

**TO: Honorable Mayor & Common Council
President Rizzo
Aldermen Zadzilka, Braun, Schwandt, Pecoraro**

FROM: Daniel R. Quinn, City Clerk-Treasurer

RE: Agenda for regular session TUESDAY, DECEMBER 1, 2015 6:30PM

AUDIENCE PARTICIPATION – Agenda items only, not to exceed 90 minutes with each speaker limited to a five-minute maximum.

COMMUNICATIONS FROM CITY OFFICIALS

- I. Mayor - Re: Appointment of North Tonawanda City Court Judge**

- II.1 Attorney - Re: Proposed 2016 Agreement between City of North Tonawanda and Niagara Community Action Program, Inc.**
- II.2 Attorney - Re: Tentative Agreement with NTPFA**
- II.3 Attorney - Re: Resignation as City Attorney**

- III. Clerk-Treasurer - Re: Removal of City Property from In-Rem Proceedings**

- VII.1 Accountant - Re: Payment of the Abstract of Claims dated December 1, 2015.**
- VII.2 Accountant - Re: Budget Amendment – 2015 Budget for Grant monies received from NYS Division of Criminal Justice.**
- VII.3 Accountant - Re: Budgetary Transfer – City shared cost for Handicap Ramp at 240 ½ Goundry Street, Purchase of road salt to carry through 2015 inventory.**

XXV. Monthly Reports

.1 Police

.2 Youth, Recreation & Parks

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Daniel R. Quinn". The signature is fluid and cursive, with a long horizontal stroke at the end.

**Daniel R. Quinn
City Clerk-Treasurer**

DEC 01 2015

I.

Office of the Mayor

RECEIVED
CITY CLERK'S OFFICE
2015 NOV 24 AM 9:48

ARTHUR G. PAPPAS

NORTH TONAWANDA NY

November 24, 2015

City of North Tonawanda Common Council
216 Payne Avenue
North Tonawanda, NY 14120

RE: Appointment of North Tonawanda City Court Judge

Dear Honorable Body:

Please be advised that I am appointing Shawn P. Nickerson, 324 Wheatfield Street, North Tonawanda, NY 14120, as acting North Tonawanda's City Court Judge. This will be a six year term commencing December 30, 2015 and ending December 30, 2021.

Sincerely,



Arthur G. Pappas
Mayor

City of North Tonawanda

DEC 01 2015

11.1

OFFICE OF THE CITY ATTORNEY
CITY HALL
216 PAYNE AVENUE
NORTH TONAWANDA, N.Y. 14120-5489

SHAWN P. NICKERSON
CITY ATTORNEY

TELEPHONE
(716) 695-8590
FAX (716) 695-8592

KATHERINE D. ALEXANDER
ASSISTANT CITY ATTORNEY

November 19, 2015

Hon. Mayor and Common Council
City Hall, 216 Payne Avenue
North Tonawanda, New York 14120

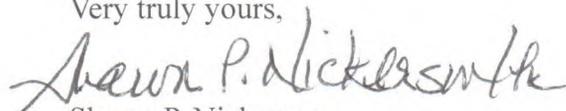
RE: Proposed 2016 Agreement between City of North Tonawanda and
Niagara Community Action Program, Inc.

Dear Honorable Body:

Attached, for your consideration, is a proposed agreement between the City of North Tonawanda and Niagara Community Action Program, Inc., for the provision of emergency services to qualified City Residents for the year 2016.

Should your Honorable Body concur, please pass a resolution authorizing the Mayor to execute the agreement on behalf of the City of North Tonawanda, subject to any further review by the City Attorney.

Very truly yours,



Shawn P. Nickerson
City Attorney

SPN/lk
Att.

AGREEMENT

THIS AGREEMENT, made this _____ of _____, 20____, by and between the CITY OF NORTH TONAWANDA, a municipal corporation of the State of New York having its offices at 216 Payne Avenue, North Tonawanda, New York 14120, herein called the "City" and NIAGARA COMMUNITY ACTION PROGRAM, INC., a not-for-profit corporation of the State of New York having its office at 1521 Main Street, Niagara Falls, New York, herein called "Niagara CAP" WITNESSETH:

WHEREAS, Niagara CAP has as one of its principal functions and purposes of providing emergency services to the needy and disadvantaged persons within Niagara County through use of funding grants and subsidies from federal, state, and municipal governments and agencies, and

WHEREAS, the City desires to contribute to and participate in the funding of Niagara CAP for such purposes in return for Niagara CAP's promise of emergency services to the residents of the City, and

WHEREAS, both parties jointly desire and intend to cooperate toward providing such services for the benefit of the City's residents under this agreement, and

WHEREAS, the execution of this agreement has been duly approved by resolutions adopted by the City Council and the Board of Directors of Niagara CAP,

NOW, THEREFORE, in consideration of the above, both parties mutually agree as follows:

1. The City of North Tonawanda shall allocate and pay over to Niagara CAP the sum of Three Thousand Dollars (\$3,000.00) within thirty (30) days of the signed agreement.

2. Niagara CAP will accept such payment from the City and use it to provide emergency services to qualified City residents through its outreach office located at 265 Falconer Street, City of North Tonawanda, New York.
3. In consideration of the services mentioned above, Niagara CAP will provide additional services such as counseling, budgeting, information, referral, application assistance, weatherization, fair housing, and child care to qualified City residents.
4. The term of this agreement shall commence January 1, 2016, and expire December 31, 2016.

IN WITNESS WHEREOF, the parties hereto have duly executed this agreement by their respective duly authorized officers on the day and year first above written.

CITY OF NORTH TONAWANDA

(Seal)

By: Arthur Pappas
Arthur Pappas
City Mayor

11/17/15
Date

NIAGARA COMMUNITY ACTION PROGRAM, INC.

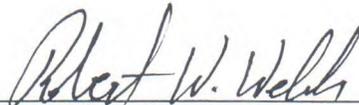
(Seal)

By: Suzanne Shears
Suzanne Shears
Executive Director

11-12-15
Date

STATE OF NEW YORK
COUNTY OF NIAGARA ss:

On this 17th day of November, 2015, before me, the subscriber, personally came Arthur Pappas, to me personally known, who, being by me duly sworn, did depose and say that he resides at City of North Tonawanda; that he is the Mayor of the CITY OF NORTH TONAWANDA, the corporation described in and which executed the within instrument; that he knows the seal of said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the City Council of said corporation; and that he signed his name thereto by like order.

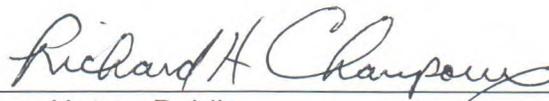


Notary Public

ROBERT W. WELCH
Notary Public, State of New York
No. 01WE5071879
Qualified in Erie County
My Commission Expires January 21, 2019

STATE OF NEW YORK
COUNTY OF NIAGARA ss:

On this 12th day of NOVEMBER, 2015, before me, the subscriber, personally came Suzanne Shears, to me personally known, who, being by me duly sworn, did depose and say that she resides at Town of Porter; that she is the Executive Director of the NIAGARA COMMUNITY ACTION PROGRAM, INC., the corporation described in and which executed the within instrument; that she knows the seal of said corporation; that the seal affixed to said instrument is such corporate seal; that it was so affixed by order of the Board of said corporation; and that she signed her name thereto by like order.



Notary Public

RICHARD H. CHAMPOUX
Notary Public, State of New York
Reg. No. 01CH6102998
Qualified in Niagara County
My Commission Expires 12/15/2015

City of North Tonawanda

DEC 01 2015

II.2

OFFICE OF THE CITY ATTORNEY
CITY HALL
216 PAYNE AVENUE
NORTH TONAWANDA, N.Y. 14120-5489

SHAWN P. NICKERSON
CITY ATTORNEY

TELEPHONE
(716) 695-8590
FAX (716) 695-8592

KATHERINE D. ALEXANDER
ASSISTANT CITY ATTORNEY

November 23, 2015

Honorable Mayor & Common Council
216 Payne Avenue
North Tonawanda, NY 14120

Re: Tentative Agreement with NTPFA

Dear Honorable Body:

The City and NTPFA met on a number of occasions to negotiate a collective bargaining agreement. The current agreement is set to expire at the end of 2015. I have attached a copy of the tentative agreement and hereby summarize the amendments:

1. §1.2.1: It would be a 5 year agreement, covering 2016-2020
2. §1.23: Updating the modification section to the new contract dates
3. §5.73 Allows for other individuals, including the Fire Chief to now operate NT Fire Department radios
4. §6.51 Overtime: Should an employee not answer the phone when called for OT, the failed contact shall act as a refusal of the OT.
5. §7.1 Salary Schedule: The Salary Increases will be as follows:
 - a. 2016- 2.25%
 - b. 2017-2.0%
 - c. 2018-2.0%
 - d. 2019-2.0%
 - e. 2020-2.0%
6. §7.15. Defines a list of specialty duties for Union Members and provides them with out-of-title pay for said duties should they be called in.
7. §7.21 Removes the bullet points of a tiered payment structure for Critical Care Technicians
8. §8.24 Holiday Compensation. Changes the language to reflect current shift structure
9. §9.31 Vacation. Allows employees to break up their vacation days for use within shorter periods of time.
10. §10.22 Increases the allowable sick leave credits to two thousand three hundred four hours.
11. §10.53. Removes the cap on sick hours in the sick bank.
12. §12.11. Increases the life insurance policy for employees to \$20,000.
13. §12.12 Health Insurance: ALL PFA members shall now contribute a portion of monthly premiums for health insurance as follows:
 - a. Employees hired before January 1, 2003 shall pay \$1,400.00/year for family or \$607.92/year for single coverage (currently not paying anything) until separation
 - b. Employees hired between January 1, 2003 and January 1, 2009 will pay 25% for 10 years and upon their 10th anniversary they shall pay \$1,4700/year for family or \$607.92/year for single coverage until separation

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NORTH TONAWANDA, N.Y.

- c. Employees hired after January 1, 2009 will continue to pay their current rate of 25% for 10 years and then 10% for the remainder of their employment.
- 14. §12.12(c) Fixes typographical errors for medical plan
- 15. §12.42 Medical Waiver: Employees wishing to waive the cost of medical coverage would be eligible to receive the sum below based upon the number of officers waiving the cost of medical insurance for the period of January 1 through December 31 in their pay check on the first payday in December, as a modification to wages (subject to taxes).

| # of Officers | Amount |
|---------------|------------|
| 5 and below | \$1,500.00 |
| 6-9 | \$3,000.00 |
| 10+ | \$4,000.00 |

- 16. §13.13 FLSA adjustment: Employees shall receive their FLSA adjustment within their first paycheck of April.
- 17. §13.22 Educational Benefits
 - a. Increases payment for a 4 year degree in Fire Science to \$600.00
 - b. Increases payment for a 2 year degree in Fire Science to \$300.00
 - c. Increases payment for all other two or four year degrees to \$200.00
 - d. Eliminates the payment to CPR Instructors, and increases payment to SCBA Repairmen to \$300.00. SCBA Repairmen shall also be eligible for EMT payment
 - e. Increases payment for EMT's to \$550.00

The NTPFA has already ratified the tentative agreement. If you concur with the agreement, please authorize the Mayor to sign the amended collective bargaining agreement.

Very truly yours,

Katherine Alexander, Esq.
Assistant City Attorney

CITY OF NORTH TONAWANDA

COLLECTIVE NEGOTIATIONS COMMITTEE

**FINAL PROPOSAL TO THE
NORTH TONAWANDA PROFESSIONAL FIREFIGHTERS IAFF LOCAL 1333**

Shawn P. Nickerson, Esq. (716) 695-8590 (Office)
216 Payne Avenue
North Tonawanda, NY 14120

Arthur G. Pappas (716) 695-8540 (Office)
216 Payne Avenue
North Tonawanda, NY 14120

Katherine D. Alexander, Esq. (716) 695-8590 (Office)
216 Payne Avenue
North Tonawanda, NY 14120

Robert W. Welch (716) 695-8000 x2108 (Office)
216 Payne Avenue
North Tonawanda, NY 14120

All correspondence to the above-listed committee should be sent to:

North Tonawanda City Attorney's Office
City Hall
216 Payne Avenue
North Tonawanda, NY 14120

City of North Tonawanda #1

§1.21 The term of this agreement begins at 12:01 AM on **January 1, 2016** and continues until midnight **December 31, 2020**.

City of North Tonawanda #2

§1.23 If either party desires to modify this Agreement, it shall give official notice thereof to the other party not earlier than **May 1, 2019, and** no later than **June 1, 2019.**

City of North Tonawanda #3

§5.73 Except in extreme emergencies, only employees covered by this Agreement, and/or the Fire Department Mechanic in the course of his duties as Fire Department Mechanic, shall be permitted to drive, operate, or assist in the operation of North Tonawanda Fire Department apparatus ~~or to operate North Tonawanda Fire Department radios.~~

NTPFA Proposal

§6.51 Add to read:

(e) Number of hours (marked with "N") for each employee that an attempt was made to contact said employee for extra duty hours, and contact was unable to be made. Said hours will be added to the employee's extra duty hours as if it were a refusal.

It is the employee's responsibility to provide the supervisor with one phone number that shall be called for scheduled extra duty pursuant to Section 6.51.

City of North Tonawanda #6

§7.1 Salaries on **January 1, 2016** will be increased by **two and one-quarter percent** over the **2015** levels.

Salaries on **January 1, 2017** will be increased by **two percent** over the **2016** levels.

Salaries on **January 1, 2018** will be increased by **two percent** over the **2017** levels.

Salaries on **January 1, 2019** will be increased by **two percent** over the **2018** levels.

Salaries on **January 1, 2020** will be increased by **two percent** over the **2019** levels.

NTPFA Proposal

§7.15-Change to read:

Employees reporting for duty when they would not otherwise be scheduled, **for specialty duties, provided they are qualified for same**, will receive out of title pay only, to the exclusion of overtime, at the overtime rate of the Fire Fighter/Fire Driver in the Fire Prevention Bureau, and all Officers will be paid their respective rate as indicated in Section 7.1.

- (a) Specialty duties shall be defined as fire investigation, Hazardous Materials Incidents, Technical Rescue/Stand Bys and Swiftwater Rescue.

NTPFA Proposal

§7.21-Remove bullet points-Change to Read:

Each participant who successfully completes all the requirements of the NYS Certified Level 3 Critical Care Technician or equivalent training shall receive a \$0.60 (sixty cent) per hour wage increase.

To be eligible for continues payment of said additional wage increase, the employee must maintain said Level 3 Critical Care Technician Certificate.

...continue with remainder of the section

NTPFA Proposal

§8.24-Change to Read

If an employee is absent on:

1. Either the day before or the day after a holiday on which the employee was not required to work (or a compensatory day off granted in lieu of a holiday). Or
2. On a holiday when he was scheduled to work, the employee's absence on any such day shall be charged as a compensatory day off, within the meaning of paragraph 8.22 of this Agreement, unless his absence was excused in advance by the Fire Chief or was part of his vacation or a paid leave of absence.

NTPFA Proposal

§9.31-Change to Read

...Vacations shall be taken in periods of at least seven (7) consecutive days. However employees with six (6) weeks of vacation may take **four (4) weeks** in shorter periods; employees with five (5) or more weeks may take **(3) weeks** in shorter periods; employees with four or more weeks may take **two (2) weeks** in shorter periods; **and employees with three (3) or more weeks may take one (1) week in shorter periods**, with the permission of the officer in charge...

NTPFA Proposal

§10.22-Change first sentence to read:

Sick leave credits may be accumulated up to a maximum of two thousand three hundred four (2304) hours.

NTPFA Proposal

§10.53-Remove:

This will continue until the Sick Bank establishes a maximum hours of two thousand (2000).

NTPFA Proposal

§12.11-Change to Read

The Employer shall provide and pay for a \$20,000 life insurance policy for each employee.

City of North Tonawanda #7

§12.12(b) **Beginning January 1, 2016, Employees hired before January 1, 2003 shall be required to contribute \$1,400.00 of the cost of such insurance to the City of North Tonawanda by way of payroll deduction spread equally over the entire year. Said employee will be required to \$1,400.00 per year by way of payroll deduction until said employee retires from the City of North Tonawanda Fire Department.**

Employees hired after January 1, 2003 shall be required to contribute twenty-five percent (25%) of the cost of such insurance to the City of North Tonawanda by way of payroll deduction spread equally over the entire year. Said new hires will be required to pay this twenty-five percent (25%) by payroll deduction for a period of ten (10) years from their date of hire. Once said employees reach their tenth anniversary date they shall be ~~entitled to full City paid coverage~~ **required to \$1,400.00 of the cost of such insurance to the City of North Tonawanda by way of payroll deduction spread equally over the entire year. Said employee will be required to contribute the \$1,400.00 until said employee retires from the City of North Tonawanda Fire Department.**

...continue with the remainder of the section.

City of North Tonawanda #8

§12.12(c) The employer will permit any employee who is a member of the hospital and medical plan provided herein at the time of their retirement, to retain their membership in said plan and including the Drug Prescription Plan after retirement, with the City paying the full cost thereof, until the employee reaches the age of 65.

Upon obtaining the age of 65, the employee and his spouse shall enroll in a **Medicare Medical** Supplement Plan, known as the City of North Tonawanda Retirement Health Plan. The City will pay the premium cost of ~~Medicaid~~ **Medicare** Part B each month for the employee and his spouse. The employee or spouse who has not yet attained the age of 65 shall continue in the above-mentioned Community Blue HMO 201/201 Plus plan with single coverage until attaining the age of 65.

... continue with remainder of the section

NTPFA Proposal

§12.42-Change to Read

Employees wishing to waive the cost of medical coverage would be eligible to one-half (1/2) of the cost of this coverage, up to a maximum of **Fifteen Hundred Dollars (\$1,500.00)**, for the period of January 1st through December 31st in their paycheck on the first pay day in December, as a modification to wages (subject to taxes). This compensation would be prorated over a year when an employee is hired or terminated, or requires the immediate reinstatement of coverage due to the hiring or termination of their spouse, dependent upon the number of months actually waived.

Notwithstanding the above, if at least six employees ~~wish to~~ waive the cost of medical coverage, the employees would be eligible for payment of **Three Thousand Dollars (\$3,000.00)** under the same terms as in the above paragraph.

Notwithstanding the above, if at least **ten employees** waive the cost of medical coverage, the employees would be eligible for payment of **Four Thousand Dollars (\$4,000.00)** under the same terms as in the above paragraph.

NTPFA Proposal

§13.13-New Section to read:

The Employer shall pay entitled members their Fair Labor Standards Act (FLSA) overtime adjustment wages on the first payday of April. This payment shall be a lump sum payment made to said employees in each and every year as an adjustment to wages (subject to taxes). **Said payment shall not be distributed in a separate check but within that pay-period's wages check.**

NTPFA Proposal

§13.22-Change to read

In consideration of the pursuit of higher education by employees covered by this agreement and in sole and complete compensation to said employees for said education, to the complete exclusion of any and all other costs, the City shall establish a lump sum payment to qualifying employees as hereinafter defined based on the following schedule:

1. For any four (4) year degree from an accredited institution of higher learning in the specific field of Fire Science, an adjustment to salary of a lump sum payment of Six Hundred Dollars (\$600.00)
2. For any two (2) year degree from an accredited institution of higher learning in the specific field of Fire Science, an adjustment to salary of a lump sum payment of Three Hundred Dollars (\$300.00)
3. For any other associated (two year degree), or any other four year degree (bachelor degree) a payment of Two Hundred Dollars (\$200.00).
4. All current Certified S.C.B.A. Repairmen shall receive a lump sum payment of Three Hundred Dollars (\$300.00) prorated for actual months of eligibility per calendar year. Said compensation to be paid on the first payday of December.
5. Effective January 1, 2007, all current card carrying EMT's shall receive a lump sum payment of Five Hundred and Fifty Dollars (\$550) prorated for actual months of eligibility per calendar year. Said compensation to be paid on the first payday of December.

City of North Tonawanda

OFFICE OF THE CITY ATTORNEY
CITY HALL
216 PAYNE AVENUE
NORTH TONAWANDA, N.Y. 14120-5489

SHAWN P. NICKERSON
CITY ATTORNEY

KATHERINE D. ALEXANDER
ASSISTANT CITY ATTORNEY

II, 3
DEC 01 2015

TELEPHONE
(716) 695-8590
FAX (716) 695-8592

November 24, 2015

North Tonawanda Common Council
216 Payne Avenue
North Tonawanda, NY 14120

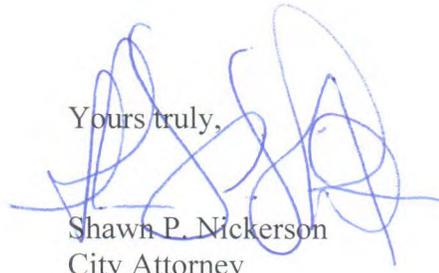
Re: Resignation as City Attorney

Dear Honorable Body:

Please be advised that I have been offered and accepted Mayor Pappas' appointment as acting North Tonawanda City Court Judge. This appointment will be effective December 30, 2015. As such, I will be resigning my position as duly-elected City Attorney also effective December 30, 2015.

At this time, I would like to take the opportunity to thank Mayor Pappas, the Common Council and the residents of North Tonawanda for the honor of allowing me to serve as City Attorney for the past ten years. I look forward to this opportunity to continue to serve my community as acting City Court Judge.

Yours truly,


Shawn P. Nickerson
City Attorney

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NORTH TONAWANDA, NY

City of North Tonawanda

DEC 01 2015

111

DANIEL R. QUINN
City Clerk-Treasurer
danquinn@northtonawanda.org

Lori Swartz
Assistant City Clerk

Denise Proefrock
Assistant City Treasurer

OFFICE OF THE CITY CLERK - TREASURER
VITAL STATISTICS
CITY HALL
216 PAYNE AVENUE
NORTH TONAWANDA, N.Y. 14120

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CITY CLERK'S OFFICE
Office: (716) 695-8575
Fax: (716) 695-8557
2015 NOV 20 AM 8:34

November 20, 2015

NORTH TONAWANDA N.Y.

Honorable Mayor and Common Council
216 Payne Avenue, City Hall
North Tonawanda, New York 14120

Dear Honorable Mayor and Common Council:

Please be advised that I have received payment in full for back City, School and County taxes, per the tax agreement with the City, for the following parcel:

182.24-1-39 792 Revere Avenue Michael Caron

Therefore, please pass the necessary resolution withdrawing these parcels from the appropriate In Rem foreclosure proceeding.

Thank you for your cooperation.

Very truly yours,



Daniel R. Quinn
City Clerk-Treasurer

cc: Shawn Nickerson, City Attorney



City of North Tonawanda

DEPARTMENT OF ACCOUNTING
CITY HALL
216 PAYNE AVENUE
NORTH TONAWANDA, NEW YORK 14120-5477

VII.1
DEC 01 2015

MARK W. DOTTERWEICH
CITY ACCOUNTANT

AMANDA L. REIMER
STAFF ACCOUNTANT

TELEPHONE
(716) 695-8545

FAX
(716) 695-8573

November 24, 2015

Honorable Arthur G. Pappas, Mayor

& Common Council

City Hall – 216 Payne Avenue

North Tonawanda, New York 14120

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NORTH TONAWANDA, N.Y.

Dear Honorable Body:

In accordance with Article V, Division 1, Section 5.002 and 5.003 of the City Charter, an Abstract Sheet, comprised of a Warrant of Claims, has been submitted by this office for your review and approval.

Accordingly, please authorize for payment the current Warrant of Claims for Common Council audit, dated **December 1, 2015**, and further authorize the Mayor and City Clerk-Treasurer to respectively sign and countersign said Warrant.

Very truly yours,

Mark W. Dotterweich

City Accountant

MWD

VII. 2

DEC 01 2015

DEC 01 2015



City of North Tonawanda

DEPARTMENT OF ACCOUNTING
CITY HALL
216 PAYNE AVENUE
NORTH TONAWANDA, NEW YORK 14120-5477

MARK W. DOTTERWEICH
CITY ACCOUNTANT
markdot@northtonawanda.org

TELEPHONE
(716) 695-8545

FAX
(716) 695-8573

AMANDA L. REIMER
STAFF ACCOUNTANT
amandarei@northtonawanda.org

November 24, 2015

Honorable Arthur G. Pappas, Mayor
and Common Council
City Hall
North Tonawanda, NY 14120

Dear Honorable Body:

In accordance with Section 2.2 of the Budgetary Transfer Policy, please authorize the City Accountant to make the following **budget amendment** of fiscal year 2015 revenues and appropriations, based on the requests of Department Heads:

| <u>Control Number</u> | <u>Dollar Amount</u> | <u>Amend Revenue Account</u> | <u>Amend Appropriation Account</u> |
|-----------------------|----------------------|------------------------------|------------------------------------|
| 7 | \$7,500.00 | 1-1000.3310 State Aid Police | 1-3120.245 Federal/State Grant |

Explanation: To amend the 2015 Budget for Grant monies received from NYS Division of Criminal Justice. Revenues and expenditures will offset; net effect to budget is zero.

Very truly yours,

Mark W. Dotterweich
City Accountant

MWD

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NORTH TONAWANDA N.Y.

Budget Amendment Request Form

Department: Police Department

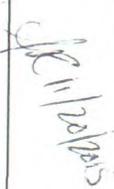
Date: 11/20/2015

| Dollar Amount | Accounts and Documentation | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|-------------------------------------------|
| \$7,500.00 | Increase(Decrease) Account <u>1.1000.3310</u> | State Aid - Police Account Description |
| | Account Number | Account Description |
| Explanation: To amend the 2015 Budget for Grant money received from NYS Division of Criminal Justice. Revenues and expenditure will offset; net effect budget is zero. | | |
| ***COMMON COUNCIL ACTION IS NECESSARY*** | | |
|  Department Head Signature | | Date <u>11/20/2015</u> |

Budget Amendment Policy

- 2.31 - All Budget Amendments require authorization by the Common Council
- 2.32 - Budget amendments can be initiated by the Department Head by completing a Budget Amendment Form and submitting to the Accounting Department for review when:
- a) The change will result in an overall increase or decrease to appropriations and either estimated revenues/fund balance.

For Accounting Department Use Only

| Control # | Department of Accounting Audit | Common Council Meeting Date |
|-----------|----------------------------------------------------------------------------------------------------------|-----------------------------|
| <u>7</u> |  <u>11/20/2015</u> | <u>12/1/15</u> |

Award Contract

| | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><u>STATE AGENCY</u> Division of Criminal Justice Services 80 South Swan Street Albany, NY 12210</p> | <p><u>NYS COMPTROLLER'S NUMBER:</u> T101644 (Contract Number) <u>ORIGINATING AGENCY CODE:</u> 01490 - Division of Criminal Justice Services</p> |
| <p><u>GRANTEE/CONTRACTOR:</u> (Name & Address) North Tonawanda, City of 216 Payne Avenue City Hall North Tonawanda, NY 14120</p> | <p><u>TYPE OF PROGRAMS:</u> Legislative Initiatives <u>DCJS NUMBERS:</u> LG15101644 <u>CFDA NUMBERS:</u></p> |
| <p><u>FEDERAL TAX IDENTIFICATION NO:</u> 166002549 <u>MUNICIPALITY NO:</u> (if applicable) 290236000000</p> | <p><u>INITIAL CONTRACT PERIOD:</u> FROM 10/01/2015 TO 09/30/2016 <u>FUNDING AMOUNT FROM INITIAL PERIOD:</u> \$7,500.00</p> |
| <p><u>STATUS:</u> Contractor is not a sectarian entry. Contractor is not a not-for-profit organization.</p> | <p><u>MULTI-YEAR TERM:</u> (if applicable): 0 1-year renewal options.</p> |
| <p><u>CHARITIES REGISTRATION NUMBER:</u> <input type="text"/> (Enter number or Exempt) if "Exempt" is entered above, reason for exemption. <u>N/A</u></p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>Contractor has _____ has not _____ timely filed with the Attorney General's Charities Bureau all required periodic or annual written reports.</p> </div> | <p><u>APPENDIX ATTACHED AND PART OF THIS AGREEMENT</u></p> <p><input checked="" type="checkbox"/> <u>APPENDIX A</u> Standard Clauses required by the Attorney General for all State contracts</p> <p><input checked="" type="checkbox"/> <u>APPENDIX A1</u> Agency-specific Clauses</p> <p><input checked="" type="checkbox"/> <u>APPENDIX B</u> Budget</p> <p><input checked="" type="checkbox"/> <u>APPENDIX C</u> Payment and Reporting Schedule</p> <p><input checked="" type="checkbox"/> <u>APPENDIX D</u> Program Workplan</p> <p><input type="checkbox"/> <u>APPENDIX F</u> Guidelines for the Control and Use of Confidential Funds</p> <p><input type="checkbox"/> <u>APPENDIX G</u> Procedural Guidelines for the Control of Surveillance Equipment</p> <p><input type="checkbox"/> <u>Other (identify)</u></p> |
| <p>IN WITNESS THERE OF, the parties hereto have electronically executed or approved this AGREEMENT on the dates of their signatures.</p> | |
| <p>NYS Division of Criminal Justice Services BY: _____ Date: _____ Office of Program Development and Funding</p> <p><u>State Agency Certification:</u> "In addition to the acceptance of this contract, I also certify that original copies of this signature page will be attached to all other exact copies of this contract".</p> <p>GRANTEE: BY: Capt. Todd W. Bush , Captain Date: _____</p> | |
| <p>ATTORNEY GENERAL'S SIGNATURE _____ Title: _____ Date: _____</p> | <p>APPROVED, Thomas P. DiNapoli, State Comptroller _____ Title: _____ Date: _____</p> |

VII.3



City of North Tonawanda

DEPARTMENT OF ACCOUNTING
CITY HALL
216 PAYNE AVENUE
NORTH TONAWANDA, NEW YORK 14120-5477

DEC 01 2015

MARK W. DOTTERWEICH
CITY ACCOUNTANT
markdot@northtonawanda.org

TELEPHONE
(716) 695-8545

FAX
(716) 695-8573

AMANDA L. REIMER
STAFF ACCOUNTANT
amandarei@northtonawanda.org

November 24, 2015

Honorable Arthur A. Pappas, Mayor
and Common Council
City Hall
North Tonawanda, NY 14120

Dear Honorable Body:

In accordance with Article V, Division 2, Section 5.023 and Section 2.2 of the Budgetary Transfer Policy, please authorize the City Accountant to make the following transfers of fiscal year 2015 appropriations, based on the request of the Department Head, copy attached:

| <u>Control Number</u> | <u>Dollar Amount</u> | <u>From: Appropriation Account</u> | <u>Into: Appropriation Account</u> |
|-----------------------|----------------------|--------------------------------------|------------------------------------|
| 10 | 1,702.16 | 1-1990.410 Contingent Account | 1-1620.440 Repairs & Maintenance |
| 11 | 30,000.00 | 1-3310.100 Traffic Personal Services | 1-5142.480 Streets Operations |

Very truly yours,

Mark W. Dotterweich
City Accountant

MWD
Attachment

RECEIVED
CITY CLERK'S OFFICE
2015 NOV 24 PM 12:13
NORTH TONAWANDA, N.Y.

Budgetary Transfer Request Form

Department: Common Council

Date: 10.21.2015

| Dollar Amount | Appropriation Accounts and Documentation | |
|---------------|------------------------------------------|-------------------------------------------|
| \$1,702.16 | From Appropriation Account 1.1990.410 | Contingent Account Account Description |
| | Account Number | Account Description |
| | 1.1620.440 | Buildings - R&M |
| | Account Number | Account Description |

Explanation: To transfer \$1,702.16 from the City's Contingent account to Buildings and Grounds to cover invoice from the North Tonawanda Hall of Fame to cover 50% of the expenditures related to the installation of a handicap ramp.

Please Check One (V)

| | | | |
|------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|------|
| V | | | |
| Common Council Action | No Common Council Action | | |
| | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; text-align: center;"> <i>Dale Hines</i> Department Head Signature </td> <td style="width: 20%; text-align: center;">Date</td> </tr> </table> | <i>Dale Hines</i> Department Head Signature | Date |
| <i>Dale Hines</i> Department Head Signature | Date | | |

Budgetary Transfer Policy

2.11 - Budgetary transfers can be initiated by a Department Head on his or her signature if all of the following criteria is met:

1. Transfer of appropriations is less than \$1000.00
2. Transfer is between existing appropriation accounts within the Department's Budget
3. Within the fiscal year, aggregate transfers, made in any one appropriation account do not exceed \$1000.00

2.21 - Budgetary transfers must be initiated by a Department Head through the Common Council if one of the following criteria is met:

1. Transfer of appropriations is over \$1000.00
2. Transfer involves the establishment of a new appropriation account; or,
3. Transfer is between Departments (not within one Department's own Budget)

For Accounting Department Use Only

| Control # | Department of Accounting Audit | Common Council Meeting Date |
|-----------|--------------------------------|-----------------------------|
| 10 | <i>AK 10/21/2015</i> | 12/1/15 |



City of North Tonawanda

NORTH TONAWANDA, NEW YORK 14120

PO. NO. 10 1 2015
THIS NO. MUST BE ON ALL PACKAGES, INVOICES, AND CORRESPONDENCE

PURCHASER
Engineering Department
216 Payne Avenue, City Hall
NORTH TONAWANDA, NEW YORK 14120

DELIVER TO
Engineering Dept. / 216 Payne Avenue
216 Payne Avenue, City Hall
NORTH TONAWANDA, NEW YORK 14120

VENDOR NUMBER
VENDOR ADDRESS
North Tonawanda Hall of Fame
240 1/2 Goundry Street
North Tonawanda, New York 14120

| BUDGET APPROPRIATION | | | |
|----------------------------------------------------------------------|--------------|-----------------|------------|
| FUND | ACCT. NUMBER | DESCRIPTION | AMOUNT |
| | | NT Hall of Fame | \$1,702.16 |
| <i>Charge to 1.1620.440 Building + Grounds Repairs + Maintenance</i> | | | |

VOUCHER NO.

| CHECK NUMBER | CHECK DATE | AUDIT |
|--------------|------------|-------|
| | | |

REMITTANCE ADDRESS
Ken Braun
175 Lincoln Avenue
North Tonawanda, New York 14120

1. AUTHORIZATION OF PURCHASE: **DEPARTMENT HEAD** *[Signature]* Date: 10/20/15

2. DEPARTMENT APPROVAL: THE SERVICES OR MATERIALS DESCRIBED BELOW WERE RENDERED OR FURNISHED TO THE MUNICIPALITY ON THE DATES STATED AND THE CHARGES ARE CORRECT. **DEPARTMENT HEAD** *[Signature]* Date: 10/20/15

PURCHASE SUBJECT TO: COMPETITIVE BID S 103 GML STATE CONTRACT S 104-b GML REQUEST FOR PROPOSAL (RFP) WRITTEN QUOTES (3) VERBAL QUOTES (3) OTHER

3. AUDIT OF CLAIM AND APPROPRIATIONS **CITY ACCOUNTANT** Date:

| DATES | QTY | DESCRIPTION OF MATERIALS OR SERVICE | EST. AMOUNT | UNIT PRICE | AMOUNT |
|--------------------------------------------------------|-----|---------------------------------------------------------|-------------|------------|------------|
| | | North Tonawanda Hall of Fame Handi cap accessability | | | \$1,702.16 |
| Make Check Payable to: North Tonawanda Hall of Fame | | | | | |

VENDOR'S INVOICE # Attached TERMS

TOTAL \$1,702.16

DISCOUNT

NET TOTAL F.O.B. DELIVERED

SALES TAX EXEMPT

VENDOR NOTE: Instructions for how to properly complete this form and Terms and Conditions governing the above purchase, are printed on the reverse side.
 CERTIFICATION: I certify that the above account is true and correct; that the items, services and disbursements charged were rendered to or for the municipality on the dates stated; that no part has been paid or satisfied; that taxes, for which the municipality is exempt, are not included; and that the amount claimed is actually due.

X

PLEASE SIGN & RETURN _____ VENDOR SIGNATURE _____ DATE _____

PURCHASE ORDER/VOUCHER

RETURN THIS COPY WITH INVOICE REV. 1/07



NORTH TONAWANDA FOOTBALL HALL OF FAME
240 1/2 GOUNDRY ST.
NORTH TONAWANDA, NEW YORK 14120

October 1, 2015

City of North Tonawanda Engineering Department:

Attached please find bill for materials for North Tonawanda Football Hall of Fame porch and ramp project at 240 ½ Goundry Street.

Requesting reimbursement of \$1702.16 as previously agreed on.

Send all remittance to Ken Braun (project manager)
175 Lincoln Avenue
North Tonawanda NY 14120

Make check payable to North Tonawanda Football Hall of Fame.

Thank you from all members of the Football Hall of Fame.

MIRIS BUILDING SUPPLIES

393 RIVER ROAD

N. TONAWANDA, NY 14120

(716) 694-9069

NO REFUNDS OR EXCHANGES WITHOUT SALES RECEIPT.

YOUR ORDER NO _____ DATE 8/21/15

SOLD TO NT Foot Ball Hall of Fame

ADDRESS The Entrance 237454500

| SOLD BY | | DRIVER | LOADED BY | TERMS | | |
|---------|----------|--------|----------------------|-------|-------|---------|
| PCS. | SIZE | L'GTH | DESCRIPTION | FEET | PRICE | AMOUNT |
| 44 | per | | Decorative Gravel | 44 | 15. | 660. |
| 5 | Complete | | Post Kits | 5 | 39.99 | 199.95 |
| 5 | 6 FT | D | STAINLESS Steel Rail | 5 | 63.99 | 319.95 |
| 3 | 10 FT | D | STAINLESS Steel Rail | 3 | 95.99 | 287.97 |
| 2 | 6 FT | D | STAINLESS Steel Rail | 2 | 79.99 | 159.98 |
| 1 | 9 FT | | SLUICE | | | 44.55 |
| 2 | Top | | Cap | 2 | 4.99 | 9.98 |
| 2 | 4' | | Trim Rails | 2 | 4.99 | 9.98 |
| 24 | Cap | | Boots | 24 | 39. | 936. |
| | | | | | | 1702.16 |
| | | | | | TAX | |
| | | | | | TOTAL | |

Received by _____

55337

Thank You

10% CHARGE ON ALL RETURNS • NO RETURNS ON UNSEALED BUNDLES OF SHINGLES
NO RETURNS ON SPECIAL ORDERS • NO RETURNS WITHOUT RECEIPT

Budgetary Transfer Request Form

Department: Public Works

Date: 11/19/2015

| Dollar Amount | Appropriation Accounts and Documentation | | | |
|---------------|------------------------------------------|----------------------------|---------------------|------------|
| | From Appropriation Account | Into Appropriation Account | | |
| | 1-3310.100 | 1-5142.480 | Personal Services | Operations |
| \$30,000.00 | Account Number | Account Number | Account Description | |

Explanation:

Transfer needed to purchase road salt to carry through our inventory through the end of 2015.

Please Check One

| | |
|-----------------------|--------------------------|
| X | |
| Common Council Action | NO Common Council Action |

| | |
|---------------------------|------------|
| | |
| Department Head Signature | 11/20/2015 |
| | Date |

Budgetary Transfer Policy

2.11 - Budgetary transfers can be initiated by a Department

Head on his or her signature if **all** of the following criteria is met:

1. Transfer appropriations must be less than \$250,00
2. Transfer only between existing appropriation accounts within your Department Budget
3. Accumulated transfers made into any one appropriation account can not total more than \$250,00 within any fiscal year

2:21 - Budgetary transfers can be initiated by a Department Head through the Common Council if **one** of the following Criteria is met:

1. Transfer appropriations must be over \$250,00
2. Creation of a new appropriation account your budget

For Accounting Department Use Only

| Control # | Department of Accounting Audit | Common Council Meeting Date |
|-----------|--------------------------------|-----------------------------|
| 11 | | 12/1/15 |



CITY OF NORTH TONAWANDA
216 Payne Avenue
North Tonawanda, N.Y. 14120-5491

DEC 01 2015



XXV.1

Department of Police

William R. Hall
Chief of Police

TELEPHONE
(716) 692-4325
FACSIMILE
(716) 692-7555

November 16, 2015

Honorable Mayor Arthur G. Pappas and
Members of the City of North Tonawanda Common Council

Ladies and Gentlemen:

Please find attached the Summary of Police Activities Report, the Summary of Criminal Activities Report and the V&T Report for the month of October 2015.

Respectfully submitted,

William R. Hall
Chief of Police

cc: Eric Zadzilka
cc: Philip Rizzo
cc: Donna Braun
cc: Catherine Schwandt
cc: Robert Pecoraro

WRH/sd

RECEIVED
CITY CLERK'S OFFICE
2015 NOV 17 AM 11:00
NORTH TONAWANDA N.Y.

| |
|---------------------------------------------------------------------------------------------------------|
| <p>NORTH TONAWANDA POLICE DEPARTMENT SUMMARY OF POLICE ACTIVITIES FOR THE MONTH OF OCTOBER 2015</p> |
|---------------------------------------------------------------------------------------------------------|

CRIMINAL

| | |
|------------------------------------------------------------------------|-----|
| Complaints received and investigated | 140 |
| Complaints cleared by arrest or exceptional clearance | 92 |
| Complaints ruled unfounded | 1 |
| Number of males arrested under 18: 3 over 18: 30 | 33 |
| Number of females arrested under 18: 2 over 18: 16 | 18 |
| Arrests for other authorities | 2 |
| Failure to Appear/Violation of Probation Warrant Arrests | 39 |
| Above complaints cleared by J.A.B. | 13 |
| Complaints cleared by J.A.B. from previous months | 12 |

TRAFFIC

| | |
|--------------------------|-----|
| Traffic summonses issued | 254 |
| DWI arrests | 5 |
| Parking tags issued | 43 |

MISCELLANEOUS

| | |
|---------------------------------------------|--------------|
| Miscellaneous service | 1,518 |
| Incident reports | 136 |
| Vehicle accidents | 43 |
| Vehicle accidents (fatal) | 0 |
| Vehicle stops | 261 |
| Police escorts | 42 |
| Prisoner meals | 70 |
| 911 Emergency calls | 0 |
| Mug shots taken | 41 |
| Fingerprints taken | 41 |
| Persons missing and located | 3 |
| Automobiles stolen | 2 |
| Automobiles recovered | 2 |
| Automobiles recovered for other authorities | 0 |
| Record check fees | \$ 135.00 |
| Photocopy fees | \$ 14.25 |
| Fingerprint fees | \$ - |
| Fines collected | \$ 29,943.52 |
| Value of property damaged | \$ 6,485.00 |
| Value of property stolen | \$ 79,315.76 |
| Value of property recovered | \$ 33,858.53 |

Respectfully submitted,



William R. Hall
Chief of Police

WRH/sd

| |
|-----------------------------------------------------------------------------------------------------------|
| <p>NORTH TONAWANDA POLICE DEPARTMENT SUMMARY OF CRIMINAL ACTIVITIES FOR THE MONTH OF OCTOBER 2015</p> |
|-----------------------------------------------------------------------------------------------------------|

CRIMINAL FELONIES, MISDEMEANORS AND OFFENSES

| <u>TYPE OF OFFENSE</u> | <u>COMPLAINTS</u> | | |
|--------------------------------------|-------------------|---------|-----------|
| | Received | Cleared | Unfounded |
| AGG. ASSAULT | 0 | 0 | |
| ALL OTHER OFFENSES | 5 | 5 | |
| ARSON | 0 | 0 | |
| BURGLARY | 11 | 3 | |
| COERCION | 0 | 0 | |
| CRIMINAL MISCHIEF | 6 | 1 | |
| CRIM POSS WEAPON | 1 | 0 | |
| DIS CON/HARASS | 22 | 9 | |
| DRUG OFFENSES | 6 | 5 | |
| EMBEZZLEMENT | 0 | 0 | |
| FAILURE TO APPEAR | 39 | 39 | |
| FORGERY | 3 | 0 | |
| FRAUD (ID THEFT) | 4 | 0 | 1 |
| LARCENY | 26 | 6 | |
| LEAVING THE SCENE | 6 | 2 | |
| MURDER | 0 | 0 | |
| RAPE | 0 | 0 | |
| ROBBERY | 5 | 3 | |
| SEXUAL OFFENSES | 2 | 1 | |
| SIMPLE ASSAULT | 0 | 0 | |
| STOLEN PROPERTY | 2 | 2 | |
| UNAUTH USE M/V | 2 | 0 | |
| VIOL OF PROBATION | 0 | 0 | |
| ARRESTS FOR OTHER AUTHORITIES | | 2 | |
| ARRESTS/CLEAR COMPS. FM PREV MONTHS | | 14 | |
| TOTALS | 140 | 92 | 1 |
| # OF ABOVE COMPLAINTS CLEARED BY JAB | | 13 | |
| # CLEARED BY JAB FROM PREV MONTHS | | 12 | |

XXV.2

DEC 01 2015

NORTH TONAWANDA
Department of Youth, Recreation & Parks

500 Wheatfield St.
North Tonawanda, New York 14120
Phone (716) 695-8520
Fax (716) 695-8533



Patricia Brosius, Director

November 18, 2015

The Honorable Mayor Art Pappas
And Common Council
216 Payne Ave
North Tonawanda, NY 14120

RECEIVED
CITY CLERK'S OFFICE
2015 NOV 19 AM 10:08
NORTH TONAWANDA NY

Ladies and Gentleman:

The following information is submitted for your perusal concerning participants in various programs offered at the Youth Center for the month of October 2015.

Total Attendance:

Unduplicated: 416 Duplicated: 1,742 # Days Open: 19 Avg/day: 92 kids/day

1. Recreational/Social Activities

(Dance Class, Cheerleading Class, Nerf Wars, Friday Game Show, Club Karaoke, Kenpo Karate Class, Touch Football, Halloween Party, Teen Haunted Halloween Bash, Open gym, sport of the day, video games, table games, computer lab, arts and crafts)

Unduplicated: 399 Duplicated: 1,725

2. Educational Programs

(Tutoring, Video Productions Lab, Girl Scouts, Science Club, Parent Presentation- Keeping Your Kids Safe on the Internet, Safe Sitter Babysitting Course)

Unduplicated: 52 Duplicated: 125

3. Service Programs

None