'S OFFICE
21 JUN -1 PM 12:54

RICHARD W. HEIDGERD
FIRE CHIEF

JOSEPH J. CZENTNAR
DEPUTY FIRE CHIEF

SAMUEL C. WILSON
DEPUTY FIRE CHIEF

DEPARTMENT OF FIRE AND EMERGENCY SERVICES
75 MASONIC AVENUE
WALLINGFORD, CONNECTICUT 06492-3019
TELEPHONE (203) 294-2730

June 1, 2021

Mayor William W. Dickinson, Jr.
Town of Wallingford
45 South Main Street
Wallingford, CT 06492

Re: Transfer Request 2020-2021 Budget Year

Dear Mayor:

A transfer in the amount of \$37,000 to Account 10020150-51500 Replacement Pay will be required to cover a projected shortfall before the fiscal year end.

Funds are available to be transferred from Account 10020150-51000 General Wages, Account 10020150-51400 Overtime, Account 10020150-51450 Wage Differential and Account 10020150-51900 Other Pay.

Transfer From:

Account #10020150-51000 General Wages	\$20,000
Account #10020150-51400 Overtime	\$5,000
Account #10020150-51450 Wage Differential	\$7,000
Account #10020150-51900 Other Pay	\$5,000

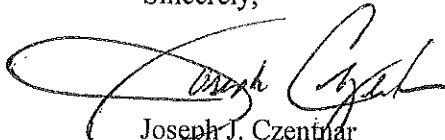
Transfer To:

Account # 10020150-51500 Replacement Pay	\$37,000
--	----------

If this transfer meets with your approval, please place it on the June 8, 2021 Town Council Agenda for consideration and approval.

Thank you for your attention to this issue.

Sincerely,



Joseph J. Czentnar
Acting Fire Chief

TOWN OF WALLINGFORD, CONNECTICUT

31,

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

Date: 6/1/2021

I. Request for: transfer of funds
 appropriation of funds

Fund: General Fund
 Other Title _____

Amount: \$ 1,800 FROM: Title Regular Salaries + Wages Acct. No. 1200-51000

Amount: \$ 1,800 TO: Title Overtime Acct. No. 1200-51400

Explanation: PER ATTACHED LETTER AS REQUIRED

Submitted by: [Signature]
Department/Division Head

Certified as to the availability of funds:
[Signature]
Comptroller

APPROVED -- subject to vote of the Town Council:

W Dickinson
Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of \$ _____ as detailed and authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its meeting of _____, 19 ____.

Town Clerk



TOWN OF WALLINGFORD


RECEIVED
MAYOR'S OFFICE

21 JUN -1 AM 11:03

JAMES R. HUTT, JR.
Human Resources Director
Town of Wallingford
45 South Main Street
Wallingford, CT 06492
Telephone (203) 294-2080
Fax (203) 294-2084

MEMORANDUM

TO: Mayor William Dickinson

FROM: James R. Hutt, Jr., Human Resources Director 

DATE: June 1, 2021

SUBJECT: Transfer Request

I respectfully request permission to approach the Town Council at its June 8, 2021 meeting to transfer \$1,800 from the department regular salaries & wages account to the department overtime account. This transfer is needed to cover costs associated with additional employment testing activity, office administration, and records management work that needs to be accomplished.

I have attached the appropriate form.

I will be at the meeting to answer any questions that may arise.

JRH/

Attachment

TOWN OF WALLINGFORD, CONNECTICUT

3m,

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

Date: 6/1/2021

I. Request for: X transfer of funds
 appropriation of funds

Fund: X General Fund
 Other Title _____

Amount: 5,000 FROM: Title: Regular Wages Acct No. 10010401-51000

Amount: 5,000 TO: Title: Overtime Acct. No. 10010401-51400

Explanation: PER ATTACHED LETTER AS REQUESTED

Submitted by: Timothy Sena
Department/Division Head
Timothy Sena, Deputy Comptroller

Certified as to availability of funds:
 Timothy Sena
Comptroller

APPROVED: -- subject to the availability of funds:
 W Dickinson
Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of \$ _____ as detailed and authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the town Council at its meeting of _____, 2021

Town Clerk

TOWN OF WALLINGFORD, CONNECTICUT

RECEIVED
MAYOR'S OFFICE

21 JUN -1 AM 11:38

Office of the Comptroller
45 South Main Street
Wallingford, CT 06492
(203)-294-2040

MEMORANDUM

TO: Mayor William W. Dickinson, Jr.
FROM: Timothy Sena, Deputy Comptroller *TMS*
DATE: June 1, 2021
RE: Transfer request

I respectfully request a transfer of \$5,000 from Regular Wages to Overtime within the Comptroller's budget.

In order to complete year-end tasks in a timely manner, I anticipate overtime will be necessary.

Please call me with any questions. The required authorization form is included with this memo.

TOWN OF WALLINGFORD, CONNECTICUT

30,

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

Date: 6/1/2021

I. Request for: transfer of funds
 appropriation of funds

Fund: General Fund
 Other Title _____

Amount: \$ 1000 FROM: Title: Vital Statistics Acct. No. 10010650.58850

Amount: \$ 1000 TO: Title: PS Index Acct. No. 10010650.26758

Explanation: PER ATTACHED LETTER AS REQUIRED

Submitted by: Deborah McKiernan
Department/Division Head

Certified as to the availability of funds:

[Signature]
Comptroller

APPROVED -- subject to vote of the Town Council:

W Dickinson
Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION

The transfer/appropriation of \$ _____ as detailed and authorized above and as Approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its meeting of

_____, 200__.

Town Clerk



Town of Wallingford, Connecticut

RECEIVED
TOWN CLERK'S OFFICE

21 JUN -1 AM 11:38

MEMORANDUM

TO: Mayor William Dickinson, Jr.
FROM: Deborah McKiernan, Town Clerk *DM*
DATE: June 1, 2021
SUBJECT: Transfer Request

I respectfully request permission to transfer funds in the amount of \$1000 from Vital Statistics to PS Index to pay for indexing supplies for the month of June. I also request a transfer in the amount of \$500 from Regular Salary and Wages to Overtime to pay the new Assistant Town Clerk to attend two Town Council meetings, one to familiarize herself with the process and one to cover a meeting when I am on vacation.

Thank you for your consideration.

TOWN OF WALLINGFORD, CONNECTICUT

30.

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

Date: 6/1/2021

I. Request for: transfer of funds
 appropriation of funds

Fund: General Fund
 Other Title _____

Amount: \$ 500. FROM: Title: Reg Sal. + Wages Acct. No. 1001065051000

Amount: \$ 500. TO: Title: Overtime Acct. No. 10010650-51400

Explanation: PER ATTACHED LETTER AS REQUIRED

Submitted by: Deborah McKernan
Department/Division Head

Certified as to the availability of funds:

[Signature]
Comptroller

APPROVED – subject to vote of the Town Council:

W Dickinson
Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION

The transfer/appropriation of \$ _____ as detailed and authorized above and as Approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its meeting of

_____, 200__.

Town Clerk



Town of Wallingford, Connecticut

RECEIVED
TOWN CLERK'S OFFICE

21 JUN -1 AM 11:38

MEMORANDUM

TO: Mayor William Dickinson, Jr.

FROM: Deborah McKiernan, Town Clerk *DM*

DATE: June 1, 2021

SUBJECT: Transfer Request

I respectfully request permission to transfer funds in the amount of \$1000 from Vital Statistics to PS Index to pay for indexing supplies for the month of June. I also request a transfer in the amount of \$500 from Regular Salary and Wages to Overtime to pay the new Assistant Town Clerk to attend two Town Council meetings, one to familiarize herself with the process and one to cover a meeting when I am on vacation.

Thank you for your consideration.

WALLINGFORD PUBLIC SCHOOLS

100 SOUTH TURNPIKE ROAD
WALLINGFORD, CONNECTICUT 06492
TELEPHONE (203) 949-6504
FAX (203) 949-6555

341
RECEIVED
MAYOR'S OFFICE
21 MAY 28 PM 1:08

May 26, 2021

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford
45 South Main Street
Wallingford, CT 06492

Dear Mayor Dickinson:

The Board of Education would like to put a request to accept the grants listed below on the Town Council Agenda dated June 8, 2021. The grants were awarded for an amount greater than the amount included in the original budget. The Town Revenue number is 2356002-45900.

<u>Grant Title</u>	<u>Grant Amount</u>
Title I	\$ 608,665.00
Title II	\$ 118,029.00
Vocational Education – Perkins	\$ 58,253.00
IDEA 611	\$1,342,636.00
Preschool – IDEA 619	\$ 38,743.00
Title III EL	\$ 46,108.00
Title III Immigrant	\$ 17,500.00
Smart Start	\$ 306,800.00

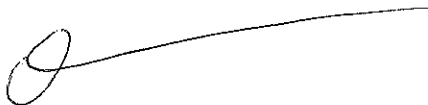
The following grants are new awards to the Wallingford Public School System:

<u>Grant Title</u>	<u>Grant Amount</u>
Coronavirus Relief Funds	\$2,706,998.00
The Gene Hass Foundation Grant	\$ 12,000.00
ESSER II Funds State Set-Aside	\$ 55,811.00
ESSER II Funds	\$2,027,836.00

The accounts will be used solely as a means to expend the above monies.

Please do not hesitate to contact me if you have any questions.

Sincerely,



Dominic Barone
Business Manager

CC: S. Menzo, C. LaTorre, J. Bowes, T. Hale

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

I. Request for: _____ transfer of funds
 X appropriation of funds

Fund: _____ General Fund
 X Title Coronavirus Relief Funds

Amount \$2,706,998.00 FROM: Title State Grant Revenues Account No. _____

Amount _____ TO: Title Program Expenditures

Explanation: ATTACHED LETTER AS REQUIRED

Submitted by _____
Business Manager, BOE

Certified as to the availability of funds:

Comptroller

APPROVED ---subject to vote of the Town Council:

Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of _____
authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its

meeting of _____, 20_____.

Town Clerk

STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

GRANT AWARD NOTIFICATION

1 Grant Recipient

Wallingford School District
DUNS Number: 010139228

4 Award Information

Grant Type: FEDERAL
Statute: P.L. 116-136 THE CARES ACT
CFDA #: 21.019
SDE Project Code: SDE000000000002
Grant Number: 148-000 12060-29561-2020-82079-124137

2 Grant Title

Coronavirus Relief Funds

5 Award Period

3/1/2020 - 12/30/2020

3 Education Staff

Program Manager:
Leah Grenier (860) 713-6632

Payment & Expenditure Inquiries:
Jeff Lindgren (860) 713-6624

6 Authorized Funding

Grant Amount: \$2,706,998.00

Funding Status: Final

7 Terms and Conditions of Award

This grant is contingent upon the continuing availability of funds from the grant's funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Due to the abbreviated grant period for the Coronavirus Relief Funds grant, requests for budget revisions for expenditures made between March 1, 2020 and December 30, 2020 must be submitted at least 30 days prior to the expiration of the award period but no later than November 30, 2020. Budget revisions submitted after this date are accepted at the discretion of the Coronavirus Relief Fund Program Manager. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7-396a of the Connecticut General Statutes.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant has been approved.

11/9/2020

Kathy Demsey - CSDE Management Approver

LEA	\$2,706,998.00	\$2,706,998.00
Total Allocation	\$2,706,998.00	\$2,706,998.00

Fiscal Transactions

Type	Date	Voucher Number	Total
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No Records Found

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

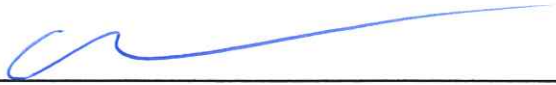
I. Request for: _____ transfer of funds
 X appropriation of funds

Fund: _____ General Fund
 X Title The Gene Haas Foundation Grant

Amount \$12,000.00 FROM: Title State Grant Revenues Account No. _____

Amount _____ TO: Title Program Expenditures


Explanation: ATTACHED LETTER AS REQUIRED

Submitted by 
Business Manager, BOE

Certified as to the availability of funds:


Comptroller

APPROVED ---subject to vote of the Town Council:


Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of _____
authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its
meeting of _____, 20_____.

Town Clerk



The Gene Haas Foundation

2800 STURGIS ROAD, OXNARD, CA 93030

Please read both sides

GRANT TERMS AND CONDITIONS Scholarships and Sponsorship

GRANT AWARD DATE: May 5, 2021

GRANT AMOUNT: \$12,000.00

- (a) **Your Tax-Exempt Status:** You are exempt under Internal Revenue Code Section 501(c)(3) and currently are classified as a public charity pursuant to Internal Revenue Code Section 509(a)(1), (2) or (3) (an "Exempt Public Charity"). A school is a "public charity" for this purpose. (Treas. Reg. § 1.509(a)-2(a)). This is a type of organization to which a private foundation can make grants without incurring a penalty tax or being required to exercise expenditure responsibility for those grants. (I.R.C. § 4945(d)(4)(A); Treas. Reg. § 53.4945-5(a)(1), (4)(i). Consequently, on the assumptions stated above, the Foundation can make grants to public schools that meet the requirements set forth above. To receive grant money from a private foundation like the Gene Haas Foundation the school does not need to be a Section 501(c)(3) organization. It only needs to meet the definition of a school quoted above. It can be an instrumentality of a state (such as a school district). If so it does not need to be a nonprofit corporation or a trust. However, if the school is not an instrumentality of a state, it generally must be a 501(c)(3) organization. (I.R.C. § 170(c).
- (b) **Grant Purpose and Expenditure of Funds:** You will utilize the grant proceeds to fund programs as long as it is consistent with the tax-exempt status described above and with the mission of your organization. You will not use any of the grant, or the interest or income thereon, to influence any legislation or the outcome of any election, to conduct a voter registration drive or to satisfy a charitable pledge or obligation of any person or organization.
- (c) **Scholarship Requirements:** The scholarship funds must be expended for student machinist-based training or engineering programs. The scholarship(s) will be referred to as the "Gene Haas Scholarship" in all on-line and print materials associated with the scholarship. It is your responsibility to ensure that the process of awarding these scholarships is open and equitable to all potential students.
- (d) **Other Terms:** These Grant Terms and Conditions control over and supersede any conflicting terms of any document that you may have received concerning the conditions under which this grant is made and are in addition to all other terms and conditions the Foundation may have provided. This grant is subject to these Terms and Conditions and by cashing the grant check, you are indicating that you agree to its terms. As used herein the term "you" and the like means the recipient of the Grant. The term "Foundation" means the foundation making the Grant.
- (e) *In the interest of our accounting our checks expire in 90 days. Please deposit your grant check as soon as you receive it. It will be void in 90 days and not be reissued.*



The Gene Haas Foundation

2800 STURGIS ROAD, OXNARD, CA 93030

Please read both sides

GHF's primary goal is to **build skills in the machining industry by providing scholarships for CNC machine technology students and NIMS credentials.**

Scholarship funds can be used for tuition, books, and small personal tools that are **required by program** are allowable student purchases. Up to \$2,000.00 per school year can be used for individual student manufacturing industry credentials; resources, accreditation, and workshops ARE NOT authorized expenditures of the Gene Haas scholarship grants. Recommended scholarship amounts are from \$500 to \$2500 per student. Please do not write checks too students rather present them with the required items clearly marked as a gift from the Gene Haas Foundation.

A specified amount of the funds, ***which will be written on the grant letter***, can be used for sponsorship of a competition in which individual students or teams of students participate. Eligible are competitions that showcase Manufacturing and CNC Machining Skills such as FIRST, NRL, Boots IQ, Skills CNC competitions, school racing programs such as Shell ECO and Solar car challenges and other robotics competition. Please provide information regarding your school's competitions as an attachment.

Schools have two years to award the scholarships and may apply every year. If your program has received funds in prior years you will be asked to provide a list of students who received the funds and/or a short description (photos are always nice) of the competition your school participated in.

In the interest of our accounting our checks expire in 90 days. Please deposit your grant check as soon as you receive it. It will void in 90 days and not be reissue able in that calendar year.

FUNDS CANNOT BE USED FOR ANY PRODUCT HAAS AUTOMATION MANUFACTURES OR SELLS.

Scholarship Certificates and the Gene Haas Foundation Logo are available on the cover page of the website. www.ghaasfoundation.org

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

I. Request for: _____ transfer of funds
 X appropriation of funds

Fund: _____ General Fund
 X Title _____ ESSER II Funds State Set-Aside

Amount \$55,811.00 FROM: Title State Grant Revenues Account No. _____

Amount _____ TO: Title Program Expenditures

Explanation: ATTACHED LETTER AS REQUIRED

Submitted by [Signature]
Business Manager, BOE

Certified as to the availability of funds:

[Signature]
Comptroller

APPROVED ---subject to vote of the Town Council:

[Signature]
Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of _____
authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its
meeting of _____, 20____.

Town Clerk

Grant Summary View

Wallingford School District (148-000) Public School District - FY 2021

[Return to Grant Summary](#)

Project Information

Organization Name	Wallingford School District
Organization Number	148-000
Fiscal Year	2021
Funding Application	ESSER II Funds
Grant	ESSER II State Set-Aside
Award Type	
Project Number	21--148-000000
Initial Approval Date	4/21/2021
Most Recent Approval Date	4/21/2021
Indirect Cost Rate	
Revision Number	0
CFDA Number	
Award Number	
Speedchart	
Project Begin Date	1/5/2021
Project End Date	9/30/2023
Allow Carryover	False

Purpose	01 - Public School Activities	Total
Object		
300 - Purchased Professional and Technical Services	55,811.00	55,811.00
Total	55,811.00	55,811.00
	Allocation	55,811.00
	Remaining	0.00

Funding Sources

Grant - Award Year	ESSER II SSA - 2021 (F)	Total
Award Number		
Speedchart		
LEA	\$55,811.00	\$55,811.00
Total Allocation	\$55,811.00	\$55,811.00

Fiscal Transactions

Type	Date	Voucher Number	Total
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No Records Found

STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

GRANT AWARD NOTIFICATION

1 Grant Recipient

Wallingford School District

DUNS Number: 010139228

4 Award Information

Grant Type: FEDERAL

Statute: P.L. 116-260 THE CRRSA ACT

CFDA #:

SDE Project Code: SDE000000000002

Grant Number: 148-000 12060-29571-2021-82079-124137-SDE00006

2 Grant Title

ESSER II State Set-Aside

5 Award Period

1/5/2021 - 9/30/2023

3 Education Staff

Program Manager:

Louis Tallarita (860) 807-2058

Payment & Expenditure Inquiries:

Jeff Lindgren (860) 713-6624

6 Authorized Funding

Grant Amount: \$55,811.00

Funding Status: Final

7 Terms and Conditions of Award

This grant is contingent upon the continuing availability of funds from the grant's funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Requests for budget revisions for expenditures made between March 13, 2020 and June 30, 2021 must be submitted at least 60 days prior to the expiration of the fiscal year but no later than May 1, 2021. Final budget revisions covering the entire award period must be submitted at least 60 days prior to the expiration of the grant period but no later than July 30, 2023. Budget revisions submitted after this date are accepted at the discretion of the ESSER II Funds Program Manager. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7-396a of the Connecticut General Statutes.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant has been approved.

5/11/2021

John Frassinelli - CSDE Management Approver

Grant Summary View

Wallingford School District (148-000) Public School District - FY 2021

[Return to Grant Summary](#)

Project Information	
Organization Name	Wallingford School District
Organization Number	148-000
Fiscal Year	2021
Funding Application	ESSER II Funds
Grant	ESSER II Funds
Award Type	
Project Number	21--148-000000
Initial Approval Date	4/21/2021
Most Recent Approval Date	4/21/2021
Indirect Cost Rate	
Revision Number	0
CFDA Number	
Award Number	
Speedchart	
Project Begin Date	1/5/2021
Project End Date	9/30/2023
Allow Carryover	False

Purpose	01 - Public School Activities	Total
Object		
100 - Personal Services > Salaries	1,419,474.00	1,419,474.00
200 - Personal Services > Employee Benefits	241,306.00	241,306.00
300 - Purchased Professional and Technical Services	271,989.00	271,989.00
700 - Property	95,067.00	95,067.00
Total	2,027,836.00	2,027,836.00
	Allocation	2,027,836.00
	Remaining	0.00

Funding Sources		
Grant - Award Year	ESSER II Funds - 2021 (F)	Total
Award Number		
Speedchart		
LEA	\$2,027,836.00	\$2,027,836.00

Total Allocation \$2,027,836.00 \$2,027,836.00

Fiscal Transactions

Type	Date	Voucher Number	Total
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No Records Found

STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

GRANT AWARD NOTIFICATION

1 Grant Recipient

Wallingford School District
DUNS Number: 010139228

4 Award Information

Grant Type: FEDERAL
Statute: P.L. 116-260 THE CRRSA ACT
CFDA #:
SDE Project Code: SDE000000000002
Grant Number: 148-000 12060-29571-2021-82079-124137

2 Grant Title

ESSER II Funds

5 Award Period

1/5/2021 - 9/30/2023

3 Education Staff

Program Manager:
Louis Tallarita (860) 807-2058

Payment & Expenditure Inquiries:
Jeff Lindgren (860) 713-6624

6 Authorized Funding

Grant Amount: \$2,027,836.00

Funding Status: Final

7 Terms and Conditions of Award

This grant is contingent upon the continuing availability of funds from the grant's funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Requests for budget revisions for expenditures made between March 13, 2020 and June 30, 2021 must be submitted at least 60 days prior to the expiration of the fiscal year but no later than May 1, 2021. Final budget revisions covering the entire award period must be submitted at least 60 days prior to the expiration of the grant period but no later than July 30, 2023. Budget revisions submitted after this date are accepted at the discretion of the ESSER II Funds Program Manager. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7- 396a of the Connecticut General Statutes.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant has been approved.

5/11/2021

John Frassinelli - CSDE Management Approver

TOWN OF WALLINGFORD, CONNECTICUT


Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

I. Request for: _____ transfer of funds
 X appropriation of funds

Fund: _____ General Fund
 X Title Title I, Part A _____

Amount \$41,618.00 FROM: Title State Grant Revenues Account No. _____
Amount _____ TO: Title Program Expenditures _____

Explanation: ATTACHED LETTER AS REQUIRED

Submitted by 
Business Manager, BOE

Certified as to the availability of funds:


Comptroller

APPROVED ---subject to vote of the Town Council:


Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of _____
authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its

meeting of _____, 20_____.

Town Clerk

STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

GRANT AWARD NOTIFICATION

1 Grant Recipient

Wallingford School District
DUNS Number: 010139228

4 Award Information

Grant Type: FEDERAL
Statute: P.L. 107-110
CFDA #: 84.010A
SDE Project Code: SDE000000000002
Grant Number: 148-000 12060-20679-2021-82070-170002

2 Grant Title

Title I Part A

5 Award Period

7/1/2020 - 6/30/2022

3 Education Staff

Program Manager:
James Dargati (860) 713-6562

Payment & Expenditure Inquiries:
Jeff Lindgren (860) 713-6624

6 Authorized Funding

Grant Amount: \$608,665.00

Funding Status: Final

7 Terms and Conditions of Award

This grant is contingent upon the continuing availability of funds from the grant's funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Written requests for budget revisions for expenditures made between July 1, 2020 and June 30, 2021 must be received at least 60 days prior to the expiration of the grant period but no later than May 1, 2021. For grants awarded for two-year periods beginning July 1, 2020, final second-year budget revision requests covering the entire two-year period must be received at least 60 days prior to the expiration of the grant period but no later than February 1, 2022. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7-396a of the Connecticut General Statutes. The following attachment(s) are incorporated by reference: ED114.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant has been approved.

1/8/2021

Melissa Hickey - CSDE Management Approver

Grant Summary View

Wallingford School District (148-000) Public School District - FY 2021

[Return to Grant Summary.](#)

Project Information

Organization Name Wallingford School District
 Organization Number 148-000
 Fiscal Year 2021
 Funding Application Consolidated - Title I-A and Title II-A
 Grant Title I Part A
 Award Type
 Project Number 21-572-148-000000
 Initial Approval Date 10/13/2020
 Most Recent Approval Date 10/13/2020
 Indirect Cost Rate
 Revision Number 0
 CFDA Number 84.010A
 Award Number
 Speedchart
 Project Begin Date 7/1/2020
 Project End Date 6/30/2022
 Allow Carryover False

Purpose	01 - Public School Activities	02 - Private School Activities	Total
Object			
100 - Personal Services > Salaries	412,731.35	0.00	412,731.35
300 - Purchased Professional and Technical Services	97,500.00	4,000.00	101,500.00
500 - Other Purchased Services	700.00	0.00	700.00
600 - Supplies	91,069.43	2,664.22	93,733.65
Total	602,000.78	6,664.22	608,665.00
		Allocation	608,665.00
		Remaining	0.00

Funding Sources

Grant - Award Year	Title I Part A - 2021 (F)	Total
Award Number		
Speedchart		
LEA	\$608,665.00	\$608,665.00

Neglected	\$0.00	\$0.00
Consortium	\$0.00	\$0.00
Total Allocation	\$608,665.00	\$608,665.00

Fiscal Transactions

Type	Date	Voucher Number	Total
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No Records Found

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

I. Request for: _____ transfer of funds
X appropriation of funds

Fund: _____ General Fund _____ Title _____ Title II, Part A
X

Amount \$2,974.00 FROM: Title State Grant Revenues Account No. _____

Amount _____ TO: Title Program Expenditures

Explanation: ATTACHED LETTER AS REQUIRED

Submitted by  _____
Business Manager, BOE

Certified as to the availability of funds:

 _____
Comptroller

APPROVED ---subject to vote of the Town Council:

 _____
Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of _____
authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its

meeting of _____, 20_____.

Town Clerk

STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

GRANT AWARD NOTIFICATION

1 Grant Recipient

Wallingford School District
DUNS Number: 010139228

4 Award Information

Grant Type: FEDERAL
Statute: P.L. 107-110
CFDA #: 84.367A
SDE Project Code: SDE000000000002
Grant Number: 148-000 12060-20858-2021-84131-170002

2 Grant Title

Title II Part A

5 Award Period

7/1/2020 - 6/30/2022

3 Education Staff

Program Manager:
James Dargati (860) 713-6562
Payment & Expenditure Inquiries:
Jeff Lindgren (860) 713-6624

6 Authorized Funding

Grant Amount: \$118,029.00
Funding Status: Final

7 Terms and Conditions of Award

This grant is contingent upon the continuing availability of funds from the grant's funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Written requests for budget revisions for expenditures made between July 1, 2020 and June 30, 2021 must be received at least 60 days prior to the expiration of the grant period but no later than May 1, 2021. For grants awarded for two-year periods beginning July 1, 2020, final second-year budget revision requests covering the entire two-year period must be received at least 60 days prior to the expiration of the grant period but no later than February 1, 2022. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7-396a of the Connecticut General Statutes. The following attachment(s) are incorporated by reference: ED114.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant has been approved.

1/8/2021

Melissa Hickey - CSDE Management Approver

Grant Summary View

Wallingford School District (148-000) Public School District - FY 2021

[Return to Grant Summary](#)

Project Information

Organization Name Wallingford School District
 Organization Number 148-000
 Fiscal Year 2021
 Funding Application Consolidated - Title I-A and Title II-A
 Grant Title II Part A
 Award Type
 Project Number 21--148-000000
 Initial Approval Date 10/13/2020
 Most Recent Approval Date 10/13/2020
 Indirect Cost Rate
 Revision Number 0
 CFDA Number 84.367A
 Award Number
 Speedchart
 Project Begin Date 7/1/2020
 Project End Date 6/30/2022
 Allow Carryover False

Purpose	01 - Public School Activities	02 - Private School Activities	Total
Object			
300 - Purchased Professional and Technical Services	70,958.09	0.00	70,958.09
600 - Supplies	44,000.00	3,070.91	47,070.91
Total	114,958.09	3,070.91	118,029.00
		Allocation	118,029.00
		Remaining	0.00

Funding Sources

Grant - Award Year	Title II Part A - 2021 (F)	Total
Award Number		
Speedchart		
LEA	\$118,029.00	\$118,029.00
Neglected	\$0.00	\$0.00
Consortium	\$0.00	\$0.00
Total Allocation	\$118,029.00	\$118,029.00

Fiscal Transactions

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford


I. Request for: _____ transfer of funds
 X appropriation of funds

Fund: _____ General Fund
 X Title Perkins Secondary Grant (Voc-Ed)

Amount \$3,476.00 FROM: Title State Grant Revenues Account No. _____

Amount _____ TO: Title Program Expenditures

Explanation: ATTACHED LETTER AS REQUIRED

Submitted by 
Business Manager, BOE

Certified as to the availability of funds:


Comptroller

APPROVED ---subject to vote of the Town Council:

Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of _____
authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its

meeting of _____, 20_____.

Town Clerk

STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

GRANT AWARD NOTIFICATION

1 Grant Recipient

Wallingford School District
DUNS Number: 010139228

4 Award Information

Grant Type: FEDERAL
Statute: P.L. 109-270
CFDA #: 84.048A
SDE Project Code: SDE000000000002
Grant Number: 148-000 12060-20742-2021-84010-170002

2 Grant Title

Perkins Secondary Grant

5 Award Period

7/1/2020 - 9/30/2021

3 Education Staff

Program Manager:
Suzanne Loud

Payment & Expenditure Inquiries:
Jeff Lindgren (860) 713-6624

6 Authorized Funding

Grant Amount: \$58,253.00

Funding Status: Final

7 Terms and Conditions of Award

This grant is contingent upon the continuing availability of funds from the grant's funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Written requests for budget revisions for expenditures made between July 1, 2020 and June 30, 2021 must be received at least 60 days prior to the expiration of the grant period but no later than May 1, 2021. For grants awarded for two-year periods beginning July 1, 2020, final second-year budget revision requests covering the entire two-year period must be received at least 60 days prior to the expiration of the grant period but no later than February 1, 2022. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7-396a of the Connecticut General Statutes. The following attachment(s) are incorporated by reference: ED114.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant has been approved.

1/13/2021

Melissa Hickey - CSDE Management Approver

Wallingford School District (148-000) Public School District - FY 2021

[Return to Grant Summary](#)

Project Information

Organization Name Wallingford School District
 Organization Number 148-000
 Fiscal Year 2021
 Funding Application Perkins
 Grant Perkins Secondary Grant
 Award Type
 Project Number 21--148-000000
 Initial Approval Date 12/1/2020
 Most Recent Approval Date 12/1/2020
 Indirect Cost Rate
 Revision Number 0
 CFDA Number 84.048A
 Award Number
 Speedchart
 Project Begin Date 7/1/2020
 Project End Date 9/30/2021
 Allow Carryover False

Purpose	01 - Public School Activities	Total
Object		
320 - Professional Education Services	2,226.00	2,226.00
600 - Supplies	48,283.00	48,283.00
700 - Property	7,744.00	7,744.00
Total	58,253.00	58,253.00
	Allocation	58,253.00
	Remaining	0.00

Funding Sources

Grant - Award Year	Perkins Secondary - 2021 (F)	Total
Award Number		
Speedchart		
LEA	\$58,253.00	\$58,253.00
Adjustment	\$0.00	\$0.00
Consortium	\$0.00	\$0.00
Total Allocation	\$58,253.00	\$58,253.00

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford


I. Request for: _____ transfer of funds
 X appropriation of funds

Fund: _____ General Fund
 X Title IDEA 611

Amount \$39,264.00 FROM: Title State Grant Revenues Account No. _____
537

Amount _____ TO: Title Program Expenditures

Explanation: ATTACHED LETTER AS REQUIRED

Submitted by 
Business Manager, BOE

Certified as to the availability of funds:


Comptroller

APPROVED ---subject to vote of the Town Council:


Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of _____
authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its
meeting of _____, 20____.

Town Clerk

STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

GRANT AWARD NOTIFICATION

REVISION

1 Grant Recipient

Wallingford School District
DUNS Number: 010139228

4 Award Information

Grant Type: FEDERAL
Statute: P.L. 108-446
CFDA #: 84.027A
SDE Project Code: CSDE000000000002
Grant Number: 148-000 12060-20977-2021-82032-170002

2 Grant Title

IDEA 611

5 Award Period

7/1/2020 - 6/30/2022

3 Education Staff

Program Manager:
Tom Boudreau (860) 713-6919
Payment & Expenditure Inquiries:
Jeff Lindgren (860) 713-6624

6 Authorized Funding

Grant Amount: \$1,342,636.00
Funding Status: Final

7 Terms and Conditions of Award

This grant is contingent upon the continuing availability of funds from the grant's funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Written requests for budget revisions for expenditures made between July 1, 2020 and June 30, 2021 must be received at least 60 days prior to the expiration of the grant period but no later than May 1, 2021. For grants awarded for two-year periods beginning July 1, 2020, final second-year budget revision requests covering the entire two-year period must be received at least 60 days prior to the expiration of the grant period but no later than February 1, 2022. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7-396a of the Connecticut General Statutes. The following attachment(s) are incorporated by reference: ED114.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant has been approved.

8/11/2020

Tom Boudreau - CSDE Grant Contact

Grant Summary View

Wallingford School District (148-000) Public School District - FY 2021

[Return to Grant Summary](#)

Project Information

Organization Name	Wallingford School District
Organization Number	148-000
Fiscal Year	2021
Funding Application	IDEA
Grant	IDEA 611
Award Type	
Project Number	21--148-000000
Initial Approval Date	7/1/2020
Most Recent Approval Date	7/31/2020
Indirect Cost Rate	
Revision Number	1
CFDA Number	84.027A
Award Number	
Speedchart	
Project Begin Date	7/1/2020
Project End Date	6/30/2022
Allow Carryover	False

Object	Purpose	01 - Public School Activities	02 - Private School Activities	Total
111A - Non-Instructional Salaries		27,764.00	0.00	27,764.00
111B - Instructional Salaries		930,380.50	4,504.50	934,885.00
200 - Personal Services - Employee Benefits		6,886.00	0.00	6,886.00
322 - In Service		2,000.00	0.00	2,000.00
323 - Pupil Services (Non-Payroll)		314,000.00	0.00	314,000.00
325 - Parent Activities		700.00	0.00	700.00
330 - Employee Training (Non-Direct Services)		10,000.00	0.00	10,000.00
440 - Rentals		18,000.00	0.00	18,000.00
600 - Supplies - Technology/Instructional		28,401.00	0.00	28,401.00
Total		1,338,131.50	4,504.50	1,342,636.00
			Allocation	1,342,636.00

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

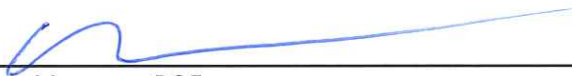
I. Request for: _____ transfer of funds
 X appropriation of funds

Fund: _____ General Fund
 X Title IDEA 619 (Preschool)

Amount \$1,254.00 FROM: Title State Grant Revenues Account No.

Amount _____ TO: Title Program Expenditures

Explanation: ATTACHED LETTER AS REQUIRED

Submitted by 

 Business Manager, BOE

Certified as to the availability of funds:



 Comptroller

APPROVED ---subject to vote of the Town Council:



 Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of _____
 authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its

meeting of _____, 20_____.

 Town Clerk

STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

GRANT AWARD NOTIFICATION

REVISION

1 Grant Recipient

Wallingford School District
DUNS Number: 010139228

4 Award Information

Grant Type: FEDERAL
Statute: P.L. 108-446
CFDA #: 84.173A
SDE Project Code: CSDE000000000002
Grant Number: 148-000 12060-20983-2021-82032-170002

2 Grant Title

IDEA 619

5 Award Period

7/1/2020 - 6/30/2022

3 Education Staff

Program Manager:
Tom Boudreau (860) 713-6919
Payment & Expenditure Inquiries:
Jeff Lindgren (860) 713-6624

6 Authorized Funding

Grant Amount: \$38,743.00
Funding Status: Final

7 Terms and Conditions of Award

This grant is contingent upon the continuing availability of funds from the grant's funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Written requests for budget revisions for expenditures made between July 1, 2020 and June 30, 2021 must be received at least 60 days prior to the expiration of the grant period but no later than May 1, 2021. For grants awarded for two-year periods beginning July 1, 2020, final second-year budget revision requests covering the entire two-year period must be received at least 60 days prior to the expiration of the grant period but no later than February 1, 2022. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7-396a of the Connecticut General Statutes. The following attachment(s) are incorporated by reference: ED114.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant has been approved.

8/11/2020

Tom Boudreau - CSDE Grant Contact

Grant Summary View

Wallingford School District (148-000) Public School District - FY 2021

[Return to Grant Summary](#)

Project Information

Organization Name	Wallingford School District
Organization Number	148-000
Fiscal Year	2021
Funding Application	IDEA
Grant	IDEA 619
Award Type	
Project Number	21--148-000000
Initial Approval Date	7/1/2020
Most Recent Approval Date	7/31/2020
Indirect Cost Rate	
Revision Number	1
CFDA Number	84.173A
Award Number	
Speedchart	
Project Begin Date	7/1/2020
Project End Date	6/30/2022
Allow Carryover	False

Object	Purpose	01 - Public School Activities	Total
111B - Instructional Salaries		24,550.00	24,550.00
323 - Pupil Services (Non-Payroll)		6,693.00	6,693.00
600 - Supplies - Technology/Instructional		7,500.00	7,500.00
Total		38,743.00	38,743.00
		Allocation	38,743.00
		Remaining	0.00

Funding Sources

Grant - Award Year	IDEA 619 - 2021 (F)	Total
Award Number		
Speedchart		
LEA	\$38,743.00	\$38,743.00
Consortium	\$0.00	\$0.00
Total Allocation	\$38,743.00	\$38,743.00

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

I. Request for: _____ transfer of funds
 X appropriation of funds

Fund: _____ General Fund
 X Title TITLE III EL _____

Amount \$2,636.00 FROM: Title State Grant Revenues Account No. _____

Amount _____ TO: Title Program Expenditures _____

Explanation: ATTACHED LETTER AS REQUIRED

Submitted by  _____
Business Manager, BOE

Certified as to the availability of funds:

 _____
Comptroller

APPROVED ---subject to vote of the Town Council:

 _____
Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of _____
authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its

meeting of _____, 20_____.

Town Clerk

STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

GRANT AWARD NOTIFICATION

1 Grant Recipient

Wallingford School District
DUNS Number: 010139228

4 Award Information

Grant Type: FEDERAL
Statute: P.L. 107-110
CFDA #: 84.365A
SDE Project Code: SDE000000000002
Grant Number: 148-000 12060-20868-2021-82075-170002

2 Grant Title

Title III EL

5 Award Period

7/1/2020 - 6/30/2022

3 Education Staff

Program Manager:
Megan Alubicki Flick (860) 713-6786

6 Authorized Funding

Grant Amount: \$46,108.00

Payment & Expenditure Inquiries:

Jeff Lindgren (860) 713-6624

Funding Status: Final

7 Terms and Conditions of Award

This grant is contingent upon the continuing availability of funds from the grant's funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Written requests for budget revisions for expenditures made between July 1, 2020 and June 30, 2021 must be received at least 60 days prior to the expiration of the grant period but no later than May 1, 2021. For grants awarded for two-year periods beginning July 1, 2020, final second-year budget revision requests covering the entire two-year period must be received at least 60 days prior to the expiration of the grant period but no later than February 1, 2022. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7-396a of the Connecticut General Statutes. The following attachment(s) are incorporated by reference: ED114.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant has been approved.

11/18/2020

Melissa Hickey - CSDE Management Approver

Grant Summary View

Wallingford School District (148-000) Public School District - FY 2021

[Return to Grant Summary](#)

Project Information

Organization Name	Wallingford School District
Organization Number	148-000
Fiscal Year	2021
Funding Application	Consolidated - Title III EL
Grant	Title III EL
Award Type	
Project Number	21--148-000000
Initial Approval Date	10/9/2020
Most Recent Approval Date	10/9/2020
Indirect Cost Rate	
Revision Number	0
CFDA Number	84.365A
Award Number	
Speedchart	
Project Begin Date	7/1/2020
Project End Date	6/30/2022
Allow Carryover	False

Purpose	01 - Public School Activities	02 - Private School Activities	Total
Object			
100 - Personal Services > Salaries	15,000.00	0.00	15,000.00
300 - Purchased Professional and Technical Services	7,500.00	0.00	7,500.00
500 - Other Purchased Services	12,000.00	0.00	12,000.00
600 - Supplies	10,535.72	1,072.28	11,608.00
Total	45,035.72	1,072.28	46,108.00
		Allocation	46,108.00
		Remaining	0.00

Funding Sources

Grant - Award Year	Title III EL - 2021 (F)	Total
Award Number		
Speedchart		
LEA	\$46,108.00	\$46,108.00

Consortium	\$0.00	\$0.00
Released	\$0.00	\$0.00
Total Allocation	\$46,108.00	\$46,108.00

Fiscal Transactions			
Type	Date	Voucher Number	Total

No Records Found

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

I. Request for: _____ transfer of funds
 X appropriation of funds

Fund: _____ General Fund
 X Title TITLE III IMMIGRANT (IMMIGRANT & YOUTH EDUC)

Amount \$3,102.00 FROM: Title State Grant Revenues Account No. _____

Amount _____ TO: Title Program Expenditures _____


Explanation: ATTACHED LETTER AS REQUIRED

Submitted by 
Business Manager, BOE

Certified as to the availability of funds:


Comptroller

APPROVED ---subject to vote of the Town Council:


Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of _____
authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its
meeting of _____, 20____.

Town Clerk

STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

GRANT AWARD NOTIFICATION

1 Grant Recipient

Wallingford School District
DUNS Number: 010139228

4 Award Information

Grant Type: FEDERAL
Statute: P.L. 107-110
CFDA #: 84.365A
SDE Project Code: SDE000000000002
Grant Number: 148-000 12060-20868-2021-82076-170003

2 Grant Title

Title III Immigrant

5 Award Period

7/1/2020 - 6/30/2022

3 Education Staff

Program Manager:
Megan Alubicki Flick (860) 713-6786

Payment & Expenditure Inquiries:
Jeff Lindgren (860) 713-6624

6 Authorized Funding

Grant Amount: \$17,500.00

Funding Status: Final

7 Terms and Conditions of Award

This grant is contingent upon the continuing availability of funds from the grant's funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Written requests for budget revisions for expenditures made between July 1, 2020 and June 30, 2021 must be received at least 60 days prior to the expiration of the grant period but no later than May 1, 2021. For grants awarded for two-year periods beginning July 1, 2020, final second-year budget revision requests covering the entire two-year period must be received at least 60 days prior to the expiration of the grant period but no later than February 1, 2022. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7-396a of the Connecticut General Statutes. The following attachment(s) are incorporated by reference: ED114.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant has been approved.

2/4/2021

Melissa Hickey - CSDE Management Approver

Grant Summary View

Wallingford School District (148-000) Public School District - FY 2021

[Return to Grant Summary](#)

Project Information

Organization Name	Wallingford School District
Organization Number	148-000
Fiscal Year	2021
Funding Application	Consolidated - Title III Immigrant
Grant	Title III Immigrant
Award Type	
Project Number	21--148-000000
Initial Approval Date	11/13/2020
Most Recent Approval Date	11/13/2020
Indirect Cost Rate	
Revision Number	0
CFDA Number	84.365A
Award Number	
Speedchart	
Project Begin Date	7/1/2020
Project End Date	6/30/2022
Allow Carryover	False

Purpose	01 - Public School Activities	Total
Object		
100 - Personal Services > Salaries	15,000.00	15,000.00
600 - Supplies	2,500.00	2,500.00
Total	17,500.00	17,500.00
	Allocation	17,500.00
	Remaining	0.00

Funding Sources

Grant - Award Year	Title III Immigrant - 2021 (F)	Total
Award Number		
Speedchart		
LEA	\$17,500.00	\$17,500.00
Consortium	\$0.00	\$0.00
Private	\$0.00	\$0.00
Total Allocation	\$17,500.00	\$17,500.00

Fiscal Transactions

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford

I. Request for: _____ transfer of funds
 X appropriation of funds

Fund: _____ General Fund
 X Title Smart Start (Operations)


Amount \$6,800.00 FROM: Title State Grant Revenues Account No. _____

Amount _____ TO: Title Program Expenditures

Explanation: ATTACHED LETTER AS REQUIRED

Submitted by 
Business Manager, BOE

Certified as to the availability of funds:


Comptroller

APPROVED ---subject to vote of the Town Council:


Mayor

II. CERTIFICATION OF FINANCIAL TRANSACTION:

The transfer/appropriation of _____
authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its

meeting of _____, 20____.

Town Clerk

STATE OF CONNECTICUT
DEPARTMENT OF EDUCATION

GRANT AWARD NOTIFICATION

REVISION

1 Grant Recipient

Wallingford School District
DUNS Number: 010139228

4 Award Information

Grant Type: STATE
Statute: C.G.S. 10-506; Public Act 18-81 Sec. 60
CFDA #:
SDE Project Code: OEC000000000002
Grant Number: 148-000 11000-16279-2021-83004-170031

2 Grant Title

Smart Start

5 Award Period

7/1/2020 - 6/30/2021

3 Education Staff

Program Manager:
Michelle Levy (860) 500-4536
Payment & Expenditure Inquiries:
Gerald Mallison (860) 500-4441

6 Authorized Funding

Grant Amount: \$306,800.00

Funding Status: Final

7 Terms and Conditions of Award

This grant is contingent upon the continuing availability of funds from the grant's funding source and the continuing eligibility of the State of Connecticut and your town/agency to receive such funds.

Fiscal and other reports relating to this grant must be submitted as required by the granting agency. Written requests for budget revisions for expenditures made between July 1, 2020 and June 30, 2021 must be received at least 60 days prior to the expiration of the grant period but no later than May 1, 2021. For grants awarded for two-year periods beginning July 1, 2020, final second-year budget revision requests covering the entire two-year period must be received at least 60 days prior to the expiration of the grant period but no later than February 1, 2022. The grantee shall provide for an audit acceptable to the granting agency in accordance with the provisions of Sections 7-394a and 7-396a of the Connecticut General Statutes. The following attachment(s) are incorporated by reference: ED114.

The grant may be terminated upon 30 days written notice by either party. In the event of such action, all remaining funds shall be returned in a timely fashion to the granting agency.

This grant has been approved.

10/8/2020

Michelle Levy - OEC Grant Contact

Grant Summary View

Wallingford School District (148-000) Public School District - FY 2021

[Return to Grant Summary](#)

Project Information

Organization Name	Wallingford School District
Organization Number	148-000
Fiscal Year	2021
Funding Application	Smart Start
Grant	Smart Start
Award Type	
Project Number	21--148-000000
Initial Approval Date	9/28/2020
Most Recent Approval Date	1/31/2021
Indirect Cost Rate	
Revision Number	1
CFDA Number	
Award Number	
Speedchart	
Project Begin Date	7/1/2020
Project End Date	6/30/2021
Allow Carryover	False

Object	Purpose	01 - Early Care and Education Activities	Total
111B - Instructional Salaries		300,000.00	300,000.00
600 - Supplies		6,800.00	6,800.00
Total		306,800.00	306,800.00
		Allocation	306,800.00
		Remaining	0.00

Funding Sources

Grant - Award Year	Award Number	Speedchart	Smart Start - 2021 (\$)	Total
LEA			\$306,800.00	\$306,800.00
Total Allocation			\$306,800.00	\$306,800.00

Fiscal Transactions

Type	Date	Voucher Number	Smart Start - 2021 (\$)	Total
Reimbursement	12/7/2020	Not Yet Created	\$105,900.00	\$105,900.00

TOWN OF WALLINGFORD, CONNECTICUT

Honorable William W. Dickinson, Jr. Mayor
Wallingford, CT 06492

Date: 05/26/2021

391

1. Request for X transfer of funds
 appropriation of funds

Funds: Electric operating X capital project
Water operating capital project
Sewer operating capital project

\$70,000 From: Title General Plant- Structures & Improvements Acct. No. 390

\$70,000 To: Title Distribution Plant- Street Lighting & Signal Acct. No. 373

Explanation: See attached memo

Certified as to availability of funds:

Manuvin Dill Date: 05/26/2021
Office Manager

Submitted by:

Joy Date: 5/26/21
Division Head

Nita Date: 5/26/21
Department Head

Approved by vote of the Public Utilities Commission subject to the approval of the Mayor and Town Council

_____ Date: _____
Chairman, Public Utilities Commission

Certified as to Availability of Funds:

_____ Date: _____
Comptroller

Approved – subject to the approval of the Town Council

_____ Date: _____
Mayor

II Certification of the Financial Transaction:

The transfer or appropriation of \$ _____ as detailed and authorized above and as approved by a vote of the Town Council in session is hereby certified.

I hereby certify that this is the motion approved by the Town Council at its meeting of _____, 20____.

Town Clerk

ITEM NO. 52
PUC AGENDA 6/1/21



Town of Wallingford, Connecticut

MARIANNE DILL
BUSINESS OFFICE MANAGER

DEPARTMENT OF PUBLIC UTILITIES
ELECTRIC DIVISION
BUSINESS OFFICE
100 JOHN STREET
WALLINGFORD CT 06492
PHONE 203-294-2030
FAX 203-294-2027

Memo

To: Tony Buccheri, General Manager
Cc: Richard Hendershot, Director of Public Utilities
From: Marianne Dill, Business Office Manager
Date: May 20, 2021
Re: Fiscal 2020-2021 budget transfer
Account 373 – Distribution Plant – Street Lighting & Signal System

Attached for your review is a request for a budget transfer in fiscal year 2020-2021 in the amount of \$70,000 to Account 373 Distribution Plant – Street Lighting- Signal System. This account reflects the labor, material costs and overheads for new lighting installations on public streets and the replacement of existing high pressure sodium (HPS) lights with LED light fixtures. The Electric Division previously completed an audit of street lights and private lights to identify those lights that were in need of repair. Consistent with the Electric Division's LED replacement program, each of the HPS lights in need of repair will be replaced by an LED fixture. As a matter of public safety, we have been proactive in the replacement of street lighting as opposed to waiting for notification of failed lighting.

Funds are available from Account 390 – General Plant- Structures and Improvements. A review of the activity and the plans for the balance of the year show that these amounts will be unexpended and available for transfer.

Please review the attached budget transfer request and forward as appropriate for action by the Public Utilities Commission and Town Council.

Marianne Dill

ITEM NO. 5-1
PUC AGENDA 6/1/21



Town of Wallingford, Connecticut

35,

PROGRAM PLANNING OFFICE

WALLINGFORD TOWN HALL
45 SOUTH MAIN STREET, RM. 311
WALLINGFORD, CONNECTICUT 06492
TELEPHONE: (203) 294-2060

May 25, 2021

Wallingford Town Council
Wallingford, CT 06492

Attn: Vincent Cervoni, Chairman

Dear Council Members:

Attached is a Resolution that provides the authorization needed to apply for a 2021 Small Cities Community Development Block Grant. The Town has been asked to make application for up to a \$1,500,000.00 grant on behalf of the Wallingford Housing Authority for window, siding and shutter and mailbox replacement on all buildings, to replace problem areas in the existing sewer lines and to add ADA improvements to the garden style, one bedroom units. This award will enable the Housing Authority to complete ADA rehabilitation, energy efficiency and life safety improvements at the Ulbrich Heights 132 Unit Housing Complex.

A Public Hearing will be held at the Wallingford Housing Authority's main office building on May 27, 2021 to receive public comment

Please consider this item at your June 8, 2021 meeting.

Sincerely,

William W. Dickinson, Jr.
Mayor

SS

Attachment

c. Kelly McDermott, Exec. Director, WHA
Peter Huckins, Community Consulting
Susan Schott, Grants Administration

LtrMayor-TCRes2021



Town of Wallingford, Connecticut

CERTIFIED RESOLUTION OF APPLICANT

SMALL CITIES PROGRAM

Certified a true copy of a resolution adopted by the Town of Wallingford at a meeting of its Town Council on June 8, 2021 and which has not been rescinded or modified in any way whatsoever.

(Date) _____

(Clerk)

(SEAL)

WHEREAS, Federal monies are available under the Connecticut Small Cities Community Development Block Grant Program, administered by the State of Connecticut, Department of Housing pursuant to Public Law 93 -3 83, as amended; and,

WHEREAS, pursuant to Chapter 127c, and Part VI of Chapter 130 of the Connecticut General Statutes, the Commissioner of Housing is authorized to disburse such Federal monies to local municipalities; and,

WHEREAS, it is desirable and in the public interest that the Town of Wallingford make application to the State for \$1,500,000.00 in order to undertake a Small Cities Community Development Program at the Wallingford Housing Authority's 132 Unit Ulbrich Heights complex, and to execute an Assistance Agreement therefore, should one be offered.

NOW, THEREFORE, BE IT RESOLVED BY THE Wallingford Town Council:

1. That it is cognizant of the conditions and prerequisites for State Assistance imposed by Part VI Chapter 130 of The Connecticut General Statutes; and,
2. That the filing of an application by the Mayor of the Town of Wallingford in an amount not to exceed \$1,500,000.00 is hereby approved, and that the Mayor of the Town of Wallingford is hereby authorized and directed to file such Application with the Commissioner of the Department of Housing, to provide such additional information, to execute such other documents as may be required by the Commissioner, to execute an Assistance Agreement with the State of Connecticut for State financial assistance if such an Agreement is offered, to execute any amendments, rescissions, and revisions thereto, and to act as the authorized representative of the Town of Wallingford.

WALLINGFORD PUBLIC SCHOOLS

100 SOUTH TURNPIKE ROAD
WALLINGFORD, CONNECTICUT 06492
TELEPHONE (203) 949-6504
FAX (203) 949-6555

3S,

June 1, 2021

Honorable William W. Dickinson, Jr.
Mayor, Town of Wallingford
45 South Main Street
Wallingford, CT 06492

Dear Mayor Dickinson:

The Board of Education would like to request that the attached item, Bid Waiver Request for Private out-of-district Transportation, be added to the Town Council Agenda dated June 8, 2021.

Sincerely,



Dominic Barone
Business Manager

CC: S. Menzo, C. LaTorre, J. Bowes, S. Amadeo

Private out-of-district transportation

We use private transportation for our out-of-district placements to various specialized private and public schools. These placements are all over the state ranging from West Hartford to Southport depending on student needs. Placements are determined by a PPT (Planning and Placement Team), an interdisciplinary team of parents and educators. Placements can change based on student needs. Additionally, new students may move into Town having been outplaced in their previous district.

Private out-of-district transportation is a challenge due to variations in and changing needs, driver shortages, and the ability to procure new transportation runs quickly (when required). We are proposing a new process for Private out-of-district transportation to help us efficiently manage this critical service. To support this new process we are requesting the following:

1. Requesting authority to award the Private out-of-district transportation bid to three lowest qualified bidders through a public bid reflecting aggregate bid pricing for 33 identified routes, and
2. Requesting a bid waiver for the three selected bidders to provide quotes through the Town Purchasing department for awarding of additional transportation routes as a result of new and/or changed student placements as described above.

This will allow us to more efficiently manage Private out-of-district transportation by providing reliable vendors and a solution to respond to changing needs as they arise.



Town of Wallingford, Connecticut

37,

Agreement
Painted Median Pavement Markings
Christian Street and North Elm Street

The Town of Wallingford and Choate Rosemary Hall agree to the following pedestrian safety improvements:

1. Choate Rosemary Hall to apply for necessary highway work permits for work to be performed at the mid-block crosswalks on Christian Street and North Elm Street.
2. At its own cost, Choate Rosemary Hall will paint the mid-block crosswalk areas within the double yellow lines a brick color thermoplastic "non-invasive" material accepted by the Town Engineer in conformance with the attached letter dated May 24, 2021 from Choate Rosemary Hall.
3. Choate Rosemary Hall is responsible for maintenance of the thermoplastic paintings and will remove them at their costs, if required by the Town Engineer.

Upon approval of the Wallingford Town Council, the parties set their hands and seals this ____ day of _____, 2021.

Signed and Delivered

Choate Rosemary Hall

Town of Wallingford

William W. Dickinson, Mayor



CHOATE ROSEMARY HALL

333 CHRISTIAN STREET
WALLINGFORD, CT 06492

WWW.CHOATE.EDU

TO: Town of Wallingford

FROM: Patrick T. Durbin, Chief Financial Officer

DATE: May 24, 2021

RE: Painted Median Pavement Marking on Christian and Elm Street Mid-block Crossings

Background

Choate Rosemary Hall has been working with the Wallingford Police Department and Town Engineering Office over the last few months to improve pedestrian safety and to improve clarity for drivers along the portions of Christian and Elm Streets that bisect our campus. One major improvement that we have agreed to is the consolidation of three mid-block crosswalks to one crosswalk on Christian Street between Elm Street and Main Street (see attached map).

In 2005, Town Council approved a non-standard crosswalk at one of these three locations – a brick inset crosswalk. We have been told that Town Council needed to approve that non-standard pavement use. Similarly, we come before Town Council seeking approval for a non-standard pavement marking, the painting of the median to increase visibility as vehicles approach the heavily used mid-block crosswalks between Choate's campus quadrants.

Proposal for Consideration

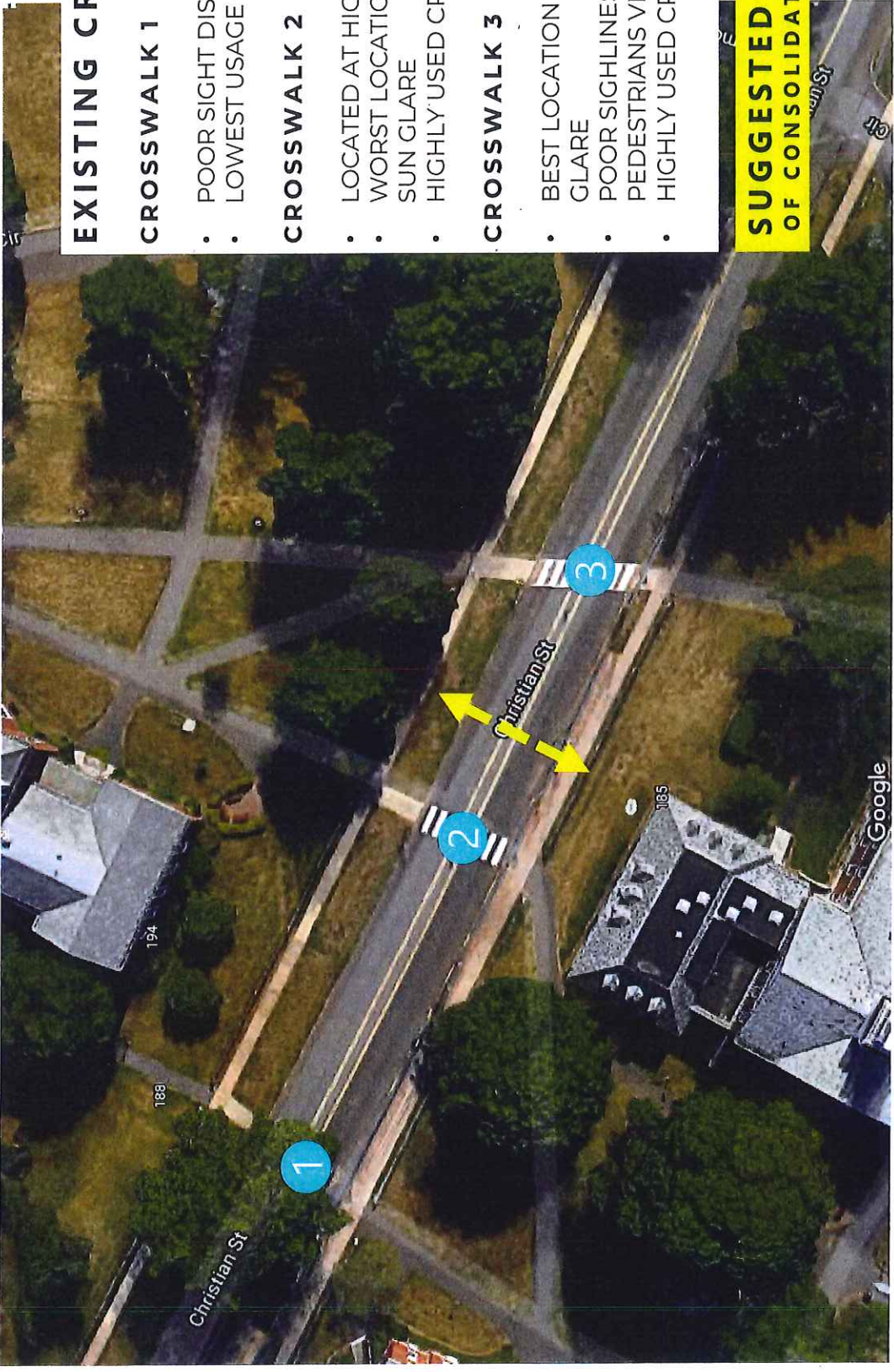
During this process, Choate engaged SLR to consult on pedestrian safety improvements to the mid-block crosswalks. SLR's traffic engineers proposed a raised median at these crosswalks. These raised medians at mid-block crosswalks are an approved Connecticut Department of Transportation (CTDOT) pedestrian safety counter measure and can reduce pedestrian crashes by 32% (FHWA-SA-18-062). They enhance visibility and reduce speed of approaching vehicles. In discussions with the Town Engineering Office, however, it was determined that these raised medians could cause maintenance issues, especially during plowing season.

An alternative to a raised median is a flush, painted median that does not pose the same maintenance issues of a raised median. A flush painted median has a similar effect of improving visibility and reducing the speed of approaching vehicles, but without the maintenance issues of a raised median. Choate is seeking approval to paint the areas between the double yellow lines with a thermoplastic material that has been reviewed and accepted by the Town Engineer. This thermoplastic material has the appearance of paint and is applied directly on top of the pavement. Choate proposes to pay for this non-invasive application and would also pay for it to be removed in the future if the Town Engineer determined there was a need to do so.

The specified product "design manual" is attached for more detailed information. The application has been used in several other towns and cities across the state including Stamford, Waterbury, and New Britain. Some projects are over 10 years old and have had no maintenance issues. The product lasts 6 to 8 times longer than typical paint and has no maintenance requirements after installation. All work will be coordinated with the Town Engineering Department.

Proposed Agreement

At Choate's sole cost, a contractor hired by Choate will submit an excavation permit to work in the Town's right of way through established Town permit processes. The Town Engineer will approve the application of this non-invasive thermoplastic "painted median" if approved by the Town Council. If, in the future, the Town requests its removal, Choate will pay for the removal of the markings at no cost to the Town.



EXISTING CROSSWALKS

CROSSWALK 1

- POOR SIGHT DISTANCE
- LOWEST USAGE OF 3 CROSSINGS

CROSSWALK 2

- LOCATED AT HIGHPOINT
- WORST LOCATION FOR MORNING SUN GLARE
- HIGHLY USED CROSSING

CROSSWALK 3

- BEST LOCATION FOR MORNING GLARE
- POOR SIGHTLINES FOR PEDESTRIANS VIEWING UPHILL
- HIGHLY USED CROSSING

SUGGESTED LOCATION OF CONSOLIDATED CROSSING

EXISTING CHRISTIAN STREET CROSSINGS





< EXISTING

NOTES:

- 1 FLUSH STAMPED MEDIAN



CONCEPT SKETCH - CHRISTIAN STREET


TrafficPatternsXD™
A TrafficScapes™ Solution by Ennis-Flint

DESIGN MANUAL



HUB
SURFACE SYSTEMS

DESIGN MANUAL

There are literally hundreds of design combinations for TrafficPatternsXD crosswalks and traffic calming surfaces. The purpose of this Design Manual is to provide a visual glance of ideas and suggestions using various combinations of patterns, borders, and colors.

Specifications and CAD drawings are available at www.hubss.com and www.CADdetails.com



Made of durable preformed thermoplastic pavement marking material, TrafficPatternsXD provides a cost-effective alternative to the use of brick and stone pavers and is virtually maintenance free. The pattern and color combinations allow designers the flexibility to create the ideal crosswalk or traffic calming pattern that complements an overall streetscape design.

Ennis-Flint, the world's leading manufacturer and distributor of preformed thermoplastic pavement marking materials, makes a complete line of products at our U.S. facility which is ISO 9001:2008 certified for design, development, and manufacturing. Ennis-Flint offers pavement markings for use on streets and highways, crosswalks, intersections, parking areas, and many airside and landside uses at airports. From lines, legends, and arrows to traffic calming crosswalks and detectable warnings, Flint's products help motorists, cyclists, pilots, and pedestrians move in the right direction...*safely*.

4786 217a St. Langley BC Canada

(604) 309-8212

www.hubss.com

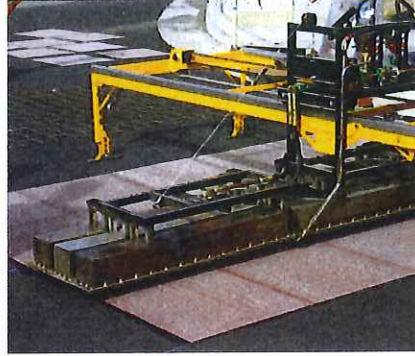
APPLICATION OVERVIEW

Applications are performed by Certified Applicators only. The 2 ft. x 2 ft. sheets of material are positioned on the non-stamped, prepared asphalt surface. The material is heated to allow proper embedment of the anti-skid elements. A specialized grid gently stamps a pattern into the material and just into the top layer of the asphalt.

1. APPLY SEALER & POSITION



2. HEAT MATERIAL



3. STAMP WITH WIRE GRID



TrafficPatternsXD Photos



Offset Brick



Ashlar Slate



Diagonal Herringbone



Diagonal Herringbone



Square Tile

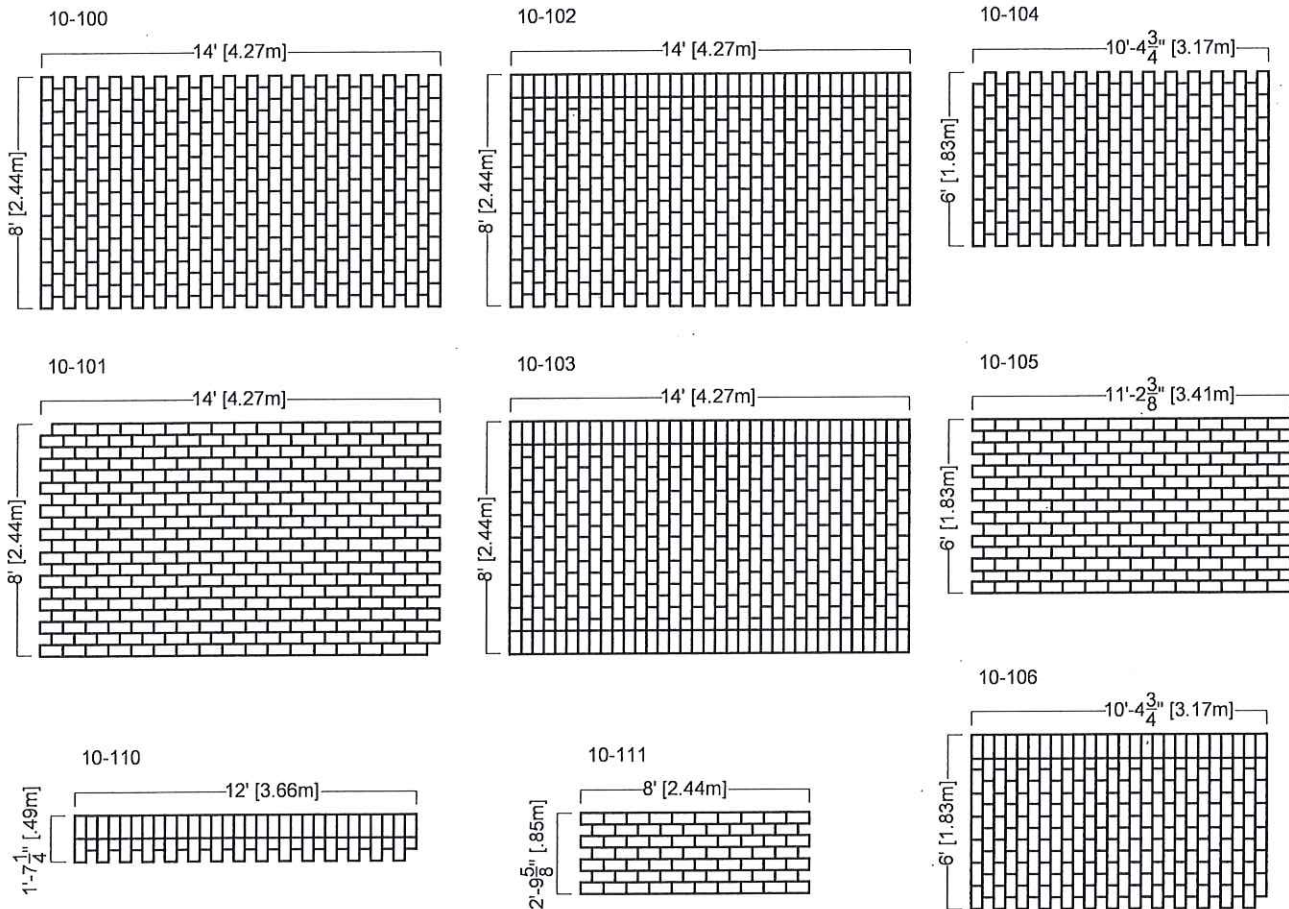


Square Tile

OFFSET BRICK

Wire-Rope Grid		
XDG-10-100	8'W x 14'L	Offset Brick
XDG-10-101	14'W x 8'L	Offset Brick
XDG-10-102	8'W x 14'L	Open Offset Brick with Stacked Brick Border
XDG-10-103	8'W x 14'L	Closed Offset Brick Stacked Brick Borders
XDG-10-104	6'W x 10'L	Offset Brick
XDG-10-105	11'W x 6'L	Offset Brick
XDG-10-106	6'W x 10'L	Open Offset Brick with Stacked Brick Border
XDG-10-110	1'7" W x 12' L	Offset Brick Edger
XDG-10-111	8'W x 2'9"L	Offset Brick

Drawings below represent the wire grids that are stamped into the asphalt surface to create specified pattern.



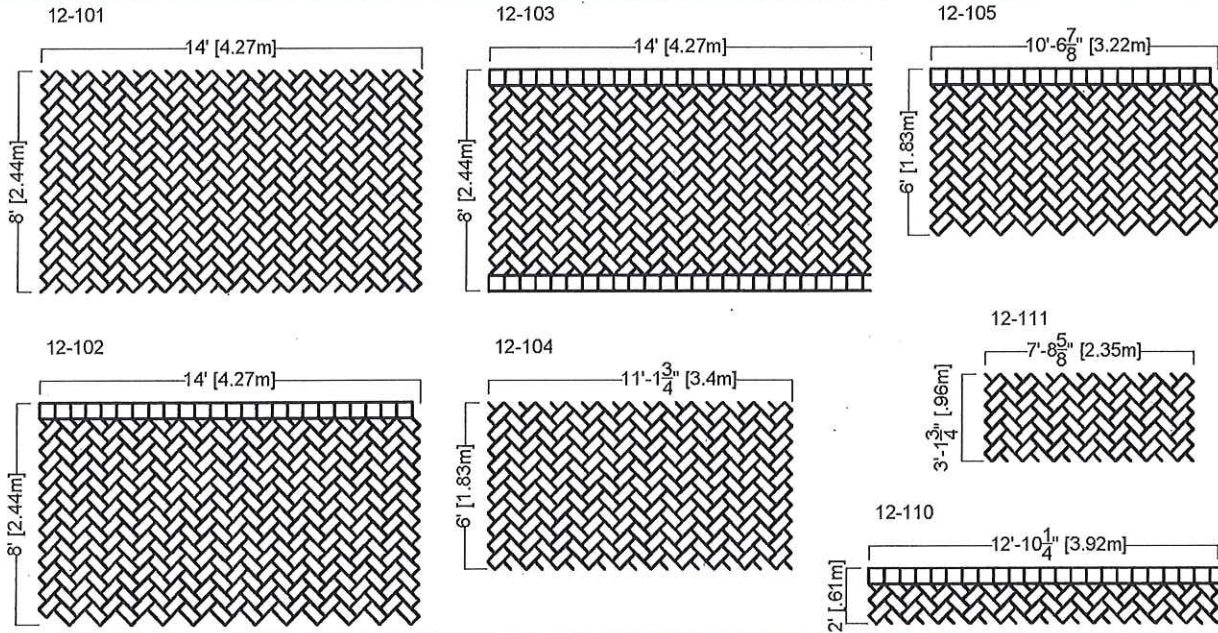
SEE PAGE 12 FOR SUPPORTING BORDERS: 10-110, 18-100, 18-106

HERRINGBONE

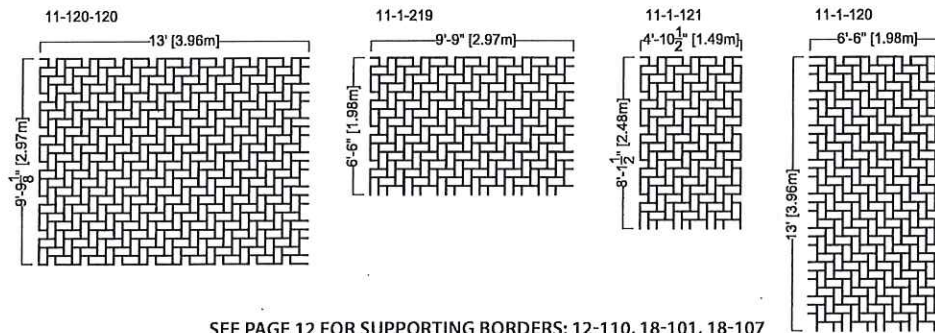
Wire-Rope Grid		
XDG-12-101	8'L x 14'W	Diagonal Herringbone
XDG-12-102	8'W x 14'L	Open Diagonal Herringbone with Tile Border
XDG-12-103	8'W x 14'L	Closed Diagonal Herringbone with Tile Borders
XDG-12-104	6'L x 11'W	Diagonal Herringbone
XDG-12-105	6'W x 11'L	Open Diagonal Herringbone with Tile Border
XDG-12-110	2'W x 12'10"L	Diagonal Herringbone Edger
XDG-12-111	3'1"W x 7'8"L	Open Diagonal Herringbone
XDG-11-120-120	13'W x 9'9"L	Standard Herringbone for SR120
XDG-11-1-120	13'W x 6'L	Standard Herringbone
XDG-11-1-219	10'W x 6'L	Standard Herringbone
XDG-11-1-121	5'W x 8'L	Standard Herringbone

Drawings below represent the wire grids that are stamped into the asphalt surface to create specified pattern.

DIAGONAL HERRINGBONE



STANDARD HERRINGBONE



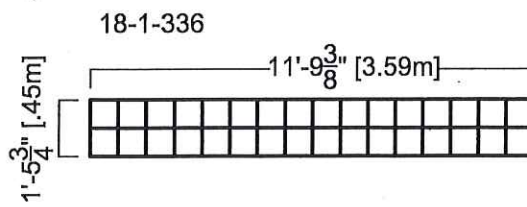
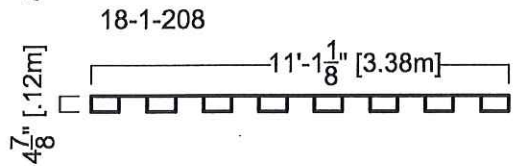
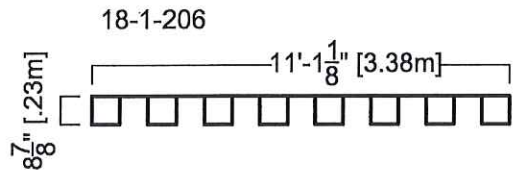
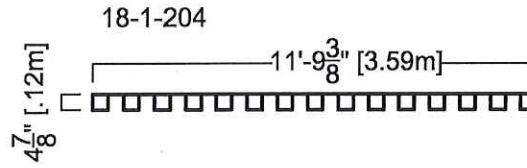
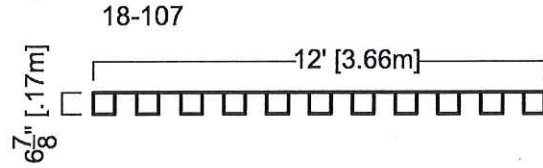
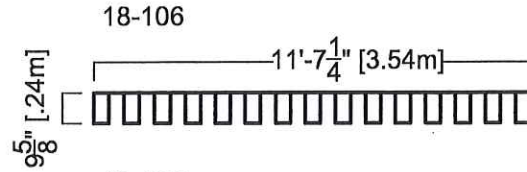
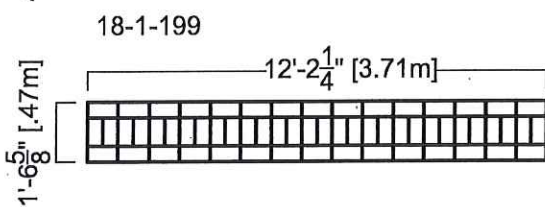
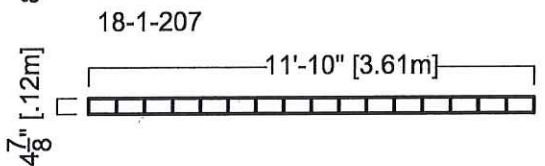
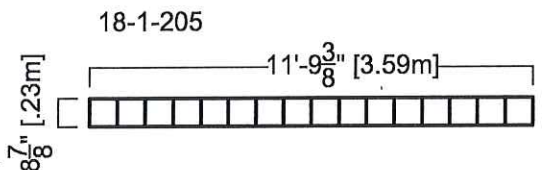
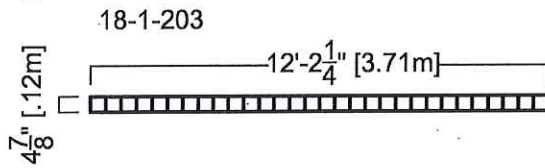
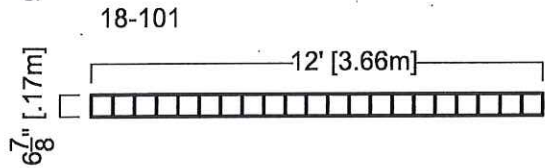
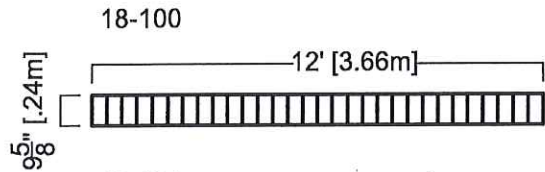
SEE PAGE 12 FOR SUPPORTING BORDERS: 12-110, 18-101, 18-107

BORDERS

Wire-Rope Grid		
XDG-18-100	12'W x 10"L	Stacked Brick Border
XDG-18-101	12'W x 7"L	Tile Border
XDG-18-1-203	12'2"W x 5"L	Cobble Border
XDG-18-1-205	12'W x 9"L	Texas Cobble Border
XDG-18-1-207	11'10"W x 5L	End-to-End Border
XDG-18-1-199	12'2"W x 1'7"L	Soldier Course Straight

Wire-Rope Grid		
XDG-18-106	11'7"W x 10"L	Stacked Brick Flex
XDG-18-107	12'W x 7"L	Tile Border Flex
XDG-18-1-204	11'10"W x 5"L	Cobble Border Flex
XDG-18-1-206	11'1"W x 9"L	Texas Cobble Border Flex
XDG-18-1-208	11'1"W x 5"L	End-to-End Border Flexible
XDG-18-1-336	11'9"W x 1'6"L	Double Texas Cobble Border

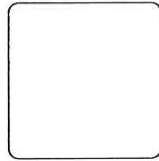
Drawings below represent the wire grids that are stamped into the asphalt surface to create specified pattern.



STANDARD COLORS



BLACK



WHITE



SAND



TAN



BRICK RED



COLONIAL
BRICK



HERITAGE
RED



FIELD
GRAY



SONOMA
SAND



CINNAMON



SANTA FE
CLAY



CHESTNUT



GREY



DARK
BRICK RED



KHAKI



SIENNA



COCOA



SALMON

**TOWN OF WALLINGFORD, CONNECTICUT
SPECIAL TOWN COUNCIL MEETING**

THURSDAY

MAY 6, 2021

6:30 P.M.

RECORD OF VOTES & MINUTES

The Special Town Council Meeting on Thursday, May 6, 2021 was called to order at 6:30 p.m. There was a moment of silence and the Pledge of Allegiance was said. Councilors in attendance were Craig C. Fishbein, Thomas Laffin, Gina Morgenstein, Joseph A. Marrone, III, Christopher K. Shortell, Christina Tatta, Vincent F. Testa, Jason Zandri and Chairman Vincent Cervoni. Mayor William W. Dickinson, Jr. and Comptroller, James Bowes were also present.

1. Moment of Silence
2. Pledge of Allegiance and Roll Call
3. Discussion and possible action on amendments to the Town of Wallingford Budget for FY 2021-2022.

MOTION WAS MADE TO ADD \$60,000 TO THE PARK & RECREATION BUDGET TAKING THE FUNDS FROM THE \$1.8 MILLION ROLLOVER SURPLUS IN THE CAP AND NON AS PART OF AN EFFORT TO ALLOW FOR THE CAPITAL EXPENDITURE TO BUILD A DEDICATED PICKLEBALL COURT AT HARRISON PARK.

**MADE BY: ZANDRI
SECONDED BY: MORGESTEIN**

Chairman Cervoni wanted to confirm we cannot access that \$1.8 million but if we are going to access some PILOT electric division money we would take it from the contribution that's being made by the Electric Division during this Budget. Mr. Bowes stated that's correct.

MOTION WAS MADE TO SHORT THE ELCTRIC DIVISION PILOT CONTRIBUTION BY \$60,000 TO ADD TO THE PARK AND RECREATION BUDGET TO BUILD A DEDICATED PICKLEBALL COURT COMPLEX AT HARRISON PARK.

Councilor Zandri accepts this as a friendly amendment.
Councilor Morgenstein seconds the amendment.

Councilor Shortell supports the motion. He wants the public to know this came from Mr. Michaels and stated that's a number from Kenny.

Chairman Cervoni wants to state for the record that several members of the public did reach out to him seeking support for pickleball courts.

The Mayor indicated there would have to be considerable administrative review of this before he can promise that it would happen right at the Harrison tennis courts.

Councilor Zandri said we are responsible for making sure the funds are there and he hopes they have the support.

Councilor Tatta would like to know where the \$60,000 came from. Chairman Cervoni stated it came from the Director of Parks and Recreation.

Councilor Shortell said it came in an email from Kenny Michaels on April 15th. He indicated this is to do repairs to the courts, not putting in new courts.

Councilor Marrone agrees with Councilor Zandri that if we don't put this in the budget this will never happen. He stated he supports this.

Councilor Laffin feels these are exactly the type of funds to use for it and he trusts that administration with the Park and Recreation Department will figure out the best way to implement that.

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: YES	TATTA: YES
LAFFIN: YES	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGANSTEIN: YES	CERVONI: YES
9 – AYE	
MOTION: PASSED	

MOTION WAS MADE TO APPROPRIATE AN ADDITIONAL \$1.5 MILLION FROM THE RESERVES/AUDITED FUND BALANCE FOR A TOTAL AMOUNT ON BUDGET LINE 49010 OF \$7.9 MILLION.

MADE BY: TATTA
SECONDED BY: ZANDRI

Chairman Cervoni asked if he is correct that some of that increase in the fund balance has been allocated by the Council already.

Councilor Zandri said we had discussions about this in prior years and designated never means spent. He feels this is another opportunity to designate more funds and take that pressure off the taxpayers. He would like to see some support on this.

Councilor Laffin indicated what they did last year was different they took from Cap and Non. He asked how that would affect credit ratings. Mr. Bowes said ratings are affected by many factors.

The Mayor stated in his experience credit rating agencies are not a one year thing. He feels it's not a good trend to use more and more money from reserves in order to handle operational costs because it exposes you to losses.

Councilor Shortell asked if the 10-15 percent unassigned is of the overall budget or the general budget. Mr. Bowes said the entire general fund which includes schools.

Councilor asked if the credit rating went down in 2019. Mr. Bowes answered yes. Councilor Shortell then asked if we have bonded since then. Mr. Bowes said no but we are putting together a bond sale now.

There was discussion between Mr. Bowes and Councilor Shortell.

The Mayor stated another factor is reassurance to the public that we are doing a good job managing their assets.

There was discussion between the Mayor and Councilor Shortell.

Councilor Shortell stated he's not sure how he feels about this motion. He agrees with the Mayor and he appreciates Councilor Tatta's perspective.

Councilor Zandri feels the concern is allocating an additional \$1.5 million. He spoke of previous years where we designated money and nothing happened. He then asked Mr. Bowes why we reissued these bonds. Mr. Bowes said we haven't done it yet we are analyzing it with our consultants.

There was discussion between Councilor Zandri, Mr. Bowes and the Mayor.

Councilor Marrone is not sure he is comfortable with this motion. He asked what the strategy is toward taxation. The Mayor said to be able to maintain at least a 10 percent reserves.

Councilor Marrone applauded the Mayor on making the decision to not fill Scott Hanley's position.

Councilor Marrone asked the Mayor about the administrative philosophy as to the extra in the taxes every year. The Mayor said the extra is not necessarily built in the tax rate. He explained revenues come in that are not expected. It's a constant balancing and a matter of us looking to provide what the community needs and not looking to overtax.

There was further discussion with the Mayor.

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: ABSENT	TATTA: YES
LAFFIN: ABSENT	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: NO
6 - AYE	
1-NAY	
2-ABSENT	
MOTION: PASSED	

Mr. Bowes reviewed the motion and gave a summary. He explained if we are going to use \$1.5 million in our fund balance to offset that we don't need \$1.5 million in current property taxes so we can reduce that line item (41006) by the same \$1.5 million which in essence translates to a lower mill rate.

Councilor Testa inquired how the bond ordinance for \$2,107,062 relates to this budget. Mr. Bowes explained that's the amount of the authorization action by the Town Council for next year's portion of the six year capital plan. Mr. Bowes stated the Charter has provisions with regard to the Cap and Non Recurring and it refers to items that would be on there and also it gives the public a chance to opine this.

Councilor Testa said he would like to see that money as a promised payment to the community pool project which he acknowledges requires administration approval. He suggested we take the money from the Electric Division pilot and transfer it over to a general fund account instead of putting that money into the Cap & Non Recurring fund. He stated this commits us to doing the community pool.

**MOTION WAS MADE TO CREATE A FUND ACCOUNT FOR
RENOVATION OF COMMUNITY POOL & TRANSFER THE MONEY IN
LINE ITEM 41190 PILOT ELECTRIC DIVISION INTO THAT FUND FOR
THAT PURPOSE.**

**MADE BY: TESTA
SECONDED: MORGENSTEIN**

Mr. Bowes referred to page 83 and 84 Cap and Non Recurring fund. There was discussion between Mr. Bowes and Councilor Testa.

Councilor Shortell likes the spirit and content of Councilor Testa's motion. He is concerned about the dollar amount. He asked if it has to be the \$1.8 million. He said he's a big supporter of the pool and does not want to vote against this. He loves the concept just worried about the dollar amount.

The Mayor stated there are some costs that he's aware of. He said in looking at the ordinance it appears in order for money to go into Cap and Non it does require administrative recommendation and if it becomes part of the capital project it should become part of the budget.

Mr. Bowes referred to Page 23 Expenditure Reports and had further discussion.

Councilor Testa stated he appreciates Councilor Shortell's comment and caution is well advised. He is okay with lowering his request.

**MOTION WAS MADE TO AMEND THE PREVIOUS MOTION THAT
\$1 MILLION OF THE ELECTRIC DIVISION PILOT IN LINE ITEM 59232
BE TRANSFERRED TO THE COMMUNITY POOL PROJECT ACCOUNT.**

MADE BY: TESTA
SECONDED BY: MORGENSTEIN

Councilor Tatta believes the intent is to push the pool along to make sure it happens and she's not sure this does that. She said she understands the rationale but doesn't believe it will achieve the outcome. She stated she's undecided.

Chairman Cervoni stated the motion is a political statement by the Council to earmark the money for the pool. He remarked he doesn't know if that's the best way to get the pool built.

Councilor Testa feels the Council's job is to do their best to decide what they think is in the best interest of the community.

Councilor Marrone agrees with the spirit of this motion and he supports the motion. He stated his concern is money gets set aside and never gets used for the pool.

The Mayor stated it would be good to have a new pool but he is troubled by health concerns and the economy as far as taking on that expense immediately. He feels timing is important and there is too much uncertainty right now to take on a project like that.

Councilor Marrone asked the Mayor if there is an economic indicator for him to move on with the project. The Mayor said economic indicators are important. He spoke of a report he looked at regarding indisposable income and noted that Connecticut was at a .6% increase. He stated Connecticut is about the lowest in the country and he feels this is very troubling.

Councilor Marrone stated the pool is a public service we provide. He is in support of this motion and appreciates the Mayor's perspective.

Councilor Morgenstein commends the people who are in support of this. She feels the mentioning of the 6 to 3 majority in favor of the pool is the reason to put this forward at this time.

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: ABSENT	TATTA: NO
LAFFIN: ABSENT	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: NO
5 – AYE	
2-NAY	
2-ABSENT	
MOTION: PASSED	

The meeting adjourned at 8:38 p.m.

Respectfully submitted,

Lisa Moss
Council Staff
Meeting digitally recorded

Vincent Cervoni, Chairman

Date

Deborah McKiernan, Town Clerk

Date

RECEIVED FOR RECORD 5-12-21
AT 3:30 AND RECEIVED BY
Deborah McKiernan TOWN CLERK

TOWN OF WALLINGFORD, CONNECTICUT
TOWN COUNCIL MEETING

HELD REMOTELY
at GoToMeeting.com

TUESDAY
MAY 11, 2021
6:30 P.M.

RECORD OF VOTES & MINUTES

The Town Council Meeting on Tuesday, May 11, 2021 was called to order at 6:30 p.m. There was a moment of silence and the Pledge of Allegiance was said. Councilors in attendance were Craig C. Fishbein, Thomas Laffin, Gina Morgenstein, Joseph A. Marrone, III, Christopher K. Shortell, Christina Tatta, Vincent F. Testa, Jason Zandri and Chairman Vincent Cervoni. Mayor William W. Dickinson, Jr., Town Attorney Gerald Farrell, Sr., Corporation Counsel Janis Small and Comptroller James Bowes were also present (BY TELECONFERENCE).

- 1. Pledge of Allegiance
- 2. Roll Call
- 3. Consent Agenda
 - 3a. Consider and approve Tax Refunds totaling \$1,703.15 (#883-892)
Acct. #1001001- 41020 - Tax Collector
 - 3b. Acceptance of donation of funds to assist needy children in participating in youth recreation sports programs and consider and approve Appropriation of funds in the amount of \$240 to Revenue, Acct. #2134002-47152 and to Expenditures, Acct. #21340100-58830 – Y&SS
 - 3c. Acceptance of donation of funds for Holiday for Giving and consider and approve Appropriation of funds in the amount of \$300 to Revenue, Acct. #2134002-47152 and to Expenditures, Acct. #21340100-58830 – Y&SS
 - 3d. Acceptance of funds from Operation Fuel and consider and approve Appropriation of funds in the amount of \$300 to Revenue, Acct. #2134002-47152 and to Expenditures, Acct. #21340100-58830 – Y&SS
 - 3e. Acceptance of funds from Workforce Alliance for Summer Youth Employment Program and consider and approve Appropriation of funds in the amount of \$8,435 to Revenue, Acct. #2274002-47010 and to Expenditures, Acct. #22702020-51000 – Y&SS

- 3f. Acceptance of funds for the Emergency Food and Shelter National Program Award and consider and approve Appropriation of funds in the amount of \$2,500 to Donations, Acct. #2134002-47152 and to Expenditures, Acct. #21340100-58830 – Y&SS
- 3g. Acceptance of donation for Wallingford STEM Academy and consider and approve Appropriation of funds in the amount of \$2,605 to Revenue, Acct. #2264002-47152 and to Expenditures, Acct. #22640150-58830 - Y&SS
- 3h. Acceptance of funds received for STEM programs and consider and approve Appropriation of funds in the amount of \$19,925 to Revenue, Acct. #2264002-47152 and to Expenditures, Acct. #22640150-58830 - Y&SS
- 3i. Budget Amendment in the amount of \$30,000 – Sewer Division
- | | | |
|----------|---|------------------|
| \$30,000 | From: Maintenance Collection System | Acct. #461-00673 |
| \$30,000 | To: Appropriation to Retained Earnings (Cash) | |
- 3j. Budget Amendment in the amount of \$30,000 – Sewer Division
- | | | |
|----------|---|------------------|
| \$30,000 | To: Collection System and Appurtenances | Acct. #463-00343 |
| \$30,000 | To: Appropriation from Retained Earnings (Cash) | |
- 3k. Budget Amendment in the amount of \$3,500 – Water Division
- | | | |
|---------|---|------------------|
| \$3,500 | To: Communication Equipment | Acct. #433-00397 |
| \$3,500 | To: Appropriation from Retained Earnings (Cash) | |
- 3l. Consider and approve a Transfer in the amount of \$45,000 – Fire Dept.
- | | | |
|----------|-------------------------------|-----------------------|
| \$25,000 | From: Wage Differential | Acct. #10020150-51450 |
| \$10,000 | From: Other Pay | Acct. #10020150-51900 |
| \$ 5,000 | From: Maintenance of Vehicles | Acct. #10020150-54320 |
| \$ 5,000 | From: General Operating | Acct. #10020150-58735 |
| \$45,000 | To: Replacement Pay | Acct. #10020150-51500 |
- 3m. Consider and approve a Transfer in the amount of \$19,000 from Regular Wages, Acct. #10010401-51000 to P.S. Microfilming, Acct. #TBD - Finance
- 3n. Consider and approve a Transfer in the amount of \$10,000 from Contingency-General, Acct. #10019000-58820 to P.W.-Telephone, Acct. #10030000-53000 – Public Works
- 3o. Consider and approve a Transfer in the amount of \$37,000 from Contingency Accrued Expenses, Acct. #1001900-58821 to Retirement Sick Leave, Acct. #12100-51750 – Human Resources

- 3p. Approval of April 13, 2021 Town Council Minutes, April 13, 2021 Budget Minutes, and April 15, 2021 Budget Minutes.

MOTION WAS MADE TO APPROVE CONSENT AGENDA ITEMS 3a.-3p.

**MADE BY: LAFFIN
SECONDED BY: SHORTELL
VOTE: ALL AYE
MOTION: PASSED**

4. **Items Removed from the Consent Agenda - None**

5. **PUBLIC QUESTION & ANSWER PERIOD**

There were no questions from the public.

6. 6:30 p.m. Conduct a Public Hearing and Consider and Act on the following ordinance entitled:

AN ORDINANCE APPROPRIATING \$2,107,062 FOR THE PLANNING, ACQUISITION AND CONSTRUCTION OF VARIOUS MUNICIPAL CAPITAL IMPROVEMENTS 2021-2022 AND AUTHORIZING THE ISSUE OF \$2,107,062 BONDS OF THE TOWN TO MEET SAID APPROPRIATION AND PENDING THE ISSUANCE THEREOF THE MAKING OF TEMPORARY BORROWINGS FOR SUCH PURPOSE.

**EXCERPT FOR MINUTES OF THE PUBLIC HEARING
AND TOWN COUNCIL MEETING OF THE TOWN OF WALLINGFORD
HELD MAY 11, 2021**

Chairman Cervoni convened the public hearing and stated that the \$2,107,062 2021-2022 Capital Improvement Program bond ordinance which is the subject of this public hearing is available to the public and may be obtained at this meeting from the town website.

Councilor Laffin moved, and the motion was seconded by Councilor Shortell, to read the title of the ordinance and to waive the reading of the remainder of the ordinance, incorporating its full text into the minutes of this meeting.

**VOTE: ALL AYE
MOTION: PASSED**

AN ORDINANCE APPROPRIATING \$2,107,062 FOR THE PLANNING, AND CONSTRUCTION OF VARIOUS MUNICIPAL CAPITAL IMPROVEMENTS 2021-2022 AND AUTHORIZING THE ISSUE OF \$2,107,062 BONDS OF THE TOWN TO MEET SAID APPROPRIATION AND PENDING THE ISSUANCE THEREOF THE MAKING OF TEMPORARY BORROWINGS FOR SUCH PURPOSE.

Public Comment

Public Comment

There were no comments from the public.

Chairman Cervoni called the public hearing adjourned.

Councilor Laffin moved, and the motion was seconded by Councilor Shortell, that the ordinance entitled:

"AN ORDINANCE APPROPRIATING \$2,107,062 FOR THE PLANNING, ACQUISITION AND CONSTRUCTION OF VARIOUS MUNICIPAL CAPITAL IMPROVEMENTS 2021-2022 AND AUTHORIZING THE ISSUE OF \$2,107,062 BONDS OF THE TOWN TO MEET SAID APPROPRIATION AND PENDING THE ISSUANCE THEREOF THE MAKING OF TEMPORARY BORROWINGS FOR SUCH PURPOSE," a copy of which is attached hereto, be adopted.

Council Discussion

Councilor Testa asked if these projects are in the upcoming budget. Mr. Bowes answered yes. Councilor Testa then asked as a procedural question what would happen if we didn't pass the budget or made a change to the budget. The Mayor said it would disrupt funding and we wouldn't be able to move forward. He went on to state we have always done it this way.

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: NO	TATTA: YES
LAFFIN: YES	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: YES
8 - AYE	
1 - NAY	
MOTION: PASSED	

Chairman Cervoni declared the ordinance adopted.

7. Adoption of FY 2021-2022 Annual Budget.

Councilor Shortell talked about how we got here tonight.

MOTION WAS MADE TO PASS THE MAYOR'S BUDGET AS ADOPTED ON APRIL 1, 2021 WITH COUNCILOR ZANDRI'S \$60,000 ALLOCATION FOR PICKLEBALL.

**MADE BY SHORTELL
SECONDED BY: MARRONE**

Councilor Fishbein stated he supports pickleball and indicated if the Mayor supports pickleball we don't even have to wait for this budget to go into effect.

Councilor Fishbein questions the procedures that we sit here with today. He doesn't feel the motion is in order.

Chairman Cervoni explained in the past motions to modify the budget were made on the night before the budget was adopted then it was changed to making motions during workshops and now it's leaving all motions to a motion meeting in advance of the night the Council adopts the budget.

Councilor Testa does not agree with Councilor Shortell that it would be difficult to have an adjustment made to the Park & Recreation budget. He feels there is a lot of support for the pickleball court and we will get it.

Councilor Zandri said looking back at history he could see where Councilor Shortell is coming from but he would like to let the process just ride out. He feels we have the ability to get this done.

Councilor Tatta stated she feels this could be portrayed as a tax decrease. She stated she will not be supporting this motion.

Councilor Laffin said he will not support the package of motions that came out of the last meeting and he would not vote to override. He agrees with Chairman Cervoni's breakdown on the procedure and he supports pickleball.

Councilor Morgenstein will support the original three motions.

Councilor Testa disagrees with Councilor Morgenstein and feels this cannot be portrayed as a tax decrease. He indicated the tax increase is due to revaluation.

Councilor Marrone thanks Councilor Laffin for expressing his feelings toward the budget. He applauds the tax effort as well as the pool effort. He feels we leave everything for the eleventh hour and stated the way we conduct the entire budget is the issue and not so much individual ideas. He supports the three amendments as well as Councilor Shortell's motion.

Chairman Cervoni spoke about the most recent downgrade in our credit rating and remarked we should continue to aspire to that. He stated he is not against the pool renovation that's proposed he just didn't like the timing last year. He went on to say he could support it but he doesn't agree with funding it this way. He also supports pickle ball. He stated he is a yes on this motion, a no on what happened Thursday night and if there is a veto he is a no to override it.

Councilor Shortell said we made cuts and that's where we got into trouble. He stated he appreciates everyone's comments.

Councilor Fishbein stated he will be voting against the budget and that it is a tax increase. He said more than likely he would not vote to override a veto.

Councilor Tata is not going to vote tonight based on the fact that maybe the Mayor is going to veto this.

ROLL CALL VOTE:

SHORTELL: YES

FISHBEIN:	NO	TATTA:	NO
LAFFIN:	YES	TESTA:	NO
MARRONE:	YES	ZANDRI:	NO
MORGENSTEIN:	NO	CERVONI:	YES

4 - AYE
5 - NAY
MOTION: FAILED

TOWN OF WALLINGFORD
Annual Budget Adoption – Council Motions (based on motions approved 5/6/2021)
For the Fiscal Year Beginning JULY 1, 2021

I. Councilmember : Tatta

MOVED: TO ADOPT THE TOTAL GENERAL FUND REVENUE BUDGET OF **\$177,090,079**, PER THE CHANGES MADE TO THE MAYOR’S PROPOSED BUDGET ON THE ATTACHED RECONCILIATION DETAIL SHEET, FOR THE FISCAL YEAR BEGINNING JULY 1, 2021.

Councilmember Marrone seconded the motion.

ROLL CALL VOTE:	SHORTELL:	YES
FISHBEIN:	TATTA:	YES
LAFFIN:	TESTA:	YES
MARRONE:	ZANDRI:	YES
MORGENSTEIN:	CERVONI:	NO

6 - AYE
3 - NAY
MOTION: PASSED

II. Councilmember Tatta:

MOVED: TO ADOPT THE TOTAL GENERAL FUND EXPENDITURE BUDGET OF **\$177,090,079**, PER THE CHANGES MADE TO THE MAYOR’S PROPOSED BUDGET ON THE ATTACHED RECONCILIATION DETAIL SHEET, FOR THE FISCAL YEAR BEGINNING JULY 1, 2021.

Councilmember Shortell seconded the motion.

ROLL CALL VOTE:	SHORTELL:	YES
FISHBEIN:	TATTA:	YES
LAFFIN:	TESTA:	YES
MARRONE:	ZANDRI:	YES
MORGENSTEIN:	CERVONI:	NO

6 - AYE
3 - NAY
MOTION: PASSED

III. Councilmember Tatta:

MOVED: ESTABLISH THE PROPERTY TAX RATE FOR THE FISCAL YEAR BEGINNING JULY 1, 2021 AT **28.52** MILLS.

REAL ESTATE AND PERSONAL PROPERTY TAXES IN EXCESS OF \$100 SHALL BE MADE IN TWO INSTALLMENTS. THE FIRST OF WHICH IS DUE JULY 1, 2021, PAYABLE ON OR BEFORE AUGUST 1, 2021. THE SECOND INSTALLMENT SHALL BE DUE JANUARY 1, 2022, PAYABLE ON OR BEFORE FEBRUARY 1, 2022. REAL ESTATE AND PERSONAL PROPERTY TAXES OF \$100 OR LESS SHALL BE PAID IN ONE INSTALLMENT DUE JULY 1, 2021 AND PAYABLE ON OR BEFORE AUGUST 1, 2021 AS PROVIDED BY CONNECTICUT STATUTE, CHAPTER 204, SECTION 12-144.

MOTOR VEHICLE TAXES SHALL BE MADE IN ONE INSTALLMENT DUE JULY 1, 2021 AND PAYABLE ON OR BEFORE AUGUST 1, 2021 AS PROVIDED BY CONNECTICUT GENERAL STATUTE, CHAPTER 204, SECTION 12-144A.

DELINQUENT MOTOR VEHICLE TAXES SHALL BE PAID ONLY IN CASH OR BY CERTIFIED CHECK OR MONEY ORDER AS PROVIDED BY CONNECTICUT GENERAL STATUTE, CHAPTER 204, SECTION 12-146.

PROPERTY TAXES IN AN AMOUNT OF LESS THAN FIVE DOLLARS SHALL BE WAIVED. CHECKS IN PAYMENT OF PROPERTY TAXES WHICH HAVE BEEN RETURNED BY THE BANK SHALL BE SUBJECT TO A THIRTY FIVE DOLLAR (\$35.00) FEE.

Councilmember Marrone seconded the motion.

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: NO	TATTA: YES
LAFFIN: NO	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: NO
6 - AYE	
3 - NAY	
MOTION: PASSED	

IV. Councilmember Tatta:

MOVED: TO ADOPT THE BUDGETS OF THE DIVISIONS OF THE DEPARTMENT OF PUBLIC UTILITIES FOR THE FISCAL YEAR BEGINNING JULY 1, 2021 AS HEREIN STATED:

Electric Enterprise Fund

Operating Revenues	<u>\$66,980,620</u>
Operating Expenses	<u>\$68,155,093</u>
Operating Income (Loss)	<u>\$(1,174,473)</u>

Non-Operating Revenue	<u>\$ 2,519,823</u>
Non-Operating Expenses	<u>\$ 175,699</u>
Net Income Before Operating Transfers In (Out)	<u>\$ 1,169,651</u>
Operating Transfers (Out)	<u>(\$1,781,062)</u>
Net Income (Loss)	<u>\$ (611,411)</u>
Working Capital: Sources of Funds	<u>\$ 4,347,022</u>
Working Capital: Use of Funds	<u>\$ 4,347,022</u>
Re-appropriation of Prior Years Capital Items	<u>\$ 1,274,457</u>

Water Enterprise Fund

Operating Revenues	<u>\$ 6,999,970</u>
Operating Expenses	<u>\$ 7,758,902</u>
Operating Income (Loss)	<u>\$ (758,932)</u>
Non-Operating Revenue	<u>\$ 191,480</u>
Non-Operating Expenses	<u>\$ 60,502</u>
Net Income (Loss)	<u>\$ (627,954)</u>
Working Capital: Sources of Funds	<u>\$ 1,927,565</u>
Working Capital: Use of Funds	<u>\$ 1,927,565</u>
Re-appropriation of Prior Years Capital Items	<u>\$ 5,119,963</u>

Sewer Enterprise Fund

Operating Revenues	<u>\$ 7,437,475</u>
Operating Expenses	<u>\$ 9,199,422</u>
Operating Income (Loss)	<u>\$(1,761,947)</u>
Non-Operating Revenue	<u>\$ 380,364</u>
Non-Operating Expenses	<u>\$ 650,007</u>
Net Income (Loss)	<u>\$(2,031,590)</u>
Working Capital: Sources of Funds	<u>\$ 2,269,950</u>
Working Capital: Use of Funds	<u>\$ 2,269,950</u>
Re-appropriation of Prior Years Capital Items	<u>\$ 2,341,376</u>

Councilmember Marrone seconded the motion.

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: NO	TATTA: YES
LAFFIN: YES	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: YES

8 - AYE
1 - NAY
MOTION: PASSED

V. Councilmember Tatta:

MOVED: TO ADOPT THE BUDGET OF THE CAPITAL AND NON-RECURRING EXPENDITURES FUND FOR THE FISCAL YEAR BEGINNING JULY 1, 2021 IN

THE AMOUNT OF **\$2,107,062** REVENUES, PER THE CHANGES MADE TO THE MAYOR'S PROPOSED BUDGET ON THE ATTACHED RECONCILIATION DETAIL SHEET, AND **\$2,107,062** EXPENDITURES.

Councilmember Marrone seconded the motion.

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: NO	TATTA: YES
LAFFIN: YES	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: YES
8 - AYE	
1 - NAY	
MOTION: PASSED	

VI. Councilmember Tatta:

MOVED: TO APPROVE SPECIAL FUNDS OF THE BOARD OF EDUCATION OF THE TOWN OF WALLINGFORD FOR THE FISCAL YEAR BEGINNING JULY 1, 2021 AS ATTACHED HERETO AND MADE A PART HEREOF (pages a. through c.)

Councilmember Marrone seconded the motion.

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: NO	TATTA: YES
LAFFIN: YES	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: NO
7 - AYE	
2 - NAY	
MOTION: PASSED	

VII. Councilmember Tatta:

MOVED: TO APPROVE SPECIAL FUNDS OF THE TOWN OF WALLINGFORD GENERA GOVERNMENT FOR THE FISCAL YEAR BEGINNING JULY 1, 2021 AS ATTACHED HERETO AND MADE A PART HEREOF (pages d. and e.)

Councilmember Marrone seconded the motion.

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: NO	TATTA: YES
LAFFIN: YES	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: YES
8 - AYE	
1 - NAY	
MOTION: PASSED	

VIII. Councilmember Tatta:

MOVED: TO APPROVE CAPITAL APPROPRIATIONS (IN-FORCE) RESERVE FUND FOR THE FISCAL YEAR BEGINNING JULY 1, 2021 IN THE AMOUNT OF \$3,119,742 REVENUES AND \$3,119,742 EXPENDITURES. THIS REPRESENTS THE AMOUNT AS OF APRIL 30, 2021, WHICH MAY DECREASE AS EXPENDITURES OCCUR THROUGH JUNE 30, 2021. THIS AMOUNT MAY ALSO INCREASE IF THE COUNCIL APPROVES ANY UNSPENT BOARD OF EDUCATION FUNDS TO BE CARRIED FORWARD (2% FUND) FOR FISCAL YEAR ENDING 6/30/2021.

Councilmember Marrone seconded the motion.

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: YES	TATTA: YES
LAFFIN: YES	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: YES
9 - AYE	
MOTION: PASSED	

IX. Councilmember Tatta:

MOVED: TO AUTHORIZE THE CHAIRMAN TO SIGN THREE COPIES OF THE FINALIZED BUDGET. TWO TO BE FILED WITH THE TOWN CLERK AND ONE TO BE PLACED ON FILE IN THE WALLINGFORD PUBLIC LIBRARY.

Councilmember Marrone seconded the motion.

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: YES	TATTA: YES
LAFFIN: YES	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: NO
8 - AYE	
1 - NAY	
MOTION: PASSED	

8. Discussion and Possible action regarding Wrinn Street Associates buying 1,500 square feet of town land abutting Barberino's property on Route 5 for \$500 by Quit Claim Deed – Law Dept.

MOTION WAS MADE TO MOVE TO APPROVE the sale of 1,500 square feet of town land abutting Barberino's property on Route 5 for \$500 by Quit Claim Deed to Wrinn Street Associates.

**MADE BY: LAFFIN
SECONDED BY: SHORTELL**

Attorney Farrell stated this is a very small piece of land on a paper street. He feels it's a good move for the town to rid itself of this property.

ROLL CALL VOTE:
FISHBEIN: YES
LAFFIN: YES
MARRONE: YES
MORGENSTEIN: YES
9 -AYE
MOTION: PASSED

SHORTELL: YES
TATTA: YES
TESTA: YES
ZANDRI: YES
CERVONI: YES

9. Executive Session pursuant to Section 1-200(6)(D) of the Connecticut General Statutes with respect to the purchase, sale and/or leasing of property – Mayor -*Withdrawn*
10. Executive Session pursuant to CGS Section 1-225, Section 1-200(6)(E), Section 7-232a, Section 1-210(b)(1), (5)(B), (10) to discuss draft tax and power purchase proposal and obtain legal advice related thereto – Mayor

MOTION WAS MADE TO MOVE INTO EXECUTIVE SESSION AT 8:19 P.M.

MADE BY: LAFFIN
SECONDED BY: FISHBEIN
VOTE: ALL AYE
MOTION: PASSED

MOTION WAS MADE TO MOVE INTO EXECUTIVE SESSION pursuant to CGS Section 1-225, Section 1-200(6)(E), Section 7-232a, Section 1-210(b)(1), (5)(B), (10) to discuss draft tax and power purchase proposal and obtain legal advice related thereto.

MOTION WAS MADE TO MOVE OUT OF EXECUTIVE SESSION AT 9:50 P.M.

MADE BY: LAFFIN
SECONDED BY: FISHBEIN
VOTE: ALL AYE
MOTION: PASSED

Time of Executive Session 8:19 p.m. to 9:50 p.m.

Attendance at Executive Session:

FISHBEIN **MAYOR WILLIAM W. DICKINSON, JR.**
LAFFIN **TOWN ATTORNEY GERALD E. FARRELL, SR.**
MARRONE **CORPORATION COUNSEL JANIS SMALL**
MORGENSTEIN **TONY BUCCHERI, GENERAL MANAGER , ELECTRIC DIV.**
SHORTELL
TATTA
TESTA
ZANDRI
CERVONI

MOTION WAS MADE TO WAIVE RULE V FOR THE PURPOSES OF A DISCUSSION AND POSSIBLE ACTION ON THE TRANSFER OF FUNDS IN ORDER TO HIRE CAVANAUGH TOCCI AS SOUND CONSULTANTS FOR EXPERT ADVICE RELATING TO THE POSSIBLE DEVELOPMENT OF DATA CENTERS.

**MADE BY: LAFFIN
SECONDED BY: MORGENSTEIN
VOTE: 8 AYE; 1 NAY (SHORTELL)
MOTION: PASSED**

MOTION WAS MADE TO APPROVE A TRANSFER IN THE AMOUNT OF \$10,000 FROM THE CONTINGENCY GENERAL PURPOSE ACCOUNT TO THE LAW DEPARTMENT SPECIALISTS ACCOUNT FOR THE PURPOSES OF HIRING CAVANAUGH TOCCI SOUND CONSULTANTS FOR EXPERT ADVICE RELATING TO THE POSSIBLE DEVELOPMENT OF DATA CENTERS.

**MADE BY: LAFFIN
SECONDED BY: MORGENSTEIN**

ROLL CALL VOTE:	SHORTELL: NO
FISHBEIN: YES	TATTA: YES
LAFFIN: YES	TESTA: YES
MARRONE: NO	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: YES
7 -AYE	
2-NAY	
MOTION: PASSED	

The meeting was adjourned at 9:54 p.m.

Respectfully submitted,

Lisa Moss
Council Staff
Meeting digitally recorded

RECEIVED FOR RECORD 5-17-21
AT 4:00 AND RECEIVED BY
Deborah McKiernan TOWN CLERK

Vincent Cervoni, Chairman Date

Deborah McKiernan, Town Clerk Date

**TOWN OF WALLINGFORD, CONNECTICUT
TOWN COUNCIL MEETING**

**TUESDAY
MAY 18, 2021
6:30 P.M.**

RECORD OF VOTES & MINUTES

The Town Council Meeting on Tuesday, May 18, 2021 was called to order at 6:30 p.m. There was a moment of silence and the Pledge of Allegiance was said. Councilors in attendance were Craig C. Fishbein, Thomas Laffin, Gina Morgenstein, Joseph A. Marrone, III, Christopher K. Shortell, Christina Tatta, Vincent F. Testa, Jason Zandri and Chairman Vincent Cervoni. Mayor William W. Dickinson, Jr. and Town Attorney Gerald E. Farrell, Sr. were also present.

1. Pledge of Allegiance
2. Roll Call
3. Discussion and possible action regarding Mayor’s veto on May 14, 2021 of the 2021-2022 Budget adopted by the Town Council on May 11, 2021 – Councilor Zandri

MOTION WAS MADE THAT THE TOWN COUNCIL CONSIDER A VOTE TO OVERTURN THE MAYORAL VETO AND RESTORE THE TOWN COUNCIL BUDGET.

**MADE BY: ZANDRI
SECONDED BY: TATTA**

Councilor Zandri shared a spreadsheet to aid in the discussion of the Mayor’s veto. He stated he’s referred to this spreadsheet in prior meetings going back to the 2003-2004 budget and would like to implore the Council to reconsider its decision. He pointed out in 2005-2006 there was a \$9.2 million allocation and said we need to look at what we actually spend. He asked all Council to consider their original votes and those that voted no to reconsider their position. He stated we have the ability to put money aside for community pool and there is an element in there for pickleball courts that will get lost if we let this veto ride. He would have liked to do the same thing as last year having a flat mill rate but there is no way to do this. He went on to say this budget lowered the tax burden by \$1.5 million and noted we have the ability to ease the tax burden on the residents of Wallingford.

Councilor Tatta feels the veto should not be viewed as the Mayor vs. the Council. She reviewed the three amendments to the budget and indicated the vote boils down to a mill rate of 28.85 for the Mayor’s budget and a mill rate of 28.52 for the Council budget. She went on to state a vote to veto the budget is a vote for lower taxes and a vote to uphold the veto is a result in higher taxes.

Councilor Fishbein is against earmarking money for the community pool. He stated we are locking up that money that could be used for other things. He feels this is not a responsible way to deal with reserves that are in Cap and Non and there should be some portion of the budget that the Council has to do something with reserves not just let that money linger.

Chairman Cervoni stated while he is not at all opposed to the redevelopment of the community pool park he agrees with Councilor Fishbein about allocation of pilot money as the Council's budget does that.

Paul Ciardullo, 2 Bayberry Drive, is disappointed we are not talking about eliminating tax increase completely. He asked the Mayor how he can justify increasing the expense budget by \$4 million. He feels that's extremely high and stated we are in the middle of a pandemic.

The Mayor explained the budget is built upon projected expenses for the coming year. He stated we did not shut down any of our services and we had to spend money in order to provide those services. He is waiting to find out details on how we can spend that money. The Mayor said the town has a duty to maintain a credit reserve and it's a safety net.

Mr. Ciardullo said fundamentally the numbers don't add up. He supports overriding the veto. He would like to recommend someone on the Council make a proposal to zero out any tax increase and reduce expenditures accordingly. Chairman Cervoni said they can't do that tonight it would violate the Charter.

Bob Gross, Long Hill Road, asked if the budget has to be adopted tonight. Chairman Cervoni explained the budget was to be adopted last Tuesday and the Mayor had 10 days to veto, the Mayor exercised that veto on Friday and that gave the Council 10 days in which to respond. The Mayor's veto overturns the Council's budget. Tonight the Council will attempt to overturn the veto and restore the Council's budget and that would be the final budget.

Mr. Gross asked when the state is giving the final analysis of ways the town can spend money. The Mayor said we are using that money to cover loss revenue due to the pandemic and we are continuing with the amount we expect to receive. Mr. Bowes said that is part of a request in the upcoming budget year and the funds will come from special revenue not the general fund.

Mr. Gross asked if we have a shortfall of \$4 million. Mr. Bowes responded it will not be anywhere near \$4 million.

Mr. Gross feels the Council should override the budget because there will be millions of dollars in surplus.

Mr. Bogert, 12 Meadowland Road, said he can't think of a more appropriate time to dip into our \$129 million in reserves. He asked what's the purpose of having a rainy day fund if not to aid us in these challenging times. He stated if Councilor Fishbein doesn't vote to override this budget he is voting for a bigger tax increase.

Riley O'Connell, 30 Northford Road, agrees with Mr. Bogert and stated he is disappointed with Fishbein's choice to presumably vote not to overturn this veto. He then remarked when will be the right time for the pool.

Councilor Fishbein stated pickleball and the improvements to Harrison Park are not hampered by the Town Council budget not passing.

There was discussion between Mr. Gross and Mr. Bowes.

Councilor Shortell stated tonight's vote does not impact the future of the pool and a vote tonight is a vote against pickleball. He went on to say we cannot access money in the budget without the Mayor coming to us and asking for it.

MOTION TO CALL THE QUESTION

MADE BY: SHORTELL

SECONDED BY: LAFFIN

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: NO	TATTA: NO
LAFFIN: YES	TESTA: YES
MARRONE: YES	ZANDRI: NO
MORGENSTEIN: YES	CERVONI: YES
6 - AYE	
3 - NAY	
MOTION: PASSED	

MOTION ON VETO

ROLL CALL VOTE:	SHORTELL: YES
FISHBEIN: YES	TATTA: YES
LAFFIN: NO	TESTA: YES
MARRONE: YES	ZANDRI: YES
MORGENSTEIN: YES	CERVONI: NO
6 - AYE	
3 - NAY	
MOTION: PASSED	

4. Presentation by Gotspace LLC regarding the possible development of Data Centers in Wallingford – Economic Development Commission

In Attendance: *Attorney Len Fasano*
Mr. Thomas Quinn

Attorney Fasano explained the Legislature passed a House Bill 6514 through the House and Senate. He stated it gives businesses the advantage to get data centers in Connecticut. He went on to say the buildings house network computers that are in a physical location for central storage management of data. It gives certain tax incentives and there is property, personal and real tax exemptions for municipalities that enter into a Hosting Agreement negotiated with the town for fees. Generally these are 20-30 year investments and a minimum of \$50 million and up to \$200 million. He spoke further about policy and Hosting Agreements. He said the state set up tax implications under total local control that is 100% regulated to the town.

Mr. Quinn stated this is a good opportunity in Connecticut in what would be considered a new corridor for data in the region. He spoke about land control and a Hosting Agreement. He addressed height, aesthetics and noise. He mentioned the building is very secure and a quiet facility. The buildings will be put in industrial zone areas and the town has no obligation to upgrade sewers or any electrical infrastructure whatsoever.

Mr. Quinn gave an overview of details of the development of data centers.

Ed Bradley, 2 Hampton Trail, feels the data centers being proposed have issues that come along with them. He said they use a lot of electricity and that will be a burden. He went on to say the generators are housed inside and asked where would the diesel fuel be stored.

Mr. Quinn said if you google New Albany Ohio Facebook and you look from google earth picture down it will tell you the story. He explained these generators are all contained in one big area and are up to full power in less than five minutes. He stated they are very efficient and very contained.

Mr. Bradley inquired about sound.

Mr. Quinn explained that the size of the land is a big piece and noted air conditioners are behind the walls and will exceed the noise ordinance. Federal Government has changed the way air conditioners are built to be more efficient and quieter. He went on to state a sound engineer will be brought in to measure decibels.

Mr. Bradley inquired about land use and mentioned Site 1 and Site 2 are close to residential areas. He stated that Site 1 is the water protection district of Wallingford. He asked Mr. Quinn why they picked Site 1. Mr. Quinn said it is an industrial zoned area, generators are allowed there and we intend to work with the town through the planning process and be set back at least 400 feet from the reservoir.

Mr. Bradley inquired about state tax control. Attorney Fasano explained there is a sales tax exemption on certain transactions that take place within these data centers.

Charlotte Stoppa, 1038 North Farms Road, has concerns regarding the Site 2 plan. She asked if the plans include a driveway and entrance on North Farms Road.

Mr. Quinn explained they are trying to stay off of North Farms Road. He said they have a new plan and intend to try to make an internal roadway through that larger site to take the traffic off that road. Ms. Stoppa mentioned Building 5 is close to her neighbor's house and asked if Building 5 will really be in that location when there are other locations that are untouched. Mr. Quinn indicated nothing is set in stone and said they are happy to move the building if possible.

Jeff Kohan, Whispering Pines Drive, asked if they have an application with P&Z or if they have to get approval from the Town Council. Mr. Quinn stated they posted plans for marketing purposes and they have not applied. He mentioned they did soil samples.

Mr. Kohn inquired about the letter of credit.

Attorney Fasano explained there is a Hosting Agreement being negotiated, Town Council at some point in time will have the opportunity to look at that Agreement and there will be a vote on that Agreement, from there that would be approved by DECD. He explained a letter of credit is protection against the town. Mr. Kohan indicated he doesn't want the town to be on the hook. Mr. Quinn said the town is not on the hook for any sewer usage or power usage or anything to do with fiber upgrades, road expansion or traffic lights needed.

John Christopher, 15 Putter Drive, asked Mr. Quinn his position on professional services. Mr. Quinn said that Mr. Christopher could contact him and indicated they want to keep this local.

Jessica Palanski, 1039 North Farms Road, wants to make it clear residents like privacy. She is concerned about entry on North Farms Road. She did research and said these units in other areas have become problematic. What would the light pollution at night be? Mr. Quinn said this is biometric security and infrared it sees in the dark. He stated they will do everything they can to minimize traffic on that road and to make residents satisfied and there are no plans to expand any roads.

Mr. Mirra stated it was mentioned that EDC is only concerned with tax revenue and indicated that is not the case they want to expand the income in the town.

Bob Gross asked if they are building eight data centers or looking for the best place to go at this time. Mr. Quinn explained they cannot even build six buildings at once. They would start a single building and hopefully a second building within six months. Mr. Quinn said there is almost a zero chance that you could build this many buildings at once.

Mr. Gross asked if these buildings are taxable or if you have to have a Hosting Agreement. Attorney Fasano said a Hosting Agreement is in lieu of property taxes.

Rob Crowell thanks them for considering moving building 5. He asked how high the buildings are and when the new plans will go online. Mr. Quinn stated the height of the building is just slightly over 35 feet for two stories and indicated the new plans will not go online too soon.

Councilor Fishbein stated he is very sensitive to this project and is in favor of the Bill that brought us here tonight. Ultimately, he will defer to the residents on this. He is concerned about screenings. He does not know if he would be in favor of a Host Agreement that did not prevent access from North Farms Road. He indicated a slow steady reliable approach would make him feel a lot better.

Councilor Tatta asked if there is any sort of environmental radiation emitted. Mr. Quinn answered no and stated just computers.

Chairman Cervoni indicated livestream on youtube can be watched. He asked Mr. Quinn if he would like to give contact information for people that could not be here tonight. Mr. Quinn said they can go to the GotSPACE Website or call Mr. Quinn at 508-726-2600. He prefers email.

Chairman Cervoni thanked him for fielding questions.

The meeting was adjourned at 9:15 p.m.

Respectfully submitted,

Lisa Moss
Council Staff
Meeting digitally recorded

Vincent Cervoni, Chairman

Date

Deborah McKiernan, Town Clerk

Date

RECEIVED FOR RECORD 5-21-21
AT 4:30 AND RECEIVED BY
Deborah McKiernan TOWN CLERK



OFFICE OF THE MAYOR
TOWN OF WALLINGFORD
CONNECTICUT

WILLIAM W. DICKINSON, JR.
MAYOR

45 SOUTH MAIN STREET
WALLINGFORD, CT 06492
TELEPHONE 203 294-2070
FAX 203 294-2073

May 25, 2021

Wallingford Town Council
45 South Main Street
Wallingford, Connecticut 06492

ATTN: Vincent Cervoni, Chairman

Dear Council Members:

In order to complete the requirements for the Neighborhood Assistance Act (NAA) set by the State, attached is a resolution authorizing the Mayor's Office to submit Neighborhood Assistance applications to the Department of Revenue Services along with the Summary List of Neighborhood Assistance Programs for 2021. It is requested that these documents be forwarded to the Town Council for its consideration after the June 8 public hearing on Neighborhood Assistance.

Should you have any questions or comments, please contact me.

Sincerely,

William W. Dickinson, Jr.
Mayor

smh

Attachments

NAATransLtrToTC2021



Town of Wallingford, Connecticut

RESOLUTION

WHEREAS, pursuant to Connecticut General Statutes 12-631, the State of Connecticut has provided tax incentives for Connecticut businesses that donate to community programs under certain circumstances; and

WHEREAS, it is required under Connecticut General Statutes 12-631 that any municipality desiring to obtain benefits under the provisions of this Act shall, after holding at least one public hearing and after approval of the legislative bodies, submit to the Department of Revenue Services a list of programs eligible for investment by business firms under the provisions of this Act; and

WHEREAS, it is desirable and in the best interest that the Town of Wallingford submit such a list to the State of Connecticut.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF WALLINGFORD:

1. that after holding a public hearing on the list required under Connecticut General Statutes 12-631, the Town Council of the Town of Wallingford hereby approves the attached list entitled: Summary List of Neighborhood Assistance Programs; and
2. that the Mayor of the Town of Wallingford is hereby authorized and directed to submit to the Department of Revenue Services the approved list of programs eligible for investment by business firms and to provide such additional information; to execute such other documents as may be required by the Department to accept on behalf of the Town any funds available for those municipal programs on the list; to execute any amendments, rescissions, and revisions thereto; and to act as the authorized representative of the Town of Wallingford.

Certified a true copy of a resolution duly adopted by the Town of Wallingford at a meeting of its Town Council on June 8, 2021, and which has not been rescinded or modified in any way whatsoever.

(Date)

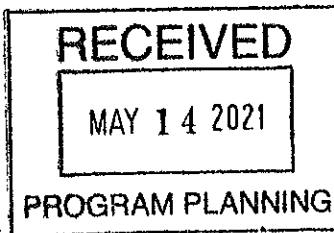
(Clerk)



Town of Wallingford, Connecticut

TOWN OF WALLINGFORD
SUMMARY LIST OF NEIGHBORHOOD ASSISTANCE PROGRAMS
June 8, 2021

<u>AGENCY</u>	<u>TITLE</u>	<u>AMOUNT</u>
Columbus House	Wallingford Emergency Shelter	\$120,000
Gaylord Hospital, Inc.	Energy Efficiency Upgrades	\$150,000
Gaylord Hospital, Inc.	Patient Programs and Services	\$150,000
Holy Trinity Roman Catholic Corporation	Energy Efficient Windows	\$150,000
Ulbrich Boys & Girls Club	Academic Success, Mentoring, and Youth Development	\$150,000
Wallingford Family YMCA	YMCA Healthy Communities Campaign	\$150,000
Wallingford Historic Preservation Trust	Johnson Mansion/Silver Museum	\$150,000
Wallingford Public Access Association, Inc.	WPAA-TV HVAC & Heating Management Building - Underbelly and Attic Insulation	\$ 16,852



Municipality: Town of Wallingford

Form NAA-01
2020 Connecticut Neighborhood Assistance Act (NAA)
Program Proposal

This form **must** be completed and submitted to your municipality for approval. All items **must** be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. **Do not submit this form directly to the Department of Revenue Services.**

Part I — General Information

Name of tax exempt organization/municipal agency: _____
Columbus House, Inc.

Address: 586 Ella T. Grasso Boulevard, New Haven, CT 06519

Federal Employer Identification Number: 22-2511873

Program title: Wallingford Emergency Shelter

Name of contact person: John B. Brooks

Telephone number: (203) 401-4400

Email address: jbrooks@columbushouse.org

Total NAA funding requested (\$250 minimum, \$150,000 maximum): \$ 120,000.00

Is your organization required to file federal Form 990 or 990EZ, Return of Organization Exempt from Income Tax?

Yes No

If **Yes**, attach a copy of the **first page** of your most recent return.
If **No**, attach a copy of your determination letter from the U.S. Treasury Department, Internal Revenue Service.

Part II — Program Information

Check the appropriate description of your program:

100% credit percentage

- Energy conservation; or
 Comprehensive college access loan forgiveness (see Conn. Gen Stat. § 12-635(3)).

60% credit percentage

- Job training/education for unemployed persons aged 50 or over;
 Job training/education for persons with physical disabilities;
 Program serving low-income persons;
 Child care services;
 Establishment of a child day care facility;
 Open space acquisition fund; or
 Other (specify): _____

Description of program: _____

Columbus House's Wallingford Emergency Shelter (WES) program serves those who are homeless or at-risk by providing shelter, housing, and support services for families and individuals. Our staff connect clients to healthcare, employment, and benefits programs with the ultimate goals of stabilizing housing, establishing and maintaining income, and improving overall quality of life.

Need for program: _____

The CT Coalition to End Homelessness Annual Point in Time count identified 2,904 people experiencing homelessness on a single night in January 2020 - 585 of them children. Homelessness is caused largely by the lack of affordable housing. According to the Partnership for Strong Communities' 2020 Housing Data Profile, housing remains expensive in Wallingford relative to the median household income where 47% of the town's renters spend 30% or more of their income on housing. The pandemic has highlighted what we already knew - people experiencing homelessness are the most vulnerable in our community, homeless service providers are under-resourced, and housing is indeed healthcare.

Neighborhood area to be served: _____

All neighborhoods in the City in Wallingford.

Plan to implement the program: _____

Staff will provide case management, including 1) assistance in creating a detailed, person-centered action plan with SMART Goals; 2) benefits counseling to access income & services through mainstream programs such as SNAP, WIC, SSI/SSDI, HUSKY Health Insurance, energy assistance, and others; 3) employment assistance to access sustainable earned income; 4) community re-integration and engagement by encouraging clients to be involved in civic, religious & social organizations, and other community-based activities; 5) connecting to medical care and behavioral treatment; and 6) working to identify safe, affordable housing.

Timetable:

Program start date: 7/1/2021

Program completion date: 6/30/2022

The program completion date must not be more than two years from the program start date. A certified post-project review is due to the municipality overseeing implementation no later than three months after program completion date for all projects receiving \$25,000 or more in NAA funding.

Part III — Financial Information

Program Budget:

Complete in full. Expenditures must equal or exceed total funding.

Sources of Revenue:

NAA funds requested	<u>\$120,000.00</u>
Other funding sources - itemized sources:	
a) <u>Govt Grant - CDBG Sec & Oth</u>	<u>\$25,000.00</u>
b) <u>Ulbrich Stainless Steels & Special Metals</u>	<u>\$30,000.00</u>
c) <u>Town of Wallingford</u>	<u>\$25,000.00</u>
d) <u>Private Fundraising Unrestricted Contributions</u>	<u>\$193,551.00</u>

Total Funding: \$273,551.00

Proposed Program Expenditures:

Direct operating expenses - itemized description:	
a) <u>Salaries and Benefits</u>	<u>\$148,336.00</u>
b) <u>Client Needs and Direct Services</u>	<u>\$3,153.00</u>
c) <u>Facilities and Maintenance</u>	<u>\$71,421.00</u>
d) <u>Other program expenses</u>	<u>\$21,050.00</u>

Administrative expenses - itemized description:	
a) <u>Accounting/Legal/HR</u>	<u>\$14,923.00</u>
b) <u>Quality Assurance</u>	<u>\$14,668.00</u>
c) _____	_____
d) _____	_____

Total Proposed Expenditures: \$273,551.00

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: _____ _____
Mailing address: _____ _____
Name of municipal liaison: _____
Telephone number: _____
Fax number: _____
Email address: _____

<p style="text-align: center;">Post-Project Review</p> <p style="text-align: center;">Is a post-project review required for this proposal?</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center;">If Yes, date post-project review due:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Date</p>
--

2020 Connecticut Neighborhood Assistance Act (NAA) Program Proposal Instructions

Complete all items on **Form NAA-01**, *2020 Connecticut Neighborhood Assistance Act (NAA) Program Proposal*. Incomplete applications will **not** be accepted. For where to direct inquiries, see *Contact Information* below.

Part I – General Information

Enter the name of the tax exempt organization or municipal agency, address, Federal Employer Identification Number, and email address.

Program Title: Assign a unique program title to each program for which your organization is making an application.

Federal Form 990: Attach a copy of the first page of your organization's most recent federal Form 990 or Form 990EZ. If your organization is not required to file either Form 990 or Form 990EZ, attach a copy of the determination letter from the Internal Revenue Service.

Part II – Program Information

Description of Program: Describe the program, including information about how the program will operate, its benefit to the community, how recipients will be selected, and any measures used to determine the program's impact on the community.

Need for Program: Demonstrate a need for this program. For example, provide relevant statistics.

Neighborhood Area to Be Served: Describe the neighborhood or municipality this program will serve.

Plan to implement the program: Describe how the program will operate. Identify other persons or organizations involved in the administration of the program.

Timetable: Indicate the starting and completion dates of the program. The program completion date must not be more than two years from the program start date.

Part III – Financial Information

Each program proposal must include a program budget that includes all sources of funding and all anticipated expenditures. The information provided in the budget may be used during a post-project audit.

Sources of Revenue: The budget must include the requested NAA funding and any other anticipated revenue sources.

NAA Funding Requested: Indicate the total amount your organization is requesting for its program.

This amount may not exceed the total proposed expenditures. Please note that the minimum NAA funding is \$250, with a maximum funding of \$150,000 per organization or agency per year.

Other Funding Sources: Provide a detailed description(s) and the amount(s) of all funding sources.

Proposed Program Expenditures: The budget must include a detailed description and the amount of all direct operating and administrative expenditures. **Expenditures must equal or exceed total funding.**

Direct Operating Expenses: Expenses include materials, equipment, wages, salaries, tuition fees, sub-contracting services, and any other expenses needed to administer the program.

Part IV – Municipal Information

This part is to be completed by the municipal agency overseeing implementation of the program.

Municipal Liaison: The municipality must designate an individual to serve as a liaison with DRS for all NAA matters.

Post-Project Review: Any program receiving \$25,000 or more in NAA funding is required to provide a post-project review, prepared by a certified public accounting firm, to the municipality overseeing the program. This review must be submitted to the municipality no later than three months after the program completion date.

Contact Information

Direct inquiries to:

Department of Revenue Services (DRS)
Neighborhood Assistance Act Program
Attn: Research Unit
450 Columbus Blvd Ste 1
Hartford CT 06103-1837

or call **860-297-5687**.

TTY, TDD, and Text Telephone users only may transmit inquiries anytime by calling 860-297-4911. Taxpayers may also call 711 for relay services. A taxpayer must tell the 711 operator the number he or she wishes to call. The relay operator will dial it and then communicate using a TTY with the taxpayer.

EXTENDED TO MAY 17, 2021

Form **990**
(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning **JUL 1, 2019** and ending **JUN 30, 2020**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: **COLUMBUS HOUSE, INC**
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
586 ELLA T GRASSO BOULEVARD
 City or town, state or province, country, and ZIP or foreign postal code
NEW HAVEN, CT 06519

D Employer identification number: **22-2511873**

E Telephone number: **203-401-4400**

G Gross receipts \$: **14,450,410.**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (Insert no.) 4947(a)(1) or 527

J Website: **HTTP://WWW.COLUMBUSHOUSE.ORG/**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1982** **M** State of legal domicile: **CT**

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO SERVE PEOPLE WHO ARE HOMELESS, OR AT RISK OF BECOMING HOMELESS, BY PROVIDING SHELTER AND		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	16
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	258
	6 Total number of volunteers (estimate if necessary)	6	1000
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, line 39	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	11,288,323.	12,854,257.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	791,267.	1,008,047.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	14,531.	3,221.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,250,496.	14,441,171.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	132,302.	285,471.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	7,889,177.	9,121,897.
	16 a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	349,757.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,173,700.	4,379,487.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	12,195,179.	13,786,855.	
19 Revenue less expenses. Subtract line 18 from line 12	55,317.	654,316.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	13,895,615.	16,040,050.
	22 Net assets or fund balances. Subtract line 21 from line 20	5,902,886.	7,198,403.
		7,992,729.	8,841,647.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: **MARGARET MIDDLETON, CHIEF EXECUTIVE OFFICER**
 Date: _____

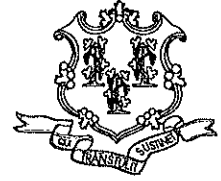
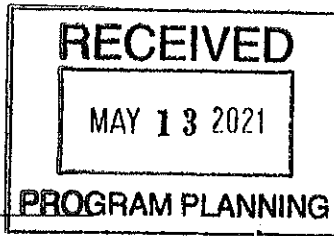
Preparer Use Only

Print/Type preparer's name: **MARY KAY CURTISS** Preparer's signature: **MARY KAY CURTISS** Date: **12/18/20** Check if self-employed PTIN: **P01551484**

Firm's name: **BLUM, SHAPIRO & COMPANY, P.C., CPA'S** Firm's EIN: **06-1009205**

Firm's address: **29 S. MAIN STREET, P.O. BOX 272000 WEST HARTFORD, CT 06127-2000** Phone no. **203 944-2100**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No



Municipality: Wallingford, CT

Form NAA-01

2021 Connecticut Neighborhood Assistance Act (NAA) Program Proposal

This form **must** be completed and submitted to your municipality for approval. All items **must** be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. **Do not submit this form directly to the Department of Revenue Services.**

Part I — General Information

Name of tax exempt organization/municipal agency: _____
Gaylord Hospital, Inc.

Address: 50 Gaylord Farm Road, Wallingford, CT 06492

Federal Employer Identification Number: 06-0646649

Program title: Energy Efficiency Updates

Name of contact person: Cynthia Bartholomew

Telephone number: (203) 284-2844

Email address: cbartholomew@gaylord.org

Total NAA funding requested (\$250 minimum, \$150,000 maximum): \$ 150,000.00

Is your organization required to file federal Form 990 or 990EZ, Return of Organization Exempt from Income Tax?

Yes

No

If **Yes**, attach a copy of the **first page** of your most recent return.

If **No**, attach a copy of your determination letter from the U.S. Treasury Department, Internal Revenue Service.

Part II — Program Information

Check the appropriate description of your program:

100% credit percentage

- Energy conservation; or
 Comprehensive college access loan forgiveness (see Conn. Gen. Stat. § 12-635(3)).

60% credit percentage

- Job training/education for unemployed persons aged 50 or over;
 Job training/education for persons with physical disabilities;
 Program serving low-income persons;
 Child care services;
 Establishment of a child day care facility;
 Open space acquisition fund; or
 Other (specify): _____

Description of program: _____

As a part of our 10 year campus renewal plan we have identified numerous projects that will decrease energy usage. We have plans to replace heating boilers, water heaters, exterior doors and patient wing windows in Lyman Building, and install central air in our outbuildings. As we complete patient room renovations on six patient units we continue to seek funding to install energy efficient windows and exterior doors as a part of the construction in order to save on demolition and removal costs.

Need for program: _____

Energy saving improvements at a healthcare institution benefits not only patients but society as a whole. As Gaylord renovates patient wings we will update energy wasting systems and equipment. We work to attract donations from individual and corporate donors interested in environmental impacts and carbon footprint reduction. By completing these updates during patient wing renovations, we will be saving on demolition and construction costs, avoiding further disruption of patient care, and improving energy efficiency. This in turn allows us to reinvest those dollars in rehabilitation technology, workforce development and patient care.

Neighborhood area to be served: _____

Wallingford, Connecticut

Plan to implement the program: _____

We solicit donations from individuals, companies, foundations and local businesses to support Gaylord's programs and facilities. On a campus with aging infrastructure, energy upgrades can make a major difference in patient comfort and care. We can apply donor funding to this energy efficiency program as a part of our much larger Think Possible multi-year campaign to refresh our campus, become a teaching hospital with doctor residencies and to expand our rehabilitation technology, research and innovation.

Timetable:

Program start date: 10/1/2021

Program completion date: 9/30/2022

The program completion date must not be more than two years from the program start date. A certified post-project review is due to the municipality overseeing implementation no later than three months after program completion date for all projects receiving \$25,000 or more in NAA funding.

Part III — Financial Information

Program Budget:

Complete in full. Expenditures must equal or exceed total funding.

Sources of Revenue:

NAA funds requested	<u>\$150,000.00</u>
Other funding sources - itemized sources:	
a) <u>Business & Corporate Donations</u>	<u>\$20,000.00</u>
b) <u>Foundations & Grants</u>	<u>\$30,000.00</u>
c) <u>Funds from Operating</u>	<u>\$250,000.00</u>
d) _____	_____

Total Funding: \$450,000.00

Proposed Program Expenditures:

Direct operating expenses - itemized description:	
a) <u>Replacement of 6 heating boilers</u>	<u>\$250,000.00</u>
b) <u>Air conditioning updates & installations</u>	<u>\$45,000.00</u>
c) <u>Water heater replacements</u>	<u>\$185,000.00</u>
d) <u>Door & window replacements -Lyman & Jackson</u>	<u>\$150,000.00</u>

Administrative expenses - itemized description:	
a) <u>Development Office-Fundraising & Grant Expenses</u>	<u>\$5,000.00</u>
b) <u>Facilities Office Staff -Project Coordination</u>	<u>\$88,800.00</u>
c) _____	_____
d) _____	_____

Total Proposed Expenditures: \$723,800.00

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: _____ _____
Mailing address: _____ _____
Name of municipal liaison: _____
Telephone number: _____
Fax number: _____
Email address: _____

<p style="text-align: center;">Post-Project Review</p> <p style="text-align: center;">Is a post-project review required for this proposal?</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center;">If Yes, date post-project review due:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Date</p>
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PUBLIC DISCLOSURE COPY

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2018

- ▶ Do not enter social security numbers on this form as it may be made public.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2018 calendar year, or tax year beginning 10/01, 2018, and ending 09/30, 2019

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: GAYLORD HOSPITAL, INC.
 Doing business as:
 Number and street (or P.O. box if mail is not delivered to street address): P.O. BOX 400, GAYLORD FARM ROAD
 Room/suite:
 City or town, state or province, country, and ZIP or foreign postal code: WALLINGFORD, CT 06492

D Employer identification number: 06-0646649

E Telephone number: (203) 284-2800

F Name and address of principal officer: SONJA LABARBERA
 SAME AS C ABOVE

G Gross receipts \$: 90,536,899

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: WWW.GAYLORD.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1991

M State of legal domicile: CT

H(c) Group exemption number ▶

Part I Summary			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO ENHANCE HEALTH, MAXIMIZE FUNCTION AND TRANSFORM LIVES.	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	25
	4	Number of independent voting members of the governing body (Part VI, line 1b)	23
	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	1,072
	6	Total number of volunteers (estimate if necessary)	88
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0
7b	Net unrelated business taxable income from Form 990-T, line 38	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year: 3,744,371 Current Year: 9,753,223
	9	Program service revenue (Part VIII, line 2g)	78,885,555 / 79,449,377
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	899,841 / 546,636
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	419,948 / 573,114
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	83,949,715 / 90,322,350
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0 / 0
	14	Benefits paid to or for members (Part IX, column (A), line 4)	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	54,300,069 / 54,582,803
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	111,230 / 266,050
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 999,127	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	24,262,725 / 25,485,086
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	78,674,024 / 80,333,939
19	Revenue less expenses. Subtract line 18 from line 12	5,275,691 / 9,988,411	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year: 94,415,515 End of Year: 103,327,659
	21	Total liabilities (Part X, line 26)	38,054,655 / 41,551,530
	22	Net assets or fund balances. Subtract line 21 from line 20	56,360,860 / 61,776,129

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: _____ Date: _____

Type or print name and title: ARTHUR TEDESCO, VICE PRESIDENT AND CFO

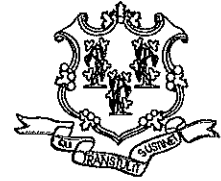
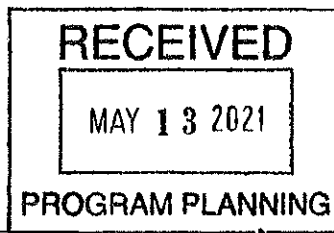
Paid Preparer Use Only

Print/Type preparer's name: KRISTIN ANDERSON
 Preparer's signature: *Kristin M. Anderson*
 Date: 6/30/20
 Check if self-employed
 PTIN: P01231300

Firm's name: CROWE LLP
 Firm's EIN: 35-0921680
 Firm's address: 175 POWDER FOREST DRIVE, SIMSBURY, CT 06089
 Phone no.: (860) 678-9200

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2018)



Municipality: Wallingford, CT

Form NAA-01

2021 Connecticut Neighborhood Assistance Act (NAA) Program Proposal

This form **must** be completed and submitted to your municipality for approval. All items **must** be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. **Do not submit this form directly to the Department of Revenue Services.**

Part I — General Information

Name of tax exempt organization/municipal agency: _____
Gaylord Hospital, Inc.

Address: 50 Gaylord Farm Road, Wallingford, CT 06492

Federal Employer Identification Number: 06-0646649

Program title: Patient Programs

Name of contact person: Cynthia Bartholomew

Telephone number: (203) 284-2844

Email address: cbartholomew@gaylord.org

Total NAA funding requested (\$250 minimum, \$150,000 maximum): \$ 150,000.00

Is your organization required to file federal Form 990 or 990EZ, Return of Organization Exempt from Income Tax?

Yes

No

If **Yes**, attach a copy of the **first page** of your most recent return.

If **No**, attach a copy of your determination letter from the U.S. Treasury Department, Internal Revenue Service.

Part II — Program Information

Check the appropriate description of your program:

100% credit percentage

- Energy conservation; **or**
 Comprehensive college access loan forgiveness (see Conn. Gen. Stat. § 12-635(3)).

60% credit percentage

- Job training/education for unemployed persons aged 50 or over;
 Job training/education for persons with physical disabilities;
 Program serving low-income persons;
 Child care services;
 Establishment of a child day care facility;
 Open space acquisition fund; **or**
 Other (specify): Healthcare and rehabilitation fir critically ill and injured patients

Description of program: _____

To augment income needed to provide essential patient programs and services which go beyond ordinary care; improving our patient's long-term recovery and return to the community. Please see attached page explaining the key aspects of rehabilitation services for which we are requesting funding: Patient and Indigent Patient Care, Therapeutic Recreation and Adaptive Sports, Clinical and Community Education and Technology. We provide inpatient and outpatient specialty reha bfor persons who have experienced a life-altering event such as spinal cord injury, brain injury, stroke and COVID-19.

Need for program: _____

The services of Gaylord improve independence, quality of life, and community reintegration for people learning to live with a new disability resulting from illness or injury. By helping patients reach the best possible outcomes this in turn decreases healthcare costs, worker injury costs and loss of potential from CT citizens. Gaylord is the only healthcare system in CT that has both Inpatient and Outpatient accreditation from CARF, as well as three CARF sub-specialty accreditations: Spinal Cord Injury, Brain Injury and Stroke. We serve nearly 1,500 inpatients and 8,000 outpatients per year with expert rehab to return peoples' maximum function.

Neighborhood area to be served: _____

All eight counties of Connecticut.

Plan to implement the program: _____

To continue to support our patients and their families we reach out in multiple ways to encourage donations from donors, companies, foundations and local businesses to support patient care, staff education, aftercare programs and support groups, equipment and technology, and adaptive sports and therapeutic recreation. All of these programs are a part of our much larger Think Possible multi-year campaign to become a teaching hospital with doctor residencies and a rehabilitation research and innovation lab.

Timetable:

Program start date: 10/1/2021

Program completion date: 9/30/2022

The program completion date must not be more than two years from the program start date. A certified post-project review is due to the municipality overseeing implementation no later than three months after program completion date for all projects receiving \$25,000 or more in NAA funding.

Part III — Financial Information

Program Budget:

Complete in full. Expenditures must equal or exceed total funding.

Sources of Revenue:

NAA funds requested	<u>\$150,000.00</u>
Other funding sources - itemized sources:	
a) <u>Contributions, Grants & Other Revenue</u>	<u>\$3,000,000.00</u>
b) <u>Program service revenue</u>	<u>\$90,406,000.00</u>
c) _____	_____
d) _____	_____

Total Funding: \$93,556,000.00

Proposed Program Expenditures:

Direct operating expenses - itemized description:	
a) <u>Patient & Indigent Care Program Services</u>	<u>\$74,700,000.00</u>
b) <u>Adaptive Sports & Therapeutic Recreation</u>	<u>\$335,000.00</u>
c) <u>Clinical & Community Education</u>	<u>\$200,000.00</u>
d) <u>Healthcare Technology & Equipment</u>	<u>\$1,000,000.00</u>

Administrative expenses - itemized description:	
a) <u>Development & Marketing Expenses</u>	<u>\$1,300,000.00</u>
b) <u>Hospital Indirect & Admin Costs</u>	<u>\$13,185,000.00</u>
c) <u>Depreciation & Amortization</u>	<u>\$4,100,000.00</u>
d) _____	_____

Total Proposed Expenditures: \$94,820,000.00

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: _____ _____
Mailing address: _____ _____
Name of municipal liaison: _____
Telephone number: _____
Fax number: _____
Email address: _____

<p style="text-align: center;">Post-Project Review</p> <p style="text-align: center;">Is a post-project review required for this proposal?</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center;">If Yes, date post-project review due:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Date</p>

PUBLIC DISCLOSURE COPY

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2018

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2018 calendar year, or tax year beginning 10/01, 2018, and ending 09/30, 2019

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: GAYLORD HOSPITAL, INC.
 Doing business as: _____
 Number and street (or P.O. box if mail is not delivered to street address): P.O. BOX 400, GAYLORD FARM ROAD
 Room/suite: _____
 City or town, state or province, country, and ZIP or foreign postal code: WALLINGFORD, CT 06492

D Employer identification number: 06-0646649
E Telephone number: (203) 284-2800
G Gross receipts \$: 90,536,899

F Name and address of principal officer: SONJA LABARBERA
 SAME AS C ABOVE

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (Insert no.) 4947(a)(1) or 527

J Website: WWW.GAYLORD.ORG **H(c)** Group exemption number ▶

K Form of organization: Corporation Trust Association Other ▶ **L** Year of formation: 1991 **M** State of legal domicile: CT

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO ENHANCE HEALTH, MAXIMIZE FUNCTION AND TRANSFORM LIVES.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	25
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	23
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	1,072
6 Total number of volunteers (estimate if necessary)	6	88
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 38	7b	0

		Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)		3,744,371	9,753,223
9 Program service revenue (Part VIII, line 2g)		78,885,555	79,449,377
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		899,841	546,636
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		419,948	573,114
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		83,949,715	90,322,350

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0	0
14 Benefits paid to or for members (Part IX, column (A), line 4)			
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		54,300,069	54,582,803
16a Professional fundraising fees (Part IX, column (A), line 11e)		111,230	266,050
b Total fundraising expenses (Part IX, column (D), line 25) ▶	999,127		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		24,262,725	25,485,086
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		78,674,024	80,333,939
19 Revenue less expenses. Subtract line 18 from line 12		5,275,691	9,988,411

		Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)		94,415,515	103,327,659
21 Total liabilities (Part X, line 26)		38,054,655	41,551,530
22 Net assets or fund balances. Subtract line 21 from line 20		56,360,860	61,776,129

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: _____ Date: _____
 Type or print name and title: ARTHUR TEDESCO, VICE PRESIDENT AND CFO

Paid Preparer Use Only

Print/Type preparer's name: KRISTIN ANDERSON
 Preparer's signature: *Kristin M. Anderson*
 Date: 6/30/20
 Check if self-employed
 PTIN: P01231300
 Firm's name: CROWE LLP
 Firm's EIN: 35-0921680
 Firm's address: 175 POWDER FOREST DRIVE, SIMSBURY, CT 06089
 Phone no.: (860) 678-9200

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2018)



**Gaylord Hospital/Gaylord Specialty Healthcare
2021 Connecticut Neighborhood Assistance Act Program Proposal -
Patient Programs and Services Notes**

Our application is based on the operating expenses of key areas within the broad spectrum of Patient Programs and Services offered at Gaylord, i.e. *Patient & Indigent Patient Care, Adaptive Sports (Gaylord Sports Assn.) & Therapeutic Recreation, Clinical & Community Education, and Technology & Equipment*. These programs overlap and complement each other to provide the best possible patient experiences and medical outcomes. We include a number of options within the spectrum of support so that businesses can choose to target their donation under the NAA program. It is our fundraising goal to reach \$150,000 or more in donations.

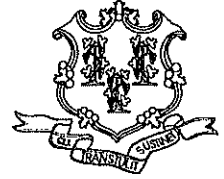
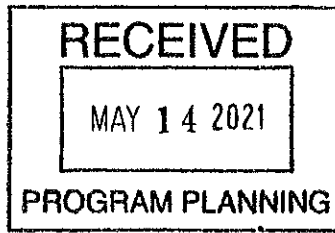
Patient & Indigent Patient Care: Gaylord is known for its quality patient care for complex medical conditions and rehabilitation services. Gaylord is highly accredited by both CARF and Joint Commission. We accept all types of healthcare insurance including Medicaid. We provide indigent patient care through the Free Bed Fund, our fundraising efforts and targeted donation requests. We are able to fill partially the insurance reimbursement gap through philanthropy. The need grows continually. Our modest Special Needs fund helps patients pay for medically necessary equipment, supplies and home needs that insurance will not cover. This allows patients to return home more quickly and decreases healthcare costs. In 2020, Gaylord absorbed a \$3,924,300 loss of reimbursement for care. This was a 1.4% increase in losses combined with the 6.3% increase in the previous year, totaling 7.7% in the past two years.

Adaptive Sports (Gaylord Sports Assn.) & Therapeutic Recreation: Gaylord provides adaptive sports programs for community members, including veterans, with a physical or visual disability. Sports and activities include golf, waterskiing, bicycling, wheelchair basketball and rugby to name a few. For inpatients, our certified therapeutic recreation staff conduct art, horticulture and crafts programs, which help with the rehabilitation process, socialization skills and improvement of physical function. Through a grant, we provide Music Therapy for patients, with targeted rehab for stroke patients. Insurance does not cover adaptive sports, therapeutic recreation, or music therapy despite their essential roles in recovery of function. These programs are not included in hospital fees for care. Gaylord Sports Association serves 250 former patients, general community members, and veterans each year. Therapeutic recreation serves 1,450 inpatients each year and music therapy serves a combination of 400 inpatients and outpatients. Gaylord's operating fund supports wages for three staff members, fund raising events and grants support the fourth staff person, operating costs for the three programs and all adaptive sports and leisure equipment purchases.

Clinical & Community Education: Our education department provides ongoing education and certificate programs for our nursing technicians, nurses, doctors and clinicians. Continuing medical education for doctors provides information on treatment techniques and meets standards for protocols and licensing requirements. There are no reimbursement sources for this ongoing education, but it is key to our ability to provide the best care possible for our patients. Our professional staff teaches and lectures on various medical and clinical topics throughout the community and nation. Gaylord is active member of ThinkFirst® – a national program designed to educate young people about brain and spinal cord safety and making responsible decisions to avoid life-altering events. More than 2,000 Wallingford area students participate in ThinkFirst presentations each year.

Healthcare Technology & Equipment: To provide patients with the very best care, Gaylord must continually purchase advanced technology for rehabilitation and medical care. Assistive technology includes full wearable robotic equipment, computerized therapeutic options, electrical muscle stimulation, and ventilator technology. Technology greatly increases the patient's ability to return to their maximum function and independence. Philanthropy plays a large roll in filling this need. Through donations, we have added Kinesic equipment that simulates various walking terrains to help patients regain balance and mobility; and ZeroG for patients who are unstable on their feet allowing them to walk, bend and climb stairs without fear of falling. Donations purchased AlterG treadmills like those used at NASA that allow neurologic and orthopedic patients to walk or run in an anti-gravity environment to recover faster with less pain. Robotic equipment assists patients in making major breakthroughs in their progress. One piece of equipment can cost \$250,000.

If you have additional questions or concerns, please do not hesitate to contact me at (203) 284-2844.
Cynthia Bartholomew, Grant Writer. cbartholomew@gaylord.org



Municipality: Wallingford

Form NAA-01
2021 Connecticut Neighborhood Assistance Act (NAA)
Program Proposal

This form **must** be completed and submitted to your municipality for approval. All items **must** be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. **Do not submit this form directly to the Department of Revenue Services.**

Part I — General Information

Name of tax exempt organization/municipal agency: _____
Holy Trinity Roman Catholic Corporation (Holy Trinity Church)

Address: 68 North Colony Street, Wallingford CT 06492

Federal Employer Identification Number: 06-0664186

Program title: Energy Efficient Windows

Name of contact person: Rev. Andres Mendoza Floyd

Telephone number: (203) 269-8791

Email address: church@mhtwallingford.org

Total NAA funding requested (\$250 minimum, \$150,000 maximum): \$ 150,000.00

Is your organization required to file federal Form 990 or 990EZ, Return of Organization Exempt from Income Tax?

Yes No

If **Yes**, attach a copy of the **first page** of your most recent return.
If **No**, attach a copy of your determination letter from the U.S. Treasury Department, Internal Revenue Service.

Part II — Program Information

Check the appropriate description of your program:

100% credit percentage

- Energy conservation; **or**
 Comprehensive college access loan forgiveness (see Conn. Gen. Stat. § 12-635(3)).

60% credit percentage

- Job training/education for unemployed persons aged 50 or over;
 Job training/education for persons with physical disabilities;
 Program serving low-income persons;
 Child care services;
 Establishment of a child day care facility;
 Open space acquisition fund; **or**
 Other (specify): _____

Description of program: _____

The building at 84 North Colony Street was constructed in 1887. The windows and storm windows are very old. During the winter, heat escapes through the windows. During the summer, air conditioning escapes through the windows. Specifically, windows #4, #5, #6, and #25, #26, and #29 are very much in need of repair. The repair work would consist of re-leading the windows themselves, epoxying and painting their storm windows, and replacing the plexiglass in the storm windows. This would substantially improve the windows by making them much more "weather-tight". With so much heat and air conditioning currently leaking out the windows, this project will make the entire building much more energy efficient and energy conserving.

Need for program: _____

The building services approximately 15,000 people. The windows which are the subject of this project are one of the main sources of heating/air-conditioning/energy loss in the building. If the windows could be made substantially more weather tight by these project improvements, the building would lose substantially less energy escaping from the building, and the costs to heat and air-condition the building would substantially decrease.

Neighborhood area to be served: _____

As it is a building where the Wallingford community gathers, servicing an estimated 15,000 people, the entire town of Wallingford would benefit from this project. Specifically, the building is in the general neighborhood of North Colony Street, Hall Avenue, Church Street, and Center Street.

Plan to implement the program: _____

An assessment of the windows and storm windows was done by Lyn Hovey in October 2019 and is contained in an October 27, 2019 document written by Mr. Hovey. Mr. Hovey described windows #4, #5, #6, #25, #26, and #29 as being among the windows most needy of work in the building. In keeping with that assessment, these specific windows would be attended to now, and other, less-needy windows would be attended to at a later date (and are therefore outside the scope of this application). Once the project is approved by DRS and donations secured, Mr. Hovey would come on site for a period of several months to do all of the work. Depending upon weather conditions, the work would take between 3 and 6 months.

Timetable:

Program start date: October 1, 2021

Program completion date: June 1 2022

The program completion date must not be more than two years from the program start date. A certified post-project review is due to the municipality overseeing implementation no later than three months after program completion date for all projects receiving \$25,000 or more in NAA funding.

Part III — Financial Information

Program Budget:

Complete in full. Expenditures must equal or exceed total funding.

Sources of Revenue:

NAA funds requested	<u>\$150,000.00</u>
Other funding sources - itemized sources:	
a) _____	_____
b) _____	_____
c) _____	_____
d) _____	_____

Total Funding: \$150,000.00

Proposed Program Expenditures:

Direct operating expenses - itemized description:	
a) <u>Work on windows #4, #5, #6</u>	<u>\$48,800.00</u>
b) <u>Work on windows #25, #26, #29</u>	<u>\$101,200.00</u>
c) _____	_____
d) _____	_____
Administrative expenses - itemized description:	
a) _____	_____
b) _____	_____
c) _____	_____
d) _____	_____

Total Proposed Expenditures: \$150,000.00

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: _____

Mailing address: _____

Name of municipal liaison: _____

Telephone number: _____

Fax number: _____

Email address: _____

Post-Project Review

Is a post-project review required for this proposal?

Yes No

If **Yes**, date post-project review due:

Date

2021 Connecticut Neighborhood Assistance Act (NAA) Program Proposal Instructions

Complete all items on **Form NAA-01**, *2021 Connecticut Neighborhood Assistance Act (NAA) Program Proposal*. Incomplete applications will **not** be accepted. For where to direct inquiries, see *Contact Information* below.

Part I – General Information

Enter the name of the tax exempt organization or municipal agency, address, Federal Employer Identification Number, and email address.

Program Title: Assign a unique program title to each program for which your organization is making an application.

Federal Form 990: Attach a copy of the first page of your organization's most recent federal Form 990 or Form 990EZ. If your organization is not required to file either Form 990 or Form 990EZ, attach a copy of the determination letter from the Internal Revenue Service.

Part II – Program Information

Description of Program: Describe the program, including information about how the program will operate, its benefit to the community, how recipients will be selected, and any measures used to determine the program's impact on the community.

Need for Program: Demonstrate a need for this program. For example, provide relevant statistics.

Neighborhood Area to Be Served: Describe the neighborhood or municipality this program will serve.

Plan to implement the program: Describe how the program will operate. Identify other persons or organizations involved in the administration of the program.

Timetable: Indicate the starting and completion dates of the program. The program completion date must not be more than two years from the program start date.

Part III – Financial Information

Each program proposal must include a program budget that includes all sources of funding and all anticipated expenditures. The information provided in the budget may be used during a post-project audit.

Sources of Revenue: The budget must include the requested NAA funding and any other anticipated revenue sources.

NAA Funding Requested: Indicate the total amount your organization is requesting for its program.

This amount may not exceed the total proposed expenditures. Please note that the minimum NAA funding is \$250, with a maximum funding of \$150,000 per organization or agency per year.

Other Funding Sources: Provide a detailed description(s) and the amount(s) of all funding sources.

Proposed Program Expenditures: The budget must include a detailed description and the amount of all direct operating and administrative expenditures. **Expenditures must equal or exceed total funding.**

Direct Operating Expenses: Expenses include materials, equipment, wages, salaries, tuition fees, sub-contracting services, and any other expenses needed to administer the program.

Part IV – Municipal Information

This part is to be completed by the municipal agency overseeing implementation of the program.

Municipal Liaison: The municipality must designate an individual to serve as a liaison with DRS for all NAA matters.

Post-Project Review: Any program receiving \$25,000 or more in NAA funding is required to provide a post-project review, prepared by a certified public accounting firm, to the municipality overseeing the program. This review must be submitted to the municipality no later than three months after the program completion date.

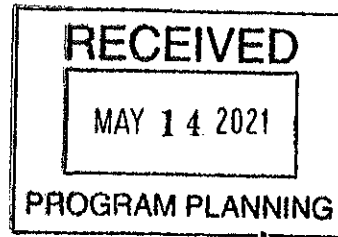
Contact Information

Direct inquiries to:

Department of Revenue Services (DRS)
Neighborhood Assistance Act Program
Attn: Research Unit
450 Columbus Blvd Ste 1
Hartford CT 06103-1837

or call **860-297-5687**.

TTY, TDD, and Text Telephone users only may transmit inquiries anytime by calling 860-297-4911. Taxpayers may also call 711 for relay services. A taxpayer must tell the 711 operator the number he or she wishes to call. The relay operator will dial it and then communicate using a TTY with the taxpayer.



Municipality: Wallingford

Form NAA-01
2021 Connecticut Neighborhood Assistance Act (NAA)
Program Proposal

This form **must** be completed and submitted to your municipality for approval. All items **must** be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. **Do not submit this form directly to the Department of Revenue Services.**

Part I — General Information

Name of tax exempt organization/municipal agency: _____
Ulbrich Boys & Girls Club

Address: 72 Grand Street, Wallingford, CT 06492

Federal Employer Identification Number: 06-0801966

Program title: Academic Success, Mentoring and Youth Development

Name of contact person: Carlos Collazo

Telephone number: (203) 269-7535

Email address: ccollazo@ulbrichbgc.org

Total NAA funding requested (\$250 minimum, \$150,000 maximum): \$ 150,000.00

Is your organization required to file federal Form 990 or 990EZ, Return of Organization Exempt from Income Tax?

Yes

No

If **Yes**, attach a copy of the **first page** of your most recent return.

If **No**, attach a copy of your determination letter from the U.S. Treasury Department, Internal Revenue Service.

Part II — Program Information

Check the appropriate description of your program:

100% credit percentage

- Energy conservation; **or**
 Comprehensive college access loan forgiveness (see Conn. Gen. Stat. § 12-635(3)).

60% credit percentage

- Job training/education for unemployed persons aged 50 or over;
 Job training/education for persons with physical disabilities;
 Program serving low-income persons;
 Child care services;
 Establishment of a child day care facility;
 Open space acquisition fund; **or**
 Other (specify): _____

Description of program: _____

The Ulbrich Boys & Girls Club provides high-yield activities, designed to provide youth with fun experiences that are hands-on, interactive and intentionally develop critical thinking or other skills, including but not limited to Power Hour, a program that drives academic success and structured learning.

Need for program: _____

41.7% of our Wallingford club members (town average 4.2%) live at or below the poverty level. Free or reduced-priced meals have been on the rise in our town from 20.8% to 37% in 2019-2020. Chronic absenteeism has been trending upward from 5.1% in 2016 to 8.7% in 2020 and Disengaged Youth has risen from 3.91% in 2015 to 4.38% in 2018. With the pandemic over the last 14 months, we still have not seen the latest numbers but we can guess they have risen greatly.

Neighborhood area to be served: _____

We would look to expand our reach to youth near the Club.

Plan to implement the program: _____

This investment will allow us to hire a lead youth development professional who will help lead our mentoring program. This person will be responsible for recruiting and training the mentoring team along with the volunteers/mentors.

Timetable:

Program start date: 01/01/2021

Program completion date: 12/31/2019

The program completion date must not be more than two years from the program start date. A certified post-project review is due to the municipality overseeing implementation no later than three months after program completion date for all projects receiving \$25,000 or more in NAA funding.

Part III — Financial Information

Program Budget:

Complete in full. Expenditures must equal or exceed total funding.

Sources of Revenue:

NAA funds requested	<u>\$150,000.00</u>
Other funding sources - itemized sources:	
a) <u>Program Income</u>	<u>\$135,000.00</u>
b) <u>Grants</u>	<u>\$80,000.00</u>
c) <u>Membership Dues</u>	<u>\$40,000.00</u>
d) <u>Corporate & Individual Donations</u>	<u>\$225,000.00</u>

Total Funding: \$480,000.00

Proposed Program Expenditures:

Direct operating expenses - itemized description:	
a) <u>Wages and Benefits</u>	<u>\$253,000.00</u>
b) <u>Occupancy</u>	<u>\$54,000.00</u>
c) <u>Program Supplies</u>	<u>\$125,000.00</u>
d) <u>Misc Expenses</u>	<u>\$24,500.00</u>

Administrative expenses - itemized description:	
a) <u>Professional Fees</u>	<u>\$8,500.00</u>
b) <u>Payments to Affiliated Organizations</u>	<u>\$15,000.00</u>
c) _____	_____
d) _____	_____

Total Proposed Expenditures: \$480,000.00

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: _____ Town of Wallingford
Mailing address: _____ 45 South Main Street, Wallingford, CT 06492
Name of municipal liaison: <u>William W. Dickinson, Jr. , Mayor</u>
Telephone number: <u>203-294-2070</u>
Fax number: <u>203-294-2073</u>
Email address: <u>towngov@wallingfordct.gov</u>

<p align="center">Post-Project Review</p> <p align="center">Is a post-project review required for this proposal?</p> <p align="center"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p align="center">If Yes, date post-project review due:</p> <p align="center"><u>03/31/2022</u></p> <p align="center">Date</p>

Form **990**
 (Rev. January 2020)
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
 Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2019
 Open to Public Inspection

A For the 2019 calendar year, or tax year beginning **07/01/19**, and ending **06/30/20**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
ULBRICH BOYS AND GIRLS CLUB, INC.
 Doing business as
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
72 GRAND STREET
 City or town, state or province, country, and ZIP or foreign postal code
WALLINGFORD CT 06492

D Employer identification number
06-0801966

E Telephone number
203-269-7535

F Name and address of principal officer:
CARLOS COLLAZO
30 CRANSTON STREET
NEW HAVEN CT 06513

G Gross receipts \$ **773,638**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **BGCWALLINGFORD.ORG**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1963** **M** State of legal domicile: **CT**

H(c) Group exemption number

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: PROMOTE POSITIVE YOUTH DEVELOPMENT			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	18	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	18	
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	25	
	6	Total number of volunteers (estimate if necessary)	60-70	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0	
	7b	Net unrelated business taxable income from Form 990-T, line 39	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year: 222,177	Current Year: 315,247
	9	Program service revenue (Part VIII, line 2g)	182,544	132,237
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,074	3,109
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	79,787	51,858
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	488,582	502,451
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
14		Benefits paid to or for members (Part IX, column (A), line 4)		0
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	257,567	342,876
16a		Professional fundraising fees (Part IX, column (A), line 11e)		0
16b		Total fundraising expenses (Part IX, column (D), line 25)	11,057	
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	222,201	254,381
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	479,768	597,257
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	8,814	-94,806
	20	Total assets (Part X, line 16)	Beginning of Current Year: 570,917	End of Year: 579,279
	21	Total liabilities (Part X, line 26)	25,704	135,759
	22	Net assets or fund balances. Subtract line 21 from line 20	545,213	443,520

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

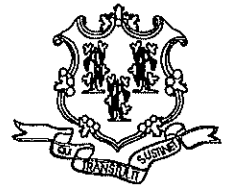
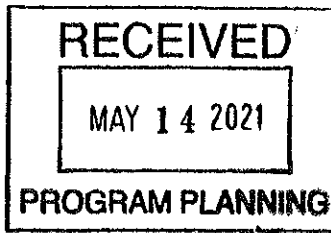
Signature of officer: **JUNE VECELLIO-LAZAROFF** Date: _____
 Type or print name and title: **TREASURER**

Paid Preparer Use Only

Print/Type preparer's name: **MARY F. MASCOLA** Preparer's signature: *Mary F Mascola CPA* Date: **04/29/21** Check if PTIN self-employed **P00489248**

Firm's name: **DAVIS, MASCOLA & PHILLIPS, LLC** Firm's EIN: **41-2072419**
 Firm's address: **85 BARNES RD STE 207 WALLINGFORD, CT 06492-2576** Phone no.: **203-265-0488**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No



Municipality: Town of Wallingford

Form NAA-01
2021 Connecticut Neighborhood Assistance Act (NAA)
Program Proposal

This form **must** be completed and submitted to your municipality for approval. All items **must** be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. **Do not submit this form directly to the Department of Revenue Services.**

Part I — General Information

Name of tax exempt organization/municipal agency: _____

Young Mens Christian Association of Wallingford, Inc/DBA Wallingford Family YMCA

Address: 81 South Elm Street, Wallingford, CT. 06492

Federal Employer Identification Number: 06-0646987

Program title: YMCA Healthy Communities Campaign

Name of contact person: Sean Doherty, Executive Director

Telephone number: (203) 269-4497

Email address: sdoherty@wallingfordymca.org

Total NAA funding requested (\$250 minimum, \$150,000 maximum): \$ 150,000.00

Is your organization required to file federal Form 990 or 990EZ, Return of Organization Exempt from Income Tax?

Yes No

If **Yes**, attach a copy of the **first page** of your most recent return.

If **No**, attach a copy of your determination letter from the U.S. Treasury Department, Internal Revenue Service.

Part II — Program Information

Check the appropriate description of your program:

100% credit percentage

- Energy conservation; **or**
 Comprehensive college access loan forgiveness (see Conn. Gen. Stat. § 12-635(3)).

60% credit percentage

- Job training/education for unemployed persons aged 50 or over;
 Job training/education for persons with physical disabilities;
 Program serving low-income persons;
 Child care services;
 Establishment of a child day care facility;
 Open space acquisition fund; **or**
 Other (specify): Capital facility renovation and expansion project

Description of program: _____

The proposed renovations and expansions will create a modern, vibrant, gathering place for all; providing wellness, recreation, educational opportunities and chronic disease prevention for those who live and work in Wallingford and the surrounding communities. We have phased construction and fundraising plans that will allow us to retain, expand and renovate both branches, while being fiscally responsible ensuring strong YMCA operations.

Need for program: _____

Leading up to the COVID pandemic, the YMCA had experienced significant growth, especially serving those with low to moderate income. The pandemic has exasperated that need. The YMCA is also responding to learning loss from the pandemic, the epidemic of childhood obesity, diabetes, mental health, cardiac rehab and the needs of cancer survivors by designing innovative programming. As the YMCA continues to be a safe-haven for teens and youth, our largest growing population has been our active older adults who have been impacted by isolation from this pandemic.

Neighborhood area to be served: _____

Greater Wallingford community, also including the communities of Meriden, North Haven, Durham, Cheshire, Hamden, Northfield, Middlefield and New Haven.

Plan to implement the program: _____

The YMCA is currently in Phase 1 of the project which included the purchase of 8 North Turnpike Road and the installation of a new playscape at our 81 South Elm Street location. Renovations to our 67 year old Natatorium (pool room) have begun. The next phase of our project includes the Aquatics Center addition that will provide much needed pool amenities for the community. Based on fundraising that project would begin in 2022.

Timetable:

Program start date: 07/01/2021

Program completion date: 06/30/2023

The program completion date must not be more than two years from the program start date. A certified post-project review is due to the municipality overseeing implementation no later than three months after program completion date for all projects receiving \$25,000 or more in NAA funding.

Part III — Financial Information

Program Budget:

Complete in full. Expenditures must equal or exceed total funding.

Sources of Revenue:

NAA funds requested	<u>\$150,000.00</u>
Other funding sources - itemized sources:	
a) <u>Federal funding</u>	<u>\$1,000,000.00</u>
b) <u>State Funding/Bonding</u>	<u>\$1,000,000.00</u>
c) <u>Individual/Foundation giving</u>	<u>\$2,850,000.00</u>
d) <u>Corporate giving</u>	<u>\$1,250,000.00</u>
Total Funding:	<u>\$6,250,000.00</u>

Proposed Program Expenditures:

Direct operating expenses - itemized description:	
a) <u>Increase program space for childcare, youth and families</u>	<u>\$750,000.00</u>
b) <u>Construct a West Side Aquatics Center to address commu</u>	<u>\$5,000,000.00</u>
c) <u>Renovate and upgrade main facility/ADA accessibility</u>	<u>\$500,000.00</u>
d) _____	_____
Administrative expenses - itemized description:	
a) _____	_____
b) _____	_____
c) _____	_____
d) _____	_____
Total Proposed Expenditures:	<u>\$6,250,000.00</u>

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: _____ Town of Wallingford
Mailing address: _____ 45 South Elm Street, Wallingford, CT 06492
Name of municipal liaison: _____ Timothy Ryan/Stacey Hoppes
Telephone number: _____ 203-294-2060
Fax number: _____ 203-294-2073
Email address: _____ towngov@wallingfordct.gov

<p style="text-align: center;">Post-Project Review</p> <p style="text-align: center;">Is a post-project review required for this proposal?</p> <p style="text-align: center;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center;">If Yes, date post-project review due:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Date</p>

(Rev. January 2020)

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2019

Department of the Treasury
Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **2019**, and ending **20**

<p>B Check if applicable:</p> <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<p>C Name of organization YMCA OF WALLINGFORD INC</p> <p>Doing business as</p> <p>Number and street (or P.O. box if mail is not delivered to street address) Room/suite 31 SOUTH ELM STREET</p> <p>City or town, state or province, country, and ZIP or foreign postal code WALLINGFORD, CT 06492</p> <p>F Name and address of principal officer:</p>	<p>D Employer identification number 06-0646987</p> <p>E Telephone number (203) 269-4497</p> <p>G Gross receipts \$ 4,608,604</p> <p>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No if "No," attach a list. (see instructions)</p> <p>H(c) Group exemption number ▶</p>
<p>I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</p>		
<p>J Website: ▶ WALLINGFORDYMCA.ORG</p>		
<p>K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</p>		<p>L Year of formation: 1944 M State of legal domicile: CT</p>

Part I Summary

Activities & Governance	<p>1 Briefly describe the organization's mission or most significant activities: TO STRENGTHEN THE FOUNDATION OF THE COMMUNITY THROUGH PROGRAMS, SERVICES, AND RELATIONSHIPS THAT BUILD A HEALTHY SPIRIT, MIND AND BODY AND TO BUILD STRONG KIDS, STRONG FAMILIES AND STRONG COMMUNITIES.</p> <p>2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.</p>			
	<p>3 Number of voting members of the governing body (Part VI, line 1a)</p> <p>4 Number of independent voting members of the governing body (Part VI, line 1b)</p> <p>5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)</p> <p>6 Total number of volunteers (estimate if necessary)</p> <p>7a Total unrelated business revenue from Part VIII, column (C), line 12</p> <p>b Net unrelated business taxable income from Form 990-T, line 39</p>	<p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7a</p> <p>7b</p>	<p>18</p> <p>18</p> <p>346</p> <p>125</p> <p>0</p> <p>0</p>	
Revenue	<p>8 Contributions and grants (Part VIII, line 1h)</p> <p>9 Program service revenue (Part VIII, line 2g)</p> <p>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</p> <p>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</p> <p>12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</p>	<p>Prior Year</p> <p>213,850</p> <p>3,867,244</p> <p>338</p> <p>183,582</p> <p>4,265,014</p>	<p>Current Year</p> <p>331,577</p> <p>4,099,684</p> <p>2,228</p> <p>143,019</p> <p>4,576,508</p>	
Expenses	<p>13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)</p> <p>14 Benefits paid to or for members (Part IX, column (A), line 4)</p> <p>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</p> <p>16a Professional fundraising fees (Part IX, column (A), line 11e)</p> <p>b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0</p> <p>17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)</p> <p>18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)</p> <p>19 Revenue less expenses. Subtract line 18 from line 12</p>	<p>0</p> <p>0</p> <p>2,603,837</p> <p>0</p> <p>1,735,701</p> <p>4,339,538</p> <p>(74,524)</p>	<p>0</p> <p>0</p> <p>2,683,849</p> <p>0</p> <p>1,695,765</p> <p>4,379,614</p> <p>196,894</p>	
Net Assets or Fund Balances	<p>20 Total assets (Part X, line 16)</p> <p>21 Total liabilities (Part X, line 26)</p> <p>22 Net assets or fund balances. Subtract line 21 from line 20</p>	<p>Beginning of Current Year</p> <p>2,635,805</p> <p>1,322,817</p> <p>1,312,988</p>	<p>End of Year</p> <p>5,288,883</p> <p>3,778,932</p> <p>1,509,951</p>	

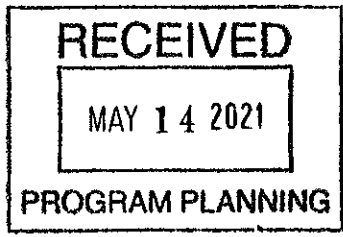
Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	<p>SEAN DOHERTY Signature of officer</p> <p>SEAN DOHERTY, EXECUTIVE DIRECTOR Type or print name and title</p>	<p>Date</p>
------------------	---	-------------

Paid Preparer Use Only	<p>Print/Type preparer's name JOHN J VISCONTI</p>	<p>Preparer's signature</p>	<p>Date 08-01-2020</p>	<p>Check <input type="checkbox"/> if self-employed</p>	<p>PTIN P00027180</p>	
	<p>Firm's name ▶ VISCONTI & ASSOCIATES, PC</p> <p>Firm's address ▶ 444 FOXON ROAD EAST HAVEN CT 06513</p>	<p>Firm's EIN ▶</p> <p>Phone no. 203-865-2927</p>				

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No



Municipality: Wallingford

Form NAA-01
2021 Connecticut Neighborhood Assistance Act (NAA)
Program Proposal

This form **must** be completed and submitted to your municipality for approval. All items **must** be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. **Do not submit this form directly to the Department of Revenue Services.**

Part I — General Information

Name of tax exempt organization/municipal agency: _____

Wallingford Historic Preservation Trust

Address:

54 North Elm St. Wallingford CT

Federal Employer Identification Number: 06-1326697

Program title: Johnson Mansion / Silver Museum

Name of contact person: Jerry Farrell JR

Telephone number: 203 804-9188

Email address: JerryFarrell68@gmail.com

Total NAA funding requested (\$250 minimum, \$150,000 maximum): \$ 150,000

Is your organization required to file federal Form 990 or 990EZ, Return of Organization Exempt from Income Tax?

Yes No

If **Yes**, attach a copy of the **first page** of your most recent return.

If **No**, attach a copy of your determination letter from the U.S. Treasury Department, Internal Revenue Service.

Part II — Program Information

Check the appropriate description of your program:

100% credit percentage

- Energy conservation; or
 Comprehensive college access loan forgiveness (see Conn. Gen Stat. § 12-635(3)).

60% credit percentage

- Job training/education for unemployed persons aged 50 or over;
 Job training/education for persons with physical disabilities;
 Program serving low-income persons;
 Child care services;
 Establishment of a child day care facility;
 Open space acquisition fund; or
 Other (specify): _____

Description of program: The Wallingford Historic Preservation Trust is the owner of the Johnson Mansion/Wallingford Silver Museum (1866). The Museum is furnished with Victorian furniture and displays all facets of Wallingford history including a silver collection representative of the Wallingford-Meriden silver economy during the 1840s-1980s. The Trust is currently evaluating energy saving measures which will also protect the contents of the building from UV rays and water intrusion and to reconstruct the porch roof which provides shading and cooling for the mansion. Areas of concern and recommendations have been provided by a 2017 Collections Assessment for Preservation (CAP) Report.

Need for program: The 2017 CAP Report identified general conditions which may adversely affect the preservation of this historic house and its associated collections along with proposed recommendations for their correction. There is major concern about the integrity of the front porch roof due to snow avalanches from the upper roof. This porch is not only an inherent part of the historic home but it provides shade and cooling for the inside of the mansion. Snow roof guards and gutter supports, along with rafter repairs, will assure the safety and security of this roof for future years of shading.

The CAP Report also identified an important energy saving measure by installing museum quality indoor storm window with a high UV rating to lower energy costs and protect the Victorian artifacts, furniture and paintings from UV damage. Currently a lot of the heating and air-conditioning escapes through our 39 windows and three doors. Cold air and flooding is also an issue in the basement area and the doors need evaluation for caulking, weather stripping or replacement.

Neighborhood area to be served: 153 South Main St. Wallingford, CT

Plan to implement the program: We will be in touch with the Indow Window Co. to measure and install the indoor storm windows for the energy savings and UV control. The door will be evaluated for caulking, weather stripping or replacement due to cracks and openings as well as the basement cistern which needs to be insulated to keep out cold air. A contractor will install the snow roof guards and gutter supports and an architect will be consulted to oversee the work needed to repair the porch issues so that it will continue to provide the shading and cooling for the mansion.

Timetable:

Program start date: Fall of 2021_____

Program completion Date: Fall of 2023_____

The program completion date must not be more than two years from the program start date. A certified post-project review is due to the municipality overseeing implementation no later than three months after program completion date for all projects receiving \$25,000 or more in NAA funding.

Part III – Financial Information

Program Budget: \$155,000
Complete in Full. Expenditures must equal or exceed total funding.

Sources of Revenue:

NAA Funds requested \$150,000

Other Funding sources – itemized sources:

a) Fundraising Events \$ 5,000

Total Funding \$155,000

Proposed Program Expenditures:

Direct operating expenses – itemized description:

a) 39 indoor storm windows, measured and installed \$40,000

b) 2 antique doors replaced; 1 regular door repaired \$15,000

c) Cap, vent, & seal 2 chimneys; install cricket to divert water \$10,000

d) Open and insulate the cistern area in the basement \$15,000

e) Structural work to restore the integrity of the porch roof and ceiling which provides shading and cooling for the house \$52,000

f) Contingency to be covered by our fundraising events \$ 5,000

Administrative Expenses – itemized description:

a) Architect/Assessor fees \$ 18,000

Total Proposed Expenditures \$155,000

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: _____ _____
Mailing address: _____ _____
Name of municipal liaison: _____
Telephone number: _____
Fax number: _____
Email address: _____

<p style="text-align: center;">Post-Project Review</p> <p style="text-align: center;">Is a post-project review required for this proposal?</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p style="text-align: center;">If Yes, date post-project review due:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Date</p>

2021 Connecticut Neighborhood Assistance Act (NAA) Program Proposal Instructions

Complete all items on **Form NAA-01, 2021 Connecticut Neighborhood Assistance Act (NAA) Program Proposal**. Incomplete applications will **not** be accepted. For where to direct inquiries, see *Contact Information* below.

Part I – General Information

Enter the name of the tax exempt organization or municipal agency, address, Federal Employer Identification Number, and email address.

Program Title: Assign a unique program title to each program for which your organization is making an application.

Federal Form 990: Attach a copy of the first page of your organization's most recent federal Form 990 or Form 990EZ. If your organization is not required to file either Form 990 or Form 990EZ, attach a copy of the determination letter from the Internal Revenue Service.

Part II – Program Information

Description of Program: Describe the program, including information about how the program will operate, its benefit to the community, how recipients will be selected, and any measures used to determine the program's impact on the community.

Need for Program: Demonstrate a need for this program. For example, provide relevant statistics.

Neighborhood Area to Be Served: Describe the neighborhood or municipality this program will serve.

Plan to implement the program: Describe how the program will operate. Identify other persons or organizations involved in the administration of the program.

Timetable: Indicate the starting and completion dates of the program. The program completion date must not be more than two years from the program start date.

Part III – Financial Information

Each program proposal must include a program budget that includes all sources of funding and all anticipated expenditures. The information provided in the budget may be used during a post-project audit.

Sources of Revenue: The budget must include the requested NAA funding and any other anticipated revenue sources.

NAA Funding Requested: Indicate the total amount your organization is requesting for its program.

This amount may not exceed the total proposed expenditures. Please note that the minimum NAA funding is \$250, with a maximum funding of \$150,000 per organization or agency per year.

Other Funding Sources: Provide a detailed description(s) and the amount(s) of all funding sources.

Proposed Program Expenditures: The budget must include a detailed description and the amount of all direct operating and administrative expenditures. **Expenditures must equal or exceed total funding.**

Direct Operating Expenses: Expenses include materials, equipment, wages, salaries, tuition fees, sub-contracting services, and any other expenses needed to administer the program.

Part IV – Municipal Information

This part is to be completed by the municipal agency overseeing implementation of the program.

Municipal Liaison: The municipality must designate an individual to serve as a liaison with DRS for all NAA matters.

Post-Project Review: Any program receiving \$25,000 or more in NAA funding is required to provide a post-project review, prepared by a certified public accounting firm, to the municipality overseeing the program. This review must be submitted to the municipality no later than three months after the program completion date.

Contact Information

Direct inquiries to:

Department of Revenue Services (DRS)
Neighborhood Assistance Act Program
Attn: Research Unit
450 Columbus Blvd Ste 1
Hartford CT 06103-1837

or call **860-297-5687**.

TTY, TDD, and Text Telephone users only may transmit inquiries anytime by calling 860-297-4911. Taxpayers may also call 711 for relay services. A taxpayer must tell the 711 operator the number he or she wishes to call. The relay operator will dial it and then communicate using a TTY with the taxpayer.

Extended to May 17, 2021

990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019

Form 990 (Rev. January 2020) Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning JUL 1, 2019 and ending JUN 30, 2020

Form 990 header section containing organization name (WALLINGFORD HISTORIC PRESERVATION TRUST), EIN (06-1326697), principal officer (GERALD E FARRELL, JR), and other identifying information.

Part I Summary

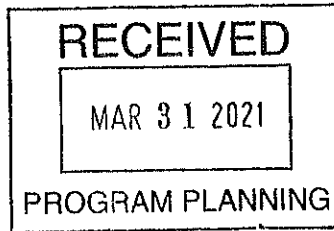
Summary table with columns for Activities & Governance, Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, member counts, revenue breakdown, and asset/liability totals.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature block section with fields for officer signature, preparer name (WILLIAM J SAAS CPA), firm name (SAAS KIRWAN ASSOCIATES), and address.

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [] No



294-
9722
Susan

Municipality: WALLINGFORD

Form NAA-01
2021 Connecticut Neighborhood Assistance Act
Program Proposal

This form **must** be completed and submitted to your municipality for approval. All items **must** be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. **Do not submit this form directly to the Department of Revenue Services.**

Part I — General Information

Name of tax exempt organization/municipal agency: _____
Wallingford Public Access Association, Inc

Address: 28 S Orchard St Wallingford CT 06492

Federal Employer Identification Number: 06-1378847

Program title: HVAC & Heating Management Building Underbelly and Attic Insulation

Name of contact person: Curt Huizenga

Telephone number: (203) 804-9130

Email address: wpaatv@gmail.com

Total NAA funding requested (\$250 minimum, \$150,000 maximum): \$ 16,852.00

Is your organization required to file federal Form 990 or 990EZ, Return of Organization Exempt from Income Tax?
 Yes No
If **Yes**, attach a copy of the **first page** of your most recent return.
If **No**, attach a copy of your determination letter from the U.S. Treasury Department, Internal Revenue Service.

Part II — Program Information

Check the appropriate description of your program:

100% credit percentage

- Energy conservation; or
 Comprehensive college access loan forgiveness (see Conn. Gen. Stat. § 12-635(3)).

60% credit percentage

- Job training/education for unemployed persons aged 50 or over;
 Job training/education for persons with physical disabilities;
 Program serving low-income persons;
 Child care services;
 Establishment of a child day care facility;
 Open space acquisition fund; or
 Other (specify): _____

Description of program: _____

Green Renovations: Install insulation in 3 areas. Hayloft Attic, Extension Attic and building extension underbelly. Add 2 inch styrofoam (R13) to underbelly area 1010 sq. ft (section added in 1980s) sonotube foundation). Some excavation required. Add 13 1/2 inch fiberglass (R49) in both attics. Total attic square footage: 1820 Add Sound Panels around Metal Cooling System: Foam casing for HVAC
Prior work Install efficient Gas Heating & Cooling System, Double Pane Windows, added fiberglass structural wall - additional R8 rating in walls, Interior & Exterior LED Lighting

Need for program: _____

Reduction in operational costs for electric and gas

- 1) overall stabilization of Heating & Cooling system.
- 2) decrease rapid heat loss in winter esp. when HEAT is turned off for 1 to 4 hours for sound control of studio
- 3) decrease rapid temp increase when HVAC is off in TV studio: (fluctuates 10 degrees or more in an hour)
- 4) minimize damage to computer and camera equipment resulting from extreme temperature fluctuation

Neighborhood area to be served: _____

WPAA-TV services are available to all Wallingford residents (and students using regional and private high schools) and nonprofits serving Wallingford. Services are also provided to connecticut at-large for theater, filmmaking, and college internships and civic engagement initiatives. Colleges include MxCC, SCSU, CCSC, Quinnipiac, Farfield U and more.

Plan to implement the program: _____

Weather dependencies.

The underbelly of the building must be done on dry days. Access to some areas may need excavation. The attic installation is best done on cooler days, or even rainy days, as the temperatures exceed 100 degrees easily. An installation window for each phase is anticipated to be 3-4 days in part due to preparation, extreme heat and coordination with facility use.

Timetable:

Program start date: As soon as funds available

Program completion date: No later than Nov 1

The program completion date must not be more than two years from the program start date. A certified post-project review is due to the municipality overseeing implementation no later than three months after program completion date for all projects receiving \$25,000 or more in NAA funding.

Part III — Financial Information

Program Budget:

Complete in full. Expenditures must equal or exceed total funding.

Sources of Revenue:

NAA funds requested	\$16,852.00
Other funding sources - itemized sources:	
a) _____	_____
b) _____	_____
c) _____	_____
d) _____	_____

Total Funding: \$16,852.00

Proposed Program Expenditures:

Direct operating expenses - itemized description:

a) Styrafoam, Fiberglass, Plywood, Tarp, Nails, Siding Trim	\$12,144.00
b) Acoustic Eggcrate Foam casing for HVAC 72 x 80 (4)	\$208.00
c) _____	_____
d) _____	_____

Administrative expenses - itemized description:

a) Excavation	\$500.00
b) Installation	\$4,000.00
c) _____	_____
d) _____	_____

Total Proposed Expenditures: \$16,852.00

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: _____ Town of Wallingford
Mailing address: _____ 45 South Main St Wallingford CT 06492
Name of municipal liaison: <u>William W. Dickinson, Jr.</u>
Telephone number: <u>2032942070</u>
Fax number: <u>2032942073</u>
Email address: <u>towngov@wallingfordct.gov</u>

<p style="text-align: center;">Post-Project Review</p> <p style="text-align: center;">Is a post-project review required for this proposal?</p> <p style="text-align: center;"><input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p style="text-align: center;">If Yes, date post-project review due:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Date</p>

Form **990**
 (Rev. January 2020)
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
 Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019
 Open to Public Inspection

A For the 2019 calendar year, or tax year beginning _____, **and ending** _____

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: **WALLINGFORD PUBLIC ACCESS ASSOCIATION, INC.**
 Doing business as _____
 Number and street (or P.O. box if mail is not delivered to street address): **28 SOUTH ORCHARD STREET**
 Room/suite _____
 City or town, state or province, country, and ZIP or foreign postal code: **WALLINGFORD CT 06492**

D Employer identification number: **06-1378847**

E Telephone number: **203-294-9722**

F Name and address of principal officer:
CURT HUIZENGA
36 SURREY DRIVE
WALLINGFORD CT 06492

G Gross receipts \$: **92,416**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **WPAA.TV**

K Form of organization: Corporation Trust Association Other

L Year of formation: **1994** **M** State of legal domicile: **CT**

H(c) Group exemption number: _____

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: WPAA - CABLE TV FACILITATES THE PRODUCTION AND CABLECAST OF WALLINGFORD PUBLIC ACCESS PROGRAMMING.			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)		
	4	Number of independent voting members of the governing body (Part VI, line 1b)		
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		
	6	Total number of volunteers (estimate if necessary)		
	7a	Total unrelated business revenue from Part VIII, column (C), line 12		
7b	Net unrelated business taxable income from Form 990-T, line 39			
Revenue	8 Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)		87,843	91,785
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		121	631
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			0
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		87,964	92,416
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0
	14 Benefits paid to or for members (Part IX, column (A), line 4)			0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		15,040	10,179
	16a Professional fundraising fees (Part IX, column (A), line 11e)			0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶		0	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		68,468	43,425
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		83,508	53,604
19 Revenue less expenses. Subtract line 18 from line 12		4,456	38,812	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)		Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)		285,441	320,105
	22 Net assets or fund balances. Subtract line 21 from line 20		39,368	35,220
		246,073	284,885	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: **CURT HUIZENGA** Date: _____
 Type or print name and title: **VICE PRESIDENT**

Paid Preparer Use Only

Print/Type preparer's name: **MARY F. MASCOLA** Preparer's signature: _____ Date: **12/07/20** Check if self-employed PTIN: **P00489248**

Firm's name: **DAVIS, MASCOLA & PHILLIPS, LLC** Firm's EIN: **41-2072419**
 Firm's address: **85 BARNES RD STE 207 WALLINGFORD, CT 06492-2576** Phone no.: **203-265-0488**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2019)

CHAPTER 139

LITTERING AND DUMPING

Article I. Litter Control

139-1. Findings.

The Town Council finds that in order to create and maintain a healthful and clean environment, it is necessary to implement a litter control program that will serve to reduce litter and littering, to collect and remove litter and to promote and maintain the environmental quality of the Town of Wallingford and the public health and welfare of its citizens.

§ 139-2. Definitions.

As used in this article, the following terms shall have the meanings indicated

LITTER – Any discarded, used or unconsumed substance or waste material, whether made of aluminum, glass, plastic, rubber, paper or other natural or synthetic material, or any combination thereof, including, but not limited to, any bottle, jar or can or part thereof, any unlighted cigarette, cigar, match or any flaming or glowing material or any garbage, trash, refuse, debris, rubbish, newspapers, magazines, glass, metal, plastic or paper containers or other packaging or construction material which has not been deposited in a designated litter receptacle.

LITTER RECEPTACLE – A receptacle suitable for the depositing of litter and designated for such deposits.

PERSON – Any individual, firm, partnership, association, corporation, business or other legal entity of any kind.

PUBLIC PROPERTY – Includes all streets, sidewalks, public ways and any public lands open to the public for passive or active recreation, parks, spaces, grounds, water resources, buildings or any property owned or controlled by the Town of Wallingford or State of Connecticut.

§ 139-3. Prohibited actions; responsible parties.

- A. No person shall throw, scatter, spill, place or cause to be blown, scattered, spilled, thrown or placed or otherwise dispose of any litter upon any public property. This prohibition shall not apply when such property has been designated for the disposal of garbage or refuse or when such litter is deposited into a designated litter receptacle in such manner that the litter will be prevented from being carried away by the elements.
- B. No person shall throw or deposit litter on any private property within the Town, except that the owner or person in control of private property may maintain authorized private receptacles for collection in such a manner that the litter will be prevented from being carried or deposited by the

elements upon any street, sidewalk or other public place or upon any private property.

- C. The owner or person in control of any private property shall control litter on his property so as to keep it from being blown by the elements upon the sidewalk, street or other private property. In the event litter is blown from such property onto adjacent public or private property, the owner or person in control of such property shall be responsible for clearing the litter from such adjacent public or private property.
- D. Persons who place their household garbage or household waste at curbside in plastic bags or open containers shall be responsible for collecting such garbage or waste upon its being scattered upon public or private property as the result of the garbage or waste being released out of the bag or container.
- E. Persons hauling trash shall be responsible for collecting any litter spilled or scattered upon public or private property while in the process of emptying any dumpsters or other containers of waste and/or while in the process of picking up and hauling trash.
- F. No litter which consists of household garbage shall be left at curbside for a period of more than 24 hours.
- G. It shall be a rebuttable presumption that litter which identifies the address of a business or of a housing unit was thrown, scattered, spilled or placed at the location where it was found by the occupant of such business address or the resident of such housing unit.
- H. When any litter is thrown, blown, scattered or spilled from any vehicle, the operator thereof shall be deemed prima facie to have committed such offense.
- I. It is found that products, such as advertising circulars and free sample newspapers and magazines, not solicited by the owner or resident of the property to which delivered have a tendency to become litter when not deposited in any receptacle or upon any porch on such property, and, therefore, no person shall deliver such items to such property by depositing the same at curbside or upon the lawn, driveway or sidewalk.
- J. No person shall sweep into or deposit in any gutter, street or other public place within the Town the accumulation of litter from any building or lot or from any public or private sidewalk or driveway. Persons owning or occupying property shall keep the sidewalk in front of such property free of litter.
- K. No person shall deposit litter which is generated from private residential or commercial uses in a public receptacle.

§ 139-4. Penalties for offenses.

- A. Any person who violates § 139-3 shall be fined \$100.00 for the first offense and \$200.00 for the second and each additional offense. Each day such a

violation is committed or permitted to continue shall constitute a separate offense.

§139-5. Enforcement.

- A. The Ordinance shall be enforced by the Police Department and any person appointed and authorized by the Mayor.
- B. For violations of § 139-3, the enforcement official shall serve a written citation in person or by certified mail, return receipt requested. The citation shall state the violation and the amount of the fine. The citation shall also state that the person may contest the citation by filing an appeal with the Town Clerk within ten (10) days of the date of the citation; that if the person does not appeal, the person will be deemed to have admitted liability; that an assessment and judgment shall be entered against them; and that such judgment may issue without further notice.
- C. The citation procedure set forth in CGS § 7-152c shall apply to citations issued under § 139-3 of this ordinance.
- D. Enforcement under this Ordinance is not exclusive. Enforcement may be through remedies available through other ordinances, statutes or by way of court action. In addition to fines, the Town may seek recovery of any costs associated with obtaining compliance with this Ordinance.

§ 139-6. Appeal; hearing procedure; Citation Hearing officer.

- A. Any person cited for a violation of this article may appeal the citation within ten (10) days of the date of service of citation on a citation appeals form available in the office of the Town Clerk, 45 South Main Street, Wallingford, Connecticut.
- B. The Mayor shall appoint Citation Hearing Officer(s), other than an employee of the Police Department or other department issuing the citation, who shall serve until a successor is appointed.
- C. The hearing procedure shall be as set forth in § 7-152c of the General Statutes.

**ARTICLE II.
Dumping**

§139-7. Dumping Prohibited

- A. Dumping is defined in General Statutes § 22a-248(12), as amended, and means: To discard (A) more than one cubic foot in volume of litter at one time or (B) furniture, garbage bags, or contents thereof or other similar materials. Material which has been placed at a location with an intent to leave it indefinitely at such location, or material which has not been removed from a location within forty-five (45) days is deemed discarded.

Dumping also means to discard automobiles or automobile parts, large appliances, tires, bulky waste, or other similar material. Dumping includes placing a total volume of more than one (1) cubic foot of private residential or commercial waste in a public or private trash receptacle.

- B. Pursuant to § 22a-250 et seq., and as defined in § 22a-248, no person shall dump any material upon any public or private property within the town not owned by such person except when (1) such property is designated by the State or town for dumping, and (2) such person is authorized to use such property. It shall not be a defense under this subsection that the dumping occurred with the permission of the property owner. The town, upon complaint or on its own initiative, may investigate any violation of this section.
- C. The fine for dumping under this section shall be as follows:
 - (1) The fine for placing a total volume of more than one (1) cubic foot of materials into a public receptacle shall be \$200.00 for the first offense and \$300.00 for each offense thereafter.
 - (2) The fine for dumping shall be \$500.00 for the first offense and \$1,000.00 for the second and subsequent offenses.
- D. If the Chief of Police or authorized enforcement official, after investigation, finds that there has been a violation of § 139-7, he or she may send a notice to the owner of the property where such violation has occurred by certified mail, return receipt requested, to the address of record for property tax purposes. Such notice shall include:
 - (1) A reference to the law alleged to have been violated;
 - (2) A short and plain statement of the matter asserted or charged;
 - (3) A demand that such property owner remove any material dumped in violation of this section to an approved solid waste facility by a date certain; and
 - (4) A statement that such property owner has the right to a hearing to contest the violation finding and the date, time and place for the hearing. Such hearing shall be fixed for a date not later than ten (10) days after the notice is mailed. The hearing shall be completed within fifteen (15) days after such hearing commences, and a decision shall be rendered within ten (10) days of the completion of such hearing.
 - (5) The fine for each day the violation exists beyond the specified date for removal.
- E. The Citation Hearing Officer shall hold a hearing upon the alleged violation unless such property owner fails to appear at the hearing. If such property owner fails to appear at the hearing or if, after the hearing, the Citation Hearing Officer finds that material has been dumped on such owner's property in violation of § 139-7, and that such material has not been removed to an approved solid waste facility, the Officer may order that the property owner remove such material to an approved solid waste facility within thirty (30) days. The Citation Hearing Officer shall send a copy of any order issued by certified mail, return receipt requested, to such property owner. The person may appeal from an order of the Citation

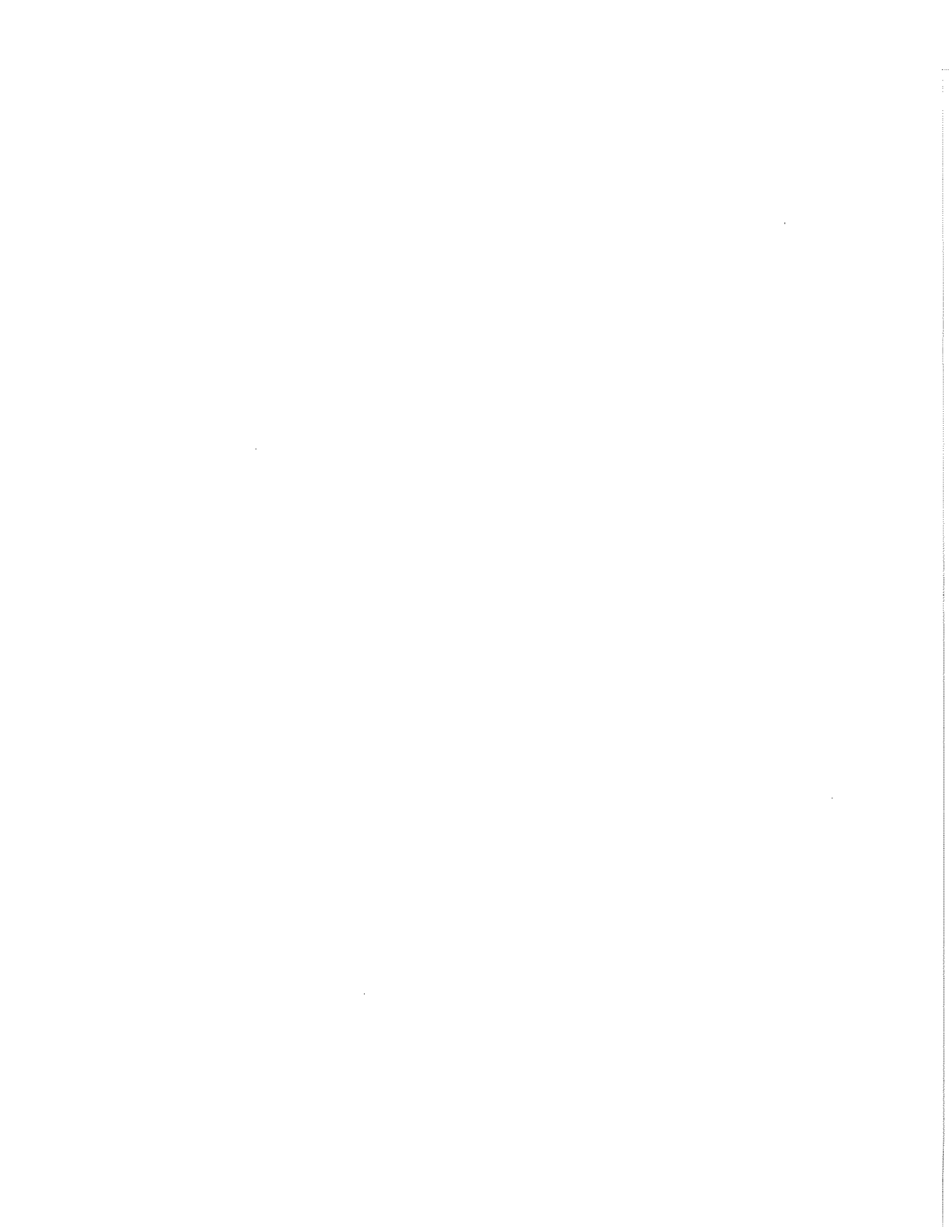
Hearing Officer under this article in accordance with the provisions of General Statutes § 8-8 as provided in § 22a-250(f)(3).

I HEREBY CERTIFY that this Ordinance was enacted by the Town Council of the Town of Wallingford this _____ day of April, 2021, in accordance with the provisions of the Charter of the Town of Wallingford.

Deborah McKiernan
Town Clerk

APPROVED: _____
William W. Dickinson, Jr., Mayor

DATE: _____





TOWN OF WALLINGFORD

JAMES R. HUTT, JR.
 Human Resources Director
 Telephone (203) 294-2880
 Fax (203) 294-2084
RECEIVED
MAYORS OFFICE
21 MAY 24 PM 2:03

9.

MEMORANDUM

TO: Mayor William Dickinson
FROM: James R. Hutt, Jr., Human Resources Director
DATE: May 24, 2021
SUBJECT: Police Contract Tentative Agreement

The Town recently reached a tentative agreement for a successor contract with AFSCME Co. 4, Local 1570 covering police officers. The duration of this contract would be for three years from July 1, 2021 to June 30, 2024. I respectfully request permission to approach the Town Council in executive session, then open session if need be, at its June 8, 2021 meeting. Below is a summary of the substantive changes:

- **Shift Swaps** Allows for swaps to be in increments of 4 hours not to exceed the maximum allowed
- **Wages** GWIs of 1.00% effective 7/1/2021; 1.0% effective 7/1/2022; 1.50% effective 7/1/2023. In addition, Police Officers Steps 2, 3, and 4, Sergeants, Lieutenants, and Captain will receive a wage adjustment of \$0.50 per hour on 7/1/2021 and 7/1/2022.
- **Shift Differential** Increases from \$1.40 to \$1.50 per hour
- **FTO Pay** Officers who perform FTO duty may earn 1 hour of pay or 1 hour of compensatory time. May accumulate up to 8 hours of compensatory time to take 1 day off of compensatory time.
- **Overtime & Extra Duty** Clarifies language for overtime assignment and permits extra duty work while on vacation subject to employee being on recall by the department if needed.
- **Vacation** Increases # of vacation days from 10-12 for employees with 1-2 years of service; Increases # of vacation days from 12-15 for employees with 3-5 years of service; increases # of vacation days from 15 to 17 days for employees with 6 to 10 years of service.
- **Vacation & Sick Accrual** Clarifies # of days in pay status to accrue sick and vacation leave
- **Clothing Allowance** Increases from \$950 to \$1,000 per year for the Plainclothes Division. Adds \$500 for clothing allowance for employees assigned to Community Impact Unit (CIU).
- **Insurance** Premium cost share increase from 15% to 16% on 1/1/2022, then to 16.5% on 1/1/2023 and to 17% on 1/1/2024. Clarifies change in carrier language for durable medical equipment and prescription drugs.
- **Life Insurance** Increase Term and AD&D coverage from \$30,000 to \$32,500
- **Duration** Three years from July 1, 2021 to June 30, 2024

Chief Wright and I will be present to answer questions.

Thank you.

JRH/

cc: William Wright, Police Chief

101

WALLINGFORD PUBLIC SCHOOLS
100 SOUTH TURNPIKE ROAD
WALLINGFORD, CT 06492
TELEPHONE (203) 949-6500
FAX# (203) 949-6551

SUPERINTENDENT

Salvatore F. Menzo, Ed.D.
Ext. 6509

ASSISTANT SUPERINTENDENTS

Danielle Bellizzi - Personnel
Ext. 6508
Carrie LaTorre - Curriculum
Ext. 6506

June 1, 2021

Ms. Deborah McKiernan, Town Clerk
Wallingford Town Council
45 South Main Street
Wallingford, CT 06492

Dear Ms. McKiernan:

Enclosed please find copies of the 2021-2024 contract between the Wallingford Board of Education and the Custodian/Maintenance Union which will be presented to the Board of Education meeting on June 7, 2021.

Per state statute, the council needs only to reject the contracts, not to approve them. No action is necessary if the council is in favor of the contracts. I would appreciate it if you would place these items early on the agenda because members of the Board of Education will be present at that meeting to discuss the contracts.

If you have any questions regarding the above, please do not hesitate to contact me.

Sincerely,



Danielle Bellizzi
Assistant Superintendent for Personnel

DB/slb

Received by Town Clerk's Office



Wallingford Parks & Recreation Department Facility & Fee Waiver Application



Requests for fee waivers are determined on a case by case basis for community based events and community fundraisers that are aligned with the mission of the Wallingford Parks and Recreation Department.

Philosophy:

- Wallingford Parks and Recreation Department strives to be an exceptional steward of facilities, parks, trails and funding for programs and services to benefit the Wallingford community.
- Charging user fees is a standard practice in the Parks and Recreation industry when individuals, private groups, or non-profit groups wish to reserve and exclusively utilize public facilities.
- The facility/park fees are reviewed as needed by the Director of Parks and Recreation and the Recreation Commission. The Recreation Commission will approve the fee changes to be submitted to the Wallingford Town Council for final approval.

Acknowledgement:

- Individual and or Organization acknowledges submittal of the application does not guarantee approval of the fee waiver.

Eligible Organizations:

- Wallingford based 501(c)3 organizations may request fee waivers pursuant to the requirements set forth in this regulation.

Eligibility/Qualifications:

To be eligible for a fee waiver, the park area must be used for a unique or special "Community Wide Event". For an event to fit this description, it must meet all of the criteria below:

- Organization must be an IRS 501(c)3 organization in good standing with a Wallingford Business Address
- Be community friendly and provide a general public benefit
- Organization must provide documentation (ex. Articles of incorporation, by-laws) demonstrating that its activities are exclusively non-profit.
- Organization must provide a list of programs/activities sponsored by your organization in the Town of Wallingford
- Organization must produce documentation that the program to be held at the park/facility will have at least 80% Wallingford Residents as attendees, exclusive of athletic events which include Wallingford teams.
- Organization must describe the program to be held and demonstrate that it is in furtherance of the organizations purpose.
- If attendees will be required to pay to participate/attend the program, describe how you will make the program available to attendees who cannot afford it.
- Completed Applications must be received by the Parks and Recreation Department at least two months prior to the proposed date of the event.
- The Director of Parks and Recreation, or designees, shall determine eligibility for the waiver. If the waiver is denied, the Director shall provide a written explanation for the denial.



- Organizations receiving a waiver must still complete and comply with the requirements of a Facility Reservation Permit Application

Eligibility Requirements:

In order for your application to be considered, you must complete these requirements. If you fail to comply with this list, the application will be denied.

1. Submit a letter to the Director of Parks and Recreation on the applicant's letterhead requesting the reason for request of fee waiver, the specific location, date and time for each facility fee waiver. The letter must be signed by the authorized representative.
2. Complete a Facility Reservation Permit Application
3. Submit a copy of the organizations/applicant's 501 (c)3 or (c)6 non-profit organization documents or any other documentation that may be required to show the applicant/organization is in good status as a non-profit organization (for example most recent 990 tax filing)
4. Upon approval, a copy of the applicant/organization's Certificate of Insurance naming the Town of Wallingford as additional insured is to be submitted
5. The organization must provide their policy showing that they do not deny participants due to financial hardships.
6. Submit all required information 60 days prior to the proposed date of the event. Please plan ahead. Any application received less than the 60 days from the proposed date of the event may be denied.
7. Scheduling and use of the facilities are subject to availability and do not have preference over Wallingford Parks and Recreation Programs and Events.

Events/Activities Not Eligible for Waiver:

- Events organized by private individuals, businesses, commercial ventures
- Organizations based outside of the Town of Wallingford
- *Applicants or Organizations who have failed to fulfill their obligations and or requirements during previous events or activities for which the Department facility permit fees were waived.*

Non-Waiveable Fees:

- All applicants, regardless of waived fees will be required to pay for any fees deemed required by the Director of Parks and Recreation for actual expenses incurred as a result of the event/activity. For example; Public Works Overtime, Emergency Personnel (Police, Fire, EMT)



Facility & Fee Waiver Application



Organization: _____

Date: _____

Contact Name: _____

Title: _____

Address: _____

Phone: _____

Email: _____

EIN or Business License #: _____

Type of Organization (Check One):

Government _____

*Non-Profit _____

***You must attach a copy of the 501(c)3 certificate**

Brief Description of Event, Including Any Justification for Fee to be Waived: _____

Will there be any fees charged to participants associated with this facility usage? YES NO

List the fees charged to participants associated with this facility usage:

Requested Facility/Location of Event: _____

I acknowledge that this request and any subsequent approval or denial does not guarantee the availability of the parks/facilities requested. I further understand that I must have completed all applicable reservation procedures outlined in the Facility Request Form and in the Facility and Fee Waiver Packet as required. I further acknowledge that if the request is denied or a reduction of fees is granted, the organization I represent must pay all remaining fees by the due date and that all established permit regulations and Town of Wallingford and Parks and Recreation rules will be followed during the permitted usage.

Signature _____

Date _____

FOR OFFICE USE ONLY:	AMOUNT OF FEE TO BE CHARGED
Director of Parks & Recreation Approved:	Approved: _____ Denied: _____
Director of Parks & Recreation Signature: _____	Date: _____

E. FEE STRUCTURE

There is a **\$100.00 (cash only) maintenance/key deposit fee** – (see page 6 for details)

1. Wallingford Residents

A. Pavilion	\$50.00 per reservation
B. Field with Lights	\$150.00 based on 3 hours
C. Field only	\$ 75.00 based on 3 hours
D. Community Pool Party	\$ 40.00 per hour – 3 hr max
E. Community Pool Lap Lanes	\$ 90.00 per hour 4-6 lanes
F. Tennis Court	\$ 25.00 per hour
G. Volleyball Court	\$ 15.00 per hour

2. Non-Wallingford Residents/Commercial Purposes

A. Pavilion Rental	\$200.00 per reservation
B. Field with Lights	\$350.00 based on 3 hours
C. Field	\$200.00 based on 3 hours
D. Community Pool Party	\$ 80.00 per hour – 3 hr max
E. Community Pool Lap Lanes	\$ 90.00 per hour 4-6 lanes
F. Tennis Court	\$ 50.00 per hour
G. Volleyball Court	\$ 30.00 per hour

3. Special Events, Tournaments, Fundraisers

A. Field with/out Lights	\$400.00 based on 8 hours per day
B. Park	\$800.00 based on 8 hours per day

Usage over 8 hours: for each hour over, rates listed in sections one and two will apply.

Note: Commercial and Special Events, Tournaments or Fundraisers who reduce hours or cancel requests within 60 days of the rental date payment is non-refundable. Tournaments or Events that require morning of field maintenance will required to cover the Public Works overtime cost in addition to the facility rental payment.

F. RECYCLING SYSTEM

Each person using any park facility **MUST RECYCLE**. The items that you must recycle are newspapers, corrugated cardboard, office paper, glass bottles and jars, food and beverage cans, plastic containers numbered 1 or 2 and scrap metals. You must remove any such items from the park facility. Take them home or to the Town Recycling Center. Town containers are for rubbish, **NOT** recycling. **WITH YOUR HELP, RECYCLING WORKS.**

C. FEE STRUCTURE

1. Wallingford Residents

- | | |
|--------------|------------------|
| A. Gymnasium | \$35.00 per hour |
| B. Classroom | \$25.00 per hour |

2. Non-Wallingford Residents/Commercial Purposes

- | | |
|--------------|------------------|
| A. Gymnasium | \$65.00 per hour |
| B. Classroom | \$50.00 per hour |

3. Special Events, Tournaments, Fundraisers

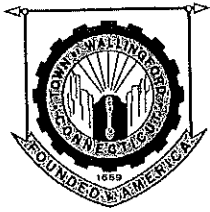
- | | |
|--------------|-----------------------------------|
| A. Gymnasium | \$600.00 based on 8 hours per day |
|--------------|-----------------------------------|

Usage over 8 hours: for each hour over, rates listed in sections one and two will apply.

Note: Commercial and Special Events, Tournaments or Fundraisers who reduce hours or cancel requests within 60 days of the rental date payment is non-refundable.

D. BIRTHDAY/FAMILY PARTIES

1. All equipment, furniture or furnishings required for the use will be set up and taken down by the applicant and the area left broom clean. Any decorations must conform to fire code regulations, receive prior approval from the Department and be removed following the use by the applicant.
2. Applicant must keep all participants and family members to the permitted area only. Applicant is responsible for providing proper supervision to ensure compliance.
3. Refreshments may only be served by prior arrangement with the Department. Refreshment items will be discussed for appropriateness and alcoholic beverages are prohibited. Refreshments cannot be brought into the gym.



Town of Wallingford, Connecticut

14, § 16,
TOWN ATTORNEY
GERALD E. FARRELL, SR.

ASSISTANT TOWN ATTORNEY
GEOFFREY T. EINHORN

CORPORATION COUNSEL
JANIS M. SMALL

DEPARTMENT OF LAW
WALLINGFORD TOWN HALL
45 SOUTH MAIN STREET
WALLINGFORD, CT 06492

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lawdept@wallingfordct.gov

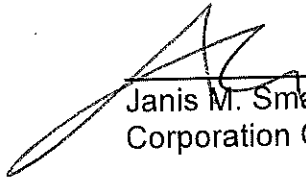
MEMORANDUM

TO: William W. Dickinson, Jr. Mayor
FROM: Janis M. Small, Corporation Counsel
RE: Town Council Agenda
DATE: June 1, 2021

RECEIVED
MAYOR'S OFFICE
21 June / AM 9:30

Please place the following matters on the Town Council Agenda for June 8, 2021:

1. Executive Session pursuant to the CT General Statutes §1-225(f) and §1-200(6)(B) regarding strategy and negotiations with respect to the pending tax appeal matter of Bear Industries, LLC v. Town of Wallingford.
2. Possible action on the tax appeal, Bear Industries, LLC. v. Town of Wallingford as discussed in executive session.



Janis M. Small
Corporation Counsel

JMS/alh



RECEIVED
MAYOR'S OFFICE
Town of Wallingford, Connecticut
21 JUN -2 AM 9:46

TOWN ATTORNEY
GERALD R. FARRELL, SR.
ASSISTANT TOWN ATTORNEY
GEOFFREY T. BINHORN
CORPORATION COUNSEL
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lewdept@wallingfordct.gov

15 & 17,

June 2, 2021

William W. Dickinson, Jr., Mayor
Town of Wallingford
45 South Main Street
Wallingford, CT 06492

Dear Mayor Dickinson:

Please place the following items on the Town Council's agenda for its meeting on June 8, 2021:

1. Executive Session pursuant to Connecticut General Statutes §1-200(6)(B) and §1-225(f) for discussion regarding pending Claims and litigation involving Covanta and the Disposal Agreements.
2. Consider authorization of action with respect to Covanta mediation as discussed in Executive Session.

Very truly yours,

Janis M. Small
Corporation Counsel

JMS/bjc