

WS-2 5A

These plans are for illustration only and subject to change. They are not a contract and in all cases the contract language will prevail.

Town of Aurora Health Insurance Options Effective: January 2023		Platinum Classic Highmark Alt Plan	Platinum POS Plus Highmark Renewal	FlexFit Platinum Options III Proposed	Gold Classic Highmark Renewal	Impact Gold Copay Option 3 III Proposed	Gold POS 7100 (USA Qualified) Highmark Alt. Ded.	Impact Gold Copay (USA Qualified) III Proposed	Silver POS 7100 (USA Qualified) Highmark Renewal	Impact Silver Copay (USA Qualified) III Proposed	Silver POS 7100 (USA Qualified) Highmark Renewal	Impact Silver Copay (USA Qualified) III Proposed
	Wellness	\$250 Gym Membership	\$250 Gym Membership	Choice of Nutrition Benefit or \$250 Health Extras card	\$250 Gym Membership	Choice of Nutrition Benefit or \$250 Health Extras card	\$250 Gym Membership	Choice of Nutrition Benefit or \$250 Health Extras card	\$250 Gym Membership	Choice of Nutrition Benefit or \$250 Health Extras card	\$250 Gym Membership	Choice of Nutrition Benefit or \$250 Health Extras card
Deductible	Deductible (single/family)	\$0	\$0	\$0	\$600/\$1,200	\$600/\$1,200	\$1,500/\$3,000	\$1,500/\$3,000	\$2,500/\$5,000	\$2,000/\$4,000	\$3,500/\$7,000	\$3,000/\$6,000
	Embedded/True Family	Embedded	Embedded	True Family	Embedded	True Family	True Family	True Family	True Family	True Family	True Family	True Family
	Coinsurance	0%	0%	0%	0%	0%	0%	0%	0%	0%	40%	20%
	Out-of-Pocket Maximum (single/family)	\$3,000/\$6,000	\$5,000/\$10,000	\$3,500/\$7,000	\$5,000/\$10,000	\$4,750/\$9,500	\$6,250/\$12,500	\$4,000/\$8,000	\$7,000/\$14,000	\$6,950/\$13,900	\$7,000/\$14,000	\$6,950/\$13,900
Deductible	Deductible (single/family)	\$5,000/\$10,000	\$5,000/\$10,000	\$5,000/\$10,000	\$5,000/\$10,000	\$5,000/\$10,000	\$5,000/\$10,000	\$5,000/\$10,000	\$5,000/\$10,000	\$5,000/\$10,000	\$5,000/\$10,000	\$5,000/\$10,000
	Embedded/True Family	Embedded	Embedded	True Family	Embedded	True Family	True Family	True Family	True Family	True Family	True Family	True Family
	Coinsurance	50%	50%	20%	50%	50%	50%	50%	50%	50%	50%	50%
	Out-of-Pocket Maximum (single/family)	\$10,000/\$20,000	\$10,000/\$20,000	\$10,000/\$20,000	\$10,000/\$20,000	\$10,000/\$20,000	\$10,000/\$20,000	\$10,000/\$20,000	\$10,000/\$20,000	\$10,000/\$20,000	\$10,000/\$20,000	\$10,000/\$20,000
Deductible	PCP/Specialist	\$15/\$35	\$5/\$25	\$5/\$25	\$25/\$40 after Deductible	\$25/\$40 after Deductible	\$20/\$30 after Deductible	\$20/\$30 after Deductible	\$30/\$50 after Deductible	\$35/\$60 after Deductible	40% after Deductible	20% after Deductible
	Radiology	\$35	\$25	\$25/\$50	\$40 after Deductible	\$25/\$40 after Deductible	\$40 after Deductible	\$50/\$85 after Deductible	\$50 after Deductible	\$60/\$85 after Deductible	40% after Deductible	20% after Deductible
	Laboratory Testing	\$35	\$15	\$5	\$40 after Deductible	\$40 after Deductible	\$40 after Deductible	\$20 after Deductible	\$50 after Deductible	\$35 after Deductible	40% after Deductible	20% after Deductible
	Chiropractic Care	\$15	\$5	\$25	\$40 after Deductible	\$40 after Deductible	\$20 after Deductible	\$50 after Deductible	\$25 after Deductible	\$60 after Deductible	40% after Deductible	20% after Deductible
Deductible	Physician Services - Prenatal and One Postpartum Visit	\$15	\$5	\$0	\$25 after Deductible	\$0	\$20 after Deductible	\$0	\$25 after Deductible	\$0	40% after Deductible	\$0
	Inpatient Maternity	\$500 per admission	\$500 per admission	\$500 per admission	\$1,000 per admission after Deductible	\$1,000 per admission after Deductible	\$500 per admission after Deductible	\$750 per admission after Deductible	\$750 per admission after Deductible	\$1,000 per admission after Deductible	40% after Deductible	20% per admission after Deductible
Deductible	Inpatient Hospital	\$500 per admission	\$500 per admission	\$500 per admission	\$1,000 per admission after Deductible	\$1,000 per admission after Deductible	\$500 per admission after Deductible	\$750 per admission after Deductible	\$1,000 per admission after Deductible	\$1,000 per admission after Deductible	40% after Deductible	20% per admission after Deductible
	Outpatient Surgery	\$100	\$250	\$100	\$100 after Deductible	\$100 after Deductible	\$150 after Deductible	\$125 after Deductible	\$250 after Deductible	\$200 after Deductible	40% after Deductible	20% per admission after Deductible
	Emergency Room Visit	\$100	\$250	\$150	\$150 after Deductible	\$150 after Deductible	\$200 after Deductible	\$150 after Deductible	\$250 after Deductible	\$250 after Deductible	40% after Deductible	20% after Deductible
	Urgent Care	\$55	\$100	\$75	\$60 after Deductible	\$75 after Deductible	\$50 after Deductible	\$75 after Deductible	\$75 after Deductible	\$75 after Deductible	40% after Deductible	20% after Deductible
Deductible	Outpatient	\$15	\$5	\$5	\$25 after Deductible	\$25 after Deductible	\$20 after Deductible	\$20 after Deductible	\$25 after Deductible	\$25 after Deductible	40% after Deductible	\$25 after Deductible
	Inpatient	\$500 per admission	\$500 per admission	\$500 per admission	\$1,000 per admission after Deductible	\$1,000 per admission after Deductible	\$500 per admission after Deductible	\$750 per admission after Deductible	\$750 per admission after Deductible	\$1,000 per admission after Deductible	40% after Deductible	20% per admission after Deductible
Deductible	Durable Medical Equipment & Prosthetic Devices	50%	50%	50%	20% after Deductible	50% after Deductible	50% after Deductible	50% after Deductible	50% after Deductible	50% after Deductible	40% after Deductible	50% after Deductible
	Physical, Speech, Occupational Therapy ***Limits May Apply	\$15, 60 combined visits/condition/PY	\$5, 60 combined visits/PY	\$25, 60 combined visits/condition/PY	\$25 after Deductible, 60 combined visits/condition/PY	\$40 after Deductible, 60 combined visits/condition/PY	\$20 after Deductible, 60 combined visits/condition/PY	\$50 after Deductible, 60 combined visits/condition/PY	\$25 after Deductible, 60 combined visits/PY	\$60 after Deductible, 60 combined visits/condition/PY	40% after Deductible, 60 combined visits/condition/PY	20% after Deductible, 60 combined visits/condition/PY
	Diabetic drugs, insulin, and supplies (monitor, test strips, syringes, etc.)	\$15	\$5	\$5	\$25 after Deductible	\$25 after Deductible	\$20 after Deductible	\$20 after Deductible	\$25 after Deductible	\$35 after Deductible	40% after Deductible	20% after Deductible
	Generic /Formulary/Non- Formulary	\$10/\$30/\$60	\$5/\$25/50%	\$5/\$30/\$100	\$10/\$35/\$70	\$10/\$35/50%	\$5/\$30/50% after Deductible	\$10/\$40/60% after Deductible	\$10/\$40/50% after Deductible	\$15/\$50/50% after Deductible	\$10/\$10/50% after Deductible	20%/20%/50% after Deductible
Total Premium	Employee Only	\$745.28	\$731.72	\$697.21	\$656.41	\$612.29	\$609.92	\$579.09	\$545.36	\$525.39	\$507.48	\$492.17
	Employee & Child(ren)	\$1,266.08	\$1,249.92	\$1,185.26	\$1,115.90	\$1,046.80	\$1,036.87	\$984.45	\$927.12	\$893.16	\$862.71	\$836.69
	Employee & Spouse	\$1,490.56	\$1,463.44	\$1,394.42	\$1,312.03	\$1,224.58	\$1,219.84	\$1,158.18	\$1,090.73	\$1,050.78	\$1,014.95	\$984.34
	Family	\$2,124.05	\$2,005.40	\$1,907.05	\$1,870.78	\$1,745.03	\$1,738.28	\$1,650.41	\$1,554.20	\$1,497.36	\$1,446.30	\$1,402.68
	per child	Incl.	Incl.	\$15.44 Per Child	Incl.	\$15.44 Per Child	Incl.	\$15.44 Per Child	Incl.	\$15.44 Per Child	Incl.	\$15.44 Per Child

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Application # _____

Application	\$25	_____
Permit	\$15	_____
Security Deposit	\$200	_____
Per Day Event	\$200	_____
Additional Services	TBD	_____

Application For Temporary Use Permit

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

Submit applications to:
Town of Aurora Parks and Recreation
575 Oakwood 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.

1. Name of organization: LANCASTER DEPEW SOCCER CLUB
2. Individual responsible for this request: TONY MANETTA
3. Address: 10 ASHWOOD CT
LANCASTER NY 14086
4. Telephone number: 71
5. Fax: _____
6. Email: tman @ _____ .com
7. Date(s) of event: 7/28-7/30/2023
8. Hours of use including set up/take down: Start 7/27 12pm End 7/30 8pm
9. Description of the event or use:
SOCCER TOURNAMENT - Annual tournament held for local neighboring
AREAS.
10. Specific area(s) request. Please attach a map of the area.
 - a. Soccer fields
 - b. Polo Field _____
 - c. Equestrian Park _____
 - d. Other _____
 - i. Describe _____

11. Specific equipment to be brought into the park (porta-johns, tents, etc.)
porta johns, golf carts, tents, table, chairs, dumpsters if necessary
12. Needs: Water _____ Electric preferred ✓
13. Estimated attendance: 1200-1500
 a. Will participants be crossing Knox Road? NO
 b. Will participants be attending via bus? NO

PLEASE NOTE: Based on the estimated attendance of the event, a meeting with the Town Supervisor, Dir. of Recreation and Aquatics, the Highway Supervisor, and Chief of Police may be scheduled at the discretion of the Aurora Town Board to discuss a plan for proper traffic control and parking.

14. Will food or drinks be served? yes
 a. If yes, please describe current plan is to invite food trucks vendors & have volunteers work snack shops
15. Will there be sound amplification, music, or a band(s)? NO
 a. If yes, please describe _____
16. Other services requested, please describe: _____
 a. NYS Park Police* _____
 i. *Applicant is responsible for contacting the East Aurora Police Department if the event involves the Village or Town streets.
 b. Parks Department: trash disposal?
17. Do you intend to use the main part of Knox Farm State Park between Buffalo Rd, Willardshire Rd., and Knox Rd.? NO
 a. If yes, you must request a permit from NYS Parks and Recreation. Contact their office at 716-549-1802.

Provide drawings that describe location, size and text of all proposed signs for this event to the Town of Aurora Building Department, 575 Oakwood Ave. Approved signs may be erected 30 days prior to the event and must be removed immediately after.

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**

Tony M...
 Signature of Applicant

10/31/22
 Date

Official Use Only

Event: _____

Attachments Submitted

- Indemnification Agreement
- Certificate of Insurance
- Map with area(s) requested to be used indicated
- Parking and Traffic plan
- 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 the Recreation Department.

Action by Aurora Town Board

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

Approved: _____ Date: _____
Supervisor's Signature

Denied: _____ Date: _____
Supervisor's Signature

Conditions:

- Police Department Approval
 - Highway Department 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 name insured
 - Requesting organization or individual shall submit an **Indemnification Agreement** signed by authorized applicant or officer of company and duly notarized.
 - Approval of parking and traffic plan
 - Other
-
-

SUPERVISOR
JAMES J. BACH
(716) 652-7590
supervisor@townofaurora.com



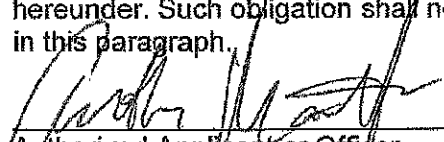
TOWN CLERK
MARTHA L. LIBROCK
(716) 652-3280
townclerk@townofaurora.com

TOWN OF AURORA
575 Oakwood Ave., East Aurora, NY 14052
www.townofaurora.com

Indemnification Agreement

Neil and Barb Chur Equestrian Park, Soccer Field and/or Polo Field


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 under this contract, 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.



Authorized Applicant or Officer

State of New York)
County of Erie)

Subscribed and sworn to before me this 2 day of November, 2022

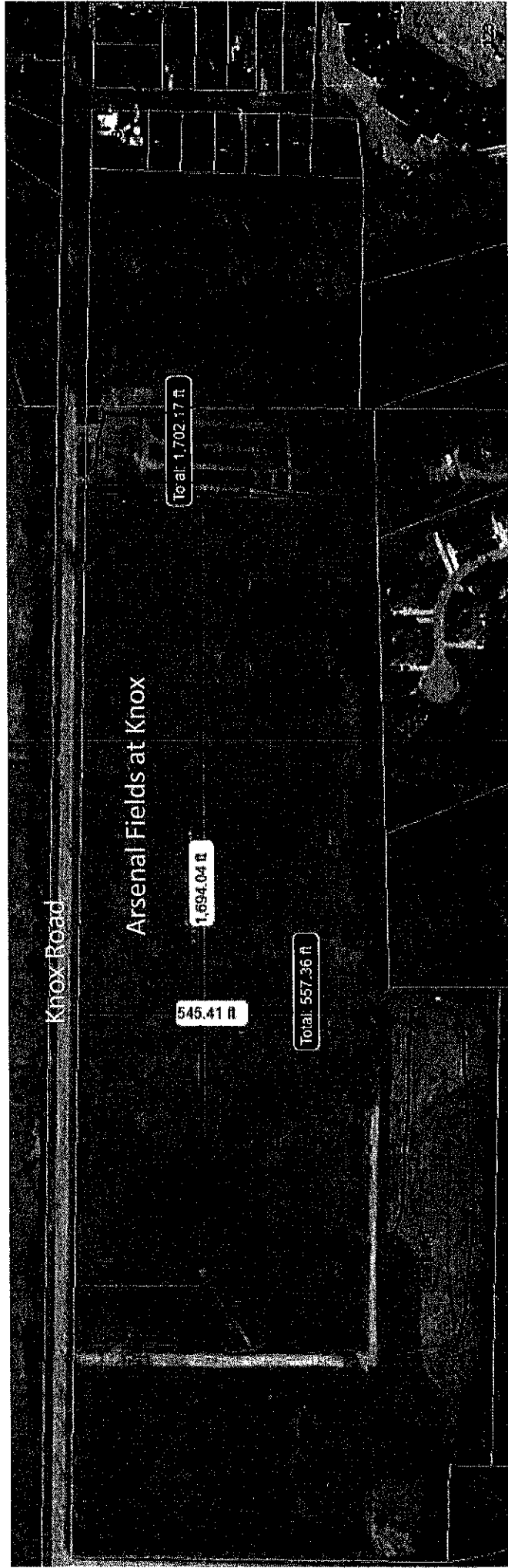


Notary Public

Qualified in Erie County, New York
My commission expires: 1/23/2025

JENNIFER S. AUSTIN
NOTARY PUBLIC STATE OF NEW YORK
ERIE COUNTY
L.I.C. #01AU653455
COMM. EXP. 01/23/2025

LDSC Soccer tournament map of area 7/28-7/30 2023



- Parking will be in the 3 lots designated in map
- Cars will be coming and going all weekend and don't anticipate any traffic concerns

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5C

TOWN OF AUR

575 OAKWOOD AVENUE, EAST AURORA, NY 14052
BUILDING DEPARTMENT
(716) 652-7591
FAX (716) 652-3507

MEMO

TO: Jim Bach & Town Board Members
FROM: Don Owens, Chairman, Planning Board
DATE: November 7, 2022

=====

The following actions were taken at the November 2, 2022 meeting of the Planning Board:

Doug Crow motions to recommend the Town Board approve the proposed **Site Plan Application at 1757 Emery Rd.** to operate a short term rental (BnB) with the following conditions:

1. Amend/update site plan to show existing conditions, driveway materials, turnout and proposed parking area
2. Recommend the Town Board hold a public hearing for neighbor input
3. Add condition that when/if the residence is no longer owner-occupied then the BnB use is no longer valid.

Seconded by Alice Brown

Upon a vote being taken:

ayes – seven noes – one Motion Carried.

TOWN OF AURORA

575 OAKWOOD AVENUE, EAST AURORA, NY 14052
BUILDING DEPARTMENT
(716) 652-7591

MEMO

TO: Supervisor Bach and Town Board Members
FROM: Elizabeth Cassidy, Code Enforcement Officer
DATE: October 19, 2022

Craig and Christina Polston have submitted a Site Plan application to operate a BnB in the habitable space above their attached garage. The application has been sent to the Planning Board for their review and recommendation at their November meeting. Historically, the Town Board has scheduled a public hearing on site plan applications.

This is an unlisted action for purposes of SEQRA.

Liz Cassidy

TOWN OF AURORA
SITE PLAN REVIEW APPLICATION

Date submitted: 10/13/2022
Applicant name: CRAIG & CRISTINA POUSTON
Applicant Phone/Email: 716 239- ten@yahoo.com
Applicant address: 1757 EMERY RD EAST AURORA 14052
Property owner: CRAIG & CRISTINA POUSTON
Owner's address 1757 EMERY RD
Property address: 1757 EMERY RD
SBL # (s) 200.00-2-13.1
Prior owner Dawn & William Vogel
Is site adjacent to or within 500 feet of an 'R' District? yes - located in RR district

=====

Proposed Project: B+B
Commercial Multi family Number of dwelling units 2
Zone: RR Total property Acreage: _____ Acreage covered by bldg _____
Square footage of building: 1009 sq ft in 784 sq ft Acc Cubic footage of building: _____
Aggregate square footage of other buildings on property: 324 sq ft

Fees, based on number of improved acres*

**Additional professional services, including but not limited to traffic study and SEQRA review, utilized by the Town during the review process shall be borne by the applicant*

0-1 Acres: \$250 1.01-5 Acres: \$500 5.01-10 Acres: \$1,000 >10 Acres: \$1,500

Fee: \$ 250
Receipt: # _____

Received by _____
Town Clerk/Deputy Clerk

SEQOR action: Type I (Long EAF) Type II (Long EAF) Unlisted (Short EAF)

Short Environmental Assessment Form

Part 1 - Project Information

Instructions for Completing

Part 1 - Project Information. The applicant or project sponsor is responsible for the completion of Part 1. Responses become part of the application for approval or funding, are subject to public review, and may be subject to further verification. Complete Part 1 based on information currently available. If additional research or investigation would be needed to fully respond to any item, please answer as thoroughly as possible based on current information.

Complete all items in Part 1. You may also provide any additional information which you believe will be needed by or useful to the lead agency; attach additional pages as necessary to supplement any item.

Part 1 - Project and Sponsor Information			
Name of Action or Project: B+B / SHORT TERM RENTAL ; POLSTEN (CRISTINA + CRISTINA)			
Project Location (describe, and attach a location map): 1757 EMERY RD.			
Brief Description of Proposed Action: REQUESTING APPROVAL TO MARKET + UTILIZE AN ATTACHED STUDIO APARTMENT LOCATED AT OUR PRIMARY RESIDENCE (OWNER OCCUPIED) AT 1757 EMERY RD IN EAST AURORA			
Name of Applicant or Sponsor: CRISTINA + CRISTINA POLSTEN		Telephone: 716 230-0000	
Address: 1757 EMERY RD		E-Mail: carpo	
City/PO: EAST AURORA		State: NY	Zip Code: 14052
1. <u>Does the proposed action only involve the legislative adoption of a plan, local law, ordinance</u> <u>administrative rule, or regulation?</u>			NO YES
If Yes, attach a narrative description of the intent of the proposed action and the environmental resources that may be affected in the municipality and proceed to Part 2. If no, continue to question 2.			<input checked="" type="checkbox"/> <input type="checkbox"/>
2. <u>Does the proposed action require a permit, approval or funding from any other governmental Agency?</u>			NO YES
If Yes, list agency(s) name and permit or approval:			<input checked="" type="checkbox"/> <input type="checkbox"/>
3.a. <u>Total acreage of the site of the proposed action</u>		<u>3</u> acres	
b. <u>Total acreage to be physically disturbed</u>		<u>0</u> acres	
c. <u>Total acreage (project site and any contiguous properties) owned or controlled by the applicant or project sponsor</u>		<u>3</u> acres	
4. <u>Check all land uses that occur on, adjoining and near the proposed action</u>			
<input type="checkbox"/> Urban <input type="checkbox"/> Rural (non-agriculture) <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Residential (suburban)			
<input type="checkbox"/> Forest <input type="checkbox"/> Agriculture <input type="checkbox"/> Aquatic <input type="checkbox"/> Other (specify): _____			
<input type="checkbox"/> Parkland			

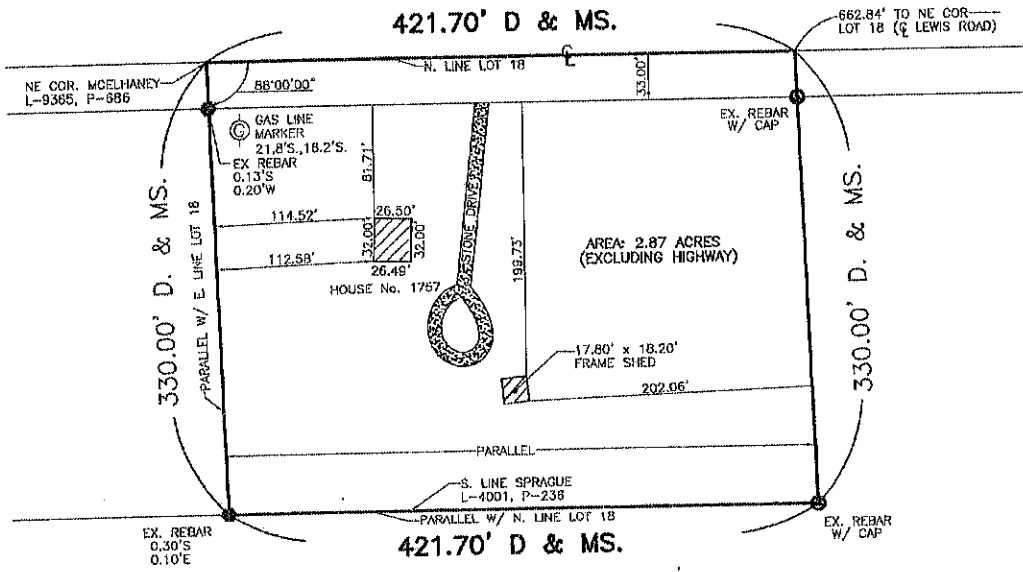
5. Is the proposed action,	NO	YES	N/A
a. <u>A permitted use under the zoning regulations?</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. <u>Consistent with the adopted comprehensive plan?</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. <u>Is the proposed action consistent with the predominant character of the existing built or natural landscape?</u>	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. <u>Is the site of the proposed action located in, or does it adjoin, a state listed Critical Environmental Area?</u> If Yes, identify: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. a. <u>Will the proposed action result in a substantial increase in traffic above present levels?</u>	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Are public transportation service(s) available at or near the site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Are any pedestrian accommodations or bicycle routes available on or near site of the proposed action?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. <u>Does the proposed action meet or exceed the state energy code requirements?</u> If the proposed action will exceed requirements, describe design features and technologies: _____	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10. <u>Will the proposed action connect to an existing public/private water supply?</u> If No, describe method for providing potable water: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
11. <u>Will the proposed action connect to existing wastewater utilities?</u> If No, describe method for providing wastewater treatment: _____	NO	YES	
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
12. a. <u>Does the site contain a structure that is listed on either the State or National Register of Historic Places?</u>	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed action located in an archeological sensitive area?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
13. a. <u>Does any portion of the site of the proposed action, or lands adjoining the proposed action, contain wetlands or other waterbodies regulated by a federal, state or local agency?</u>	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
b. Would the proposed action physically alter, or encroach into, any existing wetland or waterbody? If Yes, identify the wetland or waterbody and extent of alterations in square feet or acres: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
14. <u>Identify the typical habitat types that occur on, or are likely to be found on the project site.</u> Check all that apply: <input type="checkbox"/> Shoreline <input type="checkbox"/> Forest <input type="checkbox"/> Agricultural/grasslands <input type="checkbox"/> Early mid-successional <input type="checkbox"/> Wetland <input type="checkbox"/> Urban <input type="checkbox"/> Suburban			
15. <u>Does the site of the proposed action contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?</u>	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
16. <u>Is the project site located in the 100 year flood plain?</u>	NO	YES	
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
17. <u>Will the proposed action create storm water discharge, either from point or non-point sources?</u> If Yes, a. Will storm water discharges flow to adjacent properties? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	NO	YES	
	<input type="checkbox"/>	<input type="checkbox"/>	
b. Will storm water discharges be directed to established conveyance systems (runoff and storm drains)? If Yes, briefly describe: _____	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES	

18. Does the proposed action include construction or other activities that result in the impoundment of water or other liquids (e.g. retention pond, waste lagoon, dam)? If Yes, explain purpose and size: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19. Has the site of the proposed action or an adjoining property been the location of an active or closed solid waste management facility? If Yes, describe: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
20. Has the site of the proposed action or an adjoining property been the subject of remediation (ongoing or completed) for hazardous waste? If Yes, describe: _____ _____	NO	YES
	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I AFFIRM THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE		
Applicant/sponsor name: <u>CRAIG & CRISTINA POOSTER</u> Signature: <u><i>Craig P.</i></u>	Date: <u>5 Oct 2022</u>	

NOTE: THIS SURVEY WAS PREPARED WITHOUT THE BENEFIT OF AN ABSTRACT OF TITLE AND IS SUBJECT TO ANY STATE OF FACTS THAT MAY BE REVEALED BY AN EXAMINATION OF SUCH.



EMERY (66' WIDE) ROAD



File: 161 Residential Surveys 2018 Surveys 2018 Completed 18N7005.01 1757 Emery Rd CAD 1757 EMERY ROAD.dwg, Plot Date: 11/26/2019, By: GRANT MIERVEN, Plot Style: FULL-BLACK.CTB


NOTE - DIMENSIONS AND OFFSETS ON HOUSE TAKEN TO FOUNDATION

PART OF L. 18 S. 9 T. 9 R. 6 OF THE HOLLAND LAND COMPANY
 VILLAGE OF AURORA ; COUNTY OF ERIE ; STATE OF NEW YORK

NOTE: UNAUTHORIZED ALTERATION OR ADDITION TO ANY SURVEY, DRAWING, DESIGN SPECIFICATION PLAN OR REPORT IS A VIOLATION OF SECTION 7209 PROVISION 2 OF THE NEW YORK STATE EDUCATION LAW

REVISION	
DATE	DESCRIPTION
11-26-19	FOUNDATION LOCATION

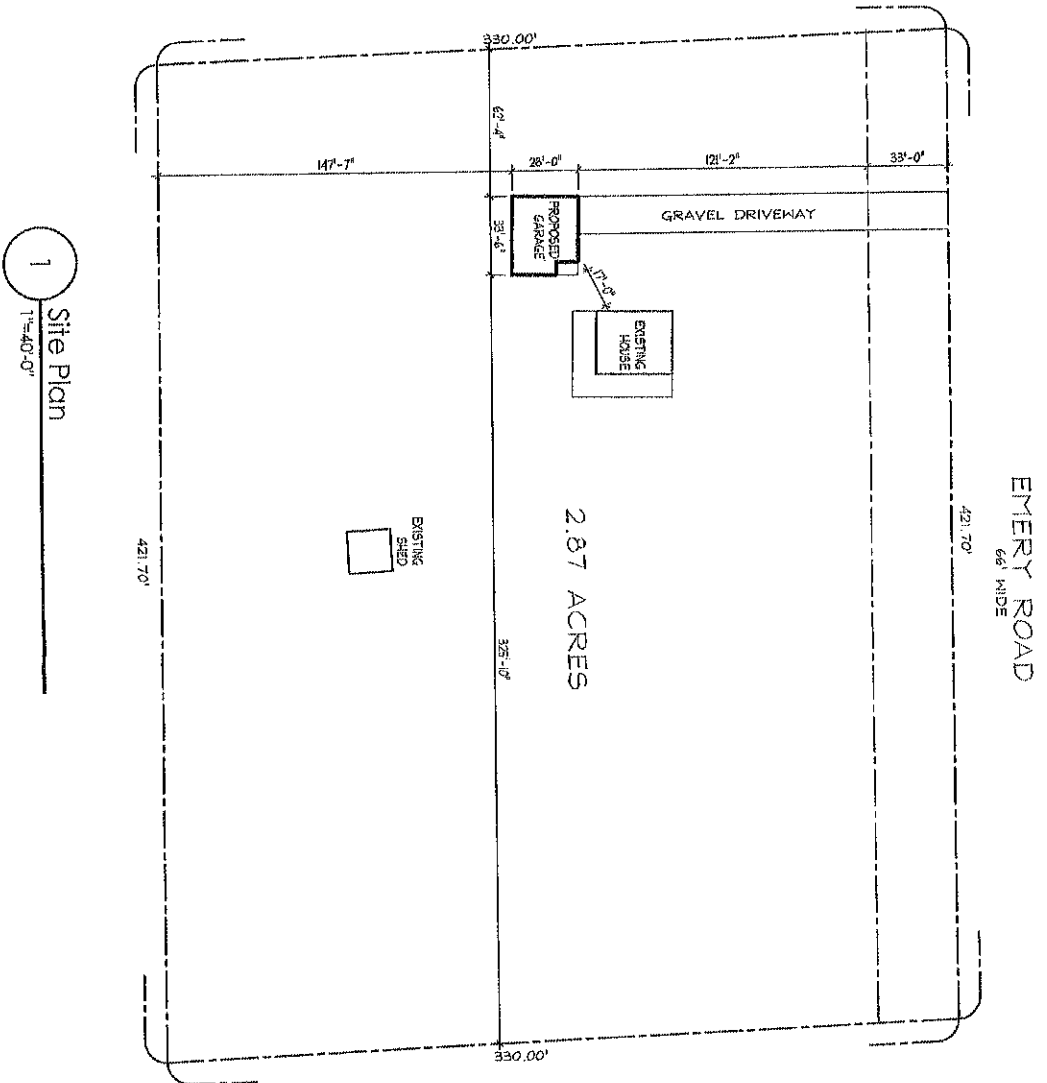
SBL No. 200.00-2-13.1



ARCHITECTURE, ENGINEERING & SURVEY, DPC

300 Pearl Street, Suite 500
 Buffalo, New York 14202
 P. 716.849.8739
 F. 716.858.0961
 WWW.KHEOPSDPC.COM

DRAWN BY <u>JMP</u>	SCALE <u>1"=100'</u>	JOB NO. <u>18N7005.01</u>
CHECKED BY <u>DRH</u>	FIELD DATE <u>2/7/18</u>	
CAD FILE <u>1757 EMERY</u>	OFFICE DATE <u>2/7/18</u>	
BOOK <u>418</u>	PAGE <u>45</u>	MAP <u>6368B</u>



1 Site Plan
1"=40'-0"

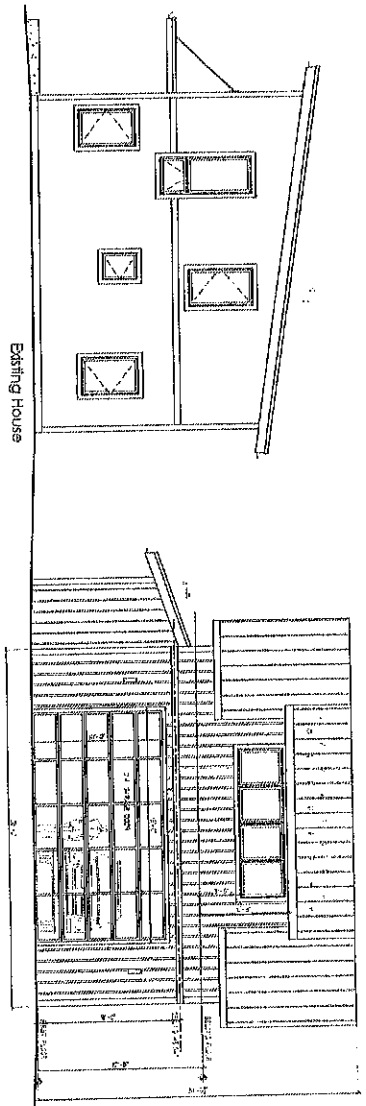
EMERY ROAD
66' WIDE

ba
BAMMEL ARCHITECTS
 A PROFESSIONAL CORPORATION
 6264 WEST QUAKER STREET
 ORCHARD PARK, NY 14127
 Phone (716) 662-2482
 Fax (716) 662-2487

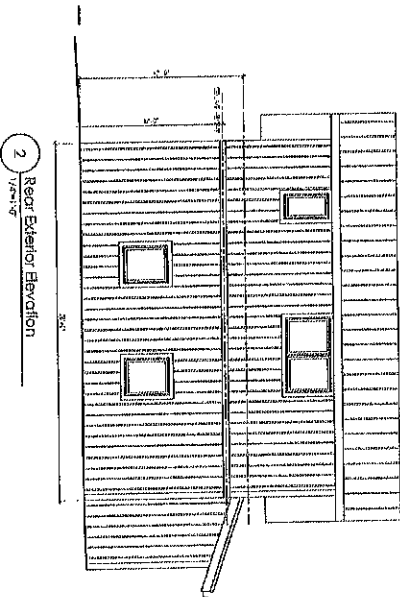
NEW GARAGE FOR:
POLSTON
RESIDENCE
 1757 EMERY ROAD
 EAST AUBURN NY 14032

ISSUE DATE: 1/5/2021
 REVISION: 2019
 PROJECT NUMBER: AS NOTED
 SCALE: ALL
 DRAWN BY: ALL
 CHECKED BY:
 SHEET TITLE:
SITE PLAN

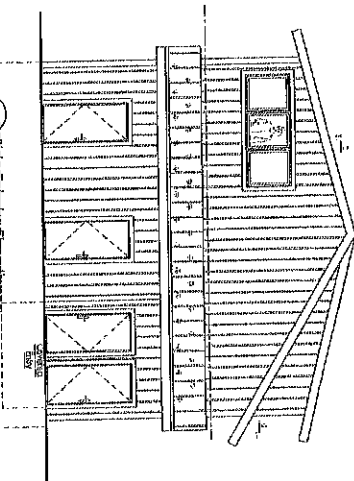
DRAWING NO.:
SP-1



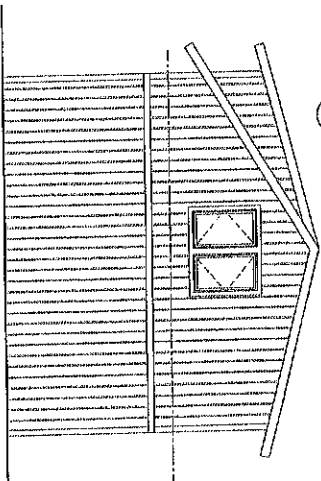
1 Front Exterior Elevation
1/2" = 1'-0"



2 Rear Exterior Elevation
1/2" = 1'-0"



3 Side Exterior Elevation
1/2" = 1'-0"



4 Side Exterior Elevation
1/2" = 1'-0"

BAMMEL ARCHITECTS
A PROFESSIONAL CORPORATION
6244 WEST OULKER STREET
ORCHARD PARK, NY 14127
Tel: 716 664-9242
Fax: 716 664-9243

DOCUMENT STATUS

- Not for construction
- Regularly updated
- Final (approved)
- Final (distribution)

NEW GARAGE FOR
POLSTON
RESIDENCE
1750 BURNETT ROAD
550-A ROCKAWAY HARBOR

DATE	
REVISION	12/14/2023
DESIGNED BY	AS
PROJECT MANAGER	AS
SCALE	AS SHOWN
DATE	12/14/2023
SCALE	AS SHOWN
DATE	12/14/2023
SCALE	AS SHOWN
DATE	12/14/2023
SCALE	AS SHOWN

SHOWN ON
A-200

50

NOTICE OF PUBLIC HEARING

PLEASE TAKE NOTICE, that a public hearing will be held by the Town Board of the Town of Aurora on the 28th day of November, 2022 at 7:00 p.m. at the Aurora Municipal Center located at 575 Oakwood Avenue, East Aurora, New York, 14052, at which hearing parties and interested citizens shall have an opportunity to be heard on a site plan proposal for a short-term rental unit (BnB) at 1757 Emery Road, East Aurora, New York.

All interested parties are entitled to be heard upon the said proposals at said public hearing. Copies of the proposals are available for review at the offices of the Town Clerk during normal business hours or on the Town website www.townofaurora.com

By Order of the Town Board of the Town of Aurora

Dated: November 14, 2022

Martha L. Librock

Town Clerk

Town of Aurora

NEW POSITION DUTIES STAT

WS-5

5D

To:
 PERSONNEL OFFICER County of Erie
 Edward A. Rath County Office Bldg
 95 Franklin St
 Buffalo, NY 14202

Date: 11/10/88

From: TOWN OF AURORA

County Dept Town
 Special Dist. Village

Pursuant to the provisions of Section 22, of the Civil Service Law, I am submitted statement of duties of proposed new position. (NOTE: Department head or other authority requesting the creation of a new position, shall prepare a description for each new position to be created except that one description may cover two or more identical positions in the same unit. Send three typed copies to the Personnel Officer.)

- DESCRIPTION OF DUTIES: Describe the work in sufficient detail to give a clear word picture of the job. Use a separate paragraph for each kind of work and describe the more important or time-consuming duties first. In the left column, estimate how the total working time is divided

Percent of Total Time/Frequency	ACTIVITIES
40%	Annually values and revalues each parcel of real property
10%	Utilizes and maintains current tax maps and appraisal cards
5%	May seek County advisory services in determining values of certain parcels
5%	Attends all hearings of Board of Assessment Review
5%	Makes changes in assessments in accordance with law as directed by Board of Assessment Review
5%	Appoints and trains an acting Assessor to perform as needed
5%	Attends the public examination of the tentative assessment roll at times prescribed by law
5%	Receives complaints filed and transmits them to the Board of Assessment Review
5%	Prepares reports of assessment activities State Board of Equalization and Assessment
5%	Provides school districts within the apportionment of the assessment roll
5%	Supervises and trains appraisal staff in assessment
5%	Reviews and makes determinations w/ exemptions

* NEEDS BOARD APPROVAL TO ADD A TEMPORARY JOB ASSESSOR POSITION TO OUR INVENTORY. THIS ALLOWS ROGER TO OVERLAP W/ NEW HIRE.

2. Names and Titles of Persons Supervising this position (General, Direct, Administrative, etc.)

NAME	TITLE	TYPE OF SUPERVISION
James Bach	Town Supervisor	Direct

3. Names and Titles of Persons Supervised by this position

NAME	TITLE	TYPE OF SUPERVISION
Jamie Swanson	Assessment Clerk	Direct
Leah DiFillippo	Clerk PT	Direct

4. Names and Titles of Persons doing substantially the same kind and level of work as will be done by the incumbent of this new position.

NAME	TITLE	LOCATION OF POSITION
Roger Pigeon	Assessor	Town of Aurora

5. What minimum qualification do you think should be required for this position? (High school, College Degrees, etc. plus years of experience.)

Graduation from High School plus 2 years satisfactory full time paid experience in occupation involving the valuation of real property;
 NY State Board of Equalization and Assessment training

Essential knowledge, skills and abilities:

Good knowledge of making an appraisal of types of real property; good knowledge of theory, principles and practices of real property valuation and assessment; good knowledge of residential and commercial building construction methods, materials and their costs; good knowledge of laws governing deed and related property records; ability to make and review math computations with speed and accuracy; ability to maintain effective working relationships with the public, municipal officials, and the Assessment Review board; ability to plan, work and supervise the work of others; integrity; tact; courtesy; good judgement; physical condition commensurate with the demands of the position

Type of License or certificate required:

6. As Department Head (or other Authority) I certify the above statements are accurate and complete.

Date: 11-4-2022

Title: SUPERVISOR

Signature: James A. Bach

CERTIFICATE OF PERSONNEL OFFICER

7. In accordance with the provisions of Civil Service Law, Section 22, the ERIE COUNTY PERSONNEL OFFICER certifies that the appropriate service title for the position described is:

Assessor (Non-Competitive)

Date: 11/7/2022

Signature: Jamie Burns DiCiccio

ACTION BY LEGISLATIVE BODY OR OTHER APPROVING AUTHORITY

8. Creation of described position:

Approved

Disapproved

Date:

Signature:

RETURN ONE COMPLETE COPY TO PERSONNEL OFFICER- After completing section B when position(s) are approved.

James Bach

WS-6

5E

From: Anthony DiFilippo <adifilippo@
Sent: Tuesday, November 8, 2022 1:3
To: James Bach; Kathleen Moffat
Cc: Supervisor; Jeffrey P. Markello
Subject: Town Board approval for clerk hire- Elizabeth Wilber

Supervisor Bach and Trustees Town of Aurora

Please accept this email correspondence as Judge Jeffrey Markello's and my request that Elizabeth Wilber be hired as a full time Aurora Court Clerk at the current junior clerk rate of \$17.34/hr. effective 11/16/22. Additionally, request is made that Ms. Wilber retain her Town of Aurora employee seniority status and carry that over to her new position as court clerk.

We also understand that the Town Board has been contemplating a ~~\$1.50/m.~~ raise (in addition to an across the board 4% raise) for Elizabeth and some other Town employees in 2023. We ask that the Town consider extending that raise to Elizabeth's new court clerk position for 2023.

Thank you for your consideration.

Jeff Markello and Tony DiFilippo

Anthony DiFilippo IV, Esq.

Bennett, DiFilippo, Kurtzhalts,

Whittemore & Seibold, LLP

681 Main St.

East Aurora, NY 14052

716.652.9560

www.eastauroraattorneys.com

Confidentiality Notice

This transmission is intended only for the use of the individual or entity to which it is addressed and may contain confidential information belonging to the sender which is protected by the Attorney/Client privilege. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or taking of any action in reliance on the contents or this information is strictly prohibited. If you received this transmission in error, immediately notify us by telephone to arrange for its return.

SUPERVISOR
James J. Bach
(716) 652-7590
jbach@townofaurora.com



WS-7

5F

TOWN OF AURORA

Aurora Municipal Center
575 Oakwood Avenue, East Aurora, NY 14052

www.townofaurora.com

November 8, 2022

To: Town Board

Re: Request to pay Preischel Brothers Service, Inc.

Please approve paying Preischel Brothers Service, Inc \$5,191.60 for Invoice #71378. The invoice is for the labor and material costs to replace 8 tires and 2 wheel rims that resulted from a scrape between the highway department's 2018 Kenworth triaxle truck (Vin Number is 1NKWXKTX2KJ282583) and another highway vehicle that was not damaged. The invoice and photos of the damage were submitted to Selective insurance on 10/25/22 and the claim is pending.

Thank you,

Elizabeth Deveso
Highway Secretary

PREISCHEL BROTHERS SERVICE, INC.

PO BOX 872
HAMBURG, NY 14075

Invoice

Date	Invoice #
10/28/2022	71378

Phone #	716-649-3038
Fax #	716-649-3396
E-mail	PREISCHELBOYS@ROADRUNNER.COM

Kenworth 2018

VIN# INKWXTX2KJ282583

Bill To
TOWN OF AURORA 251 QUAKER RD EAST AURORA, NY 14052

P.O. No.	Work Order	Terms	Due Date	Location	Vehicle #
	250380	NET 30	11/27/2022	251 QUAKER RD	KENWORTH TRUCK # 38
Quantity	Item	Description		Price Each	Amount
1	SERVICE CALL	SERVICE CALL TO INSTALL		350.00	350.00
8	11R22.5 HERCU...	11R22.5 HERCULES STRONG		425.00	3,400.00
8	MOUNT/DISMO...	MOUNT/DISMOUNT/INSTALL		49.00	392.00
8	VALVES TRUCK	VALVES TRUCK		9.95	79.60
2	8.25X22.5 WHEE...	8.25X22.5 WHEEL HP 10H ALUM DB		485.00	970.00
		Sales Tax		8.75%	0.00
				Total	\$5,191.60

SUPERVISOR
James J. Bach
(716) 652-7590
jbach@townofaurora.com



WS-8

5G

CLERK
Libro
(716) 652-3281
townclerk@townofaurora.com

TOWN OF AURORA
Aurora Municipal Center
575 Oakwood Avenue, East Aurora, NY 14052
www.townofaurora.com
November 8, 2022

To: Town Board

Re: Request to purchase new truck radios for Highway trucks

Please approve the purchase of new two-way truck radios with GPS systems from Saia Communications, Inc. We would like to equip ten trucks and put base communication units at the highway office and highway shop. Saia has superior reception service coverage in our area, and they have functions that would allow us to share a general highway channel with surrounding highway departments during weather emergencies and paving projects. Our contract would include a GPS tracking system for each truck which would enable us to track where our trucks are at all times. The radio system we are seeking is currently being used by the East Aurora Police Department so they would be able to communicate with them through our radios as well.

The highway trucks are currently equipped with two-way radios from FM Communications. Coverage and reception have been problematic over the years. Because of this we have been relying more on using employee's personal cell phones to communicate. So far, they have been doing this voluntarily, but they can revoke permission at any time. Most of our vehicles are not yet equipped with hands free cell service, so we also feel that using cell phones may be creating a safety hazard. The cost of labor, materials and one month of service is \$9,994.30. We have enough combined surplus in Account DB 5112.433 and Account DB 5110.433 to pay for the radios this year. We propose doing a budget transfer from these lines into our radio line, Account DB 5130.420.

Thank You,

A handwritten signature in black ink, appearing to read "D. Gunner".

David Gunner
Highway Superintendent

BUFFALO
 100 Stradtman St
 Buffalo, NY 14206
 Phone: 716-892-2900
 Fax: 716-892-2983



CHAFFEE
 12530 Olean Road
 Chaffee, NY 14030
 Phone: 716-496-8238
 Fax: 716-496-8247

QUOTATION
994000113

Bill To:
 AURORA, TOWN OF HIGHWAY DEPT
 251 QUAKER ROAD
 EAST AURORA, NY 14052

Ship To:
 AURORA, TOWN OF HIGHWAY DEPT
 251 QUAKER ROAD
 EAST AURORA, NY 14052

Contact: DAVID GUNNER
Contact #: 716-652-4050
Email: highway@townofaurora.com

Contact: DAVID GUNNER
Contact #: 716-652-4050
Email: highway@townofaurora.com

Date: 11/03/2022		Cust #: AH0427		Agent: Bruce Heineman		Terms: NET 30	
Line#	Qty	Item	Description	Unit Price	Extended		
10	1	AAM28QPN9RA1AN	XPR 5550e Two-Way Radio 1000-Channel UHF ^R 1 40W (Enabled) FULL COLOR DISPLAY UHF MOBILE RADIO WITH CONNECT+ ENABLED FOR BASE STATION PRICING DISCOUNT FOR USE ON SAIA CONNECT+SYSTEM LIST PRICE \$1514.00	799.00	799.00		
20	11	AAM28QPC9RA1AN	XPR 5350e Two-Way Radio 32-Channel UHF ^R 1 40W (Enabled) DIGITAL DISPLAY UHF MOBILE RADIO PRICING DISCOUNT FOR USE ON SAIA CONNECT+SYSTEM 10 TRUCKS AND 1 BASE STATION IN SHOP LIST PRICE \$1288.00	699.00	7,689.00		
40	12	HKN9327BR	CABLE, ASSEMBLY,IGNITION SWITCH CBL	17.00	204.00		
50	12	HLN6325B	Ignition Jumper Kit	36.30	435.60		
60	12	CONN+	SAIANET CONNECTPLUS SYSTEM FEES PER UNIT PER MONTH PAY ANNUALLY UP FRONT AND RECEIVE 2 MONTHS FREE \$234.00 PER MONTH X 10 MONTHS = \$2340.00 10 MOBILE UNITS HIGHWAY , 1 BASE STATION AT SHOP , 1 BASE IN OFFICE SaiaNet ConnectPlus Monthly System Access to all sites and all future sites as they are turned on. Unlimited airtime & private calling. Up to 5 channels for mixed use if required	19.50	234.00		
70	10	FSC	FIELD SERVICE CALL POWER CABLES , ANTENNA CABLES , AND ANTENNAS TO BE REUSED IF POSSIBLE	120.00	1,200.00		

BUFFALO
 100 Stradtman St
 Buffalo, NY 14206
 Phone: 716-892-2900
 Fax: 716-892-2983



CHAFFEE
 12530 Olean Road
 Chaffee, NY 14030
 Phone: 716-496-8238
 Fax: 716-496-8247

QUOTATION
994000113

Page 2

Bill To:
 AURORA, TOWN OF HIGHWAY DEPT
 251 QUAKER ROAD
 EAST AURORA, NY 14052

Ship To:
 AURORA, TOWN OF HIGHWAY DEPT
 251 QUAKER ROAD
 EAST AURORA, NY 14052

Contact: DAVID GUNNER
Contact #: 716-652-4050
Email: highway@townofaurora.com

Contact: DAVID GUNNER
Contact #: 716-652-4050
Email: highway@townofaurora.com

Date: 11/03/2022		Cust #: AH0427		Agent: Bruce Heineman		Terms: NET 30	
Line#	Qty	Item	Description	Unit Price	Extended		
80	12	TRADEIN	TRADE-IN	-75.00	-900.00		
90	10	GPS	SAIANET GPS SERVICE PER UNIT PER MONTH PAY ANNUALLY UP FRONT AND RECEIVE 2 MONTHS FREE \$50.00 PER MONTH X 10 MONTHS = \$500.00	5.00	50.00		
100	10	328738	"Glass Mt Active GPS, BIK"	28.27	282.70		

Proposal is valid for 30 days
 Credit card purchases will be subject to a 3% surcharge if over \$1000.00.

Subtotal : \$9,994.30
 Tax : \$0.00
 Total Quote : \$9,994.30

BUFFALO
 (WBE) Certified Erie County, NY (Exp. 8/17/2017)
 WBE) Certified NYS ID-51152 (Exp. 8/15/2017)



SUPERVISOR
James J. Bach
(716) 652-7590
jbach@townofaurora.com



TOWN CLERK
Martha L. Libroc
(716) 652-3281
townclerk@townofaurora.com

TOWN OF AURORA
Aurora Municipal Center
575 Oakwood Avenue, East Aurora, NY 14052
www.townofaurora.com
November 8, 2022

To: Town Board

Re: Request to purchase new truck radios for Parks trucks

Please approve the purchase of new two-way truck radios with GPS systems from Saia Communications, Inc. for the Park trucks. The estimate for these radios is \$3,247.01. The purchase price will not be charged to us until January 2023. The Parks radios will be taken out of A 7110.424 from the 2023 budget.

Thank You,

A handwritten signature in black ink, appearing to read 'David Gunner', written over a large, stylized oval shape.

David Gunner
Highway Superintendent

BUFFALO
 100 Stradtman St
 Buffalo, NY 14206
 Phone: 716-892-2900
 Fax: 716-892-2983



CHAFFEE
 12530 Olean Road
 Chaffee, NY 14030
 Phone: 716-496-8238
 Fax: 716-496-8247

QUOTATION
994000115

Bill To:
 AURORA, TOWN OF HIGHWAY DEPT
 251 QUAKER ROAD
 EAST AURORA, NY 14052

Ship To:
 AURORA, TOWN OF HIGHWAY DEPT
 251 QUAKER ROAD
 EAST AURORA, NY 14052

Contact: DAVID GUNNER
Contact #: 716-652-4050
Email: highway@townofaurora.com

Contact: DAVID GUNNER
Contact #: 716-652-4050
Email: highway@townofaurora.com

Date: 11/04/2022		Cust #: AH0427		Agent: Bruce Heineman		Terms: NET 30	
Line#	Qty	Item	Description	Unit Price	Extended		
			2 MONTHS FREE \$15.00 PER MONTH X 10 MONTHS = \$150.00				
80	3	328738	"Glass Mt Active GPS, Blk"	28.27	84.81		

Proposal is valid for 30 days
 Credit card purchases will be subject to a 3% surcharge if over \$1000.00.

Subtotal : \$3,247.01
 Tax : \$0.00
 Total Quote : \$3,247.01

BUFFALO
 (WBE) Certified Erie County, NY (Exp. 8/17/2017)
 (WBE) Certified NYS ID-51152 (Exp. 8/15/2017)



BUFFALO
 100 Stradtman St
 Buffalo, NY 14206
 Phone: 716-892-2900
 Fax: 716-892-2983



CHAFFEE
 12530 Olean Road
 Chaffee, NY 14030
 Phone: 716-496-8238
 Fax: 716-496-8247

QUOTATION
994000115

Bill To:
 AURORA, TOWN OF HIGHWAY DEPT
 251 QUAKER ROAD
 EAST AURORA, NY 14052

Ship To:
 AURORA, TOWN OF HIGHWAY DEPT
 251 QUAKER ROAD
 EAST AURORA, NY 14052

Contact: DAVID GUNNER
Contact #: 716-652-4050
Email: highway@townofaurora.com

Contact: DAVID GUNNER
Contact #: 716-652-4050
Email: highway@townofaurora.com

Date: 11/04/2022		Cust #: AH0427		Agent: Bruce Heineman		Terms: NET 30	
Line#	Qty	Item	Description	Unit Price	Extended		
10	4	AAM28QPC9RA1AN	XPR 5350e Two-Way Radio 32-Channel UHFR1 40W (Enabled) DIGITAL DISPLAY UHF MOBILE RADIO PRICING DISCOUNT FOR USE ON SAIA CONNECT+SYSTEM 4 PARKS TRUCKS LIST PRICE \$1288.00	699.00	2,796.00		
20	4	HKN9327BR	CABLE, ASSEMBLY,IGNITION SWITCH CBL	17.00	68.00		
30	4	HLN6325B	Ignition Jumper Kit	36.30	145.20		
40	4	CONN+	SAIANET CONNECTPLUS SYSTEM FEES PER UNIT PER MONTH PAY ANNUALLY UP FRONT AND RECEIVE 2 MONTHS FREE \$78.00 PER MONTH X 10 MONTHS = \$780.00 4 UNITS PARKS SaiaNet ConnectPlus Monthly System Access to all sites and all future sites as they are turned on. Unlimited airtime & private calling. Up to 5 channels for mixed use if required	19.50	78.00		
50	3	FSC	FIELD SERVICE CALL	120.00	360.00		
60	4	TRADEIN	TRADE-IN	-75.00	-300.00		
70	3	GPS	SAIANET GPS SERVICE PER UNIT PER MONTH PAY ANNUALLY UP FRONT AND RECEIVE	5.00	15.00		



Document G701 - 2017

WS-9

5H-1

Change Order

PROJECT: <i>(Name and address)</i> Updates and Repairs to Town of Aurora Community Pool 690 South Street, East Aurora, NY 14052	CONTRACT INFORMATION: Contract For: General Construction Date: 09/22/2022	CHANGE ORDER INFORMATION: Change Order Number: 001 Date: 11/01/2022
OWNER: <i>(Name and address)</i> Town of Aurora 575 Oakwood Avenue East Aurora, NY 14052	ARCHITECT: <i>(Name and address)</i> Fontanese, Folts, Aubrecht, Ernst Architects, P.C. 6395 West Quaker Street Orchard Park, NY 14127	CONTRACTOR: <i>(Name and address)</i> The Peyton Barlow Co., Inc. 360 Delaware Avenue, Suite 300 Buffalo, NY 14202

THE CONTRACT IS CHANGED AS FOLLOWS:

(Insert a detailed description of the change and, if applicable, attach or reference specific exhibits. Also include agreed upon adjustments attributable to executed Construction Change Directives.)

A second subpanel will be installed to separate the multiple existing circuits sharing circuit breakers to have a dedicated breaker for each circuit in compliance with the current National Electrical Code. Refer to the attached PBC Job Modification #2 documentation for supplemental information.

The original Contract Sum was	\$	<u>374,670.00</u>
The net change by previously authorized Change Orders	\$	<u>0.00</u>
The Contract Sum prior to this Change Order was	\$	<u>374,670.00</u>
The Contract Sum will be increased by this Change Order in the amount of	\$	<u>1,075.00</u>
The new Contract Sum including this Change Order will be	\$	<u>375,745.00</u>

The Contract Time will be increased by Zero (0) days.
The new date of Substantial Completion will be

NOTE: This Change Order does not include adjustments to the Contract Sum or Guaranteed Maximum Price, or the Contract Time, that have been authorized by Construction Change Directive until the cost and time have been agreed upon by both the Owner and Contractor, in which case a Change Order is executed to supersede the Construction Change Directive.

NOT VALID UNTIL SIGNED BY THE ARCHITECT, CONTRACTOR AND OWNER.

Fontanese, Folts, Aubrecht, Ernst
Architects, P.C.

ARCHITECT *(Firm name)*
William A. Heidt

SIGNATURE

William A. Heidt, R.A., Project Architect

PRINTED NAME AND TITLE

11/01/2022

DATE

The Peyton Barlow Co., Inc.

CONTRACTOR *(Firm name)*

SIGNATURE

PRINTED NAME AND TITLE

DATE

Town of Aurora

OWNER *(Firm name)*

SIGNATURE

PRINTED NAME AND TITLE

DATE

— THE —
PEYTON BARLOW CO.
INCORPORATED

October 27, 2022

William A. Heidt
Fontanese Folts Aubrecht Ernst Architects P.C.
6395 West Quaker Street
Orchard Park, NY 14127

Job Modification #2

RE: TOA – Community Pool

Dear William,

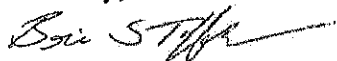
The following is a breakdown of the costs to provide an additional subpanel per RFI #8.

• JM&R – Furnish and install subpanel	\$ 825
• PBC - Supervision	\$ 170
• Peyton Barlow Co., Inc. 8% Overhead & Profit	<u>\$ 80</u>
Total Modification:	\$ 1,075

- Additional time needed to complete project as a result of this change order. **2 Working Days**

Please contact our office at any time should you have questions regarding this change in scope.

Sincerely,



Brian Tofflemire
Project Manager

The above prices, specifications and conditions are satisfactory and are hereby accepted. The Peyton Barlow Co. is authorized to proceed with the above-mentioned changes to the original contract. Please sign and return to our office.

Date of Acceptance 11/01/22 Signature William A. Heidt



AIA Document G701™ – 2017

5H-2

Change Order

PROJECT: <i>(Name and address)</i> Updates and Repairs to Town of Aurora Community Pool 690 South Street, East Aurora, NY 14052	CONTRACT INFORMATION: Contract For: General Construction Date: 09/22/2022	CHANGE ORDER INFORMATION: Change Order Number: 002 Date: 11/02/2022
OWNER: <i>(Name and address)</i> Town of Aurora 575 Oakwood Avenue East Aurora, NY 14052	ARCHITECT: <i>(Name and address)</i> Fontanese, Folts, Aubrecht, Ernst Architects, P.C. 6395 West Quaker Street Orchard Park, NY 14127	CONTRACTOR: <i>(Name and address)</i> The Peyton Barlow Co., Inc. 360 Delaware Avenue, Suite 300 Buffalo, NY 14202

THE CONTRACT IS CHANGED AS FOLLOWS:

(Insert a detailed description of the change and, if applicable, attach or reference specific exhibits. Also include agreed upon adjustments attributable to executed Construction Change Directives.)

The existing subgrade below the removed sidewalk is to be removed and replaced with 6" of clean stone prior to the placement of the new concrete sidewalks.

The original Contract Sum was	\$ 374,670.00
The net change by previously authorized Change Orders	\$ 1,075.00
The Contract Sum prior to this Change Order was	\$ 375,745.00
The Contract Sum will be increased by this Change Order in the amount of	\$ 2,248.00
The new Contract Sum including this Change Order will be	\$ 377,993.00

The Contract Time will be increased by Zero (0) days.
The new date of Substantial Completion will be

NOTE: This Change Order does not include adjustments to the Contract Sum or Guaranteed Maximum Price, or the Contract Time, that have been authorized by Construction Change Directive until the cost and time have been agreed upon by both the Owner and Contractor, in which case a Change Order is executed to supersede the Construction Change Directive.

NOT VALID UNTIL SIGNED BY THE ARCHITECT, CONTRACTOR AND OWNER.

Fontanese, Folts, Aubrecht, Ernst
Architects, P.C.

The Peyton Barlow Co., Inc.

Town of Aurora

ARCHITECT *(Firm name)*

CONTRACTOR *(Firm name)*

OWNER *(Firm name)*

William A. Heidt
SIGNATURE

SIGNATURE

SIGNATURE

William A. Heidt, R.A., Project Architect
PRINTED NAME AND TITLE

PRINTED NAME AND TITLE

PRINTED NAME AND TITLE

11/02/2022
DATE

DATE

DATE

← THE →
PEYTON BARLOW CO.
INCORPORATED

November 1, 2022

William A. Heidt
Fontanese Folts Aubrecht Ernst Architects P.C.
6395 West Quaker Street
Orchard Park, NY 14127

Job Modification #3

RE: TOA – Community Pool

Dear William,

The following is a breakdown of the costs to remove the existing subgrade and provide 6" of stone under the new concrete sidewalks.

• OTC – Labor, material and equipment	\$ 1,900
• PBC – Supervision	\$ 170
• Peyton Barlow Co., Inc. 8% Overhead & Profit on Subcontractors	\$ 152
• Peyton Barlow Co., Inc. 15% Overhead & Profit	<u>\$ 26</u>
Total Modification:	\$ 2,248

- Additional time needed to complete project as a result of this change order. **(Work will take one additional day, but rescheduling the concrete could take a week.)** **5 Working Days**

Please contact our office at any time should you have questions regarding this change in scope.

Sincerely,



Brian Tofflemire
Project Manager

The above prices, specifications and conditions are satisfactory and are hereby accepted. The Peyton Barlow Co. is authorized to proceed with the above-mentioned changes to the original contract. Please sign and return to our office.

Date of Acceptance 11/02/22

Signature William A. Heidt

Change Order

PROJECT: <i>(Name and address)</i> Updates and Repairs to Town of Aurora Community Pool 690 South Street, East Aurora, NY 14052	CONTRACT INFORMATION: Contract For: General Construction Date: 09/22/2022	CHANGE ORDER INFORMATION: Change Order Number: 003 Date: 11/07/2022
OWNER: <i>(Name and address)</i> Town of Aurora 575 Oakwood Avenue East Aurora, NY 14052	ARCHITECT: <i>(Name and address)</i> Fontanese, Folts, Aubrecht, Ernst Architects, P.C. 6395 West Quaker Street Orchard Park, NY 14127	CONTRACTOR: <i>(Name and address)</i> The Peyton Barlow Co., Inc. 360 Delaware Avenue, Suite 300 Buffalo, NY 14202

THE CONTRACT IS CHANGED AS FOLLOWS:

(Insert a detailed description of the change and, if applicable, attach or reference specific exhibits. Also include agreed upon adjustments attributable to executed Construction Change Directives.)

Cover the existing metal flashing at the top of the four sloped roofs with new metal flashing in lieu of running the EPDM over the vertical face of the existing metal cap. Refer to the attached PBC Job Modification #6 documentation for supplemental information.

The original Contract Sum was	\$ 374,670.00
The net change by previously authorized Change Orders	\$ 3,323.00
The Contract Sum prior to this Change Order was	\$ 377,993.00
The Contract Sum will be increased by this Change Order in the amount of	\$ 2,786.00
The new Contract Sum including this Change Order will be	\$ 380,779.00

The Contract Time will be increased by Zero (0) days.
 The new date of Substantial Completion will be

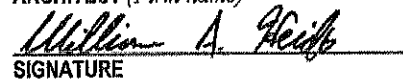
NOTE: This Change Order does not include adjustments to the Contract Sum or Guaranteed Maximum Price, or the Contract Time, that have been authorized by Construction Change Directive until the cost and time have been agreed upon by both the Owner and Contractor, in which case a Change Order is executed to supersede the Construction Change Directive.

NOT VALID UNTIL SIGNED BY THE ARCHITECT, CONTRACTOR AND OWNER.

 Fontanese, Folts, Aubrecht, Ernst
 Architects, P.C.

The Peyton Barlow Co., Inc.

Town of Aurora

ARCHITECT *(Firm name)*
CONTRACTOR *(Firm name)*
OWNER *(Firm name)*


SIGNATURE

SIGNATURE

 William A. Heidt, R.A., Project Architect
PRINTED NAME AND TITLE

PRINTED NAME AND TITLE

PRINTED NAME AND TITLE

 11/07/2022
DATE

DATE

DATE

—THE—
PEYTON BARLOW CO.
INCORPORATED

November 3, 2022

William A. Heidt
Fontanese Folts Aubrecht Ernst Architects P.C.
6395 West Quaker Street
Orchard Park, NY 14127

Job Modification #6

RE: TOA – Community Pool

Dear William,

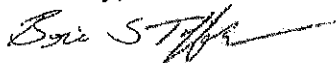
The following is a breakdown of the costs to provide a custom charcoal colored L-bend .32 metal flashing on the vertical surface of the existing metal flashing at the top of each roof. This would be in lieu of running EPDM over the vertical face of the existing metal cap.

• AVA Roofing – Furnish & Install	\$ 2,580
• Peyton Barlow Co., Inc. 8% Overhead & Profit	<u>\$ 206</u>
Total Modification:	\$ 2,786

- Additional time needed to complete project as a result of this change order. **0 Working Days**

Please contact our office at any time should you have questions regarding this change in scope.

Sincerely,



Brian Tofflemire
Project Manager

The above prices, specifications and conditions are satisfactory and are hereby accepted. The Peyton Barlow Co. is authorized to proceed with the above-mentioned changes to the original contract. Please sign and return to our office.

Date of Acceptance 11/7/22 Signature William A. Heidt

5H-4

Change Order

PROJECT: <i>(Name and address)</i> Updates and Repairs to Town of Aurora Community Pool 690 South Street, East Aurora, NY 14052	CONTRACT INFORMATION: Contract For: General Construction Date: 09/22/2022	CHANGE ORDER INFORMATION: Change Order Number: 004 Date: 11/07/2022
OWNER: <i>(Name and address)</i> Town of Aurora 575 Oakwood Avenue East Aurora, NY 14052	ARCHITECT: <i>(Name and address)</i> Fontanese, Folts, Aubrecht, Ernst Architects, P.C. 6395 West Quaker Street Orchard Park, NY 14127	CONTRACTOR: <i>(Name and address)</i> The Peyton Barlow Co., Inc. 360 Delaware Avenue, Suite 300 Buffalo, NY 14202

THE CONTRACT IS CHANGED AS FOLLOWS:

(Insert a detailed description of the change and, if applicable, attach or reference specific exhibits. Also include agreed upon adjustments attributable to executed Construction Change Directives.)

Remove and rebuild the masonry column, located next to the Men's Showers, that has shifted and has cracked/missing mortar. Also, to repoint the mortar joints on the interior and exterior that are deteriorated or missing. Refer to the attached PBC Job Modification #4 documentation for supplemental information.

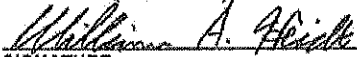
The original Contract Sum was	\$ 374,670.00
The net change by previously authorized Change Orders	\$ 6,109.00
The Contract Sum prior to this Change Order was	\$ 380,779.00
The Contract Sum will be increased by this Change Order in the amount of	\$ 1,938.00
The new Contract Sum including this Change Order will be	\$ 382,717.00

The Contract Time will be increased by Zero (0) days.
The new date of Substantial Completion will be

NOTE: This Change Order does not include adjustments to the Contract Sum or Guaranteed Maximum Price, or the Contract Time, that have been authorized by Construction Change Directive until the cost and time have been agreed upon by both the Owner and Contractor, in which case a Change Order is executed to supersede the Construction Change Directive.

NOT VALID UNTIL SIGNED BY THE ARCHITECT, CONTRACTOR AND OWNER.

Fontanese, Folts, Aubrecht, Ernst
Architects, P.C.

ARCHITECT *(Firm name)*


SIGNATURE

William A. Heidt, R.A., Project Architect

PRINTED NAME AND TITLE

11/07/2022

DATE

The Peyton Barlow Co., Inc.

CONTRACTOR *(Firm name)*

SIGNATURE

PRINTED NAME AND TITLE

DATE

Town of Aurora

OWNER *(Firm name)*

SIGNATURE

PRINTED NAME AND TITLE

DATE

—THE—
PEYTON BARLOW CO.
INCORPORATED

November 1, 2022

William A. Heidt
Fontanese Folts Aubrecht Ernst Architects P.C.
6395 West Quaker Street
Orchard Park, NY 14127

Job Modification #4

RE: TOA – Community Pool

Dear William,


The following is a breakdown of the additional costs to repair the existing masonry.

• Heritage Masonry – Labor and materials to remove and re-build the existing column, fully reinforced and fully grouted	\$ 1,100
• Heritage Masonry – Repoint existing masonry to prepare for epoxy finish	\$10/LF Not to Exceed 50 LF.
• PBC - Supervision	\$ 170
• Peyton Barlow Co., Inc. 8% Overhead & Profit on Subcontractors	\$ TBD 142
• Peyton Barlow Co., Inc. 15% Overhead & Profit	<u>\$ TBD</u> 26
Total Modification:	\$ TBD Not to Exceed \$1,938

- Additional time needed to complete project as a result of this change order. **2 Working Days**

Please contact our office at any time should you have questions regarding this change in scope.

Sincerely,



Brian Tofflemire
Project Manager

The above prices, specifications and conditions are satisfactory and are hereby accepted. The Peyton Barlow Co. is authorized to proceed with the above-mentioned changes to the original contract. Please sign and return to our office.

Date of Acceptance 11/7/22 Signature William A. Heidt

WS-10

51

Application # _____

Date received: _____

Application For SPECIAL EVENT Permit

Submit applications to:
Town of Aurora Town Clerk
575 Oakwood Ave
East Aurora, NY 14052
Telephone (716) 652-3280 Fax: (716) 652-3507

ALL REQUESTS MUST BE MADE NO LESS THAN 30 DAYS IN ADVANCE OF EVENT.

1. Name of organization/Applicant: Michael + Ashley Bojanowski
2. Individual responsible for this request: Michael + Ashley Bojanowski
3. Address: 1840 Boies Rd
East Aurora, NY 14052
4. Telephone number: (716) 8
5. Fax: N/A
6. Email: miche id.com
7. Date(s) of event: 12/01/22 - 12/31/22
8. Hours of event (including set up/take down): Start 5:00pm End 9:00pm
9. Description of the event:
A display of Christmas lights synchronized to music which can be
listened to inside of a vehicle linked to a radio station.
10. Location of event:
Address: 1840 Boies Rd East Aurora, NY 14052
SBL #: 200.00-1-20.2

Please attach a map of the event area. On the map include the following:

- Parking area(s) - including number of on and off-street parking spaces.
- Location(s) and number of toilet facilities.
- Location of entrance(s) and exit(s) to/from the event site.

- Location of vendor facilities, if applicable, including tents, booths and food service facilities.
- Location of all residential structures on the property and on adjacent properties.
- Map of parade route if applicable.

11. Written steps to be taken to control traffic:

No parking on the East side of the road with 3 "No Parking This Side" signs established on property.

12. Written plan for security:

N/A

13. Estimated attendance per day: unknown

- a. Will pedestrian participants be crossing any public road(s)? ___ Y ✓ N
- b. Will participants be attending via bus? ___ Y ✓ N

14. Will food or drinks be served?

No

a. If yes, please describe

15. Will there be sound amplification, music, DJ or band(s)?

a. If yes, please describe

NO

16. Provide drawings to the Town of Aurora Building Department that describe location, size and text of all proposed signs for this event. (Additional fees may apply.)
Approved signs may be erected upon approval of the permit, but no sooner than 30 days prior to the event and must be removed immediately after.

PLEASE NOTE: Based on the type of event and estimated attendance, a meeting with the Town Supervisor, Highway Supervisor, and Chief of Police may be scheduled at the discretion of the Aurora Town Board to discuss a plan for proper traffic control, parking and crowd control.

17. Insurance: Applicant must obtain and maintain commercial liability insurance policy, including public liability coverage, with minimum limits of \$1,000,000 per occurrence, and property damage insurance with minimum limits \$1,000,000 per occurrence; Such policies shall list the Town of Aurora as an additional name insured.

18. Indemnification: Applicant shall defend, indemnify, and hold harmless the Town of Aurora, its officials, employees, agents and other persons from and against all claims, costs, judgments, liens, encumbrances, and expenses (including reasonable attorneys' fees) arising

out of any activity related to or in connection with this application or any permit, gather or event related to this application.

19. Acknowledgement:

I CERTIFY UNDER PENALTY OF PERJURY THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT, THAT ANY FALSE OR MISLEADING INFORMATION SHALL BE GROUNDS FOR DENIAL, AND I AGREE, TO COMPLY WITH ANY AND ALL CONDITIONS OF APPROVAL.

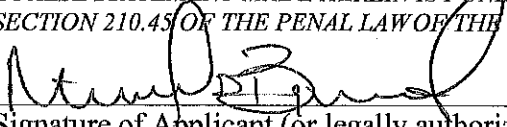
I ACKNOWLEDGE THAT IT IS THE APPLICANT'S RESPONSIBILITY TO ENSURE THAT PATRONS, LICENSEES, AND/OR INVITEES OF THE EVENT DO NOT TRESPASS UPON OR DAMAGE ANY ADJOINING PROPERTY OR PREMISES.

I ACKNOWLEDGE THAT THE AURORA TOWN CODE CHAPTER, ENTITLED "SPECIAL EVENTS.", IS THE CONTROLLING LEGISLATION FOR THE REGULATION OF EVENTS IN THE TOWN OF AURORA, AND THAT THE ISSUANCE OF A PERMIT PURSUANT TO THIS APPLICATION REQUIRES COMPLIANCE WITH ALL PROVISIONS AND REGULATIONS WITHIN.

I FURTHER ACKNOWLEDGE THAT THE ISSUANCE OF A PERMIT PURSUANT TO THIS APPLICATION IS NOT A WAIVER FOR ANY ACTIVITY PROHIBITED BY LAW, AND AS A CONDITION OF ANY PERMIT ISSUED, COMPLIANCE WITH ALL PROVISIONS OF THE AURORA TOWN CODE, AS WELL AS APPLICABLE STATE AND FEDERAL LAW, IS REQUIRED.

APPLICANT CONSENTS TO THE INSPECTION OF THE PREMISES BY A POLICE OFFICER OR OTHER ENFORCEMENT OFFICER FOR THE PURPOSE OF ENSURING THAT THE TERMS AND CONDITIONS OF THE PERMIT ARE MET.

A FALSE STATEMENT MADE HEREIN IS PUNISHABLE AS A CLASS "A" MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW OF THE STATE OF NEW YORK.


Signature of Applicant (or legally authorized representative of Applicant)

10/18/22
Date

20. Property Owner Consent: Property owner consent is required when the Applicant is not the property owner. If the Applicant is the property owner, this portion does not need to be filled out.

I CERTIFY UNDER PENALTY OF PERJURY THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT AND THAT I AM THE LEGAL OWNER OF THE PROPERTY LISTED IN THIS APPLICATION, OR I AM A LEGAL OWNER, AGENT, MEMBER, OR AUTHORIZED OFFICER OF THE CORPORATION OR TRUST OWNING THE PROPERTY LISTED IN THIS APPLICATION.

I UNDERSTAND THAT, AS AN OWNER OF A PROPERTY LOCATED WITHIN THE TOWN OF AURORA AND OUTSIDE OF THE BOUNDARIES OF ANY INCORPORATED VILLAGE, I SHALL NOT CAUSE, PERMIT, OR ALLOW MY PROPERTY TO BE USED FOR AN EVENT AS DEFINED IN AURORA TOWN CODE §XXX UNLESS A WRITTEN PERMIT FOR THE EVENT HAS BEEN ISSUED BY THE APPROPRIATE TOWN OFFICIAL(S).

I HEREBY CONSENT TO INSPECTION OF THE PREMISES BY A POLICE OFFICER OR OTHER ENFORCEMENT OFFICER FOR THE PURPOSE OF ENSURING THAT THE TERMS AND CONDITIONS OF THE PERMIT ARE MET.

I ALSO HEREBY AGREE THAT I AM FULLY AWARE OF THE DETAILS OF THE EVENT

SUPERVISOR
JAMES J. BACH
(716) 652-7590
jbach@townofaurora.com



4A

CLERK
CLOCK
-3280

townclerk@townofaurora.com

TOWN OF AURORA

575 Oakwood Avenue, East Aurora, NY 14052

www.townofaurora.com

MEMO

TO: Aurora Town Board
FROM: Kathleen Moffat
RE: Preliminary Budget Changes - Post Public Hearing
DATE: 11/14/22

The following is a list of changes made to the 2023 Preliminary Budget post public hearing:

- Decreased RPTL 520 (Summary Page) from \$7,751 to \$7,520.76 based on final figures received from the Assessor's office
- Decreased A 1089 PY Exemption Removals (General Fund Townwide Revenues) from \$7,751 to \$7,520 based on final figures received from the Assessor's office
- Updated Taxable Values based on final figures received from the Assessor's office
- Added South Wales FD No 1 Adopted Budget
- Added Aurora Colden FD No 6 Adopted Budget

Final Tax Rate Increases:

- A Fund: 3.97%
- B Fund: 1.16%
- DA Fund: 1.94% *decrease*
- DB Fund: .19%

Tax Cap:

- \$51,499 under the tax cap

The bonus payments for employees, funded by the ARPA monies, will be paid out the first payroll of the new year.

VOTE
TO APPROVE



5J

BURKE GROUP

November 4, 2022

Ms. Kathleen Moffat
Assistant to the Supervisor
Town of Aurora
575 Oakwood Avenue
East Aurora, New York 14052

Re: GASB 75 Service Agreement

Dear Kate:

This letter outlines the services Burke Group will provide to the Town of Aurora (the Town) for actuarial services to be rendered for the Town regarding GASB 75 valuation services for their postretirement healthcare plans. When properly executed by both parties, this letter, together with referenced Appendix A, becomes the Service Agreement for these services.

Services, Deliverables and Fees

Appendix A, *Schedule of Services and Fees*, dated November 4, 2022 conveys our services, deliverables and related fees for this Agreement. If the scope of these services changes, we will issue a letter of amendment to this Service Agreement with an accompanying updated Appendix A for mutual signature.

The Burke Group Pension Services Team

Members of the Burke Group actuarial services team are listed at the bottom of Appendix A, *Schedule of Services and Fees*.

Key Dependencies and Assumptions

We assume that all data and information provided by you will be accurate and timely.

Fees

Fees for the actuarial services specified in this Agreement are presented in Appendix A, *Schedule of Services and Fees*. Additional fees, computed at the actuary's hourly rate, may be charged for additional services performed. Appendix A includes our hourly rates for additional services or special projects. Any change in our fees will be communicated to you in writing.

Term

This Agreement is applicable only for the project(s) stated. Either of us may terminate this Agreement by giving the other written notice at least 90 days in advance of the effective date of the termination and by you paying us for services we have rendered up to the time of termination.

Billing

All fees will be billed upon completion of the valuation report.

Payment

Our terms of payment are Net-30 days from date of invoice. We appreciate being paid promptly, and expect you to communicate with us before the invoice due date if you are not satisfied with our services, do not agree with our bill, or have other reasons why payment cannot be made within terms. In cases of unreasonable payment delays, we reserve the right to withhold services until accounts are brought current. In such instances, we will not be held accountable for delays in services.

Indemnification

You agree to indemnify and hold us and our parent, affiliates, officers, employees and agents (collectively the "indemnified parties") harmless for any loss, damage, liability or cost (including reasonable attorneys' fees) to you or any third party arising out of the performance of this Agreement, but only to the extent that such losses are caused by or result from 1) inaccurate information supplied by you, or 2) non-negligent acts or omissions on the part of the indemnified parties.

Confidentiality

Burke Group acknowledges the confidential nature of the information supplied by you, and will not disclose this information to any third party without your prior written consent, unless directed to do so by order of a court of law or authorized governmental department or agency.

Notice

Any notice given pursuant to this Agreement shall be in writing and shall be deemed to have been given when personally delivered, or sent by certified mail addressed to the party for whom it is intended at the address set forth on page 1 or at such other address the parties may specify.

Entire Agreement

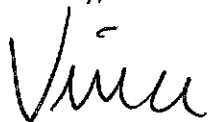
This Agreement and incorporated Appendix A constitute the entire agreement between Burke Group and the Town of Aurora, and supersedes and cancels any and all prior representations, negotiations, undertakings and contracts, whether written or verbal, between them or their agents, with respect to any of the matters to which this Agreement applies. The non-enforceability of any single provision of this Agreement shall not affect the validity and enforceability of any remaining provisions. This Agreement may not be altered, amended, waived, canceled or changed in any manner, unless done so in a written document signed by both parties or a termination notification.

Governing Law

This Agreement shall be deemed to have been executed in the State of New York, and shall be construed and interpreted in accordance with the laws thereof. Any claims arising under this Agreement shall be brought in the courts of the State of New York or in the United States District Court for the Western District of New York, upon which jurisdiction is hereby expressly conferred.

Kate, we believe the foregoing correctly sets forth our understanding, but if you have any questions, please let us know. Otherwise, please acknowledge your agreement to the understanding by signing and dating below and returning one copy to us.

Sincerely,



Vince Cassano, F.S.A., M.A.A.A.
Consulting Actuary

BURKE GROUP, INC

By: 

Print Name: Vince Cassano

Title: Principal and Consulting Actuary

Date: November 4, 2022

The Town of Aurora

By: _____

Print Name: _____

Title: _____

Date: _____

APPENDIX A

**The Town of Aurora
SCHEDULE OF SERVICES AND FEES
GASB 75 SERVICE AGREEMENT DATED November 4, 2022**

Service	Fee
<p>GASB 75 full valuation and report for the Town of Aurora postretirement healthcare plans for the fiscal year ending December 31, 2022</p> <p>GASB 75 interim valuation and report for the Town of Aurora postretirement healthcare plans for the fiscal year ending December 31, 2023 (if requested by Town)</p>	<p>\$4,000</p> <p>\$2,000</p>
<p>Actuarial Services Team Hourly Rates</p> <p>Any additional services that are beyond the scope of the GASB 75 project would be billed at the following hourly rates:</p> <p>Vince Cassano Actuarial Analyst Support Staff</p>	<p>\$300 per hour \$200 per hour \$75 per hour</p>

SUPERVISOR
JAMES J. BACH
(716) 652-7590
jbach@townofaurora.com



MART

5K

(716) 652-
townclerk@townofaurora.com

TOWN OF AURORA

575 Oakwood Avenue, East Aurora, NY 14052

www.townofaurora.com

MEMO _____

TO: Aurora Town Board
FROM: Kathleen Moffat
RE: Budget Amendment – ARPA Expenditures
DATE: 11/14/22

I respectfully request approval to amend the budget to accurately reflect the 2022 ARPA expenditures made from 9/13 through 11/14/22. The amendment is as follows:

- Increase revenue line A 4089 Federal Aid, Other by \$21,701.98
- Increase appropriation line A 7110.454 Park Improvements (ARPA Only) by \$21,701.98

SUPERVISOR
James J. Bach
(716) 652-7590
jbach@townofaurora.com



5L

TOWN CLERK
Martha L. Librocc
(716) 652-3281
townclerk@townofaurora.com

TOWN OF AURORA

Aurora Municipal Center
575 Oakwood Avenue, East Aurora, NY 14052
www.townofaurora.com
November 8, 2022

To: Town Board
Re: Request to hire Jordan Schneider

Please approve hiring Jordan Schneider as a Truck Driver. He resides at 135 Ellis Drive, West Falls, NY. He will be starting on or after December 1, 2022. His hourly starting pay will be \$23.06/hour as per the CSEA Union Contract.

Thank You,
Elizabeth Deveso
Highway Secretary

5M



BUDGET TRANSFER REQUEST FORM

Please note the following guidelines:

- A shortage of less than \$750 per line can be satisfied with this form requesting a budget transfer(s) between lines that are within the responsibility of a single Department Head. These will require the approval of the Supervisor.
- A shortage of \$750 or more per line can be satisfied with this form requesting a budget transfer(s) between lines that are within the responsibility of a single Department Head. These will require the approval of the Town Board.
- A shortage of any amount can be satisfied with this form requesting a budget transfer(s) between lines which fall under the responsibility of different Department Heads. These will require the approval of the Town Board.
- Budget transfers must be made PRIOR to the expenditure.
- All budget transfers must be submitted to the Supervisor's Office using this form.

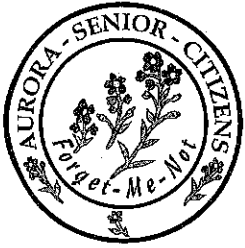
~~DEPARTMENT HEAD~~ NAME (printed): KATHLEEN MOFFAT
 SIGNATURE: Kathleen Moffat DATE: 10/27/22

1. \$ <u>2,700.00</u>	FROM: <u>A 9089.8</u> <small>ACCT NO.</small>	<u>LONGEVITY</u> <small>ACCT TITLE</small>	<u>\$5,800.00</u> <small>CURRENT BALANCE</small>
	TO: <u>A 7110.410</u> <small>ACCT NO.</small>	<u>PARKS FUEL + OIL</u> <small>ACCT TITLE</small>	<u>\$ 511.28</u> <small>CURRENT BALANCE</small>
	REASON: <u>To lower Parks Fuel Costs Through Year End</u>		
2. \$ _____	FROM: _____ <small>ACCT NO.</small>	_____ <small>ACCT TITLE</small>	_____ <small>CURRENT BALANCE</small>
	TO: _____ <small>ACCT NO.</small>	_____ <small>ACCT TITLE</small>	_____ <small>CURRENT BALANCE</small>
	REASON: _____		
3. \$ _____	FROM: _____ <small>ACCT NO.</small>	_____ <small>ACCT TITLE</small>	_____ <small>CURRENT BALANCE</small>
	TO: _____ <small>ACCT NO.</small>	_____ <small>ACCT TITLE</small>	_____ <small>CURRENT BALANCE</small>
	REASON: _____		
4. \$ _____	FROM: _____ <small>ACCT NO.</small>	_____ <small>ACCT TITLE</small>	_____ <small>CURRENT BALANCE</small>
	TO: _____ <small>ACCT NO.</small>	_____ <small>ACCT TITLE</small>	_____ <small>CURRENT BALANCE</small>
	REASON: _____		
5. \$ _____	FROM: _____ <small>ACCT NO.</small>	_____ <small>ACCT TITLE</small>	_____ <small>CURRENT BALANCE</small>
	TO: _____ <small>ACCT NO.</small>	_____ <small>ACCT TITLE</small>	_____ <small>CURRENT BALANCE</small>
	REASON: _____		

APPROVALS:

SUPERVISOR SIGNATURE : _____
 TOWN BOARD MEETING APPROVAL DATE: _____

Date: _____
 Action #: _____



TOWN OF AURORA SENIOR CENTER

101 King Street, Suite A
East Aurora, New York 14052
Phone: (716) 652-7934
Fax: (716) 652-9083

5N

MEMO

TO: SUPERVISOR JAMES BACH & TOWN BOARD MEMBERS

FROM: DONNA BODEKOR, SENIOR CITIZEN RECREATION LEADER

DATE: October 26, 2022

I am asking the Town Board for permission to surplus the 60" round tables (ID#1785-1790) which we purchased in 2001. We recommend auctioning them online.

6- DB



TOWN OF AURORA SENIOR CENTER

101 King Street, Suite A
East Aurora, New York 14052
Phone: (716) 652-7934
Fax: (716) 652-9083

50

MEMO

TO: SUPERVISOR JAMES BACH & TOWN BOARD MEMBERS

FROM: DONNA BODEKOR, SENIOR CITIZEN RECREATION LEADER

DATE: October 26, 2022

I would ask the town board to accept a donation from the Daylily Society in the amount of \$100.00. The money will be used to assist in purchasing new folding chairs. I ask that the funds be placed in line TA1000.90

James Bach

SP

From: Roger Pigeon
Sent: Tuesday, November 8, 2022 8:14 AM
To: James Bach
Subject: Office Closure

Good morning, Jim. I am requesting the ability to close my office on December 6, 2022 as I would like the staff to attend the annual holiday meeting/luncheon. We will be closed from 10:45 to 3:30. Please advise.



50

TOWN OF AURORA
Aurora Municipal Center
575 Oakwood Avenue, East Aurora, New York 14052

MEMORANDUM

TO: **James Bach, Supervisor**
Charles Snyder, Councilman
Luke Wochensky, Councilman
James F. Granville, Councilman
Joseph M. McCann, Councilman

FROM: **Roger P. Pigeon, Assessor**

DATE: November 9, 2022

RE: Board of Assessment Review Member – Julie Radt

It is my recommendation to reappoint Julie Radt to the Assessment Review Board. She has been an asset to our board from her previous term.

STATE OF NEW YORK
Office of Real Property Tax Services - Educational Services
October 28, 2022

SWIS Code
142400

BOARD OF ASSESSMENT REVIEW MEMBER LISTING

Clerk's Name: _____ Daytime Phone () _____

Town of Aurora / Erie County

Please use the area on the right to update/correct or add any information pertinent to the current BAR members listed.

Current term ended: 09/30/2022		Reappointed? <input type="checkbox"/> YES <input type="checkbox"/> NO	Term: 10/01/2022 - 09/30/27
Initial Date:	01/25/2021	Ms. Julie Radt	Name:
Term Begins:	10/01/2017	1796 Grover Road	Address:
Term Ends:	09/30/2022		
Last Training:	04/27/2021	East Aurora, NY 14052	Town/Zip:
		Day Phone:	Day Phone: Appointment Date:
Initial Date:	01/23/2021	Mr. Robert Ruffner	Name:
Term Begins:	10/01/2018	115 Brooklea Drive	Address:
Term Ends:	09/30/2023		
Last Training:	04/27/2021	East Aurora, NY 14052	Town/Zip:
		Day Phone:	Day Phone: Appointment Date:
Initial Date:	02/11/2019	Mr. David S. Librock	Name:
Term Begins:	10/01/2019	206 Sycamore Street	Address:
Term Ends:	09/30/2024		
Last Training:	05/09/2019	East Aurora, NY 14052	Town/Zip:
		Day Phone:	Day Phone: Appointment Date:
Initial Date:	04/12/2004	Mr. Robert C. Puntillo	Name:
Term Begins:	10/01/2020	116 Glenridge Road	Address:
Term Ends:	09/30/2025		
Last Training:	04/27/2021	East Aurora, NY 14052	Town/Zip:
		Day Phone:	Day Phone: Appointment Date:
Initial Date:	01/12/2009	Mr. Glen Diemer	Name:
Term Begins:	10/01/2021	85 Deepwood Rd	Address:
Term Ends:	09/30/2026		
Last Training:	04/26/2022	East Aurora, NY 14052	Town/Zip:
		Day Phone:	Day Phone: Appointment Date:



GA

TOWN OF AURORA
Aurora Municipal Center
 575 Oakwood Avenue, East Aurora, NY 14052

From: Martha L. Librock, Town Clerk

Monthly Statement – Tax Collection

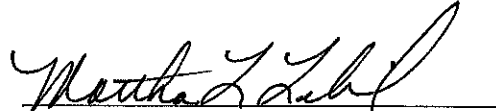
To: James J. Bach, Town of Aurora Supervisor

Pursuant to Section 27 Subd. 1 of the Town Law, I hereby make the following statement of all fees and monies received by me during the month of October, 2022 in connection with the collection of taxes, excepting only such fees the application and payment of which are otherwise provided for by law:


Received From	Type of Receipt	Amount
Taxes	School tax	\$ 20,642,557.04
Taxes	Penalties	13,038.77
Taxes	Interest	-0-
Taxes	NOW Acct Interest	1,337.68
Taxes		
	Total Received	\$ 20,656,933.49

State of New York
County of Erie
Town of Aurora

Martha L. Librock, being duly sworn, says that she is the Town Clerk of the Town of Aurora; that the foregoing is a full and true statement of all fees and monies applicable to tax collection received by her during the month stated excepting only such fees and monies the application of which are otherwise provided for by law.


 Martha L. Librock, Town Clerk

Subscribed and Sworn to before me
this 2nd day of November, 2022


 Notary Public

Leah M. Di Filippo
 NOTARY PUBLIC, NYS
 Erie County, #01D16210715
 My Comm expires Aug. 31. 2025

Month Year Reported: ----> October 2022 CLERK'S MONTHLY REPORT
 Town Name: -----> Town of Aurora
 Prepared By: -----> Martha L. Librock
 Date Submitted: -----> Nov, 01 2022

CB

TO THE Supervisor:

Pursuant to Section 27, Subd. 1, of the Town Law, I hereby make the following statement of all the fees and monies received by me in connection with my office, during the month above stated, excepting only such fees and monies the application and payment of which are otherwise provided for by law.

RSC Code	Revenue Description	Item Count	Total Revenue	Town Portion	Other Disburses
100	SPORTING LICENSE REVENUE	15	866.00	47.81	818.19
200	DOG LICENSE REVENUE	185	2,359.00	2,136.00	223.00
301	MARRIAGE LICENSE	7	280.00	122.50	157.50
303	CERTIFIED MARRIAGE CERTIFICATE	6	130.00	130.00	0.00
602	DEATH CERTIFICATE	3	90.00	90.00	0.00
607	MARRIAGE - GENEALOGY	1	11.00	11.00	0.00
Report Totals:		217	3,736.00	2,537.31	1,198.69

REVENUES TO SUPERVISOR - CLERK FEES	401.31
REVENUES TO SUPERVISOR - DOG FEES	2,136.00
TOTAL TOWN REVENUES TO SUPERVISOR:	2,537.31

Amount paid to NYS DEC REVENUE ACCOUNTING	818.19
Amount paid to DEPT. OF AG. AND MARKETS	223.00
Amount paid to STATE HEALTH DEPARTMENT FOR MARRIAGE LICENSES	157.50
TOTAL DISBURSED TO OTHER AGENCIES:	1,198.69
TOTAL DISBURSED:	3,736.00

11/1 2022 JAMES J. BRACIT Supervisor,
 State of New York, County of Erie, Town of Aurora

Martha L. Librock being duly sworn, says that she/he is the Town Clerk of the Town of Aurora that the foregoing is a full and true statement of all Fees and Monies received by her/him during the month stated, excepting only such Fees the application and payment of which are otherwise provided for by law.

Subscribed and Sworn to before me
 this 1st day of November 2022

Martha Librock
 Town Clerk

Sheryl A. Miller Notary Public

SHERYL A. MILLER
 Reg. #01MI6128663
 Notary Public, State of New York
 Qualified in Erie County
 Commission Expires June 13, 2025

GC

James Bach

From: Wilkolaski, Gina <Gina.Wilkolaski@erie.gov>
Sent: Thursday, October 27, 2022 1:53 PM
To: James Bach
Subject: Center St and Blakeley Corners Rd

Supervisor Bach,

Our Department had concluded our initial study of the intersection of Center St and Blakeley Corners Rd on October 4th, 2022. The study concluded that the FHWA Manual on Uniform Traffic Control Devices (MUTCD) warrants for an all way stop had not been met at that time. However, the sign placement had been revised and vegetation obstructing a driver's view was removed.

Immediately following that study, there were two crashes at the intersection on October 6th and October 12th. I have reviewed these accident reports as to the cause of the crash, and to determine if any mitigative measures are necessary. One of these crashes was the result of a Center St driver turning too sharply and hitting a vehicle stopped at the STOP sign. This crash would not have been prevented by an all way stop condition. The other crash was the result of a Blakeley Corners Rd driver failing to see the two 48" STOP signs and CROSS TRAFFIC DOES NOT STOP sub-plaques.

Prior to the 4 crashes reported in 2022, there had been no crashes at this intersection since August 2019. This indicates to me that something may have changed at the intersection to change this crash rate. There have been no changes to the geometry of the intersection between 2019 and 2022. As mentioned, all vegetation within the Right of Way that may obstruct a driver's view has been cleared, improving sight lines. We believe that the removal of this vegetation will allow drivers additional time to safely traverse the intersection.

While the 2022 crashes do not meet the MUTCD warrants for an all way stop. We will continue to monitor this intersection. If you have any questions, please feel free to reach out to me.

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Gina Wilkolaski | Traffic Safety Engineer
Erie County | Highways (DPW)
95 Franklin St., | Buffalo, NY 14202
P:+1(716)858-8067 | F:+1(716)858-8228
Gina.Wilkolaski@erie.gov | <http://www.erie.gov>