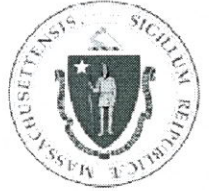




***Capital Improvements Planning Committee
(CIPC)***



FY 17

Capital Budget

Submissions



***Capital Improvements Planning Committee
(CIPC)***



FY 17

Capital Budget

Submission

DPW



**TOWN OF PAXTON
DEPARTMENT OF PUBLIC WORKS**

107 Holden Road, Paxton, MA 01612
(508) 753-9077 Fax: (508) 753-6155

TO : Capital Improvement Committee

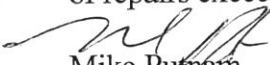
FROM: Mike Putnam
DPW Superintendent

DATE : January 29, 2016

RE : FY 17 Capital Items – DPW truck

The DPW is looking to replace an existing 2006 Ford F-350 pickup truck with a newer version. The existing pickup has 102,000 miles and 5,100 hours on it. It has considerable rust especially under the cab and pick-up body. It is to the point where the body may need to be replaced. Due to mileage and age, the vehicle is out of warranty which translates to higher repair costs. This vehicle is used for many functions within the department including snowplowing. It is also a support vehicle used to transport equipment to and from job sites.

Reliability and dependability of equipment is crucial for the department to function safely and effectively. It would be more economical to replace this vehicle now before the cost of repairs exceeds its value or worth.


Mike Putnam
DPW Superintendent

Town of Paxton
FORM B
CAPITAL IMPROVEMENTS REQUEST
(Excluding equipment)

Department and Activity: <u>DPW</u>		Date Prepared: <u>1/29/16</u>
Contact Person: <u>MIKE POTNAM</u>		Phone Number: <u>508-753-9079</u>
1. Project Title: <u>DPW TRUCK</u>	2. Purpose of Project Request Form (Check One)	
3. Department Priority:	<input type="checkbox"/> Add a new item to the program <input type="checkbox"/> Delete an item in a year already a part of the program <input type="checkbox"/> Modify a project already in the adopted program	
4. Location: <u>DPW</u>		
5. Description: <u>REPLACE 2006 F-350 PICKUP TRUCK WITH SNOW PLOW</u> <u>PURCHASE/LEASE NEW TRUCK WITH UTILITY BODY AND SNOW PLOW</u>		
6. Justification & Useful Life: <u>10 YEARS</u>		
7. Cost & Recommended Sources of Financing:		
<u>BUDGET FY</u>	<u>TOTAL*</u>	<u>RECOMMENDED SOURCES OF FINANCING</u>
Program year FY	_____	<u>PURCHASE / LEASE</u>
Program year FY	_____	_____
Program year FY	_____	_____
Program year FY	_____	_____
Program year FY	_____	_____
Program year FY	_____	_____
TOTAL SIX YEARS	_____	_____
After Sixth Year	_____	_____
If adjusted for inflation, indicate adjustment percentage here : * Interest cost not included.		
8. Net Effects on Operating Costs (±):		9. Net Effect on Municipal Income (±):
<u>Direct Costs</u> personnel: number _____ \$ amount _____ purchase of service _____ materials & supplies _____ equipment purchases _____ utilities _____ other _____ Subtotal () _____		taxes _____ other income _____ Subtotal _____ gain from sale of replaced assets _____ Total: _____
<u>Indirect Operating Costs</u> fringe benefits _____ general admin. costs _____ other _____ Subtotal () _____ Total Operating Cost _____ Debt Service (P & I) _____ Total Operating Cost _____		10. Submitting Authority:
		Date <u>1/29/16</u> Signature <u>[Signature]</u> Name <u>Michael Potnam</u> Position <u>DPW SUPT.</u>
		11. Reserved

Town of Paxton
FORM C
CAPITAL IMPROVEMENTS REQUEST for EQUIPMENT PURCHASE or MAJOR
RENTAL

Department and Activity: <u>DPW</u>		Date Prepared: <u>1/29/16</u>	
Contact Person: <u>MIKE POTNAM</u>		Phone Number: <u>508-753-9177</u>	

1. Project Title & Reference Number: 2. Form of Acquisition (check appropriate): <input checked="" type="checkbox"/> Purchase / <u>LEASE</u> <input type="checkbox"/> Rental	4. Cost: <table style="width: 100%;"> <tr> <th style="width: 60%;"></th> <th style="width: 20%;">Per Unit</th> <th style="width: 20%;">Total</th> </tr> <tr> <td>Purchase or annual rental</td> <td>\$</td> <td>\$ <u>55,000</u></td> </tr> <tr> <td>Plus: Installation or other costs</td> <td>\$</td> <td>\$</td> </tr> <tr> <td>Less: Trade in or other discount</td> <td>\$</td> <td>\$ <u>5,000</u></td> </tr> <tr> <td>Net purchase cost or annual rental</td> <td>\$</td> <td>\$ <u>50,000</u></td> </tr> </table>		Per Unit	Total	Purchase or annual rental	\$	\$ <u>55,000</u>	Plus: Installation or other costs	\$	\$	Less: Trade in or other discount	\$	\$ <u>5,000</u>	Net purchase cost or annual rental	\$	\$ <u>50,000</u>
	Per Unit	Total														
Purchase or annual rental	\$	\$ <u>55,000</u>														
Plus: Installation or other costs	\$	\$														
Less: Trade in or other discount	\$	\$ <u>5,000</u>														
Net purchase cost or annual rental	\$	\$ <u>50,000</u>														
3. Number of Units Requested: <u>1</u>	6. Number of Similar Items in Inventory: <u>1</u>															
5. Purpose of Expenditure (check appropriate): <input checked="" type="checkbox"/> Schedule replacement <input type="checkbox"/> Present Equipment obsolete <input checked="" type="checkbox"/> Replace worn-out equipment <input type="checkbox"/> Reduce personnel time <input type="checkbox"/> Expanded service <input type="checkbox"/> New operation <input checked="" type="checkbox"/> Increased safety <input type="checkbox"/> Improve procedures, records, etc.	7. Estimated Use of Requested Item(s): Weeks per Year <u>52</u> Approx. months (if seasonal) <u>12</u> For the weeks used, estimate: Average days per week _____ Average hours per day used _____ Estimated useful life in years _____															

8. Replaced item(s):		Prior Year's		
Item	Make & Age	Maintenance Costs	Breakdowns	Rental Costs
A.				
B.				
C.				
D.				
E.				

9. Recommended Disposition of Replacement Item(s):	
<input checked="" type="checkbox"/> Possible use by other agencies <input checked="" type="checkbox"/> Trade-in <input checked="" type="checkbox"/> Sale	Comments:

10. Submitting Authority:	
Signature <u>W.R. Rt</u>	Name <u>Michael Potnam</u>
Position <u>DPW SVPT.</u>	Date <u>1/29/16</u>

11. Reserved



TOWN OF PAXTON
DEPARTMENT OF PUBLIC WORKS

107 Holden Road, Paxton, MA 01612
(508) 753-9077 Fax: (508) 753-6155

TO : Capital Improvement Committee

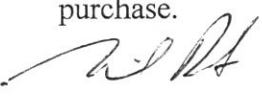
FROM: Mike Putnam
DPW Superintendent

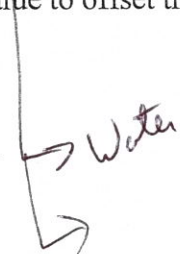
DATE : January 29, 2016

RE : FY 17 Capital Items - Backhoe

The DPW is looking to replace our 2002 John Deere backhoe with a newer version of the same machine. The 2002 backhoe is starting to show its age and has almost 7000 hours on it. Some of the issues with the existing machine are rust under the cab, worn pins and bushings, worn bucket and coupler, and the air conditioning doesn't work due to the fact that all of the lines are rotted out underneath. There are steel hydraulic lines on the backhoe which are not in good shape due to rust and scale. These are very costly to replace. This versatile piece of equipment is used by multiple departments (i.e. highway, water, cemetery, and recreation) all year round. It is also the Town's only piece of equipment for any type of digging or underground excavation. If this piece of equipment was to break down, then we would be forced to rent a machine in its place. This would not only be costly but impractical in the event of an emergency (i.e. water main break).

I am considering using funds from other departments to buy or lease this new backhoe. The existing machine would bring some trade in value to offset the cost of the new purchase.


Mike Putnam
DPW Superintendent



Town of Paxton
FORM B
CAPITAL IMPROVEMENTS REQUEST
(Excluding equipment)

Department and Activity: <u>DPW</u>		Date Prepared: <u>1/29/16</u>
Contact Person: <u>MIKE PUTNAM</u>		Phone Number: <u>508 753-9077</u>
1. Project Title: <u>BACKHOE</u>	2. Purpose of Project Request Form (Check One)	
3. Department Priority:	<input type="checkbox"/> Add a new item to the program <input type="checkbox"/> Delete an item in a year already a part of the program <input type="checkbox"/> Modify a project already in the adopted program	
4. Location: <u>DPW</u>		
5. Description: <u>BACKHOE WITH ATTACHMENTS</u>		
6. Justification & Useful Life: <u>EXISTING MACHINE NEEDS REPAIRS, WEAR & TEAR.</u>		
7. Cost & Recommended Sources of Financing:		
<u>BUDGET FY</u>	<u>TOTAL*</u>	<u>RECOMMENDED SOURCES OF FINANCING</u>
Program year FY 17	<u>20,429</u>	<u>LEASE PAID BY WATER, CEMETERY, HIGHWAY</u>
Program year FY 18	<u>20,429</u>	<u>Recreation</u>
Program year FY 19	<u>20,429</u>	
Program year FY 20	<u>20,429</u>	
Program year FY 21	<u>20,429</u>	
Program year FY 22	<u>20,429</u>	
TOTAL SIX YEARS	<u>20,429</u>	
After Sixth Year <u>FY23</u>		
If adjusted for inflation, indicate adjustment percentage here : * Interest cost not included.		
8. Net Effects on Operating Costs (±):		9. Net Effect on Municipal Income (±):
<u>Direct Costs</u> personnel: number _____ \$ amount _____ purchase of service _____ materials & supplies _____ equipment purchases _____ utilities _____ other _____ Subtotal () _____		taxes _____ other income _____ Subtotal _____ gain from sale of replaced assets _____ Total: _____
<u>Indirect Operating Costs</u> fringe benefits _____ general admin. costs _____ other _____ Subtotal () _____ Total Operating Cost _____ Debt Service (P & I) _____ Total Operating Cost _____		10. Submitting Authority:
		Date <u>1/29/16</u> Signature <u>[Signature]</u> Name <u>Michael Putnam</u> Position <u>DPW Supt.</u>
		11. Reserved

Town of Paxton
FORM C
CAPITAL IMPROVEMENTS REQUEST for EQUIPMENT PURCHASE or MAJOR
RENTAL

Department and Activity: <u>DPW</u>		Date Prepared: <u>1/29/16</u>	
Contact Person: <u>MIKE POTVIN</u>		Phone Number: <u>508-753-9077</u>	
1. Project Title & Reference Number: <u>BACKHOE</u>		4. Cost:	
2. Form of Acquisition (check appropriate): <input type="checkbox"/> Purchase <u>LEASE</u> <input type="checkbox"/> Rental		Per Unit	Total
		Purchase or annual rental	\$ <u>143,000</u>
3. Number of Units Requested: <u>1</u>		Plus: Installation or other costs	\$
5. Purpose of Expenditure (check appropriate): <input checked="" type="checkbox"/> Schedule replacement <input type="checkbox"/> Present Equipment obsolete <input checked="" type="checkbox"/> Replace worn-out equipment <input type="checkbox"/> Reduce personnel time <input type="checkbox"/> Expanded service <input type="checkbox"/> New operation <input checked="" type="checkbox"/> Increased safety <input type="checkbox"/> Improve procedures, records, etc.		Less: Trade in or other discount (POSSIBLE)	\$ <u>25,000</u>
		Net purchase cost or annual rental	\$ <u>118,000</u>
		6. Number of Similar Items in Inventory: <u>1</u>	
		7. Estimated Use of Requested Item(s): Weeks per Year <u>52</u> Approx. months (if seasonal) <u>12</u> For the weeks used, estimate: Average days per week _____ Average hours per day used _____ Estimated useful life in years _____	
8. Replaced item(s):		Prior Year's	
Item	Make & Age	Maintenance Costs	Breakdowns
A.			
B.			
C.			
D.			
E.			
9. Recommended Disposition of Replacement Item(s): <input type="checkbox"/> Possible use by other agencies <input checked="" type="checkbox"/> Trade-in <input type="checkbox"/> Sale Comments:			
10. Submitting Authority:			
Signature: <u>[Signature]</u>		Name: <u>Michael Potvin</u>	
Position: <u>DPW Supt.</u>		Date: <u>1/29/16</u>	
11. Reserved			



***Capital Improvements Planning Committee
(CIPC)***



FY 17

Capital Budget

Submission

FIRE/EMS

(~~used by the Trade Center~~)
40K

Town of Paxton

FORM C

CAPITAL IMPROVEMENTS REQUEST for EQUIPMENT PURCHASE or MAJOR
RENTAL

Department and Activity: Paxton Fire Department		Date Prepared: 12/19/2015	
Contact Person: Chief Conte		Phone Number: 508-793-3161	

1. Project Title & Reference Number: 2. Form of Acquisition (check appropriate): <input checked="" type="checkbox"/> Purchase <input type="checkbox"/> Rental	4. Cost: <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center;">Per Unit</th> <th style="width: 20%; text-align: center;">Total</th> </tr> <tr> <td>Purchase or annual rental</td> <td style="text-align: right;">\$ 370,000.00</td> <td style="text-align: right;">\$ 370,000.00</td> </tr> <tr> <td>Plus: Installation or other costs</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">\$</td> </tr> <tr> <td>Less: Trade in or other discount</td> <td style="text-align: right;">\$ 20,000.00</td> <td style="text-align: right;">\$ 20,000.00</td> </tr> <tr> <td>Net purchase cost or annual rental</td> <td style="text-align: right;">\$ 350,000.00</td> <td style="text-align: right;">\$ 350,000.00</td> </tr> </table>		Per Unit	Total	Purchase or annual rental	\$ 370,000.00	\$ 370,000.00	Plus: Installation or other costs	\$	\$	Less: Trade in or other discount	\$ 20,000.00	\$ 20,000.00	Net purchase cost or annual rental	\$ 350,000.00	\$ 350,000.00
	Per Unit	Total														
Purchase or annual rental	\$ 370,000.00	\$ 370,000.00														
Plus: Installation or other costs	\$	\$														
Less: Trade in or other discount	\$ 20,000.00	\$ 20,000.00														
Net purchase cost or annual rental	\$ 350,000.00	\$ 350,000.00														
3. Number of Units Requested: 1	6. Number of Similar Items in Inventory: none															
5. Purpose of Expenditure (check appropriate): <input checked="" type="checkbox"/> Schedule replacement <input checked="" type="checkbox"/> Present Equipment obsolete <input checked="" type="checkbox"/> Replace worn-out equipment <input type="checkbox"/> Reduce personnel time <input type="checkbox"/> Expanded service <input type="checkbox"/> New operation <input checked="" type="checkbox"/> Increased safety <input type="checkbox"/> Improve procedures, records, etc. FEMA Grant funds only \$250,000.00 Town share needed is \$100,000.00 <div style="color: red; font-weight: bold;">\$100K</div>	7. Estimated Use of Requested Item(s): Weeks per Year _____ Approx. months (if seasonal) _____ For the weeks used, estimate: Average days per week _____ Average hours per day used _____ Estimated useful life in years <u>20</u> <div style="float: right; text-align: right;">*only for fires and training</div>															

8. Replaced item(s):		Prior Year's		
Item	Make & Age	Maintenance Costs	Breakdowns	Rental Costs
A. Tanker truck	GMC 1987	ATTACHED		
B.				
C.				
D.				
E.				

9. Recommended Disposition of Replacement Item(s):	
<input type="checkbox"/> Possible use by other agencies <input checked="" type="checkbox"/> Trade-in <input type="checkbox"/> Sale	Comments:

10. Submitting Authority:	
Signature <u>Jay J. Conte</u> Position <u>Fire Chief</u>	Name <u>Jay J. Conte</u> Date <u>12/18/2015</u>

11. Reserved



Jay J. Conte
Chief of Department

Paxton Fire Department

576 Pleasant Street
Paxton, Massachusetts 01612

12/22/15

To: Town of Paxton Capital Improvement Committee

From: Chief Jay J Conte, Paxton Fire Department

Re: Replacement of 1987 GMC Tanker Truck

Honorable Committee,

The Fire Department is in serious need of updating the Tanker Truck. The 1987 GMC which was purchased new by the Fire Department is going to be 30 Years old this coming year, it has out lasted its projected lifespan of 20 years. Without replacement with a new Tanker Truck the Paxton Fire Department and the Town of Paxton could suffer a huge set back in the delivery of water for fire protection to its residents. Right now the Fire Department is able to respond to calls in Paxton outside of the hydrant district and provide enough water to start extinguishing the fire within an acceptable amount of time. Without a reliable Tanker Truck we would not be able to accomplish this, delaying water necessary to fight fires, saving property and lives.

When this truck goes out of service, we then have to rely on the Tankers from other towns which take up to 20 Minutes to respond to Paxton. A replacement Tanker Truck would benefit the Town by providing a reliable and safe vehicle to operate. Please help us to keep safe the residents of Paxton by supporting our request to purchase a new Tanker Truck.

Respectfully Submitted,

Chief Conte

Town of Paxton
FORM C
CAPITAL IMPROVEMENTS REQUEST for EQUIPMENT PURCHASE or MAJOR
RENTAL

Department and Activity: Paxton Fire Department		Date Prepared: 12/16/2015																
Contact Person: Jay Conte		Phone Number: 508-793-3161																
1. Project Title & Reference Number: 2. Form of Acquisition (check appropriate): <input checked="" type="checkbox"/> Purchase <input type="checkbox"/> Rental	4. Cost: <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 60%;"></th> <th style="width: 20%; text-align: center;">Per Unit</th> <th style="width: 20%; text-align: center;">Total</th> </tr> <tr> <td>Purchase or annual rental</td> <td style="text-align: center;">\$ 47,000</td> <td style="text-align: center;">\$ 47,000</td> </tr> <tr> <td>Plus: Installation or other costs</td> <td style="text-align: center;">\$</td> <td style="text-align: center;">\$</td> </tr> <tr> <td>Less: Trade in or other discount</td> <td style="text-align: center;">\$ N/A</td> <td style="text-align: center;">\$ N/A</td> </tr> <tr> <td>Net purchase cost or annual rental</td> <td style="text-align: center;">\$ 47,000</td> <td style="text-align: center;">\$ 47,000</td> </tr> </table>				Per Unit	Total	Purchase or annual rental	\$ 47,000	\$ 47,000	Plus: Installation or other costs	\$	\$	Less: Trade in or other discount	\$ N/A	\$ N/A	Net purchase cost or annual rental	\$ 47,000	\$ 47,000
	Per Unit	Total																
Purchase or annual rental	\$ 47,000	\$ 47,000																
Plus: Installation or other costs	\$	\$																
Less: Trade in or other discount	\$ N/A	\$ N/A																
Net purchase cost or annual rental	\$ 47,000	\$ 47,000																
3. Number of Units Requested: 1	6. Number of Similar Items in Inventory: none																	
5. Purpose of Expenditure (check appropriate): <input checked="" type="checkbox"/> Schedule replacement <input type="checkbox"/> Present Equipment obsolete <input type="checkbox"/> Replace worn-out equipment <input type="checkbox"/> Reduce personnel time <input type="checkbox"/> Expanded service <input type="checkbox"/> New operation <input checked="" type="checkbox"/> Increased safety <input type="checkbox"/> Improve procedures, records, etc. Vehicle mileage 99,000 costing too much to maintain																		
7. Estimated Use of Requested Item(s): Weeks per Year <u>52</u> Approx. months (if seasonal) _____ For the weeks used, estimate: Average days per week <u>7</u> Average hours per day used <u>2</u> Estimated useful life in years <u>10</u>																		
8. Replaced item(s):																		
Prior Year's																		
Item	Make & Age	Maintenance Costs	Breakdowns Rental Costs															
A. Car 1 (command car)	Chevrolet Tahoe -10	Attached																
B. *This vehicle was donated to the Paxton Fire Department with 78,000 miles For the sum of																		
C.																		
D.																		
E.																		
9. Recommended Disposition of Replacement Item(s): <input checked="" type="checkbox"/> Possible use by other agencies <input type="checkbox"/> Trade-in <input type="checkbox"/> Sale Comments: Keep for inspections																		
10. Submitting Authority: Signature <u>Jay J. Conte</u> Name <u>Jay J. Conte</u> Position <u>Fire Chief</u> Date <u>12/16/2015</u>																		
11. Reserved																		

\$47K

QUOTE

Attn. Captain Michael Pingitore
Town of Paxton Fire Dept.

576 Pleasant Street

Paxton, Ma. 01612

Tel. 508-793-3170

Email pingpffa@gmail.com

Salesperson

Job

Payment Terms

Jeff Calder

Fleet/

Due upon receipt

Line Total


[illegible]

\$

Make all checks payable to Mirak Automotive Group.

Thank you for your business!

1125 Massachusetts Ave / Arlington, MA 02476 / ph: 781-643-8000

FY14		
A-2		
10/13	\$35.60 Mount Tires	
1/14	\$135.60 GOF	
1/14	\$425.00 Lettering	
6/14	\$160.04 Stretcher	
6/14	\$54.00 Balance tires	
6/14	\$1,196.86 Turbo	
	<u>\$2,007.10</u>	
		
A-1		
8/13	\$36.96 Locks	
8/13	\$725.00 Lettering	
9/13	\$117.03 Steering Damper	
10/13	\$150.00 Reprog. CMED Radio	
11/13	\$29.00 Inspection	
11/13	\$359.15 Spring Shackle	
12/13	\$11.99 Wiper Blades	
5/14	\$245.51 Wiper Blades	
5/14	\$9.49 Bulb	
6/14	\$22.00 Lens for light bar	
6/14	\$148.98 Stretcher Maintenance	
6/14	\$258.39 Stair Chair Maintenance	
6/14	\$8.96 Bracket	
6/14	\$20.00 Narc Log	
	<u>\$2,142.46</u>	
Station		
9/13	\$658.88 Air Compressor	
10/13	\$765.60 Air Compressor Hose & Fit.	
10/13	\$640.00 Radio Tower Maintenance	
10/13	\$213.58 Snowblower Repair	
11/13	\$142.50 Lawn Mower Repair	
11/13	\$19.93 Fuse Kit	
12/13	\$139.43 Space heater Water Tower	
1/14	\$62.20 Floor Machine hose	
2/14	\$25.50 Snow Blower Diagnosis	
3/14	\$68.97 Tie Downs	
4/14	\$20.24 Air Compressor Belt	
5/14	\$1,500.00 Septic Pump	
5/14	\$7.20 Floor Machine	
6/14	\$8.98 Power Outlet	
6/14	\$161.21 Locker Lock Sets	
	<u>\$4,434.22</u>	
Misc		
*		
L-1		
8/13	\$27.92 Air Lines	
8/13	\$25.34 Air Lines	
8/13	\$15.18 Air Lines	
8/13	\$37.98 Air Lines	
9/13	\$229.20 T/T Radio's	
10/13	\$793.68 GOF	
10/13	\$598.75 Ladder Test	
11/13	\$15.00 Hood Light	
3/14	\$300.00 Repaint Letter	
3/14	\$785.00 Stripping	
4/14	\$29.00 Inspection	
4/14	\$215.00 Decals	
	<u>\$3,072.05</u>	
P-1		
10/13	\$ 139.38 Hydraulic Fluis	
10/13	\$ 195.00 Radio	
10/13	\$ 598.75 Ladder Test	
3/14	\$ 400.00 Letter Repaint	
6/14	\$ 138.75 LED Bulb	
	<u>\$ 1,471.88</u>	
E-1		
3/13	\$229.20 T/T Radios	
10/13	\$598.75 Test Ladders	
10/13	\$854.61 GOF	
2/14	\$52.85 Heater	
3/14	\$475.00 Lettering Repaint	
4/14	\$802.00 Reflective Stripes	
4/14	\$90.00 Decals	
5/14	\$56.00 Engine Valve	
	<u>\$3,158.41</u>	
E-2		
8/13	\$225.20 T/T Radios	
10/13	\$598.75 Test Ladders	
10/13	\$90.00 Inspection	
2/14	\$400.00 Gold Leaf	
3/14	\$200.00 Lettering	
4/14	\$1,285.00 Mobile Radio	
4/14	\$519.00 Radio Inst.	
4/14	\$67.00 MHQ rud	
4/14	\$448.00 Jaw Reels	
6/14	\$90.00 Inspection	
	<u>\$3,922.95</u>	
R1		
10/13	\$ 90.00 Inspection	

Forestry	Equipment	Tahoe
10/13 \$ 90.00 Inspection	10/13 \$974.00 Radios	8/13 \$ 53.48
5/14 \$ 407.12 Batteries	10/13 \$320.00 Portables	10/13 \$ 622.00
\$ 497.12	10/13 \$2,107.00 Radios	11/13 \$ 322.22
	1/14 \$1,098.40 Pager Batteries	12/13 \$ 232.94
	1/14 \$70.00 Pager Batteries	12/13 \$ 18.00
	\$4,569.40	3/14 \$ 117.83
		5/14 \$ 51.32
		6/14 \$ 152.95
		\$ 1,570.74
Trail Blazer	Tanker	
10/13 \$ 173.00 Tires	7/13 \$123.25 Pump Repair	
1/14 \$ 56.72 GOF	10/13 \$90.00 Insp	
6/14 \$ 29.00 Inspection	1/14 \$745.00 Portable Radio	
\$ 258.72	\$958.25	

<div> <div>E-1</div> <div> <div>8/14</div> <div>\$229.25 Install Tires</div> </div> <div> <div>8/14</div> <div>\$993.78 Tires</div> </div> <div> <div>8/14</div> <div>\$134.00 TIC Battery</div> </div> <div> <div>10/14</div> <div>\$70.65 Air Toggle</div> </div> </div> <div> <div>\$1,427.68</div> </div>	<div>E-2</div> <div> <div>6/15</div> <div>\$625.45 Light Tower</div> </div> <div> <div>6/15</div> <div>\$100.00 Inspection</div> </div>
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\$725.45

[illegible]

Paxton Fire Department Capital Purchases of Assets over last 11 Fiscal Years

Town Provided	Private Donations/Grants	
FY 2016	FY 2016	
2016 Ford/Horton Ambulance	2016 Ford/Horton Ambulance (Grant)	\$142,858.00
FY 2012	FY 2012	
29 SCBA		\$456,097.00
Engine 2	2014 KME Engine 2 (Grant)	\$35,000.00
	1986 Pierce Platform (Donation)	\$80,000.00
Defibs and Cardiac Monitors	Defibs and Cardiac Monitors (Grant)	
FY 2011	FY 2011	\$12,000.00
	2007 Chevy Tahoe Chiefs Car (Donation)	
FY 2009	Fy 2009	\$15,000.00
	2006 Chevy Trailblazer Inspector's Car (Donation)	
FY 2008	FY 2008	\$169,000.00
	2008 Ford/Lifeline Ambulance (Holden Hospital Funds/Donations)	
FY 2007		
1999 Ford/Road Rescue Ambulance		
FY 2004	FY 2004	\$125,000.00
2006 Forestry Truck	2006 Forestry Truck (Grant)	
Totals:		<u>\$1,034,955.00</u>

Paxton Fire Department

Short Term and Long Range Capital Plan

Description	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
<i>Short Term Capital Plan</i>						\$145,000						
Fire Fireghter Gear Replacement												
<i>Long Range Capital Plan</i>												
Public Safety Complex												
Replace Forestry Truck									45,000			
Replace Car 4												
Rescue 1		Traded on E-2										
FEMA GRANT Replace Engine 2	456,000	town share	18,500									400,000
SCBA Replacement												
Replace Tanker Truck					370,000	grant app,						
Ladder 10 Year Refurbishment												240,000
FEMA GRANT Ambulance 1 replacemtd		town share	111,000	254,000								
Forestry Truck 10 Year Refurbishment					25,000					800,000		
Replace Engine 1								1,200,000				
Platform 1												
Replace Command Car					47,000							
A-2 2008 Ford Replace Ambulance							275,000	hhfund				
Replace Ladder Truck												1,200,000
Totals	0		129,500	0	442,000	0	275,000	1,200,000	45,000	800,000	0	1,840,000

Chief Conte

From: firegrants@dhs.gov
Sent: Thursday, December 24, 2015 3:57 AM
To: Chiefconte@hotmail.com
Subject: FY 2015 Assistance to Firefighters Grant Program

Congratulations! Your application for the FY 2015 Assistance to Firefighters Grant Program has been received.

Regional Contacts

David F. Parr

Boston

AF6 - Program

617-956-7631

~~NOT Made~~
Sales

~~617-956-7631~~

~~EX-100-1000~~

~~EX-100-1000~~

~~EX-100-1000~~

will a week (the same/daily)

Applicant Information

Applicant Information

EMW-2015-FV-00098

Originally submitted on 12/23/2015 by Jay Conte (Userid: Chief Conte)

Contact Information:

Address: 576 Pleasant Street
 City: Paxton
 State: Massachusetts
 Zip: 01612
 Day Phone: 5087576401
 Evening Phone: 5089813400
 Cell Phone: 5089813400
 Email: Chiefconte@hotmail.com

Application number is EMW-2015-FV-00098

* Organization Name

Paxton Fire Department

* Type of Applicant

Fire Department/Fire District

* **Fire Department/District, nonaffiliated EMS, and Regional applicants**, select type of Jurisdiction
 Served :
 If "Other", please enter the type of Jurisdiction

Town

SAM.gov (System For Award Management)

* What is the legal name of your Entity as it appears in SAM.gov?

Note: This information must match your SAM.gov profile if your organization is using the DUNS number of your Jurisdiction.

Paxton, Town of

* What is the legal business address of your Entity as it appears in SAM.gov?

Note: This information must match your SAM.gov profile if your organization is using the DUNS number of your Jurisdiction.

* Mailing Address 1

576 Pleasant St

Mailing Address 2

* City

Paxton

* State

Massachusetts

* Zip

01612 - 1388

Need help for ZIP+4?

* Employer Identification Number (e.g. 12-3456789)

Note: This information must match your SAM.gov profile.

04-6001262

* Is your organization using the DUNS number of your Jurisdiction?

Yes

I certify that my organization is authorized to use the DUNS number of my Jurisdiction provided in this application. (Required if you selected Yes above)



956703474

Applicant Information

- What is your 9 digit DUNS number?

(call 1-866-705-5711 to get a DUNS number)

If you were issued a 4 digit number (DUNS plus 4) by your Jurisdiction in addition to your 9 digit number please enter it here.

Note: This is only required if you are using your Jurisdiction's DUNS number and have a separate bank account from your Jurisdiction. Leave the field blank if you are using your Jurisdiction's bank account or have your own DUNS number and bank account separate from your Jurisdiction.

- Is your DUNS Number registered in SAM.gov (System for Award Management previously CCR.gov)?

Yes

- I certify that my organization/entity is registered and active at SAM.gov and registration will be renewed annually in compliance with Federal regulations. I acknowledge that the information submitted in this application is accurate, current and consistent with my organization's/entity's SAM.gov record.



Headquarters or Main Station Physical Address

- Physical Address 1

576 Pleasant Street

Physical Address 2

- City

Paxton

- State

Massachusetts

- Zip

01612 - 1388

Need help for ZIP+4?

Mailing Address

- Mailing Address 1

576 Pleasant Street

Mailing Address 2

- City

Paxton

- State

Massachusetts

- Zip

01612 - 1388

Need help for ZIP+4?

Bank Account Information

- The bank account being used is: (Please select one from right)

Maintained by my Jurisdiction

Note: The following banking information must match your SAM.gov profile.

- Type of bank account

Checking

- Bank routing number - 9 digit number on the bottom left hand corner of your check

221172186

- **Your account number**

6500329684

Additional Information

Applicant Information

* For this fiscal year (Federal) is your organization receiving Federal funding from any other grant program that may duplicate the purpose and/or scope of this grant request?

No

* If awarded, will your organization expend more than \$750,000 in Federal funds during your organization's fiscal year? If "Yes", your organization will be required to undergo an A-133 audit. Reasonable costs incurred for an A-133 audit are an eligible expenditure and should be included in the applicant's proposed budget. Please enter audit costs only once under any "Additional Funding" in the "Request Details" section of the application.

No

* Is the applicant delinquent on any Federal debt?

No

If you answered yes to any of the additional questions above, please provide an explanation in the space provided below:

Request Information

1. Select a program for which you are applying. If you are interested in applying under both Vehicle Acquisition and Operations and Safety, and/or regional application **you will need to submit separate applications..**

Program Name

Vehicle Acquisition

2. Will this grant benefit more than one organization?

Yes

If you answered "Yes" to Question 2, please explain how this request benefits other organizations below:

Paxton is surrounded by rural towns in the hills of Worcester County, Massachusetts. Many of these towns do not have municipal water systems, either for the whole town, or portions of the town. Paxton is constantly providing a mutual aid tanker to help with structure fires and brush fires in these towns.

3. Enter grant-writing fee associated with the preparation of this request. Enter 0 if there is no fee.

\$0

* 4. Are you requesting a Micro Grant?

A Micro Grant is limited to \$25,000 Federal share. Modification to Facilities activity is ineligible for Micro Grants.

No

Request Details

The activities for program **Vehicle Acquisition** are listed in the table below.

Item	Total Cost	Additional Funding	Action
Tanker/Tender (maximum 750 gpm pump, minimum 1000 gallon tank)	\$ 370,000	\$ 0	View Details Additional Funding Narrative
Vehicle Inventory			View Vehicle Inventory
Grant-writing fee associated with the preparation of this request.		\$0	

~~\$370,000.00~~

~~\$300,000~~
~~350,000 1K~~

~~Wet side (brr expensio)~~

~~000 Vacuum Tanker~~
~~1K~~

Firefighting Vehicle - Narrative

* Section # 1 Project Description: In the space provided below, include clear and concise details regarding your organization's project's description and budget. This includes providing local statistics to justify the needs of your department and a detailed plan for how your department will implement the proposed project. Further, please describe what you are requesting funding for, including budget descriptions of the major budget items, i.e., personnel, equipment, contracts, etc. *4000 characters

The Paxton Fire Department is currently looking to replace its 1987 GMC Tanker/Tender. This vital piece of firefighting equipment is in need of replacing because the Tanker is aging and it has become increasingly harder to get the Parts and Repairs done. The Town of Paxton depends on this specialized piece of equipment, because only approximately 60% of the town is in the hydrant district. Then we also have to provide Mutual and Automatic Aid to our neighboring Jurisdictions that may not even have hydrants. The Tanker/Tender is constantly being repaired, because of many major safety issues. Most recently we have had to fix airlines for the brakes because the dry rotted under the dash. We have also had to fully replace a hood because we could not find a grill for the truck. The hood itself took several months to find. We cannot currently afford the \$370,000 dollars it would cost to replace the Tanker/Tender because we cannot budget for capital items. The Paxton Fire Department is a combination fire department that runs on **\$240,730 dollars for an annual Fire budget**. The budget is broken down as follows: **Salaries-\$182,580.00, Purchased Services-\$34,100.00** (which includes things such as vehicle and equipment maintenance), Supplies-\$24,050.00 (which includes firefighting supplies, fuel and uniforms). This budget alone would never allow us to purchase such capital items like the Tanker/Tender; this is why all capital purchases have to go before a capital improvement committee, once approved it must then go before the town's board of selectmen, then on to a town meeting to get approval from the taxpayer's. Unfortunately this year the project has not made it beyond the capital improvement committee. With each department in town seeking capital items, each request is weighed carefully, but due to new growth in the tax base being slowed to almost nonexistent it makes real difficult to approve such large capital purchases without raising taxes.

* Section # 2 Cost/Benefit: In the space provided below please explain, as clearly as possible, what will be the benefits your department or your community will realize if the project described is funded (i.e. anticipated savings and/or efficiencies)? Is there a high benefit for the cost incurred? Are the costs reasonable? Provide justification for the budget items relating to the cost of the requested items. *4000 characters

The Cost benefit to funding this project would be tremendous. The replacement Tanker/Tender would allow for the Paxton Fire Department to continue providing effective fire protection coverage to the town of Paxton and other communities that we either share automatic or mutual aid with. The taxpayers would be getting a new, more effective Tanker/Tender for the next several years. Over the course of the next ten years it would cost each individual taxpayer in Paxton \$7.70 for the \$370,000 to replace the 1987 GMC Tanker/Tender. If awarded the grant all monies would go to the purchase of the Tanker/Tender to complete the goals and missions of the Paxton Fire Department. The features on the replacement Tanker/Tender would benefit the tax-payers of Paxton by reducing the response time to Fires outside of the hydrant district, and not having to worry about safety and mechanical failures, with the population of Paxton getting older this in and of itself would be a huge benefit to saving life and property. There is also a savings on maintenance costs given the fact that we are currently facing increasing costs due to the current Tanker/Tender being obsolete. Down time due to maintenance issues would not be such a big worry with a new Tanker/Tender.

* Section # 3 Statement of Effect: How would this award impact the daily operations of your department? How would this award impact your department's ability to protect lives and property in your community? *4000 characters

The procurement of a replacement Tanker/Tender would affect our daily operations by making all calls or runs we would respond to go easier and safer. This vital firefighting tool would be on most of our fire runs and the replacement Tanker/Tender would make it safer for the crews while en route to the scenes and operating at scenes. It would give us the ability to do an effective job by being able to safely get to where we are needed and with more essential water to extinguish the fire. The new Tanker/Tender would also let us function safer without the worry of a bad mechanical failure or a bad safety failure resulting in a serious injury or the possibility of death. The Tanker/Tender would be a big improvement and make early extinguishment and the reduction of damage to property and loss of life possible to the public and to firefighters on fire scenes.

Firefighting Vehicle - Narrative

View Firefighter Vehicle Program

Vehicle Details

*1. What type or class of vehicle will you use the grant funds to purchase?

Tanker/Tender (maximum 750 gpm pump, minimum 1000 gallon tank)

* Please provide a detailed description of the item selected above.

A 3000 gallon Tanker/Tender to replace a 29 year old 200 gallon Tanker/Tender.

*2. Cost: (whole dollar amounts only)

\$ 370000

\$370,000.00

*3. Is the vehicle you propose to buy:

Replacement of an existing apparatus

4. If you are requesting to replace an existing apparatus, what is the mileage of the vehicle being replaced?

6690

*5. Does your organization's procurement policy permit the use of group purchasing plans or purchasing schedules? (e.g., Business Process Outsourcing (BPO), co-op agreements, state contracts, GSA, etc.)

Yes

Do you intend to use a group purchasing plan for this purchase?

Yes

If "No", explain:

*6. If awarded a grant, are the specifications available for immediate release?

No

*7. What is the average age of the vehicles of this type or class in your fleet? (whole number only)

29

8. What is the age of the vehicle being replaced? (whole number only)

29

*9. Do you have a driver-training program equivalent to national or NFPA standards?

Yes

If No, will you develop one prior to receipt of the vehicle per the Notice of Funding Opportunity Announcement (NOFO)?

*10. Are you requesting funding for training specific to the vehicle acquisition? (Funding for requested training should be requested in the Firefighting Vehicle Additional Funding Section).

No

If you are not requesting funding for training, will you obtain the appropriate training through other sources?

Yes

*11. If awarded, will you permanently remove the vehicle to be replaced from your organization's emergency response service?

Yes

Please enter the type and year of manufacture for vehicle being replaced.

1987 GMC 500 GPM/2000 GALLON
TANKER/TENDER

Please enter the VIN (Vehicle Identification Number) for the vehicle you are requesting to replace:

1GDP7D1Y1HV527464

*12. How long have you owned the vehicle you are replacing? (whole number only)

29 Years

*13. If awarded, will you develop and/or enforce standard operating policies/procedures that require: 1) all occupants to use seatbelts, 2) all drivers of the

Yes

grantee's apparatus must adhere to all traffic signs, signals and state traffic regulations?

*14. Will this vehicle be used on Automatic and/or Mutual Aid?

Both

*15. How many vehicles of this type or class are currently in your fleet? (whole number only)

1

*16. How many vehicles of this type or class in your fleet were manufactured prior to 2002? (whole number only)

1

17. Is this a converted vehicle?

No

18. Is your department facing a new risk?

No

19. What is the number of calls the vehicle being replaced supported last calendar year? (whole number only)

150

Close Window

Budget

Budget

<u>Budget Object Class</u>	\$ 0
a. Personnel	\$ 0
b. Fringe Benefits	\$ 0
c. Travel	\$ 0
d. Equipment	\$ 370,000
e. Supplies	\$ 0
f. Contractual	\$ 0
g. Construction	\$ 0
h. Other	\$ 0
i. Indirect Charges	\$ 0
j. State Taxes	\$ 0

Federal and Applicant Share

Federal Share

Applicant Share

Applicant Share of Award (%)

* Non-Federal Resources (The combined Non-Federal Resources must equal the Applicant Share of \$ 17,619)

a. Applicant	\$ 17,619
b. State	\$ 0
c. Local	\$ 0
d. Other Sources	\$ 0

If you entered a value in Other Sources other than zero (0), include your explanation below. You can use this space to provide information on the project, cost share match, or if you have an indirect cost agreement with a federal agency.

Total Budget

\$ 370,000

\$370,000

Assurances and Certifications**FEMA Form SF 424B**

You must read and sign these assurances. These documents contain the Federal requirements attached to all Federal grants including the right of the Federal government to review the grant activity. You should read over the documents to become aware of the requirements. The Assurances and Certifications must be read, signed, and submitted as a part of the application.

Note: Fields marked with an * are required.

O.M.B Control Number 4040-0007

Assurances Non-Construction Programs

Note: Certain of these assurances may not be applicable to your project or program. If you have any questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Section 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. Sections 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination

Assurances and Certifications

provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally-assisted programs. These requirements apply to all interest in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply, as applicable, with provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333), regarding labor standards for federally-assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. Section 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

Signed by **Jay Conte** on **12/23/2015**

Form 20-16C**You must read and sign these assurances.**

Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters and Drug-Free Workplace Requirements.

Note: Fields marked with an * are required.

O.M.B Control Number 1660-0025

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 44 CFR Part 18, "New Restrictions on Lobbying; and 44 CFR Part 17, "Government-wide Debarment and Suspension (Non-procurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Homeland Security (DHS) determines to award the covered transaction, grant, or cooperative agreement.

1. Lobbying

A. As required by the section 1352, Title 31 of the US Code, and implemented at 44 CFR Part 18 for persons (entering) into a grant or cooperative agreement over \$100,000, as defined at 44CFR Part 18, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid by or on behalf of the undersigned to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement and extension, continuation, renewal amendment or modification of any Federal grant or cooperative agreement.

(b) If any other funds than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure of Lobbying Activities", in accordance with its instructions.

(c) The undersigned shall require that the language of this certification be included in the award documents for all the sub awards at all tiers (including sub grants, contracts under grants and cooperative agreements and sub contract(s)) and that all sub recipients shall certify and disclose accordingly.

2. Debarment, Suspension and Other Responsibility Matters (Direct Recipient)

A. As required by Executive Order 12549, Debarment and Suspension, and implemented at 44CFR Part 67, for prospective participants in primary covered transactions, as defined at 44 CFR Part 17, Section 17.510-A, the applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency.

(b) Have not within a three-year period preceding this application been convicted of or had a civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain or perform a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.

Assurances and Certifications

(c) Are not presently indicted for or otherwise criminally or civilly charged by a government entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification: and

(d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

3. Drug-Free Workplace (Grantees other than individuals)

As required by the Drug-Free Workplace Act of 1988, and implemented at 44CFR Part 17, Subpart F, for grantees, as defined at 44 CFR part 17, Sections 17.615 and 17.620:

(A) The applicant certifies that it will continue to provide a drug-free workplace by:

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an on-going drug free awareness program to inform employees about:

- (1) The dangers of drug abuse in the workplace;
- (2) The grantee's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant to be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

- (1) Abide by the terms of the statement and
- (2) Notify the employee in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.

(e) Notifying the agency, in writing within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to the applicable DHS awarding office, i.e. regional office or DHS office.

(f) Taking one of the following actions, against such an employee, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

- (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or
- (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement or other appropriate agency.

(g) Making a good faith effort to continue to maintain a drug free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

Assurances and Certifications

(B) The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance				
Street	City	State	Zip	Action

If your place of performance is different from the physical address provided by you in the Applicant Information, press *Add Place of Performance* button above to ensure that the correct place of performance has been specified. You can add multiple addresses by repeating this process multiple times.

Section 17.630 of the regulations provide that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for DHS funding. States and State agencies may elect to use a Statewide certification.

Signed by **Jay Conte** on 12/23/2015

Assurances and Certifications

FEMA Standard Form LLL

Only complete if applying for a grant for more than \$100,000 and have lobbying activities. See Form 20-16C for lobbying activities definition.



***Capital Improvements Planning Committee
(CIPC)***



FY 17

Capital Budget

Submission

RML



Jeffrey Kent <jeffreyleekent@gmail.com>

RE: Capital Needs

Deborah Bailey <dbailey@cwmars.org>

Wed, Jan 27, 2016 at 3:47 PM

To: "Jeffreyleekent@gmail.com" <Jeffreyleekent@gmail.com>

Cc: Carol Riches <criches@townofpaxton.net>, "Dawson, Patricia F" <Patricia.F.Dawson@saint-gobain.com>, Nick Powlovich <nikopow@charter.net>, William Jones <wfjones1@charter.net>, Kerrie Flynn <kforciuch@yahoo.com>, "clgrin@aol.com" <clgrin@aol.com>, Karen <khputney@yahoo.com>

I am attaching potential capital needs for the library. We are in the process of obtaining quotes for work that needs to be done.

Debbie Bailey

Richards Memorial Library

44 Richards Ave

Paxton, Ma 01612

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Library Capital Plan Needs 2016-17.docx

14K

LIBRARY CAPITAL NEEDS

Deb, Nick and Bill met and reviewed potential capital needs for the next 3-5 years. Considering the fact that we have a slate roof and a brick building, with recent improvement to the chimney, the outside structure appears in decent shape for many years to come.

Thus the focus was on the internals, with the priorities in sequence. For reference we have attached River Energy Consultants Energy Assessment. (Recognize that the cost estimates are very rough approximations and will require multiple quotes.)

THE YOUNG ADULT ROOM -2016-2017 **\$10-12k**

Objective to make the room more attractive, warm, and energy efficient, thus reduce operating expense. Further when completed we can determine if this approach can be utilized throughout the first floor as noted below.

Improve the lighting with new T-8 fluorescent or LED, which will reduce the operating cost.

Insulate the room, caulk the windows, and weather-strip doors in line with the energy assessment, again to reduce operating cost.

New carpet (possibly try the square approach) and paint walls as needed

UPDATE HVAC- 2016-2017 **\$10-25K**

Review HVAC alternatives with a heating engineer. Consider options to repair or replace 15-year-old Boiler with more efficient unit or look at heat pump alternatives, and examine hot water, air-conditioning, etc., as an overall HVAC system. Take the River Energy Consultants recommendations into account, again with objective of saving money due to improved efficiency and less routine repairs.

BALANCE OF FIRST FLOOR UPGRADE -2017-2018 **\$15-25k**

Improve lighting based upon results above

Insulate the room and caulk windows

New carpet

UPGRADE BASEMENT INTO MEETING ROOM-2019 **\$25-50**

Perhaps utilize an architect

Limited kitchen

Shelving

Replace single pane windows