



COMMON COUNCIL MEETING

Common Council Chambers

Monday, July 8, 2019

6:30 p.m.

I. ROLL CALL

II. REVIEW OF MINUTES:

III. READING OF ITEMS by the City Chamberlain of any resolutions not listed on the printed agenda.

IV. PUBLIC PARTICIPATION: Three (3) minutes per person up to 45 minutes of public comment on any agenda and non-agenda item.

V. CHAIRWOMAN'S COMMENTS AND PRESENTATIONS:

VI. MAYOR'S COMMENTS:

VII. MOTIONS AND RESOLUTIONS:

1. Resolution R19-59, approving appointments to the WAC
2. Resolution R19-61, approving an appointment to the Board of Ethics.

VIII. ORDINANCES AND LOCAL LAWS:

IX. PRESENTATION OF PETITIONS AND COMMUNICATIONS:

1. **FROM REBUILDING TOGETHER**, a communication regarding the 2019 Home Repair Application.

2. **FROM HUDSON RIVER HOUSING**, a communication regarding the Community Impact Survey.
3. A communication regarding the Water/sewer contract with Veolia.
4. **FROM LATONYA PETERSON**, a notice of property damage sustained on June 21, 2019.

X. UNFINISHED BUSINESS:

XI. NEW BUSINESS:

XII. ADJOURNMENT:

RESOLUTION
(R-19-59)

INTRODUCED BY CHAIRWOMAN FINNEY_____:

WHEREAS, there currently exists vacancies on the Waterfront Advisory Committee which the Common Council is desirous of filling; and

WHEREAS, in accordance with the Section 18 ½-5(b) the Common Council shall appoint three members to the Waterfront Advisory Committee and shall further appoint the committee chair; and

WHEREAS, the Common Council has solicited members of the community who are interested in serving on such board, and has interviewed those who have submitted their names; and

WHEREAS, it is in the best interest of the City of Poughkeepsie and its citizens that the Waterfront Advisory Board should have a full complement of members in order to properly conduct the business required of the Board;

NOW, THEREFORE,

BE IT RESOLVED, that the Common Council of the City of Poughkeepsie hereby appoints the following individuals to the Waterfront Advisory Committee for a two (2) year term:

Comelia Harris (Exp.: March 5, 2021)
Harvey Flad (Exp.: March 5, 2021)
Terriena Brown (Ex.: March 5, 2021)

BE IT FURTHER RESOLVED, that the Common Council hereby appoints the following member as Chair:

Europa McGovern

SECONDED BY COUNCILMEMBER_____.

RESOLUTION
(R-19-61)

INTRODUCED BY CHAIRWOMAN FINNEY _____:

WHEREAS, in accordance with City Charter §6.08 and Administrative Code §15.05, the Common Council of the City of Poughkeepsie is authorized to make appointments of City residents to serve on the City of Poughkeepsie Board of Ethics; and

WHEREAS, all appoints to the Board of Ethics are currently vacant; and

WHEREAS, it is in the best interest of the City of Poughkeepsie and its citizens that the Board of Ethics should have a full complement of members in order to properly conduct the business required of the Board;

NOW, THEREFORE,

BE IT RESOLVED, that the Common Council of the City of Poughkeepsie hereby appoints the following individual to the Board of Ethics for a two (2) year term:

Michael Harris

SECONDED BY _____.

PLEASE PRINT OR TYPE FORM CLEARLY

NOTE: Claim must be filed with and served to the City Chamberlain in triplicate (3 copies) within 90 days after the claim arises. Use additional sheets if necessary.

NOTICE OF CLAIM
AGAINST
THE CITY OF POUGHKEEPSIE, NEW YORK

TODAY'S DATE: 7-1-19

NAME AND ADDRESS OF EACH CLAIMANT:

2 Virginia Ave
POK. N.Y. 12601 Apt 2
TELEPHONE NUMBER: 845 337-6094

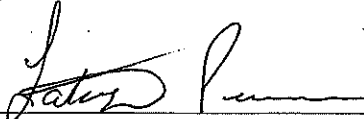
NAME AND ADDRESS OF ATTORNEY (IF ANY):

DESCRIBE WHAT HAPPENED AND AMOUNT CLAIMED (PLEASE STATE DATE, TIME, LOCATION, AND MANNER IN WHICH CLAIM AROSE):

On June 21st at 11am My neighbor
knocked on my door and told me that
a tree fell on my car and damaged it

ITEMS DAMAGED OR INJURIES SUSTAINED:

2012 Nissan Rogue

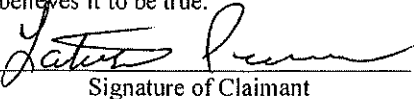


Signature of Claimant

Signature of Claimant

STATE OF NEW YORK, COUNTY OF Dutchess s.s.:

Latoya Pearson being duly sworn, say(s) that he/she is/are the claimant(s) named in the foregoing claim, that he/she has/have read the same and know(s) the contents thereof; that the same is true to his/her own knowledge, except as to the matters alleged upon information and belief and as to those items, he/she believes it to be true.

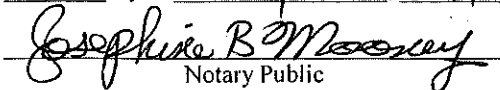


Signature of Claimant

Signature of Claimant

Sworn to before me this

1st day of July, 2019


Notary Public

JOSEPHINE B. MOONEY
NOTARY PUBLIC, State of New York
No. 04MO6391835
Qualified in Dutchess County
Commission Expires 5/13/2023

NOTE: After submitting this form to the City Chamberlain, please direct any inquires to the Corporation Counsel at (845) 451-4065, Monday to Friday, 8:30 a.m. - 4:00 p.m.

CITY OF POUGHKEEPSIE
CITY CHAMBERLAIN
JUL -2 PM 2:34



Transmissions | Tune Ups | Breaks | Engine Repair
Oil Changes | Rotors | Tire Rotation | Paint & Details
Office 845 454 7337 | Fax 845 454 7336
Cell 845 380 7297 | 358 Mansion St | Poughkeepsie, NY 12601

MATERIAL: ALL PARTS NEW UNLESS SPECIFIED: U-USED, R-REBUILT, RC-RECONDITIONED

QTY.	PART NO.	NAME OF PART	PRICE	WARRANTY YR
1		Body Labor	100.40	
1		Paint Labor	899.00	
1		Paint Supplies	615.60	
1		PDR	425.00	
		Subtotal charge	1,440.00	
		Total Cost	\$ 2,040.00	
		Day Adjustment	\$ 500.00	
		MECHANICS RECOMMENDATIONS	2,040.00	

Estimated cost \$ _____ Estimate Charge _____ Basis for Charge _____

PLEASE READ CAREFULLY. CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:
I UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE, INCLUDING A COMPLETION DATE, IF MY FINAL BILL WILL EXCEED \$100. (\$50 in MD)

I REQUEST A WRITTEN ESTIMATE. THE FINAL BILL MAY NOT EXCEED THIS ESTIMATE WITHOUT MY WRITTEN APPROVAL.
I DO NOT REQUEST A WRITTEN ESTIMATE. AS LONG AS THE REPAIR COSTS DO NOT EXCEED \$ _____, THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY WRITTEN OR ORAL APPROVAL.
I DO NOT REQUEST A WRITTEN ESTIMATE.

*Checked lines apply (Preparer must check at least one):
This charge represents costs and profits to the motor vehicle repair facility for miscellaneous shop supplies or waste disposal.
This amount includes a charge of \$ _____, which is required under _____ law.

NAME LATOYA PEARSON PHONE 845 4534293
ADDRESS 2 Virginia Ave
CITY/STATE/ZIP POK NY 12601
2ND AUTHORIZED NAME _____ PHONE _____

CUSTOMER'S INFORMATION
RECEIVED (DATE & TIME) 6/26/11 CUSTOMER'S ORDER NO. _____
YEAR * MAKE * MODEL 2012 Nissan Rogue SV SERIAL #/VIN _____
LICENSE NO. 6X1-7794 ODOMETER 115600 WRITTEN BY Reese
☐ LUBE ☐ OIL CHANGE ☐ FLUSH TRANS. ☐ FLUSH DIFF. ☐ WASH ☐ POLISH
CHARGE FOR HAZARDOUS OR OTHER WASTE REMOVAL * _____

METHOD OF PAYMENT:
☐ CHECK ☐ CHARGE ☐ CASH
☐ FLAT RATE ☐ HOURLY ☐ BOTH
☐ RETAIN PARTS ☐ DESTROY PARTS
AUTHORIZED BY _____

LABOR ONLY
PARTS
ACCESSORIES
GAS, OIL & GREASE
MISC. MERCHANDISE
SUBLET REPAIRS
STORAGE FEE
TAX
TOTAL **▶** _____

You are entitled by law to the return of all parts replaced, except those for which there is a core charge, unless you agree otherwise by initiating the following: _____ I do not desire the return of any of the parts that are replaced during the authorized repairs.
Estimate good for 30 days. Not responsible for damage caused by theft, fire, or acts of nature. I authorize the above repairs, along with any necessary materials. I authorize you and your employees to operate my vehicle for the purpose of testing, inspection, and delivery at my risk. An express mechanic's lien is hereby acknowledged on the above vehicle to secure the amount of the repairs thereto. If cancel repairs prior to their completion for any reason a tear-down and reassembly fee of \$ _____ will be applied.

SIGNED: Reese
DATE 6/27/11
G. Adams
GT3870
09-11