

**PUBLIC WORKS COMMITTEE  
DPW AGENDA  
September 22, 2020**

Committee Members: CONOVER, Hogan, Leggett, Braymer, Bruno, Magowan, Merlino, Strough, Wild

**I. Committee meeting called to order by Chair**

**II. Approval of minutes of prior Committee Meeting**

**III. Action Agenda/New Business Items**

1. Request: Notice of Intent to fill a vacant position of Highway Construction Supervisor II  
Rationale: Due to a retirement
2. Request: Request to Amend County Budget  
Rationale: Due to receipt of an insurance recovery
3. Request: Authorize the sale and transfer of an equipment trailer to the Town of Stony Creek  
Rationale: Trailer was removed from inventory and would be scrapped.

**IV. Discussion Items:**

1. Presentation by SLIC Network Solutions for placement of a cabinet on County Property and to enter into an easement with the County.
2. Road Projects
3. DPW Budget Review

**V. Referrals/Pending Items NA**

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

**VII. Motion to Adjourn**

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Attachments:     1. Resolution Request Form No. 12 – Notice of Intent to Fill Vacant Position  
                      2. Resolution Request Form No. 7 – Amend County Budget  
                      3. Resolution Request Form No. 20 – Authorize Sale of and transfer of Trailer to Town of Stony Creek

# 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: Highway Construction Supervisor II Base Salary of Position: \$46,492 Grade: 18  
Filling at Step # (If Known): \_\_\_\_\_  
Budget code and title: D.5110 Highway Construction Supervisor II #1 Union ☒ Non-Union ☐  
This position is vacated due to: ☒ Retirement ☐ Resignation ☐ Termination ☐ Promotion ☐ Other  
Employee No./Last Name: #10570 Steven Ross Date of Vacancy: September 21, 2020  
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. \_\_\_\_\_

#### 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 \_\_\_\_\_

#### 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 \_\_\_\_\_ Date \_\_\_\_\_

#### SUPERVISORY COMMITTEE COMPLETES THIS SECTION

Name of Committee \_\_\_\_\_

- ☐ 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 \_\_\_\_\_ Date \_\_\_\_\_

## ***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:** Department of Public Works

**DATE:** September 22, 2020

- (a) Purpose of Amendment: To Amend 2020 budget \$243.85 dollars to reflect Insurance Recovery payment dated July 31, 2020, for guiderail repairs, DOL 10/28/18.
- (b) Appropriation Code, Object Code, Full Title and Amount: D.3310 410 County Road, Traffic Control, Supplies \$243.85
- (c) Revenue Code (with title), and Amount: D.3310 2680 County Road, Traffic Control, Insurance Recovery \$243.85

PROGRESSIVE  
PO BOX 512926  
LOS ANGELES, CA 90051

**PROGRESSIVE®**

WARREN COUNTY DEPT OF PUBLIC WORKS  
ATTENTION KARYN CALO  
1340 STATE ROUTE 9  
LAKE GEORGE, NY 12845-3434

RECEIVED AUG 10 2020

D 3310 2680 Ins Recovery  
bude rail - supplies  
D 3310 410

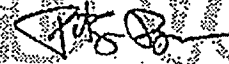
DRAFT NUMBER: 2032960735

AMOUNT: \$\*\*\*\*\*243.85

ISSUE DATE: July 31, 2020

Form 2721 (06/15)

KEEP THIS TOP PORTION FOR YOUR RECORDS

|                                                                       |  |                                                                         |  |                                                                                           |  |                      |  |
|-----------------------------------------------------------------------|--|-------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------|--|----------------------|--|
| <b>PROGRESSIVE®</b>                                                   |  | VOID IF NOT PRESENTED WITHIN 90 DAYS                                    |  | DRAFT NUMBER: 2032960735                                                                  |  | 56389                |  |
| PAYABLE THROUGH<br>PNC BANK N.A. 070<br>ASHLAND, OH<br>1-877-448-9544 |  | CLAIM NUMBER: 18-2965528<br>NAME: WARREN COUNTY DEPT OF<br>PUBLIC WORKS |  | July 31, 2020                                                                             |  | 412                  |  |
| TWO HUNDRED FORTY-THREE AND 85/100                                    |  | PAY EXACTLY                                                             |  | \$*****243.85                                                                             |  |                      |  |
| PAY TO THE ORDER OF<br>WARREN COUNTY DEPT OF PUBLIC WORKS             |  | Progressive Specialty Insurance Company                                 |  | BY:  |  | AUTHORIZED SIGNATURE |  |

Progressive  
P.O. Box 512926  
Los Angeles, CA 90051

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513581 13046 1 MB 0.439 CM8PI01X 047 013046

Page 1 of 1

WARREN COUNTY DEPT OF PUBLIC WORKS  
ATTENTION KARYN CALO  
1340 STATE ROUTE 9  
LAKE GEORGE, NY 12845-3434



ADVICE FOR PAYMENT 2032960735

|                                              |                          |            |
|----------------------------------------------|--------------------------|------------|
| Payee:<br>WARREN COUNTY DEPT OF PUBLIC WORKS | Payment Date             | 07/31/2020 |
|                                              | Total Payment Amount     | \$243.85   |
|                                              | Total Number of Invoices | 1          |

If you have any questions regarding this payment, please call us at 1-800-274-4499.

Details

| Claim Number:<br>182965528 | Name:<br>WARREN COUNTY DEPT O, F PUBLIC WORKS | Date of Loss:<br>10/28/2018 | Invoice Number:<br>73863749 | Company:<br>Progressive Specialty Insurance Company |               |            |                |
|----------------------------|-----------------------------------------------|-----------------------------|-----------------------------|-----------------------------------------------------|---------------|------------|----------------|
| Type                       | Description                                   | *Coverage                   | Reference                   | Identifier                                          | Service Dates | Deductible | Payment Amount |
| Repair                     |                                               | PD                          | 10/28/18 mariah adam        | GUARDRAIL                                           | N/A           | \$0.00     | \$243.85       |

Total Payment Amount

\$243.85

\*Full Description of Coverage:

PD - Property Damage Liability

## ***RESOLUTION REQUEST FORM NO. 18***

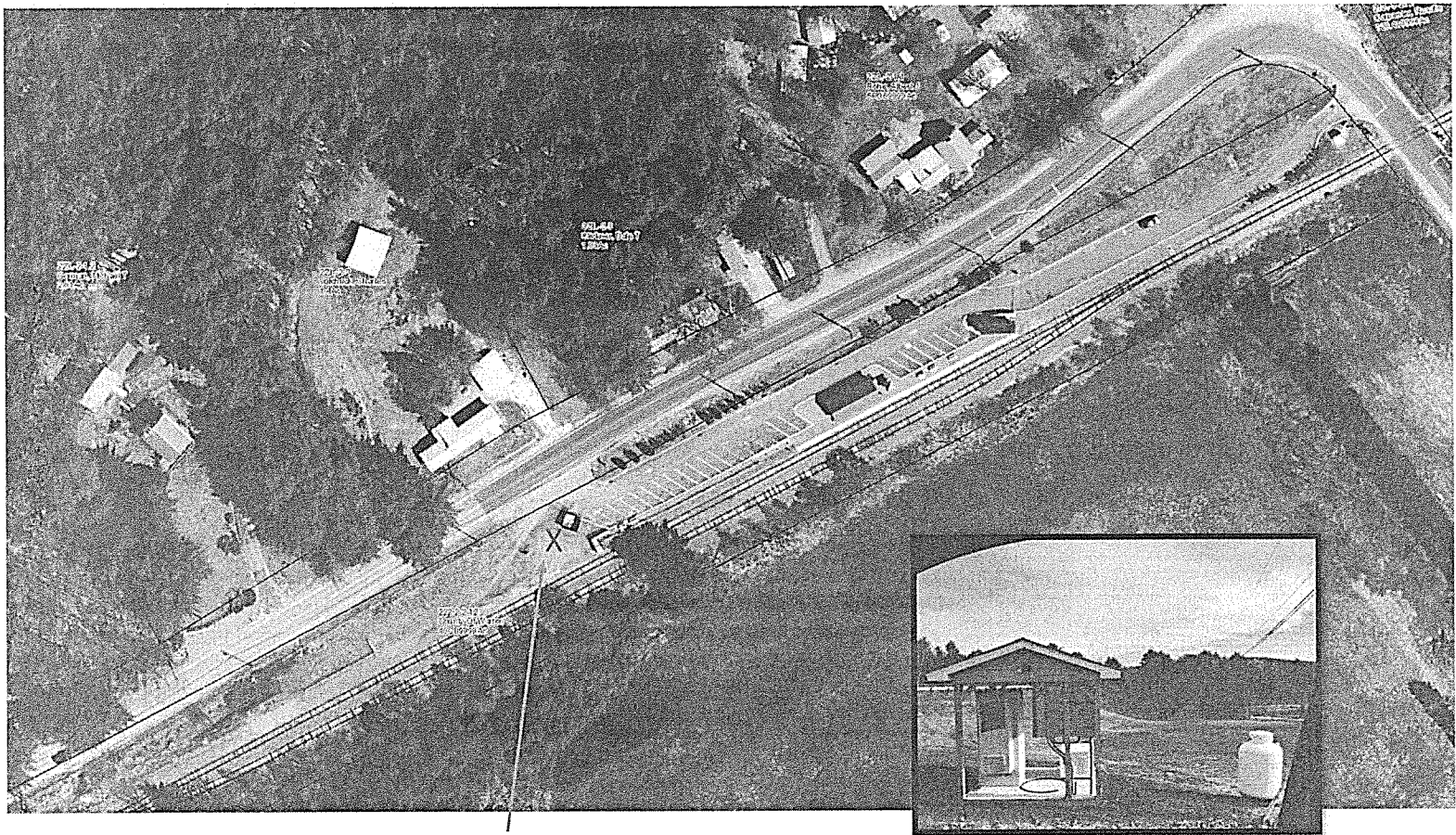
### ***Request to Transfer or Sell County Equipment***

**DEPARTMENT NAME: DPW**

**DATE: September 22, 2020**

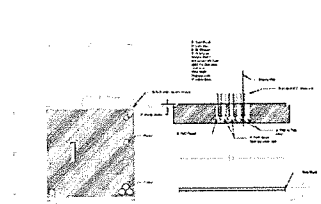
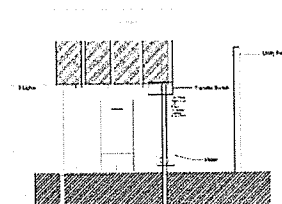
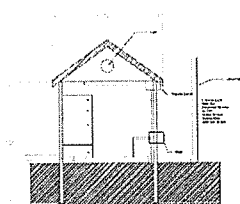
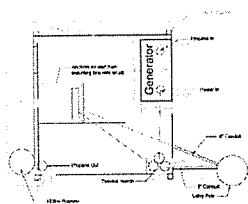
- (a) Purchaser=s Name: Town of Stony Creek
- (b) Purchaser=s Address: 52 Hadley Road, Stony Creek, NY 12878
- (c) **Description, Serial Number and/or County Inventory Number** of Item being sold:  
Mid-Atlantic 6 Ton Tilt Bed Trailer VIN 5ANAF202X2R011472, County Number 02-
- (d) Amount: \$300.00
- (e) Value of County Equipment being transferred or sold: \$300.00

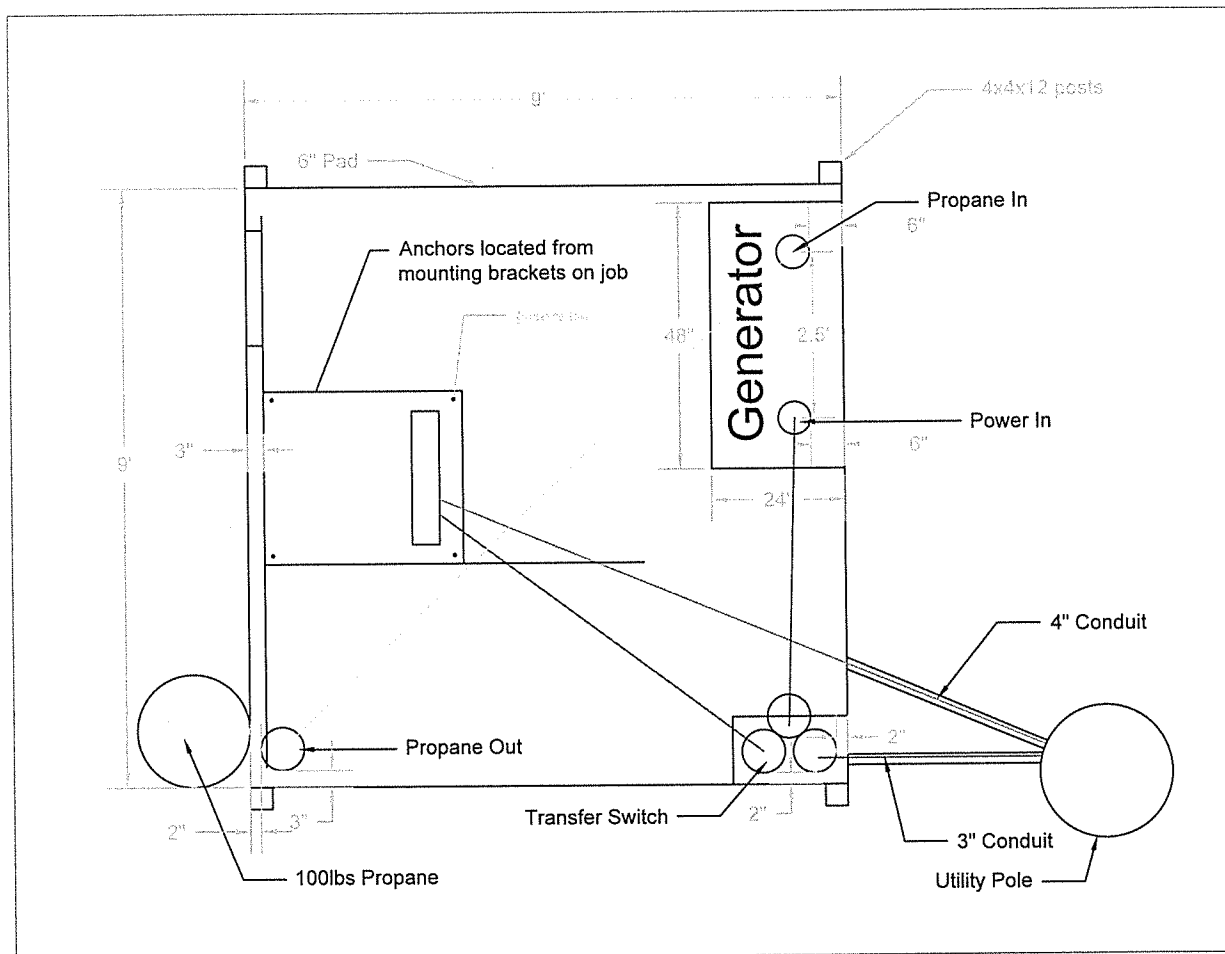
12

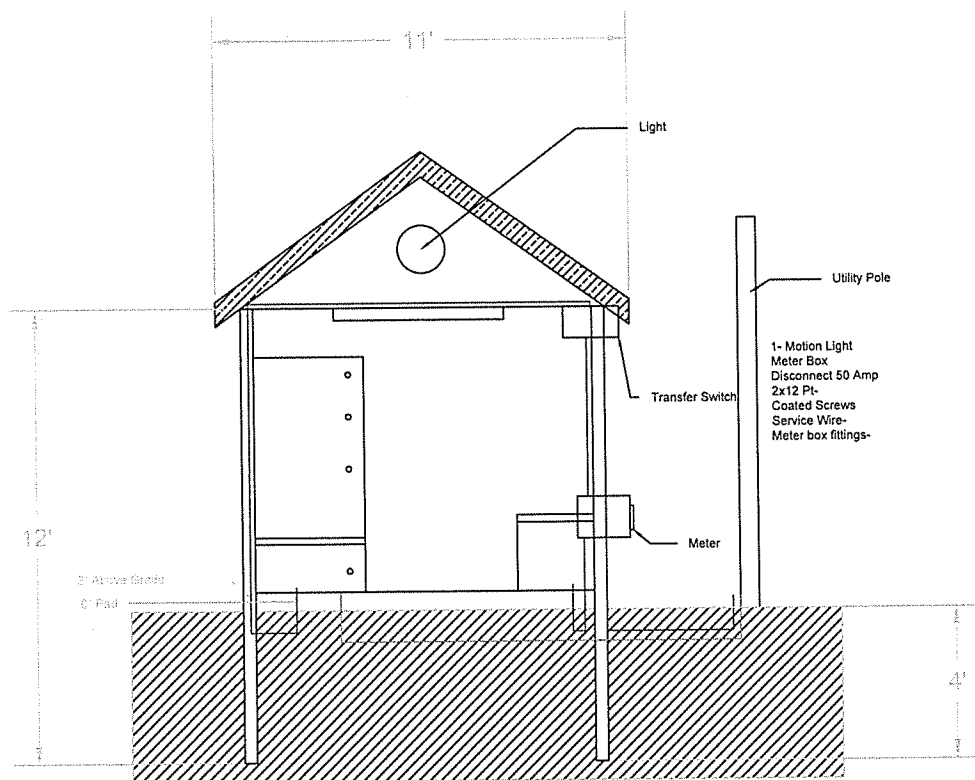


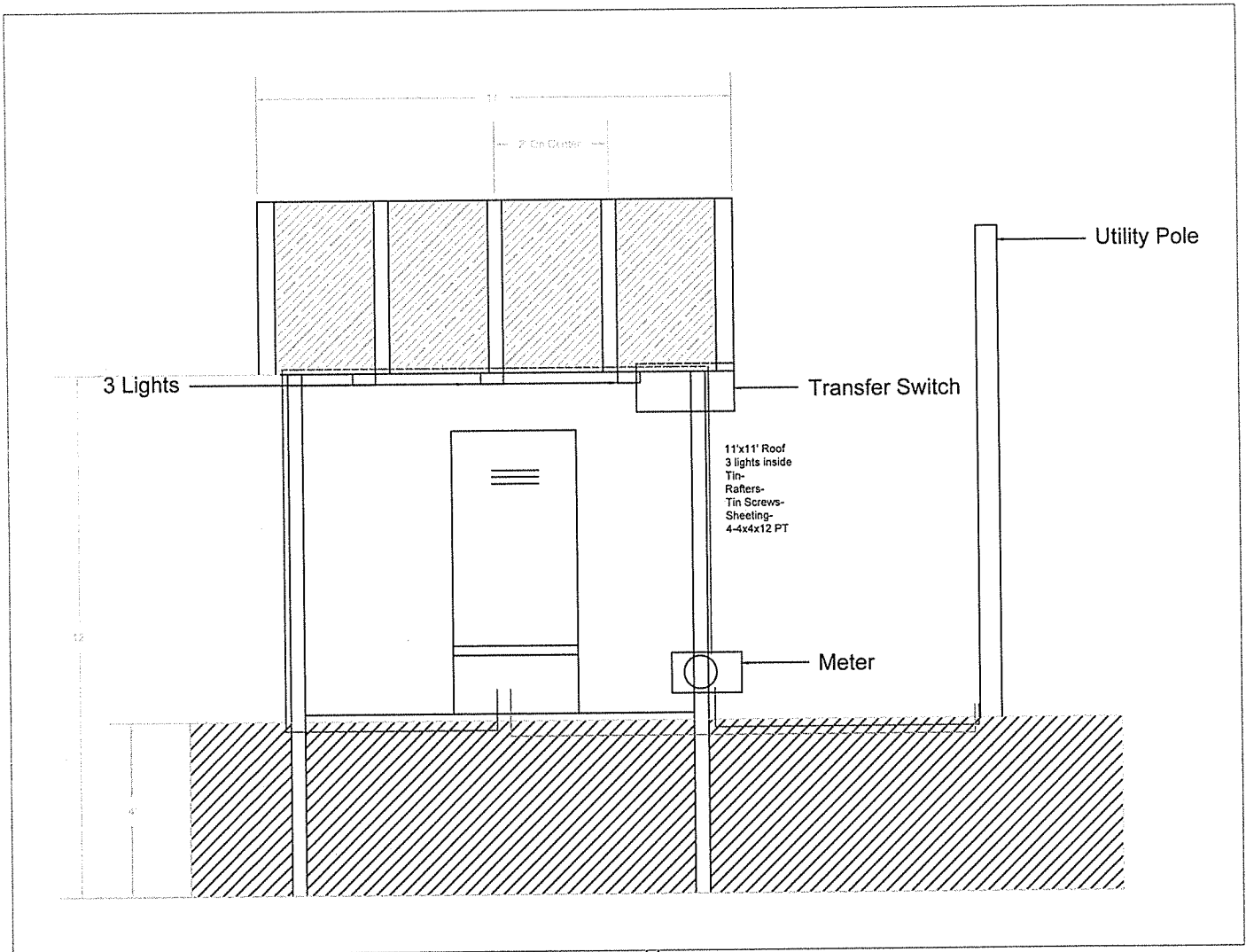
Proposed Location of Cabinet

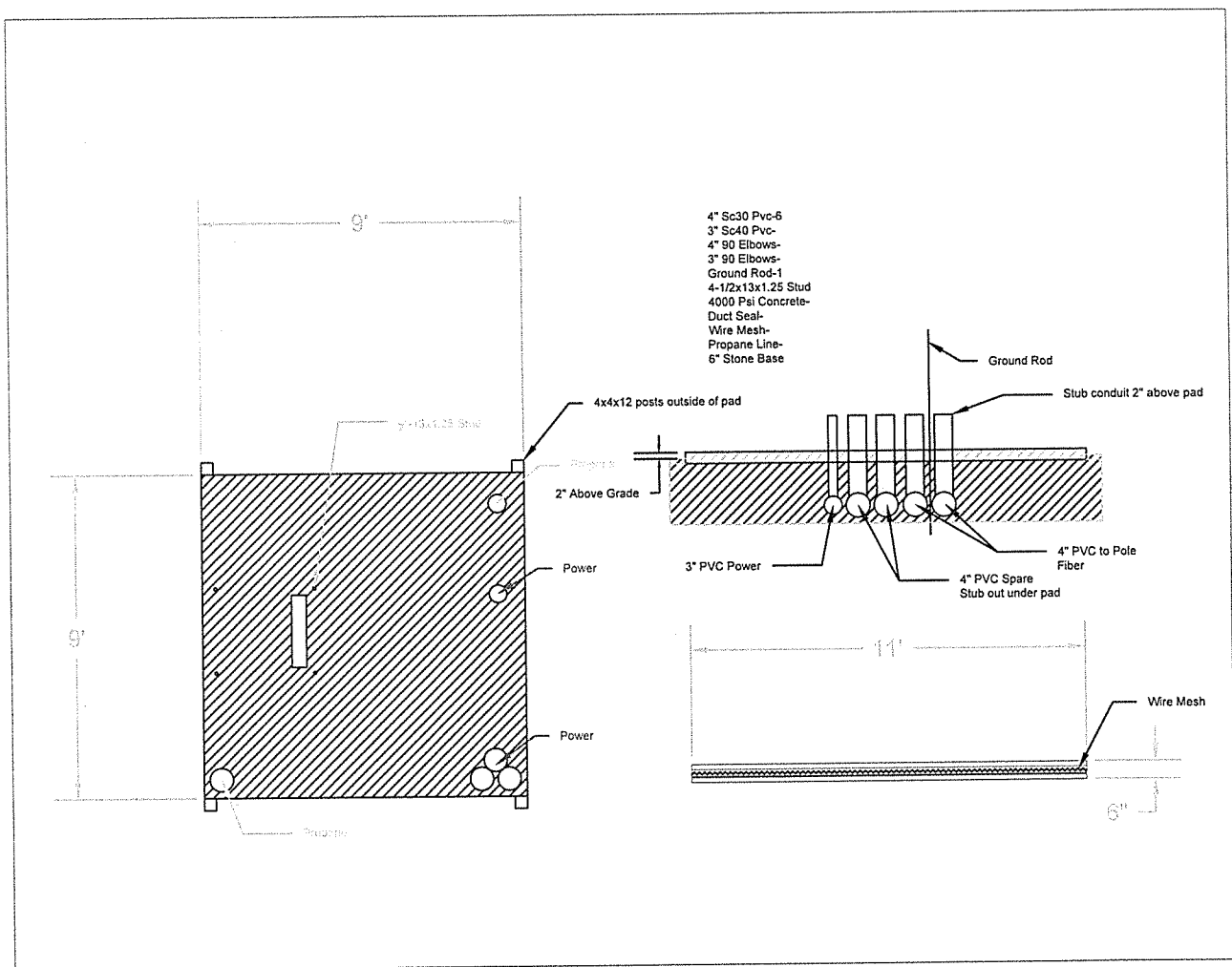
# SLIC CABINET PAD

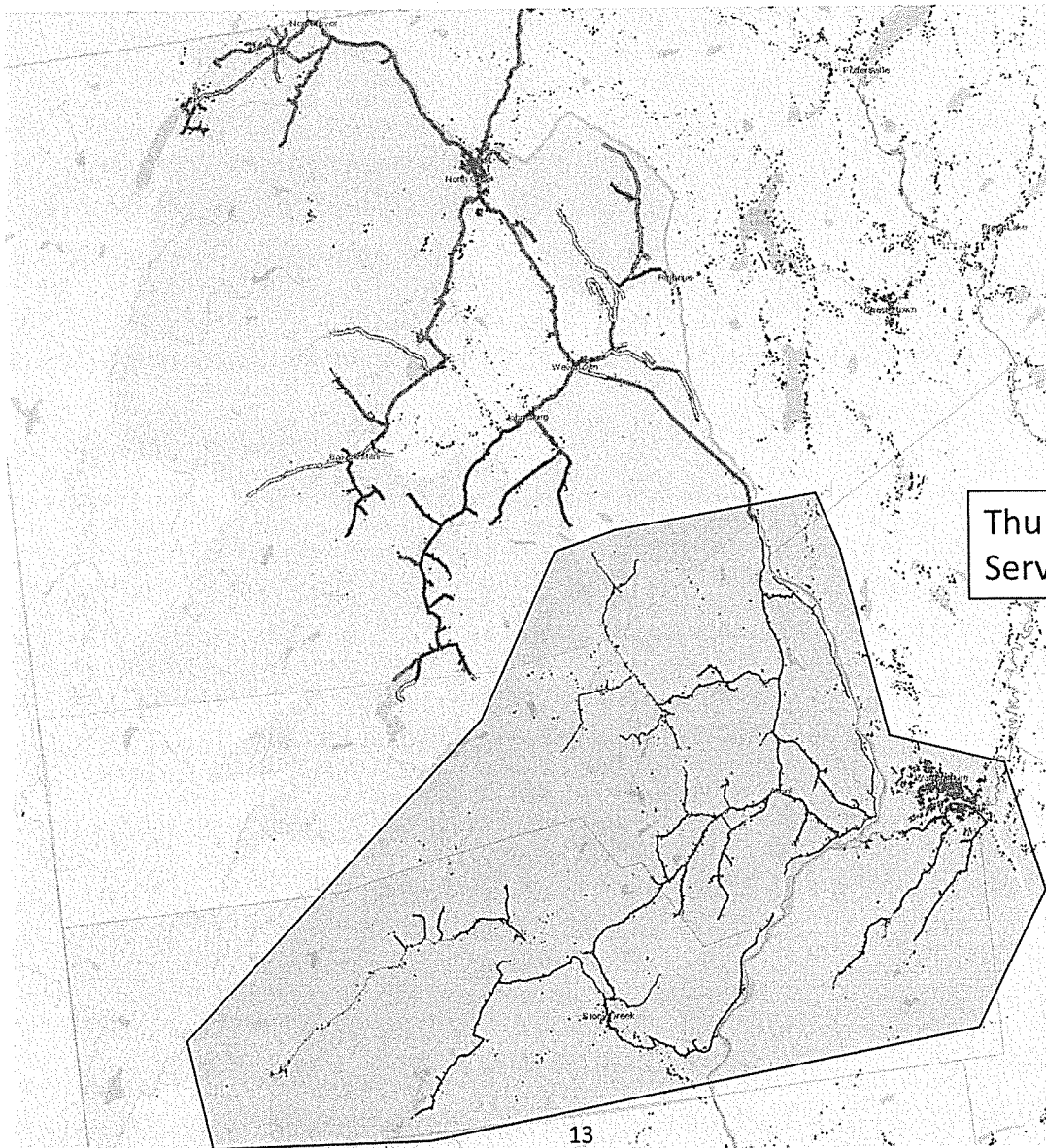




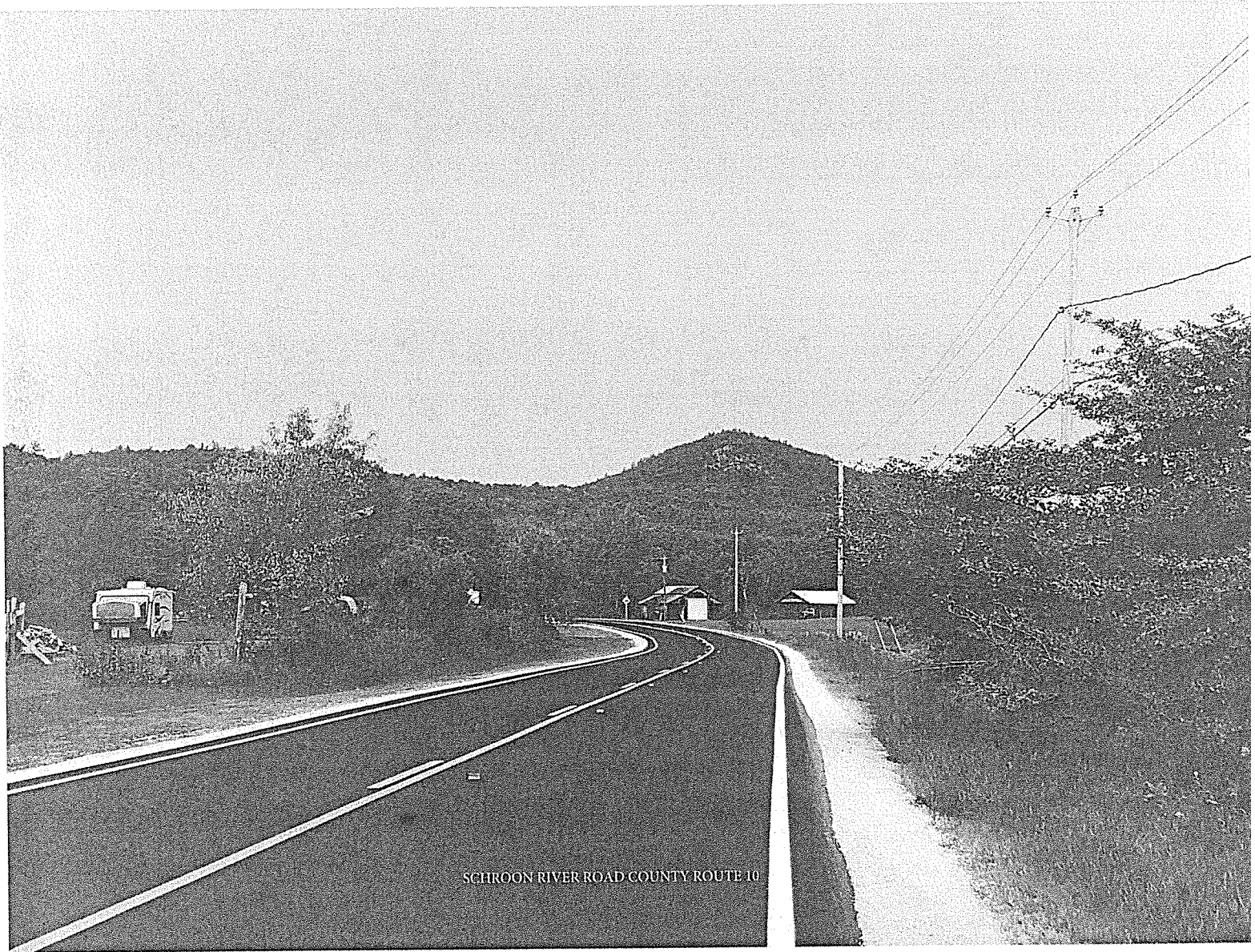








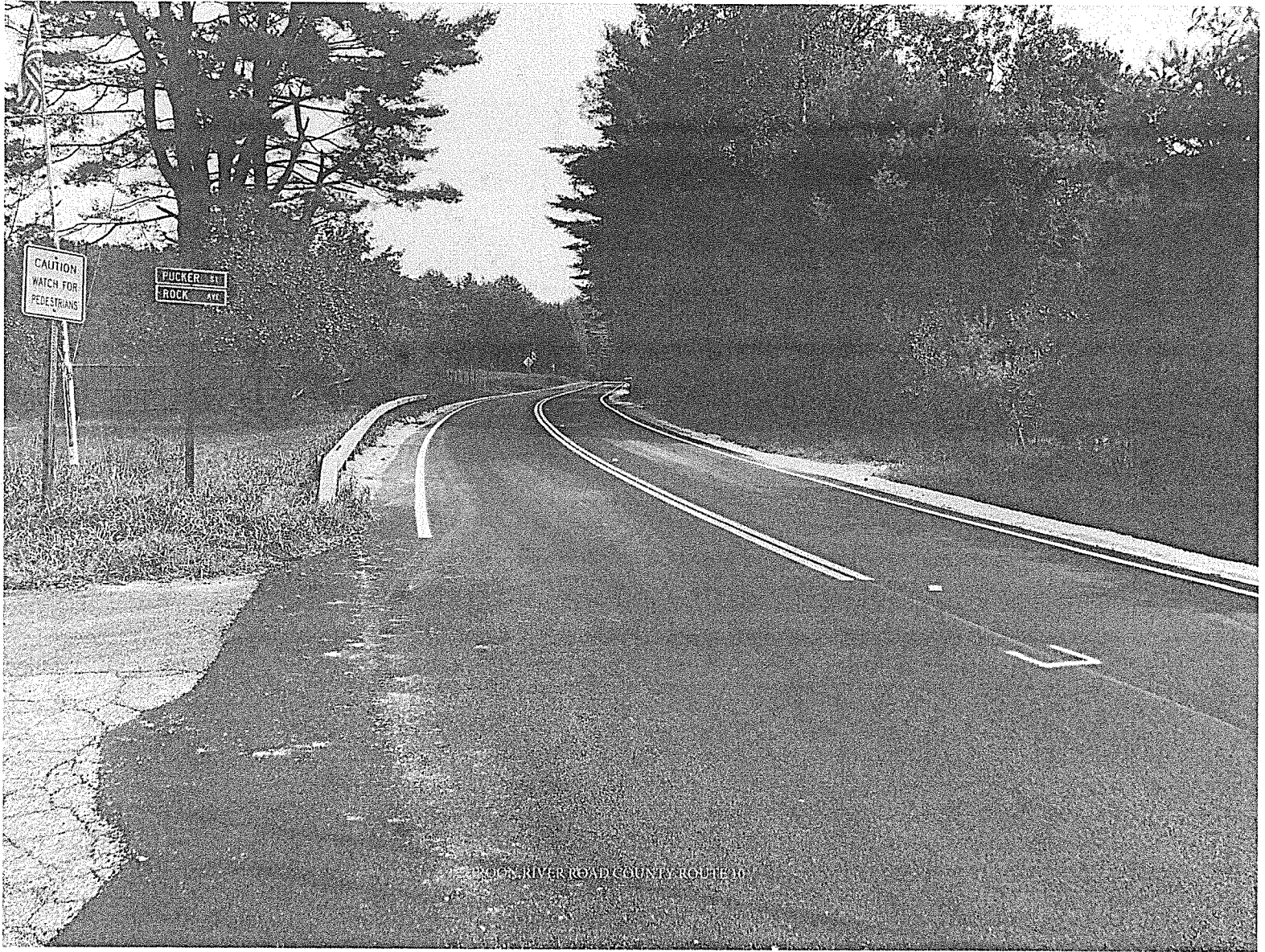
Thurman Station  
Service Area



SCHROON RIVER ROAD COUNTY ROUTE 10



CHROON RIVER ROAD COUNTY ROUTE 10



BRICKN. RIVER ROAD COUNTY ROUTE 10