

**PROPOSED TOWN BOARD AGENDA (SUBJECT TO CHANGE)**  
**SEPTEMBER 14, 2016 at 6:00 P.M.**  
**Butler Memorial Hall**

**I. MINUTES**

A. August 10, 2016

**II. PRESENTATIONS/COMMENTS – 3 minute limit**

- A. Certificates of Achievement to New Hartford Little League All Star baseball players
- B. New resident – corner of Paris and Compton Road; street address/sign

**III. REPORTS OF TOWN OFFICIALS BY STANDING COMMITTEE CHAIRPERSON**

- A. Senior Citizen Committee – Councilman Reynolds
  - 1. Health Fair – October 6, 2016
  - 2. 30<sup>th</sup> Anniversary Celebration on October 14, 2016
- B. Parks & Recreation Committee – Councilman Miscione
  - 1. Recreation Center seasonal appointments
  - 2. Refund – Summer Basketball program
  - 3. Plaque at Sherrillbrook Park – honor “Jaycees”
- C. Town Clerk Committee – Councilman Woodland
  - 1. Liquor License (new) notification – LaFamilia Restaurant LLC
  - 2. Liquor License (new) notification – Mangia Macrina’s Wood Fired Pizza
- D. Zoning (Codes) and Planning Committee – Councilman Messa
  - 1. Mandatory training: (2) Planning Board members; Zoning Board (4) Members; \$20 each
- E. Assessor Committee – Councilman Miscione
  - 1. FYI – Duane Farr’s BAR appointment expires 9/30/16.
- F. Public Works & Sewer Committee – Councilman Messa
  - 1. Presentation/Town of New Hartford Sanitation Dept

**IV. MATTERS SUBMITTED BY COUNCILMEN / ATTORNEY / DEPUTY SUPERVISOR**

**V. MATTERS SUBMITTED BY TOWN SUPERVISOR**

- A. Financial and other routine reports
  - 1. Audit of vouchers
  - 2. Monthly Financial Reports (attached)
  - 3. 2016 Town audit – Approval of audit firm
- B. Miscellaneous communications
- C. Unfinished Business
  - 1. Executive Session – Dispatch Union Contract
- D. New Business

**NOTE: Next Town Board meeting is Wednesday, October 5, 2016.**

**Young, Gail**

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**From:** Eileen Spellman  
**Sent:** Wednesday, September 07, 2016 9:20 AM  
**To:** Young, Gail  
**Subject:** RE: AGENDA - September 14, 2016 Town Board Meeting

*Eileen Spellman*  
*Director of Senior Services*  
*New Hartford Senior Center*  
*Email: [Espellman@town.new-hartford.ny.us](mailto:Espellman@town.new-hartford.ny.us)*  
*Ph: 315-724-8966*

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**From:** Young, Gail [<mailto:gyoung@town.new-hartford.ny.us>]  
**Sent:** Tuesday, September 06, 2016 11:19 AM  
**To:** Booth, Joe; Cully, Herb; Cunningham, John Carson; Darlene Abbatecola; Dreimiller, Dan; Inserra, Michael S.; James Messa; Jeffery, Mike; Lisa Smigle; M. Eileen Spellman; Miscione, Paul; New Hartford Supervisor; Reynolds, David M.; Richard Woodland Jr. (E-mail); Schwenzfeier, Barb; Sherman, Richard C.; Tyksinski, Patrick M.  
**Subject:** AGENDA - September 14, 2016 Town Board Meeting

In order to prepare the agenda for the September 14, 2016 Town Board Meeting, it will be necessary that I receive from you any matter(s) which you feel should be discussed at that meeting.

Please check applicable statements:

No matters to be considered

The New Hartford Senior Center will celebrate their 30<sup>th</sup> Anniversary Oct. 14, 2016. The Town Board is invited for Dinner at 11:45 a.m. Also we are having our Flu Shot Clinic and Health Fair Oct. 6 starting at 8:30 thru to 1:p.m. Flu shots start at 9:00 a.m.  Place the following on the Agenda:

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This information must be received in my office no later than 4:00 P.M. on Thursday, September 8, 2016. DEPARTMENT HEADS – PLEASE REMEMBER THE NEW PROCEDURE -- TO DISCUSS YOUR MATTERS WITH YOUR STANDING COMMITTEE MEMBERS, THE CHAIRPERSON OF WHICH MUST SEND ME AN E-MAIL TO ADD YOUR ITEMS TO THE AGENDA.

IN ADDITION, DUE TO CHANGES IN STATUTE THAT BECAME EFFECTIVE FEBRUARY 2, 2012, REQUIRING THE POSTING OF THE AGENDA AND SUPPORTING DOCUMENTS ON THE TOWN'S WEBSITE, IT WILL BE NECESSARY FOR YOU TO FURNISH ME WITH BACKGROUND INFORMATION RELATED TO THE SUBJECT(S) YOU ARE PLACING ON THE AGENDA, INCLUDING BUT NOT LIMITED TO PROPOSED LEGISLATION, COMMUNICATIONS, ETC. IF YOU HAVE ANY QUESTIONS IN THIS REGARD, PLEASE CONTACT ME AT YOUR EARLIEST CONVENIENCE. I MUST ASK FOR YOUR COOPERATION IN SUPPLYING

AGENDA 9-14-16

**TOWN of NEW HARTFORD**  
ONEIDA COUNTY  
**DEPARTMENT of PARKS and RECREATION**  
48 GENESEE STREET, NEW HARTFORD, NEW YORK 13413-2850  
Telephone: 315-724-0654 / Fax: 732-8679

DIRECTOR  
John Cunningham

TOWN SUPERVISOR  
Patrick M. Tyksinski

**Board Meeting**  
**September 14, 2016**

**Seasonal Appointment**

**Rec Center A7020.14**

Start Date: October 1, 2016 – March 31, 2017

First	Last	Position	Rate of Pay
Matthew	Crumrine	Ice Attendant	\$9.00 per Hour
Maddyne	Morris	Ice Attendant	\$9.00 per Hour
James	Hinman	Ice Attendant	\$9.00 per Hour
Jordyn	Gardinier	Ice Attendant	\$9.00 per Hour
Shaye	Gardinier	Ice Attendant	\$9.00 per Hour
Louisa	Pandolfo	Ice Attendant	\$9.00 per Hour
Jordan	Smith	Ice Attendant	\$9.00 per Hour
Seth	Garrett	Ice Attendant	\$9.00 per Hour

**Recreation Program Reimbursement A2089.0**

Pamela        Howe                                \$55 Summer Basketball Program Refund

**Request for Consideration**

The New Hartford Historical Society has requested placing a plaque in Sherrillbrook Park honoring the parks formation and New Hartford Jaycees for their initial efforts in “cutting in” the park we now know.

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____



**State Liquor Authority**

**Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a Local Municipality or Community Board**

(Page 1 of 2 of Form)

1. Date Notice Was Sent: Aug 16, 2016 1a. Delivered by: Certified Mail Return Receipt Requested

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:  
 New Application  Renewal  Alteration  Corporate Change  Removal  Class Change

For **New** applicants, answer each question below using all information known to date.  
 For **Renewal** applicants, set forth your approved Method of Operation only.  
 For **Alteration** applicants, attach a complete written description and diagrams depicting the proposed alteration(s).  
 For **Corporate Change** applicants, attach a list of the current and proposed corporate principals.  
 For **Removal** applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation.  
 For **Class Change** applicants, attach a statement detailing your current license type and your proposed license type.

**RECEIVED**  
 AUG 18 2016 9:30 AM  
 TOWN OF NEW HARTFORD  
 TOWN CLERK

**This 30-Day Advance Notice is Being Provided to the Clerk of the following Local Municipality or Community Board**

3. Name of Municipality or Community Board: Town of New Hartford

**Applicant/Licensee Information**

4. License Serial Number, if Applicable: \_\_\_\_\_ Expiration Date, if Applicable: \_\_\_\_\_

5. Applicant or Licensee Name: LaFamilia Restaurant LLC

6. Trade Name (if any): LaFamiglia Restaurant

7. Street Address of Establishment: 1 Genesee Street

8. City, Town or Village: New Hartford, NY Zip Code: 13413

9. Business Telephone Number of Applicant/Licensee: 315-725-7573

10. Business Fax Number of Applicant/Licensee: \_\_\_\_\_

11. Business E-mail of Applicant/Licensee: sdang82@gmail.com

12. Type(s) of Alcohol sold or to be sold:  Beer & Cider  Wine, Beer & Cider  Liquor, Wine, Beer & Cider

13. Extent of Food Service:  Full food menu; Full Kitchen run by a chef or cook  Menu meets legal minimum food availability requirements; Food prep area at minimum

14. Type of Establishment: Restaurant (Full Kitchen & Full Menu required)

15. Method of Operation: (Check all that apply)  
 Seasonal Establishment  Juke Box  Disc Jockey  Recorded Music  Karaoke  
 Live Music (Give details: i.e. rock bands, acoustic, jazz, etc.): \_\_\_\_\_  
 Patron Dancing  Employee Dancing  Exotic Dancing  Topless Entertainment  
 Video/Arcade Games  Third Party Promoters  Security Personnel  
 Other (specify): \_\_\_\_\_

16. Licensed Outdoor Area: (Check all that apply)  
 None  Patio or Deck  Rooftop  Garden/Grounds  Freestanding Covered Structure  
 Sidewalk Cafe  Other (specify): \_\_\_\_\_

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____



State Liquor Authority

**Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a Local Municipality or Community Board**  
(Page 2 of 2 of Form)

- 17. List the floor(s) of the building that the establishment is located on:
- 18. List the room number(s) the establishment is located in within the building, if appropriate:
- 19. Is the premises located within 500 feet of three or more on-premises liquor establishments?  Yes  No
- 20. Will the license holder or a manager be physically present within the establishment during all hours of operation?  Yes  No
- 21. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee.
- 22. Does the applicant or licensee own the building in which the establishment is located?  Yes (If Yes SKIP 23-26)  No

**Owner of the Building in Which the Licensed Establishment is Located**

- 23. Building Owner's Full Name:
- 24. Building Owner's Street Address:
- 25. City, Town or Village:  State:  Zip Code:
- 26. Business Telephone Number of Building Owner:

**Representative or Attorney representing the Applicant in Connection with the application for a license to traffic in alcohol at the establishment identified in this notice**

- 27. Representative/Attorney's Full Name:
- 28. Street Address:
- 29. City, Town or Village:  State:  Zip Code:
- 30. Business Telephone Number of Representative/Attorney:
- 31. Business Email Address:

I am the applicant or hold the license or am a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under **Penalty of Perjury** - that the representations made in this form are true.

32. Printed Name:  Title:

Signature: X *Indu Dang*

**RECEIVED**

AUG 18 2016 9:10 AM  
TOWN OF NEW HARTFORD  
TOWN CLERK

OFFICE USE ONLY

Original     Amended    Date \_\_\_\_\_



**State Liquor Authority**

**Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a Local Municipality or Community Board**  
(Page 1 of 2 of Form)

1. Date Notice Was Sent: 08/23/2016      1a. Delivered by: Personal Delivery with Proof of Receipt

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License

New Application     Renewal     Alteration     Corporate Change     Removal     Class Change

For **New** applicants, answer each question below using all information known to date.  
 For **Renewal** applicants, set forth your approved Method of Operation only.  
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**This 30-Day Advance Notice is Being Provided to the Clerk of the following Local Municipality or Community Board**

3. Name of Municipality or Community Board: Village of New Hartford

**Applicant/Licensee Information**

4. License Serial Number, if Applicable: \_\_\_\_\_ Expiration Date, if Applicable: \_\_\_\_\_

5. Applicant or Licensee Name: Christopher M. Woodbeck

6. Trade Name (if any): Mangia Macrina's Wood Fired Pizza, LLC

7. Street Address of Establishment: 8636 Seneca Turnpike

8. City, Town or Village: New Hartford, NY Zip Code: 13413

9. Business Telephone Number of Applicant/Licensee: 651-303-5305

10. Business Fax Number of Applicant/Licensee: \_\_\_\_\_

11. Business E-mail of Applicant/Licensee: chris.woodbeck@gmail.com

12. Type(s) of Alcohol sold or to be sold:     Beer & Cider     Wine, Beer & Cider     Liquor, Wine, Beer & Cider

13. Extent of Food Service:     Full food menu; Full Kitchen run by a chef or cook     Menu meets legal minimum food availability requirements; Food prep area at minimum

14. Type of Establishment: Restaurant (Full Kitchen & Full Menu required)

15. Method of Operation: (Check all that apply)

Seasonal Establishment     Juke Box     Disc Jockey     Recorded Music     Karaoke

Live Music (Give details: i.e. rock bands, acoustic, jazz, etc.): acoustic

Patron Dancing     Employee Dancing     Exotic Dancing     Topless Entertainment

Video/Arcade Games     Third Party Promoters     Security Personnel

Other (specify): \_\_\_\_\_

16. Licensed Outdoor Area: (Check all that apply)

None     Patio or Deck     Rooftop     Garden/Grounds     Freestanding Covered Structure

Sidewalk Cafe     Other (specify): \_\_\_\_\_

**RECEIVED**

SEP 06 2016

TOWN OF NEW HARTFORD  
TOWN CLERK

*1:10pm*  
*[Signature]*

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____



State Liquor Authority

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(Page 2 of 2 of Form)

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23. Building Owner's Full Name:
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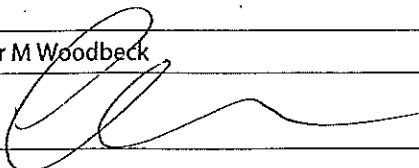
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I am the applicant or hold the license or am a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under **Penalty of Perjury** - that the representations made in this form are true.

32. Printed Name:  Title

Signature: X 

# AGENDA 9-14-16

Young, Gail

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**From:** Shaw, Dory  
**Sent:** Thursday, August 18, 2016 12:51 PM  
**To:** james.messa@yahoo.com; Miscione, Paul  
**Cc:** Young, Gail  
**Subject:** Schuyler Continuing Education Program

To date, the following would like to attend the Continuing Education Program on October 5, 2016 at a cost of \$20 per person (I sent you information on this previously):

Planning Board

Zoning Board of Appeals

Elisabetta DeGironimo  
William Morris

Randy Bogar  
Fred Kiehm  
Taras Tesak  
John Montrose

Cost to date is \$120 (\$40 for Planning Board - \$80 for Zoning Board of Appeals).

If you have any questions, feel free to contact me.

Dory

Resolution adopted 8-10-16  
authorizing Board members  
to attend: ... but had no  
names at that time.

Verify above-named Board  
members to attend. by  
additional Resolution.





AGENDA 9-14-16

**Young, Gail**

**From:** James Messa  
**Sent:** Thursday, September 08, 2016 3:40 PM  
**To:** Young, Gail  
**Subject:** FW: AGENDA - September 14, 2016 Town Board Meeting

Gail,  
Please add to the agenda.

Thank you,  
Jim

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**From:** Young, Gail  
**Sent:** Tuesday, September 06, 2016 11:19 AM  
**To:** Booth, Joe; Cully, Herb; Cunningham, John Carson; Darlene Abbatecola; Dreimiller, Dan; Inerra, Michael S.; James Messa; Jeffery, Mike; Lisa Smigle; M. Eileen Spellman; Miscione, Paul; New Hartford Supervisor; Reynolds, David M.; Richard Woodland Jr. (E-mail); Schwenzfeier, Barb; Sherman, Richard C.; Tyksinski, Patrick M.  
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Please check applicable statements:

No matters to be considered

Place the following on the Agenda:

Town of New Hartford Sanitation Dept. - Joint presentation by Councilman Messa and Councilman Miscione

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Thank you!

# AGENDA 9-14-16

**Young, Gail**

**From:** Dreimiller, Dan  
**Sent:** Wednesday, September 07, 2016 4:10 PM  
**To:** Young, Gail  
**Subject:** RE: AGENDA - September 14, 2016 Town Board Meeting

Gail,

Please add to agenda:

- Monthly Financial Reports
- 2016 Town Audit- Approval of Audit Firm

Thanks,

Dan

---

**From:** Young, Gail  
**Sent:** Tuesday, September 06, 2016 11:19 AM  
**To:** Booth, Joe; Cully, Herb; Cunningham, John Carson; Darlene Abbatecola; Dreimiller, Dan; Inerra, Michael S.; James Messa; Jeffery, Mike; Lisa Smigle; M. Eileen Spellman; Miscione, Paul; New Hartford Supervisor; Reynolds, David M.; Richard Woodland Jr. (E-mail); Schwenzfeier, Barb; Sherman, Richard C.; Tyksinski, Patrick M.  
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