



TOWN OF RIVERHEAD

Laura Jens-Smith, Supervisor
200 Howell Avenue Riverhead,
New York 11901
631-727-3200

BID FOR: TOWN WIDE PRINTING 2018

BIDDERS NAME

BIDDERS ADDRESS

CITY, STATE, ZIP

DATE (____)_____
PHONE NUMBER (____)_____
FAX NUMBER

EMAIL ADDRESS

In compliance with your advertisement for bids to be opened on **APRIL 24, 2018** and subject to all conditions thereof, the undersigned hereby proposes to furnish the item(s) and/or service(s) itemized in this proposal in accordance with the Notice to Bidders, General Information Agreement and Specifications contained herein on the Bid Proposal Form attached.

Bidder certifies that the prices quoted herein do not include Federal Excise Tax or any Federal, New York State or City Sales Tax and are not higher than prices charged to any governmental or commercial consumer for like merchandise and/or service; and all prices include shipping and freight charges to any Municipal building or site within the Town of Riverhead.

Respectfully submitted,

SIGNED BY

TITLE

BIDDERS ARE INVITED TO ATTEND BID OPENING

TOWN OF RIVERHEAD
NOTICE TO BIDDERS

Sealed bids for the purchase of **TOWNWIDE PRINTING 2018** for use by the Town of Riverhead will be received by the Town Clerk of the Town of Riverhead at 200 Howell Avenue, Riverhead, New York, 11901 until **2:00 P.M.** on **APRIL 24, 2018** at which time they will be publicly opened and read aloud.

Specifications and guidelines for submission are available on the Town of Riverhead website at www.townofriverheadny.gov click on "Bid Requests" beginning **MARCH 29, 2018.**

All bids must be submitted on the bid form provided. Any and all exceptions to the specifications must be listed on a separate sheet of paper, bearing the designation "**EXCEPTIONS TO THE SPECIFICATIONS**" and attached to the bid form.

All bids must be submitted to the Office of the Town Clerk at the address stated above in a sealed envelope clearly marked **TOWNWIDE PRINTING 2018.** Please take notice that the Town Board reserves the right to reject in whole or in part any or all bids, waive any informality in the bids and accept the bid which is deemed most favorable in the interest of the Town of Riverhead. The Town Board will use its discretion to make judgmental determination as to its best estimate of the lowest bidder. Note: Bid responses must be delivered to the Office of the Town Clerk at the address above. The Town may decline to accept, deem untimely, and/or reject any bid response/proposal that is not delivered to the Office of the Town Clerk.

BY ORDER OF THE TOWN BOARD
OF THE TOWN OF RIVERHEAD

Diane M. Wilhelm, Town Clerk

I: GENERAL BID SPECIFICATIONS

1. General Instructions

Bidders shall be responsible to carefully examine the bid specifications. These specifications require the doing of all things necessary or proper for, or incidental to the furnishing and delivery of printing services for the Town of Riverhead, including forms, posters, and business cards, stickers for attorney/investigation unit, Police department, Planning Department and Engineering department.

Note, this bid does not include the Town of Riverhead Recreation Brochure

All things not expressly mentioned in these specifications, but involved in carrying out their intent are required by these bid specifications; and the vendor shall perform the same as though they were specifically mentioned, described and delineated. Read all documents contained in the bid specifications.

Bidders are responsible for submitting their bids to the appropriate location at or prior to the time indicated in the specifications. **No bids will be accepted after the designated time or date indicated in the bid specifications.** It is suggested that registered mail be used to submit bids. Delay in mail delivery is not an exception to the receipt of a bid.

A copy of the official bid documents may be obtained at the Town's website: www.townofriverheadny.gov. In addition to obtaining the official bid documents, any and all addendum pertaining to a particular bid or RFP are posted on the Town website referenced above-log and scroll to bid for **BID FOR TOWNWIDE PRINTING 2018**. It is incumbent upon all potential bidders to view all posted addenda prior to the bid close date.

Any questions or clarification to the bid specifications or technical specifications must be submitted in writing to the Purchasing Agent at 200 Howell Ave., Riverhead, NY 11901 or by email to: tague@townofriverheadny.gov prior to the bid opening, **unless otherwise stated***. Such questions must be in the possession of the Purchasing Agent at least 72 hours prior to the bid opening, **unless otherwise stated***. **Verbal questions will not be entertained.**

Bidders must submit one original copy of their bids. The original must be sealed and clearly marked **TOWN WIDE PRINTING 2018**. All bids shall be made out on the proposal forms attached hereto and all the attached certificates must be completed and signed in compliance with the provisions of Section 103-d of the New York State General Municipal Law. All bids must be filled out in ink, or be typewritten. Bids submitted in pencil will be rejected as unresponsive. Bids which have been corrected by white out or cross out, and have not been initialed and/or dated will be rejected as unresponsive. Bid Responses may be rejected if they show any omission, irregularity, alteration of form, addition, condition, unresponsiveness, or unbalance.

Samples may be requested by the Town for the purpose of product evaluation. It is understood that samples will be provided at **no** charge to the Town and will be returned, when requested, within 30 days after the evaluation is completed, at the expense of the vendor. All samples left longer than 30 days after the evaluation period will be discarded.

The Purchasing Agent, and/or his/her designee, shall be the only one authorized to make changes or alterations to anything contained in these specifications. As stated above, any changes shall be posted as an addendum on the following website: www.townofriverheadny.gov. The Purchasing Agent reserves the right to reject all bids, parts of all bids, or all bids for any one or more items or contractual services included in the proposed contract, when such rejection is in the best interest of the Town. The contract will be awarded to the vendor(s)/responsible bidder(s) offering the best price, availability to

supply products within the requested time frames. A responsible bidder is a producer, dealer, vendor who has demonstrated judgment and integrity, is of good reputation, experienced in his/her work, whose record of past performance is established as satisfactory, and whose financial status is such to provide no risk to the Town of Riverhead in its contractual relations.

No bidder may withdraw a bid within forty-five (45) days after the actual date of the bid opening. Any bidder who does not honor their bid within the forty-five (45) days may be barred from bidding in any jurisdiction in New York State.

Any bidder, contractor, or manufacturer who, in the course of his work, uses or supplies products which may be toxic or harmful, shall provide an MSDS to the Town of Riverhead Purchasing Department prior to the use of those products by the Town or the contractor.

Bidders who are required to adhere to the prevailing wage schedule shall obtain and maintain a current schedule from the New York State Department of Labor for the entire term of the contract. The Town may audit adherence to this schedule at any time during or after the contract period.

By submission of this bid, each bidder and each person signing on behalf of any bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each bidder is not on the list created pursuant to paragraph (b) of subdivision 3 of section 165-a of the state finance law.

2. Bid Costs and Expenses

The Town of Riverhead will not pay any costs incurred by any Bidder/Vendor associated with any aspect of responding to the request for bids, including bid preparation, printing or delivery, or negotiation process.

3. Bid Expiration Date

Prices quoted in the bid shall remain fixed and binding on the Bidder for at least one year from the date of the date of award or such other date set forth in these specifications and, upon mutual consent, an option to extend for an additional year.

4. Non-Conforming Bids

Non-conforming Bids will not be considered. Non-conforming bids are defined as those that do not meet the requirements of the bid specification. The determination of whether a bid requirement is substantive or a mere formality shall reside solely within the Town of Riverhead.

5. Sub-Contracting

The Bidder/Vendor selected shall be solely responsible for contractual performance and Bidder/Vendor assumes all responsibility for the quality of work (i.e. supply and delivery of printing products...forms, cards, posters) performed under this contract.

6. Discrepancies and Omissions

Bidder/Vendor is fully responsible for the completeness and accuracy of their bid, and for examining this bid and all addenda. Failure to do so will be at the sole risk of Bidder/Vendor. Should Bidder/Vendor find discrepancies, omissions, unclear or ambiguous intent or meaning, or should any questions arise concerning this request for bid, Bidder/Vendor shall notify the Purchasing Agent of the Town of Riverhead in writing, of such findings at least five (5) days before the bid opening. This will allow issuance of any necessary addenda. It will also help prevent the opening of a defective bid and exposure of Bidder/Vendor's bid upon which award could not be made. All unresolved issues should be addressed in the bid. Protests based on any omission or error, or on the content of the solicitation, will be disallowed if these faults have not been brought to the attention of the Designated Contact, in writing, no later than five (5) calendar days prior to the time set for opening of the bids.

7. Town's Right to Reject Bids

The Town reserves the right to accept or reject any or all bids or any part of any bid, to waive defects, technicalities or any specifications (whether they be in the Town's specifications or Bidder/Vendor's response), to sit and act as sole judge of the merit and qualifications of each product offered, or to solicit new bids on the same project or on a modified project which may include portions of the originally proposed project as the Town may deem necessary in the best interest of the Town.

8. Town's Right to Cancel Solicitation

The Town reserves the right to cancel this solicitation at any time during the procurement process, for any reason or for no reason. The Town makes no commitments expressed or implied, that this process will result in a business transaction with any Bidder/Vendor.

9. Notification of Withdrawal of Bid

Bidder/Vendor may modify or withdraw its bid by written request, provided that both bid and request is received by the Town prior to the bid due date. Bids may be re-submitted in accordance with the Bid Notice due date in order to be considered further. Bids become the property of the Town at the bid submission deadline. All bids received are considered firm offers at that time.

10. Exceptions to the Bid Specifications

Any exceptions to the Bid Specifications or the Town's terms and conditions, must be highlighted and included in writing in the bid. Acceptance of exceptions is within the sole discretion of the evaluation of the Town.

Bid Security

None required.

11. Award of Contract

The final award of a contract is subject to approval by the Town. The Town has the sole right to select the successful Bidder/Vendor(s) for award, to reject any bid as unsatisfactory or non-responsive, to award a contract to other than the lowest priced bid, to award multiple contracts, or not to award a contract. Notice in writing to a Bidder/Vendor of the acceptance of its bid by the Town

will constitute a contract, and no Bidder/Vendor will acquire any legal or equitable rights or privileges until the occurrence of such event.

12. Contract Terms and Conditions

The term of the contract between the successful bidder and the Town shall be for one (1) year from date of contract award. At the end of the contract period, the contract may be extended for one (1) additional twelve-month period upon the same terms and conditions at the sole discretion of the Town of Riverhead and with the consent of the vendor. The Town also reserves the right to cancel this contract at any time without notice.

13. Independent Contractor

The parties to the contract shall be independent contractors to one another, and nothing herein shall be deemed to cause this agreement to create an agency, partnership, joint venture or employment relationship between parties. Each party shall be responsible for compliance with all applicable workers compensation, unemployment, disability insurance, social security withholding and all other similar matters. Neither party shall be liable for any debts, accounts, obligations or other liability whatsoever of the other party or any other obligation of the other party to pay on the behalf of its employees or to withhold from any compensation paid to such employees any social benefits, workers compensation insurance premiums or any income or other similar taxes.

14. Licenses and Permits

In performance of the contract, the Bidder/Vendor will be required to comply with all applicable federal, state and local laws, ordinances, codes, and regulations. The cost of permits and other relevant costs required in the performance of the contract shall be borne by the successful Bidder/Vendor. The Bidder/Vendor shall be properly licensed and authorized to transact business in the State of New York.

15. Notice

Any notice to the Town of Riverhead required under the contract shall be sent to:

**Mary Ann Tague, Purchasing Agent
Town of Riverhead
200 Howell Avenue
Riverhead, NY 11901**

16. Indemnification

a. General Indemnification:

By submitting a bid, the proposing Bidder/Vendor agrees that in the event it is awarded a contract, it will indemnify and otherwise hold harmless the Town of Riverhead, its agents and employees from any and all liability, suits, actions, or claims, together with all costs, expenses for attorney's fees, arising out of the Bidder/Vendor's its agents and employees' performance work or services in connection with the contract, regardless of whether such suits, actions,

claims or liabilities are based upon acts or failures to act attributable, whole or part, to the Town, its employees or agents.

b. Insurance

i. Bidder/Vendor recognizes that it is operating as an independent Bidder/Vendor and that it is liable for any and all losses, penalties, damages, expenses, attorney's fees, judgments, and/or settlements incurred by reason of injury to or death of any and all persons, or injury to any and all property, of any nature, arising out of the Bidder/Vendor's negligent performance under this contract, and particularly without limiting the foregoing, caused by, resulting from, or arising out of any act of omission on the part of the Bidder/Vendor in their negligent performance under this contract.

ii. The Bidder/Vendor shall maintain such insurance as will protect against claims under Worker's Compensation Act and from any other claims for damages for personal injury, including death, which may arise from operations under this contract. The Bidder/Vendor is an independent Bidder/Vendor and is not an employee of the Town of Riverhead.

iii. During the term of this contract, the Bidder/Vendor shall, at its own expense, carry insurance minimum limits as set forth above.

17. Piggybacking Clause Method of Award

The contract, if awarded, will be to the lowest responsive/responsible bidder(s) in part or in whole who meet(s) all the terms of the specifications. The TOWN guarantees no minimum or maximum purchases or contracts as a result of award of this bid. The Town of Riverhead reserves the right to allow all municipal and not for profit organizations authorized under the General Municipal Laws of the State of New York, to purchase any goods and/or services awarded as a result of this bid in accordance with the latest amendments to NYS GML 100 through 104. However, it is understood that the extension of such contracts are at the discretion of the vendor and the vendor is only bound to any contract between the Town of Riverhead and the vendor. Additionally, the TOWN reserves the right to purchase any goods or services included as a part of this bid from any means legally available to it.

II. BID SPECIFICATIONS FOR TOWNWIDE PRINTING

1. Town Wide Printing Delivery Requirements

These specifications require the doing of all things necessary or proper for, or incidental to the furnishing and delivery of printing services for the Town of Riverhead, including forms, posters, and business cards, stickers for attorney/investigation unit, Police Department, Planning Department, and Engineering Department. Note, this bid does not include the Town of Riverhead Recreation Brochure. The successful bidder(s) must acknowledge receipt of order in e-mail or writing within 24 hours of receipt of order and product proofs must be delivered within 5 days to the ordering departments. Upon approval of final draft, delivery of printed material must be made, "on the ground" at the delivery point designated on the purchase order, within 3 weeks after approval of final draft.

2. Quantity

The Town of Riverhead is in no way obligated to purchase quantities and reserves the right to adjust quantities as needed.

3. Price, Invoices & Payments

- a. The vendor shall either accept a Town issued credit card or the vendor shall put the item(s) "on account" and submit an invoice for payment to the Town on a monthly basis. The vendor shall not accept cash payment for any item.
- b. All invoices, voucher, packing slips and any correspondence shall include the following: date/time; description of item; identify the Town employee picking up the item(s) or accepting delivery of the item(s). All invoices shall be submitted for payment to:

**Town Hall
200 Howell Ave.
Riverhead, NY 11901**

Every invoice must identify the employee picking up or accepting the item.

4. Contract Period

The contract period for this bid award shall be for one (1) year with the right to extend for an additional one year period or any such lesser amount as mutually agreed upon by and between Town and vendor subject to identical terms and conditions.

Compliance with Rules and Regulations

The associated product furnished shall comply with all provisions which would be applicable, if the Town of Riverhead were a private corporation of Federal and State of New York Laws, Ordinances, Codes, Rules, Regulations, Orders, Permits and Licenses and with fire underwriters requirement, requirements set forth herein exceed such provisions, these Specifications shall control, only if applicable to this particular bid.

5. Deviation

All proposed minor deviations, with full details, must be listed on a separate Detail Sheet, which must be attached to and made part of this bid.

The Town of Riverhead reserves the absolute right in its sole discretion to accept that bid, if any, which under all circumstances will best serve the public interest.

6. Reservations

The Town Board of the Town of Riverhead reserves the right and responsibility to reject any or all bids if they believe such action to be in the best interest of the Town.

7. Municipal Indemnification

The successful bidder must agree to save, keep, bear harmless and fully indemnify the Town and any of its officers, agents, or representatives from all damages, costs or expenses in law or equity that may at any time arise or be set up for an infringement of the patent rights of any person or persons in consequence of the use by the Town or by any of its officers, agents or representatives of articles supplied under the contract arising from bids submitted and of which the successful bidder and manufacturer are not lawfully entitled to sell, provided the Town gives the successful bidder and manufacturer prompt notice in writing of any suit and all information necessary to defend same.

8. Independent Contractor

In the performance of this Agreement, the Bidder, including its employees, agents, and subcontractors shall act solely as an independent contractor, and nothing contained in or implied by this Agreement shall be construed at any time to create any other relationship between the Town and the Bidder, including employer and employee, partnership, principal and agent, or joint venture.

9. Assignment

The Contract resulting from this bid and the compensation, which may become due thereunder are not assignable except with prior written approval of the Town.

10. Interpretation

The contract resulting from this Solicitation shall be construed under the laws of the State of New York.

11. Indemnification

If a Contract is awarded, the Successful Bidder shall be required to indemnify, defend, and hold the County, its employees, and agents harmless from and against any and all claims, loss, liability, cost, and expenses, including attorney fees, howsoever arising or incurred, alleging personal injury, bodily injury, including death, or property damage arising out of or attributable to the Successful Bidder's performance of the Contract awarded.

12. Termination Process

a. Termination for Convenience

Notwithstanding anything contained herein, the Town may terminate this Agreement anytime, in whole or in part, without showing cause by providing thirty (30) days written notice to the Successful Bidder. The Town shall pay all reasonable costs incurred by the Successful Bidder up to the date of termination. The Successful Bidder shall not be reimbursed for any anticipatory profits, which have not been earned to the date of termination.

b. The Successful Bidder shall be provided 30 days' notice of any termination not for cause and shall only perform such work during the 30-day notice period that is authorized in writing by the Town's Purchasing Agent.

c. This Agreement may be terminated by the Town upon at least seven (7) days' notice to the Successful Bidder in the event that: (1) the Work is permanently abandoned by the Town; (2) continued Work is deemed by the Town, in its sole discretion, not to be in the best interests of the Town; or (3) monies are no longer available or are not appropriated to fund the Work being performed or to be performed under this Agreement.

d. Termination for Cause: Notwithstanding anything contained herein, if the Successful Bidder fails to fulfill its obligation under this Agreement properly and on time or otherwise violates any provision of this Agreement, the Town may terminate this Agreement by written notice

to the Successful Bidder. The notice shall specify the acts or omissions relied upon as cause for termination. All finished or unfinished goods or services provided by the Successful Bidder shall, at the Town's option, become the Town's property. The Town shall pay the Successful Bidder fair and equitable compensation for satisfactory performance prior to receipt of notice of termination less the amount of damages caused by the Successful Bidder's breach. If the damages are more than the compensation payable to the Successful Bidder, the Successful Bidder shall remain liable after termination, and the Town may take all steps necessary to collect damages.

TOWN OF RIVERHEAD

TOWN WIDE PRINTING 2018

SEE ATTACHED SHEETS FOR TOWN WIDE PRINTING SPECIFICATIONS

EMAIL ADDRESS: _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

COMPANY TELEPHONE: _____

COMPANY EMAIL: _____

COMPANY CONTACT: _____

I/WE FULLY UNDERSTAND THAT THE ACCEPTANCE OF THIS BID IS SUBJECT TO THE PROVISIONS OF SECTION 103a AND 103b OF THE GENERAL MUNICIPAL LAW.

SIGNED: _____

PRINTED NAME: _____

TITLE: _____

DATE: _____

NOTE: ITEMS BID MAY BE AWARDED SEPARATELY.

DISCOUNTS

If Bidder allows cash discount, it shall be as follows:

For payment within 15 days of delivery and/or receipt of voucher. _____% Discount

For payment within 30 days of delivery and/or receipt of voucher. _____% Discount
(Discount less than 1% will not be considered.)

Discounts will be considered but will not be the determining factor for bid awards.

THIS BID AWARD SHALL BE IN EFFECT FOR 1 YEAR FROM DATE OF AWARD.

THE TOWN HAS THE RIGHT TO EXTEND FOR AN ADDITIONAL ONE YEAR PERIOD OR ANY

SUCH LESSER AMOUNT AS MUTUALLY AGREED UPON BY AND BETWEEN TOWN AND

VENDOR SUBJECT TO IDENTICAL TERMS AND CONDITIONS.

I/WE FULLY UNDERSTAND THAT THE ACCEPTANCE OF THIS BID IS SUBJECT TO THE PROVISIONS OF SECTION 103A AND 103B OF THE GENERAL MUNICIPAL LAW.

NAME OF AGENT/DEALER

ADDRESS

CITY, STATE, ZIP CODE

CONTACT PERSON

DATE

SIGNATURE OF DEALER/AGENT

NON-COLLUSIVE CERTIFICATE

(MUST BE COMPLETED, SIGNED, NOTARIZED AND RETURNED WITH BID)

UNDER PENALTIES OF PERJURY:

_____ (BIDDER), BEING DULY SWORN, DEPOSES AND SAYS:

- A) This bid or proposal has been independently arrived at without collusion with any other bidder or with any competitor or potential competitor;
- B) This bid or proposal has not knowingly been disclosed, prior to the opening of bids or proposals for this project, to any other bidder, competitor, or potential competitor;
- C) No attempt has been made or will be made to induce any other person, partnership, or corporation to submit or not to submit a bid or proposal;
- D) The person signing this bid or proposal certifies that he has been fully informed regarding the accuracy of the statements contained in this certification, and under penalties of perjury, affirms the truth thereof, such penalties being applicable to the bidder as the person signing on its behalf; and
- E) That the attached hereto (if a corporate bidder) is a certified copy of a resolution authorizing the execution of this certificate by the signatory of this bid or proposal on behalf of the corporate bidder.

Corporation: _____
(PRINT CORPORATION NAME)

By: _____
(SIGNATURE)

(TITLE)

Address: _____

Sworn to before me this _____
Day of _____, 20____

NOTARY PUBLIC

IRAN DIVESTMENT ACT CERTIFICATION

As a result of the Iran Divestment Act of 2012 (Act), Chapter 1 of the 2012 Laws of New York, a new provision has been added to the State Finance Law (SFL), § 165-a, effective April 12, 2012. Under the Act, the Commissioner of the Office of General Services (OGS) will be developing a list (prohibited entities list) of “persons” who are engaged in “investment activities in Iran” (both are defined terms in the law). Pursuant to SFL § 165-a(3)(b), the initial list is expected to be issued no later than 120 days after the Act’s effective date, at which time it will be posted on the OGS website.

By submitting a bid in response to this solicitation or by assuming the responsibility of a Contract awarded hereunder, Bidder/Contractor (or any assignee) certifies that once the prohibited entities list is posted on the OGS website, it will not utilize on such Contract any subcontractor that is identified on the prohibited entities list.

Additionally, Bidder/Contractor is advised that once the list is posted on the OGS website, any Contractor seeking to renew or extend a Contract or assume the responsibility of a Contract awarded in response to the solicitation, must certify at the time the Contract is renewed, extended or assigned that it is not included on the prohibited entities list.

During the term of the Contract, should the TOWN OF RIVERHEAD receive information that a person is in violation of the above-referenced certification, the TOWN OF RIVERHEAD will offer the person an opportunity to respond. If the person fails to demonstrate that it has ceased its engagement in the investment which is in violation of the Act within 90 days after the determination of such violation, then the TOWN OF RIVERHEAD shall take such action as may be appropriate including, but not limited to, imposing sanctions, seeking compliance, recovering damages, or declaring the Contractor in default.

The TOWN OF RIVERHEAD reserves the right to reject any bid or request for assignment for an entity that appears on the prohibited entities list prior to the award of a contract, and to pursue a responsibility review with respect to any entity that is awarded a contract and appears on the prohibited entities list after contract award.

Signature: _____

Print Name: _____

Title: _____

Company Name: _____

Date: _____

After the award of the bid, the placing of an order by the Purchasing Agent of the Town of Riverhead, with the bidder for the supplies and/or services herein described, shall be deemed an acceptance of this proposal, and shall constitute a contract between the Town of Riverhead, and the bidder for supplying the supplies and/or services herein described in accordance with the terms of this proposal and at the prices named herein.

AUTHORIZED SIGNATURE _____

PRINT NAME _____

TITLE _____

DATE _____

ACKNOWLEDGMENT

STATE OF NEW YORK, COUNTY OF _____) ss.:

On the ____ day of _____ in the year 2018 before me, the undersigned, personally appeared, _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

NOTARY PUBLIC

NON-BIDDER'S RESPONSE

For purposes of facilitating your firm's response to our invitation to bid, the Town of Riverhead is interested in ascertaining reasons for prospective bidders' failure to respond to invitations to bid. If your firm is not responding to this bid, please indicate the reason(s) by checking any appropriate item(s) below and returning this form to the Town of Riverhead Purchasing Department at the above address.

We are not responding to this invitation for bid for the following reason(s):

Items or materials requested not manufactured by us or not available to our company.

Our items and/or materials do not meet specifications.

Specifications not clearly understood or applicable (too vague, too rigid, etc.)

Quantities too small.

Insufficient time allowed for preparation of bid.

Incorrect address used.

Correct mailing address is:

Our branch/division handles this type of bid.

Correct name and mailing address is:

Other reason(s):

ITEM #	DESCRIPTION	QUANTITY PER ORDER	TOTAL
1.	BUSINESS CARDS – 65 LB. 3-1/2” x 2” WHITE W/BLUE LETTERING“RIVERHEAD POLICE DEPARTMENT”	500-1000	
2.	BUSINESS CARDS , 65 LB. 3-1/2” x 2”; FIRE MARSHAL SEAL; COLORED SEAL, RED, YELLOW, BLUE GREEN	500-1000	
3.	BUSINESS CARDS; BLACK LETTERING, W/WHITE CARDSTOCK 65 LBS., GOLD RAISED POLICE DEPARTMENT DETECTIVE SEAL	500-1000	
4.	SAME AS ABOVE WITHOUT RAISED LETTERING	500-1000	
5.	BUSINESS CARDS, RIVERHEAD POLICE DEPARTMENT; COPE DIVISION; SEAL WHITE W/BLACK LETTERING; TOWN OF RIVERHEAD SEAL; CARDSTOCK	500-1000	
6.	BUSINESS CARDS – 65 LBS.; 3-1/2 X 2”; TOWN OF RIVERHEAD SEAL; CHAPERONE CARDS FOR RECREATION DEPARTMENT	500-1000	
7.	WHITE WITH BLUE LETTERING, WHITE GLOSS CARDSTOCK; 4 COLOR; TOWN OF RIVERHEAD SEAL; BLUE, GREEN, YELLOW, WHITE.	500-1000	
8.	NCR FORMS; 3 PART; WHITE, YELLOW GREEN; 8-1/2 X 11; TOWN OF RIVERHEAD POLICE DEPARTMENT IMPOUND RECEIPT’ (NUMBERED) SEE ATTACHED; 2 PER PAGE; 52 PAGES PER BOOK		
9.	NCR FORMS; 3 PART; WHITE; YELLOW, PINK, 5-1/2 X 8-1/2; 50 PER BOOK, “ ACCIDENT EXCHANGE INFORMATION ” SEE ATTACHED	500	
10.	PADS, BLUE MEMO; INTER OFFICE COMMUNICATION ”; 50 PER BOOK, ATTACHED	2000	
11.	GOLD FOLDER; SIZE 11-3/4 X 9-1/2; “ DETECTIVE CASE FOLDER ”; BLACK INK	500	
12.	GOLD FOLDER; SIZE 11-3/4” X 9-1/2”; “ DWI CASE FOLDER ”; BLACK INK	1000	

ITEM #	DESCRIPTION	QUANTITY PER ORDER	TOTAL
13.	"MEMO BOOK PAGES" ; WHITE W/BLACK INK; 7000 EACH; SAMPLE ATTACHED	500	
14.	PADS; RECEIPT; RIVERHEAD POLICE DETECTIVE DIVISION " NUMBERED, SAMPLE ATTACHED; NCR WHITE, YELLOW, PINK; 50 PER BOOK	1000	
15.	ARREST CARDS ; DOUBLE SIDED; WHITE W/BLACK INK; 1000 CARD STOCK; 5X8	1500	
16.	"EXCUSED FROM DUTY" FORM; TOWN OF RIVERHEAD POLICE DEPARTMENT	1000	
17.	PADS; NCR 5 PLY; WHITE, GREEN, YELLOW, PINK, GOLD TOWN OF RIVERHEAD "POST ARRAIGNMENT CASH BAIL RECEIPT" ; NUMBERED, BLACK INK; 25 PER BOOK	5000	
18.	PADS, NCR 3 PLY; WHITE, PINK, YELLOW POLICE DEPARTMENT, TOWN OF RIVERHEAD, NY "DESK APPEARANCE TICKET" ; NUMBERED, BLACK INK; 50 PER BOOK	500	
19.	NCR 4 PLY; GREEN, YELLOW, PINK, GOLD; POLICE DEPARTMENT, TOWN OF RIVERHEAD, NY "PRE ARRAIGNMENT CASH BAIL RECEIPT" ; NUMBERED, BLACK INK; 25 PER BOOK	1000	
20.	8-1/2 x 14 "TSLE&D CONTROL SHEET" ; BLACK INK; 500 SINGLE SHEETS; 20# PAPER	1500	
21.	8-1/2 x 14 "TOWN SUMMONS CONTROL SHEET" ; BLACK INK; 500 SINGLE SHEETS; 20# PAPER	2000	
22.	BUILDING DEPT. INSPECTION FORMS "; 8-1/2 X 11 NCR; 2 FORMS WHICH WOULD NEED TO BE CUT OR SEPARABLE DOWN THE MIDDLE OR CONVERSELY 1 FORM	500	
23.	24" x 36" POSTER BOARD "OFFICIAL NOTICE TOWN OF RIVERHEAD VARIANCE" ; BLACK INK	1000	
24.	24" x 36" POSTER BOARD "OFFICIAL NOTICE TOWN OF RIVERHEAD SITE PLAN" ; BLACK INK	500	

ITEM #	DESCRIPTION	QUANTITY PER ORDER	TOTAL
25.	24" x 36" POSTER BOARD " OFFICIAL NOTICE TOWN OF RIVERHEAD SUB DIVISION "; BLACK INK	1000	
26.	NCR 3 PLY; WHITE, YELLOW, PINK; CODE ENFORCEMENT DIVISION, TOWN OF RIVERHEAD " CONSENT TO SEARCH "; BLACK INK	500	
27.	NCR 3 PLY; WHITE, YELLOW, PINK; OFFICE OF THE TOWN ATTORNEY/INVESTIGATION UNIT; " COMPLAINT FORM "; BLACK INK	500	
28.	NCR 2 PLY; WHITE, YELLOW OFFICE OF THE TOWN ATTORNEY/INVESTIGATION UNIT " RENTAL APPLICATION FLOOR PLAN REVIEW "; BLACK INK	500	
29A.	NCR 2 PLY WHITE ON WHITE; " TOWN OF RIVERHEAD-INVESTIGATION UNIT HOUSING INSPECTION REPORT "; 2 SIDED; BLACK & RED INK	500	
29B.	NCR 2 PLY; WHITE ON WHITE; " INVESTIGATION UNIT HOUSING INPECTION REPORT ; TWO SIDED; BLACK & RED INK; BACK SIDE	500	
30A.	NCR 2 PLY; WHITE ON WHITE; " INTERIOR INSPECTION SHEET "; TWO SIDED; BLACK & RED INK	500	
30B	NCR 2 PLY; WHITE ON WHITE; " INTERIOR INSPECTION SHEET "; TWO SIDED; BLACK & RED INK; BACK PAGE	500	
31.	8-1/2 X 11 " TRI-FOLD TAX VOUCHERS "; INDICIA PRINTED ON DOCUMENT; "IMPORTANT TAX INFORMATION"; TOWN OF RIVERHEAD SEAL WATER-MARKED ON VOUCHER.	6000	
32.	8-1/2 X 11 " TRI-FOLD VOUCHERS; PAYROLL/WATER BILLS "; INDICIA PRINTED ON DOCUMENT; TOWN OF RIVERHEAD SEAL; WATER-MARKED	60,000	

ITEM #	DESCRIPTION	QUANTITY PER ORDER	TOTAL
33.	8-1/2 X 11 “TOWN OF RIVERHEAD OFFICIAL CLAIM VOUCHER” ; RED & BLACK INK		
34.	TOWN OF RIVERHEAD-SANITATION DEPARTMENT “REASON FOR NO PICKUP” ; YELLOW STICKER; 4-1/2 X 5-1/2; 1000	500	
35.	TOWN OF RIVERHEAD “SOLID WASTE PERMIT” ; RED STICKER W/WHITE LETTERING; 3-1/2 X 4-1/2	500	
36.	TOWN OF RIVERHEAD “RESIDENTIAL YARD WASTE	500	
37.	8-1/2 x 11 “RIVERHEAD RECYCLES” ; WHITE STICKER W/BLUE LETTERING AND RECYCLE LOGO	500	
38.	“WATER ANNUAL REPORT”	250	
39.	“WATER DISTRICT NEWSLETTER”	250	
40.	“RIVERHEAD RECREATION DEPT. BEACH PERMITS”		
a.	“VEHICLE PARKING PERMIT DECALS” WHITE VOID MYLAR DECALS STAPLED IN BOOKS OF 10 WITH FRONT & BACK COVERS	9500	
b.	“BOAT LAUNCH PERMIT DECALS” WITH VOID MYLAR DECALS STAPLED IN BOOKS OF 10 WITH FRONT & BACK COVERS	1000	
c.	“4 X 4 PERMIT DECALS” WHITE VOID MYLAR DECALS STAPLED IN BOOKS OF 10 WITH FRONT & BACK COVERS.	800	
d.	“EAST CREEK DOCKING FACILITY DECALS” WHITE MYLAR DECALS – NOT IN BOOKS	150	
e.	“EAST CREEK DAILY BOAT RAMP HANG TAGS” -BOTH SIZE 3.25” X 7” 10 PT. CARDSTOCK HANG TAGS WITH A HOLOGRAM AREA STAPLED IN BOOKS OF 10 WITH FRONT & BACK COVERS	1500	
f.	“NIGHT FISHING PERMIT HANG TAGS” - SIZE 2.75” X 6” 20 MIL COMPOSITE (DURABLE HANG TAG MATERIAL) WITH ABRASIVE INK WRITE-IN AREAS (NOT IN BOOKS)	150	
g.	“SPECIAL EVENT PERMIT HANG TAGS” - SIZE 2.75” X 6” 10 PT. CARDSTOCK HANG TAGS – NOT IN BOOKS	150	

ITEM #	DESCRIPTION	QUANTITY PER ORDER	TOTAL
h.	“EAST CREEK DOCKING FACILITY HANG TAGS” (GUEST PASS)- SIZE 2.75” X 6” 20 MIL COMPOSITE (DURABLE HANG TAG MATERIAL) WITH ABRASIVE INK WRITE-IN AREAS (NOT IN BOOKS)	200	
43.	“BEACH ATTENDANT END OF SEASON EVALUATION FORM” ;3 PLY; NCR WHITE, YELLOW, PINK; 8-1/2” X 14”	500	
44.	“WATER SAFETY INSTRUCTOR EVALUATION FORM” ; 3 PLY NCR; WHITE, YELLOW, PINK; 8-1/2”X 14”	500	
45.	“INDIVIDUAL ATTENDANT DEPOSIT RECORD” ; 4 PLY NCR; WHITE, YELLOW, PINK, GOLD; 8-1/2” X 5-1/2”; 2 ON A PAGE	500	
46.	“LIFEGUARD END OF SEASON EVALUATION FORM” ; 3 PLY NCR; WHITE YELLOW, PINK; 8-1/2” X 14”.	500	

After the award of the bid, the placing of an order by the Purchasing Agent of the Town of Riverhead, with the bidder for the supplies and/or services herein described, shall be deemed an acceptance of this proposal, and shall constitute a contract between the Town of Riverhead, and the bidder for supplying the supplies and/or services herein described in accordance with the terms of this proposal and at the prices named herein.

AUTHORIZED SIGNATURE _____

PRINT NAME _____

TITLE _____

DATE _____

3-1/2" X 2"

BUSINESS CARD



RIVERHEAD POLICE DEPARTMENT

210 Howell Avenue Riverhead, NY 11901

Central Records: (631) 727-4500

Mon - Fri 9:00 A.M. - 4:00 P.M.

CC# _____

P.O. Name: _____

Date: _____

Incident Type: _____

ITEM #1

BUSINESS CARD

3-1/2" X 2"

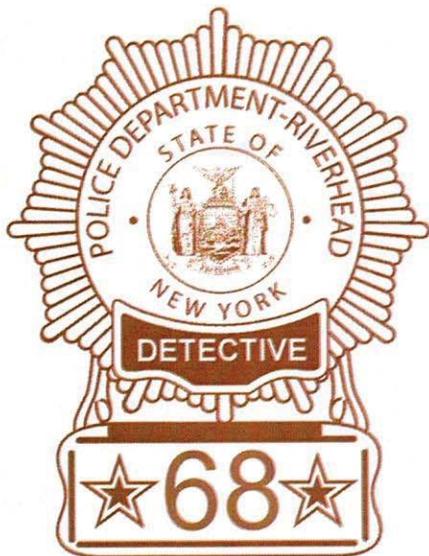


Andrew Smith
Fire Marshal

Town of Riverhead
201 Howell Avenue
Riverhead, New York 11901

Office (631) 727-3200 Ext. 266
Office Fax (631) 727-3370
smitha@townofriverheadny.gov

ITEM #2



Patrick Waski

POLICE DEPARTMENT
TOWN OF RIVERHEAD

FAX: (631) 727-0304

TEL: (631) 727-4500 x321

210 HOWELL AVENUE

RIVERHEAD, NY 11901

EMAIL: WASKI@TOWNOFRIVERHEADNY.GOV

ITEM #3



RIVERHEAD POLICE DEPARTMENT

Community Oriented Police Enforcement

COPE DIVISION

210 Howell Avenue Riverhead, NY 11901

P.O. Name _____

Office: (631) 727-4500 Ext. _____ CC# _____

Email: _____ @townofriverheadny.gov

TIPS HOTLINE: (631) 727-3333 ALL CALLS KEPT CONFIDENTIAL

ITEM #4



Riverhead Recreation Department

Bus Trip Chaperone:

Cell (631) 599-1804

Office (631) 727-5744

Blue Ink
3 1/2" x 2"

ITEM #5



Diane M. Wilhelm, RMC
Town Clerk

Marriage Officer • Registrar • Records Management Officer

Town of Riverhead
200 Howell Avenue
Riverhead, NY 11901

phone (631) 727-3200 Ext 260
fax (631) 208-4034
email:



OFFICE OF THE TOWN ATTORNEY

LAURA J. CALAMITA
PARALEGAL

Town of Riverhead
200 Howell Avenue
Riverhead, N.Y. 11901

Office: (631) 727-3200 Ext. 215
Fax: (631) 727-6152
Email: calamita@townofriverheadny.gov

ITEM #6

TOWN OF RIVERHEAD POLICE DEPARTMENT
IMPOUND RECEIPT

CC# _____

No. 5434

DATE: _____, 20____

Received of _____ \$ _____

Address _____

_____ DOLLARS

Release of _____

Vehicle Identification Number: _____

FOR OFFICIAL USE

Fee for Towing: _____

Fee for Storage: _____

Other: _____

Total: \$ _____

_____ TITLE

BY: _____

TOWN OF RIVERHEAD POLICE DEPARTMENT
IMPOUND RECEIPT

CC# _____

No. 5435

DATE: _____, 20____

Received of _____ \$ _____

Address _____

_____ DOLLARS

Release of _____

Vehicle Identification Number: _____

FOR OFFICIAL USE

Fee for Towing: _____

Fee for Storage: _____

Other: _____

Total: \$ _____

_____ TITLE

BY: _____

ITEM #7

CC#:

INCIDENT:

DATE:

DET:

CASE STATUS:

ACTIVE

PENDING

CBA

EXC. CLEARED

CLOSED

DATE:

DEF:

DOB:

IB#

ADDRESS:

DEF:

JOB:

IB#

ADDRESS:

I/L:

HAMLET:

			REPORTS		RAPE VICTIMS
			FIELD REPORT		SEX OFFENSE INFO. QUESTIONNAIRE
			OFFENSE/BURGLARY/STOLEN VEH.		FAMILY OFFENSE ASSISTANCE FORM
			MVA/DEATH REPORT		SEARCH WARRANT/VOL. CONSENT FORM
			SUPPLEMENTAL REPORT		FDR TEST FOR DEF. (if weapon was discharged)
			STATEMENTS/ORAL ADMISSIONS		
			AFFIDAVITS		IMPOUNDED VEHICLES
			ARREST REPORTS		IMPOUND INVOICE
			FELONY/MISDEMEANORS COMPLAINT		RELEASE/HOLD IMPOUND VEHICLE
			FILE 15		
			GRAND JURY NOTICE		CONNECTED CC#s
			TT'S (FEL. w/DPF OR D.W.)		
			w/30 min PROPERTY w/ SERIAL #)		
			PHOTO COVER SHEET		
			PHOTOS		
			CC CARD		
			PROPERTY INVOICE		REMARKS:

#19

CC#

Defendant Name:

Date:

CASE STATUS: Active Pending Cleared By Arrest Exceptionally Cleared

Closed Reason _____

Arresting Officer _____

PROPERTY BUREAU EVIDENCE Yes No

CONTENTS WITHIN		(Check)	(Check)	(Che
Arrest Report			DMV Computer Print-Out	Offense Report
Alcoholic Influence Report			DWI Information	Report of Refusal
Breathalyzer Check List			Information	Statements
Breathalyzer Test Results			Information	Supplemental Report
Central Complaint Card (copy)			Information	T S L E & D Copies
Chemical Test Kit			Field Report	Misc./Other
DMV Record of Convictions			MVA Report	Alcohol Related License Suspension/Revocation

P.A. INFORMATION

A.D.A. Assigned _____

Grand Jury _____

Date _____ No Yes

Day of Week _____ BAC _____

Time of Day _____ Given/Offered Yes No

Age _____ Refusal Yes No

BAC Result: _____ %

Technician _____

A.L.E.R.T Yes _____ No _____

Refusal _____

Charge 1192.1 _____

1192.2 _____

1192.2 & 1992.3 _____

1192.3 _____

ITEM #

Receipt
RIVERHEAD POLICE DEPARTMENT

CC#: _____ DATE: _____

RECEIVED FROM: _____

ADDRESS: _____

PHONE #: _____ INCIDENT: _____

DESCRIPTION OF ITEM(S)

OFFICER: _____

ITEM #13

IB # _____ SID # _____

Alias _____

Address _____

Sex _____ DOB _____ Height _____ Weight _____ Hair _____

Eyes _____ Build _____ Complexion _____ Scar/Moles _____

Teeth _____ Race _____ Tattoo _____

Occupation _____ Employer _____

Birthplace _____ Citizen _____ Social Status _____

SS # _____ Religion _____ Education _____ yrs

1 Crime _____ Section _____ Date _____

Date Disposition _____ Magistrate _____

Disposition _____

2 Crime _____ Section _____ Date _____

Date Disposition _____ Magistrate _____

Disposition _____

3 Crime _____ Section _____ Date _____

Date Disposition _____ Magistrate _____

Disposition _____

4 Crime _____ Section _____ Date _____

Date Disposition _____ Magistrate _____

Disposition _____

5 Crime _____ Section _____ Date _____

Date Disposition _____ Magistrate _____

Disposition _____

6 Crime _____ Section _____ Date _____

Date Disposition _____ Magistrate _____

Disposition _____

7 Crime _____ Section _____ Date _____

Date Disposition _____ Magistrate _____

Disposition _____

8 Crime _____ Section _____ Date _____

Date Disposition _____ Magistrate _____

Disposition _____

9 Crime _____ Section _____ Date _____

Date Disposition _____ Magistrate _____

Disposition _____

ITEM #14

**TOWN OF RIVERHEAD POLICE DEPARTMENT
EXCUSED FROM DUTY FORM**

Last Name	First Name	Rank	Ser. #
-----------	------------	------	--------

Requests to be excused from duty on
(List each date separately)

Date	Tour	Charged as (See Below)

1. Personal Leave (PL) For personal business which cannot be performed or attended to by the Officer during time other than the regularly scheduled tour of duty of the Officer.

2. SOA/PBA Business (EA)

3. Vacation (VL)

4. Death in Family (DF)

Name and relationship of family member: _____

Employee Signature		Date
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Supervisor Signature
		Date

ITEM #15

TOWN OF RIVERHEAD, NY
POST-ARRAIGNMENT CASH BAIL RECEIPT
 PDTR-1079

CASH RECEIPT NO.
№ 1902

PRINT FIRMLY & LEGIBLY

DISTRIBUTION: WHITE/SURETY, BLUE/PROPERTY - RECORDS OFFICER, GREEN & CANARY/COURTS SECTION, PINK/CENTRAL RECORDS,
 GOLDEN ROD/STAYS IN PAD, GREEN/RECEIPTED COPY RETURNED TO POLICE DEPARTMENT BY COURT

FIRST NAME	M.I.	LAST NAME
CHARGE: LAW SECTION	COURT	COURT RETURN DATE

PEOPLE VS. DEFENDANT

I, _____ Defendant, residing at _____ of _____ hereby undertake and agree that I will appear and answer to the above indicated criminal charge at The Local Criminal Court in the Town of Riverhead, 210 Howell Avenue, Riverhead, New York on the _____ day of _____ 19 _____ at _____ o'clock in the forenoon. Cash Bail of: _____ dollars. (\$ _____), as fixed by The Local Criminal Court, is deposited herewith.

SIGNATURE:

FIRST NAME	LAST NAME	DATE:
RESIDENTIAL ADDRESS:	STREET	OCCUPATION
NO.	VILLAGE/TOWN	STATE
ZIP CODE	AMOUNT OF BAIL POSTED	WRITTEN AMOUNT
		DOLLAR

I, _____ affirm that I am the owner of the cash bail deposit described in the forgoing undertaking, and is authorized to, and hereby does, pledge and deposit the same, in the above indicated amount, as security for the appearance of the defendant to answer the criminal charge made against said defendant.

SIGNATURE

WARNING: CASH BAIL BECOMES FORFEIT UPON FAILURE OF DEFENDANT TO APPEAR AS DIRECTED AND AGREED.

RECEIPT OF BAIL

SIGNATURE OF PERSON RECEIVING BAIL: _____ The Clerk of The _____ Court acknowledges the receipt of cash bail in the amount of _____ dollars as indicated above.

DATE: _____ Date: _____ Signature Court Section: _____

ITEM #16

**POLICE DEPARTMENT, TOWN OF RIVERHEAD, N.Y.
DESK APPEARANCE TICKET**

WHITE - DEFENDANT, PINK - COURT COPY, YELLOW - AUDIT COPY

COMMAND	ARREST NO.	CENTRAL COMPLAINT NO.
AMT. OF BAIL	CASH BAIL RECEIPT NO.	APPEARANCE TICKET NO. 7655

WARRANT NUMBERS	ONE	TWO	THREE	FOUR	FIVE
VIOLATION NUMBERS					
DEFENDANT(S) NAME	ADDRESS				
	D.C.B.				

THE PEOPLE OF THE STATE OF NEW YORK VS:

NAME AND ADDRESS

You are hereby notified to appear in the Local Criminal Court, 210 Howell Ave., Riverhead, N.Y. or the

Court, address

on the _____ day of _____, 20____ at _____ o'clock in the _____ noon, to answer a criminal charge made against you by _____ for violation(s) of

1.	\$			
2.	\$	3.	\$	
4.	\$	5.	\$	
AUTHORIZED BY (DESK OFFICER)	DATE	ISSUED BY	RANK/SHEILD	SQUAD
				CONTA.

Should you fail to appear for the offense(s) charged above, in addition to a warrant being issued for your arrest, you may be charged with an additional violation of the Penal Law which upon conviction may subject you to a fine, imprisonment or both. Also, any cash bail posted hereunder shall be forfeited should you fail to appear at the above time and place.

NOTICE: YOU ARE ADVISED TO CONSULT AN ATTORNEY AS SOON AS POSSIBLE REGARDING THIS MATTER.

ACKNOWLEDGEMENT OF DEFENDANT: I, the undersigned do hereby acknowledge receipt of the above appearance ticket and do agree to appear as indicated above.

SIGNATURE OF DEFENDANT

TIME

DATE

ITEM #17

POLICE DEPARTMENT, TOWN OF RIVERHEAD, N.Y. CASH BAIL RECEIPT NO.

PRE-ARRAIGNMENT CASH BAIL RECEIPT

4706

PDTR-1078

PRINT FIRMLY & LEGIBLY

COMMAND	DATE	C.C. NO.
APPEARANCE TICKET #	() -	

DISTRIBUTION: WHITE/SURETY, GREEN & CANARY/COURTS SECTION, PINK/CENTRAL RECORDS, GOLDEN ROD/STAYS IN PAD. GREEN/RECEIPTED COPY RETURNED TO POLICE DEPARTMENT BY COURT.

PEOPLE VS. DEFENDANT	FIRST NAME	M.I.	LAST NAME
	CHARGE: LAW SECTION	COURT	COURT RETURN DATE

PERSON POSTING BAIL	NAME: FIRST	LAST	OCCUPATION
	RESIDENTIAL ADDRESS:	NO.	STREET
		VILLAGE/TOWN	STATE
			ZIP CODE

AMOUNT OF BAIL POSTED	WRITTEN AMOUNT	DOLLARS
-----------------------	----------------	---------

WARNING: I ACKNOWLEDGE THAT CASH BAIL BECOMES FORFEIT UPON FAILURE OF DEFENDANT TO COMPLY WITH THE DIRECTIONS OF THE APPEARANCE TICKET

SIGNATURE OF PERSON POSTING BAIL DATE

RECEIPT OF BAIL

The Clerk of The _____ Court
 acknowledges the receipt of cash bail in the amount of _____
 as indicated above.

DESK OFFICER	SIGNATURE	RANK	SHIELD	AUTHORIZED BY	RANK	SHIELD
				DATE: _____ Signature Court Section _____		

ITEM #18



**TOWN OF RIVERHEAD BUILDING DEPARTMENT
201 HOWELL AVE, RIVERHEAD NY 11901**

ADDRESS	SCTM #	DATE REQUESTED
CROSS STREET	INSPECTOR REQUESTED	PERMIT NUMBER
OWNER	CONTACT NUMBER/PERSON	INSPECTION REQUESTED

ISSUES

NEXT INSPECTION			APPROVED NOT APPROVED	ELECTRIC
				PLUMBING
FILED BY	DATE FILED	LEFT ON PREMISES	INSPECTOR	DATE
		TO OWNER		
		TO CONTRACTOR		
		BY MAIL		



**TOWN OF RIVERHEAD BUILDING DEPARTMENT
201 HOWELL AVE, RIVERHEAD NY 11901**

ADDRESS	SCTM #	DATE REQUESTED
CROSS STREET	INSPECTOR REQUESTED	PERMIT NUMBER
OWNER	CONTACT NUMBER/PERSON	INSPECTION REQUESTED

ISSUES

NEXT INSPECTION			APPROVED NOT APPROVED	ELECTRIC
				PLUMBING
FILED BY	DATE FILED	LEFT ON PREMISES	INSPECTOR	DATE
		TO OWNER		
		TO CONTRACTOR		
		BY MAIL		

ITEM #21

OFFICIAL NOTICE TOWN OF RIVERHEAD

An Application Has Been Made For

VARIANCE

In The Town of Riverhead concerning
this property

A Public Hearing Will Be Held By
**THE ZONING BOARD
OF APPEALS**

On _____

at _____ P.M.

**IN THE RIVERHEAD TOWN HALL
300 HOWELL AVENUE • RIVERHEAD, NY 11901
TO CONSIDER THIS
AND OTHER APPLICATIONS**

THIS NOTICE IS POSTED IN ACCORDANCE WITH
THE TOWN OF RIVERHEAD OFFICIAL ZONING MAP WITH
THE CODE OF THE TOWN OF RIVERHEAD

ITEM #22

26

OFFICIAL NOTICE TOWN OF RIVERHEAD

An Application Has Been Made For A

SITE PLAN

In The Town Of Riverhead Concerning
This Property

A Public Hearing Will Be Held By

THE PLANNING BOARD

On _____
Month Day Year

At _____ P.M.

AT THE RIVERHEAD TOWN HALL
TO HEAR ALL PERSONS UPON THE
MERITS OF THIS APPLICATION.

This Notice Is Posted By Order Of
The Town Of Riverhead In Compliance With
The Zoning Ordinance of the Town of Riverhead

ITEM #23

25

OFFICIAL NOTICE TOWN OF RIVERHEAD

An Application Has Been Made For

SUBDIVISION

In the Town of Riverhead concerning
this property

A Public Hearing Will Be Held By

THE PLANNING BOARD

On _____ ITEM #24
MONTH DAY YEAR

at _____ P.M.

IN THE RIVERHEAD TOWN HALL
TO CONSIDER THIS
AND OTHER APPLICATIONS

THIS NOTICE IS POSTED BY ORDER OF THE
TOWN OF RIVERHEAD IN COMPLIANCE WITH
THE CODE OF THE TOWN OF RIVERHEAD



TOWN OF RIVERHEAD

Office of the Town Attorney / Code Enforcement Division

200 HOWELL AVENUE, RIVERHEAD, NEW YORK 11901-2596

CONSENT TO SEARCH

I, _____, on this ____ day of _____, 20__ having been informed of my constitutional right not to have a search made of the premises herein without a search warrant, and of my right to refuse consent to such search, I hereby authorize Code Enforcement Official(s) / Inspectors / Investigators: _____ (with the assistance of the Riverhead Town Police Department) as employees of the Riverhead Town Attorney's Office, and in their employment capacity with the Town of Riverhead, to enter the exterior property and the interior of the residence designated as _____ located in the Township of Riverhead, New York for the purpose of an inspection pursuant to the Code of the Town of Riverhead, the New York State Building and Fire Prevention Code and New York State Property Maintenance Code and to photograph, video tape and/or make official reports of any evidence found as a result of the search.

I also state on this ____ day of _____, 20__ that I am the owner or tenant in control of the above referenced residence. I also state and acknowledge that I have read and understand this consent form. I am giving this written permission to the above named Code Enforcement Official(s) / Inspectors / Investigators, voluntarily and without threats or promises of any kind.

Sign

Witness

CONSENTIMIENTO DE BUSCAR

Yo, _____, durante este día ____ de _____, 20__ que han sido informados de mi derecho constitucional de no hacer hacer una búsqueda del local aquí sin un mandamiento de registro, y de mi derecho de rechazar consentimiento a tal búsqueda, por este medio autorizo al Funcionario(s) de Imposición de Código / Inspectores / Investigadores: _____ (con la ayuda del Departamento de Policía de Ciudad Riverhead) como empleados de la Procuraduría de Ciudad Riverhead, y en su capacidad de empleo con la Ciudad de Riverhead, para entrar en la propiedad exterior y el interior de la residencia designada como _____ localizado en el Municipio de Riverhead, Nueva York para una inspección de acuerdo con el Código de la Ciudad de Riverhead, el Estado de Nueva York que Construye un y Código de Prevención de Fuego y Código de Mantenimiento de Propiedad de Estado de Nueva York y fotografiar, videocinta y/o hacer informes oficiales de cualquier prueba encontrada a consecuencia de la búsqueda.

También declaro durante este día ____ de _____, 20__ que soy el dueño o el arrendatario en el control de la residencia arriba mencionada. También declaro durante y reconozco que he leído y he entendido esta forma del consentimiento. Doy este permiso escrito al encima de Oficial(s) denominado de Imposición de Código / Inspectores / Investigadores voluntariamente y sin amenazas o promesas de cualquier clase.

ITEM #25

Firma

Testigo



TOWN OF RIVERHEAD
Office of the Town Attorney/Investigation Unit

OFFICE USE ONLY	
Complaint #	_____
SCTM#	____ - ____ - ____
Date Returned	_____

COMPLAINT FORM
(Please print or type all entries)

THIS FORM IS BEING PRESENTED TO YOU IN RESPONSE TO YOUR REQUEST FOR ASSISTANCE FROM THE RIVERHEAD TOWN ATTORNEY'S OFFICE, INVESTIGATIONS UNIT, CONCERNING ALLEGED VIOLATIONS OF THE RIVERHEAD TOWN CODE. YOU MAY INCLUDE ANY DOCUMENTATION OR PHOTOS YOU MAY WISH TO HAVE REVIEWED REGARDING THIS COMPLAINT.

ALL INFORMATION, INCLUDING SIGNATURE MUST BE PROVIDED FOR ON THIS FORM

FUTURE INQUIRES MUST BE DONE IN WRITING INCLUDING THE ABOVE MENTIONED COMPLAINT NUMBER. PLEASE FORWARD INQUIRES TO - RIVERHEAD TOWN ATTORNEY'S OFFICE / INVESTIGATION UNIT, 200 HOWELL AVENUE, RIVERHEAD, NY 11901. DUE TO CONFIDENTIALITY TELEPHONE INQUIRES REGARDING THIS MATTER WILL NOT BE PROVIDED.

THIS FORM MUST BE COMPLETED AND RECEIVED BY OUR OFFICE WITHIN 30 DAYS OF _____. THE ORIGINAL WHITE COPY MUST BE RETURNED. NO PHOTOCOPIYS OR FAX COPIES OF THIS FORM WILL BE ACCEPTED.

ALLEGED VIOLATION ADDRESS

Street Number _____ Street Name _____

Hamlet _____ Town of Riverhead, New York, Zip Code _____

Closest Cross Street _____

VIOLATOR NAME (If known) _____

BRIEF DESCRIPTION OF COMPLAINT _____

HAVE ANY PREVIOUS COMPLAINTS BEEN MADE? UNKNOWN NO YES - DATE MADE _____

IS THE LOCATION OF THE COMPLAINT OCCUPIED BY THE OWNER? UNKNOWN YES NO

OWNER NAME (if known) _____ ADDRESS _____

I AFFIRM THAT ALL INFORMATION PROVIDED IN THIS COMPLAINT IS TRUE AND FACTUAL

YOUR SIGNATURE _____ PRINT NAME _____ DATE _____

PLEASE RETURN ORIGINAL WHITE COPY IN THE PROVIDED ENVELOPE AND RETAIN YELLOW COPY FOR YOUR RECORDS

Request by

Name: _____

Telephone Number(s) _____

Address: _____

ITEM #26



TOWN OF RIVERHEAD

OFFICE OF THE TOWN ATTORNEY / INVESTIGATION UNIT
200 Howell Avenue, Riverhead, NY 11901
(631) 727-3200 Ext 670 Fax (631) 727-0433

RENTAL APPLICATION FLOOR PLAN REVIEW

SCTM: _____ - _____ - _____

Date: _____

Rental Address _____

1) Your rental housing floor plans were reviewed by: _____
(New York State Code Enforcement Official)

2) Based solely on these plans submitted, (by the applicant) the occupancy of the above-mentioned rental dwelling unit is predicated as follows:

- | | |
|------------------------------------|------------------------------------|
| Bedroom #1 _____ person(s) maximum | Bedroom #5 _____ person(s) maximum |
| Bedroom #2 _____ person(s) maximum | Bedroom #6 _____ person(s) maximum |
| Bedroom #3 _____ person(s) maximum | Bedroom #7 _____ person(s) maximum |
| Bedroom #4 _____ person(s) maximum | Bedroom #8 _____ person(s) maximum |

With a combined total maximum occupancy of _____ person(s) allowed based on the square footage of sleeping rooms and other applicable areas for eating, dining and living for the above-mentioned dwelling unit.

****Note: The above mentioned maximum person(s) permitted as depicted above may be VOID if the inspector determines that the actual dimensions of the dwelling unit is different than what the attached floor plan submitted indicates.**

← If this box is checked, the above Code Enforcement Official was unable to determine occupancy of the above-mentioned rental dwelling unit due to the following checked conditions, if so please review the checked items below and make any corrections necessary on your plans and resubmit them to our office for further processing of your application. Thank You.

ALL rooms must be **labeled** (Example: i.e. Bedroom #1, Bedroom #2, Dining Room, Living Room, Porch etc). and indicate the **accurate dimensions** (length & width in feet or to scale 1/4" = 1 foot).

Every rental dwelling unit whose capability of maximum occupancy (based on sleeping rooms) is 1-2 person(s), must adequately provide (1) living room and (1) dining area (area for eating), or combined living / dining area in addition, to there must be and (1) kitchen of at least 50 square feet as per NYSPM§ 404.5.

Every rental dwelling unit whose capability of maximum occupancy (based on sleeping rooms) is over 3-5 persons, must adequately provide (1) living room of at least 120 square feet, (1) dining room (room for eating) of at least 80 square feet or a combined living / dining room of at least 200 square feet and (1) kitchen of at least 50 square feet as per NYSPM§ 404.5. (Floor plan must adequately depict these areas)

Every rental dwelling unit whose capability of maximum occupancy (based on sleeping rooms) is 6 or more persons, must adequately provide (1) living room at least 150 square feet, (1) dining room (room for eating) of at least 100 square feet or a combined living / dining Area of at least 250 square feet and (1) kitchen of at least 60 square feet as per NYSPM§ 404.5. (Floor plan must adequately depict these areas)

The indicated room(s) of _____ does not meet NYSPM Code. (Please call above Code Official for more details)

The floor plan(s) submitted were illegible, slipshod and not properly done, Please redo respectively.

Name: _____
Address: _____

ITEM #27

****PLEASE NOTE****

REVISED CODE CONFORMING FLOOR PLANS MUST BE SUBMITTED BACK TO THIS OFFICE BY ____/____/____. FAILURE TO DO SO WILL RESULT IN AN INCOMPLETE RENTAL APPLICATION WHEREBY A COURT APPEARANCE



TOWN OF RIVERHEAD - INVESTIGATION UNIT – HOUSING INSPECTION REPORT
TOWN ATTORNEYS OFFICE, RIVERHEAD, NEW YORK 11901 (631)-727-3200 Ext. # _____

SCTM # _____ - _____ - _____ DATE _____ / _____ / _____ INSPECTOR _____ BADGE# _____

ADDRESS: _____ PERSON PRESENT: _____

INSPECTION TYPE: RENTAL 1st RENTAL 2nd RENTAL 3rd COMPLAINT PATROL/PICKUP

RESULTS: INSPECTION PASSED FAILED CALL TO RESCHEDULE BEFORE THE COMPLY DATE _____ / _____ / _____

EXTERIOR STRUCTURE & PROPERTY AREA(S)			CELLAR / BASEMENT / MECH ROOM		
IDC#	VIOLATION DESCRIPTION(S)	FAIL	IDC#	VIOLATION DESCRIPTION(S)	FAIL
1.	Structure is properly identified as per promulgated maps recorded in the Town, & Such must be min 3" for visibility.	<input type="checkbox"/>	31.	STAIRS must be sound and stable.	<input type="checkbox"/>
2.	Roof drains, gutters and downspouts present and in good repair with no obstructions	<input type="checkbox"/>	32.	<input type="checkbox"/> Railing must be provided on stairway. <input type="checkbox"/> Railing must be firmly fastened not loose.	<input type="checkbox"/>
3.	Roof Shingles do not exceed more than two layers	<input type="checkbox"/>	33.	Extension cords must not be used as permanent wiring. (Provide proper fixed grounded outlets)	<input type="checkbox"/>
4.	Roof is in good repair no dry rot or deterioration on shingle Surfaces.	<input type="checkbox"/>	34.	Multi-Plug adaptors must be eliminated and such appliance or device must be plugged directly into a outlet.	<input type="checkbox"/>
5.	ALL Exterior surfaces must be free from: <input type="checkbox"/> Peeling/Chipping Paint <input type="checkbox"/> Rust <input type="checkbox"/> Corrosion	<input type="checkbox"/>	35.	ELECTRICAL HAZZARD FOUND:	<input type="checkbox"/>
6.	ALL Exterior walls must be free from cracks, holes or loose and/or missing shingles or siding.	<input type="checkbox"/>	36.	Oil Fired Equip must be serviced annually (Certificate of Proof of Service must be provided or affixed to appliance	<input type="checkbox"/>
7.	ALL Exterior exposed wood surfaces must be suitably coated with paint or other suitable weather resistive compounds.	<input type="checkbox"/>	37.	Remove storage of combustible materials within 36 inches of any fuel or gas fired appliances	<input type="checkbox"/>
8.	ALL Screens must be present & in good repair and fit within the window(s) or doorframes firmly.	<input type="checkbox"/>	38.	Fuel or Gas appliances must in sound condition and capable of a safe operation. PM §603.1	<input type="checkbox"/>
9.	Decorative Trim and wall facings must be in good repair with the proper anchorage, and free from deterioration and rot.	<input type="checkbox"/>	39.	All fuel appliance vents must be properly installed, free of rust, holes and capable of discharging without hazard.	<input type="checkbox"/>
10.	Overhang Extensions including canopies & porches must be in good repair, properly anchored free from deformation & rot.	<input type="checkbox"/>	40.	Septic lines must be securely fastened, free of leaks, holes or cracks.	<input type="checkbox"/>
11.	Handrails and Guards must be firmly fastened and free from deterioration and unjust movement.	<input type="checkbox"/>	41.	Plumbing piping must be free of leaks, holes or cracks. Specifically:	<input type="checkbox"/>
12.	Handrail Required on any stairway with 4 or more risers.	<input type="checkbox"/>	42.	Any additional construction must have a Certificate of Occupancy, including any walls, electric, and sheetrock.	<input type="checkbox"/>
13.	Guards required on any deck, balcony or porch, which is over (30)-Inches in height.	<input type="checkbox"/>	43.	Cellar occupancy is prohibited without the proper Certificate of Occupancy for such use.	<input type="checkbox"/>
14.	Stairways, Porches or Balconies are of sound construction, firmly fastened with proper anchorage.	<input type="checkbox"/>	44.	Smoke detector is not installed and mounted accordingly.	<input type="checkbox"/>
15.	<input type="checkbox"/> Window frames and trim <input type="checkbox"/> Door Frames must be in sound condition weather tight and free from deterioration.	<input type="checkbox"/>	45.	Smoke detector is not operable at time of inspection.	<input type="checkbox"/>
16.	ALL Window GLASS and/or Glazing must be free from cracks, chips or holes.	<input type="checkbox"/>	46.	<input type="checkbox"/> Lighting must be provided within cellar. <input type="checkbox"/> Lighting must be operational (bulb working)	<input type="checkbox"/>
17.	Chimney must be in sound condition free from: <input type="checkbox"/> Cracks <input type="checkbox"/> Holes <input type="checkbox"/> Unsafe settlement/unplumbed	<input type="checkbox"/>	47.	Clear path of travel must be maintained to electrical panel, Furnace/Boiler and Water heating appliances.	<input type="checkbox"/>
18.	Exterior Vent piping is in good repair and installed Correctly.	<input type="checkbox"/>	48.	Interior Foundation walls must be free from: <input type="checkbox"/> Cracks <input type="checkbox"/> Step Fractures <input type="checkbox"/> Holes	<input type="checkbox"/>
19.	Connection of service utilities including Electric, Gas, Water or Fuel is connected properly.	<input type="checkbox"/>	NOTES / ADDITIONAL DEFICIENCIES		LOCATION
20.	ALL Exterior Door hardware and doors must be operational and securely fastened and locking.	<input type="checkbox"/>	ITEM #28a		
21.	Basement Hatchways (BILCO DOORS) must be securely fastened, free from rust and or decay, and rodent entry.	<input type="checkbox"/>			
22.	FOUNDATION walls must be free from cracks, holes or deficiencies which cause un-plumb walls.	<input type="checkbox"/>			
23.	PROVIDE ENGINEERS REPORT to this department that Certifies that the structure is not compromised and safe.	<input type="checkbox"/>			
24.	Unregistered Vehicles not permitted on property unless Appropriately screened.	<input type="checkbox"/>			
25.	Litter must be removed from property areas	<input type="checkbox"/>			
26.	Property must be free from weeds & or high grass in excess of (10) inches must be cut (mowed) accordingly.	<input type="checkbox"/>			
27.	Property must be free from physical hazards. Observed was:	<input type="checkbox"/>			
28.	Cesspool(s) must be capable of disposing waste without a Health hazard or overflow.	<input type="checkbox"/>			
29.	ALL ACCESSORY structures including decks must be structural sound and free from deterioration, and rot.	<input type="checkbox"/>			
30.	Driveway must be free from physical hazards and in good repair with no sinkholes and drainage problems.	<input type="checkbox"/>			

EXPLANATION INSTRUCTIONS FOR CODES IN MARKED BOXES ON FRONT OF SHEET

1. ANY ITEM WITH A CHECKED SQUARE IN THE FAIL COLUMN MEANS THAT THE ITEM WAS OBSERVED TO BE IN VIOLATION AT THE TIME OF THE INSPECTION. (SEE IDC # EXPLANATION BELOW)
2. IF THE SHADED SQUARE IN THE FAIL COLUMN IS NOT CHECKED OFF, THE ITEM WAS NOT OBSERVED TO BE IN VIOLATION AT THE TIME OF THE INSPECTION.

EXPLANATION OF IDC # COLUMN (ITEM DEFICIENCY CODE(S))

- A **BLANK SPACE** IN THE IDC # COLUMN INDICATES THAT THE INSPECTOR OBSERVED NO DEFICIENCY REF. ITEM.
- A NUMBER "1" IN THE IDC # COLUMN INDICATES THAT THE INSPECTOR OBSERVED SUCH DEFICIENCY IN **ONE LOCATION ONLY**.
- A NUMBER "2" IN THE IDC # COLUMN INDICATES THAT THE INSPECTOR OBSERVED THE MARKED VIOLATION IN **TWO OR MORE LOCATIONS**.
- A NUMBER "3" IN THE IDC # COLUMN INDICATES THAT THE INSPECTOR OBSERVED THE MARKED DEFICIENCY **WAS CORRECTED** AT THE TIME OF THE INSPECTION.
- A NUMBER "4" IN THE IDC # COLUMN INDICATES THAT THE DEFICIENCY WAS NOT APPLICABLE, REVIEWED OR OBSERVED AT THE TIME OF INSPECTION.

SECTIONS OF LAW

<p align="center">EXTERIOR STRUCTURE & PROPERTY AREAS</p> <ol style="list-style-type: none"> 1. PM§ 304.3 TC§ 68-51 (A) 2. PM§ 302.7 TC§ 68-18 (C) 3. RR§ 907.3 (3) 4. PM§ 304.7 TC§ 68-18 (C) 5. PM§ 304.2 TC§ 68-34 6. PM§ 304.6 7. PM§ 304.2 8. TC§ 68-35 (C) 9. PM§ 304.8 10. PM§ 304.9 11. PM§ 304.12 12. PM§ 306.1 TC§ 68-15 (B) 13. PM§ 306.1 TC§ 68-15 (B) 14. PM§ 304.10 TC§ 68-34 15. PM§ 304.13 16. PM§ 304.13.1 17. PM§ 304.11 TC§ 68-27 (A) 18. PM§ 304.11 TC§ 68-27 (A) 19. PM§ 104.1 20. PM§ 304.15 21. PM§ 304.16 22. PM§ 304.5 TC§ 68-18 (A) 23. PM§ 107.1 24. TC§ 100-3 25. PM§ 302.11 TC§ 98-4 26. PM§ 302.4 TC§ 68-33 (E) 27. TC§ 68-33 (D) 28. PM§ 506.2 TC§ 68-24 (C) (2) 29. PM§ 302.7 TC§ 68-34 (C) 30. PM§ 302.3 	<ol style="list-style-type: none"> 39. PM§ 304.11 TC§ 68-27 (A) (1) 40. PM§ 506.1 TC§ 68-24 (A) (1) 41. PM§ 504.1 TC§ 68-24 (A) (1) 42. TC§ 52-14 43. PM§ 404.4.4 TC§ 68-11 (B) 44. PM§ 704.2 45. PM§ 704.1 46. PM§ 605.3 47. PM§ 702.1 - PM§ 702.2 48. PM§ 107.1.1 PM§ 304.5 TC§ 68-18(A) 	<p align="center">BATHROOM(S) & TOILET ROOMS</p> <ol style="list-style-type: none"> 69. PM§ 305.1 TC§ 68-34 (B) 70. PM§ 305.3 TC§ 68-34 (A) 71. PM§ 503.4 TC§ 68-19 (D) 72. PM§ 505.3 TC§ 68-24 (B) (2) 73. PM§ 505.1 TC§ 68-24 (E) (1) 74. A. PM§ 305.1 TC§ 68-34 (B) B. PM§ 403.2 TC§ 68-14 (C) (1) 75. PM§ 304.13.2 76. PM§ 504.1 TC§ 68-24 (A) 77. PM§ 605.2 78. PM§ 604.3 TC§ 68-28 (A) 	<p align="center">PORCHE(S) / BALCONY(S) SCREENROOM(S)</p> <ol style="list-style-type: none"> 101. PM§ 404.1 - PM§ 404.5 TC§ 68-12 102. PM§ 702.1 TC§ 68-20 (B) 103. F§ 605.5 104. F§ 605.4 105. PM§ 304.13.2 106. PM§ 702.3 TC§ 68-20 (B)
<p align="center">CELLAR/BASEMENT/MECH. ROOM</p> <ol style="list-style-type: none"> 31. PM§ 305.4 TC§ 68-15 (B) 32. PM§ 305.5 TC§ 68-15 (B) 33. FC§ 605.5 34. FC§ 605.4 35. PM§ 604.3 TC§ 68-28 (A) 36. TC§ 64-13 (E) (1) 37. PM§ 603.3 TC§ 68-26 (D) 38. PM§ 603.1 	<p align="center">LIVING ROOMS / DENS / COMMON AREAS</p> <ol style="list-style-type: none"> 49. PM§ 305.1 TC§ 68-34 (B) 50. PM§ 305.3 TC§ 68-34 (A) 51. PM§ 702.1 TC§ 68-16 (A) 52. PM§ 604.3 TC§ 68-28 (A) 53. PM§ 304.13.2 54. PM§ 304.15 55. A. PM§ 704.2 B. PM§ 704.1 56. F§ 605.5 	<p align="center">LAUNDRY ROOM AREAS</p> <ol style="list-style-type: none"> 79. PM§ 403.5 TC§ 68-28 (A) (1) 80. PM§ 603.4 TC§ 68-27 (A) (2) 81. A. PM§ 505.1 TC§ 68-24 (E) (1) B. PM§ 504.1 TC§ 68-24 (A) 	<p align="center">***PLEASE NOTE***</p> <p align="center">ANY REPAIRS, MAINTENANCE WORK, ALTERATIONS OR INSTALLATIONS WHICH ARE CAUSED DIRECTLY OR INDIRECTLY BY THE DEFICIENCIES NOTED ON THIS REPORT SHALL BE EXECUTED AND INSTALLED IN ACCORDANCE WITH THE CODE STATE OF NEW YORK, THE MANUFACTURER'S INSTALLATION INSTRUCTIONS AND IN A SKILLFUL MANNER WITH LIKE MATERIALS BY A QUALIFIED PERSON(S) TO PERFORM SUCH.</p> <p align="center">(PURSUANT TO PM§103.3)</p>
	<p align="center">KITCHENS</p> <ol style="list-style-type: none"> 57. PM§ 305.1 TC§ 68-34 (B) 58. PM§ 305.3 TC§ 68-34 (A) 59. PM§ 308.1 PM§ 308.5 TC§ 68-35 (A) 60. PM§ 305.4 61. PM§ 604.3 TC§ 68-28 (A) 62. PM§ 505.3 TC§ 68-24 (B) (2) 63. PM§ 505.1 TC§ 68-24 (E) (1) 64. PM§ 603.1 TC§ 68-14 (C) (1) 65. PM§ 304.13.2 66. PM§ 304.15 	<p align="center">SLEEPING ROOM(S)</p> <ol style="list-style-type: none"> 82. PM§ 305.1 TC§ 68-34 (B) 83. PM§ 305.3 TC§ 68-34 (A) 84. A. PM§ 704.2 B. PM§ 704.1 85. F§ 605.5 86. F§ 605.4 87. PM§ 304.13.2 88. PM§ 702.3 89. TC§ 108 (Zoning Violation) 90. PM§ 404.2 91. PM§ 404.3 92. PM§ 404.4.1 TC§ 68-10 93. PM§ 702.1 TC§ 68-20 (B) 94. PM§ 404.4.2 	
	<ol style="list-style-type: none"> 67. A. TC§ 68-29 (A) B. TC§ 68-29 (B) C. TC§ 68-34 (B) 68. A. TC§ 68-29 (A) B. TC§ 68-29 (B) C. TC§ 68-34 (B) 	<p align="center">COMMON HALL(S)</p> <ol style="list-style-type: none"> 95. A. PM§ 704.2 B. PM§ 704.1 96. PM§ 402.2 TC§ 68-13 (B) (2) 97. PM§ 702.1 TC§ 68-20 (B) <p align="center">STAIRWAY(S)</p> <ol style="list-style-type: none"> 98. A. PM§ 704.2 B. PM§ 704.1 99. PM§ 402.2 TC§ 68-13 (B) (2) PM§ 702.1 TC§ 68-20 (B) 100. PM§ 305.5 TC§ 68-15 (B) 	

Mail to:

ITEM #28b

IF YOU FAILED ANY ITEMS LISTED ON THE FRONT OF THIS REPORT YOU MUST CORRECT ALL, AND CONTACT THIS OFFICE AT 727-3200 EXT 670, BEFORE THE SCHEDULED COMPLY DATE SO A COMPLIANCE INSPECTION CAN BE ARRANGED ACCORDINGLY.

INTERIOR INSPECTION SHEET

SCTM# _____ - _____ - _____

ADDRESS:

DATE:

LIVING ROOM(S) DENS / COMMON AREA(S)			SLEEPING ROOM(S)		
IDC#	VIOLATION DESCRIPTION(S)	FAIL	IDC#	VIOLATION DESCRIPTION(S)	FAIL
49.	All interior surfaces must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>	82.	All interior surfaces must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>
50.	All interior surfaces were not free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>	83.	All interior surfaces were not free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>
51.	Exit Doors must be free and clear of obstructions.	<input type="checkbox"/>	84.	<input type="checkbox"/> Smoke Detector(s) is not installed and mounted correctly <input type="checkbox"/> Smoke Detector(s) was not operable at time of inspection	<input type="checkbox"/>
52.	ELECTRICAL HAZARDS :	<input type="checkbox"/>	85.	Extension cords must not be used as permanent wiring. (Provide proper fixed grounded outlets)	<input type="checkbox"/>
53.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>	86.	Multi-Plug adaptors must be eliminated and such appliance or device must be plugged directly into a outlet.	<input type="checkbox"/>
54.	Door Hardware must be intact, not loose and capable of performing its intended function(s).	<input type="checkbox"/>	87.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>
55.	<input type="checkbox"/> Smoke Detector is not installed and mounted correctly. <input type="checkbox"/> Smoke Detector is not operable at time of inspection	<input type="checkbox"/>	88.	LOCKED DOORS must be readily open-able from the side In which is being exited from. (Hasp locking prohibited)	<input type="checkbox"/>
56.	Extension cords must not be used as permanent wiring and be eliminated. (Provide fixed grounded outlets)	<input type="checkbox"/>	89.	Keyed Entry to Sleeping rooms is prohibited. (Exception : Hotels, Motels, Dormitories)	<input type="checkbox"/>
KITCHEN(S)			90.	Sleeping Rooms must have a minimum of (7) feet width in any plan dimension. (Discontinue use if under min. distance)	<input type="checkbox"/>
57.	All interior surfaces must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>	91.	Sleeping Rooms must have a minimum ceiling height of (7) Feet. (Discontinue use if such is under min dimension)	<input type="checkbox"/>
58.	All interior surfaces were not free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>	92.	SLEEPING ROOM(S) IS/ARE OVEROCCUPIED (Based on formula of square feet per person)	<input type="checkbox"/>
59.	Area and interior of structure must be free from infestation Rodents. (Exterminate and provide copy of such to this dept.)	<input type="checkbox"/>	93.	<input type="checkbox"/> EXIT DOORS MUST BE CLEAR OF OBSTRUCTION <input type="checkbox"/> WINDOWS MUST BE CLEAR OF OBSTRUCTIONS	<input type="checkbox"/>
60.	Walking surfaces (floors) must be in good repair without defects. Tiles must be presently in good repair.	<input type="checkbox"/>	94.	Occupants cannot exit a sleeping room through another sleeping room. (Discharge must be through a common area)	<input type="checkbox"/>
61.	ELECTRICAL HAZARDS :	<input type="checkbox"/>	COMMON HALL(S)		
62.	SINK(S) did not have : <input type="checkbox"/> Adequate Water Pressure <input type="checkbox"/> Free from leaks	<input type="checkbox"/>	95.	<input type="checkbox"/> Smoke Detector is not installed and mounted correctly. <input type="checkbox"/> Smoke Detector is not operable at time of inspection	<input type="checkbox"/>
63.	SINK(S) did not have <input type="checkbox"/> HOT WATER SUPPLIED <input type="checkbox"/> COLD WATER SUPPLY	<input type="checkbox"/>	96.	Adequate lighting is not provided for and functional. <input type="checkbox"/> Fixture Missing <input type="checkbox"/> Bulb Inoperable	<input type="checkbox"/>
64.	Exhaust Fan (if provided) must be operational.	<input type="checkbox"/>	97.	Hallway is not free and clear of obstructions	<input type="checkbox"/>
65.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>	STAIRWAY(S)		
66.	Door Hardware must be intact, not loose and capable of performing its intended function(s).	<input type="checkbox"/>	98.	<input type="checkbox"/> Smoke Detector is not installed and mounted correctly. <input type="checkbox"/> Smoke Detector is not operable at time of inspection	<input type="checkbox"/>
67.	COOKING APPLIANCE IS: <input type="checkbox"/> Missing <input type="checkbox"/> Igniter Inoperable <input type="checkbox"/> Not Functional	<input type="checkbox"/>	99.	<input type="checkbox"/> Adequate lighting not provided for and/or functional. <input type="checkbox"/> Stairway is not free and clear of obstructions.	<input type="checkbox"/>
68.	REFRIGERATION APPLIANCE <input type="checkbox"/> Missing <input type="checkbox"/> Not Functional <input type="checkbox"/> Unsanitary	<input type="checkbox"/>	100.	Railings and Guards were: <input type="checkbox"/> NOT SECURELY FASTENED <input type="checkbox"/> NOT PROVIDED	<input type="checkbox"/>
BATHROOM(S) AND TOILET ROOM(S)			PORCHE(S) / BALCONY(S)/SCREEN ROOM(S)		
69.	All interior surfaces i.e. walls, ceilings, floors must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>	101.	Said area is deemed a non-habitable space for sleeping Discontinue the use of this area for sleeping purposes.	<input type="checkbox"/>
70.	All interior surfaces ie walls, ceilings fixt. must be free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>	102.	<input type="checkbox"/> EXIT DOORS MUST BE CLEAR OF OBSTRUCTION <input type="checkbox"/> WINDOWS MUST BE CLEAR OF OBSTRUCTIONS	<input type="checkbox"/>
71.	Walking surfaces (floors) must be in good repair without defects. Tiles must be present and non-absorbent to water.	<input type="checkbox"/>	103.	Extension cords must not be used as permanent wiring. (Provide proper fixed grounded outlets)	<input type="checkbox"/>
72.	<input type="checkbox"/> SINK(S) & <input type="checkbox"/> BATH(S) did not have : <input type="checkbox"/> Adequate Water Pressure <input type="checkbox"/> Free from leaks	<input type="checkbox"/>	104.	Multi-Plug adaptors must be eliminated and such appliance or device must be plugged directly into an outlet.	<input type="checkbox"/>
73.	<input type="checkbox"/> SINK(S) & <input type="checkbox"/> BATH(S) did not have <input type="checkbox"/> HOT WATER SUPPLIED <input type="checkbox"/> COLD WATER SUPPLY	<input type="checkbox"/>	105.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>
74.	Mechanical Ventilation is required were a window is not and <input type="checkbox"/> Clean free of dust <input type="checkbox"/> Provided for <input type="checkbox"/> Operational	<input type="checkbox"/>	106.	LOCKED DOORS must be readily open-able from the side In which is being exited from. (Hasp locks prohibited)	<input type="checkbox"/>
75.	Windows must be open-able and capable of being held in Place. Locking Hardware and pulleys must be operational.	<input type="checkbox"/>	NOTES/ ADDITIONAL DEFICIENCIES		LOCATION
76.	TOILET(S) DID NOT: <input type="checkbox"/> FLUSH PROPERLY <input type="checkbox"/> BE FREE FROM LEAKS	<input type="checkbox"/>	ITEM #29a		
77.	Must Contain (1) electrical receptacle (new bathroom must be ground fault)	<input type="checkbox"/>			
78.	ELECTRICAL HAZARDS :	<input type="checkbox"/>			
LAUNDRY ROOM AREA(S)					
79.	Clothes Dryer must be exhausted properly in accordance with the Manufactures guidelines.	<input type="checkbox"/>			
80.	GAS DRYERS (gas feed line) must contain a safety control Shut off line valve.	<input type="checkbox"/>			
81.	WASHER HOOKUPS DID NOT HAVE	<input type="checkbox"/>			

INTERIOR INSPECTION SHEET

SCTM# _____ - _____ - _____

ADDRESS:

DATE:

LIVING ROOM(S) DENS / COMMON AREA(S)			SLEEPING ROOM(S)		
IDC#	VIOLATION DESCRIPTION(S)	FAIL	IDC#	VIOLATION DESCRIPTION(S)	FAIL
49.	All interior surfaces must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>	82.	All interior surfaces must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>
50.	All interior surfaces were not free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>	83.	All interior surfaces were not free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>
51.	Exit Doors must be free and clear of obstructions.	<input type="checkbox"/>	84.	<input type="checkbox"/> Smoke Detector(s) is not installed and mounted correctly <input type="checkbox"/> Smoke Detector(s) was not operable at time of inspection	<input type="checkbox"/>
52.	ELECTRICAL HAZARDS :	<input type="checkbox"/>	85.	Extension cords must not be used as permanent wiring. (Provide proper fixed grounded outlets)	<input type="checkbox"/>
53.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>	86.	Multi-Plug adaptors must be eliminated and such appliance or device must be plugged directly into a outlet.	<input type="checkbox"/>
54.	Door Hardware must be intact, not loose and capable of performing its intended function(s).	<input type="checkbox"/>	87.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>
55.	<input type="checkbox"/> Smoke Detector is not installed and mounted correctly. <input type="checkbox"/> Smoke Detector is not operable at time of inspection	<input type="checkbox"/>	88.	LOCKED DOORS must be readily open-able from the side In which is being exited from. (Hasp locking prohibited)	<input type="checkbox"/>
56.	Extension cords must not be used as permanent wiring and be eliminated. (Provide fixed grounded outlets)	<input type="checkbox"/>	89.	Keyed Entry to Sleeping rooms is prohibited. (Exception : Hotels, Motels, Dormitories)	<input type="checkbox"/>
KITCHEN(S)			90.	Sleeping Rooms must have a minimum of (7) feet width in any plan dimension. (Discontinue use if under min. distance)	<input type="checkbox"/>
57.	All interior surfaces must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>	91.	Sleeping Rooms must have a minimum ceiling height of (7) Feet. (Discontinue use if such is under min dimension)	<input type="checkbox"/>
58.	All interior surfaces were not free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>	92.	SLEEPING ROOM(S) IS/ARE OVEROCCUPIED (Based on formula of square feet per person)	<input type="checkbox"/>
59.	Area and interior of structure must be free from infestation Rodents. (Exterminate and provide copy of such to this dept.)	<input type="checkbox"/>	93.	<input type="checkbox"/> EXIT DOORS MUST BE CLEAR OF OBSTRUCTION <input type="checkbox"/> WINDOWS MUST BE CLEAR OF OBSTRUCTIONS	<input type="checkbox"/>
60.	Walking surfaces (floors) must be in good repair without defects. Tiles must be presently in good repair.	<input type="checkbox"/>	94.	Occupants cannot exit a sleeping room through another sleeping room. (Discharge must be through a common area)	<input type="checkbox"/>
61.	ELECTRICAL HAZARDS :	<input type="checkbox"/>	COMMON HALL(S)		
62.	SINK(S) did not have : <input type="checkbox"/> Adequate Water Pressure <input type="checkbox"/> Free from leaks	<input type="checkbox"/>	95.	<input type="checkbox"/> Smoke Detector is not installed and mounted correctly. <input type="checkbox"/> Smoke Detector is not operable at time of inspection	<input type="checkbox"/>
63.	SINK(S) did not have <input type="checkbox"/> HOT WATER SUPPLIED <input type="checkbox"/> COLD WATER SUPPLY	<input type="checkbox"/>	96.	Adequate lighting is not provided for and functional. <input type="checkbox"/> Fixture Missing <input type="checkbox"/> Bulb Inoperable	<input type="checkbox"/>
64.	Exhaust Fan (if provided) must be operational.	<input type="checkbox"/>	97.	Hallway is not free and clear of obstructions	<input type="checkbox"/>
65.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>	STAIRWAY(S)		
66.	Door Hardware must be intact, not loose and capable of performing its intended function(s).	<input type="checkbox"/>	98.	<input type="checkbox"/> Smoke Detector is not installed and mounted correctly. <input type="checkbox"/> Smoke Detector is not operable at time of inspection	<input type="checkbox"/>
67.	COOKING APPLIANCE IS: <input type="checkbox"/> Missing <input type="checkbox"/> Igniter Inoperable <input type="checkbox"/> Not Functional	<input type="checkbox"/>	99.	<input type="checkbox"/> Adequate lighting not provided for and/or functional. <input type="checkbox"/> Stairway is not free and clear of obstructions.	<input type="checkbox"/>
68.	REFRIGERATION APPLIANCE <input type="checkbox"/> Missing <input type="checkbox"/> Not Functional <input type="checkbox"/> Unsanitary	<input type="checkbox"/>	100.	Railings and Guards were: <input type="checkbox"/> NOT SECURELY FASTENED <input type="checkbox"/> NOT PROVIDED	<input type="checkbox"/>
BATHROOM(S) AND TOILET ROOM(S)			PORCHE(S) / BALCONY(S) / SCREEN ROOM(S)		
69.	All interior surfaces i.e. walls, ceilings, floors must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>	101.	Said area is deemed a non-habitable space for sleeping Discontinue the use of this area for sleeping purposes.	<input type="checkbox"/>
70.	All interior surfaces ie walls, ceilings fixt. must be free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>	102.	<input type="checkbox"/> EXIT DOORS MUST BE CLEAR OF OBSTRUCTION <input type="checkbox"/> WINDOWS MUST BE CLEAR OF OBSTRUCTIONS	<input type="checkbox"/>
71.	Walking surfaces (floors) must be in good repair without defects. Tiles must be present and non-absorbent to water.	<input type="checkbox"/>	103.	Extension cords must not be used as permanent wiring. (Provide proper fixed grounded outlets)	<input type="checkbox"/>
72.	<input type="checkbox"/> SINK(S) & <input type="checkbox"/> BATH(S) did not have : <input type="checkbox"/> Adequate Water Pressure <input type="checkbox"/> Free from leaks	<input type="checkbox"/>	104.	Multi-Plug adaptors must be eliminated and such appliance or device must be plugged directly into an outlet.	<input type="checkbox"/>
73.	<input type="checkbox"/> SINK(S) & <input type="checkbox"/> BATH(S) did not have <input type="checkbox"/> HOT WATER SUPPLIED <input type="checkbox"/> COLD WATER SUPPLY	<input type="checkbox"/>	105.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>
74.	Mechanical Ventilation is required were a window is not and <input type="checkbox"/> Clean free of dust <input type="checkbox"/> Provided for <input type="checkbox"/> Operational	<input type="checkbox"/>	106.	LOCKED DOORS must be readily open-able from the side In which is being exited from. (Hasp locks prohibited)	<input type="checkbox"/>
75.	Windows must be open-able and capable of being held in Place. Locking Hardware and pulleys must be operational.	<input type="checkbox"/>	NOTES / ADDITIONAL DEFICIENCIES		LOCATION
76.	TOILET(S) DID NOT: <input type="checkbox"/> FLUSH PROPERLY <input type="checkbox"/> BE FREE FROM LEAKS	<input type="checkbox"/>	ITEM #29b		
77.	Must Contain (1) electrical receptacle (new bathroom must be ground fault)	<input type="checkbox"/>			
78.	ELECTRICAL HAZARDS :	<input type="checkbox"/>			
LAUNDRY ROOM AREA(S)					
79.	Clothes Dryer must be exhausted properly in accordance with the Manufactures guidelines.	<input type="checkbox"/>			
80.	GAS DRYERS (gas feed line) must contain a safety control Shut off line valve.	<input type="checkbox"/>			
81.	WASHER HOOKUPS DID NOT HAVE	<input type="checkbox"/>			

MTM BUSINESS SOLUTIONS HAUPPAUGE NY 11788

U.S. PAID # 6,095,407



TOWN OF RIVERHEAD
200 HOWELL AVENUE
RIVERHEAD, NY 11901

PRESORTED
FIRST CLASS MAIL
U.S. POSTAGE
PAID
RIVERHEAD, NY 11901
PERMIT NO. 100

RETURN SERVICE REQUESTED

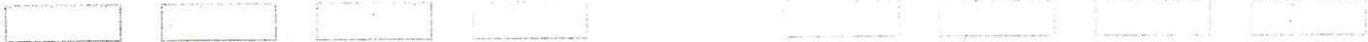
ITEM #30

IMPORTANT TAX INFORMATION

SO-1104489 • 11Z-V6

34

MTM PRINT SOLUTIONS HAUPPAUGE NY 11788



TOWN OF RIVERHEAD
200 HOWELL AVENUE
RIVERHEAD, NY 11901

RETURN SERVICE REQUESTED

PRESORTED
FIRST CLASS MAIL
U.S. POSTAGE
PAID
RIVERHEAD, NY 11901
PERMIT NO. 100

ITEM #31

DEPARTMENT USE ONLY

DEPARTMENT (INDICATE DEPARTMENT PROCESSING THIS VOUCHER ONLY)

VENDOR NO

Town of Riverhead
 200 HOWELL AVENUE
 RIVERHEAD, NY 11901-2596
 (631) 727-3200

Official Claim Voucher

VOUCHER NO

CHECK NO CHECK DATE

	APPROPRIATION NUMBER	PURCHASE ORDER NO	INVOICE NO	AMOUNT LIQUIDATED	AMOUNT PAID
1					
2					
3					
4					

VENDOR COMPLETE THIS SECTION ONLY

Vendor Information

CLAIMANT'S NAME TELEPHONE

ADDRESS FED ID NO

CITY & STATE FAX NO

DATE	INVOICE NO	INVOICE DESCRIPTION OF MATERIALS AND SERVICES	AMOUNT
ITEM #32			

SEND INVOICE & VOUCHER DIRECTLY TO DEPARTMENT WHICH RECEIVED GOODS OR SERVICES AS PER OUR PURCHASE ORDER

CLAIMANT CERTIFICATION I CERTIFY THAT THE ABOVE EXPENDITURES HAVE BEEN MADE IN ACCORDANCE WITH THE PROVISION OF THE APPLICABLE STATUTE THAT THE CLAIM IS JUST AND CORRECT THAT NO PART THEREOF HAS BEEN PAID EXCEPT AS STATED THAT THE BALANCE ACTUALLY DUE AND OWING AND THAT THE PRICES CHARGED HEREIN DO NOT INCLUDE FEDERAL EXCISE TAX OR ANY FEDERAL NY SALES TAX AND ARE NOT HIGHER THAN PRICES CHARGED TO ANY GOVERNMENTAL OR CONSUMER FOR LIKE DELIVERIES

CLAIMANT'S SIGNATURE IN INK TITLE

DATE NAME OF COMPANY **AMOUNT CLAIMED**

AUDIT USE ONLY

VERIFIED

AUDITED

DEPARTMENT CERTIFICATION I CERTIFY THAT THIS CLAIM IS CORRECT AND THAT SERVICES OR MATERIALS WERE RENDERED, AND PAYMENT IS APPROVED.

SIGNATURE

TITLE

AMOUNT DISALLOWED

NET AMOUNT PAYABLE

TOWN OF RIVERHEAD - SANITATION DEPARTMENT
727-3200 Ext.391

REASON FOR NO PICK-UP

- Contents have paper, and / or garbage mixed with recyclables.
- No Electronics at curbside.
- Branches not tied in bundles (4 ft. Long).
- No plastic bags.
- Too many bulk items.
- Items not put out properly or not on scheduled day / time.
- Other - no chemicals or loose leaves.

Please follow pick-up schedule. Extra copies of our pick-up schedule are available at Town Hall.

ITEM #33



**TOWN OF
RIVERHEAD**

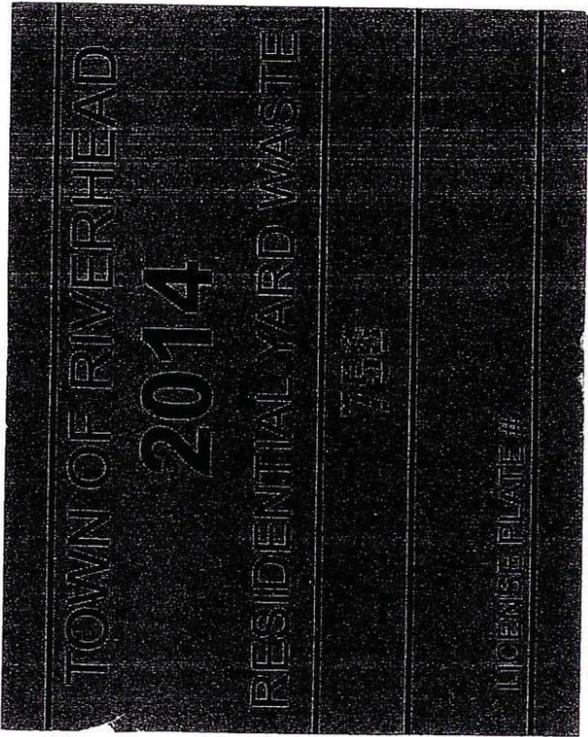
YEAR

LIC. PLATE

STICKER #

SOLID WASTE PERMIT

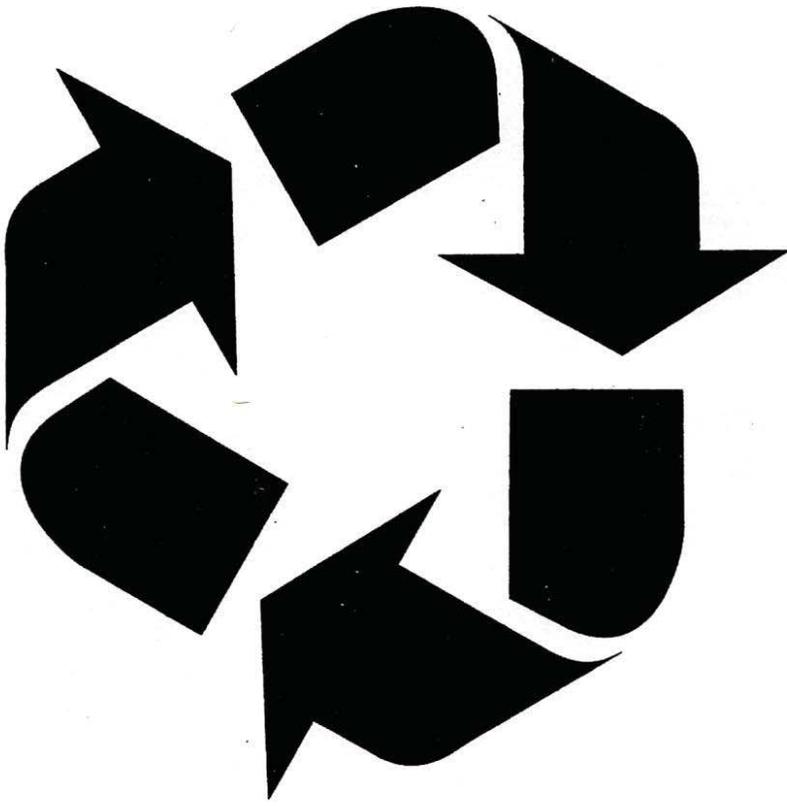
ITEM #34



ITEM #35

40

RIVERHEAD



ITEM #36

RECYCLES

2012 drinking water quality report

RIVERHEAD WATER DISTRICT
PUBLIC WATER SUPPLY IDENTIFICATION NO. 5103705

Town Board Members
Supervisor Sean Walter
Councilman John Dunleavy
Councilman George E. Gabrielsen
Councilwoman Jodi Giglio
Councilman James Wooten

Superintendent
Gary Pendzick

ANNUAL WATER SUPPLY REPORT

MAY 2013

Dear Water District Resident:

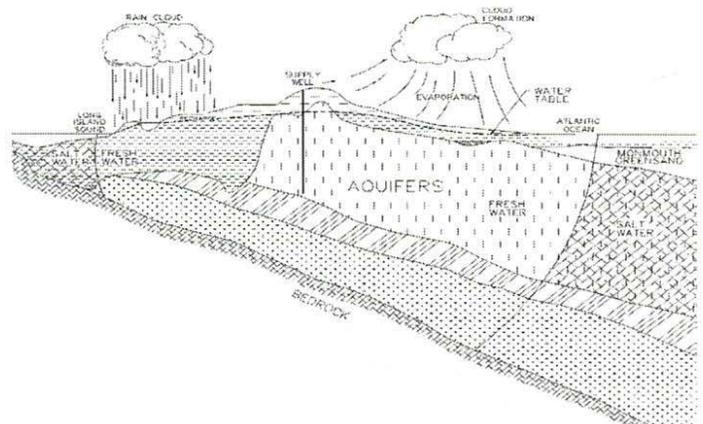
We are pleased to present to you the Riverhead Water District's 2012 Consumer Confidence Report/Annual Water Supply Statement. As shown in this report, the Riverhead Water District continues to provide the residents with a source of water for all of our domestic needs which is reliable and of high quality. Our water is continuously tested to ensure that it meets all drinking water standards. As the Town grows, so does our Water District. We have completed the construction of additional wells and pumping stations to increase our water supply capabilities. Simultaneously, we encourage all of our residents to conserve water so we can limit the expense connected with the construction of new facilities.

Our Water District staff works hard to make sure every resident has clean water every time he or she turns on the tap. Additional information about our Water District and our water supply can be found on our Town website, www.townofriverheadny.gov.

SOURCE OF OUR WATER

The source of water for the District is groundwater pumped from seventeen (17) active wells located throughout the community that are drilled into the Glacial and Magothy aquifers beneath Long Island, as shown on the adjacent figure. Generally, the water quality of the aquifer is good to excellent, although there are localized areas of contamination.

The population served by the Riverhead Water District during 2012 was approximately 35,000. The total amount of water withdrawn from the aquifer in 2012 was 2.60 billion gallons, of which approximately 89.8 percent was billed directly to the residents of the District.



THE LONG ISLAND AQUIFER SYSTEM

INFORMATION ABOUT OUR DRINKING WATER

This report is required to be delivered to all residents of our District in compliance with Federal and State regulations. This report is designed to inform you about the quality water and services we deliver to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. The Riverhead Town Board and the District employees are committed to ensuring that you and your family receive the highest quality water.

COST OF WATER

During 2012, the District utilized a unit price billing schedule with the consumer being billed at a rate of \$10.90 for the first 5,000 gallons per quarter plus \$1.40 for each additional 1,000 gallons for the District's 3/4 inch service size. For rates for larger water service sizes, please go to the Town's website.

ITEM #37

CONTACTS FOR ADDITIONAL INFORMATION

We are pleased to report that our drinking water is safe and meets all Federal and State requirements. If you have any questions about this report or concerning your water utility, please contact Water District Supt. Gary Pendzick at (631) 727-3205 or the Suffolk County Department of Health Services at (631) 852-5810. Water District issues are normally discussed at Town Board meetings that are held on the first and third Tuesday of each month. Log on to the website at www.townofriverheadny.gov for times and locations or call 631-727-3200.

The Riverhead Water District monitors for different parameters and contaminants in your drinking water as required by Federal and State laws. All drinking water, including bottled drinking water, may be reasonably expected to contain at least small amounts of some constituents. It's important to remember that the presence of these constituents does not necessarily pose a health risk. For more information on contamination and potential health risks, please contact the USEPA Safe Drinking Water Hotline at 1-800-426-4791.

The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally occurring minerals and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or human activities. Contaminants that may be present in source water include: microbial contaminants; inorganic contaminants; pesticides and herbicides; organic chemical contaminants; and radioactive contaminants.

In order to ensure that tap water is safe to drink, the State and the EPA prescribe regulations that limit the amount of certain contaminants in water provided by public water suppliers. The State Health Department's and the FDA's regulations establish limits for contaminants in bottled water which must provide the same protection for public health.

Some people may be more vulnerable to disease-causing microorganisms or pathogens in drinking water than the general population. Immuno-compromised persons, such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly and infants, can be particularly at risk from infections. These people should seek advice from their health care provider about their drinking water. EPA/CDC guidelines on appropriate means to lessen the risk of infection by microbial pathogens are available from the Safe Drinking Water Hotline (1-800-426-4791).

The USEPA established a Lead and Copper Rule that requires all public water suppliers to sample and test for lead and copper at the tap. The first testing was required in 1992. All results were excellent indicating that the District's corrosion control treatment program was effective in preventing the leaching of lead and copper from your home's plumbing into your drinking water. The same testing was last conducted in 2010 with the same excellent results. Retesting is scheduled to occur this year.

WATER QUALITY

In accordance with State regulations, the Riverhead Water District routinely monitors your drinking water for numerous parameters. We test your drinking water for coliform bacteria, turbidity, inorganic contaminants, lead and copper, nitrate, volatile organic contaminants, total trihalomethanes and synthetic organic contaminants. Over 135 separate parameters are tested in each of our wells numerous times per year. The table presented on page 3 depicts the quality of your drinking water. It should be noted that many of these parameters are naturally found in all Long Island drinking water and do not pose any adverse health effects.

WATER CONSERVATION MEASURES

The underground water system of Long Island has more than enough water for present water demands. However, saving water will ensure that our future generations will always have a safe and abundant water supply.

The Riverhead Water District continues to implement a water conservation program to help reduce the peak day water use. Several years ago, there were a few days where the total water demand on the District started to exceed the pumping capacity of our system.

Most of this water use was due to lawn irrigation. While the District is proceeding with the construction of new wells to meet the increased water demand, water conservation is necessary to insure we have sufficient water supply during these peak periods for our normal needs as well as the fire fighting protection. A detailed newsletter explaining the water conservation program is attached to this water report. The Riverhead Water District requests that all residents help us conserve water.

WATER TREATMENT

The Riverhead Water District provides treatment at all wells to improve the quality of the water pumped prior to distribution to the consumer. The pH of the pumped water is adjusted upward to reduce corrosive action between the water and water mains and in-house plumbing by the addition of lime. The water is also chlorinated with calcium hypochlorite to protect against the growth of bacteria in the distribution system. The District also adds iron sequestering agents at all wells as part of the District's overall water treatment program to supplement corrosion control and to maintain iron in the soluble state to minimize water stains on laundry and plumbing fixtures.

2012 DRINKING WATER QUALITY REPORT - TABLE OF DETECTED PARAMETERS

Contaminants	Violation (Yes/No)	Date of Sample	Level Detected (Maximum Range)	Unit Measurement	MCLG	Regulatory Limit (MCL or AL)	Likely Source of Contaminant
Inorganic Contaminants							
Lead	No	August/September 2010	ND - 1.22 ⁽¹⁾	ug/l	0	AL = 15	Corrosion of household plumbing systems; Erosion of natural deposits
Copper	No	August/September 2010	ND - 0.32 ⁽¹⁾	mg/l	1.3	AL = 1.3	Corrosion of household plumbing systems; Erosion of natural deposits
Arsenic ⁽²⁾	No	04/18/12	ND - 5.3	ug/l	n/a	MCL = 10	Naturally occurring
Barium	No	02/15/12	ND - 0.1	mg/l	2	MCL = 2.0	Naturally occurring
Ammonia	No	02/24/12	ND - 0.2	mg/l	n/a	MCL = 5.0	Runoff from fertilizer and leaching from septic tanks and sewage
Sodium	No	02/17/12	4.5 - 14.5	mg/l	n/a	No MCL ⁽³⁾	Naturally occurring
Chloride	No	02/17/12	4.21 - 23.2	mg/l	n/a	MCL = 250	Naturally occurring
Iron	Yes ⁽⁴⁾	05/18/12	ND - 830	ug/l	n/a	MCL = 300 ⁽⁴⁾	Naturally occurring
Nitrate	No	02/15/12	ND - 5.3	mg/l	10	MCL = 10	Runoff from fertilizer and leaching from septic tanks and sewage
Sulfate	No	02/24/12	ND - 60.8	mg/l	n/a	MCL = 250	Naturally occurring
Manganese	Yes ⁽⁴⁾	06/13/12	ND - 320	ug/l	n/a	MCL = 300	Naturally occurring
Calcium	No	03/07/12	ND - 13.5	mg/l	n/a	None	Naturally occurring
Magnesium	No	12/28/12	ND - 3.3	ug/l	n/a	NONE	Naturally occurring
Nickel	No	02/13/12	ND - 0.001	mg/l	n/a	MCL = 0.1 ⁽⁶⁾	Naturally occurring
Unregulated Contaminants							
Perchlorate	No	07/18/12	ND - 13.3	ug/l	n/a	AL = 18 ⁽⁵⁾	Fertilizers
Synthetic Organic Contaminants Including Pesticides and Herbicides							
None Detected	--	--	ND	--	--	--	--
Volatile Organic Contaminants							
None Detected	--	--	ND	--	--	--	--
Radionuclides							
Gross Alpha	No	02/24/12	ND - 0.652	pCi/L	n/a	MCL = 15	Naturally occurring
Radium 228	No	02/29/12	ND - 0.937	pCi/L	n/a	NO MCL	Naturally occurring

Definitions:

Maximum Contaminant Level (MCL) - The highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as feasible.

Maximum Contaminant Level Goal (MCLG) - The level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety.

Action Level (AL) - The concentration of a contaminant which, if exceeded, triggers treatment or other requirements which a water system must follow.

Milligrams per liter (mg/l) - Corresponds to one part of liquid in one million parts of liquid (parts per million - ppm).

Micrograms per liter (ug/l) - Corresponds to one part of liquid in one billion parts of liquid (parts per billion - ppb).

Non-Detects (ND) - Laboratory analysis indicates that the constituent is not present.

pCi/L - pico Curies per Liter is a measure of radioactivity in water.

⁽¹⁾ - During 2010, we collected and analyzed 31 samples for lead and copper. The 90% percentile is presented as the maximum result. The Action Levels for both lead and copper were not exceeded at any site tested. Retesting is scheduled for 2013. If present, elevated levels of lead can cause serious health problems, especially for pregnant women, infants, and young children. It is possible that lead levels at your home may be higher than at other homes in the community as a result of materials used in your home's plumbing. Riverhead Water District is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline (1-800-426-4791) or at <http://www.epa.gov/safewater/lead>.

⁽²⁾ - NYS and EPA have promulgated a drinking water arsenic standard of 10 parts per billion. While your drinking water meets the standard for arsenic, it does contain low levels of arsenic. The standard balances the current understanding of arsenic's possible health effects against the costs of removing arsenic from drinking water. EPA continues to research the health effect on low levels of arsenic, which is a mineral known to cause cancer in humans at high concentrations and is linked to other health effects such as skin damage and circulatory problems.

⁽³⁾ - No MCL has been established for sodium. However, 20 mg/l is a recommended guideline for people on high restricted sodium diets and 270 mg/l for those on moderate sodium diets.

⁽⁴⁾ - Iron has no health effects. At 1,000 ug/L a substantial number of people will note the bitter astringent taste of iron. Also, at this concentration, it imparts a brownish color to laundered clothing and stains plumbing fixtures with a characteristic rust color. Staining can result at levels of 50 ug/L, lower than those detectable to taste buds. Therefore, the MCL of 300 ug/L represents a reasonable compromise as adverse aesthetic effects are minimized at this level. Many multi-vitamins may contain 3,000 or 4,000 micrograms of iron per capsule. The Food and Nutrition Board of the National Research Council determined an estimated safe and adequate daily dietary intake of manganese to be 2,000-5,000 micrograms for adults. However, many peoples diets lead them to consume even higher amounts of manganese, especially those who consume high amounts of vegetables or are vegetarian. The infant population is of the greatest concern. It would be better if the drinking water were not used to make infant formula since it already contains iron and manganese. Excess manganese produces a brownish color in laundered good and impairs the taste of tea, coffee and other beverages. Concentrations may cause a dark brown or black stain on porcelain plumbing fixtures. As with iron, manganese may form a coating on distribution pipes. These may slough off, causing brown blotches on laundered clothing or black particles in the water.

⁽⁵⁾ - Perchlorate is an unregulated contaminant. However, the NYS Dept. of Health has established an action level of 18 ug/L.

⁽⁶⁾ - Water from some of the wells within the Riverhead Water District have a slightly elevated nitrate level. This level is below the maximum contaminant level of 10.0 parts per million. Nitrate in drinking water at levels above 10 ppm is a health risk for infants of less than six months of age. High nitrate levels in drinking water can cause blue baby syndrome. The source of the nitrates is the nitrogen in fertilizers and from on-site septic systems. If you are caring for an infant, you should ask advice from your health care provider.

WATER SYSTEM IMPROVEMENTS

The Riverhead Water District has recently completed several projects to improve the water system. The District has completed the construction of additional supply wells in Calverton and Northville to increase the total pumping capacity of the District. The District has also constructed a new transmission main on Rte. 105 in Northville to allow water from new Well No. 17 on the Riverhead Fire District Training Center property for the Water District high pressure zone on Sound Avenue.

Copies of a Supplemental Data Package, which includes the water quality data for each of our supply wells utilized during 2012, are available at the Riverhead Water District office located at 1035 Pulaski Street, Riverhead, New York, the Town Clerk's office and the local Public Library.

We, at the Riverhead Water District, work around the clock to provide top quality water to every tap throughout the community. We ask that all our customers help us protect our water supply, which will improve our way of life and our children's future.

The Riverhead Water District normally conducts over 1,000 water quality tests throughout the year, testing for over 130 different contaminants which have been undetected in our water supply including:

Cadmium	Hexachlorobenzene	Bromochloromethane
Chromium	Benzo(A)Pyrene	1,1,1-Trichloroethane
Fluoride	Aldicarb Sulfone	Carbon Tetrachloride
Mercury	Aldicarb sulfoxide	1,1-Dichloropropene
Selenium	Aldicarb	1,2-Dichloroethane
Silver	Total Aldicarbs	Trichloroethene
Zinc	Oxamyl	1,2-Dichloropropane
Color	Methomyl	Dibromomethane
Turbidity	3-Hydroxycarbofuran	Trans-1,3-Dichloropropene
Odor	Carbofuran	cis-1,3-Dichloropropene
Total Alkalinity	Carbaryl	1,1,2-Trichloroethane
Detergents (MBAS)	Glyphosate	Tetrachloroethene
Free Cyanide	Diquat	1,3-Dichloropropane
Antimony	Endothall	Chlorobenzene
Beryllium	1,2-Dibromoethane (EDB)	1,1,1,2-Tetrachloroethane
Thallium	1,2-Dibromo-3-Chl. Propane	Bromobenzene
Lindane	Dioxin	1,1,2,2-Tetrachloroethane
Heptachlor	Chloroacetic Acid	1,2,3-Trichloropropane
Aldrin	Bromoacetic Acid	2-Chlorotoluene
Heptachloro Epoxide	Dichloroacetic Acid	4-Chlorotoluene
Dieldrin	Trichloroacetic Acid	1,2-Dichlorobenzene
Endrin	Dibromoacetic Acid	1,3-Dichlorobenzene
Methoxychlor	Total Haloacetic Acid	1,4-Dichlorobenzene
Toxaphene	Chloroform	1,2,4-Trichlorobenzene
Chlordane	Bromodichloromethane	Hexachlorobutadiene
Total PCBs	Dibromochloromethane	1,2,3-Trichlorobenzene
Propachlor	Bromoform	Benzene
Alachlor	Total Trihalomethanes	Toluene
Simazine	Gross Beta	Ethylbenzene
Atrazine	Radium 226	M,P-Xylene
Metolachlor	Dichlorodifluoromethane	O-Xylene
Metribuzin	Chloromethane	Styrene
Butachlor	Vinyl Chloride	Isopropylbenzene (Cumene)
2,4-D	Bromomethane	N-Propylbenzene
2,4,5-TP (Silvex)	Chloroethane	1,3,5-Trimethylbenzene
Dinoseb	Trichlorofluoromethane	Tert-Butylbenzene
Dalapon	Chlorodifluoromethane	1,2,4-Trimethylbenzene
Picloram	1,1-Dichloroethene	Sec-Butylbenzene
Dicamba	Methylene Chloride	4-Isopropyltoluene (P-Cumene)
Pentachlorophenol	Trans-1,2-Dichloroethene	N-Butylbenzene
Hexachlorocyclopentadiene	1,1-Dichloroethane	Methyl Tert-Butyl Ether (MTBE)
bis(2-Ethylhexyl)adipate	cis-1,2-Dichloroethene	
bis(2-Ethylhexyl)phthalate	2,2-Dichloropropane	

SOURCE WATER ASSESSMENT

The NYSDOH has completed a source water assessment for this system, based on available information. Known and possible contamination sources to this drinking water source were evaluated. The state source water assessment includes a susceptibility rating based on the risk posed by each potential source of contamination and how easily contaminants can move through the subsurface to the wells. The susceptibility of a water supply well to contamination is dependent upon both the presence of potential sources of contamination within the well's contributing area and the likelihood that the contaminant can travel through the environment to reach the well. The susceptibility rating is an estimate of the potential for contamination of the source water. It does not mean that the water delivered to consumers is, or will become, contaminated. (See section "Water Quality" for a list of contaminants that have been detected.) The source water assessments provide resource managers with additional information for protecting source waters into the future.

As mentioned before, our water is derived from 17 active wells. The source water assessment has rated most of the wells as having a high susceptibility to industrial solvents, pesticides and nitrates and microbial contamination. The elevated susceptibility ratings are due primarily to the various land uses and their related point sources of contamination in the assessment area. The land uses include unsewered commercial, industrial and residential, as well as agricultural land use. While the source water assessment rates our well as being susceptible to microbials, please note that our water is disinfected to ensure that the finished water delivered into your home meets New York State's drinking water standards for microbial contamination.

A copy of the assessment, including a map of the assessment area, can be obtained by contacting the Water District.

The Town of Riverhead
Riverhead Water District

Water News



District Newsletter

Spring 2017

WELCOME TO THE RIVERHEAD WATER DISTRICT

In this issue:

SUPERVISOR WALTER: WELCOME
TO RIVERHEAD WATER DISTRICT

CONTINUING TO UPGRADE OUR
WATER INFRASTRUCTURE

IRRIGATION WATER USE DRIVE
SUMMER DEMANDS

WATER QUALITY REPORT

ODD AND EVEN TO REDUCE THE
PEAK - BUT WE NEED YOUR HELP!

OTHER WATER CONSERVATION
TIPS

Sean M. Walter - Town Supervisor

John Dunleavy - Councilman

Jodi Giglio - Councilwoman

Tim Hubbard - Councilman

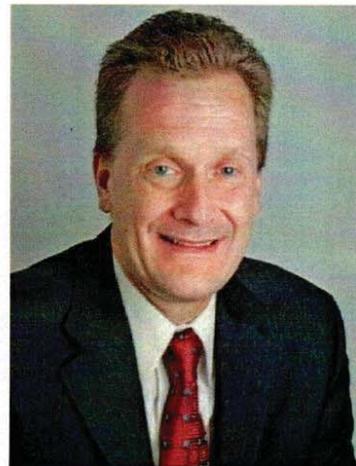
James Wooten - Councilman

Mark Conklin
Water District Superintendent

Thomas Kruger
Assistant Superintendent

Phone (631) 727-3205
Fax: (631) 369-4608
1035 Pulaski Street
Riverhead, New York 11901
Monday - Friday
8:30 a.m. - 4:30 p.m.

www.townofriverheadny.gov



I wanted to take this opportunity to personally welcome you as an existing or new customer of the Riverhead Water District (RWD). For over 100 years, the Riverhead Water District has been committed to providing its customers with safe, adequate and a reliable supply of water service in an environmentally and economically responsible way.

As the Town continues to develop and grow, the Water District will take the necessary steps to continue to provide a reliable supply of clean and healthy drinking water to our residents at a reasonable cost. The Riverhead Water District is dedicated to ensuring that our water system is operated and maintained to competitively and reliably serve our customers today and for generations to come.

The District is planning to expand their facilities by constructing a new 1.5 million gallon storage tank and booster pump station at Plant No. 15 on Tuthills Lane, installing approximately 4,800 linear feet of transmission main on Pulaski Street, Mill Road, Osborn Avenue, Pier Avenue and Peconic Bay Boulevard in 2017/18, and installing emergency generators with automatic transfer switches at Plant No. 1 and Plant No. 16.

I am tremendously proud of the Riverhead Water District in their efforts to provide superior quality, both in product and service, to our customers while operating in a cost-effective manner. The staff members are dedicated to maintaining the District's system, giving every effort to protect the public's health, safety, and investment and to assist the District's customers in a courteous and timely manner. With their expertise and hard-work, they contribute to making Riverhead one of the best places to live and to raise a family.

Wishing you and your family a happy and safe summer.

Sincerely yours,
TOWN OF RIVERHEAD

Sean M. Walter
Town Supervisor



TOWN COUNCIL
John Dunleavy
James Wooten
Jodi Giglio
Timothy Hubbard

ITEM #38

*Riverhead Water District - Providing Water To The Community
For over 100 Years!*

CONTINUING TO UPGRADE OUR WATER INFRASTRUCTURE

The Water District recently completed an evaluation to determine what infrastructure improvements are necessary to ensure that our supply wells, water storage tanks and water distribution system is sufficient to meet the water demands of our community.

The Riverhead Town Board recently approved funding for several projects for the improvement expansion and upgrading of the Water District.

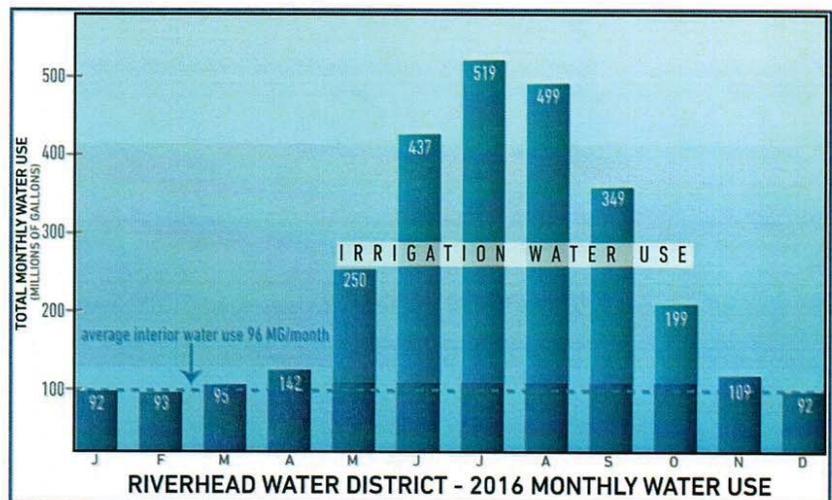
The District is in the preliminary design stages of constructing a new water storage tank and booster pump station at Plant No. 15 on Tuthills Road. This new facility will allow water to be pumped into the storage tank on a 24-hour basis with the booster pumps pushing the stored water during the peak demand periods.

A second infrastructure project entails the installation of water transmission mains between the Pulaski Street Plant and Plant No. 6 on Osborn Avenue. Water main will be installed at five (5) different locations: Pulaski Street (2,600 feet), Mill Road (1,100 feet), Young's Avenue (850 feet), Peconic Bay Boulevard (150 feet) and Pier Avenue (100 feet). These transmission mains will allow water from Wells 1, 2 and 3 at the Pulaski Street Plant to be pumped north to areas of high demand. This work is being designed this spring and we expect the transmission mains to be installed in the fall of this year.

A third project to improve the reliability of the water supply facilities is the installation of emergency generators at Plant No. 1 (200Kw - natural gas engine) and Plant No. 16 (450Kw - diesel engine) on Edwards Avenue. These generators will include automatic transfer switches that will start the generator on sensing a loss of electric power so the District can continue to supply water during power outages.

IRRIGATION WATER USE DRIVES SUMMER DEMANDS

On a typical winter day, the Riverhead Water District only utilizes 2 or 3 of our supply wells to meet the 3.2 million gallons a day average water demands of the community. But as shown on the adjacent chart, during the summer months of June through September, water demands increase drastically requiring all of our 17 wells to be used to keep up with the extreme water demand. During the hot and dry periods of the summer, water use peaks at over 20 million gallons a day. Most of this increase can be attributed directly to irrigation use.



WATER QUALITY REPORT

Enclosed with this newsletter is the Riverhead Water District's Annual Water Supply Report for 2016. This report presents the facts about the quality of our water supply and summarizes the water quality sampling test results taken throughout 2016. A copy of this report can also be found at the Town's website at www.townofriverheadny.gov.

The District is proud to report that our water meets or exceeds all Federal and State drinking water standards. Should you have any questions concerning this report, please contact the Water District at 631.727.3205.

ODD AND EVEN TO REDUCE THE PEAK BUT WE NEED YOUR HELP!

The Riverhead Water District, like all water suppliers on Long Island, will be continuing with our water conservation program to reduce our lawn irrigation water use. Our goal is to reduce our peak summer usage by 15%.

The main component of the Riverhead Water District program will be continuing to implement a voluntary lawn irrigation program that will only permit the watering of a lawn every other day, based on the address number of your home. ODD number houses would water on ODD days of the month; EVEN number houses would water on EVEN days of the month.

During the hottest summer day, approximately 80 percent of all the water being supplied by the Riverhead Water District goes directly to lawn irrigation, with over 70 percent of all homeowners having an irrigation system. They are great for keeping our lawns green throughout the summer, but they are putting a tremendous strain on our precious water supply system. The real question is: Do we need to water everyday?

Horticultural specialists have determined that it is better for a lawn to be irrigated less frequently than daily to promote deep root growth. The Cornell Cooperative Extension recommends that Long Island lawns only need 1 inch of rain or irrigation per week. Therefore, the every other day ODD/EVEN program provides sufficient water to our lawns.

The Riverhead Water District is recommending that all homeowners with automatic irrigation systems set up their control panels to operate every other day. You may also want to install a rain or soil sensor that will shut down the irrigation system during rain events or when watering is not needed. In addition, consider reducing the number of minutes you run each zone by 10%. If you are set for 20 minutes run time for each zone, reduce it to 18 minutes.



I'm more than just another tall drink of water.

If only our tap water could talk to us. It might remind us that tap water is more than just a healthy, refreshing drink. It also fights fires, supports our economy and provides us with the high quality of life we enjoy.

Our water bills pay to keep our community tap water safe, reliable and there for us — 24/7 without fail. For more information about what your tap water delivers, visit www.townofriverheadny.com

Only Tap Water Delivers



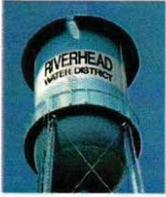
Presented in cooperation with

American Water Works Association





Town of Riverhead
Riverhead Water District
1035 Pulaski Street,
Riverhead, New York 11901

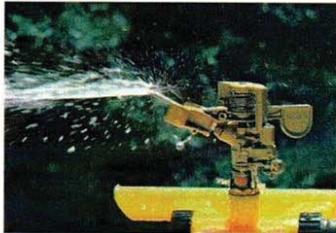


Providing Water to Riverhead
for over 100 Years



OTHER WATER CONSERVATION TIPS

Irrigation restrictions on an every other day basis is the prime action of our Water Conservation Program. But there are many other ways every member of our community can save water everyday. Here are a few conservation tips that may help:



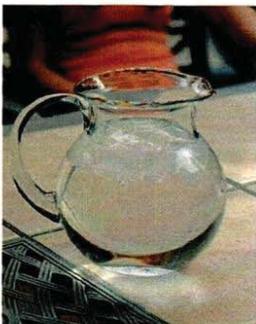
- Run full loads in dishwasher and washing machines.
- Insulate water pipes to get hot water faster and reduce the need to run faucet longer.

• Fix that leaking faucet. A leaking faucet or leaking toilet can amount to over 100 gallons per day. Multiply that by the hundreds of faucets that could be leaking on any given day and that adds up to a lot of wasted water!



• Filling a plastic bottle with water and place in toilet tanks can save gallons of water per day.

• Store a pitcher of water in your refrigerator rather than letting it run until cold every time you want a cold glass of water.



• Many consumers are not awake when the sprinklers go on. Sprinkler systems should be periodically checked for broken heads and/or leaking pipings and system repairs as soon as possible.

• Utilize drip irrigation in your gardens. Drip irrigation is not only more efficient, but saves up to 80% in water usage and can help reduce your water bill.



• Don't let the faucet run when brushing your teeth or shaving. Turn it on and off when needed.

For more conservation tips, please visit www.epa.gov/watersense.

<p>TOWN OF RIVERHEAD 2018 EAST CREEK 2018 BOAT LAUNCH 2018 PERMIT EXPIRES 12/31/18</p> <p style="font-size: 2em; font-weight: bold;">0001</p> <p> <input type="radio"/> SC-\$5.00 <input type="radio"/> COM-\$300.00 <input type="radio"/> Res-\$20.00 <input type="radio"/> NR-\$75.00 </p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Affix to Trailer</p>	<p>TOWN OF RIVERHEAD 2018 EAST CREEK 2018 BOAT LAUNCH 2018 PERMIT EXPIRES 12/31/18</p> <p style="font-size: 2em; font-weight: bold;">0001</p> <p> <input type="radio"/> SC-\$5.00 <input type="radio"/> COM-\$300.00 <input type="radio"/> Res-\$20.00 <input type="radio"/> NR-\$75.00 </p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Affix to Vessel/Comm Vehicle</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">DATE</td> <td style="width: 50%;">PLATE#</td> </tr> <tr> <td colspan="2">NAME</td> </tr> <tr> <td colspan="2">ADDRESS</td> </tr> <tr> <td>CITY</td> <td> CASH <input type="checkbox"/> CHECK <input type="checkbox"/> CHARGE <input type="checkbox"/> </td> </tr> <tr> <td>SERIAL NUMBER</td> <td>RECEIVED BY</td> </tr> <tr> <td style="font-size: 1.5em; font-weight: bold;">0001</td> <td># OF PERMITS</td> </tr> <tr> <td>TOTAL AMOUNT RECEIVED</td> <td>DATE PICKED UP</td> </tr> </table> <p> <input type="radio"/> SC-\$5 <input type="radio"/> COM-\$300 <input type="radio"/> Res-\$20 <input type="radio"/> NR-\$75 </p>	DATE	PLATE#	NAME		ADDRESS		CITY	CASH <input type="checkbox"/> CHECK <input type="checkbox"/> CHARGE <input type="checkbox"/>	SERIAL NUMBER	RECEIVED BY	0001	# OF PERMITS	TOTAL AMOUNT RECEIVED	DATE PICKED UP
DATE	PLATE#															
NAME																
ADDRESS																
CITY	CASH <input type="checkbox"/> CHECK <input type="checkbox"/> CHARGE <input type="checkbox"/>															
SERIAL NUMBER	RECEIVED BY															
0001	# OF PERMITS															
TOTAL AMOUNT RECEIVED	DATE PICKED UP															

Abrasive Clear ink in this area.

Size: H=+ 7.250 inch x V=+ 3.000 inch

- Black
- Cyan
- Magenta
- Yellow
- Die Line
- Abrasive Clear Ink

PMS 208 Burgundy

 <p>RYDIN Solutions Driven. Customer Focused. www.rydin.com</p> <p>PLEASE NOTE: While every endeavor has been made to insure accuracy please check that spelling, punctuation, color(s) and bleeds match your specifications.</p> <p>Rydin will not be held responsible for any errors (either artwork or printing) overlooked or changes made once this artwork has been dispatched.</p> <p>The colors on this proof are for representational purposes only.</p> <p>Numbers are for visual reference only.</p>	<p>Jan. 09 2018</p> <p>Town of Riverhead</p> <p>2018 East Creek Boat Ramp</p> <p>Mylar - white void</p> <p>C: 23180</p> <p>J: 267175</p> <p>E: 170627</p> <p style="text-align: right; font-size: 1.5em; font-weight: bold;">SR: 201</p>
---	---

ITEM #40

23180_267177 4x4.ai

2018
Town of Riverhead
4x4 Permit - \$55.00
 Expires: December 31, 2018
 Does not include parking.

License Plate#

001

DATE PLATE#

NAME

ADDRESS

CITY CASH CHECK CHARGE

SERIAL NUMBER RECEIVED BY # OF PERMITS

001 TOTAL AMOUNT RECEIVED DATE PICKED UP

4x4 - \$55.00

Abrasive Clear ink in this area.

Size: H=+ 7.250 inch x V=+ 3.000 inch

Abrasive Clear ink in this area.

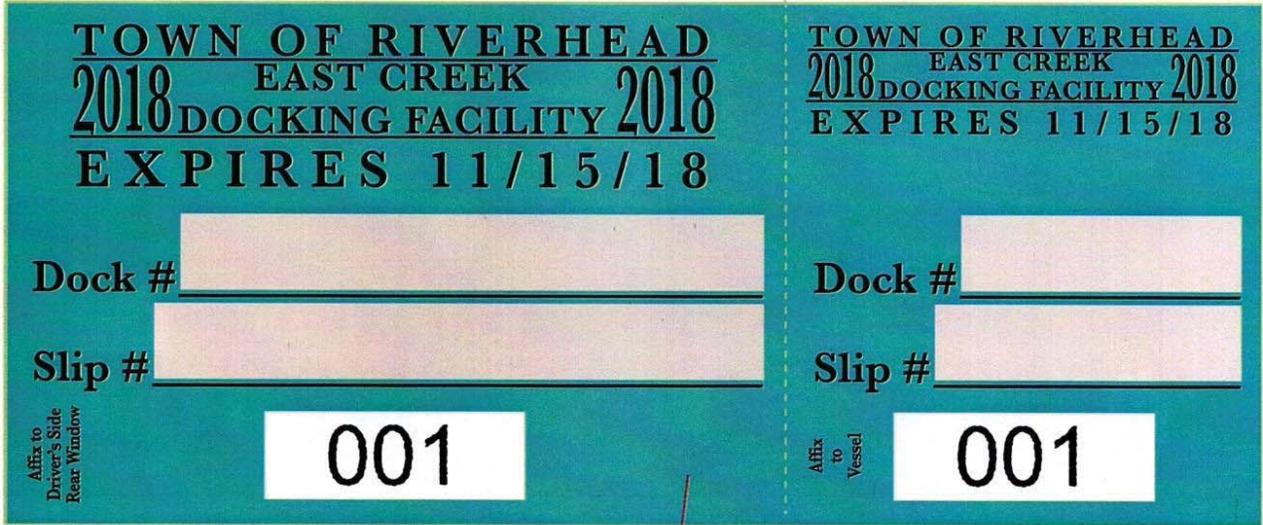
- Black
- Cyan
- Magenta
- Yellow
- Die Line

PMS 208 Burgundy

● Abrasive Clear Ink

	<p>Jan. 09 2018</p> <p>Town of Riverhead</p> <p>2018 4X4 Permit</p> <p>Mylar - white void</p>	<p>SR: 201</p>
<p>PLEASE NOTE: While every endeavor has been made to insure accuracy please check that spelling, punctuation, color(s) and bleeds match your specifications.</p> <p>Rydin will not be held responsible for any errors (either artwork or printing) overlooked or changes made once this artwork has been dispatched.</p> <p>The colors on this proof are for representational purposes only.</p> <p>Numbers are for visual reference only.</p>	<p>C: 23180</p> <p>J: 267177</p> <p>E: 170627</p>	

ITEM #41



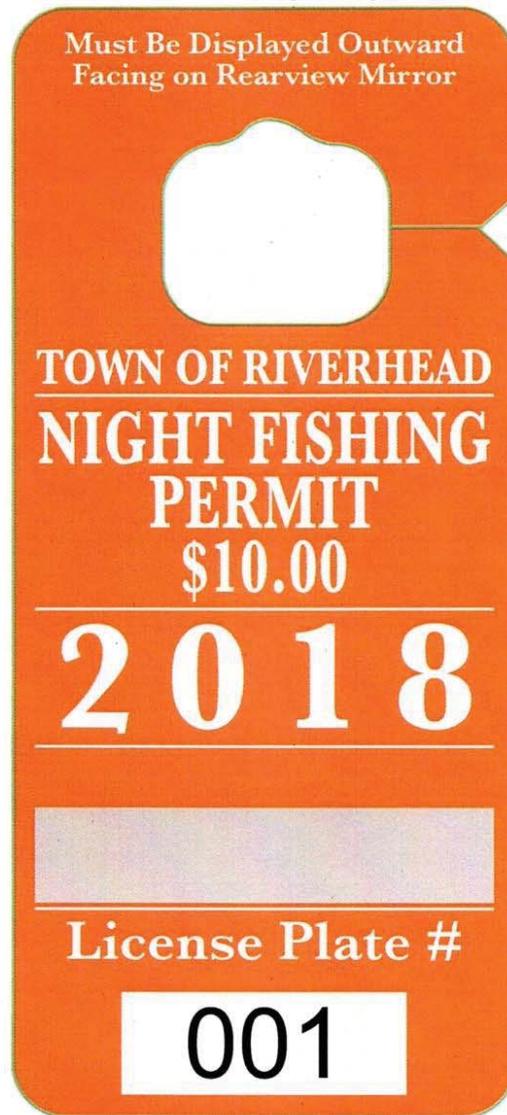
Size: H=+ 7.250 inch x V=+ 3.076 inch

- Pantone 485B
- Cyan
- Yellow
- Black
- De Loe

PMS 320
Aqua Blue/
Green

	<p>Jan. 09 2018</p> <p>Town of Riverhead</p> <p>2018 East Creek Docking Fac</p> <p>Mylar - white void</p>
<p>PLEASE NOTE: While every endeavor has been made to insure accuracy please check that spelling, punctuation, color(s) and bleeds match your specifications.</p> <p>Rydin will not be held responsible for any errors (either artwork or printing) overlooked or changes made once this artwork has been dispatched.</p> <p>The colors on this proof are for representational purposes only.</p> <p>Numbers are for visual reference only.</p>	<p>C: 23180</p> <p>J: 267478</p> <p>E: 170627</p> <p>SR: 201</p>

ITEM #42



Size: H=+ 2.750 inch x V=+ 6.000 inch

- Black
- Orange
- ADAMSPERSON.COM

ITEM #44

 RYDIN <i>Solutions Driven. Customer Focused.</i> www.rydin.com	Dec. 18 2017
PLEASE NOTE: While every endeavor has been made to insure accuracy please check that spelling, punctuation, color(s) and bleeds match your specifications.	Town of Riverhead
Rydin will not be held responsible for any errors (either artwork or printing) overlooked or changes made once this artwork has been dispatched.	2018 Night Fishing Permit
The colors on this proof are for representational purposes only.	25 mil composite - clear lam
Numbers are for visual reference only.	C: 23180
	J: 267180
	E: 170627
	SR: 201

**Must Be Displayed Outward
Facing on Rearview Mirror**



TOWN OF RIVERHEAD

**2018
SPECIAL EVENT**

Dates Valid

License Plate #

001

Size: H=+ 2.750 inch x V=+ 6.000 inch

- Black
- Light Green

ITEM #45



RYDIN
Solutions Driven. Customer Focused.

www.rydin.com

PLEASE NOTE: While every endeavor has been made to insure accuracy please check that spelling, punctuation, color(s) and bleeds match your specifications.

Rydin will not be held responsible for any errors (either artwork or printing) overlooked or changes made once this artwork has been dispatched.

The colors on this proof are for representational purposes only.

Numbers are for visual reference only.

Dec. 18 2017

Town of Riverhead

2018 Special Event

110# White Cover - unctd

C: 23180

J: 267181

E: 170627

SR: 201

Must Be Displayed Outward
Facing on Rearview Mirror



TOWN OF RIVERHEAD

2018 EAST CREEK DOCKING FACILITY 2018

GUEST PASS \$10.00

Last Name

Expires 11/15/18

Dock#

Slip#

001

Size: H=+ 2.750 inch x V=+ 6.000 inch

- Cyan
- Yellow
- Black
- Die Line

PMS 320
Aqua Blue/
Green

ITEM #46



RYDIN
Solutions Driven. Customer Focused.

www.rydin.com

PLEASE NOTE: While every endeavor has been made to insure accuracy please check that spelling, punctuation, color(s) and bleeds match your specifications.

Rydin will not be held responsible for any errors (either artwork or printing) overlooked or changes made once this artwork has been dispatched.

The colors on this proof are for representational purposes only.

Numbers are for visual reference only.

Dec. 18 2017

Town of Riverhead

2018 East Creek Dock Facility

25 mil composite - clear lam

C: 23180

J: 267179

E: 170627

SR: 201



Town of Riverhead Beach Attendant Evaluation Form

Name: _____

Season: 2____

Time in Dept.: _____

Evaluator: _____

Rating Scale

- 1-Developmental Need
- 2-Meets Expectations
- 3- Exceeds Expectations

Note: Any scores with a one (1) or three (3) must be accompanied with a comment.

Evaluation Skills	Score	Explanation/Comment
Beach Attendant Skills		
Stickers		
Selling Appropriate Stickers		
Use of Street List		
Money Prepared & Ready for Deposit		
Money Neat & Organized		
Accuracy of Deposit		
Recording All Information on Stickers		
Paperwork		
Daily Paperwork-Neat & Accurate		
Box Neat & Organized		
Use of Beach Coverage Form		
Cleanliness		
Bathrooms		
Parking Lot & Facility		
Daily Tasks		
Displaying & Taking Down Permit		
Displaying & Taking Down Flags		
Putting Out & Taking In Cones		
Watering Plants		
Use of 2-Way Radio		
Work Habits		
Attendance		
Attendance at Meetings & Trainings		
Punctuality		
Knowledge of Rules & Regulations		
Interaction with Public		
Professional Appearance		
Ability to Carry Out Instruction		
Use of Good Judgment		
Ability to Problem Solve		
Communication		
Finding Coverage for Shifts		
Communication with Co-workers		
Communication with Supervisors		
Overall Performance		
End of Season: Overall Performance	1 2 3	
Comments:		
End of Season: Employee's Signature: _____		Date: _____
Evaluator's Signature: _____		Date: _____
Supervisor's Signature: _____		Date: _____
Employee Comments (Optional): _____		

ITEM #47

Recommend to Rehire _____



Town of Riverhead Water Safety Instructor Evaluation Form

Name: _____

Season: 2____

Time in Dept.: _____ Years as WSI: _____

Evaluator: _____

For each category an employee will score a **3** for exceeds expectations; **2** for meets expectations; or **1** for developmental need.

Any scores with a one (1) or three (3) must be accompanied with a comment.

Evaluation Skills	Score	Explanation/Comment
Risk Management		
Attentive to all participants in class		
Appropriate response to accidents and emergencies		
Keeps calm during conflict		
Ability to engage an unwilling participant		
Keeps certifications current- (WSI/Waterfront LG/CPR/AED)		
Identifies & Reports safety issues with facilities and equipment		
Relational Service		
Knows students on first name basis		
Creates welcoming environment for participants and parents		
Listens and responds to participants questions and requests		
Brings new ideas to the program		
Gives feedback to everyone in class equally		
Ability to manage participants in the water		
Interaction with coworkers		
Interaction with supervisors		
Wears proper swim attire (according to handbook)		
Swim Instructor Responsibilities		
Understands skills for different swim levels and how to teach them		
Ability to handle diverse (age, ability, language) and large classes		
Completion of daily paperwork/ARC paperwork/timesheets		
Sets correct example for coworkers		
Is on time for all shifts, does not leave early		
Attends all meetings & trainings		
Prepares and follows lesson plans		
Ability to adjust lesson plans according to the participants in the class		
Accomplishes skills for each class in the allotted time		
Applies knowledge of swim skills to properly teach swimmer's techniques to pass the levels		
Overall Performance		
Overall Performance	1 2 3	
Comments:		
<div style="display: flex; justify-content: space-between;"> <div>Employee's Signature: _____</div> <div>Date: _____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Evaluator's Signature: _____</div> <div>Date: _____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>Supervisor's Signature: _____</div> <div>Date: _____</div> </div>		
Employee Comments (Optional):		

ITEM #48

Recommend to Rehire _____

Town of Riverhead

INDIVIDUAL ATTENDANT DEPOSIT RECORD

NAME	DEPOSIT DATE	BEACH/LOCATION	DEPOSIT BAG #
------	--------------	----------------	---------------

	TYPE	BOOK #	# SOLD	STICKER #'S SOLD- Cash	Sticker #'s SOLD-C.C.	# VOIDS	STICKER #'S VOIDED	Credit Card TOTAL	CASH TOTAL
1									
2									
3									
4									
5									
6									
7									

BOOK TYPE

R-Resident SC- Senior Citizen NR- Non Resident BR- Boat Ramp D- Daily
 4x4- 4 Wheel Drive SND- Sr. Non-Driver ND- Non-Driver HM- Hotel/Motel
 RF- Riverfront

Cash Total	
Credit Card Total	
Total Deposit	
Signature	
Attested By	

Town of Riverhead

INDIVIDUAL ATTENDANT DEPOSIT RECORD

NAME	DEPOSIT DATE	BEACH/LOCATION	DEPOSIT BAG #
------	--------------	----------------	---------------

	TYPE	BOOK #	# SOLD	STICKER #'S SOLD- Cash	Sticker #'s SOLD-C.C.	# VOIDS	STICKER #'S VOIDED	Credit Card TOTAL	CASH TOTAL
1									
2									
3									
4									
5									
6									
7									

BOOK TYPE

R-Resident SC- Senior Citizen NR- Non Resident BR- Boat Ramp D- Daily
 4x4- 4 Wheel Drive SND- Sr. Non-Driver ND- Non-Driver HM- Hotel/Motel
 RF- Riverfront

Cash Total	
Credit Card Total	
Total Deposit	
Signature	
Attested By	

ITEM #49



Town of Riverhead Lifeguard Evaluation Form

Name: _____

Season: 2 _____

Time in Dept.: _____

Evaluator: _____

Rating Scale

1-Developmental Need

2-Meets Expectations

3- Exceeds Expectations

Note: Any scores with a one (1) or three (3) must be accompanied with a comment.

Date	Distress	Active	CPR/1 st Aid	Swim Log	Whistle	Cards	Sup. Initials

Evaluation Skills	Score	Explanation/Comment
Lifeguard Skills		
Attentiveness on Stand		
Attentiveness on Reserve		
Attitude Towards workouts		
Proficiency in Water Skills		
Ability to Spot Potential Danger		
Work Habits		
Attendance		
Attendance at Meetings & Trainings		
Punctuality		
Use of Down Time		
Professional Appearance		
Completion of Required Paperwork		
Follows Rules & Regulations		
Interaction with Superiors		
Interaction with Co-workers		
Interaction with Public		
Four Guiding Principles		
Proactivity		
Continuous Improvement		
Leadership		
Cooperative Teamwork		

Overall Performance	
Overall Performance	1 2 3

Comments: _____

ITEM #50

Employee's Signature: _____ Date: _____

Evaluator's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____

Employee Comments (Optional):

Recommend to Rehire _____