



TOWN OF HOPKINTON SELECT BOARD MEETING AGENDA

Tuesday, June 6, 2023 6:00 PM

Hopkinton Town Hall, 18 Main St, Hopkinton, MA - Room 215/216
(Executive Session will be held in Room 211)

Please click the link below to join the webinar:

<https://us02web.zoom.us/j/83115430071?pwd=WU1MUUVJMYWJTNHlyOURJUktuckkwz09>

Passcode: 136746

Or One tap mobile :

+13126266799,,83115430071# US (Chicago)

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Dial(for higher quality, dial a number based on your current location):

+1 312 626 6799 US (Chicago); +1 646 876 9923 US (New York); +1 646 931 3860 US; +1 301 715 8592 US (Washington DC); +1 305 224 1968 US; +1 309 205 3325 US; +1 669 900 6833 US (San Jose); +1 689 278 1000 US; +1 719 359 4580 US; +1 253 205 0468 US; +1 253 215 8782 US (Tacoma); +1 346 248 7799 US (Houston) +1 360 209 5623 US; +1 386 347 5053 US; +1 408 638 0968 US (San Jose); +1 507 473 4847 US; +1 564 217 2000 US; +1 669 444 9171 US

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6:00 PM

CALL TO ORDER

1.

EXECUTIVE SESSION

- a. Pursuant to *M.G.L. c.30A, §21(a)* (purpose 2) to consider strategy with respect to negotiations with non-union personnel (non-union Town employees);
- b. Pursuant *M.G.L. c.30A, §21(a)* (purpose 3) to consider strategy with respect to litigation: Nicholas Russell Cassarino and Nicole Wigglesworth v Mary E. Morrissey: Town has been named in the above matter regarding the dissolution of Mrs. O'Brien's estate; because an open meeting may have a detrimental effect on the litigating position of the Board;
- c. Pursuant to *M.G.L. c.30A, §21(a)* (purpose 6) to consider the purchase, lease, sale or value of real estate in relation to properties in the vicinity of Town Hall because an open meeting may have a detrimental effect on the negotiating position of the Board;
- d. Approval of Executive Session Minutes (5/23/2023).

6:30 PM

CALL TO ORDER - OPEN SESSION

2.

PLEDGE OF ALLEGIANCE

6:31 PM

PUBLIC FORUM

3.

Residents are invited to share ideas, opinions or ask questions regarding Town Government.

6:40 PM

VOLUNTEER RECOGNITION

4.

Board Members are invited to recognize volunteers.

6:45 PM

CONSENT AGENDA

5.

The Select Board will consider the following consent agenda:

- a. **MINUTES** - The Select Board will consider approving the Minutes of the May 23, 2023 meeting.
- b. **PARADE PERMIT APPLICATION** - The Select Board will consider approving a parade permit application for the Cystic Fibrosis Foundation; event to be held on Saturday, September 30th, 2023 with the starting and ending point being the Fatima Shrine located at 101 Summer St., Holliston.

Supporting Exhibits: Parade Permit Application and supporting documents; Permitting Team Comments

6:50 PM

TRAFFIC CONSTABLE APPOINTMENTS AND M.G.L. CH 268A SEC. 20(B) DISCLOSURE FORM APPROVALS

6.

The Select Board will consider:

- **Appointing the following as Traffic Constables, for a 3 year term:** Christopher Adams, James Brown, Paul Castiglione, James Collins, Michael Cunningham, Daniel Docurral, Jeremy Doyle, David Falvey, Richard Flannery, Alan Gordon, Thomas Griffin, Darlene Haines, John Harrington, Daniel Harvey, Gary Hassett, Jeffrey Johnson, Michael Jones, Michelle Kinney, William Leary, John Litchfield, Deric McGill, Paul Moffi, Aidan Nemer, Alan Ostrander, Paul Parisi, Vincent Pignataro, Peter Ribauda, Bruce Rivard, John Sanchioni, Patrick Sheridan, Craig Stanley, Alyssa Swartz, Gerald Thayer, David Villani, Charles Wallace.

- **Approval of Section 20(b) Disclosure Forms for the following individuals who are Town employees and whose Traffic Constable appointment has not expired:**

- | | |
|----------------------|---------------------|
| 1. Casey, Shannon | 7. Riess Jr, Kevin |
| 2. Cifuentes, Carmen | 8. Shea, John |
| 3. Davis, Kiley | 9. Savolt, Robert |
| 4. Caron, Robert | 10. Reilly, Ryan |
| 5. Sheridan, John | 11. Stanley, Brenda |
| 6. Jordan, Sara | |

- **Appointing the following as Traffic Constables for a 3 year term, and approval of Section 20(b) Disclosure Forms:**

- | | |
|-----------------------|---------------------------|
| 1. Brooks, Evan | 7. Poirier, Thomas |
| 2. Campbell, Benjamin | 8. Rahill, Patrick |
| 3. Iadarola, Steven | 9. Rathburn-Goodman, Jane |
| 4. Jurasek, Scott | 10. Smith, Dan |
| 5. Krauss, John | |
| 6. Lewis, Douglas | |

Supporting Exhibits: Memo, 20(B) Disclosure Forms

6:55 PM

PUBLIC HEARING: ENTERTAINMENT LICENSES AND SPECIAL TEMPORARY ALCOHOL LICENSES - EVENTS ON JUNE 24, 2023 AND SEPT. 9, 2023 - WESTON NURSERIES, 93 EAST MAIN STREET

7.

The Select Board will hold Public Hearings on applications submitted by Peter Mezitt, on behalf of Weston Nurseries for the following events:

- a. An Entertainment License, including Live Music/amplification system, and a special temporary alcohol license for Weston Nurseries 100th Anniversary Celebration on Saturday, June 24, 2023 from 11am to 5pm, outside in the open lawn and garden yard located behind the Weston Nurseries Garden Center at 93 East Main Street;
- b. An Entertainment License, including Live Music/amplification system, and a special temporary alcohol license, for its annual "Blooms, Brews & BBQ Festival" on Saturday, September 9, 2023 from 11 a.m. to 7 p.m., outside in the open lawn and garden yard located behind the Weston Nurseries Garden Center.

Supporting Exhibits: : Application and supporting documents; Permitting Team Comments; Public Hearing Notice

7:05 PM

NEW TOWN EMPLOYEE

8.

The Select Board will consider confirming the Town Manager’s appointment of Linda Assim as an Administrative Assistant in the Land Use, Planning & Permitting Department.
Supporting Exhibits: Cover Letter & Resume

7:15 PM

2023 LEGISLATIVE UPDATE

9.

The Select Board will receive a legislative update from - State Representative James Arena-DeRosa.

7:30 PM

PUBLIC HEARINGS - UTILITY POLE HEARING, VERIZON & NSTAR ELECTRIC COMPANY dba EVERSOURCE ENERGY

10.

The Select Board will hold three public hearings on three separate petitions for utility pole/poles locations as follows:

- a. **Cedar St.** - Place one (1) jointly owned pole numbered T.10S/E.10S on the west side of Cedar Street at a point approximately twenty-two (22) feet southerly from the centerline of B Street. The new location will be approximately forty-two (42) feet west of the existing jointly owned pole numbered T.10/E.10.
Reason: Place pole to support existing pole line and recent nearby upgrades at Main Street; and to provide for the distribution of intelligence and telecommunications and the transmission of high and low voltage electric current.
- b. **Church St.** - Relocate one (1) jointly owned pole numbered T.1/E.1 on the east side of Church Street at a point approximately eighty-three (83) feet southerly from the centerline of Main Street. The new location will be approximately thirty (30) feet south and five (5) feet east of the current pole location.
Reason: Place pole to support existing pole line and recent nearby upgrades at Main Street; and to provide for the distribution of intelligence and telecommunications and the transmission of high and low voltage electric current.
- c. **East Main St.** -
 - 1) Relocate one (1) jointly owned pole numbered T.95 / E.95 to a point on the southeast side of East Main Street approximately two hundred fifty-five (255) feet northeasterly from the centerline of Ash Street.
 - 2) Relocate one (1) jointly owned pole numbered T.96 / E.96 to a point on the southeast side of East Main Street approximately one hundred forty-five (145) feet northeasterly from the centerline of Ash Street.
 - 3) Place one (1) jointly owned pole numbered T.97 / E.97 on the southeast side of East Main Street at a point approximately eighty-five (85) feet northeasterly from the centerline of Ash Street.

- 4) Relocate one (1) jointly owned pole numbered T.1/E.1 to a point on the southeast side of East Main Street at a point approximately sixty-five (65) feet northeasterly from the centerline of Ash Street.

Reason: Relocate/place poles to support the existing pole line and in accordance with recent roadway upgrades along East Main Street; and to provide for the distribution of intelligence and telecommunications and the transmission of high and low voltage electric current.

Supporting Exhibits: Applications; Public Hearing Notices; Permitting Team Comments

7:40 PM
11.

APPROVAL OF RENEWED MUNICIPAL BOND ANTICIPATION NOTE

The Select Board will consider approving \$4,613,137 in Bond Anticipation Notes borrowing for the following projects approved by Town Meeting:

PROJECT	ORIGINAL AMOUNT JUNE 2022	RENEWAL AMOUNT JUNE 2023
2018 ATM Art. 16 - Hayden Rowe Water Main	\$ 900,000	\$ 838,643
2018 ATM Art. 20 - Main Street Corridor	\$2,150,000	\$2,150,000
2019 ATM Art 22. - Comprehensive Wastewater Management Plan	\$ 85,000	\$ 85,000
2022 ATM Art. 27 - Air Handling Unit Replacement (School)	\$ 475,000	\$ 267,951
2022 ATM Art 28 - Fruit Street Field Replacement	\$1,271,543	\$1,271,543
TOTAL	\$4,881,543	\$4,613,137

Supporting Exhibits: Memo

7:45 PM
12.

SETTING WATER AND SEWER RATES FOR FY 24

The Select Board will receive an update on water and sewer rates for Fiscal Year 2024 ahead of the June 20, 2023 Water and Sewer Rate Setting public meeting.

Supporting Exhibit: Memo

7:55 PM
13.

UPPER CHARLES TRAIL COMMITTEE (UCTC) SURVEY

The Select Board will discuss and review the draft survey pertaining to the UCTC proposed by the Select Board’s sub-committee.

Supporting Exhibits: Draft Upper Charles Trail Committee Public Survey

8:05 PM
14.

ANNUAL APPOINTMENT/REAPPOINTMENT PROCESS DISCUSSION FOR APPOINTED MEMBERS OF BOARDS, COMMISSIONS AND COMMITTEES

The Select Board will consider the annual appointment/reappointment process for appointed members of Boards, Committees and Commissions.

8:15 PM
15.

TOWN MANAGER REPORT

Town Manager will report on the following:

- a. Main Street Corridor Project
- b. Per- and Polyfluoroalkyl Substances (PFAS) treatment project

- c. Massachusetts Water Resources Authority (MWRA) Southborough Interconnection project
 - d. ARPA Funding Update
 - e. Recycled Product Procurement Policy
- Supporting Exhibits: [Town Manager Report](#)

8:25 PM **LIAISON REPORTS/BOARD INVITES**
16. Board members will consider selecting FY24 liaison assignments. The Board will review invitations received.
Supporting Exhibit: [FY 23 Liaison Assignments](#)

8:40 PM **FUTURE BOARD AGENDA ITEMS**
17. Board members will identify future agenda items.
Supporting Exhibit: [Board Member Future Agenda Items](#)

8:45 PM **ADJOURN**

Correspondence to Select Board

1. Board of Appeals Notices of Decision - 18 Falcon Ridge Dr., 67 Oakhurst Rd.
2. Green Stormwater Infrastructure Workshop, June 13, 2023
3. Eversource Community Forum - Hopkinton LNG Facility - June 8, 2023 at 6:30 p.m.

Upcoming Select Board Meetings

1. June 20, 2023
2. July 11, 2023
3. August 1, 2023
4. September 5, 2023
5. September 19, 2023

Town Hall is accessible; the public may attend in person or remotely. If accommodations/modifications are needed, please contact the Town Manager's office at 508-497-9701 or [complete this form](#).

The listed matters on the agenda are those reasonably anticipated by the Chair to be discussed at the meeting. Not all items may in fact be discussed and other items not listed may also be brought up for discussion to the extent permitted by law. Unless an agenda item is a posted public hearing, the matter may be considered earlier than the indicated time if there are last minute cancellations or other unforeseen events which cause the Board to move more quickly through the agenda.



**TOWN OF HOPKINTON
SELECT BOARD**

18 Main Street, Hopkinton, MA 01748
508-497-9700 www.hopkintonma.gov

PARADE PERMIT APPLICATION

Date: May 17, 2023

Applicant Name: Cystic Fibrosis Foundation-Pam Spitzer

Applicant Address: 220 N Main Street, Natick, MA

Telephone Number: 508-655-6000 Email: ldonahue@cff.org

Applicant: Private/Individual Business Non-Profit
 Town Dept./Board/Committee

Date of Event: September 30 Rain Date: NA Time: 7:00AM-4:00PM

Road Closures: None

Please provide a description/purpose of the event in the space below. (Attach a separate visual or map of the complete route of the event)

Cycle is a single day fundraising cycle ride to benefit the Cystic Fibrosis Foundation. Over the past 25 years, more than \$3.0 million have been raised by dedicated CF volunteers and participants to support the mission of the Cystic Fibrosis Foundation and our progress toward the cure.

Route Starting Point: Fatima Shrine, 101 Summer St. Ending Point: Fatima Shrine, 101 Summer St

Expected Number of Participants: 200 Riders, 70 Volunteers, and 50 spectators

Person Responsible for Control of Litter: Laura Donahue Phone: 718-724-5643

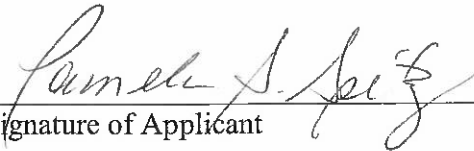
On-Site Person Responsible (Day of Event): Laura Donahue Phone: 718-724-5643

ADDITIONAL REQUIREMENTS:

1. A Certificate of Insurance must be provided with this application, naming the Town of Hopkinton as an additional insured for at least \$1 million dollars in the case of accident.
2. Map, plan, or specific written description of the route of the proposed event.
3. Safety Plan
4. Litter Control Plan

The undersigned Applicant agrees that the Applicant and parade participants will conform to applicable laws, bylaws and regulations, as well as special requirements that may be made a condition of the granting of a Parade Permit pursuant to this application.

I/we agree to hold the Town of Hopkinton harmless from any and all liability and will defend the Town of Hopkinton in connection therewith.


Signature of Applicant

5-17-2023
Date

Permitting Team Comments
Parade Permit Application- Cycle for Life
Select Board Meeting- 06/06/2023

May 19, 2023

Overall the plan looks good, however, I do have a couple of questions:

- 1) The plan talks about a BLS ambulance, who is providing the ambulance and where will it be staged?
- 2) Who is the ambulance provider if a medical emergency happens in Hopkinton?

William R. Miller
Hopkinton Fire Department

Response from the Applicant-

1. The plan talks about a BLS ambulance, who is providing the ambulance and where will it be staged?
The ambulance is provided by Fallon/Transformative ambulance service who has since been purchased by Coastal Ambulance.
The ambulance is staged at Fatima Shrine and will only be dispatched to calls within a couple miles of the start / finish.
2. Who is the ambulance provider if a medical emergency happens in Hopkinton?
At this time we only expect the one ambulance, if any so any emergency calls in Hopkinton would be routed to their dispatch to be handled by the town.

Thank you for the response, the FD has no further comment at this time.

William R. Miller
Hopkinton Fire Department

May 19, 2023

PD has no comment.

Chief Bennett
Hopkinton Police Department

May 30, 2023

No comment from me.

Dave Daltorio
Town Engineer/Facilities Director

May 31, 2023

DPW is all set at this time, no comments.

Tom Temple
Interim DPW Director



CFF Cycle for Life
Saturday September 30, 2023
Holliston, MA

Plan for Safety & Communications

Introduction

The Cystic Fibrosis Foundation (CFF) is sponsoring and managing this Cycle for Life, a supervised benefit cycling event on September 30, 2023. You are a CFF volunteer! Welcome to this caring community. At Cycle for Life you may learn new things and will certainly have a chance to make new friends. We want you to relax, have fun, and enjoy the experience of applying your talents and energy to a very good cause.

The Route and Maps

This event is a pre-planned recreational cycling fundraiser with a defined start time and a finish-no-later-than time. **It is not a race**. Please avoid referring to this event as a race. Participants should be encouraged to cycle conservatively and safely. When framed as a “race”, some riders may feel pressured and take unnecessary risks.

The three courses are:

1. A 12-mile course, with a single mandatory rest stop at mile 5.8. This is designed for beginning cyclists and families.
2. A 30-mile course, with two rest stops, one at 10.0 miles that’s mandatory and a second at 24.6 miles.
3. A 65-mile course, with four rest stops at 10, 24.6, 36.4, and 50.8. The 24.6 and 50.8 rest stops are mandatory.

Participants for the 65-mile event will begin at 0830. The 12 and 30 mile riders will be released at 10:00. However, these release times may change due to weather or other safety considerations.

At Mile 35.7 on the 65 Mile course riders may opt to reduce their ride by executing a turn onto Hanlon Road. This is called the BAILOUT point, and is an available option which leaves a rider with just 8 miles to the finish. A Road Marshall will be stationed at BAILOUT to direct riders.

A finish-no-later-than time (2:30) has been established by the organizers, designating the time after which participants will be encouraged to accept SAG (support and gear) transport or to take a shorter supported route. Riders who arrive at point BAILOUT past an established arrival-no-later-than 11:30, will be asked to BAILOUT.

The course begins and ends at 101 Summer Street, Holliston, MA:

<https://www.google.com/maps/myplaces?hl=en&vpsrc=1&ctz=240&ie=UTF8&ll=42.178082,-71.444285&spn=0.009604,0.017295&t=m&z=16&iwloc=A&dg=feature>

Route maps are available here:

Ride With GPS

12 Mile Jenna Loop: <http://ridewithgps.com/routes/10422187>

30 Mile Haylee Loop: <http://ridewithgps.com/routes/10422436>

65 Mile: <https://ridewithgps.com/routes/42245781>

TracCar Asset Tracking

We will be using the TracCar smartphone app for tracking SAG & Sweep vehicles. We are also hoping to get most, if not all the riders to use the system as well.

By utilizing this system we will be able to see the location of all vehicles in real time, get a precise address in the event of an emergency as well as help relocate units to fill gaps that are spotted.

Please see [Appendix 5](#) for details.

Identifying Participants

All registered cyclists must wear an assigned “bib” which displays a unique number.

Unfortunately, bibs detach or may be obscured, which also makes identification of cyclists whizzing by a challenge.

Communications

Fast, accurate, reliable communications are vital to the safety of participants, volunteers, and staff.

Amateur Radio (often called “Ham radio”) provides the radio communications backbone for this event. Amateur Radio volunteers constitute a trained staff offering instant radio communications from any location. Some of these volunteers are cross-trained to provide SAG (cyclist support).

Mobile phones may be used where radio communications are unavailable. Some of the CFL routes traverse through areas with marginal mobile phone and/or radio coverage.

All participants are provided a wrist band with a phone number for the Event Operations Center. Participants are asked to call for any assistance. Should a participant need medical help, they should call 911 first, and then notify the Operations Center.

All communications, whether by radio, mobile phone or internet, are centralized at what we call the Net Control Operations Center (NET)

We encourage you: where Amateur Radio is available, use it first. This is the fastest and most efficient way to pass information, receive instructions, and to seek routine and emergency help.

Where Amateur Radio is not available and an emergency condition occurs that requires EMSⁱ, Police or Fire, call 911, then when able notify the Event Operations Center.

LITTER PLAN

Volunteer teams will ensure that all litter and mile marker signs are removed Monday and Tuesday following the event.

All litter from rest stops will be removed at the site if permission has been granted by the facility or brought back to the start and finish line site for removal.

Net Control Operations Center (NCOC)

This unit is responsible for the efficient and safe conduct of CFL¹. CF staff and several key volunteers operate within this unit. Net Control is synonymous with the physical location of the COMMAND staff.

Staff who operate the radio networks known as **NET** and are among the teams involved at Net Control.

Amateur Radio, land-line phone, and internet are all available and in use by Net Control. In addition to staff and volunteer access, all participants have the NCOC phone number on a wristband and are instructed to call if they need any assistance.

Important: Having a Net Control Center unit does not release any CF volunteer from exercising their good judgment in making decisions as the circumstances require and their experience guides. In fact, the best decisions are made by those at the point of need. However, in all cases, be sure to communicate any critical changes to NET for coordination purposes. If NET doesn't know, they can't support your efforts. So be sure to communicate often as needed.

- **EVENT MANAGER**, the CF EVENT MANAGER, part of the CF Situation Team, is a CF staff member with the sponsoring organization who is always within reach of **COMMAND**. The EVENT MANAGER makes all decisions and coordinates all actions which have any impact on the event. The EVENT MANAGER uses the communications and other support facilities to operate a successful and safe event.
- **COMMAND**, part of the CF Situation Team, is a functionary who organizes, coordinates, and helps direct operational units, under the direction and authority of the EVENT MANAGER. COMMAND is directly responsible for the communications and safety support and may exercise best judgment in the maintenance of safety and support services.
- **NET** is the tactical ID used to identify the Event Operations function which manages communications for participant safety and logistics. All field units with radio communications capability will be in constant and reliable reach of one another and NET through this system. NET, as the name implies, is purposed for all tasks related to the safe and efficient conduct of the event.
- Units without Amateur Radio access should use the Mobile Phone link to NET by calling:

508-306-1708

The operator will answer “**EVENT OPERATIONS**” when you call.

NET will be available on all assigned radio channels. Amateur Radio operators please see the ICS 205 form which provides frequency, offset, PL, and other technical information.

Field Units

This section briefly describes the Field Units within the complete organizational structure.

Specifics as to tasks, procedures, and communications protocols for these Field Units are expanded upon in a separate section, as necessary. **Note that some of these field units may not be active/assigned at this event.**

- **SAG**
A SAG unit (Support and Gear) is a vehicle on the course with a primary function to maintain participant and CF volunteer/staff safety. A SAG unit may remain in a fixed location (as the course may be made safer by the absence of vehicles), may patrol the event course, and can be self-dispatched or sent on a mission. Each SAG is staffed by at least one CF volunteer who is trained to provide non-medical transport and minor bicycle repair for participants. Most SAGs patrol assigned portions of the event course, although there are exceptions (see your assignment for details). Each SAG unit will have Amateur radio communications available. SAGs are equipped with a first aid kit, a bike rack, a tire pump, and a few simple tools. SAGs can and should call **NET** for any assistance that the circumstances require.
- **SWEEP** is a single SAG unit which maintains safe distance contact with the last participant on the assigned event course. A **SAG** unit may be assigned the tactical ID **SWEEP** [number] as they assume this role.
- **AMBULANCE** is the tactical call sign for a single BLS (basic life support) ambulance unit dedicated to this event. **AMBULANCE** is available through **NET**.
- Rest Stops on the course will be identified by their common name as their tactical call sign. These are **LUTHERAN, FARM POND, SENIOR CENTER, CORNELLS, and LEGACY**. Each Rest Stop is managed by a designated supervisor. They may be provided a Commercial radio for instant communications. If an Amateur Radio operator is assigned to a Rest Stop, they will be responsible for all communications.
- A **MARSHAL** is a road-safety-equipped CF Volunteer who assists participants at key locations on the event route with safe passage. One or more **MARSHALS** may be equipped with a Commercial Radio. Each may be available through their mobile phone.
- **START/FINISH** is a walking unit providing communications within the **START** and **FINISH** area. The tactical call sign **START** will change to **FINISH** once the last rider has entered the course. **START/FINISH** communicates to **OPS** on the **SAFETY NET**.
- **EVENT MANAGER** is the tactical ID for the Communications Assistant (C/A) to the CFF staff member serving as Event Manager. As a communications assistant, the EM must maintain excellent situational awareness, a good

rapport with the Event Manager, and provide instant communications to and from OPS through SAFETY NET. Any communications, directives or inquiries from EM are considered to be directly from the actual Event Manager.

REST STOP

REST STOP management is supported by the Logistics unit. (Logistics handles the movement of supplies and maintenance of route signs). Logistic requests will be made through NET and will be fulfilled by the Event Manager or designee.

The most common type of logistic request is for re-supply.

Each REST STOP will have a supervisor who, among other duties, is responsible for logistics-related decisions. Their primary duty is safety, followed by the provision of a supportive environment for participants, one that includes medical support, refreshments, shade, and any other help they may need. Logistics requests and concerns which cannot be locally handled should be passed to NET via radio, in order that these may be coordinated efficiently.

The REST STOP supervisor may make any decision and use any resource to support the safe, efficient operation of their facility and to be of the utmost assistance to participants.

The REST STOP should notify NET:

- On arrival, When the site is ready (in service)
- To be granted permission to close (**important: see closing procedure below**)
- When the site has closed
- When an unusual event, such as a medical issue or rider drop out occurs

REST STOP Closing Procedure

It is understandably difficult to stay open, in hot sun or windblown rain, when there are no participants on the horizon. However, closing before the last rider has arrived is forbidden.

Each of the three cycle courses has assigned a SAG unit called SWEEP. The SWEEP always has the last rider on their assigned route in sight. When the SWEEP arrives at your REST STOP, and confirms to the Supervisor that the last rider has arrived, the REST STOP should contact NET requesting permission to close.

Permission will be granted, unless NET is aware of other riders still approaching, which may be the case at some Rest Stops which serve more than one route.

A REST STOP cannot close until directed through NET.

MEDICAL

Each REST STOP and every SAG unit is provided with a first aid kit. Regardless training or certification, SAG and REST STOP units are advised of the following:

1. **Do not directly treat.** Offer the contents of the first aid kit for minor injury. See detailed statement below.
2. As in any emergency you may provide lifesaving assistance according to the level of your training and ability
3. All REST STOPS and SAG units may contact MEDICAL through NET should any questions arise
4. Maintain patient confidentiality. NEVER use names on the radio. Refer to patients by BIB number, gender and age only.
5. Use brief and objective language when describing an incident or injury. “I think the participant is dead” is not an example of good communication practice. Instead, “Start an ambulance to this location for a participant who is unconscious and unresponsive”. **Your assessment** of specific injury or condition is not needed to perform the safety function, but **your objective and accurate observation** is vital! Merely state what you are told or what you observe.
6. When able, communicate the status of the incident in brief to NET through either the Amateur Radio or mobile phone. “Participant awaiting transport”, “Ambulance on scene”, “Participant refused treatment/transport”, and “Ambulance departing to (state destination hospital)” are some good phrases to remember. All Rest Stop and SAG units will be provided with the necessary information forms for medical issues. Review and become familiar with these before they are needed.
7. If a participant is transported to hospital, report the hospital destination as soon as it is available to you.
8. A serious medical incident may require a response from the **CF Situation Team**. Medical or other CF volunteers or staff may request that the Situation Team respond to the incident;
9. All volunteers should defer to CF Staff for any public inquiries regarding any medical incident. **Please make no statements to the public or reporters.** Leave this to CF staff.

An adult participant may request the ambulance. A Rest Stop supervisor may request an ambulance – even as a precaution.

Cystic Fibrosis Foundation Cycle for Life Medical Policy

Unless you have been sanctioned to provide medical services by the CF event organizers you are to be guided by the following principles set forth by CF:

1. ***Any non-medically-credentialed volunteer who encounters a participant requesting or requiring medical treatment may not provide direct care unless, as determined by the volunteer, the absence of immediate lifesaving action may result in further trauma or death.***
2. ***Any non-medically-credentialed volunteer who encounters a participant requesting minor medical treatment may NOT TREAT, ONLY PROVIDE to the participant a first-aid kit (available in most SAG units). The participant may select from and use the contents of this kit at their own risk. The volunteer may not advise the participant as to medical care, or render such direct care, unless under the direct supervision of CF Medical staff. Use caution and good sense regarding blood-borne pathogen control when handing off supplies which may be used later. Nitrile gloves should be used where there is risk of contact with blood or other body fluids.***

3. ***In all cases (other than where the patient is unconscious) the adult participant (patient) has the last word as to their treatment and transport.***
4. ***Every participant has a RIGHT OF REFUSAL. Use the Special-Event-Incident-Accident-Witness-Report form to document EVERY medical encounter and especially a refusal. In the event where you feel the participant should accept help (medical or SAG transport) and declines, they should be presented with the refusal form.***
5. ***In no circumstances may a minor child (anyone under 18 years of age) be transported or offered routine medical assistance unless authorized by a parent or legal guardian. This does not preclude any volunteer from performing immediate lifesaving action, where the absence of immediate lifesaving action may result in further trauma or death.***

Specific to volunteers who are not trained as first responders:

Massachusetts General Law, Part I, Title XVI, Chapter 112, Section 12V

“Any person, whose usual and regular duties do not include the provision of emergency medical care, and who, in good faith, attempts to render emergency care including, but not limited to, cardiopulmonary resuscitation or defibrillation, and does so without compensation, shall not be liable for acts or omissions, other than gross negligence or willful or wanton misconduct, resulting from the attempt to render such emergency care.”

SAG (Support and Gear)

SAG units patrol the event routes, offering mechanical and non-medical transport to participants and staff.

- **SAG** performs the following functions:
 - Participant and staff safety
 - Non-medical participant and staff transport (bicycle rack)
 - Event progress/visibility
 - Minor bicycle repair (flat tire)
 - Participant tracking support (locate lost rider, ect)
 - Relay messages/instructions for route MARSHALS
 - Act as temporary route MARSHAL where required
 - Any other related task requested by the Event Manager or Command

ALL SAG units have at least one form of radio communications. A SAG driver may be accompanied by an Amateur Radio operator as their Communications Assistant (C/A). The C/A handles all radio communications and the SAG driver is responsible for their SAG responsibilities. Sometimes Amateur Radio and SAG are combined into a solo unit.

In all cases, safe driving practices must come before communications. If you feel more comfortable, pull over to a safe location to initiate or complete any communications!

SAG Transport

A SAG unit may encounter or be dispatched to a participant in need of mechanical or other assistance. If mechanical, and it is determined that the problem cannot be repaired safely and quickly at the roadside, the SAG may offer transport for the participant and their bicycle. SAGs are authorized to transport a participant to the next (or closest) REST STOP or the START/FINISH area ONLY.

Performing complex roadside repairs are discouraged as doing so exposes you to passing vehicles and therefore may not be safe. It is generally best to transport the rider and cycle to the nearest REST STOP where service is available.

SAGs are authorized to transport participants providing such transport is **NON-MEDICAL**. A leg cramp with minor pain, common in cycling events, may be considered NON-MEDICAL, although the extent and severity may indicate a larger medical issue. Where any question of dehydration, heat stroke, Hyper/hyponatremia, severe cramps or symptoms of an existing or unknown medical condition are present, the SAG unit should immediately notify NET for medical guidance or, in consultation with the participant, simply call for EMS.

A SAG Transport Request form must be completed in the field and reported by radio.

Essentials are:

- BIB Number
- Starting Location
- Intended destination
- Arrival at destination

POLICY: SAGs and others encountering participants where there is any question as to a medical issue are to assume a reasoned, prudent, conservative approach. When in doubt, ask. When doubts cannot be settled, call for help. When “helping” a participant, remember that finding the balance between being helpful and being “too helpful” is something achieved through experience.

Adult participants are free agents of their own health care. However, we must carefully and cooperatively balance a participant’s desire to continue with the potential of further injury.

The most effective way to settle any concern with a participant who has suffered a minor crash, cramps, or those experiencing untoward symptoms is to simply ask the question, “do you feel it’s worth continuing today given the circumstances?”

***Any** CFL volunteer encountering a participant where there is no MEDICAL available and where there is a question as to the participant’s medical status are encouraged to seek guidance through OPS.*

Minor children do participate in this event and should, at all times, be accompanied by a parent or designated responsible adult. However, it is possible to encounter a child who has become separated from their group and who is in need of medical or transportation assistance. Roadside medical assistance for minor children absent their parent or guardian, beyond that immediately necessary to save life is prohibited.

Parental consent is required for transport or incidental medical care.

CF patients may be participants in this event. Shortness of breath is a common symptom of CF. Most patients will reveal their CF status. This information is strictly confidential and may NOT be communicated to any other party without the expressed consent of the participant.

SAG Safety

Portions of the event course are on busy, narrow roadways. SAG units must sometimes operate near participant cyclists. It is imperative that SAG units give all cyclists a wide margin of distance and safety. The worst crash of all is one involving a participant and a SAG unit!

Please consider and apply the following guidance:

- Do not travel closely behind one or more cyclists. If you need to pass, do so where you can remain clear of the participants, and only when there is absolutely no opposing traffic
- Never use your horn to signal cyclists. If you need to beep to avoid cyclists crashing into your vehicle, you are operating in an unsafe manner.
- When passing cyclists, do so efficiently. Move back into the travel lane only when fully clear of cyclists by at least 100 Meters or more.
- If you need to converse with one or more cyclists, advance ahead of them and find a safe spot to pull over that leaves them room. As they approach, ask them to pull over into the safe area where you may then converse. Remember: be helpful, kind, courteous, and friendly. Nobody responds well to a grumpy volunteer!
- When approaching a cyclist in need of assistance
 - Activate flashers and, if you have one, your yellow strobe light
 - Position your vehicle before the scene such that it offers some protection to the cyclist from oncoming vehicles, while avoiding blocking the entire scene or road!
 - Never block an active roadway except where there is a medical emergency and the scene must be protected in this manner
 - If you are approached by a cyclist while stopped in a safe area, move them off the roadway for any discussions
 - Never allow cyclists to stand in the active roadway next to your vehicle for a discussion. Keep them off the road, safely exit your vehicle, and have any discussion about safety.
 - At any stop on the roadway you are ultimately responsible for the safety of the participant. Make sure they are well clear of danger and protected by your vehicle or other obstructions, or move them to a safer spot. When the participant departs (if any repair or assistance is successful) supervise the departure, making sure the road is clear and safe to re-enter.
 - If you must transport the participant, ask for permission to load their bicycle on your rack. If the participant wishes to assist, make sure you do so clear of danger.
 - Each participant being transported must be properly seated and wear a seat belt. Follow the reporting procedure for transport in this Guide.
- Check in with all ROUTE MARSHALLS and Police Details during your patrol. Offer a cold drink and snack. Ask if they need any information or assistance.
- Unless dispatched on a mission you MUST stop at each REST STOP and check in with CFF staff. When at a REST STOP you may learn important information from the staff and participants relative to the event. It is not uncommon to hear from a participant that they were concerned with another's condition: "They seemed tired and I'm a little worried about them", or "I think they may be lost". There is considerable value in brief stops at each Marshall, police detail and REST STOP.
- If you are tired or distracted, pull over and stop. If you need a break or relief, request it.
- If serving as a SWEEP, please review the Rest Stop closing procedure in this Guide

SAG Communications

At CFL there will be an abundance of SAG units assigned to patrol specific route sections at designated event times. More is sometimes not better, particularly if there is conflict and lack of communications. Communications with and between these units are essential to the smooth and safe delivery of services. All SAGs are encouraged to consider and apply the SAG Communications guidelines for their specific configuration, as described below.

When to Communicate

- When you need medical, fire or police help
- When arriving at your assignment
- Every 30 minutes, even if there's nothing happening
- When stopping to assist a participant
- Before transporting a participant
- When you need to take a break
- When you need to leave your assignment temporarily

What to Communicate

- In an emergency
 - Your EXACT location
 - Town, Street name, house number, cross-street or nearby business name
 - The situation
 - What you need
- When assisting a participant
 - Your EXACT location
 - The nature of the problem (flat tyre; mechanical; rider fatigue) ○ What you plan to do
 - The BIB number of the participant you are helping. If more than one, state how many total participants are on scene
- When transporting a participant ○ Follow the guidelines in the Sag Transport section
- In routine circumstances
 - Your EXACT location
 - Town, Street name, house number, cross-street or nearby business name
 - If you are moving, state the Town, street name, house number, cross-street or nearby business name and your direction of travel

Route status

- The density of riders (light, moderate, heavy)
- The condition of the course
- Any concerns and other observations (weather changes; traffic density; signage issues)

This level of reporting is necessary in order that resources may be efficiently managed. When COMMAND has knowledge of unit disposition, requests may be dispatched more effectively.

Note that all activity, especially any transportation of participants, is logged with a timestamp and these records retained. Documenting the transport from beginning to end is a protection for you and CF.

MARSHAL

The MARSHAL is a road-safety-equipped CFL volunteer posted at key locations on the event course whose responsibility is for the safe passage of participants. MARSHALS do not possess the authority over motor vehicle traffic afforded to police officers. You have no authority to stop or direct the flow of vehicular traffic. You DO have authority to stop and direct the flow of CF Participants on the course, and should exercise this authority respectfully yet firmly as required, to assure safety.

MARSHAL's are encouraged to observe these guidelines:

- BE SAFE
- Wear your CFL volunteer shirt and reflective safety vest which you should pick up at Fatima Shrine prior to your assignment.
- Get to your assignment early and familiarize yourself with the "CFL" directional arrows and road signs leading up to your post.
- Choose a location where 1) you will be safe, and 2) oncoming riders and vehicles will be able to see you.
- Give clear verbal and hand (or sign) direction telling the riders where to turn. Think before waving your arms, and then when you're ready, issue clear instructions.
- If you are given a STOP sign to hold, this is to STOP the cyclists before a turn or upcoming RIDER CHECK-IN spot – this sign is NOT for stopping vehicles, so use it wisely!
- You should not stop or direct traffic. It is the rider's responsibility to safely navigate auto traffic. Too many cooks can spoil the safety broth.
- SAG vehicles are equipped to 1) offer a first aid kit and to call for EMS, 2) provide basic mechanical support and/or arrange for support from the Landry's mobile vehicles, or 3) give riders a ride back to the nearest REST STOP or START/FINISH. Flag them down if you need help, although they are asked to check in with you when moving through your area.
- The SWEEP unit that is assigned to your area will stop and let you know that the last rider has passed. The SWEEP will then radio a request for release from your assignment. It is very important that you seek permission to secure your assignment before you leave.

MARSHALS do not ordinarily have radio communications, but most should have mobile phones. Field Units, especially SAGs, should check with each MARSHAL they encounter to determine if they need any assistance. Be sure to offer them water and a snack, too. SAGs should never ride past a MARSHAL without checking in.

Communications Suggestions for all Volunteers

Efficient, accurate, timely communications will help in the maintenance of event safety and success. Whether by mobile phone, radio, or in person, effective and accurate communications can be detrimentally impacted by noise, distraction, task saturation, and – in an emergency – panic. Being prepared with an understanding of these impacts and a set of procedures to follow can be of great assistance in times of critical need.

In any emergency, calling 911 directly from your location is always a good option as it removes a link in the communications chain, reducing delay. However, be sure to notify NET of your situation as soon as practicable. NET exists as a resource and can efficiently and expeditiously dispatch EMS or other emergency services if this will be faster.

For all other issues, communicate your logistics, safety, participant assistance, or other related event request or questions directly to SAFETY NET via Amateur or your Commercial Radio. If not available, call the OPS phone number listed on the rear of your credential (also on each participant's wrist band):

508-306-1708

Participants (and all volunteers) are instructed to call 911 first for serious emergencies and otherwise to contact NET at the phone number printed on their wrist band for any assistance. It is desirable that a participant call NET after they've dialed 911, but only if this notification does not impact their care.

General Principles and Guidelines for all Volunteers

Although repeated throughout this document, all team members are reminded that they are first responsible for participant and staff safety.

First, look out for your own safety, whether driving, stationary, or at the scene of any trouble, then assist others.

Remember: when facing a stressful situation, such as a cyclist crash, THINK, ACT, and COMMUNICATE.

Here are a few helpful safety reminders for all CFL volunteers:

- Wear your CFL volunteer T-shirt;
- Carry a form of picture ID, such as a driver's license;
- Wear your CFL credential lanyard;
- Carry a charged mobile phone. Amateur Radio operators will carry one or more portable radios with extra power packs;
- Wear a reflective vest when performing duties as a SAG, MARSHAL, or when otherwise upon or near a roadway;
- Study and understand your assignment. If a SAG, MARSHAL, REPAIR, or MEDICAL team member, study the route maps;
- If a SAG, it is the responsibility of your navigator (or driver, if solo) to know your exact location at all times. Should you encounter a crash, fumbling through a map will waste precious time;
- Unless you are presiding at an emergency such as a cyclist crash, do not stop or direct the flow of automobile traffic;
- Comply with the requests of police, fire, EMS or other public safety personnel. Once they arrive, we are relieved of direct care responsibility unless otherwise directed;
- Arrive for your assignment early, introduce yourself to other team members, and have fun.

Police Details

As the event traverses many communities and safety is a high priority, police details will be present at several difficult locations. You may also notice a generally stronger police presence. Their role is to assure safe passage at key intersections for all participants. We encourage you, as a volunteer, to introduce yourself to each detail (where this may be done safely), and thank them for their assistance. If carrying sufficient supplies, offer the detail officer bottled water or snacks. Remember, they are members of the safety team, too.

Police Details may ask if they may be released. NET is usually in the best position to make this determination. Do not release a detail before you have received permission to do so from NET.

The movement and disposition of details has been planned in advance, although event dynamics may require changes.

Location, Location, Location

In response to conditions or as a pre-planned operation a REST STOP or other fixed unit may need to change location. Amateur Radio operators and all CFL volunteers should be prepared to quickly and efficiently relocate as needed.

CFL Contingencies

Identifying, planning, and practicing for every imaginable problem at an event such as this would be impractical. But there are a few things where some prior thought and a plan will be helpful should a contingency occur. Those which benefit from pre-planning at this event are (a) Course Obstruction, (b) Route Hold or Evacuation, and (c) Crash.

Course Obstruction

Prior to rider release a unit will traverse the routes to make sure signs are in place and there are no issues. This unit will be looking for loose pavement, construction equipment, planned activities which might produce a problem, potholes, or any other condition that might result in a diversion or delay. Any new issues will be briefed in the morning before you depart for your assignment.

All units are asked to report any conditions that they feel may represent an obstruction.

Route Hold or Evacuation

Convective weather (thunderstorms/lightning) will require event delay or, if already in progress, a Route Hold with sheltering in place.

The Event Manager, in conjunction with other staff, will determine if a hold or evacuation must take place. Only the EM or public safety may order an evacuation, however CF staff at a REST STOP or other location may order a local evacuation or diversion in the furtherance of participant safety, provided such action be reported immediately to the Event Manager.

If evacuation is needed the priorities are (1) people, (2) bicycles and (3) supplies.

In a hold, riders are asked to shelter in place at designated rest stops.

If an evacuation is necessary, rest stops and SAG units will, under the coordination of Event Operations, conduct it.

Rest Stop volunteers are encouraged to locate a nearby place of shelter at the start of their shift.

In any hold or evacuation, make sure volunteers are staying safe.

Crash

- Think before you act. A few seconds to consider the situation and your options will make a big difference
- Assess scene for personal safety and have a plan of attack
- Call for assistance. Briefly describe what you see and what you believe is needed.
- Protect victims and the scene from any traffic and care for them within your level of training and/or experience
- Never move a victim and encourage those with injury to stay calm and still until help arrives
- If there's any reason to suspect a spine injury, immobilize/stabilize the victims head

- When able, gather witnesses and use CF-provided incident form for details
- If aid or assistance is refused by a participant, ask them to complete the Right of Refusal form
- Take photographs of the scene if possible and provide these to CF staff. Be sensitive to photographing victims.

Other contingencies

Weather

Adverse weather for our current season will, at its worst, consist of a cold and heavy rain or convective (lightning) activity. CFF may be forced to cancel the event entirely if this occurs. CFF may also execute the option of limiting the event courses or length. You will receive notice immediately should either of these occur.

Adverse weather may happen during the event. It is unlikely, but evacuation and sheltering of participants may be called for. Should this occur, CFF will initiate an evacuation plan. Instructions will be given to you once this occurs.

Security

There are no specific instructions for this event beyond the usual duty to be observant and report anything you feel is unusual or that might need law enforcement attention.

Should a security event occur, follow the immediate direction of public safety and report the situation to OPS. Knowledge of an ongoing incident may necessitate halting or re-routing and if you are at or near the scene OPS will likely task you with carrying out the logistics, such as stopping participants and/or instructing them as to any route changes.

Managing the Media/Bystanders

In no circumstance should you speak to anyone who may ask for details or your opinion about a crash or incident, however minor. Only provide information to a public safety official (police/fire/ambulance), OPS, or a credentialed CFF official. For media inquiries, the direct phone number of the CFF Media Official for this event will be included in your Assignment document. Should a media representative hound you for a statement, CFF suggests the following reply:

“I am a volunteer with the Cystic Fibrosis Foundation. At this point I do not have all of the facts at hand. Please contact **Pam Spitzer @ 617-877-6468** for details.”

There is no obligation to respond to the media, but a professional and courteous reply is a good one.

Finally, it is recommended that you keep your own notes, in case you are asked to recall the details later by CFF or other authorities, either as a witness to a crash, or as someone who discovered it.

Incident Reporting

All SAG and REST STOP units are provided with the **Special-Event-Incident-Accident-Witness-Report** form. This form should be completed wherever and whenever an unusual event occurs.

Examples of unusual events:

- Cyclist falls and skins knee, refuses medical or SAG help
- Altercation occurs between cyclist and motorist
- Any EMS, Police or Fire (public safety) interaction involving a Cyclist, or CF volunteer

The purpose of the form is to provide information that can be valuable long after the incident has closed. Should the cyclist who refused medical attention suffer later difficulty, the documentation will show that they were offered help and refused. Should charges be filed against a motorist or cyclist involved in an altercation, the form will help document what happened and provide witness statements and information.

All volunteers are encouraged to become familiar with the form and its intended purpose and to not hesitate to use it where they feel it is needed. As always, consult with Event Operations should you have any questions.

Appendix 1 Amateur Radio Topics

The Tactical IDs used in the examples to follow may not comport with those used at this CFL event. When in doubt, refer to the previous sections for exact phrasing.

Technique and Net Operations

For this CFF event all Amateur Radio communications shall be conducted in accordance with the Communications Standards document. Please refer to this for specifics, including how to initiate and answer calls, the use of phonetics, standard phrases, and other techniques to increase efficiency and accuracy.

All Nets will be operated in a HYBRID format. This means that any station may directly call another, provided the communications channel is not in use. The Net Controller (for any NET) has priority, as does any declared urgency, such as a crash. When calling a station, make it brief, or take a longer conversation to one of the simplex channels (with the Net Controller's permission).

The aim of the standards is to help us become more effective communicators.

The points below may be helpful:

- Fully understand what it is that we need to convey before we transmit;
- Speak slowly and clearly, particularly in a stressful situation where raised voices and rapidity tends to be ineffective;
- In the choice of what information to include in any transmission, anticipate questions and therefore form your transmission with data that will reduce Q&A time;
- Although Amateur Radio can get the message through faster and with greater reliability than any other method, consider if our open channel – one that can be picked up by anyone with a scanner – would be appropriate for communicating message content with personal or confidential content. Typically switching to a phone call would apply for anything that one would consider private or confidential. In Amateur Radio public service, instances where using a phone is better advised are however, rare;
- Avoid code phrases. Use plain English and simple language;
- Use standard ICAO phonetics when you need to spell out a detail. This prevents “E” from being heard as “D”, or “C”, or “B”. The same should be used for numbers (ZE-RO, NINER, etc);
- Identify yourself clearly with your tactical call sign;
- Before communicating the full message, especially where the communications channel is active, predicate your call with a “header”. Example: “**NET, LEGACY... WITH A REQUEST**”);
- Optionally complete your message with a phrase which instructs as to the type of response you need. Example: “**ACKNOWLEDGE**”, which means “please tell me you received my message/request”, or “**READ BACK**”, which asks the other station to read back the information you just sent to confirm it was received accurately. Please, thank you, and other familiarities are also nice and can lend to professional sounding communications, too 😊;

If at any time you have priority or emergency traffic, announce your intention with the procedural phrase “**PRIORITY/EMERGENCY TRAFFIC**”. All stations should clear the air for your traffic. The Net Controller will assist you as the situation dictates and will otherwise manage the net as noted above.

Sometimes stations not involved in the event may be heard on the communications channel. Your Net Controller may let them know that the event is in progress and request that they move to another free channel. Let your Net Controller manage this and other situations. Your job is to stay focused on your assignment without the burden of managing communications.

As noted earlier each station will be assigned a TACTICAL call sign for functional identification during the event. This should be used to identify your unit when making a call. Example:

You: **NET, CORNELLS.. REQUEST**

Net: **NET ANSWERING CORNELLS**

You: (pass your request)

At the conclusion of the completed traffic, EACH station must identify with their FCC Call Sign.

You: **CORNELLS, KB1ABC**

Net: **K1MGY**

If you forget to identify...

You: **CORNELLS, KB1ABC, FOR ID**

...and you're covered.

§97.119 Station identification (in part)

(a)	Each amateur station, except a space station or telecommand station must transmit its assigned call sign on its transmitting channel at the end of each communication, and at least every ten minutes during a communication, for the purpose of clearly making the source of the transmissions from the station known to those receiving the transmissions. No station may transmit unidentified communications or signals, or transmit as the station call sign, any call sign not authorized to the station.
(b)	The call sign must be transmitted with an emission authorized for the transmitting channel in one of the following ways:
(1)	By a CW emission. When keyed by an automatic device used only for identification, the speed must not exceed 20 words per minute;
(2)	By a phone emission in the English language. Use of a standard phonetic alphabet as an aid for correct station identification is encouraged;

Willful and malicious interference is rare, but happens. Should the NET suffer from such interference it is best to ignore it. Never acknowledge the interference or make reference to it on air. In internet terms, "don't feed the trolls".

As a contingency we can use an alternate channel. See the ICS-205 for all channel assignments. Each channel is assigned a letter code. You may hear, "**SENIOR CENTER, NET. SWITCH AND ANSWER BRAVO. ACKNOWLEDGE**". This means to acknowledge the instruction and then change your frequency to the one assigned as "**BRAVO**", and then answer the call on the new frequency. This technique will provide some protection from intentional interference as the station causing it may not know what frequency "**BRAVO**" is assigned to. Of course the method is crude and only effective until the interfering station figures out our method.

The open microphone is an oft-occurring fact of life at events such as this. Be sure that you are (a) NOT using VOX, (b) your mic key is not subject to being sat upon or otherwise keyed down unintentionally, and (c) that your radio, if so equipped, has a brief transmit time out timer enabled (some radios have this feature).

Following a team meeting prior to deployment, the Net Controller will issue a roll call and radio check. We want to make certain you're ready to go before you get to your station. Once at your assignment, please check in and advise the status of you and your team. Your Assignment Document will remind you of this and other procedures.

Periodically throughout the event you will be called to check on your status. It will go something like this:

Net: **LUTHERAN, NET, CHECKING**
You: **LUTHERAN, ALL SET, [Call Sign]**
Net: **THANK YOU LUTHERAN. NET, [Call Sign]**

This periodic check-in lets everyone know your status, and assures that we have good communications. The check also has the benefit of informing others listening on the open channel that there is an event in progress. Also, if you are a mobile unit (SAFETY/SWEEP), always precede your call (or status response) with your present location. It's helpful to report where you are which aids in dispatch and situational awareness amongst other units.

Priority, or Emergency?

The procedural phrase PRIORITY TRAFFIC and EMERGENCY TRAFFIC have different applications. PRIORITY TRAFFIC as noted earlier may be used in situations where a request for assistance, an accident report, or incident has already occurred. It clears the frequency and gives you priority.

EMERGENCY TRAFFIC is to be used in cases where an impending life-safety issue is ongoing or about to happen. Think bridge collapse. EMERGENCY TRAFFIC raises the pulse level and pushes the big red buttons. It's very unlikely you will ever have to use this phrase, but if you do, it will get even more attention than PRIORITY. Think of it as SOS.

Emergencies

We don't want any emergencies; don't want to create any; don't want to be mixed up in any. Jest aside, these are highly unlikely. Nonetheless appropriately and effectively responding to an emergency is one of the primary reasons we're all here. So, what do you do when challenged with a *non-nominal event*?

You are in the best position to make the first call for help. So, if you encounter an emergency situation that requires an ambulance, the fire service, and/or police, and have mobile phone coverage, please call the Police/Fire/Ambulance phone number for the town you're in. A list of these numbers is provided on your Assignment Document. Call 911 if there's no time to spare. If it's more expeditious, make your request directly through your NET.

Note that all cellular 911 calls are handled by the State Police. So when they answer, explain who you are and simply ask to be connected to the police, fire or ambulance service for the town in which you are calling. Answer any questions the dispatcher may have promptly.

Once you have notified emergency services, contact NCS as soon as you can with the procedural phrase PRIORITY TRAFFIC and advise NCS of the situation and any actions that have been taken. For example, should you come upon a bike crash, the call would go something like this:

YOU: NET, FARM POND – PRIORITY TRAFFIC

NET: **ALL STATIONS STAND BY FOR PRIORITY TRAFFIC. NET ANSWERING FARM POND.**

YOU: **FARM POND. WE HAVE A REPORT OF A CYCLIST DOWN AT 70 WEST STREET WAYLAND. EMS HAS BEEN NOTIFIED.**

NET: **FARM POND, WE COPY: CYCLIST DOWN 70 WEST STREET WAYLAND WITH EMS NOTIFIED. ADVISE ANY FURTHER REQUIREMENTS.**

YOU: **FARM POND, [Call Sign]**

NET: **NET, [Call sign]** (after a sufficient pause)

NET: **ALL STATIONS, THIS NET STANDING BY FOR PRIORITY TRAFFIC. PLEASE REFRAIN FROM TRANSMISSION UNLESS YOU HAVE PRIORITY OR EMERGENCY TRAFFIC. NET, [Call Sign] at [time]**

During this period, we must keep the air clear for the unit that requested PRIORITY.

It is important to let NET know when you no longer need to lock the frequency for your exclusive use. This decision will be yours to make based upon your determination that further critical communications will no longer be needed. Typically, this point is reached upon arrival of emergency services.

Once the situation is cleared NET will return to an OPEN format with an appropriate announcement and routine traffic will be permitted.

If you cannot notify emergency services on your own then immediately call NET with the procedural phrase PRIORITY TRAFFIC and report (a) your exact location, (b) the nature of the emergency, and (c) the resources required. Consider the example of the tersely-formatted exchange above. *You need not duplicate the language, but instead follow the ideas of accuracy, unambiguous language, and brevity.*

If NET dispatched emergency services for you, they will eventually respond as to the status of the dispatch. For example, you'll receive the message: **"EMS AND POLICE DISPATCHED. ETA 10 MINUTES"**

NET may request more information such as where the victim is being transported to and the disposition of their bicycle. Never transmit information as to a victim's medical condition or injury details. These are not needed and are inappropriate for our purposes and format. And never transmit the name of a participant. Instead use the participant's BIB NUMBER for identification. Identifying a participant by name may violate privacy. Remember, our service is uniquely structured as one whose transmissions may be monitored and, most critically, conveyed to any other party. There is no expectation of privacy in our service, so we must self-regulate and apply privacy protections ourselves.

As we will be keeping a log of any events, please report the arrival of emergency services to the scene and also report the disposition of the participant/s involved. For example, if a participant with BIB NUMBER 123 is involved in an accident and is transported to hospital, notify NET of the BIB NUMBER and the hospital to which the participant is being transported. The destination hospital will be provided by EMS on the scene when you identify yourself and make the request.

Fortunately this event is being held in locations having excellent emergency services. So should police, fire, or ambulance be needed, you won't have to wait long, holding the bag. However, in the appendix you will find "Accident Scene Basics", a treatise culled from larger events that offers a refresher by way of some helpful ideas you hopefully won't have to use.

For any situation requiring EMS, refer to and use the EMS REQUEST TRACKING FORM.

APPENDIX 2 CFL REST STOPS

CF START/FINISH

Tactical ID: START/FINISH

Fatima Shrine

101 Summer Street

Holliston, MA

<https://goo.gl/maps/a4LSEdWqnNjpYMCK7>



LUTHERAN

12 mile Route Rest Stop

Tactical ID: LUTHERAN

Lutheran Church, Holliston

600 Central Street

Holliston, MA

<https://goo.gl/maps/SkhtPGTqV4ZZtpBp6>

Contact at site: Karen Pfeil

Distance from FATIMA: 10 Minutes. 3.1Miles



FARM POND

30/65 mile Rest Stops

Tactical ID: FARM POND

Farm Pond Recreation Area

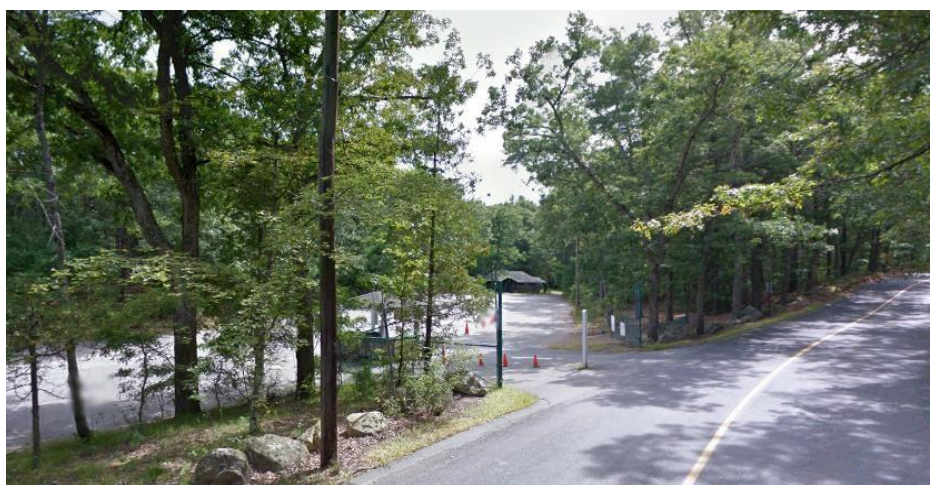
Approx. 201 Lake St

Sherborn, MA

<https://goo.gl/maps/xgkNWbtixrHFANpL7>

Contact at site: Rusty Varrell

Distance from FATIMA: 20 Minutes. 8.5 Miles



SENIOR CENTER

25 mile mark/ **MANDATORY CHECK-IN**

Tactical ID: SENIOR CENTER

159 Goulding Street

Holliston, Ma

<https://goo.gl/maps/PMPkQrMXFiY5j8W29>

Contact at site: Katie Gutwill

Distance from FATIMA: 8 Minutes. 3.8 Miles



CORNELLS

36 mile mark (WATER STOP ONLY – NO CHECK IN) 65 mile

Tactical ID: CORNELLS

229 Hayden Rowe St

Hopkinton, MA 01748

<https://goo.gl/maps/JFigWyQvZBfA1NXh6>

Contact at site: Angie Snow

Distance from FATIMA: 11 Minutes. 5.3

Miles



LEGACY

55 mile mark/**MANDATORY CHECK-IN**

Tactical ID: LEGACY

Red Barn at Legacy Farms

29 Clinton Street

Hopkinton, MA 01748

<https://goo.gl/maps/9GJ8h9Nqhc31atWk9>

Contact at site: Fred Zimmerman

Distance from FATIMA: 13 Minutes. 5.1 Miles



APPENDIX 3 COMMUNICATIONS FREQUENCIES

Please refer to the ICS-205 document for frequency assignments.

Communications Contingencies

If a repeater fails, switch to the next available repeater. For example, if you cannot reach ALPHA, try BRAVO.

If all else fails, call NET on CHARLIE, the simplex frequency.

If a total failure occurs (unlikely), call NET by mobile phone for coordination.

Should a major event, such as a crash, occupy considerable time on the primary NET, radio communications may switch to an alternate repeater at the direction of NET.

APPENDIX 5 TracCar PARTICIPANT TRACKING

The CFL Communications Team uses TracCar, a smartphone based tracking app to track assets and personnel on the course. This gives event staff a real-time look at how the event is progressing and who may be in the area if an incident is reported. The use of the system will be required for all SAG and SWEEP units. It will be made optional for all others.

Tracking your location using your Apple or Android smartphone

About the App

a) Costs nothing to install, and is available from the respective app stores (Google and Apple)

b) Will require access to a 'location provider' (ie: GPS ideally)

c) Use your mobile data connection to send position updates. The amount of data is small per update. If you leave the app beacons your position every 60s, over the course of a day, you will have used probably less than what you will use if you browse to a web page and view some photograph type images. The point is: it's not a lot of data.

d) If you are using it from a vehicle, I suggest that you keep your phone connected to a charging source, to guard against your battery completely draining during the event. The increase in battery drain is not huge, but, over a day, it adds up, and you don't want to be without it.

Install the App

Go to your app store. Search for "Traccar Client". Find the one authored by Anton Tananaev. That is the one you want. The app icon should look similar to one of these (it depends on whether you're using an Apple or Android device):



Android: <https://play.google.com/store/apps/details?id=org.traccar.client>

Iphone: <https://itunes.apple.com/us/app/traccar-client/id843156974>

Once you find the app, install it onto your device.

Grant the device the permissions it asks for! It should only ask for access to your location provider and data network.

Configure the App

1. Open the app.

2. Set the following details:

Device ID: Enter your tactical ID in ALL CAPS & with NO SPACES (ex. SAG31, SWEEP30)

Server URL: <http://137.184.206.135>

Location accuracy: 'HIGH'

Frequency: 120

Distance: 100

Angle: 15

About the above settings: the suggested settings will cause your device to report it's location every 2 minutes when at rest, or, if you have changed direction more than 15 degrees, or, moved 100 meters from your previous location.

3. Close the app completely. (sometimes, changes to the configuration do not 'take' without closing and reopening).

4. Open the app.

5. Test it.

a) Note: Get to a location where your device will have a view of the sky. GPS signals are low power signals from satellites in earth orbit, and your phone will not work well if it can not get a good GPS signal.

b) Slide the 'Service Status' control so that it shows it's active / enabled

c) Tap on the 'Status' in the title bar. It will open a new page, showing details about whether it's able to report your location or not. You want to see 'Location update' with no other error type messages.

If you do not see 'Location update', and/or you see error messages, check your device 'settings', and make sure you have allowed the app to:

i) run in the background

ii) have access to the mobile data at all times

iii) have access to the gps/location provider at all times

For those that are capable and wish to monitor the tracking system to better position your vehicle, AND CAN DO IT SAFELY, you can do the following:


- Point your web browser to www.ARPublicService.com (or the server URL above)
- Log in using the following credentials
 - Email: cfall
 - Password: cfall

APPENDIX 6 VOLUNTEER LIST

Please see this spreadsheet for most up to date list:

[VOLUNTEER ASSIGNMENTS](#)

APPENDIX 7 PARTICIPANT TRACKING WORKSHEET

	PARTICIPANT TRACKING WORKSHEET	REST STOP: START TIME: END TIME: VOLUNTEER NAME:										
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ⁱ EMS = Emergency Medical Services (an ambulance) ⁱⁱ SAG = Support and Gear. A specially-equipped vehicle able to perform minimal roadside repair and to transport riders and their bicycle to the nearest repair station or the event finish. ⁱⁱⁱ CFL = Cycle for Life

^{iv} The Tactical ID for the communications facility that supports units involved in safety and logistics ^v The Tactical ID for the communications facility that supports units involved in participant tracking

Police Departments:

Ashland Police Department	508 -881-1212
Dover Police	508-785-1130
Holliston Police	508-429-1212
Holliston Auxiliary Police	508-429-1212
Hopkinton Police	508- 497-3401
Medfield Police	508-359-2315
Medway Police	508-533-3212
Millis Police	508- 376-5112
Natick Police	508-647-9500
Sherborn	508-653-2424
Southborough	508- 485-2147

Memorandum

To: The Select Board
From: Chief Joseph Bennett
Re: Traffic Constable Appointments & 20(B) Disclosures
Date: May 31, 2023

I am recommending the following for Traffic Constables Consideration of Appointment:

Christopher Adams	William Leary
James Brown	John Litchfield
Paul Castiglione	Deric McGill
James Collins	Paul Moffi
Michael Cunningham	Aidan Nemer
Daniel Docurrall	Alan Ostrander
Jeremy Doyle	Paul Parisi
David Falvey	Vincent Pignataro
Richard Flannery	Peter Ribaudo
Alan Gordon	Bruce Rivard
Thomas Griffin	John Sanchioni
Darlene Haines	Patrick Sheridan
John Harrington	Craig Stanley
Daniel Harvey	Alyssa Swartz
Gary Hassett	Gerald Thayer
Jeffrey Johnson	David Villani
Michael Jones	Charles Wallace
Michelle Kinney	

In addition, I am recommending the appointment of the following town employees for the Traffic Constable position as noted below. Because these individuals already hold positions with the Town of Hopkinton, the Town's Human Resources Department has consulted with Town Counsel. In order for these employees to be able to also work as Traffic Constables, the following conditions set forth below must have been satisfied and to date have been met:

- The second job must be with a completely independent agency, department, or board (in this case, the Police Department). The individual may not participate in, or have official responsibility for, any of the activities of the second agency and the first agency (either Fire or Dispatch) must not regulate the activities of the second agency. This condition has been satisfied.

Traffic Constables - Appointments and 20(B) Disclosures

Page 2

May 31, 2023

- The Police Department is required to advertise the position publicly. Human Resources advertised these positions on May 10, 2023. Employment Applications were submitted to HR and selections were made by the Police Chief in collaboration with Human Resources.
- The individual must complete a Section 20(b) Disclosure Form after the Police Chief has selected them. These forms are included with this memorandum.
- The form requires certification by the Police Chief that no Police Department employee is available to perform the services as part of their regular duties. It also requires the approval of the Select Board. I have certified this condition on the attached 20(b) Disclosure Forms. Select Board approval is being requested.
- The Traffic Constable role must be performed outside of the regular working hours of the first position. I am confirming that all work for the Traffic Constable positions will be performed outside of regular working hours of the first position.
- The services performed in the Traffic Constable roles may not be part of the employee's duties in the employee's first position. This condition has been satisfied.
- The employee cannot be compensated in the seasonal position for more than 40 hours per week or 500 hours annually. I am confirming that hours will not exceed 500.
- Once the approval of the Select Board is obtained, these Disclosure forms will be filed with the Town Clerk's Office.

The Police Chief and HR Department recommends the approval of Section 20(b) Disclosure Forms for the following individuals whose appointment has not expired:

- | | |
|----------------------|---------------------|
| 1. Casey, Shannon | 7. Riess Jr, Kevin |
| 2. Cifuentes, Carmen | 8. Shea, John |
| 3. Davis, Kiley | 9. Savolt, Robert |
| 4. Caron, Robert | 10. Reilly, Ryan |
| 5. Sheridan, John | 11. Stanley, Brenda |
| 6. Jordan, Sara | |

The Police Chief and HR recommends the approval of the Section 20(b) Disclosure Forms and Traffic Constable appointment:

- | | |
|-----------------------|---------------------------|
| 1. Brooks, Evan | 6. Lewis, Douglas |
| 2. Campbell, Benjamin | 7. Poirier, Thomas |
| 3. Iadarola, Steven | 8. Rahill, Patrick |
| 4. Jurasek, Scott | 9. Rathburn-Goodman, Jane |
| 5. Krauss, John | 10. Smith, Dan |

Thank you for your consideration of the above matters.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**


RECEIVED

MAY 30 2023

HUMAN RESOURCES

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	Evan W. Brooks
Title/ Position	Public Safety Dispatcher / Traffic Constable
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton,
Agency Address	18 Main St. Hopkinton, MA 01748
Office phone:	508-497-3401
Office e-mail:	ebrooks@hopkintonpd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	
BOX # 1 Select either STATEMENT #1 or STATEMENT #2. Write an X beside your financial interest.	<p>ELECTED MUNICIPAL EMPLOYEE</p> <p>I am an elected municipal employee.</p> <p><input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR</p> <p><input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
BOX # 2 Select either STATEMENT #1 or STATEMENT #2.	<p>NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE</p> <p>I am a non-elected municipal employee.</p> <p><input type="checkbox"/> STATEMENT # 1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.</p>

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p>STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p>Town of Hopkinton Police Department</p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p>Town of Hopkinton, Traffic Constable</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

<p>What is your financial interest in the municipal contract?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p>I would be compensated hourly as a Traffic Constable for Hopkinton Police Department at \$49/hour for town details or \$62 for Non-town details</p>
<p>Date when you acquired a financial interest</p>	<p>June 7, 2023</p>
<p>What is the financial interest of your immediate family?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p>
<p>Date when your immediate family acquired a financial interest</p>	
<p>Write an X to confirm each statement.</p>	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
<p>Employee signature:</p>	<p></p>
<p>Date:</p>	<p>30 MAY 2023</p>

Attach additional pages if necessary.

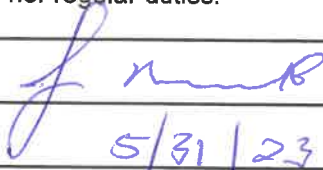
NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**


	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	Benjamin J Campbell
Title/ Position	Dispatcher/ Traffic Constable
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton, Communications Department
Agency Address	18 Main st, Hopkinton, MA 01748
Office phone:	598-497-3401
Office e-mail:	Bcampbell@hopkintonpd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<p><input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR</p> <p><input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<p><input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.</p>

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p style="text-align: center;"><i>Town of Hopkinton Police Department</i></p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p style="text-align: center;">Town of Hopkinton, Traffic Constable</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it. I would be compensated hourly as a Traffic Constable for Hopkinton Police Department at \$49/hour for town details and \$62/Hour for non-town details
Date when you acquired a financial interest	June 7, 2023
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it.
Date when your immediate family acquired a financial interest	
Write an X to confirm each statement.	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	
Date:	5-30-2023

Attach additional pages if necessary.

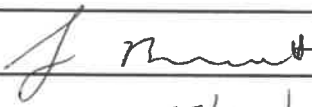
NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

	MUNICIPAL EMPLOYEE INFORMATION
Name of municipal employee:	Robert E. Caron III
Title/ Position	Firefighter / Paramedic
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton FIRE Dept
Agency Address	18 main st Hopkinton ma 01748
Office phone:	508-435-6365
Office e-mail:	numbqh_17@yahoo.com
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.
	My financial interest in a municipal contract is: <input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>- OR -</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p><i>Town of Hopkinton</i></p> <p><i>Traffic Constable</i></p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

<p>What is your financial interest in the municipal contract?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p>Compensated hourly as a Traffic Constable for the town of Hopkinton Police Dept @ 498 per hr for town details or 62 for non town details</p>
<p>Date when you acquired a financial interest</p>	<p>JUNE 7, 2023</p>
<p>What is the financial interest of your immediate family?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p>
<p>Date when your immediate family acquired a financial interest</p>	
<p>Write an X to confirm each statement.</p>	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
<p>Employee signature:</p>	<p><i>[Handwritten Signature]</i></p>
<p>Date:</p>	<p>5/26/2023</p>

Attach additional pages if necessary.

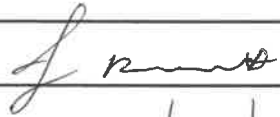
NOT A PERSONAL SERVICES CONTRACT – File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

RECEIVED

JUN 1 2023

HUMAN RESOURCES

	MUNICIPAL EMPLOYEE INFORMATION
Name of municipal employee:	Shannon Casey
Title/ Position	Dispatcher
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton (communications department)
Agency Address	74 Main St Hopkinton MA 01748
Office phone:	508-497-3401 ext. 0
Office e-mail:	scasey@hopkintontpd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.
	My financial interest in a municipal contract is:
	<input type="checkbox"/> I have a non-elected, compensated municipal employee position.
	<input type="checkbox"/> A municipal agency has a contract with me.
	<input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.
	<input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT # 1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>- OR -</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p align="center">FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p align="center">Town of Hopkinton Police Department</p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p align="center">Town of Hopkinton Traffic Constable</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

<p>What is your financial interest in the municipal contract?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p>I would be compensated hourly as a Traffic Constable for Hopkinton Police Department at \$49/hour for town details or \$62 for non-town details.</p>
<p>Date when you acquired a financial interest</p>	<p>June 7, 2023</p>
<p>What is the financial interest of your immediate family?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p>
<p>Date when your immediate family acquired a financial interest</p>	
<p>Write an X to confirm each statement.</p>	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
<p>Employee signature:</p>	<p><i>Robert A. Casan</i></p>
<p>Date:</p>	<p>5/31/2023</p>

Attach additional pages if necessary.


NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

RECEIVED

MAY 31 2023

HUMAN RESOURCES

	MUNICIPAL EMPLOYEE INFORMATION
Name of municipal employee:	Carmen Cifuentes
Title/ Position	Public Safety Dispatcher
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton, Hopkinton police dept.
Agency Address	18 main st Hopkinton, ma, 01748 74 main st Hopkinton, ma, 01748
Office phone:	508-497-3401
Office e-mail:	ccifuentes@Hopkintonpd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	11 18 2020
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency. My financial interest in a municipal contract is: <input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p>Town of Hopkinton Police Department</p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p>Town of Hopkinton, Traffic constable</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency. - What is your relationship to the person or entity? - What is the contract for?</p>

<p>What is your financial interest in the municipal contract?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p>I would be compensated hourly as a Traffic Constable for Hopkinton police department at \$49/hour for town details or \$62 for non-town details.</p>
<p>Date when you acquired a financial interest</p>	<p>June 7th, 2023</p>
<p>What is the financial interest of your immediate family?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p>
<p>Date when your immediate family acquired a financial interest</p>	
<p>Write an X to confirm each statement.</p>	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
<p>Employee signature:</p>	<p>Caemen Cifuentes</p>
<p>Date:</p>	<p>5/31/2023</p>

Attach additional pages if necessary.


NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**


RECEIVED

MAY 25 2023

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	Wiley Davis
Title/ Position	Public Safety Dispatcher
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton
Agency Address	74 Main St. Hopkinton MA 01748
Office phone:	508 497 3401
Office e-mail:	wdavis@hopkintonpd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency. My financial interest in a municipal contract is: <input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

HUMAN RESOURCES

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p>Town of Hopkinton Police Department</p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p>Town of Hopkinton Traffic Constable</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

<p>What is your financial interest in the municipal contract?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p>I would be compensated hourly as a traffic constable for the Portland Police Department.</p>
<p>Date when you acquired a financial interest</p>	<p>June 7, 2023</p>
<p>What is the financial interest of your immediate family?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p>
<p>Date when your immediate family acquired a financial interest</p>	
<p>Write an X to confirm each statement.</p>	<p>FOR A CONTRACT FOR PERSONAL SERVICES --</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
<p>Employee signature:</p>	<p></p>
<p>Date:</p>	<p>5-25-2023</p>

Attach additional pages if necessary.

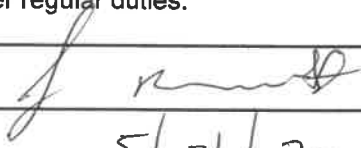
NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

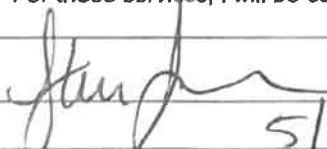
RECEIVED

JUN 1 2023

HUMAN RESOURCES

	MUNICIPAL EMPLOYEE INFORMATION
Name of municipal employee:	Steven Iadarola
Title/ Position	Traffic Constable
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Hopkinton Police Department
Agency Address	74 Main St Hopkinton, MA 01748
Office phone:	508-497-3401
Office e-mail:	siadarola@hopkintonpd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	9/1994
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency. My financial interest in a municipal contract is: <input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT # 1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>– OR –</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p>N/A</p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p> <p>Various unknown entities. I am a per diem Traffic Constable who is hired ad hock to direct traffic at traffic details and have no financial or personal relationships with the vendors. I am an employee of the Hopkinton Police Department.</p>

What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it. I am a per diem Traffic Constable who is hired ad hock to direct traffic at traffic details and have no financial or personal relationships with the vendors. I am an employee of the Hopkinton Police Department.
Date when you acquired a financial interest	05/31/2023
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it. Hourly pay rate based on the Hopkinton Police Department Detail policy
Date when your immediate family acquired a financial interest	N/A
Write an X to confirm each statement.	FOR A CONTRACT FOR PERSONAL SERVICES – Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency). I will have a contract with a municipal agency to provide personal services. <input checked="" type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee. <input checked="" type="checkbox"/> The services are not required as part of my regular duties as a municipal employee. <input checked="" type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.
Employee signature:	
Date:	5/31/2023

Attach additional pages if necessary.

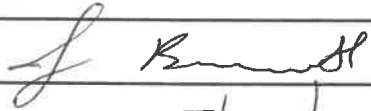
NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

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CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**


RECEIVED

MAY 26 2023

HUMAN RESOURCES

	MUNICIPAL EMPLOYEE INFORMATION
Name of municipal employee:	Sara Jordan
Title/ Position	Fire fighter / Paramedic
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton Fire Department
Agency Address	18 Main St Hopkinton MA 01748
Office phone:	508 497 2323
Office e-mail:	sjordan@hopkintonfd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.
	My financial interest in a municipal contract is:
	<input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p><i>Town of Hopkinton Police Dept</i></p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p><i>Town of Hopkinton Traffic Constable</i></p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it. I would be compensated hourly as a traffic constable for Hopkinton Police Dept at 49 th hr for town details or 62 nd for non-town details
Date when you acquired a financial interest	June 7, 2023
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it.
Date when your immediate family acquired a financial interest	
Write an X to confirm each statement.	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	
Date:	05 26 23

Attach additional pages if necessary.

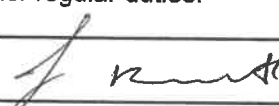
NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

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FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

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CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.


**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

RECEIVED

MAY 26 2023

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	SCOTT T JURASEK
Title/ Position	Lieutenant
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton, Fire Department
Agency Address	18 main ST Hopkinton, Ma 01748
Office phone:	508 497-2323
Office e-mail:	sjurasek@hopkintonfd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	
BOX # 1 Select either STATEMENT #1 or STATEMENT #2. Write an X beside your financial interest.	<p>ELECTED MUNICIPAL EMPLOYEE</p> <p>I am an elected municipal employee.</p> <p><input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR</p> <p><input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
BOX # 2 Select either STATEMENT #1 or STATEMENT #2.	<p>NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE</p> <p>I am a non-elected municipal employee.</p> <p><input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.</p>

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>- OR -</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p>Town of Hopkinton Police Department</p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p>Town of Hopkinton, Traffic constable</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it. I would be compensated hourly as a Traffic Constable for Hopkinton Police Department at \$49/hr for Town Details or \$62/hr for non-Town details
Date when you acquired a financial interest	June 7, 2023
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it.
Date when your immediate family acquired a financial interest	
Write an X to confirm each statement.	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	
Date:	5/25/23

Attach additional pages if necessary.

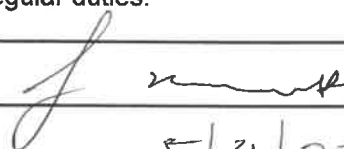
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FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

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CERTIFICATION BY HEAD OF CONTRACTING AGENCY

INFORMATION ABOUT HEAD OF CONTRACTING AGENCY	
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
CERTIFICATION	
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

INFORMATION ABOUT APPROVING BODY	
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
APPROVAL	
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

RECEIVED

MAY 25 2023

HUMAN RESOURCES

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	John Krauss
Title/ Position	Training Officer / Lieutenant / Paramedic
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton - Fire Department
Agency Address	18 Main Street Hopkinton, MA 01748
Office phone:	508 497 2323
Office e-mail:	JKrauss@hopkintonrd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	July 11, 2017
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.
	My financial interest in a municipal contract is:
	<input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

Write an X beside your financial interest.

My financial interest in a municipal contract is:
___ A municipal agency has a contract with me, but not an employment contract.
___ I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.
-- OR --
___ **STATEMENT # 2:** I will have a new financial interest in a contract made by a municipal agency.
My financial interest in a municipal contract is:
 I have a non-elected, compensated municipal employee position.
___ A municipal agency has a contract with me.
___ I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.
___ I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.

FINANCIAL INTEREST IN A MUNICIPAL CONTRACT

Name and address of municipal agency that made the contract

Town of Hopkinton
Police Department

Please put in an X to confirm these facts.

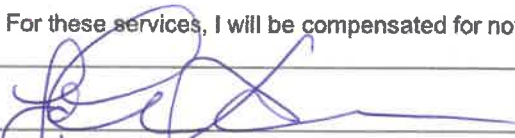
"My Municipal Agency" is the municipal agency that I serve as a municipal employee.
The "contracting agency" is the municipal agency that made the contract.
 My Municipal Agency is not the contracting agency.
 My Municipal Agency does not regulate the activities of the contracting agency.
 In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.
 The contract was made after public notice or through competitive bidding.

FILL IN THIS BOX OR THE BOX BELOW

ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.
- Please explain what the contract is for.
Town of Hopkinton, Traffic Constable

FILL IN THIS BOX OR THE BOX ABOVE

ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.
- Please identify the person or entity that has the contract with the municipal agency.
- What is your relationship to the person or entity?
- What is the contract for?

What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it. I would be compensated hourly as a traffic constable for Hopkinton Police at \$49/hr for Town details or \$62 for non-town details.
Date when you acquired a financial interest	June 7, 2023
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it.
Date when your immediate family acquired a financial interest	
Write an X to confirm each statement.	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	
Date:	5/25/23

Attach additional pages if necessary.

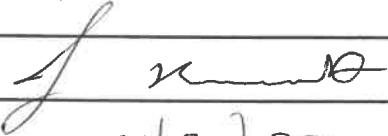
NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

RECEIVED

MAY 26 2023

HUMAN RESOURCES

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	Douglas R Lewis III
Title/ Position	Fire Fighter
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Hopkinton Fire Dept.
Agency Address	73 Main St Hopkinton Ma. 01748
Office phone:	508-497-2323
Office e-mail:	dougielew27@aol.com
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.
	My financial interest in a municipal contract is:
	<input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p align="center">FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p align="center"><i>Town of Hopkinton Police Dept.</i></p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p align="center"><i>Town of Hopkinton, Traffic Constable</i></p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

<p>What is your financial interest in the municipal contract?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p><i>I would be compensated hourly as a Traffic Constable for Hopkinton Police Dept at \$49/hour for Town Details or 62 for a non-Town details</i></p>
<p>Date when you acquired a financial interest</p>	<p><i>June 7, 2023</i></p>
<p>What is the financial interest of your immediate family?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p>
<p>Date when your immediate family acquired a financial interest</p>	
<p>Write an X to confirm each statement.</p>	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
<p>Employee signature:</p>	<p><i>D. J. [Signature]</i></p>
<p>Date:</p>	<p><i>5-26-23</i></p>

Attach additional pages if necessary.

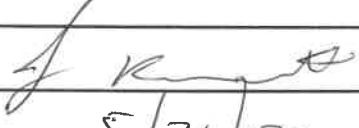
NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	THOMAS J POIRIER
Title/ Position	Fire Prevention Officer
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton, Fire Department
Agency Address	18 Main Street Hopkinton, MA 01748
Office phone:	508-497-2323
Office e-mail:	tpoirier@hopkintonfd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	July 2001
BOX # 1 Select either STATEMENT #1 or STATEMENT #2. Write an X beside your financial interest.	<p>ELECTED MUNICIPAL EMPLOYEE</p> <p>I am an elected municipal employee.</p> <p><input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR</p> <p><input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
BOX # 2 Select either STATEMENT #1 or STATEMENT #2.	<p>NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE</p> <p>I am a non-elected municipal employee.</p> <p><input type="checkbox"/> STATEMENT # 1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.</p>

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p>Town of Hopkinton, Police Department</p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p>Town of Hopkinton, Traffic Constable</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it. I would be compensated hourly as a Traffic Constable for Hopkinton Police Department at \$49/hour for Town details or \$62/hour for Non-Town details.
Date when you acquired a financial interest	June 7, 2023
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it.
Date when your immediate family acquired a financial interest	
Write an X to confirm each statement.	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	<i>Thomas J. Poirier</i>
Date:	5/26/2023

Attach additional pages if necessary.

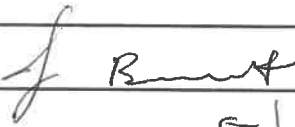
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FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5 31 23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

RECEIVED

MAY 25 2023

HUMAN RESOURCES

	MUNICIPAL EMPLOYEE INFORMATION
Name of municipal employee:	Patricia Rahill
Title/ Position	Firefighter/Paramedic
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton - Fire Department
Agency Address	18 Main Street Hopkinton MA 01748
Office phone:	508-497-2323
Office e-mail:	prahill@hopkintonfd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	4/5/18
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.
	My financial interest in a municipal contract is:
	<input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
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FINANCIAL INTEREST IN A MUNICIPAL CONTRACT

<p>Name and address of municipal agency that made the contract</p>	<p><i>Town of Hopkinton Police Department</i></p>
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<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
--	--

<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p><i>Town of Hopkinton Traffic Constable</i></p>
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<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>
---	--

<p>What is your financial interest in the municipal contract?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p><i>I would be compensated hourly as a traffic constable for Hopkinton Police Department at \$49/hour for town details or \$62/hour for town-town details</i></p>
<p>Date when you acquired a financial interest</p>	<p><i>June 7, 2023</i></p>
<p>What is the financial interest of your immediate family?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p>
<p>Date when your immediate family acquired a financial interest</p>	
<p>Write an X to confirm each statement.</p>	<p>FOR A CONTRACT FOR PERSONAL SERVICES --</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
<p>Employee signature:</p>	<p><i>Pat Cahill</i></p>
<p>Date:</p>	<p><i>5/25/23</i></p>

Attach additional pages if necessary.

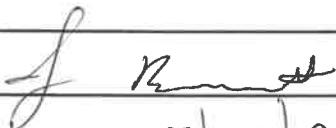
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CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

RECEIVED

MAY 25 2023

HUMAN RESOURCES

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	Jane Rathburn-Goodman
Title/ Position	police dispatcher/traffic constable
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Hopkinton Police
Agency Address	74 Main St Hopkinton
Office phone:	508-497-3401
Office e-mail:	jgoodman@hopkintonpd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	09/1999
BOX # 1 Select either STATEMENT #1 or STATEMENT #2. Write an X beside your financial interest.	<p>ELECTED MUNICIPAL EMPLOYEE</p> <p>I am an elected municipal employee.</p> <p><input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR</p> <p><input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
BOX # 2 Select either STATEMENT #1 or STATEMENT #2.	<p>NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE</p> <p>I am a non-elected municipal employee.</p> <p><input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.</p>

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p>Town of Hopkinton Police Department</p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract. –</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p style="padding-left: 40px;">Town of Hopkinton Traffic constable</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it. I would be financially compensated hourly as a traffic constable for the town of Hopkinton at \$49 an hour for town details and \$62. for non town details.
Date when you acquired a financial interest	June 7 2023
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it.
Date when your immediate family acquired a financial interest	
Write an X to confirm each statement.	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	Jane Rathburn-Goodman
Date:	May 24, 2023

Attach additional pages if necessary.


NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

	MUNICIPAL EMPLOYEE INFORMATION
Name of municipal employee:	Ryan Reilly
Title/ Position	Public Safety Dispatcher / Traffic Constable
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton, Telecommunications
Agency Address	74 Main St Hopkinton, MA 01748
Office phone:	508-497-3401
Office e-mail:	RReilly@Hopkintonpd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	July 2017
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2 .	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.
	My financial interest in a municipal contract is:
	<input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2 .	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>- OR -</p> <p><input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
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FINANCIAL INTEREST IN A MUNICIPAL CONTRACT

<p>Name and address of municipal agency that made the contract</p>	<p><i>Town of Hopkinton Police Department</i></p>
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<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
--	--

<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p><i>Town of Hopkinton Traffic Constable</i></p>
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<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>
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<p>What is your financial interest in the municipal contract?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p><i>I would be compensated hourly as a Traffic Constable for Hopkinton Police Department at \$49/hour for Town details or \$62/hour for non-town details.</i></p>
<p>Date when you acquired a financial interest</p>	<p><i>June 7, 2023</i></p>
<p>What is the financial interest of your immediate family?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p>
<p>Date when your immediate family acquired a financial interest</p>	
<p>Write an X to confirm each statement.</p>	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
<p>Employee signature:</p>	
<p>Date:</p>	<p><i>5/25/23</i></p>

Attach additional pages if necessary.

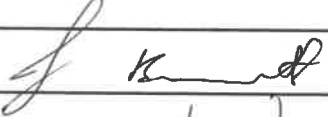
NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.

FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval.
Date:	



Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

RECEIVED

MAY 25 2023

MUNICIPAL EMPLOYEE INFORMATION		HUMAN RESOURCES
Name of municipal employee:	Kevin Patrick Riess Jr.	
Title/ Position	Public Safety Dispatcher.	
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.	
Agency/ Department	Town of Hopkinton, Pubic Safety Dispatch	
Agency Address	18 Main St. Hopkinton, MA, 01748	
Office phone:	508-497-3401	
Office e-mail:	Kriess@hopkintonpd.org	
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected	
Starting date as a municipal employee.		
BOX # 1	ELECTED MUNICIPAL EMPLOYEE	
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.	
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.	
	My financial interest in a municipal contract is:	
	<input type="checkbox"/> I have a non-elected, compensated municipal employee position.	
	<input type="checkbox"/> A municipal agency has a contract with me.	
	<input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.	
	<input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.	
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE	
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.	
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.	

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p style="font-size: 1.2em;">Town of Hopkinton Traffic Constable.</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it. I would be compensated hourly as a traffic Constable for Hopkinton Police Department at \$49/hour for town details or \$62/hour for non-town details.
Date when you acquired a financial interest	June 7, 2023
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it.
Date when your immediate family acquired a financial interest	
Write an X to confirm each statement.	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	Kenn P. Quinn Jr
Date:	5/25/2023

Attach additional pages if necessary.


NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

RECEIVED
MAY 25 2023
HUMAN RESOURCES

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	Robert Savoit
Title/ Position	Public Safety Dispatches
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton Communications
Agency Address	18 Main St Hopkinton MA 01748
Office phone:	508-497-3401
Office e-mail:	Rsavoit@Hopkintonpd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.
	My financial interest in a municipal contract is:
	<input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
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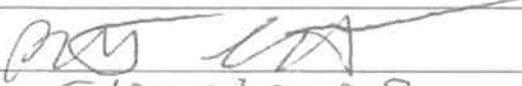
FINANCIAL INTEREST IN A MUNICIPAL CONTRACT

<p>Name and address of municipal agency that made the contract</p>	<p>Town of Hopkinton Police Department.</p>
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<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
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<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p>Town of Hopkinton, Historic Constable.</p>
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<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>
---	--

<p>What is your financial interest in the municipal contract?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it. I would be compensated hourly as a traffic constable for Hopkinton PD at \$49/hr for town details \$102/hr for non town, and \$193/hr for premium work.</p>
<p>Date when you acquired a financial interest</p>	<p>June 7th, 2023</p>
<p>What is the financial interest of your immediate family?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p>
<p>Date when your immediate family acquired a financial interest</p>	
<p>Write an X to confirm each statement.</p>	<p>FOR A CONTRACT FOR PERSONAL SERVICES --</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
<p>Employee signature:</p>	<p></p>
<p>Date:</p>	<p>5/25/2023</p>

Attach additional pages if necessary.

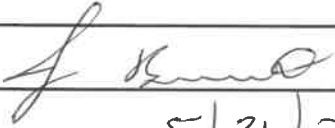
NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

INFORMATION ABOUT HEAD OF CONTRACTING AGENCY	
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
CERTIFICATION	
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

INFORMATION ABOUT APPROVING BODY	
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
APPROVAL	
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

	MUNICIPAL EMPLOYEE INFORMATION	RECEIVED MAY 26 2023
Name of municipal employee:	John P Shea	
Title/ Position	Fire fighter / paramedic	
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.	
Agency/ Department	Town of Hopkinton Fire Department	
Agency Address	18 Main St Hopkinton MA 01748	
Office phone:	508 497 2325	
Office e-mail:	JShea@HopkintonFD.org	
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected	
Starting date as a municipal employee.		
BOX # 1	ELECTED MUNICIPAL EMPLOYEE	
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.	
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.	
	My financial interest in a municipal contract is:	
	<input type="checkbox"/> I have a non-elected, compensated municipal employee position.	
	<input type="checkbox"/> A municipal agency has a contract with me.	
	<input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.	
	<input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.	
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE	
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.	
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.	

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>- OR -</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p>Town of Hopkinton Police Dept.</p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p>Town of Hopkinton, Traffic Constable</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

<p>What is your financial interest in the municipal contract?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p>I would be compensated hourly as a traffic constable for Hopkinton Police Dept. at \$49/hour for town details and \$62/hour for non-town details.</p>
<p>Date when you acquired a financial interest</p>	<p>June 7, 2023</p>
<p>What is the financial interest of your immediate family?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p>
<p>Date when your immediate family acquired a financial interest</p>	
<p>Write an X to confirm each statement.</p>	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
<p>Employee signature:</p>	<p><i>John P. Green</i></p>
<p>Date:</p>	<p>5/25/2023</p>

Attach additional pages if necessary.

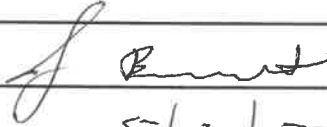
NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**


RECEIVED

MAY 25 2023

HUMAN RESOURCES

	MUNICIPAL EMPLOYEE INFORMATION
Name of municipal employee:	John F. Sheridan
Title/ Position	Lieutenant
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton Fire Dept.
Agency Address	18 Main St Hopkinton, MA 01748
Office phone:	508-497-2325
Office e-mail:	JSheridan@hopkintonfd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	12/29/2014
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency. My financial interest in a municipal contract is: <input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT # 1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p>Town of Hopkinton Police Department</p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p>Town of Hopkinton, Traffic Constable</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it. I would be compensated hourly as a Traffic Constable for the Hopkinton Police Department at \$49/hour for Town details or \$62/hour for non-town details.
Date when you acquired a financial interest	June 7, 2023
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it.
Date when your immediate family acquired a financial interest	
Write an X to confirm each statement.	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	
Date:	5/25/2023

Attach additional pages if necessary.


NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

RECEIVED

MAY 26 2023

HUMAN RESOURCES

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	Daniel J. Smith
Title/ Position	Firefighter / Paramedic
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton, Hopkinton Fire Department
Agency Address	18 Main St. Hopkinton, MA 01748
Office phone:	508-497-2323
Office e-mail:	dsmith@hopkintonfd.org
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	6/20/2017
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<p><input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR</p> <p><input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

Write an X beside your financial interest.

My financial interest in a municipal contract is:

A municipal agency has a contract with me, but not an employment contract.

I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.

-- OR --

STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.

My financial interest in a municipal contract is:

I have a non-elected, compensated municipal employee position.

A municipal agency has a contract with me.

I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.

I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.

FINANCIAL INTEREST IN A MUNICIPAL CONTRACT

Name and address of municipal agency that made the contract

Town of Hopkinton Police Department

Please put in an X to confirm these facts.

"My Municipal Agency" is the municipal agency that I serve as a municipal employee.

The **"contracting agency"** is the municipal agency that made the contract.

My Municipal Agency is not the contracting agency.

My Municipal Agency does not regulate the activities of the contracting agency.

In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.

The contract was made after public notice or through competitive bidding.

FILL IN THIS BOX OR THE BOX BELOW

ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.

- Please explain what the contract is for.

Town of Hopkinton, Traffic Constable

FILL IN THIS BOX OR THE BOX ABOVE

ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.

- Please identify the person or entity that has the contract with the municipal agency.

- What is your relationship to the person or entity?

- What is the contract for?

What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it. I would be compensated hourly as a Traffic Constable for Hepkinton Police Department at \$49/hour for town details or \$62 for non-town details
Date when you acquired a financial interest	June 7, 2023
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it.
Date when your immediate family acquired a financial interest	
Write an X to confirm each statement.	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	Daniel Smith
Date:	5/26/2023

Attach additional pages if necessary.


NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.


FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval. 
Date:	

Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

RECEIVED

MAY 26 2023

HUMAN RESOURCES

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	BRENDA L. STANLEY
Title/ Position	PUBLIC SAFETY DISPATCHER
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	Town of Hopkinton, (Communications)
Agency Address	18 MAIN ST HOPKINTON MA 01748
Office phone:	508-497-3401
Office e-mail:	BSTANLEY@HOPKINTON.PD.ORG
	Check one: <input type="checkbox"/> Elected or <input checked="" type="checkbox"/> Non-elected
Starting date as a municipal employee.	
BOX # 1	ELECTED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am an elected municipal employee.
Write an X beside your financial interest.	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR <input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency. My financial interest in a municipal contract is: <input type="checkbox"/> I have a non-elected, compensated municipal employee position. <input type="checkbox"/> A municipal agency has a contract with me. <input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization. <input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.
BOX # 2	NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE
Select either STATEMENT #1 or STATEMENT #2.	I am a non-elected municipal employee.
	<input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input checked="" type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p align="center">FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	<p>TOWN OF HOPKINTON POLICE DEPARTMENT</p>
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input checked="" type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input checked="" type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input checked="" type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p> <p>TOWN OF HOPKINTON TRAFFIC CONSTABLE</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

<p>What is your financial interest in the municipal contract?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p> <p>I WOULD BE COMPENSATED HOURLY AS A TRAFFIC CONSTABLE FOR HOPKINTON POLICE DEPT @ \$149/HR OR \$62/HR FOR NON TOWN DETAILS</p>
<p>Date when you acquired a financial interest</p>	<p>JUNE 7, 2023</p>
<p>What is the financial interest of your immediate family?</p>	<p>- Please explain the financial interest and include the dollar amount if you know it.</p>
<p>Date when your immediate family acquired a financial interest</p>	
<p>Write an X to confirm each statement.</p>	<p>FOR A CONTRACT FOR PERSONAL SERVICES --</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
<p>Employee signature:</p>	<p>Brenda Stanley</p>
<p>Date:</p>	<p>5/26/2023</p>

Attach additional pages if necessary.

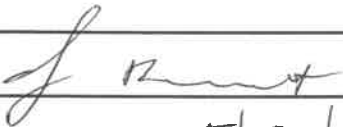
NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.

FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	Joseph Bennett
Title/ Position	Chief of Police
Municipal Agency:	Town of Hopkinton
Agency Address:	74 Main Street, Hopkinton MA 01748
Office Phone:	508-497-3401
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	5/31/23

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	Muriel Kramer
Title/ Position	Chair, Select Board
Agency Address:	18 Main Street, Hopkinton, MA 01748
Office Phone:	508-497-9700
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval.
Date:	



Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.



TOWN OF HOPKINTON
OFFICE OF THE SELECTMEN

DATE: 4/21/2023

SPECIAL TEMPORARY ALCOHOL LICENSE APPLICATION

(Formerly called One Day Liquor License Application)

Complete Application *must be filed a minimum of 60 days before event date*

Fee: \$75.00 per application*

Please complete all areas. Applications not completely filled out will be returned to applicant. All fees must be submitted at the time of filing and must be in the form of a bank check, made out to the Town of Hopkinton. If you are a non-profit organization, you may submit a request in writing to the Board of Selectmen for a fee waiver. If fee waiver is approved, your check will be returned to you.

Type of Special Temporary Alcohol License you are applying for:

- Commercial Enterprise:** Special Temporary license for the sale of Wine and Malt Beverages only
- Non-Profit Enterprise:** Special Temporary license for the sale of:
 - All Alcoholic Beverages
 - Wine and Beer only

Name of Individual and Organization requesting license Peter Mezitt, Weston Nurseries

Applicant's Address 93 EAST MAIN ST. HOPKINTON, MA 01748
Street (P.O. Box, if applicable) City/Town State Zip Code

Location/Address of Event: 93 EAST MAIN ST. (OPEN LAWN + GARDEN YARD)

Telephone Number: 617-755-5294 Cell: 755-5294 Email: beckym@westonnurseries.com

Description/Purpose of Event: 100th ANNIVERSARY CELEBRATION

Is Event controlled by Ticket Sales/Invitation: YES Estimated Number of attendees: 800

Date of Event: 6/24/2023 (Rain Date, if necessary): N/A

Start Time of Event: 11:00 AM - 5:00 PM End Time of Event: 3 PM / 9 PM

Date Alcohol is being delivered: 6/23/2023 Date Alcohol is being removed: 6/25/2023

*Name of where alcohol is being purchased (if applicable): MARTY'S / STARTLINE

*Special licensees must purchase alcoholic beverages from a licensed supplier provided, however, that a non-profit may accept free donated alcohol in accordance with M.G.L. c.138 §14.

All applications must also include the following:

1. Proof of Liquor Liability: the applicant must submit a Certificate of Insurance showing Liquor Liability Coverage and shall file a certificate of insurance with the Board of Selectmen naming the Town of Hopkinton as the Certificate Holder.
2. Written approval from the owner of the property where the event is being held.
3. Floor Plan.
4. Written Plan for the Control of Litter
5. Safety Plan.
6. Copy of TIPS Certification: All persons serving alcoholic beverages must be TIPS Certified and documentation must be included with this application for each server.

Applicant Signature: _____

A handwritten signature in black ink, appearing to read "R. Holt", written over a horizontal line.

Date: _____



TOWN OF HOPKINTON

TOWN MANAGER'S OFFICE

Norman Khumalo
Town Manager

ENTERTAINMENT LICENSE APPLICATION

PETER MEZITT, WESTON NURSERIES 05/04/2023
Name of Applicant Date of this Application

WESTON NURSERIES
Business Name Email

93 EAST MAIN ST.
Street Address PO Box Telephone

HOPKINTON MA. 01748
City/Town State Zip

Please check all that apply:

Application Type: Annual License Single Event

Will the entertainment occur on Sundays? Yes No

Dancing: By Patrons By Entertainers No dancing

Music: Recorded Juke Box Live Music

Public Shows: Theater Movies Floor Show

Other

Amplification System: Yes No

Other: Video Games Pool/Billiard tables

Automatic Amusement Devices Other

Admission Fee: Yes How much? _____ No

Nudity (As described in M.G.L. c.140 §183A): Yes No

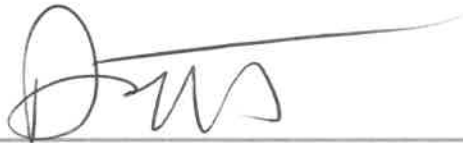
Please fully describe the proposed entertainment: (Type, dates, hours of operation, location, indoors/outdoors, maximum number of patrons/attendees, etc.)

Fee Schedule:

<i>Application Type</i>	<i>Fee</i>
Annual Entertainment License - Occupancy or attendance less than 100 patrons	No fee
Annual Entertainment License - Occupancy or attendance 100 patrons or more	\$25.00
Single Event Entertainment License - Occupancy or attendance less than 100 patrons	No fee
Single Event Entertainment License - Occupancy or attendance 100 patrons or more	\$25.00
Billiard, Pool and Sippio License	\$25.00 per pool, billiard, or sippio table, or bowling alley lane.
Automatic Amusement Device License	\$20.00 per device

Application Checklist:

- CORI Request Form
- Property Owner's Approval (if Applicant does not own the property at which the entertainment will be provided)
- Fee
- For carnivals and events regulated by 520 CMR 5 et. seq. - Provide copy of License to Operate Amusement Devices issued by Commonwealth of Mass.
- For applications for events under the care, custody and control of the Town where employees of the event will have direct and unmonitored contact with children - Provide a list of all employees.
- Sunday Licenses - Provide permission from Division of Public Licensure



5/5/23

Signature of Applicant

Date

Applications shall be filed at least 60 days prior to the day on which the application proposes to offer the public amusement; provided, however, that the Board of Selectmen may waive requirement upon showing of good cause.

Permitting Team Comments

WESTON NURSERY 100TH ANNIVERSARY CELEBRATION ENTERTAINMENT LICENSE/SPECIAL TEMPORARY
ALCOHOL LICENSE

Saturday, June 24, 2023 11 a.m. to 5 p.m.

SB Meeting- 06/06/2023

May 10, 2023

I have no comments.

John Gelcich, AICP
Principal Planner

May 11, 2023

Any food trucks will need to be inspected by the Fire Prevention Division and notification must be made two weeks prior to the event to ensure all permitting and inspection times have been set.

Chief Miller
Hopkinton Fire Department.

June 01, 2023

We have no conditions on the Anniversary event as the vendors are serving bottled/package products and have Tips certified servers.

Shaun McAuliffe
Hopkinton Health Director

June 23, 2021.

The Police Department has no comment on this application

Joseph E. Bennett III
Chief of Police.



eTIPS On Premise 3.1

CERTIFIED

Issued: 3/25/2022

Expires: 3/25/2025

ID#: 5679156

Edwin Twinney
Start Line Brewing
151R Hayden Rowe St
Hopkinton, MA 01748-2511

For service visit us online at www.gettips.com

Event Description

Weston Nurseries 100th anniversary event

June 24, 2023 from 11-4.

This will be an event that will serve to thank our customers for all their support over the years and to celebrate being in business for 100 years. The store will be open that day and it will be business as usual with the exception that we will provide all customers with a special offer that we will announce at a later date.

Aside from the special offer that we will announce closer to the date, we will offer light beverages (beer and wine – two vendors), non-alcohol beverages for adults and children, along with food trucks (two or three) and music. We will host a band (lighter music) from 1-3 and play in recorded music from 12-1 and 3-4.

100th Anniversary 2023 Map

PARKING
LOT 2

PARKING
LOT 3

YELLOW
HOUSE

CABIN

PARKING
LOT 1

WHOLESALE

LOT 1

ADMINISTRATION

Catering
Tent

Waterfall

Portos

Old
Truck

Food Truck

Food Truck

PLANT
YARD

TREES

SHRUBS

PERENNIALS

Music

Food Truck

Book Signing
Tent

Trains

GATE
1

GATE
2

Beer + Wine
Day + Night

Vendor Load Path

Vendor Load/Parking

GH 3 - Event &
Vendor Inventory

Greenhouse 2

Greenhouse 1

Home &
Garden

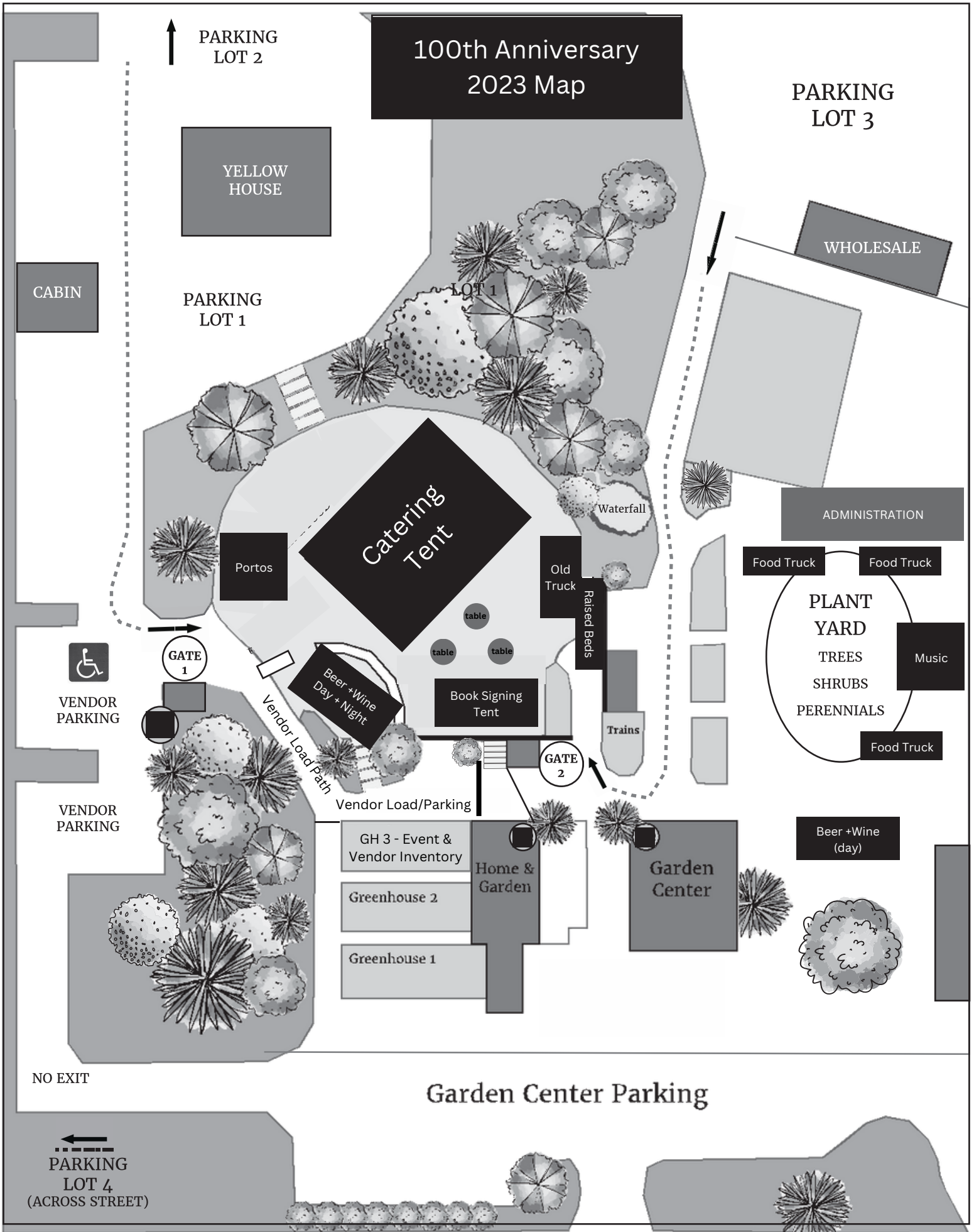
Garden
Center

Beer + Wine
(day)

NO EXIT

Garden Center Parking

PARKING
LOT 4
(ACROSS STREET)



Certificate of Completion

This Certificate of Completion of
eTIPS On Premise 3.1
For coursework completed on September 13, 2021
provided by Health Communications, Inc.
is hereby granted to:

Helen Dinan

Certification to be sent to:

**Start Line Brewing Co.
151R Hayden Rowe St
Hopkinton MA, 01748-2511 USA**



HEALTH COMMUNICATIONS INC.

This document is not proof of TIPS certification. It signifies only that you have completed the course. Valid certification documents will be forwarded to you.



Certificate of Completion

This Certificate of Completion of
eTIPS On Premise 3.1
For coursework completed on February 22, 2022
provided by Health Communications, Inc.
is hereby granted to:

Jeffrey Taback

Certification to be sent to:

10 Church St
Hopkinton MA, 01748-1954 USA



HEALTH COMMUNICATIONS, INC.





eTIPS On Premise 3.1

CERTIFIED

Issued: 9/7/2021

Expires: 9/7/2024

ID#: 5549893

Kelly Bohannon
131 Richie Rd
Attleboro, MA 02703-6557

For service visit us online at www.gettips.com

**POSTED PUBLIC HEARING NOTICE
TOWN OF HOPKINTON
ENTERTAINMENT/SPECIAL TEMPORARY ALCOHOL LICENSE APPLICATION
Weston Nurseries, Inc.
Hopkinton Town Hall
18 Main Street
Hopkinton, MA 01748**

The Select Board will hold a public hearing pursuant to the Town of Hopkinton Entertainment and Amusement License Policy, MGL Ch. 140 §182 Entertainment License, and MGL c. 140, Special Temporary Alcohol License, on Tuesday, June 6, 2023 at 6:55 p.m. in Hopkinton Town Hall, 18 Main Street, Hopkinton, MA.

Applicant Peter Mezitt, on behalf of Weston Nurseries, Inc., is seeking approval for an Entertainment/Special Temporary Alcohol License for its 100th Anniversary Celebration, to be held on June 24th, 2023 from 11am to 5pm, outside in the open lawn and garden yard located behind the Weston Nurseries Garden Center at 93 East Main Street, Hopkinton.

The event will include live music/amplification system. Alcohol will be served by TIPS certified servers, supplied by Startline Brewing Company and or Marty's. Three local food vendors and an ice cream vendor will also be included.

Public comment is invited. For further information, please contact the Town Manager's Office at (508) 497-9700, or at Hopkinton Town Hall, 18 Main Street, Hopkinton, MA. Town Hall is handicap accessible.

Amy Ritterbusch
Chair- Hopkinton Select Board.

Event Safety Plan for Weston Nurseries 100th Anniversary Event

Contact numbers:

Peter Mezitt 508 962 8999

Karen Mezitt 508 962 0271

Medical Response from Staff

There will be 4-5 people present on the day of the event that have recently taken a First aid/CPR Class through Heart saver First Aide CPR/AED. They use the guidelines from the American Heart Association. This group of people has a basic understanding of what their roles are and what they need to do if someone needs emergency attention. Our training taught us to call 911 and talk to an emergency dispatcher as the first step. We also have an AED device on the premises that could be used if necessary.

Disaster Plan

In the event of a natural disaster or extremely heavy weather event that requires evacuation, we will utilize our microphone system to direct people to the closest shelter or back to their vehicles.

Missing Children

Children are invited to the event. If a parent loses a child, we will immediately call the police to report the missing child. If a child loses their parent for whatever reason, we will utilize our microphone system to locate the parent. If that proves unsuccessful, we will contact the police.

Traffic Control

Parking: Parking for the event will be in our front parking lot and in our back area (wholesale yard) if necessary. Signs and an adequate number of WN Staff will be used to direct people. All staff will be equipped with walkie talkies to help coordinate.

Security:

There is no admission to the day as it is mostly a daytime (versus evening) family-friendly customer-oriented traffic day with food and beverages spread throughout the sales area if someone were to want a non-alcohol or alcohol drink. We may hire a security detail if the town thinks it necessary.

Tip certified staff will work in the beer and wine tent and keep an eye out on the consumption.

Other Suspicious Activities:

Weston Staff will be present to direct people on where to park. If necessary, we will utilize our voices when in close proximity and handheld walkie talkies when further away to communicate on all logistics. Should any suspicious activity be recognized, Peter and Karen, along with our store manager Josh Clarke, will be notified immediately so that we may handle the situation and contact the police if necessary.

Fire Prevention:

This is an outdoor event so there is not too much concern about fire risk beyond what we have on any other day. Any vendors who bring food trucks or beverages will be responsible for filling out their applications and receiving permits, so they are acting in accordance with the guidelines of what they are allowed to do.

Electrical systems, stage:

Not applicable beyond we will use a few outlets for the music.

Waste Disposal:

We will use out small trash and recycling bins and bring full bins to our 30 cubic yard dumpsters located out in our wholesale yard as needed.

Provisions for special needs:

We will utilize our handicap parking spots and we will have golf carts should people need a ride as we do on any other day.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/15/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement.

PRODUCER: NorthStar Ins. Services, Inc. 300 First Ave, Suite 100 Needham, MA 02494
INSURED: CraftLife Brewing Company LLC dba Start Line Brewery 151R Hayden Rowe St. Hopkinton, MA 01748
CONTACT NAME: NorthStar Ins. Services, Inc. PHONE: 781-431-2500 FAX: 781-431-6134
INSURER(S) AFFORDING COVERAGE: Acadia Insurance Company (NAIC # 31325), CoveRisk Services, LLC

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSD, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liability, and Workers Compensation.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER CANCELLATION

Certificate holder: Town of Hopkinton, 18 Main Street, Hopkinton, MA 01748. Cancellation notice: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. Authorized representative signature: Jane F. Higgins-Stearns



TOWN OF HOPKINTON
OFFICE OF THE SELECTMEN

DATE: 4/21/2023

SPECIAL TEMPORARY ALCOHOL LICENSE APPLICATION

(Formerly called One Day Liquor License Application)

Complete Application must be filed a minimum of 60 days before event date

Fee: \$75.00 per application*

Please complete all areas. Applications not completely filled out will be returned to applicant. All fees must be submitted at the time of filing and must be in the form of a bank check, made out to the Town of Hopkinton. If you are a non-profit organization, you may submit a request in writing to the Board of Selectmen for a fee waiver. If fee waiver is approved, your check will be returned to you.

Type of Special Temporary Alcohol License you are applying for:

- Commercial Enterprise:** Special Temporary license for the sale of Wine and Malt Beverages only
- Non-Profit Enterprise:** Special Temporary license for the sale of:
 - All Alcoholic Beverages
 - Wine and Beer only

Name of Individual and Organization requesting license PETER MEZITT, WESTON NURSERIES

Applicant's Address 93 EAST MAIN ST. HOPKINTON, MA 01748
Street (P.O. Box, if applicable) City/Town State Zip Code

Location/Address of Event: 93 EAST MAIN ST. (OPEN LAWN + GARDEN)

Telephone Number: _____ Cell: 617-755-5294 Email: beckym@westonnurseries.com

Description/Purpose of Event: BLOOM, BREWS + BBQ

Is Event controlled by Ticket Sales/Invitation: YES Estimated Number of attendees: 1,000

Date of Event: 9/9/2023 (Rain Date, if necessary): n/a

Start Time of Event: 11:00 AM End Time of Event: 7:00 PM

Date Alcohol is being delivered: 9/8/23 Date Alcohol is being removed: 9/10/2023

*Name of where alcohol is being purchased (if applicable): MARTY'S / STARTLINE

*Special licensees must purchase alcoholic beverages from a licensed supplier provided, however, that a non-profit may accept free donated alcohol in accordance with M.G.L. c.138 §14.

All applications must also include the following:

1. Proof of Liquor Liability: the applicant must submit a Certificate of Insurance showing Liquor Liability Coverage and shall file a certificate of insurance with the Board of Selectmen naming the Town of Hopkinton as the Certificate Holder.
2. Written approval from the owner of the property where the event is being held.
3. Floor Plan.
4. Written Plan for the Control of Litter
5. Safety Plan.
6. Copy of TIPS Certification: All persons serving alcoholic beverages must be TIPS Certified and documentation must be included with this application for each server.

Applicant Signature: _____

A handwritten signature in black ink, appearing to read "R. Kott", is written over the signature line.

Date: _____



TOWN OF HOPKINTON
SELECT BOARD

18 Main Street, Hopkinton, MA 01748
508-497-9700 www.hopkintonma.gov

ENTERTAINMENT LICENSE APPLICATION

DATE: May 8, 2023

Peter Mezitt
Applicant Name

Weston Nurseries beckym@westonnurseries.com
Business Name Email

93 E. MAIN ST. 617-755-5294
Street Address/P.O. Box Telephone

Hopkinton, MA 01748
City/Town State Zip

Please check all that apply:

Application Type: Annual License Single Event

Will the Entertainment occur on Sundays? Yes No

Dancing: By Patrons By Entertainers No Dancing

Music: Recorded Juke Box Live Music

Public Shows: Theater Movies Floor Show Other _____

Amplification System: Yes No

Other: Video Games Pool/Billiard Tables Automatic Amusement Devices

Other: _____

Admission Fee: Yes How Much? _____ No

Nudity (As described in M.G.L. c.140 §183A): Yes No

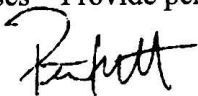
Please fully describe the proposed entertainment in the space below: (Type, dates, hours of operation, location, indoors/outdoors, maximum number of patrons/attendees, etc.)

Fee Schedule:

<i>Application Type</i>	<i>Fee</i>
Annual Entertainment License – Occupancy or attendance less than 100 patrons	No fee
Annual Entertainment License – Occupancy or attendance 100 patrons or more	\$25.00
Single Event Entertainment License – Occupancy or attendance less than 100 patrons	No fee
Single Event Entertainment License – Occupancy or attendance 100 patrons or more	\$25.00
Billiard, Pool and Sippio License	\$25.00 per pool, billiard, or sippio table, or bowling alley lane
Automatic Amusement Device License	\$20.00 per device

Application Checklist:

- Application Fee (must accompany application; checks made payable to Town of Hopkinton)
- CORI Request Form
- Property Owner’s Approval (if Applicant does not own the property at which the entertainment will be provided)
- For carnivals and events regulated by 520 CMR 5 et. seq. – Provide copy of License to Operate Amusement Devices issued by Commonwealth of Massachusetts
- For applications for events under the care, custody and control of the Town where employees of the event will have direct and unmonitored contact with children – Provide a list of all employees.
- Sunday Licenses – Provide permission from Division of Public Licensure



Signature of Applicant

May 8, 2023
Date

Applications shall be filed at least 60 days prior to the day on which the application proposes to offer the public amusement; provided, however, that the Select Board may waive requirement upon showing of good cause.

Revised 10/5/2021

Permitting Team Comments
WESTON NURSERIES FOURTH ANNUAL "BLOOMS, BREWS & BBQ FEST ENTERTAINMENT
LICENSE/SPECIAL TEMPORARY ALCOHOL LICENSE
Saturday, September 9, 2023 11 a.m. to 7 p.m.
SB Meeting- 06/06/2023

May 10, 2023

I have no comments.

John Gelcich, AICP
Principal Planner

May 11, 2023

Any food trucks will need to be inspected by the Fire Prevention Division and notification must be made two weeks prior to the event to ensure all permitting and inspection times have been set.

Chief Miller
Hopkinton Fire Department.

June 1, 2023

The Blooms, Brews and BBQ event will operate as it has in the past. The food vendors need to coordinate with the Health Department. We will permit them and inspect them on the day of the event. Weston's coordinator will work with us and the vendors as they have in the past. The Health Department has had no issues with the event in the past.

Shaun McAuliffe
Hopkinton Health Director

June 23, 2021.

The Police Department has no comment on this application

Joseph E. Bennett III
Chief of Police.

Event Safety Plan for Blooms Brews and BBQ

Event description – already submitted

Map – already submitted

Contact numbers:

Peter Mezitt 508 962 8999 peterm@westonnurseries.com

Karen Mezitt 508 962 0271 karenm@westonnurseries.com

Medical Response from Staff

There will be 4-5 people present the day of the event that have recently taken a First aid/CPR Class through Heartsaver First Aide CPR/AED. They use the guidelines from the American Heart Association. This group of people has a basic understanding of what their roles are and what they need to do if someone needs emergency attention. Our training taught us to call 911 and talk to an emergency dispatcher as the first step. We also have an AED device on the premise that could be used if necessary.

Disaster Plan

In the event of a natural disaster or extremely heavy weather event that requires evacuation, we will utilize our microphone system to direct people to the closest shelter or back to their vehicles.

Missing Children

Children are invited to the event. If a parent loses a child, we will immediately call the police to report the missing child. If a child loses their parent for whatever reason, we will utilize our microphone system to locate the parent. If that proves unsuccessful, we will contact the police.

Traffic Control

Parking: Parking for the event will be in our front parking lot, in our three upper parking spots on the East side of Legacy North Road, and down in our commercial sales yard. If need be, overflow parking will be across Legacy Farm North Road in the vacant lot formerly owned by Roy MacDowell. Signs and an adequate number of Weston Nurseries staff will be used to direct people. All staff will be equipped with walkie-talkies to help coordinate parking in the different spots. Police detail may be used in order to maintain a safe environment based upon anticipated turnout and traffic.

Security: The event area will be fenced off so that all visitors must pass through the two entrances. One entrance will be located on the south side for people coming in from the garden center parking lot and the other entrance will be located on the west side for people parking in the other parking areas. Tip certified staff will be responsible for administering wrist bands and keeping an eye out on the consumption. Only people with wrist bands and beer tickets will be served by the vendors.

Other suspicious activities

Weston Nurseries staff will be present to direct people on where to park, help people get to and back from the event space and generally monitor activity and any suspicious occurrences during the event. We will utilize our voices when in close proximities and hand held walki-talkies when further away to communicate on all logistics. Should any suspicious occurrences be recognized, Peter and Karen will be notified immediately so that we may handle the situation and contact the police if necessary.

Fire Prevention

This is an outdoor event so there is not too much concern about fire risk. However, any structures we provide such as tents will meet fire department guidelines. Any vendors who bring tents or food truck apparatus will be responsible for filling out applications and receiving a permit so that they are acting within the guidelines of what they are allowed to do.

Sanitary accommodation

We will rent 5 porta potties which is the recommended amount for the amount of people anticipated on site at any one time (400-500). We also have bathrooms available in two of our garden center buildings as a back up.

Stage/Temporary Structures and infrastructure

Tents, food trucks, vendor tents, tables/chairs and a stage are what we will be setting up for the day. See map.

Electrical system

We have ample power via 5 outlet boxes that are on the lawn area. Most of the power is needed for the stage area and for the musicians. We have used these outlets for all the past events and they have served the event well.



eTIPS On Premise 3.1

CERTIFIED

Issued: 3/25/2022

Expires: 3/25/2025

ID#: 5679156

Edwin Twinney
Start Line Brewing
151R Hayden Rowe St
Hopkinton, MA 01748-2511

For service visit us online at www.gettips.com

100th Anniversary 2023 Map

PARKING
LOT 2

PARKING
LOT 3

YELLOW
HOUSE

CABIN

PARKING
LOT 1

WHOLESALE

LOT 1

Catering
Tent

Waterfall

Portos

Old
Truck

ADMINISTRATION

Food Truck

Food Truck

PLANT
YARD

TREES

SHRUBS

PERENNIALS

Music

Food Truck

Book Signing
Tent

Trains

GATE
1

GATE
2

Beer +Wine
Day + Night

Vendor Load Path

Vendor Load/Parking

Beer +Wine
(day)

GH 3 - Event &
Vendor Inventory

Home &
Garden

Garden
Center

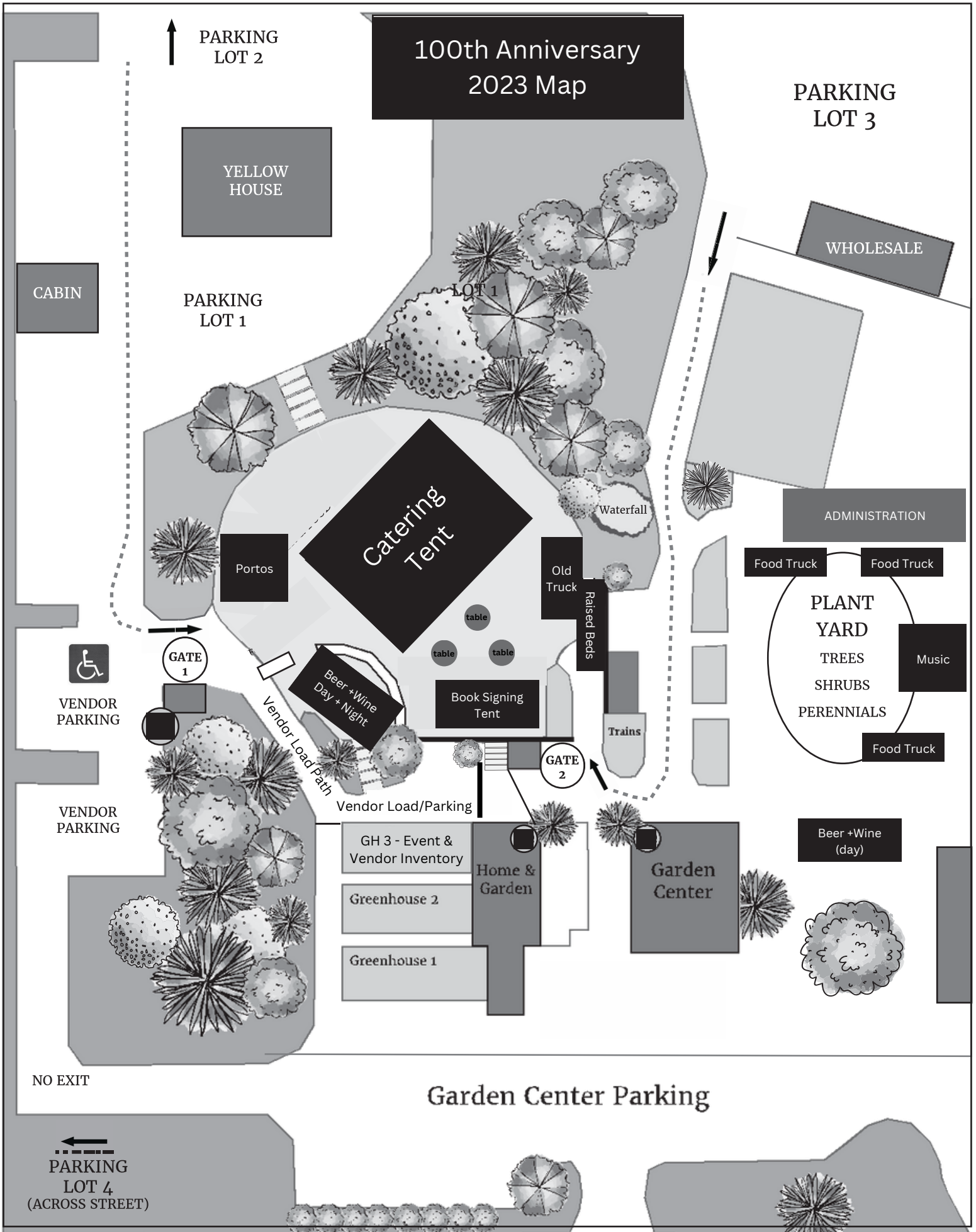
Greenhouse 2

Greenhouse 1

NO EXIT

Garden Center Parking

PARKING
LOT 4
(ACROSS STREET)



Certificate of Completion

This Certificate of Completion of
eTIPS On Premise 3.1
For coursework completed on September 13, 2021
provided by Health Communications, Inc.
is hereby granted to:

Helen Dinan

Certification to be sent to:

**Start Line Brewing Co.
151R Hayden Rowe St
Hopkinton MA, 01748-2511 USA**



HEALTH COMMUNICATIONS INC.

This document is not proof of TIPS certification. It signifies only that you have completed the course. Valid certification documents will be forwarded to you.



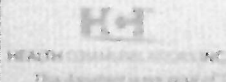
Certificate of Completion

This Certificate of Completion of
eTIPS On Premise 3.1
For coursework completed on February 22, 2022
provided by Health Communications, Inc.
is hereby granted to:

Jeffrey Taback

Certification to be sent to:

10 Church St
Hopkinton MA, 01748-1954 USA





eTIPS On Premise 3.1

CERTIFIED

Issued: 9/7/2021

Expires: 9/7/2024

ID#: 5549893

Kelly Bohannon
131 Richie Rd
Attleboro, MA 02703-6557

For service visit us online at www.gettips.com

Blooms, Brews and BBQ Fundraiser Event

When: September 9, 2023 from 11AM – 7PM

Where: Weston Nurseries, Inc. 93 East Main St. Hopkinton

Description of event:

Weston Nurseries is teaming up with the folks at Dana Farber to raise money for the annual Jimmy fund Walk on October 1st 2023. We are working with Ted Twinney from the Start Line Brewery and a licensed beer distribution company (to be determined) to host a BBQ & Beer festival at Weston Nurseries on Saturday, September 9th. The venue will be outdoors in a field located in back of our garden center.

Details are as follows:

Venue: approximately 10,000 square foot lawn area located behind our garden center. Surrounding areas adjacent to the lawn area will be used based on anticipated turn out. We will have one large tent (approximately 40ft.*40 ft.) for people to sit down. This tent will be located in the center of the field. We will also have a smaller tent (approximately 10ft.*20ft. for the beer pouring and another tent to provide shade for the bands. The food vendors and the beer vendors will be interspersed (see attached sketch)

Admission: \$10 entrance fee for online pre-purchased tickets and \$15 entrance fee for day of purchases. Kids 12 and under are free. All net proceeds will go to the Jimmy Fund Walk. In 2019 the event raised \$8,000 for the Jimmy Fund Walk and we hope to top that this year.

Food: We anticipate bringing in 4 local food vendors. The food vendors will provide their own tents and tables to serve the food. Various pork products, side dishes, salads and non-alcoholic refreshment will sold by the food vendors. We are also looking to bring in an ice cream vendor. Food and Ice cream vendors will charge customer directly for what they sell.

Beer: We anticipate bringing in 4-5 local microbreweries to serve beer through a licensed distributor and directly with the brewery in the case of Start Line Brewing. Beer tickets will be exchanged for 12 oz. pours by the local microbreweries. TIP certified staff will sell beer tickets at the entrance gates and do the pouring at the beer tent. Tip certified staff will be located at the entrances to ID people and provide a colored wristband for anyone wanting to purchase beer tickets. They will also keep an eye on the patrons to ensure that people are not overconsuming or passing off drinks to underage attendees.

Music: We plan on having 4 bands perform throughout the day. They will perform off the east end of the lawn area. Appropriate staging and amplification equipment will be used.

Parking: Parking for the event will be in our front parking lot, in our three upper parking spots on the East side of Legacy North Road, and down in our commercial sales yard. If need be, overflow parking will be across Legacy Farm North Road in the vacant lot formerly owned by Roy MacDowell. Signs and an adequate number of Weston Nurseries staff will be used to direct people. All staff will be equipped with walkie-talkies to help coordinate parking in the different spots. Police detail may be used in order to maintain a safe environment based upon anticipated turnout and traffic.

Security: The event area will be fenced off so that all visitors must pass through the two entrances. One entrance will be located on the south side for people coming in from the garden center parking lot and the other entrance will be located on the west side for people parking in the other parking areas. (See attached sketch). Tip certified staff will be responsible for administering wrist bands and keeping an eye out on the consumption. Only people with wrist bands and beer tickets will be served by the vendors.

Insurance: Weston Nurseries will provide all the required insurance for an event of this nature.

Other activities: An Opportunity drawing will likely be part of the event. We will ask People if they would like to donate money for the Jimmy Fund walk for a chance at being picked to win various items such as Weston products and gift cards and other items donated by various businesses. A few lawn games such as corn hole and Giant Jenga will be set up as well.

Written Plan for Litter Control

We have ample trash barrels and recycling barrels placed on the premise to handle the amount of trash generated and staff on hand to change over trash bags on a regular basis. We have a dumpster nearby and all trash will go into the dumpster. The area will be entirely cleaned up within an hour after the event has ended. All vendors clean up their spots and are expected to leave it as clean as it was when they got there.

**POSTED PUBLIC HEARING NOTICE
TOWN OF HOPKINTON
ENTERTAINMENT/SPECIAL TEMPORARY ALCOHOL LICENSE APPLICATION
Weston Nurseries, Inc. Blooms, Brews & BBQ
Hopkinton Town Hall
18 Main Street
Hopkinton, MA 01748**

The Select Board will hold a public hearing pursuant to the Town of Hopkinton Entertainment and Amusement License Policy, MGL Ch. 140 §182 Entertainment License, and MGL c. 140, Special Temporary Alcohol License, on Tuesday, June 6, 2023 at 7:05 p.m. in Hopkinton Town Hall, 18 Main Street, Hopkinton, MA.

Applicant Peter Mezitt, on behalf of Weston Nurseries, Inc., is seeking approval for an Entertainment/Special Temporary Alcohol License for its Annual Bloom, Brews & BBQ event, to be held on September 9th, 2023 from 11am to 7pm, outside in the open lawn and garden yard located behind the Weston Nurseries Garden Center at 93 East Main Street, Hopkinton.

The event will include live music/amplification system for the band performing. Alcohol will be served by TIPS certified servers, supplied by Startline Brewing Company and or Marty's

Public comment is invited. For further information, please contact the Town Manager's Office at (508) 497-9700, or at Hopkinton Town Hall, 18 Main Street, Hopkinton, MA. Town Hall is handicap accessible.

Amy Ritterbusch
Chair- Hopkinton Select Board.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/15/2023

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER NorthStar Ins. Services, Inc. 300 First Ave, Suite 100 Needham, MA 02494	781-431-2500	CONTACT NAME: PHONE (A/C, No, Ext): 781-431-2500 FAX (A/C, No): 781-431-6134 E-MAIL ADDRESS:
INSURED CraftLife Brewing Company LLC dba Start Line Brewery 151R Hayden Rowe St. Hopkinton, MA 01748		INSURER(S) AFFORDING COVERAGE INSURER A : Acadia Insurance Company INSURER B : CoveRisk Services, LLC. INSURER C : INSURER D : INSURER E : INSURER F :
		NAIC # 31325

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Liquor GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			ADV554621210 EACH COMMON CAUSE- LIQUOR	02/28/2023	02/28/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			ADA554625410	02/28/2023	02/28/2024	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			ADV554621210	02/28/2023	02/28/2024	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
B	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below			014005035199123	01/01/2023	01/01/2024	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER HOPK-TO Town of Hopkinton 18 Main Street Hopkinton, MA 01748	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>Jane F. Higgins-Stearns</i>
---	--

LINDA ASSIM



Diligent and energetic Customer Service Representative with 20 years of experience in various industries, which include high-tech, travel & tourism, national defense, education and pest control. Seeking the Senior Customer Service Representative position where my communication skills combined with my problem-solving skills can be useful in serving customers. Capable of handling a variety of tasks in a fast-paced environment. Able to keep customers happy and satisfied, while resolving their issues in a short amount of time. Interested in a challenging and rewarding role, providing the highest level of support to customers. Self-driven, passionate and people oriented. Efficient in management and tracking data to deliver an outstanding experience.

Customer Service	Problem Solving	Telephone Etiquette
Communication Skills	Tech Savvy	Passive Selling
Accuracy	Vendor Management	Customer-client Relationship

RELEVANT EXPERIENCE

Customer Service

- Answered order placement calls from customer accounts
- Responded to customer inquiries pertaining to product operation in a timely manner.
- Addressed customer queries in coordination with other appropriate departments.
- Notified appropriate departments of product and service complaints.
- Retained customer database files to ensure accuracy of information.
- Maintained company's data records
- Provided serviced to over 40 telephonic and desk-side help daily
- Weekly customer satisfaction surveys.

Sales Management

- Developed and maintained outstanding relationships with clients
- Provided sales and customer service while securing travel arrangements.
- Listened to customer/clients needs carefully coordinating vacation plans.
- Provided service including quotations from vendors to customers, while booking flight reservations, hotels, tours and car rentals.

- Amended sales orders when required based on customer and manager requests as changes occurred.
- Utilized excellent verbal and written communication skills while maintaining professional and positive demeanor.
- Demonstrated exceptional organizational skills while multi-tasking.

Event Management

- Strategically supported channel and alliance partnerships at Raytheon Company
- Requested guidance from leadership team, to respond to event processing requests.
- Designed event flyers and digital banners.
- Securing meeting rooms, catering and audio-visual equipment
- Provided excellent customer service to ensure client satisfaction

EMPLOYMENT HISTORY

Receptionist / SoFlo Music School / Delray Beach, FL [REDACTED]

Receptionist Administrator / North Hill / Needham, MA [REDACTED]

Teacher / Westwood Children's School / Westwood, MA [REDACTED]

Primary Teacher / Bright Horizons / Wellesley, MA [REDACTED]

Teacher / Nana's Cradle / Newton, MA [REDACTED]

Event Management Admin-Help Desk / Raytheon Company / [REDACTED]

Front Desk Concierge / Babson Executive Conference Ctr / [REDACTED]

Public Service Rep / Massachusetts Port Authority / Boston, MA [REDACTED]

EDUCATION

Certification Early Childhood Education / [REDACTED]

Certification in Tour Directing / [REDACTED]

Certification in Airline Reservations Systems / [REDACTED]

Associates in Communications / [REDACTED]

TECHNICAL COMPETENCIES

Microsoft Office Suite / Email Communication / Help Desk / Conference Management / Scheduling / Business Writing / Public Speaking / DOD Systems / Airline Reservation

Systems / Hotel Management / English-Spanish / Microsoft Windows / Customer
Service / Database Management / Detail Orientation

March 31, 2023

[REDACTED]
Town of Hopkinton
18 Main Street
Hopkinton, MA 01748

Dear [REDACTED],

I am interested in the Administrative Assistant position in Land Use at Town of Hopkinton. I am an administrative professional with excellent customer service skills, as well as organizational skills. I am a writer, very articulate and have great attention to detail. I would like to schedule a personal interview to discuss the position further.

Please contact me at your earliest convenience by calling, [REDACTED] or emailing me at [REDACTED]

Thank you in advance for your consideration.

Sincerely,


Linda Assim

[REDACTED]

Albert E. Bessette
Right of Way Manager



365 State Street
Springfield, MA 01105

Phone 413 787-0310
Cell 413 441-3612
Fax 413 734-9123
albert.e.Bessette.jr@verizon.com

May 8, 2023

Hopkinton Board of Selectmen
Town Hall
18 Main Street
Hopkinton, MA 01748

**RE: Petition for Verizon job #4A0PE6A
Pole T. 10S/E.10S - Cedar Street**

Dear Honorable Board Members:

Pursuant to G.L.c.166, § 22 and the *Regulations for Pole and Wire Locations* of the Hopkinton Board of Selectmen, enclosed find the following items in support of the above-referenced project, which items will be submitted both in hard copy and electronically to the Town Manager and Director of the Department of Public Works:

1. Petition;
2. Order;
3. A written description (in Petition and Order) and high-resolution photograph of where poles will be placed (Section B (a));
4. Plan showing the pole locations in a scale of 1 inch equal 40 feet in PDF format (Section B (b));
5. The kind of poles to be used – Southern Pacific Pine Class 2 (Section B (c));
6. The number of wires or cables to be attached - listed on the Order (Section B (d));
7. The height to which the wires or cable may run – above eighteen (18) feet for lowest cable and all other cables at heights that meet the National Electric Safety Code (Section B (e));
8. Check No. 1357 payable to the Town of Hopkinton in the amount of \$300.00 (application fee of \$50.00 and fee per pole of \$250.00 each).

Should any questions or comments arise concerning this matter, please contact me at (413) 787-0310. Your Assistance is greatly appreciated.

Sincerely,

Albert E. Bessette Jr.

Albert E. Bessette, Jr.
Right of Way Manager

Enc

Cc: Town Manager
Director of the Department of Public Works

PETITION FOR JOINT OR IDENTICAL POLE LOCATIONS

May 2, 2023

To the Select Board

in **HOPKINTON**, Massachusetts

VERIZON NEW ENGLAND, INC. and **NSTAR ELECTRIC COMPANY d/b/a Eversource Energy** request permission to locate poles, wires, cables and fixtures including the necessary anchors, guys and other such sustaining and protecting fixtures to be owned and used in common by your petitioners, along and across the following public way or ways:

CEDAR STREET: Place one (1) jointly owned pole numbered T.10S/E.10S on the west side of Cedar Street at a point approximately twenty-two (22) feet southerly from the centerline of B Street. The new location will be approximately forty-two (42) feet west of existing jointly owned pole numbered T.10/E.10.

Reason: Place pole to support existing pole line and recent nearby upgrades at Main Street; and to provide for the distribution of intelligence and telecommunications and the transmission of high and low voltage electric current.

Wherefore they pray that after due notice and hearing as provided by law, they be granted joint or identical locations for and permission to erect and maintain poles, wires and cables, together with anchors, guys and other such sustaining and protecting fixtures as they may find necessary, said poles to be erected substantially in accordance with the plan filed herewith marked-VZ N.E. Inc. Plan No. 4A0PE6A dated May 2, 2023.

Also for permission to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each of said petitioners may desire for distributing purposes.

Your petitioners agree that space shall be reserved and maintained for the limited purpose of attaching one-way low voltage fire and police signaling wires owned by the municipality or governmental entity for public safety purposes only.

VERIZON NEW ENGLAND INC.

By: Albert E. Bessette, Jr.

Albert E. Bessette - Right of Way Manager

NSTAR ELECTRIC COMPANY d/b/a Eversource Energy

By: Richard M. Schifone

Right of Way Representative

We hereby certify that on _____ 20__, at _____ o'clock _____ m., at the _____ a public hearing was held on the petition of the VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy for permission to erect the poles, wires, cables, fixtures and connections described in the order herewith recorded, and that we mailed at least seven days before said hearing a written notice of the time and place of said hearing to each of the owners of real estate (as determined by the last preceding assessment for taxation) along the ways or parts of ways upon which the Companies are permitted to erect poles, wires, cables, fixtures and connections under said order. And that thereupon said order was duly adopted.

Select Board of the Town of
HOPKINTON, Massachusetts

CERTIFICATE

I hereby certify that the foregoing is a true copy of a joint location order and certificate of hearing with notice adopted by the Select Board for the Town of HOPKINTON, Massachusetts, on the _____ day of _____ 20__, and recorded with the records of location orders of said Town, Book _____, Page _____. This certified copy is made under the provisions of Chapter 166 of General Laws and any additions thereto or amendments thereof.

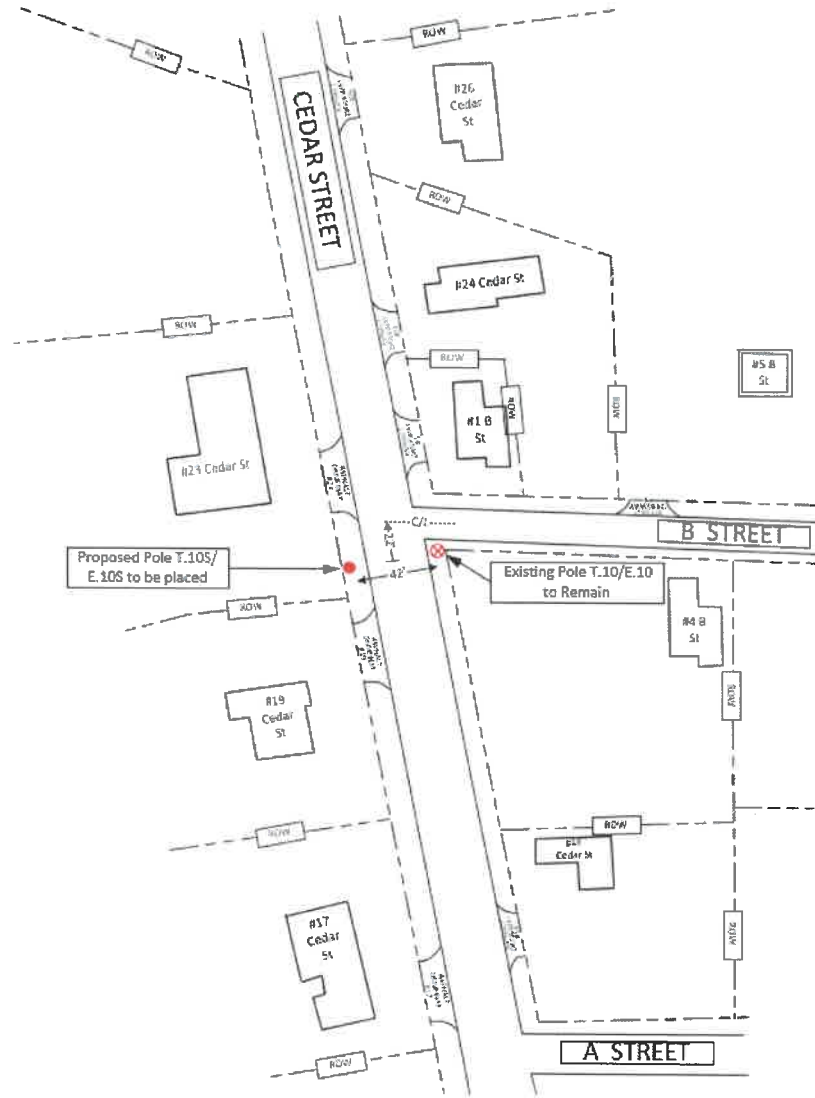
Attest:

Town Clerk

GENERAL NOTES

1. THE LOCATIONS OF EXISTING UNDERGROUND UTILITIES ARE SHOWN IN AN APPROXIMATE WAY ONLY AND HAVE NOT BEEN INDEPENDENTLY VERIFIED BY THE OWNER OR ITS REPRESENTATIVE. THE CONTRACTOR SHALL DETERMINE THE EXACT LOCATION OF ALL EXISTING UTILITIES BEFORE COMMENCING WORK, AND SHALL BE FULLY RESPONSIBLE FOR ANY AND ALL DAMAGES WHICH MIGHT BE OCCURRED BY THE CONTRACTOR'S FAILURE TO EXACTLY LOCATE AND PRESERVE ANY AND ALL UNDERGROUND UTILITIES.
 2. WHERE AN EXISTING UTILITY IS FOUND TO CONFLICT WITH THE PROPOSED WORK, THE LOCATION, ELEVATION AND SIZE OF THE UTILITY SHALL BE ACCURATELY DETERMINED WITHOUT DELAY BY THE CONTRACTOR, AND THE INFORMATION FURNISHED TO THE ENGINEER FOR RESOLUTION OF THE CONFLICT.
 3. THE CONTRACTOR SHOULD MAINTAIN A SEPARATION OF 18 INCHES MIN. WHEN CROSSING EXISTING WATER FACILITIES.
 4. THE CONTRACTOR SHALL MAKE ALL ARRANGEMENTS FOR THE ALTERATION AND ADJUSTMENT OF GAS, ELECTRIC, TELEPHONE AND ANY OTHER PRIVATE UTILITIES BY THE UTILITY COMPANY.
 5. THE CONTRACTOR SHALL NOT DISTURB PUBLIC TREES AND SHRUBS.
 6. AREAS OUTSIDE THE LIMITS OF PROPOSED WORK DISTURBED BY THE CONTRACTOR'S OPERATIONS SHALL BE RESTORED BY THE CONTRACTOR TO THEIR ORIGINAL CONDITION AT NO EXPENSE TO THE OWNERS.
 7. THE CONTRACTOR SHALL BE RESPONSIBLE FOR PLACING AND MAINTAINING TEMPORARY RESURFACING AND/OR PLATING FOR ALL EXCAVATIONS IN PAVED STREETS AND SIDEWALKS UNTIL PERMANENT RESURFACING IS COMPLETE.
 8. JOINTS BETWEEN NEW BITUMINOUS CONCRETE ROADWAY PAVEMENT AND SAW CUT EXISTING PAVEMENT SHALL BE SEALED WITH BITUMEN AND BACK SANDS.
 9. THE CONTRACTOR SHALL PROTECT AND SUPPORT ALL EXISTING UTILITY LINES THAT BECOME EXPOSED DUE TO EXCAVATION REQUIRED TO INSTALL THE PROPOSED CONDUIT.
 10. THE CONTRACTOR SHALL REPLACE ALL DISTURBED TRAFFIC SIGNAL LOOP DETECTORS TO GOOD WORKING CONDITION AS REQUIRED BY THE LATEST STANDARDS OF THE MUNICIPAL TRAFFIC DEPARTMENT.
 11. ALL EXISTING STATE, COUNTY, CITY, AND TOWN LOCATION LINES AND PRIVATE PROPERTY LINES HAVE BEEN ESTABLISHED FROM AVAILABLE INFORMATION AND THEIR EXACT LOCATION ARE NOT GUARANTEED.
 12. THE CONTRACTOR SHALL REPLACE ALL PAVEMENT MARKINGS IN THEIR ENTIRETY THAT HAVE BEEN DAMAGED BY TRENCH EXCAVATION OR OPERATIONS OF THE CONTRACTOR WITH SIMILAR COLOR AND SIZE THERMOPLASTIC MARKINGS.
- - ITEM SHOWN ON UTILITY RECORDS, BUT NOT FOUND IN FIELD.
 ● - ITEM FOUND IN FIELD, BUT NOT IN UTILITY RECORDS.

ALL FIELD DATA ACQUIRED USING TRADITIONAL FIELD SURVEY MEASURES



FOR PERMITTING ONLY



PROFESSIONAL ENGINEER

1" = 100 FEET (PRINTED 22x34)
1" = 200 FEET (PRINTED 11x17)

LEGEND

X	ELECTRIC POLE	■	CATCH BASIN
⊙	JOINT UTILITY POLE	□	CATV MANHOLE
⊗	LAMP POST	▣	ELECTRIC MANHOLE
⊕	TRAFFIC LIGHT	⊠	CORNER PEDESTAL
⊖	CATV MANHOLE	⊞	ELECTRIC MANHOLE
⊗	DRAIN MANHOLE	⊟	FIRE HYDRANT
⊘	ELECTRIC MANHOLE	⊠	GAS GATE
⊙	SEWER MANHOLE	⊡	GAS METER
⊚	TELEPHONE MANHOLE	⊢	IRRIGATION VALVE
⊛	WATER MANHOLE	⊣	MAIL BOX
⊜	POLE ANCHOR ELEV	⊤	PARKING METER(S)
⊝	BUS/SHRUB	⊥	SEWER GATE
⊞	RIGHT OF WAY	⊦	SIGN POLE
⊟	CULVERT	⊧	STEEL POST
⊠	FENCE	⊨	STONE BOUND
⊡	GUARD RAIL	⊩	STREET LIGHT
⊢	ELECTRIC MAST	⊪	TEL. MANHOLE
⊣	TRAFFIC MANHOLE	⊫	TRANSFORMER
⊤	PROPOSED MANHOLE	⊬	US CABLE MARKER
⊥	PROPOSED CONDUIT	⊭	WATER GATE
		⊮	WATER METER

NOTE:
EXISTING UTILITIES SHOWN ARE APPROXIMATE AND NOT WARRANTED TO BE CORRECT. THE CONTRACTOR SHALL VERIFY THE LOCATION OF ALL PUBLIC AND PRIVATE UTILITIES PRIOR TO BEGINNING ANY EXCAVATION.



PREPARED BY:
CYIENT
300 N. Hampshire Park
Waltham, MA 02451
www.cyient.com
Tel: 781-552-5500

PREPARED FOR:
verizon

REV #	DESCRIPTION	DATE
1	PROPOSED POLE PLACEMENT	05/02/23

TITLE:
ROW 4A0PE6A - CEDAR STREET
HOFFINGTON, MA
VERIZON - PETITION PLAN

SURVEYED BY: CYIENT, INC. PRINT NO: 1 OF 3
DRAWN BY: TDV SCALE: AS NOTED
DATE: 05/02/23 AS-BUILT:



Location for New Pole
T.10S/E.10S

ORDER FOR JOINT OR IDENTICAL POLE LOCATIONS

By the Select Board of HOPKINTON, Massachusetts.

Notice having been given and a public hearing held, as provided by law,
IT IS HEREBY ORDERED: that VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy, be and they are hereby granted joint or identical locations for and permission to erect and maintain poles and their respective wires and cables to be placed thereon, together with anchors, guys and other such sustaining and protecting fixtures as said Companies may deem necessary, in public way or ways hereinafter referred to, as requested in petition of said Companies dated the 2nd day of May, 2023.

CEDAR STREET: Place one (1) jointly owned pole numbered T.10S/E.10S on the west side of Cedar Street at a point approximately twenty-two (22) feet southerly from the centerline of B Street. The new location will be approximately forty-two (42) feet west of existing jointly owned pole numbered T.10/E.10.

Reason: Place pole to support existing pole line and recent nearby upgrades at Main Street; and to provide for the distribution of intelligence and telecommunications and the transmission of high and low voltage electric current.

All construction under this order shall be in accordance with the following conditions:

There may be attached to said poles by said Verizon New England Inc. not to exceed 20 wires and 5 cables and by said NSTAR Electric Company such wires, cables and fixtures as are necessary in its business and all of said wires and cables shall be placed at a height in compliance with the National Electrical Safety Code.

Poles shall be of sound timber, and reasonably straight and shall be set substantially at the points indicated upon the plan marked-VZ N. E. Inc. No. 4A0PE6A in a package dated May 2, 2023 - filed with said petition.

The following are the public ways or parts of ways along which the poles above referred to may be erected, and the number of poles, which may be erected thereon under this order:

Cedar Street
One jointly-owned pole to be placed

Also that permission be and hereby is granted to each of said Companies to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each may desire for distributing purposes.

I hereby certify that the foregoing order was adopted at a meeting of the Select Board of the Town of HOPKINTON, Massachusetts held on the _____ day of _____ 2023.

Clerk of the Selectboard

We hereby certify that on _____ 20__, at _____ o'clock _____ m., at the _____ a public hearing was held on the petition of the VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy for permission to erect the poles, wires, cables, fixtures and connections described in the order herewith recorded, and that we mailed at least seven days before said hearing a written notice of the time and place of said hearing to each of the owners of real estate (as determined by the last preceding assessment for taxation) along the ways or parts of ways upon which the Companies are permitted to erect poles, wires, cables, fixtures and connections under said order. And that thereupon said order was duly adopted.

Select Board of the Town of
HOPKINTON, Massachusetts

CERTIFICATE

I hereby certify that the foregoing is a true copy of a joint location order and certificate of hearing with notice adopted by the Select Board for the Town of HOPKINTON, Massachusetts, on the _____ day of _____ 20__, and recorded with the records of location orders of said Town, Book _____, Page _____. This certified copy is made under the provisions of Chapter 166 of General Laws and any additions thereto or amendments thereof.

Attest:

Town Clerk



TOWN OF HOPKINTON SELECT BOARD

Application Form Pole, Wire & Antenna Location Petitions

Applicant Name: _____

Applicant Address: _____

Applicant Email: _____ Applicant Phone: _____

Location(s) of Work:

Attach the following to the Application Form:

- Description of the kind of antennas, wires, poles, piers, abutments or conduits that may be used;
- The number of wires or cables that may be attached thereto.
- The height to which the antennas, wires or cables may run.
- Orders or other forms for the Board's signature if the application is approved.
- Plan showing the location of all planned antennas, wires, poles, piers, abutments or conduits, with wet stamps/signatures of professional designers on all drawings. Submitted plans shall conform to the following plan scale and format: 1 inch equals 40 feet.
- Photographs of the proposed location(s).
- Applications for Small Cell Wireless Installations Cover Sheet (Appendix A), for applications for Small Wireless Facilities only.

Application Forms and all attachments and supporting documents must be submitted electronically in PDF format and hard copy.

Application Fees:

- All Petitions except Applications for Small Wireless Installations: \$50 per application and \$250 per new pole or structure the petitioner proposes to add.
- Small Wireless Installations: \$500 for up to 5 locations plus \$100 for each additional location.

Consultant Review Fees: See the Board's adopted Regulations for Pole, Wire & Antenna Location Petitions and/or the Small Wireless Installations Cover Sheet (Appendix A).

Petition for New Pole Location, **Cedar St.** - Verizon & Eversource
Permitting Team Comments
Select Board Public Hearing June. 06, 2023

I have no comments

John Gelcich,
Principal Planner

The FD has no comment on this.

William Miller, Fire Chief

I have no comments

David T. Daltorio, Town Engineer



TOWN OF HOPKINTON

Office of the Select Board

Public Hearing Notice

Notice is hereby given that pursuant to M.G.L. c.166, §22 that the Select Board of the Town of Hopkinton, Massachusetts, will hold a public hearing at 7:30 PM on June 6, 2023 concerning the following petition from Verizon New England, INC and NSTAR Electric Company d/b/a Eversource Energy:

A petition to locate poles, wires, cables and fixtures, including the necessary anchors, guys and other such sustaining and protecting fixtures to be owned and used in common by the petitioners, along and across the following public way:

CEDAR STREET: Place one (1) jointly owned pole numbered T.10S/E.10S on the west side of Cedar Street at a point approximately twenty-two (22) feet southerly from the centerline of B Street. The new location will be approximately forty-two (42) feet west of the existing jointly owned pole numbered T.10/E.10.

The public hearing will be held at the Town Hall, Room 215/216, 18 Main Street, Hopkinton MA. The public may attend remotely via Zoom teleconference or in person at Town Hall. Instructions for joining the Zoom meeting will be included in the calendar web posting for this meeting and the meeting agenda, or may be obtained by calling the Town Manager's office at 508-497-9701. To view the petition, including plans, or to submit comments or questions for the Select Board, email Elaine Lazarus at elainel@hopkintonma.gov.

Amy Ritterbusch, Chair

Albert E. Bessette
Right of Way Manager



365 State Street
Springfield, MA 01105

Phone 413 787-0310
Cell 413 441-3612
Fax 413 734-9123
albert.e.Bessette.jr@verizon.com

May 10, 2023

Hopkinton Board of Selectmen
Town Hall
18 Main Street
Hopkinton, MA 01748

**RE: Petition for Verizon job #4A0PE6A
Pole T. 1/E.1 - Church Street**

Dear Honorable Board Members:

Pursuant to G.L.c.166, § 22 and the *Regulations for Pole and Wire Locations* of the Hopkinton Board of Selectmen, enclosed find the following items in support of the above-referenced project, which items will be submitted both in hard copy and electronically to the Town Manager and Director of the Department of Public Works:

1. Petition;
2. Order;
3. A written description (in Petition and Order) and high-resolution photograph of where poles will be placed (Section B (a));
4. Plan showing the pole locations in a scale of 1 inch equal 40 feet in PDF format (Section B (b));
5. The kind of poles to be used – Southern Pacific Pine Class 2 (Section B (c));
6. The number of wires or cables to be attached - listed on the Order (Section B (d));
7. The height to which the wires or cable may run – above eighteen (18) feet for lowest cable and all other cables at heights that meet the National Electric Safety Code (Section B (e));
8. Check No. 1359 payable to the Town of Hopkinton in the amount of \$300.00 (application fee of \$50.00 and fee per pole of \$250.00 each).

Should any questions or comments arise concerning this matter, please contact me at (413) 787-0310. Your Assistance is greatly appreciated.

Sincerely,

Albert E. Bessette Jr.

Albert E. Bessette, Jr.
Right of Way Manager

Enc

Cc: Town Manager
Director of the Department of Public Works

Petition for Pole Location, **Church St.** - Verizon & Eversource
Permitting Team Comments
Select Board Public Hearing June. 06, 2023

I have no comments

John Gelcich,
Principal Planner

The FD has no comment on this.

William Miller, Fire Chief

I have no comments

David T. Daltorio, Town Engineer



TOWN OF HOPKINTON SELECT BOARD

Application Form Pole, Wire & Antenna Location Petitions

Applicant Name: _____

Applicant Address: _____

Applicant Email: _____ Applicant Phone: _____

Location(s) of Work:

Attach the following to the Application Form:

- Description of the kind of antennas, wires, poles, piers, abutments or conduits that may be used;
- The number of wires or cables that may be attached thereto.
- The height to which the antennas, wires or cables may run.
- Orders or other forms for the Board's signature if the application is approved.
- Plan showing the location of all planned antennas, wires, poles, piers, abutments or conduits, with wet stamps/signatures of professional designers on all drawings. Submitted plans shall conform to the following plan scale and format: 1 inch equals 40 feet.
- Photographs of the proposed location(s).
- Applications for Small Cell Wireless Installations Cover Sheet (Appendix A), for applications for Small Wireless Facilities only.

Application Forms and all attachments and supporting documents must be submitted electronically in PDF format and hard copy.

Application Fees:

- All Petitions except Applications for Small Wireless Installations: \$50 per application and \$250 per new pole or structure the petitioner proposes to add.
- Small Wireless Installations: \$500 for up to 5 locations plus \$100 for each additional location.

Consultant Review Fees: See the Board's adopted Regulations for Pole, Wire & Antenna Location Petitions and/or the Small Wireless Installations Cover Sheet (Appendix A).

PETITION FOR JOINT OR IDENTICAL POLE LOCATIONS

May 3, 2023

To the Select Board

in **HOPKINTON**, Massachusetts

VERIZON NEW ENGLAND INC. and **NSTAR ELECTRIC COMPANY**, d/b/a Eversource Energy request permission to locate poles, wires, cables and fixtures including the necessary anchors, guys and other such sustaining and protecting fixtures to be owned and used in common by your petitioners, along and across the following public way or ways:

CHURCH STREET: Relocate one (1) jointly owned pole numbered T.1 / E.1 on the east side of Church Street at a point approximately eighty-three (83) feet southerly from the centerline of Main Street. The new location will be approximately thirty (30) feet south and five (5) feet east of the current pole location.

Reason: Place pole to support existing pole line and recent nearby upgrades at Main Street; and to provide for the distribution of intelligence and telecommunications and the transmission of high and low voltage electric current.

Wherefore they pray that after due notice and hearing as provided by law, they be granted joint or identical locations for and permission to erect and maintain poles, wires and cables, together with anchors, guys and other such sustaining and protecting fixtures as they may find necessary, said poles to be erected substantially in accordance with the plan filed herewith marked-VZ N.E. Inc. Plan No. 4A0PE6A dated May 3, 2023.

Also for permission to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each of said petitioners may desire for distributing purposes.

Your petitioners agree that space shall be reserved and maintained for the limited purpose of attaching one-way low voltage fire and police signaling wires owned by the municipality or governmental entity for public safety purposes only.

VERIZON NEW ENGLAND INC.

By: Albert E. Bessette, Jr.
Albert E. Bessette - Right of Way Manager

NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy

By: Richard M. Schifano
Right of Way Representative



Proposed new location of
existing pole T.1/E.1

30°

Google

ORDER FOR JOINT OR IDENTICAL POLE LOCATIONS

By the Select Board of HOPKINTON, Massachusetts.

Notice having been given and a public hearing held, as provided by law,
IT IS HEREBY ORDERED: that VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy, be, and they are hereby granted joint or identical locations for and permission to erect and maintain poles and their respective wires and cables to be placed thereon, together with anchors, guys and other such sustaining and protecting fixtures as said Companies may deem necessary, in public way or ways hereinafter referred to, as requested in petition of said Companies dated the 3rd day of May, 2023.

CHURCH STREET: Relocate one (1) jointly owned pole numbered T.1 / E.1 on the east side of Church Street at a point approximately eighty-three (83) feet southerly from the centerline of Main Street. The new location will be approximately thirty (30) feet south and five (5) feet east of the current pole location.

Reason: Place pole to support existing pole line and recent nearby upgrades at Main Street; and to provide for the distribution of intelligence and telecommunications and the transmission of high and low voltage electric current.

All construction under this order shall be in accordance with the following conditions:

There may be attached to said poles by said Verizon New England Inc. not to exceed 20 wires and 5 cables and by said NSTAR Electric Company such wires, cables and fixtures as are necessary in its business and all of said wires and cables shall be placed at a height in compliance with the National Electrical Safety Code.

Poles shall be of sound timber, and reasonably straight and shall be set substantially at the points indicated upon the plan marked-VZ N. E. Inc. No. 4A0PE6A in a package Dated May 3, 2023 - filed with said petition.

The following are the public ways or parts of ways along which the poles above referred to may be erected, and the number of poles, which may be erected thereon under this order:

Church Street
One jointly-owned pole to be relocated

Also that permission be and hereby is granted to each of said Companies to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each may desire for distributing purposes.

I hereby certify that the foregoing order was adopted at a meeting of the Select Board of the Town of HOPKINTON, Massachusetts held on the _____ day of _____ 2023.

Clerk of the Selectboard

We hereby certify that on _____ 20__, at ____ o'clock ____ m., at the _____ a public hearing was held on the petition of the VERIZON NEW ENGLAND INC. and EVERSOURCE/NSTAR for permission to erect the poles, wires, cables, fixtures and connections described in the order herewith recorded, and that we mailed at least seven days before said hearing a written notice of the time and place of said hearing to each of the owners of real estate (as determined by the last preceding assessment for taxation) along the ways or parts of ways upon which the Companies are permitted to erect poles, wires, cables, fixtures and connections under said order. And that thereupon said order was duly adopted.

Select Board of the Town of
HOPKINTON, Massachusetts

CERTIFICATE

I hereby certify that the foregoing is a true copy of a joint location order and certificate of hearing with notice adopted by the Select Board for the Town of HOPKINTON, Massachusetts, on the _____ day of _____ 20__, and recorded with the records of location orders of said Town, Book _____, Page _____. This certified copy is made under the provisions of Chapter 166 of General Laws and any additions thereto or amendments thereof.

Attest:

Town Clerk

ORDER FOR JOINT OR IDENTICAL POLE LOCATIONS

By the Select Board of HOPKINTON, Massachusetts.

Notice having been given and a public hearing held, as provided by law,
IT IS HEREBY ORDERED: that VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy, be, and they are hereby granted joint or identical locations for and permission to erect and maintain poles and their respective wires and cables to be placed thereon, together with anchors, guys and other such sustaining and protecting fixtures as said Companies may deem necessary, in public way or ways hereinafter referred to, as requested in petition of said Companies dated the 3rd day of May, 2023.

CHURCH STREET: Relocate one (1) jointly owned pole numbered T.1 / E.1 on the east side of Church Street at a point approximately eighty-three (83) feet southerly from the centerline of Main Street. The new location will be approximately thirty (30) feet south and five (5) feet east of the current pole location.

Reason: Place pole to support existing pole line and recent nearby upgrades at Main Street; and to provide for the distribution of intelligence and telecommunications and the transmission of high and low voltage electric current.

All construction under this order shall be in accordance with the following conditions:

There may be attached to said poles by said Verizon New England Inc. not to exceed 20 wires and 5 cables and by said NSTAR Electric Company such wires, cables and fixtures as are necessary in its business and all of said wires and cables shall be placed at a height in compliance with the National Electrical Safety Code.

Poles shall be of sound timber, and reasonably straight and shall be set substantially at the points indicated upon the plan marked-VZ N. E. Inc. No. 4A0PE6A in a package Dated May 3, 2023 - filed with said petition.

The following are the public ways or parts of ways along which the poles above referred to may be erected, and the number of poles, which may be erected thereon under this order:

Church Street
One jointly-owned pole to be relocated

Also that permission be and hereby is granted to each of said Companies to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each may desire for distributing purposes.

I hereby certify that the foregoing order was adopted at a meeting of the Select Board of the Town of HOPKINTON, Massachusetts held on the _____ day of _____ 2023.

Clerk of the Selectboard

We hereby certify that on _____ 20__, at ____ o'clock ____ m., at the _____ a public hearing was held on the petition of the VERIZON NEW ENGLAND INC. and EVERSOURCE/NSTAR for permission to erect the poles, wires, cables, fixtures and connections described in the order herewith recorded, and that we mailed at least seven days before said hearing a written notice of the time and place of said hearing to each of the owners of real estate (as determined by the last preceding assessment for taxation) along the ways or parts of ways upon which the Companies are permitted to erect poles, wires, cables, fixtures and connections under said order. And that thereupon said order was duly adopted.

Select Board of the Town of
HOPKINTON, Massachusetts

CERTIFICATE

I hereby certify that the foregoing is a true copy of a joint location order and certificate of hearing with notice adopted by the Select Board for the Town of **HOPKINTON**, Massachusetts, on the _____ day of _____ 20__, and recorded with the records of location orders of said Town, Book _____, Page _____. This certified copy is made under the provisions of Chapter 166 of General Laws and any additions thereto or amendments thereof.

Attest:

Town Clerk

ORDER FOR JOINT OR IDENTICAL POLE LOCATIONS

By the Select Board of HOPKINTON, Massachusetts.

Notice having been given and a public hearing held, as provided by law,
IT IS HEREBY ORDERED: that VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy, be, and they are hereby granted joint or identical locations for and permission to erect and maintain poles and their respective wires and cables to be placed thereon, together with anchors, guys and other such sustaining and protecting fixtures as said Companies may deem necessary, in public way or ways hereinafter referred to, as requested in petition of said Companies dated the 3rd day of May, 2023.

CHURCH STREET: Relocate one (1) jointly owned pole numbered T.1 / E.1 on the east side of Church Street at a point approximately eighty-three (83) feet southerly from the centerline of Main Street. The new location will be approximately thirty (30) feet south and five (5) feet east of the current pole location.

Reason: Place pole to support existing pole line and recent nearby upgrades at Main Street; and to provide for the distribution of intelligence and telecommunications and the transmission of high and low voltage electric current.

All construction under this order shall be in accordance with the following conditions:

There may be attached to said poles by said Verizon New England Inc. not to exceed 20 wires and 5 cables and by said NSTAR Electric Company such wires, cables and fixtures as are necessary in its business and all of said wires and cables shall be placed at a height in compliance with the National Electrical Safety Code.

Poles shall be of sound timber, and reasonably straight and shall be set substantially at the points indicated upon the plan marked-VZ N. E. Inc. No. 4A0PE6A in a package Dated May 3, 2023 - filed with said petition.

The following are the public ways or parts of ways along which the poles above referred to may be erected, and the number of poles, which may be erected thereon under this order:

Church Street
One jointly-owned pole to be relocated

Also that permission be and hereby is granted to each of said Companies to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each may desire for distributing purposes.

I hereby certify that the foregoing order was adopted at a meeting of the Select Board of the Town of HOPKINTON, Massachusetts held on the _____ day of _____ 2023.

Clerk of the Selectboard

We hereby certify that on _____ 20 __, at _____ o'clock _____ m., at the _____ a public hearing was held on the petition of the VERIZON NEW ENGLAND INC. and EVERSOURCE/NSTAR for permission to erect the poles, wires, cables, fixtures and connections described in the order herewith recorded, and that we mailed at least seven days before said hearing a written notice of the time and place of said hearing to each of the owners of real estate (as determined by the last preceding assessment for taxation) along the ways or parts of ways upon which the Companies are permitted to erect poles, wires, cables, fixtures and connections under said order. And that thereupon said order was duly adopted.

Select Board of the Town of
HOPKINTON, Massachusetts

CERTIFICATE

I hereby certify that the foregoing is a true copy of a joint location order and certificate of hearing with notice adopted by the Select Board for the Town of **HOPKINTON**, Massachusetts, on the _____ day of _____ 20 __, and recorded with the records of location orders of said Town, Book _____, Page _____. This certified copy is made under the provisions of Chapter 166 of General Laws and any additions thereto or amendments thereof.

Attest:

Town Clerk

Albert E. Bessette
Right of Way Manager



365 State Street
Springfield, MA 01105

Phone 413 787-0310
Cell 413 441-3612
Fax 413 734-9123
albert.e.Bessette.jr@verizon.com

May 9, 2023

Hopkinton Board of Selectmen
Town Hall
18 Main Street
Hopkinton, MA 01748

**RE: Petition for Verizon job #4A0PE6A
Poles T.95/E.95, T.96/E.96, T.97/E.97 & T.1/E.1 – East Main Street**

Dear Honorable Board Members:

Pursuant to G.L.c.166, § 22 and the *Regulations for Pole and Wire Locations* of the Hopkinton Board of Selectmen, enclosed find the following items in support of the above-referenced project, which items will be submitted both in hard copy and electronically to the Town Manager and Director of the Department of Public Works:

1. Petition;
2. Order;
3. A written description (in Petition and Order) and high resolution photograph of where poles will be placed (Section B (a));
4. Plan showing the pole locations in a scale of 1 inch equal 40 feet in PDF format (Section B (b));
5. The kind of poles to be used – Southern Pacific Pine Class 2 (Section B (c));
6. The number of wires or cables to be attached - listed on the Order (Section B (d));
7. The height to which the wires or cable may run – above eighteen (18) feet for lowest cable and all other cables at heights that meet the National Electric Safety Code (Section B (e));
8. Check No. 1358 payable to the Town of Hopkinton in the amount of \$1,050.00 (application fee of \$50.00 and fee per pole of \$250.00 each).

Should any questions or comments arise concerning this matter, please contact me at (413) 787-0310. Your Assistance is greatly appreciated.

Sincerely,

Albert E. Bessette, Jr.

Albert E. Bessette, Jr.
Right of Way Manager

Enc

Cc: Town Manager
Director of the Department of Public Works



TOWN OF HOPKINTON SELECT BOARD

Application Form Pole, Wire & Antenna Location Petitions

Applicant Name: _____

Applicant Address: _____

Applicant Email: _____ Applicant Phone: _____

Location(s) of Work:

Attach the following to the Application Form:

- Description of the kind of antennas, wires, poles, piers, abutments or conduits that may be used;
- The number of wires or cables that may be attached thereto.
- The height to which the antennas, wires or cables may run.
- Orders or other forms for the Board's signature if the application is approved.
- Plan showing the location of all planned antennas, wires, poles, piers, abutments or conduits, with wet stamps/signatures of professional designers on all drawings. Submitted plans shall conform to the following plan scale and format: 1 inch equals 40 feet.
- Photographs of the proposed location(s).
- Applications for Small Cell Wireless Installations Cover Sheet (Appendix A), for applications for Small Wireless Facilities only.

Application Forms and all attachments and supporting documents must be submitted electronically in PDF format and hard copy.

Application Fees:

- All Petitions except Applications for Small Wireless Installations: \$50 per application and \$250 per new pole or structure the petitioner proposes to add.
- Small Wireless Installations: \$500 for up to 5 locations plus \$100 for each additional location.

Consultant Review Fees: See the Board's adopted Regulations for Pole, Wire & Antenna Location Petitions and/or the Small Wireless Installations Cover Sheet (Appendix A).

Petition for Pole Location, **East Main St.** - Verizon & Eversource
Permitting Team Comments
Select Board Public Hearing June. 06, 2023

I have no comments

John Gelcich,
Principal Planner

The FD has no comment on this.

William Miller, Fire Chief

I have no comments

David T. Daltorio, Town Engineer

PETITION FOR JOINT OR IDENTICAL POLE LOCATIONS

May 3, 2023

To the Select Board

in **HOPKINTON**, Massachusetts

VERIZON NEW ENGLAND INC. and **NSTAR ELECTRIC COMPANY**, d/b/a Eversource Energy request permission to locate poles, wires, cables and fixtures including the necessary anchors, guys and other such sustaining and protecting fixtures to be owned and used in common by your petitioners, along and across the following public way or ways:

EAST MAIN STREET: Relocate one (1) jointly owned pole numbered T.95 / E.95 to a point on the southeast side of East Main Street approximately two hundred fifty-five (255) feet northeasterly from the centerline of Ash Street.

EAST MAIN STREET: Relocate one (1) jointly owned pole numbered T.96 / E.96 to a point on the southeast side of East Main Street approximately one hundred forty-five (145) feet northeasterly from the centerline of Ash Street.

EAST MAIN STREET: Place one (1) jointly owned pole numbered T.97 / E.97 on the southeast side of East Main Street at a point approximately eighty-five (85) feet northeasterly from the centerline of Ash Street.

EAST MAIN STREET: Relocate one (1) jointly owned pole numbered T.1 / E.1 to a point on the southeast side of East Main Street at a point approximately sixty-five (65) feet northeasterly from the centerline of Ash Street.

Reason: Relocate/place poles to support the existing pole line and in accordance with recent roadway upgrades along East Main Street; and to provide for the distribution of intelligence and telecommunications and the transmission of high and low voltage electric current.

Wherefore they pray that after due notice and hearing as provided by law, they be granted joint or identical locations for and permission to erect and maintain poles, wires and cables, together with anchors, guys and other such sustaining and protecting fixtures as they may find necessary, said poles to be erected substantially in accordance with the plan filed herewith marked-VZ N.E. Inc. Plan No. 4A0DP6T dated May 3, 2023.

Also for permission to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each of said petitioners may desire for distributing purposes.

Your petitioners agree that space shall be reserved and maintained for the limited purpose of attaching one-way low voltage fire and police signaling wires owned by the municipality or governmental entity for public safety purposes only.

VERIZON NEW ENGLAND INC.

By: Albert E. Bessette, Jr.
Albert E. Bessette - Right of Way Manager

NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy

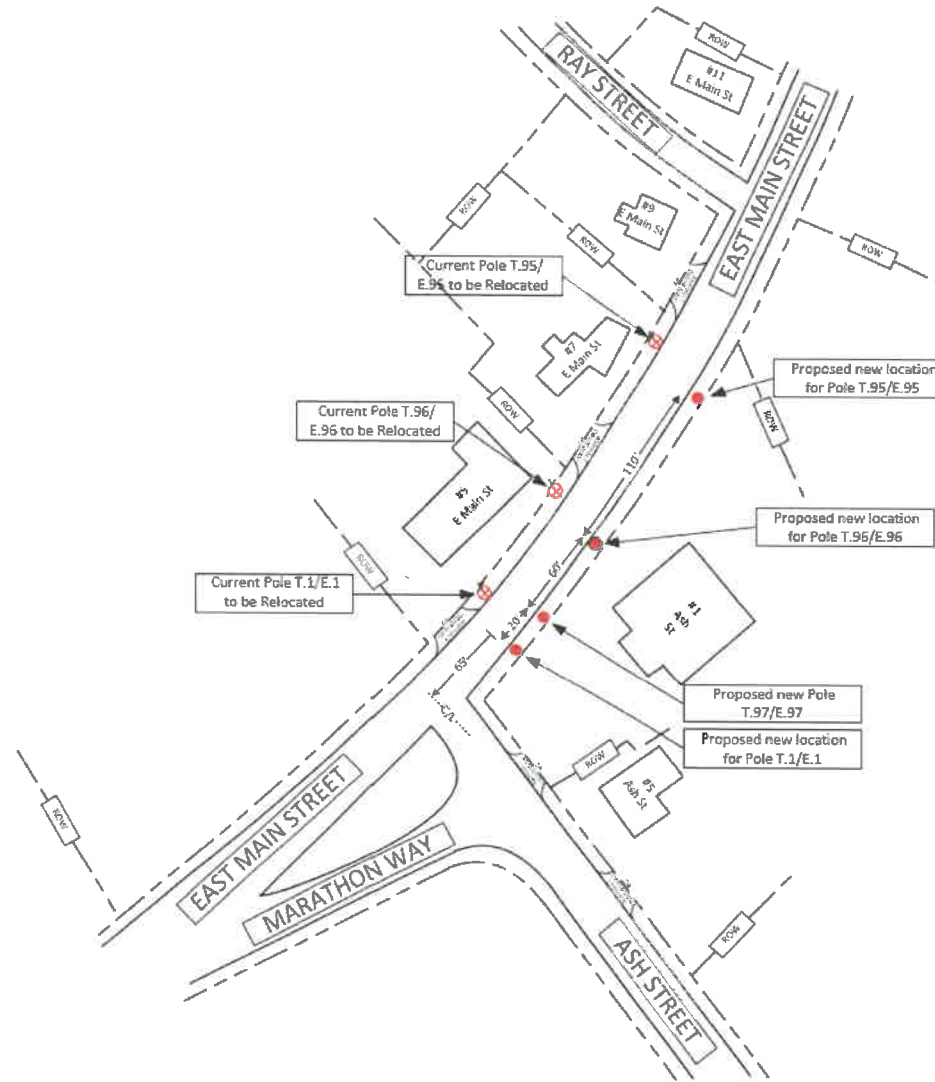
By: Richard M. Schifone
Right of Way Representative

GENERAL NOTES

- THE LOCATIONS OF EXISTING UNDERGROUND UTILITIES ARE SHOWN IN AN APPROXIMATE WAY ONLY AND HAVE NOT BEEN INDEPENDENTLY VERIFIED BY THE OWNER OR ITS REPRESENTATIVE. THE CONTRACTOR SHALL DETERMINE THE EXACT LOCATION OF ALL EXISTING UTILITIES BEFORE COMMENCING WORK, AND SHALL BE FULLY RESPONSIBLE FOR ANY AND ALL DAMAGES WHICH MIGHT BE OCCASIONED BY THE CONTRACTOR'S FAILURE TO EXACTLY LOCATE AND PRESERVE ANY AND ALL UNDERGROUND UTILITIES.
- WHERE AN EXISTING UTILITY IS FOUND TO CONFLICT WITH THE PROPOSED WORK, THE LOCATION, ELEVATION AND SIZE OF THE UTILITY SHALL BE ACCURATELY DETERMINED WITHOUT DELAY BY THE CONTRACTOR, AND THE INFORMATION FURNISHED TO THE ENGINEER FOR RESOLUTION OF THE CONFLICT.
- THE CONTRACTOR SHOULD MAINTAIN A SEPARATION OF 18 INCHES MIN. WHEN CROSSING EXISTING WATER FACILITIES.
- THE CONTRACTOR SHALL MAKE ALL ARRANGEMENTS FOR THE ALTERATION AND ADJUSTMENT OF GAS, ELECTRIC, TELEPHONE AND ANY OTHER PRIVATE UTILITIES BY THE UTILITY COMPANY.
- THE CONTRACTOR SHALL NOT DISTURB PUBLIC TREES AND SHRUBS.
- AREAS OUTSIDE THE LIMITS OF PROPOSED WORK DISTURBED BY THE CONTRACTOR'S OPERATIONS SHALL BE RESTORED BY THE CONTRACTOR TO THEIR ORIGINAL CONDITION AT NO EXPENSE TO THE OWNER.
- THE CONTRACTOR SHALL BE RESPONSIBLE FOR PLACING AND MAINTAINING TEMPORARY RESURFACING AND/OR PLATING FOR ALL EXCAVATIONS IN PAVED STREETS AND SIDEWALKS UNTIL PERMANENT RESURFACING IS COMPLETE.
- JOINTS BETWEEN NEW BITUMINOUS CONCRETE ROADWAY PAVEMENT AND SAW CUT EXISTING PAVEMENT SHALL BE SEALED WITH BITUMEN AND BACK SANDED.
- THE CONTRACTOR SHALL PROTECT AND SUPPORT ALL EXISTING UTILITY LINES THAT BECOME EXPOSED DUE TO EXCAVATION REQUIRED TO INSTALL THE PROPOSED CONDUIT.
- THE CONTRACTOR SHALL REPLACE ALL DISTURBED TRAFFIC SIGNAL LOOP DETECTORS TO GOOD WORKING CONDITION AS REQUIRED BY THE LATEST STANDARDS OF THE MUNICIPAL TRAFFIC DEPARTMENT.
- ALL EXISTING STATE, COUNTY, CITY, AND TOWN LOCATION LINES AND PRIVATE PROPERTY LINES HAVE BEEN ESTABLISHED FROM AVAILABLE INFORMATION AND THEIR EXACT LOCATION ARE NOT GUARANTEED.
- THE CONTRACTOR SHALL REPLACE ALL PAVEMENT MARKINGS IN THEIR ENTIRETY THAT HAVE BEEN DAMAGED BY TRENCH EXCAVATION OR OPERATIONS OF THE CONTRACTOR WITH SIMILAR COLOR AND SIZE THERMOPLASTIC MARKINGS.

* - ITEM SHOWN ON UTILITY RECORDS, BUT NOT FOUND IN FIELD.
 ~ - ITEM FOUND IN FIELD, BUT NOT IN UTILITY RECORDS.

ALL FIELD DATA ACQUIRED USING TRADITIONAL FIELD SURVEY MEASURES



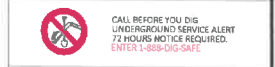
PROFESSIONAL ENGINEER

1" = 100 FEET (PRINTED 22x34)
 1" = 200 FEET (PRINTED 11x17)

LEGEND

X	ELECTRIC POLE	□	CATCH BASIN
⊗	JOINT UTILITY POLE	□	CATV HANDHOLE
⊠	LAMP POST	□	COMM. PEDESTAL
⊕	TRAFFIC LIGHT	□	ELECTRIC HANDHOLE
⊙	CATV HANDHOLE	⊕	FIRE HYDRANT
⊗	DRAIN HANDHOLE	⊕	GAS GATE
⊙	ELECTRIC MAINHOLE	⊕	GAS METER
⊙	SEWER MAINHOLE	⊕	IRRIGATION VALVE
⊙	TELEPHONE MAINHOLE	⊕	MAIL BOX
⊙	WATER MAINHOLE	⊕	PARKING METER(S)
⊕	POLE ANCHOR BLY	⊕	SEWER GATE
⊕	BUSH/SHRUB	⊕	SEWER POLE
⊕	EDGE OF WAY	⊕	STEEL POST
⊕	COLLECT	⊕	STEEL BOUND
⊕	FENCE	⊕	STREET LIGHT
⊕	GUARD RAIL	⊕	TEL HANDHOLE
⊕	ELECTRIC VALVE	⊕	TRANSFORMER
⊕	TRAFFIC HANDHOLE	⊕	USE CABLE MARKER
⊕	PROPOSED HANDHOLE	⊕	WATER GATE
⊕	PROPOSED CONDUIT	⊕	WATER METER

NOTE:
 EXISTING UTILITIES SHOWN ARE APPROXIMATE AND NOT WARRANTED TO BE CORRECT. THE CONTRACTOR SHALL VERIFY THE LOCATION OF ALL PUBLIC AND PRIVATE UTILITIES PRIOR TO BEGINNING ANY EXCAVATION.



PREPARED BY:
CYIENT

6070 W. 4 LINDENWAY, PAUL
 HUNTSVILLE, AL 35895
 1-888-353-6888

PREPARED FOR:
verizon

REV #	DESCRIPTION	DATE
1	PROPOSED POLE PLACEMENT & RELOCATION	05/03/23

TITLE:
ROW 4A0PEGA - EAST MAIN STREET
 HOPEWORTH, MA
 VERIZON - PETITION PLAN

SUBMITTED BY: CYIENT, INC. PRINT NO: 1 OF 1
 DRAWN BY: OV SCALE: AS NOTED
 DATE: 05/03/23 AS-BUILT:

FOR PERMITTING ONLY



Location of proposed pole
T.96/E.96

Location of proposed pole
T.97/E.97

Location of proposed pole
T.1/E.1

Google



Proposed location of Pole
T.95/E.95

Google

ORDER FOR JOINT OR IDENTICAL POLE LOCATIONS

By the Select Board of HOPKINTON, Massachusetts.

Notice having been given and a public hearing held, as provided by law,
IT IS HEREBY ORDERED:

that VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy be, and they are hereby granted joint or identical locations for and permission to erect and maintain poles and their respective wires and cables to be placed thereon, together with anchors, guys and other such sustaining and protecting fixtures as said Companies may deem necessary, in public way or ways hereinafter referred to, as requested in petition of said Companies dated the 3rd day of May, 2023.

EAST MAIN STREET: Relocate one (1) jointly owned pole numbered T.95 / E.95 to a point on the southeast side of East Main Street approximately two hundred fifty-five (255) feet northeasterly from the centerline of Ash Street.

EAST MAIN STREET: Relocate one (1) jointly owned pole numbered T.96 / E.96 to a point on the southeast side of East Main Street approximately one hundred forty-five (145) feet northeasterly from the centerline of Ash Street.

EAST MAIN STREET: Place one (1) jointly owned pole numbered T.97 / E.97 on the southeast side of East Main Street at a point approximately eighty-five (85) feet northeasterly from the centerline of Ash Street.

EAST MAIN STREET: Relocate one (1) jointly owned pole numbered T.1 / E.1 to a point on the southeast side of East Main Street at a point approximately sixty-five (65) feet northeasterly from the centerline of Ash Street.

Reason: Relocate/place poles to support the existing pole line and in accordance with recent roadway upgrades along East Main Street; and to provide for the distribution of intelligence and telecommunications and the transmission of high and low voltage electric current.

All construction under this order shall be in accordance with the following conditions:

There may be attached to said poles by said Verizon New England Inc. not to exceed 20 wires and 5 cables and by said NSTAR Electric Company such wires, cables and fixtures as are necessary in its business and all of said wires and cables shall be placed at a height in compliance with the National Electrical Safety Code. Poles shall be of sound timber, and reasonably straight and shall be set substantially at the points indicated upon the plan marked-VZ N. E. Inc. No. 4A0DP6T in a package dated May 3, 2023 - filed with said petition.

The following are the public ways or parts of ways along which the poles above referred to may be erected, and the number of poles, which may be erected thereon under this order:

East Main Street
Three jointly-owned poles to be relocated
One jointly-owned pole to be placed

Also that permission be and hereby is granted to each of said Companies to lay and maintain underground laterals, cables and wires in the above or intersecting public ways for the purpose of making connections with such poles and buildings as each may desire for distributing purposes.

I hereby certify that the foregoing order was adopted at a meeting of the Select Board of the Town of HOPKINTON, Massachusetts held on the _____ day of _____ 2023.

Clerk of the Selectboard

We hereby certify that on _____ 20__, at _____ o'clock _____ m., at the _____ a public hearing was held on the petition of the VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy for permission to erect the poles, wires, cables, fixtures and connections described in the order herewith recorded, and that we mailed at least seven days before said hearing a written notice of the time and place of said hearing to each of the owners of real estate (as determined by the last preceding assessment for taxation) along the ways or parts of ways upon which the Companies are permitted to erect poles, wires, cables, fixtures and connections under said order. And that thereupon said order was duly adopted.

Select Board of the Town of
HOPKINTON, Massachusetts

CERTIFICATE

I hereby certify that the foregoing is a true copy of a joint location order and certificate of hearing with notice adopted by the Select Board for the Town of **HOPKINTON**, Massachusetts, on the _____ day of _____ 20__, and recorded with the records of location orders of said Town, Book _____, Page _____. This certified copy is made under the provisions of Chapter 166 of General Laws and any additions thereto or amendments thereof.

Attest:

Town Clerk

ORDER FOR JOINT OR IDENTICAL POLE LOCATIONS

By the Select Board of HOPKINTON, Massachusetts.

Notice having been given and a public hearing held, as provided by law,
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I hereby certify that the foregoing order was adopted at a meeting of the Select Board of the Town of HOPKINTON, Massachusetts held on the _____ day of _____ 2023.

Clerk of the Selectboard

We hereby certify that on _____ 20__, at ____ o'clock ____ m., at the _____ a public hearing was held on the petition of the VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy for permission to erect the poles, wires, cables, fixtures and connections described in the order herewith recorded, and that we mailed at least seven days before said hearing a written notice of the time and place of said hearing to each of the owners of real estate (as determined by the last preceding assessment for taxation) along the ways or parts of ways upon which the Companies are permitted to erect poles, wires, cables, fixtures and connections under said order. And that thereupon said order was duly adopted.

Select Board of the Town of
HOPKINTON, Massachusetts

CERTIFICATE

I hereby certify that the foregoing is a true copy of a joint location order and certificate of hearing with notice adopted by the Select Board for the Town of **HOPKINTON**, Massachusetts, on the _____ day of _____ 20__, and recorded with the records of location orders of said Town, Book _____, Page _____. This certified copy is made under the provisions of Chapter 166 of General Laws and any additions thereto or amendments thereof.

Attest:

Town Clerk

ORDER FOR JOINT OR IDENTICAL POLE LOCATIONS

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IT IS HEREBY ORDERED:

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I hereby certify that the foregoing order was adopted at a meeting of the Select Board of the Town of HOPKINTON, Massachusetts held on the _____ day of _____ 2023.

Clerk of the Selectboard

We hereby certify that on _____ 20__, at ____ o'clock ____m., at the _____ a public hearing was held on the petition of the VERIZON NEW ENGLAND INC. and NSTAR ELECTRIC COMPANY, d/b/a Eversource Energy for permission to erect the poles, wires, cables, fixtures and connections described in the order herewith recorded, and that we mailed at least seven days before said hearing a written notice of the time and place of said hearing to each of the owners of real estate (as determined by the last preceding assessment for taxation) along the ways or parts of ways upon which the Companies are permitted to erect poles, wires, cables, fixtures and connections under said order. And that thereupon said order was duly adopted.

Select Board of the Town of
HOPKINTON, Massachusetts

CERTIFICATE

I hereby certify that the foregoing is a true copy of a joint location order and certificate of hearing with notice adopted by the Select Board for the Town of **HOPKINTON**, Massachusetts, on the _____ day of _____ 20__, and recorded with the records of location orders of said Town, Book _____, Page _____. This certified copy is made under the provisions of Chapter 166 of General Laws and any additions thereto or amendments thereof.

Attest:

Town Clerk



TOWN OF HOPKINTON

Office of the Select Board

Public Hearing Notice

Notice is hereby given that pursuant to M.G.L. c.166, §22 that the Select Board of the Town of Hopkinton, Massachusetts, will hold a public hearing at 7:30 PM on June 6, 2023 concerning the following petition from Verizon New England, INC and NSTAR Electric Company d/b/a Eversource Energy:

A petition to locate poles, wires, cables and fixtures, including the necessary anchors, guys and other such sustaining and protecting fixtures to be owned and used in common by the petitioners, along and across the following public way:

EAST MAIN STREET: Relocate one (1) jointly owned pole numbered T.95 / E.95 to a point on the southeast side of East Main Street approximately two hundred fifty-five (255) feet northeasterly from the centerline of Ash Street.

EAST MAIN STREET: Relocate one (1) jointly owned pole numbered T.96 / E.96 to a point on the southeast side of East Main Street approximately one hundred forty-five (145) feet northeasterly from the centerline of Ash Street.

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EAST MAIN STREET: Relocate one (1) jointly owned pole numbered T.1/E.1 to a point on the southeast side of East Main Street at a point approximately sixty-five (65) feet northeasterly from the centerline of Ash Street.

The public hearing will be held at the Town Hall, Room 215/216, 18 Main Street, Hopkinton MA. The public may attend remotely via Zoom teleconference or in person at Town Hall. Instructions for joining the Zoom meeting will be included in the calendar web posting for this meeting and the meeting agenda, or may be obtained by calling the Town Manager's office at 508-497-9701. To view the petition, including plans, or to submit comments or questions for the Select Board, email Elaine Lazarus at elainel@hopkintonma.gov.

Amy Ritterbusch, Chair



**TOWN OF HOPKINTON
OFFICE OF TREASURER/COLLECTOR
18 MAIN STREET
Hopkinton, Massachusetts 01748
Telephone 508-497-9715
Fax 508-497-9786**

June 6, 2023

TO: Select Board

FROM: Diane Hendrickson, Treasurer/Collector *DH*

VIA: Norman Khumalo, Town Manager *NK*

SUBJECT: Renewal of Municipal Bond Anticipation Note

The Town has a Bond Anticipation Note (BAN) in the amount of \$4,881,543. coming due on June 15, 2023. I have met with our Senior Fiscal Advisor from Unibank to discuss whether to renew this borrowing as a BAN or to move to bonding.

In addition, two of the projects have reduced funding. The Hayden Rowe Water Main is finished and does not need the remaining \$61,357. The Air Handling Unit at the School has stopped working due to the high costs associated with the project, reducing this borrowing by \$207,049. The BAN renewal is now **\$4,613,137**.

My recommendation is for the Town to renew this debt as a BAN. The Town will be required to pay the interest payment only which will be \$198,540.50. There will not be any principal payment due this year. I appreciate the help of Margaret MacLean from Unibank, previous CFO, Tim O'Leary, and Elizabeth Rourke, Sr. Accounting Manager in developing these recommendations.

PROJECT	ORIGINAL AMOUNT JUNE 2022	RENEWAL AMOUNT JUNE 2023
2018 ATM Art. 16 - Hayden Rowe Water Main	\$ 900,000	\$ 838,643
2018 ATM Art. 20 - Main Street Corridor	\$2,150,000	\$2,150,000
2019 ATM Art 22. - Comprehensive Wastewater Management Plan	\$ 85,000	\$ 85,000
2022 ATM Art. 27 - Air Handling Unit Replacement (School)	\$ 475,000	\$ 267,951
2022 ATM Art 28 - Fruit Street Field Replacement	\$1,271,543	\$1,271,543
TOTAL	\$4,881,543	\$4,613,137

On May 31, 2023, Fidelity Capital Markets was awarded the BAN with a bid of a coupon rate of 4.50% with a \$28,324.66 premium for a net interest cost of 3.884%. Premiums received on BAN issuances are required by law to be utilized to pay down a portion of the interest expense on the borrowing.

Some reasons for renewing this BAN are as follows:

- BANs can easily and inexpensively be renewed up to 3 years without initiating principal payments and for up to 10 years if principal payments are made. This would be the first renewal of this debt.
- If interest rates fall over the next year, the BAN can be converted to a bond at a long term savings due to lower long term interest rates. If rates remain high, the option to renew the BAN again remains available to the Town.

- There are fixed costs associated with a bond issue which are higher than those for a BAN. Combining these amounts to be borrowed from this BAN with any new amounts authorized in FY24, would deliver a savings by paying those fixed bond costs a single time.



FY 2024 WATER AND SEWER RATE STUDY

In June of 2022, the Select Board voted to approve a FY 2023 water rate increase of 9.5% and a sewer rate decrease of 5.0%. The rate changes were approved as part of recommended five-year rate plans that showed 9.5% water rate increases and no sewer rate changes in the subsequent years in the plan. However, after further review of the five-year rate plan the water rate for FY 2024 needs to be adjusted up to 15% from the estimated 9.5%. We are recommending a water rate increase of 15 % for FY 2024.

The uncertainty of potential costs related to the MWRA connection, as well as uncertainty of whether available grant funds would be used to pay for some of the MWRA connection costs, was part of the discussion when setting water rates for FY 2023. The recommended rate plan was designed such that users cover \$10 million of the estimated \$25 million MWRA connection costs, with available grant funds presumed to cover the remainder.

The Town’s Chief Financial Officer at the time indicated that the recommended water rate plan was “subject to significant expected revision to increase rates further as the economics of the MWRA connection project firm up” and that “it is very likely that rate recommendations will be adjusted upward above 9.5% in FY 2024, FY 2025, or beyond to preserve a buffer in retained earnings at 15% of the Water Enterprise operating budget.”

Water Rate-Setting for FY 2024

A year later, estimated costs and timing related to the MWRA connection are much clearer. The Town plans to use approximately \$4 million in available grant funding for some of the MWRA connection construction costs, which means users would pay \$21 million of the estimated project costs. There have also been updates to other projections in the study that have increased the need for additional revenue.

In short, there is a strong, immediate need for additional water revenue to close revenue deficits in the short term and to fund expenses related to the MWRA connection in the long term.

Each of the rate plans presented are designed to raise needed revenues to cover estimated MWRA costs, both on the capital and operating side, and to ensure that the Water Fund maintains healthy retained earnings longer-term. The rate plan is designed to fund the latest capital plan, which only includes the MWRA connection and the replacement of equipment.

Option 1

	Current	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028
Rate Change		25.0%	25.0%	25.0%	10.0%	5.0%

Average Residential User's Annual Bill (8,494 Cu Ft)	\$314.76	\$393.45	\$491.81	\$614.76	\$676.24	\$710.05
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Option 2

	Current	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028
Rate Change		20.0%	27.5%	27.5%	10.0%	5.0%
Average Residential User's Annual Bill (8,494 Cu Ft)	\$314.76	\$377.71	\$481.58	\$614.01	\$675.42	\$709.19

Option 3

	Current	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028
Rate Change		17.5%	30.0%	30.0%	7.5%	5.0%
Average Residential User's Annual Bill (8,494 Cu Ft)	\$314.76	\$369.84	\$480.79	\$625.03	\$671.91	\$705.50

The level recommended rate plan presented for rate-setting for FY 2023 has grown from a 9.5% rate increase in FY 2024 to a 25.0% rate increase. Baseline projections show a need to raise an additional \$3.1 million in revenue to build projected retained earnings at the end of FY 2027 to the level it was in the FY 2023 study.

The following is some of what makes up that \$3.1 million:

- PFAS credits were factored into the FY23 study, but not for multiple years. With multiple years now factored in, the credits total an additional \$288,000 in revenue offsets over the period analyzed.
- Baseline user charges revenue projections are down \$227,000 total over the period analyzed. This adjustment is based on FY 2023 revenues lower than anticipated, mainly due to the water ban and impact of the FY 2023 rate increase on usage. Additionally, the Town is concerned with being able to keep up with demand during higher use periods and believes the ban will be enforced earlier in future years, ultimately leading to less revenue from the highest usage tier.
- Other revenue projections decreased by \$44,000 total over the period analyzed, with more conservatism in projections for backflow and sprinkler billings, and for liens and penalties and interest.
- The FY 2023 study assumed that users would pay \$10 million of the \$25 million MWRA connection construction costs, due to the potential of grant funding's availability. The FY 2024 study assumes that users would pay \$21 million of the MWRA connection construction costs. The additional projected debt service totals \$1.4 million over the period analyzed.
- The FY 2023 study did not have any expenses for the operation of the PFAS plant, which is included in the FY 2024 study at \$152,000 in one year and \$636,000 over the period analyzed.
- Contractual obligations for salaries have increased projections by \$85,000 total over the period analyzed.
- Other expenses in the operating budget are up \$279,000 total over the period analyzed, mainly due to large increases in electricity (64%) and supplies (54%).
- The \$285,000 dump truck recently approved at Town Meeting is to be funded out of retained earnings. Borrowing was the assumed funding source in the FY 2023 study.

- Debt service not related to the MWRA connection, mainly due to the deferral of some borrowings, has decreased by \$208,000 total over the period analyzed.

See the attached Water Rate Recommendation Options for projections that support these rate options.

Sewer Rate-Setting for FY 2024

The Sewer Fund continues to be in a strong financial state, with retained earnings last certified at over \$1.6 million, which is above 75% of fund expenditures. Strong user charges, strong connection fees, betterments paid in advance, and decreases in debt service recently have greatly contributed to building up the fund’s retained earnings.

Projections show that the fund can maintain healthy retained earnings without a rate increase for the next 10 years. The Town can also consider a rate decrease for FY 2024, and possibly for subsequent years as well, like it did for FY 2023. For either case, retained earnings would be used to balance the budget until the retained earnings balance decreases to the targeted 15% of fund expenditures.

Both rate plans are designed to ensure that the Sewer Fund maintains healthy retained earnings despite the assumption that retained earnings would be used to balance budgets. The rate plan is designed to fund the latest capital plan, which only includes the replacement of equipment.

Option 1

	Current	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028
Rate Change		-5.0%	-5.0%	0.0%	0.0%	0.0%
Average Residential User’s Annual Bill (7,044 Cu Ft)	\$892.43	\$847.81	\$805.42	\$805.42	\$805.42	\$805.42

Option 2

	Current	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028
Rate Change		-10.0%	0.0%	0.0%	0.0%	0.0%
Average Residential User’s Annual Bill (7,044 Cu Ft)	\$892.43	\$803.19	\$803.19	\$803.19	\$803.19	\$803.19



Upper Charles Trail Committee Public Survey

From the Select Board in an effort to work with stakeholders to move forward with a solution that the majority of the town will support.

[Sign in to Google](#) to save your progress. [Learn more](#)

* Indicates required question

Email *

Your email

Background

The Upper Charles Trail Committee (the "UCTC") was formed by the Select Board, at the time known as the Board of Selectmen, to recommend, for the Select Board's consideration, a development plan for the Upper Charles Trail in Hopkinton, from the Milford Town line to the Ashland Town line, and then developing the Upper Charles Trail. [A copy of the existing charge may be found here.](#) To date, the UCTC has not presented a development plan but has approached the proposed development plan in separate segments. Although several routes have been considered, no final route options have been presented to the Select Board.

Any proposed route for the Upper Charles Trail will require compliance with the Massachusetts Environmental Policy Act, also known as MEPA. Such compliance with MEPA requires the submission of an Environmental Notification Form (ENF) that examines alternative routes be presented and examined in developing a final plan, in order to minimize the environmental impacts of the entire Trail.

At the Town of Hopkinton's 2023 Annual Town Meeting, Article 47 was presented through a citizen's petition. Article 47 asked if the Town of Hopkinton would abolish the existing Committee, [the full text of Article 47 can be found here.](#) Article 47 passed by a large margin (158 Yes / 61 No).

Because the UCTC was created by the Select Board, only the Select Board may dissolve the Committee or take any action relative to the Committee. However, the Select Board is cognizant of the Town Meeting vote and the message it sent. This survey is being presented to give the Select Board public input for the desires of the town residents relative to the Committee. Because no route options have been presented, nor has the physical attributes of a proposed trail been presented, route options and the physical attributes of the trail are not part of this survey. Route options and physical attributes will require public outreach and public input as part of the development plan, however it is premature at present. Such public input and public outreach are required as per the UCTC charge.



UCTC Membership Questions**Current UCTC Membership as described in the UCTC Charge Document**

Full Members (9):

- A designee recommended by the Conservation Commission.
- A designee recommended by the Parks and Recreation Commission.
- A designee of the Board of Selectmen.
- Six (6) members at-large.

Alternate Members (2):

- Two (2) members at-large

Should the NUMBER of UCTC members change? *

The UCTC currently has 9 full and 2 alternate members

- More UCTC members
- Fewer UCTC members
- The same number of UCTC members
- Undecided or No Preference

Changes in the committee LIAISONS? *

The UCTC currently has 3 liaisons (Conservation Commission, Parks & Recreation, Select Board). Which committees should have formal liaisons to the UCTC? Check all that apply, and feel free to suggest others not listed.

- Conservation Commission
- Parks & Recreation
- Select Board
- Planning Board
- Commission on Disability
- Council on Aging
- School Committee
- Trail Coordination And Management Committee
- Youth Commission
- Other: _____



Changes in the committee member QUALIFICATIONS/SKILLS? *

The UCTC charge states that member "Preference shall be given to ensure that at least one member of the UCTC has civil engineering expertise, one member has construction experience or experience in the development of a multi-use trail, and one member with public relations experience." Check all that apply, and feel free to suggest others not listed.

- Civil Engineering Expertise
- Construction Expertise or Experience in the development of a multi-use trail
- Public Relations Experience
- Forum Facilitator Expertise
- Social Media Expertise
- Community Outreach Expertise
- Trail Building Experience
- Other: _____

Should each UCTC member with a specific role, provide a report out on their activities at least once per quarter? *

- Yes
- No
- Undecided or No Preference

Changes in the VOTING status Committee liaisons *

The UCTC currently has 9 voting members (3 liaisons, 6 members) and 2 non-voting alternate members

- Liaisons should be voting members
- Liaisons should NOT be voting members
- Undecided or No Preference

Should liaisons be required to gain the consensus from their respective committees before voting at UCTC meetings? *

- Yes
- No
- Undecided or No Preference



Should alternate members be allowed to vote? *

The UCTC currently has 9 voting members and 2 non-voting alternate members

- Yes, anytime when a voting member is absent
- Yes, but only when a quorum of voting members is not present
- No
- Undecided or No Preference

Should the committee re-organize annually to rotate the Chair role? *

- Yes, but they can choose the same Chair every year
- Yes, but no Chair should serve for more than 1 consecutive term
- No
- Undecided or No Preference

Do you have any other comments or suggestions on changes to the UCTC Membership? *

Your answer _____

UCTC Charge Questions



Do you have any suggested changes to the UCTC Charge? ***Current UCTC Charge:**

The UCTC shall work with the Director of Land Use and Town Operations as follows:

1. Guide creation of a development plan for the Upper Charles Trail;
2. Ensure that the development plan reflects the community's aspirations;
3. Provide an assessment of the broader neighborhood context and the appropriateness of the Upper Charles Trail in a specific location, given the quality of life and visual characteristics of the area valued by the community;
4. Outline and present 2 or 3 Upper Charles Trail route options for the Board of Selectmen consideration, one of which is located on the west side of Hayden Rowe;
5. Create a development plan for the Upper Charles Trail that serves as an invaluable outside resource to the Board and the Town throughout the development process;
6. Gather input from as many Hopkinton residents as possible by reaching out to the community through a townwide community visioning workshop, and by conducting focus groups and surveys;
7. Identify federal, state and local grant and funding opportunities available to both governmental and non-governmental entities that could assist in the construction and maintenance of the Upper Charles Trail;
8. Work collaboratively with any non-profit organization created for the purpose of maintaining the Upper Charles Trail, to encourage citizen participation in the use and maintenance in and of the multi-use path;
9. Conduct public education and outreach on the development plan process; and
10. Guide construction of the Upper Charles Trail by working with the Board, Town staff and other boards/committees on design, permitting, funding and construction.

Your answer

Should a Multi-Use Trail be inclusive of ALL uses? *

- Yes
- No
- Limited to Specific Uses
- Undecided or No Preference

Multi-Use Trail Surface Material *

Should the Upper Charles Trail be paved or stone dust or a combination?

- All paved
- All stone dust
- A combination of paved and stone dust segments
- Undecided or No Preference



Should the UCTC be a Separate Committee or a Sub-Committee of the Trail Coordination and Management Committee (TCMC)? *

- A Separate Committee - A new UCTC with an updated charge, but separate from the TCMC
- A Sub-Committee - The UCTC as a Sub-Committee of the TCMC
- Undecided or No Preference

Have you visited other Rail Trails? *

Check all that apply

- No
- Milford Upper Charles Trail
- Holliston Upper Charles Trail
- Sherborn Upper Charles Trail
- Bay Circuit Trail & Greenway
- Hudson Rail Trail
- Minuteman Bikeway
- Cape Cod Rail Trail
- East Coast Greenway
- Other: _____

What do you LIKE about other rail trails you have visited? *

Type n/a if you have not visited other rail trails

Your answer _____

What do you DISLIKE about other rail trails you have visited? *

Type n/a if you have not visited other rail trails

Your answer _____

How should the UCTC better outreach to Community? *

Your answer _____



Demographics

These questions are optional, but will help the Select Board know if we are reaching a diverse group of survey respondents

Please tell us about yourself *

Check all that apply

- Resident
- Business Owner
- Town Staff Member
- School Staff Member
- Runner
- Walker
- Biker
- Hiker
- Skateboarder/Scooter
- Other: _____

How long have you lived in Hopkinton? *

- Less than 5 years
- 5-20 years
- More than 20 years
- Not a Resident
- Prefer Not to Answer

What is your Age Group? *

- Gen Z (Age 26 or younger, born 1996 or later)
- Millennial / Gen Y (Age 27-45, born 1977-95)
- Generation X (Age 46-57, born 1965-78)
- Baby Boomer (Age 58-76, born 1946-64)
- Silent Generation / Traditionalist (Age 77+, born before 1945)
- Prefer Not to Answer



Street Address *

What is your address? This helps us know if we are reaching residents from all areas of town.

Your answer _____

In order to move forward with a solution that the majority of the town will support, do you have any other suggestions or comments not captured above? *

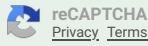
Your answer _____

Send me a copy of my responses.

Submit

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Google Forms



To: Select Board

From: Norman Khumalo 

Date: June 1, 2023

Ref: Staff Report - Select Board June 6, 2023 Meeting

1. *Main Street Corridor Project:* Dave Daltorio (Town Engineer/Facilities Director) and Michell Murdock (Project Specialist) have provided the attached update (See Attachment 1).
2. *Per- and Polyfluoroalkyl Substances (PFAS) treatment project:* *Per- and Polyfluoroalkyl Substances (PFAS) treatment project:* The Town contracted Baystate Regional Contractors to construct the Well #6 Filtration System at Fruit Street. Wesson and Sampson is the Town's contracted engineering services firm. The Town has scheduled a preconstruction meeting on **June 6th**. Again, PFAS information for owners of private wells is available [here](#). If residents have questions or concerns regarding PFAS in private wells, they may contact the Health Services Department at 508-497-9725.
3. *Massachusetts Water Resources Authority (MWRA) Southborough Interconnection Project:* The Town continues reviewing Pare Corporation's (town consulting engineer) scope of work for the project design, including survey, design and permitting at DEP and Water Resources Commission.
4. *ARPA Funding Update:* Due to developments in Washington, Liz Rouke, Senior Town Accounting Manager, has recommended that the Town apply the remainder of the American Rescue Plan Act's Coronavirus State and Local Fiscal Recovery Funds in the amount of **\$4,200,000** toward revenue loss. The Final Rule offers a standard allowance for revenue loss of \$10 million, allowing towns to select between a standard amount of revenue loss or complete a full revenue loss calculation. The former will enable towns to use that amount for government services to the extent of revenue loss due to the pandemic.
5. *Recycled Product Procurement Policy:* The Town recognizes that waste reduction, recycling, and purchasing recycled products are important elements of sound waste management. To support recycling and promote a healthy community, the Town prefers the purchase of recycled products whenever they are available at a reasonable price. To that end, find attached the Town's Recycled Procurement Policy (Attachment 2).

Attachment 1

TO: Select Board

FROM: Michelle Murdock, Dave Daltorio *Michelle Murdock*
VIA: Norman Khumalo, Town Manager *NK*
DATE: May 31, 2023
SUBJ: Select Board Update: Main Street Corridor Project Date: Jun 6, 2023

MassDOT's Original Completion Date for the Project is October 22, 2023. That date was set at the award of the contract. As of the most recent schedule, submitted by A.F. Amorello on November 8, 2022, the project is still on schedule for completion by that date.

Phase 1 and 2 of Main Street Reconstruction has been completed. This work focused on the area from West Main Street to the Fire Station and the 135/85 intersection. This work included the full-depth excavation of these sections of Main Street and the installation of two of the three final paving courses. The final course of pavement will be installed at the end of the project.

Most traffic and speed limit signs have been placed. The Town has requested that MassDOT remove the second pole from street signs. Street signs will be mounted on single poles.

Full depth reconstruction and paving from the Muffin House to the east end of the project is completed.
Line striping is also complete.

Anticipated Work for Spring 2023 includes the following:

- Curb work anticipated the first week in June, followed by sidewalks.
- Eversource anticipated to be in the field the first week of June to continue pulling underground cables..
- Note: Eversource has shortage of transformers; 36-week lead time possible; not sure if this impacts project's schedule. TBD
- Verizon poles still need to be set; The Town and MassDOT met with Verizon on 5/17/2023. Verizon will update the Town with a schedule (still awaiting update)
- Loam and Seed: Once concrete is poured for sidewalks, loam and seed on the backside will occur.
Estimated to be two months out.
- Trees to be selected by the Town needed soon. Amorello working with landscaping company and MassDOT will be involved with the tree selection and construction process.
- MassDOT is expecting a submittal from the manufacturer for replacing mast arms and signal poles due to defective paint. MassDOT rejected the original manufacturer submission for in-field repainting.

Anticipated Work for the Week of June 5th to June 9th:

- **East Side of Project**
Installation of conduit for site lighting from the Muffin House to Ash Street (work will take place in the excavated sidewalk).
- Setting the curb from the Muffin House to Ash Street
- Raising structures, including catch basins and manholes for electric and communications vaults

West Side of Project

- Sidewalk installation
- Finish retaining walls

Site Wide

Eversource will be onsite pulling underground wiring at various locations.

To Date Construction Cost and Quantities through 9/24/22

Paid By	Contract Bid Total (incl. contingencies)	As of Sept, 24, 2022	Percent Completed
MassDOT/TIP	\$9,919,513.90	\$5,535,689	56%
Paid By Town	\$10,014,173.48	\$6,578,583	66%
Total Cost	\$19,933,687.38	\$12,114,272.90	61%

Work Completed - rounded (does not include every bid item)

	As of 12/18/2021	As of 9/24/2022	Percent Complete
Catch Basins	80	82	100%
Drain Manholes	40	40	100%
Reinforced Concrete Pipe	5,100 ft	5,100 ft	100%
Ductile Iron Pipe	727 ft	727 ft	100%
Hot Mix Asphalt (all types)	2,750 tons	10,268 tons	71%

Gravel (all types)	2,456 cy	9,873 cy	51%
Rock Excavation	1,037 cy	1,037 cy	Est. 100%
Grading and Compaction	n/a	18,000 sy	47%
Granite Curbing	n/a	3,0147 lf	30%
Underground Conduit	2,012 ft	11,459 ft	42%
Utility Vaults Installed	12	18	1. 100%
Excavation (all types)	968 cy	13,326 cy	56%
Concrete Sidewalk	n/a	565 sy	6%

Community Contact (5-18-23 thru 5-31-23)

- Construction Advisory #65 was distributed via email on Friday, June 2, 2023.
- Construction Meeting held with MassDOT on May 30, 202
- A total of 15 issues/concerns from the general public and project abutters were received, reviewed and researched, and an email response was sent to the individual(s) who reported an issue or asked a question. Issues reported/questions asked included:
 1. Email from project abutter to ask for update on remaining work on his property; advised that his list of requested work has been shared with MassDOT; will update when they respond.
 2. Email from property owner at 81-85 Main to ask for update on his previous email when he reported possible drainage issue; advised input needed from MassDOT; contacted MassDOT to let them know that property owner would like an onsite meeting;
 3. Notified owner of 5 East Main that Amorello will be onsite to complete their service connection.
 4. Email from Main Street business owner to complain about police details parking in front of her Business; asks if there is a designated area for detail officers to park; confirmed with Chief Bennett that there is not a designated parking area, but HPD reached out to Masonic Lodge and they have offered use of spaces; the business owner had more questions about police details and was referred to HPD for more information.
 5. Onsite meeting with project abutter to review curb changes at the intersection of Mayhew and Main Street.

6. Email from project abutter to ask when wall work will be completed and to report that their driveway is too steep; the town has asked for the driveway area to be surveyed.
7. Email from property owner at 1 West Main with questions about landscaping, steps and asking to have a wall installed at the front of the property line. Advised that schedule will be provided by MassDOT; followup email asking if any response from MassDOT: advised work still pending; reached out again to MassDOT for an update.
8. Email from resident to report that Hoyt Way is blocked; no line striping; advised that line striping is scheduled and provided link to sign up for project updates/construction advisories to be kept up to date with upcoming work.
9. Assisted resident with information to file a claim for tire damage.
10. Phone call from resident to ask what is all the work that is going on; was not aware of the Main Street Corridor Project; advised the project is a three season project currently in its third season managed by MassDOT; encourage to sign up for project updates and visit project Website.
11. Email from Brian Herr to ask about remaining work at 2 West Main; he has been in touch with property owner; advised that the town is working with MassDOT to address his concerns and provide a schedule for remaining work.
12. Email from owner of 30-36 Main to follow up on onsite meeting held on 5/5/23; asking if any Decision made for work in building alcoves; advised that town is coordinating with MassDOT and has requested that work be scheduled when he is available to be onsite with the Town and and VHB. Owner asked for details on original plans; his question was answered by Anthony Tavalone, MassDOT and Dave Daltorio.
13. Email from resident to follow up again on tire damage claim filed with Amorello and MassDOT, both of which were denied. MassDOT claimed the incident was not within the project limits; reached out to Anthony Tavalone to confirm project limits, but let resident know that he is not responsible for damage claim decisions.
14. Phone call from owner of 111 Main Street to report that they do not want their walkway replaced as they are going to have it removed. Onsite visit to take photos. Information forwarded to MassDOT.

15. Email from owner at 5 West Main with questions about the wall work which is in process; concerned that the wall is sloped instead of going straight across the property; also asking again about the slope of both driveways and asks who she needs to talk to. Advised that her concerns will be shared with MassDOT. She does not need to reach out directly.

Miscellaneous

- The Project website will continue to be updated throughout the Project. Visit the website to sign up for Project Updates. A QR Code has been developed for quick access.
- Project photos and drone coverage of the 135/85 reconstruction have been added to the website <https://hopkintonmainstreet.com/construction-photos.htm>

Attachment 2:

Town of Hopkinton

Recycled Product Procurement Policy

Issued by: Town Manager

Approved on: June 1, 2023

Revised on: _____

In recognition of the need to make more efficient use of our natural resources, create markets for the materials collected in recycling programs, reduce solid waste volume and disposal costs, and serve as a model for private and public institutions, the Town of Hopkinton is committed to purchasing products which are environmentally preferable, and/or made of recycled materials whenever such products meet quality requirements and are available at reasonable prices and terms.

To the maximum extent practicable, the following recommendations should be adhered to:

1. For all purchases of printing and writing paper for in-house use or custom printed materials by professional printers, including copier paper, offset paper, forms, stationary, envelopes, tablets, notepads and file folders, the minimum content standards shall be no less than 30% post-consumer recycled materials to meet the current state and federal minimum standards.
2. Town departments shall ensure that all contracts for printing include the following language “printed on 30% post-consumer recycled content”.
3. Each department shall implement paper reduction techniques through the use of double-sided copies, sharing and circulating materials, use of email and reuse of discarded paper for draft works, scrap paper and internal messages.
4. For all purchases of janitorial paper products and trash bags, a minimum of 10% recycled content shall be required, and/or these products are determined to be environmentally preferable by an independent third party organization such as the Forest Stewardship Council, US EPA, USDA, UL, or Green Seal.
5. All purchases of office equipment shall be deemed energy efficient (example rated Energy Star) and all purchases of electronics shall be EPEAT registered silver or higher.
6. Other recycled content products that should be considered by departments include, but are not limited to: outdoor fixtures and furnishings including picnic tables, benches, and recycling and trash containers made with post-consumer recycled plastic; remanufactured laser printer toner cartridges and remanufactured or refillable inkjet cartridges; re-refined

antifreeze including on-site antifreeze recycling; remanufactured paint; and re-refined lubricating and hydraulic oils.

7. For the purpose of measuring the progress of the program and success in meeting recycling goals of the Commonwealth, each department shall report purchases of recycled products to the Town Manager's office on July 30 for the previous fiscal year.
8. To secure these products, departments should consult the Commonwealth of Massachusetts's 'Find Green Products and Services on Statewide Contracts', located on the Operational Services Division's Environmentally Preferable Products (EPP) Procurement Programs website (www.mass.gov/epp) and shall adhere to EPA Recommended Affirmative Procurement Guidelines whenever practicable.
9. The Town shall request its contractors and consultants to use and specify recycled products in fulfilling contractual obligations wherever practical.



Town of Hopkinton

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Approved on: June 1, 2023

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9. The Town shall request its contractors and consultants to use and specify recycled products in fulfilling contractual obligations wherever practical.

SELECT BOARD LIAISON LIST FY 2023	Select Board Members					Norman	Elaine
	Amy	Mary Jo	Irfan	Muriel	Shahidul		
FINANCE							
Appropriation Committee					X	X	
Board of Assessors		X					
Town Manager's Budget Advisory Team					X		
Capital Improvement Committee						X	
Cable Advisory Committee						X	
PUBLIC SAFETY							
Animal Control							X
Fire Department	X						
Police Department	X						
PERMITTING							
Board of Appeals				X			
Conservation Commission			X				
Planning Board				X			
Board of Health					X		
Permanent Building Committee			X				
EDUCATION							
School Committee					X		
Regional Voc. Tech School Committee				X			
PUBLIC SERVICES							
Cemetery Commission		X					
Commission on Disability	X						
HUMAN SERVICES							
Town Clerk's Office						X	
Personnel Committee						X	
Council on Aging				X			
MetroWest Veterans Service District					X	X	
ADA Oversight Committee	X						
Veterans Celebration Committee				X			
Tax Relief Committee		X					

SELECT BOARD LIAISON LIST FY 2023	Select Board Members					Norman	Elaine
	Amy	Mary Jo	Irfan	Muriel	Shahidul		
CULTURAL/RECREATIONAL							
Hopkinton Cultural Council			X				
Marathon Committee		X					
Marathon Fund Committee					X		
Public Library					X		
Parks & Recreation Commission					X		
Youth Commission				X			
Community Preservation Committee				X			
HISTORIC PRESERVATION							
Woodville Historic District Commission	X						
Hopkinton Historic District Commission	X						
Historical Commission		X					
OTHER							
Sustainable Green Committee		X					
Trail Coordination and Management Committee				X			
Commissioners of Trust Funds						X	
Lake Maspenock Dam Advisory Group						X	
Fruit Street						X	
Hopkinton Schools Athletic Field Subcommittee			X				
Boston Athletic Association			X				
APPOINTED BOARD/COMMITTEE MEMBERSHIPS							
Elementary School Building Committee (Life of the Project)					X		
Irvine-Todaro Properties Advisory Group (Life of the Project)			X				
Pratt Farm Master Plan Team (Life of the Project)		X					
Upper Charles Trail Committee (3-year term expiring 6/30/25)			X				
Open Space Preservation Commission (5-year term expiring 6/30/26)			X				
Affordable Housing Trust Fund Board (2-year term expiring 6/30/24)			X				
Metropolitan Area Planning Council Representative, Select Board member (Town Manager Appointment)	X						X
MetroWest Regional Transit Authority (1-year term)		X					

	Select Board Members							
SELECT BOARD LIAISON LIST FY 2023	Amy	Mary Jo	Irfan	Muriel	Shahidul	Norman	Elaine	
Number of X's:	7	8	9	8	9	9	2	

Pending Select Board Member Future Agenda Items

May 10, 2023

Items are listed in the order they were identified. Items identified and already discussed at meetings are not included on this list.

1. Social Justice issues - Nasrullah (8/4/20)
2. Master Plan action plan/implementation plan items for Select Board - Ritterbusch (12/1/20)
(12/15/20)
3. Examination into municipal cable - Nasrullah (9/7/21)
4. The role of the Select Board in the trails/Upper Charles Trail process and what are the next steps for the Board - Kramer (1/25/22)
5. Consider support for Senate and House bills regarding a temporary moratorium on construction of new jails and prisons in Massachusetts - Kramer (1/25/22)
6. Affordable housing updates - Mannan (5/17/22)
7. West Main St. left turns, Cumberland Farms area - Kramer (5/17/22, 10/18/22)
8. Cemetery Commission Rate Changes - Ritterbusch (6/21/22)
9. Parks & Rec. future plans - Mannan (7/12/22)
10. Status and plans for roads & sidewalks; pavement management plan - Mannan (8/2/22)
11. Board & Committee appointments - fostering volunteerism, outreach, and appreciation - Kramer (9/13/22)
12. Discuss ways to keep seniors in their homes - LaFreniere (10/18/22)
13. Policy on redaction of public survey comments - Ritterbusch (11/1/22)
14. Communications plan for the MWRA connection project - Kramer (11/15/22)
15. Ways to support boards/committees & their Chairs, including reviewing committee Charge, and asking how things are going - Kramer (12/6/22)
16. Center School and Elmwood School - 2/14/23
17. Honor Boston Marathon runners who are Hopkinton residents - 5/9/23



**TOWN OF HOPKINTON
BOARD OF APPEALS**

Town Hall
18 Main Street - 3rd Floor
Hopkinton, MA 01748
508-497-9745
www.hopkintonma.gov

HOPKINTON TOWN CLERK
2023 MAY 23 AM 9:31

John Coutinho, Chair & Clerk
Michael Riley, Vice Chair

zba@hopkintonma.gov

#23-021

May 23, 2023

NOTICE OF DECISION

Notice is hereby given that the Board of Appeals of the Town of Hopkinton, MA, on May 23, 2023, filed the following Decision in the Office of the Town Clerk:

- A Decision granting a Special Permit to Matt Hodges, 18 Falcon Ridge Drive, Hopkinton, MA, pursuant to Section 210-126 of the Zoning Bylaw to construct an accessory dwelling unit for property located at **18 Falcon Ridge Drive, Hopkinton, MA.**

A copy of the Decision may be obtained at the Office of the Town Clerk or the Department of Land Use, Planning & Permitting at the Town Hall, 18 Main Street, Hopkinton, MA. Appeals of the Decision, if any, shall be made pursuant to M.G.L. Chapter 40A, Section 17, and shall be filed within twenty (20) days after the date of filing of the Decision with the Office of the Town Clerk.

HOPKINTON BOARD OF APPEALS
John Coutinho, Clerk



**TOWN OF HOPKINTON
BOARD OF APPEALS**

Town Hall
18 Main Street - 3rd Floor
Hopkinton, MA 01748
508-497-9745
www.hopkintonma.gov

HOPKINTON TOWN CLERK
2023 MAY 28 AM 9:31

John Coutinho, Chair & Clerk
Michael Riley, Vice Chair

zba@hopkintonma.gov

#23-022

May 23, 2023

NOTICE OF DECISION

Notice is hereby given that the Board of Appeals of the Town of Hopkinton, MA, on May 23, 2023, filed the following Decision in the Office of the Town Clerk:

- A Decision granting a Special Permit to William and Nancy Baldiga, 67 Oakhurst Road, Hopkinton, MA, pursuant to Section 210-119 of the Zoning Bylaw for the replacement and extension of a deck on the rear of a single family dwelling at **67 Oakhurst Road, Hopkinton, MA**, that does not conform to the side yard setback requirement.

A copy of the Decision may be obtained at the Office of the Town Clerk or the Department of Land Use, Planning & Permitting at the Town Hall, 18 Main Street, Hopkinton, MA. Appeals of the Decision, if any, shall be made pursuant to M.G.L. Chapter 40A, Section 17, and shall be filed within twenty (20) days after the date of filing of the Decision with the Office of the Town Clerk.

HOPKINTON BOARD OF APPEALS
John Coutinho, Clerk



Elaine Lazarus <elainel@hopkintonma.gov>

Green Stormwater Infrastructure Workshop: Mendon, June 13th 9-11 AM

1 message

Laura St. John-Dupuis <LDupuis@mendonma.gov>
To: Anne Mazar <AMazar@mendonma.gov>

Thu, May 25, 2023 at 3:10 PM

**TOWN OF MENDON****SELECT BOARD**

Mendon Town Hall
20 Main Street
Mendon, Massachusetts 01756
Telephone: (508) 473-2312
Fax: (508) 478-8241
MMerolli@mendonma.gov

Michael Merolli, Chair
Alejna Brugos, Vice-Chair
Michael Goddard
Brendan Chenelle
Jason Kuter

Dear Neighbor,

We invite you to join us for a workshop and site tour to learn how to utilize green storm water infrastructure (GSI) to save money, have an environmentally friendly and functional building site, and beautify your town. The workshop will be on Tuesday, June 13th from 9-11 AM at the Mendon Town Hall. At 8:30 AM refreshments will be available and we will begin the workshop promptly at 9:00 AM.

The Horsley Witten Group, Inc., the engineers who designed the Mendon site, will lead the workshop, along with Town staff. Topics will include explaining GSI, how to incorporate it into site design, possible funding options and a tour of the Mendon Town Hall Campus with Q&A. Information presented may be of interest to Town planning, conservation, public works staff and volunteers.

More information on this project can be found at <https://www.mendontownhallcampusgreenguide.com/>

Project construction is scheduled to be completed at the end of June 2023.

Please RSVP and send questions to Anne Mazar at amazar@mendonma.gov.

We encourage you to pass this invitation along to staff or volunteers in your town who might find this topic of interest.

We hope to see you there!

Sincerely,

A handwritten signature in blue ink that reads "Mike Merolli".

Mike Merolli
Mendon Select Board Chair

Eversource Community Forum – Hopkinton LNG Facility

Hopkinton neighbors of the Eversource LNG plant are invited to attend a Community Forum to meet with Eversource representatives. Residents will hear about the facility's safety protocols, as well as the day-to-day operations at the plant and receive answers to their questions.

*Thursday, June 8, 2023
Faith Community Church
146 East Main Street
Chapel Entrance
6:30 p.m. to 8:30 p.m.*

Town documents related to the LNG plant https://www.hopkintonma.gov/news_detail_T13_R84.php
To submit questions prior to the forum, please send them to hopkintonpublicforum@eversource.com.

The Hopkinton LNG plant

The Hopkinton LNG plant was built in the 1970s to supplement the supply of natural gas during periods of high gas demand, chiefly during the winter season. It serves to help reduce price spikes for natural gas when demand is high and to supplement flowing gas supply on the coldest winter days.

The plant consists of three tanks - each capable of holding the approximate equivalent of 1 billion cubic feet of natural gas - and gas liquefaction and vaporization facilities. The plant receives natural gas from the nearby gas pipeline.

The facility has undergone significant refurbishment since 2015 and Eversource continues to perform upgrades to systems, including the tanks. The tanks are inspected regularly by a third-party engineering firm which reports they stand in good condition for continued long-term operation to serve the region's energy requirements.

volume of natural gas in its liquid state is about 600 times smaller than in its gaseous state. This process makes it possible to store natural gas in sufficient quantity to supplement flowing supply. The plant's vaporization facilities allow natural gas to flow into Eversource pipelines to serve gas customers in the area. The plant can also offload LNG into special tanker trucks for delivery or receipt to or from other LNG facilities.

LNG Safety

Eversource has substantial experience in safely operating LNG facilities. The company operates the plant complying with regulations and procedures governed by the U.S Pipeline and Hazardous Materials Safety Administration, the Federal Energy Regulatory Commission, the Mass. Department of Public Utilities and in accordance with standards of the National Fire Protection Association.

Eversource and local emergency responders conduct regular training and exercises to ensure a safe and effective response in the unlikely event of an LNG emergency.

What is LNG?

Liquefied natural gas (LNG) is natural gas that has been cooled to a liquid state, at about -260° Fahrenheit, for shipping and storage. The