TOWN OF FORESTPORT
REGULAR TOWN BOARD MEETING AGENDA
OTTER LAKE FIRE HALL
13853 State Rte. 28, Forestport, N.Y. 13338
July 19, 2023

CALL TO ORDER:

ABSTRACTS:

Water District #1: Abstract#7, Vouchers #90-#102 in the amount of $36,465.49
Buckhorn Water District #2: Abstract#7, Vouchers #27-#30 in the amount of $247.75
Sewer District #1: Abstract#7, Vouchers #54-# 58 in the amount of $1,524.05
General: Abstract #7, Vouchers #325- #389 in the amount of $37,114.38
Highway: Abstract # 7 Vouchers #211- #237 in the amount of $96,230.33
Town Board Escrow: Abstract# 7, Vouchers #7-#8 in the amount of $100.00
Planning Board Escrow: Abstract# 7, Vouchers #9-#10 in the amount of $100.00

TOWN CLERK MINUTES (MOTION TO APPROVE): All minutes sent electronically:

- **June 21, 2023: Regular Town Board Meeting**
- **June 21, 2023: Area Variance Hearing: Harris**

MONTHLY REPORTS:

Water District # 1 Report
Buckhorn Water Report
Sewer Report
Town Clerk Report
Justice Report
Planning Report
Dog Report
Supervisor Report
Highway-Dump Day

NOCCOG:

BUCKHORN:

- Transfer of assets

SEWER:

- Appointment of Lucas Kafka as Sewer Plant Operator
- Grant Application- Sewer project funding

OLD BUSINESS BOARD:

- Entry Door at Town Hall
- Groomer
- Resolution to deed water rights to Woodgate Library for Community Hall

- Forestport Dam/ Canal Issues
- Bower Road noise issues
- Comprehensive Plan Update
- Summer Rec

NEW BOARD BUSINESS:

- PBA Resignation
- Codes Personnel
- NYMIR renewal
- Fall EXPO
- Boat wash Station Grant Application

NEW BUSINESS (PUBLIC):

ADJOURNMENT:

Water

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

G/L Number: 083204.08.000.00 **Source Power Pump CE WATER DIST**

Daktor, Ted - Water	W23-94	mileage 54@.56 6/25-6/30/23	7/1/2023	$30.24	
Daktor, Ted - Water	W23-94	mileage 54@.56 6/5-6/10/23	7/1/2023	$30.24	
Daktor, Ted - Water	W23-94	mileage 54@.56 6/18-6/24/23	7/1/2023	$30.24	
Daktor, Ted - Water	W23-94	mileage 54@.56 6/11-6/17/23	7/1/2023	$30.24	
Total for G/L Account		**083204.08.000.00**		**$120.96**	
		Total for all Vouchers		**$120.96**	
Total for Vendor: Daktor, Ted - Water				**$120.96**	

G/L Number: 083204.08.000.00 **Source Power Pump CE WATER DIST**

Frontier - Water	W23-96	7/23 Line between plants #315-19	7/1/2023	$156.78	
Frontier - Water	W23-95	7/23 tank Level #315-392-2022	7/1/2023	$85.22	
Total for G/L Account		**083204.08.000.00**		**$242.00**	
		Total for all Vouchers		**$242.00**	
Total for Vendor: Frontier - Water				**$242.00**	

G/L Number: 083204.08.000.00 **Source Power Pump CE WATER DIST**

Kafka, Lucas-Water	W23-90	12days@21.22 6/7-6/27/23 water	########	$254.64	22660
Kafka, Lucas-Water	W23-93	7days@21.22 Water Operator Tra	########	$148.54	22664
Total for G/L Account		**083204.08.000.00**		**$403.18**	
		Total for all Vouchers		**$403.18**	
Total for Vendor: Kafka, Lucas-Water				**$403.18**	

G/L Number: 083304.08.000.00 **Purification CE WATER DIST**

Life Science-Water	W23-91	Inflationary Surcharge 8%	########	$2.64	22661
Life Science-Water	W23-91	Total Coliform test 6/8/23	########	$33.00	22661
Total for G/L Account		**083304.08.000.00**		**$35.64**	

Town Of Forestport
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New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

		Total for all Vouchers		**$35.64**	
Total for Vendor: Life Science-Water				**$35.64**	

G/L Number: 097106.08.000.00 **Debt Service on Bond WATER DIST**

M & T Bank - Water	W23-98	2023 Prin loan paymt #2609 proje	5/4/2023	$5,000.00	
M & T Bank - Water	W23-97	2023 Prin loan paymt#2479 proj#	5/4/2023	$30,000.00	
Total for G/L Account		**097106.08.000.00**		**$35,000.00**	
		Total for all Vouchers		**$35,000.00**	
Total for Vendor: M & T Bank - Water				**$35,000.00**	

G/L Number: 083204.08.000.00 **Source Power Pump CE WATER DIST**

Nationalgrid - Water	W23-99	7/23 Chlorintion Bldg #02330-89	7/1/2023	$469.33	
Nationalgrid - Water	W23-102	1/2 7/23 Hydro pneu #06581-570	7/1/2023	$19.28	
Nationalgrid - Water	W23-100	7/23 pump station Irish #69649-42	7/1/2023	$113.37	
Nationalgrid - Water	W23-101	7/23 pump station Lorraine #5144	7/1/2023	$43.57	
Total for G/L Account		**083204.08.000.00**		**$645.55**	
		Total for all Vouchers		**$645.55**	
Total for Vendor: Nationalgrid - Water				**$645.55**	

G/L Number: 083204.08.000.00 **Source Power Pump CE WATER DIST**

Verizon - Water	W23-92	Acct Monthly charge	########	$7.83	22662
Verizon - Water	W23-92	Ipad-water piping & hydrants sys	########	$10.33	22662
Total for G/L Account		**083204.08.000.00**		**$18.16**	
		Total for all Vouchers		**$18.16**	
Total for Vendor: Verizon - Water				**$18.16**	

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

Grand Total of all Vouchers $36,465.49

I hereby certify that the vouchers listed on this abstract for this period consisting of these attached pages were audited and allowed in the amounts shown. Authorization is hereby given and direction is made to pay each of the claimants the amount opposite his name.

Authorized Official	Date
Authorized Official	Authorized Official
Authorized Official	Authorized Official
Authorized Official	Authorized Official

Buckhorn

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

G/L Number: 083204.12.000.00 **Source Power Pump CE BUCKHOR WATER DISTRICT**

Daktor, Ted - Water	B23-29	mileage 30@.56 6/25-6/30/23 Reg	7/1/2023	$16.80	
Daktor, Ted - Water	B23-29	mileage 30@.56 6/18-6/24/23 Reg	7/1/2023	$16.80	
Daktor, Ted - Water	B23-29	mileage 30@.56 6/11-6/17/23 Reg	7/1/2023	$16.80	
Daktor, Ted - Water	B23-29	mileage 30@.56 6/5-6/10/23 Reg	7/1/2023	$16.80	
Total for G/L Account		**083204.12.000.00**		**$67.20**	
		Total for all Vouchers		**$67.20**	
Total for Vendor: Daktor, Ted - Water				**$67.20**	

G/L Number: 083204.12.000.00 **Source Power Pump CE BUCKHOR WATER DISTRICT**

Kafka, Lucas-Water	B23-28	7days@5.13 Water Operator Trai	########	$35.91	1028
Kafka, Lucas-Water	B23-27	12days@5.13 6/7-6/27/23 water tr	########	$61.56	1027
Total for G/L Account		**083204.12.000.00**		**$97.47**	
		Total for all Vouchers		**$97.47**	
Total for Vendor: Kafka, Lucas-Water				**$97.47**	

G/L Number: 083204.12.000.00 **Source Power Pump CE BUCKHOR WATER DISTRICT**

National Grid-Buckhorn	B23-30	7/23 Buckhorn #80437-73117	7/1/2023	$83.08	
Total for G/L Account		**083204.12.000.00**		**$83.08**	
		Total for all Vouchers		**$83.08**	
Total for Vendor: National Grid-Buckhorn				**$83.08**	

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

Grand Total of all Vouchers $247.75

I hereby certify that the vouchers listed on this abstract for this period consisting of these attached pages were audited and allowed in the amounts shown. Authorization is hereby given and direction is made to pay each of the claimants the amount opposite his name.

Authorized Official	Date
Authorized Official	Authorized Official
Authorized Official	Authorized Official
Authorized Official	Authorized Official

Sewer

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

G/L Number: 081204.09.000.00 **Sanitary Sewers CE SEWER DIST**

Daktor, Ted - Sewer	S23-54	mileage 15@.56 6/25-6/30/23 Reg	7/1/2023	$8.40
Daktor, Ted - Sewer	S23-54	mileage 15@.56 6/18-6/24/23 Reg	7/1/2023	$8.40
Daktor, Ted - Sewer	S23-54	mileage 15@.56 6/11-6/17/23 Reg	7/1/2023	$8.40
Daktor, Ted - Sewer	S23-54	mileage 15@.56 6/5-6/10/23 Reg	7/1/2023	$8.40

Total for G/L Account 081204.09.000.00 $33.60

Total for all Vouchers $33.60

Total for Vendor: Daktor, Ted - Sewer $33.60

G/L Number: 081304.09.000.00 **Treatmt/Disposal CE SEWER DIST**

J Piper Consulting-Gen	S23-55	18.75hrs@65. Apr-Jun 2023 Sewe	########	$1,218.75

Total for G/L Account 081304.09.000.00 $1,218.75

Total for all Vouchers $1,218.75

Total for Vendor: J Piper Consulting-Gen $1,218.75

G/L Number: 081304.09.000.00 **Treatmt/Disposal CE SEWER DIST**

Life Science-Sewer	S23-56	Inflationary surcharge 8%	########	$5.12
Life Science-Sewer	S23-56	2@22. SM 5210B-2016 BOD-5 D	########	$44.00
Life Science-Sewer	S23-56	2@10. SM 2540 D-2015 Total Su	########	$20.00

Total for G/L Account 081304.09.000.00 $69.12

Total for all Vouchers $69.12

Total for Vendor: Life Science-Sewer $69.12

G/L Number: 081304.09.000.00 **Treatmt/Disposal CE SEWER DIST**

Nationalgrid - Sewer	S23-58	7/23 Sewer Plant #56849-42108	7/1/2023	$165.76
Nationalgrid - Sewer	S23-57	7/23 Lift Station Dutch #57649-42	7/1/2023	$36.82

Total for G/L Account 081304.09.000.00 $202.58

Town Of Forestport
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Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description	
Total for all Vouchers	**$202.58**
Total for Vendor: Nationalgrid - Sewer	**$202.58**

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

Grand Total of all Vouchers $1,524.05

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Authorized Official	Date
Authorized Official	Authorized Official
Authorized Official	Authorized Official
Authorized Official	Authorized Official

General

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

G/L Number: 080204.01.000.00 **Planning CE GEN FD**

Addison, Steven M.	G23-333	1hr@25. Planning Board of Appe	########	$25.00	110446
Addison, Steven M.	G23-325	2hrs@25. planning bord of appeal	########	$50.00	110438
Total for G/L Account		**080204.01.000.00**		**$75.00**	
		Total for all Vouchers		**$75.00**	
Total for Vendor: Addison, Steven M.				**$75.00**	

G/L Number: 013554.01.000.00 **Assessor CE GEN FD**

Amazon - Gen	G23-326	additional -Della Air Conditioner-	4/1/2023	$50.00	110439
Total for G/L Account		**013554.01.000.00**		**$50.00**	
		Total for all Vouchers		**$50.00**	
Total for Vendor: Amazon - Gen				**$50.00**	

G/L Number: 016204.01.000.00 **Buildings CE GEN FD**

Benson, Matt-Gen	G23-329	12.5hrs@25. Bldg & Grds Helper	7/1/2023	$312.50	110442
Total for G/L Account		**016204.01.000.00**		**$312.50**	
		Total for all Vouchers		**$312.50**	
Total for Vendor: Benson, Matt-Gen				**$312.50**	

G/L Number: 016204.01.000.00 **Buildings CE GEN FD**

Burdick Construction	G23-337	topsoil-garden out behind Town H	########	$125.00	
Total for G/L Account		**016204.01.000.00**		**$125.00**	
		Total for all Vouchers		**$125.00**	
Total for Vendor: Burdick Construction				**$125.00**	

G/L Number: 016204.01.000.00 **Buildings CE GEN FD**

Town Of Forestport
Oneida County
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Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

		Description		
C & R Hardware - Gen	G23-344	2@.95 NYS paint care fee	########	$1.90
C & R Hardware - Gen	G23-348	4pc 9" paint poller kit	########	$11.99
C & R Hardware - Gen	G23-348	9" roller cover 6pk	########	$10.99
C & R Hardware - Gen	G23-347	NYS paint care fee	########	$0.95
C & R Hardware - Gen	G23-347	gal int eggshell paint	########	$35.99
C & R Hardware - Gen	G23-346	2@5.99 brush one coat ang 1.5"	########	$11.98
C & R Hardware - Gen	G23-346	gal rusto hu8nter green paint	########	$74.99
C & R Hardware - Gen	G23-345	2@4.99 tilex fresh shower 32oz	########	$9.98
C & R Hardware - Gen	G23-344	9" roller cover 6pk	########	$10.99
C & R Hardware - Gen	G23-346	NYS paint care fee	########	$0.95
C & R Hardware - Gen	G23-344	gal int eggshell paint	########	$35.99
C & R Hardware - Gen	G23-344	gal rusto hunter green paint	########	$74.99
C & R Hardware - Gen	G23-341	2@.95 NYS paint care fee	6/7/2023	$1.90
C & R Hardware - Gen	G23-341	2@35.99 int eggshell paint	6/7/2023	$71.98
C & R Hardware - Gen	G23-339	3ea@6.49 covered mouse trap	6/2/2023	$19.47
C & R Hardware - Gen	G23-345	2@5.99 lysol bathroom cleaner sp	########	$11.98
C & R Hardware - Gen	G23-345	2@5.99 clorox clean up spray	########	$11.98
	Total for G/L Account	**016204.01.000.00**	**$399.00**	

G/L Number: 071804.01.000.00 **Special Recreation Facilities CE GEN FD**

C & R Hardware - Gen	G23-343	400T3Cpslk3 tylo entry adj latch-	########	$11.99
C & R Hardware - Gen	G23-343	great stuff win/door foam reuse-D	########	$10.99
C & R Hardware - Gen	G23-343	siftit white solid 12"x12'-Dutch ba	########	$22.99
C & R Hardware - Gen	G23-342	2@9.99 fluidmaster fill valve adj-	########	$19.98
	Total for G/L Account	**071804.01.000.00**	**$65.95**	

G/L Number: 073104.01.000.00 **Youth Programs CE GEN FD**

C & R Hardware - Gen	G23-340	8'rough cut raised bed plank-Woo	6/5/2023	$12.00
C & R Hardware - Gen	G23-340	3@18. 12'rough cut raised bed pla	6/5/2023	$54.00
	Total for G/L Account	**073104.01.000.00**	**$66.00**	

Total for all Vouchers **$530.95**

Total for Vendor: C & R Hardware - Gen **$530.95**

Town Of Forestport
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Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

G/L Number: 016204.01.000.00 **Buildings CE GEN FD**

C J Motor Sports-Gen	G23-349	Husqvarna PA1100 Att Pole saw	########	$224.99
C J Motor Sports-Gen	G23-349	Husqvarna 525LK Trimmer	########	$404.99
C J Motor Sports-Gen	G23-349	6ea@2.99 Hus Hp 2T O Counter2	########	$17.94
C J Motor Sports-Gen	G23-349	Hus X-gurad counter2-weedeater	########	$19.99
C J Motor Sports-Gen	G23-349	.095/1 TIT Sw31 - weedeater	########	$17.99
	Total for G/L Account	**016204.01.000.00**	**$685.90**	

Total for all Vouchers **$685.90**

Total for Vendor: C J Motor Sports-Gen **$685.90**

G/L Number: 014104.01.000.00 **Town Clerk CE GEN FD**

Card Service-Gen	G23-338	2@21.74 Jun&Jul Acrobat Pro D	6/1/2023	$43.48
	Total for G/L Account	**014104.01.000.00**	**$43.48**	

G/L Number: 076104.01.000.00 **Programs for Aging-Seniors GEN FD**

Card Service-Gen	G23-338	sliding window 1/2 screen-Dutch	6/1/2023	$237.08
	Total for G/L Account	**076104.01.000.00**	**$237.08**	

G/L Number: 086644.01.000.00 **Codes Enforcement CE GEN FD**

Card Service-Gen	G23-338	Apple I-Cloud - Codes	6/1/2023	$9.99
	Total for G/L Account	**086644.01.000.00**	**$9.99**	

Total for all Vouchers **$290.55**

Total for Vendor: Card Service-Gen **$290.55**

G/L Number: 080204.01.000.00 **Planning CE GEN FD**

Coughlin Printing - Gen	G23-350	Planning Board of Appeals-added	########	$160.00
	Total for G/L Account	**080204.01.000.00**	**$160.00**	

Total for all Vouchers **$160.00**

Total for Vendor: Coughlin Printing - Gen — **$160.00**

G/L Number: 016704.01.000.00 — **Central Print/Mail GEN FD**

Ed & Ed Business-Gen	G23-351	min 250copies@.0319 1color-To	#########	$7.98
Ed & Ed Business-Gen	G23-351	min 163copies@.0429 2color-To	#########	$6.99
Ed & Ed Business-Gen	G23-351	logistics surcharge	#########	$1.97
Ed & Ed Business-Gen	G23-351	11copies@.0539 3color-Town cop	#########	$0.59
Ed & Ed Business-Gen	G23-351	min 1200copies@.01045 B & W-	#########	$12.54
	Total for G/L Account	**016704.01.000.00**	**$30.07**	

G/L Number: 080204.01.000.00 — **Planning CE GEN FD**

Ed & Ed Business-Gen	G23-352	min 440copies@.0228 B&W plan	#########	$10.03
Ed & Ed Business-Gen	G23-352	min 135copies@.133 color planlc	#########	$17.96
Ed & Ed Business-Gen	G23-352	Logistic surcharge	#########	$1.96
	Total for G/L Account	**080204.01.000.00**	**$29.95**	

Total for all Vouchers — **$60.02**

Total for Vendor: Ed & Ed Business-Gen — **$60.02**

G/L Number: 090608.01.000.00 — **Medical Insuance (Town Share) GEN FD**

Excellus - Gen	G23-353	8/23 Town ER health ins share	#########	$6,061.68
Excellus - Gen	G23-353	8/23 Town EE health ins share	#########	$2,563.02
	Total for G/L Account	**090608.01.000.00**	**$8,624.70**	

Total for all Vouchers — **$8,624.70**

Total for Vendor: Excellus - Gen — **$8,624.70**

G/L Number: 016204.01.000.00 — **Buildings CE GEN FD**

Fisher Auto Parts-Hwy	G23-354	2@15.73 engine oil filters-Ferris l	#########	$31.46
	Total for G/L Account	**016204.01.000.00**	**$31.46**	

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

		Total for all Vouchers		**$31.46**	
Total for Vendor:		**Fisher Auto Parts-Hwy**		**$31.46**	
G/L Number: 016204.01.000.00		**Buildings CE GEN FD**			
Forestport - Highway (Gen)	G23-355	73.1gal@2.859 unleaded gasoline	7/1/2023	$209.00	
Total for G/L Account		**016204.01.000.00**		**$209.00**	
		Total for all Vouchers		**$209.00**	
Total for Vendor:		**Forestport - Highway (Gen)**		**$209.00**	
G/L Number: 016504.01.000.00		**Central Communications CE GEN FD**			
Frontier - General	G23-357	7/23 Assessors office #315-392-5	7/1/2023	$150.88	
Frontier - General	G23-356	7/23 Town Hall #315-392-2801	7/1/2023	$569.70	
Total for G/L Account		**016504.01.000.00**		**$720.58**	
G/L Number: 051324.01.000.00		**Hwy Garage Bldg CE GEN FD**			
Frontier - General	G23-358	7/23 Hwy Barn #315-392-2623	7/1/2023	$180.66	
Total for G/L Account		**051324.01.000.00**		**$180.66**	
		Total for all Vouchers		**$901.24**	
Total for Vendor:		**Frontier - General**		**$901.24**	
G/L Number: 073104.01.000.00		**Youth Programs CE GEN FD**			
Galligan, Ashley	G23-335	CPR course charge	########	$14.95	110447
Galligan, Ashley	G23-335	Supplies for summer rec	########	$41.16	110447
Galligan, Ashley	G23-335	4hrs@.20 Day 1 Summer Rec	########	$80.00	110447
Galligan, Ashley	G23-335	4hrs@20. CPR Course	########	$80.00	110447
Galligan, Ashley	G23-335	6hrs@20. Summer Rec Paperwork	########	$120.00	110447
Total for G/L Account		**073104.01.000.00**		**$336.11**	

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

		Total for all Vouchers		**$336.11**	
Total for Vendor: Galligan, Ashley				**$336.11**	
G/L Number: 016704.01.000.00		**Central Print/Mail GEN FD**			
GreatAmerica Fin-Gen	G23-359	7/23 office copier lease paymrnt	7/1/2023	$138.99	
Total for G/L Account		**016704.01.000.00**		**$138.99**	
		Total for all Vouchers		**$138.99**	
Total for Vendor: GreatAmerica Fin-Gen				**$138.99**	
G/L Number: 016204.01.000.00		**Buildings CE GEN FD**			
Greico, Domenic - Gen	G23-334	54hrs@15. Bldg & Grds Helper	########	$810.00	110448
Greico, Domenic - Gen	G23-327	6/14-6/27/23 54hrs@15. Bldg &	########	$810.00	110440
Total for G/L Account		**016204.01.000.00**		**$1,620.00**	
		Total for all Vouchers		**$1,620.00**	
Total for Vendor: Greico, Domenic - Gen				**$1,620.00**	
G/L Number: 081604.01.000.00		**Refuse/Garbage CE GEN FD**			
Hajdasz, Dorothy - Gen	G23-388	6hrs@20. trash day	########	$120.00	
Total for G/L Account		**081604.01.000.00**		**$120.00**	
		Total for all Vouchers		**$120.00**	
Total for Vendor: Hajdasz, Dorothy - Gen				**$120.00**	
G/L Number: 080204.01.000.00		**Planning CE GEN FD**			
J Piper Consulting-Gen	G23-362	12.75hrs @65. comprehen master	########	$828.75	
Total for G/L Account		**080204.01.000.00**		**$828.75**	
		Total for all Vouchers		**$828.75**	

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

Total for Vendor: J Piper Consulting-Gen **$828.75**

G/L Number: 071804.01.000.00 **Special Recreation Facilities CE GEN FD**

Jay-K Lumber - Gen	G23-361	tailgate delivery	########	$40.00	
Jay-K Lumber - Gen	G23-360	8@24.99 alum 6" fascia white 12'-	6/6/2023	$199.92	
Jay-K Lumber - Gen	G23-360	8@16.99 5 1/2 comm grn galv dri	6/6/2023	$135.92	
Jay-K Lumber - Gen	G23-360	tailgate delivery	6/6/2023	$40.00	
Jay-K Lumber - Gen	G23-361	wh gp prm T4 solid sofft/8#23088	########	$22.69	
Total for G/L Account		**071804.01.000.00**	**$438.53**		

Total for all Vouchers **$438.53**

Total for Vendor: Jay-K Lumber - Gen **$438.53**

G/L Number: 080204.01.000.00 **Planning CE GEN FD**

LeBuis, Jeffrey R.	G23-336	1hr@25. Planning Board of Appe	########	$25.00	110449
LeBuis, Jeffrey R.	G23-328	2hrs@25. Planning board of appea	########	$50.00	110441
Total for G/L Account		**080204.01.000.00**	**$75.00**		

Total for all Vouchers **$75.00**

Total for Vendor: LeBuis, Jeffrey R. **$75.00**

G/L Number: 016204.01.000.00 **Buildings CE GEN FD**

Light's Auto-Gen	G23-363	3@5.13 HG+D30 wt mower oil	########	$15.39	
Total for G/L Account		**016204.01.000.00**	**$15.39**		

Total for all Vouchers **$15.39**

Total for Vendor: Light's Auto-Gen **$15.39**

G/L Number: 016204.01.000.00 **Buildings CE GEN FD**

Nationalgrid - Gen	G23-369	7/23 Twin Bridges #39480-44007	7/1/2023	$22.86	
Nationalgrid - Gen	G23-370	1/2 7/23 Hydro Garage #06581-57	7/1/2023	$19.28	

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

		Description			
Nationalgrid - Gen	G23-366	7/23 Town Hall #04649-42112	7/1/2023	$508.35	
Total for G/L Account		**016204.01.000.00**	**$550.49**		

G/L Number: 051324.01.000.00 **Hwy Garage Bldg CE GEN FD**

Nationalgrid - Gen	G23-367	7/23 Hwy Barn #04849-42109	7/1/2023	$322.94	
Total for G/L Account		**051324.01.000.00**	**$322.94**		

G/L Number: 051824.01.000.00 **Street Lighting CE GEN FD**

Nationalgrid - Gen	G23-330	7/23 Street Lighting #96552-9210	7/1/2023	$1,150.41	110443
Total for G/L Account		**051824.01.000.00**	**$1,150.41**		

G/L Number: 071404.01.000.00 **Playgrounds/Recreation CE GEN FD**

Nationalgrid - Gen	G23-364	7/23 Scouten Field #98284-09006	7/1/2023	$22.86	
Total for G/L Account		**071404.01.000.00**	**$22.86**		

G/L Number: 071804.01.000.00 **Special Recreation Facilities CE GEN FD**

Nationalgrid - Gen	G23-368	7/23 Dutch ballfield #69249-4211	7/1/2023	$102.47	
Total for G/L Account		**071804.01.000.00**	**$102.47**		

G/L Number: 073104.01.000.00 **Youth Programs CE GEN FD**

Nationalgrid - Gen	G23-365	7/23 Woodgate Bldg #46049-411	7/1/2023	$20.20	
Total for G/L Account		**073104.01.000.00**	**$20.20**		

Total for all Vouchers **$2,169.37**

Total for Vendor: Nationalgrid - Gen **$2,169.37**

G/L Number: 011104.01.000.00 **Justices CE GEN FD**

New York State Magistrates As	G23-371	2023 NYS Magistrates Assoc due	7/9/2023	$95.00	
Total for G/L Account		**011104.01.000.00**	**$95.00**		

Total for all Vouchers **$95.00**

Total for Vendor: New York State Magistrates Association-Ge **$95.00**

Town Of Forestport
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Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

G/L Number: 014104.01.000.00 **Town Clerk CE GEN FD**

NYSTC A- Gen	G23-372	7/1/23-6/30/24 NYSTCA member	7/1/2023	$85.00
Total for G/L Account		**014104.01.000.00**	**$85.00**	
		Total for all Vouchers	**$85.00**	
Total for Vendor: NYSTC A- Gen			**$85.00**	

G/L Number: 013104.01.000.00 **Bookkeeper C/E GEN FD**

Quill - General	G23-373	Brother TN760 black toner	########	$84.03
Quill - General	G23-374	Stamper-For Depsoit Only - Gene	########	$28.97
Quill - General	G23-374	Stamper-For Depsoit Only - High	########	$28.97
Total for G/L Account		**013104.01.000.00**	**$141.97**	

G/L Number: 016204.01.000.00 **Buildings CE GEN FD**

Quill - General	G23-375	brown hardwound towels rolls 12r	########	$63.96
Quill - General	G23-375	Paper towels 12ct	########	$32.44
Quill - General	G23-375	White multi fold towels	########	$38.00
Total for G/L Account		**016204.01.000.00**	**$134.40**	

G/L Number: 080204.01.000.00 **Planning CE GEN FD**

Quill - General	G23-376	28XL Hy bl/m/y 4pk ink	########	$75.09
Quill - General	G23-376	281XXL ehy black ink	########	$27.80
Total for G/L Account		**080204.01.000.00**	**$102.89**	
		Total for all Vouchers	**$379.26**	
Total for Vendor: Quill - General			**$379.26**	

G/L Number: 016204.01.000.00 **Buildings CE GEN FD**

Rauscher Bros. - Gen	G23-377	6/23 Trash pickup Town Hall	7/1/2023	$115.00
Total for G/L Account		**016204.01.000.00**	**$115.00**	

G/L Number: 051324.01.000.00 **Hwy Garage Bldg CE GEN FD**

Description

Rauscher Bros. - Gen	G23-377	6/23 Trash pickup Hwy Barn	7/1/2023	$115.00
Total for G/L Account		**051324.01.000.00**	**$115.00**	

G/L Number: 071804.01.000.00 **Special Recreation Facilities CE GEN FD**

Rauscher Bros. - Gen	G23-377	6/23 Trash pickuup Ducth Ballfiel	7/1/2023	$70.00
Total for G/L Account		**071804.01.000.00**	**$70.00**	

Total for all Vouchers **$300.00**

Total for Vendor: Rauscher Bros. - Gen **$300.00**

G/L Number: 090608.01.000.00 **Medical Insuance (Town Share) GEN FD**

Ritter, Mark - Gen	G23-378	7/23 Medicare Reimbursement	7/1/2023	$69.10
Total for G/L Account		**090608.01.000.00**	**$69.10**	

Total for all Vouchers **$69.10**

Total for Vendor: Ritter, Mark - Gen **$69.10**

G/L Number: 013554.01.000.00 **Assessor CE GEN FD**

Rome Sentinel Co - Gen	G23-380	lgl not-final assessment roll	########	$22.58
Rome Sentinel Co - Gen	G23-380	affidavit-roll	########	$20.00
Total for G/L Account		**013554.01.000.00**	**$42.58**	

G/L Number: 080204.01.000.00 **Planning CE GEN FD**

Rome Sentinel Co - Gen	G23-379	Pub Hear-Beth Roberts&Tim Huls	########	$15.85
Total for G/L Account		**080204.01.000.00**	**$15.85**	

Total for all Vouchers **$58.43**

Total for Vendor: Rome Sentinel Co - Gen **$58.43**

G/L Number: 090608.01.000.00 **Medical Insuance (Town Share) GEN FD**

Rubyor, MaryAnn L.	G23-381	7/23 Medicare Reimbursement	7/1/2023	$69.10

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

	Total for G/L Account	**090608.01.000.00**		**$69.10**		
		Total for all Vouchers		**$69.10**		
Total for Vendor:	**Rubyor, MaryAnn L.**			**$69.10**		

G/L Number: 081604.01.000.00 **Refuse/Garbage CE GEN FD**

Seelman, Benjamin-Hwy	G23-389	6hrs@30. trash day-Run Loader	########	$180.00	
Total for G/L Account		**081604.01.000.00**	**$180.00**		
		Total for all Vouchers	**$180.00**		
Total for Vendor:	**Seelman, Benjamin-Hwy**		**$180.00**		

G/L Number: 016504.01.000.00 **Central Communications CE GEN FD**

Spectrum-Gen	G23-331	Internet Serv Town Hall 6/24-7/23	########	$187.97	110444
Total for G/L Account		**016504.01.000.00**	**$187.97**		
		Total for all Vouchers	**$187.97**		
Total for Vendor:	**Spectrum-Gen**		**$187.97**		

G/L Number: 002610.01.000.00 **Fines, Forfeits of Bail GEN FD**

State Controller-Justice	G23-382	4/23 fines & fees-State Controller	7/3/2023	$1,552.00	
Total for G/L Account		**002610.01.000.00**	**$1,552.00**		
		Total for all Vouchers	**$1,552.00**		
Total for Vendor:	**State Controller-Justice**		**$1,552.00**		

G/L Number: 085104.01.000.00 **Community Beautification GEN FD**

Swartout Construction Co - Ge	G23-383	porta pot-Woodhull Boat Launch	7/1/2023	$140.00
Swartout Construction Co - Ge	G23-383	porta pot-Otter Lake 6/1-6/30/23	7/1/2023	$140.00
Total for G/L Account		**085104.01.000.00**	**$280.00**	

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

		Total for all Vouchers	**$280.00**	
Total for Vendor: Swartout Construction Co - Gen			**$280.00**	

G/L Number: 014104.01.000.00 **Town Clerk CE GEN FD**

Terry, Tracy-Gen	G23-384	mileage 98@.56 6/15-7/11/23 ban	########	$54.88	
	Total for G/L Account	**014104.01.000.00**	**$54.88**		
		Total for all Vouchers	**$54.88**		
Total for Vendor: Terry, Tracy-Gen			**$54.88**		

G/L Number: 016804.01.000.00 **Data Processing CE GEN FD**

Total Solutions-Gen	G23-385	8/1-8/31/23 Micrsoft 365 bus apps	7/1/2023	$8.25	
Total Solutions-Gen	G23-385	5@6. 8/1-8/31/23 Micrsoft 365 bu	7/1/2023	$30.00	
Total Solutions-Gen	G23-385	8@12.5 8/1-8/31/23 Micrsoft 365	7/1/2023	$100.00	
Total Solutions-Gen	G23-385	8/1-8/1/23 Tech Support serv	7/1/2023	$950.00	
	Total for G/L Account	**016804.01.000.00**	**$1,088.25**		
		Total for all Vouchers	**$1,088.25**		
Total for Vendor: Total Solutions-Gen			**$1,088.25**		

G/L Number: 076204.01.000.00 **Adult Rec CE GEN FD**

Trackside Blazers - Gen	G23-386	Groomer Tracks	7/1/2023	$12,000.00	
	Total for G/L Account	**076204.01.000.00**	**$12,000.00**		
		Total for all Vouchers	**$12,000.00**		
Total for Vendor: Trackside Blazers - Gen			**$12,000.00**		

G/L Number: 016204.01.000.00 **Buildings CE GEN FD**

Verizon-Gen	G23-332	Acct Mopnthly charge	########	$7.83	110445
Verizon-Gen	G23-332	Jackpack bill #315-271-7502	########	$10.32	110445

Town Of Forestport
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Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

		Description			
	Total for G/L Account	**016204.01.000.00**		**$18.15**	
G/L Number: 016504.01.000.00		**Central Communications CE GEN FD**			
Verizon-Gen	G23-332	Acct Monthly charge	########	$7.83	110445
Verizon-Gen	G23-332	Bldg & Grds cell bill #315-335-74	########	$26.57	110445
	Total for G/L Account	**016504.01.000.00**		**$34.40**	
G/L Number: 050104.01.000.00		**Highway Administration CE GEN FD**			
Verizon-Gen	G23-332	Acct Monthly charge	########	$7.84	110445
Verizon-Gen	G23-332	Hwy Super cell bill #315-335-760	########	$24.35	110445
	Total for G/L Account	**050104.01.000.00**		**$32.19**	
G/L Number: 086644.01.000.00		**Codes Enforcement CE GEN FD**			
Verizon-Gen	G23-332	Acct Monthl charge	########	$7.84	110445
Verizon-Gen	G23-332	Code Cell Bill #315-795-0358	########	$24.35	110445
	Total for G/L Account	**086644.01.000.00**		**$32.19**	
		Total for all Vouchers		**$116.93**	
	Total for Vendor:	**Verizon-Gen**		**$116.93**	
G/L Number: 074104.01.000.00		**Library CE GEN FD**			
Woodgate Free Library - Gen	G23-387	2023 Woodgate Lib Serv & kids S	7/1/2023	$2,800.00	
	Total for G/L Account	**074104.01.000.00**		**$2,800.00**	
		Total for all Vouchers		**$2,800.00**	
	Total for Vendor:	**Woodgate Free Library - Gen**		**$2,800.00**	

Town Of Forestport
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Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

Grand Total of all Vouchers $37,114.38

I hereby certify that the vouchers listed on this abstract for this period consisting of these attached pages were audited and allowed in the amounts shown. Authorization is hereby given and direction is made to pay each of the claimants the amount opposite his name.

Authorized Official	Date
Authorized Official	Authorized Official
Authorized Official	Authorized Official
Authorized Official	Authorized Official

Highway

Town Of Forestport
Oneida County
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Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

G/L Number: 051324.03.000.00 **Hwy Garage Bldg CE HWY FD**

ARAMARK-Hwy	H23-236	7/5/23 Hwy Super Uniforms	7/5/2023	$46.76
ARAMARK-Hwy	H23-213	6/21/23 Hwy Super unifomrs	########	$46.76
ARAMARK-Hwy	H23-214	6/28/23 Hwy Super uniforms	########	$46.76
ARAMARK-Hwy	H23-237	7/12/23 Hwy Super Uniforms	########	$46.76

Total for G/L Account 051324.03.000.00 $187.04

Total for all Vouchers $187.04

Total for Vendor: ARAMARK-Hwy $187.04

G/L Number: 051304.03.000.00 **Machinery CE HWY FD**

Boonville Napa Auto Parts - H	H23-220	all trks-2@16.67 oil bath hub cap	########	$33.34
Boonville Napa Auto Parts - H	H23-215	all trks-8@12.99 2.5 Def	6/1/2023	$103.92
Boonville Napa Auto Parts - H	H23-216	gradall-V-ribbed belt	6/8/2023	$56.67
Boonville Napa Auto Parts - H	H23-217	Tractor-coolant leak repair	########	$16.99
Boonville Napa Auto Parts - H	H23-218	Trk#10-LE 2 1 2" rd lens - 2015	########	$10.34
Boonville Napa Auto Parts - H	H23-219	gradall-serpentine belt	########	$56.67
Boonville Napa Auto Parts - H	H23-220	Trk#1-2@2.68 gaskets - 2015 intl	########	$5.36

Total for G/L Account 051304.03.000.00 $283.29

Total for all Vouchers $283.29

Total for Vendor: Boonville Napa Auto Parts - Hwy $283.29

G/L Number: 051104.03.000.00 **General Repairs CE HWY FD**

C & R Hardware - Hwy	H23-223	2@12.99 culvert pipe grate 1/2" x	########	$25.98
C & R Hardware - Hwy	H23-224	2@12.99 culvert pipe grate 1/2" x	########	$25.98

Total for G/L Account 051104.03.000.00 $51.96

G/L Number: 051304.03.000.00 **Machinery CE HWY FD**

C & R Hardware - Hwy	H23-226	Trk#6-rusto flat black spray paint-	########	$6.99
C & R Hardware - Hwy	H23-225	Trk#5-10@.26 misc nuts & bolts-	########	$2.60
C & R Hardware - Hwy	H23-222	guys Rd Work-2@7.99 bug spray	########	$15.98

		Description		
C & R Hardware - Hwy	H23-221	breakroom-scrubbing sponge 3pk	########	$1.99
C & R Hardware - Hwy	H23-221	breakroom-medium duty sponge 6	########	$1.99
Total for G/L Account		**051304.03.000.00**	**$29.55**	
		Total for all Vouchers	**$81.51**	
Total for Vendor: C & R Hardware - Hwy			**$81.51**	

G/L Number: 051304.03.000.00 **Machinery CE HWY FD**

Clinton Tractor & Implement -	H23-227	Ford Tractor-Radiator	########	$720.00
Total for G/L Account		**051304.03.000.00**	**$720.00**	
		Total for all Vouchers	**$720.00**	
Total for Vendor: Clinton Tractor & Implement - Hwy			**$720.00**	

G/L Number: 090608.03.000.00 **Medical Insuance (Town Share) HWY FD**

Excellus - Hwy	H23-228	8/23 ER health ins-Hwy Clerk	########	$650.00
Total for G/L Account		**090608.03.000.00**	**$650.00**	
		Total for all Vouchers	**$650.00**	
Total for Vendor: Excellus - Hwy			**$650.00**	

G/L Number: 051122.03.000.00 **Permanent Improvement EQ(chips) HWY FD**

Gorman Brothers-Hwy	H23-229	2.5days@1950. roller with operat	########	$4,875.00
Gorman Brothers-Hwy	H23-229	25.117gal@2.56 chipsel CRS-2P	########	$64,299.52
Gorman Brothers-Hwy	H23-229	2.5days@2500. chipper with oper	########	$6,250.00
Gorman Brothers-Hwy	H23-229	25117.gal@.22 Escalation	########	$5,525.74
Total for G/L Account		**051122.03.000.00**	**$80,950.26**	
		Total for all Vouchers	**$80,950.26**	
Total for Vendor: Gorman Brothers-Hwy			**$80,950.26**	

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Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

G/L Number: 051304.03.000.00 **Machinery CE HWY FD**

Halpin's Fuel Service, Inc.-Hw	H23-231	1361.1gal@3.249 on-rd diesel	7/6/2023	$4,422.21
Halpin's Fuel Service, Inc.-Hw	H23-232	533.1gal@2.899 gasoline	7/6/2023	$1,545.46
	Total for G/L Account	**051304.03.000.00**		**$5,967.67**
		Total for all Vouchers		**$5,967.67**
	Total for Vendor:	**Halpin's Fuel Service, Inc.-Hwy**		**$5,967.67**

G/L Number: 051304.03.000.00 **Machinery CE HWY FD**

Haun Welding Supply - Hwy	H23-233	90days@.40 3cyl 0220 Oxygen	7/1/2023	$36.00
Haun Welding Supply - Hwy	H23-233	credit 60days@.40 2 prepaid lease	7/1/2023	($24.00)
Haun Welding Supply - Hwy	H23-233	120days@.25 4cyl beyond 365	7/1/2023	$30.00
Haun Welding Supply - Hwy	H23-233	30days@.40 1cyl 0080 Oxygen	7/1/2023	$12.00
Haun Welding Supply - Hwy	H23-233	30days@.40 1cyl 0390 Acetylene	7/1/2023	$12.00
Haun Welding Supply - Hwy	H23-233	60days@.40 2cyl 0140 Acetylene	7/1/2023	$24.00
Haun Welding Supply - Hwy	H23-233	30days@.40 1cyl 0075 Acetylene	7/1/2023	$12.00
Haun Welding Supply - Hwy	H23-233	30days@.40 1cyl 0220 25%CO2 I	7/1/2023	$12.00
Haun Welding Supply - Hwy	H23-233	30days@.40 1cyl 0110 2.5%CO2,	7/1/2023	$12.00
Haun Welding Supply - Hwy	H23-233	30days@.40 1cyl 0300 Acetylene	7/1/2023	$12.00
Haun Welding Supply - Hwy	H23-233	9ea@.40 cyl maint & requalificati	7/1/2023	$3.60
	Total for G/L Account	**051304.03.000.00**		**$141.60**
		Total for all Vouchers		**$141.60**
	Total for Vendor:	**Haun Welding Supply - Hwy**		**$141.60**

G/L Number: 050104.03.000.00 **Highway Administration CE HWY FD**

Highway Petty Cash	H23-230	stamps 40@.63	7/8/2023	$25.20
	Total for G/L Account	**050104.03.000.00**		**$25.20**
		Total for all Vouchers		**$25.20**

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

Total for Vendor: Highway Petty Cash **$25.20**

G/L Number: 051304.03.000.00 **Machinery CE HWY FD**

Jerry's Small Engine-Hwy	H23-234	John Deere Mower-12volt coil	7/5/2023	$55.73	
Jerry's Small Engine-Hwy	H23-234	John Deere Mower-5hrs@50. labo	7/5/2023	$250.00	
Jerry's Small Engine-Hwy	H23-234	John Deere Mower-oil Drane	7/5/2023	$8.52	
Jerry's Small Engine-Hwy	H23-234	John Deere Mower-base gasket	7/5/2023	$9.70	
Jerry's Small Engine-Hwy	H23-234	John Deere Mower-2.5@6.49 qt	7/5/2023	$16.23	
Total for G/L Account		**051304.03.000.00**	**$340.18**		

Total for all Vouchers **$340.18**

Total for Vendor: Jerry's Small Engine-Hwy **$340.18**

G/L Number: 090608.03.000.00 **Medical Insuance (Town Share) HWY FD**

NYS Teamsters H & H - Hwy	H23-211	6/23 Hwy ER Health ins share	########	$6,088.34	254947
NYS Teamsters H & H - Hwy	H23-211	6/23 Hwy EE Health ins share	########	$676.42	254947
Total for G/L Account		**090608.03.000.00**	**$6,764.76**		

Total for all Vouchers **$6,764.76**

Total for Vendor: NYS Teamsters H & H - Hwy **$6,764.76**

G/L Number: 050104.03.000.00 **Highway Administration CE HWY FD**

Quill - Hwy	H23-235	Brpther TN760 Toner	########	$80.65	
Total for G/L Account		**050104.03.000.00**	**$80.65**		

Total for all Vouchers **$80.65**

Total for Vendor: Quill - Hwy **$80.65**

G/L Number: 051324.03.000.00 **Hwy Garage Bldg CE HWY FD**

Verizon-Hwy	H23-212	Acct Monthly charge	########	$7.83	254948
Verizon-Hwy	H23-212	Hwy Foreman cell bill #315-335-	########	$30.34	254948

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Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

	Description	
Total for G/L Account	051324.03.000.00	$38.17
	Total for all Vouchers	$38.17
Total for Vendor:	Verizon-Hwy	$38.17

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/18/2023

Description

Grand Total of all Vouchers $96,230.33

I hereby certify that the vouchers listed on this abstract for this period consisting of these attached pages were audited and allowed in the amounts shown. Authorization is hereby given and direction is made to pay each of the claimants the amount opposite his name.

Authorized Official	Date
Authorized Official	Authorized Official
Authorized Official	Authorized Official
Authorized Official	Authorized Official

Town Board Escrow Acct

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/14/2023

Description

G/L Number: 080904.18.014.00 **Admin CE Town Board Escrow Copies/fax**

Forestport, Town Of -Town Es	TB23-7	V#2023-2 Steve Harris-photo copi	7/1/2023	$2.50
	Total for G/L Account	**080904.18.014.00**	**$2.50**	

G/L Number: 080904.18.016.00 **Admin CE Town Board Escrow Mailing/postage/envelopes**

Forestport, Town Of -Town Es	TB23-7	V#2023-2 Steve Harris-mail,post	7/1/2023	$6.80
	Total for G/L Account	**080904.18.016.00**	**$6.80**	

G/L Number: 080904.18.017.00 **Admin CE Town Board Escrow Ads**

Forestport, Town Of -Town Es	TB23-7	V#2023-2 Steve Harris-Advertisin	7/1/2023	$20.27
	Total for G/L Account	**080904.18.017.00**	**$20.27**	

G/L Number: 080904.18.018.00 **Admin CE Town Board Escrow checks written**

Forestport, Town Of -Town Es	TB23-7	V#2023-2 Steve Harris-check writ	7/1/2023	$2.00
	Total for G/L Account	**080904.18.018.00**	**$2.00**	

Total for all Vouchers **$31.57**

Total for Vendor: Forestport, Town Of -Town Esc **$31.57**

G/L Number: 080904.18.000.00 **Admin CE Town Board Escrow**

Harris, Steve	TB23-8	V#2023-2 Steve Harris - Refund	7/1/2023	$68.43
	Total for G/L Account	**080904.18.000.00**	**$68.43**	

Total for all Vouchers **$68.43**

Total for Vendor: Harris, Steve **$68.43**

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/14/2023

Description

Grand Total of all Vouchers $100.00

I hereby certify that the vouchers listed on this abstract for this period consisting of these attached pages were audited and allowed in the amounts shown. Authorization is hereby given and direction is made to pay each of the claimants the amount opposite his name.

Authorized Official	Date
Authorized Official	Authorized Official
Authorized Official	Authorized Official
Authorized Official	Authorized Official

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/17/2023

Description

G/L Number: 080904.17.014.00 **Admin CE Planning Escrow Copies/fax**

Forestport, Town Of - Esc	P23-9	PH#2023-4 Beth Roberts-Photo C	########	$2.50
	Total for G/L Account	**080904.17.014.00**	**$2.50**	

G/L Number: 080904.17.016.00 **Admin CE Planning Escrow Mailing/postage/envelopes**

Forestport, Town Of - Esc	P23-9	PH#2023-4 Beth Roberts-Mail,po	########	$4.40
	Total for G/L Account	**080904.17.016.00**	**$4.40**	

G/L Number: 080904.17.017.00 **Admin CE Planning Escrow Ads**

Forestport, Town Of - Esc	P23-9	PH#2023-4 Beth Roberts-Advertis	########	$15.85
	Total for G/L Account	**080904.17.017.00**	**$15.85**	

G/L Number: 080904.17.018.00 **Admin CE Planning Escrow checks written**

Forestport, Town Of - Esc	P23-9	PH#2023-4 Beth Roberts-Checks	########	$2.00
	Total for G/L Account	**080904.17.018.00**	**$2.00**	

Total for all Vouchers **$24.75**

Total for Vendor: Forestport, Town Of - Esc **$24.75**

G/L Number: 080904.17.000.00 **Admin CE Planning Escrow**

Roberts, Beth F.	P23-10	PH#2023-4 Beth Roberts-reund m	########	$75.25
	Total for G/L Account	**080904.17.000.00**	**$75.25**	

Total for all Vouchers **$75.25**

Total for Vendor: Roberts, Beth F. **$75.25**

Planning Board Esc Acct

Town Of Forestport
Oneida County
New York

Abstract of Audited Vouchers for the period: 6/23/2023 thru 7/17/2023

Description

Grand Total of all Vouchers **$100.00**

I hereby certify that the vouchers listed on this abstract for this period consisting of these attached pages were audited and allowed in the amounts shown. Authorization is hereby given and direction is made to pay each of the claimants the amount opposite his name.

Authorized Official	Date
Authorized Official	Authorized Official
Authorized Official	Authorized Official
Authorized Official	Authorized Official

Water Systems Operation Report

For Multiple Distribution System Chlorinated Disinfection Systems

MONTHLY SUBMISSION FORM

Oneida County

Instructions: Complete form and submit to the Oneida County Health Department within 10 days of the close of the reporting period.

185 Genesee St - 4th floor, Adirondack Bank Bldg, Utica, NY 13501 - Fax: 315-798-6486 - email: sclive@ocgov.net

Public Water System Name	FORESTPORT WATER DISTRICT
PWS Federal ID Number	NY3202389
Population Served	800
Source Water Type	Groundwater
Reporting Month / Year	June-23
Town / City / Village	Forestport (T)
Service Connections	225
Number of Sources / EPs Used	3
Treatment Used	Chlorination

Date	Source(s) in Use (= X)		Treated Water Volume (gallons per day)	Liquid Sodium Hypochlorite Used (Quarts added)		Free Chlorine Residual (mg/l)		Other Measurements	
	Pierce Well	Carbone Wells				At ENTRY POINT	DISTRIBUTION (at sample locations)		
1	X		37700	2					
2	X		0	0		1.75	0.95		
3	X		26200	0					
4	X		58400	0					
5	X		0	0		2.2	0.9		
6	X		0	0					
7	X		14400	0		0.97	1.05		
8	X		48500	0					
9	X		0	0		1.75	0.95		
10	X		0	0					
11	X		68300	0					
12	X		0	0		1.6	0.85		
13	X		0	0					
14	X		39700	0		0.45	0.77		
15	X		6100	0					
16	X		0	2		1.82	0.72		
17	X		9700	0					
18	X		60100	0					
19	X		0	0		1.74	0.68		
20	X		0	0					
21	X		38000	0		1.11	0.85		
22	X		26100	0					
23	X		0	0		1.45	0.62		
24	X		1900	0					
25	X		62900	0					
26	X		0	0		1.11	0.58		
27	X		19800	0					
28	X		0	0		1.35	0.8		
29	X		0	0					
30	X		40300	0		0.75	0.7		
31	X			0					
Total			558100.00	2.00		18.05	10.42		
Avg			18603.33	0.07		1.39	0.80		

Chlorine Mix Ratio

Quarts of hypochlorite used for mix (Qc)	Quarts of water used for mix (Qw)	Commercial Strength (%) of hypochlorite solution (Cs)	Strength of solution = (Cs/100)*((Qc)/(Qc+Qw))
2	4	12.5	0.04

Did an emergency occur in any part of the water system? (if yes, explain)	No	

Reported by	Ted Daktor	Title	Water Treatment Plant Operator		
Signature	Ted Daktor	Date	7/18/23		
NYS Certified Operator - Grade Level	C	NYS Water Operator #	NY0040067	Expiration Date	1/31/2023

As required by 5-1.72, "Operation of a Public Water System," a copy of this form shall be sent to your local health department by the 10th calendar day of the next reporting period.

Instructions: Complete form and submit to the Oneida County Health Department within 10 days of the close of the reporting period.
185 Genesee St - 4th floor, Adirondack Bank Bldg, Utica, NY 13501 - Fax: 315-798-6486 - email: sclive@ocgov.net

Water Systems Operation Report

MONTHLY SUBMISSION FORM

Microbiological Samples and Free Chlorine Residual + Other Samples

Oneida County

Public Water System Name	FORESTPORT WATER DISTRICT	Reporting Month / Year	June-23
PWS Federal ID Number	NY3202389	Population Served	800

Number of ROUTINE Coliform Samples Required	1	PER MONTH	Number of REPEAT Coliform Samples Required	
Number of ROUTINE Coliform Samples Collected	1		Number of REPEAT Coliform Samples Collected	

PLEASE SUBMIT ALL LABORATORY RESULTS WHEN RECEIVED &/or REQUIRE LABORATORY SUBMISSION TO ONEIDA COUNTY HEALTH DEPARTMENT

Sample Location (address, site # etc.) per Approved Coliform [illegible] Sample Plan	Date of Sample	Sample Type 1 - Routine 2 - Repeat	Total Coliform Positive	E.coli Positive	Free Chlorine Residual
Forestport Post Office, 12180 Woodhull Rd	06/08/23	1	No	No	0.85

Sample Collector: Ted Daktor

NYSDOH Certified Laboratory used: Life Science Laboratories, Inc.

Did a M&R violation occur during this monitoring period?	No	If "Yes," check reason(s) below:
	Actual number of routine samples is fewer than required.	
	Did not collect / analyze required number of repeat samples.	
	Did not collect / analyze for E. coli for positive Total Coliform from routine / repeat sample.	

Did a MCL violation occur during this monitoring period?	No	If "Yes," check reason(s) below (see also Part 5, Table 6 for additional information):
	For systems collecting less than 40 samples per month : two or more of the samples (routine and / or repeat) are positive for Total Coliform (= Total Coliform MCL violation).	
	For systems collecting 40 or more samples per month : more than 5% of the samples (routine and / or repeat) are positive for Total Coliform (= Total Coliform MCL violation).	
	The original sample was E.coli positive and at least 1 repeat sample was positive for Total Coliform (= E.coli MCL violation).	

Reminder: System must collect a minimum of five (5) routine microbiological monitoring samples during the month following a Total Coliform Positive sample collection.

OTHER SAMPLES: Sample Location (address, site #, etc...) per [illegible] Approved Sample Plan	Date of Sample	Sample Type (e.g. Lead / Copper, Inorganics, Nitrate)	Number of Samples Collected	Are All Results < MCL / AL? (If not indicate)

Sample Collector: Ted Daktor

NYSDOH Certified Laboratory used: Verona laboratory, Inc.

Did an MCL Violation or AL exceedance occur for any other contaminant? (describe)	No

Comments:

As required by 5-1.72, "Operation of a Public Water System," a copy of this form shall be sent to your local health department by the 10th calendar day of the next reporting period.

Instructions: Complete form and submit to the Oneida County Health Department within 10 days of the close of the reporting period.
800 Park Avenue, Utica, NY 13501 - Fax: 315-798-6486 - email: sclive@ocgov.net

Free Chlorine Residual RAA Report
(To be used in conjunction with quarterly report)

Quarterly Report for the Running Annual Average (RAA)
for Free Chlorine Residual as Reported on Bacteriological Samples Results

System / Treatment Plant: Forestport Water District

PWS ID#: NY3202389

Number of Samples Required: 1 per month

Prepared by: Dave Campbell - Water Clerk

Month (mg/l)	Chlorine Avg / month	Quarterly Avg	RAA for last 4 quarters
July-21	0.36		
August-21	0.17		
September-21	0.74	0.42	#VALUE!
October-21	0.34		
November-21	0.32		
December-21	0.24	0.30	0.55
January-22	0.24		
February-22	0.27		
March-22	0.31	0.27	0.59
April-22	0.19		
May-22	0.25		
June-22	0.28	0.24	0.31
July-22	0.11		
August-22	0.12		
September-22	0.26	0.16	0.24
October-22	0.19		
November-22	0.17		
December-22	0.55	0.30	0.24
January-23	0.27		
February-23	0.26		
March-23	0.29	0.27	0.24
April-23	0.21		
May-23	0.26		
June-23	0.43	0.30	0.26
		0.00	0.22
		0.00	0.14
		0.00	0.07
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00
		0.00	0.00

ENTER EACH CHLORINE RESIDUAL
vvvvvvvvvv

0.85
0

0.425 <<<<<---- Enter Average in Table

Water Systems Operation Report

MONTHLY SUBMISSION FORM

For Single Distribution System - Systems with Chlorine and other treatment (e.g. UV, Filtration)

Oneida County

Instructions: Complete form and submit to the Oneida County Health Department within 10 days of the close of the reporting period.

185 Genesee Street, 4th Floor, Utica, NY 13501 - Fax: 315-798-6486 - email: ochdwater@ocgov.net

Public Water System Name	Town of Forestport Buckhorn Water	Reporting Month / Year	June-23
PWS Federal ID Number	NY3221818	Town / City / Village	FORESTPORT (T)
Population Served		Service Connections	
Number of Sources / EPs Used			
Source Water Type	Groundwater Well		
Treatment Used	Chlorination		

Day	Source(s) in Use	Treated Water Volume (Gallons per day)	Liquid Hypochlorite added to Crock (Quarts)	Chlorination – Free Chlorine Residual (mg/l): AT ENTRY POINT Required Daily	Chlorination – Free Chlorine Residual (mg/l): IN DISTRIBUTION (at sample locations - when done)	Other Treatment Information: Turbidity (NTU) (if checked)
	Well			0.13	0.3	
	Well			0.27	0.3	
	Well			0.3	0.29	
	Well			0.2	0.27	
	Well			0.21	0.3	
	Well		0.5	0.24	0.31	
	Well			0.21	0.3	
	Well			0.24	0.27	
	Well			0.22	0.3	
	Well			0.23	0.32	
	Well			0.2	0.37	
	Well			0.46	0.31	
	Well		0.5	0.25	0.34	
	Well			0.33	0.39	
	Well			0.23	0.33	
	Well			0.29	0.32	
	Well			0.36	0.31	
	Well			0.73	0.34	
	Well			0.41	0.4	
	Well		0.5	0.27	0.35	
	Well			0.39	0.37	
	Well			0.31	0.4	
	Well			0.32	0.45	
	Well			0.2	0.45	
	Well			0.36	0.39	
	Well			0.25	0.36	
	Well		0.5	0.37	0.37	
	Well			0.24	0.35	
	Well			0.92	0.36	
	Well			0.24	0.4	
	Well					
Total		0.00	0.00	0.24	0.40	0.00
Avg		#DIV/0	#DIV/0	0.24	0.40	#DIV/0

Chlorine Mix Ratio

Quarts of hypochlorite used for mix (Qc)	Quarts of water used for mix (Qw)	Commercial Strength (%) of hypochlorite solution (Cs)	Strength of solution = (Cs/100)*(Qc)/(Qc+Qw)	
0.5	4	12.5	0.014	[redacted]

Did an emergency occur in any part of the water system (if yes, explain): No

Reported By	Ted Dalton	Title	Operator
Signature	Ted Dalton	Date	7/18/2023
NYS Certified Operator - Grade Level		NYS Water Operator #	NY 0040067

As required by 5-1.72, "Operation of a Public Water System," a copy of this form shall be sent to your local health department by the 10th calendar day of the next reporting period.

Instructions: Complete form and submit to the Oneida County Health Department within 10 days of the close of the reporting period.

185 Genesee Street, 4th Floor, Utica, NY 13501 - Fax: 315-798-6486 - email: OCHDWater@ocgov.net

Water Systems Operation Report

Microbiological Samples and Free Chlorine Residual + Other Samples

MONTHLY SUBMISSION FORM

Oneida County

	Town of Forestport Buckhorn Water	Reporting Month / Year	June-23
	NY3221818	Population Served	87 (s) / 30 (w)
Number of ROUTINE Coliform Samples Required		per quarter	Number of REPEAT Coliform Samples Required	
Number of ROUTINE Coliform Samples Collected			Number of REPEAT Coliform Samples Collected	

PLEASE SUBMIT ALL LABORATORY RESULTS WHEN RECEIVED &/or REQUIRE LABORATORY SUBMISSION TO ONEIDA COUNTY HEALTH DEPARTMENT

Sample Location	Date of Sample	Sample Type 1 - Routine 2 - Repeat	Total Coliform Positive (Yes /No)	E.coli Positive (Yes / No)	Free Chlorine Residual
Buckhorn Pump Station	5/4/2023	1	No	No	0.33

Sample Collector:

NYSDOH Certified Laboratory used:

Did a M&R violation occur during this monitoring period? *If "Yes," check reason(s) below*

- Actual number of routine samples is lower than required
- Did not collect / analyze required number of repeat samples
- Did not collect / analyze for E. coli for positive Total Coliform from routine / repeat sample

Did a MCL violation occur during this monitoring period? *If "Yes," check reason(s) below (see also Part 5, Table 6 for additional information).*

- For systems collecting 40 or more samples per month : more than 5% of the samples (routine and / or repeat) are positive for Total Coliform (= Total Coliform MCL violation)
- The original sample was E.coli positive and at least 1 repeat sample was positive for Total Coliform (= E.coli MCL violation).

Reminder: System must collect a minimum of five (5) routine microbiological monitoring samples during the month following a Total Coliform Positive sample collection.

OTHER SAMPLES - Sample Location	Date of Sample	Sample Type (e.g. Lead / Copper, Inorganics, Nitrate)	Number of Samples Collected	Are All Results < MCL / AL ? (if not indicate)

Sample Collector:

NYSDOH Certified Laboratory used:

Did an MCL Violation or AL exceedance occur for any other contaminant? (describe)

Comments:

As required by 5-1.72, "Operation of a Public Water System," a copy of this form shall be sent to your local health department by the 10th calendar day of the next reporting period.

Instructions: Complete form and submit to the Oneida County Health Department within 10 days of the close of the reporting period.
185 Genesee Street, 4th Floor, Utica, NY 13501 - Fax: 315-798-6486 - email: OCHDWater@ocgov.net

Free Chlorine Residual RAA Report

(To be used in conjunction with quarterly report)

Quarterly Report for the Running Annual Average (RAA)

[illegible] for Free Chlorine Residual as Reported on Monthly Bacteriological Sample Results

System / Treatment Plant: Town of Forestport Buckhorn Water

PWS ID#: NY3221818

Number of Samples Required: 1 Routine / Quarter

Prepared by: Ted Daktor/Operator

(mg/l) Month	Chlorine Avg / month	Quarterly Avg	RAA for last 4 quarters
January-19			
February-19	0.30		
March-19		0.10	0.10
April-19			
May-19	0.55		
June-19		0.18	
July-19			
August-19	0.39		
September-19		0.13	0.13
October-19			
November-19	0.29		
December-19		0.10	0.13
January-20	0.34		
February-20			
March-20		0.11	0.13
April-20			
May-20			
June-20	0.34	0.11	0.11
July-20			
August-20	0.20		
September-20		0.07	0.10
October-20			
November-20	0.32		
December-20		0.11	0.10
January-21			
February-21	0.35		
March-21		0.12	
April-21			
May-21	0.29		
June-21		0.10	0.10
July-21			
August-21	0.32		
September-21		0.11	0.11
October-21	0.33		
November-21			
December-21		0.11	0.11
January-22			
February-22	0.23		
March-22		0.08	0.10
April-22			
May-22			
June-22		0.00	0.07
July-22			
August-22			
September-22		0.00	0.05
October-22			
November-22			
December-22		0.00	0.02
January-23		0.49	
February-23			
March-23		0.00	0.00
April-23			
May-23			
June-23		0.00	0.00
July-23			
August-23			
September-23		0.00	0.00
October-23			
November-23			
December-23		0.00	0.00

DISCHARGE MONITORING REPORT (DMR)

OMB No. 2040-0004

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME: FORESTPORT (T)
ADDRESS: PO BOX 137
FORESTPORT, NY 13338
FACILITY: FORESTPORT (T) WWTP
LOCATION: RIVER STREET
FORESTPORT, NY 13338

NY0236756	001-M
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY	MM/DD/YYYY
6/1/2023	6/30/2023

DMR Mailing ZIP CODE: 13338
MINOR
(SUBR 06)

External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. centigrade	SAMPLE MEASUREMENT	******	******	******	******	******	20.3				
00010 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	Req. Mon. DAILY MX	deg C		Five per Week	GRAB
Temperature, water deg. centigrade	SAMPLE MEASUREMENT	******	******	******	******	******	17.6				
00010 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	******	******	******	******	******	Req. Mon. DAILY MX	deg C		Five per Week	GRAB
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	0.2	0.2		******	<4	<4				
00310 1 0 Effluent Gross	PERMIT REQUIREMENT	6 30DA AVG	9 7 DA AVG	lb/d	******	30 30DA AVG	45 7 DA AVG	mg/L		Monthly	GRAB
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	******	******	******	******	******	470				
00310 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	******	******	******	******	******	Req. Mon. 7 DA AVG	mg/L		Monthly	GRAB
pH	SAMPLE MEASUREMENT	******	******	******	6.32	******	6.78				
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	6 MINIMUM	******	9 MAXIMUM	SU		Five per Week	GRAB
pH	SAMPLE MEASUREMENT	******	******	******	6.81	******	7.74				
00400 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	******	******	******	Req. Mon. MINIMUM	******	Req. Mon. MAXIMUM	SU		Five per Week	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	0.2	0.2		******	<4	<4				
00530 1 0 Effluent Gross	PERMIT REQUIREMENT	6 30DA AVG	9 7 DA AVG	lb/d	******	30 30DA AVG	45 7 DA AVG	mg/L		Monthly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE		DATE
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

SEE PERMIT FOOTNOTES REGARDING VISUAL OBSERVATIONS OF EFFLUENT QUALITY ON SATURDAYS AND SUNDAYS.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME: FORESTPORT (T)
ADDRESS: PO BOX 137
FORESTPORT, NY 13338
FACILITY: FORESTPORT (T) WWTP
LOCATION: RIVER STREET
FORESTPORT, NY 13338

NY0236756	001-M
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD

MM/DD/YYYY	MM/DD/YYYY
6/1/2023	6/30/2023

DMR Mailing ZIP CODE: 13338
MINOR
(SUBR 06)

External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING VALUE	QUANTITY OR LOADING VALUE	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION VALUE	QUALITY OR CONCENTRATION VALUE	QUALITY OR CONCENTRATION VALUE	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
Solids, total suspended	SAMPLE MEASUREMENT	******	******	******	******	******	300				
00530 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	******	******	******	******	******	Req. Mon. 7 DA AVG	mg/L		Monthly	GRAB
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******	******	<0.1				
00545 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******	******	******	******	.3 DAILY MX	mL/L		Five per Weel	GRAB
Solids, settleable	SAMPLE MEASUREMENT	******	******	******	******	******	48.0				
00545 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	******	******	******	******	******	Req. Mon. DAILY MX	mL/L		Five per Week	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	.005	******		******	******	******	******			
50050 G 0 Raw Sewage Influent	PERMIT REQUIREMENT	.024 MO AVG	******	MGD	******	******	******	******		Continuous	Recorder (auto)
BOD, 5-day, percent removal	SAMPLE MEASUREMENT	******	******	******	99%	******	******				
81010 K 0 Percent Removal	PERMIT REQUIREMENT	******	******	******	85 MN % RMV	******	******	%		Monthly	CALCTD
Solids, suspended percent removal	SAMPLE MEASUREMENT	******	******	******	99%	******	******				
81011 K 0 Percent Removal	PERMIT REQUIREMENT	******	******	******	85 MN % RMV	******	******	%		Monthly	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE
AREA Code	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
SEE PERMIT FOOTNOTES REGARDING VISUAL OBSERVATIONS OF EFFLUENT QUALITY ON SATURDAYS AND SUNDAYS.

EPA Form 3320-1 (Rev.01/06) Previous editions may be used.

BWCP - 6 (8/2007) Version 1.2

NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION
DIVISION OF WATER

WASTEWATER FACILITY OPERATION REPORT FOR THE MONTH OF June, 2023.

SPDES PERMIT NO. NY-SPDES# 0236756 | FACILITY NAME | FACILITY OWNER | FACILITY LOCATION

Day	Date	Daily Precip In/day	VOLUME OF WASTEWATER TREATED Inst. Max MGD	Daily Ave. MGD	Inst. Min. MGD	TEMPERATURE (C°/F°) Influent (2)	Effluent (2)	pH (S.U.) Influent Minimum	Influent Maximum	Effluent Minimum	Effluent Maximum	SETTLEABLE SOLIDS (ml/l) Influent Maximum	Effluent Maximum	B.O.D.₅ (mg/l) Influent Type	Effluent Type	SUSPENDED SOLIDS (mg/l) Influent Type	Effluent Type
T	1	0	5:58A	4855		14.6	16.9		6.96	6.36		24.0	<0.1				
F	2	0	6:40A	4506		15.3	18.2		7.02	6.32		38.0	<0.1				
S	3																
S	4																
M	5	0	4:15A	19439		14.8	17.6		6.84	6.39		22.0	<0.1				
T	6	0	6:42A	7065		14.6	17.1		7.39	6.48		38.0	<0.1				
W	7	6mm	5:56A	6285		14.7	16.3		7.28	6.46		46.0	<0.1				
T	8	0	5:50A	5296		14.6	15.8		7.17	6.65		22.0	<0.1	470	<4	300	<4
F	9	3mm	5:59A	4912		14.6	16.4		7.61	6.78		42.0	<0.1				
S	10																
S	11																
M	12	0	5:08A	15574		15.3	16.6		6.81	6.40		32.0	<0.1				
T	13	12mm	6:19A	5177		17.0	18.1		7.23	6.48		20.0	<0.1				
W	14	0	6:05A	4721		14.8	17.0		7.68	6.50		36.0	<0.1				
T	15	10mm	6:23A	5511		15.0	16.2		7.46	6.76		48.0	<0.1				
F	16	0	6:18A	5287		14.7	16.6		7.74	6.69		22.0	<0.1				
S	17																
S	18																
M	19	0	5:12A	16195		15.6	16.6		7.19	6.65		28.0	<0.1				
T	20	0	6:29A	5901		15.6	17.3		7.51	6.61		34.0	<0.1				
W	21	0	5:17A	4365		16.1	17.8		7.26	6.74		26.0	<0.1				
T	22	0	6:20A	5588		15.9	18.4		7.64	6.37		48.0	<0.1				
F	23	0	6:50A	4748		15.8	18.6		7.16	6.45		22.0	<0.1				
S	24																
S	25																
M	26	8mm	5:53A	13751		17.5	19.7		7.31	6.76		28.0	<0.1				
T	27	7mm	5:55A	4355		17.6	20.3		7.20	6.62		38.0	<0.1				
W	28	12mm	5:60A	4621		17.4	19.5		7.53	6.46		22.0	<0.1				
T	29	0	6:26A	5813		16.7	19.5		7.44	6.71		42.0	<0.1				
F	30	0	5:29A	4790		17.1	19.2		7.66	6.42		36.0	<0.1				
	31																

Total Precip	Monthly Average	Monthly Average Influent	Monthly Average Effluent	Min Influent	Max Influent	Min Effluent	Max Effluent	Monthly Maximum	Monthly Maximum
58mm	.005	15.7	17.7	6.81	7.74	6.32	6.78	48.0	<0.1

	B.O.D.₅ Inf.(mg/l)	Eff.(mg/l)	%Rem.	Suspended Solids Inf.(mg/l)	Eff.(mg/l)	%Rem.
30 day arithmetic mean (1)	470	<4	99%	300	<4	99%
30 Day Average Quantity Loading (1)	0.2 lbs/day			0.2 lbs/day		

(1) Refer to February 2002 edition of *DMR Manual for Completing the Discharge Monitoring Report for the State Pollutant Discharge Elimination System (SPDES)* for procedures to calculate loadings, arithmetic mean, geometric mean, maximum, minimum, percent removal, etc.

(2) If temperature is measured more than once a day, report the average for day.

(3) List parameter names in these fields as necessary for multiple outfalls and additional paramters. Make additional sheets if necessary.

NOTE: Refer to current SPDES permit for specific monitoring requirements. Sample type for temperature, pH and settleable solids is grab.

FACILITY MAILING ADDRESS (Street, City, State, Zip Code)	TELEPHONE NUMBER	CHIEF OPERATOR'S NAME	CERTIFICATION GRADE
	( )		

Day	Date	TOTAL PHOSPHORUS(mg/l) Influent Type	TOTAL PHOSPHORUS(mg/l) Effluent Type	CHLORINE RESIDUAL Effluent mg/l Minimum	CHLORINE RESIDUAL Effluent mg/l Maximum	FECAL COLIFORM Effluent MF or MPN/100 ml			REMARKS Enter any other comments, observations, operating problems, equipment failure, etc.
	1								
	2							T	R
	3							F	R clean baskets
	4							S	——
	5							S	—— 5:10A OK
	6							M	R clean baskets 5:02A OK
	7							T	R
	8							W	R clean baskets
	9							T	R Open 1+2 Closed 3+4 Sewer Samples
	10							F	R clean baskets
	11							S	——
	12							S	—— 5:28A OK
	13							M	R clean baskets 5:31A OK
	14							T	R
	15							W	R clean baskets
	16							T	R
	17							F	R clean baskets
	18							S	——
	19							S	—— 5:38A OK
	20							M	R clean baskets 5:07A OK
	21							T	R
	22							W	R clean baskets
	23							T	R
	24							F	R clean baskets
	25							S	——
	26							S	—— 6:34A OK
	27							M	R clean baskets 6:07A OK
	28							T	R
	29							W	R clean baskets
	30							T	R
	31							F	R clean baskets

30 day arithmetic mean (1) Influent(mg/l)	30 day arithmetic mean (1) Effluent(mg/l)	Monthly Minimum (1)	Monthly Maximum (1)	30 day Geometric Mean (1)
	lbs/day			

(1) Refer to February 2002 edition of *DMR Manual for Completing the Discharge Monitoring Report for the State Pollutant Discharge Elimination System (SPDES)* for procedures to calculate loadings, arithmetic mean, geometric mean, maximum, minimum, percent removal, etc.

NOTE: Refer to current SPDES permit for specific monitoring requirements. Sample type for chlorine residual and fecal coliform is grab.

										FIXED MEDIA PROCESS CONTROL		ACTIVATED SLUDGE PROCESS CONTROL				
		Sample Type:		Sample Type:		Sample Type:		Sample Type:		Recirculation Rate	Media Effluent Settleable Solids	Mixed Liquor S.S. (MLSS)	Settleable Sludge Volume (SSV) ml/l		Return Act. Sludge (RAS)	Waste Act. Sludge (WAS)
Day	Date	Influent	Effluent	Influent	Effluent	Influent	Effluent	Influent	Effluent	M.G.D.	ml/l	mg/l	5 Minutes	30 Minutes	M.G.D.	llbs/day
	1															
	2															
	3															
	4															
	5															
	6															
	7															
	8															
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	27															
	28															
	29															
	30															
	31															
30 day arithmetic mean (1)																
30 day Ave. Quantity Loading (1)			llbs/day		llbs/day		llbs/day		llbs/day							

(1) Refer to February 2002 edition of *DMR Manual for Completing the Discharge Monitoring Report for the State Pollutant Discharge Elimination System (SPDES)* for procedures to calculate loadings, arithmetic mean, geometric mean, maximum, minimum, percent removal, etc.

Effect on Receiving Stream

NAME OF RECEIVING STREAM

DATE	STATION	PARAMETER	RESULT

TRUCKED WASTE RECEIVED THIS MONTH

	Total	Max day
1. Septage, holding tank waste and portable toilet waste		
Volume (gallons)		
2. All other wastes		
Volume (gallons)		
3. Number of Part 364 haulers currently approved to transport wastes to this POTW		
a. Septage, etc.		
b. All others		

Name and amount of chemicals used in treatment process during month:		
a.	Chlorine	llbs.
b.		llbs.
c.		llbs.
d.		llbs.
e.		llbs.
f.		llbs.

Amount of electrical power consumed:		
a.	Commercial	kilowatt hours
b.	Stand-by	kilowatt hours

Amount of fuel consumed:		
a.	Natural Gas	cubic feet
b.	Oil	gallons
c.	Gasoline	gallons
d.	Coal	tons
e.	Digester Gas	cubic feet
f.	Propane	gallons

Sludge removal from plant:		
a.	Amount	cu.yds
b.	Solid Content	%
c.	Volatile Solids Content	%
d.	Disposal Site	

Other Solid Wastes		
a.	Screenings	cubic feet
b.	Grit	cubic feet
c.	Ashes	tons
d.		
e.		
f.		
g.	Disposal Site	
h.	Digester Gas Wasted	cubic feet

Labor Expended:

POSITION NAME	NUMBER FULL TIME	NUMBER PART TIME	TOTAL HOURS

I certify under penalty of the law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Ted Dakto

Signature of Principal Executive Officer or Authorized Agent

7/2/2023

Date

Town Clerk Monthly Report Monthly Report
June 01, 2023 - June 30, 2023

Account#	Account Description	Fee Description	Qty	Local Share
A1255	Clerk Fees	Genealogy Fees	1	22.00
			Sub-Total:	**$22.00**
A2544	Dog Licensing	Female, Spayed	5	20.00
		Female, Unspayed	5	60.00
		Male, Neutered	5	20.00
		Male, Unneutered	2	24.00
		Rep Tags	1	3.00
			Sub-Total:	**$127.00**
		Total Local Shares Remitted:		**$149.00**

Amount paid to: NYS Ag. & Markets for spay/neuter program 31.00

Total State, County & Local Revenues: $180.00

Total Non-Local Revenues: $31.00

To the Supervisor:
Pursuant to Section 27, Sub 1, of the Town Law, I hereby certify that the foregoing is a full and true statement of all fees and monies received by me, Tracy M. Terry, Town Clerk, Town of Forestport during the period stated above, in connection with my office, excepting only such fees and monies, the application of which are otherwise provided for by law.

		Tracy M Terry	7/5/2023
Supervisor	Date	Town Clerk	Date

TOWN OF FORESTPORT

FORESTPORT, NEW YORK - 13338

Justice Court
10275 State Route 28
PO BOX 137
Forestport, NY 13338
Phone (315) 392- 2801 ext 5
Fax (315) 392-2343
Email: Forestporttowncourt@nycourts.gov

Hon. Anthony W. Sege, Town Justice
Shirleen (sherry) Paschke, Court Clerk

Monthly Report – June 2023

Hours Worked

Justice Sege – 36

Clerk, S. Paschke – 35

Number of Cases Disposed Of

Vehicle & Traffic – 5 Parks & Rec. - 0 Penal Law - 1 Civil / Codes - 0 Small Claims - 1
ENCON -0 Public Health Law- 0 Navigation Law - 0

Month	Fine, Forfeitures & Civil	Civil Fees	Mandatory Surcharges	Monthly Total
June	$290.00	$70.00	$279.00	$639.00

In the Month of June there were 1 cases disposed through the traffic diversion program.
One Case was transferred from Boonville to Forestport / Small Claims.

Signed,

Ion. Anthony W. Sege
own Justice

TOWN OF FORESTPORT
PLANNING BOARD SUMMARY

June 14, 2023

<u>MEMBERS</u>:

Paul Rejman – Chairman
Adam Daktor – Co-Chairman
Allison Damiano-DeTraglia
Dave Ultsch
Tyler Terry
Sandy Pascucci, Secretary

<u>PUBLIC HEARINGS:</u>

- Craig Fresher, 11386 Bellingertown Rd, Tax ID 68-000-3-3.1, -15, -8:
  5-Lot Subdivision/ Boundary Line Adjustment (A. Bailey)
  Several adjacent landowners attended with questions, which were answered to their satisfaction by Mr. Bailey.

- Robert Kratzenburg, 10760 Hawkinsville Rd, Tax ID 18.000-1-12
  RV Park expansion
  There was no public input.

<u>MONTHLY MEETING:</u>

- Call Meeting to order
- Pledge of Allegiance
- May 10, 2023 Minutes were approved (Daktor/Damiano-DeTraglia)

<u>Old Business</u>

- Chief Sege, Woodgate Vol. Fire Dept.: concerns regarding new construction of 3-story houses. Though the request was withdrawn, there was discussion and the suggestion was made that the Town Attorney prepare an amendment to the SRL to address the situation on new construction.

<u>New Business</u>

- B. Roberts, SR 28, New business permit
  Request was reviewed, and a Public Hearing scheduled for July 12, 6:30 pm

- Jim Huss, 50.003-1-16 11964 River St., Forestport: Potential property purchase and new business permit

Mr. Huss and his partner, Mr. Bronson outlined their business plans after the potential purchase of subject property. The Board found no issue with them, but suggested a list of items for submittal when they come to the Board for a business permit in the future.

- T. Donatelli and Patrick Pennise (A. Bailey): Boundary Line Adjustment
  Tax ID 36.000-1-46.10 and 36.000-1-46.11 – 7052 Irish Settlement Road
  Mr. Bailey reviewed the plan to remove the ingress/egress through the Pennise property. Conditional approval was granted pending completion of the new maps.
  Ultsch/ Damiano-DeTraglia

- Charles/Linda Burns, 11309 McKoon Rd, Tax ID 85.001-2-30 Requires Variance for placement of waste water treatment unit. Judd Warner, Contractor
  Upon review and discussion, Variance was denied (Daktor/Terry), and remanded to the Board of Appeals for a hearing scheduled for June 26, 2023 at 6:30 pm

Adjourn Meeting: Adjourned 7:46 pm (Daktor/Terry)
Next meeting scheduled for July12, 2023

MONTLY DCO WORKSHEET MONTH June 2023

Action Initiated By: Craig Jenks

	NUMBER	COMMENTS
Phone Calls Received	5	
Complaints Investigated	1	
Calls from Police	0	
Calls from Oneida Cty. Health	0	
Dogs Killed by Cars	0	
Cat Calls	0	
Dogs Running Deer	0	
Dogs Escaped	0	
Other		
ACTION TAKEN:		
Dogs Impounded	0	
Dogs Redeemed	0	
Dangerous Dogs: Ordered to Confine	0	
Calls to Oneida Cty. Health Dept.	0	
Calls to State Police	0	
Dogs Adopted	0	
Dogs Euthanized	0	
Dogs Killed by Cars (Buried)	0	
Other: Dogs Carried Over		

OTHER:

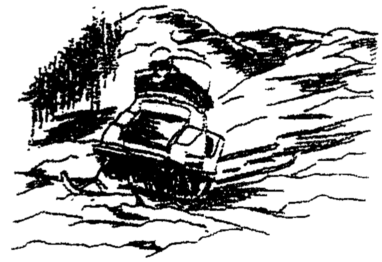
FEES COLLECTED:

INVESTIGATION: 1. Dog of Kinkaid Nuisance - Contacted owner (seasonal)

REMARKS:

TOWN OF FORESTPORT

Highway Department
PO Box 45
Forestport, NY 13338
(315) 392-2623 or Fax 392-4109
TDD 711



Trash Day - 2023

96 Loads
148 Tires

Slow start, not as busy
Very Hot & Humid