

**PUBLIC WORKS COMMITTEE
DPW AGENDA
October 19, 2021**

Committee Members: *Conover*, Hogan, Dickinson, Thomas, Bruno, Geraghty and Merlino,
*Chair of the Board shall serve as an Ex-Officio member when needed in accordance with Section
C (4) of the Rules of the Board.*

I. Committee meeting called to order by Chair

II. Approval of minutes of prior Committee Meeting

III. Action Agenda/New Business Items

1. Request: New Contract
Rationale: Asbestos and Lead Consulting Services
2. Request: New Contract
Rationale: Cold Milling of Pavement
3. Request: New Contract
Rationale Construction, Reconstruction and Installation of Guide Railing
4. Request: New Contract
Rationale: Crane Services
5. Request: Amend Grant
Rationale: Increase in the Preliminary Engineering Phase H278 Middleton Bridge
6. Request: Increase Capital Project
Rationale: Increase due to increased preliminary engineering, H278 Middleton Bridge
7. Request: Amend Contract
Rationale: Consultant agreement for preliminary engineering, H278 Middleton Bridge
8. Request: Amend Grant
Rationale: Addition of the Right-of-Way Acquisition phase, H393 Johnsbury Bridges
9. Request: Increase Capital Project
Rationale: Increase due to addition Right-of-Way Acquisition phase, H393 Johnsbury Bridges
10. Request: Amend Contract
Rationale: Consultant agreement for Right-of-Way Acquisition phase, H393 Johnsbury Bridges
11. Request: Notice of Intent to Fill Position
Rationale MEO -Light # 26
12. Request: Notice of Intent to Fill Position
Rationale: MEO – Medium # 14

IV. Discussion Items:

1. 2021 Road and Bridge Project Update
2. Permit Overhaul
3. Recycleables Re-Bid
4. Salt Summit

V. Referrals/Pending Items

VI. Privilege of the floor and public comment (please allow for 15 second delay on live stream meetings)

VII. Motion to Adjourn

Attachments:

1. Resolution Request Form No. 3 – New Contract
2. Resolution Request Form No. 3 – New Contract
3. Resolution Request Form No. 3 – New Contract
4. Resolution Request Form No. 3 – New Contract

5. Resolution Request Form No. 6 – Amend Grant
6. Resolution Request Form No. 7 – Increase Capital Project
7. Resolution Request Form No. 4 – Amend Contract
8. Resolution Request Form No. 6 – Amend Grant
9. Resolution Request Form No. 7 – Increase to Capital Project
10. Resolution Request Form No. 4 – Amend Contract
11. Resolution Request Form No. 12 – Notice of Intent to Fill Position
12. Resolution Request Form No. 12 – Notice of Intent to Fill Position

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: DPW

DATE: 10/19/21

- (a) Is this a Result of a Bid or Request for Proposal? Bid
- (b) Purpose of Contract: WC 51-21 Periodic Asbestos and Lead Consulting Services (Bids to be opened Thursday, October 28, 2021)
- (c) Name of Contractor: TBD
- (d) Address of Contractor: TBD
- (e) Contractor's Contact Person and Telephone Number: TBD
- (f) Has or will the Contract be provided, if so, please attach:
- (g) Commencement Date of Contract: 1/1/2022
- (h) Termination Date of Contract: 12/31/2022 with two additional 1 year extensions available
- (i) Payment Provisions:
 - i) lump sum amount
 - ii) hourly rate amount
 - iii) total amount not to exceed
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. Completion of Project
- (j) 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: Various Projects

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: DPW

DATE: 10/19/21

- (a) Is this a Result of a Bid or Request for Proposal? Bid
- (b) Purpose of Contract: WC 53-21 Cold Milling (Bids to be opened Thursday, October 21, 2021)
- (c) Name of Contractor: TBD
- (d) Address of Contractor: TBD
- (e) Contractor's Contact Person and Telephone Number: TBD
- (f) Has or will the Contract be provided, if so, please attach:
- (g) Commencement Date of Contract: 1/1/2022
- (h) Termination Date of Contract: 12/31/2022 with two additional 1 year extensions available
- (i) Payment Provisions:
 - i) lump sum amount
 - ii) hourly rate amount
 - iii) total amount not to exceed
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. Completion of Project
- (j) 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: Various Projects

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: DPW

DATE: 10/19/21

- (a) Is this a Result of a Bid or Request for Proposal? Bid
- (b) Purpose of Contract: WC 54-21 Construction, Reconstruction of Guide Railing, Posts and Component Parts (Bids to be opened Thursday, October 28, 2021)
- (c) Name of Contractor: TBD
- (d) Address of Contractor: TBD
- (e) Contractor's Contact Person and Telephone Number: TBD
- (f) Has or will the Contract be provided, if so, please attach:
- (g) Commencement Date of Contract: 1/1/2022
- (h) Termination Date of Contract: 12/31/2022 with two additional 1 year extensions available
- (i) Payment Provisions:
 - i) lump sum amount
 - ii) hourly rate amount
 - iii) total amount not to exceed
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. Completion of Project
- (j) 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: Various Projects

RESOLUTION REQUEST FORM NO. 3

Request for New Contract

DEPARTMENT NAME: DPW

DATE: 10/19/21

- (a) Is this a Result of a Bid or Request for Proposal? Bid
- (b) Purpose of Contract: WC 59-21 Crane Services
- (c) Name of Contractor: Rozell East, Inc.
- (d) Address of Contractor: 45 Caset Road Queensbury, NY 12804
- (e) Contractor's Contact Person and Telephone Number: Kelly Sullivan
518-793-2634
- (f) Has or will the Contract be provided, if so, please attach:
- (g) Commencement Date of Contract: 1/1/2022
- (h) Termination Date of Contract: 12/31/2022 with two additional 1 year extensions available
- (i) Payment Provisions:
 - i) lump sum amount
 - ii) hourly rate amount
 - iii) total amount not to exceed
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc. Completion of Project
- (j) 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: Various Projects

WARREN COUNTY BID TABULATION SHEET

BID NO: WC 59-21 ITEM(S): CRANE SERVICES DATE: OCTOBER 7, 2021 TIME: 3:00 PM	NAME & ADDRESS OF BIDDER					
	Rozell East, Inc. Attn: Kelly Sullivan 45 Casey Road Queensbury, NY 12804 Ph: 518-793-2634 Fax: 518-615-0162					
DESCRIPTION OF ITEM			BID PRICE			
SCHEDULE 1 - CRANE EQUIPMENT LIST & HOURLY COSTS:						
26T BOOM TRUCK (4 HR MIN)			\$60.00			
40T HYD TRUCK CRANE (4 HR MIN)			\$130.00			
40T HYD TRUCK CRANE (8 HRS)			\$115.00			
60T HYD TRUCK CRANE (4 HR MIN)			\$155.00			
60T HYD TRUCK CRANE (8 HRS)			\$130.00			
70/75T HYD TRUCK CRANE (4 HR MIN)			\$225.00			
70/75T HYD TRUCK CRANE (8 HRS)			\$195.00			
90/100T HYD TRUCK CRANE (4 HR MIN)			\$400.00			
90/100T HYD TRUCK CRANE (8 HRS)			\$300.00			
140T CRANE (8 HR MIN)			\$365.00			
SCHEDULE 2 - ADDITIONAL EQUIPMENT LIST & HOURLY COSTS						
200T AT TRUCK CRANE (8 HR MIN)			\$775.00 (Includes all counterweights needed)			
275T AT TRUCK CRANE (8 HR MIN)			\$1,070.00 (Includes all counterweights needed)			
450T AT TRUCK CRANE (8 HR MIN)			\$1,660.00 (Includes all counterweights needed)			
DESCRIPTION OF ITEM			REGULAR TIME	OVER TIME	DOUBLE TIME	
SCHEDULE 3 - HOURLY LABOR COSTS:						
	Reg	Heavy High	Reg	Heavy High	Reg	Heavy High
OPERATOR - CLASS A (1/1/22-6/30/22)	\$120.00	\$126.00	\$170.00	\$176.00	\$233.00	\$236.00
LABORER - GROUP A (1/1/22-6/30/22)	\$83.00	n/a	\$120.00	n/a	\$163.00	n/a
OPERATOR - CLASS A (7/1/22-12/31/22)	\$123.00	\$129.00	\$173.00	\$179.00	\$236.00	\$239.00
LABORER - GROUP A (7/1/22-12/31/22)	\$85.00	n/a	\$122.00	n/a	\$165.00	n/a
√ JULIE A. BUTLER, PURCHASING AGENT	BID AWARDED TO:					
RESOLUTION NO.: XX of 2021	TERM: JANUARY 1, 2022 THROUGH DECEMBER 31, 2022					

RESOLUTION REQUEST FORM NO. 6

Request to Amend or Extend Existing Grant

DEPARTMENT NAME: DPW

DATE: 10/19/21

- (a) Purpose of Grant Amendment: To increase Preliminary Engineering Phase funding
- (b) Resolution No. which Authorized Original Application and Grant: 549 of 2007, 427 of 2019
- (c) Name of Grantor: NYSDOT
- (d) Address of Grantor: 50 Wolf Road, Albany, NY 12232
- (e) Grantor's Contact Person and Telephone Number: Bryan Cross 518-417-6595
- (f) Has or Will the Grant Amendment or Grant Extension be provided, if so, Please Attach? attached
- (g) Effective Date of Amendment or Extension: upon execution
- (h) Termination Date of Amendment or Extension: 8/30/2028
- (i) Total Dollar Amount Involved (not to exceed): increase of \$164,789.00
- (j) Is a Budget amendment required? If yes, please complete and submit Form No. 7.
- (k) Are the funds to go into a Capital Project or Capital Reserve Project? If yes, also complete and submit Form No. 8 or Form No. 9, as applicable.
- (l) Is a Local Share Required? If Yes, Where are the Funds? List Budget Code, Object Code, Full Title* and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount: H278.9550 280 Middleton Bridge over Schroon River

Sponsor: **County of Warren**
PIN: **1755.27** BIN: **3305150**
Comptroller's Contract No. **D031509**
Supplemental Agreement No. **2**
Date Prepared: **10/8/2021** By: **BC**
Initials

Press F1 for instructions in the blank fields:

SUPPLEMENTAL AGREEMENT No. 2 to D031509 (Comptroller's Contract No.)

This Supplemental Agreement is by and between:

the New York State Department of Transportation ("NYSDOT"), having its principal office at 50 Wolf Road, Albany, NY 12232, on behalf of New York State ("State");

and

County of Warren (the Sponsor)
Acting by and through the **Board of Supervisors**
with its office at **4028 Main Street, Warrensburg, NY 12885.**

This amends the existing Agreement between the parties in the following respects only (check applicable categories):

- Amends a previously adopted Schedule A by (check as applicable):
 - amending a project description
 - amending the contract end date
 - amending the scheduled funding by:
 - adding additional funding (check and enter the # phase(s) as applicable):
 - adding phase _____ which covers eligible costs incurred on/after / /
 - adding phase _____ which covers eligible costs incurred on/after / /
 - increasing funding for a project phase(s)
 - adding a pin extension
 - change from Non-Marchiselli to Marchiselli
 - deleting/reducing funding for a project phase(s)
 - other (_____)
- Amends a previously adopted Schedule "B" (Phases, Sub-phase/Tasks, and Allocation of Responsibility)
- Amends a previously adopted Agreement by replacing the Appendix A dated January 2014 with the Appendix A dated October 2019
- Amends the text of the Agreement as follows (insert text below):

Sponsor: **County of Warren**
PIN: **1755.27** BIN: **3305150**
Comptroller's Contract No. **D031509**
Supplemental Agreement No. **2**
Date Prepared: **10/8/2021** By: **BC**
Initials

Press F1 for instructions in the blank fields:

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed by their duly authorized officials as of the date first above written.

SPONSOR:

SPONSOR ATTORNEY:

By: _____

By: _____

Print Name: _____

Print Name: _____

Title: _____

STATE OF NEW YORK

)ss.:

COUNTY OF Warren

On this _____ day of _____, 20__ before me personally came _____ to me known, who, being by me duly sworn did depose and say that he/she resides at _____; that he/she is the _____ of the Municipal/Sponsor Corporation described in and which executed the above instrument; (except New York City) that it was executed by order of the _____ of said Municipal/Sponsor Corporation pursuant to a resolution which was duly adopted on _____ and which a certified copy is attached and made a part hereof; and that he/she signed his/her name thereto by like order.

Notary Public

APPROVED FOR NYSDOT:

**APPROVED AS TO FORM:
STATE OF NEW YORK ATTORNEY GENERAL**

BY: _____
For Commissioner of Transportation

Agency Certification: 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.

By: _____
Assistant Attorney General

Date: _____

COMPTROLLER'S APPROVAL:

By: _____
For the New York State Comptroller
Pursuant to State Finance Law '112

**SCHEDULE A – Description of Project Phase, Funding and Deposit Requirements
NYSDOT/ State-Local Agreement - Schedule A for PIN 1755.27**

OSC Municipal Contract #: <u>D031509</u>	Contract Start Date: <u>11/7/2007</u> <small>(mm/dd/yyyy)</small>	Contract End Date: <u>8/30/2028</u> <small>(mm/dd/yyyy)</small> <input type="checkbox"/> Check, if date changed from the last Schedule A
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Purpose: Original Standard Agreement Supplemental Schedule A No. 2

Agreement Type: Locally Administered Municipality/Sponsor (Contract Payee): County of Warren
 State Administered Other Municipality/Sponsor (if applicable):

State Administered List participating Municipality(ies) and the % of cost share for each and indicate by checkbox which Municipality this Schedule A applies.

<input type="checkbox"/> Municipality:	% of Cost share
<input type="checkbox"/> Municipality:	% of Cost share
<input type="checkbox"/> Municipality:	% of Cost share

Authorized Project Phase(s) to which this Schedule applies: PE/Design ROW Incidentals
 ROW Acquisition Construction/CI/CS

Work Type: BR REPLACE **County** (If different from Municipality):

Marchiselli Eligible Yes No (Check, if Project Description has changed from last Schedule A):

Project Description: BIN 3305150, Middleton Bridge over Schroon River, Warren County

Marchiselli Allocations Approved FOR ALL PHASES All totals will calculate automatically.

<small>Check box to indicate change from last Schedule A</small>	State Fiscal Year(s)	Project Phase			TOTAL
		PE/Design	ROW (RI & RA)	Construction/CI/CS	
<input checked="" type="checkbox"/>	Cumulative total for all prior SFYs	\$46,532.00	\$0.00	\$0.00	\$46,532.00
<input type="checkbox"/>	Current SFY	\$0.00	\$0.00	\$0.00	\$ 0.00
Authorized Allocations to Date		\$46,532.00	\$ 0.00	\$ 0.00	\$46,532.00

A. Summary of allocated MARCHISELLI Program Costs FOR ALL PHASES For each PIN Fiscal Share below, show current costs on the rows indicated as "Current." Show the old costs from the previous Schedule A on the row indicated as "Old." All totals will calculate automatically.

PIN Fiscal Share	"Current" or "Old" entry indicator	Federal Funding	Total Costs	FEDERAL Participating Share	STATE MARCHISELLI Match	LOCAL Matching Share	LOCAL DEPOSIT AMOUNT (Required only if State Administered)
1755.27.121 122.123	Current	STP	\$685,121.00	\$548,097.00	\$46,532.00	\$90,492.00	\$0.00
	Old	STP	\$520,332.00	\$416,266.00	\$46,532.00 *	\$57,534.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL CURRENT COSTS:			\$685,121.00	\$548,097.00	\$46,532.00	\$90,492.00	\$ 0.00

NYSDOT/State-Local Agreement – Schedule A

B. Summary of Other (including Non-allocated MARCHISELLI) Participating Costs FOR ALL PHASES For each PIN Fiscal Share, show current costs on the rows indicated as "Current." Show the old costs from the previous Schedule A on the row indicated as "Old." All totals will calculate automatically.

Other PIN Fiscal Shares	'Current' or 'Old' entry indicator	Funding Source	TOTAL	Other FEDERAL	Other STATE	Other LOCAL
1755.27.221 222.	Current	STP	\$37,215.00	\$29,772.00	\$0.00	\$7,443.00
	Old	STP	\$37,215.00	\$29,772.00	\$0.00	\$7,443.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00
TOTAL CURRENT COSTS:			\$37,215.00	\$29,772.00	\$ 0.00	\$7,443.00

C. Local Deposit(s) from Section A:	\$ 0.00
Additional Local Deposit(s)	\$
Total Local Deposit(s)	\$ 0.00

D. Total Project Costs All totals will calculate automatically.

Total FEDERAL Cost	Total STATE MARCHISELLI Cost	Total OTHER STATE Cost	Total LOCAL Cost	Total ALL SOURCES Cost
\$577,869.00	\$46,532.00	\$ 0.00	\$97,935.00	\$722,336.00

E. Point of Contact for Questions Regarding this Schedule A (Must be completed)	Name: Bryan Cross Phone No: 518-417-6595
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See Agreement (or Supplemental Agreement Cover) for required contract signatures.

NYSDOT/State-Local Agreement – Schedule A

Footnotes: (See [LPB's website](#) for link to sample footnotes)

- This Supplemental Agreement #2 adds an additional \$164,789.00 to the Design phase of the project. Additional funding is needed due to increased engineering costs incurred for Section 4(f) and Section 106 work performed.
- Supplemental Agreement #1 adds funding to the Design and ROW Incidental phases of the project.
- Marchiselli funding hereunder is limited by the amount authorized on the Comprehensive List. Additional Marchiselli funding is contingent on appropriate increase(s) to the Comprehensive List and the execution of a Supplemental Schedule A providing such additional funds.
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-
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SAMPLE RESOLUTION BY MUNICIPALITY
(Locally Administered Project)
RESOLUTION NUMBER:

A Resolution authorizing the implementation, and funding in the first instance 100% of the federal-aid and State "Marchiselli" Program-aid eligible costs, of a transportation federal-aid project, and appropriating funds therefore

WHEREAS, a Project BIN 3305150, Middleton Bridge over Schroon River, Warren County, P.I.N. 1755.27 (the Project") is eligible for funding under Title 23 U.S. Code, as amended, that calls for the apportionment of the costs such program to be borne at the ratio of 80 % Federal funds and 20 % non-federal funds; and

WHEREAS, the County of Warren desires to advance the Project by making a commitment of 100% of the non-federal share of the costs of Design & ROW Incidentals;

NOW, THEREFORE, the County of Warren duly convened does hereby

RESOLVE, that the Warren County Board of Supervisors hereby approves the above-subject project; and it is hereby further

RESOLVED, that the Warren County Board of Supervisors hereby authorizes the County of Warren to pay in the first instance 100% of the federal and non-federal share of the cost of Design & ROW Incidentals work for the Project or portions thereof; and it is further

RESOLVED, that the sum of \$557,547.00 has previously been appropriated from the _____ and made available to cover the cost of participation in the above phases of the Project; and it is further

RESOLVED, that the additional sum of \$164,789.00 is hereby appropriated from the _____ and made available to cover the cost of participation in the above phases of the Project; and it is further

RESOLVED, that in the event the full federal and non-federal share costs of the project exceeds the amount appropriated above, the Warren County Board of Supervisors shall convene as soon as possible to appropriate said excess amount immediately upon the notification by the New York State Department of Transportation thereof, and it is further

RESOLVED, that the Chairman of the Board of Supervisors of Warren County be and is hereby authorized to execute all necessary Agreements, certifications or reimbursement requests for Federal Aid and/or Marchiselli Aid on behalf of the County of Warren with the New York State Department of Transportation in connection with the advancement or approval of the Project and providing for the administration of the Project and the municipality's first instance funding of project costs and permanent funding of the local share of federal-aid and state-aid eligible Project costs and all Project costs within appropriations therefore that are not so eligible, and it is further

RESOLVED, that a certified copy of this resolution be filed with the New York State Commissioner of Transportation by attaching it to any necessary Agreement in connection with the Project and it is further

RESOLVED, this Resolution shall take effect immediately

STATE OF NEW YORK }
 } ss.:
COUNTY OF WARREN }

I, the undersigned,

DO HEREBY CERTIFY that I have compared the above copy of a resolution adopted _____, 2021 with the original record in this office and that the same is a correct transcript thereof and of the whole of said original record.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of said _____

This ____ day of _____, 20__.

Clerk

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: 10/19/21

- (a) Exact Title and Number of Project*: H278 Middleton Bridge over Schroon River
(Towns of Chester, Bolton, Horicon & Warrensburg)

- (b) Is this a Capital Project? Yes

- (c) Is this a Capital Reserve Project? No

- (d) Amount of Increase (if applicable): \$156,549.00

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

- (f) Source of Funding (if Increase) (including name & title of codes, etc.):
\$131,831.00 Federal Share
\$ 24,718.00 State Share
\$ 0.00 Local Match (no additional funds needed at this time)

- (g) Changes in Funding (if Amendment):

- (h) Purpose of Increase or Decrease or Amendment: to fund additional preliminary
engineering services

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Existing Contract

DEPARTMENT NAME: DPW

DATE: 10/19/21

- (a) Purpose of Contract Change: To amend contract to include additional preliminary engineering services
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: 810 of 2007, 428 of 2019
- (c) Name of Contractor: Foit-Albert Associates.
- (d) Address of Contractor: Hanover Square 435 New Karner Road, Albany, NY 12205
- (e) Contractor's Contact Person and Telephone Number: Gerald Sentz
(716) 856-3961
- (f) Commencement Date of Extension: Upon Execution
- (g) Termination Date of Extension: Upon Completion
- (h) Payment Provisions:
 - i) lump sum amount
 - ii) hourly rate amount
 - iii) total amount not to exceed increase of \$ 164,789.00
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
- (i) 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: H278.9550 280 Middleton Bridge over Schroon River

IN WITNESS WHEREOF, the parties have duly executed this Agreement effective the day and year first above written.

Reference: Municipality Contract # _____

<u>Municipality – Warren County</u>	<u>Consultant</u>
By: _____	By: _____ Gerard J. Sentz, P.E.
Title: _____	Title: <u>Vice President, Engineering</u>
Date: _____	Date: _____

ACKNOWLEDGEMENT OF WARREN COUNTY

STATE OF NEW YORK

ss:

COUNTY OF WARREN

On this _____ day of _____, 20__ before me, the subscriber, personally came _____ to me known, who, being by me duly sworn, did depose and say; the he/she resides in _____, New York; that he/she is the _____ of the _____, the corporation described in and which executed the foregoing instrument; that he/she is the authorized with the execution of the matter herein provided for, and that he/she signed and acknowledged the said instrument in his/her position as a duly authorized representative of Municipality.

Notary Public, _____ County, N.Y.

ACKNOWLEDGEMENT OF THE CONSULTANT

STATE OF NEW YORK

ss:

COUNTY OF

On this _____ day of _____, 20 ____ before me personally came _____ to me known and known to me to be the person described in and who executed the foregoing instrument and he/she acknowledged to me that he executed same.

Notary Public, _____ County, N.Y.

EXHIBIT "A"
SALARY TABLES
FOIT-ALBERT ASSOCIATES, P.C.

Middleton Bridge over Schroon River
Supplemental No. 2
Warren County

JOB TITLE	ASCE (A) /NICET (N) GRADE	AVERAGE HOURLY RATES			
		EXISTING RATES	PROJECTED RATE	MAX RATE	OVERTIME CATEGORY
		January 2021	June 2021	2022	
Principal	VIII (A)	\$94.50	\$94.50	99.23	A
Senior Project Manager	VII (A)	\$79.30	\$79.30	83.27	A
Project Manager	VI (A)	\$55.50	\$55.50	60.90	A
Sr. Engineer	V (A)	\$49.50	\$49.50	54.60	A
Engineer	III (A)	\$37.00	\$37.00	39.90	B
Jr. Engineer	I/II (A)	\$28.67	\$28.67	33.60	B
Senior Environmental Scientist	IV (N)	\$43.00	\$43.00	45.15	B
Environmental Scientist	III (N)	\$34.25	\$34.25	38.33	B
Sr. CADD Designer	III (N)	\$38.50	\$38.50	40.43	B
CADD Designer	I/II (N)	\$35.00	\$35.00	36.75	B
Team Leader	V (A)	\$55.13	\$55.13	62.74	B
Assistant Team Leader	II (N)	\$36.00	\$36.00	37.80	C
Survey Manager	VI (A)	\$51.80	\$51.80	54.39	B
Party Chief (Office)	III (N)	\$33.25	\$33.25	34.91	B
Instrumentperson (Office)	II (N)	\$22.48	\$22.48	24.94	A
Rodperson (Office)	II (N)	\$22.48	\$22.48	24.94	A
Senior Survey Technician	III (N)	\$38.50	\$38.50	40.43	C
Party Chief (Field)*	III (N)	\$33.25	\$33.25	\$34.91	C
Instrumentperson (Field)	II (N)	\$22.48	\$22.48	24.94	C
Rodperson (Field)*	II (N)	\$22.48	\$22.48	24.94	C

NOTES:

Hourly rates shall not exceed those shown above

** Prevailing Wage Rates Apply

OVERTIME POLICY:

Category A - No overtime compensation.

Category B - overtime compensated at straight time rate.

Category C - overtime compensated at straight time rate x 1.50

Overtime applies to hours worked in excess of the normal working hours of 40 hours per week

* Overtime applies to hours worked in excess of the normal working hours of 8 hours per day

Prevailing Wage Rates - The difference between the required prevailing wage rate and the normal hourly rate is considered a direct cost:

County(s): X

		Prevailing Wage	Projected Rate	Normal Rate	Difference	Payroll Additive	Total
Party Chief (Field)	III (N)	\$41.51	\$43.17	\$33.25	\$9.92	\$1.49	\$11.41
Instrumentperson (Field)	II (N)	\$39.15	\$40.72	\$22.48	\$18.24	\$2.74	\$20.97
Rodperson (Field)	II (N)	\$27.10	\$28.18	\$22.48	\$5.70	\$0.86	\$6.56

Supplemental Benefits are also considered direct costs. The net benefit is the difference between required amounts and deductions made through exiting plans (overhead):

		Prevailing Benefit	Normal (Overhead)	Difference (Net)	Wage Adjustment	Payroll Additive	Total
Party Chief (Field)	III (N)	\$26.80	\$4.00	\$22.80	\$0.00	\$3.42	\$26.22
Instrumentperson (Field)	II (N)	\$26.80	\$4.00	\$22.80	\$0.00	\$3.42	\$26.22
Rodperson (Field)	II (N)	\$26.80	\$4.00	\$22.80	\$0.00	\$3.42	\$26.22

EXHIBIT "D"
SUMMARY
FOIT-ALBERT ASSOCIATES, P.C.

Middleton Bridge over Schroon River
Supplemental No. 2
Warren County

DESIGN

I.	DIRECT TECHNICAL LABOR		\$59,795
IA	DIRECT TECHNICAL LABOR (Premium Portion of Overtime)		\$0
IIA	DIRECT NON-SALARY COST (Excluding Sub-Consultant)		\$0
IIB	DIRECT NON-SALARY COST (Sub-Consultant)		\$ 5,400
III	OVERHEAD	1.38	\$ 82,517
IV	FIXED FEE	12.0%	\$ 17,077
			<hr/>
		TOTAL	\$ 164,789

RESOLUTION REQUEST FORM NO. 6

Request to Amend or Extend Existing Grant

DEPARTMENT NAME: DPW

DATE: 10/19/21

- (a) Purpose of Grant Amendment: Supplemental Agreement No. 1 for Replacement of Dippikill Road and Glen Creek Road over Glen Creek, Town of Johnsbury
- (b) Resolution No. which Authorized Original Application and Grant: 570 of 2019
- (c) Name of Grantor: NYSDOT
- (d) Address of Grantor: 50 Wolf Road, Albany, NY 12205
- (e) Grantor's Contact Person and Telephone Number: Brian Cross 518-417-6595
- (f) Has or Will the Grant Amendment or Grant Extension be provided, if so, Please Attach? Yes
- (g) Effective Date of Amendment or Extension: Upon Execution
- (h) Termination Date of Amendment or Extension: Upon Completion
- (i) Total Dollar Amount Involved (not to exceed): increase of \$6,708.00
- (j) Is a Budget amendment required? yes If yes, please complete and submit Form No. 7.
- (k) Are the funds to go into a Capital Project or Capital Reserve Project? Yes
If yes, also complete and submit Form No. 8 or Form No. 9, as applicable.
- (l) Is a Local Share Required? Yes If Yes, Where are the Funds? List Budget Code, Object Code, Full Title* and Amount **OR** Capital Project **OR** Capital Reserve Project Number and Title and Amount: H393.9550 280 Johnsbury Bridges

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

Sponsor: **County of Warren**
PIN: **1761.43** BIN: **3305490; 3305500**
Comptroller's Contract No. **D040064**
Supplemental Agreement No. **1**
Date Prepared: **10/8/2021** By: **BC**
Initials

Press F1 for instructions in the blank fields:

SUPPLEMENTAL AGREEMENT No. 1 to D040064 (Comptroller's Contract No.)

This Supplemental Agreement is by and between:

the New York State Department of Transportation ("NYSDOT"), having its principal office at 50 Wolf Road, Albany, NY 12232, on behalf of New York State ("State");

and

the County of Warren (the Sponsor)
Acting by and through the **the Board of Supervisors**
with its office at **4028 Main Street, Warrensburg, NY 12885.**

This amends the existing Agreement between the parties in the following respects only (check applicable categories):

- Amends a previously adopted Schedule A by (check as applicable):
 - amending a project description
 - amending the contract end date
 - amending the scheduled funding by:
 - adding additional funding (check and enter the # phase(s) as applicable):
 - adding phase **ROW Acq** which covers eligible costs incurred on/after / /
 - adding phase _____ which covers eligible costs incurred on/after / /
 - increasing funding for a project phase(s)
 - adding a pin extension
 - change from Non-Marchiselli to Marchiselli
 - deleting/reducing funding for a project phase(s)
 - other (_____)
- Amends a previously adopted Schedule ~~A~~" (Phases, Sub-phase/Tasks, and Allocation of Responsibility)
- Amends a previously adopted Agreement by replacing the Appendix A dated January 2014 with the Appendix A dated October 2019
- Amends the text of the Agreement as follows (insert text below):

Sponsor: **County of Warren**
PIN: **1761.43** BIN: **3305490; 3305500**
Comptroller's Contract No. **D040064**
Supplemental Agreement No. **1**
Date Prepared: **10/8/2021** By: **BC**
Initials

Press F1 for instructions in the blank fields:

IN WITNESS WHEREOF, the parties have caused this Agreement to be executed by their duly authorized officials as of the date first above written.

SPONSOR:

SPONSOR ATTORNEY:

By: _____

By: _____

Print Name: _____

Print Name: _____

Title: _____

STATE OF NEW YORK

)ss.:

COUNTY OF **Warren**

On this _____ day of _____, 20__ before me personally came _____ to me known, who, being by me duly sworn did depose and say that he/she resides at _____; that he/she is the _____ of the Municipal/Sponsor Corporation described in and which executed the above instrument; (except New York City) that it was executed by order of the _____ of said Municipal/Sponsor Corporation pursuant to a resolution which was duly adopted on _____ and which a certified copy is attached and made a part hereof; and that he/she signed his/her name thereto by like order.

Notary Public

APPROVED FOR NYSDOT:

APPROVED AS TO FORM:
STATE OF NEW YORK ATTORNEY GENERAL

BY: _____
For Commissioner of Transportation

Agency Certification: 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.

By: _____
Assistant Attorney General

Date: _____

COMPTROLLER'S APPROVAL:

By: _____
For the New York State Comptroller
Pursuant to State Finance Law ' 112

**SCHEDULE A – Description of Project Phase, Funding and Deposit Requirements
 NYSDOT/ State-Local Agreement - Schedule A for PIN 1761.43**

OSC Municipal Contract #: D040064	Contract Start Date: 1/6/2020 _(mm/dd/yyyy) Contract End Date: 8/31/2028 _(mm/dd/yyyy) <input type="checkbox"/> Check, if date changed from the last Schedule A
---	--

Purpose: Original Standard Agreement Supplemental Schedule A No. 1

Agreement Type: Locally Administered Municipality/Sponsor (Contract Payee): County of Warren
 Other Municipality/Sponsor (if applicable): _____

State Administered *List participating Municipality(ies) and the % of cost share for each and indicate by checkbox which Municipality this Schedule A applies.*

<input type="checkbox"/> Municipality:	% of Cost share
<input type="checkbox"/> Municipality:	% of Cost share
<input type="checkbox"/> Municipality:	% of Cost share

Authorized Project Phase(s) to which this Schedule applies: PE/Design ROW Incidentals
 ROW Acquisition Construction/CI/CS

Work Type: BR REPLACE **County (If different from Municipality):** _____

Marchiselli Eligible Yes No *(Check, if Project Description has changed from last Schedule A):*
Project Description: Dippikill Road over Glen Creek (BIN 3305490) & Glen Creek Road over Glen Creek (BIN 3305500)
 Bridge Replacements, Town of Johnsbury, Warren County

Marchiselli Allocations Approved FOR ALL PHASES *All totals will calculate automatically.*

<i>Check box to indicate change from last Schedule A</i>	State Fiscal Year(s)	Project Phase			TOTAL
		PE/Design	ROW (RI & RA)	Construction/CI/CS	
<input checked="" type="checkbox"/>	Cumulative total for all prior SFYs	\$72,700.00	\$0.00	\$0.00	\$72,700.00
<input checked="" type="checkbox"/>	Current SFY	\$0.00	\$75,700.00	\$0.00	\$75,700.00
Authorized Allocations to Date		\$72,700.00	\$75,700.00	\$ 0.00	\$148,400.00

A. Summary of allocated MARCHISELLI Program Costs FOR ALL PHASES *For each PIN Fiscal Share below, show current costs on the rows indicated as "Current.". Show the old costs from the previous Schedule A on the row indicated as "Old." All totals will calculate automatically.*

PIN Fiscal Share	"Current" or "Old" entry indicator	Federal Funding	Total Costs	FEDERAL Participating Share	STATE MARCHISELLI Match	LOCAL Matching Share	LOCAL DEPOSIT AMOUNT (Required only if State Administered)
1761.43.121	Current	STP	\$394,729.00	\$315,783.00	\$59,209.00	\$19,737.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00 *	\$0.00	\$0.00
1761.43.221	Current		\$16,895.00	\$13,516.00	\$2,534.00	\$845.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
.	Current		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTAL CURRENT COSTS:			\$411,624.00	\$329,299.00	\$61,743.00	\$20,582.00	\$ 0.00

NYS DOT/State-Local Agreement – Schedule A

B. Summary of Other (including Non-allocated MARCHISELLI) Participating Costs FOR ALL PHASES For each PIN Fiscal Share, show current costs on the rows indicated as "Current.". Show the old costs from the previous Schedule A on the row indicated as "Old." All totals will calculate automatically.

Other PIN Fiscal Shares	'Current' or 'Old' entry indicator	Funding Source	TOTAL	Other FEDERAL	Other STATE	Other LOCAL
1761.43.121	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old	STP	\$389,916.00	\$311,933.00	\$0.00	\$77,983.00
1761.43.221	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old	STP	\$15,000.00	\$12,000.00	\$0.00	\$3,000.00
	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00
	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00
	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00
	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00
	Current		\$ 0.00	\$0.00	\$0.00	\$0.00
	Old		\$ 0.00	\$0.00	\$0.00	\$0.00
TOTAL CURRENT COSTS:			\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

C. Local Deposit(s) from Section A:	\$ 0.00
Additional Local Deposit(s)	\$
Total Local Deposit(s)	\$ 0.00

D. Total Project Costs All totals will calculate automatically.

Total FEDERAL Cost	Total STATE MARCHISELLI Cost	Total OTHER STATE Cost	Total LOCAL Cost	Total ALL SOURCES Cost
\$329,299.00	\$61,743.00	\$ 0.00	\$20,582.00	\$411,624.00

E. Point of Contact for Questions Regarding this Schedule A (Must be completed)	Name: <u>Bryan Cross</u> Phone No: <u>518-417-6595</u>
--	---

See Agreement (or Supplemental Agreement Cover) for required contract signatures.

NYS DOT/State-Local Agreement – Schedule A

Footnotes: (See [LPB's website](#) for link to sample footnotes)

- This Supplemental #1 adds the ROW Acquisition phase to the project and corrects the allocation of funds in the Design and ROW phases from the master agreement. Total Design funds = \$394,729.00, total ROW funds = \$16,895.00. ROW Acquisition = \$6,708.00
- SA#1 adds approved Design and ROW Marchiselli funds to the project. Approved Design Marchiselli is for the 20/21 SFY, approved ROW is for the 21/22 SFY.
- This Master Agreement is for the Design and ROW Incidentals phases of the project. Preliminary Design Phase I-IV (Authorize) = \$189,144.00; Detail Design Phase V-VI(AC) = \$200,772.00; ROW Incidentals = \$15,000.00.
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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: 10/19/21

- (a) Exact Title and Number of Project*: H393 Johnsbury Bridges (Dippikill Road & Glen Creek Road over Glen Creek - Town of Johnsbury)
- (b) Is this a Capital Project? Yes
- (c) Is this a Capital Reserve Project? No
- (d) Amount of Increase (if applicable): \$6,708.00
- (e) Amount of Decrease (if applicable): N/A
- (f) Source of Funding (if Increase) (including name & title of codes, etc.):
\$5,366.00 Federal
\$1,006.00 State
\$ 129.00 Local Match (D9950 910 Transfers-Capital Projects)
- (g) Changes in Funding (if Amendment):
- (h) Purpose of Increase or Decrease or Amendment: to fund Right of Way Acquisition Phase

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Existing Contract

DEPARTMENT NAME: DPW

DATE: 10/19/21

- (a) Purpose of Contract Change: Amend consultant contract to include Right of Way Acquisition Phase
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: 571 of 2019
- (c) Name of Contractor: Creighton Manning
- (d) Address of Contractor: 2 Winners Circle Albany, NY 12205
- (e) Contractor's Contact Person and Telephone Number: Stephan Godlewski
518-689-1843
- (f) Commencement Date of Extension: Upon Execution
- (g) Termination Date of Extension: Upon Completion
- (h) Payment Provisions:
 - i) lump sum amount
 - ii) hourly rate amount
 - iii) total amount not to exceed increase of \$5,908.00
 - iv) how will payments be made (i.e. monthly, quarterly, upon completion of the project, etc.
- (i) 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: H393.9550 280 Johnsbury Bridges

EXECUTIVE SUMMARY

SUPPLEMENTAL CONSULTANT AGREEMENT #1 - RIGHT OF WAY ACQUISITION PIN 1761.43 – Dippikill Road over Glen Creek & Glen Creek Road over Glen Creek Bridge Replacement; Town of Johnsburg, Warren County, NY

This supplemental consultant agreement covers the completion right-of-way acquisition effort for the Dippikill Road over Glen Creek (BIN 3305490) & Glen Creek Road over Glen Creek (BIN 3305500) Bridge Replacement Project. Creighton Manning Engineering, LLP has been designated by the Warren County Department of Public Works to progress this Locally Administered Federal-Aid project and has prepared the attached Consultant Agreement, Scope of Services and Fee. Engineering and right-of-way incidentals are part of the base agreement. Construction Inspection/Administration will be added by a supplemental agreement.

Project Description:

The project is intended to replace the existing structures carrying Dippikill Road bridge (BIN 3305490) and Glen Creek Road bridge (BIN 3305500) over the Glen Creek. The project includes replacing the existing bridges with new single span bridges founded on piles, which improves the hydraulics and provides a 75-year design life. The Dippikill Road bridge will be replaced by closing Dippikill Road and utilizing an offsite detour. The Glen Creek Road bridge will be replaced by closing the existing crossing and constructing an onsite temporary detour structure. The project will require acquisition of right-of-way.

The project scope required to complete the project in accordance with the Procedures for Locally Administered Federal Aid Projects is included in the Scope of Services and Cost Proposal.

Schedule and Construction Cost

It is anticipated the project will be ready for PS&E in December 2021 with construction starting in March 2022. The project is currently programmed for \$2,729,000 on the A/GFTC TIP and the NYSDOT STIP (BridgeNY). The programmed funding for construction (including construction inspection) is \$2.256 million. This proposal for right-of-way acquisition is for \$5,908.

A summary of the current funding and the costs included in this proposal are detailed below:

Phase	Base Agreement	Supplemental Agreement 1	Summary
Preliminary and Final Engineering	\$394,729	\$0	\$394,729
Right-of-Way Incidentals	\$10,187	\$0	\$10,187
Right-of-Way Acquisition	\$0	\$5,908	\$5,908
Total	\$404,916	\$5,908	\$410,824

Attachment A
Project Description and Funding

PIN: 1761.43

Term of Agreement Ends: December 31, 2022

BIN: 3305490 & 3305500

Main Agreement Amendment to Agreement Supplement to Agreement [#1]

Phase of Project Consultant to work on:

P.E./Design ROW Incidentals ROW Acquisition Construction, C/I, & C/S

Dates or term of Consultant Performance:

Start Date: October 1, 2021

Finish Date: December 31, 2022

PROJECT DESCRIPTION:

**Dippikill Road over Glen Creek & Glen Creek Road over Glen Creek Bridge
Replacement**

Project Location:

**Town of Johnsburg
Warren County, New York**

Consultant Work Type(s): See Attachment B for more detailed Scope of Services.

MAXIMUM AMOUNT OF FUNDS FOR ALL COMPENSATION PAYABLE UNDER THIS AGREEMENT FOR THE SCOPE OF WORK DESCRIBED IN ATTACHMENT B FOR THE PROJECT DESCRIBED IN THIS ATTACHMENT A, OTHERWISE IN ACCORDANCE WITH THE CHOSEN METHOD OF COMPENSATION AND OTHER TERMS OF THIS AGREEMENT:

Base Agreement: \$404,916

Supplemental #1: \$5,908

Maximum Amount Payable: \$410,824

**Attachment C
Summary of Costs**

**Creighton Manning Engineering, LLP
PIN 1761.43**

**Dippikill Road over Glen Creek & Glen Creek Road over Glen Creek Bridge Replacement
Town of Johnsbury, Warren County, New York**

		PIN 1761.43.221	PIN 1761.43.222	PIN 1761.43
		(ROW Incidentals)	(ROW Acquisition)	Total
Item I, Direct Technical Salaries (estimated) (subject to audit)	Office			\$ -
	Field			\$ -
				\$ -
Item IB, Direct Technical Salaries Premium Portion of Overtime (estimated) (subject to audit)				\$ -
Item II, Direct Non-Salary Cost (estimated) (subject to audit)				\$ -
Item II, Direct Non-Salary Cost (estimated) (Sub-Contractor Cost) (subject to audit)				\$ -
	\$ -			
	\$ -			
Item IV, Overhead (estimated) (subject to audit)	Office (119%)			\$ -
	Field (109%)			\$ -
				\$ -
Item V, Fixed Fee (negotiated)				\$ -
Item II, Direct Non-Salary Cost (estimated) (Sub-Consultant Cost) (subject to audit)		\$ -	\$ 5,908.00	\$ 5,908.00
	\$ -			
	RK Hite - ROW Acquisition \$ 5,908.00			
ITEM VI - Maximum Amount Payable		\$ -	\$ 5,908	\$ 5,908

RESOLUTION REQUEST FORM NO. 12

Schedule "A"

NOTICE OF INTENT TO FILL VACANT POSITION

This notice of intent is filed whenever a department head plans to fill an existing funded position in their budget that is vacated due to a retirement, resignation, termination or promotion. This notice may not be used for requests to create a new position. For complete instructions on the procedure to be followed, see the reverse of this form.

DEPARTMENT HEAD COMPLETES THIS SECTION

Department: Public Works Payroll Dept. No: 19.63
Title of Position: MEO (L) #26 Base Salary of Position: \$35,491 Grade: 7
Filling at Step # (If Known):
Budget code and title: D.5110 MEO (L) #26 Union [checked] Non-Union []
This position is vacated due to: [checked] Retirement [] Resignation [] Termination [] Promotion [] Other []
Employee No./Last Name: 5804/HAYES Date of Vacancy: 09/30/2021
Is this position mandated? [] Yes [checked] No Is the position reimbursable? [] Yes [checked] No
Source of reimbursement: [] Federal [] State [] Other []

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

[] Competitive-active eligible list [] Competitive-no list (hiring would be provisional) [checked] Non-Competitive [] Other []
Actual Impact to Budget Report will be provided monthly by Human Resources Director.
Candidate's qualifications must be approved by Personnel Officer prior to hiring.
Human Resources Director has approved this form when initialed.

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

[checked] The Administrator has no objection to the filling of the vacancy.
[] The Administrator objects to the filling of the vacancy.

Administrator Signature [Signature] Date 10/12/21

BUDGET OFFICER COMPLETES THIS SECTION

[checked] The Budget Officer has no objection to the filling of the vacancy.
[] The Budget Officer objects to the filling of the vacancy.

Budget Officer Signature Frank E. Thomas Date 10/14/21

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Public Works

[checked] The committee has no objection to the filling of the vacancy.
[] The committee objects to the filling of the vacancy.
[] In the case of an emergency, Committee Chair has no objection to the filling of the vacancy.
[] In the case of an emergency, Committee Chair objects to the filling of the vacancy.

Ranking Committee Member Signature Verbally approved by R. Gonzalez Date 10/20/21

RESOLUTION REQUEST FORM NO. 12

Schedule "A"

NOTICE OF INTENT TO FILL VACANT POSITION

This notice of intent is filed whenever a department head plans to fill an existing funded position in their budget that is vacated due to a retirement, resignation, termination or promotion. This notice may not be used for requests to create a new position. For complete instructions on the procedure to be followed, see the reverse of this form.

DEPARTMENT HEAD COMPLETES THIS SECTION

Department: Public Works Payroll Dept. No: 19.63
Title of Position: MEO (M) #14 Base Salary of Position: \$38,251 Grade: 9
Filling at Step # (If Known):
Budget code and title: D.5110 County Roads.Maintenance of Roads Union Non-Union
This position is vacated due to: Retirement Resignation Termination Promotion Other
Employee No./Last Name: #11265/ Morchouse Date of Vacancy: 09/27/2021
Is this position mandated? Yes No Is the position reimbursable? Yes No
Source of reimbursement: Federal State Other

CIVIL SERVICE STATUS AND HUMAN RESOURCES DIRECTOR APPROVAL

Competitive-active eligible list Competitive-no list (hiring would be provisional) Non-Competitive Other
Actual Impact to Budget Report will be provided monthly by Human Resources Director.
Candidate's qualifications must be approved by Personnel Officer prior to hiring.
Human Resources Director has approved this form when initialed. 10/12/21

COUNTY ADMINISTRATOR COMPLETES THIS SECTION

The Administrator has no objection to the filling of the vacancy.
The Administrator objects to the filling of the vacancy.
Administrator Signature Date 10/12/21

BUDGET OFFICER COMPLETES THIS SECTION

The Budget Officer has no objection to the filling of the vacancy.
The Budget Officer objects to the filling of the vacancy.
Budget Officer Signature Frank E. Thomas Date 10/14/21

SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee Public Works
The committee has no objection to the filling of the vacancy.
The committee objects to the filling of the vacancy.
In the case of an emergency, Committee Chair has no objection to the filling of the vacancy.
In the case of an emergency, Committee Chair objects to the filling of the vacancy.
Ranking Committee Member Signature Verbally approved by R. Conover Date 10/20/21