

**JOINT SELECTBOARD and BOARD OF HEALTH  
MEETING NOTICE**

**Due to COVID-19 Public Participation will be by:**

Join Zoom Meeting: <https://zoom.us/j/93653459843>

**Meeting ID: 936 5345 9843 Password: 749246**

**Dial into meeting: +1 646 558 8656 or +1 312 626 6799 or +1 301 715 8592**

**Monday, March 8, 2021**

Topics may start earlier than specified, unless there is a hearing scheduled

**Meeting Being Taped**

**Votes May Be Taken**

1. 6:30 PM Selectboard Chair opens the meeting, including announcing that the meeting is being recorded and roll call taken
2. 6:30 Board of Health Chair opens the meeting, roll call taken
3. 6:31 Approve Minutes:
  - Joint Selectboard, Board of Health and Finance Committee Meeting: February 22, 2021
4. 6:32 Public Comment Period: Individuals will be limited to two (2) minutes each and the Selectboard will strictly adhere to time allotted for public comment
5. 6:35 Chelsey Little, WPCF Superintendent
  - First Half FY2021 Sewer Abatement
6. 6:40 COVID-19 Updates and Action Items
  - Update on Montague COVID case counts
  - Update on Vaccine Eligibility & County Clinics
  - Montague Vaccination Clinic Event, March 12 & 13
  - Review of Updated State Guidance or Orders
7. 7:00 Personnel Board
  - Reappoint Steve Ellis to Montague Retirement Board, 3 year term, 5/23/21 to 5/22/24
  - Consider DPW request for 2 new grounds staff in FY22
8. 7:15 Brian McHugh, Director of Community Development, FCRHRA
  - Execute letter to Mark Southard re: FY20 Montague CDBG Response to Special Conditions
  - Spinner Park Update
9. 7:25 Execute Mass. Cultural Council grant for Local Cultural Council Allocation for the Montague Cultural Council, \$6,600

**JOINT SELECTBOARD and BOARD OF HEALTH  
MEETING NOTICE  
Monday, March 8, 2021  
Page 2**

10. 7:30 Annabel Levine, Great Falls Farmers Market
- Request to use Peskeompskut Park, Every Wednesday, May to October, 1:00 PM to 6:15 PM for Farmers Market
  - Execute Food Security Infrastructure Grant, for products to low income individuals and families by investing in equipment that enables SNAP/EBT payments, \$1,150.40
11. 7:40 Cassandra Holden, Laudible Productions
- Entertainment Permit, Barbes in the Woods Festival, 27 Center Street, Montague August 21, 2021, 3:00 PM to 11:00 PM
12. 7:30 Walter Ramsey, Town Planner
- Issue Notice of Award to A.J. Virgilio Construction, Inc. for the Chestnut Loop Bridge Removal and Replacement Project in the amount of \$365,788.
  - Authorize Grant funding request to the Municipal Culvert Assistance Program in the amount of \$16,280 for design and permitting of a culvert replacement on South Ferry Road
  - Review and authorize "MA One Stop for Growth" Expression of Interest for proposed projects relating to the Canal District redevelopment, downtown parking management, master planning, CSO Separation, and light industrial expansion at Sandy lane
13. 7:50 Jeff Singleton
- FRTA Updates
14. 8:00 Town Administrator's Report
- Debriefing of Special Town Meeting
  - Planning for Annual Town Meeting
  - FY2022 Chapter 90 Funding Announcement
  - Consider Key Topics for meeting with Legislative Delegation
  - Cannabis Impact Fee Discussion
  - Topics not anticipated in 48 hour posting

**Upcoming Meetings:**

Selectboard Meeting, **MONDAY, March 15, 2021, 6:30 PM** via Zoom

### Sewer Abatement FY 2021 First Half Billing Period

| #  | Location                        | Reason for Request                                       | Superintendent Recommendation | Updated Info                             | Notes (\$14.56/1000gallon)  |
|----|---------------------------------|--|-------------------------------|--|---|
| 1  | 55 Main St, Montague Center     | Hot water system leak                                    | ABATE<br>\$1,955.89           | Use 41,667 gallons for 2nd half billing  | Billed amount: \$2562.56 for 176,000 gallons<br><br>Used 3 year average for calculation (41,667 gallons)  |
| 2  | 62 High St, Turners Falls       | Lawn watering  | DO NOT ABATE                  |  | Winter usage only is used to calculate bill   |
| 3  | 139 Turners Falls Rd, Montague  | Heating pipe rupture                                     | ABATE<br>\$223.20             | Use 17,667 gallons for 2nd half billing  | Billed amount: \$480.48 for 33,000 gallons<br>Provided documents that showed leaked water did not enter collection system<br>Used 3 year average for calculation (17,667 gallons)     |
| 4  | 16 Hatchery Rd, Montague Center | Processing/billing error per Treasurer                   | ABATE<br>\$402.90             |  | Billed amount: \$402.90<br>No water meter, should not have been billed  |
| 5  | 5 Adams St, Lake Pleasant       | Leaking sill cock  | ABATE<br>\$1,887.95           | Use 26,333 gallons for 2nd half billing  | Billed amount: \$2271.36 for 156,000 gallons<br><br>Used 3 year average for calculation (26,333 gallons)  |
| 6  | 15 Dunton St, Turners Falls     | House unoccupied 10/2019-6/2020                          | DO NOT ABATE<br>BOARD REVIEW  |  | Billed amount: \$655.20 for 45,000 gallons<br>No leaks, or work done to cause drastic increase (checked w/water dept on meter)<br>Used 3 year average for calculation (5,667 gallons) |
| 7  | 73 Fifth St, Turners Falls      | Possible gallonage/input error?                          | DO NOT ABATE                  |  | Billed for 79,000 gallons<br>3 family unit sold 10/03/2019, usage for 2020 118,000 gallons  |
| 8  | 440 Old Greenfield Rd           | Closed due to COVID                                      | DO NOT ABATE                  |  | Billed for 138,000 gallons<br>3 year average: 213,000 gallons<br>reduced usage reflects closure/shutdown  |
| 9  | 21 Bernardo Dr, Montague        | Processing/billing error per Treasurer                   | ABATE<br>\$315.54             | Use metered \$87.36 for 2nd half billing | Billed \$402.90 (flat rate)<br>Billed incorrectly for flat rate<br>Metered usage 6,000 gallons  |
| 10 | 12 G St, Turners Falls          | Unaware of water leaking, tenant did not advise landlord | DO NOT ABATE<br>BOARD REVIEW  |  | Billed 108,000 gallons<br>Water leak per correspondence immediately corrected, waiting for return phone call<br>3 year average: 42,333 gallons for more info on leak source           |
| 11 | 171 Avenue A, Turners Falls     | Incorrect data per water district                        | ABATE<br>\$2,683.89           | Use 159,667 gallons for 2nd half billing | Billed amount: \$5,008.64 for 344,000 gallons<br>Changed water meter on 5/07/2020<br>3 year average: 159,667 gallons  |
| 12 | 61 Randall Wood Dr, Montague    | Water Dept advised of water leak, toilet found leaking   | DO NOT ABATE                  | Use 13,000 gallons for 2nd half billing  | Leaking toilet enters collection system   |

Property sales - not abated, it is the responsibility of the seller/buyer to obtain utility information and determine an equitable solution with respect to payment obligations to the town prior to closing.

Toilet leaks - not abated, water that goes through plumbing devices and reaches the sewer is billed because it is conveyed by the sanitary sewer and treated at the WWTP.

57



Daniel Wasiuk  
Director of Public Health

# MONTAGUE HEALTH DEPARTMENT

One Avenue A · Turners Falls, MA 01376  
Phone 413-863-3200 EXT. 205 Fax 413-863-3225

## COVID-19 UPDATES

Dear Selectboard:

### In terms of being eligible for the vaccine:

#### Phase 2

(February-March 2021)

#### Listed in order of priority:

- **Group 1:** Individuals age 75+
- **Group 2:** Individuals age 65+, individuals with 2+ certain medical conditions, and/or residents and staff of low income and affordable senior housing.
- **Group 3:** The Governor announced that beginning next Thursday March 11<sup>th</sup>, K-12 and early childhood educators, child care workers, and K-12 school staff will become eligible to schedule COVID-19 vaccine appointments.

### In terms of reopening Massachusetts:

(March 2021)

- **Restaurants** can now open at full capacity while maintaining the social distancing of 6 feet, limit of 6 people per table and 90 minute meal time limits.
- **Restaurants** can have musical entertainment
- **Indoor capacity of Performance Venues** open to 50%
- **Retail Business** can open fitting rooms

Thank you,

Daniel Wasiuk  
Director of Public Health



## MONTAGUE RETIREMENT BOARD

One Avenue A  
Turners Falls, Massachusetts 01376  
Phone: 413 863-3200 ext. 111  
Fax: 833-719-1294  
[retirement@montague-ma.gov](mailto:retirement@montague-ma.gov)

February 23, 2021

Mr. Richard Kuklewicz, Chairman  
Montague Selectboard  
One Avenue A  
Turners Falls, MA 01376

Dear Mr. Kuklewicz,

I am writing to inform you that the term of your appointed member to the Montague Retirement Board, Mr. Steven Ellis, expires on May 22, 2021.

Pursuant to M.G.L Chapter 32, s20(4)(b), please appoint a person of your choosing for the position of the 2<sup>nd</sup> member of the Montague Retirement Board, for the 3 year term commencing on May 23, 2021, and ending on May 22, 2024.

Please note that Retirement Board members are required by law to complete 18 hours of educational training during each 3 year term, and to file an Annual Statement of Financial Interest with the Public Employee Administration Commission (PERAC). All who serve on the Retirement Board receive a monthly stipend.

Please contact me if you have any questions.

Sincerely,

Deb Underhill  
Retirement Board Administrator

## FY22 Budget Review for Staffing Conversation

From 3/4/21 Budget File

### Estimated Taxation Revenues

|                                   |                   |
|-----------------------------------|-------------------|
| Net Levy                          | 20,170,659        |
| Net State Aid                     | 1,795,344         |
| Transportation Infrastructure RRA | 50                |
| Local Receipts                    | 1,614,837         |
| <b>Total Available "Taxation"</b> | <b>23,580,890</b> |

less excess capacity (\$500,000)

### Estimated Expenses (from Taxation)

|                           |                   |
|---------------------------|-------------------|
| Town Operating            | 10,897,135        |
| Tax Share WPCF            | 251,228           |
| GMRSD                     | 10,950,854        |
| FCTS                      | 1,233,242         |
| <b>Subtotal Operating</b> | <b>23,332,459</b> |

### Special Articles (from Taxation)

|                                |                   |
|--------------------------------|-------------------|
| DPW Discretionary              | 100,000           |
| Valuation Sp Art               | 13,130            |
| Transfers per Policy           | 282,045           |
| <b>Total Exp from Taxation</b> | <b>23,727,634</b> |

Annual capital s/b funded from Taxation per policies  
Consistent Town practice that articles under \$25k come from taxation  
Financial policies and established OPEB practice

|  |        |
|--|--------|
| Operating Appropriation to CI Stab       | 43,777 |
| Operating Appropriation to Town Gen Stab | 64,465 |

**Shortfall** **(146,744)**

Cost of 2 new DPW staff 114,121

Built into the current budget (inc wages and health ins)

### Special Articles from Non-Taxation Sources

Capital and other Sp Art Requests (>\$25k) 709,011

### Other Available Reserves

|                            |           |
|----------------------------|-----------|
| Free Cash                  | 478,973   |
| FCTS Stabilization         | 167,055   |
| GMRSD Stabilization        | 117,390   |
| Town Capital Stabilization | 1,412,562 |
| Town General Stabilization | 1,129,320 |

policies suggest use of 27,262

Excess Capacity 500,000

Continues FY21 budget plan

100

|   |                     |
|---|---------------------|
| <b>General Fund Revenues</b>                      | <b>23,580,890</b>   |
| Town Operating                                    | (10,897,135)        |
| Town Share WPCF (I & I)                           | (251,228)           |
| Education   | <u>(12,184,096)</u> |
| <b>Taxation balance w/o special articles</b>      | <b>248,431</b>      |
| Special articles normally be funded with taxation | <u>(395,175)</u>    |
| <b>shortfall</b>                                  | <b>(146,744)</b>    |

**Special Articles normally funded through Taxation - Detail**

|  |                |         |
|--|----------------|---------|
| Operating Appropriation to OPEB                            | 50,000         |         |
| Operating Appropriation to Town Capital Stabilization      | 42,976         |         |
| Operating Appropriation to Town General Stabilization      | 64,465         |         |
| 50% Kearsarge Lease - 48.5 % to GMRSD Stabilization        | 39,890         |         |
| 50% Kearsarge Lease - 51.5 % to Town Capital Stabilization | 42,357         |         |
| 50% Kearsarge Lease - 51.5 % to Town Capital Stabilization | 42,357         | 282,045 |
| Assessors Utility Valuation                                | 13,130         |         |
| DPW Discretionary  | 100,000        |         |
|  | <b>395,175</b> |         |

**Special Articles requests normally funded through Reserves**

|  |                |
|--|----------------|
| Unsafe/Unhealth Buildings                        | 25,000         |
| Unexpected Engineering Expenses                  | 25,000         |
| Unexpected Project Shortfalls                    | 25,000         |
| Building Assessment and Capital Plan             | 50,000         |
| 500 Ave A Phase II Environmental Study           | 32,500         |
| Hillcrest Façade                                 | 55,000         |
| Sheffield Façade                                 | 45,000         |
| Sheffield Complex Roof                           | 55,000         |
| Sheffield Fire Alarm Upgrade                     | 90,000         |
| Turners Falls Tennis Courts (Mont share)         | 56,511         |
| DPW 6 wheel dump truck/ lease at \$55k x 5 Years | 250,000        |
|  | <b>709,011</b> |



# Board of Selectmen Town of Montague

1 Avenue A  
Turners Falls, MA 01376

(413) 863-3200 xt. 108  
FAX: (413) 863-3231

March 8, 2021

Mr. Mark Southard  
Community Development Manager  
Department of Housing and Community Development  
Commonwealth of Massachusetts  
100 Cambridge Street – Suite 300  
Boston, MA 02114

RE: FY2020 Montague  
CDBG: CDF-G-2020-MONTAGUE 00896  
Response to Special Conditions

Dear Mr. Southard:

The Town of Montague hereby certifies to the Department of Housing and Community Development that the town and its administering agency, Franklin County Regional Housing and Redevelopment Authority, will respond to the Additional Special Conditions as follows:

1. There are no program income funds currently being held by either the Town of Montague or the Franklin County Regional Housing Authority. The Town of Montague does hereby certify, however, that any Program Income Funds received will be added to the Housing Rehabilitation line item budget through a Grant Budget Amendment as requested.
2. Enclosed please find a copy of the revised Anti-Speculation and Recapture Plan which includes details on the recapture provisions for "Investor Owners."
3. The Town of Montague hereby certifies to the Department of Housing and Community Development that the town and its administering agency (Franklin County Regional Housing and Redevelopment Authority) Program Director and Rehabilitation Specialist will consult regularly with local Weatherization Assistance Program(s) (WAP) regarding opportunities for cross referral, cost-sharing, and scheduling of projects in order to accomplish energy efficiency and program/property owner cost savings through communication and coordination of rehabilitation and weatherization services. Please see attached Weatherization Authorization and Energy Pamphlet.

The Town of Montague is an equal opportunity provider and employer



Mr. Mark Southard, Community Development Manager  
Department of Housing and Community Development  
March 8, 2021  
Page 2

If you have any questions, please do not hesitate to contact Brian McHugh, Director of Community Development at the Franklin County Regional Housing and Redevelopment Authority, the Town of Montague's Administering Agency, at (413) 863-9781 ext. 125 or at [bmchugh@frchra.org](mailto:bmchugh@frchra.org).

Sincerely,

TOWN OF MONTAGUE

Richard Kuklewicz, Chairman  
Board of Selectmen

Cc: Brian McHugh, Franklin County Regional and Redevelopment Authority  
Golnaz Tabatabai, Program Representative, Department of Housing and Community Development

The Town of Montague is an equal opportunity provider and employer

3/1  
9

## WendyB-Montague Board of Selectmen

---

**From:** Sanon, Elsie (ART) <elsie.sanon@state.ma.us>  
**Sent:** Wednesday, February 17, 2021 1:17 PM  
**To:** WendyB-Montague Board of Selectmen  
**Subject:** LCC Grant  
**Attachments:** Contractor Signatory Form.pdf; Local Cultural Council Scope of Services - Municipal Contract.pdf; Montague Contract.pdf; Montague Letter.pdf

Dear Mr. Kuklewicz:

We are pleased to inform you that your LCC grant has been approved.

Attached you will find a standard contract, scope of services and a Contractor Signatory Listing form.

Please review these documents carefully and return the required paperwork to Elsie Sanon, Fiscal Officer at MCC as soon as possible. This will help us process your award as quickly as possible.

**You will need to print the attached documents, sign the appropriate forms are needed to proceed with payment and mail them to my attention at the Mass Cultural.** The contract should be signed (wet ink signature) with a completed Signature Authorization form and returned via USPS to me by **March 15, 2021**.

Currently most staff are working remotely, and email is the best way to reach us with any questions or concerns. For questions about the contract and forms, please contact Elsie Sanon at 617-858-2702 or [elsie.sanon@art.state.ma.us](mailto:elsie.sanon@art.state.ma.us). For questions about the LCC grant, please contact your LCC program officer.

Please do not hesitate to contact us with any questions.

Elsie Sanon  
Fiscal Officer  
**Mass Cultural Council**

617.858.2702  
10 St. James Avenue, 3rd Fl.  
Boston, MA 02116

### **Power of culture**

*Under Massachusetts Law (M.G.L. Chapter 66), any email created or received by an employee of Mass Cultural Council (including attachments and forwarded message threads) is considered a public record subject to public inspection, examination, and copying unless protected by a statutory exemption.*



February 10, 2021

Richard Kuklewicz, Board of Selectmen Chair  
Town of Montague  
Town Hall  
1 Avenue A  
Turners Falls MA 01376-1128

(via email)

Dear Mr. Kuklewicz:

**State Comptroller regulations require State Agencies to have a signed contract and signature authorization form on file for all transfers of funds from state to local accounts unless the agency is statutorily released from this mandate, which the Mass Cultural Council is not.**

The contract includes: a signature page with the amount of the allocation (\$6,600), dates of service (July 1, 2020 to June 30, 2021), and a place to sign. You only need to sign it, include an email address, and make any corrections if needed. The second page is the scope of services that defines how the funds are to be expended following Mass Cultural Council regulations. Lastly, the Signature Authorization page is a required form for all contracts with state agencies that clearly identifies the person or persons authorized to sign contracts for a vendor, in this case your municipality.

The contract should be signed with a completed Signature Authorization form and returned via USPS to me by March 15, 2021.

I will not be able to transfer the Local Cultural Council allocation until I have a completed contract package from your municipality. If you or any of your staff have any questions, please feel free to contact me at 617/858-2702 or by email at [Elsie.Sanon@art.state.ma.us](mailto:Elsie.Sanon@art.state.ma.us).

Thank you very much.

Attached is a contract and scope of services for the Town of Montague that covers the transfer of FY2021 Local Cultural Council funds from the Mass Cultural Council to your local cultural council account for the Montague Cultural Council.

Sincerely,

Elsie Sanon  
Fiscal Officer

Attachments

## COMMONWEALTH OF MASSACHUSETTS ~ STANDARD CONTRACT FORM



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the Standard Contract Form Instructions and Contractor Certifications, the Commonwealth Terms and Conditions for Human and Social Services or the Commonwealth IT Terms and Conditions which are incorporated by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <https://www.mass.gov/lists/osd-forms>. Forms are also posted at OSD Forms: <https://www.mass.gov/lists/osd-forms>.

|   |                            |   |                            |
|---|----------------------------|---|----------------------------|
| <b>CONTRACTOR LEGAL NAME:</b> Town of Montague<br>(and d/b/a): Town Hall<br>1 Avenue A<br>Turners Falls MA 01376-1128   |                            | <b>COMMONWEALTH DEPARTMENT NAME:</b> Mass Cultural Council<br><b>MMARS Department Code:</b> ART   |                            |
| <b>Legal Address: (W-9, W-4):</b>   |                            | <b>Business Mailing Address:</b> 10 St. James Ave 3rd Floor, Boston, MA 02116   |                            |
| <b>Contract Manager:</b> Richard Kuklewicz, Board   | <b>Phone:</b> 413/863-3200 | <b>Billing Address (if different):</b>  |                            |
| <b>E-Mail:</b> selectscity@montague-ma.gov  | <b>Fax:</b> 413/863-3231   | <b>Contract Manager:</b> Elsie Sanon  | <b>Phone:</b> 978/858-2702 |
| <b>Contractor Vendor Code:</b> VC6000191893   |                            | <b>E-Mail:</b> Elsie.Sanon@art.state.ma.us  | <b>Fax:</b> 978/574-7305   |
| <b>Vendor Code Address ID (e.g. "AD001"):</b> AD ____<br>(Note: The Address ID must be set up for EFT payments.)  |                            | <b>MMARS Doc ID(s):</b>   |                            |
| <b>RFR/Procurement or Other ID Number:</b>  |                            |   |                            |
| <b><u>X</u> NEW CONTRACT</b><br><b>PROCUREMENT OR EXCEPTION TYPE: (Check one option only)</b><br><input type="checkbox"/> <b>Statewide Contract</b> (OSD or an OSD-designated Department)<br><input type="checkbox"/> <b>Collective Purchase</b> (Attach OSD approval, scope, budget)<br><input checked="" type="checkbox"/> <b>Department Procurement</b> (includes all Grants - <u>815 CMR 2.00</u> ) (Solicitation Notice or RFR, and Response or other procurement supporting documentation)<br><input type="checkbox"/> <b>Emergency Contract</b> (Attach justification for emergency, scope, budget)<br><input type="checkbox"/> <b>Contract Employee</b> (Attach Employment Status Form, scope, budget)<br><input type="checkbox"/> <b>Other Procurement Exception</b> (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)  |                            | <b><u>      </u> CONTRACT AMENDMENT</b><br>Enter Current Contract End Date <u>Prior</u> to Amendment: ____, 20__.<br>Enter Amendment Amount: \$ _____. (or "no change")<br><b>AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)</b><br><input type="checkbox"/> <b>Amendment to Date, Scope or Budget</b> (Attach updated scope and budget)<br><input type="checkbox"/> <b>Interim Contract</b> (Attach justification for Interim Contract and updated scope/budget)<br><input type="checkbox"/> <b>Contract Employee</b> (Attach any updates to scope or budget)<br><input type="checkbox"/> <b>Other Procurement Exception</b> (Attach authorizing language/justification and updated scope and budget) |                            |
| The Standard Contract Form Instructions and Contractor Certifications and the following Commonwealth Terms and Conditions document are incorporated by reference into this Contract and are legally binding: (Check ONE option): <u>X</u> <u>Commonwealth Terms and Conditions</u> <u>      </u> <u>Commonwealth Terms and Conditions For Human and Social Services</u> <u>      </u> <u>Commonwealth IT Terms and Conditions</u>   |                            |   |                            |
| <b>COMPENSATION:</b> (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under <u>815 CMR 9.00</u> .<br><input type="checkbox"/> <b>Rate Contract.</b> (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)<br><input checked="" type="checkbox"/> <b>Maximum Obligation Contract.</b> Enter total maximum obligation for total duration of this contract (or <u>new</u> total if Contract is being amended). \$ <u>6,600</u>   |                            |   |                            |
| <b>PROMPT PAYMENT DISCOUNTS (PPD):</b> Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting <b>accelerated</b> payments must identify a PPD as follows: Payment issued within 10 days __% PPD; Payment issued within 15 days __% PPD; Payment issued within 20 days __% PPD; Payment issued within 30 days __% PPD. If PPD percentages are left blank, identify reason: __agree to standard 45 day cycle __ statutory/legal or Ready Payments ( <u>M.G.L. c. 29, § 23A</u> ); __ only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)   |                            |   |                            |
| <b>BRIEF DESCRIPTION OF CONTRACT PERFORMANCE OR REASON FOR AMENDMENT:</b> (Enter the Contract title, purpose, fiscal year(s) and a detailed description of the scope of performance or what is being amended for a Contract Amendment. Attach all supporting documentation and justifications.)<br><b>Local Cultural Council Allocation for the Montague Cultural Council</b>   |                            |   |                            |
| <b>ANTICIPATED START DATE:</b> (Complete ONE option only) The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations:<br><input type="checkbox"/> 1. may be incurred as of the Effective Date (latest signature date below) and <u>no</u> obligations have been incurred <u>prior</u> to the Effective Date.<br><input type="checkbox"/> 2. may be incurred as of ____, 20__, a date <u>LATER</u> than the Effective Date below and <u>no</u> obligations have been incurred <u>prior</u> to the Effective Date.<br><input checked="" type="checkbox"/> 3. were incurred as of <u>July 1, 2020</u> , a date <u>PRIOR</u> to the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.   |                            |   |                            |
| <b>CONTRACT END DATE:</b> Contract performance shall terminate as of <u>June 30 2021</u> , with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.   |                            |   |                            |
| <b>CERTIFICATIONS:</b> Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in <u>801 CMR 21.07</u> , incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract. |                            |   |                            |
| <b>AUTHORIZING SIGNATURE FOR THE CONTRACTOR:</b><br>X: _____ Date: <u>3/8/21</u><br>(Signature and Date Must Be Handwritten At Time of Signature)<br>Print Name: <u>Richard Kuklewicz</u><br>Print Title: <u>Chair, Selectboard</u>   |                            | <b>AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:</b><br>X: _____ Date: _____<br>(Signature and Date Must Be Handwritten At Time of Signature)<br>Print Name: <u>David T. Slatery</u><br>Print Title: <u>Deputy Director</u>   |                            |

COMMONWEALTH OF MASSACHUSETTS  
CONTRACTOR AUTHORIZED SIGNATORY LISTING

Issued May  
2004



CONTRACTOR LEGAL NAME :  
CONTRACTOR VENDOR/CUSTOMER CODE:

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

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

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

| AUTHORIZED SIGNATORY NAME | TITLE              |
|---------------------------|--------------------|
| Richard Kuklewicz         | Chair, Selectboard |
|                           |                    |
|                           |                    |
|                           |                    |
|                           |                    |

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

Signature

Date: 3/8/2021

Title: Chair, Selectboard Telephone: 413-863-3200 xt. 108

Fax: 413-863-3231 Email: selectscity@montague-ma.gov

[Listing can not be accepted without all of this information completed.]

A copy of this listing must be attached to the "record copy" of a contract filed with the department.

### **Scope of Services/Budget**

The allocated amount or maximum obligation for the contracted city or town will be deposited in the local account for the local or regional cultural council, provided that the city or town:

- Maintain a revolving account for the local or regional cultural council as required by Massachusetts General Law, Chapter 10, Section 58
- Report on said fund annually by completing the Massachusetts Cultural Council's Local Cultural Council Account Form

The local or regional cultural council will expend the funds following the procedures outlined in Massachusetts Cultural Council guidelines and regulations.



# Board of Selectmen Town of Montague

1 Avenue A (413) 863-3200 xt. 108  
Turners Falls, MA 01376 FAX: (413) 863-3231

## Event Application for use of PESKEOMPSKUT PARK and MONTAGUE CENTER TOWN COMMON

Name of applicant Great Falls Farmers Market

Name of business/group sponsoring proposed event if applicable: \_\_\_\_\_

If applicable, number of years your organization has been running this event in Montague? 26

Address 132 Montague City Rd Turners Falls, MA 01376

Contact phone 7814927663

Contact email greatfallsfarmersmarketurners@gmail.com

FID \_\_\_\_\_

Dates of proposed event Every Weds, May -Oct Location: Peskeomskut

Hours 2-6 Set Up: 1-2 Clean Up: 6-6:15

Approximate number of people expected to attend 200/day

What provisions will be made regarding clean up of site? Each vendor is responsible for cleaning their own space.

Will the proposed event be:

- ☐ Musical
- ☐ Theatrical
- ☐ Exhibitions
- ☐ Amusements
- ☐ Wedding
- ☒ Other Farmers Market

Fully & specifically describe content of the proposed exhibition, show and/or amusements:

A farmers market, which includes multiple food vendors.

Fully & specifically describe the premises upon which the proposed event is to take place.

**The market takes place along the paved path, on the seventh street side.**

Use back of form or attach a map of the premises indicating parking area(s), entertainment area(s), vendor area(s), location & number of toilets, location & number of garbage receptacles, garbage storage area, camping area(s), and location of first aid/medical stations.

Will vendors be selling:

- ☒ merchandise
- ☒ food/beverage
- ☐ alcohol
- ☐ other services \_\_\_\_\_

Fully & specifically describe the extent to which the event and/or premises would affect public safety, health, or order. If serving alcohol, indicate separate serving area, approved server i.e. TIPS trained. (separate license required to serve alcohol)

**All vendors must apply with the Board of Health to sell at our market. We are following the governor's guidelines on COVID safety as per the request of the Board of Health.**

Describe the appropriate level and nature of security and/or traffic control that would be needed and what provisions have been made.

**N/A**

What provisions will be made regarding first aid and emergency medical care?

**N/A**

Are you also applying to place signs within Montague to advertise or give directions to your event? (See the Montague Building Inspector)

If so, at which locations? \_\_\_\_\_

**No.**

Attach a copy of your insurance policy or liability binder indicating a minimum policy of \$1 Million Individual/\$3 Million Group. **We are covered under town insurance.**

I attest that to my knowledge the information provided in this application is accurate and not misleading.



Signature of applicant

Date

Arnold J. L.  
2/23/2021

**License fees:**

Monday – Saturday = \$25.00 per day

Sunday = \$50.00

**BOARD OF SELECTMEN – Approval**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

**POLICE CHIEF - Approval / Comments**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

**BOARD OF HEALTH – Approval / Comments**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

Signature of applicant

Date

*Arnold S. L.*  
2/23/2021

License fees:

Monday - Saturday \$25.00 per day  
Sunday \$50.00

BOARD OF SELECTMEN Approval

POLICE CHIEF - Approval Comments

Date:

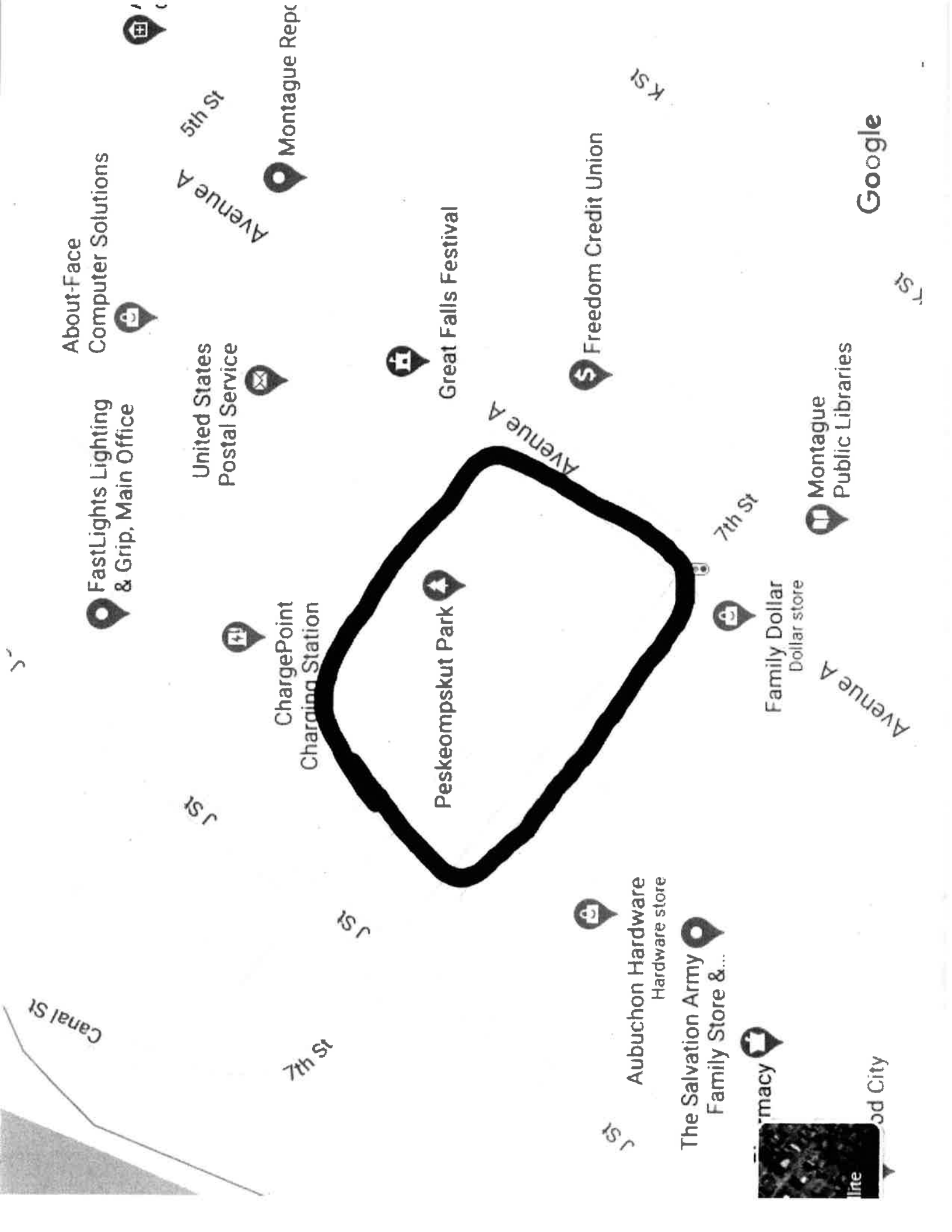
Date:

*[Signature]*

2-23-21

BOARD OF HEALTH Approval Comments

Date:



Google

K St

K St

Avenue A  
5th St

Montague Rep

Freedom Credit Union

Great Falls Festival

Montague  
Public Libraries

7th St

Avenue A

Family Dollar  
Dollar store

Peskeompskut Park

ChargePoint  
Charging Station

J St

J St

7th St

Canal St

Aubuchon Hardware  
Hardware store

The Salvation Army  
Family Store &...

Pharmacy

od City

Annabel Levine (Great Falls Farmers Market)

Event Application for **Use of Peskeomskut Park** on Wednesdays from 1pm to 6pm for the Great Falls Farmers Market. Market hours are 2-6pm, rain or shine, May through October.

**Town of Montague AWARD \$ 1150.40** from the Executive Office of Environmental Affairs for "products to low income individuals and families by investing in equipment that enables SNAP/ EBT payments."

This grant was written by Annie and is seeking Richard Kulewicz's signature. Funds will be directed to RiverCulture. Suzanne LoManto will order this equipment for use by the Great Falls Farmers Market.

Purchases:

|                  |                   |
|------------------|-------------------|
| iPad             | \$529.00          |
| Card Reader      | \$100.00          |
| Receipt Reader   | \$330.00          |
| TotilPay License | \$191.40          |
|                  | <b>\$1,150.40</b> |

## ATTACHMENT A - SCOPE OF SERVICES AND ADDITIONAL TERMS AND CONDITIONS

**INSTRUCTIONS:** In order to ensure that the Department and the Contractor have a clear understanding of their respective responsibilities and performance expectations, the Following attachment shall contain a specific detailed description of all obligations, responsibilities and additional terms and conditions between the Contractor and the Department which do not modify the Contract boilerplate language. *Attach as many additional pages as necessary.* {See INSTRUCTIONS sheet for more information and suggested provisions to include in ATTACHMENT A.}

The Executive Office of Energy and Environmental Affairs (EEA) and **Town of Montague (“the awardee”)** hereby contract for the **awardee to expand the availability of Great Falls Farmers Market products to low income individuals and families by investing in equipment that enables SNAP/EBT payments to be directly made.** Using funds awarded through this grant program, the awardee will complete the tasks outlined below and deliver outputs of the project or purchase to EEA. Upon execution of the contract, the awardee can begin the tasks outlined in this scope of services. Only items and services listed in this scope are eligible for reimbursement by EEA.

This project will run from the effective date of this contract through **June 30, 2021.**

### Process Summary:

The awardee will conduct the following tasks and submit evidence of completion to EEA:

- **March – April 2021** Purchase EBT/SNAP equipment to better serve low income individuals and families.
- **Final grant reporting by June 30, 2021.**

| Budget and Scope |                  |                   |
|------------------|------------------|-------------------|
| Quantity         | Description      | Total             |
| 1                | iPad             | \$529.00          |
| 1                | Card Reader      | \$100.00          |
| 1                | Receipt Printer  | \$330.00          |
| 1                | TotilPay license | \$191.40          |
| <b>Total</b>     |                  | <b>\$1,150.40</b> |

### Reporting & Final Deliverables:

To help EEA stay current on work being conducted over the course of the project, it is expected that the awardee will submit a brief monthly progress report describing:

- Significant activities that have occurred to show progress toward project tasks and deliverables
- Whether a change in schedule or scope of work is anticipated
- Whether costs are anticipated to be overrun or underrun
- If additional assistance from EEA or partners is needed
- Invoices for work completed to date
- Any other project related information that the awardee would like to share with EEA

The grant awardee is also required to submit a final report that details the final product of the project and includes project photos and other relevant information that proves completion of the project.

### Reimbursement

- Work done prior to the project start date (the date issued and signed by the Commonwealth’s Department Authorized Signatory) shall NOT be reimbursed.
- Taxes are not eligible for reimbursement.
- No funds will be granted for work performed after **June 30, 2021.** Requests for reimbursement will NOT be accepted after **July 31, 2021.**

- Once tasks are completed and deliverables have been submitted to, reviewed and approved by EEA, the contractor must submit a package containing the following items:
  - A letter from the contractor with the contractor's authorized signatory requesting reimbursement.
  - All relevant invoices and proof of payment of the invoices. Invoices must itemize costs consistent with the agreed upon scope of work. Invoices must demonstrate sufficient information for EEA to determine that the services were performed and/or products were received, and that the invoiced items meet all contractual performance requirements.

**ATTACHMENT B - BUDGET AND APPROVED EXPENDITURES**

{The Department and Contractor may complete this format or attach an approved alternative Budget format or invoice.}

Items identified below which are not part of the Contract should be left blank.

Attach as many additional copies of this format as necessary, Maximum obligation should appear as last entry.

| <b>Contract Expenditures</b> | <b>Unit Rate<br/>(per unit,<br/>hour, day)</b> | <b>Number of<br/>Units</b> | <b>Other Fees or<br/>Charges<br/>(specify)</b> | <b>TOTAL</b> |
|------------------------------|--|----------------------------|--|--------------|
| State FY2021                 |  |                            |  | \$1,150.40   |
| State FY2022                 |  |                            |  | \$0          |
|                              |  |                            |  |              |
| SUBTOTAL (this page)         |  |                            |  | \$1,150.40   |

**MAXIMUM OBLIGATION****\$1,150.40**

Page 1 of 1 Budget pages

Attachment B is subject to any restrictions or additional provisions outlined in Attachment A

**COMMONWEALTH OF MASSACHUSETTS  
CONTRACTOR AUTHORIZED SIGNATORY LISTING**

Issued May 2004



**CONTRACTOR LEGAL NAME :** Town of Montague  
**CONTRACTOR VENDOR/CUSTOMER CODE:** VC6000191893

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

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

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

| <b>AUTHORIZED SIGNATORY NAME</b> | <b>TITLE</b>                 |
|----------------------------------|------------------------------|
| Richard Kuklewicz                | Chair, Montague Select Board |
|                                  |                              |
|                                  |                              |
|                                  |                              |
|                                  |                              |

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

\_\_\_\_\_  
Signature

Date:

Title: Chair, Montague Select Board

Telephone: (413) 863-3200 Ext. 108

Fax: (413) 863-3231

Email:selectscty@montague-ma.gov

[Listing can not be accepted without all of this information completed.]

A copy of this listing must be attached to the "record copy" of a contract filed with the department.



**COMMONWEALTH OF MASSACHUSETTS  
CONTRACTOR AUTHORIZED SIGNATORY LISTING**

Issued May 2004



**CONTRACTOR LEGAL NAME :** Town of Montague  
**CONTRACTOR VENDOR/CUSTOMER CODE:**

---

**PROOF OF AUTHENTICATION OF SIGNATURE**

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

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

Signatory's full legal name (print or type): Richard J. Kuklewicz  
Title: Chair, Selectboard

**X** \_\_\_\_\_

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

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

I, \_\_\_\_\_ (NOTARY) as a notary public certify that I witnessed  
the signature of the aforementioned signatory above and I verified the individual's identity on this date:

\_\_\_\_\_, 20 \_\_\_\_.

My commission expires on:

**AFFIX NOTARY SEAL**

I, \_\_\_\_\_ (CORPORATE CLERK) certify that I witnessed the  
signature of the aforementioned signatory above, that I verified the individual's identity and confirm the individual's  
authority as an authorized signatory for the Contractor on this date:

\_\_\_\_\_, 20 \_\_\_\_.

**AFFIX CORPORATE SEAL**

# COMMONWEALTH OF MASSACHUSETTS ~ STANDARD CONTRACT FORM



This form is jointly issued and published by the Office of the Comptroller (CTR), the Executive Office for Administration and Finance (ANF), and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the Standard Contract Form Instructions and Contractor Certifications, the Commonwealth Terms and Conditions for Human and Social Services or the Commonwealth IT Terms and Conditions which are incorporated by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access published forms at CTR Forms: <https://www.macomptroller.org/forms>. Forms are also posted at OSD Forms: <https://www.mass.gov/lists/osd-forms>.

|   |                              |   |                            |
|---|------------------------------|---|----------------------------|
| <b>CONTRACTOR LEGAL NAME:</b> Town of Montague<br>(and d/b/a):  |                              | <b>COMMONWEALTH DEPARTMENT NAME:</b><br>MMARS Department Code: ENV              |                            |
| <b>Legal Address:</b> (W-9, W-4): 1 Avenue A, Turners Falls, MA 01376   |                              | <b>Business Mailing Address:</b> 100 Cambridge St., Suite 900, Boston, MA 02108 |                            |
| <b>Contract Manager:</b> Suzanne LoManto  | <b>Phone:</b> (781) 492-7663 | <b>Billing Address (if different):</b>  |                            |
| <b>E-Mail:</b> riverculture@montague-ma.gov   | <b>Fax:</b>                  | <b>Contract Manager:</b> Vallery Cardoso  | <b>Phone:</b> 857-443-6266 |
| <b>Contractor Vendor Code:</b> VC   |                              | <b>E-Mail:</b> vallery.b.cardoso@mass.gov                                       | <b>Fax:</b>                |
| <b>Vendor Code Address ID (e.g. "AD001"):</b> AD__<br>(Note: The Address ID must be set up for EFT payments.) |                              | <b>MMARS Doc ID(s):</b>   |                            |
|   |                              | <b>RFR/Procurement or Other ID Number:</b> ENV 21 FRF 01                        |                            |

|   |   |
|---|---|
| <p style="text-align: center;"><u><b>X</b></u> <b>NEW CONTRACT</b></p> <p><b>PROCUREMENT OR EXCEPTION TYPE: (Check one option only)</b></p> <p><input type="checkbox"/> <b>Statewide Contract</b> (OSD or an OSD-designated Department)</p> <p><input type="checkbox"/> <b>Collective Purchase</b> (Attach OSD approval, scope, budget)</p> <p><input checked="" type="checkbox"/> <b>Department Procurement</b> (includes all Grants - <u>815 CMR 2.00</u>) (Solicitation Notice or RFR, and Response or other procurement supporting documentation)</p> <p><input type="checkbox"/> <b>Emergency Contract</b> (Attach justification for emergency, scope, budget)</p> <p><input type="checkbox"/> <b>Contract Employee</b> (Attach Employment Status Form, scope, budget)</p> <p><input type="checkbox"/> <b>Other Procurement Exception</b> (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope and budget)</p> | <p style="text-align: center;"><input type="checkbox"/> <b>CONTRACT AMENDMENT</b></p> <p>Enter Current Contract End Date <u>Prior</u> to Amendment: ____, 20__.</p> <p>Enter Amendment Amount: \$ _____. (or "no change")</p> <p><b>AMENDMENT TYPE: (Check one option only. Attach details of amendment changes.)</b></p> <p><input type="checkbox"/> <b>Amendment to Date, Scope or Budget</b> (Attach updated scope and budget)</p> <p><input type="checkbox"/> <b>Interim Contract</b> (Attach justification for Interim Contract and updated scope/budget)</p> <p><input type="checkbox"/> <b>Contract Employee</b> (Attach any updates to scope or budget)</p> <p><input type="checkbox"/> <b>Other Procurement Exception</b> (Attach authorizing language/justification and updated scope and budget)</p> |
|---|---|

The Standard Contract Form Instructions and Contractor Certifications and the following Commonwealth Terms and Conditions document are incorporated by reference into this Contract and are legally binding: (Check ONE option): **X** Commonwealth Terms and Conditions ☐ Commonwealth Terms and Conditions For Human and Social Services ☐ Commonwealth IT Terms and Conditions

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

☐ **Rate Contract.** (No Maximum Obligation) Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)

☒ **Maximum Obligation Contract.** Enter total maximum obligation for total duration of this contract (or new total if Contract is being amended). \$1,150.40.

**PROMPT PAYMENT DISCOUNTS (PPD):** Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days \_\_% PPD; Payment issued within 15 days \_\_% PPD; Payment issued within 20 days \_\_% PPD; Payment issued within 30 days \_\_% PPD. If PPD percentages are left blank, identify reason: **X** agree to standard 45 day cycle ☐ statutory/legal or Ready Payments (M.G.L. c. 29, § 23A); ☐ only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)

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

Awardee will expand the availability of Great Falls Farmers Market products to low income individuals and families by investing in equipment that enables SNAP/EBT payments to be directly made.

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

**X** 1. may be incurred as of the Effective Date (latest signature date below) and no obligations have been incurred prior to the Effective Date.

☐ 2. may be incurred as of \_\_\_\_, 20\_\_, a date LATER than the Effective Date below and no obligations have been incurred prior to the Effective Date.

☐ 3. were incurred as of \_\_\_\_, 20\_\_, a date PRIOR to the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.

**CONTRACT END DATE:** Contract performance shall terminate as of June 30, 2021, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.

**CERTIFICATIONS:** Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.

|   |  |
|---|--|
| <p><b>AUTHORIZING SIGNATURE FOR THE CONTRACTOR:</b></p> <p>X: _____ Date: _____<br/>(Signature and Date Must Be Handwritten At Time of Signature)</p> <p>Print Name: <u>Richard Kuklewicz</u></p> <p>Print Title: <u>Chair, Selectboard</u></p> | <p><b>AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:</b></p> <p>X: _____ Date: _____<br/>(Signature and Date Must Be Handwritten At Time of Signature)</p> <p>Print Name: _____</p> <p>Print Title: _____</p> |
|---|--|

11

**TOWN OF MONTAGUE  
APPLICATION FOR AN ENTERTAINMENT LICENSE  
SPECIAL AND REGULAR**

PURSUANT TO CHAPTER 140, SECTION 183-A (SEVEN DAYS)  
CHAPTER 140, SECTION 181

Date of Application: February 22, 2021 Date Approved: \_\_\_\_\_ Fee: PAID in 2020

To the Local Licensing Authority:

The undersigned respectfully applies for an Entertainment License for daily operation, calendar year 2021 during the following hours:

@ 27 Center Street Montague

|           |       |     |               |                   |                     |
|-----------|-------|-----|---------------|-------------------|---------------------|
| Sunday    | from: | to: | Thursday      | from:             | to:                 |
| Monday    | from: | to: | Friday        | from:             | to:                 |
| Tuesday   | from: | to: | Saturday      | from: <u>3:00</u> | to: <u>11:00 pm</u> |
| Wednesday | from: | to: | Legal Holiday | from:             | to:                 |

This is a "special entertainment permit" request? DATE: August 21, 2021 x { yes { no

This is an annual renewal? { yes x { no

1. NAME OF APPLICANT: Cassandra Holden

TELEPHONE: 413.559.7752

2. D/B/A: Laudable Productions

3. PREMISES: 408 North Farms Road, Florence, MA. 01062 BUSINESS PHONE: 413.559.7752

4. The specific categories of licensed entertainment sought to be approved are:

\_\_\_\_\_ Radio \_\_\_\_\_ Jukebox \_\_\_\_\_ Video Jukebox \_\_\_\_\_ Pinball Machines  
\_\_\_\_\_ Wide Screen TV \_\_\_\_\_ Television/Cable \_\_\_\_\_ Pool Tables

Automatic Amusement Devices: Video Games, Number of : \_\_\_\_\_ Type: \_\_\_\_\_ Video or \_\_\_\_\_ Keno

\_\_\_\_\_ x Dancing by patrons size of floor \_\_\_\_\_  
\_\_\_\_\_ x Instrumental Music number of instruments & amplifiers: festival stage, audio, and lights  
\_\_\_\_\_ x Live Vocalists number of persons/type of show: 1500 - pending Health Dept. approval.  
\_\_\_\_\_ x Exhibition type: outdoor festival style concert  
\_\_\_\_\_ Trade Show type: immersive theatre  
\_\_\_\_\_ Athletic Event type: pop-up art installation  
\_\_\_\_\_ Play type \_\_\_\_\_  
\_\_\_\_\_ Readings of Poetry or other  
\_\_\_\_\_ New Years Eve "after midnight entertainment" \_\_\_\_\_

Indoors: Size of area to be used: \_\_\_\_\_ Allowed: \_\_\_\_\_ Number of People: \_\_\_\_\_ Allowed: \_\_\_\_\_

Outdoors: Size of area to be used: 12 acres Available Parking: detailed parking plan to be developed

Cassandra Holden  
Applicant Signature

\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

Board of Health

Date

Fire Department, Chief

Date

Police Department, Chief

Date

Board of Selectmen, Chairman

Date

Inspector of Buildings

Date

LAQDABLE  
PRODUCTIONS  
BARBES IN THE WOODS FESTIVAL  
AUGUST 17, 2019



On Feb 23, 2021, at 3:48 PM, WendyB-Montague Board of Selectmen <[selectscty@montague-ma.gov](mailto:selectscty@montague-ma.gov)> wrote:

Hi Cassandra:

I will be posting the zoom link on the Town's Calendar under March 1<sup>st</sup>. Please include a plot plan along with the address where the event is being held. I'm assuming it's on Kathy Lynch's property like the last time?

I will forward your application to the Board of Health, Building, Fire and Police for their signatures.

Please let me know if you need anything further.

Regards,  
Wendy

**From:** Daniel Wasiuk <[healthdir@montague-ma.gov](mailto:healthdir@montague-ma.gov)>  
**Subject:** RE: Telephone call  
**Date:** February 17, 2021 at 11:18:32 AM EST  
**To:** Cassandra Holden <[cassandra@laudable productions](mailto:cassandra@laudable productions)>

Hello Cassandra,

Thank you for our discussion today regarding Laudable Productions and an upcoming event this summer....Barbes in the Woods. Please accept a preliminary APPROVAL from the Montague Board of Health for this event. This is contingent upon Laudable Productions conforming to Sector-specific protocols and instituting appropriate mitigation measures against COVID-19. These will need to be fulfilled with current requirements near the time of the event.

Should you have any further question or concerns pertaining to the operation(s) of the event, please contact me directly. Be well.

Daniel Wasiuk  
Director of Public Health  
Montague Board of Health  
One Avenue A  
Turners Falls, MA 01376  
[healthdir@montague-ma.gov](mailto:healthdir@montague-ma.gov)  
413-863-3200 Ext. 205

12

## **WendyB-Montague Board of Selectmen**

---

**From:** Walter Ramsey - Montague Planner  
**Sent:** Thursday, March 04, 2021 10:25 AM  
**To:** WendyB-Montague Board of Selectmen; StevenE - Montague Town Administrator  
**Subject:** RE: 3/8 Agenda items- Planning  
**Attachments:** One%20Stop%20-%20Expression%20of%20Interest%20-%20FINAL%2001-15-21.docx; DRAFT%20CRMA%20FY22%20Master%20Application%20Form\_\_0.docx; Ferry Road Culvert Replacement Exhibit A.pdf; Stantec Bid Recommendation and NTP.pdf; Chestnut Loop Official Bid Results.pdf

Hi Wendy, here are the attachments for these three agenda items.

**From:** Walter Ramsey - Montague Planner  
**Sent:** Monday, March 01, 2021 12:03 PM  
**To:** WendyB-Montague Board of Selectmen <[selectscty@montague-ma.gov](mailto:selectscty@montague-ma.gov)>; Steve Ellis ([townadmin@montague-ma.gov](mailto:townadmin@montague-ma.gov)) <[townadmin@montague-ma.gov](mailto:townadmin@montague-ma.gov)>  
**Subject:** 3/8 Agenda items- Planning

Wendy,

Please place on 3/8 agenda:

- Issue Notice <sup>of award</sup> to Proceed to A.J. Virgilio Construction, Inc. for the Chestnut Loop Bridge Removal and Replacement Project in the amount of \$365,788.
- Authorize Grant funding request to the Municipal Culvert Assistance Program in the amount of \$16,280 for design and permitting of a culvert replacement on South Ferry Road
- Review and authorize "MA One Stop for Growth" Expression of Interest for proposed projects relating to the Canal District redevelopment, downtown parking management, master planning, CSO Separation, and light industrial expansion at Sandy lane

I'll provide you with the materials by Thursday AM.

Walter Ramsey, AICP | Montague Town Planner | (413) 863-3200 x 112 | [planner@montague-ma.gov](mailto:planner@montague-ma.gov)

12A

Stantec Consulting Services Inc.  
5 Dartmouth Drive Suite 200, Auburn NH 03032-3984



February 3, 2021  
File: 195113356

Mr. Walter Ramsey  
Town Planner  
Town of Montague  
1 Avenue A  
Turners Falls, MA 01376

**Re: Chestnut Hill Loop Road Bridge Removal and Replacement Project  
Contract Award Recommendation**

Dear Mr. Ramsey:

On Tuesday January 25, 2021, eight (8) bids were received for the subject project. The low bidder was A. J. Virgilio, with a Total Base Bid and Bid Add Alternate#1 Amount of \$380,883. It should be noted that two errors were identified with the submitted bids. The first error was found in the bid submitted by A.J. Virgilio where a unit price and a total unit price of \$34,000 for bid item#144, Class B Rock removal were entered. We have requested a clarification from A.J. Virgilio, and they have confirmed that their intent was bid a unit price of \$136/CY for a total unit price of \$34,000 to perform rock removal. Their letter and corrected bid form are provided in Attachment 'A'.

The second error was found in the bid submitted by New England Infrastructure Inc. where a total of \$10,500 for the Base Bid and Owners Bid Add Alternate was incorrectly entered when this value only represents the total of the Owner's Bid Add Alternate.

Both errors from A.J. Virgilio's bid and New England Infrastructure Inc.'s bid are identified in the Stantec Certified Bid Tabulation provided in Attachment 'B'. Additionally, A.J. Virgilio's Bid (as provided at the bid opening), and A.J. Virgilio's Bid Bond are provided in Attachment's 'C' and 'D', respectively.

Stantec has performed an evaluation of the low bidder, as part of our review. MassDOT has confirmed that A.J. Virgilio is pre-qualified for type of work and value involved in this project; see MassDOT letter in Attachment 'E'.

We have checked with several A.J. Virgilio's references, and have also enquired about A.J. Virgilio's financial background and recently completed projects of similar size and scope to the Chestnut Hill Road bridge replacement project. We have received favorable responses from the references that were both provided in bid package and that we were able to contact as part of the review of the lowest bidder.

In consideration of or review of the low bidder and our findings, we recommend that the Town award this project to A.J. Virgilio for their submitted base bid total price of \$365,788 and we



February 3, 2021  
Mr. Walter Ramsey, Town Planner  
Page 2 of 2

Reference: **Chestnut Hill Loop Road Bridge Removal and Replacement Project  
Contract Award Recommendation**

recommend the award of the Owners Bid Add Alt#1 in the amount of **\$15,095** if the Town has adequate available funding for this additional work.

Attached is a Notice of Award for signature, provided in Attachment 'F'. If the Town agrees with our determination, please sign and return this form to us. We will forward the document to the Contractor, and request bonds and insurance certificates for the project from the Contractor.

If you have any questions, or require any additional information, please feel free to contact us.

Respectfully Submitted,

**STANTEC CONSULTING SERVICES, INC.**

**Bryan Ruoff, PE**

Associate  
Stantec  
5 Dartmouth Drive Suite 200,  
Auburn NH 03032-3984  
Cell: (603) 854-9501

Attachments: Attachment 'A' – A.J. Virgilio Bid Intent Letter  
Attachment 'B' – Certified Bid Tabulation  
Attachment 'C' – A.J. Virgilio Bid  
Attachment 'D' – A.J. Virgilio Bid Bond  
Attachment 'E' – MassDOT Pre-Approval Letter  
Attachment 'F' – Notice of Award

c: Tom Bergeron, DPW Town of Montague  
Daniel Sund, MassDOT  
Rene LaBranche, Stantec (letter only)



SECTION 00420

NOTICE OF AWARD

To: A.J. Viriglio Construction, Inc.  
86 Summit Lock Rd.  
Westfield, MA 01085

PROJECT DESCRIPTION: CHESTNUT HILL LOOP ROAD BRIDGE REPLACEMENT

The OWNER has considered the Bid submitted by you for the above described Work in response to its Advertisement for Bids dated 1/26/2021, and Information for Bidders.

You are hereby notified that your Bid has been accepted for items in the amount of \$365,788.

You are required by the Information for Bidders to execute the Agreement and furnish the required CONTRACTOR's Performance Bond, Payment Bond and certificates of insurance within ten (10) days, excluding Saturdays, Sundays and legal holidays from the date of this Notice to you.

If you fail to execute said Agreement and to furnish said Bonds within ten (10) days from the date of this Notice, said OWNER will be entitled to consider all your rights arising out of the OWNER's acceptance of your Bid as abandoned and as a forfeiture of your Bid Security. The OWNER will be entitled to such other rights as may be granted by law.

You are required to return an acknowledged copy of this Notice of Award to the OWNER.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Board of Selectmen  
Town of Montague, Massachusetts

\_\_\_\_\_  
Richard Kuklewicz, Chairman

\_\_\_\_\_  
Michael Nelson, Vice Chairman

\_\_\_\_\_  
Christopher Boutwell, Clerk

**APPLICATION FORM**  
**CULVERT REPLACEMENT MUNICIPAL ASSISTANCE GRANT APPLICATION FORM**

FY22 RFR ID: DER 2021-01

(See Section 3.3.1 in the RFR for instructions on how to fill out the Application Form)

**1) APPLICANT INFORMATION**

i. **Funding Request:** \$ 16,280

ii. **Town:** Montague

iii. Applicant's Name:

iv. Email/Phone:

**2) CULVERT INFORMATION**

i. Road: South Ferry Rd.

ii. Stream: un-named tributary to Sawmill River

iii. Location:

iv. Does this crossing have multiple culverts?

☐ Yes

(Please provide more details under (4)(i)  
Project Background)

☒ No

v. Culvert Type: reinforced concrete pipe

vi. Length: 30'

Width: 24"

vii. Utilities within Right of Way and/or close proximity to the Culvert (check all that apply):

☐ Gas ☒ Electric ☐ Water ☐ Sewer ☐ Telecommunications ☐ Stormwater Infrastructure ☐ Other

**3) PROJECT SUMMARY**

i. **Brief Summary:** Provide a brief descriptive summary for the project (e.g. 4 sentences), including existing conditions, project benefits, and goals of the project.

**Replace undersized culvert that with a box culvert that meets Stream Crossing Standards. The culvert to be replaced routinely floods adjacent residences during high rainfall or thaw. The culvert connects a 1/3 square mile drainage area comprising over 12 acres of high quality wetlands to the Sawmill River, a Cold Water Fishery Resource designated by the Department of Fisheries and Wildlife.**

**4) DEMONSTRATED NEED**

PLEASE USE AS MUCH SPACE AS NEEDED. THE BOXES WILL EXPAND AS YOU FILL THEM.

i. **Project Background:** Describe the condition of the culvert and stream and any background information about the culvert. Consider the physical condition of the culvert, current risk of failure, maintenance and flooding history, erosion, environmental concerns such as impacts to fish and wildlife, and hazards to the community. If you have multiple culverts, please include the length and width of each structure. *Please use as much space as needed.*

The existing culvert conveys a perennial stream below South Ferry Road. The age of the existing culvert is unknown. The existing stream has a bankfull width of 4', but the culvert is only 2'. There is documented evidence of the culvert backing up during thawing events. The backup has caused multiple flooding incidents in the basement of the residential abutter at 29 South Ferry Road. The downstream side of culvert has developed scour from the velocity of water exiting the culvert. This is threatening the erosion of prime farmland soils on the downstream side. To remediate the situation, the town plans to install a 5'X5' concrete box culvert that will reduce the expected water depth upstream and reduce the expected downstream velocity.

The project area is mapped for Priority Habitat for multiple species that utilize the Sawmill River. The Culvert itself is less than 500 feet from the Sawmill River. The culvert connects a 1/3 square mile drainage area (primarily prime farmland soils and high quality wetlands to the Sawmill River.

# APPLICATION FORM

## CULVERT REPLACEMENT MUNICIPAL ASSISTANCE GRANT APPLICATION FORM

FY22 RFR ID: DER 2021-01

(See Section 3.3.1 in the RFR for instructions on how to fill out the Application Form)

ii. **Project Status:** If work has already begun on the proposed culvert replacement, please explain the scope of what has already been initiated and/or completed. List and briefly explain any plans, reports, or documents that have been created as part of the culvert replacement. Consider any field data collection, analyses, design, permitting, utility coordination, and/or construction. If work has not started please state that below. *For projects underway, all supporting documentation should be submitted with this application (e.g., reports, design plans, permits, opinion of probable costs, etc.).*

The project is still in the initial scoping phase. The town has developed an Opinion of Probable cost and a scope of work for design and permitting from a qualified engineer. The Franklin Regional Council of Governments is currently conducting a town-wide culvert assessment, however this is currently recognized by the Department of Public Works and Conservation Commission as the town's #1 priority culvert replacement project.

iii. **Financial Need:** Explain why your municipality needs funding from this grant opportunity to advance the proposed project. Describe other anticipated or secured funding sources such as Town funds or Chapter 90 funds that will support any portion of this project.

Montague is a rural community with limited capacity for capital planning. Montague does not have a town engineer to advance the engineering or permitting. The construction cost of this culvert (estimated to be \$145,000) represents 30% of Montague's annual Chapter 90 budget. Montague currently has 8 bridges that are closed for structural concerns. The town's overriding public works priority is to advance the repair or replacement of those bridges. However, The town also acknowledges that while we face a bridge crisis, we must continue to maintain/upgrade culverts as well. Without support from this grant program, culvert replacements like this, which will have benefit the environment, will struggle to compete with bridge repair and pavement management projects.

### 5) PROJECT DESCRIPTION

PLEASE USE AS MUCH SPACE AS NEEDED. THE BOXES WILL EXPAND AS YOU FILL THEM.

i. **Project Scope:** Please describe the proposed culvert replacement and the specific work to be covered by this funding (end date 6/30/22). Consider project tasks, personnel, deliverables, etc. As guidance, you may use, but are not limited to using, the topics listed on the *Proposed Work Checklist* with the purple header.

The Town will procure a qualified engineering vendor to conduct field data, design, and permitting. The Tasks are broken down in the attached Scope of Work. The tasks include, developing a base plan, hydraulic analysis, wetlands delineation, culver crossing plan, NOI/MESA permitting, construction specifications, opinion of cost, and several meetings with town officials and stakeholders.

# APPLICATION FORM

## CULVERT REPLACEMENT MUNICIPAL ASSISTANCE GRANT APPLICATION FORM

FY22 RFR ID: DER 2021-01

(See Section 3.3.1 in the RFR for instructions on how to fill out the Application Form)

ii. **Project Budget:** To the best of your ability, complete the table below, which incorporates project cost and funding needs by project activity. In the box at the bottom, provide a short but descriptive budget narrative. Refer to *RFR Section 3. Instructions for Application Submission, Evaluation Criteria, Project Budget* for additional guidance.

### Budget Overview:

| Project Phase         | Funding Requested from DER | Secured Funding<br>(list source in Budget Narrative) | Pending/<br>Remaining Funds Needed | Total Cost Estimate |
|-----------------------|----------------------------|--|------------------------------------|---------------------|
| Field Data Collection | \$5,000                    | \$0  |                                    | \$5,000             |
| Engineering & Design  | \$6,100                    | \$0  |                                    | \$6,100             |
| Permitting            | \$5,180                    | \$0  |                                    | \$5,180             |
| Construction          |                            | \$0  | \$145,000                          | \$145,000           |
| Other                 |                            |  |                                    |                     |
| Totals                | \$16,280                   | \$0  | \$145,000                          | \$161,280           |

**Budget Narrative:** Briefly explain the project budget and how cost estimates were determined. Be sure to describe how DER funds will be used. Where possible, provide supporting documentation. List any additional sources of known funding for the culvert replacement and the amount. This includes anticipated sources/amount and funding in-hand.

The Town is seeking \$16,280 to cover field data collection, engineering, and permitting to replace 24" concrete pipe culvert with a 5'X5' concrete box culvert. The proposed budget and scope of work has been developed by SVE Associates, reputable engineering firm. The Town has worked with SVE to develop a preliminary opinion of probable cost for a culvert that meets Stream Crossing Standards, which estimates a construction budget of \$145,000. These documents are attached.

☒ Please check if Supporting Documentation is attached (e.g., budget details, Opinion of Probable Costs, design or construction bids, etc.)

iii. **Project Timeline:** Describe the estimated timeline for the overall culvert replacement project *and* the timeline for proposed work to be covered by this funding (end date 6/30/22). Topics listed on the *Proposed Work Checklist* with the purple header may provide direction for the type of milestones or goals to be included in a timeline.

Field Data and collection will be completed by June 1, 2021. 25% design will be complete by August 1, 2021. Permitting Set will be complete and permits will be filed 10/1 2021. Permits will be obtained by 1/1/2022. This would conclude the scope of work under the grant.

The Town would intend to construct the facility in Summer 2022. A capital or chapter 90 appropriation for construction (\$145,000) would be sought in January 2022. The project would be bid winter 2022 for construction in June 2022.

# APPLICATION FORM

## CULVERT REPLACEMENT MUNICIPAL ASSISTANCE GRANT APPLICATION FORM

FY22 RFR ID: DER 2021-01

(See Section 3.3.1 in the RFR for instructions on how to fill out the Application Form)

### 6) PROJECT BENEFITS

PLEASE USE AS MUCH SPACE AS NEEDED. THE BOXES WILL EXPAND AS YOU FILL THEM.

- i. **Benefits to the Environment:** Briefly explain any known environmental information about the culvert site or possible environmental benefits for its replacement. Consider critical habitat, bank erosion, water quality, fish and wildlife species that inhabit the site/area, and problems for these organisms to pass through the culvert.

This project is within mapped Priority Habitat and will improve habitat for the aquatic creatures of the Sawmill River, which DFW has designated as a Coldwater Fisheries Resource. The Culvert is currently undersized and perched which presents a barrier to aquatic organisms.

Stream velocity caused by the undersized culvert is resulting in downstream erosion of prime farmland soils. This tributary and the Sawmill River run through some of the best farmland in the Commonwealth at this location. A properly sized culvert will mitigate future downstream erosion.

- ii. **Public Safety Benefits:** Describe how the culvert replacement will improve public safety and reduce vulnerability to changing climatic conditions, such as flooding and damage caused by more frequent, high intensity storms. Consider road closures, culvert failure, road washout, and access to municipal and emergency services. If available, include supporting documentation (e.g., photos, recent inspection reports, news stories, etc.) of the hazard and/or anticipated public safety benefits.

Flooding of adjacent residence. While this is located in a primarily agricultural area, there is an adjacent residence (29 South Ferry Road) that has on multiple occasions reported flooding in their basement linked directly to a backup of the culvert, especially during a major thaw event.

The backups risk damage and or failure of South Ferry Road, a town owned roadway. There are 4 residences and 3 farms that would be cut off from Fire and emergency Services in the event of a failure. There is an alternate route that would add approximately 6 minutes to emergency response time.

- iii. **Economic and Community Benefits:** Describe expected economic benefits to the community for the culvert replacement. Consider increased economic activity, enhanced recreation, cost savings through improved infrastructure resilience, and/or reduced maintenance cost.

This culvert is located in the heart of Montague Center's agricultural district. It is roughly 1/2 mile from the Montague BookMill, a popular tourist destination. It is located along the Franklin County Bikeway, a popular and heavily used regional bikeway. The culvert directly supports the functioning of at least 3 active farms in the location. A proper culvert will complement the pastoral landscape which has come to define the character of Montague Center.

Montague lacks an engineering budget to advance projects like this, so support from this program will be critical to making an improvement.

**APPLICATION FORM**  
**CULVERT REPLACEMENT MUNICIPAL ASSISTANCE GRANT APPLICATION FORM**

FY22 RFR ID: DER 2021-01

(See Section 3.3.1 in the RFR for instructions on how to fill out the Application Form)

**SIGNATURES**

**I HEREBY DECLARE THAT THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. BY SIGNING THIS APPLICATION, I CONFIRM MY INTENT FOR THE PROPOSED CULVERT REPLACEMENT TO MEET THE GOALS OF THE MA RIVER AND STREAM CROSSING STANDARDS.**

**Applicant Signature:**

**Position:**

**Date:**



By checking this box, you confirm that all supporting materials such as project plans, reports and/or documents are included with this application.

# PROPOSED WORK CHECKLIST CULVERT REPLACEMENT MUNICIPAL ASSISTANCE GRANT APPLICATION

FY22 RFR ID: DER 2021-01

(See Section 3.3.2 in the RFR for instructions on how to fill out the Application Checklist)

## PROJECT INFORMATION

Road Name: South Ferry Rd

Town: Montague

## FIELD DATA COLLECTION

### PROJECT STATUS

### TASK

Please indicate under Project Status if the Tasks listed below are "**Proposed**" to be completed under this grant application, currently "**In Progress**", "**Complete**", "**Not Started**" or if you have determined the Task "**Not Applicable**" to the project. Mark the appropriate column with an "**X**".

Proposed

In Progress

Complete

Not Started

Not Applicable

**X**

**X**

**X**

**X**

**X**

**X**

**X**

**X**

**Wetland Resources Delineation:** A wetland resource area delineated and flagged by a qualified person, including data plots.

**River Substrate Analysis:** An analysis of stream characteristics and substrate to be used as a reference for the replacement crossing design.

**Geotechnical Evaluation:** Geotechnical borings and substrate analysis for structural properties.

**Radial Site Survey:** A detailed survey of the crossing area, including elevations of the crossing inverts, road surface, road edge, site utilities, approximately 50-100ft radius around crossing location.

**Longitudinal Profile Survey:** A detailed survey of the stream profile several hundred feet upstream and downstream of the crossing locating stream features and elevations.

**Hydrologic Study:** A calculation of existing storm events using standard methods and watershed characteristics to determine runoff volumes, time of concentration, and peak discharge.

**Hydraulic Analysis:** Modeling of the existing crossing for water surface elevation, scour, and velocity to understand the hydraulic forces.

**Recommended Replacement Summary:** A detailed summary of structure types evaluated and recommended structure type for the project location. Considerations include site constraints, ease of construction, structure lifespan, potential for erosion and head-cutting, stream stability and risk of stream channel adjustment, benefits to stream habitat, storm flow conveyance, potential to affect property or infrastructure, and cost of replacement.

Enter additional tasks or notes here. Box will expand:



# PROPOSED WORK CHECKLIST

## CULVERT REPLACEMENT MUNICIPAL ASSISTANCE GRANT APPLICATION

FY22 RFR ID: DER 2021-01

(See Section 3.3.2 in the RFR for instructions on how to fill out the Application Checklist)

### DESIGN & ENGINEERING

| PROJECT STATUS                      |             |          |             |                | TASK   |
|-------------------------------------|-------------|----------|-------------|----------------|--|
| Proposed                            | In Progress | Complete | Not Started | Not Applicable |  |
| <input checked="" type="checkbox"/> |             |          |             |                | <b>Preliminary Design Plans:</b> Design regarding footprint, dimensions, site constraint considerations, and resource area impacts.  |
| <input checked="" type="checkbox"/> |             |          |             |                | <b>Hydraulic Design:</b> Model the proposed structure for water surface elevation, scour, sediment transport, and velocity to understand the hydraulic forces and design the stream bed so that flow conditions and hydraulic dynamics in the culvert are comparable to the upstream and downstream stream channel and meet MassDOT standards when applicable. |
| <input checked="" type="checkbox"/> |             |          |             |                | <b>Geotechnical Design:</b> Design the crossing within the limitations of the substrate characteristics and meet MassDOT standards when applicable.  |
| <input checked="" type="checkbox"/> |             |          |             |                | <b>Structural Design:</b> Design the crossing to meet the structural needs of the road type and meet MassDOT standards when applicable.  |
| <input checked="" type="checkbox"/> |             |          |             |                | <b>Construction Details:</b> Design the crossing with sufficient details for a contractor to construct the crossing and meet MassDOT standards when applicable.  |
| <input checked="" type="checkbox"/> |             |          |             |                | <b>Final Design Plans:</b> Complete all other design requirements for a P.E. to stamp the plans.   |

Enter additional tasks or notes here. Box will expand:

### PERMITTING

| PROJECT STATUS                      |             |          |             |                                     | TASK   |
|-------------------------------------|-------------|----------|-------------|-------------------------------------|--|
| Proposed                            | In Progress | Complete | Not Started | Not Applicable                      |  |
| <input checked="" type="checkbox"/> |             |          |             |                                     | <b>Permitting:</b> Including required local, state and federal environmental and permit reviews.   |
|                                     |             |          |             | <input checked="" type="checkbox"/> | <b>Chapter 85, Section 35 MassDOT Review:</b> Replacement structure spans over 10ft are subject to MassDOT design requirements and review in accordance with MGL Chapter 85, Section 35. For more information about the MassDOT requirements see:<br><a href="#">Municipal Small Bridge Program design requirements for new and full bridge replacement projects</a> (PDF 98 KB) |

### PROPOSED WORK CHECKLIST



# CULVERT REPLACEMENT MUNICIPAL ASSISTANCE GRANT APPLICATION

FY22RFR ID: DER 2021-01

(See Section 3.3.2 in the RFR for instructions on how to fill out the Application Checklist)

## PERMITTING (CONT.)

To the best of your ability list all of the permits needed as part of your proposed work.

|  |    |
|--|----|
| 1) Order of Conditions (Conservation Commission) | 5) |
| 2) Ma Endangered Species Act                     | 6) |
| 3)   | 7) |
| 4)   | 8) |

## CONSTRUCTION

### PROJECT STATUS

### TASK

Proposed  
In Progress  
Complete  
Not Started  
Not Applicable

Please indicate under Project Status if the Tasks listed below are "**Proposed**" to be completed under this grant application, currently "**In Progress**", "**Complete**", "**Not Started**" or if you have determined the Task "**Not Applicable**" to the project. Mark the appropriate column with an "**X**".

X

**Construction Bidding:** Final construction specifications and project plans have been stamped and construction

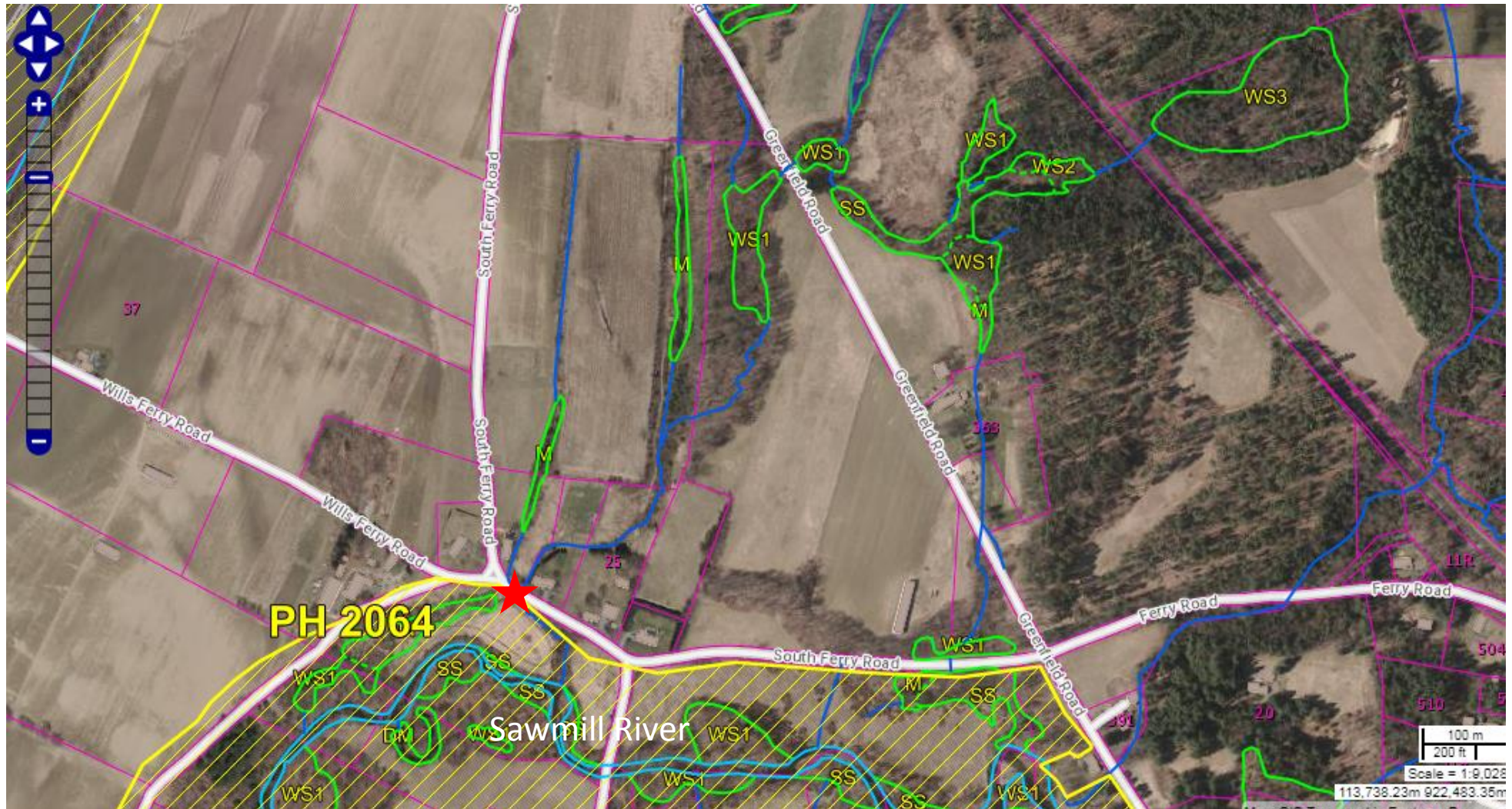
X

**Construction:** Explain the scope of construction in Section 5) i. on the Application Form.

**Project Meets the Massachusetts Stream Crossing Standards:**



# Ferry Road Culvert Replacement- Town of Montague





Inlet May 2020



Outlet May 2020





Pre-Flood January 2019



Inlet

Flood Jan 2019



Inlet



Inlet

# COMMUNITY ONE STOP FOR GROWTH – APPLICATION TEMPLATE

*This template is provided as a guide for reference purposes only. All proposals and applications must be submitted electronically through the program's online application portal.*

12c

## EXPRESSION OF INTEREST (Optional)

The purpose of this Expression of Interest is to give interested applicants an opportunity to articulate their overall goals, objectives, and preparedness as they relate to growth through community economic development. When completing the form, consider all of the funding requests that may be made in the full application. Forms submitted by the posted deadline will be reviewed by the state's economic development partner agencies, who can provide feedback and guidance for the best path forward for each project.

### SECTION 1. Prospective Applicant Information

1.1 Primary Location: (MONTAGUE)

|                          |         |                 |       |                     |               |
|--------------------------|---------|-----------------|-------|---------------------|---------------|
| Regional Planning Agency | (FRCOG) |                 |       | EOHED Region        | (auto-filled) |
| MassDOT Highway Division | (2)     | MVP Community   | (YES) | Gateway City        | (NO)          |
| Housing Choice Community | (NO)    | Green Community | (YES) | Rural or Small Town | (YES)         |

1.2 Organization Type: (Select from drop-down)

#### **Public Entity:**

- ☒ Municipality  
☐ Public Housing Authority  
☐ Redevelopment Authority or Similar Quasi-Governmental Agency  
☐ Other Public Entity. Specify: \_\_\_\_\_

#### **Non-Public Entity:**

- ☐ Community Development Corporation  
☐ Non-Profit Community Organization  
☐ For-Profit Corporation  
☐ Other Non-Public Entity. Specify: \_\_\_\_\_

1.3 Applicant Organization Name: Town of Montague

1.4 Applicant Organization Legal Address: \_\_\_\_\_

1.5 City/Town: \_\_\_\_\_ 1.6 State: MA 1.7 Zip Code: \_\_\_\_\_

1.8 CEO Name: \_\_\_\_\_ 1.9 CEO Title: \_\_\_\_\_

1.10 CEO Tel.: \_\_\_\_\_ 1.11 CEO Email: \_\_\_\_\_

1.12 Project Contact Name/Title (if different): \_\_\_\_\_

1.13 Contact Tel: \_\_\_\_\_ 1.14 Contact Email: \_\_\_\_\_

1.15 If applicable, list the name and contact for any additional partner organizations: \_\_\_\_\_  
(1,000 characters)



**SECTION 2: Applicant / Community Background** – In this section, the prospective applicant can outline the overall goals and economic development outlook for the organization and community. This information will provide insight to the review team about the applicant's priorities and achievement, as well as challenges and issues that applicant is trying to address.

- 2.1 Describe applicant's primary economic development goals, assets, and opportunities. Montague has established itself as a destination community in the Pioneer Valley. Montague boasts well defined villages, pristine open spaces, and an attractive downtown Turners Falls with riverfront recreation. These assets combined with affordable real estate and proximity to Amherst and Northampton are providing a framework for success. Montague enjoys an arts scene, a robust industrial park, and a steady stream of new residents to help offset otherwise stagnant population growth characteristic to rural areas. The largest village of Turners Falls has been on a steady revitalization course, but is limited by market forces that prevent the necessary infusion of capital to upgrade buildings and infrastructure. Once a mill town, Turners Falls' last paper mill closed 5 years ago and the largest employer, the Farren Care Center announced its closure this last year. Aside from the loss of jobs, the town is perpetually confronted with the challenge to revitalize properties vacated by legacy industries. This town of less than 8,500 is confronted with 5 mill sites in the Canal District and now the Farren Care Center, a hundred year old hospital building.
- 2.2 Describe the main challenges and/or obstacles to progress. Montague is one the most economically distressed communities in the most rural counties in the Commonwealth. A steady erosion of traditional manufacturing has left the town saddled with a backlog of aging infrastructure and major brownfield redevelopment challenges. These barriers to progress are exacerbated by a slow real estate economy and lack of capital compared to the rest of the state. As a result, Montague's modest housing growth over the last twenty years has been less than the county and state average. Montague's population is stagnant. The town has lost about 14 people over the previous 40 years and is projected to be flat through 2030, however the age makeup is changing dramatically. Youth and child bearing population is in steep decline and by 2030, the percentage of seniors aged 65+ will double to over 30% of the population. Meanwhile there are at least 6 bridges currently closed in Montague due to structural disrepair and our Sewer Plant is under EPA orders to rehabilitate and modernize Montague's sewer plant. However, Montague is a community with a growth mindset. Montague wants to attract industry and residents that will stabilize our villages and provide the services that people have come to expect, however strategic investment from the State will be needed to create a climate for stable housing and economic growth.
- 2.3 Describe any major community and economic development project(s) that the applicant has undertaken in the past 5 years. The Town has been working to revitalize the downtown Turners Falls Streetscape over the last 10 years by investing CDBG and other funds into 4 phases of streetscape upgrades. The Town has invested heavily in the arts and creative economy. The Town has revitalized the municipally-owned Shea Theater in the Turners Falls Canal District and expanded the town's RiverCulture program for developing the creative economy. The Town is currently implementing a Massworks grant to create a gateway to the Turners Falls Canal District that will improve pedestrian connections to the district and provide critical utilities to several mill sites slated for redevelopment. The town has developed a 7MW solar facility and recently approved a major expansion of the Turners Falls municipal airport in the Industrial Park.
- 2.4 If the community has completed any community economic development (including housing) best practices through the Community Compact Best Practices Program, specify which ones and describe the

# COMMUNITY ONE STOP FOR GROWTH – EXPRESSION OF INTEREST

outcome(s) of that process. (If none, enter "N/A".) \_\_\_\_\_

\_\_\_\_\_N/A\_\_\_\_\_

- 2.5 Indicate which, if any, of the following tools/strategies have been adopted by the community to promote economic development and growth. (Check all that apply or None. If unsure, check "Do not know".)

| X | Economic Development Tools / Strategies                          |
|---|--|
| X | Approved Master Plan   |
|   | Approved Urban Renewal Plan                                      |
| X | 43D Expedited Permitting District                                |
| X | Priority Development Site(s) Designation                         |
| X | Approved Tax Increment Financing District                        |
|   | Business Improvement District, Main Streets, or similar District |
| X | Federal Economic Development District                            |
| X | Designated Opportunity Zone(s)                                   |
| X | Community Compact Best Practices and/or Regionalization Project  |
| X | Complete Streets Prioritization Plan                             |
| X | Commercial zoning by-right                                       |
|   | Other. Specify:  |
|   | None   |
|   | Do Not Know  |

- 2.6 Indicate which, if any, of the following tools/strategies have been adopted by the community to promote housing development. (Check all that apply or None. If unsure, check "Do not know".)

| X | Housing Development Tools / Strategies   |
|---|--|
|   | Inclusionary Zoning with density bonus   |
|   | 40R Smart Growth or Starter Home District zoning                                 |
| X | Zoning that allows mixed-use development near transit and activities             |
| X | Zoning that allows multifamily development near transit and activities           |
| X | Zoning that allows duplexes in most residential districts                        |
| X | Zoning that allows Accessory Dwelling Units in most residential districts        |
| X | Zoning that requires no more than 1 parking space per unit for multifamily units |
|   | Majority of land use board members receive training on a regular basis           |
| X | Approved Housing Production Plan   |
|   | CERTIFIED Housing Production Plan  |
|   | Subsidized Housing Inventory (SHI) above 10%                                     |
|   | Subsidized Housing Inventory (SHI) increased by 2.5% in last 5 years             |
|   | Designated local funds (e.g. Affordable Housing Trust or CPA Funds)              |
| X | Donated municipal land for housing   |
|   | Local property tax relief programs for income eligible seniors (MGL c 59 S. 5)   |
|   | Plan to address homelessness of a high need group                                |

## COMMUNITY ONE STOP FOR GROWTH – EXPRESSION OF INTEREST

|  |   |
|--|---|
|  | Urban Center Housing Tax Increment Financing, Housing Development Incentive |
|  | Federal Choice Neighborhood   |
|  | HUD Fair Housing Assessment   |
|  | Other. Specify:   |
|  | None  |
|  | Do Not Know   |

**SECTION 3 (P): Priority Projects / Initiatives** - Describe up to five top priority projects or initiatives that the applicant intends to submit in a One-Stop application for grant consideration. Describe the projects, areas, and/or sites and indicate the types of funding sought, even if unsure about the specific sources. This section is meant to provide state reviewers with insight into the prospective projects.

### Project / Initiative One

- 3-P1.1 Name of Project/Initiative: Turners Falls Canal District Redevelopment
- 3-P1.2 Brief Description of Project/Initiative. Indicate if project is phased and progress made to date: Downtown Turners Falls has a district of 5 adjacent mill sites along the Connecticut River. It has been the focus of redevelopment efforts for several decades, with several false starts and limited success. The lack of access over the Power Canal, limited utilities, and deterioration of the mill sites has resulted in blight and disinvestment. The Town has done considerable planning efforts in the district and the Town has made recent progress: Montague is implementing a Massworks grant to establish a gateway to the district that features a replacement pedestrian bridge and critical utilities to two mill sites. With two mill redevelopment projects underway, the town is looking to advance the redevelopment potential of the 3 other mill sites (all municipally controlled).
- 3-P1.3 How does this project/initiative align with the economic development goals outlined above? The Turners Falls Canal district is the primary focus for economic development in Montague. The Town now owns 3 of the 5 mill sites and over \$5M has been invested into building stabilization, environmental assessments and cleanup for properties in the district. The state is investing \$2.3 into the Gateway Improvement Project for critical infrastructure upgrades. The EPA is investing \$1.6 into a cleanup of one of the sites the Town just completed a cleanup of another mill site. At least one mill site is proposed for redevelopment into in a cannabis cultivation facility.
- 3-P1.4 Describe how ready the applicant is to begin the implementation of this project. Indicate what activities need to be undertaken in the coming year to advance the project. There are several directions that the Town may take in developing the next steps. In our opinion the critical next steps are as follows: 1) Execute the Canal District Gateway Project currently funded by Mass works. This project is currently in design stage) 2) Implement partial demolition of the municipally owned Strathmore Mill Complex (design complete- estimated cost \$4.3M) 3) Restore/replace the 6<sup>th</sup> Street Bridge to the Railroad Salvage property. The town could also benefit from some strategic planning and or development assessment with support from the state.
- 3-P1.5 Based on the descriptions outlined in the RFP, which type(s) of funding would you like to explore for this project/initiative: *(Check all that apply)*



## ONE STOP FOR GROWTH – FY2022 – APPLICATION TEMPLATE

- |   |   |
|---|---|
| <input type="checkbox"/> Capacity Building                        | <input type="checkbox"/> Infrastructure (horizontal construction) |
| <input type="checkbox"/> Planning and Zoning                      | <input type="checkbox"/> Other: _____                             |
| <input checked="" type="checkbox"/> Site Preparation              | <input type="checkbox"/> Not sure                                 |
| <input checked="" type="checkbox"/> Predevelopment and Permitting |   |
| <input type="checkbox"/> Building (vertical construction)         |   |

3-P1.6 Would you like to add a second project?

☐ Yes ☐ No

### **Project / Initiative Two**

3-P2.1 Name of Project/Initiative: Combined Sewer Overflow (CSO) Separation and Repair

3-P2.2 Brief Description of Project/Initiative. Indicate if project is phased and progress made to date: \_\_\_\_\_  
WR to Discuss Project with CL 3/4 3PM

3-P2.3 How does this project/initiative align with the economic development goals outlined above? \_\_\_\_\_  
(1,000 characters)

3-P2.4 Describe how ready the applicant is to begin the implementation of this project. Indicate what activities need to be undertaken in the coming year to advance the project. \_\_\_\_\_  
Project has been scoped by the Water Pollution Control Facility. Engineering and construction funding will be needed

3-P2.5 Based on the descriptions outlined in the RFP, which type(s) of funding would you like to explore for this project/initiative: *(Check all that apply)*

- |  |  |
|--|--|
| <input type="checkbox"/> Capacity Building             | <input type="checkbox"/> Building (vertical construction)                    |
| <input type="checkbox"/> Planning and Zoning           | <input checked="" type="checkbox"/> Infrastructure (horizontal construction) |
| <input type="checkbox"/> Site Preparation              | <input type="checkbox"/> Other: _____  |
| <input type="checkbox"/> Predevelopment and Permitting | <input type="checkbox"/> Not sure  |

3-P2.6 Would you like to add a third project?

☐ Yes ☐ No

### **Project / Initiative Three**

3-P3.1 Name of Project/Initiative: Downtown Turners Falls Parking Management Study

3-P3.2 Brief Description of Project/Initiative. Indicate if project is phased and progress made to date: \_\_\_\_\_  
Montague would like to develop a parking management plan that recommends policies and strategies that maximize the use of existing downtown parking assets. Montague currently offers free, unrestricted parking on town-streets and municipal lots and has limited capacity to manage/enforce parking regulations. The vast majority of downtown housing units pre-date the

## COMMUNITY ONE STOP FOR GROWTH – EXPRESSION OF INTEREST

zoning and do not have adequate off-street parking and thus rely on public parking. The continued revitalization of downtown is limited by parking capacity, particularly during the winter on-street parking ban.

3-P3.3 How does this project/initiative align with the economic development goals outlined above? The lack of year-round parking on town streets limits the downtown's opportunity for residential growth. The Downtown Livability Plan identified this issue as a major barrier to the revitalization and adaptive re-use of existing downtown properties. The lack of access to parking also lowers the quality of life for residents due to the unpredictability of available spaces. An emerging issue is that residents are parking long term in municipal lots which limits the opportunity for commercial activity. Additionally, the Planning Department has observed a trend of downtown multi-family housing units converting yard areas to parking and increased curb cuts for parking spaces. This cumulatively affects the urban fabric of downtown.

3-P3.4 Describe how ready the applicant is to begin the implementation of this project. Indicate what activities need to be undertaken in the coming year to advance the project. The Selectboard has directed the Town Planner, Police Chief, and Department of Public Works to study the issue and make recommendations. However, the town ultimately lacks the technical expertise to do a sound, objective assessment and could benefit from an outside expert to assess the situation and make recommendations. There is will from the Selectboard to implement the recommendations of the study.

3-P3.5 Based on the descriptions outlined in the RFP, which type(s) of funding would you like to explore for this project/initiative: *(Check all that apply)*

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Capacity Building     | <input type="checkbox"/> Infrastructure (horizontal construction) |
| <input checked="" type="checkbox"/> Planning and Zoning   | <input type="checkbox"/> Other: _____                             |
| <input type="checkbox"/> Site Preparation                 | <input type="checkbox"/> Not sure                                 |
| <input type="checkbox"/> Predevelopment and Permitting    |   |
| <input type="checkbox"/> Building (vertical construction) |   |

3-P3.6 Would you like to add a fourth project?  
☐ Yes      ☐ No

### **Project / Initiative Four**

3-P4.1 Name of Project/Initiative: Montague Comprehensive Plan Update

3-P4.2 Brief Description of Project/Initiative. Indicate if project is phased and progress made to date:  
Montague's current master plan dates back to 1999. The Planning Board and Selectboard recognize that the Town is overdue for an update, however Montague is a community of limited financial means and without support from the State, the Town has been unable to fund a master plan update.

## COMMUNITY ONE STOP FOR GROWTH – EXPRESSION OF INTEREST

- 3-P4.3 How does this project/initiative align with the economic development goals outlined above? A master plan update would build off and align with existing planning efforts including, Open Space and Recreation Plan (2018), Housing Plan (2015) and Downtown Master Plan (2013/2020).
- 3-P4.4 Describe how ready the applicant is to begin the implementation of this project. Indicate what activities need to be undertaken in the coming year to advance the project. The Planning Department is ready to commence a 12-15 month master planning process immediately. The process will build off existing planning efforts. The Town could use support in developing budget and scope for the plan update.
- 3-P4.5 Based on the descriptions outlined in the RFP, which type(s) of funding would you like to explore for this project/initiative: (*Check all that apply*)

- |   |   |
|---|---|
| <input type="checkbox"/> Capacity Building                | <input type="checkbox"/> Infrastructure (horizontal construction) |
| <input checked="" type="checkbox"/> Planning and Zoning   | <input type="checkbox"/> Other: _____                             |
| <input type="checkbox"/> Site Preparation                 | <input type="checkbox"/> Not sure                                 |
| <input type="checkbox"/> Predevelopment and Permitting    |   |
| <input type="checkbox"/> Building (vertical construction) |   |

- 3-P4.6 Would you like to add a fifth project?  
☐ Yes      ☐ No

### **Project / Initiative Five**

- 3-P5.1 Name of Project/Initiative: Sandy Lane Industrial Area Expansion
- 3-P5.2 Brief Description of Project/Initiative. Indicate if project is phased and progress made to date: \_\_\_\_\_  
In 2011, The Town of Montague adopted a plan to develop a 153 acre parcel of municipal-owned, industrially zoned land into a small park for solar and industrial development. In 2013, MassDevelopment helped the town develop a plan for a small industrial subdivision and the town has advance several critical steps to develop the property over the last decade: 1) The Town has developed a 3<sup>rd</sup> party owned 7MW solar facility on land of limited use. 2) The town is finalizing the capping of the second landfill on the property. 3) The Town is selling the first proposed development lot (5.5 acres) to the Franklin Regional Transit Authority, who will be improving and upgrading utilities along the first 800 ft of Sandy lane. The result of these efforts unlock approximately 25 acres of buildable land behind what is currently the transfer station. Sandy Lane would likely need to be extended, but the FRTA's proposed investment into the roadway is an opportunity for leverage.
- 3-P5.3 How does this project/initiative align with the economic development goals outlined above? \_\_\_\_\_  
The Franklin County CEDS highlights the shortage of developable industrial-zoned land in the county as a barrier to regional economic development. Montague's Airport Industrial Park is virtually built to capacity, leaving little in the way of options for new commercial/industrial growth in Montague.

## COMMUNITY ONE STOP FOR GROWTH – EXPRESSION OF INTEREST

- 3-P5.4 Describe how ready the applicant is to begin the implementation of this project. Indicate what activities need to be undertaken in the coming year to advance the project. \_\_\_\_\_  
The Town would be looking to conduct an updated feasibility assessment of developing/marketing the back 25 acres for light industrial use. The Town owns the land and there are no obstacle to proceeding with the study. Resource areas and development limitation have already been identified in previous studies.
- 3-P5.5 Based on the descriptions outlined in the RFP, which type(s) of funding would you like to explore for this project/initiative: *(Check all that apply)*
- |   |   |
|---|---|
| <input type="checkbox"/> Capacity Building                        | <input type="checkbox"/> Infrastructure (horizontal construction) |
| <input type="checkbox"/> Planning and Zoning                      | <input type="checkbox"/> Other: _____                             |
| <input type="checkbox"/> Site Preparation                         | <input type="checkbox"/> Not sure                                 |
| <input checked="" type="checkbox"/> Predevelopment and Permitting |   |
| <input type="checkbox"/> Building (vertical construction)         |   |

### **SECTION 4: Additional Information / Questions**

- 4.1 If needed, provide additional information you may want to share with the reviewers about any of the projects / initiatives outlined above: \_\_\_\_\_  
\_\_\_\_\_  
*(2,000 characters)*

# # #



Charles D. Baker, Governor  
Karyn E. Polito, Lieutenant Governor  
Jamey Tesler, Acting Secretary & CEO

**massDOT** 14c  
Massachusetts Department of Transportation

February 22, 2021

Town Administrator Steven Ellis

1 Avenue A

Turners Falls, MA 01376

Dear Town Administrator Steven Ellis,

We are pleased to inform you that we anticipate Chapter 90 local transportation aid funding for Fiscal year 2022 will total \$200 million statewide, pending final legislative approval.

This letter certifies that, pending final passage of the bond authorization, your community's Chapter 90 apportionment for Fiscal year 2021 is \$487,446.00. This apportionment will be incorporated automatically into your existing 10-year Chapter 90 contract, which will be available on the MassDOT website [www.massdot.state.ma.us/chapter90](http://www.massdot.state.ma.us/chapter90).

The Chapter 90 program is an integral part of maintaining and enhancing your community's infrastructure and is an essential component of our state-local partnership. We look forward to working with you in the coming year to continue the success of this program.

Thank you for all that you do to make the Commonwealth of Massachusetts a great place to live, work and raise a family.

Sincerely,

Charles D. Baker  
Governor

Karyn E. Polito  
Lieutenant Governor

**State Legislative Delegation Meeting Planning**  
**Some Topics on Which the Conversation Might Focus**  
March 8, 2021

The Selectboard requested possible discussion/advocacy topics for a 30 minute meeting with state legislators tentatively scheduled for 6:30 on March 22<sup>nd</sup>. Topics the Town Administrator and Department Heads would submit for discussion/consideration include:

- Ch 70 aid and student enrollment: Ensuring that unusual changes in student enrollment associated with the pandemic, including home schooling and delayed entry to early childhood grade levels, does not adversely impact ch70 allocations. Recommendation would be to hold harmless relative to any enrolment declines as measured by previous year Oct 1 census. For FY22 just use Oct 2019 census. Build in a safeguard relative to Oct 2021 census, which may still be affected by parent concerns relative to school safety.
- Taxable status of commercial scale solar facilities: To the extent that ATB rulings based on antiquated laws from the 1970s have led to some commercial solar operations successfully challenging their taxable status, close this loophole through definitive legislation.
- Create a supplemental bridge repair program that is parallel to and does not reduce ch90. The purpose of which is to offer a dedicated stream of revenue specifically for bridge maintenance and repair. The extraordinary cost of bridge repair limits the practicality of applying Ch90 monies to those projects, particularly where bridge inventory requires repair of numerous structures.
- Create a funding program to support rural water and waste water infrastructure projects and operational changes to facilitate long term improvements required by changing EPA regulations. This program is most important in communities with limited growth prospects where needed investments would place unreasonable demands on rate payers and dampen economic development. Distribute based on a formula that accounts for limited system growth, present rates, and other factors.
- Ensure full funding of State PILOT program to ensure that rural communities are not unfairly penalized for retaining a community benefit in the form of open space protection.
- Assist with efforts to redevelop the Farren Care Center in a fashion that adds value to the Town and reflects the interests of local jobseekers and taxpayers.
  - Staff commentary: Reform the mechanism for how students from transitional housing are supported. It seems like a critical barrier to housing the people with the most need and it is truly unjust to communities like Montague that receive people from outside the community.
- Advocate for regional transportation funding specifically focused on expanded weekend bus service and connections between Montague and the UMass/Northampton transit area.
- Fund library building renovation projects in small communities that respect the reality that we may not wish or may not be able to afford substantial expansion of facilities in order to be eligible for Library grant aid. To do otherwise essentially withholds aid.