

A G E N D A
FINANCE COMMITTEE
JUNE 13, 2013

- I.** Committee meeting called to order by Chairman.
- II.** Motion to approve minutes of prior Committee meeting.
- III. Action Agenda**
- 1)** Request for Transfer of Funds attached for Committee approval.
- 2) Referral from the County Clerk-Motor Vehicles Committee:**
Amending the 2013 County budget to increase estimated revenues and appropriations in the amount of \$1,000 to reflect receipt of funds from the Town of Bolton for the Bicentennial project.
- 3) Referral from the County Facilities Committee:**
Airport:
Increasing Capital Project No. H335.9550 280 Runway 1 End Obstruction Removal in the amount of \$2,400 to move available funds from the operating budget to the capital project to cover mandatory Independent Fee Estimate per FAA grant requirements; with the source of funding to be a transfer from A.9950 910-Transfers-Capital Projects.
- 4) Referral from the Criminal Justice Committee:**
District Attorney:
Request to extend an existing contract with the Division of Criminal Justice Services, commencing April 1, 2013 and terminating March 31, 2014, for a total amount not to exceed \$29,200.
- 5) Referral from the Economic Growth & Development Committee:**
Planning & Community Development:
Establishing Capital Project No. H340.9550 280 FWHC 2012 Award in the amount of \$616,000 to administer the grant award; with the source of funding to be H340.9550 3897 Culture and Recreation in the amount of \$308,000 and H340.9550 2791 In-Kind Contributions in the amount of \$308,000.
- 6) Referrals from the Human Services Committee:**
Employment & Training Administration:
- A)** Amending the 2013 County budget to increase estimated revenues and appropriations in the amount of \$11,849 to reimburse training for dislocated workers.
- B)** Amending the 2013 County budget to increase estimated revenues and appropriations in the amount of \$8,314 to reimburse training for dislocated workers through the Trade Adjustment Act.
- C)** Amending the 2013 County budget to increase estimated revenues and appropriations in the amount of \$708,980 to reflect receipt of annual allocation of WIA funds.
- D)** Amending the 2013 County budget to increase estimated revenues and appropriations in the amount of \$69,959 to reflect receipt of State grant funds to administer the Summer Youth Employment Program.

7) Referral from the Public Works Committee:

DPW:

Increasing Capital Project No. H277.9550 280 Beach Road (CR 51/6) Reconstruction Project in the amount of \$951,096.53 to cover Change Orders 1, 2, 4, 5 and 6 for the Project; with the source of funding to be as follows:

NYS DOT/FHWA Funding:

Federal: \$407,989
State Marchiselli: \$326,741
Other State: \$11,040 (State dedicated funds for DEC design)
Local: -\$209,673.47 (due to Marchiselli increase)
Non-Part Share -EFC: \$238,500 (construction funds from EFC)
County match to EFC: \$26,500 (to be funded from Local Match decrease)

NYS EFC GIGP Funding (Monitoring Funds from NYS EFC):

State: \$135,000
Local: \$15,000 (to be funded from Local Match decrease)

8) Referrals from the Support Services Committee:

County Administrator:

A) Request to appropriate funds from the Computer Reserve Fund (A.895.00) to departmental budgets to purchase computers and related equipment and software in the amount of \$12,403 as follows:

- \$1,060 to Code A.1450 220.1 Board of Elections Office Equipment Reserve; and
- \$11,343 to Code D.9901 910 DPW Interfund Transfer.

B) Amending the 2013 County budget to increase estimated revenues and appropriations in the amount of \$11,343 to allocate funds for the purchase of a server with the Computer Replacement Program funds.

9) Requesting a resolution declaring "Mayday for Mandate Relief" and urging the State to adopt Laws that do not impose further fiscal stress on local governments and taxpayers and build upon recent efforts to reform costly unfunded mandates.

10) Finance Committee action is required on the following item as approved by the Personnel Committee: Item Nos. 3A, 3B, 4A and 4B.

IV. Topics to be reported on/discussions/updates

1) Response to the Budget Analysis Report from the County Treasurer as prepared by the County Administrator, will be emailed when completed.

V. Pending Items

1) Accepting credit payments County-wide pending review of State contract and other vendors. (03.06.13)

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

FROM: Kathleen Barrie, Personnel Officer
Name of Department
Personnel/Civil Service

SIGNED: *Kathleen Barrie*

DATE: ~~5/4/10~~ 6/11/2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A. 1430 425	Postage	A.9050 469	Unemployment	\$171

Please state reason for transfers requested: To cover increase in contract with NEC (People's Systems) per County Resolution 762 of 2012

*Please note: All amounts must be in whole dollars – no cents.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
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Please file original request with Clerk of the Board and retain copy for your records.

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Fire Prevention & Building Code Enforcement

SIGNED:

DATE: 5/30/13

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.3620 410	Office Supplies	A.3620 220	Office Equipment	\$140.00 ^{110.00} <i>(KP)</i>

Please state reason for transfers requested: Lack of funds in .220--need to replace electric stapler and digital camera

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

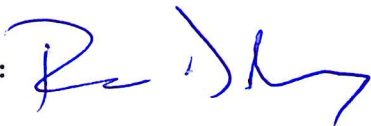
Please state reason for transfer request:

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

FROM: Ross Dubarry, Airport Manager
Name of Department

SIGNED:  DATE: 5/23/2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.5610 470	Airport, Contract	A.9950 910	Transfer-Capital Projects	\$2,400

Please state reason for transfers requested: Cover FAA required IFE

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 439	Contingent Fund			

Please state reason for transfer request:

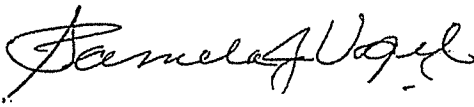
Please file original request with Clerk of the Board and retain copy for your records.

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: County Clerk - Public Records

SIGNED: 

DATE: 5/23/2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A. 1665 130	Part-Time Salaries	To A 1410 120	Overtime Salaries	1000.00

Please state reason for transfers requested: To balance account for OT services due to pistol permit demands.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

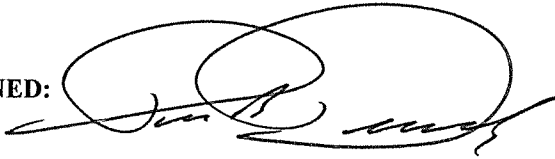
RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Office of the County Administrator

SIGNED:



DATE: 5/13/2013

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1325 865	Treasurer-Dental Ins.	A.1011 865	Admin-Dental Ins.	18.00

Please state reason for transfers requested: To expense a portion of Deputy Treasurer/Fiscal Assistant's dental insurance to the Office of the County Administrator.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Tourism

SIGNED:

DATE: 5/30/13

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.6417 130	Payroll - Part Time	A.6417 120	Payroll - Overtime	3,000.00
A.6417 130	Payroll - Part Time	A.6417 424	Postage	1,500.00

Please state reason for transfers requested: We have decided not to hire a summer temporary person. Funds are needed in overtime and in our postage account.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

Please state reason for transfer request:

Please file original request with Clerk of the Board and retain copy for your records.

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Social Services

SIGNED:

DATE:

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.6010 110	Salaries - Regular	A.6010 130	Salaries - Part Time	\$7,000.00

Please state reason for transfers requested: To cover part time salaries through year end.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

Please state reason for transfer request:

Please file original request with Clerk of the Board and retain copy for your records.

REQUEST FOR TRANSFER OF FUNDS

4

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

FROM: PUBLIC WORKS

Name of Department

SIGNED:  DATE: 5/30/2013

FROM CODE
A.7111 110

TITLE
Up Yonda Farms
Salaries - Regular

TO CODE
A.7111 130

TITLE
UpYonda
Salaries, Part Time

AMOUNT
\$ 3,000.00

Please state reason for transfers requested:

To transfer regular salaries in Up Yonda Farms to Part Time salaries due to changes in staff.

CONTINGENT FUND TRANSFER REQUESTS

FROM CODE

TITLE

TO CODE

TITLE

AMOUNT

Please state reason for transfer request:

Please file original request with Clerk of the Board and retain copy for your records.

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Probation

SIGNED: 

DATE: 6/5/13

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.3140.110	Salaries-Regular	A.3140.440	Legal/Transcript	\$1,658.50

Please state reason for transfers requested: To cover court reporting services rendered in the matter of a disciplinary hearing.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

Please state reason for transfer request:

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Probation

SIGNED: 

DATE: 5/28/13

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.3140.110	Salaries-Regular	A.3140.130	Salaries-Part-Time	\$12,894.00

Please state reason for transfers requested: To cover salary of Part-Time Senior Typist Position

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

Please state reason for transfer request:

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

DEPARTMENT NAME: Public Defender

SIGNED: 

DATE:

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1171 110	Public Defender Salaries	A.1171 444	Public Defender Travel/Education	2,139.00
A.1171 810	Public Defender Retirement	A.1171 444	Public Defender Travel/Education	585.00
A.1171 830	Public Defender Social Security	A.1171 444	Public Defender Travel/Education	133.00
A.1171 831	Public Defender Medicare	A.1171 444	Public Defender Travel/Education	31.00

Please state reason for transfers requested: To adjust budget to reflect changes in the Contract with the Office of Indigent Legal Services.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

RESOLUTION REQUEST FORM NO. 10

Request for Transfer of Funds

TO: JOAN SADY, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

FROM: Planning and Community Development
Name of Department

SIGNED:  DATE: 29 August 2012

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
71-8686 410	Supplies	71-8686 220	Equipment	\$4,000

Sample: A.4018.0020 110 Preventive Program – Family Health – Salaries – Regular \$xxx.xx

Please state reason for transfers requested:

Grant funds will be used as partial payment for new GPS equipment to replace aged unit.

*Please note: All amounts must be in whole dollars – no cents.

CONTINGENT FUND TRANSFER REQUESTS

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1990 469	Contingent Account- Other Payments/Contributions			

Please state reason for transfer request:

Please file original request with Clerk of the Board and retain copy for your records.

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME:

DATE:

- (a) Purpose of Amendment: To amend county budget to accommodate funds received for Bicentennial Project from Town of Bolton.

- (b) Appropriation Code, Object Code, Full Title and Amount:
A. 6422 410 Bicentennial Project Office Supplies \$ 1000.00

- (c) Revenue Code (with title), and Amount:
A. 6422 2390 Bicentennial Project Share of Joint Activity-Govt
\$ 1000.00

RESOLUTION REQUEST FORM NO. 9

Request to Increase or Decrease or Amend Existing Capital Project or Capital Reserve Project*

****If this is the result of a grant award, also complete and submit Form No. 5 or 6***

DEPARTMENT NAME: DPW - Airport

DATE: 5/23/2013

(a) Exact Title and Number of Project*: H335.9550 280 Runway 1 End
Obstruction Removal

(b) Is this a Capital Project? Yes

(c) Is this a Capital Reserve Project? No

(d) Amount of Increase (if applicable): \$2,400

(e) Amount of Decrease (if applicable): N/A

(f) Source of Funding (if Increase) (including name & title of codes, etc.): A.9950
910 – Transfers – Capital Projects

(g) Changes in Funding (if Amendment):

(h) Purpose of Increase or Decrease or Amendment: To move available funds
from operating budget to capital project to cover mandatory Independent Fee
Estimate per FAA grant requirements.

RESOLUTION REQUEST FORM NO. 4

Request for Extension of Existing Contract

DEPARTMENT NAME: District Attorney

DATE: June 10, 2013

- (a) Resolution No. which Authorized the Original Contract: 435 of 2005
- (b) Name of Contractor: Division of Criminal Justice Services
- (c) Address of Contractor: 4 Tower Place, Albany, New York 12207
- (d) Contractor's Contact Person and Telephone Number: Larry Signor (518) 485-9905.
- (e) Commencement Date of Extension: 4/1/13
- (f) Termination Date of Extension: 3/31/14
- (g) Payment Provisions:
 - i) lump sum amount: \$29,200.00
 - ii) hourly rate amount n/a
 - iii) total amount not to exceed \$29,200.00
 - iv) how will payments be made: quarterly
- (h) Where are the Funds for this Contract ? A.1165 110 District Attorney Salary Code. Revenue Code DA Prosecution 3031.

RESOLUTION REQUEST FORM NO. 8

Request to Establish Capital Project or Capital Reserve Project*

****If this is the result of a grant award, also complete and submit Form No. 5 or 6***

DEPARTMENT NAME: Planning and Community Development

DATE: 22 Feb 2013

- (a) Exact Title* and Number of Project (must be obtained from Treasurer's Office):
H340.9550 280, FWHC 2012 award
- (b) Is this a Capital Project?
Yes
- (c) Is this a Capital Reserve Project?
No
- (d) Amount of Project:
\$616,000
- (e) Source of Funding (including name & title of codes, etc.):
H340.9550 3897 Culture and Recreation \$308,000.00, H340.9550 2791 In Kind Contributions \$308,000
- (f) Purpose of Establishment:
Administer grant award

***Title should reflect department if possible:**

i.e. Capital Project No. H.270 9550 280 *Air Handler Installation* would be clearer if name was listed as Westmount Air Handler Installation;

Capital Project No. H274.9550 280 *Replace VASI with PAPI* would be clearer if name was listed as Airport Replace VASI with PAPI.

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME: Employment and Training Administration

DATE: May 23, 2013

- (a) Purpose of Amendment: add federal funds to county budget to reimburse training for dislocated workers
- (b) Appropriation Code, Object Code, Full Title and Amount: 40.6293.0306 - WIA
Dislocated Worker Supplemental - \$11,849

433

Sample: A.1010 470 Legislative Board – Contract

- (c) Revenue Code (with title), and Amount: ~~40.4791~~- WIA - \$11,849.

40.6293.0306 4791

Sample: A. 6417.2654 Tourism Occupancy – Minor Sales – Tourism

*Please note all amount must be in whole dollars – no cents.

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME: Employment and Training

DATE: May 23, 2013

- (a) Purpose of Amendment: add federal funds to county budget to reimburse training for dislocated workers through the Trade Adjustment Act

- (b) Appropriation Code (with title), Object Code (with title) and Amount:
40.6293.0305 ~~WIA Dislocated Worker~~ 433 (Training-Client) \$8,314.

- (c) Revenue Code (with title), and Amount: ~~40.4791~~-WIA - \$8,314.

40.6293.0305 4791

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

****If this is the result of a grant award, also complete and submit Form No. 5 or 6***

DEPARTMENT NAME: Employment and Training

DATE: May 23, 2013

- (a) Purpose of Amendment: Add federal funds to county budget. Annual allocation of WIA Funds.

- (b) Appropriation Code (with title), Object Code (with title) and Amount: See attached detail sheet

- (c) Revenue Code (with title), and Amount: See attached detail sheet

40.6293.0300 4791 - \$222,170
 40.6293.0305 4791 - \$~~180~~183,652
 40.6293.0310 4791 - \$231,466
 40.6293.0313 4791 - \$71,692

RESOLUTION REQUEST FORM NO. 7
 Request to Amend County Budget - Attachment
 May 23, 2013

REVENUES - *break out by subdepartment*

40.6293.4791 - Workforce Invest Act, WIA Program Year 2013 \$708,980.

APPROPRIATIONS

40.6293.0300 110	Workforce Invest Act, WIA, Workforce Investment	\$76,800.
	- Adult - Salaries - Regular	
40.6293.0300 200	Office Equipment	\$ 2,100.
40.6293.0300 411	Rent - Building/Property	\$16,600.
40.6293.0300 433	Training - Client	\$73,070.
40.6293.0300 810	Retirement	\$15,800.
40.6293.0300 830	Social Security	\$ 5,900.
40.6293.0300 860	Hospitalization	\$31,900.
40.6293.0305 110	Workforce Invest Act, WIA, Workforce Investment	\$66,700.
	- Dislocated Work - Salaries - Regular	
40.6293.0305 200	Office Equipment	\$ 1,900.
40.6293.0305 411	Rent - Building/Property	\$12,300.
40.6293.0305 433	Training - Client	\$57,452.
40.6293.0305 810	Retirement	\$13,700.
40.6293.0305 830	Social Security	\$ 5,100.
40.6293.0305 860	Hospitalization	\$26,500.
40.6293.0310 110	Workforce Invest Act, WIA, Workforce Investment	\$66,400.
	- Youth - Salaries - Regular	
40.6293.0310 130	Salaries - Part Time	\$70,000.
40.6293.0310 200	Office Equipment	\$ 1,900.
40.6293.0310 411	Rent - Building/Property	\$14,500.
40.6293.0310 433	Training - Client	\$ 7,466.
40.6293.0310 470	Contract	\$32,000.
40.6293.0310 810	Retirement	\$13,300.
40.6293.0310 830	Social Security	\$ 10,500.
40.6293.0310 860	Hospitalization	\$15,400.
40.6293.0313 110	Workforce Invest Act, WIA, Workforce Investment	\$32,000.
	- WIA Admin. Salaries - Regular	
40.6293.0313 200	Office Equipment	\$ 900.
40.6293.0313 411	Rent - Building/Property	\$ 4,500.
40.6293.0313 470	Contract	\$15,342.
40.6293.0313 810	Retirement	\$ 6,600.
40.6293.0313 830	Social Security	\$ 2,450.
40.6293.0313 860	Hospitalization	\$ 9,900.

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME: Employment and Training Administration

DATE: May 23, 2013

- (a) Purpose of Amendment: add state grant funds to county budget to administer Summer Youth Employment Program
- (b) Appropriation Code, Object Code, Full Title and Amount: 40.63260110 - TANF Summer, Salaries - Regular - \$11,209; 40.63260130 - TANF Summer, Salaries - Part Time - \$45,500; 40.63260470 - TANF Summer, Contract - \$7,500; 40.63260830 - TANF Summer, Social Security - \$4,350; 40.63260860 - TANF Summer, Hospitalization - \$1,400.

Sample: A.1010 470 Legislative Board – Contract

- (c) Revenue Code (with title), and Amount: ~~40.4786~~ TANF Summer - \$69,959.

40.6326 4786

Sample: A. 6417.2654 Tourism Occupancy – Minor Sales – Tourism

*Please note all amount must be in whole dollars – no cents.

RESOLUTION REQUEST FORM NO. 9

***Request to Increase or Decrease or Amend Existing Capital Project or
Capital Reserve Project****

**If this is the result of a grant award, also complete and submit Form No. 5 or 6*

DEPARTMENT NAME: DPW

DATE: 05/30/13

- (a) Exact Title and Number of Project*: Beach Road (CR 51/6) Reconstruction Project (H277.9550 280)
- (b) Is this a Capital Project? Yes
- (c) Is this a Capital Reserve Project? No
- (d) Amount of Increase (if applicable): \$ 951,096.53
- (e) Amount of Decrease (if applicable):
- (f) Source of Funding (if Increase) (including name & title of codes, etc.):

NYS DOT/FHWA Funding

Federal:	\$ 407,989.00
State Marchiselli:	\$ 326,741.00 (available at this time)
Other State:	\$ 11,040.00 (State dedicated funds for DEC design)
Local:	\$-209,673.47 (due to Marchiselli increase)
Non-Part Share - EFC:	\$ 238,500.00 (construction funds from EFC)
County Match to EFC:	\$ 26,500.00 (to be funded from Local Match decrease)
 Increase	 \$ 801,096.53

NYS EFC GIGP Funding (Monitoring Funds from NYSEFC)

State:	\$ 135,000.00
Local:	\$ 15,000.00 (to be funded from Local Match decrease)
 Increase:	 \$ 150,000.00

Total Capital Project Increase: \$ 951,096.53

- (g) Changes in Funding (if Amendment):
- (h) Purpose of Increase or Decrease or Amendment: Increase to cover Change Orders 1, 2, 4, 5 and 6 for the Beach Road (CR 51/6) Reconstruction Project..

RESOLUTION REQUEST FORM NO. 20

MISCELLANEOUS

****Please List All Other Requests Not Covered by Previous Resolution Request Forms Here.
Please attach any backup information available and be as detailed as possible.***

DEPARTMENT NAME: Office of the County Administrator

DATE: 6/12/2013

(a) Purpose of Request: To appropriate funds from the Computer Reserve Fund to departmental budgets to purchase computers and related equipment and software.

(b) Details: To appropriate funds in the amount of \$12,403.00 from the Computer Reserve (A.895.00) to codes:

A.1450 220.1 Board of Elections Office Equipment Reserve	\$1,060.00
A.9901 910 Interfund Transfer	\$11,343.00

(c) Previous Resolution Number: N/A

(d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: A.895.00 Computer Reserve Fund.

Sample: A.8021 470 Planning & Community Development – Contract

* as listed in budget and LOGOS

RESOLUTION REQUEST FORM NO. 7

Request to Amend County Budget*

****If this is the result of a grant award, also complete and submit Form No. 5 or 6***

DEPARTMENT NAME: Office of the County Administrator

DATE: 6/12/2013

(a) Purpose of Amendment: To allocate funds for the purchase of a server with the Computer Replacement Program funds.

(b) Appropriation Code, Object Code, Full Title and Amount:

D.5010 220.1 County Road Highway Admin-Office Equip Reserve - \$11,343

(c) Revenue Code (with title), and Amount:

D.5010 5031 County Road Highway Admin Interfund Transfers - \$11,343

1 **RESOLUTION DECLARING “MAYDAY FOR MANDATE RELIEF” AND URGING**
2 **THE STATE TO ADOPT LAWS THAT DO NOT IMPOSE FURTHER FISCAL**
3 **STRESS ON LOCAL GOVERNMENTS AND TAXPAYERS AND BUILD UPON**
4 **RECENT EFFORTS TO REFORM COSTLY UNFUNDED MANDATES**
5

6 **WHEREAS**, counties are mandated to administer and finance dozens of state and federal
7 programs; and
8

9 **WHEREAS**, many counties in New York State face significant fiscal challenges made worse
10 by the recent recession and slow economic recovery; and
11

12 **WHEREAS**, these county fiscal challenges are also directly tied to state-imposed mandates
13 and in recent years reduced state reimbursement; and
14

15 **WHEREAS**, the New York State Association of Counties has identified 9 state mandates that
16 consume 90 percent of all county property taxes levied across the state (outside of New York
17 City), representing over \$4 billion in county property taxes levied. These mandates include:
18 Medicaid, Public Assistance Safety Net, Child Welfare Protective and Preventive Care, Special
19 Education Pre-School, Early Intervention, Probation, Indigent Defense, Youth Detention, and
20 Pensions; and
21

22 **WHEREAS**, these mandated and fixed employee costs can consume more than 80 percent of a
23 county’s total budget, leaving fewer local dollars that can be devoted to local programs and
24 services; and
25

26 **WHEREAS**, these State mandates are the root cause of high county property and sales taxes in
27 New York and have led to a decline in the delivery of important local services.
28

29 **NOW, THEREFORE, BE IT RESOLVED**, that Warren County hereby declares the month of
30 May to be “Mayday for Mandate Relief” to raise awareness that decisions made in Albany have
31 a direct impact on the property tax levy and local community services here in Warren County;
32 and
33

34 **BE IT FURTHER RESOLVED**, that Warren County strongly encourages the Governor and
35 State Legislature to continue working to enact meaningful mandate relief; and
36

37 **BE IT FURTHER RESOLVED**, that Warren County calls on State Lawmakers to enact
38 legislation preventing future unfunded mandates without corresponding state aid to pay for them;
39

40 **BE IT FURTHER RESOLVED**, NYSAC shall forward copies of this resolution to Governor
41 Andrew M. Cuomo, the New York State Legislature and all others deemed necessary and proper.

AGENDA
PERSONNEL COMMITTEE
JUNE 13, 2013

- I. Committee meeting called to order by Chairman.
- II. Motion to approve minutes of the prior Committee meeting.
- III. **Action Agenda**
 - 1) **Requests from Civil Service/Personnel Office:**
Request for transfer of funds.
 - 2) **Referral from the Public Safety Committee:**
Sheriff & Communications -
Request to fill vacant position of Patrol Officer # (*Annual Base Salary of \$34,996*), due to resignation. This is a non-mandated, Union position which receives no reimbursement. The filling of this position will result in a \$19,812 budgetary savings.
 - 3) **Referral from the Public Works Committee:**
DPW -
 - A) Request to create and fill a new Motor Equipment Operator Light #27 position (*Grade 5, Annual Base Salary of \$26,370*), and delete the Working Supervisor #3 position (*Grade 6, Annual Base Salary of \$27,496*), thereby amending the Departmental Table of Organization.
 - B) Request to amend the Departmental Table of Organization to delete an MEO Light position (*Grade 5, Annual Base Salary of \$26,370*) and transfer the unexpended funding for this position to the unfunded MEO Medium #23 position (*Grade 7, Annual Base Salary of \$29,031*), as well as to delete the Laborer #47 position (*Grade 2, Annual Base Salary of \$23,706*) and transfer the unexpended funding for this position to the unfunded MEO Light #16 position (*Grade 5, Annual Base Salary of \$26,370*), effective June 24, 2013.
 - C) Request to fill the vacant position of MEO Light #16 (*Grade 5, Annual Base Salary of \$26,370*) due to promotion. This is a non-mandated, Union position which receives no reimbursement. *Note: funding for this position will be provided within the existing 2013 County Budget, provided that item 3B, above, is approved.*
 - D) Request to fill the vacant position of MEO Medium #23 (*Grade 7, Annual Base Salary of \$29,031*). This is a non-mandated, Union position which receives no reimbursement. *Note: funding for this position will be provided within the existing 2013 County Budget, provided that item 3B, above, is approved.*
 - 4) **Referrals from the Social Services Committee:**
Countryside Adult Home -
 - A) Request to amend the Departmental Table of Organization to delete the position of Institutional Aide #5 (*Grade 3, Annual Base Salary of \$24,215*) and create the positions of Institutional Aide/P #4, #5 and #6 (*Grade 3, Annual Salary not to exceed \$4,843, work hours not to exceed 8 per week*).
 - B) Request to amend the Departmental Table of Organization to delete the position of Institutional Aide #9 (*Grade 3, Annual Base Salary of \$24,215*) and create the position of Institutional Aide/P #7 (*Grade 3, Annual Salary not to exceed \$7,265, work hours not to exceed 12 per week*).
 - C) Request to fill the vacant position of Cleaner (*Grade 2, Annual Base Salary of \$23,706*), due to resignation. This is a mandated, Union position which receives 50% State reimbursement and the filling of this position will result in a \$914 savings to the 2013 Budget.
 - 5) **Items to be discussed by the County Administrator:**
Proposed policy for adoption - Section 504/ADA Compliance.
- IV. **Pending Items:**
None.