

Work Session 6:00 PM

John Mills, Legislator - to address public/board at 6:30 pm

**Town of Concord Town Board Meeting
Town Hall**

**June 14, 2012
7:00 PM**

Meeting called to order by Gary A. Eppolito, Town Supervisor

Roll Call

Invocation delivered by _____

Pledge of Flag led by _____

1. Laura Landers, CPA to address the board re: 2011 Audit

**2. Approval of Minutes
a) T/BD Mtg 5/10/2012
b) Special T/BD Mtg 5/21/2012**

3. Public Comment

**4. Monthly Reports:
a) Code Enforcement Officer/Building Inspector report
b) Dog Control Officer
c) Nutrition Site May 2012
d) Judge Gibbin Report - April 2012
e) Judge Frank Report - April 2012
f) Town Supervisor Report - January 2012
g) Town Supervisor Report - February 2012
h) Town Supervisor Report - March 2012
i) Town Supervisor Report - April 2012
j) Fire Department
k) Highway Superintendent**

**5. New Business:
a) Audit of the Bills
b) Town of Concord Workplace Violence Policy
c) Fireworks Application
d) NYS Retirement Standard Work Day & Reporting Resolution**

6. Old Business:

**7. Consent Agenda:
a) County of Erie - Septic Systems
b) Southtowns Community Enhancement Coalition 5/3/12 minutes
c) Erie County Household Hazardous Waste Drop-Off day 6/16/12**

- d) Concord American Legion 431 - liquor license
- e) Water Quality Newsletter
- f) Rural Transit Service - Volunteer Newsletter
- g) Dairy Festival 5/8/12 minutes
- h) Erie County Agricultural and Farmland Protection Plan

8. Councilman Notes

9. Motion To Adjourn In Memory of:

TOWN OF CONCORD WORKPLACE VIOLENCE PREVENTION POLICY AND INCIDENT REPORTING

Town of Concord is committed to the safety and security of our employees. Workplace violence presents a serious occupational safety hazard to our agency, staff, and clients. Threats, threatening behavior, or acts of violence against employees, visitors, guests, or other individuals by anyone on Town of Concord property will be thoroughly investigated and appropriate action will be taken, including summoning criminal justice authorities when warranted. All employees are responsible for helping to create an environment of mutual respect for each other as well as clients, following all policies, procedures and program requirements, and for assisting in maintaining safe and secure work environment.

This policy is designed to meet the requirements of NYS Labor Law 27b and highlights some of the elements that are found within our Workplace Violence Prevention Program. The process involved in complying with this law included a workplace evaluation that was designed to identify the workplace violence hazards our employees could be exposed to. Management and Authorized Employee Representatives will have an ongoing role in the evaluation process, recommending methods to reduce or eliminate the hazards identified during the process and investigating workplace violence incidents or allegations. All employees will participate in the annual Workplace Violence Prevention Training Program.

The goal of this policy is to promote the safety and well-being of all people in our workplace. All incidents of violence or threatening behavior will be responded to immediately upon notification. Town of Concord has identified response personnel that include a member of management and an employee representative. If appropriate, the Town of Concord will provide counseling services or referrals for employees.

All Town of Concord personnel are responsible for notifying the contact person designated below of any violent incidents, threatening behavior, including threats they have witnessed, received, or have been told that another person has witnessed or received.

Designated Contact Person:

Name: Gary A. Eppolito

Title: Town Supervisor

Department: Supervisor Office

Phone: 716-592-4946 ext. 11

Location: 86 Franklin Street, Springville, New York

Workplace Violence Incident Report

Today's Date _____

Date of Incident _____

Time of Incident _____

Case Number _____

Employee Name _____

Title _____

Workplace Location _____

What was the employee doing just prior to the incident?

Incident Description (Minimally include names of involved employees, extent of injuries and names of witnesses):

Provide information on preventative actions that the public employer has taken or is considering as a result of the incident to prevent against further like occurrences:

After the occurrence of a workplace violence incident, the public employer shall consider global (all public employer worksites) prevention enhancements, which may be necessary to properly protect employees.

The employer is responsible for maintaining copies of reports which shall be used when the program is reviewed and updated.

Town of Concord Fireworks Display Application

I. Name, address, and phone number of the individual or organization sponsoring display:

II. Name, address, and phone number of the individual(s) who will act as operator:

III. Name, address, and phone number of supplier of fireworks if different than operator:

IV. Date, time of fireworks display with a proposed rain date: _____

V. Exact Planned Location for the display: _____

VI. Approximate length of time of display _____

Please Provide the Town of Concord the Following:

- A. A diagram of grounds on which display is to be held showing point at which the fireworks are to be discharged, the location of all buildings and the lines behind which the audience is to be restrained, and the location of any possible overhead obstructions.
- B. Evidence of general liability insurance in the form of a certificate of insurance of not less than two million (\$2,000,000) dollars with the Town of Concord named as additionally insured.

Please Send the Completed Application and Other Necessary Documents to Supervisor's Office, Town of Concord, Box 368, 86 Franklin St., Springville, New York 14141.

Completed application must be provided to the Town of Concord at least fourteen days prior to the event. At his/her discretion the Code Enforcement Officer may make a site visit prior to the issuance of a permit.

I, on behalf of the sponsoring organization, _____ agree to follow all the rules and standards for the handling and discharging of fireworks as set forth by the NFPA (National Fire Protection Association) as well as all tenets of article 405.00 of New York State Penal Law.

Signed _____ Date _____

**REQUEST FOR FIREWORKS DISPLAY PERMIT
TOWN OF CONCORD**

Ref. NY State Penal Law, Article 405.00

Application Date: _____

(A)

Sponsor of the Show

Name: _____

Address: _____

Phone: _____ Contact Person: _____

Display Company

Company Name: _____

Address: _____

Phone: _____ Contact Person: _____

NYS Dept. Of Labor Explosives License # _____

Expires: _____

**Operator - Name of the certified pyrotechnician who will be in charge
of the display**

Name: _____

Certificate # _____ Expires: _____

Authorized Assistants: Names of the individuals who are authorized by the operator to work on the show, identified either by their certificate number and expirations date, if they are certified, or by their age and phone number, if they are not certified.

Name	Certificate #	Expires
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(Continue on a separate sheet, if necessary)

(B) Display date/time: _____

Expected Duration: _____

(C) Display Location: _____

(D) Display Content: _____

(E) How will fireworks be stored prior to display: _____

(F) Rain date for display: _____

(G) If rained out how will fireworks be stored: _____

(H) For outdoor displays not before a proximate audience, attach a diagram of the area where the display will take place, showing location from where the fireworks will be discharged, the location of an distance to: all of the buildings, highways, lines of communications, location of the audience, trees, overhead obstructions or other structures or devices that could be affected by the display or fallout from it.

(I) Proof of insurance or bond (minimum \$1 million). Please attach a copy of the policy certificate or other proof of insurance or bond.

(J) For indoor displays, in addition to the information provided above, include a written plan for how you intend to use the pyrotechnics as required by New York State Penal Law 405.10. That plan shall be submitted at least five days prior to the performance and include:

* In addition to the state licenses and certificates already included in this application, proof of federal ATF licenses if required,

* Proof of experience of the pyrotechnician in charge,

* Proof of experience with the types of devices being used and a description of duties of any authorized assistants,

* Point of assembly of the pyrotechnic devices,

* Manner and place of storage of the pyrotechnic materials and devices,

* Material Safety Data Sheets (MSDS) for the pyrotechnic materials to be used,

* Certification that set, scenery and rigging materials are inherently flame retardant or have been treated to achieve flame retardancy,

*** For indoor displays, attach a diagram of the area where the display will take place, showing the location from where the fireworks will be discharge, the location of, and distance to, the audience, the location of sprinklers and the fallout radius for each pyrotechnic device used,**

*** A copy of the approved permit and plan shall be kept on site and available for review,**

*** Any significant changes to the plan shall be approved prior to the performance.**

(K) I attest that the information contained in this permit applications is accurate, true and complete to the best of my knowledge, and I understand that false statements made in this permit application are subject to the applicable versions of the NYS Penal Law.

Signature of Applicant

Date



COUNTY OF ERIE
MARK C. POLONCARZ
COUNTY EXECUTIVE

Gale Birstein, M.D., M.P.H.
Commissioner of Health

May 15, 2012

Re: New Construction Homes with Onsite Wastewater Treatment Systems (Septic Systems) in Erie County

To Whom It May Concern:

Effective July 1, 2012, the Erie County Department of Health will no longer be designing onsite wastewater treatment systems for new residential construction. Residents and builders wishing to construct a new home in Erie County that must be served by an onsite wastewater treatment system must hire a design professional (i.e. a licensed professional engineer, a registered architect, or a licensed land surveyor with an exemption Certificate (Section 7208n of New York State Education Law) to design the appropriate system to serve the residence. Plans for Onsite Wastewater Treatment Systems created by design professionals must be submitted to the Erie County Department of Health for approval and the issuance of a "Permit For Construction/Alteration of a Sewage Disposal System." The Health Department will continue to sample the water from newly constructed residences with a private water supply and will continue to design replacement onsite wastewater treatment systems as in the past.

Permits and specifications for Onsite Wastewater Treatment Systems issued prior to July 1, 2012 will still be valid for three years from the date of issuance. Application fees submitted for permits and specifications that have not been issued as of July 1, 2012 may be refunded upon request or credited toward the permit fee required for the Application For a Construction Permit for an Onsite Wastewater Treatment System for Residential or Commercial Lots Prepared by a Design Professional.

Please find attached our new applications for "A Construction Permit for an Onsite Wastewater Treatment System for Residential or Commercial Lots Prepared by a Design Professional" and "A Construction Permit for an Onsite Wastewater Treatment System for Existing Residential Lots", our onsite wastewater treatment system design and plan review guidelines, and our new onsite wastewater treatment system construction compliance by design professionals. Also, this information may be found on our website at <http://www2.erie.gov/health/index.php?g=public-health-engineering>.

Please contact us with any questions regarding this upcoming change at 716-961-6800.

Sincerely,

A handwritten signature in black ink, appearing to read "Thomas Casey".

Thomas P. Casey, P.E.
Associate Public Health Engineer

A handwritten signature in black ink, appearing to read "Richard Wojcik".

Richard Wojcik
Program Manager

ERIE COUNTY DEPARTMENT OF HEALTH
ENVIRONMENTAL HEALTH SERVICES

APPLICATION FOR A CONSTRUCTION PERMIT FOR AN ONSITE
WASTEWATER TREATMENT SYSTEM FOR RESIDENTIAL OR COMMERCIAL
LOTS PREPARED BY A DESIGN PROFESSIONAL

Address of property _____ Town _____
S.B.L. # of property _____

Applicant Name _____ Phone # _____

Address of Applicant _____

Town _____ Zip _____ Fax # (if available) _____

Email _____

Applicant Signature: _____

Design Professional _____ Phone # _____

Address _____

Town _____ Zip _____ Fax # _____

Email _____

Property Use: Commercial Specify: _____ Repair/Replacement/Alteration

New Construction Repair/Replacement/Alteration

Residential # Bedrooms: _____ Repair/Replacement/Alteration

New Construction Repair/Replacement/Alteration

Daily flow rate: _____ Type of System: _____

Please submit with this application an engineer's report, one copy of design plans that include a property survey and plan that shows all wetlands, streams, roads, easements, setbacks, flood plains, topographic data, existing and proposed structures, pools, wells, septic systems, site location map, and etc.

Enclose a check or money order, payable to the Erie County Department of Health for \$300.00 in payment for this requested permit.

PLEASE COMPLETE AND RETURN TO:

Erie County Department of Health
503 Kensington Avenue
Buffalo, New York 14214

Please note that plans will not be reviewed unless all required items, the application and review fee have been received.

**ERIE COUNTY DEPARTMENT OF HEALTH
ONSITE WASTEWATER TREATMENT SYSTEM
DESIGN AND PLAN REVIEW REQUIREMENTS
FOR DESIGN PROFESSIONALS**

As of July 1, 2012, all new construction residential Onsite Wastewater Treatment Systems (OWTS) in Erie County must be designed by a licensed design professional (i.e. a licensed professional engineer, a registered architect, or a licensed land surveyor with an exemption certificate (Section 7208n of New York State Education Law)) hired by the applicant. The plans must then be submitted to the Erie County Department of Health for review and approval.

The Erie County Department of Health (ECDOH) is responsible for the review and approval of individual onsite wastewater treatment systems where the design flow is less than 10,000 gallons per day, the flow does not contain industrial wastes, and the basic treatment is not a full package (mechanical) treatment plant. All other systems are approved by the New York State Department of Environmental Conservation (NYSDEC).

If the design flows exceed 1,000 gallons per day, an approved discharge permit (SPDES) from the NYSDEC must be obtained as part of the approval process.

ECDOH Application and Fee – See attached application:

An ECDOH review fee of \$300.00 is required. Checks should be made payable to the Erie County Department of Health. **Please note that review of the submittal will not start until an application and fee are both received. Also, the review can not be started unless all components of the plan submittal are received as listed below.**

Engineers Report Requirements:

1. Indicate the proposed use of the premises to be served by the system.
2. Indicate and justify flow estimates based on the flows listed in the New York State Department of Health and New York State DEC publications or based on water use records from the existing facility or a facility with a similar usage.
3. A soil profile based on one deep hole per system (minimum of 6 feet deep) must be performed under the supervision of the design professional. It must define the soil types, bedrock and seasonally high ground water (mothing must be documented if seasonally high groundwater is not present). At least two percolation tests must be completed in the area of the proposed private sewage disposal system. The results of all percolation tests run on the property must be included in the engineers report. At the time of application or during the design it may be required that some or all of the soil and percolation tests be witnessed by the Erie County Department of Health. Soil tests for subdivision development must also be witnessed by the Erie County Department of Health.

4. Design Criteria:
 - a. New York State Sanitary Code Part 75-A (Wastewater Treatment Standards) and Residential Onsite Wastewater Treatment Systems Design Handbook for flows less than 1,000 gpd or New York State Department of Environmental Conservation Design Standards for Wastewater Treatment Works for Intermediate Sized Sewerage Facilities for flows greater than or equal to 1,000 gpd, and any other applicable standards of the Commissioner of Health.
 - b. Minimum residential tank size is 1,500 gallons. Add 250 gallons of additional capacity for every bedroom over four. Commercial septic tank size is based on flows and shall be at least equal to 1.5 times a day's estimated flow.
 - c. Septic tanks shall be dual compartment or single compartment tanks in series.
 - d. If mechanical dosing or pumping is required the dose volume shall be 75% of the total hydraulic volume of the tile lines.
 - e. The following must be installed:
 - i. An outlet filter such as a Zabel or O.S.I. filter in the septic tank.
 - ii. Speed levelers in the distribution boxes. (gravity systems only)
 - iii. An audible/visual alarm inside the home or business on a separate electric circuit for all pump facilities.

Plans and Specification Requirements:

1. One set of plans for the initial review and four sets signed and stamped by the NYS design professional for final approval.
2. A site plan detailing the location of all existing and proposed buildings, existing and proposed onsite wastewater treatment system components (with adequate offsets to the septic tank, distribution box, and any pump tanks per NYS regulations), deep test hole, percolation tests, any new or existing private wells within 200 feet of the proposed sewage system, utilities, water service, driveway, pools, sheds, road right of ways and easements, property lines, wetlands, ponds, drainage ways, streams, ten year and 100 year floodplains, and any other significant construction or obstructions which may impact the location of the onsite wastewater treatment system.
3. Show all required separation distances as listed in the applicable references listed above under "Engineers Report Requirements".
4. Show the specifications and details for all system components such as septic tanks, distribution boxes, pump tanks, etc. All pipe sizes and slopes must be shown.
5. Show the pump on/off and alarm levels on the pump tank detail.
6. Show the well locations for the property and all neighboring properties.
7. Indicate slope and drainage patterns or contours at site of proposed system. Indicate method of diverting surface run-off away from the onsite wastewater treatment system.
8. Include specifications for filter sand and that it must come from an approved source.
9. Include specifications and testing requirements for compacted fill.
10. Include a table listing the finished elevations for each component of the onsite wastewater treatment system.

System Options Acceptable in Erie County:

1. Conventional tile field in natural soil. Soils must have a percolation rate between 1 and 60 minutes, however systems in soils having percolation rates less than 5 minutes must be designed for a 5 minute rate (the minimum allowable design rate). Systems may be allowed with rates of less than one minute if Erie County Department of Health specified special provisions are constructed. Gravel in this system may be replaced with tire chip aggregate with Erie County Department of Health approval.
2. Gravel-less trench systems may be used in place of conventional tile field in natural soil systems with a 25 % reduction in required trench length.
3. Conventional system – shallow absorption trenches. Minimum of two feet of percable soil on the site, acceptable fill and trench bottoms must be at least two feet above groundwater or any impermeable layer.
4. Conventional system – deep absorption trenches.
5. Sand filter with downstream modified shallow absorption trench system. Allowed only if a conventional system is not feasible or natural soil percolation rates are greater than 60 min/in. The downstream shallow trench system must be placed parallel to a water or drainage course. An inspection port with a child proof lockable cover located at the discharge end of the sand filter is required. May not be used in new subdivisions.
6. Sand filter with downstream absorption mound. Allowed only if a conventional system is not feasible or natural soil percolation rates are greater than 60 min/in. The downstream mound is used for systems that a downstream shallow trench is not feasible. An inspection port with a child proof lockable cover located at the discharge end of the sand filter is required. May not be used in new subdivisions.
7. Seepage pits will be considered if no other system is feasible for the property.
8. Tile field in fill systems will be permitted only when conventional in ground systems cannot be used. There must be less than 24 inches of percable soil on site, but a minimum of 12 inches. Fill that is brought on site must be naturally stabilized for six months or mechanically stabilized and retested under the supervision of a licensed professional. May not be used in new subdivisions.
9. Other alternative systems may be considered for lots that are difficult to fit any of the above systems. For consideration of an alternative system please submit all documentation in regards to the system with your package (include specification sheets, research, test project information, etc.) May not be used in new subdivisions.

Lot Size:

All installations must meet the minimum separation requirements contained in the New York State Department of Health's Residential Onsite Wastewater Treatment Handbook. The minimum lot size required for alternative treatment systems (items 5, 6 and 8 above) is 32,000 square feet, if the lot was created after December 1988.

Construction Inspection:

1. A design professional must certify the construction of all systems except for modifications of existing systems designed by the Erie County Department of Health. A contractor's sketch of the system and location with dimensions and offsets to permanent structures, the sand receipts or percolation test results for fill systems, and a signed copy of the Construction Compliance (see attached) must be submitted to this Department prior to issuance of a Completed Works Approval by this Department.
2. Record (as-built) drawings must be submitted for any project with modifications or offsets that vary greater than three feet from the approved plans.
3. The Erie County Department of Health will collect a bacteriological sample from all newly constructed wells. This must be completed prior to a Completed Works Approval will be issued for the onsite wastewater treatment system.
4. For newly installed wells the well log must also be included with the Construction Compliance.
5. If a system requires the use of fill this must be thoroughly tested by the design professional to ensure it is satisfactory and the results submitted upon completion of the system.

Permit Duration:

The approval and permit issued by the Erie County Department of Health will expire three years from the date issued. Please note, if the project is for the replacement of an existing failed system the permit will be valid for 90 days. A new application, fee and review package may be required for an expired permit.

ERIE COUNTY DEPARTMENT OF HEALTH
ENVIRONMENTAL HEALTH SERVICES

APPLICATION FOR A CONSTRUCTION PERMIT FOR AN
ONSITE WASTEWATER TREATMENT SYSTEM FOR EXISTING RESIDENTIAL
LOTS

A COPY OF THE LAND SURVEY OF THE BUILDING LOT FOR WHICH THIS APPLICATION IS BEING SUBMITTED IS REQUIRED. THE SURVEY OR SITE PLAN MUST INCLUDE: EXISTING BUILDING LOCATIONS WITH APPROXIMATE DIMENSIONS, PROPOSED STRUCTURES INCLUDING POOLS, EASEMENTS, STREAMS, WATER WELLS, ROADS, ANY UNUSUAL TOPOGRAPHICAL FEATURES AND IF AVAILABLE FLOOD PLAINS, SETBACKS, AND WETLANDS.

Street Address _____ Zip _____
Town _____

- Violation (Correcting a documented violation)
 Replacement (of existing system)
 Addition (Add on to existing system)

Name of Owner _____ Phone _____
Address of Owner _____ Town _____ Zip _____
Email address _____ Fax# (if available) _____

Number of Bedrooms _____ Size of Lot (Sq. Ft.) _____
Type of Water Supply: Public _____ Private (well, spring, etc.) _____

Enclose a check or money order, payable to the Erie County Department of Health for \$300.00 in payment for this requested permit.

PLEASE COMPLETE AND RETURN TO:

Erie County Department of Health
503 Kensington Ave
Buffalo, New York 14214

*:Please call the Department at 961-6800 approximately one week after submittal of this application to set up an appointment for a site visit. For additional information please visit www.erie.gov/health

I agree to construct and locate my water supply and onsite wastewater treatment system to meet the standards, rules and regulations of the Erie County Department of Health.

Signature of Owner _____ Date _____

Print Name of Owner _____

STANDARD WORK DAY AND REPORTING RESOLUTION

BE IT RESOLVED, that the Town of Concord hereby establishes the following as standard work days for elected and appointed officials and will report the following days worked to the New York State and Local Employees' Retirement System based on the record of activities maintained and submitted by these officials to the clerk of this body:

ELECTED OFFICIALS

Position	Name	S.S.	Reg. No.	Standard Day	Term	Time Keeping	Day/Month
Councilman	Paul F. Salzler	8409	36171742	6	01/01/12-12/31/15	N	3.31
Town Justice	Timothy P. Frank	4622	35446863	6	01/01/12-12/31/15	N	3.68
Town Attorney	Deborah M. Barone	8917	50573880	6	01/01/12-12/31/12	N	6.25
Town Clerk	Darlene G. Schweikert	8360	40850547	6	01/01/12-12/13/12	N	10 day per payroll bi-weekly paid

On this 15th day of June, 2012

I, Darlene G. Schweikert, clerk of the governing board of the Town of Concord of the State of New York, do hereby certify that I have compared the foregoing with the original resolution passed by such board, at a legally convened meeting held on the 14th day of June, 2012 on file as part of the minutes of such meeting, and that same is a true copy of thereof and the whole of such original.

I further certify that the full board, consists of 5 members, and that _____ such members were present at such meeting and that _____ of such members voted in favor of the above resolution.

IN WITNESS WHEREOF, I have hereunto Set my hand and the seal of the Town of Concord.

Signature of Town Clerk

Date enacted: _____