

WARREN-HAMILTON COUNTIES
OFFICE FOR THE AGING
1340 STATE ROUTE
LAKE GEORGE, NEW YORK 12845

CHRISTIE SABO
DIRECTOR

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HUMAN SERVICES COMMITTEE MEETING
OFFICE FOR THE AGING AGENDA
Friday, September 25, 2015 at 10:20am

Committee Members: Chairman Edna Frasier, Dan Girard, Matt Sokol, Evelyn Wood, Ron Vanselow, James Brock, Rachel Seeber

- I. Committee meeting called to order by Chairman
- II. Motion to approve minutes of prior Committee meeting
- III. Action Agenda
 1. **Resolution Request Form #3:** To enter into a new contract with KLC Property Enhancement LLC. to provide plowing at the Bolton meal site
Rationale: Plowing the parking lot is a requirement of our lease with the church and we have not had a contract in place.
 2. **Resolution Request Form #4:** To extend the lease with the Town of Luzerne
Rationale: The lease for the meal site expires 12/31/15
 3. **Resolution Request Form #4:** To extend the lease with Cedars I, LP
Rationale: The lease for the meal site expires 12/31/15
 4. **Authorization to Attend a Meeting or Conference:** Requesting authorization for Christie Sabo to attend the annual NYSAAAA Leadership Institute
- IV. Referral/pending items- N/A
- V. Information for Discussion/Review – 2016 OFA Budget
- VI. Privilege of the Floor to discuss any additional items to come before the Committee
- VII. Motion to adjourn

Attachments:

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: Office for the Aging

DATE: 9/25/15

- (a) Is this a Result of a Bid or Request for Proposal? **No**
- (b) Purpose of Contract: **To contract with Barry Kincaid to plow at the Bolton mealsite as required in our lease agreement with the Church of St. Sacramento**
- (c) Name of Contractor: **KLC Property Enhancement LLC.**
- (d) Address of Contractor: **35 Brookside Parkway, Bolton Landing, NY 12814**
- (e) Contractor's Contact Person and Telephone Number: **Barry Kincaid 644-3132**
- (f) Has or will the Contract be provided, if so, please attach:
- (g) Commencement Date of Contract: **10/19/15**
- (h) Termination Date of Contract: **10/19/16 (annual auto renewal)**
- (i) Payment Provisions:
 - i) lump sum amount
 - ii) hourly rate amount
 - iii) total amount not to exceed **\$80 per plow, \$80 to sand**
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
- (j) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title* and Amount: **OR Capital Project OR Capital Reserve Project Number, Title, and Amount: **A6774 413 S.N.A.P. Repair/Maintenance of Bldg./Property \$1,000.00****

**Sample: A.1010 470 Legislative Board – Contract Sxx.xx
Capital Project No. H289,9550 480 – Old Jail Renovations Sxx.xx**

*as listed in budget and LOGOS

RESOLUTION REQUEST FORM NO. 4

Request for Extension of Existing Contract

DEPARTMENT NAME: **Office for the Aging**

DATE: **9/25/15**

(a) Resolution No. which Authorized the Original Contract: 766 of 2010, 40 of 2015

(b) Name of Contractor: **Town of Lake Luzerne**

(c) Address of Contractor: PO Box 370, Lake Luzerne, NY 12846

(d) Contractor's Contact Person and Telephone Number: Cynthia Sherwood,
Town Clerk 696-2711

(e) Commencement Date of Extension: 1/1/2016

(f) Termination Date of Extension: 12/31/ 2017

(g) Payment Provisions: i) lump sum amount
 ii) hourly rate amount
 iii) total amount not to exceed \$13,000 per year
 iv) how will payments be made (i.e., monthly,
 quarterly, upon completion of the project, etc.

(h) Where are the Funds for this Contract? List Budget Code (with Title), Object Code (with title), and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount: A6773 411 - Nutrit. For Elderly-War.Co -Rent-Building/Property \$ 13,000 per year (2 year lease)

RESOLUTION REQUEST FORM NO. 4

Request for Extension of Existing Contract

DEPARTMENT NAME: **Office for the Aging**

DATE: **September 25, 2015**

- (a) Resolution No. which Authorized the Original Contract: 71 of 2011
- (b) Name of Contractor: **Cedars I, LP**
- (c) Address of Contractor: 35 Evergreen Lane, Queensbury, NY 12804
- (d) Contractor's Contact Person and Telephone Number: John Hunt 802-846-5430
- (e) Commencement Date of Extension: January 1, 2016
- (f) Termination Date of Extension: December 31, 2017
- (g) Payment Provisions:
 - i) lump sum amount
 - ii) hourly rate amount
 - iii) total amount not to exceed \$16,785
 - iv) how will payments be made (i.e., monthly, quarterly, upon completion of the project, etc.
- (h) Where are the Funds for this Contract? List Budget Code (with Title), Object Code (with title), and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount: A6773 411 Nutri. For Elderly-War.Co. - Rent-Building/Property \$ 16,785 for 2016 (2017- \$17,785 and 2018- \$18,785)

SCHEDULE "A"
AUTHORIZATION TO ATTEND MEETING OR CONVENTION

Check one:

- In-State (needs Supervisory Committee authorization)
- Out-Of State (needs Board resolution)

The Human Services Committee hereby authorizes Christie Sabo
(Supervisory Committee) (Employee Name)

to attend Association on Aging in NY Leadership Institute
(Name of meeting or organization)

at Ramada Lakefront Geneva • 41 Lakefront Dr. Geneva, NY 14456
(Address)

on Oct 20- 22, 2015. Mode of transportation to be used county vehicle
(Dates) (County Vehicle or Mass Transportation)

If the mode of transportation is **not** a county vehicle or mass transportation, please explain:

Proper documentation must be attached when submitting for approval.
(Please check documents attached)

- Notice of meeting or convention including cost.

For Overnight Travel

- Room rate \$ 200 GSA* Rate \$ _____
- Meal costs - GSA* per diem rate \$ _____

*www.gsa.gov

Date: _____

Department Head Signature

Date: _____

Committee Chairman Signature

Please refer to the Warren County Travel Policy and County Vehicle Use Regulations for general policy guidelines.

Please check to request a fleet vehicle.

REQUEST FOR USE OF FLEET VEHICLE

Filing Instructions:

1. Original with voucher to Auditor.
2. Copy to Frank Morehouse if fleet vehicle is needed.
3. Copy to Clerk of the Board with Resolution Request form if out-of-state travel.
4. Copy to Purchasing with Purchase Order, If required.
5. Copy to County Administrator if credit card will be used.