CITY OF SPRINGFIELD

City Clerk's Office 9/30/2015 12:00:00 PM

Regular Meeting Agenda~

I hereby notify you that at twelve o'clock noon today the following items of business had been filed with this office and can be acted upon at the meeting in City Council Chambers, Room 200 at City Hall, 36 Court Street **Monday** evening **October 5, 2015** at 07:00 PM according to Section 12, Rules and Orders of the City Council.

City Clerk

Possible Public Speak-Out Time 6:30 PM

Call to Order

7:00 PM Meeting called to order on October 5, 2015 at Springfield City Hall -- Council Chambers, 36 Court Street, Springfield, MA.

Moment of Silence - Pledge of Allegiance

Communications

(1.) August Revenue Vs. Expenditure Report (Mayor Sarno)
ATTACHMENTS:

- August Revenue Vs. Expenditure Report(PDF)

Reports of Committee

() Open Air Parking Revocation ()

() Removal Jersey Barriers from Main Street and State Street (President - Ward 2 Councilor Fenton)

Informational

(3.) From BPW re:Grayson Drive –
<<Enter brief purpose>>

(4.) From BPW re:FrankB. Murray –
<<Enter brief purpose>>

(5.) From BPW re:Allen Street –
<<Enter brief purpose>>

Grants

(6.) Byrne JAG Grant - $133,411.00 - No Match (Mayor Sarno)
ATTACHMENTS:

- JAG EQUIPMENT & TECH. (PDF)

(7.) Byrne JAG Grant - $99,951.36 - No Match (Mayor Sarno)

ATTACHMENTS:

- BYRNE JAG OP REPO (PDF)

(8.) FY16 Health Services for the Homeless Grant Increase - No Match Required $78,836.00 (Mayor Sarno)

ATTACHMENTS:

- Health Services for the Homeless $78,836 Grant Increase (PDF)

(9.) Park Department Grant - Health New England Open Gym: $40,820 (Mayor Sarno)

ATTACHMENTS:

- Open Gym confirmation (PDF)

(10.) FY16 MCC Grant Acceptance - No Match Required $11,500 (Mayor Sarno)

ATTACHMENTS:

- MCC Grant Set Up Form (DOC)
- MCC Grant (PDF)

General Business

(11.) Self Insurance to Law Department Settlement Account - $150,000 (Mayor Sarno)

ATTACHMENTS:

- CAFO Certification - Settlements Transfer (PDF)

(12.) Bill of Prior Year - Elders Department - $1,808.89 (Mayor Sarno)

ATTACHMENTS:

- Elders Bopy CAFO Cert (DOCX)
- Elders BOPY (PDF)

(13.) Mental Health

(14.) City of Springfield Complete Streets Policy

Suspension of Rules

City of Springfield

SCHEDULED

Meeting: 10/05/15 07:00 PM
Initiator: Pat Burns
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3227

August Revenue Vs. Expenditure Report (Mayor Sarno)

Statement of Revenues and Other Sources,
and Expenditures and Other Uses
Budget and Actual - General Fund

For the period ended
08/31/15

Revenues and Other Sources:	Revised Budget	Actual	Variance Over/(Under)	%
Real Estate & Personal Property Taxes	176,662,920	$ 42,632,982	$ (134,029,938)	24%
Real Estate & Personal Property Taxes - Tax Liens	-	698,562	698,562	0%
Motor Vehicle Excise	9,800,000	708,225	(9,091,775)	7%
Penalties, interest and other taxes	5,153,730	205,458	(4,948,272)	4%
Charges for Services	12,997,997	2,001,663	(10,996,335)	15%
Intergovernmental	356,360,480	58,469,688	(297,890,792)	16%
MSBA Payments	12,933,936	-	(12,933,936)	0%
Licenses and Permits	8,475,133	548,726	(7,926,407)	6%
Fines and Forfeits	450,180	84,690	(365,490)	19%
Interest earned on Investments	1,346,859	79,856	(1,267,003)	6%
Miscellaneous	10,730,568	4,760,140	(5,970,428)	44%
FY 2015 Net School Spending Shortfall (a.)	2,114,592	2,114,592	-	100%
Stabilization Reserves	-	-	-	0%
Other Financing Sources	-	-	-	0%
Total Revenues and Other Sources	597,026,395	112,304,582	(484,721,813)	19%
Expenditures and Other Uses:				
General government	19,616,285	6,483,880	13,132,405	33%
Public safety				
Police	41,251,354	6,476,957	34,774,397	16%
Fire	21,413,297	3,777,891	17,635,407	18%
Centralized Dispatch	1,828,958	341,798	1,487,160	19%
Other	3,725,628	1,022,081	2,703,547	27%
Health and Welfare	4,845,997	880,057	3,965,940	18%
Public works	9,987,467	4,502,927	5,484,539	45%
Education	380,683,267	44,502,198	336,181,069	12%
Culture and recreation	12,071,929	3,872,362	8,199,567	32%
Pension and fringe	55,932,636	33,805,170	22,127,466	60%
State and district assessments	3,299,435	555,708	2,743,727	17%
Debt Service	36,395,462	26,421,907	9,973,555	73%
Pay as you go Capital	1,932,506	81,544	1,850,962	4%
Other Financing Use - Trash Enterprise Supplement	4,042,175	4,042,175	-	100%
Total Expenditures and Other Uses	597,026,396	136,766,653	460,259,742	23%
Excess (deficiency) of revenues and other sources over expenditures and other uses	-	$ (24,462,071)	$ (24,462,070)	

(a.) The FY 2015 Net School Spending Requirement shortfall must be appropriated in the School Budget pursuant to Chapter 70. Section 11 of the Education Reform Act of 1993.

CITY OF SPRINGFIELD, MASSACHUSETTS
Budget and Actual - General Fund
Expenditures and Encumbrances
For the period ended
08/31/15

Expenditures and Other Uses:	Original Budget	Transfers In/(Out)	Revised Budget	Expenditure	Encumbrance	Variance Over/(Under)	%
General government	19,657,286	(41,001)	19,616,285	3,597,459	2,886,420	13,132,405	33%
Public safety							
Police	41,251,354	-	41,251,354	5,849,885	627,072	34,774,397	16%
Fire	21,413,297	-	21,413,297	3,474,623	303,267	17,635,407	18%
Centralized Dispatch	1,828,958	-	1,828,958	340,024	1,774	1,487,160	19%
Other	3,725,628	-	3,725,628	518,106	503,975	2,703,547	27%
Health and Welfare	4,845,997	-	4,845,997	729,710	150,347	3,965,940	18%
Public works	9,987,467	-	9,987,467	3,959,808	543,119	5,484,539	45%
Education	378,568,673	2,114,593	380,683,267	29,667,170	14,835,028	336,181,069	12%
Culture and recreation	12,030,929	41,000	12,071,929	2,448,988	1,423,375	8,199,567	32%
Pension and fringe	55,932,636	-	55,932,636	32,815,170	990,000	22,127,466	60%
State and district assessments	3,299,435	-	3,299,435	555,708	-	2,743,727	17%
Debt Service	36,395,462	-	36,395,462	26,421,907	-	9,973,555	73%
Pay as you go Capital	1,932,506	-	1,932,506	-	81,544	1,850,962	4%
Other Financing Use - Trash Enterprise Supplement	4,042,175	-	4,042,175	4,042,175	-	-	100%
Total Expenditures and Other Uses	594,911,803	2,114,592	597,026,396	114,420,734	22,345,920	460,259,742	23%

Open Air Parking Revocation ()

Ordered, that a hearing be given on **Monday evening, September 21, 2015** at 7:00 o'clock P.M., to the owners or occupants of property listed below relative to the revocation of licenses granted to them for open-air parking. Said hearings to be held in accordance with Chapter 148, Section 56 of the General Laws, as amended.

Be it Further Ordered, that the licenses granted to the owners or occupants of property listed below for a license allowing for open air parking be and the same are hereby **revoked,** subsequent to said hearing.

NAME	LOCATION
Springfield Parking Authority	**Ten Center Lot** **Boylston Street**

Removal Jersey Barriers from Main Street and State Street (President - Ward 2 Councilor Fenton)

WHEREAS, Chapter 81 of the Acts of 1953 authorizes the Mayor and City Council to delegate authority vested in them, including the placement of traffic devices such as jersey barriers, to various boards and commissions, such as the Traffic Commission.

WHEREAS, the City Ordinances, Sec. 385-1 delegates authority to the Traffic Commission.

WHEREAS, Article III, Section 5 of the General Articles of the Rules of the Road established by the Traffic Commission states that the Traffic Engineer may establish on an experimental basis, certain changes to the posted regulations for a period of time not to exceed one hundred twenty (120) days.

WHEREAS, in April and May of 2015, under the authority given to the Traffic Engineer under the abovementioned Article III, Section 5, the City approved MGM Springfield request to place certain jersey barriers in the right-of-way on Main Street and State Street in the City of Springfield for a one hundred and twenty (120) day trial period.

WHEREAS, the "trial period" for the jersey barriers placed by MGM Springfield on Main Street and State Street expired at the end of August 2015.

WHEREAS, no hearing of the Traffic Commission or the City Council has been conducted to approve the location of said jersey barriers which are now in the public right-of-way illegally.

ORDERED, that the Law Department immediately and forthwith issue a cease and desist letter to MGM Springfield demanding the removal of jersey barriers from the public right-of-way on Main Street and State Street until the City Council can conduct a public hearing on the placement of said jersey barriers as is now required under the law.

FURTHER ORDERED, that if the jersey barriers which are the subject of this order, are not removed on or before October 6, 2015, that the Law Department is ordered to commence any and all legal action required to achieve the removal of said barriers.

City of Springfield

SCHEDULED

Meeting: 10/05/15 07:00 PM
Initiator: Hector Velez
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3219 A

Grayson Drive for the Installation and Maintenance of Underground Utilities

By the City Council of the City of Springfield, Massachusetts:
Notice having been given and a public hearing held, as provided by law,

IT IS HEREBY ORDERED:

That the EVERSOURCE ENERGY, be and it is hereby granted a location for and permission to <<Insert proper utility template>>

Grayson Drive

<<Enter brief purpose>>

Also that permission be and hereby granted said {ResUserUserLookup1} to complete the above request.

I hereby certify that the foregoing order was adopted at a meeting of the City Council of the City of Springfield, Massachusetts held on October 5, 2015

_____

City Clerk

We hereby certify that on September 14, 2015, at 5:00 PM, at #162 Grayson Drive a public hearing was held on the petition of the EVERSOURCE ENERGY for permission to complete the above mentioned request.

_____

City Clerk

I hereby certify that the foregoing is a true copy of a location order and certificate of hearing with notice adopted by the City Council of the City of Springfield, Massachusetts, on the October 5, 2015, and recorded with the records of location orders of said city. This certified copy is made under the provision of Chapter 166 of the General Laws and any additions thereto or amendments thereof.

Attest:

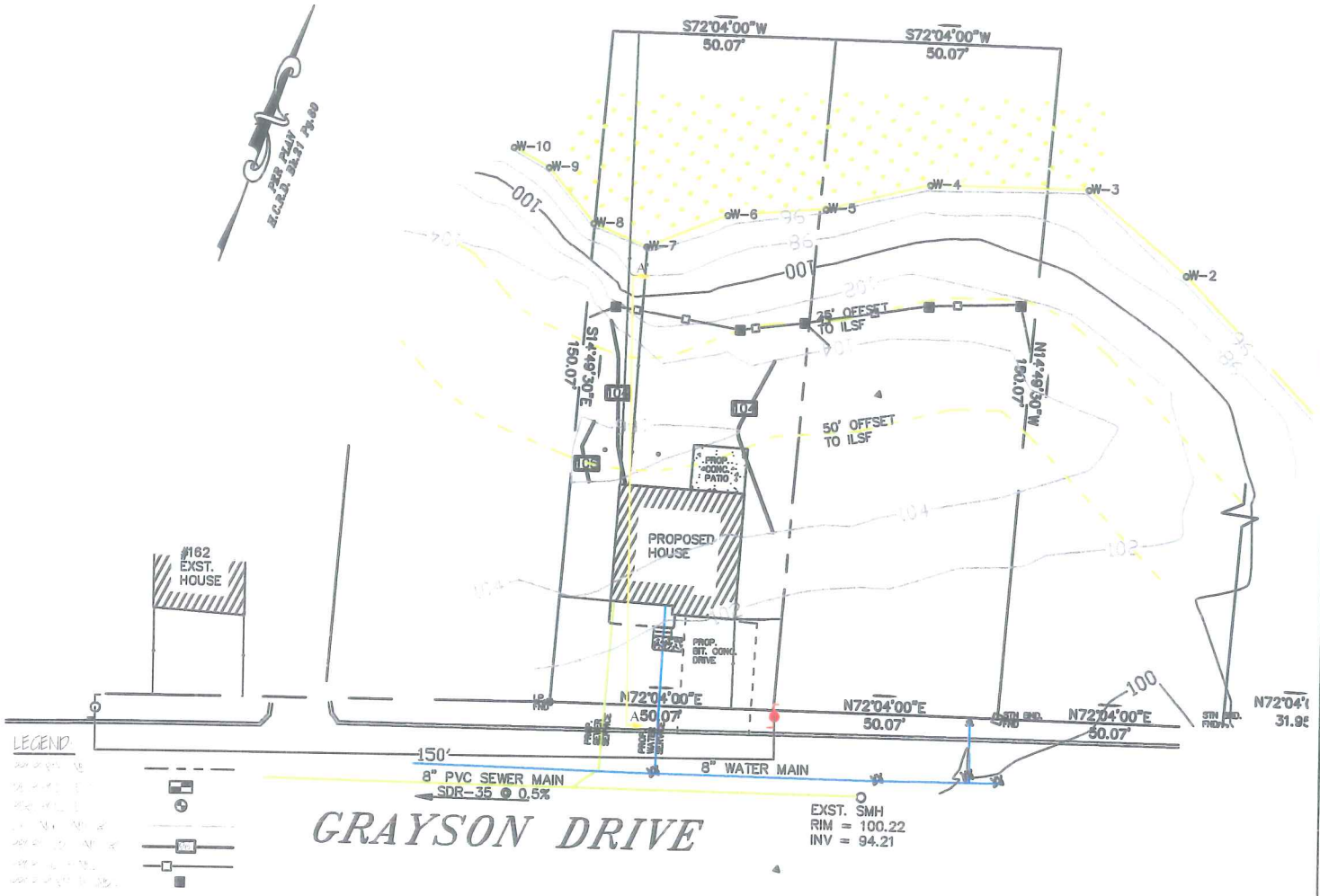
_____

City Clerk

EVERSOURCE ENERGY DBA
WESTERN MASSACHUSETTS ELECTRIC COMPANY

SPRINGFIELD

STREET
GRAYSON DRIVE



PURPOSE AND DESRIPTION
EVERSOURCE IS ADDING A NEW POLE TO BE ABLE TO EXTEND THE OVERHEAD CONDUCTORS TO PROVIDE SERVICE FOR TWO NEW HOUSES.

LEGEND

- PROPOSED JOINT POLE
- PROPOSED W.M.E.CO. POLE
- EXISTING JOINT POLE
- EXISTING W.M.E.CO. POLE
- EXISTING W.M.E.CO. POLE TO BE JOINT
- EXISTING FOREIGN POLE TO BE JOINT
- PROPOSED PAD MOUNT TRANSFORMER
- EXISTING PAD MOUNT TRANSFORMER
- EXISTING MANHOLE
- UG EXISTING CONDUIT
- UG PROPOSED CONDUIT
- PROPOSED HANDHOLE
- EXISTING HANDHOLE
- PROPOSED SILO
- EXISTING SILO
- HEXHOLE

DRAWN BY	W.O.#	DISTANCES ARE APPROXIMATE	PETITION NO.
ANDREW NETHERWOOD	2528363	1/64"=1'	#6227

W.O. 6#521583

DEPARTMENTAL AND INTERDEPARTMENTAL CORRESPONDENCES
CITY OF SPRINGFIELD
MASSACHUSETTS

DATE: August 25, 2015

TO: Wayman Lee, Esq.
City Clerk

FROM: Hector Velez, DPW Engineer.
on behalf of BPW

DEPARTMENT: City Clerk Office

SUBJECT: Board's agenda for:
September 14, 2015

NOTICE OF MEETINGS

Monday – September 14, 2015 – In front of #162 Grayson Drive, Springfield at 5:00 P.M.

Minutes of Previous Meeting
Communications
Old Business

EVERSOURCE
New Business – GRAYSON DR: PETITION #6227

HEARING RE: To install new pole to provide service for two new houses

City of Springfield

SCHEDULED

Meeting: 10/05/15 07:00 PM
Initiator: Hector Velez
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3220 B

Frank B Murray Street for the Installation and Maintenance of Underground Utilities

By the City Council of the City of Springfield, Massachusetts:
Notice having been given and a public hearing held, as provided by law,

IT IS HEREBY ORDERED:

That the EVERSOURCE ENERGY, be and it is hereby granted a location for and permission to <<Insert proper utility template>>

FrankB. Murray

<<Enter brief purpose>>

Also that permission be and hereby granted said {ResUserUserLookup1} to complete the above request.

I hereby certify that the foregoing order was adopted at a meeting of the City Council of the City of Springfield, Massachusetts held on October 5, 2015

_____
City Clerk

We hereby certify that on September 16, 2015, at 5:00 PM, at Frank B. Murray Street (Union Station Project), a public hearing was held on the petition of the EVERSOURCE ENERGY for permission to complete the above mentioned request.

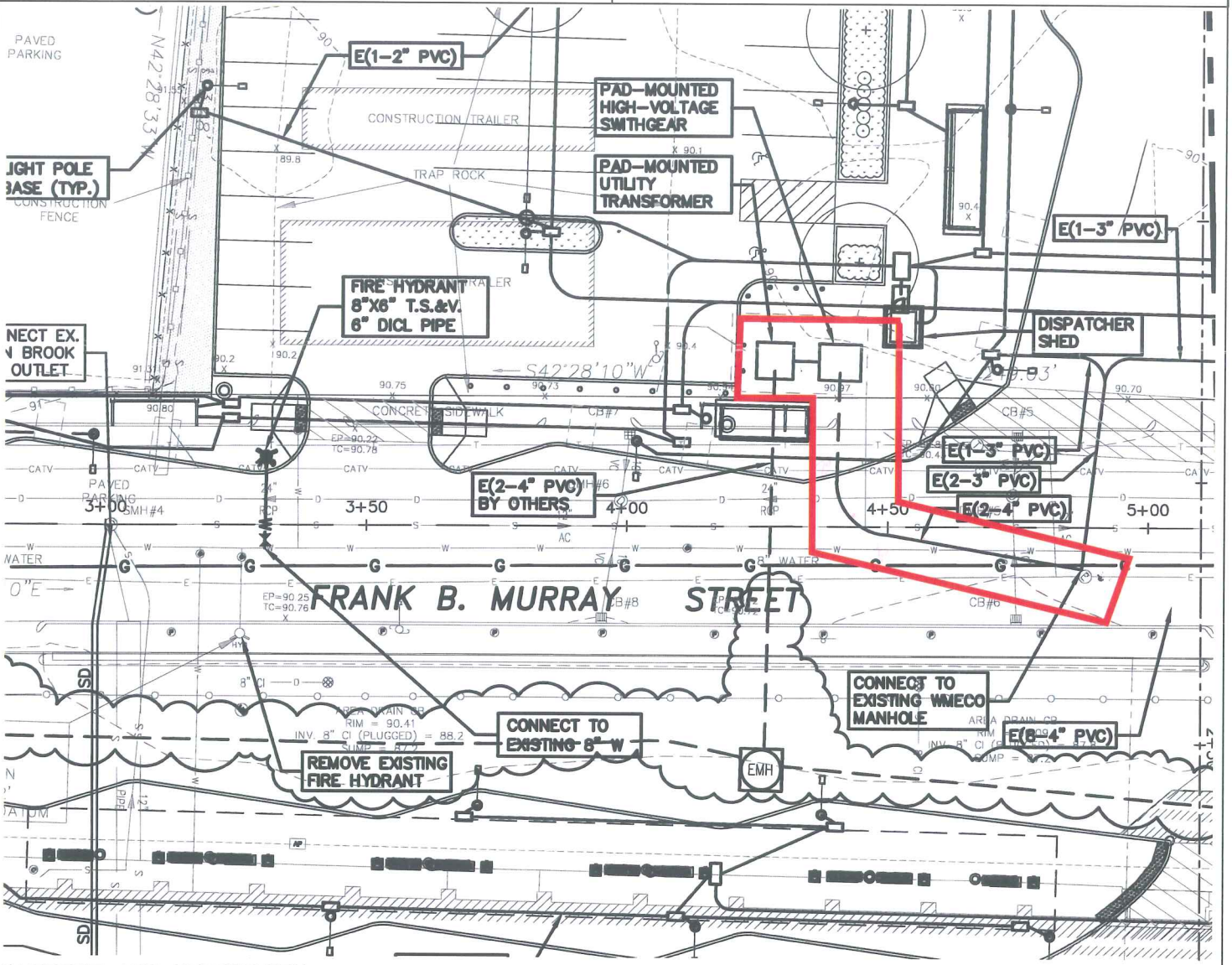
_____
City Clerk

I hereby certify that the foregoing is a true copy of a location order and certificate of hearing with notice adopted by the City Council of the City of Springfield, Massachusetts, on the October 5, 2015, and recorded with the records of location orders of said city. This certified copy is made under the provision of Chapter 166 of the General Laws and any additions thereto or amendments thereof.

Attest:

_____
City Clerk

EVERSOURCE ENERGY	TOWN: SPRINGFIELD
	STREET: 55 FRANK B MURRAY ST



PURPOSE AND DESRIPTION

EVERSOURCE PROPOSES TO INSTALL (8) 4" CONDUITS FROM MANHOLE TO NEW PAD AND SWITCH LOCATION. 3 PHASE PAD MOUNTED SWITCH AND TRANSFORMER WILL BE INSTALLED AS WELL TO FEED NEW UNION STATION SERVICE FOR MAIN BUILDING AND GARAGE.

LEGEND

- PROPOSED JOINT POLE
- PROPOSED W.M.E.CO. POLE
- EXISTING JOINT POLE
- EXISTING W.M.E.CO. POLE
- EXISTING W.M.E.CO. POLE TO BE JOINT
- EXISTING FOREIGN POLE TO BE JOINT
- PROPOSED PAD MOUNT TRANSFORMER
- EXISTING PAD MOUNT TRANSFORMER
- EXISTING MANHOLE
- UG EXISTING CONDUIT
- UG PROPOSED CONDUIT
- PROPOSED HANDHOLE
- EXISTING HANDHOLE
- ANCHOR
- PROPOSED SILO
- EXISTING SILO
- HEXHOLE

DRAWN BY	W.R.#	DISTANCES ARE APPROXIMATE	PETITION NO.
MICHAEL WILSON	2483083	1" = 20'	#6228

DEPARTMENTAL AND INTERDEPARTMENTAL CORRESPONDENCES
CITY OF SPRINGFIELD
MASSACHUSETTS

DATE: August 26, 2015

TO: Wayman Lee, Esq.
City Clerk

FROM: Hector Velez, DPW Engineer.
on behalf of BPW

DEPARTMENT: City Clerk Office

SUBJECT: Board's agenda for:
September 16, 2015

NOTICE OF MEETINGS

Wednesday – September 16, 2015 – At Frank B. Murray Street (Union Station Project), Springfield at 5:00 P.M.

Minutes of Previous Meeting
Communications
Old Business

EVERSOURCE
New Business – Frank B. Murray: PETITION #6228

HEARING RE: To install 8-4" conduits from manhole to new pad mounted transformer and switchgear.

City of Springfield

SCHEDULED

Meeting: 10/05/15 07:00 PM
Initiator: Hector Velez
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3221 A

379 Allen Street for the Installation and Maintenance of Underground Utilities

By the City Council of the City of Springfield, Massachusetts:
Notice having been given and a public hearing held, as provided by law,

IT IS HEREBY ORDERED:

That the , be and it is hereby granted a location for and permission to
<<Insert proper utility template>>

Allen Street

<<Enter brief purpose>>

Also that permission be and hereby granted said {ResUserUserLookup1} to complete the above request.

I hereby certify that the foregoing order was adopted at a meeting of the City Council of the City of Springfield, Massachusetts held on October 5, 2015

_____

City Clerk

We hereby certify that on September 28, 2015, at 5:00 PM, at 379 Allen Street a public hearing was held on the petition of the for permission to complete the above mentioned request.

_____

City Clerk

I hereby certify that the foregoing is a true copy of a location order and certificate of hearing with notice adopted by the City Council of the City of Springfield, Massachusetts, on the October 5, 2015, and recorded with the records of location orders of said city. This certified copy is made under the provision of Chapter 166 of the General Laws and any additions thereto or amendments thereof.

Attest:

_____

City Clerk

NOTICE OF MEETING

CITY OF
SPRINGFIELD, MASSACHUSETTS

PET. NO. 10,269 September 11, 2015

The Board of Public Works, to which was referred the petition of Margaret G. Smith and others, praying:

> "To convey a portion of the northerly street line and discontinue a small section of ALLEN STREET easterly of Island Pond Road"

Hereby gives notices that said Board will meet **at 379 Allen Street, located on the intersection of Island Pond Road with Allen Street, Springfield, MA on Monday, the twenty eight (28th) of September, 2015 at five (5:00 P.M.) o'clock in the evening**

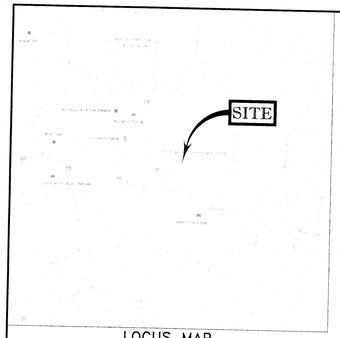
View the plan.

Hear all persons interested therein.

Determine whether the Board shall recommend the proposed discontinuance and street line relocation stated in said Petition.

Estimate any damages resulting from the action of the Board.

JOHN J. FITZGERALD)
MICHAEL E. TRIGGS) BOARD OF PUBLIC WORKS
RAYMOND A. AVEZZIE)



LOCUS MAP

FOR REGISTRY USE ONLY

MAP 280,
LOT 1260

N/F LANDS OF
JOHN MASTRONARDI
DEED BK. 1830, PG. 350

MAP 280,
LOT 1250

N/F LANDS OF
JOHN MASTRONARDI
BK. 3237, PG. 242

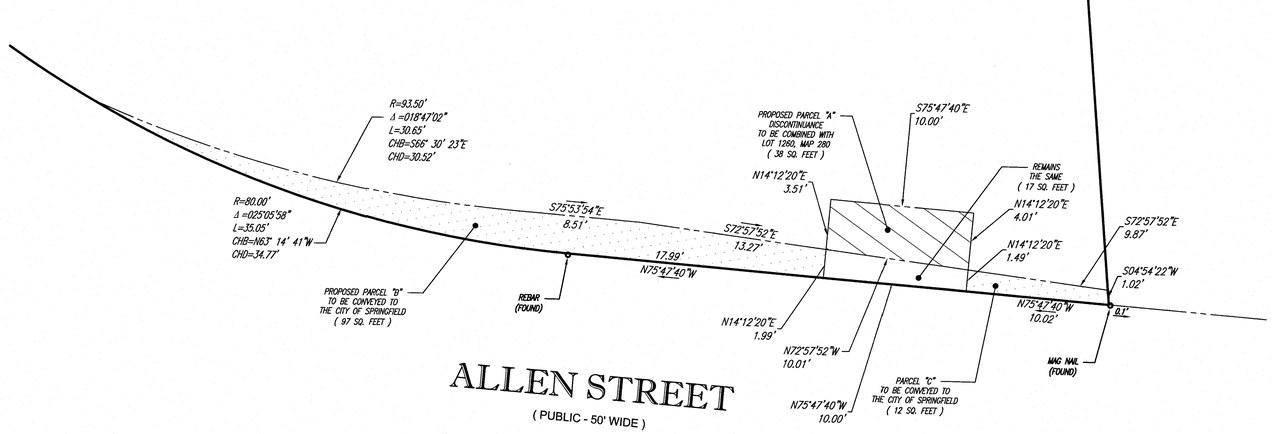
REFERENCE #2

NOTES:

1. THE PURPOSE OF THIS PLAN IS TO COMBINE LOTS 1260, 1262, & 1269 ON THE CITY OF SPRINGFIELD ASSESSORS MAP # 280 INTO ONE CONTIGUOUS LOT & TO CONVEY PROPOSED PARCEL "A" TO THE CITY OF SPRINGFIELD & TO COMBINE A PORTION OF A 5.5'x10' PARCEL, PARCEL "B", OF LAND WITH LOT 1260.
2. AREA = 38 SQ FEET (PARCEL "A")
   97 SQ FEET (PARCEL "B")
   12 SQ FEET (PARCEL "C")
3. THIS PLAN IS BASED ON INFORMATION PROVIDED BY A SURVEY PREPARED IN THE FIELD BY CONTROL POINT ASSOCIATES, INC. AND OTHER REFERENCE MATERIAL AS LISTED HEREON.
4. THIS SURVEY WAS PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT AND IS SUBJECT TO THE RESTRICTIONS, COVENANTS AND/OR EASEMENTS THAT MAY BE CONTAINED THEREIN.

REFERENCES:

1. THE TAX ASSESSOR'S MAP OF THE CITY OF SPRINGFIELD, HAMPDEN COUNTY, COMMONWEALTH OF MASSACHUSETTS, SHEET #280.
2. MAP ENTITLED "PLAN OF PROPERTY IN SPRINGFIELD, MA." BY ANDERSON ASSOCIATES, DATED DECEMBER 8TH, 2012, AND RECORDED AT THE HAMPDEN COUNTY REGISTRY OF DEEDS AS PLAN BOOK 365, PLAN 27.
3. MAP ENTITLED "SITE PLAN, SHEET NUMBER 4 OF 14," FOR NEWPORT DEVELOPMENT ASSOCIATES, LLC, BY BOHLER ENGINEERING, DATED APRIL 8TH, 2015.



ALLEN STREET

(PUBLIC - 50' WIDE)

APPROVAL UNDER THE SUBDIVISION CONTROL LAW NOT REQUIRED

SPRINGFIELD PLANNING BOARD

_____
CHAIRMAN

_____

_____

_____

_____

_____

_____
DATE

THE PLANNING BOARD'S ENDORSEMENT OF THE PLAN AS NOT REQUIRING APPROVAL UNDER THE SUBDIVISION CONTROL LAW IS NOT A DETERMINATION AS TO THE CONFORMANCE WITH THE SPRINGFIELD ZONING BYLAW AND REGULATIONS.

GRAPHIC SCALE

5 0 2.5 5 10 20

(IN FEET)
1 inch = 5 ft.

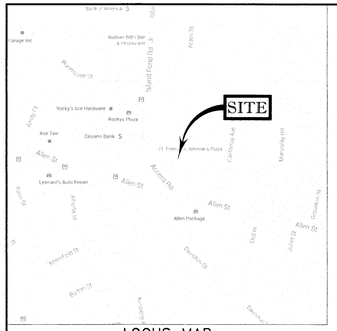
THIS IS TO CERTIFY THAT THIS PLAN HAS BEEN PREPARED IN CONFORMITY WITH THE RULES AND REGULATIONS OF THE REGISTERS OF DEEDS.

NOT A VALID ORIGINAL DOCUMENT UNLESS EMBOSSED WITH RAISED IMPRESSION OR STAMPED WITH A BLACK INK SEAL

COMMONWEALTH OF MASSACHUSETTS · GERRY L. HOLDRIGHT NO. 49211 · REGISTERED PROFESSIONAL LAND SURVEYOR

GERRY L. HOLDRIGHT — DATE 8/24/15
MASSACHUSETTS PROFESSIONAL LAND SURVEYOR #49211

FIELD DATE 08.03.15	EXCHANGE PLAN OF LAND 379-385 ALLEN STREET				
FIELD BOOK NO. 1409MA	LOTS 1260, 1262, & 1269, MAP 280				
FIELD BOOK PG. 102	CITY OF SPRINGFIELD				
FIELD CREW: TM	HAMPDEN COUNTY				
DRAWN: J.M.R.	COMMONWEALTH OF MASSACHUSETTS				
REVIEWED: J.M.R.	CONTROL POINT ASSOCIATES, INC. 352 TURNPIKE ROAD SOUTHBOROUGH, MA 01772 508.948.3000 · 508.948.3003 FAX	MANHATTAN, NY 646.780.0411 MT. LAUREL, NJ 609.857.2099 CHALFONT, PA 215.712.9800 WARREN, NJ 908.668.0099			
	APPROVED: G.L.H.	DATE 8.24.15	SCALE 1"=20'	FILE NO. CM15148	DWG. NO. 1 OF 1



LOCUS MAP

NOTES:

1. THE PURPOSE OF THIS PLAN IS TO COMBINE LOTS 1260, 1262, & 1269 ON THE CITY OF SPRINGFIELD ASSESSORS MAP # 280 INTO ONE CONTIGUOUS LOT & TO CONVEY PROPOSED PARCEL "A" TO THE CITY OF SPRINGFIELD & TO COMBINE A PORTION OF A 5.5'x10' PARCEL, PARCEL "B", OF LAND WITH LOT 1260.

2. AREA = 25,563 SQ. FEET (LOT 1260)
   11,034 SQ. FEET (LOT 1262)
   5,149 SQ. FEET (LOT 1269)
   38 SQ. FEET (PARCEL A)
   41,784 SQ. FEET OR 0.959 ACRES

3. THIS PLAN IS BASED ON INFORMATION PROVIDED BY A SURVEY PREPARED IN THE FIELD BY CONTROL POINT ASSOCIATES, INC. AND OTHER REFERENCE MATERIAL AS LISTED HEREON.

4. THIS SURVEY WAS PREPARED WITHOUT THE BENEFIT OF A TITLE REPORT AND IS SUBJECT TO THE RESTRICTIONS, COVENANTS AND/OR EASEMENTS THAT MAY BE CONTAINED THEREIN.

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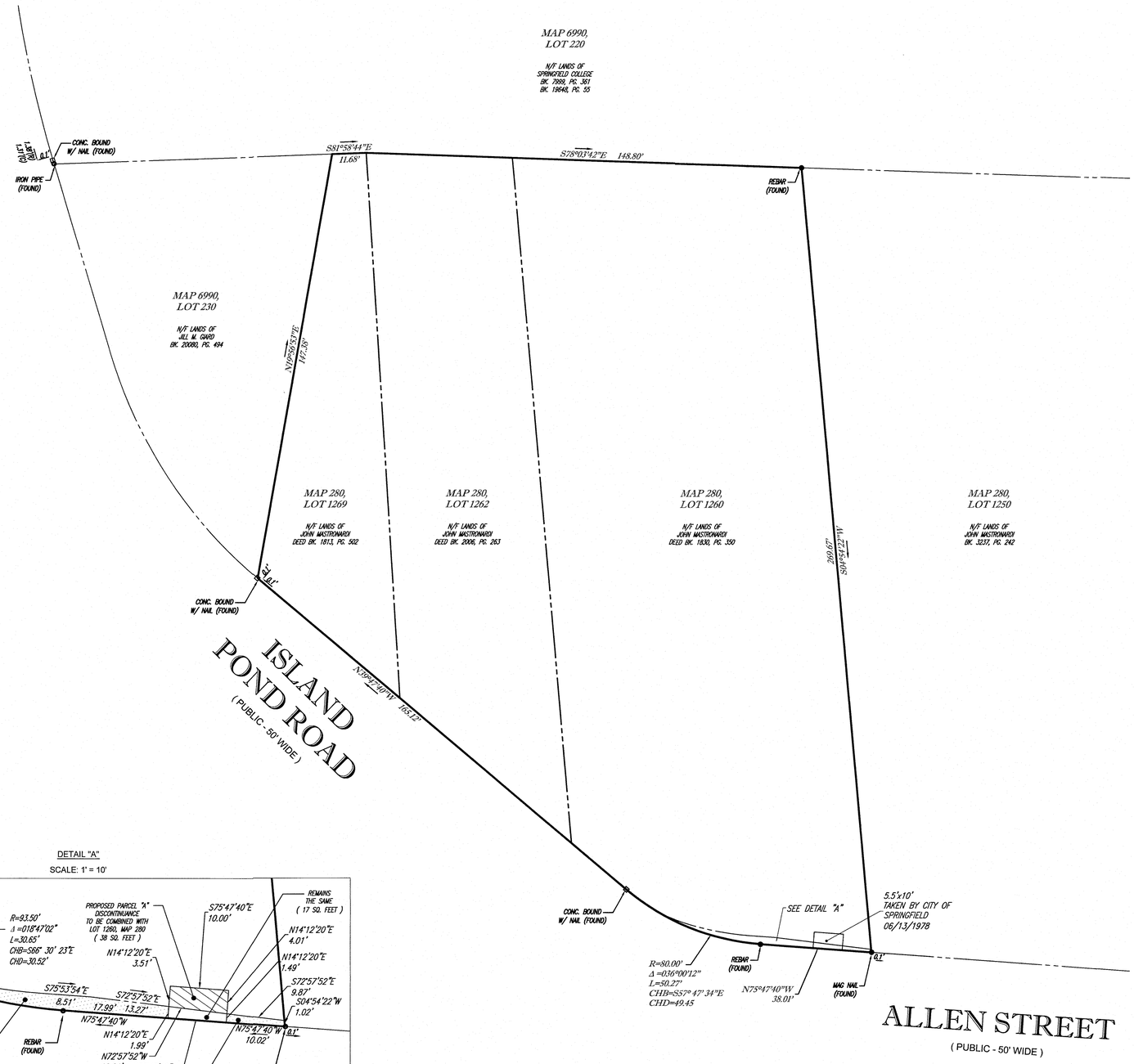
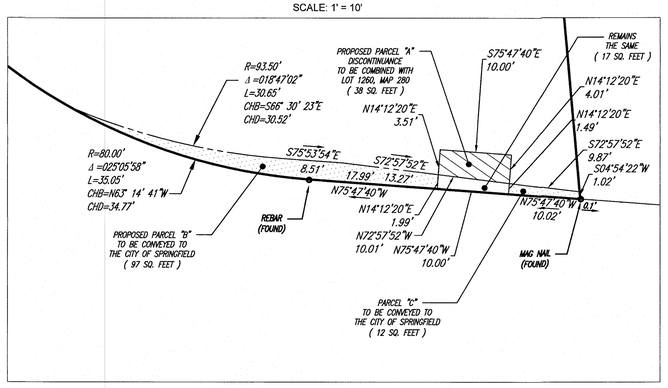


DETAIL "A"

SCALE: 1" = 10'



GRAPHIC SCALE

20 0 10 20 40 80

(IN FEET)
1 inch = 20 ft.

APPROVAL UNDER THE SUBDIVISION CONTROL LAW NOT REQUIRED

SPRINGFIELD PLANNING BOARD

CHAIRMAN

DATE

THE PLANNING BOARD'S ENDORSEMENT OF THE PLAN AS NOT REQUIRING APPROVAL UNDER THE SUBDIVISION CONTROL LAW IS NOT A DETERMINATION AS TO THE CONFORMANCE WITH THE SPRINGFIELD ZONING BYLAW AND REGULATIONS.

THIS IS TO CERTIFY THAT THIS PLAN HAS BEEN PREPARED IN CONFORMITY WITH THE RULES AND REGULATIONS OF THE REGISTERS OF DEEDS.

NOT A VALID ORIGINAL DOCUMENT UNLESS EMBOSSED WITH RAISED IMPRESSION OR STAMPED WITH A BLACK INK SEAL

COMMONWEALTH OF MASSACHUSETTS · GERRY L. HOLDRIGHT · NO. 49211 · REGISTERED PROFESSIONAL LAND SURVEYOR

8/24/15
DATE

GERRY L. HOLDRIGHT
MASSACHUSETTS PROFESSIONAL LAND SURVEYOR #49211

FOR REGISTRY USE ONLY

REFERENCE #2

FIELD DATE	08.03.15
FIELD BOOK NO.	1409MA
FIELD BOOK PG.	102
FIELD CREW:	TM
DRAWN:	J.M.R.
REVIEWED:	J.M.R.

APPROVAL NOT REQUIRED
PLAN OF LAND
379-385 ALLEN STREET
LOTS 1260, 1262, & 1269, MAP 280
CITY OF SPRINGFIELD
HAMPDEN COUNTY
COMMONWEALTH OF MASSACHUSETTS

CONTROL POINT ASSOCIATES, INC.
352 TURNPIKE ROAD
SOUTHBOROUGH, MA 01772
508.948.3000 - 508.948.3003 FAX
MANHATTAN, NY 646.780.0411
MT. LAUREL, NJ 609.857.2099
CHALFONT, PA 215.712.9800
WARREN, NJ 908.668.0099

APPROVED:	DATE	SCALE	FILE NO.	DWG. NO.
G.L.H.	8.24.15	1"=20'	CM15148	1 OF 1

Attachment: plan Allen St. (3221 : Allen Street)

City of Springfield

SCHEDULED

Meeting: 10/05/15 07:00 PM
Initiator: Lindsay B. Hackett
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3217

Byrne JAG Grant - $133,411.00 - No Match (Mayor Sarno)

WHEREAS, the Police Department has been awarded an Edward Byrne Memorial Justice Assistance Grant (JAG) for $133,411.00 From the Department of Justice; and

WHEREAS, the grant is intended for support of a broad range of activities to prevent and control crime; and

WHEREAS, the Department intends to use the grant funds for equipment and technology upgrades and replacement for priority areas in the delivery of modern police services; and

WHEREAS, the Department has accepted the grant and requests authorization from the City Council and the Mayor to expend the grant funds listed below for the purposes of such grants; and

WHEREAS, the Chief Administrative and Financial Officer, after an evaluation of all pertinent financial information reasonably available, has certified that the City's financial resources and revenues are and will continue to be adequate to support the proposed expenditures and obligations involved in the City Council Order authorizing the expenditure of the grant funds listed herein, subject to the approval of the Mayor, without a detrimental impact on the continuous provision of the existing level of municipal services, in accordance with Section 2(f) of Chapter 656 of the Acts of 1989, as added by Section 1 of Chapter 468 of the Acts of 2008.

NOW THEREFORE BE IT ORDERED, acting pursuant to Mass. Gen. Laws Ch. 44, sec. 53A, that the City Council approves the expenditure by the Department of the grant funds listed below for the purposes of such grant, subject to the approval of the Mayor, and the grant funds received shall be deposited with the City Treasurer and held as a separate account and may be expended for the purposes of the grant without further appropriation:

FY16 Edward Byrne Memorial Justice Assistance Grant $133,411.00

REQUEST FOR GRANT SETUP

This form and the required attachments are required by the Office of the City Comptrollers before a Grant Fund and related accounts will be created in MUNIS. Please do not use this form for requesting a non-grant related account to be created – use the Request for New Account form instead. Please return this form and the required attachments to the Office of the City Comptrollers.

All fields are mandatory.

Date of Request	9/8/15
Department Requesting Grant Setup	Police
Department Phone # (Please include extension)	787-6385
Name and Title of Person to Contact in Case of Questions	Lisa Willis

Was this Grant previously setup for a prior fiscal year?
If yes, please indicate your previous project number: 62415****the project code 62416 was assigned to the State Equipment Grant for $ 30,000. Should this one be 62416A?

If this is a new Grant, have you filled out the "Approval to apply for a grant" Form?
(Y/N) If yes, please attach a copy of the Approved Form.

	Grant Type:
	State – Highway
	Federal Pass-Through DOE– School
	Federal Direct– School
XX	Federal – City
	State DOE– School
	State Other – School
	State – City
	Private/Other

Grant Name: FY 2015 JAG Equipment and Technology Upgrade

Total Grant Amount Awarded: $ 133,411.00

Is this a Reimbursable Grant? (Y/N) Y
A Reimbursable Grant is defined as one that requires that you pay for expenses first and then you apply to the grantor for a reimbursement of the exact amount actually expended.

If it is a Reimbursable Grant, please enter Grantor contact information or the CID # if Grantor is already in the customer file:

Entity Name	Executive Office of Public Safety and Security
Contact Person	Corine Pryme
Street Address	10 Park Plaza Suite 3720
City, State, Zip Code	Boston, MA
Telephone	(617)725-3370
Fax	(617)725-0267
E-Mail	corine.pryme@MassMail.State.MA.US

Actual Award Date
Board Approval Date
Start Date
Expiration Date
Renewal Action Date (optional)
If there are any Matching Funds:
Type
Percent
Amount

Comments re: Description/Purpose of Grant
Grant is for Police Department Technology

Comments re: Conditions/Restrictions of Grant

If this is a Federal Grant, enter CFDA#:
If applicable enter the State ID #

What is the required drawdown frequency?
(Ex: Monthly, Quarterly) Quarterly

If payment is to be sent by Grantor as a Wire,
Please enter any wire reference/identification # that may be used (if known)

Please list all object codes needed for the grant.
(Attach additional sheets if additional orgs and roll-ups are needed):

Org Code: 26242100

Object Codes: 580600 -$133,411.00

Budget Roll-Up Codes: Yes

I hereby attest that under the penalties of Chapter 656, I will adhere to all regulations in this grant agreement. I am responsible for timely and accurate reimbursements in the amounts listed above.

Lisa J Mills
Signature

9/8/2015
Date

Please attach the following documents:

- Signed Approval to Apply for a Grant Form
- Grant Award Letter
- City Council/Mayor Approval
- Any other relevant documentation

This Form and all relevant attachments will be scanned and attached in the Grant Maintenance module in MUNIS and can be viewed or printed at your convenience.

Beth,
This is still in the application process. I started the paperwork so it will be ready when it goes to Council. There has been so many grant items lately that I just want to try to stay on top of the stuff when I find out about it – which is always after the fact anyway. Technically, this would have been the 62416 project code. Maybe a letter can be assigned after the number?
Whatever you decide is fine. Again, I don't even have the award letter or contract yet.
Thanks!
Lisa

Department of Justice

Office of Justice Programs

Bureau of Justice Assistance

Office of Justice Programs

Washington, D.C. 20531

FED

JAG

August 21, 2015

The Honorable Domenic J. Sarno
City of Springfield
36 Court Street
City Hall
Springfield, MA 01103-1698

Dear Mayor Sarno:

On behalf of Attorney General Loretta Lynch, it is my pleasure to inform you that the Office of Justice Programs has approved your application for funding under the FY 15 Edward Byrne Memorial Justice Assistance Grant (JAG) Program - Local Solicitation in the amount of $133,411 for City of Springfield.

Enclosed you will find the Grant Award and Special Conditions documents. This award is subject to all administrative and financial requirements, including the timely submission of all financial and programmatic reports, resolution of all interim audit findings, and the maintenance of a minimum level of cash-on-hand. Should you not adhere to these requirements, you will be in violation of the terms of this agreement and the award will be subject to termination for cause or other administrative action as appropriate.

If you have questions regarding this award, please contact:

- Program Questions, Zafra Stork, Program Manager at (202) 307-0613; and
- Financial Questions, the Office of the Chief Financial Officer, Customer Service Center (CSC) at (800) 458-0786, or you may contact the CSC at ask.ocfo@usdoj.gov.

Congratulations, and we look forward to working with you.

Sincerely,

Denise O'Donnell
Director

Enclosures

City of Springfield

SCHEDULED

Meeting: 10/05/15 07:00 PM
Initiator: Lindsay B. Hackett
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3216

Byrne JAG Grant - $99,951.36 - No Match (Mayor Sarno)

WHEREAS, the Police Department has been awarded an Edward Byrne Memorial Justice Assistance Grant (JAG) for $99,951.36 From the Department of Justice; and

WHEREAS, the grant is intended for support of Operation REPO - Reaching out to Engage Prolific Offenders; and

WHEREAS, the Department intends to use the grant funds for salary and coordination costs associated with Operation REPO; and

WHEREAS, the Department has accepted the grant and requests authorization from the City Council and the Mayor to expend the grant funds listed below for the purposes of such grants; and

WHEREAS, the Chief Administrative and Financial Officer, after an evaluation of all pertinent financial information reasonably available, has certified that the City's financial resources and revenues are and will continue to be adequate to support the proposed expenditures and obligations involved in the City Council Order authorizing the expenditure of the grant funds listed herein, subject to the approval of the Mayor, without a detrimental impact on the continuous provision of the existing level of municipal services, in accordance with Section 2(f) of Chapter 656 of the Acts of 1989, as added by Section 1 of Chapter 468 of the Acts of 2008.

NOW THEREFORE BE IT ORDERED, acting pursuant to Mass. Gen. Laws Ch. 44, sec. 53A, that the City Council approves the expenditure by the Department of the grant funds listed below for the purposes of such grant, subject to the approval of the Mayor, and the grant funds received shall be deposited with the City Treasurer and held as a separate account and may be expended for the purposes of the grant without further appropriation:

FY16 Edward Byrne Memorial Justice Assistance Grant $99,951.36

REQUEST FOR GRANT SETUP

This form and the required attachments are required by the Office of the City Comptrollers before a Grant Fund and related accounts will be created in MUNIS. Please do not use this form for requesting a non-grant related account to be created – use the Request for New Account form instead. Please return this form and the required attachments to the Office of the City Comptrollers.

All fields are mandatory.

Date of Request	September 8, 2015
Department Requesting Grant Setup	Police
Department Phone # (Please include extension)	787-6385
Name and Title of Person to Contact in Case of Questions	Lisa Willis

Was this Grant previously setup for a prior fiscal year?
If yes, please indicate your previous project number: No

If this is a new Grant, have you filled out the "Approval to apply for a grant" Form?
(Y/N) If yes, please attach a copy of the Approved Form.

Grant Type:

	State – Highway
	Federal Pass-Through DOE– School
	Federal Direct– School
	Federal – City
	State DOE– School
	State Other – School
XX	State – City
	Private/Other

Grant Name: Operation REPO

Total Grant Amount Awarded: $99,951.36

Is this a Reimbursable Grant? (Y/N) Yes
A Reimbursable Grant is defined as one that requires that you pay for expenses first and then you apply to the grantor for a reimbursement of the exact amount actually expended.

If it is a Reimbursable Grant, please enter Grantor contact information or the CID # if Grantor is already in the customer file:

Entity Name	Executive office of Public Safety and Security
Contact Person	Corine Pryme
Street Address	10 Park Plaza Suite 3720
City, State, Zip Code	Boston, MA 02116
Telephone	617-725-3370
Fax	617-725-0267
E-Mail	corine.pryme@state.ma.us

Actual Award Date	July 23, 2015
Board Approval Date	
Start Date	
Expiration Date	September 30, 2016
Renewal Action Date (optional)	

If there are any Matching Funds:
- Type
- Percent
- Amount

Comments re: Description/Purpose of Grant
Engage Prolific Offenders

Comments re: Conditions/Restrictions of Grant

If this is a Federal Grant, enter CFDA#: 16.738

If applicable enter the State ID # :

What is the required drawdown frequency?
(Ex: Monthly, Quarterly) Quarterly

If payment is to be sent by Grantor as a Wire,
Please enter any wire reference/identification # that may be used (if known)

Please list all object codes needed for the grant.
(Attach additional sheets if additional orgs and roll-ups are needed):

Org Code:
Object Codes:
506000-$99,951.36

Budget Roll-Up Codes:

I hereby attest that under the penalties of Chapter 656, I will adhere to all regulations in this grant agreement. I am responsible for timely and accurate reimbursements in the amounts listed above.

Lisa Mullis
Signature

September 8, 2015
Date

Please attach the following documents:

- Signed Approval to Apply for a Grant Form
- Grant Award Letter
- City Council/Mayor Approval
- Any other relevant documentation

This Form and all relevant attachments will be scanned and attached in the Grant Maintenance module in MUNIS and can be viewed or printed at your convenience.

Office of the Governor
Commonwealth of Massachusetts
State House, Boston, MA 02133
Boston, Massachusetts 02108
Tel: 617-725-4000

CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

Op Repo

June 3, 2015

John R. Barbieri, Commissioner
Springfield Police Department
130 Pearl Street
Springfield, MA 01105

Dear Commissioner Barbieri:

Congratulations! I am pleased to inform you that the Springfield Police Department's Program Implementation application has been awarded $99,951.36 in funding from the *Edward J. Byrne Memorial Justice Assistance Grant (JAG) Program* opportunity offered by the Executive Office of Public Safety and Security, Office of Grants and Research (OGR).

Additional correspondence, including all the necessary documents required to make this award official will be forthcoming from OGR.

In the meantime, if you have any questions, please feel free to contact Erin Heaney at Erin.Heaney@state.ma.us or on the telephone at 617-725-3331.

Once again, congratulations on your award and we look forward to working with you and your community on this important public safety initiative.

Sincerely,

Charles D. Baker

Governor Charlie D. Baker

Karyn E Polito

Lieutenant Governor Karyn E. Polito

CT#2016 0019

COMMONWEALTH OF MASSACHUSETTS ~ STANDARD CONTRACT FORM

This form is jointly issued and published by the Executive Office for Administration and Finance (ANF), the Office of the Comptroller (CTR) and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. Any changes to the official printed language of this form shall be void. Additional non-conflicting terms may be added by Attachment. Contractors may not require any additional agreements, engagement letters, contract forms or other additional terms as part of this Contract without prior Department approval. Click on hyperlinks for definitions, instructions and legal requirements that are incorporated by reference into this Contract. An electronic copy of this form is available at www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osd under OSD Forms.

CONTRACTOR LEGAL NAME: City of Springfield Police Department (and d/b/a):	**COMMONWEALTH DEPARTMENT NAME:** Executive Office Of Public Safety & Security **MMARS Department Code:** EPS
Legal Address: (W-9, W-4,T&C): 36 Court Street, Springfield, MA 01103	**Business Mailing Address:** 10 Park Plaza – Suite 3720, Boston, MA 02116
Contract Manager: Lisa J. Willis	**Billing Address** (if different):
E-Mail: lwillis@springfieldpolice.net	**Contract Manager:** Corine Pryme
Phone: (413) 787-6302 **Fax:** (413) 787-6663	**E-Mail:** corine.pryme@state.ma.us
Contractor Vendor Code: VC6000192140	**Phone:** (617) 725-3370 **Fax:** (617) 725-0267
Vendor Code Address ID (e.g. "AD001"): AD 001 (Note: The Address Id Must be set up for EFT payments.)	**MMARS Doc ID(s):** SCEPSBJAG1FY15SPGFLD **RFR/Procurement or Other ID Number:** Grant Application

☑ **NEW CONTRACT**

PROCUREMENT OR EXCEPTION TYPE: (Check one option only)

- ☐ Statewide Contract (OSD or an OSD-designated Department)
- ☐ Collective Purchase (Attach OSD approval, scope, budget)
- ☑ Department Procurement (includes State or Federal grants 815 CMR 2.00) (Attach RFR and Response or other procurement supporting documentation)
- ☐ Emergency Contract (Attach justification for emergency, scope, budget)
- ☐ Contract Employee (Attach Employment Status Form, scope, budget)
- ☐ Legislative/Legal or Other: (Attach authorizing language/justification, scope and budget)

☐ **CONTRACT AMENDMENT**

Enter Current Contract End Date *Prior* to Amendment: ____20

Enter Amendment Amount: $ (or "no change")

AMENDMENT TYPE: (Check one option only. Attach details of Amendment changes.)

- ☐ Amendment to Scope or Budget (Attach updated scope and budget)
- ☐ Interim Contract (Attach justification for Interim Contract and updated scope/budget)
- ☐ Contract Employee (Attach any updates to scope or budget)
- ☐ Legislative/Legal or Other: (Attach authorizing language/justification and updated scope and budget)

The following **COMMONWEALTH TERMS AND CONDITIONS** (T&C) has been executed, filed with CTR and is incorporated by reference into this Contract.

☑ Commonwealth Terms and Conditions ☐ Commonwealth Terms and Conditions For Human and Social Services

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). $ 99,951.36

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: ☑ agree to standard 45 day cycle ☐ statutory/legal or Ready Payments (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.)

Operation Repo - Reach Out and Engage Prolific Offenders. ($99,951.36 FJG13LEPPE-Prevention Education-subaccount 2013djbx0020-cfda 16.738)

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

- ☑ 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 , a date LATER than the Effective Date below and no obligations have been incurred prior to the Effective Date.
- ☐ 3. were incurred as of , 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 09/30/2016 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 makes all certifications required under the attached Contractor Certifications (incorporated by reference if not attached hereto) under the pains and penalties of perjury, 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 including the Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response, 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.

AUTHORIZING SIGNATURE FOR THE CONTRACTOR:

X: Domenic J. Sarno Date: 7/6/15

(Signature and Date Must Be Handwritten At Time of Signature)

Print Name: Domenic J. Sarno

Print Title: Mayor, City of Springfield

AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:

X: Ellen J. Frank Date: 7-23-15

(Signature and Date Must Be Handwritten At Time of Signature)

Print Name: Ellen Frank

Print Title: Executive Director

07-09-15 A09:03 IN

CW2016 0019

COMMONWEALTH OF MASSACHUSETTS ~ STANDARD CONTRACT FORM

This form is jointly issued and published by the Executive Office for Administration and Finance (ANF), the Office of the Comptroller (CTR) and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. Any changes to the official printed language of this form shall be void. Additional non-conflicting terms may be added by Attachment. Contractors may not require any additional agreements, engagement letters, contract forms or other additional terms as part of this Contract without prior Department approval. Click on hyperlinks for definitions, instructions and legal requirements that are incorporated by reference into this Contract. An electronic copy of this form is available at www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osd under OSD Forms.

CONTRACTOR LEGAL NAME: City of Springfield Police Department (and d/b/a):	**COMMONWEALTH DEPARTMENT NAME:** Executive Office Of Public Safety & Security **MMARS Department Code:** EPS
Legal Address: (W-9, W-4,T&C): 36 Court Street, Springfield, MA 01103	**Business Mailing Address:** 10 Park Plaza – Suite 3720, Boston, MA 02116
Contract Manager: Lisa J. Willis	**Billing Address** (if different):
E-Mail: lwillis@springfieldpolice.net	**Contract Manager:** Corine Pryme
Phone: (413) 787-6302 **Fax:** (413) 787-6663	**E-Mail:** corine.pryme@state.ma.us
Contractor Vendor Code: VC6000192140	**Phone:** (617) 725-3370 **Fax:** (617) 725-0267
Vendor Code Address ID (e.g. "AD001"): AD 001 (Note: The Address Id Must be set up for EFT payments.)	**MMARS Doc ID(s):** SCEPSBJAG1FY15SPGFLD **RFR/Procurement or Other ID Number:** Grant Application

☑ **NEW CONTRACT**

PROCUREMENT OR EXCEPTION TYPE: (Check one option only)

- ☐ Statewide Contract (OSD or an OSD-designated Department)
- ☐ Collective Purchase (Attach OSD approval, scope, budget)
- ☑ Department Procurement (includes State or Federal grants 815 CMR 2.00) (Attach RFR and Response or other procurement supporting documentation)
- ☐ Emergency Contract (Attach justification for emergency, scope, budget)
- ☐ Contract Employee (Attach Employment Status Form, scope, budget)
- ☐ Legislative/Legal or Other: (Attach authorizing language/justification, scope and budget)

☐ **CONTRACT AMENDMENT**

Enter Current Contract End Date *Prior* to Amendment: ____20

Enter Amendment Amount: $ (or "no change")

AMENDMENT TYPE: (Check one option only. Attach details of Amendment changes.)

- ☐ Amendment to Scope or Budget (Attach updated scope and budget)
- ☐ Interim Contract (Attach justification for Interim Contract and updated scope/budget)
- ☐ Contract Employee (Attach any updates to scope or budget)
- ☐ Legislative/Legal or Other: (Attach authorizing language/justification and updated scope and budget)

The following **COMMONWEALTH TERMS AND CONDITIONS** (T&C) has been executed, filed with CTR and is incorporated by reference into this Contract.

☑ Commonwealth Terms and Conditions ☐ Commonwealth Terms and Conditions For Human and Social Services

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). $ 99,951.36

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: ☑ agree to standard 45 day cycle ☐ statutory/legal or Ready Payments (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.)

Operation Repo - Reach Out and Engage Prolific Offenders. ($99,951.36 FJG13LEPPE-Prevention Education-subaccount 2013djbx0020-cfda 16.738)

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

- ☑ 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 , a date LATER than the Effective Date below and no obligations have been incurred prior to the Effective Date.
- ☐ 3. were incurred as of , 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 09/30/2016 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 makes all certifications required under the attached Contractor Certifications (incorporated by reference if not attached hereto) under the pains and penalties of perjury, 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 including the Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response, 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.

AUTHORIZING SIGNATURE FOR THE CONTRACTOR:

X: Domenic J. Sarno Date: 7/2/15

(Signature and Date Must Be Handwritten At Time of Signature)

Print Name: Domenic J. Sarno

Print Title: Mayor, City of Springfield

AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:

X: Ellen G. Frank Date: 7-23-15

(Signature and Date Must Be Handwritten At Time of Signature)

Print Name: Ellen Frank

Print Title: Executive Director

07-09-15 A09:03 IN

City of Springfield

SCHEDULED

Meeting: 10/05/15 07:00 PM
Initiator: Melanie Acobe
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3214

FY16 Health Services for the Homeless Grant Increase - No Match Required $78,836.00 (Mayor Sarno)

WHEREAS, the Department of Health and Human Services, Health Services for the Homeless (HSH) has been awarded two grant increases totaling $78,836.00 For the "Health Center Cluster" grant from U.S. Department of Health & Human Services, Health Resources and Services Administration for the budget period November 01, 2014 through January 31, 2016; and

WHEREAS, the City of Springfield, Health & Humans Services Division, Health Services for the Homeless through advocacy, accessibility, and cultural sensitivity provides medical, mental health, dental and case management services to homeless population in the tri-county area of Berkshire, Hampshire and Hampden; and

WHEREAS, the Department intends intend to expand services at the adolescent clinic; and

WHEREAS, the Department has accepted the grant funds and requests authorization from the City Council and the Mayor to expend the grant funds listed below for the purposes of such grants; and

WHEREAS, the Chief Administrative and Financial Officer, after an evaluation of all pertinent financial information reasonably available, has certified that the City's financial resources and revenues are and will continue to be adequate to support the proposed expenditures and obligations involved in the City Council Order authorizing the expenditure of the grant funds listed herein, subject to the approval of the Mayor, without a detrimental impact on the continuous provision of the existing level of municipal services, in accordance with Section 2(f) of Chapter 656 of the Acts of 1989, as added by Section 1 of Chapter 468 of the Acts of 2008.

NOW THEREFORE BE IT ORDERED, acting pursuant to Mass. Gen. Laws ch. 44, sec. 53A, that the City Council approves the expenditure by the Department of the grant funds listed below for the purposes of such grant, subject to the approval of the Mayor, and the grant funds received shall be deposited with the City Treasurer and held as a separate account and may be expended for the purposes of the grant without further appropriation.

FY16 Health Services for the Homeless Grant Increase - No Match Required $78,836.00

REQUEST FOR GRANT SETUP

This form and the required attachments are required by the Office of the City Comptrollers before a Grant Fund and related accounts will be created in MUNIS. Please do not use this form for requesting a non-grant related account to be created – use the Request for New Account form instead. Please return this form and the required attachments to the Office of the City Comptrollers.

All fields are mandatory.

Date of Request	22 September 2015
Department Requesting Grant Setup	SHHS
Department Phone # (Please include extension)	787-6454
Name and Title of Person to Contact in Case of Questions	Helen Caulton-Harris

Was this Grant previously setup for a prior fiscal year?
If yes, please indicate your previous project number: 67715

If this is a new Grant, have you filled out the "Approval to apply for a grant" Form?
(Y/N) If yes, please attach a copy of the Approved Form.

	Grant Type:
	State – Highway
	Federal Pass-Through DOE– School
	Federal Direct– School
XX	Federal – City
	State DOE– School
	State Other – School
	State – City
	Private/Other

Grant Name: Health Services for the Homeless

Total Grant Amount Awarded: $ 78,836.00

Is this a Reimbursable Grant? (Y/N) Yes
A Reimbursable Grant is defined as one that requires that you pay for expenses first and then you apply to the grantor for a reimbursement of the exact amount actually expended.

If it is a Reimbursable Grant, please enter Grantor contact information or the CID # if Grantor is already in the customer file:

Entity Name	HRSA
Contact Person	Sheryl Alexander
Street Address	5600 Fishers Lane
City, State, Zip Code	Rockville, MD 20852-1750
Telephone	(301) 443-5630
Fax	(301) 480-7225
E-Mail	salexander1@hrsa.gov

Actual Award Date 21 September 2015
Board Approval Date
Start Date 1 November 2014
Expiration Date 31 January 2016
Renewal Action Date (optional)
If there are any Matching Funds:
Type
Percent
Amount

Comments re: Description/Purpose of Grant
To expand services at the adolescent clinic

Comments re: Conditions/Restrictions of Grant

If this is a Federal Grant, enter CFDA#:

If applicable enter the State ID # :

What is the required drawdown frequency?
(Ex: Monthly, Quarterly) Quarterly

If payment is to be sent by Grantor as a Wire,
Please enter any wire reference/identification # that may be used (if known)

H80CS00001-12-00

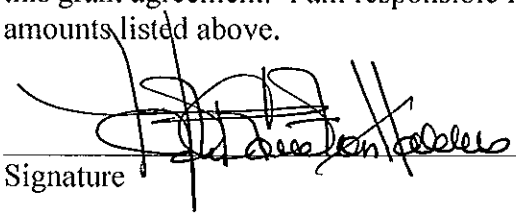
Please list all object codes needed for the grant.
(Attach additional sheets if additional orgs and roll-ups are needed):

Org Code: 26775205

Object Codes: 530105

Budget Roll-Up Codes: Yes

I hereby attest that under the penalties of Chapter 656, I will adhere to all regulations in this grant agreement. I am responsible for timely and accurate reimbursements in the amounts listed above.



Signature

9/23/2015
Date

Please attach the following documents:

- Signed Approval to Apply for a Grant Form
- Grant Award Letter
- City Council/Mayor Approval
- Any other relevant documentation

This Form and all relevant attachments will be scanned and attached in the Grant Maintenance module in MUNIS and can be viewed or printed at your convenience.

1. DATE ISSUED: 09/21/2015	**2. PROGRAM CFDA:** 93.224	
3. SUPERSEDES AWARD NOTICE dated: 09/16/2015 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded.		
4a. AWARD NO.: 6 H80CS00001-14-11	**4b. GRANT NO.:** H80CS00001	**5. FORMER GRANT NO.:** H66CS00329
6. PROJECT PERIOD: **FROM:** 11/01/2001 **THROUGH:** 01/31/2016		
7. BUDGET PERIOD: **FROM:** 11/01/2014 **THROUGH:** 01/31/2016		

U.S. Department of Health and Human Services
HRSA
Health Resources and Services Administration

NOTICE OF AWARD
AUTHORIZATION (Legislation/Regulation)
Public Health Service Act, Title III, Section 330
Public Health Service Act, Section 330, 42 U.S.C. 254b
Affordable Care Act, Section 10503

8. TITLE OF PROJECT (OR PROGRAM): HEALTH CENTER CLUSTER

9. GRANTEE NAME AND ADDRESS:
CITY OF SPRINGFIELD, MASSACHUSETTS
95 STATE STREET
SPRINGFIELD, MA 01103-2073
DUNS NUMBER:
198910523
BHCMIS # 010120

10. DIRECTOR: (PROGRAM DIRECTOR/PRINCIPAL INVESTIGATOR)
HELEN R CAULTON-HARRIS
CITY OF SPRINGFIELD, MASSACHUSETTS
95 State St
Springfield, MA 01103-2073

11.APPROVED BUDGET:(Excludes Direct Assistance)
[ ] Grant Funds Only
[X] Total project costs including grant funds and all other financial participation

a . Salaries and Wages :	$944,754.00
b . Fringe Benefits :	$321,224.00
c . Total Personnel Costs :	$1,265,978.00
d . Consultant Costs :	$0.00
e . Equipment :	$47,900.00
f . Supplies :	$41,200.00
g . Travel :	$39,400.00
h . Construction/Alteration and Renovation :	$0.00
i . Other :	$597,565.00
j . Consortium/Contractual Costs :	$1,950,243.00
k . Trainee Related Expenses :	$0.00
l . Trainee Stipends :	$0.00
m . Trainee Tuition and Fees :	$0.00
n . Trainee Travel :	$0.00
o . TOTAL DIRECT COSTS :	$3,942,286.00
p . INDIRECT COSTS (Rate: % of S&W/TADC) :	$9,607.00
q . TOTAL APPROVED BUDGET :	$3,951,893.00
i. Less Non-Federal Share:	$1,813,626.00
ii. Federal Share:	$2,138,267.00

12. AWARD COMPUTATION FOR FINANCIAL ASSISTANCE:

a. Authorized Financial Assistance This Period	**$2,138,267.00**
b. Less Unobligated Balance from Prior Budget Periods	
i. Additional Authority	$0.00
ii. Offset	$0.00
c. Unawarded Balance of Current Year's Funds	$0.00
d. Less Cumulative Prior Awards(s) This Budget Period	$2,059,431.00
e. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	**$78,836.00**

13. RECOMMENDED FUTURE SUPPORT: (Subject to the availability of funds and satisfactory progress of project)

YEAR	TOTAL COSTS
Not applicable	

14. APPROVED DIRECT ASSISTANCE BUDGET:(In lieu of cash)

a. Amount of Direct Assistance	$0.00
b. Less Unawarded Balance of Current Year's Funds	$0.00
c. Less Cumulative Prior Awards(s) This Budget Period	$0.00
d. AMOUNT OF DIRECT ASSISTANCE THIS ACTION	**$0.00**

15. PROGRAM INCOME SUBJECT TO 45 CFR 75.307 SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:
A=Addition B=Deduction C=Cost Sharing or Matching D=Other **[D]**
Estimated Program Income: $810,000.00

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY HRSA, IS ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:
a. The grant program legislation cited above. b. The grant program regulation cited above. c. This award notice including terms and conditions, if any, noted below under REMARKS. d. 45 CFR Part 75 as applicable. In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.

REMARKS: (Other Terms and Conditions Attached **[X]Yes [ ]No)**

Electronically signed by Angela Wade , Grants Management Officer on : 09/21/2015

17. OBJ. CLASS: 41.51	**18. CRS-EIN:** 1046001415A2	**19. FUTURE RECOMMENDED FUNDING:** $1,412,249.00

FY-CAN	CFDA	DOCUMENT NO.	AMT. FIN. ASST.	AMT. DIR. ASST.	SUB PROGRAM CODE	SUB ACCOUNT CODE
15 - 398879E	93.527	15H80CS00001	$78,836.00	$0.00	HCH	HealthCareCenters_15

HRSA Electronic Handbooks (EHBs) Registration Requirements

The Project Director of the grant (listed on this NoA) and the Authorizing Official of the grantee organization are required to register (if not already registered) within HRSA's Electronic Handbooks (EHBs). Registration within HRSA EHBs is required only once for each user for each organization they represent. To complete the registration quickly and efficiently we recommend that you note the 10-digit grant number from box 4b of this NoA. After you have completed the initial registration steps (i.e.,created an individual account and associated it with the correct grantee organization record), be sure to add this grant to your portfolio. This registration in HRSA EHBs is required for submission of noncompeting continuation applications. In addition, you can also use HRSA EHBs to perform other activities such as updating addresses, updating email addresses and submitting certain deliverables electronically. Visit https://grants3.hrsa.gov/2010/WebEPSExternal/Interface/common/accesscontrol/login.aspx to use the system. Additional help is available online and/or from the HRSA Call Center at 877-Go4-HRSA/877-464-4772.

Terms and Conditions

Failure to comply with the remarks, terms, conditions, or reporting requirements may result in a draw down restriction being placed on your Payment Management System account or denial of future funding.

Grant Specific Term(s)

1. This Notice of Award (NoA) provides funds for an increase to the grantee's annual ongoing base funding in accordance with statutory requirements and, as applicable, new and/or continued patient centered medical home recognition for one or more health center sites. The increase in annual base funding has been added to the OTHER Category within the Federal Object Class Budget Category breakdown as reflected on the NoA. Health centers may reallocate these federal funds as appropriate for their budgetary needs. Prior approval is required from HRSA ONLY when proposing to shift federal funds among object class budget categories in amounts that exceed the specified threshold prescribed in 45 CFR 75. In addition, health centers are reminded of the requirement to track expenditures of federal funds and should consult Policy Information Notice (PIN) 2013-01: Health Center Budgeting and Accounting Requirements for further guidance.

All prior terms and conditions remain in effect unless specifically removed.

Contacts

NoA Email Address(es):

Name	Role	Email
Christopher Caputo	Business Official	ccaputo@springfieldcityhall.com
Helen R Caulton-Harris	Program Director	hcaulton@springfieldcityhall.com

Note: NoA emailed to these address(es)

Program Contact:

For assistance on programmatic issues, please contact Sheryl Alexander at:
MailStop Code: 15-93
BPHC/NED
5600 Fishers Ln
Rockville, MD, 20852-1750
Email: salexander1@hrsa.gov
Phone: (301) 443-5630

Division of Grants Management Operations:

For assistance on grant administration issues, please contact Francesca Crawford at:
MailStop Code: MSC 10SWH03
OFAM/DGMO/HCB
5600 Fishers Lane, MSC 10SWH03
Rockville, MD, 20857-
Email: fcrawford@hrsa.gov
Phone: (301) 443-6363

City of Springfield

SCHEDULED

Meeting: 10/05/15 07:00 PM
Initiator: Mitchell Doty
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3224

Park Department Grant - Health New England Open Gym: $40,820 (Mayor Sarno)

WHEREAS, the Parks Department ("Department") has been awarded a Open Gym Grant ("grant") in the amount of $40,820.00 from Health New England's Charitable Giving Committee ("HNE"); and

WHEREAS, the purpose of the grant is to improve the health status and quality of life in the community; and

WHEREAS, the Department intends to use the grant funds to pay for costs associate with the Open Gym program; and

WHEREAS, the Department has accepted the grant and requests authorization from the City Council and the Mayor to expend the grant funds listed below for the purposes of such grants; and

WHEREAS, the Chief Administrative and Financial Officer, after an evaluation of all pertinent financial information reasonably available, has certified that the City's financial resources and revenues are and will continue to be adequate to support the proposed expenditures and obligations involved in the City Council Order authorizing the expenditure of the grant funds and the required City matching contribution described herein, subject to the approval of the Mayor, without a detrimental impact on the continuous provision of the existing level of municipal services, in accordance with Section 2(f) of Chapter 656 of the Acts of 1989, as added by Section 1 of Chapter 468 of the Acts of 2008.

NOW THEREFORE BE IT ORDERED, acting pursuant to Mass. Gen. Laws Ch. 44, Sec. 53A, that the City Council approves the expenditure by the Department of the grant funds listed below for the purposes of such grant, subject to the approval of the Mayor, and the grant funds received shall be deposited with the City Treasurer and held as a separate account and may be expended for the purposes of the grant without further appropriation:

Fiscal Year 2016 Appropriation
Health New England Open Gym Grant - $40,820.00

August 13, 2015

Paula E. Thayer
City of Springfield
Park & Recreation Department
200 Trafton Road
Springfield, MA 01108

Dear Paula:

I am very excited to let you know that HNE's Charitable Giving Committee approved $40,820 for the Open Gyms Program. As you know HNE is committed to improving the health status and the quality of life of the communities we serve. The Open Gym Program is a great way to help make our mission become a reality.

I know that Mayor Sarno is a big supporter of this program and HNE is proud to sponsor it again for the upcoming school year. In order to add another dimension to the program, we respectfully request that Mayor Sarno ask the Police Commissioner to have City officers visit the programs on a regular visit to continue making positive connections with our City youth.

On a personal note, both Chris and I enjoyed meeting with you and Randy Piteo and look forward to yet another successful year with the Open Gym Program. Thank you for all the work you do to get this program operational!

Sincerely,

Judith Corridan Danek

Judith Corridan Danek
Director, Office of the President and Community Relations

cc: Patrick J. Sullivan
Mayor Domenic J. Sarno

City of Springfield

SCHEDULED

Meeting: 10/05/15 07:00 PM
Initiator: Melanie Acobe
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3218

FY16 MCC Grant Acceptance - No Match Required $11,500 (Mayor Sarno)

WHEREAS, the Library Department ("Department") has been awarded a Massachusetts Cultural Council, Cultural Investment Portfolio (CIP) Grant of $11,500.00 from the Massachusetts Cultural Council (MCC); and

WHEREAS, the grant funds are intended to promote a vigorous art and cultural environment that seeks to improve the quality of life for Commonwealth residents; and

WHEREAS, the Department intends to use the grant funds to engage the community by connecting them to timely, accessible resources that will promote responsive public service, lifelong learning, independence and individual personal achievement for citizens of all ages. Further, the department will provide opportunities for community members to challenge and examine their world, and to explore the diversity of other worlds and heritages; and

WHEREAS, the Department has accepted the grant and requests authorization from the City Council and the Mayor to expend the grant funds listed below for the purposes of such grants; and

WHEREAS, the Chief Administrative and Financial Officer, after an evaluation of all pertinent financial information reasonably available, has certified that the City's financial resources and revenues are and will continue to be adequate to support the proposed expenditures and obligations involved in the City Council Order authorizing the expenditure of the grant funds listed herein, subject to the approval of the Mayor, without a detrimental impact on the continuous provision of the existing level of municipal services, in accordance with Section 2(f) of Chapter 656 of the Acts of 1989, as added by Section 1 of Chapter 468 of the Acts of 2008.

NOW THEREFORE BE IT ORDERED, acting pursuant to Mass. Gen. Laws ch. 44, sec. 53A, that the City Council approves the expenditure by the Department of the grant funds listed below for the purposes of such grant, subject to the approval of the Mayor, and the grant funds received shall be deposited with the City Treasurer and held as a separate account and may be expended for the purposes of the grant without further appropriation:

FY16 MCC Grant Acceptance - $11,500.00

REQUEST FOR GRANT SETUP

This form and the required attachments are required by the Office of the City Comptrollers before a Grant Fund and related accounts will be created in MUNIS. Please do not use this form for requesting a non-grant related account to be created – use the Request for New Account form instead. Please return this form and the required attachments to the Office of the City Comptrollers.

All fields are mandatory.

Date of Request	9/25/2015
Department Requesting Grant Setup	Library
Department Phone # (Please include extension)	263-6828 x290
Name and Title of Person to Contact in Case of Questions	C Leaders, Bus Mgr

Was this Grant previously setup for a prior fiscal year? Yes
If yes, please indicate your previous project number: 83615

If this is a new Grant, have you filled out the "Approval to apply for a grant" Form? (Y/N) If yes, please attach a copy of the Approved Form.

	Grant Type:
	State – Highway
	Federal Pass-Through DOE– School
	Federal Direct– School
	Federal – City
	State DOE– School
	State Other – School
X	State – City
	Private/Other

Grant Name: Massachusetts Cultural Council

Total Grant Amount Awarded: $11,500
Is this a Reimbursable Grant? (Y/N) N
A Reimbursable Grant is defined as one that requires that you pay for expenses first and then you apply to the grantor for a reimbursement of the exact amount actually expended.

If it is a Reimbursable Grant, please enter Grantor contact information or the CID # if Grantor is already in the customer file:

- Entity Name
- Contact Person
- Street Address
- City, State, Zip Code
- Telephone
- Fax
- E-Mail

Actual Award Date 9/16/2015
Board Approval Date
Start Date 9/16/2015
Expiration Date 6/30/2016
Renewal Action Date (optional)
If there are any Matching Funds:

- Type
- Percent
- Amount

Comments re: Description/Purpose of Grant

Comments re: Conditions/Restrictions of Grant

If this is a Federal Grant, enter CFDA#:

If applicable enter the State ID # :

What is the required drawdown frequency?
(Ex: Monthly, Quarterly)

If payment is to be sent by Grantor as a Wire,
Please enter any wire reference/identification # that may be used (if known)

Please list all object codes needed for the grant.
(Attach additional sheets if additional orgs and roll-ups are needed):

Org Code: 28366105

Object Codes: 530105 551700 571100 551300 524020 531040 531200 580600

Budget Roll-Up Codes: YES

I hereby attest that under the penalties of Chapter 656, I will adhere to all regulations in this grant agreement. I am responsible for timely and accurate reimbursements in the amounts listed above.

_____Molly Fogarty_ __9/25/2015_____
Signature Date

Please attach the following documents:

- Signed Approval to Apply for a Grant Form
- Grant Award Letter
- City Council/Mayor Approval
- Any other relevant documentation

This Form and all relevant attachments will be scanned and attached in the Grant Maintenance module in MUNIS and can be viewed or printed at your convenience.

MASSACHUSETTS CULTURAL COUNCIL

10 St. James Avenue
Boston, MA 02116-3803

617.858.2700
800.232.0960 Toll Free
617.727.0044 Fax
mcc@art.state.ma.us E-mail
www.massculturalcouncil.org W

1:40 9/24/15

please have Helen C. & Molly F. q T f. Review 1st for future I sign. Thanks gf

September 16, 2015

Domenic Sarno, Mayor
City of Springfield
City Hall
36 Court Street
Springfield, MA 01103-1683

Dear Mayor Sarno:

Congratulations! We are pleased to inform you that Springfield City Library has been awarded a Massachusetts Cultural Council (MCC) grant of $11,500 in the Colleagues category of the Cultural Investment Portfolio (CIP) for FY16 (Grant #FY16-CI-COL-0523). The enclosed Contract Package contains award instructions and reporting requirements for this grant.

Please review the contract carefully and return the required paperwork to Cyndy Gaviglio, Contracts Officer at the MCC by Monday, February 1, 2016. This will help us process the award as quickly as possible. For questions about the contract, please contact Cyndy at 617/858-2711 or Cyndy.Gaviglio@art.state.ma.us.

Please see Attachment A of the Contract Package for reporting requirements and deadlines specific to your organization. For questions about the FY16 CIP grant, or about future funding through the program, please contact Michael Ibrahim, Program Manager for Colleagues, at 617/858-2737 or Michael.Ibrahim@art.state.ma.us

We are delighted to be able to support your organization, and to consider you part of our "Portfolio." Thank you for your valuable contributions to the cultural vitality of Massachusetts.

Sincerely,

Ira S. Lapidus
Chair

Anita Walker
Executive Director

Enclosures

cc: Molly Fogarty, Library Director, Springfield City Library

City of Springfield

SCHEDULED

Meeting: 10/05/15 07:00 PM
Initiator: Mitchell Doty
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3223

Self Insurance to Law Department Settlement Account - $150,000 (Mayor Sarno)

WHEREAS, to meet the expenses of the City of Springfield, pursuant to Mass. Gen. Laws Ch. 44, Section 33B, Ch. 59, Section 23 and Chapter 468 of the Acts of 2008, the Chief Administrative and Financial Officer and his Honor the Mayor have requested authorization from the City Council to transfer the sum of $150,000 from FY16 Self Insurance - Professional Services to the Law Department Settlement Account for pending settlements against the City.

WHEREAS, after reviewing this order, the Chief Administrative and Financial Officer has certified to the Mayor and City Council, that in his professional opinion, after an evaluation of all pertinent financial information reasonably available, the City's financial resources and revenues are and will continue to be adequate to support the proposed expenditures and obligations involved in the transfer, without a detrimental impact on the continuous provision of the existing level of municipal services, in accordance with Section 2(f) of Chapter 656 of the Acts of 1989, as added by Section 1 of Chapter 468 of the Acts of 2008.

NOW THEREFORE BE IT ORDERED, that the City Council approves the transfer of the sum of $150,000 from FY16 Self Insurance - Professional Services to the Law Department Settlement Account.

From: Self Insurance - Professional Services

8219-10-135-0000-0000-0010-000000-0000000-530105 **$150,000.00**

To: Law Department - Settlement Claims

0100-10-151-0000-0000-0010-000000-0000000-576400 **$150,000.00**

City of Springfield
36 Court Street
Springfield, MA 01103

Division of Administration
and Finance

To: Springfield City Council

From: Timothy J. Plante, Chief Administrative & Financial Officer

Date: September 30, 2015

Re: Order for Council Meeting – October 5, 2015

Cc: Mayor Sarno

Purpose: The purpose of this memo is to provide an explanation of the order sponsored by the Mayor for the October 5, 2015 Council meeting that requests a transfer of $150,000.00 from Self Insurance – Professional Services to the Law Department Settlement Claims line item.

Background: Because of active litigation, approximately $150,000.00 will be required to pay anticipated judgments. This transfer will increase the Settlement Claims line item and fully fund the expected amounts.

CAFO Certification: This memorandum will confirm that in my professional opinion, as the Chief Administrative and Financial Officer, after an evaluation of all pertinent financial information reasonably available, that the City's financial resources and revenues are and will continue to be adequate to support the proposed expenditures and obligations involved in this City Council Order, without a detrimental impact on the continuous provision of the existing level of municipal services, in accordance with Section 2(f) of Chapter 656 of the Acts of 1989, as added by Section 1 of Chapter 468 of the Acts of 2008.

> This certification is made in accordance with Section 2(f) of Chapter 656 of the Acts of 1989, as added by Section 1 of Chapter 468 of the Acts of 2008.

City of Springfield

SCHEDULED

Meeting: 10/05/15 07:00 PM
Initiator: Melanie Acobe
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3225

Bill of Prior Year - Elders Department - $1,808.89 (Mayor Sarno)

WHEREAS, to meet expenses incurred by the City of Springfield, pursuant to Mass. Gen. Laws ch. 44 Section 64 and Chapter 468 of the Acts of 2008, the Chief Administrative and Financial Officer and his Honor the Mayor have requested authorization from the City Council for the Elder Affairs Department to pay a bill from a previous fiscal year totaling $1,808.89; and

WHEREAS, the Elections Department will make payment for unpaid bills of a previous fiscal year from their FY16 General Fund Operating Budgets; and

WHEREAS, the Chief Administrative and Financial Officer has provided a written certification to the Mayor and City Council, that in his professional opinion, after an evaluation of all pertinent financial information reasonably available, the City's financial resources and revenues are and will continue to be adequate to support the proposed expenditures and obligations involved in the payments, without a detrimental impact on the continuous provision of the existing level of municipal services, in accordance with Section 2(f) of Chapter 656 of the Acts of 1989, as added by Section 1 of Chapter 468 of the Acts of 2008; and

NOW THEREFORE BE IT ORDERED, that the City Council approves the payment of the bills listed on the attached Elders BOPY from the FY16 General Fund Departmental Operating Budgets for the expenses incurred in a previous fiscal year.

City of Springfield
36 Court Street
Springfield, MA 01103

Division of Administration
and Finance

To: Springfield City Council

From: TJ Plante, Chief Administrative & Financial Officer

Date: September 29, 2015

Re: Order for Council Meeting – October 5, 2015

Cc: Mayor Sarno

Purpose: The purpose of this memo is to provide an explanation of the order sponsored by the Mayor for the October 5, 2015 Council meeting, which will pay prior years' invoices totaling $1,808.89.

Background: This is a request to allow the Elections Department to pay a previous year's bill from the current year (FY16) budget. Listed below are the department invoices, due dates, reason and amounts.

Department	Invoice #	Vendor	Date	Reason	Amount
Elders	5036988069	Ricoh	7/20/2015	Printer Services	$ 480.41
Elders		W.B. Mason	8/4/2015	Office Suplies	$ 955.98
Elders	497818	A.C. Produce	3/17/2015	Food	$ 372.50
Total					**$1,808.89**

CAFO Certification: This memorandum will confirm that in my professional opinion, as the Chief Administrative and Financial Officer, after an evaluation of all pertinent financial information reasonably available, that the City's financial resources and revenues are and will continue to be adequate to support the proposed expenditures and obligations involved in this City Council Order, without a detrimental impact on the continuous provision of the existing level of municipal services, in accordance with Section 2(f) of Chapter 656 of the Acts of 1989, as added by Section 1 of Chapter 468 of the Acts of 2008.

This certification is made in accordance with Section 2(f) of Chapter 656 of the Acts of 1989, as added by Section 1 of Chapter 468 of the Acts of 2008.

Ricoh USA, Inc
Attn: Customer Administration
70 Valley Stream Parkway
Malvern PA US 19355

Federal ID:23-0334400
DUNS# 04-396-4519

INVOICE

RICOH

010

286 1 MB 0.439 2 Return Service Requested
CITY OF SPRINGFIELD
Attn: Accounts Payable
DEPT OF ELDER SERVICES
1600 E COLUMBUS AVE FL 2
SPRINGFIELD, MA 01103-1614

Seq# 000286

Invoice Number	Invoice Date
5036988069	07/20/2015
Terms	Due Date
30 NET	08/19/2015
Customer Number	Purchase Order Number
13730055	15004368-00 FY2015

We appreciate your business.
For any questions, please call 1-888-456-6457
or visit our website www.ricoh-usa.com to order additional products, supplies, services or to submit meter reads

For details on Ricoh's EPEAT and environmental initiatives, visit www.ricoh-usa.com/environment. Ricoh has posted to its website take back, recycling, paper content, reporting and design information for its imaging equipment/ Toner Containers/ packaging to meet EPEAT criteria. None of the returned material goes to landfill or incineration.

Contract Billing Summary					Amount	Sales Tax	Total
Contract Number	3765570						
Number of Equipment	1						
Black and White	Additional Images	04/01/2015 to 06/30/2015 53049	@	0.007200	381.95	0.00	381.95
Color	Additional Images	04/01/2015 to 06/30/2015 13675	@	0.007200	98.46	0.00	98.46
				Total	480.41	0.00	480.41

CANT PAY
NO PO

Regular Bill

Amount Due 480.41

CITY OF SPRINGFIELD
DEPT OF ELDER SERVICES
1600 E COLUMBUS AVE FL 2
SPRINGFIELD MA 01103

Detach and Return This Portion With Your Payment or Pay Online at www.ricoh-usa.com
To ensure proper credit to your account, please write your customer and invoice number on your check

Make check payable and remit to :

Ricoh USA, Inc
P.O. Box 827577
PHILADELPHIA PA 19182-7577

Customer No:	13730055
Invoice Number	5036988069

Amount Due: 480.41

Thank you for choosing Ricoh USA, Inc.

00 005036988069 00137300554 00000480418 000000000 000000000

Attachment: Elders BOPY (3225 : Bill of Prior Year - Elders - $1,808.89)

Ricoh USA, Inc
Attn: Customer Administration
70 Valley Stream Parkway
Malvern PA US 19355

INVOICE

RICOH

Invoice Number	Invoice Date
5036988069	07/20/2015
Purchase Order Number	Contract Number
15004368-00 FY2015	3765570
Customer Name	
CITY OF SPRINGFIELD	

Equipment Location	Equipment Detail Service Offering	Billing Details				Amount	Sales Tax	Total
CITY OF SPRINGFIELD 1600 E COLUMBUS AVE FL 2 DEPT OF ELDER SERVICES SPRINGFIELD MA 01103 DEPARTMENT OF ELDER AFFAIRS - - -	RICOH MPC4503 EID 13082781 MFG E173M810026 S/N C81030922	**Black and White** Current Read Previous Read Total Images Allowance Additional Images	 220870 167821 53049 0 53049	 @	 06/30/2015 04/01/2015 0.007200	381.95	0.00	381.95
		Color Current Read Previous Read Total Images Allowance Additional Images	 86114 72439 13675 0 13675	 @	 06/30/2015 04/01/2015 0.007200	98.46	0.00	98.46
		Total				**480.41**	**0.00**	**480.41**

4.12.b

WHO BUT W.B.MASON

59 CENTRE ST. BROCKTON, MA 02301-4014
800-242-5892
Address Service Requested

for correspondence only
888-WB-MASON www.wbmason.com

STATEMENT OF ACCOUNT

Statement Date: 08/04/2015
Customer Number: C1128862

*L0A888281**********ALL*FOR*AADC*060

OFFICE OF ELDER AFFAIRS
CITY OF SPRINGFIELD 1600 COLUMBUS AVE
SPRINGFIELD, MA 01103

Please make checks payable to:
W.B. MASON CO., INC.
P.O. BOX 981101
Boston, MA 02298-1101

To pay by credit card please call 1-800-242-5892

THIS IS NOT AN INVOICE

If you have recently paid invoices noted below please disregard statement

CURRENT	1-30 DAYS PAST DUE:	31-60 DAYS PAST DUE:	61-90 DAYS PAST DUE:	OVER 90 DAYS PAST DUE:
0.00	(0.30)	(60.00)	0.00	1,016.28

TRANS DATE	TRANSACTION NUMBER	SALES ORDER	CUSTOMER REFERENCE	TRANS TYPE	ORIGINAL AMOUNT	PAID OR ADJUSTED	OPEN AMOUNT
06/10/2011	CR0104886	S001374051	11014989	Credit	(15.46)	(4.42)	(11.04)
04/06/2012	CR0399926	S004918464	Katie Ryan	Credit	(68.20)	(62.69)	(5.51)
01/09/2013				Payment	(528.98)	0.00	(528.98)
07/18/2013				Payment	(237.44)	0.00	(237.44)
09/18/2013	CR1120242	S013938018	Walter	Credit	(9.36)	(3.89)	(5.47)
12/23/2013	I15500530	S015719356	Walter	Invoice	555.16	0.00	555.16
01/15/2014	CR1295895	S016261014	Walter	Credit	(277.58)	(266.74)	(10.84)
04/02/2014				Payment	(251.50)	0.00	(251.50)
04/02/2014				Payment	(124.47)	(13.04)	(111.43)
05/06/2014	CR1476543	S018562362	Katie Ryan	Credit	(455.95)	(442.96)	(12.99)
09/24/2014	CR1705986	S021547599	Katie Ryan	Credit	(24.00)	0.00	(24.00)
12/09/2014	I22315920	S023332637	Katie Ryan	Invoice	699.99	0.00	699.99
12/18/2014	I22542316	S023641097	Katie Ryan	Invoice	90.53	0.00	90.53
12/19/2014	I22574234	S023675604	Katie Ryan	Invoice	56.82	0.00	56.82
12/19/2014	I22574420	S023676866	Katie Ryan	Invoice	63.91	0.00	63.91
12/23/2014	I22628101	S023641097	Katie Ryan	Invoice	48.60	0.00	48.60
01/07/2015	I22849051	S023641097	Katie Ryan	Invoice	26.79	0.00	26.79
01/08/2015	I22894515	S024024424	Katie Ryan	Invoice	390.85	0.00	390.85
01/29/2015	I23377564	S024554201	Katie Ryan	Invoice	207.84	0.00	207.84
03/16/2015	I24337623	S025639877	15008892-000	Invoice	74.99	0.00	74.99
05/29/2015	CR2216555	S027438377	Katie Ryan	Credit	(60.00)	0.00	(60.00)
07/13/2015				Payment	(0.30)	0.00	(0.30)

BALANCE DUE: $955.98

Credit 1235.50

Attachment: Elders BOPY (3225 : Bill of Prior Year - Elders - $1,808.89)

AC PRODUCE
RETAIL • WHOLESALE
FRESH FRUITS AND VEGETABLES
487 Main Street Springfield, MA 01105
(413) 737-3086 1-877-FRESHAC
FAX (413) 734-1827

INVOICE

DATE 3/17/2015 INVOICE NO. 437811

BILL TO:

City of Springfield
Department of Elder Affairs
1600 E. Columbus Ave.
Springfield, Ma. 01103

SHIP TO.

P.O. NUMBER	TERMS	REP	SHIP	VIA	F.O.B.	PROJECT
	Net 15		3/17/2015			1.5% Service Charge per month (18% a charge) on all overdue accounts after days. Customer will assume all collecti costs, including attorney's fees.

QUANTITY	ITEM CODE	DESCRIPTION	PRICE EACH	AMOUNT
		Sullivan Safety Complex 1212 Carew Street		
C260	150	MINI SANDWICHES	1.50	225.00
C260	26.5	PASTA SALAD	5.00	132.50
9003	1	***DELIVERY CHARGE***	15.00	15.00

CAN'T PAY

CA

perishable agricultural commodities listed on this invoice are sold subject to the statutory trust authorized by Section 5 (c) ne perishable Agricultural Commodities Act. 1930 (7U.S.C.499e(c)). The seller of these commodities retains a trust claim r these commodities, all inventories of food or other products derived from these commodities, and any receivables or ceeds from the sale of these commodities until full payment is received.

TOTAL $372.50

City of Springfield
36 Court Street
Springfield, MA 01103

SCHEDULED

RESOLUTION (ID # 3226)

Meeting: 10/05/15 07:00 PM
Department: City Council
Category: General
Prepared By: Karla Bourassa
Initiator: Orlando Ramos
Sponsors:
DOC ID: 3226 A

Mental Health

Resolution in Support of Front-line Mental Health Workers in Springfield

WHEREAS like communities across Massachusetts, the City of Springfield faces challenges associated with the ongoing opioid epidemic - and the addiction crisis and community violence that comes with it; and

WHEREAS the Springfield City Council understands that front-line clinicians and family support workers at taxpayer-funded Clinical & Support Options (CSO) combat these challenges through the delivery of critical mental health, addiction and crisis intervention services for thousands of at-risk children and families throughout our community; and

WHEREAS Springfield taxpayers depend on these services and deserve to know their resources are appropriately prioritized and dedicated to the delivery of critical care;

NOW, THEREFORE, BE IT RESOLVED that the Springfield City Council stands in support of the front-line workers of Clinical & Support Options (CSO) whose work is critical to the health, safety and wellbeing of our community; and

BE IT FURTHER RESOLVED that the Springfield City Council urges CSO administrators to return to the table to reach a fair resolution

that appropriately values these vital services and those who provide them.

City of Springfield
36 Court Street
Springfield, MA 01103

SCHEDULED

RESOLUTION (ID # 3222)

Meeting: 10/05/15 07:00 PM
Department: City Clerk
Category: General
Prepared By: Wayman Lee
Initiator: Wayman Lee
Sponsors: Mayor Domenic J. Sarno
DOC ID: 3222

City of Springfield Complete Streets Policy

CITY OF SPRINGFIELD COMPLETE STREETS POLICY

WHEREAS, "Complete Streets" are defined as streets that are designed to accommodate all users - motorists, pedestrians, bicyclists, and transit riders;

WHEREAS, "Complete Streets" can include a range of elements to accommodate all transportation users, including, but not limited to, sidewalks, signage, paved shoulders, bicycle lanes, cycle tracks, traffic lanes shared with motorist including sharrows and other bicycle pavement marking, crosswalks and other pavement marking for pedestrians, pedestrian control signalization, bicycle actuated traffic signals, bus pull outs, curb cuts, raised crosswalks, roundabouts, traffic islands and other traffic calming measures;

WHEREAS, "Complete Streets" principles should guide future roadway and transportation plans for both new and reconstruction projects in the City of Springfield, and any exception to this approach should be appropriately justified;

WHEREAS, "Complete Streets" application will vary depending on the surrounding transportation system, land uses and densities and its general context, however street and transportation plans should always be guided by the principle that streets should promote multiple transportation options for all people;

WHEREAS, "Complete Streets" can spark economic development and community development by helping to create walkable, vibrant communities where businesses can thrive and be strong, livable neighborhoods for City of Springfield residents;

WHEREAS, "Complete Streets" can play a role in transportation projects by improving bicycle and pedestrian safety, reducing traffic congestion, improving air quality both by promoting alternative forms of transportation and by helping to improve traffic flow;

WHEREAS, the people of the City of Springfield have expressed a strong desire for increased transportation options, including walking, cycling, and transit;

NOW, THEREFORE BE IT RESOLVED that the Springfield City Council strongly endorses a Complete Streets approach for the City of Springfield to enhance transportation options and to improve quality of life for the residents of Springfield as follows:

1. The City of Springfield shall, to the maximum extent practical, scope, plan, design, construct, operate, and maintain all City streets to provide a comprehensive and integrated network of facilities for people of all ages and abilities traveling by foot, bicycle, automobile, public transportation, and commercial vehicle.

2. Such improvements shall be consistent with and supportive of the local community, and that early consideration shall be given to any project's land use and transportation context.

3. Facilities for all users shall be considered in the construction, reconstruction, retrofit, repaving, and maintenance of City streets, except under one or more of the following conditions:

    a. The project involves a roadway on which a specific use is prohibited by law or there are right-of-way constraints.

    b. There is a documented absence by the City of Springfield of existing bicycle or pedestrian activity and absence of future need recognized in approved Springfield Transportation Plan elements.

    c. The Subdivision Regulations does not require sidewalks along the proposed street; however some accommodations for bicycles may be needed depending on approved plans.

    d. The costs of providing accommodation are "excessively disproportionate" to the need or probable use, as recognized by the City of Springfield.

4. The City shall, to the maximum extent practical, follow the latest adopted design standards when implementing this policy, including, but not limited to:

    a. Guidance issued by the:

        - Massachusetts Department of Transportation
        - American Association of State Highway Transportation Officials publications including A Guide for Achieving Flexibility in Highway Design
        - Institute of Transportation Engineers' Recommended Practice, "Designing Walkable Urban Thoroughfares: A Context-Sensitive Approach
        - National Association of City Transportation Officials' "Urban Bikeway Design Guide"

b. Application of design standards shall be flexible, recognizing that all streets are not alike and that user needs should be balanced, and innovative or non-traditional design options shall be considered.

5. The Director of Public Works and City Engineer will assist in the implementation of this resolution.

BE IT FURTHER RESOLVED that the City of Springfield will work with the Pioneer Valley Planning Commission, Massachusetts Department of Transportation, and community organizations to achieve the goals set forth in this Complete Streets policy.