SELECTBOARD MEETING MINUTES
October 23, 2012

Call to Order: The Selectboard meeting was called to order at 6:00pm.

Present: Randy Crocher and John Ward, Selectboard members; Ray Purington, Admin. Assistant; Mick LaClaire, Claire Chang, Patricia Crosby.

Approval of Minutes: John made a motion, seconded by Randy, to approve the minutes of 10/9 and 10/11. The vote was unanimous in the affirmative.

Project Updates: Mick LaClaire, Highway Superintendent, reported that startup and training on the new boilers at the Public Safety Complex took place on 10/19. The fan on the Modine unit heater in the training room is louder than is desirable for that type of space. The sales rep for F.W. Webb has offered to donate a device to control the speed of the fan, and Tognarelli will install it before Election Day on November 6th. It is expected that there will need to be a few more return visits by Tognarelli and F.W. Webb to adjust the boiler controls to match the behavior of the building.

Ray noted that the final payment was being made to Siemens this week. There are no outstanding issues with their boiler replacement project at the Elementary School. Bid specs for the Town Hall roof are still in process.

PSC Windows: Mick presented three quotes for 5 replacement windows at the Public Safety Complex. Four windows will be for Highway Dept. windows along the south end of the building, and one window for the kitchen in the Fire Dept. The current windows are single-pane with steel sashes. The new windows will be double-pane vinyl sliding windows. The low quote was from R.K. Miles for their “Modern View” brand, with 3 windows at $193.18 each and 2 windows at $233.00 each. Installation will be done by the Highway Department. John made a motion, seconded by Randy, to approve the project, with funds coming from the Building Maintenance account. The vote was unanimous in the affirmative.

Mick explained that he is awaiting additional quotes for two replacement windows for the Fire Dept. radio room and the Fire Chief’s office. R.K. Miles has quoted $305 per window for vinyl replacement sliding windows. The current windows are double-pane, but the seals leak, causing the windows to fog up between the panes. Mick is also getting quotes to replace the front door to the Police Dept, as that door has been modified so many times that it no longer seals properly. A pre-hung metal door is being quoted.

Library Bulkhead: Feedback from the Historical Commission and from the Library Trustees indicates support for removing the library’s cellar entryway and replacing it with a traditional metal bulkhead. When the exterior window over the entryway/bulkhead is repaired and rebuilt, the Trustees would also like the squirrel-damaged interior window repaired as well. It is expected that this project will also be done by the Highway Dept.

Town Hall Office Walls: Mick asked if it was time to proceed with construction of the office walls on the first floor of Town Hall. Randy noted his concerns about an earlier Renaissance estimate for the project that included more than $10,000 in HVAC work. He feels that until the true scope and cost of the project is known, it should not be started. Only $10,000 has been approved for the work, and to run out of money partway through would not be responsible to the voters. It was suggested that maybe Bart Bales could evaluate the impact of the proposed new offices as part of the energy audit he will be doing for the Green Community grant. Mick and Ray will continue to explore the total needs and costs of the project and will come back when there is more information.

Chapter 90 Projects: Mick presented two Chapter 90 Project Requests - $16,000 for gravel used to repair shoulders on Main, West Gill, and Mountain Roads, and $30,000 for shimming and chip sealing 12,000 feet of Mountain...
Road, Bickford Lane, and other various roads. John made a motion, seconded by Randy, to authorize Randy to sign the Project Request forms. The vote was unanimous in the affirmative.

7:10pm Mick left the meeting.

**Rescue Van Repairs:** The Board reviewed an estimate from Rose Ledge Companies in Erving to perform repairs to the Fire Department’s 1985 Ford Rescue Van. The estimate totals nearly $3,000, which was felt to be an “awful lot of work” for a 27-year-old vehicle. Department and Town priorities were questioned, given that this is the first-response vehicle for most medical calls, which are a majority of the calls for the Fire Department. It was wondered why a replacement for this vehicle hasn’t been prioritized ahead of a new police cruiser and ahead of a new fire engine. This discussion will be continued with the Fire Department as part of the FY14 capital plan and budget process. John made a motion, seconded by Randy, to authorize Randy to sign the purchase order for the repair work. The vote was unanimous in the affirmative.

**VY Contract:** The Town has received the annual $7,500 contract from MEMA to provide Radiological Response Preparedness Program services with respect to the Town’s proximity to the Entergy Nuclear Plant in Vernon, VT. Randy made a motion, seconded by John, to authorize Ray to sign the contract on behalf of the Town. The vote was unanimous in the affirmative.

**Sewer Abatement:** John made a motion, seconded by Randy, to grant abatement of $21.42 to Jeff Suprenant for sewer charges related to metered water used to fill a spa. The vote was unanimous in the affirmative.

**Surplus Equipment:** Sealed bids on surplus equipment were opened at 2:00 PM on 10/22. There was one bid of $57.50 from Richard Cornwell for the 1990 dump truck body. Mr. Cornwell also placed the sole bid of $75.50 for the 1983 Torwell sander bed conveyor. There were three bids for the 1987 Chevy pickup truck, with a high bid of $657.00 from Jeffrey McComb. Ray recommended awarding the bids for the dump truck body and the pickup truck, but stated that Mick is checking to see if another town might be interested in the sander conveyor, as the one bid seems very low. John made a motion, seconded by Randy, to award the dump truck body and pickup truck to the high bidders. The vote was unanimous in the affirmative.

There were no bids for the wooden chairs, wire shelf unit, and Motorola radios. The chair and shelf will be disposed of as scrap. Ray will look into a Craigslist posting for the radios.

**Citizen Advisory Committee:** Ray shared a request from the Franklin County Regional Housing and Redevelopment Authority for a Gill resident to serve on a Citizen Advisory Committee. The CAC will provide oversight of the 2012 Community Development Block Grant received by Gill, Erving (lead town), Colrain, and Deerfield.

**Appointments:** John made a motion, seconded by Randy, to appoint Ted Castro-Santos and Ken Sprankle to the Conservation Commission through 12/31/12. The vote was unanimous in the affirmative. The Board noted its appreciation to these two former ConCom members, who returned to the Commission in order to fill its ranks so that another member’s Notice of Intent can be acted on. The five-member ConCom has been acting with four members since January 1st and with only three members since October 15th.

7:35pm Patricia Crosby left the meeting.

**Warrant:** The Board reviewed and signed FY 2013 warrant #9.

**Adjournment:** The Selectboard meeting adjourned at 8:10pm.

*Minutes respectfully submitted by Ray Purington, Administrative Assistant.*
CHAPTER 90 – PROJECT REQUEST

*2 Original Signed Project Request Forms are to be submitted. CONTACT

Classification: ____________________________
Primary Road: ____________________________
Local Road: X ____________________________
City/Town: GILL __________________________
Location(s): Various roads __________________
Length: 10725 feet Width: 20 feet

PROJECT TYPE
Construction: □ Resurfacing: X□ Engineering: □ Equipment: □
Other: ________________________________

TYPICAL SECTION DETAILS: Indicate depths, special treatments, etc... Also please include sketch for Construction/Improvement Projects.

Surface: Gravel __________________________
Base Course: ____________________________
Foundation: ____________________________
Shoulders/Sidewalks: Shoulder repair on Main, west Gill, and Mountain roads

SCOPE OF WORK:
Regarding surface and shaping gravel rds. As well as shoulder repair

WORK TO BE DONE:
For Force Account: X□ Advertised Contract: □ Other: __________________________
Estimated Cost (Please attach estimate and list funding source(s)): $ 16,000

**These funds will pay 100% of Local Road Project costs to the limit of this assignment**

CERTIFICATION
The design, engineering, construction, and future performance of the project, including maintenance, is the responsibility of the Municipality. The proposed work will conform to recognized engineering and construction methods. I/We hereby certify under penalty of perjury the following: that the project is on a public way, and any necessary takings have been made; that all materials will comply with approved established specifications; that all weights and quantities will be accurate; that equipment rental rates are those established by MassDOT Highway or the advertised low bid; that all documentation will be checked for accuracy, and will be endorsed in accordance with municipal procedures for accountability.

Reviewed by: ____________________________
Signed: ____________________________ Date
State Aid Engineer

Road Classification Verified: __________________________
Approved for $ ________________ @ 100%

District Highway Director __________________________ Date

Signed: ____________________________ Date
Highway Official’s Title

Accounting Official’s Title __________________________ Date

Duly Authorized Municipal Officials __________________________ Date

10-23-12
CHAPTER 90 – ENVIRONMENTAL PUNCH LIST

City/Town ___________________________ GILL __________________________ MassDOT Highway District # __________________________

Proposed Work:
Construction X Resurfacing ______ Improvement ______ Engineering ______ Other ______

NOTE: ALL ENVIRONMENTAL PERMITS / APPROVALS MUST BE OBTAINED PRIOR TO CONSTRUCTION.

1. Will the pavement width increase 4 ft. or more for an aggregate length of 1000 ft. or more? Yes ____ No ____ X ____________
2. Will the bank or terrain (other than alteration required for installation of equipment or structures) be altered at a distance exceeding 10 ft. from the pavement? Yes ____ No ____ X ____________
3. Will the removal of 5 or more trees with diameters of 14 inches or more be required? Yes ____ No ____ X ____________
4. Will more than 300 ft. of stone wall be removed or altered? Yes ____ No ____ X ____________
5. Will the project involve construction of a parking lot with capacity of 50 cars or more? Yes ____ No ____ X ____________

6. Are any other MEPA review thresholds exceeded (see 301 CMR 11.00)?
   If your answer is YES to any of questions 1-6, you must file an Environmental Notification Form (ENF).* Yes ____ No ____ X ____________
7. Will the project be on a “Scenic Road” (Acts of 1973, C. 67)?
   If your answer is YES, your Planning Board or Selectmen / City Council must give written consent for cutting / removal of trees or changes to stone walls. Yes ____ No ____ X ____________
8. Have all necessary takings, easements, rights of entry, etc. been completed?
   If a county Hearing is required, it must be held prior to starting work Yes ____ No ____ X ____________
9. Are archaeological, anthropological, historical, etc. problems / impacts anticipated?* Yes ____ No ____ X ____________
10. Is any work proposed in or within 100 ft. of a wetland (stream, pond, swamp, etc.)?*
    If your answer is YES, you must file the project with your local Conservation Commission prior to starting work. Yes ____ No ____ X ____________
11. If work is proposed in a wetland or water resource, a permit may be required from the Department of Environmental Protection, Corps of Engineers, etc. Verify with agencies.* Yes ____ No ____ X ____________

* See Appendix K for a List of Environmental Agencies.

Validation

It is recognized that the purpose of this information is to assist the MassDOT Highway Division in approving the Chapter 90 Project Request Form (of which this is a part). Accordingly, the information provided here is intended to be complete and correct with no intentional errors or material omissions. Any action taken by MassDOT Highway Division on the basis of this information shall not legally or financially obligate MassDOT Highway Division to support or defend the municipality, and the municipality shall save harmless MassDOT Highway Division for any action.

<table>
<thead>
<tr>
<th>Duly Authorized Municipal Officials</th>
<th>Reviewed and Approved for Transmittal by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mitchell, L. LaClaire Sr.</td>
<td></td>
</tr>
<tr>
<td>Highway or Conservation Officer's Title</td>
<td></td>
</tr>
<tr>
<td>Hwy, Supt</td>
<td></td>
</tr>
</tbody>
</table>

Signatures
Date 10-23-12

This form should be submitted in duplicate with original signatures to the MassDOT Highway District Office.
This form should accompany the Project Request Form.
CHAPTER 90 – PROJECT REQUEST

*2 Original Signed Project Request Forms are to be submitted.

Classification: ________________________________
Primary Road: ________________________________
Local Road: X
City/Town: GILL
Location(s): Various rds. Mountain road, Bickford In.

Length: 12,000 feet Width: 20 feet

PROJECT TYPE
Construction: ☐ Resurfacing: ☑ Engineering: ☐ Equipment: ☐

Other:

TYPICAL SECTION DETAILS: Indicate depths, special treatments, etc... Also please include sketch for Construction/Improvement Projects.

Surface: Shim leveling course and chip seal
Base Course: ________________________________
Foundation: ________________________________
Shoulders/Sidewalks: ________________________

SCOPE OF WORK:
Resurface Shim leveling course—additional work from already approved project

WORK TO BE DONE:
Force Account: X ☐ Advertised Contract: ☐ Other: ______________________
Estimated Cost (Please attach estimate and list funding source(s)): $ 30,000

**These funds will pay 100% of Local Road Project costs to the limit of this assignment**

CERTIFICATION
The design, engineering, construction, and future performance of the project, including maintenance, is the responsibility of the Municipality. The proposed work will conform to recognized engineering and construction methods. I/We hereby certify under penalty of perjury the following: that the project is on a public way, and any necessary takings have been made; that all materials will comply with approved established specifications; that all weights and quantities will be accurate; that equipment rental rates are those established by MassDOT Highway or the advertised low bid; that all documentation will be checked for accuracy, and will be endorsed in accordance with municipal procedures for accountability.

Reviewed by:
Signed: ________________________________ Date ________________________________

State Aid Engineer

Road Classification Verified: ________________________________
Approved for $ ____________________ @ 100%

District Highway Director Date ________________________________

Signed: ________________________________ Date 10-18-12

Highway Official’s Title

Accounting Official’s Title Date ________________________________

Date 10-23-12 Duly Authorized Municipal Officials
**Rose Ledge Companies**
21 Poplar Mountain Road
Erving, MA 01344
(413)423-3563

**BILL TO**
GILL FIRE
196A MAIN RD
GILL, MA 01376
(413)822-2701 NIRE
fax 843-0126

<table>
<thead>
<tr>
<th>YEAR</th>
<th>MAKE</th>
<th>MODEL</th>
<th>MILEAGE</th>
<th>FLEET UNIT #</th>
<th>REG #</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-26-85</td>
<td>FORD</td>
<td>E350 4X4</td>
<td>19841</td>
<td>1251</td>
<td>M26-170</td>
</tr>
</tbody>
</table>

| SERIAL NO./VIN | IFDKE30L2GHA95127 |

<table>
<thead>
<tr>
<th>ITEM</th>
<th>QTY</th>
<th>DESCRIPTION</th>
<th>LIST</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>TK</td>
<td>3</td>
<td>REMOVE DOG HOUSE ACCESS VALVE COVERS, REMOVE REPLACE GASKETS CLEAN ALL OLD SEALANT, SHOP LABOR SERVICE</td>
<td>237.00</td>
<td></td>
</tr>
<tr>
<td>GASKET</td>
<td>1</td>
<td>VC SET, GASKET</td>
<td>25.48</td>
<td></td>
</tr>
<tr>
<td>TK</td>
<td>3</td>
<td>TUNE UP AND LOF, SHOP LABOR SERVICE</td>
<td>237.00</td>
<td></td>
</tr>
<tr>
<td>FILTER</td>
<td>1</td>
<td>AIR FILTER</td>
<td>12.82</td>
<td></td>
</tr>
<tr>
<td>FILTER</td>
<td>1</td>
<td>FUEL FILTER</td>
<td>3.96</td>
<td></td>
</tr>
<tr>
<td>FILTER</td>
<td>1</td>
<td>FUEL FILTER</td>
<td>7.18</td>
<td></td>
</tr>
<tr>
<td>ROTOR</td>
<td>1</td>
<td>ROTOR</td>
<td>3.49</td>
<td></td>
</tr>
<tr>
<td>IGNITION</td>
<td>1</td>
<td>CAP, IGNITION PART</td>
<td>15.09</td>
<td></td>
</tr>
<tr>
<td>PLUG WIRES</td>
<td>1</td>
<td>SPARK PLUG WIRE SET</td>
<td>61.99</td>
<td></td>
</tr>
<tr>
<td>SPARK PLUGS</td>
<td>3</td>
<td>26.32</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TK</td>
<td>1</td>
<td>REPLACE TRANNY GASKET AND FILTER, SHOP LABOR SERVICE</td>
<td>79.00</td>
<td></td>
</tr>
<tr>
<td>ATF</td>
<td>8</td>
<td>AUTOMATIC TRANSMISSION FLUID</td>
<td>43.60</td>
<td></td>
</tr>
<tr>
<td>FILTER</td>
<td>1</td>
<td>TRANNY KIT</td>
<td>17.59</td>
<td></td>
</tr>
<tr>
<td>TK</td>
<td>2.5</td>
<td>REPLACE LT OUTER TIE ROD END AND STEERING DAMPER, BOTH FT SHOCKS, SHOP LABOR SERVICE</td>
<td>197.50</td>
<td></td>
</tr>
<tr>
<td>TIE ROD</td>
<td>1</td>
<td>LT TIE ROD END</td>
<td>124.80</td>
<td></td>
</tr>
<tr>
<td>STABILIZER</td>
<td>1</td>
<td>STEERING STABILIZER</td>
<td>86.59</td>
<td></td>
</tr>
<tr>
<td>SHOCK</td>
<td>2</td>
<td>SHOCKS</td>
<td>183.98</td>
<td></td>
</tr>
<tr>
<td>TK</td>
<td>2.4</td>
<td>REPLACE POWER STEERING PUMP AND HOSES, SHOP LABOR SERVICE</td>
<td>189.60</td>
<td></td>
</tr>
<tr>
<td>PUMP</td>
<td>1</td>
<td>STEERING PUMP</td>
<td>72.99</td>
<td></td>
</tr>
<tr>
<td>HOSE</td>
<td>1</td>
<td>STEERING, HOSE</td>
<td>37.83</td>
<td></td>
</tr>
<tr>
<td>HOSE</td>
<td>1</td>
<td>STEERING, HOSE</td>
<td>26.50</td>
<td></td>
</tr>
<tr>
<td>POWER STEER...</td>
<td>3</td>
<td>POWER STEERING FLUID</td>
<td>20.55</td>
<td></td>
</tr>
<tr>
<td>OIL</td>
<td>9</td>
<td>MOTOR OIL MOBIL 15W-40</td>
<td>35.55</td>
<td></td>
</tr>
<tr>
<td>TK</td>
<td>1</td>
<td>REPAIR BAD REPAIR TO TRANNY LINE, SHOP LABOR SERVICE</td>
<td>79.00</td>
<td></td>
</tr>
<tr>
<td>FITTINGS</td>
<td>1</td>
<td>FITTINGS</td>
<td>17.50</td>
<td></td>
</tr>
</tbody>
</table>

<p>| Total |     |     |     |     |</p>
<table>
<thead>
<tr>
<th>ITEM</th>
<th>QTY</th>
<th>DESCRIPTION</th>
<th>LIST</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>TK</td>
<td>1.5</td>
<td>SEAL ROOF JOINT AND CRACK TR SIDE, SHOP LABOR SERVICE</td>
<td>118.50</td>
<td></td>
</tr>
<tr>
<td>SEALANT</td>
<td>2</td>
<td>REMOVE REAR TANK, REPLACE PUMP AND SCREEN ASSY, SHOP LABOR SERVICE</td>
<td>18.00</td>
<td>331.80</td>
</tr>
<tr>
<td>TK</td>
<td>4.2</td>
<td>SCREEN ASSY, SHOP LABOR SERVICE</td>
<td>331.80</td>
<td></td>
</tr>
<tr>
<td>TJ</td>
<td>2</td>
<td>PATCH INSIDE OF LT ROCKER PANEL, SHOP LABOR</td>
<td>158.00</td>
<td></td>
</tr>
<tr>
<td>UNDER</td>
<td>1</td>
<td>UNDERCOATING</td>
<td>9.50</td>
<td></td>
</tr>
<tr>
<td>TK</td>
<td>0.6</td>
<td>REPLACE DRIVERS SIDE DOOR WEATHERSTRIP, SHOP LABOR SERVICE</td>
<td>47.40</td>
<td></td>
</tr>
<tr>
<td>FORD</td>
<td>1</td>
<td>FUEL PUMP ASSY, ONLY 1 AVAILABLE FORD PART</td>
<td>360.17</td>
<td></td>
</tr>
<tr>
<td>FORD</td>
<td>1</td>
<td>DOOR WEATHERSTRIP, FORD PART NOT AVAILABLE</td>
<td>0.00</td>
<td></td>
</tr>
<tr>
<td>GREASE</td>
<td>0.5</td>
<td>TUBES OF CHASSIS GREASE</td>
<td>3.50</td>
<td></td>
</tr>
<tr>
<td>TK</td>
<td>0.6</td>
<td>REPAIR EXHAUST ON AUX GEN, SHOP LABOR SERVICE</td>
<td>47.40</td>
<td></td>
</tr>
<tr>
<td>EXHAUST</td>
<td></td>
<td>EXHAUST PARTS</td>
<td>12.30</td>
<td></td>
</tr>
<tr>
<td>NOTE</td>
<td></td>
<td>DOES NOT INCLUDE FT END ALIGNMENT OR FRONT TIRES, TIRES WERE RUINED BY RUNNING UNDER INFLATED</td>
<td>0.00</td>
<td>12.30</td>
</tr>
<tr>
<td></td>
<td></td>
<td>WERE 20# WHEN IT CAME IN, SUPPOSED TO BE 80#</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>MA Sales Tax</td>
<td>76.74</td>
<td></td>
</tr>
</tbody>
</table>

Total                                               | $3,026.82 |
**COMMONWEALTH OF MASSACHUSETTS ~ STANDARD CONTRACT FORM**

This form is jointly issued and published by the Executive Office for Administration and Finance (AOF), the Office of the Comptroller (OCR) and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. Any changes to the official printed language of this form shall be void. Additional non-conflicting terms may be added by Attachment. Contractors may not require any additional agreements, engagement letters, contract forms or other additional terms as part of this Contract without prior Department approval. Click on hyperlinks for definitions, instructions and legal requirements that are incorporated by reference into this Contract. An electronic copy of this form is available at [www.mass.gov/cag/under Guidance For Vendors - Forms](http://www.mass.gov/cag/under Guidance For Vendors - Forms) or [www.mass.gov/ocr/under OSD Forms](http://www.mass.gov/ocr/under OSD Forms).

<table>
<thead>
<tr>
<th>CONTRACTOR LEGAL NAME: TOWN OF GILL</th>
<th>COMMONWEALTH DEPARTMENT NAME: MA Emergency Management Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>01354</strong></td>
<td><strong>MMARS Department Code: CDA</strong></td>
</tr>
<tr>
<td>Legal Address: (W-5, W-4, T&amp;C): 325 MAIN ROAD GILL, MA 01354</td>
<td>Business Mailing Address: 400 Worcester Road Framingham, MA 01702</td>
</tr>
<tr>
<td>Contract Manager: RAY PURINGTON</td>
<td>Billing Address (if different):</td>
</tr>
<tr>
<td>E-Mail: <a href="mailto:ADMINISTRATOR@GILLMASS.ORG">ADMINISTRATOR@GILLMASS.ORG</a></td>
<td>Contract Manager: John Giarusso, Jr.</td>
</tr>
<tr>
<td>Phone: 413 863 9347</td>
<td>E-Mail: <a href="mailto:john.giarusso@state.ma.us">john.giarusso@state.ma.us</a></td>
</tr>
<tr>
<td>Fax: 413 863 7775</td>
<td>Phone: 508-829-2940</td>
</tr>
<tr>
<td>Contractor Vendor Code: VC800019798</td>
<td>Fax:</td>
</tr>
</tbody>
</table>

**Vendor Code Address ID (e.g. "AD001"): AD001**

**NOTES:** The Address Id Must be set up for EFT payments.

**X NEW CONTRACT**

**PROCUREMENT OR EXCEPTION TYPE (Check one option only)**

- **Statewide Contract** (OSD or an OSD-designated Department)
- **Collective Purchase** (Attach OSD approval, scope, budget)
- **Department Procurement** (Includes State or Federal grants 815 CMR 2.00)
- **Emergency Contract** (Attach justification for emergency, scope, budget)
- **Contract Employee** (Attach Employment Status Form, scope, budget)
- **Legislative/Local/Other** (Attach authorizing language/justification, scope and budget)

**X** CONTRACT AMENDMENT

- **Enter Current Contract End Date Prior to Amendment:** 2013-06-30
- **Enter Amendment Amount:** $0 (or "no change")

**AMENDMENT TYPE (Check one option only. Attach details of Amendment changes.**

- **Interim Contract** (Attach justification for Interim Contract and updated scope/budget)
- **Contract Employee** (Attach any updates to scope or budget)
- **Legislative/Local/Other** (Attach authorizing language/justification and updated scope and budget)

**The following COMMONWEALTH TERMS AND CONDITIONS (T&C) has been executed, filed with CTR and is incorporated by reference into this Contract.**

**X** Commonwealth Terms and Conditions **X** Commonwealth Terms and Conditions For Human and Social Services

**COMPENSATION:** (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00.

- **Rate Contract** (No Maximum Obligation. Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)
- **X** Maximum Obligation Contract (Enter Total Maximum Obligation for total duration of this Contract (or new Total if Contract is being amended): $7,560.00

**PAYMENT DISCOUNTS (PPD):** Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days ___ % PPD; Payment issued within 15 days ___ % PPD; Payment issued within 20 days ___ % PPD; Payment issued within 30 days ___ % PPD. If PPD percentages are left blank, identify reason: X agrees to standard 45 day cycle statutory/legal or Ready Payments (6 L.C. 28, § 236); ___ initial only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt PPD Discounts Policy)

**BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT:** (Enter the Contract Title, purpose, fiscal year(s) and a detailed description of the scope of performance or what is being amended for a Contract Amendment. Attach all supporting documentation and justifications.)

**To maintain Radiological Response Preparedness Program services in accordance with the specifications described in Attachment A and in Section 2 of this contract.**

**ANTICIPATED START DATE:** (Complete ONE option only) The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations:

- ___ may be incurred as of the Effective Date (latest signature date below) and no obligations have been incurred prior to the Effective Date.
- ___ may be incurred as of ___ 2013, a date LATER than the Effective Date and no obligations have been incurred prior to the Effective Date.
- ___ were incurred as of ___ 2012, a date PRIOR to the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date are authorized to be made as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.

**CONTRACT END DATE:** Contract performance shall terminate as of ____ 2013, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapses between amendments.

**CERTIFICATIONS:** Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor makes all certifications required under the attached Contractor Certifications (incorporated by reference if not attached herein) under the pains and penalties of perjury, agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein in the following hierarchy of document precedence: the applicable Commonwealth Terms and Conditions, this Standard Contract Form including the Instructions and Contractor Certifications, the Request for Responses (RFR) or other solicitation, the Contractor's Response, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Responses terms result in best value, lower costs, or a more cost effective Contract.

**AUTHORIZING SIGNATURE FOR THE CONTRACTOR:**

<table>
<thead>
<tr>
<th>X</th>
<th>Date: 10/24/12</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RAY PURINGTON</strong></td>
<td><strong>Administrative Assistant</strong></td>
</tr>
</tbody>
</table>

**AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:**

<table>
<thead>
<tr>
<th>X</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>David Mahr</strong></td>
<td><strong>Chief Fiscal Officer</strong></td>
</tr>
</tbody>
</table>

(Updated 6/27/2011) Page 1 of 6
ATTACHMENT A
SCOPE OF SERVICES FOR THE TOWN OF GILL
CT-CDA-13GILLEPZGRANT000000

Scope of Performance:
This grant is issued in accordance with 815 CMR 2.00, and all applicable federal and state laws, statutes, rules, regulations, policies, and other governing documents.

Funds may be expended for the purpose of maintaining the community’s Radiological Emergency Response Preparedness Program for the Reception Center. The period of performance will be state fiscal year (SFY) 2013, from July 1, 2012 through June 30, 2013.

Budget:
The total value of this contract is $7,500.00. Payment will be issued upon receipt and acceptance of adequate documentation of completion of contract performance requirements.

One-half of the awarded funding will be distributed upon execution of this contract and receipt of checklist completion. The balance of the SFY 2013 funding will be distributed quarterly thereafter upon satisfactory completion of the checklist activities for each quarter.

Reporting:
The community’s Emergency Management Director must complete the activities listed in Section 2, Emergency Management Director RERP Maintenance Checklist, throughout the fiscal year.

The community agrees that all financial and programmatic records, supporting documents, statistical records, and other records associated with this contract are required to be retained for a period of seven (7) years, beginning on the first day after the final payment under this contract, or such longer period as is necessary for the resolution of any litigation, claim, negotiating, audit or any inquiry involving this contract.
SECTION 2

EMERGENCY MANAGEMENT DIRECTOR RERP MAINTENANCE CHECKLIST

This checklist summarizes the activities that should be performed to maintain a high level of preparedness for responding to a radiological emergency. This checklist should provide a convenient record of the activities and the quarter of the year in which they should be accomplished.

COMMUNITY: ____________________________  CALENDAR YEAR: 2012-2013

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>1 QTR</th>
<th>2 QTR</th>
<th>3 QTR</th>
<th>4 QTR</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMMUNICATIONS/EQUIPMENT:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Communications tests completed.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Telephone numbers for personnel, facilities, and agencies verified.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Inventory checks completed (See Appendix A).</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Operational checks of EOC equipment completed (See Appendix B).</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Operational checks of LTSA equipment completed (See Appendix B).</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Operational checks of school/school superintendent radios completed (See Appendix B).</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Operational check (re-zeroing) of 0-200mR dosimeters.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

MANPOWER AND RESOURCES:

2. Training arranged with Region I for new personnel.                    |       |       |       |       |

Section 2
### EMERGENCY MANAGEMENT DIRECTOR RERP MAINTENANCE CHECKLIST (Cont’d)

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>QUARTER OF THE YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 QTR</td>
</tr>
<tr>
<td><strong>TRAINING AND DRILLS:</strong></td>
<td></td>
</tr>
<tr>
<td>1. All required training completed.</td>
<td>*</td>
</tr>
<tr>
<td>2. Training plan for next year completed and approved by Department Heads.</td>
<td>*</td>
</tr>
<tr>
<td>3. Drill/exercise plan for next year completed and approved by Department Heads.</td>
<td>*</td>
</tr>
</tbody>
</table>

**RERP ANNUAL UPDATE:**

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>QUARTER OF THE YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 QTR</td>
</tr>
<tr>
<td>1. Facilities inspected for any alterations.</td>
<td>*</td>
</tr>
<tr>
<td>2. Reviewed evacuation routes and traffic/access control points for map accuracy.</td>
<td>*</td>
</tr>
<tr>
<td>3. Schools and day cares identified and transportation needs updated.</td>
<td>*</td>
</tr>
<tr>
<td>4. Special facilities identified and transportation needs updated.</td>
<td>*</td>
</tr>
<tr>
<td>5. Local Letters of Agreement reviewed and updated.</td>
<td>*</td>
</tr>
<tr>
<td>6. Plan and procedures reviewed and comments noted.</td>
<td><em>/</em>__</td>
</tr>
<tr>
<td>7. Comments on plans and procedures forwarded to Region I.</td>
<td><em>/</em>__</td>
</tr>
</tbody>
</table>
**Administrative Manual**

**Section 2**

**EMERGENCY MANAGEMENT DIRECTOR RERP MAINTENANCE CHECKLIST (Cont’d)**

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>QUARTER OF THE YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 QTR</td>
</tr>
<tr>
<td>SPECIAL NEEDS SURVEY</td>
<td></td>
</tr>
<tr>
<td>1. Survey for citizens with special needs sent to all local residents.</td>
<td></td>
</tr>
<tr>
<td>2. Information received from Special Needs Survey verified and transportation assigned.</td>
<td>*</td>
</tr>
<tr>
<td>3. Listing of citizens with special needs updated, verified -<strong>COMPLETED</strong> listing forwarded to Region I.</td>
<td>*</td>
</tr>
</tbody>
</table>

**BUDGETS:**

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>QUARTER OF THE YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 QTR</td>
</tr>
<tr>
<td>1. RERP Resource Request(s) prepared and forwarded to MEMA Region I by March 31st.</td>
<td></td>
</tr>
</tbody>
</table>

**OTHER:**

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>QUARTER OF THE YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 QTR</td>
</tr>
<tr>
<td>1. Any roadway changes due to maintenance, construction, or other projects reported to Region I.</td>
<td></td>
</tr>
</tbody>
</table>

__________________________
Signature

__________________________
Date
COMMONWEALTH OF MASSACHUSETTS
CONTRACTOR AUTHORIZED SIGNATORY LISTING

CONTRACTOR LEGAL NAME: Town of Gill
CONTRACTOR VENDOR/CUSTOMER CODE: VC 6000191798

INSTRUCTIONS: Any Contractor (other than a sole-proprietor or an Individual contractor) must provide a listing of individuals who are authorized as legal representatives of the Contractor who can sign contracts and other legally binding documents related to the contract on the Contractor’s behalf. In addition to this listing, any state department may require additional proof of authority to sign contracts on behalf of the Contractor, or proof of authenticity of signature (a notarized signature that the Department can use to verify that the signature and date that appear on the Contract or other legal document was actually made by the Contractor’s authorized signatory, and not by a representative, designee or other individual.)

NOTICE: Acceptance of any payment under a Contract or Grant shall operate as a waiver of any defense by the Contractor challenging the existence of a valid Contract due to an alleged lack of actual authority to execute the document by the signatory.

For privacy purposes DO NOT ATTACH any documentation containing personal information, such as bank account numbers, social security numbers, driver’s licenses, home addresses, social security cards or any other personally identifiable information that you do not want released as part of a public record. The Commonwealth reserves the right to publish the names and titles of authorized signatories of contractors.

<table>
<thead>
<tr>
<th>AUTHORIZED SIGNATORY NAME</th>
<th>TITLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ray Burington</td>
<td>Administrative Assistant</td>
</tr>
<tr>
<td>Ann H. Banash</td>
<td>Selectboard Chair</td>
</tr>
<tr>
<td>John R. Ward</td>
<td>Selectboard Clerk</td>
</tr>
<tr>
<td>Randy Crocher</td>
<td>Selectboard Member</td>
</tr>
</tbody>
</table>

I certify that I am the President, Chief Executive Officer, Chief Fiscal Officer, Corporate Clerk or Legal Counsel for the Contractor and as an authorized officer of the Contractor I certify that the names of the individuals identified on this listing are current as of the date of execution below and that these individuals are authorized to sign contracts and other legally binding documents related to contracts with the Commonwealth of Massachusetts on behalf of the Contractor. I understand and agree that the Contractor has a duty to ensure that this listing is immediately updated and communicated to any state department with which the Contractor does business whenever the authorized signatories above retire, are otherwise terminated from the Contractor’s employ, have their responsibilities changed resulting in their no longer being authorized to sign contracts with the Commonwealth or whenever new signatories are designated.

Lynda Haddock-Mayo
Signature
Title: Town Clerk
Telephone: 413 863 8103
Fax: 413 863 7775
Email: townclerk@gillmass.org

[Listing can not be accepted without all of this information completed.]
A copy of this listing must be attached to the “record copy” of a contract filed with the department.
COMMONWEALTH OF MASSACHUSETTS
CONTRACTOR AUTHORIZED SIGNATORY LISTING

CONTRACTOR LEGAL NAME: Town of Gill
CONTRACTOR VENDOR/CUSTOMER CODE: VC 600191798

PROOF OF AUTHENTICATION OF SIGNATURE

This page is optional and is available for a department to authenticate contract signatures.
It is recommended that Departments obtain authentication of signature for the signatory
who submits the Contractor Authorized Listing.

This Section MUST be completed by the Contractor Authorized Signatory in presence of notary.

Signatory's full legal name (print or type): RAY PURINGTON
Title: Administrative Assistant

X
Signature as it will appear on contract or other document (Complete only in presence of notary):

AUTHENTICATED BY NOTARY OR CORPORATE CLERK (PICK ONLY ONE) AS FOLLOWS:

I, ______________________________________________________ (NOTARY) as a notary public certify that I witnessed
the signature of the aforementioned signatory above and I verified the individual’s identity on this date:
________________________________________, 20____.

My commission expires on:

AFFIX NOTARY SEAL

I, Lynda Koehden Mayo ______________________________________ (CORPORATE CLERK) certify that I witnessed the
signature of the aforementioned signatory above, that I verified the individual’s identity and confirm the individual’s
authority as an authorized signatory for the Contractor on this date:
November __, 2012.

AFFIX CORPORATE SEAL
SEWER ABATEMENT REQUEST FORM (Revised 10/5/10)

If the usage figures are believed to be incorrect for the current billing cycle, an abatement form must be filled out, signed, and dated to allow the Town to respond and consider the request. The bill must be paid before any abatement will be considered.

Sewer Bill Date: 9/11/12  Sewer Bill #: 760

(Abatement requests must be in writing to the Sewer Commissioners within 30 days of the bill date.)

Dear Sewer Commissioners: I am requesting abatement of my sewer bill for the noted reason(s).

☒ Metered water used for filling swimming pools or spas (complete chart below)
  (Abatement shall not be granted if calculated amount is less than $10.00)

☐ Inaccurate readings (must be confirmed by Water Commissioners)

☐ Excessive reading due to broken water pipes (must prove that excess water did not enter sewer system)

☐ Other (explain below)

Explanation:


Usage History:

<table>
<thead>
<tr>
<th>Date</th>
<th>&quot;A&quot; Meter Reading Before (Cu. Ft.)</th>
<th>&quot;B&quot; Meter Reading After (Cu. Ft.)</th>
<th>&quot;C&quot; ( (B - A) )</th>
<th>&quot;D&quot; Sewer Rate (from bill) $/cu. ft.</th>
<th>$ Requested for Abatement ((C \times D))</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example</td>
<td>07574</td>
<td>07343</td>
<td>69</td>
<td>.0850</td>
<td>5.86</td>
</tr>
<tr>
<td>6/18/12</td>
<td>7965</td>
<td>8064</td>
<td>99</td>
<td>8.42</td>
<td></td>
</tr>
<tr>
<td>7/22/12</td>
<td>8844</td>
<td>8928</td>
<td>84</td>
<td>7.14</td>
<td></td>
</tr>
<tr>
<td>8/8/12</td>
<td>9837</td>
<td>9837</td>
<td>0</td>
<td>5.81</td>
<td></td>
</tr>
</tbody>
</table>

Total requested: $2142

Continued on second page
SEWER ABATEMENT REQUEST FORM, page 2

Account # (from bill) 12345

Name

Telephone 555-5555

Meter location if different from above address

Address

478 Old Main

City, State, Zip Code

PO Box 786, Turners Falls, MA 01376

Submit this completed form to the Tax Collector

Date received by Tax Collector 10/28/112

Abatement deadline (90 days from receipt)

Sewer bill is paid & no outstanding sewer charges? (YES) NO

Tax Collector signature

THERESA M. GILL

Date

10/28/112

Denied

Sewer Commissioners

Approved X
October 17, 2012

Ray Purington, Administrative Assistant
Town of Gill
325 Main Road
Gill, MA 01354

Dear Mr. Purington,

The Franklin County Regional Housing and Redevelopment Authority (HRA) are administering the 2012 Erving (lead), Colrain, Deerfield and Gill Community Development Block Grant, Housing Rehabilitation Program.

Per the Citizen Participation Plan (copy enclosed), a four member Citizen Advisory Committee (CAC) is required to provide oversight of the program. Per the citizen participation plan attached, it is required that we have one member from each of the four participating towns. It is encouraged that at least one of CAC members is low/moderate income (see chart attached). The appointed members will receive quarterly progress reports and be invited to attend any future public hearings and/or informational meetings that update residents about the program during the grant cycle.

Please feel free to copy the enclosed packet to disburse to interested representatives. We are asking for this appointment to happen as soon as possible. If you have any questions please call me at (413) 863-9781 ext. 121 or Bruce Hunter, Acting Director of Community Development at ext. 133.

Thank you.

Sincerely,

[Signature]

Deb Little
CD Program Manager