

WS-1

Five Star Equipment
280 Ellicott Road
Orchard Park, NY 11727

5B

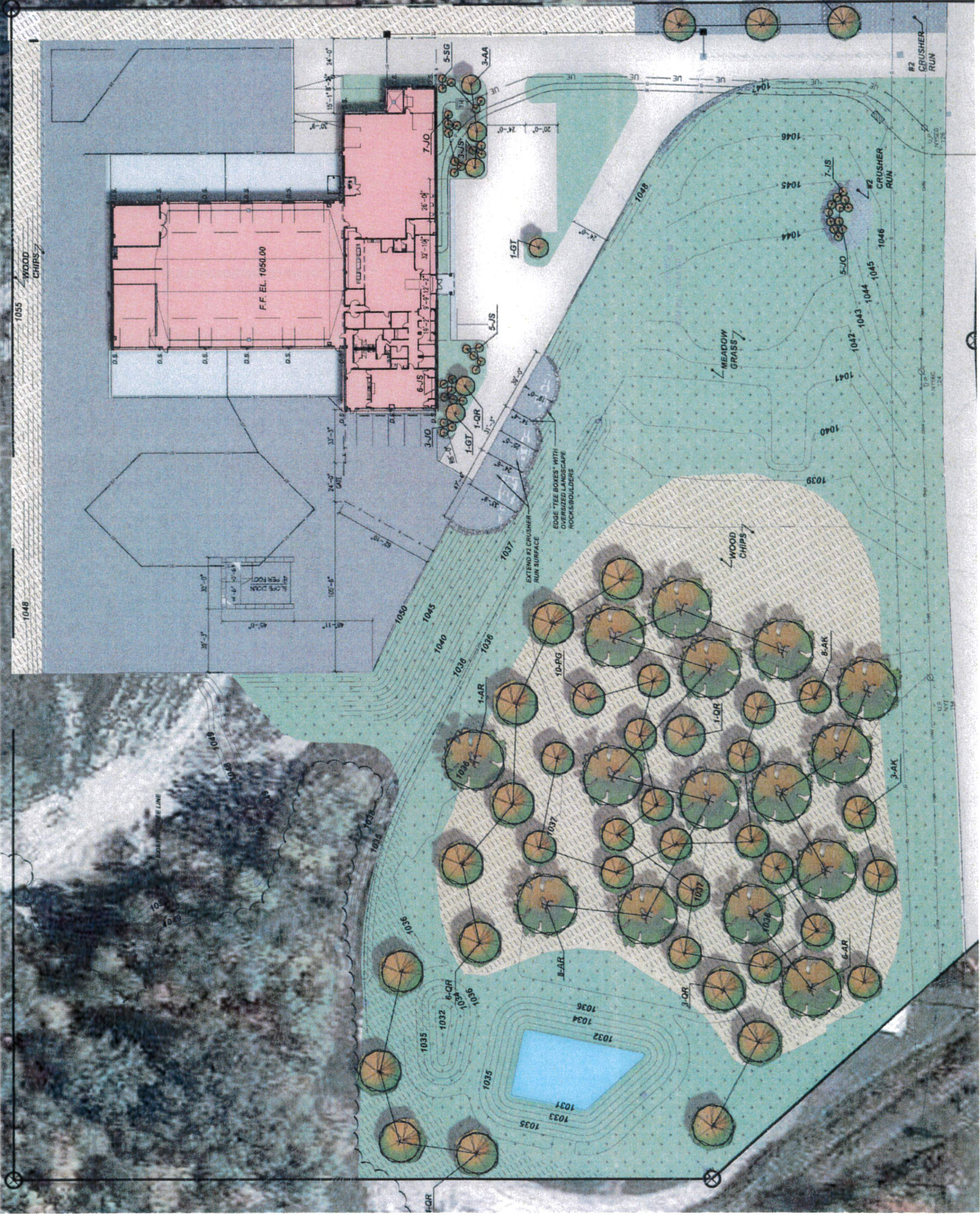
Applicant's Letter of Intent

After undergoing construction and completing roughly 50% of the proposed site work, we are proposing to make some adjustments to the Landscaping Plan, see the drawings attached. The site work completed to date has made it apparent that there is very little topsoil, and an abundant amount of buried brick under the East half of the site. For this reason the soils are not very suitable to new plantings, so we are looking to minimize the work in this area. We are proposing the same tree counts as previously submitted, but locating them mostly to the West half of the site, grouped to mimic the natural forest that exist there. The West half of the site is mostly covered by the existing building, so we are proposing wood chips for ground cover in absence of good soils for vegetation, and also to serve as the forest floor. The East half of the site in front of the building will be seeded with a mix of native grasses.



FONTANESE
FOLTS
AUBRECHT
ERNST
A PROFESSIONAL CORPORATION
ARCHITECTS

6/2018



WS-2



TOWN OF AURORA
OPEN DEVELOPMENT AREA APPLICATION

To Be Completed By Applicant

PETITIONER: Name: Frank M. Corigliano
Address: 172 Whitney Pt.
Cheektowaga NY 14227
Phone: 716-815-2267 x: 716-608-8305
E-Mail: frank@corigliano.com

PROPERTY OWNER (if different from petitioner):

Name: _____
Address: _____ Ph. No. _____

PROJECT ADDRESS: _____
No. Street SBL No.

PROJECT DESCRIPTION: _____

Signature of Applicant: Frank M Corigliano

State of New York) SS:
County of Erie)

On the 11 day of May, in the year 2018, before me, the undersigned, a notary public in and for said state, personally appeared Frank M. Corigliano personally known to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and they by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

Michele M. Toole
Notary Public

MICHELE M. TOOLE
Notary Public, State of New York
No. 01TO6352458
Qualified in Erie County
Commission Expires 12-27-2020

OFFICE USE ONLY:
File #: _____ Number of Lots _____ Total Acreage _____ Zoning _____
Open Development Area Review Application Fee \$ _____
Materials Received by _____
Town Clerk & Fee Paid _____
Accepted by _____ Date _____



TOWN OF AURORA
OPEN DEVELOPMENT AREA APPLICATION

To Be Completed By Applicant

PETITIONER: Name: Christina McKillen
Address: 201 Lorraine Blvd
Los Angeles CA 90004
State Zip
Phone: 3 [redacted]
E Mail: C [redacted] a.com

PROPERTY OWNER (if different from petitioner)

Name _____
Address _____ Ph. No. _____

PROJECT ADDRESS: _____
No. Street SBL No.

PROJECT DESCRIPTION: _____

Signature of Applicant:

State of New York) SS:
County of Erie)

On the 11 day of May, in the year 2018, before me, the undersigned, a notary public in and for said state, personally appeared Christina McKillen personally known to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and they by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted executed the instrument.

Michele M. Toole
Notary Public

MICHELE M. TOOLE
Notary Public, State of New York
No. 01TO6352458
Qualified in Erie County
Commission Expires 12-27-2020

OFFICE USE ONLY:
File #: _____ Number of Lots _____ Total Acreage _____ Zoning _____
Open Development Area Review Application Fee \$ _____
Materials Received by _____
Town Clerk & Fee Paid _____
Accepted by _____ Date _____

TOWN OF AURORA 5 SOUTH GROVE STREET, EAST AURORA, NY 14052
(716) 652-3280 FAX (716) 652-3507 www.townofaurora.com

Karen M. Fabrizi

0 Cook Road
Karen M. Fabrizi

Cook Road
J. J. Brady

Cook Road
D. Fredette

Cook Road
V. J. Faust

440 Cook Road
Stephen J. Dengga III

424 Cook Road
Kristen M. Buchanan

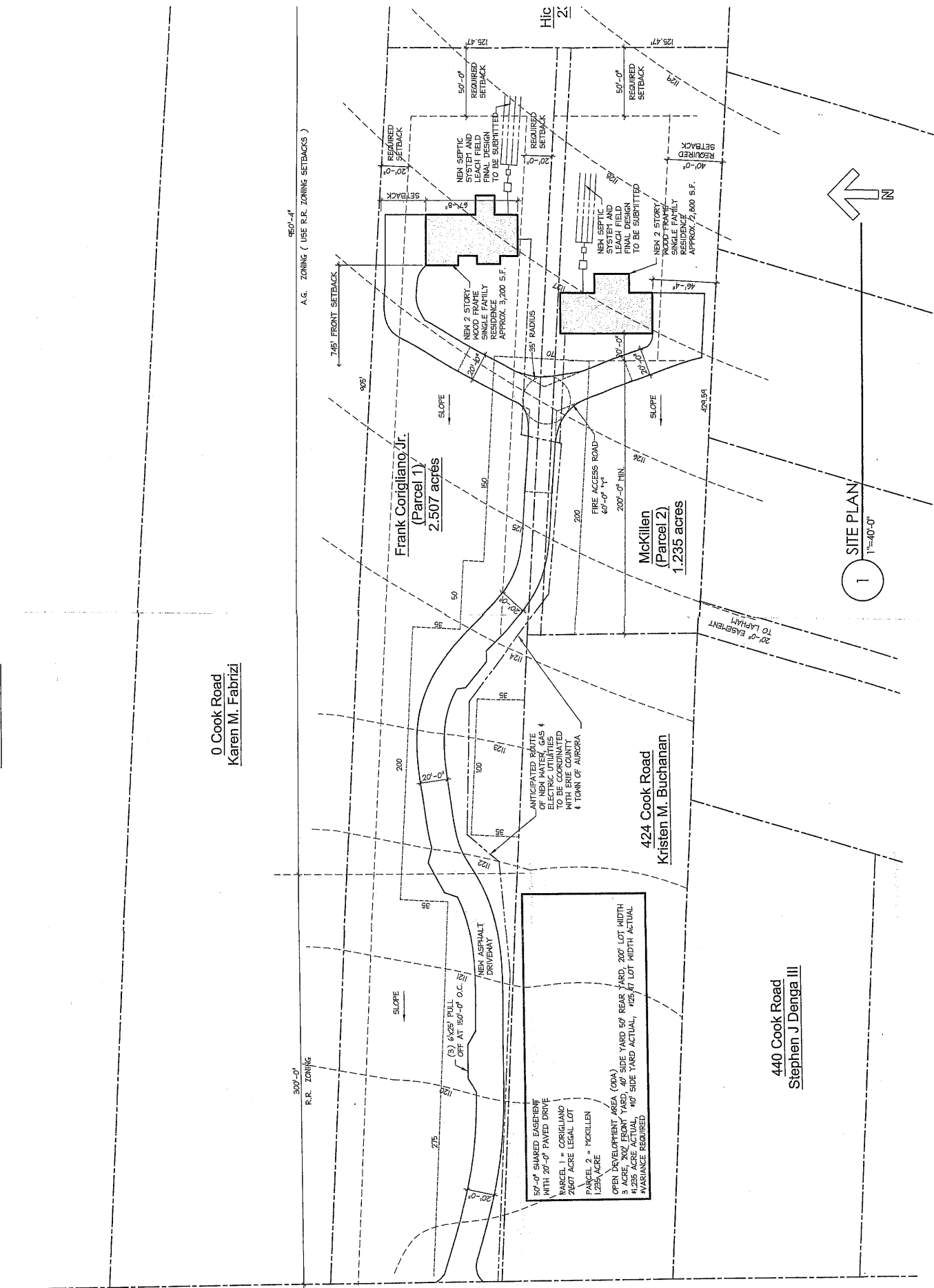
Frank Corigliano, Jr.
(Parcel 1)
2.507 acres

McKillen
(Parcel 2)
1.235 acres

Cook Road
66'-0" WIDE

300'-0" R.R. ZONING

450'-0" A.G. ZONING (USE R.R. ZONING SETBACKS)



WS-3

6D



TOWN OF AURORA
www.townofaurora.com

REQUEST FOR FIREWORKS DISPLAY PERMIT

Ref. NY State Penal Law Article 405.00

Application Date: 6/19/2018

(A) Sponsor of the show

Name: DARLIND B

Address: 75 DAVIDS RD

Phone: 983-1700 Contact Person: LOW BILLITER

Display Company

Company Name: Skylighters of New York, LLC

Address: P.O. Box 1357 Orchard Park, NY 14127

Phone: (716) 903-3291 Contact Person: Matt Shaw

NYS Dept. of Labor Explosives License# D-5799 Expires: 07/2018

Operator-Name of the certified pyrotechnician who will be in charge of the display

Name	Certificate#	Expires
<u>Jay Roll</u>	<u>PR-186</u>	<u>4/19</u>

Authorized Assistants: Names of the individuals, who are authorized by the operator to work on the show, identified by either their certificate number and expiration date, if they are certifies, or by their age and phone number, if they are not certified.

Name	Certificate#/Age	Expires / Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Continue on a separate sheet, if necessary)

I hereby affirm that all authorized who are not certified pyrotechnicians are at least eighteen (18) years old, have been trained in the performance of the tasks assigned and have been educated with regards to safety hazards/

(B) Display Date/Time: 6/30/18 930-1030 Expected Duration: 20 to 30 minutes

(C) Display Location: 75 DAVIS RD

(D) Display Content: 2.5" SHells + Cakes

(E) How will fireworks be stored prior to display: Brought to the site the day of the show

(F) Rain Date for display: N/A

(G) If rained out how will fireworks be stored: Returned to the magazine

(H) For outdoor displays not before a proximate audience, attach a diagram (including all dimensions) of the area where the display will take place, showing locations where the fireworks will be discharged from, the location of and distance to: all the buildings, highways, and other means of transportation, lines of communications, location of the he audiences, spectator viewing areas, parking areas, fallout areas, trees, telephone/utility lines, overhead obstructions or other structures or devices that could be affected by the display or fallout from it.

(I) Proof of Insurance or Bond (Minimum One Million Dollars). Please attach a copy of the policy certificate or other proof of insurance or Bond.

(J) For Indoor displays, displays before a proximate audience, in addition to the information provided above, include a written plan for how you intend to use the pyrotechnics as required by the New York State Penal Law 405.10. That plan shall be submitted at least five days prior to eh performance and included, in addition to all the applicable information listed above for outdoor displays:

- In addition to the State Licenses and Certificates already included in this applications, proof of Federal ATF Licenses if required.
- Proof of experience of the pyrotechnician in charge,
- Proof of experience with the types of devices being used and a description of duties of any authorized assistants,
- Manner and place of storage of the pyrotechnic materials and devices,
- Material Safety Data Sheets(MSDS) for the pyrotechnic materials to be used,
- Certification that set, scenery, and rigging materials are inherently flame-retardant or have been treated to achieve flame retardancy,
- Certification that all materials worn by performers in the fallout area during the use of pyrotechnic effects are inherently flame-retardant or have been treated to achieve flame retardancy,

- For indoor displays attach a diagram of the area where the display will take place, showing location where the fireworks will be discharged from, the location of, and distance to the audience, the location of sprinklers and the fallout radius for each pyrotechnic device used.
- A copy of the approved permit and plan shall be kept on site and available for review,
- Any significant changes to the plan shall be approved prior to the performance.

(K) I attest that the information contained in this permit application is accurate, true and complete to the best of my knowledge, and I understand that false statements, made in this permit application are subject to the applicable versions of the NYS Penal Law.

MATT SHAW
Printed Name of Applicant

903.3291
Phone No

[Signature]
Signature of Applicant

6/19/2018
Date

Submit completed application and attachments to:

Aurora Town Clerk
300 Gleed Avenue
East Aurora, NY 14052

Application must be submitted at least 30 days prior to date of event.

Office Use Only:

Date Received 6/19/18 Application Received By M LIBROCK

Application Reviewed by _____
Name Title Date

Name Title Date

Fire District EAST AURORA

Approved _____ Denied _____ Pending additional information _____

Untitled Map

Write a description for your map.

QUAKER (R204)

Google Earth
©2018 Google



Legend

- Dadaab Refugee Camp
- Feature 1

400ft



PYROTECHNIC DISPLAY AND SERVICES AGREEMENT (AMENDED)

WS-4

This PYROTECHNIC DISPLAY AND SERVICES AGREEMENT (hereinafter referred to as "agreement") and entered into this ___ day of 19th of June, 2018 by and between **SKYLIGHTERS of New York LLC** (herein after referred to as "SELLER") the **Town of Aurora and Village of East Aurora** (herein after referred to as "BUYER").

5A

This is a one year agreement.

1. TIME AND PLACE: POSTPONEMENT/CANCELLATION: SELLER agrees to design, produce and execute a fireworks show, otherwise known as a pyrotechnic display. At approximately 10:00 p.m. on the 3rd day of July 2018 at the following location: Hamlin Park, East Aurora, NY - weather permitting. An alternative inclement weather date is hereby designated to be the 4th day of July 2018 at the same time and place set forth herein above. It is agreed and understood by and between the parties hereto that SELLER shall have the sole, exclusive and final determination of the suitability of the weather conditions at time of the display. In the event SELLER should determine that the weather conditions are such that an unsafe or hazardous condition may exist, SELLER shall have the exclusive right to postpone the starting time of the display and/or delay the display in its entirety until conditions have improved and are appropriate for the safety of all involved or until the inclement weather date as set forth herein above. If for any reason the display cannot be presented at all, 10% of contract is due to Skylighters of New York, LLC.

2. INSURANCE: SELLER agrees to provide a Certificate of Insurance showing SELLER and BUYER to be insured and covered for \$5,000,000 Each Accident; \$5,000,000 General Aggregate; \$5,000,000 products-comp/ops Agg. SELLER will obtain and keep in force Workers Compensation insurance, including employees liability to the full statutory limits. In the event greater liability insurance limits are required, the additional cost will be paid by BUYER. To the fullest extent permitted by law, the SELLER agrees to defend, indemnify and hold harmless the BUYER. The Town of Aurora and Village of East Aurora are additional insured on primary and noncontributing basis. Waiver of subrogation applies.

3. SECURITY/SAFETY: BUYER is responsible for procuring and managing the following: Adequate security personnel; barricades; ropes with flags, etc., to barricade all closed (dangerous) areas to spectators; traffic patrolmen; and as necessary: security guards for crowd control and clean-up personnel to remove litter left by spectators or any persons other than SELLER; trash receptacles as necessary for spectators; "No Parking" signs and directional signs. As necessary: sufficient space (as determined by shell size) for the proper and safe display of said pyrotechnic program. Such space to be clear and free of all persons except those employed by SELLER and clear of any and all equipment, vehicles, structures or items of any other kind not authorized or put in place by SELLER.

4. LICENSES OR PERMITS: BUYER shall be responsible for obtaining, for SELLERS benefit, any State, City or local licenses or permits required to execute the pyrotechnic display contemplated herein. SELLER shall provide BUYER with any necessary information, proof of insurance or other items required by the licensing/permitting authority for issuance of such licenses for permits.

5. COMPENSATION: Compensation shall be made to the SELLER hereunder as follows:


\$3,000.00 at the signing of this agreement due no later than the 1st day of May, 2018, with the balance of \$9,200.00 due on or before the 3rd day of July, 2018. The total amount of this contract is

\$12,200.00 If for any reason other than is addressed hereinabove the BUYER wishes to cancel this Agreement, there will be a cancellation fee in the amount of fifty percent of the total contract price for the cancellation of a one-year contract to be paid to or retained by SELLER. Any applicable state or local taxes will be payable by the BUYER.

6. Should the setup of the display require a multi-day setup, it is up to the BUYER to provide overnight security for the display site.

THIS CONTRACT IS BINDING ONLY AFTER IT HAS BEEN SIGNED BY ALL PARTIES HERETO AND RETURNED TO THE SELLER WITH THE REQUIRED DEPOSIT AS SET FORTH HEREINABOVE.

Skylighters of New York LLC - "SELLER"

BY: 
Matthew Shaw Member

DATE: 6/19/2018

Town of Aurora - "BUYER"

BY: _____
Supervisor

DATE: _____

Village of East Aurora - "BUYER"

BY: _____
Mayor

DATE: _____

Application # _____

	Fee	Paid	Refund
Application Fee	\$25.	—	—
Permit Fee	\$15.	—	—
Security Deposit	\$200.	—	—
Per Day Event Fee	\$200.	—	—

WS-5

Application For Temporary Use Permit

Neil and Barb Chur Equestrian Park, Soccer Field and/or Polo
At Knox Farm State Park

GB

Submit applications to:
Town of Aurora Parks and Recreation
300 Gleed Ave
East Aurora, NY 14052
Telephone (716) 652-8866 Fax: (716) 652-5646

All requests must be made no less than 60 days in advance of event/use.

- Name of Organization: Up and Over Dog Sports
- Individual Responsible for this request: Mike Wolff & Lynn Broderick
- Address: 1816 Olean Rd
South Wales NY 14139
- Telephone number: 716-655-0862
- Fax: 716-655-0862
- Email Address: upandoverdogsports@roadrunner.com
- Date(s) of event: Aug 2 setup after 3pm - Aug 5
- Hours of use including set up/take down: Start 7:00 am/pm End 7:00 am/pm
- Description of the event or use:
Dog Agility Trial

- Specific area(s) requested, map attached
 Soccer
 Polo Field
 Equestrian Park
 Other: _____
- Specific equipment to be brought in to park (porta johns, tents, etc.) Porta Johns, tents, agility equipment, snow fencing tied to split rail fence
- Need: Water Electric
- Estimated attendance: 60

14. Will food or drinks be served? Yes If yes, describe: Free snacks for workers volunteers

15. Will there be sound amplification or music or a band(s)? no If yes, describe:

16. Other services requested (describe): Rv camping over night (no hookups),
Garbage cans from town

Police

Parks and Recreation Department

17. Do you intend to use the main part of Knox Farm State Park between Buffalo Rd, Williardshire Rd and Knox Rd? no If yes, you must request a permit from NYS Parks and Recreation. Contact their office at 716-549-1802.

(Provide drawings describing location, size and text of all proposed signs for this event to the Town of Aurora Building Department, 300 Glead Ave. Approved signs may be erected 30 days prior to the event and must be removed immediately after same.)

I make this application and agree to abide by the Guidelines for Use of Barb and Neil Chur Equestrian Park, Soccer Fields and/or Polo Field


Signature of Applicant

5/1/18
Date

Official Use Only Below this Line-----

Event: _____

Attachments submitted:

_____ Indemnification Agreement

_____ Certificate of Insurance

_____ Map with area(s) requested to be used indicated

_____ Copy of application for sign permit, if applicable. (Upon application approval, copy of approved sign permit must be filed with the Town Clerk NO LATER THAN 5 days prior to scheduled event.)

_____ Copy of this application to NYS Parks and Recreation c/o Evangola State Park

Application Recommended or Not recommended
by Department of Parks and Recreation

Action by Town Board:

The Town Board, upon review of the application request #_____ submitted by _____(organization or individual) took the following action, with or without conditions (as applicable) and noted below:

Approved: _____ Date: _____
Supervisor Signature

Denied: _____ Date: _____
Supervisor Signature

Conditions:

_____ Police Department approval

_____ Highway approval

_____ Building Department approval

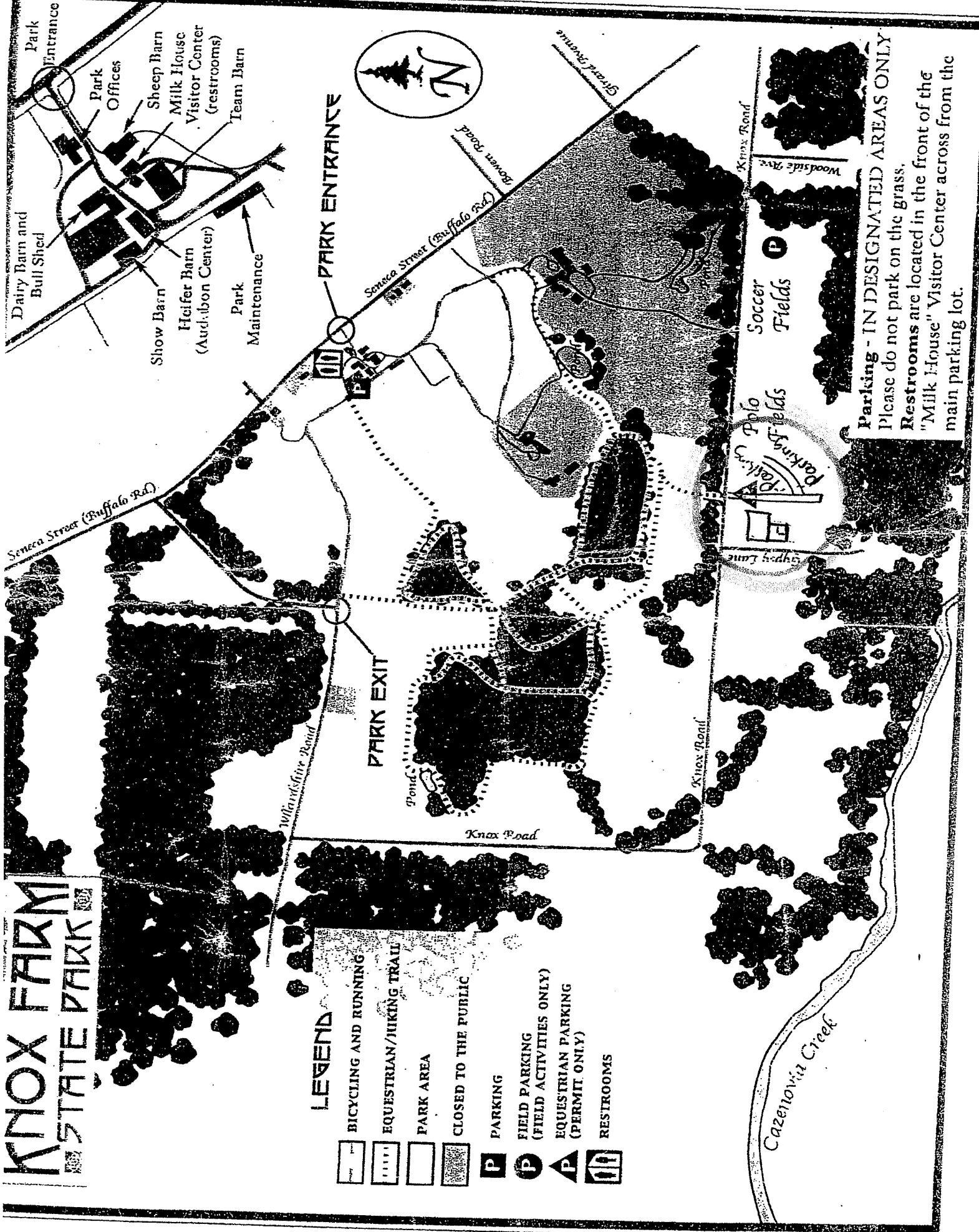
_____ Requesting organization shall attach a completed **Certificate of Insurance** with Minimum Limits to include public liability coverage with limits of \$1,000,000 each occurrence; property damage insurance with limits of \$1,000,000 each occurrence. Policy shall be endorsed to include the Town of Aurora as an additional named insured.

_____ Requesting organization shall attach a completed **Certificate of Insurance** with Minimum Limits to include public liability coverage with limits of \$1,000,000 each occurrence; property damage insurance with limits of \$1,000,000 each occurrence. Policy shall be endorsed to include the NYSOPRHP as an additional named insured.









_____ Requesting organization shall submit an **Indemnification Agreement** signed by authorized applicant or officer of company and duly notarized.

_____ Other

KNOX FARM STATE PARK



LEGEND

-  BICYCLING AND RUNNING
-  EQUESTRIAN/JUICKING TRAIL
-  PARK AREA
-  CLOSED TO THE PUBLIC
-  PARKING
-  FIELD PARKING (FIELD ACTIVITIES ONLY)
-  EQUESTRIAN PARKING (PERMIT ONLY)
-  RESTROOMS

Parking - IN DESIGNATED AREAS ONLY
 Please do not park on the grass.
Restrooms are located in the front of the "Milk House" Visitor Center across from the main parking lot.

Application # _____

Paid appl.
Paid perm
Security c

WS-6

Application for Temporary Use Permit

Town of Aurora Parks

6C

Submit applications to:
Town of Aurora Recreation Department
300 Glead Ave
East Aurora, NY 14052
Telephone (716) 652-4050 Fax: (716) 652-1123

All requests must be made no less than 30 days in advance of event/use.

1. Name of Organization: BIKE RACE
2. Individual Responsible for this request: John RODEN
3. Address: 2037 GROVER RD
WEST FALLS
4. Telephone number: 713 4399
5. Fax: _____
6. Email Address: John@JohnRoden.net
7. Date(s) of event SEPT 29/30
8. Hours of use including set up/take down: Start 9 am/pm End 3 am/pm
9. Description of the event or use: Bicycle RACE on grass/trails

10. Specific area(s) requested, map attached
 JP Nicely West Falls Park
 Warren Drive Park
 Majors Park
 Other: _____
11. Specific equipment to be brought in to park (porta johns, tents, etc.) EZ UP tent
MARKING TAPE
12. Need: Water Electric
13. Estimated attendance: 120
14. Will food or drinks be served? NO If yes, describe: _____

15. Will there be sound amplification or music or a band(s)? NO If yes, describe:

16. Other services requested (describe): Open GATB on SAT
Remove tree across trail
By creek
____ Police _____
____ Parks and Recreation Department _____

(Provide drawings describing location, size and text of all proposed signs for this event to the Town of Aurora Building Department, 300 Glead Ave. Approved signs may be erected 30 days prior to the event and must be removed immediately after same.)

I make this application and agree to abide by the **Guidelines for Use of Town of Aurora Parks.**

[Signature]

Signature of Applicant

6-12-18

Date

Official Use Only Below this Line-----

Event: _____

Attachments submitted:

Indemnification Agreement

Certificate of Insurance

Map with area(s) requested to be used indicated

CERTIFICATE
OF INSURANCE
NOT ATTACHED

____ Copy of application for sign permit, if applicable. (Upon application approval, copy of approved sign permit must be filed with the Town Clerk NO LATER THAN 5 days prior to scheduled event.)

Application **Recommended** or **Not recommended**
by Recreation Department

Action by Town Board:

The Town Board, upon review of the application request # _____ submitted by _____ (organization or individual) took the following action, with or without conditions (as applicable) and noted below:

Approved: _____ Date: _____
Supervisor Signature

Denied: _____ Date: _____
Supervisor Signature

Conditions:

_____ Police Department approval

_____ Highway approval

_____ Building Department approval

_____ Requesting organization shall attach a completed **Certificate of Insurance** with Minimum Limits to include public liability coverage with limits of \$1,000,000 each occurrence; property damage insurance with limits of \$1,000,000 each occurrence. Policy shall be endorsed to include the Town of Aurora as an additional named insured.

_____ Requesting organization shall attach a completed **Certificate of Insurance** with Minimum Limits to include public liability coverage with limits of \$1,000,000 each occurrence; property damage insurance with limits of \$1,000,000 each occurrence. Policy shall be endorsed to include the NYSOPRHP as an additional named insured.

_____ Requesting organization shall submit an **Indemnification Agreement** signed by authorized applicant or officer of company and duly notarized.

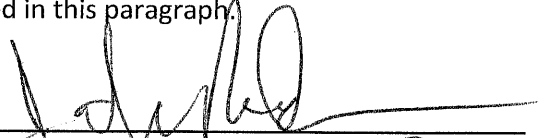
_____ Other



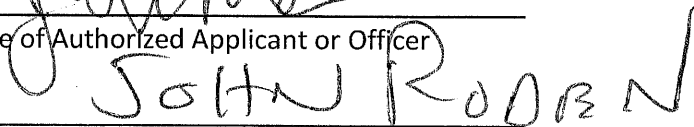
TOWN OF AURORA
 Southside Municipal Center
 300 Gleed Avenue, East Aurora, NY 14052
www.townofaurora.com

Indemnification Agreement

To the fullest extent permitted by law, I/We shall indemnify and hold harmless the Town of Aurora and its employees from and against claims, damages, losses and expenses, including but not limited to attorney's fees, arising out of or resulting from performance of our work or activities under this contract/permit, provided that such claim, damage, loss or expense is attributable to bodily injury, sickness, disease or death, or injury to or destruction of tangible property, including the loss of use resulting there from but only to the extent caused in whole or in part by negligent acts or omissions of our organization, anyone directly or indirectly employed by us or for anyone for whose acts they may be liable, regardless of whether or not such claim, damage, loss or expense is caused in part by a party indemnified hereunder. Such obligation shall not be construed to otherwise exist as to a party or person described in this paragraph.



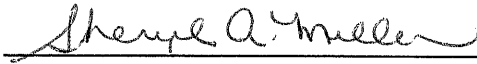
Signature of Authorized Applicant or Officer



Printed name of Authorized Applicant or Officer

State of New York
 County of Erie

Subscribed to and sworn to before me this 12th day of June, 2018.



Notary Public

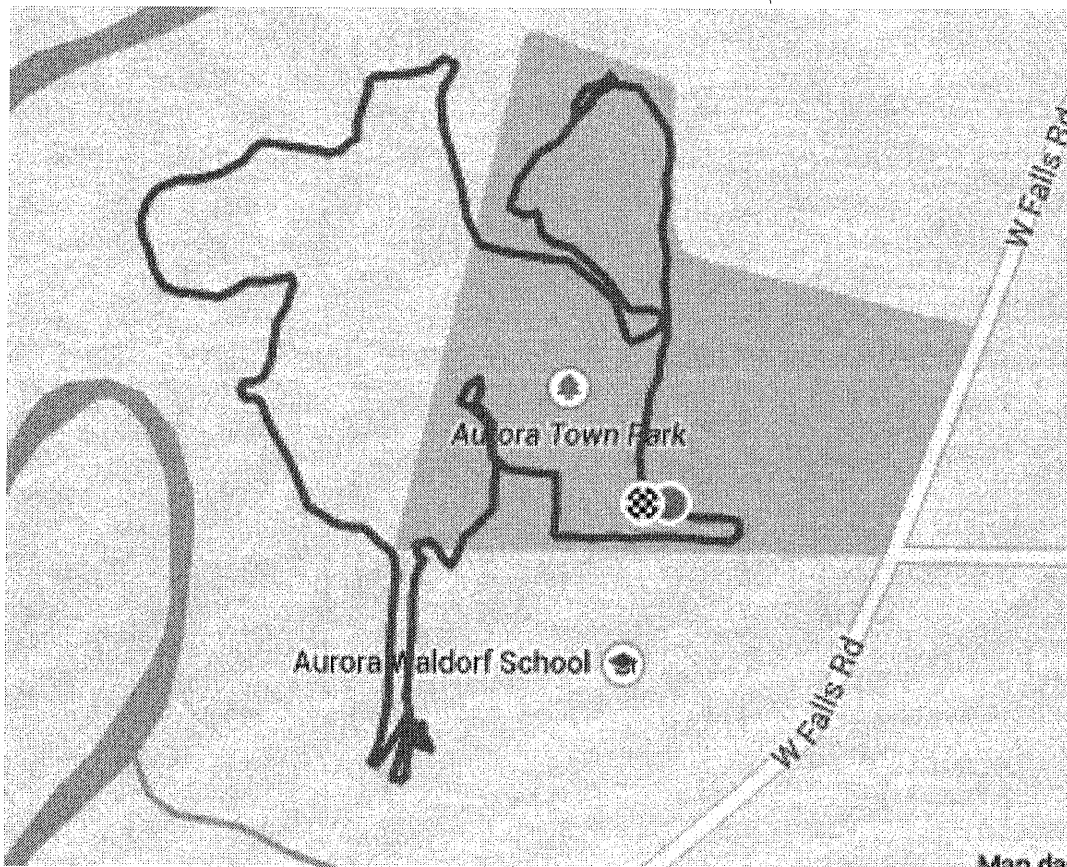
SHERYL A. MILLER
 Reg. #01M16128663
 Notary Public, State of New York
 Qualified In Erie County
 Commission Expires June 13, 2021

Qualified in Erie County, New York

My commission expires: June 13, 2021

Course: There were a couple soft spots last year that I want to avoid now that I know the park better. I am interested in having a race starting and finishing at the building and using the grass along the treeline and the wide trails through the forest. If I can obtain permission from the adjacent school I would like to add some length using some of their property and park cars in their lot. I have approached Waldorf and have a verbal OK at present. I would like access to the building and bathrooms on race day and will set up the course on Saturday. Depending on the weather I will set the course to avoid turf damage, especially in public areas.

If the highway Dept could remove the large tree blocking the trail by the creek it would be helpful or I will route around it



WEST FALLS PARK CYCLOCROSS

WESTERN NEW YORK CYCLOCROSS CLUB

SUNDAY, SEPTEMBER 30, 2018

525 WEST FALLS RD, WEST FALLS, NY 14170 (CORNER OF READING RD)

(½ HR SOUTH OF BUFFALO)

USAC PERMIT PENDING – BUFFALO BIKE CLUB

**** PRE REG ONLY ****

Course: Fun challenging venue, grass sections and forest trails, one runup, we stick to the rulebook and try to make a fast, fair course for everyone. Similar to last year but I'll try to use less boring grass riding . Course is about 2800m.

START TIMES--race a second event for a buck!

Class	Start	Cost	Distance	Prizes
Jr Boys U15 Jr Girls U15 Jr Boys 15-18 Jr Girls 15-18	9:00 AM	\$1	30 mins- short course	Medals 3 deep- based on age categories
Singlespeed	10:00 AM	\$28	45 mins	Medals 3 deep
Cat 5	10:00 AM	\$28	45 mins	Medals 3 deep
Cat 4	10:00 AM	\$28	45 mins	Medals 3 deep
Cat 5 Women	11:20 AM	\$28	45 mins	Medals 3 deep
Cat 4 Women	11:20 AM	\$28	45 mins	Cash, \$80 3 deep
Cat 1-3 Women	11:20 AM	\$28	45 mins	Cash, \$100 3 deep
Kids of all ages	12:15 -age categories start separate--Free	FREE	age-based	Medals and prizes
Masters 40 , 50 , 60	12:45 pm	\$28	45 mins	Medals 3 deep
Men cat 1-5 open	2:15 pm	\$28	60 mins	Cash, \$100 3 deep
Men cat 3	2:15 pm	\$28	60 mins	Cash, \$80 3 deep

** Only USAC or UCI competitive licensed riders may race 2:15 pm race

- Pre Register Only at Bikereg.com
- Further Information: Call (not after 9:00 p.m.) John Roden, 716/713-4399,

Event Contact:

John Roden
2037 Grover Road
West Falls, NY 14170
716-713-4399
John@johnroden.net

Event Information:

The "West Falls Park Cyclocross" event will be held on **Sunday, September 30, 2018** at the JP Nicely park on Falls Road in **West Falls, New York**.

Cyclocross is a spectator friendly competition that consists of a one-hour +/- long event held on open trails and grass surfaces. Laps are generally about 8-10 minutes in length and include a few sections where competitors are forced to dismount and hurtle 12" barriers. This race is part of the New York State Cyclocross Series which runs from late September until mid-November, culminating in the State Championship.

Sanctioning body: This event is sanctioned by our national organizing body, the United States Cycling Federation. Each event is required to have certified officials, must pass a safety inspection and all riders must be licensed and sign a waiver of indemnification.

Insurance:

All participants are members of the sanctioning body and are required to sign waivers. Minors must provide a waiver signed by a parent. Insurance provides named insured with \$1 million per occurrence with a \$3 million aggregate.

A. Policy Coverage

1. Participant legal liability
2. Premises-Operations liability
3. Products and completed operations
4. Personal injury liability
5. Limited worldwide liability

Number of riders expected: About 120



Standard Work Day and Reporting Resolution for Elected and Appointed Officials

RS 2417-A
(Rev. 8/15)

Office of the New York State Comptroller
New York State and Local Retirement System
Employees' Retirement System
Police and Fire Retirement System
110 State Street, Albany, New York 12244-0001

BE IT RESOLVED, that the Town of Aurora / 30152 hereby establishes the following standard work days for these titles and (Name of Employer) (Location Code)

will report the officials to the New York State and Local Retirement System based on their record of activities:

Title	Standard Work Day (Hrs/day) Min. 6 hrs Max. 8 hrs	Name (First and Last)	Social Security Number (Last 4 digits)	Registration Number	Tier 1 (Check only if member is in Tier 1)	Current Term Begin & End Dates (mm/dd/yy-mm/dd/yy)	Record of Activities Result*	Not Submitted (Check only if official did not submit their Record of Activities)
Elected Officials								
Supervisor	8	James J. Bach			<input type="checkbox"/>	1/1/18-12/31/19	16.87	<input type="checkbox"/>
Town Justice	8	Jeffrey M. Markello			<input type="checkbox"/>	1/1/18-12/31/21	7.44	<input type="checkbox"/>
Town Clerk	8	Martha L. Librock			<input type="checkbox"/>	1/1/18-12/31/21	23.69	<input type="checkbox"/>
Appointed Officials								
Town Prosecutor	8	Edward J. Snyder			<input type="checkbox"/>	1/1/18-12/31/18	1.41	<input type="checkbox"/>
Town Historian	8	Robert L. Goller			<input type="checkbox"/>	1/1/18-12/31/18	5.11	<input type="checkbox"/>

SEE INSTRUCTIONS FOR COMPLETING FORM ON REVERSE SIDE

I, Martha L. Librock, secretary/clerk of the governing board of the Town of Aurora, of the State of New York, (Name of secretary or clerk) (Circle one) (Name of Employer)

do hereby certify that I have compared the foregoing with the original resolution passed by such board at a legally convened meeting held on the 25th day of June, 2018 on file as part of the minutes of such meeting, and that same is a true copy thereof and the whole of such original.

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of the Town of Aurora on this day of , 20 , (Signature of the secretary or clerk)

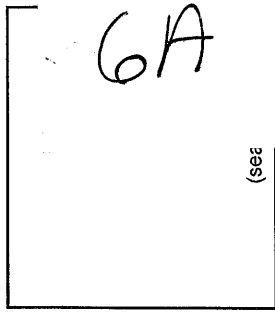
Affidavit of Posting: I, Martha L. Librock, being duly sworn, deposes and says that the posting of the (Name of secretary or clerk)

Resolution began on and continued for at least 30 days. That the Resolution was available to the public on the (Date)

Employer's website at www.townofaurora.com

Official sign board at Town Hall, 300 Gleeed Ave., East Aurora, NY 14052

Main entrance secretary or clerk's office at



Standard Work Day and Reporting Resolution for Elected and Appointed Officials Continuation Form

RS 2417-B

(Rev. 8/15)

Title	Standard Work Day (Hrs/day) Min. 6 hrs, Max. 8 hrs	Name (First & Last)	Social Security Number (Last 4 digits)	Registration Number	Tier 1 (Check only if member is in Tier 1)	Current Term Begin & End Dates (mm/dd/yy-mm/dd/yy)	Record of Activities Result*	Not Submitted (Check only if official did not submit their Record of Activities)
Elected Officials								
Highway Superintendent	8	David M. Gunner			<input type="checkbox"/>	1/1/18-12/31/21	21.31	<input type="checkbox"/>
Councilman	8	Susan Friess			<input type="checkbox"/>	1/1/18-12/31/18	4.31	<input type="checkbox"/>
Councilman	8	Jolene M. Jeffe			<input type="checkbox"/>	1/1/18-12/31/21	4.66	<input type="checkbox"/>
					<input type="checkbox"/>			<input type="checkbox"/>
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Appointed Officials								
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June 5, 2018

6E

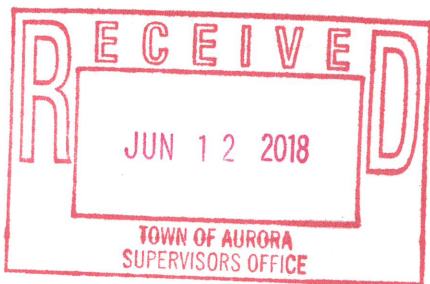
Joseph R. ERNST
112 Church ST.
East Aurora, N.

To whom it may concern:

I wish to give notice that I am resigning from my position on the Assessment Review Board effective for the next calendar year, or whenever most convenient for this purpose.

Thank you.

Sincerely,
Joseph R. Ernst
Joseph R. ERNST



All Calls & Complaints

7A

Summary Report by Date: 05-01-2018 through 05-31-2018, for Category: PARKS - PARKS

Caller Name/Address	Date/Phone	Notes	Closed
Parks			
Chris Gleed diamond	05-02-18	High school would like us to put a trash can out there and also to line out of play lines straight out to the fence.	05-03-18
Dawn West Falls Diamond #3	05-04-18	Please switch out 18" pitching rubber with 24" pitching rubber. Paul and Jim	05-07-18
Dawn Hamlin diamond	05-07-18	Please install new home plate. New one is at rec department. Jim	05-08-18
Elaine Hamlin Park	05-11-18	Take hockey nets from Gleed gym and put in Hamlin Park Lions Shack. Also take boxes from Rec Dep to Hamlin Park Rec building. Mike and Dan-1 hr	05-17-18
Elaine Hamlin Park	05-11-18	Please pick up garbage in warehouse and dispose of. Take chairs and basketballs to Hamlin Rec building near my office. Mike and Dan-.5 hours	05-17-18
Martha Gleed Ball Diamond	05-14-18	remove pile of tree limbs at north end of ball diamond property Mike and Ken	05-15-18
Chris Pool	05-15-18	Please start getting the pool ready for summer. Connect plumbing, turn on water, drain and clean pool, Etc. Please do not use any metal tools while cleaning out pool. They must be plastic. Mike and Dan-Total of 101 hours from 5/22-6/7.	06-06-18
Liz-Parks	05-30-18	Sean please pick up a pallet of ball diamond chalk from Site One (formerly John Deere Landscapes), 2479 Walden Ave, Ste 100. When you get there let the guys know that the order was all ready put in. Thanks! Please get it by Friday.	05-30-18
Chris pool	05-30-18	reseal driveway leading to pool. 6/6- Mike, Jed, Jacey, 5.5 hrs. 100 gallons from Sealmaster	06-06-18
Elaine Hamlin Park	05-31-18	Check smoke detectors at Hamlin Park in Rec building and Lyons shack. Check all light fixtures in both buildings.	06-06-18

Caller Name/Address	Date/Phone	Notes	Closed
Elaine Hamlin Rec Building	05-31-18	sweep/ shop vac floor. Take out posts for tennis nets. 06-05-18 Needs to be cleaned for chicken bbq Kyle-15 min	
Total count: Parks			11

Town of Aurora

All Calls & Complaints

Summary Report by Date: 05-01-2018 through 05-31-2018, for Category: BUILDING DEPARTMENT WORK REQUI -

Caller Name/Address	Date/Phone	Notes	Closed
Building Department Work Requi			
Donna Senior Center	05-01-18	Install bookrack in office, move picnic table and bike rack out onto pavement near back door. Clean up front building-rack and more. Repair handicap post by front door. Mike E, Dave , Paul- 7 hours total	05-03-18
Sheryl M. 300 Gleed	05-03-18	pickup 3 boxes from Cler's office and deliver to Senior Center. Jason-15 minutes	05-03-18
Susan Adult Daycare-Senior Center	05-04-18	Please take old carpeting to highway dumpster Jason-rugs were already in dumpster. Sue stated they used some of the old rugs as padding so there wasn't much to throw out.	05-07-18
Rob Town Library	05-04-18	AC for main room seems to be constantly running but is set at 70 degrees. May have to do with compressor issue that Tri-R to fix. Called Tri-R and they will schedule mon or tues with Rob. Tri R fixed that monday	05-04-18
Gloria West Falls Library	05-07-18	Check out ceiling and wall leading downstairs. Lots of water damage. Ceiling next to bathroom is also showing signs of water damage. Dave G.-hired Joe Inglefinger to repair.	
Donna Senior Center	05-07-18	Trim shrubs and mulch around bushes. Mike and Dan-2 hrs Purchased mulch from Southtowns Supply.	05-16-18
Gloria West Falls Library	05-07-18	deliver and spread mulch on beds at library, suppress weeds. Mike and Dan-1.5 hours	05-16-18
Donna Adult Day Care Center	05-10-18 (716)652-7934	Please remove kitchen sink from outside back door. Mike B.	05-10-18
JP Nicely Park West Falls Road	05-10-18	Turn heat off in park building? Turned off 5/14	05-14-18
Kathy Town library	05-10-18	Please dirt fill large holes in lawn on Whaley Ave side of building. Please mulch gardens. 5/31- Topsoil done 6/1-3 hrs Jed and Jacey 5/25-needs full load on 327 and maybe more. Black mulch from Lardon	05-31-18

Caller Name/Address	Date/Phone	Notes	Closed
Dave G. Senior Center	05-15-18	Mike E. to meet with Jeff Ramsey @ 2pm 5/16 to turn water off in the building. Jeff needs to install a dishwasher at Adult Daycare Services	05-16-18
Kathy Town Library	05-17-18	dirt fill large holes in lawn on Whaley Ave Mulch gardens. 5/31 topsoil done 6/1-3 hours, Mike, Jed, Sean Black mulch from Lardon	06-01-18
Kathy Town Library	05-17-18	dig up/ cut off rusted metal sign post left in by the "Wrong Way" sign at driveway by Whaley Ave. Mike B	05-25-18
Bill-Buildings Inspection Hwy and Parks Offices	05-21-18	Emergency light on highway side closest to Quaker needs a battery fire extinguisher on highway side has discharged somehow. Okay to refill in July when fire inspector comes.	
Sheryl M.	05-23-18	p/u broken recycle bins from Town Hall and dispose of them. Mike B.	05-25-18
Rob Town Library	05-31-18	Review lawn area adjacent to Whaley Ave Exit , apron to road and sidewalk. Curb is broken and portion of apron along edge is raised causing tripping hazard. Level area w concrete and or dirtfill. Mike and Ken	06-04-18
Rob Town Library	05-31-18	A/C in Community room does not seem to be cooling it. Called Tri-R. They fixed a faulty relay switch.	05-31-18
Elaine Senior Center	05-31-18	Pick up sound system from Hamlin Park rec building and take to Senior Center. Mike E-.5 hours	06-07-18
Elaine Senior Center	05-31-18	Pick up helium tank from General Welding and deliver to Senior Center. Mike E-.5 hours	06-07-18
Elaine Senior Center	05-31-18	Return sound system to rec building and helium tank to General Welding. Mike and Dan-.5 hours	06-11-18
Total count: Building Department Work Requi			20



7B

**East Aurora / Town of Aurora
Police Department
Interdepartmental Correspondence**

To: Mayor Mercurio & Village Board; Supervisor Bach & Town Board

From: Shane Krieger, Chief of Police

Date:

Re: Monthly Report -May 2018

General Information

- With Lieutenant Bleyle announcing his retirement on June 30, 2018, a patrol officer will be promoted to lieutenant and a search will begin for hiring a new officer.
- Alicia Ventura was hired as a part-time PSD. Ms. Ventura is currently employed as a fire/EMS dispatcher in another PSAP so I would expect her training to move right along.
- Advanced Alarm was able to fix the DVR that records all cameras in the police department, so a replacement is not needed at this point.
- Preparation was ongoing for Musicfest.
- The roof top air conditioners compressor failed in dispatch and was scheduled to be replaced in June.

Training:

- PSD's Wypych and Shaw attended Active Shooter Response Course for dispatch
- PSD's Wypych and Denz attended updated 911 Training



East Aurora / Town of Aurora Police Department Interdepartmental Correspondence

Meetings:

In addition to Village Board, Town Board and Staff meetings I also attended the following:

- 1 Pistol Permit Interview
- Erie County Chiefs of Police meeting
- Met w/ Peggy Cooke and Jennifer Brazil re: Borderland Festival
- Attended a LE Memorial Service at Erie County CPS
- Met w/ resident from Spring St re: parking & plow damage to her property.
- Meeting at CPS lab (regular meetings every quarter)
- Safety Comm. Meeting re: possible new parking restriction, one way street discussion
- Attended Erie County Stop DWI luncheon. Officer O'Hara received award for EAPD

Special Events

None



**East Aurora / Town of Aurora
Police Department
Interdepartmental Correspondence**

Statistics

Activity	Village	Out Side of Village	Total (YTD)
Police calls	1,054(4,693)	708(3,039)	1,762(7,732)
Fire/EMS calls			408(1,954)
Response Time	1.6 minutes	2.0 minutes	
Property Damage Acc	18	7	25(148)
Injury Accidents	2/0 Fatal	4/0 Fatal	6 (20)0(Fatal)
Leaving Scene Acc	2	2	4 (24)
Arrests-Individuals	3	3	6(82)
Crimes-Persons	2	3	5(23)
Crimes-Drugs	1	0	1(17)
Crimes-Property	2	6	8(62)
Burglary/Trespass	0	0	0(5)
S&R-Lic/Reg	0	0	0(27)
DWI	1	3	4(11)
Warrant Arrests	1	0	1(3)
Traffic Tickets	50 (208)	48 (231)	98 (439)
Parking Tickets			2(184)
Domestics	3(7)	3(10)	6(17)
9.41 Mental Health Charge	1(2)	0(6)	1 (8)