

HEALTH SERVICES COMMITTEE
OFFICE FOR THE AGING
November 18, 2025

COMMITTEE MEMBERS: Strainer, Runyon, Gilligan, Bruno, Patchett, Wild, and Thomas
- 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. Privilege of the floor and public comment
- IV. Action Agenda/New Business Items:
 1. Request: Submit '24-'25 Annual Update to the Four Year Plan to the New York State Office for the Aging.
Rationale: The Annual Update reflects the budget for the 4/1/24-3/31/25 time frame. The Annual Update was released on 9/3/25 and was due on 10/31/25.
 2. Request: Amend contract with KLC Property Management for snow removal at the Bolton Meal Site to: Snow Plowing-\$85/occurrence; Sanding-\$85/occurrence; Shovel Entrance-\$20/occurrence; Snow Removal-\$200/hour per machine
Rationale: KLC Property has not had an increase in two years.
 3. Request: Amend the Warren County budget to reflect an increase in Unmet Need funding for 4/1/25-3/31/26 in the amount of \$330,000.
Rationale: We were notified that we would receive additional Unmet Need funding for program year 4/1/25-3/31/26 to address needs of seniors in Warren and Hamilton County.
- V. Discussion Items:
- VI. Referrals/Pending Items:
- VII. Privilege of the floor and public comment
- VIII. Motion to adjourn

Attachments:

1. 20 Misc – Submit '24-'25 Annual Update to NYSOFA
2. 04 Amend Existing Contract – KLC Property Management
3. 07 Amend County Budget – Unmet Need Funding

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: Warren/Hamilton Counties Office for the Aging

DATE: 10/15/2025

- (a) Purpose of Request: **Submit '24-'25 Annual Update to the Four Year Plan to NYSOFA.**

- (b) Details: **We are required to submit and Annual Update to the New York State Office for the Aging each year to the Four Year Plan. The '24-'25 Annual Update was released on September 3rd and due October 31st, 2025.**

- (c) Previous Resolution Number:

- (d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: **N/A**

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

* as listed in budget and LOGOS

RESOLUTION REQUEST FORM NO. 4

Request for Extending, Rescinding or Amending Existing Contract

DEPARTMENT NAME: OFA

DATE: 10/16/2025

- (a) Purpose of Contract Change: **Amend prices to reflect the following: Snow Plowing-\$85/occurrence; Sanding-\$85/occurrence; Shovel Entrance-\$20/occurrence; Move Snow-\$200/hour per machine**
- (b) Resolution Number, or Numbers if Amended, which Authorized the Original Contract: **Resolution 517 of 2015; 352 of 2017**
- (c) Name of Contractor: **KLC Property Enhancement, LLC**
- (d) Address of Contractor: **35 Brookside Drive, Bolton Landing, NY 12814**
- (e) Contractor's Contact Person and Telephone Number: **Barbara Kincaid, PH#(518)361-1998, klctrees@aol.com**
- (f) Commencement Date of Extension: **10/19/25**
- (g) Termination Date of Extension: **10/18/26, with option for one year renewals**
- (h) 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. **As Invoiced**)
- (i) Where are the Funds for this Contract? List Budget Code, Object Code, Full Title* and Amount: **OR Capital Project OR Capital Reserve Project Number, and Title, and Amount: A.6772.413 Warren County Repair & Maint-Bldg/Property**

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

*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 FOR THE AGING

DATE: 11/4/2025

(a) Purpose of Amendment:

Increase Warren County budget to include additional Unmet Needs funding received from NYSOFA (New York State Office for the Aging).

This will be an increase in revenue only that will reduce the Warren County match.

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

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

A.6772.3787(\$330,000.00) Warren County OFA Unmet Need [Total budget will be \$450,000]