

TOWN OF ERVING

SELECT BOARD / WATER COMMISSIONERS

To be held at the Senior & Community Center,
1 CARE DRIVE, ERVING, MASSACHUSETTS 01344

Jacob A. Smith, Chair
William A. Bembury
Scott Bastarache
Select Board

Bryan Smith
Town Administrator

Meeting Agenda Monday, October 03, 2022

This meeting is open to the public.

Scheduled Business

<i>Time</i>	<i>Agenda Item</i>
6:30 PM	Call to Order
6:30 PM	Joint Meeting with School Committee- Elected Official Appointment
<i>Immediately Following</i>	Joint Meeting with Recreation Commission- Elected Official Appointment
<i>Immediately Following</i>	Joint Meeting with Board of Assessors- Elected Official Appointment

Old Business

<i>Agenda Item</i>	<i>Section</i>
Discussion Regarding Town Response to COVID-19	..... 1
Review of COBRA Policy- 4 th Reading	..... 2
Review & Discussion of Textile Disposal Options	..... 3

New Business

<i>Agenda Item</i>	<i>Section</i>
Meeting Minutes: August 29, 2022, September 14, 2022, September 21, 2022	..... 4
Resignation from Historical Commission- Eric Duffy & John Rice	..... 5
Review & Appointment for School Committee Vacancy- Mackensy Bailey	..... 6
Review & Appointment for Recreation Commission Vacancy- Kathleen Sadler	..... 7
Review & Appointment for Board of Assessors Vacancy- Erik Eichorn	..... 8
Discussion Regarding Restoring Police Department K-9 Program	..... 9
Discussion Regarding Exploring Police Department Civilian Cadet Program	..... 10
Discussion Regarding Regional Efficiency Community Compact Application- Policing	..... 11
Discussion Regarding Animal Control Officer/ Inspector of Animals Appointment	..... 12
Discussion Regarding Applying for Public Safety Grant for Digital Fingerprint Scanning	..... 13
Review of Police Cruiser Procurement	..... 14
Review of Revised Proposed Description for Senior Custodian & Promotion Recommendation	..... 15
Review of Proposed Position Description for Town Planner & Promotion Recommendation	..... 16
Review of Paving Contract Change Orders	..... 17
Review of FY2022 Emergency Management Planning Grant Proposal	..... 18
Review of No Smoking Policy- 1 st Reading	..... 19
Review of Blood Borne Pathogen Exposure Control Plan Policy- 1 st Reading	..... 20
Review of Surplus Equipment Requests- Administration, Highway & Fire	..... 21
Review & Issuance of 5 th Water Commitment for FY2023	..... 22
Discussion Regarding Town-wide Microsoft Licensing Change	..... 23
Discussion Regarding Erving Hometown Heroes Banners Program	..... 24

Other Business

Signing of the Treasury Warrant

Unanticipated Business

Anticipated Next Meeting Dates

October 17, 2022- 6:30PM
Senior & Community Center

October 31, 2022- 6:30PM
Senior & Community Center

Note: These agenda items and estimated times are those reasonably anticipated by the Chair. Not all items listed may in fact be discussed and other items not listed may be brought up for discussion. Estimated agenda times may need to be changed on the night of the meeting for the sake of expediency. Section numbers correspond to agenda packets and are not an indication of the order of the agenda

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Town of Erving

Select Board Public Meeting Participation Guidance

The Select Board welcomes residents to communicate questions, comments or concerns. Participants at Select Board meetings are notified that the meetings are both video and audio recorded, and comments provided will become part of the record. While offering public input, it is important that the Select Board is also allowed enough time to conduct their other business. The following guidelines have been established to make the best use of time at Select Board meetings.

1. To request time on the Select Board agenda, persons must contact the Town Administrator at (413) 422-2800, Ext.1102 or at SBRequests@erving-ma.gov by noon on the Tuesday before the meeting.
 - a. Requests will be submitted to the Chairperson for consideration and scheduling.
 - b. Supporting documentation related to the request must be provided to the Administrator's office by noon on the Thursday prior to the meeting. The Chairperson may remove requested agenda topics that are made without supporting documentation.
2. The Select Board encourages public participation as follows:
 - a. Town residents can bring comments before the Select Board that require discussion and are on the agenda, only after being recognized by the Chair. If your issue is not on the agenda, you may bring it up under "Future agenda items".
 - b. "Topics not anticipated" should be brought to the Chair for possible consideration prior to the meeting.
 - c. Please try to keep your comments short and to the point.
 - d. If it appears that the topic(s) being discussed will consume longer than the time allocated then, at the discretion of the Chair, the matter will be placed on an upcoming Select Board meeting agenda.
 - e. If you believe that your topic will require more time or desire to make a more formal presentation than is allowed under these guidelines, please contact the Town Administrator to ask to be put on a future agenda so that we can properly allocate enough time.
 - f. You are free to ask questions or to make your point for all to consider. However, engaging in active debate with Select Board or audience members will not be allowed.
 - g. All comments and questions must be directed to the Chair of the Select Board per MGL Chapter 30A, Section 20(g).
 - h. Participants are expected to speak from the presenter/guest table.
 - i. All remarks must be respectful and courteous, free of personal attacks. Inappropriate language will not be tolerated.
3. Employees and Board members who have business with the Select Board should be placed on the agenda beforehand (see Item # 1.).
4. Anyone wishing to contact the Select Board in writing may do so at:

Town of Erving, Attn: Select Board, 12 East Main Street, Erving, Massachusetts 01344

Alternatively, members of the public can complete a Select Board submission form at the meeting sign in table and office staff member will follow up.

The Select Board appreciates your cooperation in honoring these guidelines.

From Massachusetts Attorney General Official Website

What public participation in meetings must be allowed?

Under the Open Meeting Law, the public is permitted to attend meetings of public bodies but is excluded from an executive session that is called for a valid purpose listed in the law. Any member of the public also has a right to make an audio or video recording of an open session of a public meeting. A member of the public who wishes to record a meeting must first notify the Chair and must comply with reasonable requirements regarding audio or video equipment established by the chair so as not to interfere with the meeting. The Chair is required to inform other attendees of such recording at the beginning of the meeting.

While the public is permitted to attend an open meeting, an individual may not address the public body without permission of the Chair. An individual is not permitted to disrupt a meeting of a public body, and at the request of the Chair, all members of the public shall be silent. If after clear warning, a person continues to be disruptive, the Chair may order the person to leave the meeting, and if the person does not leave, the Chair may authorize a constable or other officer to remove the person.

CPHS Weekly Health Letter

COVERING: SEPTEMBER 9 – SEPTEMBER 30, 2022

Maureen O'Reilly is out this week. This report using Maureen's template as a guide is by Meg Ryan mryan@frcog.org

I. Covid and Flu Vaccine

Updated Bivalent Boosters:

The booster is widely available at area pharmacies, physician's offices and at the regional Vendor-Provided vaccination clinics (see below!). CPHS nurses also have a supply of Moderna bivalent booster vaccine, and are administering them at Walk-In Wellness and through home visits (see below). Anyone age 12 or older who completed a primary COVID-19 vaccination series or received a booster dose at least two months ago should get the updated booster as soon as possible. Staying up to date on vaccines is the most effective way to prevent serious illness, hospitalization and death from COVID, and this remains essential public health messaging!

Vendor-Provided Vaccination Clinics:

Another round of vendor-provided vaccination clinics for **BOTH FLU and COVID** vaccine start this week. Both the new bivalent COVID vaccine and flu vaccine will be available, as well as primary COVID vaccine for anyone who has not yet gotten vaccinated. Please pre-register with your insurance information, or make sure to bring your insurance information to the clinic. However, no one will be turned away for lack of health insurance. Clinic sign up will be available at <https://frcog.org/covid/>

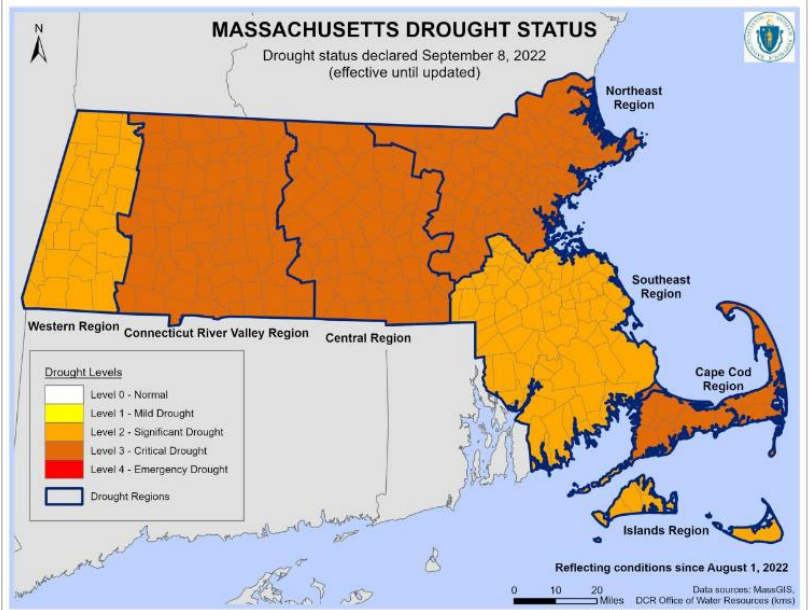
Getting the flu and COVID vaccine at the same time is recommended, and is considered a best practice.

CPHS Nurses Vaccination Program

We continue to focus efforts on providing access in a number of ways. have gotten flu vaccine delivered in all categories (general adult, Senior High dose and Child doses), and also have the new Moderna bivalent booster Lisa and Meg and Jackie Choate have provided vaccination last week at the Shelburne Falls Senior Center, Highland Village in Shelburne, and at the Charlemont Federated Church during the Senior Center meeting. We have also provided vaccine at Walk-in Wellness hours at Bernardston, Conway, Erving, Northfield, and Gill so far, and will continue to carry it through October. Home visits to residents in need and clinics for residents of Stratton Manor in Bernardston and Squakheag Village in Northfield are also arranged. The FRCOG nurses can continue to assist residents to access vaccinations. Call 413-774-3167 ext. 156.

II. Drought:

There has been no recent update to the drought status in Massachusetts. Despite the recent rain, Franklin County continues in Level-3-Critical Drought depleting water supplies and elevating risk of wildland fires. Drought levels are based on a tiered system that starts at level one or mild drought, and tops off with level four, or emergency drought. The state’s Drought Management Task Force recommends Level designations to the Executive Office of Energy and Environmental Affairs based on a variety of drought indices (precipitation, streamflow, groundwater, and others). The importance of water conservation and Wildfire Prevention are key messages for our communities.



For more information and poster links see Lisa Danek Burke’s [slides from the Oversight Board meeting](#). See the currently posted MA Drought Alert by clicking [here](#).

III. CPHS COVID-19 and other reportable diseases

Town	Reported Sept 9-15	<u>Covid</u> Sept 16-22	Cases Sept 23-29	Lyme	Other, Sept <u>Babesiosis</u>	9-29 <u>Hep C</u>
ASHFIELD	2	1	3	1		
BERNARDSTON	1	4	3			
BUCKLAND	2	1	1			
CHARLEMONT	2	1	1			
COLRAIN	3	1	8			
CONWAY	2	6	4	1	1	
ERVING		2	4			
GILL	2	1				
HAWLEY						
HEATH	1	2	1			
LEYDEN		1	1			
MONROE						
NORTHFIELD	1	4	1			
ROWE						
SHELBURNE	2	6	6	1		1
TOTALS	18	33	34	3	1	1

Each count represents a new case during the indicated time period

Data retrieved on 9/30/22

IV. COVID Isolation and Exposure Guidance (DPH changed in August)

Read it here: <https://www.mass.gov/covid-19-updates-and-information> and is updated on [frcog.org/covid](https://www.frcog.org/covid).

There is no more quarantine regardless of exposure time or vaccination status. The CDC has moved to trying to get the public to better understand their COVID exposures in their lives to make a determination if they've been exposed. **An on line tool for individuals to understand and assess exposure risks:**

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/risks-exposure.html>

V. Arbovirus data:

All of Franklin County remains at low or remote levels of risk for West Nile Virus (WNV) and Eastern Equine Encephelitis (EEE). There have been **five** human cases of WNV in the state so far this year, all adults, all in Suffolk county, and one in Middlesex county. This is up from four cases reported in the last health letter. There continue to be no reported positive tests for animal cases of WNV so far this year. August and September are the months when most cases of West Nile virus occur. Although the significant drought conditions that exist across the Commonwealth have kept the populations of the *Culex* mosquito species that are most likely to spread WNV relatively small, Boards of Health play an important role reminding the public to take steps to protect ourselves and our families from mosquito bites. No human or animal cases of EEE have been detected so far this year.

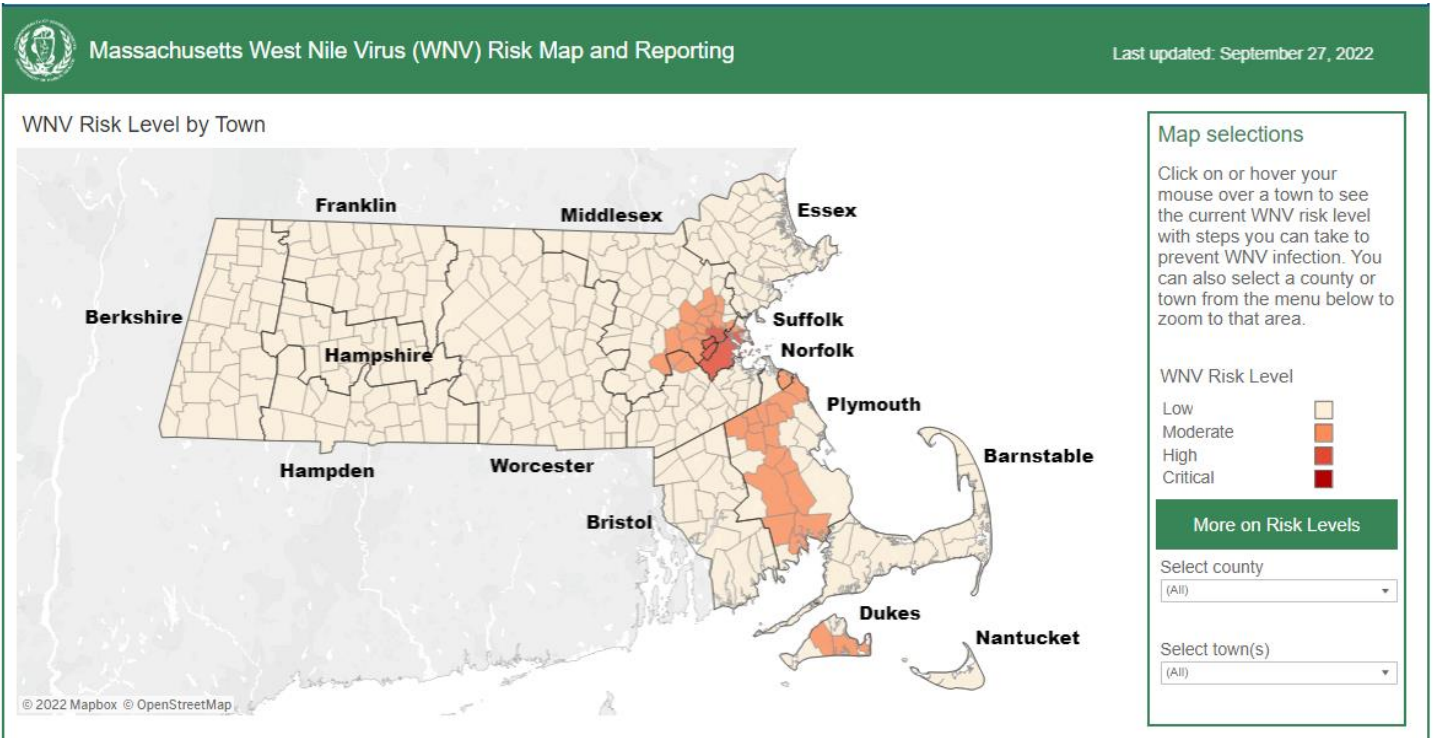
Messaging for you to use with the Public:

- **Avoid Mosquito Bites:** Apply Insect Repellent when Outdoors. Use a repellent with DEET (N, N-diethyl-m-toluamide), permethrin, picaridin (KBR 3023), oil of lemon eucalyptus [p-menthane 3, 8-diol (PMD)], or IR3535 according to the instructions on the product label. DEET products should not be used on infants under two months of age and should be used in concentrations of 30% or less on older children. Oil of lemon eucalyptus should not be used on children under three years of age.
- **Be Aware of Peak Mosquito Hours.** The hours from dusk to dawn are peak biting times for many mosquitos. Consider rescheduling outdoor activities that occur during evening or early morning.
- **Clothing Can Help Reduce Mosquito Bites.** Wear long-sleeves, long pants, and socks when outdoors to help keep mosquitos away from your skin.
- **Mosquito-Proof Your Home**
 - Drain Standing Water. Mosquitos lay their eggs in standing water. Limit the number of places around your home for mosquitos to breed by either draining or discarding items that hold water. Check rain gutters and drains. Empty unused flowerpots and wading pools and change the water in birdbaths frequently.
 - Install or Repair Screens. Keep mosquitos outside by having tightly fitting screens on all of your windows and doors.

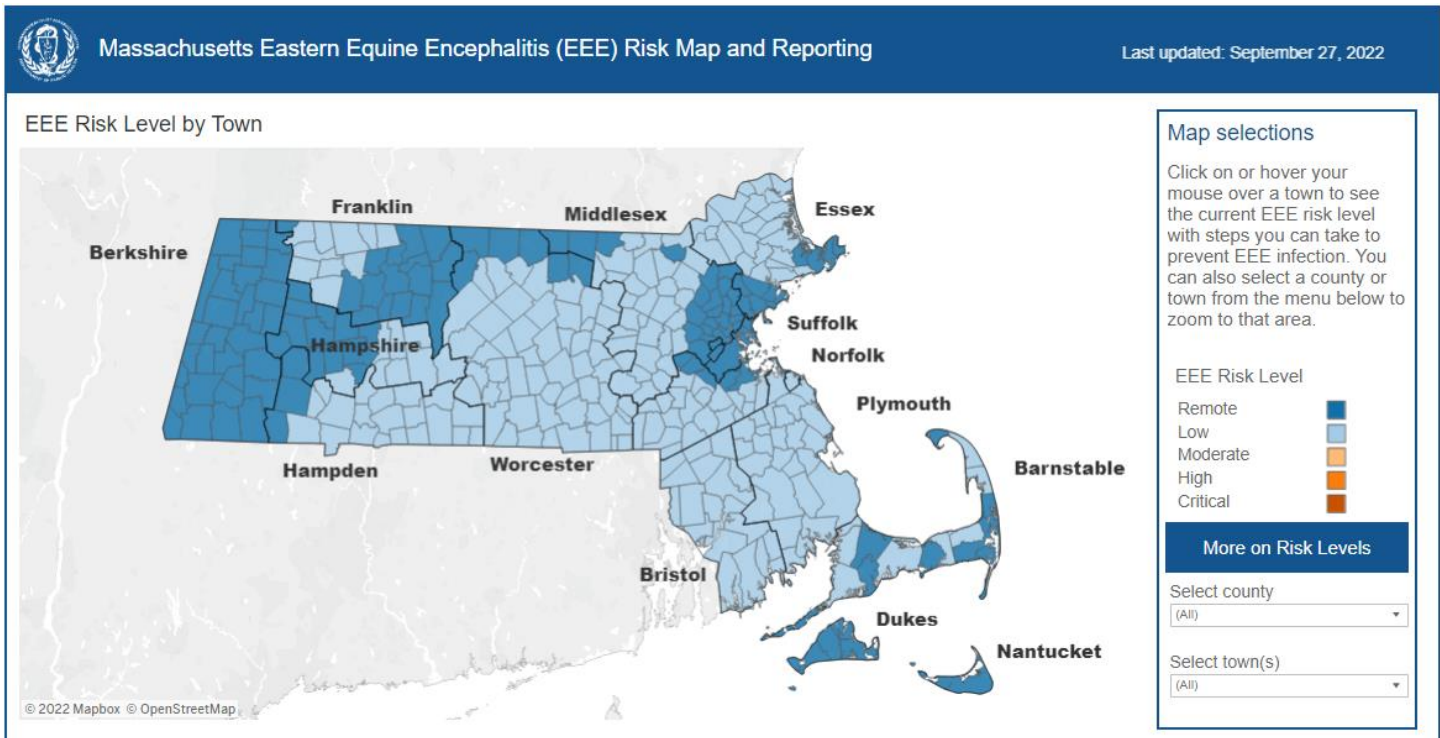
From the state arbovirus report updated Sept 27, 2022:

- Statewide 5516 mosquitoes have been tested this season
- DPH has reported 94 WNV positive mosquito samples from Barnstable, Bristol, Dukes, Essex, Middlesex, Norfolk, Plymouth, Suffolk, and Worcester Counties. WNV risk levels have been increased to moderate for communities in Dukes, Middlesex, Norfolk and Suffolk.
- Interactive maps are available here: <https://www.mass.gov/infodetails/massachusetts-arbovirus-update>

Current risk levels assigned for WNV:



Current risk levels assigned for EEE:



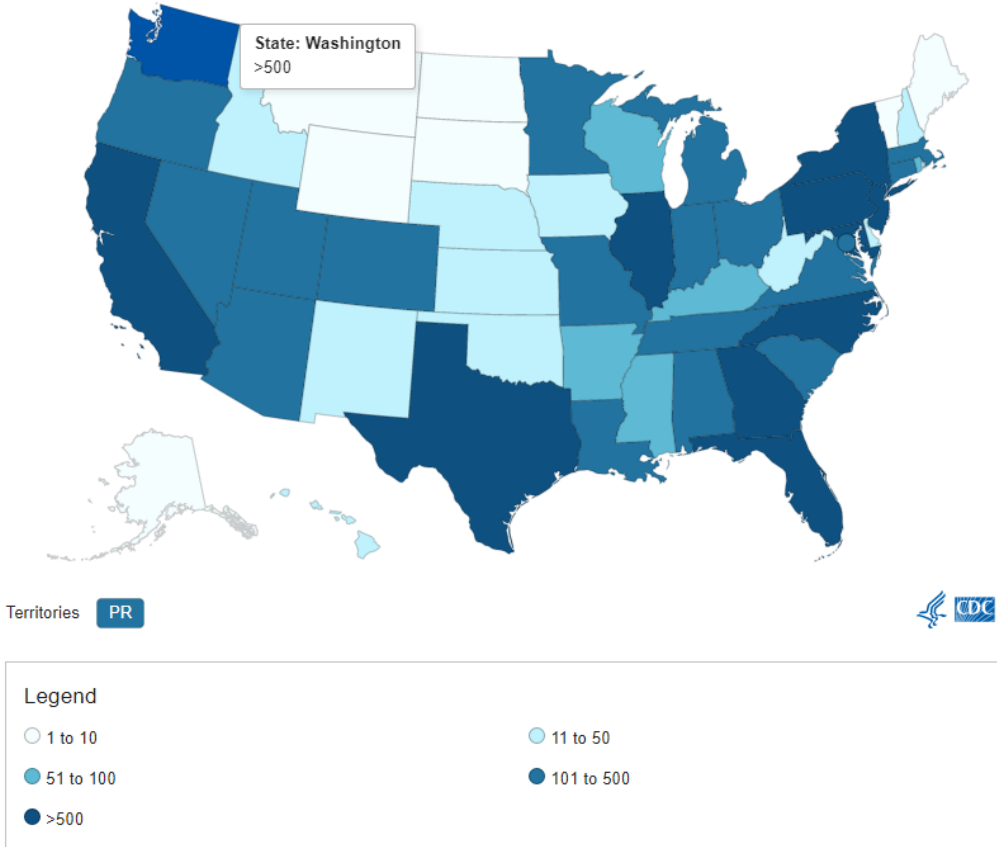
VI. Monkeypox (no CPHS cases)

New Information from the state Adult Immunization Coalition webinar on September 29: As of 9/22 there have been 381 cases of monkeypox in Massachusetts. The weekly incidence is declining from the peak case counts in July when there were about 20 new cases per day in Massachusetts, to 2-3 cases per day now. Public health efforts are focused on harm reduction such as decreasing number of sex partners, and getting at-risk populations vaccinated (men who have sex with men, those who are close contacts of positive case, those who have had multiple male to male sex partners within last 14 days in an area with known monkeypox, or who may in the future, or those who have male to male sex who have a new diagnosis of sexually transmitted disease. The closest vaccination locations for monkeypox are both in Springfield; a current list is available at <https://www.mass.gov/info-details/monkeypox-vaccination>. 41% of monkeypox cases were diagnosed with an STI (sexually transmitted illness) in the last year. CDC has defined levels of exposure such as high (those with unprotected skin to skin contact), intermediate (within 6 feet for more than 3 hours and contact through regular clothing), and low (within 6 feet unmasked for less than 3 hours). There is no quarantine for close contacts. Cases should isolate until all lesions are completely resolved.

On Aug 4th the White House, declared Monkeypox to be a public health emergency. Reflecting that update, we've put some information on our website, using infographics from our friends at MetroWest (Hudson-Natick- Framingham area). A nice visualization of cases across the country is on the CDC's website: <https://www.cdc.gov/poxvirus/monkeypox/response/2022/us-map.html>

25,851 Total confirmed monkeypox/orthopoxvirus cases

*One Florida case is listed here but included in the United Kingdom case counts because the individual was tested while in the UK.



Map downloaded October 3, 2022 from <https://www.cdc.gov/poxvirus/monkeypox/response/2022/us-map.html>

[Survey data](#) published in early release 8/26 by the CDC suggests that gay, bisexual, and other men who have sex with men (MSM), who have been disproportionately affected by the 2022 monkeypox outbreak, are reducing one-time partnerships. Reductions in one-time partnerships, already being reported by MSM, might significantly reduce MPX transmission. A 40% reduction in one-time partnerships might delay the spread of monkeypox and reduce the percentage of persons infected by 20% to 31%.



TOWN OF ERVING

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ADM-201

Policy

Consolidated Omnibus Budget Reconciliation Act (COBRA) Policy

Approved: _____ Date: _____
Select Board Chair, Jacob A. Smith

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.01 Issue Date / Effective Date

This policy is issued and effective on _____

.02 Application

The Town will comply with the Consolidated Omnibus Budget Reconciliation Act (COBRA) of 1986, as Amended (Public Law 99-272) Title X, Section 10002; 100 Stat 227; 29 U.S.C. 1161-1168, which requires employer-sponsored group medical plans to offer covered employees, their spouses, former spouses, and dependent children to elect to have their current medical coverage continued (continuation coverage) at the employee and dependents' expense, at group rates, following a qualifying loss of coverage. COBRA requires that continuation coverage extend from the date of the qualifying event for a limited period of 18 or 36 months. The length of time depends on the type of qualifying event that gives rise to the COBRA rights.

Employees should notify the Treasurer's Office as soon as possible of any qualifying event that would affect the employee's insurance coverage (i.e., divorce, dependent child reaching maximum age for coverage under the parent's plan, change in individual or family coverage, planned retirement, or termination).

.03 Notice of Group Health Continuation Coverage Under COBRA

In 1986, a Federal law was enacted (Public Law 99-272, Title X), known as COBRA, requiring that most employers sponsoring group health plans offer participating employees and their families the opportunity

for a temporary extension of health coverage (called “Continuation Coverage”) at group rates in certain instances where coverage under the employer’s plan would otherwise end.

This notice is intended to inform covered employees, in summary fashion, of their rights and obligations under the Continuation Coverage provisions of COBRA, as amended. Both covered employees and their covered dependents should take the time to read this notice carefully.

.04 Events Giving Rise to Continuation Coverage Option

A. Covered Employees

Employees of the Town who are covered by the Town’s Employee Benefits Plan (“the Benefits Plan”) have the right to purchase this Continuation Coverage when they lose their group health coverage for either of the following Qualifying Events:

1. A reduction in work hours of employment below the Benefits Plan eligibility threshold: (20 hours per week or .5 FTE teacher); or
2. The termination of the employee’s employment, unless their employment is terminated because of gross misconduct¹ on the employee’s part.

B. Spouses of Covered Employees

If an individual is currently covered under the Benefits Plan as the spouse of an employee covered by the Benefits Plan, that individual shall have the right to purchase Continuation Coverage for himself/herself/themself when he/she/they lose group health coverage under the Benefits Plan for any of the following Qualifying Events:

1. The death of their spouse;
2. A termination of their spouse’s employment unless termination is due to gross misconduct;
3. A reduction in their spouse’s hours of employment with the Town below the Benefits Plan eligibility threshold;
4. Divorce or legal separation from their spouse; or
5. Their spouse becomes entitled to Medicare.

C. Dependent Children of Covered Employees

If a covered employee has a dependent child who is currently covered by the Benefits Plan, they have the right to purchase Continuation Coverage if group health coverage is lost under the Benefits Plan for any of the following Qualifying Events:

1. The death of the employee;
2. A termination of the employee’s employment unless termination is due to gross misconduct;
3. A reduction in the employee’s hours of employment with the Town below the Benefits Plan eligibility threshold;
4. The employee’s divorce or legal separation;
5. The employee becomes entitled to Medicare; or
6. The dependent ceases to be a “dependent child” under the Benefits Plan. (Effective July 1, 2012, adult children up to age 26 are eligible for enrollment on their parent’s health insurance through the Town, regardless of another offer of insurance. Children are covered through the end of the month in which they turn age 26.)

¹ For the purposes of this Policy, the term “gross misconduct” means outrageous, extreme, or unconscionable conduct that is intentional, wanton, willful, or deliberate; or that is performed with deliberate indifference to the Town’s interests and/or with conscious or reckless disregard of the consequences of the employee’s actions.

A child who is born to or placed for adoption with the covered employee during a period of COBRA coverage will be eligible to become a qualified beneficiary. In accordance with the terms of the Town's Employee Benefits Plan and the requirements of federal law, these qualified beneficiaries can be added to COBRA coverage upon proper notification to the Plan Coordinator of the birth or adoption.

.05 Period of Continuation Coverage

1. General Rules

COBRA requires that covered individuals be afforded the opportunity to purchase Continuation Coverage for up to 18 months if either of the following Qualifying Events occur;

1. Termination of the covered employee's employment, unless termination is due to gross misconduct; or
2. A reduction in the covered employee's hours of employment below the Benefits Plan eligibility threshold.

If an individual is eligible to purchase Continuation Coverage due to one of these qualifying events, the individual must do so at the time the event occurs.

COBRA requires that covered individuals be afforded the opportunity to purchase Continuation Coverage for up to 36 months if any of the following Qualifying Events occur;

1. The death of the covered employee;
2. Divorce or legal separation from the covered employee;
3. The covered employee becomes entitled to Medicare; and
4. A child ceases to be a dependent under the Benefits Plan.

If an individual is eligible to purchase Continuation Coverage due to one of these qualifying events, the individual must do so at the time the event occurs.

2. Special Rule for Multiple Qualifying Events other than Entitlement to Medicare

If, during an 18-month period of Continuation Coverage, a covered individual experiences an event giving rise to 36 months of Continuation Coverage, the individual may elect to extend their Continuation Coverage to 36 months beginning on the date the original 18-month period began. (Special rules involving entitlement to Medicare are discussed below.) By way of example, an employee quits his job (18-month coverage) and dies shortly thereafter (36-month coverage). The surviving spouse and dependents are eligible to receive coverage for a maximum of 36 months commencing on the date the employee quit his job provided they were eligible for Continuation Coverage at the time of the covered employee's death. In no event will Continuation Coverage last beyond 36 months from the date of the first Qualifying Event.

If a covered individual believes they are entitled to extended coverage under this rule, the individual should contact the Plan Coordinator at the address set forth at the end of this notice. Failure to contact the Plan Coordinator may lead to premature termination of Continuation Coverage.

3. Special Rule for Spouses and Dependent Children Upon Covered Employee's Entitlement to Medicare

COBRA requires that if a covered employee becomes entitled to Medicare (regardless of whether such Qualifying Event causes a loss of coverage under the Benefits Plan), the period of Coverage for the spouse of such covered employee or the dependent child of such covered employee shall not terminate before the end of the 36-month period following the earlier of the date of the first Qualifying Event or the date the covered employee becomes entitled to Medicare. Entitled to Medicare means the covered employee is eligible to receive and signs up for Medicare insurance. The maximum aggregate period of Continuation Coverage for any or all Qualifying Events, including Medicare entitlement, is 36 months.

For example, assume a covered employee becomes entitled to Medicare on January 1, 1999 (which event does not cause a loss of coverage), and subsequently loses coverage due to termination of employment on September 1, 1999. By applying the special Medicare rule, a “lookback” to the date of Medicare entitlement would entitle the employee’s covered dependents to 36 months of Continuation Coverage (i.e., from January 1, 1999 to December 31, 2002). Under these circumstances, an employee’s covered dependents are entitled to the longer period of Continuation Coverage (36 months) beginning on the date of Medicare entitlement, instead of only 18 months of coverage from the date of the employee’s termination (which coverage would have expired on February 29, 2001).

This coverage is available only to the spouse and dependent children of covered employees and only if such individuals themselves are covered under the Benefits Plan at the time the covered employee becomes entitled to Medicare.

To ensure that a covered individual received this coverage, the individual must notify the Plan Coordinator at the time the covered employee becomes entitled to Medicare. Failure to notify the Plan Coordinator of the covered employee’s entitlement may lead to premature termination of Continuation Coverage.

4. Special Rule for Disabled Qualified Beneficiaries

If the covered employee, the spouse of a covered employee, or the dependent child of a covered employee is determined by the Social Security Administration to be disabled (for Social Security disability purposes) at any time during the first 60 days of COBRA coverage, the disabled individual, if then covered under the Benefits Plan, is eligible for extended Continuation Coverage beyond the normal period of 18 months. Under this special rule, qualifying disabled individuals may extend Continuation Coverage for up to 29 months from the time they are first eligible to elect Continuation Coverage due to a termination or reduction in hours of employment.

In order to be entitled to this extended coverage, the disabled person (or any other qualified beneficiary) must provide the following notices to the Plan Coordinator:

1. A copy of the Social Security Administration determination of his or her disability within the earlier of 60 days after the Administration makes a disability determination, or the last day of the initial 18-month period of Continuation Coverage, and
2. Such individual must notify the Plan Coordinator within 30 days of the date the Social Security Administration makes a final determination that he or she is no longer disabled.

.06 Termination of Continuation of Coverage

- A. COBRA also provides that Continuation Coverage will end for any of the following reasons:
1. The Employer no longer provides group health coverage to any of its employees (special rules may apply if a health plan is terminated or coverage is reduced on account of bankruptcy proceedings);
 2. The covered individual fails to pay the premium for their Continuation Coverage on time;
 3. The covered individual becomes covered under another group health plan as an employee, spouse or dependent, after the date the individual elects COBRA coverage so long as the new group health plan does not exclude or limit coverage for a pre-existing condition for which the individual was covered under the Benefits Plan;
 4. The covered individual becomes entitled to Medicare after the date the individual elects COBRA coverage; or
 5. The covered individual ends their legal separation from a covered employee and once again becomes covered under the Benefits Plan as a spouse.

In addition, if an individual's Continuation Coverage was extended to 29 months due to their disability, their extended coverage will end with the month that begins more than 30 days after a final determination under the Social Security Administration that the individual is no longer disabled even if the total period of coverage is less than 29 months. In no event, however, will the period of coverage be less than 18 months unless one of the above events occurs.

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) restricts the extent to which group health plans may impose pre-existing condition limitations. These rules are generally effective for plan years beginning after June 30, 1997. HIPAA coordinates COBRA's other coverage cut-off rule with these new limits as follows.

If an individual becomes covered by another group health plan and that plan contains a pre-existing condition limitation that affects the individual, their COBRA coverage cannot be terminated. However, if the other plan's pre-existing condition rules do not apply to the individual by reason of HIPAA's restrictions on preexisting condition clauses, the Benefits Plan may terminate the individual's COBRA coverage.

Under the law, individuals do not have to show that they are insurable to purchase Continuation Coverage. However, Continuation Coverage under COBRA is provided subject to their eligibility for coverage; the Employer reserves the right to terminate an individual's COBRA coverage retroactively if they are determined to be ineligible.

Covered individuals must pay the full premium for their Continuation Coverage, plus an additional 2% for an administrative fee.

COBRA also provides that, at the end of the Continuation Coverage period, individuals must be allowed to enroll in an individual conversion health plan, if any, provided under the Benefits Plan. If a covered individual elects to convert their coverage to an individual conversion plan, they must notify the Plan Coordinator within the 180-day period ending on the date their Continuation Coverage under the Benefits Plan will expire.

.07 Notice Procedures

1. Notice to be Provided by Employee or Family Member

Under COBRA, the employee or a family member has the responsibility to inform the Town's Employee Benefits Plan Coordinator of a divorce, legal separation, or a child losing covered dependent status under the Plan within 60 days of the event. The address for the Plan Coordinator is set forth below. You must inform the Plan Coordinator as soon as possible after one of these events has occurred. You must also notify the Plan Coordinator in accordance with the special rules regarding disability determination, if applicable. If you fail to inform the Plan Coordinator within 60 days after one of these events has occurred, you will lose your right to purchase Continuation Coverage under the Benefits Plan.

In addition, there are also special rules for Continuation Coverage which apply when the covered employee become entitled to Medicare as determined by the Social Security Administration. The Medicare rules are described in more detail above. To ensure that you receive the maximum amount of coverage in the event the covered employee becomes entitled to Medicare, you should notify the Plan Coordinator as soon as possible after such Medicare entitlement occurs.

2. Notice to be Provided by Employer

The Town has the responsibility to notify the Plan Coordinator of an employee's death, termination of employment or reduction in hours worked below the Benefits Plan eligibility threshold, or Medicare entitlement. Please note that for purposes of this notice, the Town and the Plan Coordinator are the same.

3. Notice to be Provided by Plan Coordinator

When the Plan Coordinator is notified of a divorce, legal separation, child losing dependent status, employee's death, termination of employment, reduction in hours worked, or Medicare entitlement, the Plan Coordinator will in turn notify you that you have the right to purchase Continuation Coverage.

4. Election Period and Premium Payment

Under the law, covered individuals have 60 days from the date which is the later of (i) the date they have been provided with this Notice, or (ii) the date they would lose coverage because of one of the events described above, to inform the Plan Coordinator that they want Continuation Coverage. Covered individuals must inform the Plan Coordinator by completing the Election Form and sending it to the Plan Coordinator no later than the end of the 60-day period described in the previous sentence.

The Continuation Coverage is optional. However, if covered individuals do not elect Continuation Coverage, their group health coverage under the Benefits Plan will end.

If covered individuals elect Continuation Coverage, the Town is required to allow them to purchase coverage which, as of the time coverage is being provided, is identical to the coverage provided under the plan to similarly situated employees or family members.

Covered individuals must pay all premiums for coverage due retroactive to the day they lost coverage under the Benefits Plan no later than the forty-sixth (46th) day following their initial election to purchase Continuation Coverage. For each premium payment thereafter, payment is due on the first of the month for which the premium applies (for example, the premium for the month of June is due June 1). If a covered individual does not pay their premium on or before the first of each month, a grace period of 30 days will be allowed for payment of any delinquent premium. A failure to pay premiums before the expiration of the grace period will result in a loss of coverage.

.08 Certification Procedures

The Benefits Plan provides Creditable Coverage Certifications to Plan participants in accordance with the Health Insurance Portability and Accountability Act of 1996. The certification, provided at the beginning and end of an individual's COBRA coverage and again within 24 months if the covered individual requests it, will specify the period of time for which the individual was covered under the Town's group health plan and under COBRA. This certification may be used to reduce or eliminate a pre-existing condition waiting period if the covered individual becomes covered under a new group health plan within 63 days of the date your coverage ends under the Town's Employee Benefits Plan.

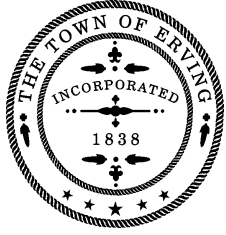
.09 Plan Coordinator

The requirements of COBRA are complicated. Any questions about the matters discussed in this Notice should be addressed to the Treasurer's Office, 12 East Main Street, Erving, MA 01344 or by email to treasurer@erving-ma.gov.

Finally, to ensure receipt of all of the important information concerning your Continuation Coverage, covered individuals should notify the Plan Coordinator in writing at the above address as soon as possible upon the occurrence of any of the following events:

1. The covered employee and their spouse legally separate or divorce.
2. The covered employee or their spouse change addresses.
3. The covered employee's child ceases to be an eligible dependent under the Benefits Plan.
4. The covered employee becomes entitled to Medicare.
5. The employee is covered by the Benefits Plan and the Social Security Administration determines that they are disabled, as well as a subsequent determination by the Social Security Administration that they are no longer disabled, if applicable.

DRAFT



TOWN OF ERVING

SELECT BOARD

12 East Main Street
ERVING, MASSACHUSETTS 01344

Tel. 413-422-2800

Fax 413-422-2808

Email: administrator@erving-ma.gov

Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

October 3, 2022

To: Select Board
From: Bryan Smith, Town Administrator

RE: Textile Disposal Options

What: Beginning November 1st, textiles and mattresses have been added to the list of waste ban items.

Mattresses

The Town already collects mattresses, for a fee, for processing and we will mitigate any vendor changes that must occur to align with the new requirements.

Textiles

To prepare for this change the Board has asked us to work on education materials for the public. To begin the State has provided a list for 1-to-2-page guides on the ability to recycle textiles and clarifying what is and is not acceptable. These guides should be made available to the residents in the Around Town, on the Town website, and social media. I have attached them.

Additionally, the Town can consider if it wants to partner with 3rd party entity to offer collection services. There are generally 3 collection service options that exist, which include a collection bin, single day collection events, and/or curbside home collection. Based on the previous Board conversation, the Town is not interested in a collection bin option. I have attached a list of vendors that offer these services in Massachusetts.

This summer I reached out to three vendors that commonly do this work in the state and have summarized their services below:

CMRK, Inc.

A for profit corporation that partners with other foundations and non-profit organizations. CMRK can provide bins, 1-day collections, and home collections. The Town can earn \$0.07 per pound of textiles. Currently providing our area with quarterly home collections.

Helpsy

Helpsy is a for profit, certified B corporation. Their response explains their mission orientation. They offer the Town revenue of \$40 per ton of textiles. They offer collection bins, 1 day collection events, home collection. Their response explains their sorting and reuse process.

Pay It Forward Recycling, Inc.

Pay It Forward Recycling is a for profit company based out of Westfield. Their response explains their history and reason for incorporating. There is a revenue sharing option for the Town per pound. The company has offered at home collection but has been in the process of focusing more on collection bin options.

Salvation Army

I have also put a call into the Salvation Army in Springfield as they may also be interested in providing a service to the Town.



LIST OF ACCEPTABLE MATERIALS

Textile Recovery Initiative

Acceptable Textile Items

Contrary to popular belief, textile donations in any condition are welcome by most for-profit and nonprofit textile collectors alike. This includes items with stains, rips, missing buttons or broken zippers. Why? Textiles are a valuable commodity! Items that don't sell in thrift stores are baled and sold to brokers or graders who sell to overseas markets. In developing nations, used clothing and textiles supply local enterprises with materials to repair and resell. Other textiles can be converted to their original fibers and manufactured into other materials, such as wiping cloths or insulation.

The only **unacceptable** donations are wet/moldy items or items contaminated with oil or hazardous substances. The items below can be donated in **any condition** as long as they are **clean, dry** and **odorless**. Check with your local textile collector for further information about what is accepted.

Clothing

- Tops (t-shirts, blouses, shirts, tank tops)
- Sweaters
- Sweatshirts
- Dresses
- Outerwear (coats, jackets, blazers)
- Bottoms (pants, jeans, sweatpants, skirts, shorts)
- Suits
- Socks
- Pajamas
- Bras & Underwear

Footwear

- Shoes
- Heels
- Flats
- Sandals
- Boots
- Sneakers
- Cleats
- Slippers

Accessories

- Hats
- Bags (purses, backpacks, duffle bags, totes)
- Belts
- Gloves
- Ties
- Scarves
- Bathrobes

Linens

- Sheets
- Blankets
- Towels
- Curtains
- Aprons
- Dish cloths
- Table linens
- Comforters
- Throw rugs
- Placemats
- Pillows
- Canvas
- Rags

Other

- Stuffed animals
- Halloween costumes
- Pet beds and clothing



FACT SHEET

Textile Recovery Initiative

Textile Waste

- The EPA's report on municipal solid waste¹ states 6% of all of materials going into landfills or incinerators are clothing or textile products.
- According to waste composition analyses², approximately 230,000 tons of usable clothing, footwear, linens and other textile products are thrown away in Massachusetts annually.
- Approximately 95% of all used clothing, footwear and other household textile products such as sheets, towels, curtains, pillows and stuffed animals can be reused or recycled, yet only 15% of reusable textiles are recovered from the waste stream.
- The EPA reports only 2.3 million tons of used clothing and household textiles are recovered for reuse and recycling annually in the U.S., while more than 15 million tons is discarded in our nation's landfills and incinerators.

Environmental Impact

- Textile reuse and recycling has the second highest potential environmental impact on reducing greenhouse gases compared to other recyclables. Recycling 2.3 million tons of clothing per year is the equivalent of removing 1.3 million cars from U.S. roads¹. The greenhouse gas reduction impact of other recyclables is as follows:
 - Yard trimmings = removing 220,000 cars
 - Glass = removing 210,000 cars
 - Plastic = removing 760,000 cars
 - Aluminum = removing 1.3 million cars
- Cotton is the most pesticide-dependent crop in the world. It takes one-third of a pound of pesticides to make one t-shirt.³
- Production of synthetic (petroleum-based) fibers like polyester and nylon produce volatile organic compounds, nitrous oxide (a greenhouse gas) and consume large amounts of water.

Solution

- **Donate!** Contrary to popular belief, donations in any condition are welcomed by most for-profit and nonprofit textile collectors alike. This includes stains, rips, missing buttons or broken zippers. The only unacceptable donations are wet/moldy items and items contaminated with oil or hazardous substances. See the full list of acceptable items in the media kit.



- **Where to donate.** Contact your municipal recycling coordinator or visit MassDEP's [Beyond the Bin Directory](#) to locate a textile collection location near you.
- **Do not** place clothing and other textiles in your curbside recycling bin. Items will get tangled in recycling machinery and can cause injury to workers.

What Happens to Your Donation?

- About 45% of donated textiles are reused and sold as secondhand apparel, either through charitable organizations or for-profit exporters that sell baled clothing to developing countries.
- Organizations such as Goodwill and Salvation Army operate retail stores where donated clothing and household items are sold. Clothing and textiles that don't sell in store are baled and sold to textile brokers. Both activities generate revenue to support the organizations' core missions.
- For-profit textile recyclers collect, sort and bale textiles and sell them to export markets. Clothing exports from North America supply high-quality products to local entrepreneurs in Africa, Latin America and other regions. 95% of the African population wears used clothing.
- Another 30% of donated textiles are converted to industrial wiping cloths for industries such as automotive and public works.
- 20% is sent to fiber conversion companies where textiles are broken down into their basic fiber components to be remanufactured into insulation for automotive vehicles or home, carpet padding, or sound-proofing material.
- The remaining 5% is thrown away because it is wet (mildewed) or stained with a hazardous solvent such as gasoline.

About the Textile Recovery Initiative

The Textile Recovery Initiative is a statewide effort of the Massachusetts Department of Environmental Protection (MassDEP), the Secondary Materials and Recycled Textiles Association (SMART), and the Council for Textile Recycling (CTR). The initiative encourages Massachusetts residents to donate unwanted clothing, footwear and other textile products to collection bins, for-profit and charitable organizations. The initiative aims to reduce the amount of textiles that end up in the waste stream by educating the public on ways to recover and reuse textiles.

SOURCES

¹Advancing Sustainable Materials Management: Facts and Figures 2013. U.S. Environmental Protection Agency. Published June 2015.

²Based on data from Municipal Waste Combustor Class II Recycling Program Waste Characterization Studies, February & March 2011, available at <http://www.mass.gov/eea/agencies/massdep/recycle/reporters/waste-reduction-and-recycling.html>.

³Secondary Materials and Recycled Textiles Association: <http://www.smartasn.org/consumers/index.cfm#>.

Textile Collection Organizations Operating in Massachusetts*

Organization Name	Website	Services Provided			Contact Name/Email	Phone
		Curbside or "porch pick-up"	Donation bins at municipal drop-off sites	One-day collection events hosted by municipality		
Apparel Impact	apparelimpact.com		✓		Joe Whitten joe@apparelimpact.com	603-505-4779
Bay State Textiles	baystatetextiles.com		✓	✓	Samantha Marino samantha@baystatetextiles.com	508-402-0079
CMRK	cmrkne.com/	✓	✓	✓	Taylor Millspaugh taylor@cmrkne.com	617-851-3632
Epilepsy Foundation of New England Donation Center	donateclothes.epilepsynewengland.org	✓	✓	✓	Kim Scott kscott@donatenewengland.com	978-398-1376
Hartsprings Foundation	hartsprings.org	✓	✓	✓	Laurie Dimock ldimock@hartsprings.org	413-292-5704
Helpsy	helpsy.co	✓	✓	✓	Lisa Sciannella lisa@helpsy.co	800-244-6350
More Than Words	mtwyouth.org/	✓	✓		Erin Dyson-Enamorado edyson-enomorado@mtwyouth.org	
Morgan Memorial Goodwill Industries	goodwillmass.org		✓	✓	Adam Dossas adossas@goodwillmass.org	617-541-1434
Pay It Forward Recycling, LLC	payitforwardrecycling.org	✓	✓	✓	Gary Hagar ghagar9036@gmail.com	413-209-1635
Planet Aid Inc.	planetaid.org		✓		Greg Nesta gnesta@planetaid.org	508-259-6160
Simple Recycling Massachusetts	simplerecycling.com	✓	✓	✓	info@simplerecycling.com	866-835-5068

*This list was compiled by MassDEP through a survey of textile collection organizations. Only those responding to the survey are included, so it is not necessarily a comprehensive list. MassDEP makes no endorsement of these organizations.

From: [Taylor Millspaugh](#)
To: [Bryan Smith](#)
Cc: [Jacob Smith](#); [Jan Ameen-FCSWMD](#); [Elizabeth Sicard](#); [Glenn McCrory](#)
Subject: [EXTERNAL]RE: Textile Collection Inquiry
Date: Thursday, July 14, 2022 8:30:59 AM
Attachments: [BBBS Foundation.pdf](#)
[MADD Letter .pdf](#)
[Newspaper AD.pdf](#)
[St Vincent .pdf](#)
[image001.png](#)

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Hello Bryan-

Thank you so much for reaching out! We would love to help Erving with diverting useable items out of the landfill and generate some funding for your town. I will actually be in your area on the 18th and would be available midmorning if you would like to meet.

- CMRK Inc is a for profit company as we are a proud partner for the Foundation as well as many other organizations. Please find three letters of recommendations from some of our partners. We are the logistical experts, we provide revenue without any of the liability for our non-profit partners. We absorb all overhead costs of running a collection and recycling operation while simultaneously providing unrestricted funding for our non-profit partners. This allows the charities to have a steady and reliable source of income trusted throughout New England for over 35 years while giving them support to focus on their organization's mission of giving back to our local community via their charitable acts.
- We will pay the town 7 cents per pound of clothing and textiles collected in the donation bins. We also help the town by diverting items out of your waste stream with the additional items that we are able to collect such as swap shop item.
- Currently we are in the area quarterly for home pickups, but as our partnerships grow and the word of our partnerships spreads I suspect that we will be able to be out more frequently. We have preset dates that if a resident want to schedule, they will be given that date. This is why we love offering home picks up and the bin services. Bins are wonderful for quick access and home pick ups are great for people who may be home bound, do not have access to a car or have large donations.
- We pride ourselves on service! We place our bins in areas that have high visibility (transfer station, police departments, schools, etc.). If our bins are in a transfer station, we usually will visit once a week or once every other week, depending on volume. If it is out in the public, a minimum of once a week. Some bins are so busy that we visit 7 days a week!
- The vast majority of our clothing and textiles stays within the US and North America. We do this because it makes the most sense for logistics and revenue.
- Our contract states that if for some reason, you would like to end our relationship, you give us 30 day notice.
- Have collected almost 1,000 pounds from Bernardston. I am sure the Louis, the Town Administrator would be happy to discuss our partnership thus far. I am happy to ask him- if

you would like. We have grown to 38 communities across Massachusetts. In Western part include Lee, Egremont, Sandisfield, Blandford, Alford and more. We are in process with 5 other towns in your area that will be official in the next month!

- I have also attached a sample marketing material of the items that we collect
- If you would like to come visit our facility in Northborough, we would love to show you our operations! It is a really amazing place.

Please let me know if you have any additional questions. We would love to help!

Thank you,

Taylor

Taylor Millspaugh
Director of Business Development
C:617-851-3632



15 Railroad Drive
Northborough, MA 01532

From: [Bryan Smith](#)

Sent: Wednesday, July 13, 2022 5:27 PM

To: taylor@cmrkne.com

Cc: [Jacob Smith](#); [Jan Ameen-FCSWMD](#); [Elizabeth Sicard](#); [Glenn McCrory](#)

Subject: Textile Collection Inquiry

Good afternoon Taylor,

The Erving Select Board is beginning to review potential options for diverting textiles from the curbside trash collection program to meet the requirements of the November 2022 waste ban. As such, I am collecting information about potential service providers for the Board to consider. I anticipate that they may have more information that they will require in order to make an informed decision, but I have several data points that I am looking to collect to begin their consideration.

1. Based on the literature that you sent me, your company has identified the Big Brother Big Sister Foundation as a beneficiary. Can you please describe this model and explain how exactly the Foundation will benefit?
2. Your literature also discusses generating a revenue for the Town. Can you please specifically describe what the revenue benefit proposal is?
3. Your literature discusses both pre-scheduled collection and collection bins. Are you offering both options to the Town or would the Town have to choose one?
 1. Regarding pre-scheduled pickup, what would a typical scheduled pickup timeline look

like for resident that has called to schedule?

2. Regarding the collection bins, how often does your company come to empty the bins?
The Town would certainly be considered about overflowing bins and delayed collection.
4. Where are the materials sent for reuse and recycling?
5. If the Select Board was to proceed with your company, what kind of contractual commitment would you be seeking from us?

Lastly, you noted that you are working with the Town of Bernardston. Can you tell me how that partnership is going and can you provide me with any other municipalities that you are working with?

Thank you for your time!



Bryan Smith

Town Administrator

Town of Erving

Phone (413) 422-2800 ext. 1102

Web www.erving-ma.gov

Address 12 East Main Street, Erving, MA
01344



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From: [Lisa Sciannella](#)
To: [Bryan Smith](#)
Cc: [Jacob Smith](#); [Jan Ameen-FCSWMD](#); [Glenn McCrory](#); [Elizabeth Sicard](#); [Nicole Pellagrino](#)
Subject: [EXTERNAL]Re: Textile Reuse & Recycling in Erving, Massachusetts
Date: Thursday, July 14, 2022 3:25:43 PM
Attachments: [image001.png](#)
[WHAT WE ACCEPT list.pdf](#)
[Copy of Copy of BLANK Municipal Agreement HELPSY.docx](#)

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Good afternoon Bryan,

Thank you for reaching out and preparing information to better serve your community ahead of the MA Textile Waste Ban! We are excited to be offering textile services in MA including in Boston, Cambridge, Newton, Leominster, and many more.

I am including my colleague, Nicole in this email as she will be happy to meet with you to discuss what our textile recycling programs can look like and how we can best tailor one that fits our needs. Please let us know what your availability is in the coming weeks and we further our discussion.

In the meantime, answers to your questions are below:

- Based on the website literature, Helpsy is a Certified B corporation. Can you describe the model and the mission?

As a Certified B corporation we are committed to using business as a force for good. We do this by working sustainably towards a goal of reducing textile waste. In doing so we also create honorable wage jobs (above Boston's definition of living wages), save CO2 emissions and gallons of water while providing responsible clothing reuse to millions of people. Each year Helpsy diverts around 30 million pounds of clothing.

- I was told that the service can generate revenue for the Town. Can you please specifically describe what the revenue benefit proposal is?

It is true! Helpsy will pay per pound of clothing collected and we also provide tonnage reports that can be used to submit to MASSDEP.

We offer a rate of \$40 per ton.

- The website discusses both pre-scheduled collection and collection bins. Would Helpsy be offering both options to the Town or would the Town have to choose one?

We offer three modes of collection: collection bins, home pickups as well as clothing drives. Together, we will come up with the best textile recycling plan that will meet your needs.

- Regarding pre-scheduled pickup, what would a typical scheduled pickup timeline look like for residents that has called to schedule?

We would offer residents a day of the week that we will be in your community (for example Fridays) and residents can sign up (via website or calling in) up to 24 hours before the day of the pickup. Our goal is to make it as convenient as possible for residents and that includes not having long wait times for pickups. We also want to collaborate with each town and pick a day of the week that would reduce the chances of overlapping with existing trash or recycling routes.

- Regarding the collection bins, how often does your company come to empty the bins? The Town would certainly be considered about overflowing bins and delayed collection.

Our goal is always to service collection bins before they are full. Our target is around 1/3 - 1/2 way full to prevent any overflow and unsightliness.

- Where are the materials sent for reuse and recycling?
Helpsy is unique in that our goal is to find the best end use for clothing. We sort a lot of the clothing to determine what happens to the clothes. All the sorting is done domestically by sorters paid honorable living wages. Over 75% of the clothing we collect stays domestic. A small % of the clothing is no longer usable as clothing and will be sent to third parties for recycling. I have attached a list of what we accept.
- If the Select Board was to proceed with your company, what kind of contractual commitment would you be seeking from us?

For your reference, please see sample attached agreement. It is meant to serve as a starting point and your legal team can redline as needed.

I'd also like to note that we provide marketing support to your municipality at no cost to your town. That would include customized digital content, press releases templates and monthly graphics to promote the program.

Lastly, below is a list of all the municipalities that we work with:

In MA: Newton, Salem, Malden, Tyngsborough, Watertown, Cambridge, Boston, Billerica, Ipswich, Westborough, Georgetown

In NH: Hampton, Bow, Exeter, Pembroke, Hooksett, Manchester

In NJ: Toms River, Brick, Palisades Park

In CT: Stamford, Norwalk, Trumbull

In NY: Westchester County

Respectfully,

Lisa Sciannella
Head of Location Sales
Director of Municipal Relations
lisa@helpsy.co
(301) 602-8950



On Wed, Jul 13, 2022 at 5:46 PM Bryan Smith <bryan.smith@erving-ma.gov> wrote:

Good afternoon Lisa,

The Erving Select Board is beginning to review potential options for diverting textiles from the curbside trash collection program to meet the requirements of the November 2022 waste ban. As such, I am collecting information about potential service providers for the Board to consider. I colleague in the State told me about the services that Helpsy provides to their community, and I wanted to reach out and see if Helpsy was providing services in Western Massachusetts.

If so, I have several data points that I am looking to collect information on to begin their consideration.

- Based on the website literature, Helpsy is a Certified B corporation. Can you describe the model and the mission?
- I was told that the service can generate a revenue for the Town. Can you please specifically describe what the revenue benefit proposal is?
- The website discusses both pre-scheduled collection and collection bins. Would Helpsy be offering both options to the Town or would the Town have to choose one?
 - Regarding pre-scheduled pickup, what would a typical scheduled pickup timeline look like for resident that has called to schedule?
 - Regarding the collection bins, how often does your company come to empty the bins? The Town would certainly be considered about overflowing bins and delayed collection.
- Where are the materials sent for reuse and recycling?
- If the Select Board was to proceed with your company, what kind of contractual commitment would you be seeking from us?

Lastly, could you provide me with any other municipalities that you are working with in Massachusetts?

Thank you for your time!



Bryan Smith

Town Administrator

Town of Erving

Phone (413) 422-2800 ext. 1102

Web www.erving-ma.gov

Address 12 East Main Street, Erving,
MA 01344



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From: [Gary Hagar](#)
To: [Bryan Smith](#)
Subject: [EXTERNAL]Re: [EXTERNAL]Textile Recycling
Date: Monday, July 18, 2022 5:41:47 PM
Attachments: [image001.png](#)

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Hi Bryan,

Sorry for the delayed response.

I have been in business for approximately six years. I started the company as a result of my full time job as a police officer in Westfield, Mass. I was dealing with several individuals who were continually getting into trouble for petty crime. After several years of seeing the same thing over and over, they all stated they could never find jobs because of their past history. I thought they would be able to find work at our local Salvation Army but were unsuccessful there as well. At this time, I figured I could start the same thing and be able to hire people that were having a hard time getting their feet back on the ground. We started very small with about 14 bins locally and have since grown. Although we do a lot of work with local community groups such as the Boys and Girls Club of Westfield, the Agawam Public Schools, Shriners Hospital, and other non profit organizations my company is a for profit company.

We currently work with several different clients and have bins in over 200 locations. I also work with the Town of Yarmouth, MA, Southwick, MA, and the school department of Agawam, MA. With our town contracts we do provide an additional revenue stream. For these contracts we place bins at town common areas, such as city halls, transfer stations, schools, and/or police and fire departments. Based on pounds collected a portion is redistributed to the City or Town.

As of late, we have started to stray away from going house to house for collection purposes as the cost of fuel has made it a financial burden. However, we service our bins regularly. In most cases a weekly visit to the bins is sufficient, but we guarantee an immediate response should there ever be an issue at one of our locations.

Currently 90 percent of our used textiles are reused as second hand clothing. The remaining ten percent is often used for rags.

If the Select Board does decide to partner with us we would like a minimum of a one year contract. However, I am open to suggestions from the Board.

Should you have an questions please call me at (413) 209-1635. I am always available and would love to discuss this more with you.

Thank you for your time,

Gary Hagar

On Thu, Jul 14, 2022 at 8:26 AM Bryan Smith <bryan.smith@erving-ma.gov> wrote:

Good morning Gary,

Thank you for responding!

The Erving Select Board is beginning to review potential options for diverting textiles from the curbside trash collection program to meet the requirements of the November 2022 waste ban. As such, I am collecting information about potential service providers for the Board to consider. I found your organization through an internet search. If so, I have several data points that I am looking to collect information on to begin their consideration.

- Based on the website literature, Pay it Forward Recycling appears to be mission oriented. Can you describe your business model and the mission?
- Does your service provide a revenue to the Town?
- The website discusses both pre-scheduled collection and collection bins. Would Pay It Forward Recycling be offering both options to the Town or would the Town have to choose one?
 - Regarding pre-scheduled pickup, what would a typical scheduled pickup timeline look like for resident that has called to schedule?
 - Regarding the collection bins, how often does your company come to empty the bins? The Town would certainly be concerned about overflowing bins and delayed collection.
- Where are the materials sent for reuse and recycling?
- If the Select Board was to proceed with your company, what kind of contractual commitment would you be seeking from us?

Lastly, could you provide me with any other municipalities that you are working with in Massachusetts?

I appreciate your time!



Bryan Smith

Town Administrator

Town of Erving

Phone (413) 422-2800 ext. 1102

Web www.erving-ma.gov

Address [12 East Main Street, Erving, MA 01344](#)



From: Gary Hagar <ghagar9036@gmail.com>
Sent: Wednesday, July 13, 2022 7:07 PM
To: Town Administrator <administrator@erving-ma.gov>
Subject: [EXTERNAL]Textile Recycling

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Hi Bryan,

We do offer services for municipality textile recycling. I currently work with several other towns and would be interested in speaking with you. When you have some time please call me at (413) 209-1635. I look forward to speaking with you.

Thank you,

Gary Hagar

Pay It Forward Recycling

413-209-1635

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Meeting Minutes

Board: Select Board / Water Commissioner's Meeting
Date: Wednesday, September 21, 2022
Location: Senior & Community Center, 1 Care Drive, Erving, MA 01344

Select Board Present: Jacob Smith, Scott Bastarache, William Bembury
Also, Present: Corey Higgins
Press: None

At 7:07 PM **Chairman Smith** called the meeting to order.

Executive Session

At 7:08 PM **Chairman Smith** made a motion for the Select Board to entire Executive Session pursuant to Massachusetts General Law Chapter 30A, Section 21 (a) (3) "to discuss strategy with respect to collective bargaining ...if an open meeting may have a detrimental effect on the bargaining ... position of the public body and the chair so declares." (New England Police Benevolent Association, Local 121), which the Chair does declare; and

To enter Executive Session pursuant to Massachusetts General Law Chapter 30A, Section 21 (a) (2) ... "to conduct collective bargaining session..." (New England Police Benevolent Association, Local 121); and

To enter Executive Session pursuant to Massachusetts General Laws Chapter 30A, Section 21 (a) (1) "[t]o discuss the reputation, character, physical condition or mental health, rather than professional competence, of an individual, or to discuss the discipline or dismissal of, or complaints or charges brought against, a public officer, employee, staff member or individual"; and

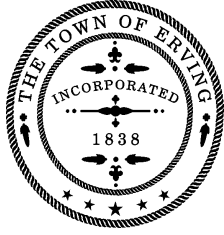
To enter Executive Session pursuant to Massachusetts General Laws Chapter 30A, Section 21 (a) (7) "[t]o comply with, or act under the authority of, any general or special law or federal grant-in-aid requirements[.]" specifically to comply with the Massachusetts Supreme Judicial Court's decision in Suffolk Construction Co., Inc. v. Division of Capital Asset Management, 449 Mass. 444 (2007) concerning attorney-client privileged communications. **Selectman Bastarache** seconded. **Discussion:** **Chairman Smith** stated that the Select Board would not return to Regular Session. **Roll Call Vote:**

Selectman Bembury	Aye
Selectman Bastarache	Aye
Chairman Smith	Aye

The Select Board did not return to Regular Session.

Respectfully submitted,

Scott Bastarache
Selectman



TOWN OF ERVING

SELECT BOARD

12 East Main Street
ERVING, MASSACHUSETTS 01344

Tel. 413-422-2800
Fax 413-422-2808
Email: administrator@erving-ma.gov

Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

September 30, 2022

To: Select Board
From: Bryan Smith, Town Administrator
CC: Elizabeth Sicard, Administrative Assistant

RE: Historical Commission Resignations

In recent weeks our office has received letters of resignation from Eric Duffy and John Rice from the Historical Commission. Their letters of resignation are attached. Both members have served the Town on the Commission for many years and we are appreciative of their service.

This leaves the Historical Commission with two (2) vacancies. Our office will begin the notification process to the public regarding the vacancies on the Commission.

To Whom it may concern,

Effective immediately, I resign my position as EHC ~~Chair~~. Thank you for the opportunity to serve the town.

Thank you.

Chris Duffy
9/1/22

ERVING SELECT BOARD MEMBERS

I APOLOGIZE FOR ANY INCONVENIENCE
AS I WISH TO RESIGN FROM THE
HISTORICAL COMMISSION AS OF 9-20-22.

THANK YOU
John D Rice

RECEIVED SEP 26 2022



Elected Official Vacancies for the Erving Recreation Commission, Board of Assessors, School Committee and Planning Board

The Town of Erving would like to announce three (3) vacancies on the Recreation Commission, one (1) vacancy on the Planning Board, one (1) vacancy on the Board of Assessors, and one (1) vacancy on the School Committee. These vacancies are for elected positions. In accordance with MGL Chapter 41, Section 11, the Select Board is seeking interested residents to serve in these positions until the Annual Town Election in 2023. To be considered, an interested person must be a registered voter of the Town of Erving.



The **Planning Board** is a five (5) member elected Board that guides the development of Erving by serving as the Special Permit and site plan review authority under the Zoning Bylaw. The Board also administers the provisions of the Subdivision Control regulations. The Planning Board plays an important role in reviewing the Zoning Bylaw, proposing edits, and holding public hearings for voters before any revisions are presented at Town Meeting.



The **Recreation Commission** is a five (5) member elected Board that provides youth sports, recreational programs, and special events for Erving residents. The Commission does so while overseeing the use and development of the Town's five (5) parks and playgrounds.



The **Board of Assessors** is a three (3) member elected Board that supervises the work performed by the Principal Assessor. This position approves and oversees the tax rate setting process as well as approval of exemptions, abatements, motor vehicle excise and valuation of real and personal property in the Town of Erving. There is a requirement to meet at least once a month for a 60 to 90-minute meeting.



The **School Committee** is a five (5) member elected Board that establishes educational goals and policies for Erving Elementary School consistent with the requirements of the law. Each member is expected to attend all meetings (3rd Tuesday of every month) and participate in subcommittees. Members are also encouraged to attend the Union 28 District quarterly meetings. It is highly recommended that the Superintendent's Evaluation be completed by each member.

If you are interested, please send a written letter of interest that identifies the position that you are interested in serving in and that includes your name, address, and contact information. It may be helpful to include an explanation of your education, training, experience, and other interests that would lend itself to the position sought. Letters of interest are due by **Wednesday, September 21, 2022**.

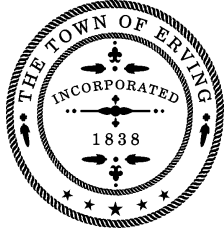
Letters can be sent by mail to:

Erving Select Board

12 East Main Street

Erving, Massachusetts 01344

Or by email to: volunteer@erving-ma.gov.



TOWN OF ERVING

SELECT BOARD

12 East Main Street
ERVING, MASSACHUSETTS 01344

Tel. 413-422-2800

Fax 413-422-2808

Email: administrator@erving-ma.gov

Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

September 30, 2022

To: Select Board
School Committee
From: Bryan Smith, Town Administrator
CC: Richard Newton, Town Clerk
Elizabeth Sicard, Administrative Assistant

RE: Elected Official Appointment – School Committee

In accordance with Massachusetts General Law Chapter 41, Section 11 the Select Board and the remaining members of the School Committee can jointly meet to consider the appointment of a member to the vacant seat on the School Committee. The appointment is made if a majority of the Select Board and the remaining members of the School Committee vote in favor through a roll call vote. The individual must be a registered voter and can be appointed to serve for the balance of the year and the seat will appear on the Annual Town Election warrant for May 2023 for the balance of the term.

Beginning on August 24, 2022, the opportunity was posted on the Town website, shared on social media, printed in the Around Town Newsletter and at Town Hall with a deadline to respond of September 21, 2022. As of the deadline, one (1) letter of interest was received from Mackensy Bailey. The communication is attached. I have verified with the Town Clerk that Mackensy is a registered voter.

Suggested Vote Language

A motion to appoint _____ as a member of the School Committee, through June 30, 2023.

Vote

A roll call vote is required.

From: [Jennifer Eichorn](#)
To: [Bryan Smith](#)
Subject: Fwd: School committee vacancy
Date: Wednesday, September 7, 2022 8:48:58 AM

Hi Bryan,

Here is Mackensey's letter of interest. Is it possible to schedule a joint meeting with the Select Board prior to 9/20?

Thanks so much!!

Jenn

----- Forwarded message -----

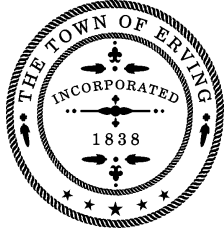
From: Mackensey Bailey <mbailey51613@gmail.com>
Date: Wed, Aug 24, 2022 at 12:36 PM
Subject: School committee vacancy
To: jennifer.eichorn@erving.com <jennifer.eichorn@erving.com>

Dear School Committee Members,

I would like to be considered for the open seat on the Erving Elementary School Committee. I have previously served on the committee as well as worked as a staff member at EES. I believe that I have a wealth of knowledge and experience that could be utilized by the committee.

Please let me know if there is anything further you need from me.

Thank you,
Mackensey Bailey



TOWN OF ERVING

SELECT BOARD

12 East Main Street
ERVING, MASSACHUSETTS 01344

Tel. 413-422-2800

Fax 413-422-2808

Email: administrator@erving-ma.gov

Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

September 30, 2022

To: Select Board
Recreation Commission
From: Bryan Smith, Town Administrator
CC: Richard Newton, Town Clerk
Elizabeth Sicard, Administrative Assistant

RE: Elected Official Appointment – Recreation Commission

In accordance with Massachusetts General Law Chapter 41, Section 11 the Select Board and the remaining members of the Recreation Commission can jointly meet to consider the appointment of a member to the vacant seat on the Recreation Commission. The appointment is made if a majority of the Select Board and the remaining members of the Recreation Commission vote in favor through a roll call vote. The individual must be a registered voter and can be appointed to serve for the balance of the year and the seat will appear on the Annual Town Election warrant for May 2023 for the balance of the term.

Beginning on August 24, 2022, the opportunity was posted on the Town website, shared on social media, printed in the Around Town Newsletter and at Town Hall with a deadline to respond of September 21, 2022. As of the deadline, one (1) letter of interest was received from Kathleen Sadler. The communication is attached. I have verified with the Town Clerk that Kathleen is a registered voter.

Suggested Vote Language

A motion to appoint _____ as a member of the Recreation Commission, through June 30, 2023.

Vote

A roll call vote is required.

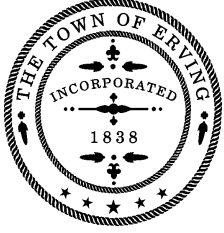
From: [Katie Sadler](#)
To: [Volunteer in Erving!](#)
Subject: [EXTERNAL]Recreational commission
Date: Wednesday, September 21, 2022 3:07:44 PM

CAUTION: This email originated from outside of the Town of Erving. Do not click links or open attachments unless you recognize the sender and know the content is safe. When in doubt, please contact the Erving IT Department

Hello my name is Kathleen Sadler I'm interested in helping the rec department and getting more community involved in our town. I would like to express my interest in becoming a board member. I have 2 young children and I enjoy our parks and being a part of the community and events.

Thanks
Kathleen Sadler
19 Central St
Erving, MA 01344
413-475-2225

Sent from Samsung Galaxy smartphone.
Get [Outlook for Android](#)



TOWN OF ERVING

SELECT BOARD

12 East Main Street
ERVING, MASSACHUSETTS 01344

Tel. 413-422-2800
Fax 413-422-2808
Email: administrator@erving-ma.gov

Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

September 30, 2022

To: Select Board
Board of Assessors
From: Bryan Smith, Town Administrator
CC: Richard Newton, Town Clerk
Elizabeth Sicard, Administrative Assistant

RE: Elected Official Appointment – Board of Assessors

In accordance with Massachusetts General Law Chapter 41, Section 11 the Select Board and the remaining members of the Board of Assessors can jointly meet to consider the appointment of a member to the vacant seat on the Board of Assessors. The appointment is made if a majority of the Select Board and the remaining members of the Board of Assessors vote in favor through a roll call vote. The individual must be a registered voter and can be appointed to serve for the balance of the year and the seat will appear on the Annual Town Election warrant for May 2023 for the balance of the term.

Beginning on August 24, 2022, the opportunity was posted on the Town website, shared on social media, printed in the Around Town Newsletter and at Town Hall with a deadline to respond of September 21, 2022. As of the deadline, one (1) letter of interest was received from Erik Eichorn. The communication is attached. I have verified with the Town Clerk that Erik is a registered voter.

Suggested Vote Language

A motion to appoint _____ as a member of the Board of Assessors, through June 30, 2023.

Vote

A roll call vote is required.

9/21/22

ERIK EICHORN
21 RIDGE RD.
ERVING MA. 01344
413-977-8739
ERIK.EICHORN@ERVING-MA.GOV

To whom it may concern:

I am interested in the open position of Assessor for the town of ERVING, MA.

I have served on the Recreation Commission for 6 years and chair for the last 3 years maintaining and managing Parks and Sports for the Town.

For the last 25 years at my job at Coca-Cola I have managed 5 employees, order parts and maintain about 5000 pieces of equipment in our territory. I have a \$170,000 capital budget to purchase new equipment for the year. I also manage the operational expenses thru the year to come in within budget. I feel these factors will assist me in the Assessor Role.

I graduated from Turners Falls High school in 1993. Attended GCC and STCC.

SINCERELY,

ERIK EICHORN.



TOWN OF ERVING

Department of Police

French King Highway
Erving, Massachusetts 01344
Phone (413) 423-3310 · Fax (413) 423-3340

Jacob Smith, Chair
William Bembury
Scott Bastarache

September 5, 2022

Select Board

Bryan Smith
Town Administrator

Dear Select Board

Erving Police Canine Program Proposal

Proposal narrative:

It has been a desire of mine ever since becoming the Police Chief to reestablish the Erving Police Canine Program. I found over the years, when I was part of the program, it brought a tremendous amount of support not only to the department, but the Town and its residents. The program was a huge success throughout Franklin County. I felt it brought the police department and the community even closer in our relationship and partnership. The program came to an end when I was promoted from Patrol Officer to Sergeant and realized the amount of time that had to dedicate to both was just too much.

However, I do believe we are in a much different place today with other members of this department that have extended an interest in a potential position. It is my vision to bring a Bloodhound onto our staff. I believe in the Bloodhound breed for many reasons, but just to list a few it is my understanding that Franklin County currently does not have a Bloodhound in the area, with the closest being Worcester County. I believe that from my experience the Bloodhound has a superior ability to track human scent over other breeds. I am not interested in a canine that would be used for narcotic work or related searches; therefore, a single purpose canine is all we need. Finally in my opinion the Bloodhound is a friendly breed and would be an asset in the community outreach having the canine involved in public events and used in the situations where it could bring comfort to someone who has been involved in a traumatic experience.

To sum up my vision for the canine program. I am looking to establish a canine program that would assist in searching for lost and missing people, criminal apprehension, public relations, and a comfort dog.

Anticipated cost:

During my research, the most expensive cost would be the initial reestablishment of the program. Purchasing a canine, modifications to a cruiser and establishing suitable living conditions at the handler's home and police station. This would consist of fencing, doghouse, and kennel pad. After this was completed, this would be a one-time cost.

Outfitting of Police Cruiser: \$7,180.63 (may be able to get this cost down around \$4,500.00 – \$5,500.00.) This cruiser would be a "take-home cruiser" for transporting the canine to and from work and for emergency callouts.

Purchase of canine: \$800.00 – \$2,000.00 (I would be looking for donations, which we did receive in the past and we were able to obtain the canine for free.)

Living conditions: Doghouse \$200.00 x 2, Kennel \$500.00 x 2 and pad \$1,500.00 x 2 total \$4,400.00

Another expense, which would be recurring is Officer Compensation. According to the Fair Labor Standards Act, which I have attached a copy for your review, clearly states that an officer needs to be compensated for (30) thirty minutes per, for (7) seven days per week. The FLSA does provide three options for this compensation; Pay the handler (3.5) three and half hour's overtime, give the handler compensable time or a combination of both. I fully understand the amount of time and effort that must be invested into a successful program. I would be looking for a candidate that not only has the time to invest, but also understands this could become an expense that is not cost effective. Therefore, I would be looking to compensate the handler with both time and pay.

The handler would further be granted overtime for any calls where the canine is requested outside of the officer's normal work hours. This would be handled according to the current Union Contract and Town Policy. The handler would be eligible for overtime or compensable time. I cannot put a dollar amount on this but would have to monitor this no different than other overtime.

Officer overtime: Rate of pay times 1.5 for a total of 3.5 or 4 hours per week

Overtime rate calculated: Highest rate \$43.54, (lowest rate \$34.33) x 8 hours \$348.32 x 26 pay periods \$9056.32

Officer compensable time: 4 hours of pay for a total of 6 hours off a week (this is manageable depending on staffing)

Combination: Look for times when the officer can use time but understand there may be times when pay is offered when time off is not able to be scheduled. (Due to vacation time, staffing levels etc.)

Officer Callouts: minimum (4) four-hour callouts, or compensable time. (This would be monitored and only allowed if funds are available or severity of need for canine.)

Officer Training: 16 hours a month or compensable time (if scheduling allows office would be required to use training day as workday)

Additional cost would consist of things like food, veterinarian care, additional equipment, and uniforms for the handler. These prices are approximate as they could fluctuate from month to month.

Veterinarian Care: On the average pending no major injuries or sicknesses the average veterinarian cost would be \$200.00 dollars for basic yearly care to include check-up and vaccinations. Additional costs would be spaded or neutered, microchip, and having the canine stomach tacked (this is recommended in this breed to avoid bloat). Contact with a few area veterinarians have already been made to discuss any discounts they may be able to provide the town. In the past we did receive assistance from North County Veterinary Clinic. They have agreed again to provide any needed services and have guaranteed a discount from 50%-60% based on care and services needed. I have attached paperwork from North County for you all to review.

Yearly checkup: \$200.00

Tacking, spade or neutered: \$750.00 - \$800.00 (One-time fee)

Food and equipment for canine: When we had the canine program in the past, I purchased most of my food and equipment form Greenfield Farmers Cooperative Exchange and they provided us with a 10% discount. I would seek to have the same relationship with the new canine. On the average I would estimate approximately \$75.00-\$100.00 dollars a month on food and equipment. Equipment is leashes, harnesses etc. In additional to the cost for Veterinarian care, food, and equipment, the selected officer would need to be willing to look for opportunities to conduct fundraisers to assist in the cost.

Food and Equipment: \$1,200.00 dollars.

Officer Equipment: \$750.00 dollars, covered under current department policy and union contract.

Training:

With the desire to make the canine program a dual purpose of tracking and comfort, initial puppy training and basic obedience classes we will required. Once this is completed the canine team would complete a K9 Good Citizen class, which would certify the handler and canine in comfort dog certification. Both these classes would consist of once-a-week training for 6-8 weeks depending on how the team progresses.

Basic Obedience class: \$85.00

K9 Good Citizen class: \$95.00, this would require a yearly re-test to maintain comfort dog certification. The re-test would not consist of 6-8-week class and would be a reduced rate.

For tracking, the handler would be required to attend approximately (16) sixteen hours of training a month. As indicated above I would work with the officer to have this calculated into their work week, when possible. The Officer would further be required to attend a yearly seminar where the canine and handler would receive a certification. Again, this would be counted as the officer's work week. Currently for the bloodhound there are two organizations I am familiar with: The National Police Bloodhound Association (NPBA) and the Northeast Houndsmen. When it comes to requirements for a bloodhound team the courts have recognized the ability of the bloodhound and training records are important for showing the capabilities of the team success. I would consider having the canine team being members of both associations, but if it becomes a financial issue the most cost effective would be to just join the Northeast Houndsmen.

NPBA Membership fee: \$50.00 a year October – September.

NPBA Seminar cost: \$425.00, hotel approximately \$125.00 a night, travel would be in cruiser (fuel key), food would be based off Union Contract and Town Policy \$45.00 a day. Seminar usually end of April early May Sunday – Thursday (5 days)

Membership / Seminar \$475.00

Hotel - \$500.00

Food - \$225.00

Total - Approximately \$1,200.00

Northeast Houndsmen Seminar cost: \$400.00 includes membership fee, local seminar no additional costs. Seminar is Usually in September, 5 days of training.

Officer Selection Process:

A posting for the position to include what the job description and requirements are would be posted at the station. Any full-time officer wishing to be considered for this position would be required to submit a letter of interest to the Chief. At the minimum, this letter should address, why they are interested in the program, any experience they may have with canines and what is their vision for the program. I would seek to establish a panel of three to five individuals that have experience in handling of a canine teams and an interview would be conducted. The panel would then decide who they recommend for the position based on the letters and interviews.

Additional Assistance:

Search has also been done and there are grants that are available for assistance. I, along with the handler that was selected would be required to investigate a possible grant. I have attached paperwork for one of the grants I am familiar with, VEST-A-Dog. I have also contacted local bloodhound handlers and have confirmed a bloodhound female puppy may be available in the next month or so.

Summary:

I have attempted to capture all the possibilities and what the cost would look like at its max level. It would be my recommendation to create and add a few canine line items. I do strongly believe in this program and although I understand it may look costly, however, I believe the benefits outweigh the cost. This will provide a resource to Erving, Franklin County and our community that will only be seen in a positive manner. The outpouring of support we received in the past was tremendous and I see it continuing. I further believe this would offer an officer in our department an opportunity to explore and be involved in a passion they may have. This would provide an officer with a career opportunity within our department and current structure that they may not have in another agency. I would like to thank the Selectboard for taking the time to review the proposal. I would like to discuss this further with the board and hear any recommendations or questions that you may have.

Total initial cost cruiser, canine, and suitable living conditions: \$13,600.00 dollars (once and done)

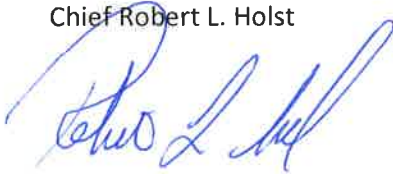
Overtime compensation FLSA \$9,056.32 current OT rate (continuous)

Training Cost: \$2,000.00 (continuous)

Canine Care: \$1,500.00 (continuous)

Respectfully

Chief Robert L. Holst



Erving Police Department

FLSA (Fair Labor Standards Act) and the K-9 Handler

By Terry Fleck

There are three areas where we are either losing canine units throughout the United States, or they are being reduced in size. These areas are the demise of police canine:

1) Deployment Issues:

The issue of not deploying the dog properly, which led to litigation, which resulted in either a settlement or a jury verdict against the agency.

2) Accidental Bites:

Either civilians or other officers have been accidentally bit by a police service dog or contraband detector dog. This led to agency liability for that accidental bite.

Unfortunately, numerous police dogs have been shot and killed by fellow officers while they were being accidentally bit by a police dog.

3) Handler Compensation Issues:

The United States Department of Labor (DOL) mandates the handler compensation of "at-home care" of police dogs under the Fair Labor Standards Act (FLSA). An agency's failure to compensate a handler has resulted in litigation where the agency was found liable for 2-3 years of back pay for each canine handler.

This article will focus on the largest demise of police canine, FLSA handler compensation for at-home care.

The FLSA handler compensation issue started in 1985 when this case, **Garcia v San Antonio Metropolitan Transit Authority**, stated that the Fair Labor Standards Act (FLSA) was applicable to the public sector government.

Since then, the Federal court system has addressed the **Garcia** decision and what it meant to canine handlers. The courts are in total agreement that only one issue is compensable to a canine handler, the at-home care of his dog:

At-home Care:

This issue arises if the agency does not kennel the dog at the police station or some other fixed work place site. The norm is for the handler to kennel and care for the dog at the handler's home. The Department of Labor (DOL) has consistently held that time spent in the at-home care of police dogs is compensable time and that, to the extent that these hours exceed 40 in one week, time and one-half compensation must be paid.

The cases usually show summary judgment on compensability for specific activities. After the judgment, the agency either settles or there is an un-reported verdict.

Only one case, **Levering v District of Columbia**, specifically states the "appropriate time" for such activity compensation. This case states "**30 minutes per day**", seven days per week.

What is this compensation for? The Department of Labor (DOL) issued a "Letter Ruling" dated August 11, 1993. This ruling stated:

- 1) Bathing, brushing, exercising, feeding, grooming, cleaning of the dog's kennel or transport vehicle, administering drugs or medicine for illness and/or

transporting the dog to and from an animal hospital or veterinarian and training the dog at home are all compensable activities.

- 2) All these activities apply to workdays as well as days off duty or during vacation periods.

Using the **Levering** case, when do the math, the minimum compensable time owed to a canine handler for the at-home care of his dog is:

:30 minutes per day x 7 days per week = 3.5 hours per week. A lot of agencies have a problem computing the .5 hour. Those agencies typically round up the 3.5 hours to 4 hours per week.

Methods of compensation:

A) Factor all compensable time into the handler's normal workday. The handler's normal workday would consist of “___” hours of normal duties and “___” hours of FLSA compensable time = total workday hours.

B) Pay the handler all FLSA compensable time. The rate would be at one and one-half hourly rate for any hours which exceed forty per week. This is expensive, averaging about \$6,000 to \$8,000 per handler, per year.

C) Do a combination of both methods of compensation as listed above. Factor the compensable time into the workday, but if call load prohibits letting the handler leave early, pay the handler for that day only, usually at one hour overtime.

Compromise and negotiation:

This handler compensation issue must be negotiated with both the agency and handler's position/view point. Agencies and handlers should meet and confer on this issue. To prevent the demise of canine as we know it, both parties should arrive at a decision that both can live with.

In order for a labor agreement between the handler and agency to be reasonable, the agreement has to take into account some approximation of hours actually worked, or reasonably required to be worked, by the employee.

Officers cannot legally waive FLSA provisions. This would include waiving the FLSA two year statute of limitations.

I have polled about 12,000 canine personnel throughout the United States on this FLSA at-home care issue. About 70% of our industry not only knows about FLSA at-home care compensation, but are in compliance as well.

If you are in the other 30% and your agency is not in compliance with the labor law regarding handler compensation, it is inevitable that you will have one of these persons raise his ugly head, a disgruntled ex-canine handler. If your agency is not in compliance with the labor law, the handler will sue their agency and win! In addition to that one ex- handler winning, the entire canine unit will also be thrown into this action and the agency will not only owe the ex-handler, but all other handlers and ex-handlers as well.

Remember, there is a two to three year statute of limitations. It is not uncommon for each handler to receive \$40,000 to \$80,000 each!

The solution for the FLSA handler compensation for the at-home care of his dog is simple. Get into compliance. The faster you get into compliance, the faster you get past the statute of limitations. I applaud the 70% of agencies that are in compliance with Federal labor law on at-home care. It is unfortunate to see our

industry with 30% of agencies not in compliance with Federal labor law on handler compensation, at-home care.

I urge any agency not in compliance to get into compliance. It is time to stop this demise of police canine.

More information, including the cases, is available on my web site. Please contact me with any questions by visiting my Canine Legal Update and Opinions web site at www.k9fleck.org or by e-mail, k9fleck@aol.com.



QUOTE

CUSTOMER

Contact Name: Officer Bill Kimball
 Company/Dept: ERVING POLICE
 Street Address: 71 FRENCH KING HWY
 City, State, Zip: ERVING MA 01344
 Phone:
 E-Mail:

Date: 7/21/2022
 Valid for: 60 days
 Customer #:
 Contract:
 Sales Rep: ZACH REED

Vehicle & Equipment:

CONTRACT LINE REFERENCE	LINE DESCRIPTION	UNIT PRICE	QTY.	EXTENDED PRICE
	VEHICLE- 2017 OR 2020 PIU REMAKE			\$0.00
				\$0.00
PES102	REMOVE CURRENT PRISONER CONTAINMENT	\$ 481.25	1	\$481.25
LABOR	RELOCATE ELECTRONICS ON REAR BARRIER	\$ 108.00	4	\$432.00
F4	EZ RIDER 1/3 INMATE 2/3 K9 SYSTEM	\$ 3,992.25	1	\$3,992.25
F7	RUBBER MAT VEHICLE SPECIFIC	\$ 193.74	1	\$193.74
F8	WATER DISH PERMINANT	\$ 124.35	1	\$124.35
F13	COOLGUARD PRO NO PAGER	\$ 1,957.04	1	\$1,957.04
				\$0.00
F15	COOLGUARD FAN KIT ONLY	\$ 267.29		\$0.00
				\$0.00
Vehicle TOTAL:				\$7,180.63

Non-Contract Items:

	ITEM DESCRIPTION	UNIT PRICE	QTY.	PRICE
	N/A	\$0.00	1	\$0.00
		\$0.00	1	\$0.00
		\$0.00	1	\$0.00
		\$0.00	1	\$0.00
		\$0.00	1	\$0.00
Non-Contract TOTAL				\$0.00

Grand Total of Quote	\$7,180.63
-----------------------------	-------------------

TERMS AND CONDITIONS

Deferrals and Cancellations of Sales Orders

In all cases where vehicles, products, and labor are purchased against government and public contracts, the terms and conditions of that contract shall prevail and bind MHQ. In cases where contract terms on deferral and/or cancellation are not defined, and for non-contract sales, the following MHQ policy shall prevail.

Deferrals

For this discussion, "deferral" refers to a customer-initiated action to delay the delivery of purchased items* beyond the delivery date confirmed to the customer in writing (Purchase Order confirmation). All deferral requests must be communicated to MHQ in writing. MHQ, at their sole discretion, reserves the right to accept or reject deferral requests. Once the subject item has started the production / fabrication process, delivery deferrals are not allowed – the item will be built, shipped, and billed upon completion. For deferral requests on items not yet in production, MHQ shall negotiate deferral terms with the customer's purchasing or sourcing authority (not the requisitioner). Consequences of order deferrals may include, but not be limited to, loss of scheduled production timeslot and reallocation of vehicles and/or materials to other active jobs or other customers.

Special Order and Non-Cancellable/Non-Returnable Items (NCNR)

Certain items and material are categorized as "Special Order" or "NCNR." Attempts to cancel shall be handled on an individual basis. Depending on the stage of production of a special-order item, and the suppliers involved, special order items may incur cancellation

charges based on supplier purchase liabilities. MHQ shall always act in the interest of our customers to minimize or eliminate cancellation charges whenever possible. Special Order items will be identified as such at the time of quoting and order acceptance to assure an understanding of risk to the customer.

NCNR items are not cancellable with our suppliers. MHQ will make a reasonable attempt to minimize the financial impact of cancelling NCNR items, but no assurance is offered that the customer's purchase liability for these item types can be reduced in any way. NCNR items will be identified as such at the time of quoting and order acceptance to assure an understanding of risk to the customer.

Cancellations

For this discussion, "cancellation" refers to a customer-initiated action to cancel a customer committed order* or any part thereof. All cancellation requests must be communicated to MHQ in writing. Cancellations will be accepted, without penalty, until the point in time where material has been ordered to support production of the ordered item(s). Once components or material is ordered against a committed customer order, cancellation charges may apply based on supplier purchase liabilities. MHQ shall always act in the interest of our customers to minimize or eliminate cancellation charges whenever possible. Depending on the type of material/components and the suppliers involved, the range of customer purchase liability can range from complete release of purchase liability, up to and including full liability of the original material cost.

Supplier Failure to Perform

MHQ shall be held harmless in cases where their suppliers fail to source, build, or deliver quoted or ordered products required to satisfy customer committed orders. MHQ shall also be held harmless in cases where a supplier discontinues availability of a product, places a product on allocation, or delivery times extend beyond their normal quoted delivery times such that the subject product becomes unavailable, or experiences extended delivery times. In these cases, MHQ shall offer alternatives, where commercially available, to the customer for consideration as acceptable substitutes.

*Purchased Items

"Purchased Items" is defined as any item, component, or material required to fulfill a committed customer order.

*Customer Committed Order

"Customer Committed Order" is defined as any acceptable form of communication that directs MHQ to produce and sell an item to their customer. Acceptable forms of communication are customer Purchase Orders, quotes that are signed and dated by a customer purchasing authority, Letters of Intent or Letters of Commitment that are signed and dated by a customer purchasing authority, or similar instruments that communicate an intent to purchase.

ORDER ACKNOWLEDGEMENT

By signing this document you are agreeing to the above terms and conditions of this order from MHQ, Inc.

x

PRINT NAME

x

TITLE

x

SIGNATURE

North County Veterinary Clinic, Inc.
 1182 Bernardston Road
 Greenfield, MA 01301
 (413) 773-8560 Visit us at myncvc.com

CHARGES ESTIMATION

Account: 26
 Date: 07/29/2022
 Page: 1

Town of Erving Phone: (413)423-3310

Patient: PUPPY

Code	Service/Item	Qty	Amount
S67	Anesthesia - Isoflurane - per	1.00	234.00
S68	Anesth.- Isoflurane - add'l 1/	2.00	109.00
S15	Castration - Large Dog (routin	1.00	195.00
S71	Gastropexy - incisional	1.00	105.00 - 125.00
Z5	Hazardous waste disp - inpat	1.00	17.75
PI77	Meloxicam injection	1.00	0.00
M49	Laser therapy post-op Rx	1.00	0.00 - 37.50
H5	Med./Surg. Hosp care - Dog <10	1.00	73.00

Estimate Total: 733.75 - 791.25

*50% discount
 366.87 - 395.62*

This is only an ESTIMATE. The actual diagnostic or treatment plan may require more diagnostics, medications or procedures. The range of this estimate may vary. This estimate is valid for 30 days only.

I have read and do understand this estimate. Should my pet be discharged from the hospital with an unpaid balance, I understand and agree to pay a finance charge of 1.5% per month on any unpaid balance and a \$5.00 monthly statement fee.

Signed: _____ Date: _____

North County Veterinary Clinic, Inc.
1182 Bernardston Road
Greenfield, MA 01301
(413) 773-8560 Visit us at myncvc.com

CHARGES ESTIMATION

Account: 26
Date: 07/26/2022
Page: 1

Town of Erving Phone: (413)423-3310

Patient: PUPPY

Code	Service/Item	Qty	Amount
O21	Vaccine series - office visit	1.00	61.50
V27	Canine Flu H3N2/H3N8 vacc ann	1.00	33.25
Z4	Hazardous waste disp.- output	1.00	10.75
Estimate Total:			105.50

This is only an ESTIMATE. The actual diagnostic or treatment plan may require more diagnostics, medications or procedures. The range of this estimate may vary. This estimate is valid for 30 days only.

*discount
60%
\$48.65*

I have read and do understand this estimate. Should my pet be discharged from the hospital with an unpaid balance, I understand and agree to pay a finance charge of 1.5% per month on any unpaid balance and a \$5.00 monthly statement fee.

Signed: _____ Date: _____

North County Veterinary Clinic, Inc.
1182 Bernardston Road
Greenfield, MA 01301
(413) 773-8560 Visit us at myncvc.com

CHARGES ESTIMATION

Account: 26
Date: 07/26/2022
Page: 1

Town of Erving Phone: (413)423-3310

Patient: PUPPY

Code	Service/Item	Qty	Amount
O21	Vaccine series - office visit	1.00	61.50
V26	Canine Flu H3N2/H3N8 vacc init	1.00	33.25
Z4	Hazardous waste disp.- outpat	1.00	10.75
Estimate Total:			105.50

This is only an ESTIMATE. The actual diagnostic or treatment plan may require more diagnostics, medications or procedures. The range of this estimate may vary. This estimate is valid for 30 days only.

*discount 60%
\$ 48.65*

I have read and do understand this estimate. Should my pet be discharged from the hospital with an unpaid balance, I understand and agree to pay a finance charge of 1.5% per month on any unpaid balance and a \$5.00 monthly statement fee.

Signed: _____ Date: _____

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 1182 Bernardston Road
 Greenfield, MA 01301
 (413) 773-8560 Visit us at myncvc.com

CHARGES ESTIMATION

Account: 26
 Date: 07/26/2022
 Page: 1

Town of Erving Phone: (413)423-3310

Patient: PUPPY

Code	Service/Item	Qty	Amount
O21	Vaccine series - office visit	1.00	61.50
V21	Lyme w/lepto vaccine - annual	1.00	52.25
V22	Rabies Vaccination	1.00	25.75
Z4	Hazardous waste disp.- outpat	1.00	10.75
PH28	Heartgard Plus Chew(26-50#) in	1.00	11.31
PF74	Advantix K-9 - 21-55 lbs.	1.00	17.75
Estimate Total:			179.31

*discount 60%
\$ 78.89*

This is only an ESTIMATE. The actual diagnostic or treatment plan may require more diagnostics, medications or procedures. The range of this estimate may vary. This estimate is valid for 30 days only.

I have read and do understand this estimate. Should my pet be discharged from the hospital with an unpaid balance, I understand and agree to pay a finance charge of 1.5% per month on any unpaid balance and a \$5.00 monthly statement fee.

Signed: _____ Date: _____

North County Veterinary Clinic, Inc.
 1182 Bernardston Road
 Greenfield, MA 01301
 (413) 773-8560 Visit us at myncvc.com

CHARGES ESTIMATION

Account: 26
 Date: 07/26/2022
 Page: 1

Town of Erving Phone: (413)423-3310

Patient: PUPPY

Code	Service/Item	Qty	Amount
O21	Vaccine series - office visit	1.00	61.50
V2	Distemp/Hep/Parainflu/Lepto/Pa	1.00	28.75
V24	Lyme Vaccination 1st in Series	1.00	42.75
Z4	Hazardous waste disp.- outpat	1.00	10.75
M37	Microchip	1.00	39.50
PH27	Heartgard Plus Chew(0-25#) ind	1.00	10.32
PF73	Advantix K-9 - 11-20 lbs.	1.00	17.75
Estimate Total:			211.32

*discount 60%
\$ 85.23*

This is only an ESTIMATE. The actual diagnostic or treatment plan may require more diagnostics, medications or procedures. The range of this estimate may vary. This estimate is valid for 30 days only.

I have read and do understand this estimate. Should my pet be discharged from the hospital with an unpaid balance, I understand and agree to pay a finance charge of 1.5% per month on any unpaid balance and a \$5.00 monthly statement fee.

Signed: _____ Date: _____

North County Veterinary Clinic, Inc.
 1182 Bernardston Road
 Greenfield, MA 01301
 (413) 773-8560 Visit us at myncvc.com

CHARGES ESTIMATION

Account: 26
 Date: 07/26/2022
 Page: 1

Town of Erving Phone: (413)423-3310

Patient: PUPPY

Code	Service/Item	Qty	Amount
O20	Physical exam - first	1.00	75.25
L17	Fecal	1.00	32.75
Z4	Hazardous waste disp.- outpat	1.00	10.75
DSCNT	Discount	19.50	-19.50
V6G	Distemp/Hep/Para/Lepto/Parvo	1.00	28.75
V7	Kennel Cough - IN/Oral	1.00	25.25
PH99	Heartgard Plus Sample	1.00	0.00
PF73	Advantix K-9 - 11-20 lbs.	1.00	17.75
Estimate Total:			171.00

discount 60%
\$ 57.14

This is only an ESTIMATE. The actual diagnostic or treatment plan may require more diagnostics, medications or procedures. The range of this estimate may vary. This estimate is valid for 30 days only.

I have read and do understand this estimate. Should my pet be discharged from the hospital with an unpaid balance, I understand and agree to pay a finance charge of 1.5% per month on any unpaid balance and a \$5.00 monthly statement fee.

Signed: _____ Date: _____

Supporting Massachusetts Police Dogs

~ Founded 2000 ~



Mission Expansion

including

GRANT details & application

implemented September 2011

Information, Policies, & Procedures

Supporting Massachusetts Police dogs with essential equipment, training and purchase of dogs for police / law enforcement K-9 programs throughout Massachusetts

~this is a working document, subject to change~

*Massachusetts Vest-a-Dog, Inc. is a 501(c)3 registered non-profit. Tax ID#45-0592275
Registered as a Public Charity with the MA Attorney General's Office, Certificate of Solicitation #048402
508-668-7149 ★ PO Box 48 Walpole MA 02081
mavestadog.org ★ facebook.com/mavestadog*

Rev. April 2016

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BACKGROUND

Massachusetts Vest-a-Dog, Inc. is an independent, all-volunteer, non-profit 501(c)3 organization dedicated to raising funds to provide protective vests for Massachusetts police dogs. We offer law enforcement departments ballistic K9 vests at a cost of \$1000 each or for SWAT K-9s, a specialized tactical ballistic K-9 vest at \$2500+ each. All vests also protect K-9s against blunt force trauma from being kicked, punched, or struck with an object, like a bat. Since 2000, because of generous support from donors and tireless efforts of our volunteers, Massachusetts Vest-a-Dog is proud to have provided over 470 K9 vests to the following Massachusetts law enforcement agencies: local police departments, county sheriff's departments, Massachusetts State Police, Massachusetts Department of Corrections, MBTA Transit Police, Massachusetts Environmental Police, Massachusetts Department of Developmental Services, USAF – Hanscom AFB, USCG – Gloucester & Hull. Our priority continues to be providing vests for K9s without a vest, as well as replacing K-9 vests whose 5-year warrantee has expired.

During our fundraising efforts, handlers have often noted the fragility of their K9 budgets, and lack of funding for other K9 equipment (Hot 'n Pop Units, bite sleeves/suits, kennels when the cruiser type changed, etc.), as well as specialized training, and the ultimate 'big ticket item' - the purchase of a dog. Donors, supporters and volunteers have often asked "what else can we do?"

Massachusetts Vest-a-Dog, Inc. Board of Directors began to consider expanding our mission.

Inspiration came via an article in Police K-9 Magazine Jan/Feb 2011 in their "Training Perspectives" column, answering the question: "Do you have a good system for accepting donations?"

We also sought out similar non-profit K-9 support programs as well:

Friends for Las Vegas Police K9's <http://www.lvmpdk9.com/about-us.php>

The Modesto Police Canine Association <http://www.modestopdk9.com/sponsors.html>

National Police Dog Foundation www.usk9fund.org

New Hampshire Working Dog Foundation www.workingdog.org

The Police and Working K-9 Foundation <http://www.coveyourk9.com>

St. Paul Police K-9 Foundation <http://www.stpaulpolicek-9foundation.org/>

The Tampa Police K-9 Association <http://www.tpdk9.com>

The Board of Directors voted on 7/11/11 to expand our mission, to help provide ballistic vests (primary objective), essential equipment, training, and dogs. We implemented the mission expansion on 9/1/11.

MASSACHUSETTS VEST-A-DOG, INC. MISSION STATEMENT

May 2000 – July 2011

Massachusetts Vest-a-Dog's mission is to provide protective vests to police and other law enforcement dogs throughout Massachusetts.

August 2011

(Brief)

Massachusetts Vest-a-Dog Inc.'s mission is to provide support for the following purposes:

1. essential equipment for police / law enforcement K-9 programs throughout Massachusetts;
2. training distinct from customary and usual training for police / law enforcement K-9 programs throughout Massachusetts;
3. purchase of dogs for police / law enforcement K-9 programs throughout Massachusetts.

(Detail)

"Essential equipment, training and purchase of dogs" can be further defined and also include any other reasonable request that is related, but not stated specifically, in the following:

Essential equipment includes specialized equipment for the K-9 dog (bullet/stab-protective K-9 vests, K-9 first aid kits, canine oxygen masks, reflective K-9 gear, specialized harnesses), training/protective clothing (bite suits/pants/jackets/sleeves/hand protectors/helmets), K-9 cruiser specialized items (kennels, heat detector/door popper units, secure storage units, door panels, window guards/fans, rear A/C systems), training aids (tugs, scent kits), training equipment (K-9 agility structures, scent-training boxes). *Expendables (one-and-done) items will not be funded.*

Training distinct from customary and usual K-9 training is funding for training staff, K-9 handlers and their K-9 partners to attend training seminars or to fund guest trainers. Priority will be given to training that will benefit more handlers (ie: for Trainers *or* for guest trainers that are invited to conduct a seminar open to multiple departments *or* for handlers that are willing to present what they learned in a seminar to multiple departments). Training support will not include minimal department-required in-service for certification, additional areas of certification or re-certification/maintenance training.

Purchase of dogs is partial funding of a dog specifically for K-9 Police Law Enforcement work.

RECEIVING DONATIONS

Accounts within MA Vest-a-Dog

All funds received will go into the General Fund, unless specified by donor

General Fund (non-restricted)

Department (restricted: for department named by donor)

Vest Fund (restricted: for K9 ballistic vests only)

Department (restricted: for department named by donor)

Methods of Raising Funds

Donations are solicited by MA Vest-a-Dog volunteers via

Events (pet-related, community, concerts, dinner/dance, tag sales, raffles, etc.)

Online (website, facebook, crowdrise – athlete sponsorship, etc)

Donation Premium/Thank-you gifts: Tshirts, hats, calendars, etc.

Newsletter via US MAIL

FUNDS DISPERSMENT

Department-Specific/Restricted Funds

Some donors/fundraisers are for a specific department – these funds are put into an account specific to that department, and therefore become restricted for use only that department.

All departments are to have a single officer contact with MA Vest-a-Dog, to streamline communication and avoid duplication.

Funds are to be dispersed directly to VENDORS, not departments.

Account Balance These fund balances will be emailed on upon request to the Department's MA Vest-a-Dog Contact Officer.

Purchase Requisition A purchase with signature of department officer plus a second signature by a K-9 Supervisor or Police Chief (or like rank) is required on a Purchase Requisition Form **(see page 13)**

Disbursements

Ballistic vests remain our primary focus. Funding for ballistic K-9 vests will be from the dedicated ballistic K-9 vest fund and secondly from the General Fund. Handlers should contact MA Vest-a-Dog to put their K-9 partners on our prioritized tiered K-9 vest wait list (no other formal sign-up process):

TIER ONE / First Priority - New K-9s - a department or law enforcement agency starts a brand new K-9 program or adds K-9s to their present K-9 team.

TIER TWO / Second Priority - K-9s whose first vest was a 'hand-me-down' due to size issues (see paragraph 2, above).

TIER THREE / Third Priority - Replacement of K-9 vests due to warranty expiration (5 years post manufacture). Priority on this list is given to the oldest-manufacture-date vest holder.

Essential equipment (other than ballistic K9 vests), training and purchase of dogs - funding for these items will be from the General Fund or for specific departments, as restricted.

K9 First Aid kits are funded through General Funds; contact MA Vest-a-Dog to be put onto a wait list, no paperwork required. As funds are available, we assemble the kits in batches of 20+ kits at a time.

General Funds shall be disbursed through a bi-annual grant process, utilizing a GRANT APPLICATION FORM (see pages 9-12):

Cycle A: application deadline – June 15, disbursement begins upon award announcement

Cycle B: application deadline – December 15, disbursement begins upon award announcement

(Deadline: emailed by midnight of the 15th or postmarked before/on application deadline)

NOTE: Emergency exceptions to this bi-annual cycle may be considered. For example, in case of a cruiser being totaled or a K-9's sudden death or special equipment needed to insure the K-9's safety. Please contact MA Vest-a-Dog President, should you wish to request an exception/interim grant application.



GENERAL DETAILS

*These funds are available from generous donors – individuals, organizations, & businesses – and tireless volunteers, who desire to support Massachusetts Police Dogs. **Recipients may be asked to meet with one or more significant donor(s).** Grant awards are limited to funds available.*

These funds are restricted to the following uses:

“Essential equipment, training and purchase of dogs training for police / law enforcement K-9 programs throughout Massachusetts” can be further defined and also include any other reasonable request that is related, but not stated specifically, in the following:

Essential equipment includes specialized equipment for the K-9 dog (bullet/stab-protective K-9 vests, K-9 first aid kits, canine oxygen masks, reflective K-9 gear, specialized harnesses), training/protective clothing (bite suits/pants/jackets/sleeves/hand protectors/helmets), K-9 cruiser specialized items (kennels, heat detector/door popper units, secure storage units, door panels, window guards/fans, rear A/C systems), training aids (tugs, scent kits), training equipment (K-9 agility structures, scent-training boxes). *Expendables (one-and-done) items will not be funded.*

Training distinct from customary and usual K-9 training is funding for training staff, K-9 handlers and their K-9 partners to attend training seminars or to fund guest trainers. Priority will be given to training that will benefit more handlers (ie: for Trainers *or* for guest trainers that are invited to conduct a seminar open to multiple departments *or* for handlers that are willing to present what they learned in a seminar to multiple departments). Training support will not include minimal department-required in-service for certification, additional areas of certification or re-certification/maintenance training.

Grant applications should be emailed (grants@mavestadog.org) and mailed (MA Vest-a-Dog, PO BOX 48, Walpole MA 02081).

General Funds shall be disbursed through a grant process, twice a year, utilizing a GRANT APPLICATION FORM (see pages 9-12):

Cycle A: application deadline – June 15, disbursement begins upon award announcement

Cycle B: application deadline – December 15, disbursement begins upon award announcement

(Deadline: emailed by midnight of the 15th or postmarked before/on application deadline)

NOTE: Emergency exceptions to this bi-annual cycle may be considered. For example, in case of a cruiser being totaled or a K-9's sudden death or special equipment needed to insure the K-9's safety. Please contact MA Vest-a-Dog President, should you wish to request an exception/interim grant application.



GRANT REVIEW PROCESS

Grants may be scored, based on a variety of criteria by a volunteer review panel, to prioritize funding status. A volunteer review panel shall consist of two (2) MA Vest-a-Dog, Inc. Board Members, one (1) current K-9 handler (open to any department), one (1) retired K-9 handler, and OPTIONAL: one (1) open seat.

The basic core review criteria/categories that require individual scores:

- Urgency
- Frequency of use
- Impact on current/future K-9/program
- Ability to share with other K-9s in department / outside of department (in training/deployment scenarios)
- Longevity of Item (expected use in months or years)

The **Overall Impact** comments are to be presented at the beginning instead of at the end of the critique document and an **overall impact / priority score** in the range of 1 to 9 is required.

The scoring system is a 9-point rating with 1 = Excellent and 9 = Poor (whole numbers only). 1 to 3 = High impact
 4 to 6 = medium impact
 7 to 9 = low impact

SCORE	DESCRIPTOR
1	Exceptional
2	Outstanding
3	Excellent
4	Very Good
5	Good
6	Satisfactory
7	Fair
8	Marginal
9	Poor

Grants will be reviewed within 30 days.
 Awards will be announced via email on/ before the next month's 15th day, ie:
 June 15 grant awards will be announced on/before July 15
 December 15 grant awards will be announced on/before January 15

INSTRUCTIONS TO APPLICANTS

- ☐ Massachusetts Vest-a-Dog, Inc. Grant Applications consist of completion of the following form – all four pages (pages 9-12) with appropriate signatures.
- ☐ OPTIONAL/highly recommended: You may provide an **Overall Impact letter**, in addition to the **Overall Impact Statement** (see pg 2 of Grant Application), providing further details explaining the necessity of your grant request.
- ☐ Provide a quote or screen shot of item(s) requested.
- ☐ The original and four copies of the application should be mailed to Massachusetts Vest-a-Dog, Inc. at PO BOX 48, Walpole MA 02081. Applications should also be emailed to grants@mavestadog.org.
- ☐ All applicants will receive an email from MA Vest-a-Dog, confirming receipt of their application.
- ☐ Massachusetts Vest-a-Dog, Inc. reserves the right to request additional information from applicants as needed.
- ☐ Grants will be evaluated based on a variety of criteria as noted in the application by a volunteer review panel, to prioritize funding status. The volunteer review panel shall consist of two (2) MA Vest-a-Dog, Inc. Board Members, one (1) current K-9 handler (open to any department), one retired K-9 handler, and OPTIONAL: one (1) open seat. *Please see page 7 for Grant Review Process details*
- ☐ Awards will be announced via email on/ before the following month's 15th day, ie: July 15, January 15.
- ☐ Disbursement / use of the award funds begin upon award announcement, and must be used within one (1) year. A written extension may be requested for consideration.
- ☐ Public Relations Responsibilities of Grant Awardees – these awards are made possible because of generous donors and tireless volunteers – they need to know how their funding is being spent!
 1. Photos of all items shall be emailed to MA Vest-a-Dog (grants@mavestadog.org), for use in social media posts/collage of awards funded/press releases/newsletters, within 60 days of receipt/implementation.
 2. Public Announcement of Awards - Departments are expected to announce receipt of their award via social media and/or press releases and/or press events, within 6 months receipt/implementation. Applicants (or representatives from their department) may be requested to be present at a MA Vest-a-Dog press conference at a mutually workable date/time/place.
 3. Failure to follow these guidelines may jeopardize future award potential.
- ☐ Excess award funds: Should grant award item(s) cost less than awarded funds, the difference will revert into the MA Vest-a-Dog General Fund, at the discretion of the MA Vest-a-Dog Board of Directors.
- ☐ NOTICE: Massachusetts Vest-a-Dog, Inc. does not discriminate on the basis of race, color, creed, religion, national origin, sex, sexual preference, age, disability or veterans status, with respect to the support which Massachusetts Vest-a-Dog, Inc. provides in it's Articles of Organization.



***GENERAL GRANT CONDITIONS AGREEMENT**

1. **GENERAL CONDITIONS** The applicant hereby assures and certifies that he will comply with the regulations, policies and guidelines to satisfy requirements of Massachusetts Vest-a-Dog, Inc. grant fund program.
2. **PROGRAM EVALUATION** In order for Massachusetts Vest-a-Dog, Inc. to properly evaluate selected grant fund programs, the recipient handler or department contact for Massachusetts Vest-a-Dog, Inc. may be contacted for follow-up information and/or updates.
3. **UTILIZATION AND PAYMENT OF FUNDS** - Funds awarded are to be expended only for purposes and activities covered by grantee's approved program plan and budget. Massachusetts Vest-a-Dog pays Inc program funds directly to the vendor.
4. **WRITTEN APPROVAL OF CHANGES** - Grantees must obtain prior written approval from Massachusetts Vest-a-Dog, Inc. for changes in program, which were not set forth in the approved application.
5. **TITLE OF PROPERTY** - Title to property acquired in whole or in part with grant funds in accordance with approved budgets shall be vested in the grantee, subject to divestment at the option of Massachusetts Vest-a-Dog, Inc., when its use for the program or criminal justice purposes is discontinued. Grantees should exercise due caution in the use, maintenance, protection, and preservation of such property during the period of program use. Massachusetts Vest-a-Dog, Inc. has no title interest after the termination date of the grant.
6. **OBLIGATION OF GRANT FUNDS** - Grant funds may not, without approval by the Massachusetts Vest-a-Dog, Inc., be obligated prior to the effective date or subsequent to the termination date of the grant period. Obligations outstanding as of the termination date shall be liquidated within 1 year. Such obligations must be related to goods or services provided and utilized within the grant period.
7. **IMPLEMENTATION OF PROJECT WITHIN 1 year** - Grantee agrees to implement this program within 1 year following the grant award effective date or be subject to automatic cancellation of the grant. Evidence of program implementation must be outlined in the first quarterly progress report. For just cause, grantee may apply for an extension in writing subject to approval by the grantor.
8. **AUTHORITY TO APPLY** - The grantee must possess legal authority to apply for the grant. This authority shall be by resolution, motion or similar action from the applicant's governing body, authorizing the filing of the application, including all understandings and assurances contained therein, and directing and authorizing the person identified as the official representative of the applicant to act in connection with the application and to provide such additional information as may be required.
9. **EQUAL EMPLOYMENT OPPORTUNITY** - The grantee will comply with Title VI of the Civil Rights Act of 1964 (P.L. 88-352) and in accordance with Title VI of that Act, no person in the United States shall, on the grounds of race, color, or national origin be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity for which the applicant received Massachusetts Vest-a-Dog, Inc. financial assistance and will immediately take any measure necessary to effectuate this agreement.
10. **PERSONNEL STANDARDS** - The grantee will comply with the minimum wage and maximum hour's provisions of the Federal Fair Labor and Standards Act. Grantee will establish safeguards to prohibit employees from using their positions for a purpose this is or gives the appearance of being motivated by a desire for private gain for themselves or others, particularly those with whom they have family, business, or other ties.
11. **LONGEVITY OF USE / K-9 PROGRAM** - Grantees are required to meet the longevity of use of item / K-9 program requirement outlined in the grant application. In the event that the program is terminated before the agreed upon termination date the grantee will forfeit all property acquired with grant funds to Massachusetts Vest-a-Dog, Inc.
12. **TRAINING AGREEMENTS** - The K-9 handler will be required to participate in scheduled training and meet the minimum standards required for the certification of the police K-9 team. Furthermore, the K-9 handler will continue to participate in regular maintenance training days to maintain certification.

****I have read and understand the above general grant conditions and agree to comply with them.***

Printed Name of SPV or Chief

Signature of SPV or Chief

Date



Grant Application Cycle (*circle one*): Cycle A – deadline June 15 Cycle B – deadline December 15

Date: _____ Department: _____

Requesting Officer: _____ Tel & email: _____

For: Handlers' Name: _____ K-9's Name: _____

Funds requested: \$ _____

Item(s) requested (*circle one*) essential equipment training dog(s)

OVERALL IMPACT STATEMENT (how will this grant benefit your K-9 program? If necessary, add a page for this project description and goals): _____

Vendor Name/Addr/Tele/website _____

Description (*attach documentation / additional pages, as necessary*)

- ESSENTIAL EQUIPMENT - FULL Item description / item catalog # /Quantity/\$/ S&H Fee
Provide a quote or screen shot of item(s) requested.
- TRAINING – Class title/Date(s)/location/attending officer/class fee



Equipment (list of items on page 2 or attachment)

Need by date: _____

SHIP TO:

Name _____

Department _____

Address street _____

Address City/ST/Zip _____

Delivery/shipping instructions _____

FOR EQUIPMENT & TRAINING

K-9 Certification (check applicable, *if grant is for a single K-9's benefit*)

_____ Patrol (presently certified? Yes / No If no, estimated start date of training: _____)

_____ Narcotics (presently certified? Yes / No If no, estimated start date of training: _____)

_____ EOD (presently certified? Yes / No If no, estimated start date of training: _____)

_____ Other certification (name area _____ Presently certified? Yes / No
If no, estimated start date of training: _____)

Urgency (*check one*)

_____ Urgently needed (safety is at risk),

_____ Not urgently critical / don't have this equipment. Wanted within _____ Months

_____ Not urgently critical / have equipment (replacing &/or updating).
Wanted within _____ Months

Frequency of use (*check one*)

_____ Daily

_____ Weekly

_____ Monthly

_____ Annually

_____ Intermittantly (on an "as needed" basis)

Impact on current/future K-9/program (*check one*)

_____ Without item, K-9 program is at risk to end immediately (ie: cruiser/kennel/dog)

_____ Without item, K9 program is at risk to end in _____ Months _____ Years

Ability to share equipment with other K-9s in department / outside of department (*check one*)

_____ equipment will benefit only 1 K-9/handler

_____ equipment can be easily shared with other K9s, open access (ie: K9 agility course)

_____ equipment can be shared on training days (training aids: bite suits, training aids)

_____ equipment can be shared/utilized to benefit multiple K9s/officers in deployment (ie: K9 video camera)

Longevity of Item (expected use in months or years) (*fill in blank*)

_____ months

_____ years



TRAINING ONLY (check one)

I will prepare a seminar for my K9 training group, within 6 months of the training that I have used grant funds for, to share the knowledge I have learned at the training.

I will prepare a seminar for my K9 training group, also open/offered to all Massachusetts K-9 handlers, within 6 months of the training that I have used grant funds for, to share the knowledge I have learned at the training.

Failure to share your training knowledge will jeopardize your/your department's future grant opportunities.

PURCHASE of DOGS ONLY

We require the department provide a minimum of 20% required to purchase the dog. ***With this application you need to send a letter from your chief or sheriff (or like rank) on department letterhead stating that they are in agreement with the application and intend to proceed with the K-9 program.***

Source & amount of 20% matching funds: \$ _____ Source: _____

Current K-9s anticipated retirement date: _____ Anticipated training start (mo/yr): ____/____

New K-9 Programs only: _____ Yes / No: K-9 program start-up is dependent upon this grant.

of dogs requested: _____

Our assistance to purchase a dog for K-9 work is a gift to the agency; the dogs become the property of the agency. If a dog is retired from an agency and sold to a third party for more then \$1.00, proceeds equivalent to the original grant, or a pro-rated amount, shall be donated back Massachusetts Vest- a-Dog, Inc. Massachusetts Vest- a-Dog, Inc. expects by helping provide the dog for K -9 work, the agency will provide regular maintenance training, the usual patrol vehicle and equipment, and provide for the routine care and maintenance of the dog (food, veterinary care, etc.). Grants are to be utilized within one year.

FOR ALL GRANTS (essential equipment, training, dogs):

I have the authority from my department to request these grant funds.

Officer: _____ Date: _____
Printed name / signature

SPV or Chief: _____ Date: _____
Printed name / signature



PURCHASE REQUISITION FORM

info@mavestadog.org

PO BOX 48 Walpole MA 02081

FAX: 508-668-7149 (call before faxing)

~ ONLY for use of Department-Specific/Restricted Funds ~

This page is NOT part of the Grant Application

Fund balances will be emailed on request to the Department's MA Vest-a-Dog Contact Officer. Disbursement will be through this Purchase Requisition Form. Funds may be used when available, and are restricted to the following: Essential equipment, training, and purchase of dogs.

Date: _____ Department: _____

Requesting Officer: _____ Tel & email: _____

For Handlers' Name: _____ K-9's Name: _____

VENDOR: _____

Provide a quote or screen shot of item(s) requested.

Item #	Item Description	Item Quantity	\$ each	\$ total
--------	------------------	---------------	---------	----------

Shipping/Handling *Estimated by vendor*

TOTAL REQUEST \$ _____

Need by date: _____

Ship to

Name _____

Department _____

Address street _____

Address City/ST/Zip _____

Delivery/shipping instructions _____

I have the authority from my department to authorize this purchase requisition. Funds for this purchase are from the available balance in my department MA Vest-a-Dog restricted fund.

Officer: _____ Date: _____

Printed name / signature

SPV or Chief: _____ Date: _____

Printed name / signature

COMMUNITY SERVICES OFFICER

POLICY & PROCEDURE NO. Administration 4.36	ISSUE DATE: 08/29/22
	EFFECTIVE DATE: 09/26/22
Erving Police Department Chief Robert L. Holst	REVISION DATE:

I. GENERAL CONSIDERATIONS AND GUIDELINES

Subject to the direction and control of a superior officer or a full-time police officer, Community Service Officers (CSO's) are employees who are specially selected and trained civilian personnel for the purpose of enhancing the department's response to the community. Community Service Officers are civilian, non-sworn / non-union employees of the Police Department who provide response to non-emergency and non-enforcement calls for service, to allow sworn police officers more time for enforcement, problem solving and crime prevention activities. The Community Services Officer position also allows individuals who are interested in a sworn police position, the opportunity to work for the Department and develop their skills and knowledge.

Community Services Officers shall be used to enhance existing police services and shall not be used to replace sworn police officers. However, in non-exigent circumstances a CSO may be considered for a traffic or security post if sworn Department personnel have been offered the post but have not expressed interest and if it is determined by the Chief of Police that a sworn officer is not necessary. If exigent circumstances exist, police security and traffic functions may be filled by a CSO under the direction of the Chief of Police. Community Services Officers are prohibited from making any type of physical arrest, carrying a weapon, or responding to emergency calls. A Community Services Officer is empowered to perform non-enforcement duties and assist the department as directed by the Chief of Police. When serving in this capacity, these individuals shall be expected to:

- Provide enhanced security services as assigned

- Assist sworn and civilian personnel with administrative tasks
 - Assist sworn and civilian personnel with community outreach activities
 - Facilitate the movement of vehicular and pedestrian traffic (may be used for parades, other events)
 - Identify problems that are potentially serious law enforcement or governmental problems and notify dispatch and or officer on duty
 - Operate Department vehicles as directed
 - Provide other services on an emergency basis as directed by the Chief of Police
- Community Service Officers shall be responsible for the same efficient performance of required duties in conformance with the rules, regulations and policies specified by the Administration and Operations Manuals, as are sworn full-time personnel.

JOB ENVIRONMENT

Work may be performed in an office environment or in the field under varying weather conditions, with exposure to all types of serious conditions affecting personal safety. During a tour of duty, a Community Services Officer may have to:

- Operate a police cruiser and all standard officer equipment
- Remain in constant contact with the public
- Have access to some department-related confidential information, such as criminal investigations and personal information about citizens
- Provide medical assistance to a community member
- Walk or stand for long periods of time while providing security or traffic services.

ESSENTIAL FUNCTIONS, DUTIES AND RESPONSIBILITIES

The essential functions, duties and responsibilities of a Community Services Officer are extremely wide and varied, but may be divided into the following areas of responsibility:

General Duties and Responsibilities:

- May work under the supervision of full-time sworn law enforcement personnel.
- Exercise authority consistent with the obligations imposed by the policy and be accountable to superior officers. Promptly obey lawful orders.
- Coordinate efforts with those of other members of the department so that teamwork may ensure continuity of purpose and maximum achievement of police objectives.
- Communicate to superior and to fellow employees all information obtained which is pertinent to the achievement of Department objectives.
- Provide a feeling of safety and security in the community.
- Assist all citizens requesting assistance or information. Courteously communicate with all members of the community.
- Answer questions asked by the public, counsel juveniles and adults when necessary and refer them to persons or agencies where they can obtain further assistance.

- Record activity during each shift in the manner consistent with existing policy and procedure.
- Acquire and record information concerning important events/incidents.
- Confer with court prosecutors and testify in court.
- If assigned to operate a motor vehicle:
 - Ensure that it is well maintained mechanically, properly equipped and that it is kept clean both inside and out. Ensure that no contraband or evidence is contained therein.
 - Inspect the vehicle at the beginning of the shift for any defects or missing equipment. Immediately report all defects and damages sustained to the vehicle to the proper authority and complete all reports and forms required by current procedures.
 - Use only vehicles assigned by the officer in charge of the shift.
 - Operate the radio in line with FCC regulations and current department procedures.
 - Ensure that the assigned vehicle's gas tank is full prior to completion of each shift.
- Maintain police equipment in a functional and presentable condition. Report damage or loss of equipment to the proper authority immediately, as prescribed.
- Always keep radio equipment in operation and be thoroughly familiar with FCC regulations and current department policy concerning use of the radios.
- Be accountable for the securing, receipting and proper transporting of all evidence and property coming into custody.
- Perform other general duties as they are assigned or required by proper authority.

Security Function:

- Patrol a specific area as assigned, on foot, or by other means for general purposes of crime prevention and security. Patrol should be random, to prevent identifiable patterns from developing. Patrol includes:
 - Being thoroughly familiar with the assigned patrol area. Such familiarity includes the knowledge of residents, merchants, business, streets, paths etc. Conditions that contribute to crime should be reported.
 - Notifying dispatch or on duty officer if a wanted person is observed.
 - Completing detailed reports regarding incidents requiring police attention. In cases where an arrest is made by a sworn officer, an arrest report is submitted along with the required crime reports. A CSO may be required to complete a narrative. When property is recovered a CSO shall complete the required report.

- Public assembly checks.
- Building security checks
- Being alert for criminal activity including violations of town by-laws and state or federal laws.
- Reporting street hazards or other conditions that endanger public safety.
- Notify dispatch or on duty officer when a situation is brought to the CSO's attention while in the course of their duties. Render first aid, when qualified, to person who are seriously ill or injured. Assist persons needing police services.
- Be alert for all nuisances, impediments, obstructions, defects or other conditions that might endanger or hinder the safety, health or convenience of the public within the patrol area.

Traffic Assignment:

- Direct and expedite the flow of traffic at assigned locations, keeping in mind the duty of preventing accidents, protecting pedestrians, and ensuring the free flow of traffic.
- Be alert for traffic safety conditions, which may endanger or inconvenience the public and report such conditions to dispatch or on duty officer.
- CSO's directing traffic shall wear the prescribed traffic safety clothing and equipment.

LIMITATIONS

- Under no circumstances will a CSO be assigned to any in-progress or emergency response call alone. CSO will not be assigned to any disturbance or assault call where there is any reason to believe that the perpetrator or suspect may be present or likely to return to the scene.
- Should a CSO arrive at the scene of an incident and determine that the suspect is present, they will immediately notify dispatch or on duty officer and request a sworn officer to be sent to the scene.
- Should a CSO arrive at the scene of an incident where there is the likelihood of any physical confrontation between any parties, they will immediately notify dispatch or on duty officer and request a sworn officer be sent to the scene.
- In any event occurring where the CSO reasonably believes that they are in danger of becoming involved in a physical confrontation, the CSO is required to leave the scene immediately and notify dispatch or on duty officer of the situation.
- CSO will not respond to any call for service involving the use, or threatened use, of any weapon, or where the complainant, victim or suspect is believed to have armed themselves during the situation even with a sworn officer.

ESSENTIAL KNOWLEDGE, SKILLS, AND ABILITIES

- Thorough familiarity with assigned areas
- Communicate clearly and concisely.
- Be certified in first aid, cardiopulmonary resuscitation and the administration of naloxone.
- Pass a job-related medical and psychological examination before appointment.
- Project confidence, self-assurance and certainty to the public, and the ability to project a neat, professional appearance to the public.
- Pass a thorough background check to include any requirements POST commission requires.

TRAINING

All CSO's must be FR/CPR certified and must complete training with the members of the Field Training and Evaluation Program. Field Training shall consist of orientation, policy review and discussion.

- Issuance of building fob, keys, and locker.
- Issuance of equipment/uniform including radio
- Individual accounts in IMC, and Town email
- Copy / access to all department policies and procedures
- Copy/access to Town of Erving personnel policies and procedures.

SUPERVISION

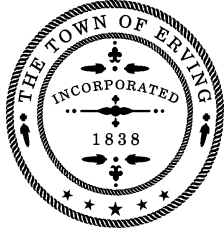
All CSO's will be under the command of the Chief of Police. If the Chief of Police is not on duty the CSO's will be under the command of the highest-ranking officer that he/she is working with. The CSO's supervisor may alter a CSO's call assignment, as deemed appropriate for the situation.

UNIFORM

All CSO's shall wear blue pants that match the Erving Police Officer Uniform Specifications, black boots, and a polo shirt issued by the Department.

QUALIFICATIONS

- U.S. Citizenship
- Possession of a valid Massachusetts Class D motor vehicle operator's license.
- Ability to attend and successfully complete Massachusetts criminal justice training academy.
- Work involved a constant physical effort. Incumbent must possess the ability to meet required physical standard. Performance of work involves standing, walking, and driving for long periods of time. Physical agility is required to access all types of areas. May be required to push, climb, stoop, kneel, crawl and reach with hands and arms. Excellent eyesight with regard to close vision, distance vision, color vision and depth perception is required to perform the job.



TOWN OF ERVING

SELECT BOARD

12 East Main Street
ERVING, MASSACHUSETTS 01344

Tel. 413-422-2800

Fax 413-422-2808

Email: administrator@erving-ma.gov

Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

October 3, 2022

To: Select Board
From: Bryan Smith, Town Administrator
CC: Robert Holst, Chief of Police

RE: Animal Control Officer & Inspector of Animals

The Town's Animal Control Officer & Inspector of Animals has been on leave. The period of leave is still uncertain at this time. In the meantime, the Town needs to consider short term arrangements and if necessary, I will return to the Board to consider long term arrangements.

Animal Control

The Police Department staff has been covering for animal control related matters. I have discussed this matter with Chief Holst, and it may make sense to leave this arrangement the way it is in the short term and focus on the long term plan. If instead the Select Board would like to consider a scenario where the Franklin Regional Animal Control Service through the Sheriff's Office can cover, Chief has obtained a proposal for services.

Inspector of Animals

A separate but related matters is the annual requirement to appoint an Inspector of Animals and the need to cover barn inspections. I need to report an appointed Inspector of Animals to the State as soon as possible. We can have a temporary appointment and update the appointment if necessary. We can also appoint more than one inspector. Erving does not have a great number of inspections to be conducted, but we must remain in compliance. As of now, I would ask the Select Board to consider appointing me as the Inspector of Animals so that I can get the necessary reports in process. The Sheriff's Office does not have the capacity to offer the Inspector of Animals services.

Commonwealth of Massachusetts

Office of the Sheriff

FRANKLIN COUNTY

CHRISTOPHER J. DONELAN
SHERIFF



LORI M. STREETER
SUPERINTENDENT

**Agreement by and between
The
Franklin County Sheriff's Office
and the
Town of _____**

Regional Animal Control Services

This agreement, by and between the **Franklin County Sheriff's Office** (hereafter the "**FCSO**") and the Town of _____ (hereafter the "**Town**"), covers the provision of animal control services as detailed in the following agreement for the period of **FY 23 - 25**, for the Town. Collectively, the FCSO and the Municipality are referred to as the "**Parties**".

Section 1 Regional Animal Control Services – Responsibilities of the FCSO

The FCSO shall provide the following general administrative and support services:

- A. Pursuant to Chapter 140 Section 157, et seq., employ, supervise and ensure adequate training of a regional Animal Control Officer and any future necessary personnel to perform the services required by this Agreement. Said employee(s) must be certified as an Animal Control Officer by the Animal Control Officers Association of Massachusetts. See attached job description for a list of the duties of the position, which include:
- I. Handle neighborhood disputes involving animal complaints;
 - II. Investigate all reported bites, work with Animal Inspector to order quarantine of biting domestic animals pursuant to State guidelines; and perform such duties as are necessary on a live biting animal or carcass, to prepare and deliver it for rabies testing;
 - III. Investigate any animal cruelty, abandonment, or protective custody cases in the Municipality in conjunction with law enforcement such as MSPCA and/or local police; criminal cases are required by law to be enforced by the police.
 - IV. Provide all documentation including, but not limited to, Court Orders and Police Reports for each court ordered, cruelty or incarcerated owner case.
 - V. Coordinate with law enforcement on the investigation of all reported bites;

- VI. Appear in court in connection with any criminal enforcement or civil hearing;
- VII. Investigate dog license non-renewals;
- VIII. Establish a regular working schedule and backup system with member Towns;
- IX. All stray dogs will be transported to FCSO Dog Shelter.

- B. Follow the provisions of applicable laws and regulations, as they may be amended from time to time, in the provision of such services and in provision of all other services set forth herein.
- C. Maintain office space, a van, a laptop, and a cell phone for the Regional ACO. The FCSO shall maintain all field equipment in good repair and maintain all current licenses and registrations required by State law.
- D. Convene a Regional Animal Control Advisory Committee (hereafter the "Advisory Committee) at a minimum of once per year. The Selectboard of each participating Town will designate one representative and one alternate from the Town to the Advisory Committee (see below).
- E. Continue to provide the licensed kennel and adoption services.
- F. Collect and report calls and fees from each Town.
- G. Collect an annual assessment from each Town according to the agreed upon cost-sharing formula.
- H. Provide the Town with annual reports concerning the FCSO's performance under this Agreement.
- I. As provided by MGL Chapter 40, 4A, all agreements put into effect under this section shall provide sufficient financial safeguards for all participants, including, but not limited to: accurate and comprehensive records of services performed, costs incurred, and reimbursements and contributions received the performance of regular audits of such records provisions for officers responsible for the agreement to give appropriate performance bonds periodic financial statements be issued to all participants.
- J. Review any requests by new Towns interested in joining the program.
- K. Other duties not provided by Town, as necessary.

Section 2 Regional Animal Control Services – Responsibilities of Each Town

The Town shall provide animal -related services not provided by the FCSO that include, but are not limited to, the following:

- A. Appoint a representative and alternate to the Regional Animal Control Advisory Committee from either the Select Board or Town Administrator/Coordinator. If the representative is not a member of either, they should regularly update the Select Board and Town Coordinator.
- B. Appoint a representative who is able to be contacted 24/7 in the event of an emergency that requires Town authorization for action (hoarding case, animal abuse investigation).
- C. Provide and administer municipal dog licenses and collect related fees and fines.
- D. Provide the FCSO with up to date information on dog licenses in Town (including name, phone number, address, dog breed, and any other information available) exported in Excel by the 3rd week of April each year.
- E. Provide the Regional ACO with email and phone contact information for the Town Coordinator, Police, Emergency Management Director, Animal Inspector and Fence Viewer each year after elections/appointments.
- F. Work with the state to appoint an Animal Inspector. Municipal Animal Inspectors will order quarantine of biting domestic animals pursuant to State guidelines.
- G. Handle dead domestic animals.
- H. Provide police staffing for any criminal investigations and/or charges. The ACO will be updated on any and all legal activity by the Law Enforcement entity involved.

Section 3 Regional Animal Control Advisory Committee

- A. Each municipality's Selectboard will designate one representative and one alternate to the Advisory Committee.
- B. The Committee shall elect a Chair at its first meeting, who shall set the agenda for the Committee with the FCSO Shelter Director and Animal Control Officer.
- C. The FCSO shall convene the Advisory Committee at least once per year.
- D. The Committee shall comply with the MA Open Meeting Law and its agenda shall be posted on the FCSO website.
- E. The Committee will be tasked to address current issues in the program and make recommendations to the ACO and the Shelter Director.
- F. The Committee will be tasked to approve budget set by the FCSO.

- G. The Committee will be tasked to approve and annually review assessment formula set by the FCSO.
- H. For the purposes of meetings, a quorum of the Committee shall be 4. Decisions shall be made by a majority of the members present at the time of the meeting, unless otherwise required by law.
- I. The Committee will vote on any requests from Towns to join the program, if and when the requests are approved by FCSO.

Section 4 Consideration

- A. In consideration for the FCSO performance of the duties listed herein, the FCSO will retain all fees paid directly to the Regional Shelter.
- B. An annual assessment will be billed to member Towns based on the following cost-sharing formula: Member Towns shall cover 75% of the salary of the ACO, including a 15% administrative charge. Costs shall be shared as follows: 25% by Equalized Value using the most recent numbers published by the state, 75% by human population in the most recent federal Census.

Section 5 Agreement

- A. This agreement may be amended in whole or in part by mutual agreement by the FCSO and the Town.
- B. It is the intention of the parties that the relationship of the FCSO to the Town in the course of the performance of its duties pursuant hereto is that of an independent Contractor. Nothing contained in this Agreement shall be construed to constitute the FCSO as a partner, joint venture, agent or employee of the Town. The FCSO, as an independent Contractor, shall be solely responsible for the hiring, discipline and management of the FCSO employees, and all costs and expenses related thereto, including the payment (and withholding, if required) of all applicable federal, state and local taxes. The FCSO and the Town shall not be construed as joint ventures or partners of each other and neither shall have the powers to bind or obligate the other except as set forth in this Agreement.
- C. The waiver by either party of a breach of any provision of this Agreement by the other party shall not operate or be construed as a waiver of any subsequent breach. No waiver shall be valid unless in writing and signed by the Sheriff and by the Selectboard, as appropriate.
- D. No part of this Agreement nor any rights or obligations hereunder, shall be assigned or subcontracted without the prior written approval of the Parties. This is intended to be a restriction on both the right and the power to assign, and any purported assignment not consented to by the Parties as herein required shall be void, shall

confer no rights on the purported assignee and need not be recognized. This Agreement shall be binding upon and inure to the benefit of the Parties and their respective permitted successors and assigns.

- E. The invalidity or unenforceability of any provision hereof shall in no way affect the validity or enforceability of any other provision so long as the agreement continues to reflect the intent of the parties at signing.
- F. This Agreement shall be governed, construed and enforced in accordance with the laws of the Commonwealth of Massachusetts, without regard to its conflicts of laws and principles and any cause of action brought pursuant to this agreement shall be brought in the courts of Franklin County, Massachusetts.

Section 6 Term

This Agreement shall be in effect for a period of three (3) years subject to the termination rights of each party as provided herein. At the end of three years, any successor Agreement must receive the necessary statutory authorizations.

Section 7 Termination and Default

- G. Any party may terminate its participation in this Agreement at the end of any fiscal year, as provided in M.G.I. c. 40, section 4A, so long as at least one year before its termination, it gives written notice to all remaining parties.
- H. If, at any time during the term of the Agreement, the FCSO, in the reasonable discretion of the Town: (a) has failed materially to provide services required in accordance with this Agreement; (b) has become insolvent; (c) abandons the work; (d) subcontracts, assigns, transfers, conveys or otherwise disposes of its obligations under the Agreement other than as provided herein; or (e) repeatedly or materially fails to comply with any other term or condition contained in the Agreement, the Town shall have the right to terminate the Agreement upon written notice to the FCSO.

Section 8 Indemnification

In agreeing to this indemnification paragraph, the FCSO does not waive statutory and other liability cap protections provided by MGL Chapter 258. To the extent permitted by law, the FCSO agrees to indemnify and hold harmless the others against any and all liabilities, claims, actions, suits, demands, damages, judgments, losses, costs or expenses, including attorney's fees, arising out of Animal Control Services provided under this Agreement and MGL Chapter 258.

Section 9 Dispute Settlement

In the event any disputes or questions arise between the parties as to the interpretation of the terms of the Agreement or the satisfactory performance by any of the parties of the responsibilities provided for in the Agreement, a meeting shall be held promptly between the parties, attended by individuals with decision-making authority regarding the dispute, including members of the Advisory Committee, to attempt in good faith to negotiate a resolution of the dispute. If a resolution to the dispute cannot be reached, both parties shall work with mediation to resolve the conflict. If, following mediation, either party is not satisfied with the outcome, that party may choose to go to court.

Section 10 Notices

Any notices, bills, invoices, or reports required by this Agreement shall be sufficient if sent by the parties via United States mail, postage paid, to:

FCSO Contact Info

Franklin County Sheriff's Office
Attn: Contract Manager
10 Sand Lane
Turners Falls, Ma 01376

Town Contact Info

Town of _____

Attn: _____

Address: _____

_____, MA _____

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

Franklin County Sheriff's Office

Town of _____

Christopher J. Donelan, Sheriff

Printed Name

Date: _____

Date: _____

Witness:

Witness:

Date: _____

Date: _____

From: [Robert Holst](#)
To: [Bryan Smith](#)
Subject: livescan
Date: Thursday, September 29, 2022 2:43:57 PM

Hello Bryan

I would like to notify the Select Board regarding the police department obtaining a livescan fingerprint machine. To follow current Criminal Justice Reform police department are working with EOPSS to distribute these machines throughout MA. I would request the board give me permission to complete any grant application or forms that need to be completed during the process so Erving PD can obtain any necessary equipment. At this time this time I am not requesting any funds as this is being funded through EOPSS.

Respectfully,

Robert L. Holst

Chief of Police
Erving Police Department
71 French King Highway
Erving Ma, 01344



Notice:

When writing or responding, please remember that the Massachusetts Secretary of State has determined that email is a public record and subject to the Public Records Law, M.G.L. c. 66, and further covered by Electronic Communications Privacy Act, 18 U.S.C. §§ 2510-2521.

This communication may contain privileged or other confidential information. If you are not the intended recipient or believe that you have received the communication in error, you are strictly prohibited from printing, copying, distributing, disseminating, or otherwise using this communication. Please discard this e-mail and any attachments, and notify the sender immediately.

The Commonwealth of Massachusetts
Executive Office of Public Safety and Security

One Ashburton Place, Room 2133
Boston, Massachusetts 02108

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lt. Governor

Tel: (617) 727-7775
TTY Tel: (617) 727-6618
Fax: (617) 727-4764
www.mass.gov/eopss

TERRENCE M. REIDY
Secretary

September 16, 2022

Dear Massachusetts Chiefs of Police:

As you know, amendments to M.G.L. c. 6A, § 18 3/4 (12) made by An Act Relative to Criminal Justice Reform (Chapter 69 of the Acts of 2018, “the Act”), require the Executive Office of Public Safety and Security (EOPSS) working with the Executive Office of Technology Services and Security (EOTSS) to develop an electronic system (the “cross tracking platform”) to collect and publicly display specific data elements gathered from criminal justice agencies, including yours, in an aggregated, anonymized form.¹ As required by Chapter 6A and to facilitate the creation of the platform, in December of 2021, EOPSS promulgated regulations called “Data Collection and Reporting Standards for Criminal Justice Agencies” (501 CMR 18.00). These regulations establish uniform definitions for the data being collected and submitted to the cross tracking platform.²

To date, the Department of Corrections (DOC) and Houses of Correction (HOC) have upgraded their business processes and technology systems to ensure compliance with 501 CMR 18.00 and enable data contribution to the platform. Now that the cross tracking platform is operational, law enforcement agencies are similarly required to submit standardized data to the cross tracking platform. Law enforcement agencies will be submitting data to the cross tracking platform through the agencies’ record management systems. The data submitted should be collected as required by Chapter 6A and outlined in 501 CMR 18.00. Law enforcement agencies should collect and submit the following data:

- **Offense data-** offense, date of offense, time of offense, location of offense, age of offender at time of offense, crime(s) charged.
- **Arrest booking data-** name, date of birth, alias, race, ethnicity, gender identity, assigned sex, pronouns, whether the offender is a primary caretaker of a child, offender’s address at time of arrest, date of arrest, bail status, and the offense-based tracking number (OBTN).
- **Summons non-arrest data-** name, date of birth, race, offender’s address at time of offense, OBTN, and to the extent practicable, alias, ethnicity, gender identity, assigned sex, and pronouns.

¹ <https://www.mass.gov/info-details/cross-tracking-state-county-correctional-populations>

² <https://www.mass.gov/regulations/501-CMR-1800-data-collection-and-reporting-standards-for-criminal-justice-agencies#downloads>

For the definitions of the data fields please refer to 501 CMR 18.00 and the EOPSS HOC/DOC Data Collection Policies and Procedures for Custodial Booking and Admission dated December 2021. Of note, Chapter 6A § 3/4 (12) (ii) requires criminal justice agencies to use, “a unique state identification number assigned to each person who enters the criminal justice system”. The only existing unique statewide identification number is the state identification number (SID), a unique ten-character alphanumeric identifier supported by fingerprint identification assigned to an individual by the Department of State Police through the Automated Fingerprint/Biometric Identification System (AFIS/ABIS). Law enforcement agencies should fingerprint as allowed by law³ and must follow the Department of State Police, State Identification (SIS) SIS ADM-13 Standard Operating Procedure and Agency Guide for Submitting Fingerprints in Criminal Cases to the State Police Identification Section. This policy requires that fingerprints be submitted to SIS electronically on a Live Scan device.⁴

If you haven't done so already, law enforcement agencies without Live Scan devices should immediately reach out to Abir Sohel, Project Manager at EOPSS, cell phone 617-352-3782, abir.sohel@mass.gov. Mr. Sohel is working with agencies to obtain and utilize Live Scan devices. Agencies with Live Scan devices should ensure the device is electronically connected to the RMS.

Many law enforcement agencies are already in the process of upgrading their existing RMS systems to achieve compliance with 501 CMR 18.00. If you have not done so already, EOPSS recommends that you contact your RMS vendors to assess technology gaps, create an implementation plan and execute the required changes for compliance with 501 CMR 18.00. Furthermore, agencies should utilize the RMS system to submit electronic applications for criminal complaint as approved by the Trial Courts when available.

At this time, if you have not done so already, EOPSS encourages you to discuss the requirements set forth in Chapter 6A with your general counsel and determine next steps to incorporate the necessary changes in your department's business practices or technology platforms. EOPSS looks forward to working alongside the departments to fulfill this important mandate for the Commonwealth. If you have any questions or concerns, please do not hesitate to contact me.

Sincerely,



Kerry A. Collins
Undersecretary for Forensic Science and Technology
Executive Office of Public Safety and Security
One Ashburton Place
Boston, MA 02108

³ An individual may be fingerprinted pursuant to M.G.L. c. 6A, § 18½, c. 94C, § 45, c. 119, § 54, c. 126, § 40, c. 127, § 23, c. 211B, § 22, c. 212, § 7, and c. 263, § 1A.

⁴ When no Live Scan device is available, the agency may manually submit hard fingerprint cards.

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501 CMR 18.00: DATA COLLECTION AND REPORTING STANDARDS FOR CRIMINAL JUSTICE AGENCIES

Section

- 18.01: Purpose
- 18.02: Scope and Applicability
- 18.03: Definitions
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18.01: Purpose

The purpose of 501 CMR 18.00 is to establish data collection and reporting standards for Criminal Justice Agencies to enable the submission of data by Criminal Justice Agencies including, but not limited to, the Department of Correction, Houses of Correction, and county jails, to capture and report information on their populations and to report information relative to recidivism rates.

501 CMR 18.00 sets forth standards for the consistent and accurate collection of data from Criminal Justice Agencies by:

- (a) Defining the data to be collected; and
- (b) Developing a data warehouse that is accessible to Criminal Justice Agencies and in an anonymized format to the public.

To facilitate the implementation of 501 CMR 18.00, the Executive Office of Public Safety and Security (EOPSS) shall enter into an appropriate Memorandum of Understanding (MOU) with the Trial Court as specified in 501 CMR 18.08.

18.02: Scope and Applicability:

501 CMR 18.00 shall apply to Criminal Justice Agencies, as defined in 501 CMR 18.03, and to the Trial Court under the terms of the MOU, that collect:

- (a) Data on an Offender within their custody, arrested or charged with an offense/offenses;
- (b) Data on Offender populations, including all applicable charges and convictions; and/or
- (c) Data from other Criminal Justice Agencies.

All such data shall be submitted by the Criminal Justice Agencies and the Trial Court into a data warehouse managed and maintained by EOPSS, or its designee, in consultation with the Executive Office of Technology Services and Security (EOTSS), or its designee.

501 CMR 18.00 also incorporates the reporting requirements set forth in M.G.L. c. 126, § 40.

18.03: Definitions

Actual Release from Sentence Date. The date on which an Offender is released from the custody of the Department of Correction or House of Correction.

- (a) having completed the Offender's entire sentence, including any parole supervision, based upon an initial calculation of the Offender's Release Date minus any sentence deductions such as Earned Time; or
- (b) having been released from the Offender's sentence by post-sentencing action of a court (e.g., revise and revoke, sentence or conviction vacated, conviction overturned by appellate court with no retrial, reduction in sentence terms by Appellate Division or new trial).

Actual Release from Sentence Date shall not apply to pre-trial detainees.

Age of Offender at Time of Offense. Determined by the difference between the date of the offense and the Offender's date of birth.

18.03: continued

Age of Offender Entering Custody. Computed at the Date Entering Custody of the Department of Correction or House of Correction, as defined in Date Entering Custody; it is determined by the difference between that date and the Offender's date of birth.

Age of Offender Exiting Custody. Computed at the Date Exiting Custody of the Department of Correction or House of Correction, as defined in Date Exiting Custody; it is determined by the difference between that date and the Offender's date of birth.

Assigned Sex. The biological sex that was assigned to a person at the time of the Offender's birth.

Bail Amount or Reason if No Bail Set. An order to release an accused person from custody after payment of a set monetary amount or receipt of adequate surety to ensure that person's appearance at trial pursuant to M.G.L. c. 276, §§ 57 and 58. An accused person may be held without bail following a hearing as outlined in M.G.L. c. 276, § 58A. An Offender released from custody having given personal recognizance to appear before court is not considered released on bail.

Case. A charge or series of criminal charges that are arraigned under a single docket number.

Case Disposition. Refers to the end result of a criminal case through a conviction, acquittal, plea or admission, dismissal, *nolle prosequi* or other final resolution as entered by the Trial Court.

Criminal Justice Agency. Consistent with the definition in M.G.L. c. 6, § 167, "those agencies at all level of government which perform as their principal function, activities relating to:

- (a) crime prevention, including research or the sponsorship of research;
- (b) the apprehension, prosecution, adjudication, incarceration, or rehabilitation of criminal Offenders; or
- (c) the collection, storage, dissemination or usage of criminal Offender record information".

Custody. When an Offender is formally under the physical control of the Department of Correction or House of Correction. Custody specifically excludes voluntary or involuntary commitments for substance abuse or mental health evaluation or treatment.

Data Warehouse. A data management system managed and maintained by EOPSS, or agent thereof, in consultation with EOTSS, where data collected from Criminal Justice Agencies and the Trial Court is stored, integrated, and processed for internal and public reporting.

Date Entering Custody. The date an Offender is admitted to the custody of the Department of Correction or House of Correction. An Offender may be admitted to custody pursuant to a court order, as a transfer from another facility, pursuant to the execution of a parole violation warrant, or pursuant to the execution of an escape warrant, or other means.

Date Exiting Custody. The date an Offender is released from the custody of the Department of Correction or House of Correction whether by expiration of sentence, parole, release to another jurisdiction, court release, or other legal release from the custody of such a facility.

Date of Arrest. The date the Offender is arrested for the offenses for which the Offender is charged.

Date of Offense. The date that the offense was committed or, for serial offenses, the first date of the date range within which the serial offenses occurred.

Earned Time. In accordance with M.G.L. c. 127, § 129D, the time earned by Offenders to shorten their time in custody by earning deductions in time for good conduct or earn credits toward the completion of their custodial sentence through programing.

18.03: continued

Ethnicity of Offender. Determined with reference to the ethnicity categories used by Federal Bureau of Investigation's Criminal Justice Information Services, Division Uniform Crime Reporting Program, National Incident - Based Reporting System User Manual which are currently as follows:

- (a) H - Hispanic or Latino;
- (b) N - Non-Hispanic or Not Latino.

Gender Identity. A person's gender-related identity, appearance or behavior, whether or not that gender-related identity, appearance or behavior is different from that traditionally associated with the person's physiology or assigned sex at birth. Gender identity refers to a person's internal sense of their own gender and shall be self-reported by each individual.

Governing Offense. As determined by the Department of Correction or House of Correction, is the offense for which an Offender is committed to the Department of Correction or a House of Correction and which controls the overall sentence structure.

Jail Credit from Pretrial Incarceration. Pursuant to M.G.L. c. 279, § 33A, a Jail Credit from Pretrial Incarceration shall be equal to the number of days spent by the Offender in custody prior to being sentenced awaiting and during trial. Jail credits are applied to an Offender's court imposed sentence and the Offender is deemed to have served the portion of the sentence equal to the jail credits.

Location(s) of Offense. The municipality, state, and zip code where the offense or offenses occurred.

Massachusetts State Police State Identification Section (SIS). The SIS is a unit within the Department of State Police responsible for managing and maintaining fingerprint records within the Commonwealth. The Department of State Police establishes the policies and procedures for properly collecting fingerprint records. Pursuant to the provisions of M.G.L. c. 6A, § 18¾, c. 94C, § 45, c. 119, § 54, c. 126, § 40, c. 127, § 23, c. 211B, § 22, c. 212, § 7, and c. 263, § 1A, Criminal Justice Agencies are required to collect and submit fingerprints to the SIS for felony criminal offenses, and may also submit fingerprints for misdemeanor arrests.

Offender. Any person charged with a criminal offense.

Offender's Address. The municipality, state, and zip code where the offender resides.

Offender Status. The status of the Offender within the Criminal Justice Agency with regard to the offense. Offender statuses include, but are not limited to, the following: held pending arraignment-bail, held pre-trial, released on bail, committed, released to probation supervision, released from custody, released to parole supervision, released on personal recognizance, and violation found and returned to custody. Offenders found to have violated the terms of their sentence by committing a new criminal offense and returned to custody have undergone arraignment, as defined in Rearraignment. Offenders convicted of a new offense while serving either a commitment or term of probation or parole on the Governing Offense have undergone reconviction, as defined in Reconviction.

Offense. A crime or crimes for which a person is charged.

Offense Based Tracking Number (OBTN). A unique identifier for a specific fingerprint/arrest/custody event, and links the Individual to the fingerprints taken. This 13 character alphanumeric identifier is unique to the fingerprint/arrest/custody event. The first character is predetermined by the SIS, followed by the three character CJIS Agency code. The remaining nine character suffix is designated by the agency. Prefix assignments: T (denotes arrest), J (denotes county jail booking), H (denotes house of correction booking), D (denotes state department of correction). An Offender will have multiple OBTNs on file when they have multiple events.

Pronouns. The set of pronouns that a person uses in order to reflect that person's gender identity.

18.03: continued

Pre-trial Detainees. Offenders who are held in custody in a jail, house of correction, or prison prior to trial.

Primary Caretaker of a Child. A parent or legal guardian with whom a child has a primary residence.

Probation Central File Number (PCF Number). A number assigned for identification purposes to an individual by the Massachusetts Probation Service. The PCF Number is not supported by fingerprint-based identification.

Race of Offender. Determined with reference to the race categories used by the Federal Bureau of Investigation's Criminal Justice Information Services Division, Uniform Crime Reporting Program, National Incident - Based Reporting System User Manual, which are currently as follows:

- (a) A - Asian or Pacific Islander;
- (b) B - Black or African-American;
- (c) I - American Indian or Alaska Native;
- (d) W - White;
- (e) U - Unknown.

Rearrangement. Occurs on date when an Offender is arraigned for an offense within one, two or three years of their Release Date.

Recidivism. Occurs on date when an Offender is rearraigned, reconvicted or reincarcerated within one, two or three years of their Release Date.

Reconviction. Occurs on date when an Offender is convicted of an offense within one, two or three years of their Release Date.

Reincarceration. Occurs on date when an Offender is recommitted to custody within one, two or three years of their Release Date.

Release Date. The calculated date on which an Offender will be released from the Offender's sentence, based on calculations of a sentence's terms without accounting for sentence deductions that an Offender may earn while serving the Offender's sentence. This date forms the basis for calculating the Offender's "Actual Release Date".

Risk and Needs Assessment Outcome. The score an Offender receives on any risk and needs assessment conducted by a Criminal Justice Agency. Each Criminal Justice Agency will submit its scores consistent with the tool and the cross-tracking system will assign a designation for the purpose of meeting the reporting requirements of state law.

State Identification Number (SID). A unique ten-character alphanumerical identifier supported by fingerprint identification assigned to an individual by the Department of State Police through the Automated Fingerprint Identification System (AFIS). The SID is created upon the fingerprinting of a person by a Criminal Justice Agency pursuant to M.G.L. c. 6A, § 18¾, c. 94C, § 45, c. 119, § 54, c. 126, § 40, c. 127, § 23, c. 211B, § 22, c. 212, § 7, and c. 263, § 1A.

Status of Offender's Reproductive Health Needs. Whether the Offender has requested enhanced medical care for reproductive health needs for pre-natal and/or post-natal care.

Time of Offense. The time that the offense occurred.

Type of Admission. The reason an Offender is admitted into custody. Type of admission includes, but is not limited to, the following: arrest, summons arraignment, commitment, held for another department, probation violation, parole violation, held pending arraignment-bail, held pre-trial.

18.03: continued

Type of Release. The reason an Offender is released from custody. Type of release includes, but is not limited to, the following: released without supervision, released on bail, released on personal recognizance, released to parole supervision, released to probation with or without supervision, released to home confinement, or released to another Criminal Justice Agency.

Whether the Offender Has Participated in and Completed Evidence-based Programs. Whether or not the Offender has:

- (a) participated in; and
- (b) completed any educational or rehabilitative programs while in the custody of a Criminal Justice Agency.

Criminal Justice Agencies shall indicate the name, type, and the outcome of participation in the program.

18.04: Collection Requirements

Criminal Justice Agencies shall collect and record their applicable data to meet the requirements prescribed by 501 CMR 18.00. At a minimum, the Trial Court may order and these Criminal Justice Agencies shall assign OBTNs, collect fingerprints, and SIDs as set forth in 501 CMR 18.04.

(a) Fingerprint Collection.

1. The Trial Court may order and these Criminal Justice Agencies shall collect fingerprints and submit them to the State Identification Section (SIS) in accordance with the requirements set forth by the Department of State Police.
2. Fingerprint collection is required pursuant, but not limited, to:
 - a. M.G.L. c. 263, § 1A and c. 94C, § 45 respectively, a set of fingerprints must be taken and submitted to the SIS, for individuals arrested or taken into custody for a felony or arrested or charged with a felony violation of controlled substance laws;
 - b. M.G.L. 127, § 23, fingerprints must also be taken by the Department of Correction and Houses of Correction when an Offender is committed under a sentence for any offense including when an additional commitment occurs while the Offender is in custody and the Trial Court may order fingerprints be taken of a person convicted of a felony if the Offender is not committed to a penal institution.
 - c. The SIS will also accept and process fingerprint submissions for a misdemeanor charge.

(b) OBTN.

1. Criminal Justice Agencies shall include OBTNs on all fingerprint submissions to the SIS in accordance with the requirements set forth by the SIS.
2. An OBTN must be submitted for felony indictments when the corresponding charges result from an arrest pursuant to M.G.L. c. 212, § 7. State and local police departments shall submit an Offender's OBTN with applications for felony complaints for both adults and juveniles pursuant to the provisions of M.G.L. c. 218, § 32A and M.G.L. c. 119, § 54.
3. The construct of each OBTN must conform to the format and protocols established by the SIS as follows: the arrest event is identified by the letter T (or other designated prefix) followed by the agency's three characters CJIS code (*e.g.*, BOS for the Boston Police Department) and a sequentially numbered suffix. Houses of Correction and the Department of Correction shall incorporate the point-of-arrest OBTN into their respective booking processes. If a House of Correction or Department of Correction cannot obtain the point-of-arrest OBTN, then it must generate its own OBTN. To distinguish the arrest event from the custodial event, the prefix J (jail), H (house of correction) or D (state department of correction) will be substituted for the T (arrest-tracking).

(c) SID.

1. Upon the submission and retention of fingerprints by a criminal justice agency to the SIS, a SID shall be created and electronically provided to the criminal justice agency; in accordance with the requirements set forth by the SIS:

18.04: continued

2. SIDs are required pursuant, but not limited, to:
 - a. M.G.L. c. 212, § 7. SIDs are required for felony indictments when the corresponding charges result from an arrest;
 - b. M.G.L. c. 94C, § 45. SIDs are required for applications for felony complaints;
 - c. M.G.L. c. 127, § 23, SIDs are required for all Offenders serving a sentence and may, by order of the Trial Court, be required for an individual convicted of a felony but not committed to a penal institution.
 - d. M.G.L. c. 126, § 40. SIDs are required for all persons committed to a jail or House of Correction; and
 - e. M.G.L. c. 211B, § 22. "the trial court shall electronically send to the department of state police all criminal case disposition information for the offender, including sealing and expungement orders and dismissals, together with the corresponding offense-based tracking number and fingerprint-based state identification number, to the extent that the offender has been assigned such numbers and the numbers have been provided to the court".
3. No SID shall be created by any criminal justice agency other than the SIS. In order to comply with all of the aforementioned statutory obligations, criminal justice agencies, excluding the trial court, shall fingerprint an Offender and submit said fingerprints to the SIS, which will create the SID. All fingerprints shall be accompanied by an OBTN.
4. The SIS will create an SID for misdemeanor charges accompanied by fingerprints. The SID, OBTN and any other data elements required and available by 501 CMR 18.00 will be reported to the data warehouse.

18.05: Categories and Types of Data Relative to Offender Populations Collected and Reported by Criminal Justice Agencies

Any Criminal Justice Agency that collects data on a person shall submit any data it collects for the following informational fields in the format set forth in 501 CMR 18.00 to the data warehouse:

- (a) State Identification Number (SID);
- (b) Probation Central File Number;
- (c) Governing Offense;
- (d) Offense;
- (e) Date of Offense;
- (f) Time of Offense;
- (g) Location of Offense;
- (h) Offender's Address at Time of Arrest;
- (i) Race of Offender;
- (j) Ethnicity of Offender;
- (k) Gender Identity;
- (l) Assigned Sex;
- (m) Pronouns;
- (n) Age of Offender;
- (o) Status of Offender as Primary Caretaker of a Child;
- (p) Status of Offender's Reproductive Health Needs;
- (q) Risk and Needs Assessment Scores;
- (r) Whether the Offender has Participated and Completed Evidence-based Programs;
- (s) Date Entering Custody;
- (t) Date Exiting Custody;
- (u) Offender's Address on Date of Exit Custody;
- (v) Release Date;
- (w) Offender's Address on Release Date;
- (x) Actual Release from Sentence Date;
- (y) Offender Status;
- (z) Offense Based Tracking Number;
- (aa) Type of Release;
- (bb) Type of Admission;
- (cc) Case Disposition;
- (dd) Jail Credit from Pretrial Incarceration;
- (ee) Earned time; and
- (ff) Bail Amount or Reason if no Bail Set.

501 CMR: EXECUTIVE OFFICE OF PUBLIC SAFETY AND SECURITY

18.06: Format for Submission of Data

Data shall be collected, processed and submitted in accordance with the standards established by the Data Subcommittee created by EOPSS and EOTSS.

18.07: Categories and Types of Data Collected and Reported by Criminal Justice Agencies Relative to Recidivism Rates

Upon intake of an Offender, the Department of Correction or House of Correction shall review the information in its data system to assess whether the Offender is being reincarcerated for an offense. Said information shall be recorded and reported as part of the data collection fields submitted to the data warehouse.

18.08: Trial Court Data Collection

EOPSS will enter into a Memorandum of Understanding (MOU) and data sharing agreement with the Trial Court.

18.09: Severability Clause

If any article, section, subsection, sentence, clause, or phrase of 501 CMR 18.00 is for any reason held to be unconstitutional, contrary to statute, or in excess of the statutory authority of the Secretary of Public Safety and Security or otherwise inoperative, such decision shall not affect the validity of any other article, section, subsection, sentence, clause or phrase of 501 CMR 18.00.

REGULATORY AUTHORITY

501 CMR 18.00: M.G.L. c. 6A, § 18¾.



Department of State Police State Identification Section

SIS ADM – 13

STANDARD OPERATING PROCEDURE AND AGENCY GUIDE FOR SUBMITTING FINGERPRINTS IN CRIMINAL CASES TO THE STATE POLICE IDENTIFICATION SECTION

INTRODUCTION

Pursuant to the provisions of M.G.L. c. 6A, § 18 ¾, c. 94C, § 45, c.119, §54, c. 126, § 40, c. 127, § 23, c. 211B, § 22, c. 212, § 7, and c. 263, §1A, Criminal Justice Agencies are required to collect and submit fingerprints to the Department of State Police State Identification Section ("SIS") for felony arrests, custody events, and it is recommended to submit fingerprints for misdemeanor arrests for identification purposes.

SIS is responsible for maintaining fingerprint records within the Commonwealth. SIS serves as the statewide repository of fingerprint records for arrests, sex offender registrations, license to carry applicants, and law enforcement and civilian employment applicants. SIS is establishing these guidelines in accordance with M.G.L. c. 4, § 7(61), c. 263, §1A, and 803 CMR 7.08, for the proper collection and transmission of fingerprint records to SIS. Compliance with these fingerprint guidelines and obtaining a State Identification Number (SID), allows for a biometrically confirmed offender identity, supports a positive identity within Massachusetts Trial Courts (Mass Courts), provides the ability to share an offender's criminal history on the state (AFIS-R) and national (Interstate Identification Index - III) fingerprint supported criminal history systems, and enhances the accuracy of data shared with the Executive Office of Public Safety and Security (EOPSS) data analytics system. These guidelines may be modified as systems are enhanced to allow additional means or methods of tracking Offenders. Fingerprint results are available on AFIS-R application located on DCJIS Single Sign On application.

DEFINITIONS

Criminal Justice Agency. Consistent with the definition in M.G.L. c. 6, § 167," those agencies at all level of government which perform as their principal function, activities relating to (a) crime prevention, including research or the sponsorship of research; (b) the apprehension, prosecution, adjudication, incarceration, or rehabilitation of criminal Offenders; or (c) the collection, storage, dissemination or usage of criminal Offender record information."

Offender. An Offender is any person charged with a criminal offense.

Offense-based tracking number ("OBTN"). A unique identifier for a specific fingerprint, arrest, charge, or custody event; and links the individual to the fingerprints taken. This thirteen-character alphanumeric identifier is unique to the fingerprint, arrest, charge, or custody event. The first character is predetermined by the SIS, followed by the three-character CJIS Agency code. The remaining nine-character suffix is designated by the agency.

Original OBTN. The OBTN created by the Criminal Justice Agency which arrests or charges the Offender.

Regional Booking. Occurs when an Offender is originally booked by or at a Jail or House of Correction and where that original booking is performed on behalf of a separate criminal justice agency. This definition includes but is not limited to: (a) such booking performed by or at a Jail or House of Correction on behalf of an arresting police department, (b) the provision of such booking services by Jails or Houses of Correction for towns containing five thousand or fewer inhabitants, as described in M.G.L. c. 40, § 34, and (c) the provision of such booking services by Jails or Houses of Correction for towns containing five thousand or fewer inhabitants, as described in M.G.L. c. 40, § 34, and (c) the provision of such booking services by Jails or Houses of Correction in accordance with M.G.L. c. 40, § 37.

Safe Keeps. Occurs when an Offender was previously booked by another criminal justice agency and then transported to a Jail or House of Correction to be held for pre-arraignment or detention purposes.

State Identification Number ("SID"). A unique ten-character alphanumeric identifier supported by fingerprint identification assigned to an individual by the Department of State Police through the Automated Fingerprint/ Biometric Identification System (AFIS/ABIS). The SID is created upon the fingerprinting of a person by a Criminal Justice Agency. A person shall only have one SID, any SID discrepancies shall be reviewed and resolved by the State Identification Section. The SID always begins with "MA".

Summons. Consistent with the definition of "Process" in the District Court Standards of Judicial Practice, The Complaint Procedure, effective October 1, 2008, a summons is the Issuance of process a clerk magistrate grants for a criminal application for complaint when the accused has not been arrested.

FINGERPRINT CHARGE ARREST EVENT

- Offenders under arrest by a Criminal Justice Agency for a felony must be biometrically identified using fingerprints. Fingerprints may also be submitted to the State Identification Section (SIS) for misdemeanor arrests.
- Fingerprints shall be submitted to the SIS, electronically on state approved Live Scan fingerprint devices.
 - When no Live Scan is available, the agency may manually submit hard card fingerprints on the standard state Fingerprint card to the SIS.
- All ten fingers and palmprints shall be captured, and photographs (booking photographs/mugshots/face images) shall be submitted to the SIS.
 - Additional biometrics such as scars, marks, and tattoo images and iris images may be submitted to the SIS.
- The arresting/charging agency creates the Original OBTN which shall follow the offender from the arresting/charging agency to the court, and ultimate disposition in the case. Fingerprints shall be submitted to SIS with the Original OBTN.
 - The agency should generate the OBTN automatically in the record management system.
- The OBTN point of arrest format: OBTN's are unique and contain Prefix Assignments, Agency Identifier, and 9 Characters set by the agency (i.e. TBOS202212345, "T" arrest, BOS Boston, and 202212345 is the 9 characters set by the agency)
 - Prefix Assignments for Arrest Events:
 - "T" prefix is used to designate an arrest event for a person taken into custody in a new criminal offense or warrant in a pending criminal case.
 - Agency Identifier- three-character Criminal Justice Information Services (CJIS) Agency Code assigned to agency (i.e. BOS is Boston).
 - 9 characters as determined by the agency (i.e. 202212345).
 - Recommended that the agency use the first four numbers as the year (i.e. 2022).

- All mandatory fields on the Live Scan/fingerprint card submissions shall be completed.
 - Mandatory fields include, but are not limited to, OBTN, name, place of birth, date of birth, sex, race, height, weight, eye color, hair color, date printed, date of arrest, arrest offense literal (i.e. assault), and fingerprint official.
 - For accuracy, submit the fields to Live Scan using an electronic interface, (not typed in).
- The biometric identification is not complete until a State Identification Number (SID) is returned to the agency by the State Identification Section and annotated into the agency records management system, as required by law and policy to allow for a biometric fingerprint supported criminal history identity.
- The agency generated OBTN shall be included in the application for criminal complaint submitted to the Massachusetts Trial Court.
 - Trial Court Standing Order No. 2-19, requires all applications for complaints be submitted to the clerk's office in the court having jurisdiction by Electronic Application for Criminal Complaint (EACC). When available, the agency should submit the compliant electronically.

OFFENSE BASED TRACKING NUMBER CHARGE NON-ARREST EVENT

A Criminal Justice Agency assigns an OBTN for a charge pursuant to the OBTN definition in M.G.L. c. 4, § 7. A criminal charge resulting in a non-arrest event includes an application for a complaint for a Summons, or an indictment that did not result in an arrest.

- OBTN non-arrest arrest format: OBTN's are unique and contain Prefix Assignments, Agency Identifier, and 9 Characters set by the agency (i.e. CBOS202212345, "C" summons, BOS Boston, and 202212345 is the 9 characters set by the agency)
 - Prefix Assignments for Non-Arrest Event:
 - "C" prefix is used to designate a charged not arrest event (i.e. Summons, complaint, indictment without an initial arrest).
 - Agency Identifier- three-character Criminal Justice Information Services (CJIS) Agency Code assigned to agency (i.e. BOS is Boston).
 - 9 characters as determined by the agency (i.e. 202212345).

OBTN shall be included in the application for criminal complaint submitted to the Massachusetts Trial Court.

FINGERPRINT GUIDELINES FOR CUSTODIAL AGENCIES

Jails, Houses of Correction, and the Massachusetts Department of Correction facilities (collectively, "custodial agencies") create OBTN's and submit fingerprints to obtain a State Identification Number (SID).

A. State Identification Number and Offense Based Tracking Number:

- Except as otherwise specifically provided herein, the arresting or charging agency shall create the Original OBTN.
- An Offender shall be fingerprinted using a Live Scan/fingerprint card submission when the Offender enters custody of the Jail, House of Correction, or Massachusetts Department of Correction facility at first instance and when the Offender returns to any such institution after loss of custody.

- Loss of custody occurs when the Offender is released from the custody of the custodial agency. This includes when bail is posted, when the Offender has completed the Offender's sentence, and/or when the Offender is transferred to a different custodial institution. If the Offender remains in the same facility, then loss of custody does not occur when an Offender's status is changed from pretrial to a sentenced inmate. Similarly, when an Offender is transferred within DOC facilities and has previously been booked, no loss of custody occurs. Lastly, when an Offender is returned to DOC custody on the same sentence and Parole has identified the Offender and sentence for which they are returning, no loss of custody has occurred.
- All fingerprint submissions shall contain an OBTN that must be formatted as follows:
 - OBTN's are unique and contain Prefix Assignments, Agency Identifier, and 9 Characters set by the agency (i.e. TBOS202212345, "T" arrest, BOS Boston, and 202212345 is the 9 characters set by the agency)
 - An OBTN must contain the appropriate single-letter prefix:
 - Original/Arresting/Charging agency OBTN prefix: **T**
 - Jail Custody OBTN prefix: **J**
 - House of Correction OBTN prefix: **H**
 - Department of Correction prefix: **D**
 - Agency Identifier- three-character Criminal Justice Information Services (CJIS) Agency Code assigned to agency (i.e. BOS is Boston).
 - 9 characters as determined by the agency (i.e. 202212345).
 - The agency should generate the OBTN automatically in the record management system.
- All mandatory fields on the Live Scan/fingerprint card submissions shall be completed.
 - When available, the disposition, status, or sentence must be entered into the Live Scan fingerprint submission. This information allows a complete and accurate criminal history record for the Offender in state (AFIS-R) and national (Interstate Identification Index - III) fingerprint-supported criminal history systems.
 - For accuracy, submit the fields to Live Scan using an electronic interface, (not typed in).
- The biometric identification is not complete until a State Identification Number (SID) is returned to the agency by the State Identification Section and annotated into the agency records management system.
 - Prior to the release of any Offender, the agency shall confirm the existence of the SID on file. If no SID is on file, then the Offender must be fingerprinted, and the SID must obtain prior to release.

B. Jail Regional Booking/Safe Keeps:

- In instances of Regional Booking and/or Safe Keeps where the Offender has not been previously fingerprinted by the arresting/charging agency, the Jail shall book the Offender as the arresting/charging agency and use the OBTN provided by the agency with the arresting/charging agency's assigned OBTN format. The OBTN format used in these circumstances, that is, the arresting/charging agency format is as follows:
 - The first letter "T" shall be used to denote that this is the Original OBTN.
 - This shall be followed by the three-character agency identifier, which must identify the arresting/charging agency and not the custodial agency.
 - This shall be followed by nine (9) assigned numbers as assigned by the Arresting/ charging agency; and
 - This OBTN must be the same OBTN as submitted by the arresting/ charging agency to the court.

- In instances of Regional Booking and Safe Keeps where the Offender has been previously fingerprinted by the arresting/charging agency, the Offender does not need to be re-fingerprinted, and the custodial agency shall obtain and retain the OBTN, SID and FBI number from the original arresting agency's fingerprint submission. If the Offender is re-fingerprinted, the custodial agency shall fingerprint the Offender using the standard OBTN procedures as described above (i.e., the custodial agency shall create an OBTN using its own designated prefix, agency identifier, and 9 assigned characters).

C. Jails Change in Offender Status – No Loss of Custody:

- When there is no loss of custody, but only a change in Offender status, i.e., Safe Keep to pretrial, or Safe Keep/pretrial to sentenced (HOC), the Offender does not need to be re-fingerprinted, and the custodial agency shall retain the OBTN and associated MA SID and FBI#.

D. Offenders Not Fingerprinted by Custodial Agencies:

- Although the following categories of Offenders may not currently be fingerprinted by the custodial agency, the policies and procedures set forth herein shall still be followed to the extent applicable:
 - Offenders awaiting trial at DOC.
 - Transfers from other county, state, or federal Criminal Justice Agency.
 - Offenders transferring from Jail to House of Correction where the Offender has previously been fingerprinted by the Criminal Justice Agency and the Criminal Justice Agency has not lost custody of the Offender.
 - Offenders transferring within DOC facilities who have previously been booked.
 - Offenders returning to DOC custody on the same sentence who have been properly identified; and
 - Federal holds, such as ICE, Immigration holds. If fingerprinting is needed, the custodial agency will use the QCAR (Criminal Inquiry only) transaction. This transaction is search only for identification purposes and not retained.

OFFENSE BASED TRACKING NUMBER NON-CRIMINAL CUSTODY EVENTS

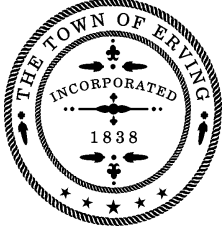
Criminal Justice Agencies may fingerprint an offender for a non-criminal custody event such as a protective custody.

- OBTN non-criminal custody event format: OBTN's are unique and contain Prefix Assignments, Agency Identifier, and 9 Characters set by the agency (i.e. QBOS202212345, "Q" protective custody, BOS Boston, and 202212345 is the 9 characters set by the agency)
 - Prefix Assignments for Non-Arrest Event:
 - "Q" prefix is used to designate protective custody (a non-criminal/ fingerprint inquiry).
 - Agency Identifier- three-character Criminal Justice Information Services (CJIS) Agency Code assigned to agency (i.e. BOS Boston).
 - 9 characters as determined by the agency (i.e. 202212345).

APPLICANT BACKGROUND CHECKS

Other OBTN prefixes as approved and assigned by the State Identification Section may be used for criminal justice agencies for applicant background checks such as firearms, bylaws, and or CJIS certification.

Promulgated By: *Dt. Christine Durian #2555*
Section/Unit Commander
Effective Date: *7/28/22*



TOWN OF ERVING

SELECT BOARD

12 East Main Street
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Fax 413-422-2808

Email: administrator@erving-ma.gov

Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

October 3, 2022

To: Select Board
From: Bryan Smith, Town Administrator
CC: Robert Holst, Chief of Police

RE: Police Cruiser Procurement

The Town has been with the insurance company to determine the replacement value that will be covered of the cruiser that was totaled. The vehicle that was damaged was a Dodge Charger and the chances of procuring another Charger this year are low. Because of this, the insurance company is considering providing the Town with a replacement cost to cover a Ford Explorer Utility. The insurance company is working with the appraiser and MHQ to determine a cost, which is estimated to be approximately \$62,000. If approved, the replacement value would only be for a fully gasoline fueled vehicle and not a hybrid as the Town has been transitioning the Police Department fleet to. The Town could opt to cover the difference and order a hybrid. I am awaiting the final claim approval amount.

Simultaneously, Chief Holst has been working with MHQ to identify a Ford Explorer Utility hybrid vehicle that is available for purchase. The Town has been made aware of an opportunity to purchase a hybrid that was ordered by another community that is no longer going to be purchased. The quote for the specified vehicle is attached.



CUSTOMER

Contact Name: Bill Kimball
 Company/Dept: Erving Police Dept
 Street Address: 71 French King Highway
 City, State, Zip: Erving MA,01344
 Phone: 413 522 1839
 E-Mail: kimballw22@gmail.com

Date: 9/26/2022
 Valid for: 60 days
 Customer #:
 Contract: MAPC/GBPC
 Sales Rep: ZACH REED

Vehicle & Equipment:

CONTRACT LINE REFERENCE	LINE DESCRIPTION	UNIT PRICE	QTY.	EXTENDED PRICE
380	2023 Ford Interceptor Utility Hybrid	\$44,452.00	1	\$44,452.00
Ext	Agate black	\$-		\$0.00
Int	Ebony cloth Vinyl rear	\$-		\$0.00
Wheels	Small Center Cap	\$-		
52P	Hidden door lock plunger	\$157.00	1	\$157.00
18D	Global lock/unlock	\$-	1	\$0.00
43D	Courtsey lamp disable	\$25.00	1	\$25.00
51R	Driver side spot light	\$387.00	1	\$387.00
549	Heated side mirrors	\$59.00	1	\$59.00
76R	Reverse Sensing	\$270.00	1	\$270.00
				\$0.00
				\$0.00
Graphics	Graphics package B	\$ 550.00	1	\$550.00
402	911 Circuits power distribution	\$ 750.00	1	\$750.00
Tint	Tint per window	\$ 75.00	7	\$525.00
332	Whelen v series mirror beams	\$ 517.00	1	\$517.00
tab3	Whelen FST inner edge 10 lamp	\$ 1,401.40	1	\$1,401.40
365	Whelen 5 lamp wxc duo tracer (ea)	\$ 1,040.00	2	\$2,080.00
372	Whelen tracer mounting kit (ea)	\$ 49.00	2	\$98.00
PCC Tab3	Whelen ion duo b/w in rear 1/4 top and bottom	\$ 136.50	4	\$546.00
labor	Install ions per hour	\$ 95.00	1	\$95.00
PCC Tab3	Whelen rst inner edge wxc 8lamp duo	\$ 1,412.60	1	\$1,412.60
labor	Install rst per hour	\$ 95.00	1.5	\$142.50
338	Whelen t ion duo above license plate	\$ 158.00	2	\$316.00
labor	Activate factory wig wag	\$ 95.00	0.75	\$71.25
361	Whelen vertex in tail light/headlight 2 ea	\$ 248.00	3	\$744.00
146	Whelen Core	\$ 1,000.00	1	\$1,000.00
PCC Tab3	Whelen control head	\$ 314.30	1	\$314.30
PCC Tab3	Whelen OBD	\$ 42.00	1	\$42.00
labor	Install core siren per hour	\$ 95.00	2	\$190.00
428	Whelen expansion module	\$ 215.00	1	\$215.00
143	Whelen sa315p siren speaker	\$ 350.00	1	\$350.00
PCC Tab3	Whelen canliteb photocell	\$ 56.00	1	\$56.00
892	Progard single cell 1/2 cage w/ osb	\$ 2,700.00	1	\$2,700.00
445	Havis 1012 console	\$ 525.00	1	\$525.00
PCC Tab3	Havis cup2-1001	\$ 55.32	1	\$55.32
468	Havis C-arm-108	\$ 180.00	1	\$180.00
PCC Tab3	Magnetic mic clip	\$ 45.00	2	\$90.00
1246	Setina t-rail mounted blac rac	\$ 716.00	1	\$716.00
PCC Tab3	Whelen r/w dome light	\$ 68.60	2	\$137.20
labor	install dome light per hour	\$ 95.00	1	\$95.00
1834	Tremco	\$ 195.00	1	\$195.00
772	Havis pass side mount	\$ 695.00	1	\$695.00
PCC Tab3	Havis universal laptop cradle	\$ 273.24	1	\$273.24
2005	Install customer supplied radio	\$ 275.00	1	\$275.00
2104	Install customer supplied MDT	\$ 395.00	1	\$395.00
2113	Install customer supplied video system	\$ 595.00	1	\$595.00
2116	Install additional camera	\$ 95.00	1	\$95.00
2122	Install customer supplied radar	\$ 195.00	1	\$195.00
PCC Tab3	MHQ electronic cover	\$ 199.00	1	\$199.00
	Shop supplies	\$ 345.00	1	\$345.00
				\$0.00

	Estimated model year increase	\$ 3,500.00	1	\$3,500.00
			Vehicle TOTAL:	\$68,026.81

Non-Contract Items:

	ITEM DESCRIPTION	UNIT PRICE	QTY.	PRICE
	N/A	\$0.00	1	\$0.00
		\$0.00	1	\$0.00
		\$0.00	1	\$0.00
		\$0.00	1	\$0.00
		\$0.00	1	\$0.00
Non-Contract TOTAL				\$0.00

Grand Total of Quote	\$68,026.81
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TERMS AND CONDITIONS

Deferrals and Cancellations of Sales Orders

In all cases where vehicles, products, and labor are purchased against government and public contracts, the terms and conditions of that contract shall prevail and bind MHQ. In cases where contract terms on deferral and/or cancellation are not defined, and for non-contract sales, the following MHQ policy shall prevail:

Deferrals

For this discussion, "deferral" refers to a customer-initiated action to delay the delivery of purchased items* beyond the delivery date confirmed to the customer in writing (Purchase Order confirmation). All deferral requests must be communicated to MHQ in writing. MHQ, at their sole discretion, reserves the right to accept or reject deferral requests. Once the subject item has started the production / fabrication process, delivery deferrals are not allowed - the item will be built, shipped, and billed upon completion. For deferral requests on items not yet in production, MHQ shall negotiate deferral terms with the customer's purchasing or sourcing authority (not the requisitioner). Consequences of order deferrals may include, but not be limited to: loss of scheduled production times and reallocation of vehicles and/or materials to other active jobs or other customers.

Special Order and Non-Cancellable/Non-Returnable items (NCNR)

Certain items and material are categorized as "Special Order" or "NCNR". Attempts to cancel shall be handled on an individual basis. Depending on the stage of production of a special-order item and the suppliers involved, special order items may incur cancellation charges based on supplier purchase liabilities. MHQ shall always act in the interest of our customers to minimize or eliminate cancellation charges whenever possible. Special Order items will be identified as such at the time of quoting and order acceptance to assure an understanding of risk to the customer.

NCNR items are not cancellable with our suppliers. MHQ will make a reasonable attempt to minimize the financial impact of cancelling NCNR items, but no assurance is offered that the customer's purchase liability for these item types can be reduced in any way. NCNR items will be identified as such at the time of quoting and order acceptance to assure an understanding of risk to the customer.

Cancellations

For this discussion, "cancellation" refers to a customer-initiated action to cancel a customer committed order* or any part thereof. All cancellation requests must be communicated to MHQ in writing. Cancellations will be accepted, without penalty, until the point in time where material has been ordered to support production of the ordered item(s). Once components or materials ordered against a committed customer order, cancellation charges may apply based on supplier purchase liabilities. MHQ shall always act in the interest of our customers to minimize or eliminate cancellation charges whenever possible. Depending on the type of material/components and the suppliers involved, the range of customer purchase liability can range from complete release of purchase liability up to and including full liability of the original material cost.

Supplier Failure to Perform

MHQ shall be held harmless in cases where their suppliers fail to source, build, or deliver quoted or ordered products required to satisfy customer committed orders. MHQ shall also be held harmless in cases where a supplier discontinues availability of a product places a product on allocation, or delivery times extend beyond their normal quoted delivery times such that the subject product becomes unavailable, or experiences extended delivery times. In these cases, MHQ shall offer alternatives, where commercially available, to the customer for consideration as acceptable substitutes.

*Purchased Items

*Purchased Items is defined as any item, component, or material required to fulfill a committed customer order.

*Customer Committed Order

*Customer Committed Order is defined as any acceptable form of communication that directs MHQ to produce and sell an item to their customer. Acceptable forms of communication are customer Purchase Orders, quotes that are signed and dated by a customer purchasing authority, Letters of Intent or Letters of Commitment that are signed and dated by a customer purchasing authority, or similar instruments that communicate an intent to purchase.

ORDER ACKNOWLEDGEMENT

By signing this document you are agreeing to the above terms and conditions of this order from MHQ, Inc.

x William Kimball

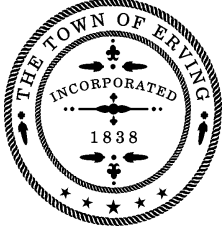
PRINT NAME

x Patrolman

TITLE

[Signature]

SIGNATURE



TOWN OF ERVING

SELECT BOARD

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Fax 413-422-2808
Email: administrator@erving-ma.gov

Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

September 30, 2022

To: Select Board

From: Bryan Smith, Town Administrator
Glenn McCrory, Highway Superintendent

RE: Proposed Senior Custodian Position & Recommendation

In 2017, the Select Board supported the recommendation of Glenn McCrory, Highway Superintendent, to establish a Building Custodian position to care for several municipal buildings. This was a position that was a necessary support service that had been missing for several years and identifying the correct mix of responsibilities with a qualified individual was essential. As the care of the facilities has improved over the years the Town has come to anticipate a higher standard for care of the facilities. Further with the implementation of OSHA requirements and the spotlight that was shown on the need to ensure proper sanitation during the pandemic, the importance of this work was further demonstrated. Glenn and I have reflected on this and have met with the current employee, Rebecca, to consider what has evolved and the future of the work. With that in mind, I am recommending that the Select Board consider the establishment of a Senior Custodian position, grade C.

If the Select Board was to approve this position, I respectfully request that Rebecca Walsh be promoted to the position. Rebecca has demonstrated a commitment to her team and duties at the Town of Erving. Rebecca's work has improved the work environment of all employees and her collaborative approach has further demonstrated the importance of this work. Chemical sensitivities, attention to allergens and a focus on safety led Rebecca to establish the Town's safety data sheet program for all solvents and cleaners used throughout the facilities. Rebecca has gone above and beyond working with staff to troubleshoot chemical sensitivities and tailor the supplies that are ordered. This same attention to detail and respect for the importance of the work was an essential part of the Town's response to the COVID-19 pandemic. Rebecca was a critical member of our team for preparing for a safe work environment.

Thank you for considering this request.

**Town of Erving, Massachusetts
Job Description**

Position Title:	Senior Custodian	Compensation Schedule	General Government
Department	Buildings & Grounds	Level	C
Reports to:	Highway Superintendent	FLSA Exempt:	No
SB Approved:		Essential:	Yes

Statement of Duties: Employee performs a variety of work in connection with the custodial, grounds cleanup, and light maintenance of municipal buildings. Coordinates the Town’s Material Safety Data Sheets (MSDS) program for the Building & Grounds Department. Coordinates custodial supply and inventory functions. Employee is required to perform all similar or related duties.

Supervision Required: Under the general supervision of the Highway Superintendent the employee is familiar with the work routine and uses initiative in carrying out recurring assignments independently in accordance specific instructions or guidelines. The supervisor provides additional, specific instruction for new, difficult or unusual assignments including suggested work methods. The employee is expected to recognize instances which are out of the ordinary and which do not fall within existing instructions; the employee is then expected to seek advice and further instructions. Reviews and checks of the employee’s work are applied to an extent sufficient to keep the supervisor aware of progress, and to insure that completed work and methods used are technically accurate and that instructions are being followed.

Supervisory Responsibility: Employee is not responsible for the regular supervision of other town employees. The employee may be responsible for the provision of direction or guidance to contractors working for the Town.

Confidentiality: Employee does not have regular access to confidential information of the town in accordance with the State Public Records law.

Accountability: The nature of work or the operation of large, complex, or potentially dangerous equipment increases the probability that errors could be serious. Consequences of errors, missed deadlines or poor judgment may include significant monetary losses, waste of material, and damage to buildings, equipment or personal injuries. Consequences of errors or poor judgment may include adverse public relations, personal injury, or danger to public safety.

Judgment: Numerous standardized practices, procedures, or general instructions govern the work and in some cases, may require additional interpretation. Independent judgment is needed to locate, select and apply the most pertinent practice, procedure, regulation or guideline.

Complexity: The work consists of routine or repetitive tasks and/or operations with few variations in well-known or established procedures.

Work Environment: Working conditions involve occasional exposure and presence of unpleasant or irritating elements or a combination of unpleasant elements such as noise, odors, chemical fumes, dust, smoke, heat, cold, oil, dirt or grease. Work may involve general cleaning, occasional work at heights or in confined or cramped quarters, or work around machinery and its moving parts. Employee may be required to work beyond normal business hours.

Senior Custodian
Erving, MA

Town of Erving, Massachusetts
Job Description

Nature and Purpose of Public Contact: Contacts are primarily with staff and the public. More than ordinary courtesy, tact and diplomacy may be required to resolve complaints.

Occupational Risk: Essential functions regularly present potential risk of injuries from improper exposure which could result in loss of time from work. Examples of injury include burns from chemicals, steam or fire, severe muscular strains from working with extremely heavy material, falls from heights in excess of three feet and illness from exposure to communicable diseases. Special safety precautions, training, or protective clothing such as gowns, coats, gloves, glasses, hard hats or safety boots may be required. Examples of injury include bruises from falls, cuts or burns, or muscular strains from lifting, pushing or carrying heavy equipment or work materials.

Essential Functions:

The essential functions or duties listed below are intended only as illustrations of the various type of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related, or a logical assignment to the position.

1. Responsible for the regular cleaning, of Town Hall, Police Station, Fire Station 1 & 2, Historical Building, POTW#1, and other buildings as assigned/needed.
2. Cleans, dusts, and disinfects restrooms including floors, stalls, toilets, urinals, and fixtures. Removes trash and waste. Cleans trash receptacles and replaces liners. Replenishes soap and towel dispensers.
3. Cleans public entry and use areas including, but not limited to hallways, stairways, and meeting rooms. Cleans and disinfects drinking fountains, door handles, and door push plates.
4. Sweeps and mops hard floors and baseboards, spot cleaning as necessary and wet mopping on a regularly scheduled basis. Vacuums and spot clean carpeted areas.
5. Coordinates, leads, and participates in major cleaning projects that include, but are not limited to, carpet cleaning and floor stripping and refinishing.
6. Maintains a safe working environment in the assigned area(s), notifying the appropriate resources of safety hazards observed and/or takes action to mitigate or eliminate potentially hazardous conditions.
7. Coordinates the Town's Material Safety Data Sheets (MSDS) program in accordance with OSHA requirements and ensures that assigned area(s) remain current. Ensures that secondary containers for cleaning and other products are properly labeled.
8. Inspects equipment used on a regular basis for function and required servicing. Makes minor repairs and arranges for complex repairs.
9. Participate in scheduled training workshops and applies new knowledge and skills in daily work.

Town of Erving, Massachusetts
Job Description

10. Coordinates custodial materials supply and inventory, maintaining lists of supplies or replacement parts needed, processing orders as necessary to maintain supply levels.
11. Ensures that buildings and offices are secured at the end of the work shift as appropriate.

Minimum Qualifications:

Education and Experience: Must have a High School diploma or equivalent; three to five (3-5) year of experience preferably in the custodial duties of buildings; or an equivalent combination of education and experience.

Special Requirements:

- Class D Motor Vehicle Operator's License
- Bloodborne Pathogen Awareness Training
- OSHA 511- Occupational Safety & Hazard Standards for the General Industry
- OSHA 7500- Introduction to Safety & Health Management

Knowledge, Abilities and Skill

Knowledge: Requires thorough knowledge of the methods, materials, tools and equipment used in custodial care and routine facilities maintenance. Requires a thorough knowledge of the buildings and grounds of the assigned site. Must have a full knowledge of work hazards and safe work techniques, including lifting procedures. Requires knowledge of chemical reactions and proper safety precautions for use.

Abilities: Ability to follow oral and written directions, adhere to safety precautions, and perform duties in a timely manner. Ability to adhere to safety precautions and perform duties in a timely, safe, and efficient manner. Ability to understand and follow oral and written instructions. Ability to work well with the public. Ability to take initiative to complete work assignments.

Skills: Proficient skill in operating department equipment safely. Proficient oral communication skills.

Physical and Mental Requirements

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the position's essential functions.

Physical Demands: Work requires some agility and physical strength such as, lifting heavy objects, carrying the object(s). In addition, pulling, pushing, standing or walking for the full work day may also be involved. There also may be a need for the employee to twist, kneel, crouch, stretch, and reach to retrieve materials or equipment. Usually, the work will require extended physical effort over a significant portion of the work day that includes continuous walking, standing and climbing.

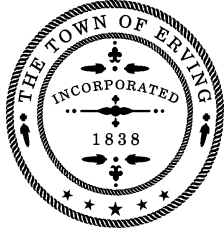
Motor Skills: Duties may involve assignments requiring application of hand and eye coordination with finger dexterity and motor coordination. Examples may include operating a personal computer, using power or hand tools, cleaning equipment, or climbing a ladder.

Senior Custodian
Erving, MA

**Town of Erving, Massachusetts
Job Description**

Visual Demands: Visual demands require the employee to read documents and cleaning equipment and chemical instructions for general understanding.

DRAFT



TOWN OF ERVING

SELECT BOARD

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Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

September 30, 2022

To: Select Board

From: Bryan Smith, Town Administrator

RE: Proposed Town Planner Position & Recommendation

In 2019, the Select Board supported my request to establish a position to support the planning initiatives and special projects being worked on in our office. This position was new to the Town and there was some uncertainty as to the future of the position at the time so there was an intention of revisiting the work for a review in approximately 2 years to see what had been accomplished and where the position should head. A great deal has occurred in the past 2+ years and while navigating some unexpected external matters, the Town has made great strides on many capital and special initiatives. In meeting with Mariah to review the position I have reflected on the work completed to date as well as on what I believe the Town as an organization and some residents and business owners have come to expect. After careful consideration, I would request the Select Board to consider adopting a new position description for a Town Planner as a department head position, grade F. Enclosed for your review is a proposed draft Town Planner position description.

If the Select Board was to approve this position, I respectfully request that Mariah Kurtz is promoted to the position. While there are some additional responsibilities that Mariah would have to learn on the job, I believe Mariah has demonstrated an ability to meet most challenges head on and to rise the occasion. I have watched Mariah's ability to represent the Town on our behalf at meetings with our State legislative delegation, MassDOT, MassDCR, and MassDEP. She is well researched and thoughtful about the fact that she is representing the Town. Mariah's track record with grants has exceeded expectations and without being overly optimistic, I believe we are on the verge of accomplishing some great things in addition to all that has been accomplished to date.

**Town of Erving, Massachusetts
Position Description**

Position Title:	Town Planner	Compensation Schedule:	General Government
Department	Planning	Level:	F
Reports to:	Town Administrator	FLSA Exempt:	No
SB Approved:		Essential:	No

Statement of Duties: Performs routine or semi-routine but detailed or complex administrative duties and support the day-to-day operation of planning, land use, economic development, coordinating both short- and long-range plans, and grant funded activities of the Town of Erving. Oversees the organization, application, development, implementation and management of planning and grant funded projects. Performance of duties requires a thorough knowledge of departmental operations and the exercise of judgement and initiative in completing tasks, particularly in situations not clearly defined by precedent or established procedures. The employee is required to perform all similar or related duties as required.

Supervision Required: Under the general direction of the Town Administrator, performs complex and responsible duties requiring a high level of initiative and independent judgment in the planning, administration and execution of the department’s services, in accordance with applicable Massachusetts General Laws, Town policies, Town bylaws and relevant state, federal and local regulations and standards.

Supervisory Responsibility: Employee may provide direction and supervision to interns, consultants, contractors, and vendors. Will work collaboratively with Town, regional and state boards, agencies, and personnel as required.

Confidentiality: Employee has access to department-related confidential information including Planning Board and Conservation Commission executive session discussions related to pending litigation and/or negotiations, bid proposals and personal information about citizens and developers related to planning programs and proposed developments.

Judgment: Guidelines only provide limited guidance for performing the work. They may be in the form of administrative or organizational policies, general principals, legislation or directives that pertain to a specific department or functional area. Extensive judgment and ingenuity are required to develop new or adapt existing methods and approaches for accomplishing objectives or to deal with new or unusual requirements within the limits of the guidelines or policies.

Complexity: The work consists of functions and processes such as planning, organizing, controlling, coordinating, evaluating, integrating activities.

Work Environment: The work environment involves everyday discomforts typical of offices, with occasional exposure to outside elements. Noise or physical surroundings may be distracting, but conditions are generally not unpleasant.

Public Contact: Duties involve constant contact with local, state and federal government officials, community leaders and any other individuals to protect and promote the municipality's

Town of Erving, Massachusetts
Position Description

overall interest. Employee must possess a high degree of diplomacy and judgment and must be able to work effectively with and influence all types of persons. Duties require a well-developed sense of strategy and timing in representing the municipality effectively in critical and important situations that may influence the wellbeing of the municipality.

Accountability: Consequences of errors, missed deadlines or poor judgement could have far reaching effects on the municipality's ability to deliver services and the public's confidence in the town government and can result in monetary loss, legal repercussions, and increased labor/material costs.

Occupational Risk: Duties of the job present little potential for injury. Risk exposure is similar to that found in typical office settings. Employee will be required to work beyond normal business hours in response to emergency situations and to attend evening meetings or other functions.

Essential Functions:

The essential functions or duties listed below are intended only as illustrations of the various type of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related, or a logical assignment to the position.

1. Has a working knowledge of the Town Master Plan, Open Space & Recreation Plan and individual department studies related to their needs and goals.
2. Makes recommendations regarding regulations, policies and procedures involving community planning and development and advises boards, commissions and committees as needed in the planning and economic development areas. The Planner will work on short- and long-term plans as well as business and economic development projects and initiatives.
3. Explores, secures and administers grants for various planning initiatives. Assists with community development grants and projects. Responsible for periodic or intermittent progress reports for each grant or project to the Town Administrator as requested; prepares all mandatory and supplemental or requested reports ensuring compliance with grant requirements.
4. Answers questions and concerns related to projects and/or regulations; ensures that planning processes and land use decisions are transparent and open to the public.
5. Attends various Town board and/or committee meetings as assigned and provides boards, committees, and departments with technical support as necessary. Collaborates with Planning Board and Conservation Commission and consultants on construction developments.
6. Assists with planning studies, including the preparation of maps and graphic materials and the collection of data as needed. Assists in the preparation and maintenance of reports, maps, records, and files in support of departmental operations.

Town of Erving, Massachusetts
Position Description

7. Research and supply necessary and important information as needed in preparation of reports; helps mediate and problem-solve solutions to unanticipated problem that have developed in the field and work with other Town departments, regulatory agencies, contractors, and property owners to correct noted deficiencies.
8. Assists public on general inquiries relating to planning and land use.
9. Facilitates public input on various planning initiatives through public meetings, workshops and other means.
10. Develops fiscal year budget(s) for Planning departments.
11. Serves as the Town's representative for the Franklin Regional Planning Board and the Comprehensive Economic Development Strategy Committee.
12. Maintains professional competence through participation in workshops, seminars and training programs provide by professional organizations.
13. Performs special projects and related responsibilities as initiated and requested. Performs other duties as required.

Minimum Qualifications:

Education and Experience: Baccalaureate degree in a discipline related to planning, grant strategies, or business development; minimum of three to five (3-5) years as a Town Planner or experience in public sector planning; or any equivalent combination of education, training and experience which provides the required knowledge, skills and abilities to perform the essential functions of the job may be considered.

Must demonstrate a track record of substantive level of responsibility with grant applications, planning projects, and project management; must demonstrate skills in the context of formal organizations, specifically municipal organizations and administration including standard budget monitoring practices. Demonstrated ability to communicate complex information and data analysis to various constituency groups.

Preference for demonstrated experience working with ArcGIS.

Special Requirements:

Valid Massachusetts Class D Motor Vehicle Operator License
May be necessary to attend evening or weekend meetings on occasion.

Knowledge, Abilities and Skill

Knowledge: Knowledge of or ability to learn the principles and practices of community development and grants management; and of state and federal laws, regulations, or programs

Town of Erving, Massachusetts
Position Description

related to planning, economic development, and grant management; Thorough understanding of local zoning bylaws and subdivision regulations; Comprehensive knowledge of the various financial requirements of municipal government as well as the State's Procurement Law; Experience with research methods and report writing; Familiarity with grant preparation and administration.

Abilities: Ability to establish and maintain effective working relationships with diverse interest groups and work cooperatively with supervisor, staff, and elected or appointed officials and the general public. Ability to plan, analyze, coordinate projects, consult and offer advice, requires highly effective written and oral communication skills. Must perform all aspects of job responsibilities with honesty and integrity. Strong organizational skills in a multi-task environment required. Ability to plan and work with general supervision or specifically as directed; ability to work on several on-going task and assist to coordinate community economic development, planning and research projects. Ability to keep accurate and detailed records; apply organizational skills efficiently with attention to detail. Ability to meet deadlines and work effectively in high pressure situations. Ability to exercise tact, resourcefulness, sensitivity, and persuasion in dealing with a variety of individuals from a broad socioeconomic and culturally diverse base. Ability to maintain confidentiality of personal and financial information.

Skill: Proficient oral and written communication skills. Effective supervisory and personal computer software skills in support of department operations. Effective budgetary management skills.

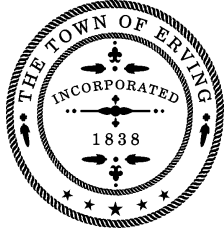
Physical and Mental Requirements

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the position's essential functions.

Physical Skills: Minimal physical effort is required to perform the essential functions of the position. Frequent sitting, talking, walking, and mental concentration for prolonged periods are required; occasionally required to lift and/or move objects or books of up to 20 pounds. Must be able to communicate and be understood clearly, give presentations or participate in other public discourse situations. Position requires the ability to access off-site premises that may not be handicap accessible.

Motor Skills: Duties are largely mental rather than physical, but the job may occasionally require the application of basic motor skills to perform activities such as operating a motor vehicle, moving objects, operating a telephone system, computer and/or most other office equipment, keyboarding and/or word processing. The employee is frequently required to reach with hands and arms and sit and talk and hear for extended periods of time.

Visual Skills: Visual demands require the employee to regularly read documents for general understanding and analytical purposes. The employee may be required to determine color differences.



TOWN OF ERVING

SELECT BOARD

12 East Main Street
ERVING, MASSACHUSETTS 01344

Tel. 413-422-2800
Fax 413-422-2808
Email: administrator@erving-ma.gov

Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

October 3, 2022

To: Select Board
From: Bryan Smith, Town Administrator
CC: Glenn McCrory, Highway Superintendent

RE: Paving Contract Proposed Change Orders

The Town has been working to complete several capital projects, some of which involve paving services. Glenn McCrory, Highway Superintendent, and I am requesting that the Board consider the approval for changes orders for the identified contracts for the identified scope of work. Proposed change orders are attached.

Proposed Change Order for Proejct 20220824- Mountain Road & Cemtery Bituminous Patch & Crub Project Contract

Contractor: Johnson Asphalt Paving, LLC

Change Order # 1

Total: \$3,610.00

Scope: Patch asphalt section for culvert repair on Mountain Raod

Proposed Funding Source: Highway Road Repair/ Improvement Special Article

Proposed Change Order for Proejct 20220824- Poplar Mountain Conservation Area Parking Lot Project Contract

Contractor: Johnson Asphalt Paving, LLC

Change Order # 1

Total: \$6,350.00

Scope: Install 8" asphalt berm, grade site, 2.5" binder asphalt and 1.5" top coat asphalt for restoration of fire lane at Riverfront Park.

Proposed Funding Source: Arch Street Force Sewer Main Replacement Project



Johnson Asphalt Paving, LLC

P O Box 981
Northfield, MA 01360
Phone: (413) 225-3227
Fax: (413) 225-3265

info@johnsonpavingllc.com
www.johnsonpavingllc.com

Town of Erving
Attn: Bryan Smith
12 East Main Street
Erving, MA 01344

Date: Sept 30, 2022

bryan.smith@erving-ma.org
413-422-2800 ext 1102

Project: Mountain Road & Cemetery Patch & Curb Project

Change Order 1

Patch Road Crossing

\$ 3,610.00

ACCEPTED:

The above prices, specifications and conditions are satisfactory and are hereby accepted.

Customer _____

Signature _____

Date of Acceptance _____

CONFIRMED:

Johnson Asphalt Paving, LLC

Authorized Signature:

Glenn C. Johnson, Jr.

Title: Member Date: Sept. 30, 2022



Johnson Asphalt Paving, LLC

P O Box 981
Northfield, MA 01360
Phone: (413) 225-3227
Fax: (413) 225-3265

info@johnsonpavingllc.com
www.johnsonpavingllc.com

Town of Erving
Attn: Bryan Smith
12 East Main Street
Erving, MA 01344

Date: Sept 30, 2022

bryan.smith@erving-ma.org
413-422-2800 ext 1102

Project: Old State Road & Usher Plant

Change Order 1

Usher Plant Roadway
Grade with gravel
2-1/2" of 3/4" binder asphalt
8" standard berm
1-1/2" of 3/8" top asphalt
Gravel parking area

\$ 6,350.00

ACCEPTED:

The above prices, specifications and conditions are satisfactory and are hereby accepted.

Customer _____
Signature _____
Date of Acceptance _____

CONFIRMED:

Johnson Asphalt Paving, LLC

Authorized Signature:
Glenn C. Johnson, Jr.
Title: Member Date: Sept. 30, 2022

ERVING, MASSACHUSETTS

Fire-Rescue

10 East Main Street, Erving, Ma 01344

Office (413) 422-2800 Ext 1221

Fax (413) 423-3859



Chief Philip Wonkka

Selectboard Members

FY2022 EMPG grant

September 26, 2022

Honorable Board,

I am respectfully requesting that we as a community use the Fiscal Year 2022 EMPG grant in concert with the City of Greenfield to facilitate the purchase of a new drone for the program that Greenfield has up and running. We have utilized this equipment in the past for an array of different requests from searches along the river, locating brush fires in the wooded areas of town, auto accidents, and storm damage assessments. The program that Greenfield has been very supportive to requests for services in the past. Greenfield is requesting a regional approach of sharing the EMPG grant with several communities to assist in the purchase of an all-weather drone that has the capability to fly missions during inclement weather up to 55 MPH winds and driving rain. A capability the current drones do have. Supporting this program will allow us to utilize a needed asset from a regional stance. Erving will be passing the EMPG grant allotment over to Greenfield and will not have to manage the grant paperwork. I would ask that the Board support the utilization of the FY2022 grant to support this program. In the past we have had a use for the drone during inclement weather event but have not been able to fly due to the weather conditions, this new purchase will allow the deployment during more hostile conditions saving manpower and time during events.

Respectively

Chief Wonkka, Philip



TOWN OF ERVING

12 Main Street
Erving, Massachusetts 01344
Telephone: (413) 422-2800
Facsimile: (413) 422-2808
Email: administrator@erving-ma.gov

ADM-111

Policy

No-Smoking Policy

Approved: _____ Date: _____
Select Board Chair, Jacob A. Smith

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.01 Issue Date / Effective Date

This policy is issued and effective on _____

This policy supersedes the Smoking Policy previously issued on November 23, 2015.

.02 Purpose

In order to comply with the Massachusetts General Laws and their prohibition against smoking in public places, it is the policy of the Town of Erving that smoking is prohibited in all Town-owned public buildings, Town vehicles, and within fifty (50) feet of the entrance of any Town-owned public building.

.03 Posting & Signage

“No Smoking” notices are posted throughout all buildings in clearly visible locations to emphasize compliance with the “No Smoking” policy. A copy of this policy shall be permanently posted on all bulletin boards in all Town-owned public buildings.

.04 Enforcement

Department Heads are responsible for communicating the “No Smoking” policy to their staff and for enforcing the policy in all areas occupied by their individual departments.

.05 Complaint Procedure

If an individual believes that the “No Smoking” policy is not being enforced in a particular Town department or Town-owned public building, the individual may submit a complaint (preferably, though not required to be, in writing) to the attention of the appropriate Department Head with a copy of the complaint (if submitted in writing) also sent to the Town Administrator. The Department Head shall investigate the complaint and take corrective action, if appropriate.



TOWN OF ERVING

12 Main Street
Erving, Massachusetts 01344
Telephone: (413) 422-2800
Facsimile: (413) 422-2808
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HSP-
Plan

Blood Borne Pathogen Exposure Control Plan Policy

Approved: _____ Date: _____
Select Board Chair, Jacob A. Smith

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.01 Issue Date / Effective Date

This policy is issued and effective on _____

.02 Purpose

Public safety employees can be exposed to blood and body fluids during their job duties. This Exposure Control Plan is designed to protect employees from unprotected exposure.

.03 Program Coordinators

The following personnel are assigned to implement components of the program:

Task	Person Assigned
Coordinate the Bloodborne Pathogen Program	Department Head
Coordinate follow-up medical for employee exposed to blood splash or needlestick; liaison with source patients to obtain permission for testing	Department Head and Town Administrator
Coordinate sharps disposal	Department Head
Purchase gloves, disinfectant, sharps containers	Department Head
Coordinate Hepatitis-B vaccine	Department Head and Town Administrator
Coordinate new hire and annual training	Department Head and Town Administrator

.04 Definitions

The following definitions are used to implement this program.

- **Blood includes:** Human blood. Animal blood is not included.
- **Bloodborne Body Fluids include:** amniotic fluid, semen, vaginal fluids, and fluids that surround body organs. Human Bites: Saliva can be infectious for Hepatitis-B/C.
- **Bloodborne Body Fluids do NOT include:** urine, feces, vomit, tears, and sweat.
(NOTE: urine, vomit and feces can be infectious for bacteria and viruses that can cause diarrhea, flu, and other disease. However, they are not considered by OSHA to be bloodborne carriers (HIV, Hepatitis-B, Hepatitis-C.)

.05 Exposure Determination

The following public safety employees may have potential exposure to blood, or other potentially infectious materials.

Department	Tasks with potential exposure to blood
Police Department	<ul style="list-style-type: none"> - Accident first responder - Crime scene with blood - Injured resident or suspect - Handling syringes used by the public - Handling evidence which is contaminated with blood - Baby delivery – amniotic fluid; blood - Cleaning detention cells: vomit/feces/fluids - First aid
Fire Department	<ul style="list-style-type: none"> - Accident first responder - Handling syringes used by the public - Baby delivery – amniotic fluid; blood - First aid
Emergency Medical Services	<ul style="list-style-type: none"> - Accident first responder - Crime scene with blood - Handling syringes used by the public - Handling syringes used by EMS - Baby delivery – amniotic fluid; blood - Cleaning interior of ambulance - First aid
Public Works	<ul style="list-style-type: none"> - Handling syringes used by the public - First aid

	<ul style="list-style-type: none"> - Accident first responder - Bodily fluid cleanup in Town Buildings
--	--

.06 Universal Precautions

To protect department employees, all blood and body fluid is considered to be infectious, regardless of the perceived or known health status of the student(s) or staff that is being assisted. At this department, Universal Precautions are used:

- **Universal precautions:** All blood is considered infectious for bloodborne pathogens, regardless of the source student or staff. NOTE: a department may elect to use Standard Precautions, which is stricter than Universal Precautions to include blood, body fluids, vomit, and feces.
- **Vomit, Urine, Feces, Spit:** these materials are not considered bloodborne pathogens under the OSHA standard, unless blood is visible in these materials. However, gloves and disinfectants will be used to prevent the spread of bacteria and viruses that could be present (i.e. Flu).

.07 Work Practices

The following work practices will be followed to prevent unprotected exposure to blood or body fluids:

Accident Event

- Don gloves.
- Protect eyes with goggles if a blood splash is expected.
- Wash hands as soon as possible after gloves are removed. Antiseptic gel can be used if water and soap is not available.
- Remove and replace clothing that has become soiled with blood.

Activity with a person who is bleeding:

- Don healthcare gloves.

CPR activities:

- A resuscitation mask with one-way valve or Bag Valve Mask Device (BVMD) should be used.

Evidence

- Syringes, needles and other sharps that are required for evidence should be stored in a hard-shell plastic container such that subsequent persons handling the evidence cannot receive a puncture or needlestick.
- Blood contaminated items can be allowed to dry and processed as evidence. The exterior of the bag should be labeled with a biohazard warning.

EMS activities:

- Retractable and self-locking sharps will be purchased for medication
- administration, including blood sugar lancets, syringes, and IV stylets.
- All medical sharps will be disposed immediately into a medical Sharps Disposal Container.
- No one-handed recapping of used needles is permitted.
- No removal of needle from a syringe is permitted. Dispose entire syringe immediately.
- Used Epi-pens will be retracted into their housing so that the needle is not exposed.
- Disinfect surfaces with a disinfectant labeled for effectiveness against HIV, Hepatitis-B and TB.

First Aid Event:

- Guide injured person to a safe area.
- Use healthcare gloves.
- Encourage self-administration of first aid: Whenever possible, public safety employee should guide the injured person to apply the ice pack, bandaids, and gauze themselves.
- Use a compress as a barrier to prevent employee contact with blood.
- First Aid providers should don gloves as soon as possible.
- First Aid providers should wash hands as soon as possible after the event is over.

Blood Spill or disinfection of dried blood on surfaces:

- Use gloves.
- Disposable towels may be used to remove initial visible debris.
- Dispose in plastic trash bag or rinse down a sewage drain.
- Spray disinfectant on visible debris.
- Disinfect surfaces with a disinfectant labeled for effectiveness against
 - HIV, Hepatitis-B and TB. Prepare this disinfectant according to label and manufacturer instructions.
- Use paper towels again to remove residue.
- Spray surface again with disinfectant.
- Wait the minutes specified on product label, and wipe with disposable towels.
- Dispose paper towels or rags into a sealed plastic bag and dispose in dumpster as soon as possible.

Large Blood Spill:

- Use waterproof utility gloves.
- Don splash-proof goggles if spatter will be possible.
- Rinse as much blood and fluids down a drain, if possible.
- Disinfect surfaces with a disinfectant labeled for effectiveness against
 - HIV, Hepatitis-B and TB. Prepare this disinfectant according to label and manufacturer instructions.
- If a bleach solution will be used, do not use full-strength. Use 1 part bleach to 10 parts water. Area should be well ventilated.
- Disposable towels or a wet-vac may be used to remove initial visible debris.
- Dispose paper towels in a plastic trash bag; empty wet-vac into a custodial floor drain that is connected to sewage system.
- Spray disinfectant on visible debris.
- Use paper towels again to remove residue.
- Spray surface again with disinfectant.
- Wait the minutes specified on product label to allow disinfectant to work and wipe dry with disposable towels.
- Dispose paper towels or rags into a sealed plastic bag and dispose in dumpster as soon as possible.
- Rinse mops handles and wet-vac with disinfectant.
- Remove gloves. Wash hands immediately.

Cleaning Feces/Vomit in Jail Cells

Note: Feces and Vomit are not considered Bloodborne pathogens unless blood is visible. Feces and Vomit are not known to be contagious for Hepatitis B, or HIV. However, Feces and Vomit can be contagious for the flu, Hepatitis-A, and norovirus. Therefore, these work practices are provided:

- Use waterproof utility gloves.
- Don splash-proof goggles if spatter will be possible.
- Rinse as much blood and fluids down a drain, if possible.
- Disinfect surfaces with a disinfectant labeled for effectiveness against HIV, Hepatitis-B and TB. Prepare this disinfectant according to label and manufacturer instructions.
- If a bleach solution will be used, do not use full-strength. Use 1 part bleach to 10 parts water. Used in a well-ventilated area.
- Disposable towels or a wet-vac may be used to remove initial visible debris.
- Dispose paper towels in a plastic trash bag; empty wet-vac into a custodial floor drain that is connected to sewage system.
- Spray disinfectant on visible debris.
- Use paper towels again to remove residue.
- Spray surface again with disinfectant.
- Wait the minutes specified on product label to allow disinfectant to work and wipe dry with disposable towels.
- Dispose paper towels or rags into a sealed plastic bag and dispose in dumpster as soon as possible.
- Rinse mops handles and wet-vac with disinfectant.
- Remove gloves. Wash hands immediately.

Handwashing:

- Handwashing is required after removal of gloves, even if the glove is not contaminated.
- If soap and water are not immediately available, then antiseptic alcohol gel should be used.
- Alcohol gel is not required if handwashing with soap and water is conducted.

.08 Personal Protective Equipment

Personal Protective Equipment is selected based on the potential for exposure to blood or body fluids during a particular task. For that reason, different gloves may be selected for different tasks. Personal protective equipment must be provided free of charge.

Task	Personal Protective Equipment
Possibility of direct hand contact with blood or contact with a bleeding person	Healthcare gloves
CPR	Healthcare gloves CPR mask
Picking up discarded syringes	Puncture-resistant gloves
Crime scene with extensive amounts of blood	Healthcare gloves Goggles Poly-coated tyvek coverall or similar Poly-coated tyvek booties or similar
Possibility of splash to face	Disposable face mask; Goggles or full-face shield
Possibility of spattering to worker's clothing	Healthcare coverall
Crime scene with extensive amounts of blood	Healthcare gloves Goggles Poly-coated tyvek coverall Poly-coated tyvek booties
Disinfecting interior of ambulance	Healthcare gloves

Disinfecting jail cell; Cleaning blood spills Cleaning feces/vomit from jail cells	Waterproof utility gloves Goggles
--	--------------------------------------

Disposable gloves should be replaced as soon as practical when they become contaminated or as soon as feasible if they are torn, punctured, or when their ability to function as a barrier is compromised. Typically, used gloves may be placed in regular trash. In circumstances where gloves are soaked and dripping with blood, the gloves should be placed in a leak-proof plastic bag with a biohazard label.

Utility gloves may be decontaminated for re-use provided that the integrity of the glove is not compromised. Clean with soap and water before storage. Store in a dry place at room temperature.

.09 Compliance Methods: Disinfection

Decontamination of surfaces and equipment will be done as soon as possible after contact with blood or body fluids.

The product selected should have a product label which shows that the product has been tested against HIV, Hepatitis B and TB. Prepare this disinfectant according to label and manufacturer instructions.

Bleach is not the best choice for disinfecting ambulances, electronic equipment, and other surfaces that can be corroded by bleach. Choose a commercial product labeled for HIV, Hepatitis B and TB.

If Bleach is selected due to cost, the following recipe is recommended by the CDC. Do NOT use bleach full strength out of the bottle – it can cause respiratory and eye irritation. Prepare a solution of 600 parts per million of bleach. Prepare the bleach solution on the same day that you use it.

Recipe for 600 ppm Bleach	
Bleach (household, 6%)	Water
2 teaspoon	1 Quart
3 tablespoon	1 gallon
$\frac{3}{4}$ cup	5-gallon spray container

.10 Regulated Waste

Regulated waste will be disposed of in accordance with the MA Department of Public Health Regulation 105 CMR 480.000 (Storage and Disposal of Infectious or Physically Dangerous Medical or Biological Waste) in addition to the OSHA standard on bloodborne pathogens.

The following materials must be disposed in a Sharps Disposal Container:

- Syringes
- Lancets
- IV stylets
- Epi pens
- Suture needles
- Used razors

The following materials can be disposed in regular trash:

- Paper towels, rags that are contaminated with blood, but blood cannot be squeezed out of the fabric.
- Used band-aids and gauze when blood cannot be squeezed out of fabric
- Feminine hygiene products

The following materials should be disposed in a plastic “red bag” that is labeled as medical waste:

- Paper towels, rags that are contaminated with copious amounts of blood in which blood is dripping out of the fabric.
- Used gloves when blood is dripping out of fabric.

.11 Laundry

Clothing that is contaminated with blood may be laundered. If laundry is sent off site to a third party, inform them that the clothing is contaminated with blood.

- Placed contaminated laundry into a plastic bag, label as contaminated.
- Put laundry into washing machine, directly out of the plastic bag without sorting. Don healthcare gloves (neoprene, nitrile) to put clothing into the machine.
- Use hot water wash,
- Add ¼ cup bleach using machine instructions.

.12 Hepatitis B Vaccine

The Hepatitis-B vaccine is very effective in preventing transmission of the Hepatitis-B virus. Department personnel should be vaccinated as follows, depending upon their potential exposure to blood and body fluids:

The Hepatitis-B Vaccine should be offered to personnel who have potential exposure to blood or infectious body fluids:

Staff	Hepatitis B Vaccine
Police/ Fire /EMS/ Public Works who perform tasks with potential exposure to blood or body fluids	Offer Hepatitis-B within 10 days of assignment

The vaccine administered in accordance with health care provide guidance.

Employees who decline the vaccine will sign a waiver which uses the wording in Appendix A of the OSHA Standard (see attached Appendix A). Persons who have previously received the vaccine should decline the vaccine – a new vaccine series is not required if an employee changes location of employment.

Employees who initially decline the vaccine but who later wish to have it may then have the vaccine provided at no cost.

.13 Post-exposure Evaluation and Follow-up

Needlestick or Blood-Exposure Follow-up should be provided within 24 hours.

Report needlestick or blood exposure immediately to your immediate supervisor.

Employees who experience an “Exposure Incident” should be sent to the following healthcare provider within the first 24 hours.

The Town encourages employees to use the nearest and best health care facility that is preferred by the employee. Because of proximity, the Town suggests emergency medical care can be sought at:

Bay State Franklin Medical Center
164 High Street
Greenfield, MA 01301

Police & Fire personnel will complete injury on duty (IOD) forms (Appendix B). Public Works employees will complete supervisors report of incident form (Appendix C). All employees will complete Massachusetts Department of Public Health Unprotected Exposure Form (Appendix D).

Immediate medical attention is required after an “Exposure Incident.” An exposure incident includes:

- Needlestick with a used syringe;
- Laceration or puncture with a medical instrument that has been used on a patient (i.e., suture needle, dental instruments);
- Splash to your eyes, nose or mouth;
- Splash to non-intact skin;
- Human bite that has broken your skin.

If you experience an Exposure Incident, get medical treatment within the first 24 hours. Studies have shown that receiving medical treatment for a needlestick within the first 24 hours is able to prevent transmission of HIV and Hepatitis.

Employees may not decline going to a healthcare provider for evaluation. (The employee may decline the advice or treatment offered by a healthcare provider, but they must obtain the evaluation.) The medical exam is confidential – the employer should not receive medical test results or other medical information regarding the employee.

Instructions after a Needlestick:

- Discard the syringe into the Sharps Disposal Container.
- Do not bring the syringe to the doctor – the blood in the syringe is not tested for HIV or Hepatitis.
- Wash the puncture area with soap and water.
- Do not disinfect your skin with bleach or disinfectant – this can damage the skin and make transmission of Hepatitis or HIV easier.
- Be prepared to tell the healthcare provider about:
 - Location of puncture on your skin
 - How deep the puncture/laceration
 - Whether or not there was visible blood inside the syringe tube
 - Whether or not there was visible blood on the needle

Source Testing:

When the identity of the source person is known, he or she may be contacted to inform them that a public safety employee was exposed to the person’s blood, and request consent for the person to obtain testing for HIV, Hepatitis B and Hepatitis C. The results are not released to the public safety department – the results should be maintained privately between the source person’s healthcare provider, the source person, and the exposed employee. If consent is not obtained from the source of the exposure, it shall be documented that consent cannot be obtained.

.14 Training

Training for all employees who are reasonably anticipated to have occupational exposure to blood and OPIM will be conducted prior to the initial assignment and annually. Training records will be maintained for three years from the date on which the training occurred.

Training will include:

- The OSHA Bloodborne Pathogens Standard
- Symptoms and transmission of bloodborne diseases
- The employer's exposure control plan, i.e., points of the plan, lines of responsibility, how the plan will be implemented, etc.
- Control measures
- Personal protective equipment available in this department and an explanation of the basis for its selection and use
- Post-exposure follow/up and evaluation
- Hepatitis B vaccine program
- Appendix A to Section 1910.1030:

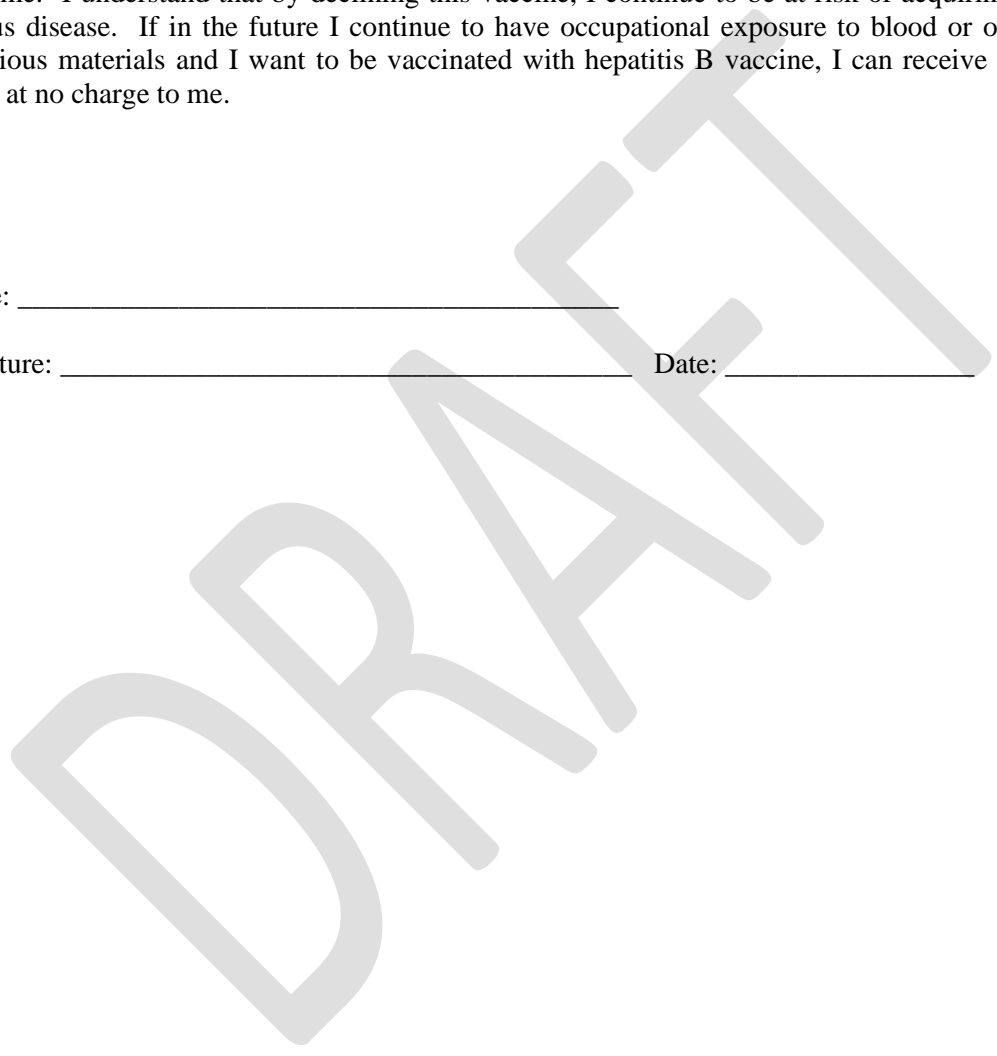
DRAFT

Employee Hepatitis B Vaccine Declination

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Name: _____

Signature: _____ Date: _____



Appendix B Injury on Duty Forms

**Chubb Police and Fire Fighter Accident Program
NOTICE OF CLAIM FORM**

A claim is being filed for: Medical Benefits Disability Benefits Medical and Disability Benefits

Forward Questions/Claims to:

Cabot Risk Strategies LLC
15 Cabot Road
Woburn, MA 01801-1003
Tel. Number 800-222-5963
Fax Number 781-376-9907

Claim Instructions: The Policyholder should: Complete and sign Sections I, III and V.
The Claimant should: Complete and sign Sections II, III and IV.

Section I – Policyholder Information – To be completed by Commanding Officer

Policyholder Name		Policyholder Number	
Policyholder Address		Commanding Officer Phone Number	
Claimant (Injured Party) Name		Claimant Date of Birth	Claimant Social Security Number
Claimant Insured Person Status <input type="checkbox"/> On-Call Volunteer <input type="checkbox"/> Junior Officers <input type="checkbox"/> Auxiliary <input type="checkbox"/> Career Police <input type="checkbox"/> Career Fire Fighter			
Claimant Address (Street, City, State and Zip Code)		Claimant Phone Number	
Date of Accident (mm/dd/yyyy)	Time of Accident hh:mm	<input type="checkbox"/> AM <input type="checkbox"/> PM	Place of Accident
Complete description of Accident			
Indicate injured body part(s)			
Nature of sickness (if applicable)		Date sickness first commenced	
Note – Please also include a copy of the Incident Report, if available.			
Policyholder Certification Signature Required: I hereby certify the claimant is a member of the group insured under the above Policy and the injury/sickness was sustained under adequate supervision while participating in an official Covered Activity.			
_____		_____	
Title of Commanding Officer		Signature of Commanding Officer	
_____		_____	
Date		Date	

Section II – Claimant Information – To be completed by Claimant

If filing a claim for Medical Benefits: Submit itemized medical bills to address referenced above and sign the Claimant Certification statement listed below.

Claimant Certification Signature Required:
I hereby certify the above information to be true and accurate to the best of my knowledge.

Signature of Claimant

Date

Section II – (Continued) Claimant Information

[If filing a claim for Disability Benefits: Fully complete all items in this section and submit to address referenced on page 1.]

Normal Occupation		Normal Occupation Work Hours		Name of Normal Occupation Employer	
Address of Normal Occupation Employer			Contact Phone Number		Contact Fax Number
Contact Name for Normal Occupation Employer			Exact duties unable to perform – Normal occupation		
Date last worked Normal Occupation Employer			Date returned to work – Normal Occupation Employer _____ <input type="checkbox"/> Full Duty <input type="checkbox"/> Light Duty		
Verification of Earnings (Submit Normal Occupation pay stubs for the last 3 months. If self-employed, send copy of your prior year's tax return)					
Attending Physician's Name			Attending Physician's Address		
Attending Physician's Phone Number			Attending Physician's Fax Number		
Do you have <u>disability</u> (loss of wages) coverage through? (Check all that apply) <input type="checkbox"/> Regular Occupation Policy <input type="checkbox"/> Workers' Compensation <input type="checkbox"/> Other _____					
<i>Claimant Certification Signature Required:</i> I hereby certify the above information to be true and accurate to the best of my knowledge.					
_____ Signature of Claimant			_____ Date		

Section III – Fraud Warning Statement – To be signed by Policyholder and Claimant (Based on State of residence)

For residents of Alaska, Arizona, Arkansas, Colorado, Connecticut, Delaware, D.C., Florida, Georgia, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Washington, West Virginia and Wisconsin: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects such person to criminal and civil penalties.

For residents of Alabama, Hawaii, Oregon, Vermont, Virginia, and Wyoming: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information or conceals for the purpose of misleading, information concerning any fact material is subject to a denial and/or reduction insurance benefits and may be subject to any civil penalties available.

For residents of California, California law requires the following: Any person who knowingly presents false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

For residents of New York: Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

I hereby certify the foregoing statements made by me on this form to be true to the best of my knowledge. I am aware that if any of the foregoing statements on this form made by me are willfully false, I may be subject to penalties, which may include criminal prosecution.

_____ Signature of Policyholder (Commanding Officer)	_____ Date
_____ Signature of Claimant	_____ Date

Section IV – Medical Records Release

Cabot Risk Strategies LLC
15 Cabot Road
Woburn, MA 01801-1003
Tel. Number 800-222-5963
Fax Number 781-376-9907

MEDICAL RECORDS RELEASE

DATE OF INJURY _____

NATURE OF INJURY _____

I hereby authorize any hospital, physician or other person who has attended me to furnish to Cabot Risk Strategies LLC and Chubb Group of Insurance Companies all information with respect to this illness or injury and the resulting hospital or medical records, consultations, treatments or prescriptions. A copy of this authorization shall be considered as effective and valid as the original.

Name (Print)

Signature

Date

Section V – Wage and Salary Verification

Cabot Risk Strategies LLC
 15 Cabot Road
 Woburn, MA 01801-1003
 Tel. Number 800-222-5963
 Fax Number 781-376-9907

WAGE AND SALARY VERIFICATION

Date	Our Policyholder	Date of Injury	Claim Number
------	------------------	----------------	--------------

EMPLOYER'S NAME AND ADDRESS

EMPLOYEE'S NAME AND ADDRESS
Social Security No.:

Thank you for your cooperation.

1.	OCCUPATION:
2.	DATES OF EMPLOYMENT: From _____ through _____
3.	Gross Earnings during 52-week period <i>PRIOR</i> to Accident: \$ _____
4.	Wage or salary as of date of Accident: a) \$ _____ <input type="checkbox"/> Per Week <input type="checkbox"/> Per Month b) Usual number of days worked per week: _____
5.	Dates Absent Following Accident: a) Date Disability began: _____ b) Date returned to work: _____
6.	Was Employee paid during this absence: <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, amount paid: \$ _____
7.	Is Employee entitled to benefits under a wage or salary continuation plan? <input type="checkbox"/> YES <input type="checkbox"/> NO a) If YES, amount paid or available: \$ _____ <input type="checkbox"/> PER WEEK <input type="checkbox"/> PER MONTH b) If Yes, Are cash or traditional retirement credits reduced under your plan by amount of benefits paid?
8.	Is Employee eligible for any individual/group health insurance/HMO/other benefits? <input type="checkbox"/> YES <input type="checkbox"/> NO
Date: _____ Print Name & Title: _____	
Telephone No.: _____	
Signature _____	

Appendix C Supervisors Report of Accident – Intake Form

SUPERVISOR’S REPORT OF ACCIDENT- INTAKE FORM

DATE OF INJURY: _____ TIME OF INJURY _____ ACKNOWLEDGE/DATE REPORTED _____

DESCRIPTION OF ACCIDENT; WHAT WAS EMPLOYEE DOING? WHAT HAPPENED? WHY?

CAUSE: _____ INJURY: _____
BODY PART: _____ OCCUPATION: _____

EMPLOYEE NAME _____ SOCIAL SECURITY # _____
SEX(M or F) _____ MARITAL STATUS _____ DATE OF BIRTH _____
DATE OF HIRE _____ DEPARTMENT _____
SUPERVISOR NAME _____ PHONE NUMBER _____

EMPLOYEE ADDRESS _____
TELEPHONE NUMBER: HOME _____ WORK _____
CELL _____ EMAIL _____

LOCATION ACCIDENT OCCURRED _____ INJURED ON PREMISE? YES NO
AVERAGE WEEKLY WAGE _____ DID EMPLOYEE LOSE TIME FROM WORK? YES NO
NUMBER OF DEPENDENTS _____

DID EMPLOYEE RETURN TO WORK YES NO IF YES, DATE RETURN TO WORK: _____
IF NO, LAST DAY WORK _____ 1ST DAY OF DISABILITY _____ 5TH DAY OF DISABILITY _____

WAS MEDICAL TREATMENT SOUGHT? YES NO
MEDICAL FACILITY _____

DATE REPORTED A WORK RELATED: _____ WITNESS _____
TO WHOM WAS INJURY REPORTED TO _____

*******Supervisor’s Complete Below*******

CAUSE-UNSAFE ACT OR CONDITION; OBJECT/SUBSTANCE CAUSING INJURY

WAS EMPLOYEE WEARING SAFETY GEAR? YES NO
IF NO, EXPLAIN: _____

ACTION TAKEN TO PREVENT SIMILAR ACCIDENTS

REMARKS _____

Investigated By _____ Date _____
Reviewed By _____ Date _____

Appendix D Massachusetts Department of Public Health Unprotected Exposure Form



**MASSACHUSETTS
DEPARTMENT OF PUBLIC HEALTH
(DO NOT SEND THE ORIGINAL FORM OR A COPY TO THE DEPARTMENT OF PUBLIC HEALTH)**

UNPROTECTED EXPOSURE FORM

(Please print or type)

Today's Date / /	Incident Date / /	Receiving Facility
Transporting Ambulance Service		Ambulance Trip Report #
Address		Designated Infection Control Officer (DICO)
Telephone # for DICO		It is recommended the prehospital emergency care agencies <i>type or print</i> in the name <i>and telephone number</i> of the current DICO before <i>blank</i> forms are provided to their personnel.

Patient Information		Rescuer Information	
Name		Name	
Incident Location		Address	
Incident Type <input type="checkbox"/> Medical <input type="checkbox"/> Trauma		City/State/Zip	
Transportation <input type="checkbox"/> Emergency <input type="checkbox"/> Routine		Day Phone	Evening Phone
Check box(es) which best indicate your exposure. <i>Explain in detail in the spaces provided below.</i>		Profession	Department/Employer
Exposure Route: <input type="checkbox"/> Needlestick <input type="checkbox"/> Open cut <input type="checkbox"/> Bite <input type="checkbox"/> Puncture <input type="checkbox"/> Mouth <input type="checkbox"/> Eye <input type="checkbox"/> Other:			
Exposure Type: <input type="checkbox"/> Blood <input type="checkbox"/> Sputum <input type="checkbox"/> Saliva <input type="checkbox"/> Other:			
Precautions: <input type="checkbox"/> Mask <input type="checkbox"/> Eye Wear <input type="checkbox"/> Gown <input type="checkbox"/> Exam gloves <input type="checkbox"/> Gloves <input type="checkbox"/> Other: _____ (latex, nitrile, vinyl) (work type)			
Cleaning <input type="checkbox"/> Hand Washing <input type="checkbox"/> Washing Contaminated Skin <input type="checkbox"/> Other:			

Describe the nature of the unprotected exposure *in detail* (attach additional pages if needed)

Describe the steps taken by the rescuer to minimize the exposure:

You must provide the information on this form to the facility that received the patient from whom you received the exposure. I understand that in the case of certain exposures (e.g. needlestick with a bloody needle) it is crucial for the exposed rescuer to seek immediate medical evaluation for treatment that might reduce the risk of infection. Completion of the Unprotected Exposure Form may be done during or after the medical evaluation.

I further understand that I will be informed of an unprotected exposure, only if the patient is diagnosed as having a bloodborne infectious disease dangerous to the public health, as defined in 105 CMR 172.001 and if, in the view of medical personnel, my documented exposure is capable of transmitting that disease.

Rescuer's Signature: _____ Date: _____

Form Received By: _____ Date: _____

**DO NOT SEND THE ORIGINAL FORM OR A COPY TO THE DEPARTMENT OF PUBLIC HEALTH Rev. 05/26/2004
(Side 1 of 2) (Instructions and Information on Reverse)**

(COPY BOTH SIDES!)

**Massachusetts Department of Public Health
Unprotected Exposure Form**

An Unprotected Exposure Form should be completed for any prehospital emergency care worker (e.g. an EMT, firefighter, police officer, or corrections officer) who believes he/she may have had an unprotected exposure to a patient's blood or *other contaminated* body fluid(s) in the course of attending, assisting or transporting a person to a health care facility as part of his/her professional duties. It is the responsibility of each care provider to complete and file a form with the receiving facility.

If you believe you may have had an unprotected exposure, *you should seek immediate medical evaluation for possible prophylactic immunization and/or treatment, as indicated. You must provide the information on this form to the facility that received the patient from whom you received the exposure.* Ambulance *personnel* or other emergency care providers having an unprotected exposure must complete a form on arrival and leave it at the health care facility with the patient. Other individuals shall file their own forms with the receiving facility within 24 hours of the unprotected exposure.

The health care facility will review the information, which you provide and will determine if you have sustained an unprotected exposure as defined in DPH regulations. If the patient to whom you were exposed is diagnosed as having a bloodborne infectious disease dangerous to the public health, and if you sustained an unprotected exposure which, in the opinion of the health care facility, is capable of transmitting such a disease, the facility shall provide oral notification within forty-eight (48) hours of the diagnosis and written notification within seventy-two (72) hours of the diagnosis. This notice shall be given to the designated infection control officer for your agency who *must* be listed on the unprotected exposure form. Upon notification, the designated infection control officer shall notify you. The notice shall include the appropriate precautions and actions which you should take, the identity of the disease to which you were exposed, necessary precautions to prevent the transmission of the disease to others, and instructions to contact a physician for medical follow-up. **NOTE: The health care facility's determination that you have had an unprotected exposure does NOT necessarily indicate that you have contracted an infectious disease.** The report from the health care facility to the designated infection control officer to you is confidential and is governed by M.G. L. c.111, §111C and DPH regulations 105 CMR 170.000, 171.000 and 172.000.

N.B. – Due to the time it may take to diagnose a patient with an infectious disease, or the possibility that a patient may never be diagnosed, and the time it may take to notify you of the exposure, the Department recommends that anyone who believes they have suffered an unprotected exposure, such as a needlestick with a bloody needle, should see a physician immediately. Certain prophylactic regimens should be started within hours of an unprotected exposure.

INSTRUCTIONS:

PLEASE PRINT CLEARLY

- Complete all information on the form.
- Check all boxes that apply:
 - the exposure route to you of a patient's blood or bodily fluid(s).
 - the type of the patient's bodily fluid(s) to which you were exposed.
 - body substance isolation* precautions you used (even if they were breached).
 - post incident cleaning you performed.
 - if you checked any "Other" box(es), explain in the space(s) *provided*.
- In the blank narrative sections explain fully the exposure and any treatment you have obtained. Use additional blank sheets, if necessary, and staple *them* to the form. The more accurately you explain the circumstances, the easier it will be for the facility personnel to evaluate your exposure.
- EMT's must also leave a copy of the ambulance trip record at the receiving facility.
- Each EMT and other prehospital emergency medical health care *providers who have* sustained an unprotected exposure must file his/her own form. The form(s) shall be submitted to the receiving health care facility upon patient arrival or within 24 hours.
- Transportation or treatment of the patient(s) must not be delayed in order to complete the form(s).
- *Make a copy for your own records and/or for your designated infection control officer, in accordance with your employer's policies and procedures.*

DO NOT SEND THE ORIGINAL FORM OR A COPY TO THE DEPARTMENT OF PUBLIC HEALTH

(Side 2 of 2)

Rev. 05/26/2004








Welling YKBS-140-6-3L MOTOR FOR AIR CONDITIONER
220V 50Hz 140W 0.82A 3.2 P.F. 4500 RPM 105°C
AIR OVER LOAD
Thermal Protection
ROTATION
GUANGDONG WELLING MOTOR MANUFACTURING CO., LTD.

E0108301 Q.C.Pass
20170226
000738 3C35
1100012010242 YKBS-140-6-3L

Surplus Property Disposition Request

Department/Board/Committee <u>Fire</u>	Request Date: <u>9/30/2022</u>
Item(s) to be disposed of: <u>one (1) 2010 Ford F550</u>	
Estimated Value of Item: <u>greater than \$5,000</u>	
Description of Item: <u>See attached fixed asset sheet with item descriptions; including make, model, and serial #</u>	
Reason for Request: <u>See attached request.</u>	
Recommended Disposition: <u>make available for public bidding for highest price</u>	
	<u>9/30/2022</u>

Department Head Signature

Date

Select Board Review

Board Decision:	Approved <input type="checkbox"/> Denied <input type="checkbox"/>
Board Comments:	
Select Board Signatory	Date

Chief Procurement Officer

Method of Disposition:	Under \$10,000	\$10,000 or More
<input type="checkbox"/>	Advertise Newspaper	<input type="checkbox"/> Sealed Bids
<input type="checkbox"/>	Advertise on Website	<input type="checkbox"/> Public Auction
<input type="checkbox"/>	Seek Bids	<input type="checkbox"/> Advertise on Website
<input type="checkbox"/>	Scrap Value	<input type="checkbox"/> Governmental/ Charitable Entity
Date(s) advertised: _____	Other info: _____	
Sold to: _____	\$ Sold for: _____	
Date disposed of: _____	Receipt attached: _____	
Chief Procurement Officer Signature	Date	



ERVING, MASSACHUSETTS

Fire-Rescue

10 East Main Street, Erving, Ma 01344

Office (413) 422-2800 Ext 1221

Fax (413) 423-3859



Chief Philip Wonkka

Excess Highway Department 2013 Ford F-550

June 14, 2022


Honorable Board,

The Fire Department requests that the 2013 F-550 truck that the Highway Department is declaring as excess be transferred to the Fire Department to replace the 2010 F-550 operated by the Fire Department. The bed will be removed from both vehicles. The current flat style bed will be remounted on the 2013 to allow for additional diversity for the fire departments use. The bed and a sander attachment being removed from the 2013 will be declared surplus. The Fire Department is requesting the 2010 F-550 and additional parts be declared excess by the Selectboard and sold or disposed of through the best avenue that the Board determines. All work to be performed by the fire department during assigned working hours and excess property will be stored at 16 Public Works Blvd in the brush dump yard once completed.

Chief Wonkka



Surplus Property Disposition Request

Department/Board/Committee <u>Highway</u>	Request Date: <u>9/30/2022</u>
Item(s) to be disposed of: one (1) Airflo Truck Body (SN: PCM00372)	
Estimated Value of Item: Unknown	
Description of Item: See attached fixed asset sheet with item descriptions; including make, model, and serial #	
Reason for Request: truck body was not able to be used for recently purchased F550 but is still in useable condition	
Recommended Disposition: Bid publicly for highest price	
 Department Head Signature	9/30/2022 Date

Select Board Review

Board Decision:	Approved <input type="checkbox"/> Denied <input type="checkbox"/>
Board Comments:	
Select Board Signatory	Date

Chief Procurement Officer

Method of Disposition:	Under \$10,000	\$10,000 or More
<input type="checkbox"/>	Advertise Newspaper	<input type="checkbox"/> Sealed Bids
<input type="checkbox"/>	Advertise on Website	<input type="checkbox"/> Public Auction
<input type="checkbox"/>	Seek Bids	<input type="checkbox"/> Advertise on Website
<input type="checkbox"/>	Scrap Value	<input type="checkbox"/> Governmental/ Charitable Entity
Date(s) advertised: _____	Other info: _____	
Sold to: _____	\$ Sold for: _____	
Date disposed of: _____	Receipt attached: _____	
Chief Procurement Officer Signature		Date





COMMONWEALTH OF MASSACHUSETTS
TOWN OF ERVING

OFFICE OF THE BOARD OF WATER COMMISSIONERS
Water Commissioners Warrant to the Collector
Water Use Charges **5th Commitment**, Fiscal Year 2023

To: Michele Turner, Tax/Water Collector for the Town of Erving in the County of Franklin

Greetings:

IN THE NAME OF THE COMMONWEALTH OF MASSACHUSETTS, you are hereby required to levy on and collect from the persons named in the water charges list herewith committed to you the amount of the water charges charged to each such person for water usage as therein set forth, with interest, the sum of such list being Forty-one Thousand, Six Hundred Fifty-nine Dollars and Sixty-six Cents (**\$41,659.66**) for water use charges.

Said charges are to be paid to Michele Turner, Town of Erving Tax Collector, or to his/her successor in office, at the times and in the manner provided by General Laws, Chapter 60, Section 2. As Collector, you must provide the Treasurer an account of all charges and fees collected by you. In addition, you are to make written return of said water charges and interest with your water charge list and of your doings thereon at such times as the Water Commissioners shall require.

You are to complete and make up an account of the collection of the whole sum hereon, committed to you, with interest, on or before December 31 of the current year.

The owner of the premises shall be responsible for the payment of all charges for water and service furnished to the property. Under the General Laws of Massachusetts Chapter 40 Section 42A as accepted in Article 7 of the Erving Special Town Meeting June 29, 1992, unpaid water bills become a lien on the property immediately following the due date for such rate or charge and collections will be made by the sale of property. Water bills will be mailed semi-annually. Water bill payment will be due thirty (30) days from the postmarked date of the original bill. Overdue notices will go to property owners and "current occupant" forty-five (45) days after the postmarked date of the original bill. Shut off notices will go to property owners and "current occupant" sixty (60) days after the postmarked date of the original bill. The shut off notice will specify that shut off will occur on or after Monday. Shut off will not occur sooner than seventy-five (75) days from the postmarked date of the original billing. The shut off notice will clearly state the earliest date that shut off can occur. There will be no further notice. Service will be restored as soon as possible, upon payment in full of all amounts due.

The levy and collection of the amounts are hereby committed to you. All interest, charges, and fees as provided by law, also apply. You are to have and to exercise all the powers conferred by the laws of this Commonwealth upon collectors of taxes.

Given under our hands this 3rd day of October 2022.

WATER COMMISSIONERS OF ERVING

Jacob Smith, Chair

William A. Bembury

Scott Bastarache

Commitment Report

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
1	55201759 Water Rate	Usage 0	0	Water \$0.00
RENOVATORS SUPPLY INC	Read Date	Reading Type		Total: \$0.00
RIVER ST	Current Bill 9/29/2022	4,279,200 ACT		
Route 1	Last Billed 10/8/2021	4,279,200 ACT		
2	3352950267 Water Rate	Usage 182,850	182,850	Water \$959.96
RENOVATORS SUPPLY INC	Read Date	Reading Type		Total: \$959.96
RIVER ST	Current Bill 9/15/2022	6,194,100 ACT		
Route 1	Last Billed 3/24/2022	6,011,250 ACT		
4	9951006098 Water Rate	Usage 27,960	27,960	Water \$146.79
KUZMESKUS SCOTT	Read Date	Reading Type		Total: \$146.79
18 RIVER ST	Current Bill 9/29/2022	34,760 ACT		
Route 1	Last Billed 10/8/2021	6,800 ACT		
5	2181940467 Water Rate	Usage 29,950	29,950	Water \$157.24
BASSETT JOSHUA	Read Date	Reading Type		Total: \$157.24
20 RIVER ST	Current Bill 9/15/2022	2,078,400 ACT		
Route 1	Last Billed 3/21/2022	2,048,450 ACT		
6	2181940771 Water Rate	Usage 12,100	12,100	Water \$63.52
TESSIER ANDREW T	Read Date	Reading Type		Total: \$63.52
22 RIVER ST	Current Bill 9/15/2022	953,400 ACT		
Route 1	Last Billed 3/21/2022	941,300 ACT		
7	2236930490 Water Rate	Usage 36,600	36,600	Water \$192.15
KUZMESKUS CRAIG A	Read Date	Reading Type		Total: \$192.15
24 RIVER ST	Current Bill 9/15/2022	1,445,650 ACT		
Route 1	Last Billed 3/21/2022	1,409,050 ACT		
8	1182940111 Water Rate	Usage 33,200	33,200	Water \$174.30
BARTOS KAREN L	Read Date	Reading Type		Total: \$174.30
26 RIVER ST	Current Bill 9/15/2022	1,753,700 ACT		
Route 1	Last Billed 3/21/2022	1,720,500 EST		
9	0042324253 Water Rate	Usage 6,250	6,250	Water \$32.81
NEWTON VIRGINIA	Read Date	Reading Type		Total: \$32.81
28 RIVER ST	Current Bill 9/15/2022	932,950 ACT		
Route 1	Last Billed 3/21/2022	926,700 ACT		
10	1181940447 Water Rate	Usage 10,450	10,450	Water \$54.86
MINER ROBERT H	Read Date	Reading Type		Total: \$54.86
30 RIVER ST	Current Bill 9/15/2022	1,952,700 ACT		
Route 1	Last Billed 3/21/2022	1,942,250 ACT		
11	1119930167 Water Rate	Usage 27,300	27,300	Water \$143.32
BRULE DAVID P	Read Date	Reading Type		Total: \$143.32
32 RIVER ST	Current Bill 9/15/2022	1,136,600 ACT		
Route 1	Last Billed 3/21/2022	1,109,300 ACT		

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
12 TOWN OF ERVING 16 PUBLIC WORKS BLVD Route 1	1065990172 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 84,350 Reading Type 4,710,850 ACT 4,626,500 ACT	84,350 Water Total:	\$442.84 \$442.84
13 STAFFORD CHARLES E 29 RIVER ST Route 1	4124950628 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 26,100 Reading Type 2,074,700 ACT 2,048,600 ACT	26,100 Water Total:	\$137.02 \$137.02
14 HEPBURN KATHLEEN 27 RIVER ST Route 1	4352950359 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 13,850 Reading Type 475,450 ACT 461,600 ACT	13,850 Water Total:	\$72.71 \$72.71
15 POLANA JOHN 23 RIVER ST Route 1	1327991500 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 18,350 Reading Type 628,750 ACT 610,400 ACT	18,350 Water Total:	\$96.34 \$96.34
16 GRADOWSKI STANLEY J JR 21 RIVER ST Route 1	2181940028 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 34,050 Reading Type 3,330,450 ACT 3,296,400 ACT	34,050 Water Total:	\$178.76 \$178.76
17 TOWNE MICHAEL R 4 STRACHAN ST Route 1	2285930408 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/21/2022	Usage 55,550 Reading Type 2,465,600 ACT 2,410,050 EST	55,550 Water Total:	\$291.64 \$291.64
18 NOVAK JOSEPH 3 WARNER ST Route 1	1181940788 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 12,600 Reading Type 331,200 ACT 318,600 ACT	12,600 Water Total:	\$66.15 \$66.15
19 LUCAS ANNA 5 WARNER ST Route 1	2181940457 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 34,950 Reading Type 866,250 ACT 831,300 ACT	34,950 Water Total:	\$183.49 \$183.49
20 CAMPBELL ROBERT L ESTATE 7 WARNER ST Route 1	1327991496 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 6,900 Reading Type 1,123,100 ACT 1,116,200 ACT	6,900 Water Total:	\$36.22 \$36.22
21 KOSLOSKI THOMAS 9 WARNER ST Route 1	3124950559 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 28,700 Reading Type 2,036,100 ACT 2,007,400 ACT	28,700 Water Total:	\$150.68 \$150.68
22 HENDRICKSON LARI JO 11 WARNER ST Route 1	1327991490 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 14,950 Reading Type 1,358,900 ACT 1,343,950 ACT	14,950 Water Total:	\$78.49 \$78.49

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
23 CARNER GEORGE HEIRS/DEVI: 12 WARNER ST Route 1	2181940476 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 2,000 Reading Type 1,278,450 ACT 1,276,450 ACT	2,000 Water Total:	\$10.50 \$10.50
24 WILLIAMS SHERRY A 10 WARNER ST Route 1	2181940452 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/21/2022	Usage 11,200 Reading Type 780,300 ACT 769,100 ACT	11,200 Water Total:	\$58.80 \$58.80
25 COLLETTE JUDI 8 WARNER ST Route 1	1144930033 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/21/2022	Usage 16,700 Reading Type 987,000 ACT 970,300 ACT	16,700 Water Total:	\$87.68 \$87.68
26 WORDEN HILDA 6 WARNER ST Route 1	2182940133 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 10,300 Reading Type 816,000 ACT 805,700 ACT	10,300 Water Total:	\$54.08 \$54.08
27 DEPRETE ROBERT & CYR ANG 4 WARNER ST Route 1	1128920326 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 45,300 Reading Type 2,157,650 ACT 2,112,350 ACT	45,300 Water Total:	\$237.82 \$237.82
28 PEARCE KRISTIN 2 WARNER ST Route 1	1128920310 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 16,250 Reading Type 1,259,500 ACT 1,243,250 ACT	16,250 Water Total:	\$85.31 \$85.31
29 GRIFFIN JERYL 12 STRACHAN ST Route 1	1327991520 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 27,350 Reading Type 547,500 ACT 520,150 ACT	27,350 Water Total:	\$143.59 \$143.59
30 FALCON LORIE 20 STRACHAN ST Route 1	1181940425 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 61,600 Reading Type 2,362,300 ACT 2,300,700 ACT	61,600 Water Total:	\$323.40 \$323.40
31 TERAULT LEON 23 STRACHAN ST Route 1	1119930212 Water Rate Read Date Current Bill 9/26/2022 Last Billed 3/21/2022	Usage 8,300 Reading Type 842,100 ACT 833,800 ACT	8,300 Water Total:	\$43.58 \$43.58
32 BOUCHER JOHN D 27 STRACHAN ST Route 1	3352950277 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 19,750 Reading Type 930,700 ACT 910,950 ACT	19,750 Water Total:	\$103.69 \$103.69
33 NIEDZWIEDZ ROBERT 1 GUNN ST Route 1	2181940796 Water Rate Read Date Current Bill 9/15/2022	Usage 126,450 Reading Type 1,533,200 ACT	126,450 Water Total:	\$663.86 \$663.86

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
	Last Billed 3/21/2022 1,406,750 ACT			
34 MCLELLAN SHAWN M HEIRS/DI 3 GUNN ST Route 1	2181940458 Water Rate Read Date 9/15/2022 Current Bill 824,450 ACT Last Billed 3/21/2022 813,150 ACT	Usage 11,300	11,300 Water	\$59.32 Total: \$59.32
35 FELLOWS FRANK C. 5 GUNN ST Route 1	1323994056 Water Rate Read Date 9/15/2022 Current Bill 688,850 ACT Last Billed 3/21/2022 667,950 ACT	Usage 20,900	20,900 Water	\$109.72 Total: \$109.72
36 REED OVILINA 7 GUNN ST Route 1	2181940445 Water Rate Read Date 9/15/2022 Current Bill 1,261,800 ACT Last Billed 3/21/2022 1,238,700 ACT	Usage 23,100	23,100 Water	\$121.28 Total: \$121.28
37 BERARD ASHLEY 9 GUNN ST Route 1			Water	\$0.00 Total: \$0.00
38 CHAGNON DAVID 11 GUNN ST Route 1	1323993984 Water Rate Read Date 9/15/2022 Current Bill 1,168,000 ACT Last Billed 3/21/2022 1,132,200 ACT	Usage 35,800	35,800 Water	\$187.95 Total: \$187.95
39 GADREAU NICOLE 13 GUNN ST Route 1	4352950544 Water Rate Read Date 9/15/2022 Current Bill 1,116,350 ACT Last Billed 3/21/2022 1,092,200 ACT	Usage 24,150	24,150 Water	\$126.79 Total: \$126.79
40 BUTLER BRUCE D 18 GUNN ST Route 1	1327991489 Water Rate Read Date 9/15/2022 Current Bill 1,058,600 ACT Last Billed 3/21/2022 1,042,200 ACT	Usage 16,400	16,400 Water	\$86.10 Total: \$86.10
41 RODRIGUEZ PEDRO 16 GUNN STREET Route 1	93945891 Water Rate Read Date 9/15/2022 Current Bill 264,550 ACT Last Billed 3/21/2022 241,050 ACT	Usage 23,500	23,500 Water	\$123.38 Total: \$123.38
42 MARTINEAU SCOTT 14 GUNN STREET Route 1	2182940132 Water Rate Read Date 9/15/2022 Current Bill 2,772,300 ACT Last Billed 3/21/2022 2,733,450 ACT	Usage 38,850	38,850 Water	\$203.96 Total: \$203.96
43 HOLBROOK SALLY A 10 GUNN ST Route 1	1323993977 Water Rate Read Date 9/15/2022 Current Bill 1,091,550 ACT Last Billed 3/21/2022 1,081,650 ACT	Usage 9,900	9,900 Water	\$51.98 Total: \$51.98

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
44 RAYMOND DOUGLAS 8 GUNN ST Route 1	1327991516 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 19,750 Reading Type 439,300 EST 419,550 ACT	19,750 Water Total:	\$103.69 \$103.69
45 YVARS-PETRACCIA BRETA 6 GUNN ST Route 1	2182940044 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 24,800 Reading Type 1,710,350 ACT 1,685,550 ACT	24,800 Water Total:	\$130.20 \$130.20
46 BUSHEE JOSEPH J 2 GUNN ST Route 1	0087474123 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 23,900 Reading Type 592,200 ACT 568,300 ACT	23,900 Water Total:	\$125.48 \$125.48
48 CUMMINGS KEVIN 9 LESTER ST Route 1	1181940731 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 33,050 Reading Type 1,882,400 ACT 1,849,350 ACT	33,050 Water Total:	\$173.51 \$173.51
49 CALCARI MATTHEW 11 LESTER ST Route 1	3317950061 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 82,000 Reading Type 4,332,750 ACT 4,250,750 ACT	82,000 Water Total:	\$430.50 \$430.50
50 SEYMOUR CATHERINE 21 LESTER ST Route 1			Water Total:	\$0.00 \$0.00
51 SMITH WILLIAM A 2 PRATT ST Route 1	4352950354 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 6,700 Reading Type 966,900 ACT 960,200 ACT	6,700 Water Total:	\$35.18 \$35.18
52 PIERCE MICHAEL 4 PRATT ST Route 1	1327991525 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 27,900 Reading Type 843,050 ACT 815,150 ACT	27,900 Water Total:	\$146.48 \$146.48
53 PORLIER GARY K 6 PRATT ST Route 1	2181940484 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 30,050 Reading Type 1,398,250 ACT 1,368,200 ACT	30,050 Water Total:	\$157.76 \$157.76
54 PEARSON KURT M 8 PRATT ST Route 1	0078034382 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 4,550 Reading Type 169,800 ACT 165,250 ACT	4,550 Water Total:	\$23.89 \$23.89
55 ANDERSON CARL 10 PRATT ST Route 1	2181940106 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 18,700 Reading Type 535,650 ACT 516,950 ACT	18,700 Water Total:	\$98.18 \$98.18

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
56 BASTARACHE SCOTT M 14 PRATT ST Route 1	7103122034 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 183,200 477,200 ACT 294,000 ACT	183,200 Water Total:	\$961.80 \$961.80
57 MAILLOUX DONALD J 16 PRATT ST Route 1	3352950265 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 29,400 2,409,800 ACT 2,380,400 ACT	29,400 Water Total:	\$154.35 \$154.35
58 BENEGAN 2 LLC 18 PRATT ST Route 1	2181940793 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 60,560 5,348,840 ACT 5,288,280 ACT	60,560 Water Total:	\$317.94 \$317.94
59 BENEGAN 2 LLC 20 PRATT ST Route 1	36713259 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 35,600 87,250 ACT 51,650 ACT	35,600 Water Total:	\$186.90 \$186.90
60 LIVELY JERE M 22 PRATT ST Route 1	4352950333 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 12,650 811,550 ACT 798,900 ACT	12,650 Water Total:	\$66.41 \$66.41
61 ROBINSON ANITA 21 PRATT ST Route 1	67057364 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 8,700 76,400 ACT 67,700 ACT	8,700 Water Total:	\$45.68 \$45.68
62 HARRINGTON ANNE LIFE ESTA 19 PRATT ST Route 1	2181940792 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 18,950 1,111,350 ACT 1,092,400 ACT	18,950 Water Total:	\$99.49 \$99.49
63 TAFT THERESA 15 PRATT ST Route 1	2181940494 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 12,650 949,150 ACT 936,500 ACT	12,650 Water Total:	\$66.41 \$66.41
64 RYAN PAULA 11 PRATT ST Route 1	2181940469 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 35,050 413,050 ACT 378,000 ACT	35,050 Water Total:	\$184.01 \$184.01
65 SILVA RAYMOND A 7 PRATT ST Route 1	3352950276 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 82,050 3,687,150 ACT 3,605,100 ACT	82,050 Water Total:	\$430.76 \$430.76
66 MCKAY KIMBERLY 5 PRATT ST Route 1	2182940176 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 18,100 1,080,100 ACT 1,062,000 ACT	18,100 Water Total:	\$95.02 \$95.02

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
67 LITTLE ZACHARY 3 PRATT ST Route 1	3352950252 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 46,300 Reading Type 1,836,900 ACT 1,790,600 ACT	46,300 Water Total:	\$243.08 \$243.08
68 JOHNSON YVONNE 3 RIVER RD Route 1	1128920330 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 238,100 Reading Type 3,721,000 ACT 3,482,900 ACT	238,100 Water Total:	\$1,250.02 \$1,250.02
69 DEVINO JANE 8 RIVER RD Route 1	1327991501 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 13,400 Reading Type 457,450 ACT 444,050 ACT	13,400 Water Total:	\$70.35 \$70.35
70 PRONDECKI FRANK 16 RIVER RD Route 1	3061960024 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 39,250 Reading Type 2,093,350 ACT 2,054,100 ACT	39,250 Water Total:	\$206.06 \$206.06
71 MCNAMARA PAMELA 22 RIVER RD Route 1	2181940426 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 17,950 Reading Type 1,167,950 ACT 1,150,000 EST	17,950 Water Total:	\$94.24 \$94.24
72 BRUNELLE DENNIS 24 RIVER RD Route 1	1181940470 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 28,300 Reading Type 1,226,750 ACT 1,198,450 ACT	28,300 Water Total:	\$148.58 \$148.58
73 DEMERS JENNIFER 28 RIVER RD Route 1	9941011098 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/25/2022	Usage 27,350 Reading Type 39,700 ACT 12,350 ACT	27,350 Water Total:	\$143.59 \$143.59
74 HILL ANN 30 RIVER RD Route 1	2070930334 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 23,800 Reading Type 1,001,200 ACT 977,400 ACT	23,800 Water Total:	\$124.95 \$124.95
75 SHINER THOMAS 34 RIVER RD Route 1	1327991521 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 19,550 Reading Type 1,169,100 ACT 1,149,550 ACT	19,550 Water Total:	\$102.64 \$102.64
76 OVERGAARD J. ERIC 36 RIVER RD Route 1	2181940394 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 8,050 Reading Type 948,150 ACT 940,100 ACT	8,050 Water Total:	\$42.26 \$42.26
77 FRITZ DEREK L 42 RIVER RD	0087474130 Water Rate Read Date Current Bill 9/15/2022	Usage 13,450 Reading Type 451,350 ACT	13,450 Water Total:	\$70.61 \$70.61

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
Route 1	Last Billed 3/21/2022 437,900 ACT			
78 NEWTON RICHARD W 46 RIVER RD Route 1	4061960034 Water Rate Read Date 9/15/2022 Current Bill 1,351,900 ACT Last Billed 3/21/2022 1,341,400 ACT	Usage 10,500	10,500 Water	\$55.12 Total: \$55.12
79 ZEWSKI JOHN 48 RIVER RD Route 1	2014567921 Water Rate Read Date 9/15/2022 Current Bill 492,650 ACT Last Billed 3/21/2022 485,950 ACT	Usage 6,700	6,700 Water	\$35.18 Total: \$35.18
80 YOUNG TYLER 54 RIVER RD Route 1	3352950260 Water Rate Read Date 9/15/2022 Current Bill 485,775 EST Last Billed 3/21/2022 458,650 ACT	Usage 27,125	27,125 Water	\$142.41 Total: \$142.41
81 TAYLOR JESSE 58 RIVER RD Route 1	2236930500 Water Rate Read Date 9/15/2022 Current Bill 423,200 ACT Last Billed 3/21/2022 401,450 ACT	Usage 21,750	21,750 Water	\$114.19 Total: \$114.19
82 PRONDECKI BRIAN 57 RIVER RD Route 1	670757365 Water Rate Read Date 9/15/2022 Current Bill 128,388 EST Last Billed 3/21/2022 110,750 ACT	Usage 17,638	17,638 Water	\$92.60 Total: \$92.60
83 BROWN LESLIE M 53 RIVER RD Route 1	1316992700 Water Rate Read Date 9/15/2022 Current Bill 896,950 ACT Last Billed 3/21/2022 869,050 ACT	Usage 27,900	27,900 Water	\$146.48 Total: \$146.48
84 SMITH JOSEPH R 55 RIVER RD Route 1	1323993979 Water Rate Read Date 9/15/2022 Current Bill 1,074,100 ACT Last Billed 3/21/2022 1,048,150 ACT	Usage 25,950	25,950 Water	\$136.24 Total: \$136.24
85 SINI SUSAN A 49 RIVER RD Route 1	4125950272 Water Rate Read Date 9/15/2022 Current Bill 901,500 ACT Last Billed 3/21/2022 894,250 ACT	Usage 7,250	7,250 Water	\$38.06 Total: \$38.06
86 NEWTON BILL 47 RIVER RD Route 1	4061960023 Water Rate Read Date 9/15/2022 Current Bill 489,400 ACT Last Billed 3/21/2022 475,650 ACT	Usage 13,750	13,750 Water	\$72.19 Total: \$72.19
87 HARRIS JAMES 45 RIVER RD Route 1	1119930179 Water Rate Read Date 9/30/2022 Current Bill 1,383,328 EST Last Billed 3/25/2022 1,348,812 EST	Usage 34,516	34,516 Water	\$181.21 Total: \$181.21

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
88 ADAMSKI THOMAS G 41 RIVER RD Route 1	67057361 Water Rate Usage Read Date Reading Type Current Bill Last Billed	7,900 9/15/2022 121,000 ACT 3/21/2022 113,100 ACT	7,900 Water Total:	\$41.48 \$41.48
89 DESAUTELS CHRISTOPHER 39 RIVER RD Route 1	5172960180 Water Rate Usage Read Date Reading Type Current Bill Last Billed	13,300 9/15/2022 531,500 ACT 3/21/2022 518,200 ACT	13,300 Water Total:	\$69.82 \$69.82
90 MURPHY KRISTIAN 35 RIVER RD Route 1	0093945885 Water Rate Usage Read Date Reading Type Current Bill Last Billed	2,250 9/15/2022 2,250 ACT 8/26/2022 0 FIN	2,250 Water Total:	\$11.81 \$11.81
91 KUKLEWICZ CARL F 33 RIVER RD Route 1	3124950539 Water Rate Usage Read Date Reading Type Current Bill Last Billed	3,850 9/15/2022 794,550 ACT 3/21/2022 790,700 ACT	3,850 Water Total:	\$20.21 \$20.21
92 MAILLOUX DONALD J 29 RIVER RD Route 1	1181940730 Water Rate Usage Read Date Reading Type Current Bill Last Billed	6,100 9/29/2022 2,141,900 ACT 3/21/2022 2,135,800 ACT	6,100 Water Total:	\$32.02 \$32.02
93 OLLARI STEPHANIE 27 RIVER RD Route 1	4061960184 Water Rate Usage Read Date Reading Type Current Bill Last Billed	21,050 9/15/2022 1,503,850 ACT 3/21/2022 1,482,800 ACT	21,050 Water Total:	\$110.51 \$110.51
94 FENNER THOMAS 25 RIVER RD Route 1	1327991300 Water Rate Usage Read Date Reading Type Current Bill Last Billed	17,300 9/15/2022 950,550 ACT 3/21/2022 933,250 ACT	17,300 Water Total:	\$90.82 \$90.82
95 GORDON MICHAEL 21 RIVER RD Route 1	1323993983 Water Rate Usage Read Date Reading Type Current Bill Last Billed	90,160 9/29/2022 729,670 ACT 3/18/2022 639,510 ACT	90,160 Water Total:	\$473.34 \$473.34
96 TOWN OF ERVING POTW 1 16 PUBLIC WORKS BLVD Route 1	004405 Water Rate Usage Read Date Reading Type Current Bill Last Billed	8,300 9/29/2022 4,754,900 ACT 3/24/2022 4,746,600 EST	8,300 Water Total:	\$43.58 \$43.58
97 TOWN OF ERVING POTW 1 16 PUBLIC WORKS BLVD Route 1	004406 Water Rate Usage Read Date Reading Type Current Bill Last Billed	19,600 9/29/2022 47,757,300 ACT 3/24/2022 47,737,700 ACT	19,600 Water Total:	\$102.90 \$102.90
98 PRONDECKI MICHAEL 1 WEST HIGH ST Route 1	2181940477 Water Rate Usage Read Date Reading Type Current Bill Last Billed	19,300 9/29/2022 1,954,100 ACT 9/7/2021 1,934,800 ACT	19,300 Water Total:	\$101.32 \$101.32

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
99 GALWAY WILLIAM 3 WEST HIGH ST Route 1	2181940777 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 37,850 Reading Type 1,019,000 ACT 981,150 ACT	37,850 Water Total:	\$198.71 \$198.71
100 WILLOR DANIEL 5 WEST HIGH ST Route 1	2181940797 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 25,900 Reading Type 3,379,200 ACT 3,353,300 EST	25,900 Water Total:	\$135.98 \$135.98
101 JACKSON CHAD 7 WEST HIGH ST Route 1	1181940471 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 20,700 Reading Type 1,206,400 ACT 1,185,700 ACT	20,700 Water Total:	\$108.68 \$108.68
102 THURSTON EDWIN 9 WEST HIGH ST Route 1	1236930541 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 23,800 Reading Type 1,507,100 ACT 1,483,300 ACT	23,800 Water Total:	\$124.95 \$124.95
103 COLLIS FRANK W 11 WEST HIGH ST Route 1	1181940422 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 6,250 Reading Type 513,750 ACT 507,500 ACT	6,250 Water Total:	\$32.81 \$32.81
104 BRUNETTE CLAYTON J 13 WEST HIGH ST Route 1	2181940765 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 25,350 Reading Type 1,712,650 ACT 1,687,300 ACT	25,350 Water Total:	\$133.09 \$133.09
105 MALONE PHILLIP JR 15 WEST HIGH ST Route 1	1181940415 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 12,500 Reading Type 1,540,000 ACT 1,527,500 ACT	12,500 Water Total:	\$65.62 \$65.62
106 CYHOWSKI JOANNE 17 WEST HIGH ST Route 1	1181940754 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/21/2022	Usage 13,050 Reading Type 748,650 ACT 735,600 ACT	13,050 Water Total:	\$68.51 \$68.51
107 SANDLIN MICHELLE 20 WEST HIGH ST Route 1	1124950612 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/25/2022	Usage 27,650 Reading Type 2,146,150 ACT 2,118,500 EST	27,650 Water Total:	\$145.16 \$145.16
108 TANYUK DANIEL E 18 WEST HIGH ST Route 1	1181940742 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 32,050 Reading Type 1,504,600 ACT 1,472,550 ACT	32,050 Water Total:	\$168.26 \$168.26
109 PARONICH III MAX 16 WEST HIGH ST Route 1	0012555195 Water Rate Read Date Current Bill 9/28/2022	Usage 0 Reading Type 0 SET	65,132 Water Total:	\$341.94 \$341.94

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
	2182940115 Water Rate Usage 65,132			
	Read Date Reading Type			
	Current Bill 9/28/2022 1,735,380 TRN			
	Last Billed 3/25/2022 1,670,248 EST			
110 LACLAIRE ELENA 14 WEST HIGH ST Route 1	0036713262 Water Rate Usage 9,000	9,000	Water	\$47.25
	Read Date Reading Type		Total:	\$47.25
	Current Bill 9/15/2022 9,000 ACT			
	Last Billed 3/30/2022 0 SET			
111 PETERS RONALD 12 WEST HIGH ST Route 1	1327991482 Water Rate Usage 33,650	33,650	Water	\$176.66
	Read Date Reading Type		Total:	\$176.66
	Current Bill 9/15/2022 1,077,350 ACT			
	Last Billed 3/21/2022 1,043,700 ACT			
112 SMITH MARK K 10 WEST HIGH ST Route 1	1321992659 Water Rate Usage 30,450	30,450	Water	\$159.86
	Read Date Reading Type		Total:	\$159.86
	Current Bill 9/15/2022 1,377,600 ACT			
	Last Billed 3/21/2022 1,347,150 ACT			
113 JAGLA DANIEL 8 WEST HIGH ST Route 1	1323993937 Water Rate Usage 21,900	21,900	Water	\$114.98
	Read Date Reading Type		Total:	\$114.98
	Current Bill 9/15/2022 770,000 ACT			
	Last Billed 3/21/2022 748,100 ACT			
114 ISLES DOUGLAS 6 WEST HIGH ST Route 1	1181940741 Water Rate Usage 11,600	11,600	Water	\$60.90
	Read Date Reading Type		Total:	\$60.90
	Current Bill 9/15/2022 1,316,300 ACT			
	Last Billed 3/21/2022 1,304,700 ACT			
115 MCLELLAN TABATHA A 2 WEST HIGH ST Route 1	2181940395 Water Rate Usage 14,450	14,450	Water	\$75.86
	Read Date Reading Type		Total:	\$75.86
	Current Bill 9/15/2022 1,158,650 ACT			
	Last Billed 3/21/2022 1,144,200 ACT			
116 NIEDZWIEDZ FRANCIS M 5 GOODELL PL Route 1	3258940145 Water Rate Usage 6,100	6,100	Water	\$32.02
	Read Date Reading Type		Total:	\$32.02
	Current Bill 9/15/2022 1,334,800 ACT			
	Last Billed 3/21/2022 1,328,700 ACT			
117 NIEDZWIEDZ FRANCIS M 5B GOODELL PL Route 1	4352950328 Water Rate Usage 2,400	2,400	Water	\$12.60
	Read Date Reading Type		Total:	\$12.60
	Current Bill 9/15/2022 690,300 ACT			
	Last Billed 3/24/2022 687,900 ACT			
118 MISS STEVEN 4 GOODELL PL Route 1	1181940759 Water Rate Usage 19,850	19,850	Water	\$104.21
	Read Date Reading Type		Total:	\$104.21
	Current Bill 9/29/2022 2,281,500 ACT			
	Last Billed 3/21/2022 2,261,650 EST			
119 SKYRM KIMBERLY 1 MOORE ST Route 1	1181940423 Water Rate Usage 13,650	13,650	Water	\$71.66
	Read Date Reading Type		Total:	\$71.66
	Current Bill 9/15/2022 451,850 ACT			
	Last Billed 3/21/2022 438,200 ACT			

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
120 FINN DAVID 4 MOORE ST Route 1	1323993927 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 29,300 Reading Type 1,141,300 ACT 1,112,000 ACT	29,300 Water Total:	\$153.82 \$153.82
121 DUFFY THOMAS 6 MOORE ST Route 1	1327991512 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 15,050 Reading Type 405,800 ACT 390,750 ACT	15,050 Water Total:	\$79.01 \$79.01
122 PAULIN JAMES D 8 MOORE ST Route 1	1181940377 Water Rate Read Date Current Bill 9/15/2022 Last Billed 5/18/2022	Usage 19,800 Reading Type 2,467,950 ACT 2,448,150 ACT	19,800 Water Total:	\$103.95 \$103.95
123 GEWEHR MARIE E 3 MECHANIC ST Route 1	1181940735 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 22,950 Reading Type 1,683,600 ACT 1,660,650 ACT	22,950 Water Total:	\$120.49 \$120.49
124 REED JOSEPH C JR 4 MECHANIC ST Route 1	1182940151 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 12,250 Reading Type 1,113,400 ACT 1,101,150 ACT	12,250 Water Total:	\$64.31 \$64.31
125 WONKKA PHILIP 10 MOORE ST Route 1	0083094328 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 24,450 Reading Type 553,200 ACT 528,750 ACT	24,450 Water Total:	\$128.36 \$128.36
126 BASSETT AARON 14 MOORE ST Route 1	1181940452 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/21/2022	Usage 10,700 Reading Type 710,900 ACT 700,200 EST	10,700 Water Total:	\$56.18 \$56.18
127 BASSETT AARON 14 MOORE ST Route 1	1181940438 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 7,800 Reading Type 678,600 ACT 670,800 ACT	7,800 Water Total:	\$40.95 \$40.95
128 BASSETT AARON 14 MOORE ST Route 1	1323994005 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 9,000 Reading Type 159,450 ACT 150,450 ACT	9,000 Water Total:	\$47.25 \$47.25
129 PHILLIPS SCOTT S.N. TRUST 16 MOORE ST Route 1	7102122556 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 35,750 Reading Type 220,700 ACT 184,950 ACT	35,750 Water Total:	\$187.69 \$187.69
130 CORNWELL GERALDINE M 11 MOORE ST Route 1	3352950468 Water Rate Read Date Current Bill 9/15/2022	Usage 7,000 Reading Type 854,700 ACT	7,000 Water Total:	\$36.75 \$36.75

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
	Last Billed 3/21/2022 847,700 ACT			
131 SUDDY AVIS 9 MOORE ST Route 1	2236930515 Water Rate Read Date Reading Type Current Bill 9/29/2022 575,900 ACT Last Billed 3/21/2022 562,100 ACT	Usage 13,800	13,800 Water	\$72.45 Total: \$72.45
132 RYAN THOMAS F 7 MOORE ST Route 1	2181940785 Water Rate Read Date Reading Type Current Bill 9/15/2022 1,852,750 ACT Last Billed 3/21/2022 1,834,950 ACT	Usage 17,800	17,800 Water	\$93.45 Total: \$93.45
134 ZILISCH KENNETH 34 MOORE ST Route 1	2181940780 Water Rate Read Date Reading Type Current Bill 9/15/2022 1,355,850 ACT Last Billed 3/21/2022 1,347,450 ACT	Usage 8,400	8,400 Water	\$44.10 Total: \$44.10
135 CULLEN JEFFREY J 8 SEMB DR Route 1	1285930963 Water Rate Read Date Reading Type Current Bill 9/19/2022 1,230,150 ACT Last Billed 3/24/2022 1,211,200 ACT	Usage 18,950	18,950 Water	\$99.49 Total: \$99.49
136 MAILLOUX DONALD 6 SEMB DR Route 1	1323993898 Water Rate Read Date Reading Type Current Bill 9/19/2022 324,500 ACT Last Billed 3/24/2022 311,100 ACT	Usage 13,400	13,400 Water	\$70.35 Total: \$70.35
137 HEBERT DANIEL 4 NORTHFIELD RD Route 1	3258940135 Water Rate Read Date Reading Type Current Bill 9/19/2022 4,821,950 ACT Last Billed 3/22/2022 4,731,700 ACT	Usage 90,250	90,250 Water	\$473.81 Total: \$473.81
138 BARRY JOAN B 43 FOREST ST Route 1			Water	\$0.00 Total: \$0.00
139 GUIDABONI JOSEPH 3 NORTHFIELD RD Route 1	1119930215 Water Rate Read Date Reading Type Current Bill 9/23/2022 833,450 ACT Last Billed 3/22/2022 804,400 ACT	Usage 29,050	29,050 Water	\$152.51 Total: \$152.51
140 MITZKOVITZ KENNETH E SR 7 NORTHFIELD RD Route 1	0078034378 Water Rate Read Date Reading Type Current Bill 9/23/2022 655,650 ACT Last Billed 3/22/2022 645,500 ACT	Usage 10,150	10,150 Water	\$53.29 Total: \$53.29
141 LITTLE ZACHARY 15 NORTHFIELD RD Route 1	4352950358 Water Rate Read Date Reading Type Current Bill 9/23/2022 654,100 ACT Last Billed 3/22/2022 638,900 ACT	Usage 15,200	15,200 Water	\$79.80 Total: \$79.80

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
142 MITZKOVITZ KENNETH E SR 18 NORTHFIELD RD Route 1	0073741027 Water Rate Usage 30,700 Read Date Reading Type Current Bill 9/23/2022 624,650 ACT Last Billed 3/22/2022 593,950 ACT	30,700	Water Total:	\$161.18 \$161.18
143 TOWN OF ERVING EES 1 28 NORTHFIELD RD Route 1			Water Total:	\$0.00 \$0.00
144 TOWN OF ERVING EES 2 28 NORTHFIELD RD Route 1	1352950099 Water Rate Usage 59,550 Read Date Reading Type Current Bill 9/23/2022 2,720,450 ACT Last Billed 3/22/2022 2,660,900 ACT	59,550	Water Total:	\$312.64 \$312.64
145 SILVA SHEILA 4 LILLIANS WY Route 1	3124950550 Water Rate Usage 16,000 Read Date Reading Type Current Bill 9/23/2022 1,090,900 ACT Last Billed 3/22/2022 1,074,900 ACT	16,000	Water Total:	\$84.00 \$84.00
146 PUTALA JOHN 33 LILLIANS WY Route 1	3352950471 Water Rate Usage 34,650 Read Date Reading Type Current Bill 9/23/2022 1,848,250 ACT Last Billed 3/22/2022 1,813,600 ACT	34,650	Water Total:	\$181.91 \$181.91
147 SAVAGE ELLIE 6 LILLIANS WY Route 1	1323993930 Water Rate Usage 18,150 Read Date Reading Type Current Bill 9/23/2022 496,050 ACT Last Billed 3/22/2022 477,900 ACT	18,150	Water Total:	\$95.29 \$95.29
148 ERIN TRAVIS 8 LILLIANS WY Route 1	1098930594 Water Rate Usage 0 Read Date Reading Type Current Bill 9/29/2022 140,150 ACT Last Billed 9/14/2021 140,150 ACT	0	Water Total:	\$0.00 \$0.00
149 SIBILIA GARY 9 LILLIANS WY Route 1	4124950621 Water Rate Usage 6,050 Read Date Reading Type Current Bill 9/23/2022 498,500 ACT Last Billed 3/22/2022 492,450 ACT	6,050	Water Total:	\$31.76 \$31.76
150 BITZER ROBERT F 11 LILLIANS WY Route 1	3124950533 Water Rate Usage 29,150 Read Date Reading Type Current Bill 9/23/2022 986,100 ACT Last Billed 3/22/2022 956,950 ACT	29,150	Water Total:	\$153.04 \$153.04
151 HEATH RICHARD 5 NORTHFIELD ROAD Route 1	0083094323 Water Rate Usage 7,600 Read Date Reading Type Current Bill 9/23/2022 316,350 ACT Last Billed 3/22/2022 308,750 ACT	7,600	Water Total:	\$39.90 \$39.90
152 SPRING KATHERINE 13 LILLIANS WY Route 1	1323993939 Water Rate Usage 37,450 Read Date Reading Type Current Bill 9/23/2022 1,182,900 ACT Last Billed 3/22/2022 1,145,450 ACT	37,450	Water Total:	\$196.61 \$196.61

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
153 BATCHELDER TIMOTHY 15 LILLIANS WY Route 1	4125950266 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 12,950 1,205,250 ACT 1,192,300 ACT	12,950 Water Total:	\$67.99 \$67.99
154 GALWAY BRENDA R 12 LILLIANS WY Route 1	2254920712 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 14,500 1,228,900 ACT 1,214,400 ACT	14,500 Water Total:	\$76.12 \$76.12
155 CARPENTER JAMES 10 LILLIANS WY Route 1	2254920711 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 27,850 1,669,650 ACT 1,641,800 ACT	27,850 Water Total:	\$146.21 \$146.21
156 ALLEN JR. ROBERT 14 LILLIANS WY Route 1	2144930021 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 16,400 759,700 ACT 743,300 ACT	16,400 Water Total:	\$86.10 \$86.10
157 ADAMS VANESSA 16 LILLIANS WY Route 1	1144930003 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 6,400 549,700 ACT 543,300 ACT	6,400 Water Total:	\$33.60 \$33.60
158 CAHILL THERESA 35 LILLIANS WAY Route 1	0046120554 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 11,350 697,200 ACT 685,850 ACT	11,350 Water Total:	\$59.59 \$59.59
159 BOISSONNEAULT RICHARD 17 LILLIANS WY Route 1	2144930099 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 9,450 935,400 EST 925,950 ACT	9,450 Water Total:	\$49.61 \$49.61
160 THAYER BARBARA 19 LILLIANS WY Route 1	2144930034 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 10,250 839,850 ACT 829,600 ACT	10,250 Water Total:	\$53.81 \$53.81
161 SCHNEIDER KAREN LIFE ESTA 37 LILLIANS WAY Route 1	0046120555 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 34,500 787,350 ACT 752,850 ACT	34,500 Water Total:	\$181.12 \$181.12
162 CETTO GENE 23 LILLIANS WAY Route 1	1098930566 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 21,700 774,000 ACT 752,300 ACT	21,700 Water Total:	\$113.92 \$113.92
163 TURNER ROBERT 21 LILLIANS WY Route 1	3124950542 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 22,950 769,100 ACT 746,150 ACT	22,950 Water Total:	\$120.49 \$120.49

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
164 ROBERGE MICHELLE 2 LILLIANS WY Route 1	4124950616 Water Rate Read Date Current Bill 9/23/2022 Last Billed 3/22/2022	Usage 14,900 Reading Type 726,300 ACT 711,400 ACT	14,900 Water Total:	\$78.22 \$78.22
165 DIBARI JEANINE 41 FOREST ST Route 1	1119930219 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 20,700 Reading Type 1,720,700 ACT 1,700,000 EST	20,700 Water Total:	\$108.68 \$108.68
166 KOSLOSKI MARK AND SHAINA 39 FOREST ST Route 1	1323993952 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 7,600 Reading Type 404,250 ACT 396,650 ACT	7,600 Water Total:	\$39.90 \$39.90
167 HERZIG-DOHERTY KARLA 35 FOREST ST Route 1	4061960022 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 19,600 Reading Type 979,050 ACT 959,450 ACT	19,600 Water Total:	\$102.90 \$102.90
168 MCLAUGHLIN CATHERINE 32 FOREST ST Route 1			Water Total:	\$0.00 \$0.00
169 LESLIE MARJOIRE 33 FOREST ST Route 1			Water Total:	\$0.00 \$0.00
170 BREOR RICHARD 29 FOREST ST Route 1	1181940386 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 27,550 Reading Type 1,491,900 ACT 1,464,350 ACT	27,550 Water Total:	\$144.64 \$144.64
171 BURT BENJAMIN 27 FOREST ST Route 1			Water Total:	\$0.00 \$0.00
172 SILVA THOMAS 30 FOREST ST Route 1	87474124 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 13,550 Reading Type 371,000 ACT 357,450 ACT	13,550 Water Total:	\$71.14 \$71.14
173 MCCRORY GLENN 28 FOREST ST Route 1	9911007098 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/24/2022	Usage 25,230 Reading Type 241,740 ACT 216,510 ACT	25,230 Water Total:	\$132.46 \$132.46
174 ERVING EQUIPMENT 38 FRENCH KING HW Route 1	7103122026 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 1,850 Reading Type 13,750 ACT 11,900 ACT	1,850 Water Total:	\$9.71 \$9.71

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
175 WONSEY DENNIS E 18 FOREST ST Route 1	0093945890 Water Rate Read Date Current Bill Last Billed 9/19/2022 3/22/2022	Usage 38,250 Reading Type 459,150 ACT 420,900 ACT	38,250 Water Total:	\$200.81 \$200.81
176 STACEY MATTHEW 16 FOREST ST Route 1	0042324251 Water Rate Read Date Current Bill Last Billed 9/19/2022 3/22/2022	Usage 12,550 Reading Type 1,120,050 ACT 1,107,500 ACT	12,550 Water Total:	\$65.89 \$65.89
177 CASEY JOHN A 23 FOREST ST Route 1			Water Total:	\$0.00 \$0.00
178 ADAN JUVENTINO J 21 FOREST ST Route 1	1352950102 Water Rate Read Date Current Bill Last Billed 9/19/2022 3/22/2022	Usage 19,850 Reading Type 1,119,800 ACT 1,099,950 ACT	19,850 Water Total:	\$104.21 \$104.21
179 LACLAIRE MITCHELL 19 FOREST ST Route 1			Water Total:	\$0.00 \$0.00
180 PETROWICZ TINA 17 FOREST ST Route 1	2070930136 Water Rate Read Date Current Bill Last Billed 9/19/2022 3/22/2022	Usage 44,550 Reading Type 1,342,100 ACT 1,297,550 ACT	44,550 Water Total:	\$233.89 \$233.89
181 MITCHELL KELLY 14 FOREST ST Route 1	2181940432 Water Rate Read Date Current Bill Last Billed 9/19/2022 3/22/2022	Usage 6,150 Reading Type 1,263,650 ACT 1,257,500 ACT	6,150 Water Total:	\$32.29 \$32.29
182 GALVEZ-OVALLE SELVIN 12 FOREST ST Route 1	1327991294 Water Rate Read Date Current Bill Last Billed 9/19/2022 3/22/2022	Usage 35,600 Reading Type 595,200 ACT 559,600 ACT	35,600 Water Total:	\$186.90 \$186.90
183 BEIGHLEY SANDRA 7 FOREST ST Route 1	1064991828 Water Rate Read Date Current Bill Last Billed 9/19/2022 3/22/2022	Usage 20,950 Reading Type 1,036,600 ACT 1,015,650 ACT	20,950 Water Total:	\$109.99 \$109.99
184 DAVIS PROPERTY MGMT INC 6 FOREST ST Route 1	3352950456 Water Rate Read Date Current Bill Last Billed 9/19/2022 3/22/2022	Usage 17,600 Reading Type 2,229,700 ACT 2,212,100 ACT	17,600 Water Total:	\$92.40 \$92.40
185 CURTISS PAUL 5 FOREST ST Route 1	4125950282 Water Rate Read Date Current Bill Last Billed 9/19/2022 3/22/2022	Usage 35,800 Reading Type 2,503,800 ACT 2,468,000 ACT	35,800 Water Total:	\$187.95 \$187.95

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
186 TRACESKI DONALD G 4 FOREST ST Route 1	1064991808 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/25/2022	Usage 0 Reading Type 675,050 ACT 675,050 ACT	0 Water Total:	\$0.00 \$0.00
187 TRACESKI DONALD G 4 FOREST ST Route 1	1181940380 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 16,100 Reading Type 1,156,300 ACT 1,140,200 EST	16,100 Water Total:	\$84.52 \$84.52
188 PORTER BLAKE 2 FOREST ST Route 1	93945889 Water Rate Read Date Current Bill 9/19/2022 Last Billed 5/20/2022	Usage 4,100 Reading Type 150,500 ACT 146,400 FIN	4,100 Water Total:	\$21.52 \$21.52
190 CAMPBELL SARA E 16 PROSPECT ST Route 1	0087474126 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 25,150 Reading Type 402,200 ACT 377,050 ACT	25,150 Water Total:	\$132.04 \$132.04
191 PACLED PROPERTIES LLC 18 PROSPECT ST Route 1	2181940786 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 68,200 Reading Type 1,541,000 ACT 1,472,800 ACT	68,200 Water Total:	\$358.05 \$358.05
192 BREOR MELANIE 22 PROSPECT ST Route 1	1182940079 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/22/2022	Usage 29,600 Reading Type 1,452,600 ACT 1,423,000 ACT	29,600 Water Total:	\$155.40 \$155.40
193 KLEPALDO JEREMY 24 PROSPECT ST Route 1	1316992667 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 24,050 Reading Type 964,700 ACT 940,650 ACT	24,050 Water Total:	\$126.26 \$126.26
194 KLEPADLO JEFFREY 26 PROSPECT ST Route 1	3352950463 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 45,900 Reading Type 1,913,300 ACT 1,867,400 ACT	45,900 Water Total:	\$240.98 \$240.98
195 KLEPADLO STANLEY JR 28 PROSPECT ST Route 1	2181940438 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 24,200 Reading Type 1,164,800 ACT 1,140,600 EST	24,200 Water Total:	\$127.05 \$127.05
196 FELTON VALERIE 30 PROSPECT ST Route 1	1064992291 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 10,250 Reading Type 496,050 ACT 485,800 ACT	10,250 Water Total:	\$53.81 \$53.81
197 LUIPPOLD III MARTIN C 32 PROSPECT ST Route 1	1181940439 Water Rate Read Date Current Bill 9/19/2022	Usage 37,650 Reading Type 1,921,700 ACT	37,650 Water Total:	\$197.66 \$197.66

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
	Last Billed 3/22/2022 1,884,050 ACT			
198 NICHOLAS SCOTT 34 PROSPECT ST Route 1	1323993938 Water Rate Read Date Reading Type Current Bill 9/19/2022 986,250 ACT Last Billed 3/22/2022 946,050 ACT	Usage 40,200	40,200 Water	\$211.05 Total: \$211.05
199 DRISCOLL JULIA M 38 PROSPECT ST Route 1	4352950344 Water Rate Read Date Reading Type Current Bill 9/19/2022 264,100 ACT Last Billed 3/22/2022 258,600 ACT	Usage 5,500	5,500 Water	\$28.88 Total: \$28.88
200 KOLODZIEJ TERESA 40 PROSPECT ST Route 1	4124950623 Water Rate Read Date Reading Type Current Bill 9/19/2022 1,902,650 ACT Last Billed 3/22/2022 1,876,900 ACT	Usage 25,750	25,750 Water	\$135.19 Total: \$135.19
201 KOLODZIEJ THERESA K 42 PROSPECT ST Route 1	1124950533 Water Rate Read Date Reading Type Current Bill 9/19/2022 2,123,750 ACT Last Billed 3/22/2022 2,074,600 ACT	Usage 49,150	49,150 Water	\$258.04 Total: \$258.04
202 MANKOWSKY DENISE 48 PROSPECT ST Route 1	1181940474 Water Rate Read Date Reading Type Current Bill 9/19/2022 1,996,000 ACT Last Billed 3/22/2022 1,964,050 ACT	Usage 31,950	31,950 Water	\$167.74 Total: \$167.74
203 LETOURNEAU DOUGLAS 30 CENTRAL ST Route 1	3124950557 Water Rate Read Date Reading Type Current Bill 9/19/2022 694,300 ACT Last Billed 3/22/2022 664,650 ACT	Usage 29,650	29,650 Water	\$155.66 Total: \$155.66
204 RAINBOW REALTY INC 29 CENTRAL ST Route 1	1285930408 Water Rate Read Date Reading Type Current Bill 9/19/2022 1,040,800 ACT Last Billed 3/22/2022 1,014,200 ACT	Usage 26,600	26,600 Water	\$139.65 Total: \$139.65
205 CROTEAU KENNETH H 28 CENTRAL ST Route 1	7103122225 Water Rate Read Date Reading Type Current Bill 9/19/2022 127,650 ACT Last Billed 3/22/2022 107,200 ACT	Usage 20,450	20,450 Water	\$107.36 Total: \$107.36
206 MCANDREWS JOHN J 24 CENTRAL ST Route 1	3061960171 Water Rate Read Date Reading Type Current Bill 9/19/2022 1,541,000 ACT Last Billed 3/22/2022 1,520,000 ACT	Usage 21,000	21,000 Water	\$110.25 Total: \$110.25
207 MCANDREWS MARGARET L 22 CENTRAL ST Route 1	4061960161 Water Rate Read Date Reading Type Current Bill 9/19/2022 1,219,550 ACT Last Billed 3/22/2022 1,184,000 ACT	Usage 35,550	35,550 Water	\$186.64 Total: \$186.64

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
208 PAQUETTE SANDRA 20 CENTRAL ST Route 1	36713261 Water Rate Read Date Current Bill 9/19/2022 Current Bill 8/31/2022 1061960095 Water Rate Read Date Current Bill 8/31/2022 Last Billed 10/4/2021	Usage 1,350 Reading Type 1,350 ACT 0 SET Usage 47,262 Reading Type 653,620 TRN 606,358 EST	48,612 Water Total: Water Total:	\$255.21 \$255.21
209 RADCLIFF PHYLLIS 18 CENTRAL ST Route 1	2124950613 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 14,650 Reading Type 1,355,650 ACT 1,341,000 ACT	14,650 Water Total:	\$76.91 \$76.91
210 RADZUIK CHRISTOPHER 16 CENTRAL ST Route 1	1323993913 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 19,450 Reading Type 1,548,700 ACT 1,529,250 ACT	19,450 Water Total:	\$102.11 \$102.11
211 KLEPADLO JEFFREY M 8 CENTRAL ST Route 1	4124950614 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 27,300 Reading Type 1,296,750 ACT 1,269,450 ACT	27,300 Water Total:	\$143.32 \$143.32
212 FRITZ SCOTT A 6 CENTRAL ST Route 1	5172960179 Water Rate Read Date Current Bill 9/30/2022 Last Billed 10/4/2021	Usage 15,462 Reading Type 917,860 EST 902,398 EST	15,462 Water Total:	\$81.18 \$81.18
213 SILVA BRENDA L 4 CENTRAL ST Route 1	7103122273 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 42,250 Reading Type 187,400 ACT 145,150 ACT	42,250 Water Total:	\$221.81 \$221.81
214 BUGBEE LANCE 2 CENTRAL ST Route 1	2181940472 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 38,450 Reading Type 1,005,850 ACT 967,400 ACT	38,450 Water Total:	\$201.86 \$201.86
215 WILLS JAIME 9 CENTRAL ST Route 1	4352950332 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 55,450 Reading Type 606,900 ACT 551,450 ACT	55,450 Water Total:	\$291.11 \$291.11
216 MARYNOK MICHAEL 1 PLEASANT ST Route 1	1327991504 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 18,900 Reading Type 261,550 ACT 242,650 ACT	18,900 Water Total:	\$99.22 \$99.22
217 BROUGHAN SHARON K 17 CENTRAL ST Route 1	2144930004 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 5,200 Reading Type 683,350 ACT 678,150 ACT	5,200 Water Total:	\$27.30 \$27.30

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
218 LABELLE DAVID E 6 PLEASANT ST Route 1	4124950632 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 16,650 Reading Type 1,243,250 ACT 1,226,600 ACT	16,650 Water Total:	\$87.41 \$87.41
219 BASSETT JOSEPH 5 PLEASANT ST Route 1	4276940297 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 14,550 Reading Type 742,300 ACT 727,750 ACT	14,550 Water Total:	\$76.39 \$76.39
220 HALVORSEN KATHY 8 PLEASANT ST Route 1	3276940275 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 14,600 Reading Type 1,041,600 ACT 1,027,000 ACT	14,600 Water Total:	\$76.65 \$76.65
221 CASSIDY HEATHER 7 PLEASANT ST Route 1	1064990939 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 22,150 Reading Type 985,400 ACT 963,250 ACT	22,150 Water Total:	\$116.29 \$116.29
222 FISHER RYAN A 10 PLEASANT ST Route 1	67057366 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 53,850 Reading Type 377,250 ACT 323,400 ACT	53,850 Water Total:	\$282.71 \$282.71
223 BACON PAUL E 9 PLEASANT ST Route 1	7107121351 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/22/2022	Usage 30,500 Reading Type 250,550 EST 220,050 ACT	30,500 Water Total:	\$160.12 \$160.12
224 REED ERIC 13 PLEASANT ST Route 1	2276940391 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 31,100 Reading Type 1,555,450 ACT 1,524,350 ACT	31,100 Water Total:	\$163.28 \$163.28
225 LAPINSKI EDWARD F 15 PLEASANT ST Route 1	7103121968 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 22,900 Reading Type 124,600 ACT 101,700 ACT	22,900 Water Total:	\$120.22 \$120.22
226 HARRINGTON PHILIP L 17 PLEASANT ST Route 1	1124950617 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 16,700 Reading Type 1,346,700 ACT 1,330,000 ACT	16,700 Water Total:	\$87.68 \$87.68
228 MASON-HILLMAN VEDA 21 PLEASANT ST Route 1	1327991474 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 20,350 Reading Type 1,239,000 ACT 1,218,650 ACT	20,350 Water Total:	\$106.84 \$106.84
229 BEZIO ROBERT 25 PLEASANT ST Route 1	1064991809 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/22/2022	Usage 24,600 Reading Type 1,699,100 ACT 1,674,500 ACT	24,600 Water Total:	\$129.15 \$129.15

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
230 TOWN OF ERVING 17 MOORE STREET Route 1			Water	\$0.00
			Total:	\$0.00
231 JOHNSON RAYMOND 11 PARK ST Route 1	1064991816 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 11,900 620,250 ACT 608,350 ACT	11,900 Water	\$62.48 Total: \$62.48
232 FLAGG DONNA 8 PARK ST Route 1	1064991824 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 17,950 478,250 EST 460,300 ACT	17,950 Water	\$94.24 Total: \$94.24
233 BABINEAU SHAWN P. 9 PARK ST Route 1	1352950089 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 41,588 2,095,088 EST 2,053,500 ACT	41,588 Water	\$218.34 Total: \$218.34
234 CHAGNON DAVID 7 PARK ST Route 1	1064991812 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 25,650 1,221,450 EST 1,195,800 ACT	25,650 Water	\$134.66 Total: \$134.66
235 CHAGNON DAVID L 5 PARK ST Route 1	1323993920 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 10,245 215,095 EST 204,850 ACT	10,245 Water	\$53.79 Total: \$53.79
236 CHASE PATRICK 8 UNION ST Route 1	1321992622 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 24,300 967,900 ACT 943,600 ACT	24,300 Water	\$127.58 Total: \$127.58
237 GOLEMBESKI FRANCIS M 3 PARK ST Route 1	1285930950 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 27,900 1,898,400 ACT 1,870,500 EST	27,900 Water	\$146.48 Total: \$146.48
238 SADLER CHRISTOPHER 19 CENTRAL ST Route 1	4352950542 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 29,000 849,700 ACT 820,700 ACT	29,000 Water	\$152.25 Total: \$152.25
239 EARNEST PHILLIP FAMILY TRU 4 REYNOLDS ST Route 1	1181940416 Water Rate Read Date Reading Type Current Bill Last Billed	Usage 31,250 1,240,850 ACT 1,209,600 EST	31,250 Water	\$164.06 Total: \$164.06
240 MANZI ANTHONY 20 FRENCH KING HWY Route 1			Water	\$0.00
			Total:	\$0.00

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
241 DYER CASEY 21 FRENCH KING HWY Route 1	1181940437 Water Rate Read Date Current Bill 9/23/2022 Last Billed 3/24/2022	Usage 30,750 Reading Type 769,850 ACT 739,100 ACT	30,750 Water Total:	\$161.44 \$161.44
242 BUTLER BRUCE 29 FRENCH KING HWY Route 1	4124950619 Water Rate Read Date Current Bill 9/23/2022 Last Billed 3/24/2022	Usage 7,500 Reading Type 1,023,450 ACT 1,015,950 ACT	7,500 Water Total:	\$39.38 \$39.38
243 SEMB ERIK 50 FRENCH KING HWY Route 1	1327991515 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/24/2022	Usage 38,950 Reading Type 671,300 ACT 632,350 ACT	38,950 Water Total:	\$204.49 \$204.49
244 RAU SCOTT 52 FRENCH KING HWY Route 1	1276940739 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/24/2022	Usage 21,850 Reading Type 2,017,800 ACT 1,995,950 ACT	21,850 Water Total:	\$114.71 \$114.71
245 SEMB RALPH W 55 FRENCH KING HWY Route 1	9951005099 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/25/2022	Usage 47,120 Reading Type 1,651,980 ACT 1,604,860 ACT	47,120 Water Total:	\$247.38 \$247.38
246 POSTMASTER 54 FRENCH KING HWY Route 1	0042324249 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/24/2022	Usage 1,300 Reading Type 133,200 ACT 131,900 ACT	1,300 Water Total:	\$6.82 \$6.82
247 BETTERS GARY J 68 FRENCH KING HWY Route 1	4124950638 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/24/2022	Usage 20,050 Reading Type 1,547,700 ACT 1,527,650 ACT	20,050 Water Total:	\$105.26 \$105.26
248 BAKER DOUGLASS R 25 NORTHFIELD ROAD Route 1	2182940148 Water Rate Read Date Current Bill 9/23/2022 Last Billed 3/22/2022	Usage 8,900 Reading Type 1,054,300 ACT 1,045,400 ACT	8,900 Water Total:	\$46.72 \$46.72
249 ADAMS STEPHEN 25 FRENCH KING HIGHWAY Route 1	1323994010 Water Rate Read Date Current Bill 9/23/2022 Last Billed 3/24/2022	Usage 47,500 Reading Type 1,408,700 ACT 1,361,200 ACT	47,500 Water Total:	\$249.38 \$249.38
250 MADDERN JAMES 6 RIVER ROAD Route 1	3124950547 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 19,700 Reading Type 721,350 ACT 701,650 ACT	19,700 Water Total:	\$103.42 \$103.42
252 WILLS MICHAEL 29 NORTHFIELD RD Route 1	0042324250 Water Rate Read Date Current Bill 9/23/2022	Usage 46,000 Reading Type 1,700,350 ACT	46,000 Water Total:	\$241.50 \$241.50

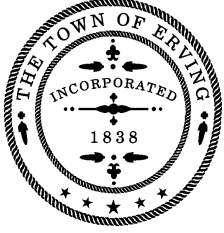
Account Information	Meter Reads And Usage	Usage	Receivable	Amount
	Last Billed 3/22/2022 1,654,350 ACT			
253 TOWN OF ERVING EES 3 28 NORTHFIELD RD Route 1	2286970233 Water Rate Read Date Reading Type Current Bill 9/23/2022 92,900 ACT Last Billed 3/22/2022 92,900 ACT	Usage 0	0 Water	\$0.00 Total: \$0.00
254 TOWN OF ERVING EES 4 28 NORTHFIELD RD Route 1	3352950256 Water Rate Read Date Reading Type Current Bill 9/23/2022 2,781,950 ACT Last Billed 3/22/2022 2,690,650 ACT	Usage 91,300	91,300 Water	\$479.32 Total: \$479.32
255 RENOVATORS SUPPLY INC 17 RIVER ST Route 1	2286970232 Water Rate Read Date Reading Type Current Bill 9/15/2022 8,300 ACT Last Billed 3/24/2022 8,150 ACT	Usage 150	150 Water	\$0.79 Total: \$0.79
256 GRIFFITHS DANIEL 27 FRENCH KING HW Route 1	6317950233 Water Rate Read Date Reading Type Current Bill 9/23/2022 6,200 ACT Last Billed 3/24/2022 4,300 ACT	Usage 1,900	1,900 Water	\$9.98 Total: \$9.98
257 TOWN OF ERVING FIRE STATIC 18 MOORE ST Route 1	3352950460 Water Rate Read Date Reading Type Current Bill 9/15/2022 124,450 ACT Last Billed 3/21/2022 118,700 ACT	Usage 5,750	5,750 Water	\$30.19 Total: \$30.19
258 NOVAK CYNTHIA 18 LILLIANS WAY Route 1	0046120559 Water Rate Read Date Reading Type Current Bill 9/23/2022 1,220,100 ACT Last Billed 3/22/2022 1,210,500 ACT	Usage 9,600	9,600 Water	\$50.40 Total: \$50.40
259 GALVIS JACQUELINE M 20 LILLIANS WY Route 1	0046120560 Water Rate Read Date Reading Type Current Bill 9/23/2022 583,700 ACT Last Billed 3/22/2022 574,100 ACT	Usage 9,600	9,600 Water	\$50.40 Total: \$50.40
260 GALBRAITH JEAN 22 LILLIANS WY Route 1	3317950088 Water Rate Read Date Reading Type Current Bill 9/23/2022 764,400 ACT Last Billed 3/22/2022 724,150 ACT	Usage 40,250	40,250 Water	\$211.31 Total: \$211.31
261 GIRARD DONNA 24 LILLIANS WY Route 1	0036713257 Water Rate Read Date Reading Type Current Bill 9/23/2022 35,000 ACT Last Billed 3/22/2022 15,000 ACT	Usage 20,000	20,000 Water	\$105.00 Total: \$105.00
262 ARSENAULT AMANDA 26 LILLIANS WY Route 1	4352950342 Water Rate Read Date Reading Type Current Bill 9/23/2022 1,106,900 ACT Last Billed 3/22/2022 1,085,600 ACT	Usage 21,300	21,300 Water	\$111.82 Total: \$111.82

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
263 CURTISS PAUL 28 LILLIANS WAY Route 1	1327991505 Water Rate Usage 54,250 Read Date Reading Type Current Bill 9/23/2022 1,674,550 ACT Last Billed 3/22/2022 1,620,300 ACT	54,250	Water Total:	\$284.81 \$284.81
264 CARROLL ELIZABETH L 25 LILLIANS WY Route 1	4352950349 Water Rate Usage 30,550 Read Date Reading Type Current Bill 9/23/2022 1,112,900 ACT Last Billed 3/22/2022 1,082,350 ACT	30,550	Water Total:	\$160.39 \$160.39
266 HENRY ELIZABETH LIFE ESTAT 39 LILLIANS WAY Route 1	1323993926 Water Rate Usage 7,500 Read Date Reading Type Current Bill 9/23/2022 435,900 ACT Last Billed 3/22/2022 428,400 ACT	7,500	Water Total:	\$39.38 \$39.38
267 HOLLOWAY DENISE 41 LILLIANS WAY Route 1	0046120563 Water Rate Usage 5,624 Read Date Reading Type Current Bill 9/30/2022 663,620 EST Last Billed 10/4/2021 657,996 EST	5,624	Water Total:	\$29.53 \$29.53
268 TOWN OF ERVING 71 FRENCH KING HIGHWAY Route 1	0046127873 Water Rate Usage 7,900 Read Date Reading Type Current Bill 9/26/2022 382,650 ACT Last Billed 3/24/2022 374,750 ACT	7,900	Water Total:	\$41.48 \$41.48
269 DEARBORN JEREMY 22 NORTHFIELD ROAD Route 1	0074379026 Water Rate Usage 31,400 Read Date Reading Type Current Bill 9/23/2022 994,750 ACT Last Billed 3/22/2022 963,350 ACT	31,400	Water Total:	\$164.85 \$164.85
270 BETTERS RYAN 35 MOORE ST Route 1	0074379021 Water Rate Usage 31,580 Read Date Reading Type Current Bill 9/29/2022 1,129,250 ACT Last Billed 5/11/2022 1,097,670 ACT	31,580	Water Total:	\$165.80 \$165.80
271 KOCJAN AUBREY AND PIERCE 4 SEMB DR Route 1	3352950465 Water Rate Usage 20,550 Read Date Reading Type Current Bill 9/19/2022 855,500 ACT Last Billed 3/24/2022 834,950 ACT	20,550	Water Total:	\$107.89 \$107.89
272 PAULIN JAMES 8 MOORE STREET Route 1	0049380057 Water Rate Usage 12,350 Read Date Reading Type Current Bill 9/15/2022 503,850 ACT Last Billed 3/21/2022 491,500 ACT	12,350	Water Total:	\$64.84 \$64.84
274 MCCARTHY JOSH 12 PLEASANT STREET Route 1	78034383 Water Rate Usage 32,515 Read Date Reading Type Current Bill 9/30/2022 790,976 EST Last Billed 10/4/2021 758,461 EST	32,515	Water Total:	\$170.70 \$170.70
275 TOWN OF ERVING 2 CARE DRIVE Route 1	61114952 Water Rate Usage 17,514 Read Date Reading Type Current Bill 9/29/2022 82,249 ACT Last Billed 3/21/2022 64,735 ACT	17,514	Water Total:	\$91.95 \$91.95

Account Information	Meter Reads And Usage	Usage	Receivable	Amount
276 TOWN OF ERVING CARE DRIVE1 Route 1	1323993955 Water Rate Read Date Current Bill 9/23/2022 Last Billed 3/22/2022	Usage 2,100 Reading Type 77,550 ACT 75,450 ACT	2,100 Water Total:	\$11.02 \$11.02
278 SEMB RALPH 63 FRENCH KING HIGHWAY Route 1	7326105787 Water Rate Read Date Current Bill 9/29/2022 Last Billed 3/25/2022	Usage 960,900 Reading Type 14,667,600 ACT 13,706,700 ACT	960,900 Water Total:	\$5,044.72 \$5,044.72
279 COMMONWEALTH OF MASS 89 FRENCH KING HIGHWAY Route 1	9911003098 Water Rate Read Date Current Bill 9/26/2022 Last Billed 3/24/2022	Usage 267,000 Reading Type 90,100 ACT 823,100 ACT	267,000 Water Total:	\$1,401.75 \$1,401.75
280 WILCOX EDWARD 50 RIVER ROAD Route 1	67057362 Water Rate Read Date Current Bill 9/15/2022 Last Billed 3/21/2022	Usage 27,950 Reading Type 439,400 ACT 411,450 ACT	27,950 Water Total:	\$146.74 \$146.74
282 WINN ROBERT 26 CENTRALSTREET Route 1	93945888 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 23,750 Reading Type 178,350 ACT 154,600 ACT	23,750 Water Total:	\$124.69 \$124.69
283 ESCOTT ALMA 3 CENTRALST Route 1	0036713253 Water Rate Read Date Current Bill 9/19/2022 Last Billed 3/22/2022	Usage 10,550 Reading Type 17,150 ACT 6,600 ACT	10,550 Water Total:	\$55.39 \$55.39
284 WHEELER COREY 24 FRENCH KING HIGHWAY Route 1	0036713254 Water Rate Read Date Current Bill 9/23/2022 Last Billed 4/22/2022	Usage 10,940 Reading Type 21,000 ACT 10,060 ACT	10,940 Water Total:	\$57.44 \$57.44

Report Totals

274 Account(s)	Receivable Name	Total
	Water	\$41,659.66
	Receivable Totals:	\$41,659.66



TOWN OF ERVING

SELECT BOARD

12 East Main Street
ERVING, MASSACHUSETTS 01344

Tel. 413-422-2800

Fax 413-422-2808

Email: administrator@erving-ma.gov

Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

September 30, 2022

To: Select Board
From: Jacob Smith, IT Technician
CC: Jacquelyn Boyden, IT Coordinator
Bryan Smith, Town Administrator

RE: Microsoft Licensing Update Proposal

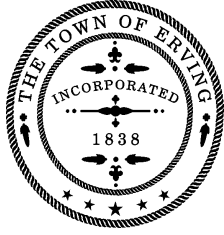
I'm requesting and recommending the Select Board consider a budget increase to change to the next level Microsoft 365 Enterprise licensing (E5) which would increase our licensing cost per user by \$120/year. This would represent an annual budget increase of approximately \$6,000 to the IT licensing budget. Our current license (E3) includes Office applications and Email with basic security and compliance. The higher license level will include everything we have in the existing license and add a variety of upgraded and added features. I will highlight what I see as the top 3 value-add areas for Erving.

- **Security:** User access security will be enhanced by giving IT the tools to manage access by groups rather than individual user which is much more efficient and less prone to mistakes. These enhanced features will also support integration with the upcoming upgrade to the WatchGuard cloud system leveraging our existing Microsoft AAD (Azure Active Directory) security framework which simplifies both the user experience and IT management.
- **Compliance:** The records retention tools will be enhanced allowing more automated dynamic handling of retention such as automatically adding new users to policies when they are created without IT intervention. The discovery tools are also enhanced allowing more effective and efficient eDiscovery when required.
- **Threat Protection:** This licensing adds Advanced Threat Protection which includes advanced realtime cloud-based email filtering to further protect our systems and users from malware, viruses, phishing, etc. It also includes advanced cyber attack protection from both external and internal threat vectors via advanced user behavior analytics to identify suspicious activity. Our insurer did a cybersecurity audit of their insured earlier this year and this was one of the areas of threat prevention they looked for so having it will enhance our cybersecurity framework and rating. Another feature is called Safe Attachments which puts all email attachments in a cloud sandbox and detonates them after malware scanning.

has been complete in the email system but before users receive the attachment as another layer of protection to thwart malicious attachment attacks.

That is a short list of features from the many that are added or upgraded by changing to this license. I know much of this is very technical so I welcome questions about anything above, the rest of the feature changes, or anything else related. I can likely provide better explanations in plain language during the meeting as well.

At this time I am proposing this E5 licensing would be used for full and part time employees and select elected officials who have the E3 license currently. There would be no change to the standard Exchange Only (P2) email-only licensing used for most elected and appointed personnel currently.



TOWN OF ERVING

SELECT BOARD

12 East Main Street
ERVING, MASSACHUSETTS 01344

Tel. 413-422-2800

Fax 413-422-2808

Email: administrator@erving-ma.gov

Jacob A. Smith, Chair
Scott Bastarache
William A. Bembury
Select Board

Bryan Smith
Town Administrator

September 30, 2022

To: Select Board
From: Bryan Smith, Town Administrator

RE: Hometown Heroes Banner Program

The Program

The Hometown Hero Banner program is intended to honor Veterans native of the Town of Erving, or who currently reside in Erving, and have been honorably discharged from the military, or are currently serving. Banners will exhibit the image of the Veteran/ Service Member, branch of service, years of service, and campaign served in. The banners will be placed on East & West Main Streets, and on Town-owned property, as space is available.

Current Installation

In February 2022 the Town began accepting applications. 24 orders were able to be processed for the initial order. The design and verification process took longer than anticipated, but the banners are finally ready for installation.

