

**PUBLIC WORKS COMMITTEE
SOLID WASTE & RECYCLING
October 22, 2025**

Committee Members: CONOVER, Strainer, Bruno, Bean, Crocitto, Turner and Merlino

- I. Committee Meeting Call 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**
 1. Request: Miscellaneous Request to ratify the actions of the Chairman of the Board for to apply for a grant application – DEC MWRR
Rationale: Reimbursement for 50% of yearly ReTRAC software cost
 2. Request: Miscellaneous
Rationale: Increase in Hauling Rates and Tipping fees within the MOU's with each Town.
 3. Request: Transfer of Funds
Rationale: to cover the cost associated with overtime for hauling municipal solid waste.
- V. Information for Discussion/Review**
 1. Working Group - Update
 2. 2026 hauling rates
- VI. Referrals/Pending Items**
- VII. Privilege of the floor and public comment**
- VIII. Motion to Adjourn**

Attachments:

1. Resolution Request No. 20 – Miscellaneous
2. Resolution Request No. 20 – Miscellaneous
3. Resolution Request No. 10a – Transfer of Funds

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: DPW - Solid Waste

DATE: 10/22/25

- (a) Purpose of Request: Ratify the actions of the Chairman of the Board of Supervisors in approving the submission of an application and if received, execution of the grant for the New York State DEC's Municipal Waste Reduction and Recycling Program

- (b) Details: The New York State DEC's has released it's next round of the MWRC grant funding program. The grant would be for \$7,500 for Re-TRAC software used to assist the County with their private hauling permitting, data collection and material management. The reason for the actions of the Chairman to be ratified is because the due date for the submission is October 31, 2025, before the November 21, 2025 board meeting.

- (c) Previous Resolution Number: na

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

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

* as listed in budget and LOGOS

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: DPW

DATE: 10/22/25

(a) Purpose of Request: Authorizing Memorandum of Understanding between Warren County and the Towns within Warren County for hauling services provided by the Warren County DPW in 2026. The 2026 rate will increase from \$2.76 to \$3.14/mile. This MOU will outline hauling costs for each town based on Warren County's operating expenses and the monthly reimbursement process, in a form to be approved by the County Attorney's office. Tipping fees will reflect the year 2 rates from bid WC 51-54. The rate for 2026 will be \$66.50/ton for Municipal Solid Waste (MSW), \$85/ton for Construction & Demolition (C&D), and \$95/ton for Recyclables.

(b) Details: In an effort to reduce rising costs towns have faced with private hauling from transfer stations, to have better tracking data for waste volume, and improve inventory control over county owned waste containers, Warren County is continuing its hauling operation effective January 1, 2026. In addition to hauling fees reflective of Warren County's operating expenses, this MOU will include the process for towns to reimburse the county for the tipping fees secured through the Warren County bid.

(c) Previous Resolution Number: 368 of 2024

(d) Where are the Funds (if required)? List Budget Code, Object Code, Full Title* and Amount: A 1628.470

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

* as listed in budget and LOGOS

REQUEST FOR TRANSFER OF FUNDS

TO: AMANDA ALLEN, CLERK, WARREN COUNTY BOARD OF SUPERVISORS

FROM: DPW - Solid Waste
Name of Department

SIGNED: _____ DATE: 9/26/2024

<u>FROM CODE</u>	<u>TITLE</u>	<u>TO CODE</u>	<u>TITLE</u>	<u>AMOUNT</u>
A.1628 435	Medical Fees	A.1628 120	Salaries - Overtime	\$ 204.00

\$ 204.00

<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:

To Fund Additional Overtime fees