TOWN OF BEEKMAN TOWN BOARD MEETING
Minutes for October 8th, 2024

The Town of Beekman Board met for a Town Board meeting on Tuesday October 8th, 2024. The meeting was called to order by Supervisor Covucci at 6:00PM. The following members were present: Supervisor Mary Covucci, Councilman Battaglini, Councilwoman Wohrman and Councilman Capollari

Also present were the Town Clerk – Laureen Abbatantuono, and Town Attorney Craig Wallace.

Supervisor Covucci led the Pledge of Allegiance, pointed out the emergency exits and called for a moment of silence for all those who have served our Country.

Town Attorney Craig Wallace went over the rules of the quorum.

Supervisor Covucci went over the evening's agenda items

Resolutions were read by Town Board members:

Written Comments on Agenda items: NONE

Public Comments on Agenda items: Bill Crane 254 Gardner Hollow Rd, commented on resolution 7 and 10.

Public comments: Tom Mullins made a comment on the 2025 budget for the highway department to be able to pave parts of Dalton Farms. Doug Demasi, comments on 2018 Greg Brown checks.

Supervisor Covucci made a motion at 6:35pm to adjourn the meeting.

Respectfully Submitted by Town Clerk
Laureen Abbatantuono

BEEKMAN TOWN BOARD
REGULAR MEETING AGENDA
OCTOBER 8, 2024

6:00 PM

- Meeting called to order
- Pledge of Allegiance
- Administrative Announcement--Fire Exits

6:10 PM - PUBLIC HEARING - Local Law No. 2-2024 Enacting a Temporary Moratorium on All Battery Energy Storage System Facilities

TOWN BOARD MEETING

- Supervisor Comments
- Public comment on Agenda Items and Resolutions – (3 Minute limit)

RESOLUTIONS

1. Approve Budget Revision 2024-9
2. Set Public Hearing on Special District Assessment Roll
3. Accept Correction to Local Law No. 2 of 2024 Moratorium for Battery Storage Facility
4. Change Order #1 for Beekman Recreation Swim Pond Permanent Weir Project
5. Approve Pay App for Beekman Recreation Swim Pond Permanent Weir Project
6. Approve Pay App for Giaimo Electric for Town Hall Emergency Generator
7. Appointment to the Stormwater Program Coordinator for MS4 Compliance - Mersin Capollari
8. Accept $50,000 Grant from the Dutchess County Soil and Water Conservation District for the Beekman Recreation Swim Pond Permanent Weir Project
9. Authorize the Creation of the Town Center Park Improvement Capital Project Fund
10. Revise the Funding Source for Doherty Park Capital Project Fund
11. Payment of Claims

- Other Town Board Business
- General Board Comments
- Public Comments – (3 Minutes limit)
- **Next Regular Town Board Meeting: Tuesday October 22, 2024 at 6:00 PM/2023 Independent Audit Presentation for Town Board**
- **Town Board/Department Head Work Session: Thursday October 10, 2024 at 5:00PM**

ADJOURN

RESOLUTION NO. 10:08:24-1
RE: RESOLUTION APPROVING TOWN OF BEEKMAN BUDGET REVISION 2024-09

WHEREAS, the Town of Beekman Accounting Office recommends certain budget revisions based on department requests and/or the Accounting Office review and analysis of expenditures or revenues;

NOW, therefore be it resolved that the following itemized revisions are approved by the Town of Beekman Town Board for 2024 identified as Budget Revision Number 2024-09.

Budget Revisions for September 2024 # 2024-9

Revision #	Account #	Account Title	Increase	Decrease
General Fund				
2024-09-01	A-1010-0409	Board Website	13,700	
	A-7140-0116	Playground Seasonal Staff		13,700
		-Transfer for Website Expense		
2024-09-02	A-1315-0400	Finance Expense	74	
	A-1315-0401	Finance Supplies		74
		-Reclass for Office Expense		
2024-09-03	A-1420-0401	Town General Counsel #2	10,000	
	A-1420-0410	Legal Defense Counsel		5,000
	A-1990-0400	Contingency		5,000
		-Transfers for Legal Counsel		
2024-09-04	A-1980-0400	MTA Tax Expense	1000	
	A-1989-0400	Other Expense		1000
		-Transfer for Tax Expense		
2024-09-05	A-5010-0400	Hwy Office Expense	120	
	A-5010-0401	Hwy Office Supplies	80	
	A-5010-0107	Hwy Supt Vehicle		200
		-Transfer for Office Expense		
2024-09-06	A-6772-0413	Aging Consultants	220	
	A-6772-0414	Aging Trips	1,958	
	A-6772-0415	Aging Senior Picnic	100	
	A-7140-0116	Playground Seasonal Staff		2,278
		-Transfer for Aging Expenses		

2024-09-07	A-7020-0401	Rec Office Supplies	65	
	A-7020-0404	Rec Office Training	35	
	A-7020-0400	Rec Office Expense		100
		-Transfer for Expenses		
2024-09-08	A-7111-0400	Rec Center Expense	50,000	
	A-7111-0200	Rec Park Improvements		50,000
		-Reclassify Budget Approp.		
2024-09-09	A-7112-0470	Town Center Refuse	1,000	
	A-7112-0400	Town Center Park Expense		1,000
		-Transfer for TC Park Expenses		
2024-09-10	A-7117-0401	Library Supplies	78	
	A-7116-0420	Other Park Utilities		78
		-Transfer for Library Expense		
2024-09-11	A-7140-0401	Playground Supplies	142	
	A-7140-0404	Playground Training		142
		-Transfer for Playground Expense		
2024-09-12	A-7620-0400	Adult rec Programs	600	
	A-7310-0112	Youth Program PT Staff		600
		-Transfer for Adult Programs		
2024-09-13	A-1110-0101	Court Labor	602	
	A-1110-0112	Court PT Staff		421
	A-1315-0112	Finance PT Staff		1,700
	A-3620-0101	Safety Staff	1,950	
	A-3620-0112	Safety PT Staff	186	
	A-6772-0112	Aging PT Staff	787	
	A-7020-0100	Rec Director		1,838
	A-7110-0100	Parks Manager	647	
	A-7110-0101	Park Worker	439	
	A-8010-0100	Zoning Personal		24,103
	A-1010-0107	TB Reserve Comp	20,000	
	A-9030-0800	Social Security	3,451	
		-Adjust Staff Comp Budgets		
2024-09-14	A-0000-3089	Other State Aid		8,750
	A-7118-0200	Remembrance Park Improvements		8,750
		-Revise Plaque Grant Fund		
2024-09-15	A-0000-2710	County Grant		5,000
	A-7118-0200	Remembrance Park Improvements		5,000
		-Revise First Grant Funding		

Highway Fund

2024-09-16	DA-5110-0403	Repairs Stone	3,238	
	DA-5110-0410	Repairs Blacktop		3,238
		-Transfer for Stone Expenses		
2024-09-17	DA-9030-0800	Social Security	1	
	DA-9040-0850	Workers Comp Fee		1
		-Transfer Excess		

Capital Fund

2024-09-18	H-7113-0200	Doherty Park Improvements	70,000	
	H-7113-0400	Doherty Park Exp	3,750	
	H-7113-0440	Doherty Park Engineering	10,000	
	H-7113-0470	Doherty Park Consulting	16,250	
	H-0000-5030	Transfer In	100,000	
		-Record New Capital Project Fund		
2024-09-19	H-1622-0200	Generator Equipment	44,280	
	H-0000-3000	Grant Fund	50,000	
	H-0000-9910	Fund Balance		5,720
		-Correct Project Funding		
2024-09-20	H-5120-0401	Gardner Bridge Expense	2	
	H-5120-0440	Gardner Bridge Engineering		2
		-Correct Project Budget		

Water Fund

2024-09-21	SW-8340-0470	Special Repairs	27,200	
	SW-8340-0400	Repairs		7,200
	SW-0000-0911	Fund Balance	20,000	
		-Provide Funds for Special Work		

Sewer Fund

2024-09-22	SS-8189-0480	Other Expenses	250	
	SS-8189-0460	Special Services		250
		-Transfer for Misc Expenses		

Introduced: COUNCILMAN CAPOLLARI

Seconded: COUNCILMAN BATTAGLINI

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

RESOLUTION NO. 10:08:24-2
RE: SET PUBLIC HEARING FOR DOVER RIDGE ASSESSMENT ROLLS

WHEREAS, the Assessor to the Town of Beekman has completed and filed the assessment rolls for the Dover Ridge Water and Sewer District pursuant to Article 15 of the New York State Town Law; and

WHERAS, pursuant to §239 of the Town Law, a public hearing on such assessment rolls shall be held,

NOW, THEREFORE, BE IT RESOLVED, that a public hearing to gather resident input on the Dover Ridge Assessment Rolls will be held on November 6, 2024 at 6:10 PM at the Beekman Town Hall, 4 Main Street, Poughquag, NY and that the notice shall be published in the Poughkeepsie Journal, a newspaper circulating in the Town of Beekman, stating that the Dover Ridge Water and Sewer District assessment rolls have been completed and that the Town Board will meet and hear any objections which may be made to the rolls at the time and place specified above, and that such notice shall be posted on the bulletin board in the Town Clerk Office and placed on the Town of Beekman website; and

BE IT FURTHER RESOLVED that the Town Board will also accept written public comments until 4:00 PM November 6, 2024.

Introduced: COUNCILMAN BATTAGLINI

Seconded: COUNCILMAN CAPOLLARI

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

RESOLUTION NO. 10:08:24-3
RE: ACCEPT CORRECTION TO LOCAL LAW NO.2 OF 2024 MORATORIUM FOR BATTERY STORAGE FACILITY

WHEREAS, the section on the Local Law for SEQRA was incorrectly stated as a type (30) action, Section 617.5(c) (30) SEQRA and needs to be replaced with Section 617.5(c) (36) SEQRA;

NOW, THEREFORE, BE IT RESOLVED, that the replacement will read as follows;
Section 617.5(c) (36) SEQRA

Introduced: **SUPERVISOR COVUCCI**

Seconded: **COUNCILWOMAN WOHRMAN**

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

RESOLUTION NO. 10:08:24-4
RE: CHANGE ORDER # 001 FOR BEEKMAN RECREATION SWIM POND PERMANENT WEIR PROJECT

WHEREAS, the Town Engineer is in receipt of a change order dated September 20, 2024 from Kingston Equipment Rental, Inc. (see attached) Swim Pond Stone Weir Improvements (RFP: 2024-0415-1) Change Order #001, and

WHEREAS, the contractor discovered the existing 12" pond supply pipe as well as a pipe fitting was located in the area of the permanent weir which had to be relocated as not to interfere with the Permanent weir; and

WHEREAS, the Town engineer recommends that the pipe be reconfigured as suggested by the contractor,

NOW, THEREFORE, BE IT RESOLVED that the Town of Beekman Town Board approves change order #001 for the Beekman Recreation Pond Permanent Swim Weir Project in an amount not to exceed $2,687.52.

Introduced: COUNCILWOMAN WOHRMAN

Seconded: COUNCILMAN BATTAGLINI

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

RESOLUTION NO. 10:08:24-5
RE: APPROVE PAY APP #1 BEEKMAN SWIM POND PERMANENT WEIR PROJECT

WHEREAS, the Town Engineer is in receipt of a certificate of payment#1 request package dated September 25, 2024 from Kingston Equipment Rental, Inc. requesting Pay App #1 in the amount of $204,087.52 less 5% retainage ($10,204.38) for a total of $193,883.14 (see attached). The contractor has requested full or partial payment of the items on the continuation sheet covering the period June 20, 2024 through September 25, 2024, and

WHEREAS, the Town Engineer has reviewed the request and agrees with the quantity of work completed per the continuation sheet; and

WHEREAS, the Town Engineer recommends that the invoice be paid,

NOW, THEREFORE, BE IT RESOLVED that the Town of Beekman Town Board authorizes the payment of Pay App #1 to Kingston Equipment Rental, Inc. in an amount not to exceed $193,883.14.

Introduced: **COUNCILMAN CAPOLLARI**

Seconded: **COUNCILMAN BATTAGLINI**

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

RESOLUTION NO. 10:08:24-6

RE: APPROVE PAY APP FOR GIAMO ELECTRIC FOR TOWN HALL EMERGENCY GENERATOR

WHEREAS, the Town Engineer is in receipt of a payment request package dated September 6, 2024 from John A. Giaimo and Son, requesting first and final payment in the amount of $19,700 (see attached Invoice 14643-2). John A. Giaimo and Son, Inc. has requested full payment for their services related to RFP: 2024-0502, covering the period of June 4, 2024 through September 6, 2024, with a total completed value of $19,700, and

WHEREAS, the Town Engineer has reviewed the request and agrees with the quantity of work completed and also certifies that the completed works associated with the contract have been substantially completed and is acceptable; and

WHEREAS, the Town Engineer recommends that the invoice be paid,

NOW, THEREFORE, BE IT RESOLVED that the Town of Beekman Town Board authorizes the payment to John A. Giaimo and Son, Inc. for an amount not to exceed $19,700.00. The one-year warranty period on the electrical services commences on final payment.

Introduced: COUNCILMAN BATTAGLINI

Seconded: COUNCILWOMAN WOHRMAN

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

RESOLUTION NO. 10:08:24-7

RE: RESOLUTION AUTHORIZING THE TOWN OF BEEKMAN TOWN BOARD TO DESIGNATE MERSIN CAPOLLARI AS VOTING REPRESENTATIVE TO THE DUTCHESS COUNTY MS4 COORDINATION COMMITTEE AND TO ACT AS STORMWATER PROGRAM COORDINATOR

WHEREAS, the SPDES General Permit for Storm Water Discharges from MS4's requires that the Town develop, implement and enforce a storm water management program (SWMP) designed to reduce the discharge of pollutants from the town's storm sewer system to the maximum extent practicable as required by federal and state law; and

WHEREAS, the Town of Beekman is an active member in the Dutchess County MS4 Coordination Committee; and

WHEREAS, the Town of Beekman continues to recognize the committee as integral to the safety and efficiency of our Town's soil and water infrastructure; and

WHEREAS, membership allows the Town of Beekman to assign a representative to represent the town and vote in committee procedures; and

WHEREAS, the SPEDES General Permit requires that a Stormwater Program coordinator be appointed;

NOW, THEREFORE, BE IT RESOLVED, that the Town of Beekman designates Mersin Capollari as a voting member to represent the Town of Beekman on the Dutchess County MS4 Coordination Committee until such time as a replacement is named and names him as the Town's Stormwater Program Coordinator until such time as a replacement is named.

Introduced: **SUPERVISOR COVUCCI**

Seconded: **COUNCILWOMAN WOHRMAN**

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

RESOLUTION NO. 10:08:24-8
RE: ACCEPT BEEKMAN RECREATION SWIM POND PERMANENT WEIR GRANT AWARD AGREEMENT

WHEREAS, the Town of Beekman has been notified by the Dutchess County Soil and Water Conservation District of Dutchess County that they are offering a $50,000.00 Grant for the Swim Pond Stone Weir Improvements,

NOW, THEREFORE, BE IT RESOLVED, the Town Board accepts with appreciation the Grant as hereby attached and instructs the Supervisor to sign the same.

Introduced: **COUNCILWOMAN WOHRMAN**

Seconded: **COUNCILMAN CAPOLLARI**

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

Program Title:	Swim Pond Stone Weir Improvements
Grantee's Name/Address:	Town of Beekman 4 Main Street Poughquag, NY 12570
Award Amount:	$50,000.00

This Agreement by and between the Dutchess County Soil and Water Conservation District, (hereinafter referred to "Grantor" or "DCSWCD") and Town of Beekman (hereinafter referred to as "Grantee," or "You").

Terms and Conditions

I. Project

The Project is defined as described in Your Program Proposal. The Grantee will perform the tasks on the schedule and as described in the Project Description.

II. Funds

The Grant Funds will be applied only to installation expenses solely for the purpose of the Beekman Recreation Swim Pond Stone Weir Improvement Project as described in the Project Narrative, dated June 13, 2024, and may not be expended for any other purpose. No grant funds shall be disbursed unless the Grantee is in compliance with the terms and conditions of this Agreement.

III. Reporting:

Grantee will submit to the DCSWCD a written progress report and financial report by December 15, describing the progress in achieving the purposes of the grant and include a detailed accounting of the uses or expenditures of all grant funds. You also agree to provide any other information reasonably requested by DCSWCD (i.e., project designs, photos, etc). Progress reports should include photos of the project area before the project has begun and photos of each step described in Grantee's Project timeline.

IV. Disbursement

Grantee is required to keep a record of all receipts and expenditures relating to the Project. Grantee will submit to the DCSWCD a detailed accounting of the uses or expenditures of all grant funds, invoices of supplies/equipment purchased per your itemized project budget with each progress report for reimbursement from the DCSWCD. The DCSWCD will reimburse Grantee's allowable costs, not exceeding the maximum total amount described in the Notice of Grant Award, and shown in the itemized Project Budget, upon presentation to DCSWCD of the corresponding invoices and proof of payment. The DCSWCD will provide reimbursement upon completion of document review and approval.

V. Duration

Once DCSWCD is in receipt of this signed Agreement, work on the project may begin. The funds must be used specifically for the designated purpose(s) by September 30, 2025 (the Duration

Period). At any point prior to the end of the Duration Period that the Project is completed, a final report may be submitted for reimbursement, provided the Grantee is in compliance with the terms and conditions of this Agreement, and that all funds were spent in accordance with the completion of the Project as described in the Project Budget.

VI. Media

This Agreement also gives DCSWCD the Grantee's permission to use photographs, logos, published/printed information, and any other materials you supply, without further notice, in press releases and/or publications.

VII. No Liability

DCSWCD shall not in any event whatsoever be liable for any injury or damage, cost or expense of any nature whatsoever that occurs as a result of or in any way in connection with the Project and the Grantee hereby agrees to indemnify and hold harmless DCSWCD, the State, County and their respective agents, officers, employees and directors (collectively, the "Indemnitees ") from and against any and all such liability other than that caused by the gross negligence or the willful misconduct of the Indemnitees.

VIII. Governing Law

This Agreement shall be governed by and construed in accordance with the laws of the State of New York. This Agreement shall be construed without the aid of any presumption or other rule of law regarding construction against the party drafting this Agreement or any part of it. In case any one or more of the provisions of this Agreement shall for any reason be held to be invalid, illegal, or unenforceable in any respect, such invalidity, illegality, or unenforceability shall not affect any other provision hereof and this Agreement shall be construed as if such provision(s) had never been contained herein.

ACCEPTED AND AGREED TO:

Town of Beekman

By: ______________________________ Date: ____________

Mary Covucci, Supervisor

Dutchess County Soil and Water Conservation District

By: ______________________________ Date: ____________

Brian F. Scoralick, Executive Director

RESOLUTION NO. 10:08:24-9
RE: RESOLUTION AUTHORIZING THE CREATION OF THE TOWN CENTER PARK IMPROVEMENT CAPITAL PROJECT FUND

WHEREAS, the Town Board of the Town of Beekman desires to install a new ADA Playground at the Town Center Park and make other Improvements; and

WHEREAS, the Town intends to purchase such equipment through a government contract; and

WHEREAS, the Town would like to use the Federal ARPA Funds for the Project,

NOW, THEREFORE, BE IT RESOLVED that the Town Board of the Town of Beekman approves the creation of the Town Center Park improvements Capital Project Fund for the Installation of Playground Equipment and other Improvement with $300,000 transfer from the Federal ARPA Funds.

Introduced: **COUNCILMAN CAPOLLARI**

Seconded: **COUNCILWOMAN WOHRMAN**

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

RESOLUTION NO. 10:08:24-10
RE: RESOLUTION REVISING THE FUNDING SOURCE FOR THE DOHERTY PARK CAPITAL PROJECT FUND

WHEREAS, the Town of Beekman Town Board previously in Resolution 09:24:24-7, created the Doherty Park Improvement Capital Project Fund; and

WHEREAS, the Town would like to revise the Funding Source for the Capital Project fund,

NOW, THEREFORE, BE IT RESOLVED that the Town Board of the Town of Beekman hereby approves the $100,000 transfer from the Federal ARPA Fund.

Introduced: **COUNCILMAN BATTAGLINI**

Seconded: **COUNCILMAN CAPOLLARI**

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

RESOLUTION NO. 10:08:24-11
RE: PAYMENT OF CLAIMS

WHEREAS, the Bookkeeper has audited and approved claims pursuant to Sect. 119 of Town Law as set forth in the attached abstracts; be it

RESOLVED, that the payment, therefore, is hereby authorized as follows:

Claims to be paid from the A-General Fund	$	51,141.22
Claims to be paid from the DA-Highway Fund	$	209.58
Claims to be paid from the SS – Dover Ridge Sewer	$	3,931.99
Claims to be paid from the SW – Dover Ridge Water	$	1,170.68
Claims to be paid from the T-Trust Fund	$	3,125.00
Claims to be paid from the H-Capital Fund	$	20,652.00
	$	80,230.47

09/26/2024 Payroll #20

General Fund	$	34,514.52
Highway Fund	$	23,629.19
	$	58,143.71

Introduced: SUPERVISOR COVUCCI

Seconded: COUNCILMAN BATTAGLINI

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

RESOLUTION NO. 10:08:24 -12
RE: AWARD BID FOR 2024 TOWN FALL CLEAN UP DAY

WHEREAS, by Resolution 09:10:24-7 the date for Fall Clean Up was scheduled for Saturday, October 26, 2024 between the hours of 7:00 am and 2:00 pm in the Town Hall parking lot; and

WHEREAS, bids were received for services as described in the legally published notice and opened and read publicly by the Town Clerk on Tuesday, October 8, 2024 at 10:00 am; and

WHEREAS, the Highway Superintendent is concerned that observing the time requirements for agenda items to be put on the October 22, 2024 agenda may not allow the vendor sufficient notice to have the needed containers on site;

NOW, THEREFORE, BE IT RESOLVED, that Royal Carting be awarded the contract for Fall Clean Up day with the following per ton rates:

MSW	TIRES	E-WASTE
\$269.00/ton	\$599.00/ton	\$660.00/ton, and

BE IT FURTHER RESOLVED, that the Supervisor be and hereby is authorized to execute any and all documents necessary to carry out the services.

Introduced: **COUNCILWOMAN WOHRMAN**

Seconded: **COUNCILMAN BATTAGLINI**

ROLL CALL VOTE:

Councilman Capollari	**AYE**
Councilman Battaglini	**AYE**
Councilman Lemak	**ABSENT**
Councilwoman Wohrman	**AYE**
Supervisor Covucci	**AYE**

Dated: October 8, 2024

HUDSON
LAND DESIGN

Civil and Environmental Engineering Consultants
174 Main Street Beacon, NY 12508 (Main Office and Mailing Address)
13 Chambers Street, Newburgh, NY 12550 (Satellite Office)
Phone: 845-440-6926
www.HudsonLandDesign.com

October 2, 2024

Supervisor Mary Covucci and Members of the Town Board
Town of Beekman
4 Main Street
Poughquag, New York 12570

Re: Swim Pond Stone Weir Improvements (RFP: 2024-0415-1)
Change Order #001

Dear Supervisor Covucci and Members of the Town Board:

Hudson Land Design (HLD) is in receipt of a change order dated September 20, 2024 from Kingston Equipment Rental, Inc. (see attached). This proposed change order was prepared when the contractor discovered the existing 12" pond supply pipe was located in the area of the permanent weir. In summary, the contractor's change order request provides for furnishing new pipe and bedding, and installation of the new pipe to not interfere with the permanent weir being installed. There was a fitting where the pipe turned to its inlet that was surveyed; however the pipe could not remain in that "bent" configuration without being beneath the large permanent stones, making it inaccessible for future maintenance. Therefore, we suggest that the pipe be reconfigured as suggested by the contractor. The cost of change order #001 is $2,687.52 (including overhead and profit and bonding).

We suggest that the Town Board consider authorizing change order #001 in the amount of $2,687.52 at your October 8, 2024 meeting. Should you have any questions, please feel free to call my direct line at 845-765-8955.

Sincerely,

Daniel G. Koehler, P.E.
Principal

Att: Change Order 1 – Email Request dated September 20, 2024

cc: Laureen Abbatantuono, Town Clerk (via email)
Tom Carey, Town Comptroller (via email)
Linda Bloomer, Town Bookkeeper (via email)
Dani Plastini, Recreation Director (via email)
Wallace & Wallace, Town Attorney (via email)
Michael A. Bodendorf, P.E. (HLD file)

Daniel G. Koehler, P.E.

From: Mike Vandebogart <mike@bakerbrothersny.com>
Sent: Friday, September 20, 2024 2:23 PM
To: Daniel G. Koehler, P.E.
Cc: Rudie Baker
Subject: Change order Beekman Rec.

CAUTION: This email originated from outside your organization. Exercise caution when opening attachments or clicking links, especially from unknown senders.

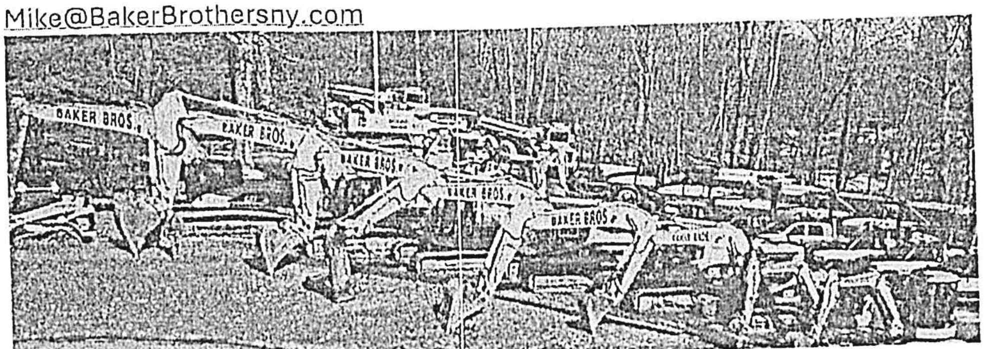
Good Afternoon,

On 9/18/24 while excavating for the upper weir, Kingston equipment found that the inlet pipe for the swimming pond was in the way for installing said weir.
We notified you and suggested removing the pipe and reinstalling.
The following is the cost to do so.

40' 12" cpp $385.20
½ day Forman and 326 $1515
20 ton item delivered $543
10% profit $244.32
Total $2687.52

Thank You,

Michael VanDeBogart
General Manager
Baker Brothers Excavating/Kingston Equipment
78 Stone Road, West Hurley, NY 12491
Office 845-338-6025 ext. 109
Cell 845-332-5145
Mike@BakerBrothersny.com



HUDSON LAND DESIGN

Civil & Environmental Engineering Consultants
174 Main Street, Beacon, New York 12508
Phone: 845-440-6926
www.HudsonLandDesign.com

October 3, 2024

Supervisor Mary Covucci and Members of the Town Board
Town of Beekman
4 Main Street
Poughquag, New York 12570

Re: Swim Pond Stone Weir Improvements (RFP: 2024-0415-1)
Contractor Request for Payment #1

Dear Supervisor Covucci and Members of the Town Board:

Hudson Land Design (HLD) is in receipt of Application and Certificate for Payment #1 dated September 25, 2024 from Kingston Equipment Rental, Inc. requesting payment in the amount of $204,087.52 less 5% retainage ($10,204.38) for a total of $193,883.14 (see attached). The contractor has requested full or partial payment of the items on the continuation sheet that is attached to the payment request application, covering the period June 20, 2024 through September 25, 2024. HLD has reviewed the request and agrees with the quantity of work completed per the continuation sheet.

Therefore, we suggest that the Town Board authorize payment to Kingston Equipment Rental, Inc. in the amount of $193,883.14 in order to satisfy Application and Certification for Payment #1. Should you have any questions, please feel free to call me at 845-440-6926.

Sincerely,

Daniel G. Koehler, P.E.
Principal

cc: Tom Carey, Town Financial Consultant (via email)
Linda Bloomer, Town Bookkeeper (via email)
Laureen Abbatantuono, Town Clerk (via email)
Dani Plastini, Recreation Director (via email)
Wallace & Wallace, Town Attorney (via email)
Michael A. Bodendorf, P.E. (HLD file)

enc: Application and Certificate for Payment #1 with Continuation Sheets
Certified Payroll
Partial Release
Town Voucher

AIA® Document G702® – 1992

Application and Certificate for Payment

TO OWNER: Town of Beekman, 4 Main Street, Poughquag, NY 12570

PROJECT: Swim Pond Stone Weir Improvements, 29 Recreation Center Road, Poughquag NY 12570

APPLICATION NO: 001
PERIOD TO: September 25, 2024
CONTRACT FOR: General Construction
CONTRACT DATE: June 20, 2024
PROJECT NOS: 2024 / 0415 / 1

Distribution to:
OWNER: ☒
ARCHITECT: ☐
CONTRACTOR: ☒
FIELD: ☐
OTHER: ☐

FROM CONTRACTOR: Kingston Equipment Rental, Inc., 78 Stone Road, West Hurley, NY 12491

VIA ARCHITECT: Hudson Land Design Proffeional Engineering, P.C., 174 Main Street, Beacon, NY 12550

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract. AIA Document G703®, Continuation Sheet, is attached.

1. ORIGINAL CONTRACT SUM $201,400.00
2. NET CHANGE BY CHANGE ORDERS $2,687.52
3. CONTRACT SUM TO DATE (Line 1 ± 2) $204,087.52
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) $204,087.52
5. RETAINAGE:
   a. 5.00 % of Completed Work (Column D + E on G703) $10,204.38
   b. 0 % of Stored Material (Column F on G703) $0.00

   Total Retainage (Lines 5a + 5b or Total in Column I of G703) $10,204.38
6. TOTAL EARNED LESS RETAINAGE $193,883.14
   (Line 4 Less Line 5 Total)
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT $0.00
   (Line 6 from prior Certificate)
8. CURRENT PAYMENT DUE $193,883.14
9. BALANCE TO FINISH, INCLUDING RETAINAGE $10,204.38
   (Line 3 less Line 6)

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	$2,687.52	$0.00
Total approved this Month	$0.00	$0.00
TOTALS	$2,687.52	$0.00
NET CHANGES by Change Order		$2,687.52

The undersigned Contractor certifies that to the best of the Contractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR:
By: Date: 9/30/2024

State of: New York
County of: Ulster
Subscribed and sworn to before me this 30th day of September 24
Notary Public: Kira Rabiner
My Commission expires: 8/5/27

KIRA RABINER
NOTARY PUBLIC, STATE OF NEW YORK
Registration No. 01RA6395713
Qualified in Ulster County
My Commission Expires: 08/05/2027

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising this application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED $193,883.14

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

ARCHITECT:
By: Date: 10/3/2024

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

User Notes:

(3B9ADA58)

AIA® Document G703® – 1992

Continuation Sheet

AIA Document G702®, Application and Certification for Payment, or G732™, Application and Certificate for Payment, Construction Manager as Adviser Edition, containing Contractor's signed certification is attached.
Use Column I on Contracts where variable retainage for line items may apply.

APPLICATION NO:	001
APPLICATION DATE:	September 20, 2024
PERIOD TO:	September 25, 2024
ARCHITECT'S PROJECT NO:	Hudson Land Design Professional Engineering

A	B	C	D	E	F	G		H	I
			WORK COMPLETED						
ITEM NO.	DESCRIPTION OF WORK	SCHEDULED VALUE	FROM PREVIOUS APPLICATION (D + E)	THIS PERIOD	MATERIALS PRESENTLY STORED (NOT IN D OR E)	TOTAL COMPLETED AND STORED TO DATE (D ÷ E ÷ F)	% (G÷C)	BALANCE TO FINISH (C - G)	RETAINAGE (IF VARIABLE RATE)
1	Complete Job	201,400.00	0.00	201,400.00	0.00	201,400.00	100.00%	0.00	0.00
2	Extra Work	2,687.52	0.00	2,687.52	0.00	2,687.52	100.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
		0.00	0.00	0.00	0.00	0.00	0.00%	0.00	0.00
	GRAND TOTAL	$204,087.52	$0.00	$204,087.52	$0.00	$204,087.52	100.00%	$0.00	$0.00

User Notes:

HC 231
(5/06)

New York State Department of Transportation

CONTRACTOR'S PAYROLL STATEMENT

NAME OF CONTRACTOR ☑ OR SUBCONTRACTOR ☐
Kingston Equipment Rental, Inc.

ADDRESS
78 Stone Road, West Hurley, NY 12491

PAYROLL No. #1

FOR WEEK ENDING 9/7/2024

CONTRACT DESCRIPTION
Beekman Recreation Swim Pond Stone Weir

COUNTY Dutchess

CONTRACT No RFB202404151

(1) EMPLOYEE NAME, RACE/GENDER CODE, SSN AND ADDRESS	(3) WORK CLASS	OT or ST	(4) 1 S	2 M	3 Tu	4 W	5 Th	6 F	7 S	(5) TOTAL HOURS	(6) WAGE RATE	(6A) FRINGE RATE	(6B) FRINGES PAID IN CASH?	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS FICA / MEDICARE	FED WITH-HOLDING		OTHER	TOTAL	(9) NET WAGES PAID
David J Smith WM XXX-XX-9737	OP	O								0			N	2,667.91	204.10	310.00	145.80	299.94	959.84	1,708.07
PoO Box 286, Accord, NY 12404		S					8			8	60.47									
Joshua M Smith WM XXX-XX-7787	LAB	O								0			N	2,162.25	165.42	203.00	190.94	150.52	628.88	1,533.37
8BSchoolhouse Rd, Pine Island, NY 10969		S					6			6	55.80									
		O								0		0.00							0.00	0.00
		S								0										
		O								0		0.00							0.00	0.00
		S								0										
		O								0					0.00				0.00	0.00
		S								0										
		O								0		0.00							0.00	0.00
		S								0										
		O								0		0.00							0.00	0.00
		S								0										
		O								0									0.00	0.00
		S																		
		O								0		0.00							0.00	0.00
		S								0										
		O								0	0.00	0.00		0.00	0.00				0.00	0.00
		S								0										

RACE/GENDER CODES: W-White/Caucasian B-Black H-Hispanic A-Asian NA-Native American / M-Male F-Female

WORK CLASSIFICATION CODES: LAB-Laborer OP-Equipment Operator SV-Surveyor TD-Truck Driver IW-Ironworker CP-Carpenter MS-Mason PT-Painter EL-Electrician

Others (as Needed) - ________

INITIALS ________

HC 231
(5/06)

New York State Department of Transportation
CONTRACTOR'S PAYROLL CERTIFICATION

Date: 9/26/2024

I, Rita Kosonen , Secretary/Treasurer do hereby state:

(1) That I pay or supervise the payment of the persons employed by Kingston Equipment Rental, Inc. on the Beekman Rec Swim Pond Stone Weir that during the payroll period commencing on 9/1/2024 and ending on 9/7/2024 all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Kingston Equipment Rental, Inc.

from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in:
Article 6 Section 193 of the New York State Labor Law, applicable to State projects, and as described below; OR
Title 29, Code of Federal Regulations, Part 3 (29 CFR Subtitle A) issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), applicable to Federal or Federally-aided projects, and as described below.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with: the New York State Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS OR PROGRAMS

☑ In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payment of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS

NAME AND TITLE	SIGNATURE	Date
Rita Kosonen, Secretary/Treasurer	Rita Kosonen	9/26/2024

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

HC 231
(5/06)

New York State Department of Transportation

CONTRACTOR'S PAYROLL STATEMENT

NAME OF CONTRACTOR ☑ OR SUBCONTRACTOR ☐
Kingston Equipment Rental, Inc.

ADDRESS
78 Stone Road, West Hurley, NY 12491

PAYROLL No. #2

FOR WEEK ENDING 9/14/2024

CONTRACT DESCRIPTION
Beekman Recreation Swim Pond Stone Weir

COUNTY Dutchess

CONTRACT No RFB202404151

(1) EMPLOYEE NAME, RACE/GENDER CODE, SSN AND ADDRESS	(3) WORK CLASS	OT or ST	8 S	9 M	10 Tu	11 W	12 Th	13 F	14 S	(5) TOTAL HOURS	(6) WAGE RATE	(6A) FRINGE RATE	(6B) FRINGES PAID IN CASH?	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS FICA / MEDICARE	FED WITH-HOLDING		OTHER	TOTAL	(9) NET WAGES PAID
Richard G Becker WM XXX-XX-5582	OP	O								0			N	2,717.01	207.86	320.00	149.32	305.47	982.65	1,734.36
11 Huckleberry Lane, West Hurley, Ny 12491		S			8					8	60.47									
Cory M Beesmer WM XXX-XX-8039	LAB	O			1		1			2	69.08		N	2,049.24	156.76	312.00	103.23	137.14	709.13	1,340.11
240 Stone Road, West Hurley, NY 12491		S			8		8			16	46.05									
Joseph A Cimorelli WM XXX-XX-8434	LAB	O								0		0.00	N	2,315.70	177.15	202.00	121.92	160.34	661.41	1,654.29
12 Cobble Creek Rd, Saugerties, NY 12477		S			8					8	55.80									
David J Smith WM XXX-XX-9737	OP	O								0		0.00	N	2,618.80	200.33	299.00	142.28	294.42	936.03	1,682.77
PO Box 286, Accord, NY 12404		S				8	8			16	60.47									
Joshua M Smith WM XXX-XX-7787	LAB	O								0			N	2,232.00	170.74	214.00	114.59	156.33	655.66	1,576.34
8B Schoolhouse Rd, Pine Island, NY 10969		S				8	8	8		24	55.80									
		O								0		0.00							0.00	0.00
		S								0										
		O								0		0.00							0.00	0.00
		S								0										
		O								0									0.00	0.00
		S																		
		O								0		0.00							0.00	0.00
		S								0										
		O								0	0.00	0.00		0.00	0.00				0.00	0.00
		S								0										

RACE/GENDER CODES: W-White/Caucasian B-Black H-Hispanic A-Asian NA-Native American / M-Male F-Female

WORK CLASSIFICATION CODES: LAB-Laborer OP-Equipment Operator SV-Surveyor TD-Truck Driver IW-Ironworker CP-Carpenter MS-Mason PT-Painter EL-Electrician

Others (as Needed) - ________

INITIALS ________

HC 231
(5/06)

New York State Department of Transportation

CONTRACTOR'S PAYROLL CERTIFICATION

Date: 9/26/2024

I, Rita Kosonen , Secretary/Treasurer do hereby state:

(1) That I pay or supervise the payment of the persons employed by Kingston Equipment Rental, Inc. on the Beekman Rec Swim Pond Stone Weir that during the payroll period commencing on 9/8/2024 and ending on 9/14/2024 all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Kingston Equipment Rental, Inc.

from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in:
Article 6 Section 193 of the New York State Labor Law, applicable to State projects, and as described below; OR
Title 29, Code of Federal Regulations, Part 3 (29 CFR Subtitle A) issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), applicable to Federal or Federally-aided projects, and as described below.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with: the New York State Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS OR PROGRAMS

☑ In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payment of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS

NAME AND TITLE	SIGNATURE	Date
Rita Kosonen, Secretary/Treasurer	Rita Kosonen	9/26/2024

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

HC 231
(5/06)

New York State Department of Transportation

CONTRACTOR'S PAYROLL STATEMENT

NAME OF CONTRACTOR ☑ Kingston Equipment Rental, Inc. OR SUBCONTRACTOR ☐

ADDRESS 78 Stone Road, West Hurley, NY 12491

PAYROLL No. #3 | FOR WEEK ENDING 9/21/2024 | CONTRACT DESCRIPTION Beekman Recreation Swim Pond Stone Weir | COUNTY Dutchess | CONTRACT No RFB202404151

(1) EMPLOYEE NAME, RACE/GENDER CODE, SSN AND ADDRESS	(3) WORK CLASS	OT or ST	15 S	16 M	17 Tu	18 W	19 Th	20 F	21 S	(5) TOTAL HOURS	(6) WAGE RATE	(6A) FRINGE RATE	(6B) FRINGES PAID IN CASH?	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS FICA / MEDICARE	FED WITH-HOLDING		OTHER	TOTAL	(9) NET WAGES PAID
Cory M Beesmer WM XXX-XX-8039	LAB	O					2	1		3	69.08		N	2,049.24	156.76	312.00	103.23	166.74	738.73	1,310.51
240 Stone Road, West Hurley, NY 12491		S				8	8	8		24	46.05									
David J Smith WM XXX-XX-9737	OP	O								0			N	2,618.80	200.34	299.00	142.28	294.42	936.04	1,682.76
PO Box 286, Accord, NY 12404		S					8	8		16	60.47									
		O								0		0.00							0.00	0.00
		S								0										
		O								0		0.00							0.00	0.00
		S								0										
		O								0					0.00				0.00	0.00
		S								0										
		O								0		0.00							0.00	0.00
		S								0										
		O								0		0.00							0.00	0.00
		S								0										
		O								0									0.00	0.00
		S																		
		O								0		0.00							0.00	0.00
		S								0										
		O								0	0.00	0.00		0.00	0.00				0.00	0.00
		S								0										

RACE/GENDER CODES: W-White/Caucasian B-Black H-Hispanic A-Asian NA-Native American / M-Male F-Female

WORK CLASSIFICATION CODES: LAB-Laborer OP-Equipment Operator SV-Surveyor TD-Truck Driver IW-Ironworker CP-Carpenter MS-Mason PT-Painter EL-Electrician

Others (as Needed) - ________

INITIALS ________

HC 231
(5/06)

New York State Department of Transportation

CONTRACTOR'S PAYROLL CERTIFICATION

Date: 9/26/2024

I, Rita Kosonen , Secretary/Treasurer do hereby state:

(1) That I pay or supervise the payment of the persons employed by Kingston Equipment Rental, Inc. on the Beekman Rec Swim Pond Stone Weir that during the payroll period commencing on 9/15/2024 and ending on 9/21/2024 all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Kingston Equipment Rental, Inc.

from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in:
Article 6 Section 193 of the New York State Labor Law, applicable to State projects, and as described below; OR
Title 29, Code of Federal Regulations, Part 3 (29 CFR Subtitle A) issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), applicable to Federal or Federally-aided projects, and as described below.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with: the New York State Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS OR PROGRAMS

☑ In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payment of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☐ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS

NAME AND TITLE	SIGNATURE	Date
Rita Kosonen, Secretary/Treasurer	Rita Kosonen	9/26/2024

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

HC 231
(5/06)

New York State Department of Transportation

CONTRACTOR'S PAYROLL STATEMENT

NAME OF CONTRACTOR ☑ OR SUBCONTRACTOR ☐
Kingston Equipment Rental, Inc.

ADDRESS
78 Stone Road, West Hurley, NY 12491

PAYROLL No.	FOR WEEK ENDING	CONTRACT DESCRIPTION	COUNTY	CONTRACT No
#4	9/28/2024	Beekman Recreation Swim Pond Stone Weir	Dutchess	RFB202404151

(1) EMPLOYEE NAME, RACE/GENDER CODE, SSN AND ADDRESS	(3) WORK CLASS	OT or ST	(4) DAY AND DATE — HOURS WORKED EACH DAY 22 S	23 M	24 Tu	25 W	26 Th	27 F	28 S	(5) TOTAL HOURS	(6) WAGE RATE	(6A) FRINGE RATE	(6B) FRINGES PAID IN CASH?	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS FICA / MEDICARE	FED WITH-HOLDING		OTHER	TOTAL	(9) NET WAGES PAID
Cory M Beesmer WM XXX-XX-8039	LAB	O								0			N	1,911.08	146.20	282.00	94.64	158.83	681.67	1,229.41
240 Stone Road, West Hurley, NY 12491		S		6						6	46.05									
Ryan A Smith WM XXX-XX-3560	LAB	O								0			Y	2,320.86	177.55	116.00	122.29	8.66	424.50	1,896.36
328 Brown Road, Olive Bridge, NY 12461		S		2						2	46.05	33.38								
		O								0		0.00							0.00	0.00
		S								0										
		O								0		0.00							0.00	0.00
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		O								0		0.00							0.00	0.00
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		O								0		0.00							0.00	0.00
		S								0										
		O								0	0.00	0.00		0.00	0.00				0.00	0.00
		S								0										

RACE/GENDER CODES: W-White/Caucasian B-Black H-Hispanic A-Asian NA-Native American / M-Male F-Female

WORK CLASSIFICATION CODES: LAB-Laborer OP-Equipment Operator SV-Surveyor TD-Truck Driver IW-Ironworker CP-Carpenter MS-Mason PT-Painter EL-Electrician

Others (as Needed) - ________

INITIALS ________

HC 231
(5/06)

New York State Department of Transportation

CONTRACTOR'S PAYROLL CERTIFICATION

Date: 10/3/2024

I, Rita Kosonen , Secretary/Treasurer do hereby state:

(1) That I pay or supervise the payment of the persons employed by Kingston Equipment Rental, Inc. on the Beekman Rec Swim Pond Stone Weir that during the payroll period commencing on 9/22/2024 and ending on 9/28/2024 all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said Kingston Equipment Rental, Inc.

from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in:

Article 6 Section 193 of the New York State Labor Law, applicable to State projects, and as described below; OR

Title 29, Code of Federal Regulations, Part 3 (29 CFR Subtitle A) issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. 276c), applicable to Federal or Federally-aided projects, and as described below.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he/she performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with: the New York State Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS OR PROGRAMS

☑ In addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payment of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in Section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☑ Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS

NAME AND TITLE	SIGNATURE	Date
Rita Kosonen, Secretary/Treasurer	Rita Kosonen	10/3/2024

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

CONTRACTOR/SUBCONTRACTOR PARTIAL RELEASE AND LIEN WAIVER

Date:	September 25, 2024 ~~September 6, 2024~~	Contract Date:	June 13, 2024
Project:	Swim Pond Stone Weir Improvements Project	Contract Price:	$201,400.00
Address:	29 Recreation Center Road	Net Extras & Deductions:	$2,687.52
City:	Poughquag, New York	Adjusted Contract Price:	$204,087.52
County:	Dutchess	Amount Previously Paid:	$0
State:	New York	Current Payment Due:	$193,883.14
Owner:	Town of Beekman	Balance Due:	$10,204.38
Contractor:	Kingston Equipment Rental, Inc.		

In the consideration of payment made by TOWN OF BEEKMAN to Kingston Equipment Rental, Inc. for all work, labor, materials, equipment and services furnished through the period ending ~~September 6, 2024~~ September 25, 2024 and pursuant to Payment Application #1 in connection with the project named above.

The UNDERSIGNED hereby releases the Owner listed above, through the date of this Partial Release and Waiver of Lien, from any and all claims and demands of every kind and character, including, but not limited to claims for labor and/or materials and/or equipment and/or additional work and/or delays under the aforesaid contract in any way growing out of or connected with said contract. The undersigned does hereby covenant and agree not to claim or file a mechanic's lien or any other lien against the contract and/or premises for materials furnished or labor performed in connection with such a project to date listed above.

The UNDERSIGNED further warrants that:

1) All subcontractors employed by the undersigned upon this project have been fully paid to this date hereof;
2) All workmen employed by it or its subcontractors upon this project have been fully paid to this date hereof;
3) All materialmen from whom the undersigned or its subcontractors have purchased materials used in this project have been paid for the materials delivered on or prior to this date;
4) None of such workmen and/or materialmen have any claims or demand or right of lien; and
5) He/She is an authorized officer with full power to execute this Partial Release and Waiver of Lien.

IN WITNESS WHEREOF, the contractor or subcontractor named below has executed this Partial Release and Lien Waiver this 3rd day of October, 2024.

CONTRACTOR/SUBCONTRACTOR:

Signature: Rita Kosonen

Print Name: Rita Kosonen

Title: Secretary/Treasurer

STATE OF NEW YORK)
)
ss.:COUNTY OF Ulster)

On this 3rd day of oct, 2024, before me personally came Rita Kosonen, to me known, who, being by me duly sworn, did depose and say that he/she resides at 30 Thornwood Lane, Accord NY, that he/she is the Sec./Treas of Kingston Rental Equipment, Inc., the corporation described in and which executed the foregoing Partial Release and Lien Waiver, and that he/she signed his name thereto by authority of the Board of Directors of the corporation.

RANIA FAKHOURY
Notary Public, State of New York
No. 01FA6314353
Qualified In Dutchess County
Commission Expires November 03, 2026

R Fakhoury
Notary Public

VOUCHER

Town of Beekman
4 Main Street
Poughquag, NY 12570

Voucher Number

Date Received

Fund-Appropriation	Amount
	$ 193,883.14
Total	$ 193,883.14

Dept.

Claimants Name & Address

Kingston Equipment Rental, Inc.
~~410 Route 22~~ 78 Stone Road
~~Brewster, NY 10509~~
West Hurley NY 12491

Detailed invoices may be attached and total entered on this voucher
Certification below must be signed.

INVOICE DATE	INVOICE #	DESCRIPTION OF MATERIALS OR SERVICES	UNIT PRICE	AMOUNT
9/25/2024	Pay App 1	Town of Beekman Beekman Recreation Park Swim Pond Stone Weir Improvement Project 6/20/2024 through 9/25/2024		$ 193,883.14
		Total		$193,883.14

CLAIMANT'S CERTIFICATION

I, Rita Kosonen, certify that the above account in the amount of $193,883.14 is true and correct; that the items, services, and disbursements were rendered to or for the municipality on the dates stated; that no part has been paid or satisfied: that taxes, from which the municipality is exempt, are not included; and that the amount claimed is actually due.

9/25/2024
Date

Rita Kosonen
Signature

Secretary/Treasurer
Title

Department Approval
The above services or materials were rendered or furnished to the municipality on the dates stated and the charges are correct.

Date

Authorized Official

Print Name of Authorized Official

Approval for Payment
This claim is approved and ordered paid from the appropriations indicated above

Date

Auditing Board

HUDSON
LAND DESIGN

Civil and Environmental Engineering Consultants
174 Main Street Beacon, NY 12508 (Main Office and Mailing Address)
13 Chambers Street, Newburgh, NY 12550 (Satellite Office)
Phone: 845-440-6926
www.HudsonLandDesign.com

October 2, 2024

Supervisor Mary Covucci and Members of the Town Board
Town of Beekman
4 Main Street
Poughquag, New York 12570

Re: Beekman Town Hall – Emergency Generator (RFP: 2024-0502)
Contractor Request for payment

Dear Supervisor Covucci and Members of the Town Board:

Hudson Land Design is in receipt of a payment request package dated September 6, 2024 from John A. Giaimo and Son, Inc. requesting first and final payment in the amount of $19,700 (see attached Invoice 14643-2). John A. Giaimo and Son, Inc. has requested full payment for their services related to RFP: 2024-0502, covering the period of June 4, 2024 through September 6, 2024, with a total completed value of $19,700. HLD has reviewed the request and agrees with the quantity of work completed. HLD also certifies that the completed works associated with the contract have been substantially completed and are acceptable. Attached please find a copy of the Invoice along with supporting information, including a Town voucher.

Therefore, we suggest that the Town Board authorize payment to John A. Giaimo and Son, Inc. in the amount of $19,700 in order to satisfy Invoice 14643-2. The one-year warranty period on the electrician's services will commence upon final payment. Should you have any questions, please feel free to call my direct line at 845-765-8955.

Sincerely,

Daniel G. Koehler, P.E.
Principal

Att: Invoice 14643-2, Certified Payroll, Town Voucher

cc: Laureen Abbatantuono, Town Clerk (via email)
Tom Carey, Town Comptroller (via email)
Linda Bloomer, Town Bookkeeper (via email)
Wallace & Wallace, Town Attorney (via email)
Michael A. Bodendorf, P.E. (HLD file)

JOHN A. GIAIMO & SON, INC.
LICENSED ELECTRICAL CONTRACTOR
P.O. BOX 597
POUGHQUAG, NY 12570
PH (845) 226-6595   FAX (845) 226-6797

TOWN OF BEEKMAN
4 MAIN STREET
POUGHQUAG, NY 12570

Invoice#: 14643-2
Invoice Date: 9/ 6/2024
Due Date: 9/ 6/2024
Customer ID: 103
Phone#: (845) 724-5326

Job: TOWN HALL EMERGENCY GENERATOR
Job#: 14643-2

Work Performed:
SUPPLY LABOR AND MATERIAL TO INSTALL ELECTRICAL WORK AS PER PROPOSAL DATED 5/23/24.

PRICE AS QUOTED:..$ 19,700.00

PREVIOUSLY BILLED:..$ 12,000.00

PAYMENT DUE FOR COMPLICATION OF WORK:.....................$ 19,700.00

Job Site:
TOWN HALL EMERGENCY GENERATOR

Item	Description	Qty	Price	Total
F131	INVOICE TOTAL	1.00	19,700.00 E	19,700.00
			Flat Rate :	19,700.00
			Total Due	$19,700.00

Terms: NET 15 DAYS

LATE FEE IS 18% ANNUALLY / PLEASE RETURN PINK COPY WITH PAYMENT / THANK YOU

U.S. Department of Labor
Wage and Hour Division

PAYROLL

(For Contractor's Optional Use; See Instructions at www.dol.gov/whd/forms/wh347instr.htm)

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

U.S. Wage and Hour Division
Rev. Dec. 2008

OMB No.: 1235-0008
Expires: 07/31/2024

NAME OF CONTRACTOR ☑ OR SUBCONTRACTOR: John A Giaimo & Son, Inc

ADDRESS: P.O. Box 597 Poughquag, NY 12570

PAYROLL NO.: j

FOR WEEK ENDING: 06/09/2024

PROJECT AND LOCATION: Town of Beekman

PROJECT OR CONTRACT NO.:

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT. OR ST.	(4) Mon 6/3	Tue 6/4	Wed 6/5	Thu 6/6	Fri 6/7	Sat 6/8	Sun 6/9	(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS FICA	WITH-HOLDING TAX	State	Local	OTHER	TOTAL DEDUCTIONS	(9) NET WAGES PAID FOR WEEK
Johnathan M Bradley		Electrician	O								0.00		129.60	59.54	55.26	35.33	0.00	6.09	156.22	622.26
### ##-6656			S	0	0	1.5	0	0	0	0	1.5	86.40	778.48							
Anthony J Desisto		Electrician	O								0.00		130.62	75.89	58.54	46.22	0.00	29.75	210.40	781.41
### ##-9425			S	0	0	1.5	0	0	0	0	1.5	87.08	991.81							
Vincent J Giaimo	0	Electrician	O								0.00		127.41	87.04	118.77	53.68	0.00	50.00	309.49	828.17
### ##-8393			S	0	0	1.5	0	0	0	0	1.5	84.94	1137.66							
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(over)

Date 06/11/2024

I, John Giaimo (Name of Signatory Party) President (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by John A Giaimo & Son, Inc (Contractor or Subcontractor) on the Town of Beekman (Building or Work); that during the payroll period commencing on the 03 day of 06, 2024, and ending the 09 day of 06, 2024, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said John A Giaimo & Son, Inc (Contractor or Subcontractor) from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

LIFE AFTER TAX - 6.09,SIMPLE EE CLIENT - 79.75

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☑ – in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☑ – Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE	SIGNATURE
John Giaimo, President	

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

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WAGE AND HOUR DIVISION
Revised December 2008

NAME OF CONTRACTOR ☑ OR SUBCONTRACTOR John A Giaimo & Son, Inc		ADDRESS P.O. Box 597 Poughquag, NY 12570	OMB No. 1235-0008 Expires 09/30/2026
PAYROLL NO.	FOR WEEK ENDING 07/14/2024	PROJECT AND LOCATION Town of Beekman	PROJECT OR CONTRACT NO.

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT. OR ST.	(4) Mon 7/8	Tue 7/9	Wed 7/10	Thu 7/11	Fri 7/12	Sat 7/13	Sun 7/14	(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS FICA	WITH-HOLDING TAX	State	Local	OTHER	TOTAL DEDUCTIONS	(9) NET WAGES PAID FOR WEEK
				HOURS WORKED EACH DAY																
Johnathan M Bradley		Electrician	O	0	0	0	0	1	0	0	1	114.40	805.60	110.38	160.53	74.35	0.00	6.09	351.35	1091.53
###-##-6656			S	0	0	0	0	8	0	0	8	86.40	1442.88							
Jason Jacobusky	0	Electrician	O	0	0	0	0	1	0	0	1	110.03	766.27	149.01	284.63	99.57	0.00	288.10	821.31	1306.36
###-##-9788			S	0	0	0	0	8	0	0	8	82.03	2127.67							
Hector Mejorado	0	Electrician	O	0	0	0	0	0	0.37	0	0.37	115.08	695.68	142.58	289.52	99.96	0.00	12.00	544.06	1330.42
###-##-1060			S	0	0	0	0	7.5	0	0	7.5	87.08	1874.48							
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									

Date 07/15/2024

I, John Giaimo (Name of Signatory Party) President (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by John A Giaimo & Son, Inc (Contractor or Subcontractor) on the Town of Beekman (Building or Work); that during the payroll period commencing on the 08 day of 07, 2024, and ending the 14 day of 07, 2024, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said John A Giaimo & Son, Inc (Contractor or Subcontractor) from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

LIFE AFTER TAX - 6.09,SIMPLE EE CLIENT - 106.38,MEDICAL SECTION 125 - 169.04,DENTAL SECTION 125 - 21.32,VISION AFTER TAX - 3.36

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☑ – in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☑ – Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE	SIGNATURE
John Giaimo, President	

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

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WAGE AND HOUR DIVISION
Revised December 2008

OMB No. 1235-0008
Expires 09/30/2026

NAME OF CONTRACTOR [✓] OR SUBCONTRACTOR: John A Giaimo & Son, Inc

ADDRESS: P.O. Box 597 Poughquag, NY 12570

PAYROLL NO.: 3

FOR WEEK ENDING: 08/04/2024

PROJECT AND LOCATION: Town of Beekman

PROJECT OR CONTRACT NO.:

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT. OR ST.	(4) Mon 7/29	Tue 7/30	Wed 7/31	Thu 8/1	Fri 8/2	Sat 8/3	Sun 8/4	(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS FICA	WITH-HOLDING TAX	State	Local	OTHER	TOTAL DEDUCTIONS	(9) NET WAGES PAID FOR WEEK
Johnathan M Bradley		Electrician	O								0.00		302.40	82.80	91.71	53.17	0.00	6.09	233.77	848.47
### ##-6656			S	0	0	1	2.5	0	0	0	3.5	86.40	1082.24							
Anthony J Desisto		Electrician	O								0.00		217.70	70.30	50.07	42.07	0.00	27.57	190.01	729.05
### ##-9425			S	0	0	0	2.5	0	0	0	2.5	87.08	919.06							
Vincent J Giaimo	0	Electrician	O								0.00		297.29	101.90	161.53	65.09	0.00	50.00	378.52	953.52
### ##-8393			S	0	0	1	2.5	0	0	0	3.5	84.94	1332.04							
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									

HOURS WORKED EACH DAY

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date 08/06/2024

I, John Giaimo (Name of Signatory Party), President (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by John A Giaimo & Son, Inc (Contractor or Subcontractor) on the Town of Beekman (Building or Work); that during the payroll period commencing on the 29 day of 07, 2024, and ending the 04 day of 08, 2024, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said John A Giaimo & Son, Inc (Contractor or Subcontractor) from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

LIFE AFTER TAX - 6.09,SIMPLE EE CLIENT - 77.57

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☑ – in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☑ – Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE	SIGNATURE
John Giaimo, President	[signature]

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number.

WAGE AND HOUR DIVISION
Revised December 2008

NAME OF CONTRACTOR ☑ OR SUBCONTRACTOR: John A Giaimo & Son, Inc

ADDRESS P.O. Box 597 Poughquag, NY 12570

OMB No. 1235-0008
Expires 09/30/2026

PAYROLL NO. 4

FOR WEEK ENDING 08/18/2024

PROJECT AND LOCATION Town of Beekman

PROJECT OR CONTRACT NO.

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT. OR ST.	(4) Mon 8/12	Tue 8/13	Wed 8/14	Thu 8/15	Fri 8/16	Sat 8/17	Sun 8/18	(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) FICA	WITH-HOLDING TAX	State	Local	OTHER	TOTAL DEDUCTIONS	(9) NET WAGES PAID FOR WEEK
Johnathan M Bradley		Electrician	O								0.00		129.60	56.50	50.47	32.98	0.00	6.09	146.04	592.52
###-##-6556			S	0	0	1.5	0	0	0	0	1.5	86.40	738.56							
Anthony J Desisto		Electrician	O								0.00		1698.06	175.35	268.81	125.65	0.00	68.77	638.58	1653.70
###-##-9425			S	6.5	0	6.5	1.5	5	0	0	19.5	87.08	2292.28							
Vincent J Giaimo	0	Electrician	O								0.00		1316.57	155.46	315.56	107.65	0.00	50.00	628.67	1403.53
###-##-8393			S	2.5	0	6.5	1.5	5	0	0	15.5	84.94	2032.20							
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

Date 08/20/2024

I, John Giaimo (Name of Signatory Party) President (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by John A Giaimo & Son, Inc (Contractor or Subcontractor) on the Town of Beekman (Building or Work); that during the payroll period commencing on the 12 day of 08, 2024, and ending the 18 day of 08, 2024, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said John A Giaimo & Son, Inc (Contractor or Subcontractor) from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

LIFE AFTER TAX - 6.09,SIMPLE EE CLIENT - 118.77

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☑ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☑ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE	SIGNATURE
John Giaimo, President	

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL
For contractor's optional use; see instructions at dol.gov/agencies/whd/forms/wh347

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WAGE AND HOUR DIVISION
Revised December 2008

NAME OF CONTRACTOR ☑ OR SUBCONTRACTOR: John A Giaimo & Son, Inc

ADDRESS: P.O. Box 597 Poughquag, NY 12570

OMB No. 1235-0008
Expires 09/30/2026

PAYROLL NO.: 5

FOR WEEK ENDING: 08/25/2024

PROJECT AND LOCATION: Town of Beekman

PROJECT OR CONTRACT NO.:

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT. OR ST.	(4) Mon 8/19	Tue 8/20	Wed 8/21	Thu 8/22	Fri 8/23	Sat 8/24	Sun 8/25	(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) DEDUCTIONS FICA	WITH-HOLDING TAX	State	Local	OTHER	TOTAL DEDUCTIONS	(9) NET WAGES PAID FOR WEEK
Anthony J Desisto		Electrician	O								0.00		261.24	87.68	76.51	55.03	0.00	34.39	253.61	892.58
~~###-##~~-9425			S	3	0	0	0	0	0	0	3	87.08	1146.19							
Hector Mejorado	0	Electrician	O								0.00		261.24	67.07	86.89	41.10	0.00	0.00	195.06	681.62
~~###-##~~-1060			S	3	0	0	0	0	0	0	3	87.08	876.68							
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									

While completion of Form WH-347 is optional, it is mandatory for covered contractors and subcontractors performing work on Federally financed or assisted construction contracts to respond to the information collection contained in 29 C.F.R. §§ 3.3, 5.5(a). The Copeland Act (40 U.S.C. § 3145) contractors and subcontractors performing work on Federally financed or assisted construction contracts to "furnish weekly a statement with respect to the wages paid each employee during the preceding week." U.S. Department of Labor (DOL) regulations at 29 C.F.R. § 5.5(a)(3)(ii) require contractors to submit weekly a copy of all payrolls to the Federal agency contracting for or financing the construction project, accompanied by a signed "Statement of Compliance" indicating that the payrolls are correct and complete and that each laborer or mechanic has been paid not less than the proper Davis-Bacon prevailing wage rate for the work performed. DOL and federal contracting agencies receiving this information review the information to determine that employees have received legally required wages and fringe benefits.

Public Burden Statement

We estimate that is will take an average of 55 minutes to complete this collection, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have any comments regarding these estimates or any other aspect of this collection, including suggestions for reducing this burden, send them to the Administrator, Wage and Hour Division, U.S. Department of Labor, Room S3502, 200 Constitution Avenue, N.W. Washington, D.C. 20210

(over)

Date 08/27/2024

I, John Giaimo (Name of Signatory Party), President (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by John A Giaimo & Son, Inc (Contractor or Subcontractor) on the Town of Beekman (Building or Work); that during the payroll period commencing on the 19 day of 08, 2024, and ending the 25 day of 08, 2024, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said John A Giaimo & Son, Inc (Contractor or Subcontractor) from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

SIMPLE EE CLIENT - 34.39

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☑ – in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☑ – Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE	SIGNATURE
John Giaimo, President	

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF TITLE 31 OF THE UNITED STATES CODE.

U.S. Department of Labor
Wage and Hour Division

PAYROLL

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WAGE AND HOUR DIVISION
Revised December 2008

NAME OF CONTRACTOR ☑ OR SUBCONTRACTOR: John A Giaimo & Son, Inc

ADDRESS: P.O. Box 597 Poughquag, NY 12570

OMB No. 1235-0008
Expires 09/30/2026

PAYROLL NO.: #6

FOR WEEK ENDING: 09/08/2024

PROJECT AND LOCATION: Town of Beekman

PROJECT OR CONTRACT NO.:

(1) NAME AND INDIVIDUAL IDENTIFYING NUMBER (e.g., LAST FOUR DIGITS OF SOCIAL SECURITY NUMBER) OF WORKER	(2) NO. OF WITHHOLDING EXEMPTIONS	(3) WORK CLASSIFICATION	OT. OR ST.	Mon 9/2	Tue 9/3	Wed 9/4	Thu 9/5	Fri 9/6	Sat 9/7	Sun 9/8	(5) TOTAL HOURS	(6) RATE OF PAY	(7) GROSS AMOUNT EARNED	(8) FICA	WITH-HOLDING TAX	State	Local	OTHER	TOTAL DEDUCTIONS	(9) NET WAGES PAID FOR WEEK
Johnathan M Bradley		Electrician	O								0.00		129.60	75.00	79.50	47.19	0.00	6.09	207.78	772.66
### ##-6656			S	0	0	0	0	1.5	0	0	1.5	86.40	980.44							
Vincent J Giaimo	0	Electrician	O								0.00		169.88	105.15	170.88	67.58	0.00	50.00	393.61	980.91
### ##-8393			S	0	0	0	0	2	0	0	2	84.94	1374.52							
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									
			O								0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
			S								0.00									

(over)

Date 09/10/2024

I, John Giaimo (Name of Signatory Party) President (Title)

do hereby state:

(1) That I pay or supervise the payment of the persons employed by John A Giaimo & Son, Inc (Contractor or Subcontractor) on the Town of Beekman (Building or Work); that during the payroll period commencing on the 02 day of 09, 2024, and ending the 08 day of 09, 2024, all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said John A Giaimo & Son, Inc (Contractor or Subcontractor) from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

LIFE AFTER TAX - 6.09,SIMPLE EE CLIENT - 50.00

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS, OR PROGRAMS

☑ — in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

☑ — Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in section 4(c) below.

(c) EXCEPTIONS

EXCEPTION (CRAFT)	EXPLANATION

REMARKS:

NAME AND TITLE	SIGNATURE
John Giaimo, President	[signature]

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 3729 OF TITLE 31 OF THE UNITED STATES CODE.

VOUCHER

Town of Beekman
4 Main Street
Poughquag, NY 12570

Voucher Number ______

Date Received ______

Fund-Appropriation	Amount
Total	

Dept. ______

Claimants Name &

JOHN A. GIAIMO AND SON, INC.
Licensed Electrical Contractor
P.O. Box 597
Poughquag, New York 12570

Detailed invoices may be attached and total entered on this voucher
Certification below must be signed.

INVOICE DATE	INVOICE #	QUANTITY	DESCRIPTION OF MATERIALS OR SERVICES	UNIT PRICE	AMOUNT
9/6/2024	146432				19,700.00/100
			Total		19,700.00/100

CLAIMANT'S CERTIFICATION

I, John A. Giaimo, Jr., certify that the above account in the amount of $ 19,700.00 is true and correct; that the items, services, and disbursements were rendered to or for the municipality on the dates stated; that no part has been paid or satisfied: that taxes, from which the municipality is exempt, are not included; and that the amount claimed is actually due.

9/6/24 Date

Signature

President Title

Department Approval
The above services or materials were rendered or furnished to the municipality on the dates stated and the charges are correct.

______ Date

______ Authorized Official

Approval for Payment
This claim is approved and ordered paid from the appropriations indicated above

______ Date

______ Auditing Board

DUTCHESS COUNTY

soil & water

CONSERVATION DISTRICT

Since 1945

Notice of Grant Award

Mary Covucci, Supervisor
Town of Beekman
4 Main Street
Poughquag, NY 12570

September 18, 2024

Re: Swim Pond Stone Weir Improvements

Dear Supervisor Covucci:

The Board of Directors of the Dutchess County Soil and Water Conservation District ("DCSWCD") are pleased to inform you that your request for funding assistance has received approval in the amount of $50,000.00 to support the implementation of the stream stabilization weir at the Recreation Park.

The Grant Award Agreement (the "Agreement") is attached to this document. The Agreement specifies pertinent information concerning the grant. The award will be payable as a reimbursement to the Town of Beekman upon completion of the project and certification of payment of the contractors involved.

Please acknowledge receipt of this letter and indicate your acceptance of the terms discussed in the Agreement by signing and returning the Agreement to the DCSWCD office.

Dutchess County Soil and Water Conservation District

BFS

Brian F. Scoralick, Executive Director

2715 Rt.44, Suite 3, Millbrook, N.Y. 12545
Phone (845) 677-8011 ext. 3
www.dutchessswcd.org