

**Town Supervisor**  
Lance Peterson  
**Town Board Members**  
Kenneth Knapp  
Donna J. Patchen  
James Kenney  
Kathleen LaClair



**Town of Clayton**  
405 Riverside Drive  
Clayton, New York 13624  
Telephone: (315) 686-3512  
Fax: (315) 686-2651  
[www.townofclayton.com](http://www.townofclayton.com)

**Town Clerk**  
Megan Badour

## **TOWN BOARD WORKSHOP MEETING AGENDA**

*Wednesday, March 22, 2023 • 5:00pm • Town Hall*

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1. **Pledge of Allegiance**
2. **Town Board Workshop Meeting**
  - A. **Town Clerk**
    - i. *Correspondence* that Needs Recording
    - ii. *Minutes* from 03/08/23 Regular Meeting
  - B. **Public: Comment on Agenda Items**
  - C. **Public Hearing @ 5:15pm: Local Law #2 2023 Firefighter and Ambulance Worker Exemption**
  - D. **Workshop Discussion Items:**
    - i. Appointment of MEO (2)
    - ii. Introduce Local Law 3 2023 Prior Written Notice/Notice of Defects; Set public hearing
    - iii. Depauville Sewer District EDU Audit
    - iv. Route 12 Sewer #2 Extension Survey Results
3. **Adjournment**    **Next Meeting:** *Wednesday, April 12, 2023 @ 5:00pm Town Hall*

## NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION

Division of Water, Region 6  
Dulles State Office Building, 317 Washington Street, Watertown, NY 13601-3787  
P: (315) 785-2513 | F: (315) 785-2422  
[www.dec.ny.gov](http://www.dec.ny.gov)

March 6, 2023

Sent Via Email ONLY: [support@townofclayton.com](mailto:support@townofclayton.com)

Lance Peterson, Supervisor  
405 Riverside Drive  
Clayton, NY 13624

RE: Annual Comprehensive Inspection  
Town of Clayton, Depauville S.D. Sewage Treatment Plant (STP)  
SPDES #NY 021 5791  
Hamlet of Depauville, Jefferson County

Dear Supervisor Peterson:

On February 17, 2023, I met with Bill Sherman to conduct an annual comprehensive SPDES inspection at the Clayton/Depauville STP. The purpose of the inspection was to determine compliance with the Town's SPDES permit. Enclosed please find a copy of the inspection report.

At the time of inspection, the facility was operating in substantial compliance with the conditions and requirements of the SPDES permit. The SPDES permit was modified on February 21, 2021. Please take notice of the changes that occurred with the modification. The facility's inspection is rated as satisfactory.

If you have any questions, please feel free to contact me at 315-785-2513 or by email at [Jacqueline.Smith-Gagnon@dec.ny.gov](mailto:Jacqueline.Smith-Gagnon@dec.ny.gov).

Sincerely,

*Jacqueline Smith-Gagnon/eb1*

Jacqueline Smith-Gagnon, P.E.  
Environmental Engineer  
Division of Water – Region 6

Enclosure

JSG:eb1

ec: Bill Sherman – Facility Operator, [shermanbill56@gmail.com](mailto:shermanbill56@gmail.com)  
Matthew Duffany – NYSDEC Regional Water Engineer



**NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION  
DIVISION OF WATER  
MUNICIPAL WASTEWATER TREATMENT FACILITY INSPECTION**



Violations of 6 NYCRR Part 750 are subject to applicable civil, administrative, and criminal sanctions set forth in ECL Article 17 and as appropriate, the Clean Water Act. This form is a record of conditions which are observed in the field at the time of inspection and documentation of compliance with Part 750.

<b>Facility Name, Address, Phone Number(s):</b> Town of Clayton, Depauville SD STP - 32333 Caroline Street	
<b>Permittee Name, Address, Phone Number(s):</b> Town of Clayton - 405 Riverside Drive, Clayton, NY 13624	
<b>Permittee/LRP E-mail:</b>	<b>Municipality (C/T/V):</b> Town <b>County:</b> Jefferson <b>SPDES Number:</b> NY 0215791 <b>DEC Region:</b> 06
<b>Inspector's Name and Title:</b> Jacqueline Smith-Gagnon, PE1	
<b>Facility Representative(s) and Company(ies):</b> Bill Sherman, Facility Operator	
<b>Name and Class of Receiving Water:</b> Chaumont River, Class C	
<b>Inspection Type:</b> <input type="checkbox"/> COMPREHENSIVE <input type="checkbox"/> Annual <input type="checkbox"/> ANNOUNCED	<b>Overall Inspection Rating:</b> SATISFACTORY
<b>CODES:</b> S = Satisfactory      M = Marginal      U = Unsatisfactory      F = Follow-up      NR: Not Rated      NA: Not Applicable      NI = Not Inspected	

<b>A. Facility Description / General:</b>		<input type="checkbox"/> NI	<input type="checkbox"/> NA
<b>Rating</b>	<b>Item:</b>	<b>Comments</b>	<b>Citation/Reference</b>
1. <input type="checkbox"/> S	A copy of SPDES permit available on-site?		<input type="checkbox"/> F Part 750-2.1
2. <input type="checkbox"/> S	(a) Permit valid or expired (Date if expired)?	expires 2/28/2025	<input type="checkbox"/> F Part 750-2.1
3. <input type="checkbox"/> S	Are all outfall discharge points permitted?	Outfall 001	<input type="checkbox"/> F Part 750-1.12
4. <input type="checkbox"/> NA	Notified DEC of new/modified discharges?		<input type="checkbox"/> F Part 750-1.12
5. <input type="checkbox"/> S	Housekeeping (Office/grounds/lab)?		<input type="checkbox"/> F Part 750-2.8
6. <input type="checkbox"/> S	Flow metering (Types/location/calibration)?	New Pulsar Ultra 4 meter installed 8/18/2022.	<input type="checkbox"/> F Part 750-2.5
7. <input type="checkbox"/> S	Odor complaints/issue? (If any odor issues, dates/corrective actions)	No complaints since the last inspection, 10/12/2021.	<input type="checkbox"/> F Part 750-2.8
8. <input type="checkbox"/> S	Noise complaints/issue? (If any noise issues, dates/corrective actions)	No complaints since the last inspection, 10/12/2021.	<input type="checkbox"/> F Part 750-2.8
9. <input type="checkbox"/> NA	WTCs used/records properly maintained?		<input type="checkbox"/> F Part 750-2.5
10. <input type="checkbox"/> NR	Nearby water supply(concerns)?	The Hamlet of Depauville does not have a public water supply system.	<input type="checkbox"/> F Part 750-2.8
11. <input type="checkbox"/> NI	Other (Specify)?		<input type="checkbox"/> F Part 750-2.8

**Click Left Button to Clear the Form**

**B. Collection System / Pump Station:**

NI  NA

100 % Separate, 0 % Combined, Population of collection system: NI Miles of Pipe: NI

Number of pump stations in system: 3 Number pump stations inspected: 0

Rating	Item:	F
<input type="checkbox"/> S	Sewer overflows upstream of the plant? If any CSO/SSO (List reason/location)	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> S	Unpermitted overflows/bypasses inside the plant since last inspection? (If any, list date/corrective action)	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> NA	Date when overflow/bypass channel used?	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> NA	Any other in plant bypass designed for WWTP?	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> S	(a) List bypass frequency (Times per year).	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> S	(b) List average duration of bypass (Hours).	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> S	CSO/SSO reported via NY-Alert/corrective action?	<input type="checkbox"/> Part 750-2.7
<input type="checkbox"/> NA	CSO/SSO routinely inspected?	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> S	Infiltration/Inflow (I/I) (Present)?	<input type="checkbox"/> Part 750-2.9
<input type="checkbox"/> NR	I/I corrective actions? (TV/lining/sealing/replacement/inspections)	<input type="checkbox"/> Part 750-2.9
<input type="checkbox"/> S	Collection system inspection program?	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> S	(a) Pump station inspection program?	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> NA	BMP/Wet Weather Plan (Date/reviewed)?	<input type="checkbox"/> Part 750-2.9
<input type="checkbox"/> S	Sewer Use Ordinance (SUO) (Date/copy)?	<input type="checkbox"/> Part 750-2.9
<input type="checkbox"/> S	Are all pump stations operational? (Backup/SCADA/telemetry/monitoring)	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> S	(a) No. pumps operational (Dry/wet weather)?	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> S	Backup/spare pumps/parts available?	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> NA	Other (Specify)?	<input type="checkbox"/>

No overflows since last inspection, 10/12/2021.

None

Lance Peterson is sewage discharge notifier.

No corrective actions since last inspection, 10/12/2021.

Approximately 20% of individual septic tanks are cleaned annually.

Maintenance is done on pump stations semi annually.

1991, amended in 1999/2000.

Daily monitoring

**C. Industrial Waste/Pretreatment:**

Rating	Item:	NI	NA
<input type="checkbox"/> NA	1. Mini program required by SPDES permit?	<input type="checkbox"/> Part 750-2.9	<input type="checkbox"/> F
<input type="checkbox"/> NA	2. Industrial waste discharge permits issued?	<input type="checkbox"/> Part 750-2.9	<input type="checkbox"/>
<input type="checkbox"/> NA	3. Industrial waste accepted (Problems)?	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/>
<input type="checkbox"/> NA	4. Outside septage accepted (Problems)?	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/>
<input type="checkbox"/> NA	5. Monitoring reqd./available for hauled waste?	<input type="checkbox"/> Part 750-2.5	<input type="checkbox"/>
<input type="checkbox"/> NA	6. Other (Specify)?	<input type="checkbox"/>	<input type="checkbox"/>

**D. Preliminary/Primary Treatment:**

Rating	Item:	NI	NA
<input type="checkbox"/> NA	1. Inflow pumps/wet wells/SCADA?	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/> F
<input type="checkbox"/> NA	2. (a) Corrosion observed?	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/>
<input type="checkbox"/> NA	3. Screens/Comminutor?	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/>
<input type="checkbox"/> NA	4. (a) No./type/cleaning method (Auto/manual)?	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/>
<input type="checkbox"/> NA	5. Screenings/Grit removal (records)?	<input type="checkbox"/> Part 750-2.5	<input type="checkbox"/>
<input type="checkbox"/> NA	6. Flow equalization present/needed?	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/>
<input type="checkbox"/> NR	7. Settling/Septic tanks?	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/>
<input type="checkbox"/> NA	8. Sludge depth in primary clarifiers?	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/>
<input type="checkbox"/> NA	9. Condition of primary clarifier effluent?	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/>
<input type="checkbox"/> NA	10. Other (Specify)?	<input type="checkbox"/>	<input type="checkbox"/>

**E. Secondary Biological Treatment:**

Rating	Item:	NI	NA
<input type="checkbox"/> NA	1. Fixed film/Suspended growth? (Specify recycle rate)	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/> F
<input type="checkbox"/> NA	2. Rotating Biological Contactors? (Specify shaft weight/flow)	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/>
<input type="checkbox"/> NA	3. Activated sludge/MBR/SBRs?	<input type="checkbox"/> Part 750-2.8	<input type="checkbox"/>

4.	NA	Foaming/filamentous issues?	Part 750-2.8	<input type="checkbox"/>
5.	NA	Stabilization Ponds/Lagoons?	Part 750-2.8	<input type="checkbox"/>
6.	S	Sand filter (recycle rate) ?	Part 750-2.8	<input type="checkbox"/>
7.	NA	Process control values?	Part 750-2.8	<input type="checkbox"/>
8.	NA	Other(Specify)?		<input type="checkbox"/>

Alternate the use of sand beds every few months.

F. Secondary Clarifier:			<input type="checkbox"/> NI	<input type="checkbox"/> NA
Rating	Item:			F
1.	NA	Foam/solids/grease present on surface?	Part 750-2.8	<input type="checkbox"/>
2.	NA	Tank/weir cleaning date & weir level?	Part 750-2.8	<input type="checkbox"/>
3.	NA	Denitrification/gas bubbles on surface?	Part 750-2.8	<input type="checkbox"/>
4.	NA	Sludge blanket depth & RAS/WAS rates?	Part 750-2.8	<input type="checkbox"/>
5.	NA	Scum arm condition?	Part 750-2.8	<input type="checkbox"/>
6.	NA	Secondary effluent quality?	Part 750-2.8	<input type="checkbox"/>
7.	NA	Loss of solids reported/observed? Other	Part 750-2.8	<input type="checkbox"/>
8.	NA	(Specify)?		<input type="checkbox"/>

G. Tertiary Treatment:			<input type="checkbox"/> NI	<input type="checkbox"/> NA
Rating	Item:			F
1.	NA	Filtration (Specify type)?	Part 750-2.8	<input type="checkbox"/>
2.	NA	Microfiltration?	Part 750-2.8	<input type="checkbox"/>
3.	NA	Activated carbon adsorption?	Part 750-2.8	<input type="checkbox"/>
4.	NA	Nitrification?	Part 750-2.8	<input type="checkbox"/>
5.	NA	Denitrification?	Part 750-2.8	<input type="checkbox"/>
6.	NA	Post-aeration?	Part 750-2.8	<input type="checkbox"/>
7.	NA	Phosphorus removal?	Part 750-2.8	<input type="checkbox"/>
8.	NA	Other (i.e. Polishing ponds, Ammonia stripping, etc.) (Specify)?	Part 750-2.8	<input type="checkbox"/>

**H. Disinfection:**  NI  NA

<u>Rating</u>	<u>Item:</u>	<u>F</u>
1. NA	Chlorination/Dechlorination type (Gas/Liquid/Solid)? (Dose/feed pump settings)	<input type="checkbox"/> Part 750-2.8
2. NA	Chlorine monitoring (Level)?	<input type="checkbox"/> Part 750-2.8
3. NA	Ultraviolet (UV) light (Setting)?	<input type="checkbox"/> Part 750-2.8
4. NA	Other (Specify)?	<input type="checkbox"/>

Seasonal disinfection starting by May 1, 2027 (EDPM 2/21/2023).

**I. Final Effluent:**  NI  NA

<u>Rating</u>	<u>Item:</u>	<u>F</u>
1. NA	Polishing pond (Odor/foam/solids/algae)?	<input type="checkbox"/> Part 750-2.8
2. NI	Effluent quality (Odor/turbidity/color)?	<input type="checkbox"/> Part 750-2.8
3. NR	Receiving water condition(Up/downstream)	<input type="checkbox"/> Part 750-2.8
4. NI	Outfall sign at each discharge point?	<input type="checkbox"/> Part 750-1.12
5. NA	Other (Specify)?	<input type="checkbox"/>

Chaumont River, Class C.  
Due to snow and icy conditions, the outfall area was not inspected.

**J. Sludge Handling:**  NI  NA

<u>Rating</u>	<u>Item:</u>	<u>F</u>
1. S	Sludge disposal? (List name and loc. of disposal sites/hauler)	<input type="checkbox"/> Part 750-2.8
2. NA	Digestion (Functioning properly/type)?	<input type="checkbox"/> Part 750-2.8
3. NA	Sludge pumps?	<input type="checkbox"/> Part 750-2.8
4. NA	Sludge Dewatering (Type)?	<input type="checkbox"/> Part 750-2.8
5. NA	Maintenance of sludge pumps ?	<input type="checkbox"/> Part 750-2.8
6. NI	Records available for disposal practices?	<input type="checkbox"/> Part 750-2.5
7. NA	Other (Specify)?	<input type="checkbox"/>

Pomerville Septic Service will pump around 20% of the individual septic tanks yearly.

**K. Sampling Evaluation and Lab Information:**

NI  NA

Rating	Item:	F
S	Written sampling plan? (Plan being followed)?	<input type="checkbox"/> Part 750-2.5
NA	Need to modify sampling frequency/types? (Explain)	<input type="checkbox"/> Part 750-2.5
S	Samples collected at specified locations?	<input type="checkbox"/> Part 750-2.5
S	Adequate for representative sample?	<input type="checkbox"/> Part 750-2.5
NA	Automatic sampler used? (Condition)	<input type="checkbox"/> Part 750-2.5
S	Type of samples collected (Grab/composite)?	<input type="checkbox"/> Part 750-2.5
NA	If composite, minimum of 8 grab samples?	<input type="checkbox"/> Part 750-2.5
S	Permittee ELAP certified? (If yes, provide ELAP certificate #)	<input type="checkbox"/> Part 750-2.5
S	Is the commercial laboratory ELAP certified? (List lab name, address and ELAP cert. #)	<input type="checkbox"/> Part 750-2.5
S	EPA-approved testing procedures followed?	<input type="checkbox"/> Part 750-2.5
S	Testing done for all parameters as required?	<input type="checkbox"/> Part 750-2.5
NA	WET (Whole Effluent Toxicity) testing?	<input type="checkbox"/> Part 750-2.5
S	Instrumentation calibrated & maintained?	<input type="checkbox"/> Part 750-2.5
S	Daily calibration, log books maintained?	<input type="checkbox"/> Part 750-2.5
U	Lab supplies are not expired? (Date if expired)	<input type="checkbox"/> Part 750-2.5
S	Are lab records retained at facility?	<input type="checkbox"/> Part 750-2.5
NA	Is process control testing performed? (Discuss target values)	<input type="checkbox"/> Part 750-2.5
NA	MLSS for day/week/month?	<input type="checkbox"/> Part 750-2.8
NA	SVI for day/week/month?	<input type="checkbox"/> Part 750-2.5
NA	Microscopic analysis of MLSS?	<input type="checkbox"/> Part 750-2.5
S	5/30 minutes settleometer (Day/week/month)?	<input type="checkbox"/> Part 750-2.5
NI	Monitoring records kept minimum 5 years?	<input type="checkbox"/> Part 750-2.5
S	Flow records maintained (Influent/effluent)?	<input type="checkbox"/> Part 750-2.5
NA	Other (Specify)	<input type="checkbox"/>

Grab samples.

No ELAP certification.

Converse Lab, Watertown, NY

pH buffers were expired. Needs to be replaced immediately.

Influent flow records are kept in facility's office.



**L. Operation and Maintenance (Additional Info.):**

NI  NA

Rating	Item:	F
<input type="checkbox"/> S	Preventive maintenance plan (Method)?	<input type="checkbox"/> Part750-2.5
<input type="checkbox"/> S	Records of maintenance/repair cost maintained (Method)?	<input type="checkbox"/> Part750-2.5
<input type="checkbox"/> S	Spare parts inventory?	<input type="checkbox"/> Part750-2.8
<input type="checkbox"/> NI	Current O&M manual?	<input type="checkbox"/> Part750-2.8
<input type="checkbox"/> NI	O & M manual maintained?	<input type="checkbox"/> Part750-2.5
<input type="checkbox"/> NA	Organizational chart for O &M staff?	<input type="checkbox"/> Part750-2.5
<input type="checkbox"/> S	Alarm systems (List)?	<input type="checkbox"/> Part750-2.8
<input type="checkbox"/> S	Back-up power (Exercised)?	<input type="checkbox"/> Part750-2.8
<input type="checkbox"/> NA	Unapproved bypass during power failure (If any, date/corrective action)	<input type="checkbox"/> Part750-2.8
<input type="checkbox"/> NI	Written back-up power emergency plan?	<input type="checkbox"/> Part750-2.8
<input type="checkbox"/> NA	All required treatment units in service during back-up power use?	<input type="checkbox"/> Part750-2.8
<input type="checkbox"/> NA	Hydraulic/organic overloads?	<input type="checkbox"/> Part750-2.8
<input type="checkbox"/> NA	Schedule for removing critical equipment from service for routine maintenance?	<input type="checkbox"/> Part750-2.8
<input type="checkbox"/> NA	Safety railings/gratings in place/good condition?	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> NA	Lights, ventilation operational (Wet wells)?	<input type="checkbox"/> Part 750-2.8
<input type="checkbox"/> S	As-built plans for collection system /WWTP?	<input type="checkbox"/> Part750-2.5
<input type="checkbox"/> NA	Other (Specify)?	<input type="checkbox"/>

Portable generator.

**M. Staffing / Personnel Information:**

NI  NA

Rating	Item:	F
<input type="checkbox"/> S	Staffing adequate?	<input type="checkbox"/> Part 650
<input type="checkbox"/> NA	Certification/grade adequate?	<input type="checkbox"/> Part 750-2.8 & Part 650
<input type="checkbox"/> S	Plant score and grade?	<input type="checkbox"/> Part 750-2.8

NYCRR Part 650.1 - Exempt (<50000 gpd - septic tank & sand filters only).

Score - 12

4.	<input type="checkbox"/> S	Chief operator name, Grade, Cert. #, Exp?	Bill Sherman	<input type="checkbox"/>	& Part 650 Part 750-2.8 & Part 650
5.	<input type="checkbox"/> S	Asst. operator Name, Grade, Cert. #, Exp.?	Town Highway Superintendent	<input type="checkbox"/>	Part 750-2.8 & Part 650
6.	<input type="checkbox"/> S	WWTP responsible for collection system?	Town of Clayton	<input type="checkbox"/>	Part 650
7.	<input type="checkbox"/> NA	Operators responsible for water supply?		<input type="checkbox"/>	Part 650
8.	<input type="checkbox"/> S	Is Chief Operator present at the WWTP as per required guideline?		<input type="checkbox"/>	Part 650
9.	<input type="checkbox"/> NA	Is certified WWTP operator present at the plant as per required guideline?		<input type="checkbox"/>	Part 650

**N. Fiscal:**  NI  NA

How sewer rates are assessed (Flat vs metering)? **Flat rate**

How is the plant budget developed? **Sewer Fund**

Asset Management Plan (AMP)? **NI** AMP Prepared/Date? **NI** Plans to update AMP? **NI**

Is AMP used to assess/prioritize critical system components?

**Compliance Status (Orders, Schedules, etc.):**

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**Comments:**

Permittee needs to provide Non-Compliance Report form when a permit parameter is exceeded. These should be attached to the corresponding monthly discharge monitoring report.

Photographs attached:

Attachments (graphs, diagrams, etc.):

DMR Issues:

SPRTK Issues:

NetDMR Issues:

*Jacqueline Smith-Gagnon*  
Inspector's Signature / Date **3/6/2023**

# Town Finance Schools

Cosponsored with the Office of the State Comptroller



## Registration form

Name \_\_\_\_\_ Title \_\_\_\_\_  
Town \_\_\_\_\_ County \_\_\_\_\_  
Address \_\_\_\_\_  
(Street No., PO Box, City, State & Zip)  
Primary Phone (     ) \_\_\_\_\_ E-mail: \_\_\_\_\_

*Please choose the location you will be attending:*

- \_\_\_\_\_ **May 8-9, 2023 – 41 Lakefront Hotel, Geneva (Deadline to pre-register: April 28)**  
\_\_\_\_\_ **May 15-16, 2023 – Albany Marriott, Albany (Deadline to pre-register: April 28)**

Registration Rates	Member	Non-Member
Pre-registration (before April 28)	\$200	\$250
On-Site registration	\$225	\$275

## What do you get for your registration?

All-conference access, including admittance to all presentations, as well as our exhibitor hallway, and breakfast, lunch, refreshment breaks and materials.

## Payment Information

Checks can be made payable to Association of Towns and returned along with this form to:  
*Association of Towns, 150 State Street, Albany, NY 12207 or fax copies to (518)465-0724.*

## Cancellation Policy

Cancellations received 10 days prior to event will be refunded, less a \$10 processing fee. *NO REFUNDS WILL BE GRANTED AFTER THAT DEADLINE.*

## Accommodation Information

Please make your hotel reservation with your location's hotel.

### Albany Marriott

189 Wolf Road, Albany, NY 12205  
\$114/night – single/double.  
1-800-2289290  
Cut-off is May 1.

### Lakefront Hotel

41 Lake Drive, Geneva, NY 14456  
\$98 single/double  
315-789-0400  
Cut-off is April 14.

## Register in One Step Online!

You may also register online for either school at [www.nytowns.org](http://www.nytowns.org) beginning March 16. Both visa and mastercard accepted.

## Questions?

For additional information, stay tuned to our website, [www.nytowns.org](http://www.nytowns.org). For specific questions, call Executive Meeting Coordinator Patty Kebea at (518)465-7933 or via e-mail at [pkebea@nytowns.org](mailto:pkebea@nytowns.org).



## Great Lakes Fishery Commission

March 6, 2023

Town of Clayton  
405 Riverside Dr.  
Clayton, NY 13624

Dear Town of Clayton:

The dam you own, Depauville Dam, on Chaumont River, plays an important role in protecting the Great Lakes from invasive sea lampreys, and we are writing to thank you for your long-standing contribution to that effort. Sea lampreys, which destroy fish by feeding on their blood and bodily fluids, require certain stream types for reproducing. Since invading the Great Lakes more than 100 years ago, the Great Lakes Fishery Commission (GLFC) and its contracted sea lamprey control agent, the U.S. Fish and Wildlife Service (USFWS), have relied on dams and other man-made structures to stop lampreys from completing their life cycles by denying them access to critical spawning and rearing habitat in rivers. Your dam is one of approximately 500 barriers that have been identified as an essential sea lamprey control structure in the Great Lakes basin.

The GLFC is contacting owners of these essential structures to confirm ownership and inquire about their condition. The GLFC is not a regulatory agency but is committed to investing in Great Lakes infrastructure and would like to discuss existing or future needs your dam may require to maintain its sea lamprey blocking capabilities. If you are willing to discuss your dam and learn more about how it helps protect the Great Lakes fishery, please respond to this brief questionnaire online <http://www.glfc.org/barrier-survey.php> or by contacting Kevin Mann, U.S. Barrier Coordinator, [906-869-5337; [kevin\\_mann@fws.gov](mailto:kevin_mann@fws.gov)].

The GLFC is committed to supporting dam owners and greatly appreciates your efforts to help control sea lampreys in the Great Lakes.

Sincerely,

A handwritten signature in blue ink that reads "Chris Freiburger".

Chris Freiburger  
Sea Lamprey Control Infrastructure Manager



EST 1955 BY TREATY

Great Lakes Fishery Commission  
2200 Commonwealth Blvd, Suite 100  
Ann Arbor, MI, 48105

734.662.3209  
[glfc.org](http://glfc.org)

Please respond to this questionnaire by March 31, 2023 by returning this form in the enclosed envelope, submitting your responses online at <http://www.glfcc.org/barrier-survey.php> (see QR code below), or by contacting Kevin Mann, U.S. Barrier Coordinator, [906-869-5337; [kevin\\_mann@fws.gov](mailto:kevin_mann@fws.gov)].

1. Which dam were you contacted about? \_\_\_\_\_

2. Are you the correct owner of the [DAM NAME]?

Yes | No

Please confirm your contact information:

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

3. If you answered “no” above, are you able to provide contact information for the correct owner?

Owner Unknown | Owner information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

4. Would you be willing to partner with the GLFC to conduct routine inspections and potentially maintain and rehabilitate your dam?

Yes | No

5. What are the immediate plans for your dam (5-10 years)?

No Action | Removal | Repair | Relinquish ownership

6. Would you be willing to share inspection reports with the GLFC?

Yes | No

7. How would you describe the structural condition of your dam?

Good | Fair | Poor | Gone/Removed

8. Are you willing to be contacted by the GLFC to discuss your dam?

Yes | No

Scan to access this  
survey online



### Sea Lamprey Control Facts:

- Sea lampreys are an invasive species in the Great Lakes which use their suction cup mouth to feed on their host and are capable of killing up to 40 pounds of fish over their 12-18 month feeding period.
- Before control, the invasive lampreys were responsible for killing over 100 million pounds of Great Lakes fish each year and have the capability to devastate a \$7 billion dollar fishery if left uncontrolled.
- A bi-national agreement between the United States and Canada created the Great Lakes Fishery Commission (GLFC), which is responsible for controlling sea lampreys throughout the Great Lakes basin.
- Dams are the most effective method for controlling sea lampreys by blocking access to critical spawning and rearing habitats sea lampreys need to complete their life cycle.



OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

## Standardized NOTICE FORM for Providing 30-Day Advance Notice to a Local Municipality or Community Board

1. Date Notice Sent:       1a. Delivered by:

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License:

For premises outside the City of New York:

New Application     Removal     Class Change

For premises in the City of New York:

New Application     New Application and Temporary Retail Permit     Renewal     Alteration     Removal

Class Change     Method of Operation     Corporate Change

For **New** and Temporary Retail Permit applicants, answer each question below using all information known to date

For **Renewal** applicants, answer all questions

For **Alteration** applicants, attach a complete written description and diagrams depicting the proposed alteration(s)

For **Corporate Change** applicants, attach a list of the current and proposed corporate principals

For **Removal** applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation

For **Class Change** applicants, attach a statement detailing your current license type and your proposed license type

For **Method of Operation Change** applicants, although not required, if you choose to submit, attach an explanation detailing those changes

**Please include all documents as noted above. Failure to do so may result in disapproval of the application.**

**This 30-Day Advance Notice is Being Provided to the Clerk of the Following Local Municipality or Community Board:**

3. Name of Municipality or Community Board:

**Applicant/Licensee Information:**

4. Licensee Serial Number (if applicable):       Expiration Date (if applicable):

5. Applicant or Licensee Name:

6. Trade Name (if any):

7. Street Address of Establishment:

8. City, Town or Village:  , NY      Zip Code:

9. Business Telephone Number of applicant/ Licensee:

10. Business E-mail of Applicant/Licensee:

11. Type(s) of alcohol sold or to be sold:     Beer & cider     Wine, Beer & Cider     Liquor, Wine, Beer & Cider

12. Extent of Food Service:     Full Food menu; full kitchen run by a chef/cook     Menu meets legal minimum food requirements; food prep area required

13. Type of Establishment:    
 Seasonal Establishment     Juke Box     Disc Jockey     Recorded Music     Karaoke

14. Method of Operation: (check all that apply)     Live Music (give details i.e., rock bands, acoustic, jazz, etc.):

Patron Dancing     Employee Dancing     Exotic Dancing     Topless Entertainment

Video/Arcade Games     Third Party Promoters     Security Personnel

Other (specify):

15. Licensed Outdoor Area: (check all that apply)     None     Patio or Deck     Rooftop     Garden/Grounds     Freestanding Covered Structure     Sidewalk Cafe     Other (specify): \_\_\_\_\_

<b>OFFICE USE ONLY</b>		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

16. List the floor(s) of the building that the establishment is located on:

17. List the room number(s) the establishment is located in within the building, if appropriate:

18. Is the premises located within 500 feet of three or more on-premises liquor establishments?  Yes  No

19. Will the license holder or a manager be physically present within the establishment during all hours of operation?  Yes  No

20. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee:

Name	Serial Number

21. Does the applicant or licensee own the building in which the establishment is located?  Yes (if YES, SKIP 23-26)  No

**Owner of the Building in Which the Licensed Establishment is Located**

22. Building Owner's Full Name:

23. Building Owner's Street Address:

24. City, Town or Village:  State:  Zip Code:

25. Business Telephone Number of Building Owner:

**Representative or Attorney Representing the Applicant in Connection with the Application for a License to Traffic in Alcohol at the Establishment Identified in this Notice**

26. Representative/Attorney's Full Name:

27. Representative/Attorney's Street Address:

28. City, Town or Village:  State:  Zip Code:

29. Business Telephone Number of Representative/Attorney:

30. Business E-mail Address of Representative/Attorney:

I am the applicant or licensee holder or a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under **Penalty of Perjury** - that the representations made in this form are true.

31. Printed Principal Name:  Title:

**Principal Signature:**



Town of Clayton Regular Meeting Minutes

Wednesday, March 8, 2023

The Town Board of the Town of Clayton held their regular meeting at 5:00 PM, at Clayton Opera House, located at 405 Riverside Dr., Clayton, NY.

The following persons attended:

Lance Peterson	Kenneth Knapp	Megan Badour	James Jones
Kathleen LaClair	James Kenney	Alicia Dewey	Donna Patchen
Pamela McDowell	Steve Dorr, Sr.	Richard Boyanski	Kyle Boyanski
Art Gamble, Jr.	Ronald Duford, Jr.	Ronald Duford	Mari Cecil
Cynthia Brenon	Angela Picunas	Robert McIntire	Tim Locke
Heather Valadez	Justin Wagoner	Natasha Wagoner	Pam Fox

1. Pledge of Allegiance: Supervisor Peterson opened the meeting with the Pledge of Allegiance

2. Guests: N/A

3. Town Clerk:

A. Correspondence:

1. Letter from Justin Taylor, Commissioner Town of Clayton Fire District RE: Property Tax Exemption for Volunteer Fire and EMTs (see attached)
2. St. Lawrence Valley Bluegrass Inc. (see attached)
3. NYS Liquor Authority Notice- Calhoun (returned-Town of Cape Vincent) and Mar's Pizza Parlor (see attached)
4. GAR Associates LLC- 2023 assessment notifications for Town of Clayton parcels (see attached)

B. Minutes:

1. Revised minutes from the 1/11/2023 Regular Meeting with the date of William Ramseier's resignation updated to 12/31/2022 approved by Kenneth Knapp, seconded by James Kenney. **Motion carried.**
2. Minutes from 2/8/2023 Regular Meeting to be approved. Motion made by Kenneth Knapp, seconded by Kathleen LaClair. **Motion carried.**

4. Public: No comment on agenda items.

5. General Discussion Items:

A. Bills and Transfers:

i. Abstract #3 of 2023

Motion was made by Donna Patchen, seconded by Kathleen LaClair, to approve Abstract #3, in the amount of \$226,733.99. **Motion carried.**

ii. Transfers: N/A

iii. Budget Amendment: N/A

iv. New Accounts/Special Entries: N/A

B. Supervisor's Report & Bank Reconciliations:

Motion was made by Kenneth Knapp, seconded by Kathleen LaClair to approve this for February 2023. **Motion carried.**

C. Balance Sheets: February 2023

D. Resignations; Appointments & Rate Changes:

i. Resignations: N/A

ii. Positions/Appointments: N/A

iii. Rate Changes: Motion was made to approve step increases of \$.50/hour for Coughlin, effective 3/11/2023; Greenizen, effective 3/12/2023; and Tucker, effective 3/9/2023.

E. Training:

Annual Safety Training Workshop tentatively scheduled for April 27, 2023.

F. Introduce Local Law #2 of 2023: Firefighter/Ambulance Worker Exemption; Set Public Hearing for 3/22/23 @ 5:15 pm:

Local Law #2 of 2023, Exemptions for Volunteer Firefighters and Ambulance Workers on portion of Real Property Taxes introduced by Kenneth Knapp, seconded by Kathleen LaClair. Public Hearing set for 3/22/23 @ 5:15 pm. Knapp-aye; Patchen-aye; Kenney-aye. LaClair-aye; Peterson-aye. **Passed.**

G. Renew Depauville Library Lease Agreement:

Motion was made by Kenneth Knapp, seconded by Kathleen LaClair to honor a renewal agreement with the Depauville Free Library to utilize the Depauville schoolhouse for an additional five years beginning May 3, 2023. **Motion carried.**

H. BOCES Drug/Alcohol Testing Agreement:

Motion made by James Kenney seconded by Kenneth Knapp to approve the BOCES Drug/Alcohol testing agreement. **Motion carried.** (See attached)

I. Engineering Agreement for Route 12 Sewer Extension Planning Grant:

Motion made by Donna Patchen, seconded by Kenneth Knapp to approve an agreement between the Town of Clayton and St. Lawrence Engineering, D.P.C. for the Route 12 Sewer Extension Planning Grant. **Motion carried.** (See attached)

J. Discussion on relocation of Board Meetings to Cerow Recreation Park Arena:

If movement occurs, likely the change will take place for the first meeting in May, this will be advertised.

K. Highway Garage for Boat Show:

Motion was made by Kathleen LaClair, seconded by Kenneth Knapp to allow for usage of both Cerow Recreation Park and the Highway Garage for the Boat Show. **Motion carried.**

6. Supervisor's Report: N/A

7. Department Head Reports:

A. Highway Superintendent: Steve Dorr- Crew is working on maintaining equipment, cutting trees and moving snow.

B. Buildings & Grounds: James Jones- Ice has been removed from the arena. Compactor will be delivered to the transfer site at the end of next week. E-waste will now be picked up by E-waste.

C. Assessor: Alexander Marchenkoff- See attached.

D. Codes/Zoning: Richard Ingerson-N/A

8. Council Reports

- Councilman Knapp: March 18, 2023 there will be a Nature Talk at the Depauville Library. Sign Language classes are also slated to begin. Vintage Snowmobile show is upcoming. Clayton won an award for Best Small Town!
- Councilwoman Patchen: Upcoming events at the arena are as scheduled: March 18-DU Gun Bash and the Weekend of March 24 White's Home Show.

- Councilman Kenney: Door hangers have been provided to the homes in Depauville from which information is needed for Depauville sewer survey.
- Councilwoman LaClair: CLDC meeting was held via Zoom, nothing to report at this time.

9. Public:

Richard Boyanski- Mr. Boyanski addressed the Town Board with regard to the 2023 Assessment Notification.

Ronald Duford Jr.- Mr. Duford addressed the Town Board with regard to the 2023 Assessment Notification.

Art Gamble Jr.- Mr. Gamble addressed the Town Board with regard to the 2023 Assessment Notification.

Robert McIntire- Mr. McIntire addressed the Town Board with regard to the 2023 Assessment Notification.

10. Adjournment:

Motion was made by James Kenney, seconded by Donna Patchen to adjourn at 5:54 PM. **Motion carried.**

Next Meeting: Wednesday, March 22, 2023 at 5:00PM.

# TOWN OF CLAYTON

405 Riverside Drive  
Clayton, NY 13624  
(315) 686-3512

## **RESOLUTION TO ADOPT LOCAL LAW NO. \_\_\_ OF 2023 Exemptions for Volunteer Firefighters and Ambulance Workers on portion of Real Property Taxes**

**WHEREAS**, the Town Board for the Town of Clayton, New York has devoted considerable time and attention to tax exemptions, especially those for Volunteer Firefighters and Ambulance Workers; and

**WHEREAS**, the New York Real Property Tax Law (NY RPTL) §466-a provides for a limited 10 % exemption from real property taxes for Volunteer Firefighters and Ambulance Workers in respect to residential Real Property where that taxpayer resides in the residential property within the Town of Clayton and meets all eligibility requirements pursuant to RPTL §466-a; and

**WHEREAS**, Volunteer Firefighters and Ambulance Workers within the Town must complete RP-466-a-vol form (a copy attached hereto) to ensure eligibility and provide to the Assessor prior to March 1 of the given year; and

**WHEREAS**, the Town Board of Clayton is interested in providing this limited exemption to its Volunteer Firefighters and Ambulance Workers.

**NOW, THEREFORE, BE IT RESOLVED**, by the Town Board for the Town of Clayton, New York as follows:

1. The Town Board hereby enacts Local Law No. \_\_\_ of 2023 entitled Exemptions for Volunteer Firefighters and Ambulance Workers on a portion of Real Property Taxes.

2. The Supervisor for the Town of Clayton and the Town Clerk for the Town of Clayton, their respective agents and employees are authorized to sign all documents and take all steps necessary to enact the legislation.

3. This resolution shall take effect immediately.

The foregoing Resolution was offered by Board Member, \_\_\_\_\_, and seconded by Board Member, \_\_\_\_\_, and upon roll call vote of the Board was duly adopted as follows:

Lance Peterson, Supervisor	Yes ___	No ___
Donna Patchen,	Yes ___	No ___
Kathleen LaClair	Yes ___	No ___
James Kenney	Yes ___	No ___
Kenneth Knapp	Yes ___	No ___

Dated: \_\_\_\_\_, 2023

\_\_\_\_\_  
Megan Badour, Town Clerk

# Town of Clayton

LOCAL LAW NO. \_\_\_\_ OF 2023

## **Exemptions for Volunteer Firefighters and Ambulance Workers on portion of Real Property Taxes**

1. The Town Board hereby adopts the exemption for Volunteer Firefighters and Ambulance Workers pursuant to the guidelines set forth at New York Real Property Tax Law (NY RPTL) §466-a.
2. The 10% property tax exemption shall apply to property used exclusively for residential purposes by the firefighter and/or ambulance worker.
3. If a portion of the property is used for non-residential purposes, or by another person for residential purposes, then the exemption shall apply only to that part of the structure used for residential purposes by the firefighter and/or ambulance worker.
4. The firefighter and/or ambulance worker shall meet a minimum service requirement of at least two (2) consecutive years before this exemption shall apply.
5. The Supervisor for the Town of Clayton, the Town Clerk, their respective agents and/or employees are hereby authorized to sign all documents and take all steps necessary to provide full force and effect of this Local Law.

# Local Law Filing

(Use this form to file a local law with the Secretary of State.)

Text of law should be given as amended. Do not include matter being eliminated and do not use italics or underlining to indicate new matter.

County  City  Town  Village  
*(Select one.)*

of Clayton

Local Law No. \_\_\_\_\_ of the year 20<sup>23</sup>

A local law Exemption for Volunteer Firefighters and Ambulance Workers on portion of Residential  
*(Insert Title)*  
Real Property

Be it enacted by the Town Board of the  
*(Name of Legislative Body)*

County  City  Town  Village  
*(Select one.)*

of Clayton \_\_\_\_\_ as follows:

SEE ATTACHED

(If additional space is needed, attach pages the same size as this sheet, and number each.)

**(Complete the certification in the paragraph that applies to the filing of this local law and strike out that which is not applicable.)**

**1. (Final adoption by local legislative body only.)**

I hereby certify that the local law annexed hereto, designated as local law No. \_\_\_\_\_ of 20<sup>23</sup> of the ~~(County)(City)~~(Town)(Village) of Clayton Town Board was duly passed by the \_\_\_\_\_ on \_\_\_\_\_ 20<sup>23</sup>, in accordance with the applicable provisions of law.  
*(Name of Legislative Body)*

**2. (Passage by local legislative body with approval, no disapproval or repassage after disapproval by the Elective Chief Executive Officer\*.)**

I hereby certify that the local law annexed hereto, designated as local law No. \_\_\_\_\_ of 20\_\_\_\_ of the (County)(City)(Town)(Village) of \_\_\_\_\_ was duly passed by the \_\_\_\_\_ on \_\_\_\_\_ 20\_\_\_\_, and was (approved)(not approved) *(Name of Legislative Body)* (repassed after disapproval) by the \_\_\_\_\_ and was deemed duly adopted *(Elective Chief Executive Officer\*)* on \_\_\_\_\_ 20<sup>□□</sup>, in accordance with the applicable provisions of law.

**3. (Final adoption by referendum.)**

I hereby certify that the local law annexed hereto, designated as local law No. \_\_\_\_\_ of 20\_\_\_\_ of the (County)(City)(Town)(Village) of \_\_\_\_\_ was duly passed by the \_\_\_\_\_ on \_\_\_\_\_ 20\_\_\_\_, and was (approved)(not approved) *(Name of Legislative Body)* (repassed after disapproval) by the \_\_\_\_\_ on \_\_\_\_\_ 20\_\_\_\_. *(Elective Chief Executive Officer\*)*

Such local law was submitted to the people by reason of a (mandatory)(permissive) referendum, and received the affirmative vote of a majority of the qualified electors voting thereon at the (general)(special)(annual) election held on \_\_\_\_\_ 20\_\_\_\_, in accordance with the applicable provisions of law.

**4. (Subject to permissive referendum and final adoption because no valid petition was filed requesting referendum.)**

I hereby certify that the local law annexed hereto, designated as local law No. \_\_\_\_\_ of 20\_\_\_\_ of the ~~(County)(City)~~(Town)(Village) of \_\_\_\_\_ was duly passed by the \_\_\_\_\_ on \_\_\_\_\_ 20\_\_\_\_, and was (approved)~~(not approved)~~ *(Name of Legislative Body)* ~~(repassed after disapproval)~~ by the \_\_\_\_\_ on \_\_\_\_\_ 20\_\_\_\_. Such local *(Elective Chief Executive Officer\*)* law was subject to permissive referendum and no valid petition requesting such referendum was filed as of \_\_\_\_\_ 20\_\_\_\_, in accordance with the applicable provisions of law.

\* Elective Chief Executive Officer means or includes the chief executive officer of a county elected on a county-wide basis or, if there be none, the chairperson of the county legislative body, the mayor of a city or village, or the supervisor of a town where such officer is vested with the power to approve or veto local laws or ordinances.



**5. (City local law concerning Charter revision proposed by petition.)**

I hereby certify that the local law annexed hereto, designated as local law No. \_\_\_\_\_ of 20\_\_\_\_ of the City of \_\_\_\_\_ having been submitted to referendum pursuant to the provisions of section (36)(37) of the Municipal Home Rule Law, and having received the affirmative vote of a majority of the qualified electors of such city voting thereon at the (special)(general) election held on \_\_\_\_\_ 20\_\_\_\_, became operative.

**6. (County local law concerning adoption of Charter.)**

I hereby certify that the local law annexed hereto, designated as local law No. \_\_\_\_\_ of 20\_\_\_\_ of the County of \_\_\_\_\_ State of New York, having been submitted to the electors at the General Election of November \_\_\_\_\_ 20\_\_\_\_, pursuant to subdivisions 5 and 7 of section 33 of the Municipal Home Rule Law, and having received the affirmative vote of a majority of the qualified electors of the cities of said county as a unit and a majority of the qualified electors of the towns of said county considered as a unit voting at said general election, became operative.

**(If any other authorized form of final adoption has been followed, please provide an appropriate certification.)**

I further certify that I have compared the preceding local law with the original on file in this office and that the same is a correct transcript therefrom and of the whole of such original local law, and was finally adopted in the manner indicated in paragraph   1   above.

\_\_\_\_\_  
Clerk of the county legislative body, City, Town or Village Clerk or officer designated by local legislative body

Date: \_\_\_\_\_

(Seal)

# **Prior Written Notice /** **Notification of Defects Local Law**

## **Section 1.**

It is the intention of the Town Board to protect the health and safety of the community by requiring actual written notice of defective and hazardous conditions existing on Town owned, or maintained, properties. The receipt of actual written notice will enhance the Town's ability to remedy dangerous conditions on all properties under the management and care of Town personnel in an expeditious and safe manner. This Law is enacted pursuant to Authority of NY Town Law §65-a and Municipal Home Rule Law §10.

## **Section 2.**

Be it enacted by the Town Board of Clayton that no civil action shall be maintained against the Town or any Town Official or Town Superintendent of Highways for damages or injuries to person or property sustained by reason of any highway, street, crosswalk, bridge, culvert being defective, out of repair, unsafe, dangerous or obstructed unless written notice of such defective, unsafe dangerous or obstructed condition of such highway, street, crosswalk, bridge or culvert was actually given to the Town Clerk or Town Superintendent of Highways, and that there was a failure or neglect within a reasonable time after the giving of such notice to repair or remove the defect, danger or obstruction complained of; nor shall such action be maintained for damages or injuries to person or property sustained solely in consequence of the existence of snow or ice upon any highway, street, crosswalk, bridge or culvert, unless written notice thereof, specifying the particular place, was actually given to the Town Clerk or Town Superintendent of Highways and there was a failure or neglect to cause such snow or ice to be removed, or to make the place otherwise reasonably safe within a reasonable time after the receipt of such notice.

## **Section 3.**

No civil action shall be maintained against the Town, or any Town Official or Town Superintendent of Highways for damages or injuries to person or property sustained by reason of any defect in its sidewalks or in consequence of the existence of snow or ice upon any of its sidewalks, unless such sidewalks have been constructed or are maintained by the Town or the Superintendent of Highways of the Town pursuant to statute, nor shall any action be maintained for damages or injuries to person or property sustained by reason of such defect or in consequence of such existence of snow or ice unless written notice thereof, specifying the particular place, was actually given to the Town Clerk or to the Town Superintendent of Highways, and there was a failure or neglect to cause such defect to be remedied, such snow or ice to be removed, or to make the place otherwise reasonably safe within a reasonable time after the receipt of such notice.

**Section 4.**

The Town Superintendent of Highways shall transmit in writing to the Town Clerk within ten (10) days after the receipt thereof all written notices received by him/her pursuant to this section.

**Section 5.**

The Town Clerk shall keep an indexed record, in a separate book, of all written notices which he/she shall receive of the existence of a defective, unsafe, dangerous or obstructed condition in or upon; or of an accumulation of ice or snow upon any Town highway, street, crosswalk, bridge, culvert or sidewalk, which record shall state the date of receipt of the notice, the nature and location of the condition stated to exist, and the name and address of the person from whom the notice is received. All such written notices shall be indexed according to the location of the alleged defective, unsafe, dangerous or obstructed condition, or the location of accumulated snow or ice. The record of each notice shall be preserved for a period of five (5) years after the date it is received.

**Section 6.**

It is the intent of the Town Board, pursuant to the Municipal Home Rule Law of the State of New York, to adopt provisions more restrictive than §65-a of the Town Law of the State of New York.

**Section 7.**

This Local Law shall take effect immediately upon its filing in the office of the Secretary of State.

DEPAUVILLE SEWER DISTRICT

2024 PROPOSED EDU CHANGES

IN FALL/WINTER 2022, WE CONDUCTED AN AUDIT OF THE DEPAUVILLE SEWER DISTRICT EDU BILLING. BASED ON THE EDU TABLE FOUND IN THE CURRENT DEPAUVILLE SEWER DISTRICT ORDINANCE, SEVERAL PROPERTIES WERE NOT BEING APPROPRIATELY BILLED.

<b>TYPE OF USER</b>	<b>EDU FACTOR</b>
YEAR-ROUND RESIDENCE	1 EDU
MULTI-FAMILY RESIDENTIAL (ALL UNIT SIZES)	.75 EDU PER UNIT
RETAIL BUSINESSES AND OFFICE SPACE, AT PEAK EMPLOYMENT PERIODS	1 EDU FOR UP TO 4 EMPLOYEES, 1 EDU ADDITIONAL FOR EACH ADDITIONAL 4 EMPLOYEES OR FRACTIONAL PART THEREOF
SEASONAL RESIDENCE, EXTRA FROM YEAR-ROUND RESIDENCE	.75 EDU
CAFÉ/RESTAURANT	1 EDU PER 16 SEATS, ROUNDED UP TO THE NEAREST .25 EDU
GAS STATION/CONVENIENCE STORE WITHOUT CAFÉ/RESTAURANT	1 EDU
OTHER VACANT LAND	.25 EDU PER LOT
CHURCHES	1 EDU

**PROPOSED CHANGES FOR 2024 LEVY**

PARCEL	OWNER	CURRENT EDU	PROPOSED EDU	RATIONALE FOR CHANGE
42.14-1-13	SPHUNDER	2.5 EDU	2.25 EDU	3 UNITS AT .75 EDU/UNIT
42.14-1-23.1	TIRE STORE	1 EDU	1 EDU	MARKED RESIDENTIAL, BUT IS COMMERCIAL UNDER 4 EMPLOYEES
42.14-1-23.2	DEPAUVILLE MARKET	1 EDU	1.25 EDU	GAS STATION + CAFÉ/RESTAURANT UNDER 16 SEATS
42.14-1-41	METHODIST CHURCH	1 EDU	1 EDU	MARKED RESIDENTIAL, BUT IS CHURCH
42.14-2-26	FIRE HALL	1 EDU	1EDU	MARKED RESIDENTIAL, BUT IS COMMERCIAL UNDER 4 EMPLOYEES
42.14-2-31	DEPAUVILLE HOTEL	1 EDU	2 EDU	CAFÉ/RESTAURANT IS 1 EDU/16 SEATS, THEY HAVE 30 SEATS
42.14-2-33	BARBER SHOP/HOME	1 EDU	1 EDU	NO CHANGE, NO TOILET/SINK IN BARBER SHOP
42.14-2-34	POST OFFICE/DINER/OTHER	2.5 EDU	4 EDU	DINER WITH 29 SEATS IS 2 EDU (1 EDU/16 SEATS) + TWO RETAIL SPACES UP TO 4 EMPLOYEES EACH IS 2 EDU
42.14-2-52.1	CINTRON	2 EDU	2.25 EDU	3 UNITS AT .75 EDU/UNIT
42.14-2-53	BLUE SKY CHURCH	1 EDU	1 EDU	MARKED RESIDENTIAL, BUT CHURCH
42.14-2-60	GILCHRIST	1 EDU	1.5 EDU	2 UNITS AT .75 EDU/UNIT
42.14-3-14	HUCHZERMEIER	2 EDU	2 EDU	WAS NOT NOTED THAT THESE ARE TWO SEPARATE HOMES ON SAME PARCEL

**PROPOSED ADDITIONS FOR 2024 LEVY**

42.14-1-11	BENJAMIN	0 EDU	.25 EDU	VACANT NOT IN LEVY LIST
42.14-1-17	WILKIE	0 EDU	.25 EDU	VACANT NOT IN LEVY LIST
42.14-1-18	WILKIE	0 EDU	.25 EDU	VACANT NOT IN LEVY LIST
42.14-1-19	WILKIE	0 EDU	.25 EDU	VACANT NOT IN LEVY LIST
42.14-1-21	FANCHER	0 EDU	1 EDU	VACANT COMMERCIAL BLDG NOT IN LEVY LIST
42.14-1-31.1	UDART	0 EDU	.25 EDU	VACANT NOT IN LEVY LIST
42.14-1-37	LASHOMB	0 EDU	.25 EDU	VACANT NOT IN LEVY LIST
42.14-2-6.2	WILKIE	0 EDU	.25 EDU	VACANT NOT IN LEVY LIST
42.14-2-9	HUDSON	0 EDU	.25 EDU	VACANT NOT IN LEVY LIST
42.14-2-35	DEPAUVILLE HOTEL	0 EDU	.25 EDU	VACANT NOT IN LEVY LIST
42.14-3-15	SAWYER	0 EDU	.25 EDU	RESIDENTIAL IS NOT CONNECTED, BUT COULD BE
52.00-1-3.7	LOWERY	0 EDU	.25 EDU	VACANT NOT IN LEVY LIST

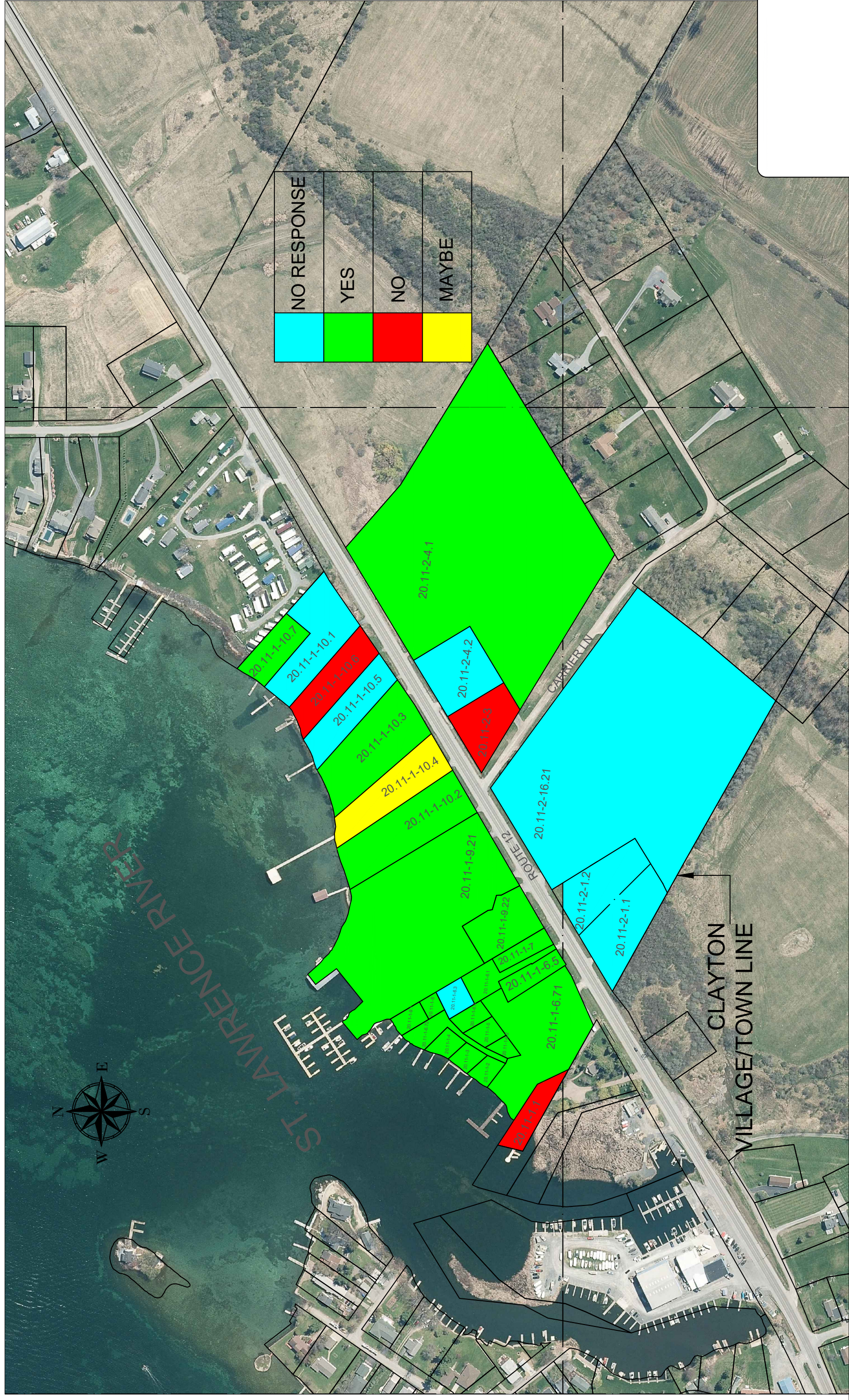
**TOTAL IMPACT OF ALL MODIFICATIONS AND ADDITIONS IS +7.0 EDU**



ST. LAWRENCE RIVER

CLAYTON VILLAGE/TOWN LINE

NO RESPONSE	YES	NO	MAYBE



**FOURTH COAST INC -  
ST LAWRENCE ENGINEERING DPC**  
745 GRAVES, CLAYTON NEW YORK, 13624  
315/785-6384 315/608-7443  
www.fourthcoast.com - www.stlawrenceengineering.com

DATE: 03/08/2022  
REVISED: 3/15/2023

CLIENT: Town of Clayton  
PROJECT: Rt. 12 Sewer #2

DRAWN BY: SPH  
CHECKED BY: RJC  
SCALE: NOT TO SCALE

S1

District #2 Map