



FAIRHAVEN SELECT BOARD

Agenda

Monday, November 22, 2021

6:30 p.m.

Town Hall – 40 Center Street – Fairhaven

RECEIVED
TOWN CLERK

2021 NOV 18 P 3:29

Pursuant to Chapter 20 of the Acts of 2021, this meeting will be conducted in person and via remote means, in accordance with applicable law. This means that members of the public body as well as members of the public may access this meeting in person, or via virtual means. In-person attendance will be at the meeting location listed above, and it is possible that any or all members of the public body may attend remotely, with in-person attendance consisting of members of the public.

Log on to: <https://us06web.zoom.us/j/85377566824?pwd=OTFWbmUvRExFa29SbGF6a1Nzd2pmdz09>

or call 1-929-205-6099

Meeting ID: 853 7756 6824

Passcode: 253224

The meeting can also be viewed on Channel 18 or on FairhavenTV.com

A. MINUTES

1. Approve the minutes of November 8, 2021 – Open Session

B. TOWN ADMINISTRATOR REPORT

C. COMMITTEE LIAISON REPORTS

D. APPOINTMENTS

1. 6:50 pm Meet and Greet Precinct 6
2. 7:00 pm Change of Manager -Ice House, LLC, 136 Huttleston Ave.
3. 7:05 pm Updates from the Stratford Group Housing Project and application process- former Oxford School

E. POSSIBLE ACTION/DISCUSSION

1. Request to join Commission on Disability- Jenna Benoit
2. Event Permit: Fairhaven Homecoming Day Fair- June 25, 2022
3. Request to hang Homecoming Banner at Town Hall
4. Request to remove "Children" sign in front of 8 Chambers Street
5. Request for 15-minute parking sign – Fairhaven Pharmacy, 72 Main Street
6. Update from The Collins Center on TA Search Process
7. Discuss Town Administrator planning and time sensitive responsibilities
8. Mask Mandate update

F. CORRESPONDENCE

1. Wreaths Across Fairhaven
2. Grant Awards
 - a. Green Communities: \$184,956
 - b. Community Planning: \$75,000
 - c. Sustainable Materials Recovery Program: \$11,000

3. Deadline for submission of Town Report Cover Photos

G. NOTES AND ANNOUNCEMENTS

1. The next **regularly** scheduled meeting of the Select Board is Monday, December 6, 2021 at 6:30 p.m. in the Town Hall Banquet Room

ADJOURNMENT

Subject matter listed in the agenda consists of those items that are reasonable anticipated (by the Chair) to be discussed. Not all items listed may be discussed and other items not listed (such as urgent business not available at the time of posting) may also be brought up for discussion in accordance with applicable law.

MGL, Ch. 30A, § 20(f) requires anyone that intends to record any portions of a public meeting, either by audio or video, or both, to notify the Chair at the beginning of the meeting.



Fairhaven Select Board Meeting Minutes November 8, 2021

Present: Chairman Robert Espindola, Vice-Chairwoman Stasia Powers, Clerk Keith Silvia, Interim Town Administrator Wendy Graves, and Administrative Assistant Vicki Oliveira

The meeting was videotaped by Cable Access and Zoom meeting application.

Chairman Robert Espindola opened the meeting at 6:30 pm in the Town Hall Banquet Room.

At 6:31 pm The Board took a brief one-minute recess to convene in the Auditorium for the swearing in ceremony.

Swearing in of new Fire Fighters

Fire Chief Todd Correia said Fire Fighter Chauncey Burr started as a member of the Department as a call fire fighter in 1993 and was promoted to permanent in 1995. Acting Town Clerk Linda Fredette swore in Fire Fighter Burr as a Lieutenant before family and friends, while Lieutenant Burr's father pinned his badge on him.

Chief Correia introduced the newest members of the Fire Department who were sworn in by Acting Town Clerk Linda Fredette. Todd Sexton and Spencer Espindola were sworn in as full-time fire fighters, while Heather Lopes and Matthew Foster were sworn in to the call department.

At 6:41 pm the Board took a one-minute recess to reconvene to the Banquet Room.

Minutes

Ms. Powers made a motion to approve the Open Session minutes of October 25, 2021. Mr. Silvia seconded. Vote was unanimous. (3-0)

Town Administrator Report

Ms. Graves said there was recently an ARPA meeting with Representative Straus to discuss the ARPA funds from the State. Representative Straus gave guidance on strategies for grant funding and will take into advisement what was discussed and advocate for the Town.

Ms. Graves said after the recent Nor'easter, any residents who have claims regarding damage from downed trees must submit the information in writing to the Select Board office to be forwarded to the Town's insurance company.

Committee Liaison Reports

Ms. Powers said at the last Lagoa meeting they met with the Town Art Curator to discuss possible locations for the art exhibit coming next summer.

Mr. Silvia met with the Marine Resources committee where they were shown a presentation by an engineer regarding the dredging at West Island. The Marine Resources Committee also had questions regarding the land swap at Union Wharf and the parking issue there.

Mr. Silvia thanked town departments for all their hard work during the recent storm and for the great clean up that was done.

Mr. Espindola will meet with the Economic Development Committee and the Bikeway Committee this month. The Complete Streets should be done by the end of this year.

Mr. Espindola will discuss later in the meeting the Broadband Study Committee.

Mr. Espindola said SRPEDD is working on regional grants from the Federal Government, that could include the Wind project in the city.

Meet and Greet Precinct 5

There was no one from Precinct 5 who wished to speak.

2022 Seasonal Population Increase Estimation Form

Attorney John Markey was present via Zoom to answer questions from the Board regarding seasonal liquor licenses in Fairhaven. Attorney reminded the Board at the last meeting, he was tasked to gather some additional information. Mr. Markey did some research through the census form and provided a good faith estimate on the number of seasonal residents that are in Fairhaven. (Attachment A). After speaking to Ralph Sacramento from the Alcohol Beverages Control Commission (ABCC), it was determined the Select Board has sole discretion regarding the number and time frame of the seasonal licenses that they can issue and the seasonal licenses will not affect the number of marijuana licenses. Marijuana licenses are issued based on the number of package store licenses not on-premise licenses.

Ms. Powers made a motion to approve the population increase form for a seasonal liquor license as presented. Mr. Silvia seconded. Vote was unanimous. (3-0)

Fort Phoenix Polar Plunge

Organizer Kathy Lopes spoke to the Board via Zoom and said this year's event will be more low key this year in order to minimize contact due to COVID. As in years past, Ms. Lopes has requested an ambulance during the event in case of any emergencies. Ms. Powers made a motion to approve the 2022 Polar Plunge and to request the Fairhaven Fire Department send an ambulance to the event. Mr. Silvia seconded. Vote was unanimous. (3-0)

FY 21 Abatement of Ambulance Fees

Ms. Powers made a motion to approve the amount of \$4331.39 to be abated from the cumulative disposition for the uncollectable ambulance fees. Mr. Silvia seconded. Vote was unanimous. (3-0)

61A Notice Of Intent To Sell, 732 Sconticut Neck Road

The Board discussed possible dates for a public hearing for 732 Sconticut Neck Road. Ms. Powers made a motion to set the date for the 61A Public Hearing for the next Select Board meeting on Monday, November 22, 2021. Mr. Silvia seconded. Vote was unanimous. (3-0)

Setting Possible Date For Special Town Meeting

The Board discussed possible dates for a special town meeting but will wait until the new Town Administrator is hired to set a definite date.

At 7:20 pm Mr. Silvia left the room.

Update from The Collins Center on Town Administrator Search Process

Mr. Espindola said the Town Administrator search committee has narrowed down the candidates for the Town Administrator position and is currently conducting the background checks. The Board would like to hold the interviews by the end of November and will work with the consultant to secure a date for the interview of the finalists.

At 7:32 pm Mr. Silvia returned to the meeting.

Broadband Study Committee Update

Mr. Espindola provided an update on the Broadband project stating that he has met with Representative Bill Straus, who has expressed interest in this project. Mr. Espindola said the consultant will estimate the terms of the costs and has spoken to IT Director, Chirs Camara regarding setting up a test pilot for this. The Committee would like to do a Request for Proposal (RFP) and possibly apply for grants to help with the projected \$21 million it will cost for this to be completed.

Thank You Letter- Storm Mutual Aid

Mr. Espindola said Public Works Superintendent Vinnie Furtado placed a request for mutual aid during last weeks storm and the Town of Franklin sent over some help to Fairhaven. Mr. Espindola read a letter from the Tree Warden expressing his gratitude from Town Departments during the storm for all their help (Attachment B). Ms. Powers made a motion to send a Thank you letter to the Town of Franklin. Mr. Silvia seconded. Vote was unanimous. (3-0)

Mask Mandate update

There has not been much change in the positive COVID-19 cases; Ms. Graves said the strong mask advisory is currently still in place.

Chapter 81 of the Acts of 2021

Mr. Espindola said the Town has received official correspondence from the State stating the Governor has signed this act allowing Fairhaven to add two (2) more Select Board members at the next town election. Mr. Espindola would like to send a "Thank you" letter to those who helped in getting this act passed. Ms. Powers made a motion to send thank you letters to Senator

Mark Montigny, Representative Bill Straus and Town Moderator Mark Sylvia. Mr. Silvia seconded. Vote was unanimous. (3-0)

Mr. Espindola read a series of questions and answers from Acting Town Clerk Linda Fredette regarding the passing of this special act. (Attachment C)

Notes and Announcements

Mr. Silvia thanked Harbormaster Tim Cox for his hard work during the Nor'easter last week.

Ms. Powers reminded residents about the Veterans Day Parade on Thursday, November 11, 2021.

At 7:58 pm, Ms. Powers made a motion to adjourn. Mr. Silvia seconded. Vote was unanimous. (3-0)

Respectfully submitted,



Vicki L. Oliveira
Administrative Assistant

- A. Attorney Markey Letter and Population form
- B. Tree Warden letter
- C. Q&A regarding Chapter 81

Meet Precinct Six



SELECT BOARD'S MEETING

LIQUOR LICENSE HEARING
MONDAY, NOVEMBER 22, 2021
@ 7:00 PM

CHANGE OF MANAGER

Application submitted by:

Ice House, LLC
136 Huttleston Avenue
Fairhaven, MA 02719
Proposed New Manager; Aaron Hyslope

Taxes: ok
WC: ok
Tips: ok
Bldg.: Not required this trans.
Health: Not required this trans.



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION
MONETARY TRANSMITTAL FORM

AMENDMENT-Change of Manager

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL
LICENSING AUTHORITY.

ECRT CODE: RETA

Please make \$200.00 payment here: **ABCC PAYMENT WEBSITE**

PAYMENT MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL AND INCLUDE THE
PAYMENT RECEIPT

ABCC LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY)

00007-RS-0384

ENTITY/ LICENSEE NAME

ICE HOUSE LLC

ADDRESS

130 HUTTLESTON AVE

CITY/TOWN

FAIRHAVEN

STATE

MA

ZIP CODE

02719

For the following transactions (Check all that apply):

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> New License | <input type="checkbox"/> Change of Location | <input type="checkbox"/> Change of Class (i.e. Annual / Seasonal) | <input type="checkbox"/> Change Corporate Structure (i.e. Corp / LLC) |
| <input type="checkbox"/> Transfer of License | <input type="checkbox"/> Alteration of Licensed Premises | <input type="checkbox"/> Change of License Type (i.e. club / restaurant) | <input type="checkbox"/> Pledge of Collateral (i.e. License/Stock) |
| <input checked="" type="checkbox"/> Change of Manager | <input type="checkbox"/> Change Corporate Name | <input type="checkbox"/> Change of Category (i.e. All Alcohol/Wine, Malt) | <input type="checkbox"/> Management/Operating Agreement |
| <input type="checkbox"/> Change of Officers/
Directors/LLC Managers | <input type="checkbox"/> Change of Ownership Interest
(LLC Members/ LLP Partners,
Trustees) | <input type="checkbox"/> Issuance/Transfer of Stock/New Stockholder | <input type="checkbox"/> Change of Hours |
| | <input type="checkbox"/> Other | | <input type="checkbox"/> Change of DBA |

THE LOCAL LICENSING AUTHORITY MUST MAIL THIS
TRANSMITTAL FORM ALONG WITH
COMPLETED APPLICATION, AND SUPPORTING DOCUMENTS TO:

Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3
Chelsea, MA 02150-2358

RECEIVED
2021 NOV - 8 A 10:1
BOARD OF SELECTM/
FAIRHAVEN MASS



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
95 Fourth Street, Suite 3, Chelsea, MA 02150-2358
www.mass.gov/abcc

AMENDMENT-Change of Manager

☒ **Change of License Manager**

1. BUSINESS ENTITY INFORMATION

Entity Name	Municipality	ABCC License Number
ICE HOUSE LLC	FAIRHAVEN	00007-RS-0384

2. APPLICATION CONTACT

The application contact is the person who should be contacted with any questions regarding this application.

Name	Title	Email	Phone
KENDRA PLATT	OPERATIONS ASST	KPLATT@FLEETFISHERIES.COM	(508) 910-2113

3A. MANAGER INFORMATION

The individual that has been appointed to manage and control of the licensed business and premises.

Proposed Manager Name	Date of Birth	SSN
AARON HYSLOPE	[REDACTED]	[REDACTED]
Residential Address	226 POPES ISLAND NEW BEDFORD, MA. 02740	
Email	Phone	[REDACTED]
Please indicate how many hours per week you intend to be on the licensed premises	Last-Approved License Manager	
60	CHRISTOPHER BENTLEY	

3B. CITIZENSHIP/BACKGROUND INFORMATION

Are you a U.S. Citizen? ☒ Yes ☐ No *Manager must be U.S. citizen
If yes, attach one of the following as proof of citizenship US Passport, Voter's Certificate, Birth Certificate or Naturalization Papers.
Have you ever been convicted of a state, federal, or military crime? ☐ Yes ☒ No
If yes, fill out the table below and attach an affidavit providing the details of any and all convictions. Attach additional pages, if necessary, utilizing the format below.

Date	Municipality	Charge	Disposition

3C. EMPLOYMENT INFORMATION

Please provide your employment history. Attach additional pages, if necessary, utilizing the format below.

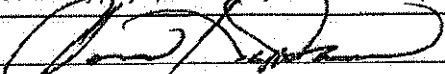
Start Date	End Date	Position	Employer	Supervisor Name
5/03/19	CURRENT	GENERAL MANAGER	ICE HOUSE BAR & GRILL	LARS VINJERUDT
3/20/15	4/26/19	MAINTENANCE	HARBORVIEW LLC	LARS VINJERUDT

3D. PRIOR DISCIPLINARY ACTION

Have you held a beneficial or financial interest in, or been the manager of, a license to sell alcoholic beverages that was subject to disciplinary action? ☐ Yes ☒ No If yes, please fill out the table. Attach additional pages, if necessary,utilizing the format below.

Date of Action	Name of License	State	City	Reason for suspension, revocation or cancellation

I hereby swear under the pains and penalties of perjury that the information I have provided in this application is true and accurate:

Manager's Signature  Date 10/20/2021

ENTITY VOTE

The Board of Directors or LLC Managers of ICE HOUSE LLC
Entity Name
duly voted to apply to the Licensing Authority of Fairhaven and the
City/Town
Commonwealth of Massachusetts Alcoholic Beverages Control Commission on 10/15/2021
Date of Meeting

For the following transactions (Check all that apply):

☒ Change of Manager

☐ Other

"VOTED: To authorize

Lars Vinjerud II

Name of Person

to sign the application submitted and to execute on the Entity's behalf, any necessary papers and do all things required to have the application granted."

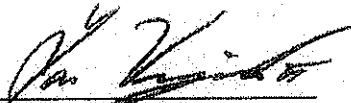
"VOTED: To appoint

Aaron Hyslope

Name of Liquor License Manager

as its manager of record, and hereby grant him or her with full authority and control of the premises described in the license and authority and control of the conduct of all business therein as the licensee itself could in any way have and exercise if it were a natural person residing in the Commonwealth of Massachusetts."

A true copy attest,



Corporate Officer /LLC Manager Signature

Lars Vinjerud II

(Print Name)

For Corporations ONLY

A true copy attest,

N/A

Corporation Clerk's Signature

(Print Name)

APPLICANT'S STATEMENT


I, LARS the: ☐ sole proprietor; ☐ partner; ☐ corporate principal; ☒ LLC/LLP manager
Authorized Signatory
of ICE HOUSE LLC
Name of the Entity/Corporation

hereby submit this application (hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statements and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

- (1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;
- (2) I state that the location and description of the proposed licensed premises are in compliance with state and local laws and regulations;
- (3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;
- (4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the ownership as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;
- (5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;
- (6) I understand that all statements and representations made become conditions of the license;
- (7) I understand that any physical alterations to or changes to the size of the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;
- (8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and
- (9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.
- (10) I confirm that the applicant corporation and each individual listed in the ownership section of the application is in good standing with the Massachusetts Department of Revenue and has complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support.

Signature:



Date:

10/20/2021

Title:

Owner

Regards,

Keith

From: Alicia Pollard <apollard@HallKeen.com>
Sent: Tuesday, November 9, 2021 11:45 AM
To: Keith McDonald <KJM@scgdevelopment.com>; Tracie Glasman <tglasman@HallKeen.com>; Megan Thomopoulos <mthomopoulos@hallkeen.com>
Cc: Hanna Wolsfelt <hwolsfelt@HallKeen.com>
Subject: RE: Oxford. Lottery update?

Good Morning Keith,

My responses are below in red. Let me know if you have any additional questions.

1. Website. When will it be operable.

The property website is in-development. They have received direction to have it up and running ASAP, no later than the application acceptance period of December 1st. We're waiting on some files from the architects, everything else is with the web developers.

In the meantime, we have an active page on our HK website for Oxford School.
<https://www.hallkeen.com/listing/oxford-school-residences>

2. Contact. Prior to website being operable, who should the contact be at Hallkeen. The Town is still getting inquiries.

All inquiries can be directed to me and/or Hanna. I've started a contact list for prospects requesting applications. They can also email oxfordschool@hallkeen.com

3. Lottery. I assume you have already started this process, please confirm. And please let me know some broad dates to share with the town.

KEY DATES:

Application Deadline: January 31, 2022

Virtual Lottery Info Session: 12/9/21 at 9:00 am

Lottery: 2/10/22

4. Town/FHA. Also, if possible, please let me know who you had already spoken to at the Town and FHA to share with the Board of Selectmen.

Town Hall contact: Vicki Oliveira, Assistant to Town Administrator

FHA contact: Krisanne Sheedy, Executive Director

Alicia Pollard, NALP®, C³P
Director of Marketing

HK | HallKeen Management

Real Estate Management and Investment

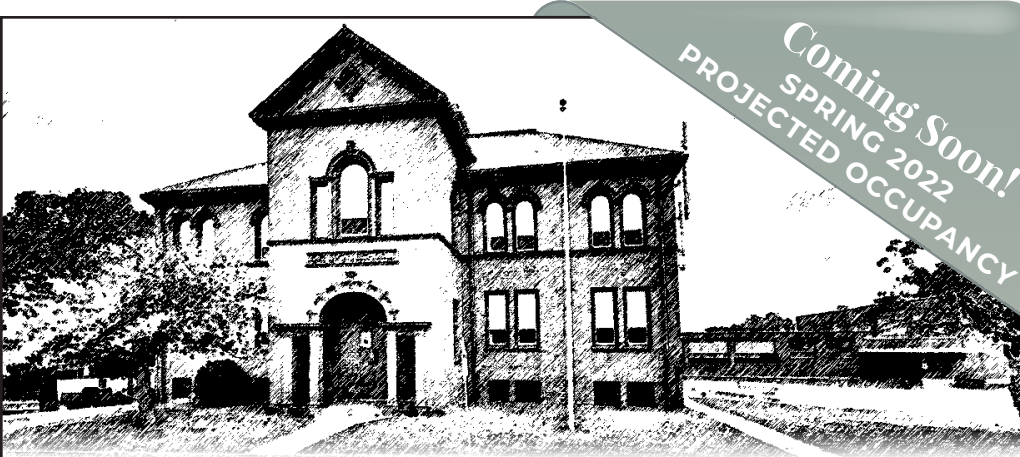
1400 Providence Highway, Suite 1000, Norwood, MA 02062

P: (781) 915-3028 | F: (781) 915-3128
apollard@hallkeen.com | www.HallKeen.com

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 ***Please consider the environment before printing this email.***

Coming Soon!
SPRING 2022
PROJECTED OCCUPANCY



OXFORD SCHOOL RESIDENCES

347 Main Street
Fairhaven, MA 02719

LOTTERY for Affordable Senior Housing Coming Soon!

Applications Now Available! Brand New Apartments!

On-Site Parking • On-Site Management • 24-Hour Emergency Maintenance

Monthly Rents: One Bedroom \$889 | Two Bedrooms \$1057

Some apartments are also available with rents based on 30% of household income.

# of Persons	Maximum Gross Annual Income Limits	
	60% of AMI ¹	30% of AMI ¹
1	\$35,340	\$17,700
2	\$40,380	\$20,200
3	\$45,420	\$22,750
4	\$50,460	\$26,500

¹ HUD FY 2021 (04/01/21) Area Median Income Limits (for Section 8, Section 221(d)(3) BMIR, Section 235 and Section 236 program) for Bristol County, New Bedford, MA HUD Metro FMR Area. Subject to change.

Join Us for a Virtual Informational Session 12/9/21 at 9:00am

Please email oxfordschool@hallkeen.com to request an invitation.

Applicants will be Chosen by Lottery on February 10, 2022 (Location and Time TBD)

All applicants must meet the community's Resident Selection Plan criteria.

For more information on the lottery and to receive an application:

CALL: 781-915-3071 | TDD: Call 7-1-1 | EMAIL: oxfordschool@hallkeen.com

Applications will also be available at:

- Millicent Library (circulation desk): 45 Center St, Fairhaven, MA 02719
- Fairhaven Town Hall: 40 Center St, Fairhaven, MA 02719
- Fairhaven Housing Authority: 275 Main St, Fairhaven, MA 02719
- Fairhaven Senior Center: 229 Huttleston Ave, Fairhaven, MA 02719
- CHOICE/Chelmsford Housing Authority: 10 Wilson St, Chelmsford MA 01824
- Online: www.hallkeen.com/oxfordschool

Applications will be taken from December 1, 2021 – January 31, 2022.

**APPLICATIONS FOR THE LOTTERY MUST BE FULLY COMPLETED
AND RECEIVED OR POSTMARKED BY JANUARY 31, 2022.**

MAIL COMPLETED APPLICATIONS TO:

Oxford School c/o HallKeen Management

1400 Providence Highway, Suite 1000 | Norwood, MA 02062

Este documento es importante, por favor tradúzcalo | Este documento é importante, por favor, tê-lo traduzido
Questo documento é importante, si prega di farlo tradurre

Translation Services Available | EHO/ADA | Professionally managed by HallKeen Management



HK HallKeen Management

PRELIMINARY RENTAL APPLICATION

-Equal Housing Opportunity-

MANAGEMENT WILL PROVIDE HELP IN REVIEWING THIS DOCUMENT.
IF NECESSARY, PERSONS WITH DISABILITIES MAY ASK FOR THIS APPLICATION IN LARGE PRINT TYPE
OR OTHER ALTERNATE FORMATS.

Application Date: _____

Property Name: **Oxford School**
Address: **347 Main Street**
City, State, Zip: **Fairhaven, MA 02719**
Telephone Number: **TBD**
TDD#: **Call 7-1-1**
Email Address: **oxfordschool@hallkeen.com**

Return Completed Application To: **HallKeen Management/Oxford School**
1400 Providence Highway, Suite 1000
Norwood, MA 02062

APPLICATION FOR ADMISSION

Note: *Please fill in all sections completely. If a section does not apply, please draw a line through or write "N/A".* Failure to do so will result in processing delays or rejection of your application. If you need help completing this application, please contact the Rental Office.

Applicant: _____ **Telephone:** _____

Email Address: _____

Current Address:

Street	_____	Apt. #	_____
City, State	_____	Zip Code	_____

Current Landlord:

Name	_____	Telephone	_____
Street	_____	Fax #	_____
City, State	_____	Zip Code	_____
Email Address	_____		

RACE (Optional Section: Information will be used for fair housing programs only, as required by State and Federal Laws.)

- | | | |
|---|--|---|
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Asian or Pacific Islander | <input type="checkbox"/> Other (not white or Hispanic) |
| <input type="checkbox"/> Black (not of Hispanic origin) | <input type="checkbox"/> Hispanic | <input type="checkbox"/> White (not of Hispanic origin) |

SIZE OF APARTMENT NEEDED:

☐ 0BR ☐ 1BR ☐ 2BR

How did you hear about this property? _____

ADDITIONAL INFORMATION:

- Do you currently hold a *Mobile Voucher*? ☐ Yes ☐ No
- Are you requesting a *Hearing/Visual Adapted Unit*? ☐ Yes ☐ No
- Are you requesting a *Wheelchair Adapted Unit*? ☐ Yes ☐ No
- Do any members of the household have any *accessibility or reasonable accommodation requests, changes in a unit or development or alternate ways we need to communicate with you*?
☐ Yes ☐ No

If yes, please explain/provide details: _____

- Do you or a member in your household *consider yourself to be homeless or at-risk of being homeless*?
☐ Yes ☐ No

If yes, please explain/provide details: _____

- Have you ever been *evicted* from your home for any reason? ☐ Yes ☐ No

If yes, please explain/provide details: _____

- Have you or any household member ever been *convicted* of any crime? ☐ Yes ☐ No

If yes, please explain/provide details: _____

- Have you or any household member suffered actual or threats of physical violence by a spouse or other member of the household? ☐ Yes ☐ No

If yes, please explain/provide details: _____

- Are you or any member of your household required to register as a sex offender under Massachusetts or any other state law? ☐ Yes ☐ No

If yes, list the name of the persons and the registration requirements (i.e. place where registration needs to be filed, length of time for which registration is required): _____

CURRENT HOUSING:

- Present Housing Cost Per Month \$ _____
- Does your current housing cost include utilities (gas, electric, heat, hot water)? ☐ Yes ☐ No
- How Long Have You Lived at Present Address? _____ Years / _____ Months
- Do You Own Any Pets? ☐ Yes ☐ No If yes, what type: _____
- What are the reasons for moving? _____

FAMILY COMPOSITION: List all who will occupy the apartment.

YOU MUST INCLUDE YOURSELF (Any person not listed will not be allowed to move in)

FULL NAME OF EACH PERSON	RELATIONSHIP TO HEAD OF HOUSEHOLD	DATE OF BIRTH (00/00/0000)	Gender (Optional)	SOCIAL SECURITY NUMBER	STUDENT STATUS Full-time/FT Part-time/PT
1) _____	Head of Household	_____	_____	_____	<input type="checkbox"/> FT <input type="checkbox"/> PT <input type="checkbox"/> N/A
2) _____	_____	_____	_____	_____	<input type="checkbox"/> FT <input type="checkbox"/> PT <input type="checkbox"/> N/A
3) _____	_____	_____	_____	_____	<input type="checkbox"/> FT <input type="checkbox"/> PT <input type="checkbox"/> N/A
4) _____	_____	_____	_____	_____	<input type="checkbox"/> FT <input type="checkbox"/> PT <input type="checkbox"/> N/A
5) _____	_____	_____	_____	_____	<input type="checkbox"/> FT <input type="checkbox"/> PT <input type="checkbox"/> N/A

Does the Head of Household have full custody of all household members under the age of 18 ☐ Yes ☐ No

If no, please explain _____

(Please be prepared to supply copy of child support/custody agreement and divorce decree.)

(HUD only): If you have no social security number, you claim you are exempt because:

☐ You are an ineligible non-citizen

☐ You were 62 as of 1/31/2010 and receiving housing assistance as of 1/31/2010

LANDLORD REFERENCES: Provide full names & addresses of Landlords where you have lived over the last (5) **five** years. Please include both long term and temporary residences.

1) Previous Address _____

Dates Lived at This Address _____

Name of Landlord _____

Landlord Telephone # _____ Landlord E-mail address _____

Landlord Address _____

2) Previous Address _____

Dates Lived at This Address _____

Name of Landlord _____

Landlord Telephone # _____ Landlord E-mail address _____

Landlord Address _____

3) Previous Address _____

Dates Lived at This Address _____

Name of Landlord _____

Landlord Telephone # _____ Landlord E-mail address _____

Landlord Address _____

4) Previous Address _____

Dates Lived at This Address _____

Name of Landlord _____

Landlord Telephone # _____ Landlord E-mail address _____

Landlord Address _____

Please list all states where the applicant and/or members of the applicant's household have resided.

CHARACTER REFERENCES: (If you are unable to furnish landlord or other housing references) *They must have known you for one (1) year or more and not be related to you.*

1.) Character Reference Name _____
Telephone #: _____ | E-mail Address: _____
Address: _____

2.) Character Reference Name _____
Telephone #: _____ | E-mail Address: _____
Address: _____

3.) Character Reference Name _____
Telephone #: _____ | E-mail Address: _____
Address: _____

EMPLOYMENT: Is any member of the household employed? ☐ Yes ☐ No
If yes, please list below. *List each member by their corresponding number from Page 3.*

Member # _____
Name of Present Employer _____ Telephone _____
Email address: _____ Fax: _____
Employer's Address _____
Length of Employment: _____ Position: _____
Job Type: ☐ Seasonal ☐ Temporary ☐ Permanent ☐ Part-Time ☐ Full-Time
Do you receive tips? ☐ Yes ☐ No If yes, how much do you average each week? \$ _____
If hourly, rate per hour? \$ _____ Number of hours scheduled each week: _____ hours
Gross earnings (before taxes): \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly

Member # _____
Name of Present Employer _____ Telephone _____
Email address: _____ Fax: _____
Employer's Address _____
Length of Employment: _____ Position: _____
Job Type: ☐ Seasonal ☐ Temporary ☐ Permanent ☐ Part-Time ☐ Full-Time
Do you receive tips? ☐ Yes ☐ No If yes, how much do you average each week? \$ _____
If hourly, rate per hour? \$ _____ Number of hours scheduled each week: _____ hours
Gross earnings (before taxes): \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly

Member # _____
Name of Present Employer _____ Telephone _____
Email address: _____ Fax: _____
Employer's Address _____
Length of Employment: _____ Position: _____
Job Type: ☐ Seasonal ☐ Temporary ☐ Permanent ☐ Part-Time ☐ Full-Time
Do you receive tips? ☐ Yes ☐ No If yes, how much do you average each week? \$ _____
If hourly, rate per hour? \$ _____ Number of hours scheduled each week: _____ hours
Gross earnings (before taxes): \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly
Gross earnings (before taxes): \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly

Member # _____
Name of Present Employer _____ Telephone _____
Email address: _____ Fax: _____
Employer's Address _____
Length of Employment: _____ Position: _____
Job Type: ☐ Seasonal ☐ Temporary ☐ Permanent ☐ Part-Time ☐ Full-Time
Do you receive tips? ☐ Yes ☐ No If yes, how much do you average each week? \$ _____
If hourly, rate per hour? \$ _____ Number of hours scheduled each week: _____ hours
Gross earnings (before taxes): \$ _____ ☐ Weekly ☐ Bi-Weekly ☐ Monthly

DOES ANYONE IN THE HOUSEHOLD HAVE OTHER SOURCES OF INCOME (Other income is income such as *Welfare, Social Security, SSI, Pensions (including Veteran's Benefits), Disability Compensation, Unemployment Compensation, Interest, Alimony, Child Support, Annuities, Dividends, Income from Rental Property, Military Pay, Scholarships, Grants and/or Monetary Gifts/Support from Someone that isn't a member of the household*)? ☐ Yes ☐ No

If yes, list below by household member and income type:

	Type of Income	Gross Earnings (Before Taxes)
Member # _____	_____	\$ _____ per _____ (week, month, year)
Member # _____	_____	\$ _____ per _____ (week, month, year)
Member # _____	_____	\$ _____ per _____ (week, month, year)
Member # _____	_____	\$ _____ per _____ (week, month, year)
Member # _____	_____	\$ _____ per _____ (week, month, year)
Member # _____	_____	\$ _____ per _____ (week, month, year)
Member # _____	_____	\$ _____ per _____ (week, month, year)
Member # _____	_____	\$ _____ per _____ (week, month, year)

DOES ANY HOUSEHOLD MEMBER HAVE INCOME FROM ASSETS (*Assets include Checking Accounts, Savings Accounts, Direct Express Cards, EBT and DOR Cards, Pay Cards, 401K Accounts, IRA Accounts, Term Certificates, Money Markets, Stocks, Bonds, Mutual Funds, etc.*)? ☐ Yes ☐ No **If yes, list below:**

Member # _____
 Name of Financial Institution: _____
 Email address: _____ Fax: _____
 Financial Institution Address: _____
 Account # _____ Type of Account: _____ Current Balance \$ _____
 Interest Rate: _____% If Stock, Number of Shares: _____ Dividends per Share: \$ _____

Member # _____
 Name of Financial Institution: _____
 Email address: _____ Fax: _____
 Financial Institution Address: _____
 Account # _____ Type of Account: _____ Current Balance \$ _____
 Interest Rate: _____% If Stock, Number of Shares: _____ Dividends per Share: \$ _____

Member # _____
 Name of Financial Institution: _____
 Email address: _____ Fax: _____
 Financial Institution Address: _____
 Account # _____ Type of Account: _____ Current Balance \$ _____
 Interest Rate: _____% If Stock, Number of Shares: _____ Dividends per Share: \$ _____

Member # _____
 Name of Financial Institution: _____
 Email address: _____ Fax: _____
 Financial Institution Address: _____
 Account # _____ Type of Account: _____ Current Balance \$ _____
 Interest Rate: _____% If Stock, Number of Shares: _____ Dividends per Share: \$ _____

DOES ANY HOUSEHOLD MEMBER HAVE OTHER ASSETS such as Real Estate, Cash Value of Life Insurance, Treasury Bills, etc.? ☐ Yes ☐ No **If yes, list below:**

Household Member	Type of Asset	Cash Value of Asset
Member # _____	_____	\$ _____
Member # _____	_____	\$ _____
Member # _____	_____	\$ _____
Member # _____	_____	\$ _____
Member # _____	_____	\$ _____

Has any household member disposed of any assets for less than fair market value in the last two years?

☐ Yes ☐ No **If yes, please list below:**

ASSET	MARKET VALUE	AMOUNT RECEIVED	DATE DISPOSED OF
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____

In Case of Emergency, whom should we contact?

Name: _____ Relationship: _____
Phone# _____ Email Address: _____
Address: _____

Name: _____ Relationship: _____
Phone# _____ Email Address: _____
Address: _____

CONFLICT OF INTEREST:

Do you work for or have immediate family members who work, or have any business or consulting relationship with the Property Owner, or HallKeen Management? Immediate family ties include (whether by blood, marriage, or adoption) the spouse, parent (including step-parent), child (including step-child), brother, sister (including a step-brother or step-sister), grandparent, grandchild or in-laws of the applicant(s). ☐ Yes ☐ No

If yes, please provide name(s) of immediate family member(s), relationship and company/owner name:

IRC Section 152 (f)(2) defines, in part, a “student” as an individual, who during each of 5 calendar months during the calendar year in which the taxable year of the taxpayer begins is either (a) a full-time student at an educational organization or (b) is pursuing a full-time course of institutional on-farm training under the supervision of an accredited agent of an educational organization, as described more fully in the IRC.

The term “educational organization” includes elementary schools, junior and senior high schools, colleges, universities, and technical, trade and mechanical schools. It does not include on-the-job training courses.

Will **ALL** of the persons in the household be or have been full-time students during five calendar months of this year or plan to be in the next calendar year at an educational institution (other than a correspondence school) with regular faculty and students? ☐Yes ☐No

IF YES, ANSWER THE FOLLOWING QUESTIONS:

- Are any full-time student(s) married and filing a joint tax return? ☐Yes ☐No
- Are any full-time student(s) enrolled in a job-training program receiving assistance under the Job Training Partnership Act? ☐Yes ☐No
- Are any full-time student(s) an AFDC or a title IV recipient? ☐Yes ☐No
- Are any full-time student(s) a single parent living with his/her minor child who is not a Dependent on another's tax return? ☐Yes ☐No
- Is any student a person who was previously under the care and placement of a foster care program (under Part B or E of Title IV of the Social Security Act)? ☐Yes ☐No

PLEASE RESPOND TO THE FOLLOWING QUESTIONS IF YOU WISH TO BE CONSIDERED FOR ANY OF THE FOLLOWING PRIORITIES OR PREFERENCES (PROOF REQUIRED):

Does any household member currently reside in the Town of Fairhaven or the Greater New Bedford Area? (Proof of residency such as a current utility bill, rent receipt, lease, street listing or voter registration listing must be submitted with this application)

☐Yes ☐No Please explain: _____

Is any household member a Municipal or City employee of the Town of Fairhaven or the Greater New Bedford Area such as teachers, janitors, firefighters, police officers, librarians or town hall employees? (Proof of employment such as a paystub showing the employer must be submitted with this application)

☐Yes ☐No Please explain: _____

Is any household member employed by a local business in Fairhaven or the Greater New Bedford Area? (Proof of employment such as a paystub showing the employment location must be submitted with this application)

☐Yes ☐No Please explain: _____

Are you homeless or at risk of being homeless? (Proof of employment homelessness or risk of being homeless must be submitted with this application)

☐Yes ☐No Please explain: _____

Is any household member a Veteran who served in the active military, naval or air service and was not dishonorably discharged? (Please submit Certificate of Release or Discharge from Active Duty, Form DD214, with this application as proof of Veteran status)

☐Yes ☐No Please explain: _____

I / We hereby certify that the information furnished on this application is true and complete, to the best of my/our knowledge and belief. Inquiries may be made to verify the statements herein. All information is regarded as confidential in nature. I hereby authorize the Landlord to obtain a consumer credit report and a criminal background report. I/We certify that I/We understand that false statements or information are punishable under applicable State or Federal Law.

I / We hereby certify that we have received a notice from the management agent describing the right to reasonable accommodations for persons with disabilities.

I/ We hereby certify that this apartment will be this household's primary residence.

Signed under the pains and penalties of perjury:

Head of Household/Applicant

Date

Co-Applicant

Date

Other Adult Household Member

Date

Other Adult Household Member

Date

HallKeen Management does not discriminate on the basis of race, color, religion, sex, national origin, sexual orientation, age, familial status or physical or mental disability in the access or admission to its programs or employment, or in its programs, activities, functions or services.

**Professionally Managed by:
HallKeen Management
1400 Providence Highway, Suite 1000
Norwood, MA 02062
(781) 762-4800**



GENERAL AUTHORIZATION FOR RELEASE OF INFORMATION

NAME: _____
ADDRESS: _____

I, the above-named individual, have authorized HallKeen Management to verify the accuracy of the information which I have provided to them, from the following sources (specify):

Child Care Expenses	Veteran's Benefits
Criminal Activity (CORI)	Federal, State, or Local Benefits
Courts	Banks, Credit Unions
Family Composition	IRAs, CDs, 401k, 403b
Law Enforcement Agency	Interest, Dividends
Credit Bureau	Financial Institutions, Brokerages
Employment	Mutual funds
Self-Employment	Alimony, Child Support
Unemployment Compensation	Other income-regular Gifts or allowances from another person
Pensions	Commissions, Tips, Bonus
Annuities	Landlords, Rental History
Social Security	Identity & Marital Status
Supplemental Security Income	Handicapped Assistance Expenses
State Welfare Agencies	Medical Insurance Premiums
State Employment Security Agency	Un-reimbursed Medical Expenses
Workman's Compensation	School & College Tuition Fees
Health & Accident Insurance	Debit Cards
Direct Express Cards	Other Sources not listed above

I HEREBY GIVE YOU MY PERMISSION TO RELEASE THIS INFORMATION TO:

HallKeen Management subject to the condition that it be kept confidential. I would appreciate your prompt attention in supplying the information requested on the attached page to HallKeen Management within five (5) days of receipt of this request. I understand that a photocopy of this authorization is as valid as the original.

Thank you for your assistance and cooperation.

Signed under pain and penalty of perjury.

Head of Household Date

Spouse Date

Other Adult Member Date

Other Adult Member Date

To: HallKeen Management

Re: **Release to Obtain Information**

In consideration for being permitted to apply for this apartment at The Creative Class, I, Applicant, do represent all information in this application to be true and accurate and that Owner/Manager/Employee/Agent may rely on this information when investigating and accepting this application. I, Applicant, hereby authorize the Owner/Manager/Employee/Agent to make independent investigations to determine my credit, financial and character standing, including, but not limited to, credit and criminal background reports.

I, Applicant, authorize any person or Credit/Criminal Background Checking Agency having any information on me, to release any and all such information to the Owner/Manager/ Employee/Agent or Credit Checking Agencies. Applicant hereby releases, remises, and forever discharges, from any action whatsoever, in law and equity, all Owners, Managers, and Employees, or Agents, both of Landlord and their Credit Checking Agencies in connection with processing, investigating, or credit checking this application, and will hold them harmless from any suit or reprisal whatsoever.

All applicants over the age of 18 must sign:

Applicant: _____
Signature Social Security # Date

Print Name

Applicant: _____
Signature Social Security # Date

Print Name

Applicant: _____
Signature Social Security # Date

Print Name

Applicant: _____
Signature Social Security # Date

Print Name

Pursuant to fair housing laws, advertising/marketing must not indicate any preference or limitation, or otherwise discriminate based on race, color, disability, religion, sex, familial status, sexual orientation, gender identity, national origin, genetic information, ancestry, children, marital status, or public assistance recipient. This prohibition includes phrases such as “active adult community” and “empty nesters”. Exceptions may apply if the preference or limitation is pursuant to a lawful eligibility requirement.

NOTICE OF RIGHT TO REASONABLE ACCOMMODATION

If you have a disability and you need:

- A change in the rules or policies or how we do things that would make it easier for you to live here and use the facilities or take part in programs on site,
- A change or repair in your apartment or a special type of apartment that would make it easier for you to live here and use the facilities or take part in programs on site,
- A change or repair to some other part of the housing site that would make it easier for you to live here and use the facilities or take part in the programs on site, or
- A change in the way we communicate with you or give you information,

you can ask for this kind of change, which is called a **Reasonable Accommodation**. If you can show that you have a disability and if your request is reasonable, if it is not too expensive, and if it is not too difficult to arrange, we will try to make the changes you request.

We will give you an answer within fifteen business days following our review of your information unless there is a problem getting the information we need or unless you agree to a longer time frame. We will let you know if we need more information or verification from you or if we would like to talk with you about other ways to meet your needs.

If we turn down your request, we will explain the reasons and you can give us more information if you think that will help.

If you need help filling out the reasonable accommodation request form, or if you want to give us your request some other way, we will assist you.

You can get a reasonable accommodation request form from your property manager or contact:

HallKeen Management, Inc.
1400 Providence Highway, Suite 1000
Norwood, MA 02062
(781) 762-4800

Please initial: _____

11/15/2021

Town of Fairhaven Select Board

Town Hall

40 Center Street

Fairhaven, MA 02719

To whom it may concern,

My name is Jenna Benoit of 38 Hedge Street in Fairhaven, MA. I am writing to you today to request I be appointed to Fairhaven's Commission on Disability. Out of recognizing there was need, and with the support from chairperson Marcus Ferro for appointment, I hope to join this commission in order to continue to advocate for those living with disabilities in our community.

I am a proud graduate of Fairhaven High School. Following graduation, I continued my education to be a social worker at Bridgewater State University for both my bachelors and graduate degree. I currently am an Independently Licensed Clinical Social Worker in the state of Massachusetts. As a social worker it has always been most important to uphold strong ethics, but most importantly, safeguarding the interests and rights of my clients.

My focus has been on working with marginalized members in our community for over 11 years, specifically those living with disabilities. The philosophy which guides my work has been, although a person may be living with a disability, they are still entitled to quality lives full of opportunity in their communities.

I started working with a provider under the Department of Developmental Services in 2010 and continue to be involved in community activities, despite moving on from the role in June 2021. My last role with this provider was coordinating their psychology department. During the time I was employed by this provider, I worked in residential homes in the community, day programs and also by consulting with their community and family division. I tirelessly advocated for those I supported in their homes by providing quality training to staff, and in the community where I often was a liaison between various providers and services. During my career as a social worker I have also worked on an inpatient Intensive Treatment Unit as well at an outpatient setting to provide quality services for those living with severe mental health diagnosis and/or intellectual disabilities. I currently work at READS Collaborative. During the school year I am contracted as a School Social Worker in public schools, and during the summer I work at their academy in substantially separate classrooms.

I believe my unique experiences and expertise could assist Fairhaven's Commission on Disability. I look forward to hearing from you.

Jenna Benoit, LICSW

38 Hedge Street

Fairhaven, MA 02719

[REDACTED]

BOARDS AND COMMITTEES

Board/Committees	Name	Title
Commission on Disability		
(Appointed by Selectmen)	Pamela Whynot	
not less than Five(5) nor more than Thirteen (13) members	Marcus Ferro	elected official
Majority shall be persons with disabilities	Donna Lavallee	
one (1) may be a family member	Ronald J. Medina	
One (1) MUST Be an elected or appointed municipal official	Glenn Gabbard	
Three year terms	Brian Rego	
	Diane Rocha	
	Maria Ruedlinger Walker	
	vacant	
	vacant	
	vacant	
	vacant	
	vacant	



FAIRHAVEN IMPROVEMENT ASSOCIATION, INC.

P.O. BOX 404

FAIRHAVEN, MASSACHUSETTS 02719

November 5, 2021

Fairhaven Select Board
Fairhaven Town Hall
40 Center Street
Fairhaven, MA 02719

Dear Chairman Robert Espindola:

We are writing to request approval to hold the 2022 Fairhaven Homecoming Day Fair on Saturday, June 25, 2022.

This will include use of the Town Hall lawn and restrooms. We will coordinate with Fairhaven Police Department to block off Center Street, Walnut Street, William Street, and Union Street in the area of the Fair.

We will also need assistance from the Department of Public Works (or Highway Department) to set up the Art Contest area, trash collection during the day of the Fair and with general street cleaning prior to the Fair. They have been very helpful in the past with this process.

We are aware of the variabilities of the pandemic and will work with the Health Department to address issues that may arise.

Please let me know if there is anything further you need from our organization regarding this event.

Sincerely,

A handwritten signature in black ink, appearing to read "Barbara Acksen".

Barbara Acksen
Chairperson
2022 Fairhaven Homecoming Day Fair Committee

[Redacted]
[Redacted]

cc: Ms Wendy Graves Interim Town Administrator



Vicki Oliveira <vloliveira@fairhaven-ma.gov>

Banner

1 message

Frank Fostin [REDACTED] m>

Tue, Nov 16, 2021 at 8:18 PM

To: Vicki Paquette <vloliveira@fairhaven-ma.gov>

Good evening Select Board Members,

I wanted to discuss with you a little project that the Fairhaven Improvement Association is considering looking into . We have a heavy Homecoming Banner that has been hung in the front of the Town Hall for many years . This banner is hung on an old cable that was installed many many years ago . The banner also has ropes that extend from the bottom corners of the banner and are tied to the columns in front of the building . We are currently getting estimates on the cost of a new light weight mesh banner and also a new cable system to hang the new banner on with no ropes tied to the columns . The Association would like a clarification on the banner rules that were put in place by the selectmen . Not counting the last 2 years (due to Covid)the Homecoming Fair has been able to put our Homecoming Banner up for 44 years in a row . Our banner hangs 2 weeks before the Homecoming Fair takes place . Before we vote to spend the money for those improvements we would like an assurance from our Select Board that we can indeed hang our banner next year and many years to come .

Thank You for your consideration.

Frank Fostin
President - Fairhaven Improvement Association



E4

Vicki Oliveira <vloliveira@fairhaven-ma.gov>

Children Sign - 8 Chamber Street

2 messages

Vicki Oliveira <vloliveira@fairhaven-ma.gov>

Tue, Nov 9, 2021 at 10:00 AM

To: Rebecca Vento <rvento@fairhaven-ma.gov>

Cc: Laurie Cannon <laurie.cannon@fairhavenpolice.org>, David Sobral <David.Sobral@fairhavenpolice.org>

Thank you! I will consider this email as the request to remove the sign and will add this to the agenda. By way of copy, I have included the safety officer for the Fairhaven Police Department for consideration of this request.

Best Regards,

Vicki L Oliveira
Assistant to the Town Administrator
Notary Public
Records Access Officer
Town of Fairhaven
40 Center Street
Fairhaven, MA 02719
PH: (508)979-4023 EXT. 101
FAX: (508) 979-4079
Town of Fairhaven

Please be advised that the Massachusetts Secretary of State considers e-mail to be a public record, and therefore subject to public access under the Massachusetts Public Records Law, M.G.L. c.66.s.10

[Quoted text hidden]

Rebecca Vento <rvento@fairhaven-ma.gov>

Tue, Nov 9, 2021 at 9:51 AM

To: Vicki Oliveira <vloliveira@fairhaven-ma.gov>

Good morning,

I just spoke with Theresa Augenti who resides at 8 Chamber Street. She is requesting that the Children sign in front of her property at [8 Chambers Street](#) be removed as there are no children that live in this neighborhood anymore.

Let me know if you need anything else.

Becky

--

Rebecca L. Vento

BPW Office Manager

[5 Arsene Street, Fairhaven, MA 02719](#)

rvento@fairhaven-ma.gov

Phone: 508-979-4030 x112

Fax: 508-979-4086



Gmail

Vicki Oliveira <vloliveira@fairhaven-ma.gov>

8 Chambers st.

Laurie Cannon <laurie.cannon@fairhavenpolice.org>

Wed, Nov 17, 2021 at 9:00 AM

To: John Charbonneau <jcharbonneau@fairhaven-ma.gov>, Vicki Paquette <vicki@fairhaven-ma.gov>

Good morning John. I have a request to remove the children sign in front of this address. The residents say there are no more children in the area and would like to have the sign removed. Can you work on this?

Sincerely,
Officer Laurie Cannon.



FAIRHAVEN POLICE DEPARTMENT
REQUEST FOR TRAFFIC OR PARKING CONTROL

****OFFICIAL USE ONLY****

Location: 72 Main St. Fairhaven, MA. 02719 Intersection of: Main St. + Washington
Control: _____ Approval Date: _____

RECEIVED

Requested by: <u>Brian C. Meneses</u>	Location: <u>72 Main St. Fairhaven, MA 02719</u>
Address: <u>"Fairhaven Pharmacy"</u>	Intersection of: <u>Main St. + Washington St.</u>
Telephone: <u>[REDACTED]</u>	Date: <u>8/3/21</u>
Type of Control Requested: <u>Requesting 15 minute parking signs in front of building on 72 Main St. so when pharmacy is in business patients can park and this way cars can't park there all day</u>	
Reason for Request: <u>new pharmacy and access for handicap patients</u>	

****OFFICIAL USE ONLY****

Approved: _____ Investigated by: _____

Denied: _____

Investigation: SAFETY OFFICER LAURIE CANNON VIEWED THE AREA AND STATES ONE SIGN (15 MINUTE PARKING SIGN) WOULD BE SUFFICIENT DUE TO OTHER BUSINESSES IN AREA. NEW SIGN WOULD BE DIRECTLY IN FRONT OF NEW BUSINESS.

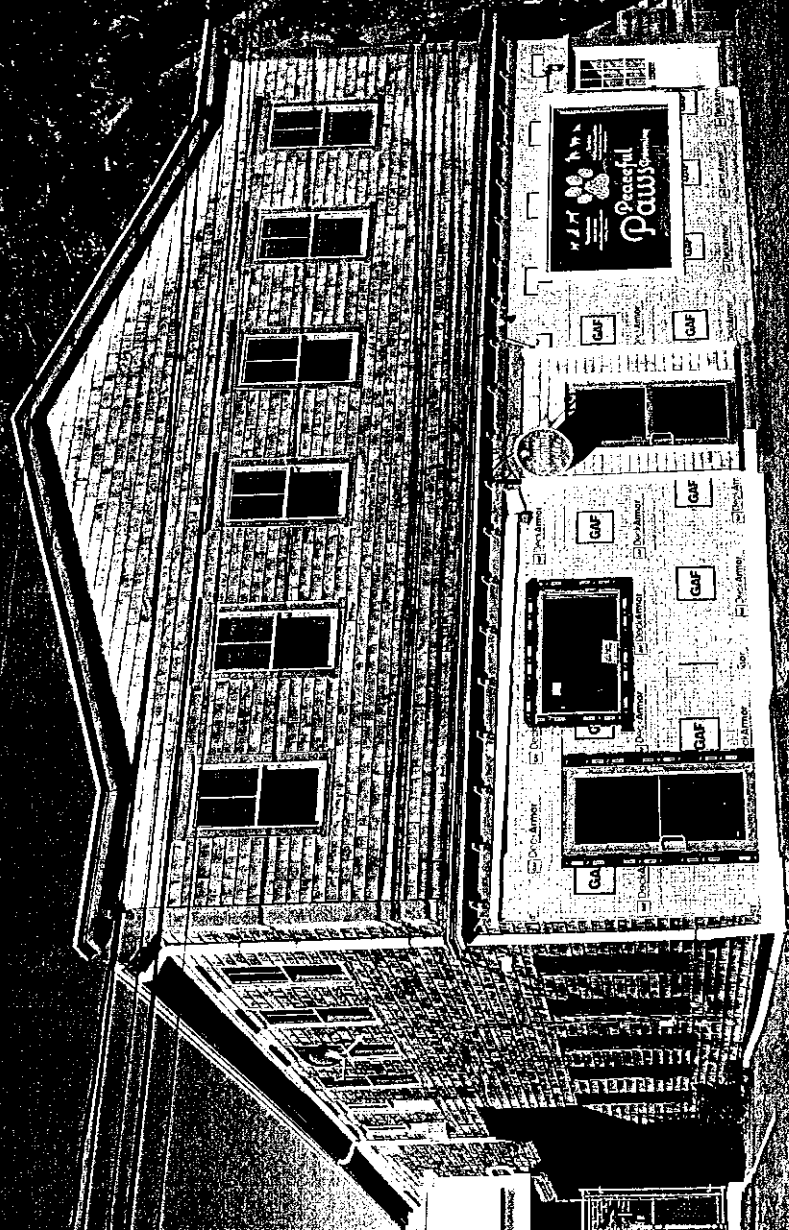
[Signature]
Police Chief

11/4/21

Approval Date

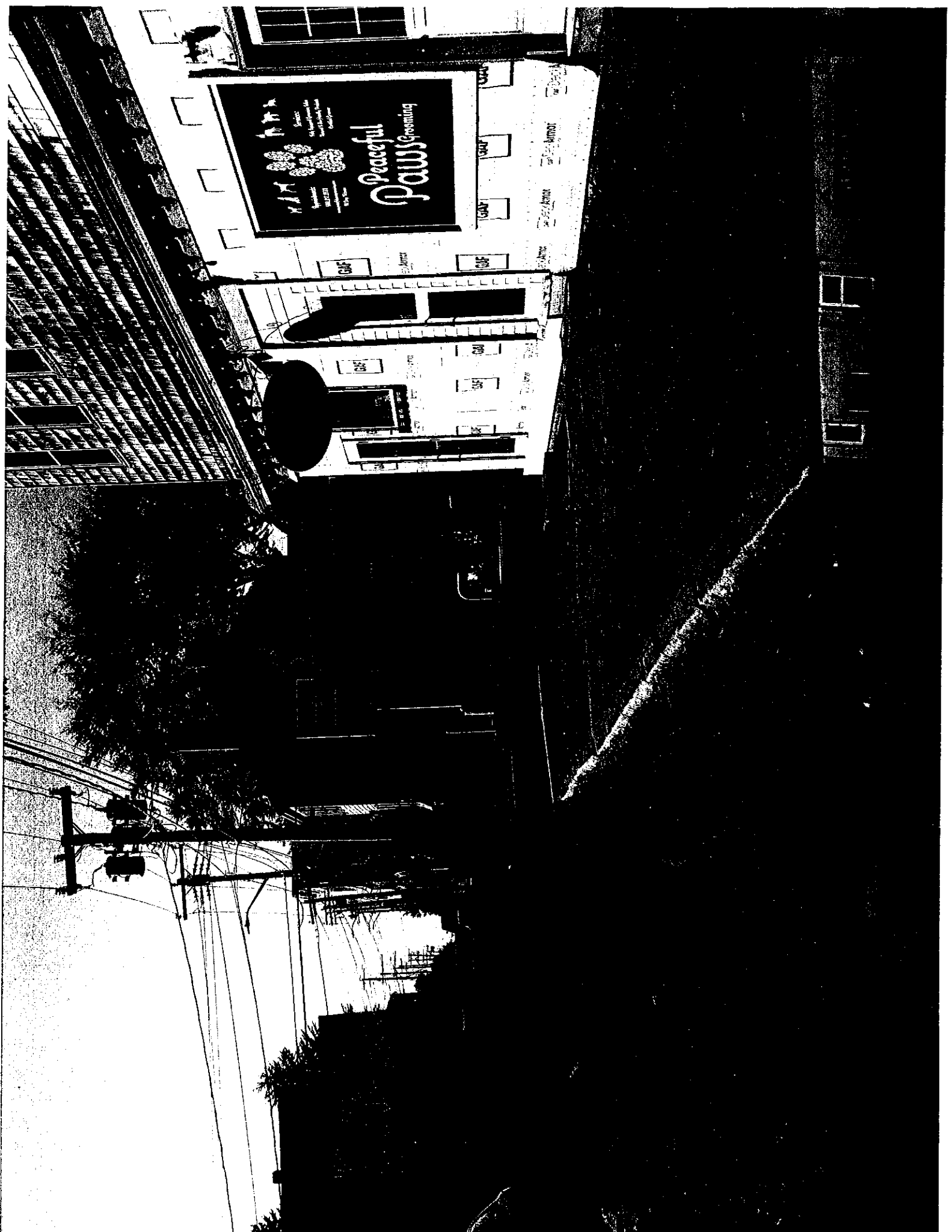
Board of Selectmen

Compliance Date



11





Forwarded message -----

From: **Mary E Aicardi** <Mary.Aicardi@umb.edu>

Date: Mon, Nov 15, 2021 at 7:38 PM

Subject: Update

To: Robert Espindola <respindola@fairhaven-ma.gov>

Cc: Mark Sylvia <msylvia@fairhaven-ma.gov>

E6

Hello,

I hope this email finds you well. I am sorry to tell you that we had two late withdrawals as we were scheduling interviews. We then conducted interviews with our remaining 5 candidates and came up with 2 to forward to the committee. We just learned that one of the two has withdrawn. I cannot imagine the Board wants a pool of one. So, here we are.

I spoke with the Chair of the committee and my recommendation is I repost the position with a short deadline, indicating the search has been extended. We can regroup with the screening committee in early December and try to have interviews in December, or worst case, the first of January.

I know this is disappointing. Trust me. I do. I am disappointed. It has been a while since the deadline and many contracts will be up in just over 6 months, so we will be sure to get a few more candidates.

Please feel free to call me this evening, or in the morning. I would like to post the position this week so we don't lose the time around the holiday. I am figuring doing this is fulfilling our charge of bringing you 2-4 candidates and it should not have to go back to the Select Board. I am happy to send this type of mem to them informing them of what we are doing. I will wait to hear from you.

Thanks

Mary

Mary Flanders Aicardi, Human Resources Practice Leader

Edward J. Collins, Jr. Center for Public Management

John W. McCormack Graduate School of Policy and Global Studies

University of Massachusetts Boston

100 Morrissey Blvd

Boston, MA 02125

Cell Phone: 508-215-8992

Fax 617-287-5566

www.umb.edu/cpm

Town Administrator planning and time sensitive responsibilities	
1	Goals & Objectives Session
2	Decide ARPA Funding
3	Town Counsel Replacement
4	Reform Wellness
5	Public Safety Facility
6	Land Swap Union Wharf
7	Boat Slip issue
8	Real Estate Matter-North Street
9	RFP's for Broadband
	A. Engineering
	B. Project Management
	C. Construction
	D. Open Access Operations
10	Special Town Meeting 2/14/22
11	DOR Audit
12	Melanson Audit
13	Set Tax Rate
14	Capital Budget
15	GF Budget
16	Hiring- COA Director and 2 Clerks

November 22, 2021

To: Selectboard Members

From: Brad Fish, VSO

We started a tradition of laying Wreaths Across Fairhaven in 2019 in association with the Fairhaven Improvement Association.

We gather with anyone who wishes to attend at Riverside Cemetery to place the wreaths in general areas throughout. Jane and myself place wreaths also in Nasketucket and Woodside Cemeteries.

We started out this tradition in a humble way and have continued even through last year during the pandemic.

We advertise that the Veterans Services Office will accept donations for the expense of purchasing the wreaths, ribbons, decals and stands. All donations are listed and sent to the Town Accountant to enter into the Veteran Wreaths Gift Account.

All donor names are read aloud at Riverside Cemetery.

This year we will gather on December 4, 2021 at 10:00 AM.

Brad Fish

WREATHS ACROSS FAIRHAVEN



THE VETERANS SERVICE
OFFICE IS NOW TAKING
DONATIONS FOR OUR
WREATH LAYING IN
OUR FAIRHAVEN
CEMETERIES ON
DECEMBER 4, 2021

PLEASE SEE BRAD OR
JANE TO DONATE BY
NOVEMBER 29, 2021



Green Communities Grant Award

Whitney McClees <wmcclees@fairhaven-ma.gov>

Wed, Nov 17, 2021 at 8:00 AM

To: Wendy Graves <wgraves@fairhaven-ma.gov>, Bob Espindola <selectmanbobespindola@gmail.com>, Stasia Powers <spowers@fairhaven-ma.gov>, Keith Silvia <ksilvia@fairhaven-ma.gov>

Cc: Vicki Paquette <vloliveira@fairhaven-ma.gov>

Good morning,

The Commonwealth notified us over the summer that Fairhaven had been awarded the \$184,956 competitive grant we applied for earlier in the year. However, making this information public was embargoed until the Department of Energy Resources had made their official announcement. I have learned that DOER has made the news public and it can be shared with the public at this time.

<https://www.mass.gov/news/baker-polito-administration-announces-almost-8-million-in-green-communities-grant-awards>

The Department of Energy Resources (DOER) Green Communities Division has approved a Competitive Grant award of one hundred eighty-four thousand nine hundred fifty-six dollars (\$184,956) to fund:

- \$73,489, High School— Transformers
- \$89,700, High School— Building controls & VFD's
- \$14,767, High School— LED lighting
- \$7,000, Town— Administrative assistance

Best,
Whitney

Whitney McClees

Conservation Agent and Sustainability Coordinator

Town of Fairhaven

[40 Center Street](#)

[Fairhaven, MA 02719](#)

508-979-4022 ext. 128

she/her/hers

Fairhaven 2021 Competitive Round Projects



March 17th, 2021



Disclaimer

This report is not for general use and is the property of Energy Source.

All savings estimates, and rebates must be considered estimated until reviewed and approved by the utility companies designated within this report.

For any questions regarding this report, please contact Rich Finn, Director of Project Development, for Energy Source, Inc. at 781-267-8495. Any additional use of this report is prohibited unless permission is given in writing from Energy Source, Inc.

ECM #1 – High Efficiency Transformers at the Fairhaven High School

Existing Condition

Fairhaven High School uses low voltage transformers to step voltage down from 480V to 120/208V. The transformer process is not 100% efficient and there are two different types of losses associated with the process; core losses and winding losses. Transformer efficiency has improved over time and high-efficiency transformers are now available with reduced losses, which can save substantial amounts of energy.

Energy Conservation Measure Details

It is recommended that (11) eleven standard efficiency transformers are replaced with Rex High Efficiency Transformers. By implementing this measure, the overall energy consumption of the transformers will decrease which will lead to annual energy cost savings.

The scope of work includes the following:

- Furnish and install eleven Rex High Efficiency Transformers
- Removal of existing Transformers

Below is a summary of existing & proposed transformer sizes/quantities:

Existing Standard Efficiency Transformers	Qty		Proposed High Efficiency Transformers	Qty
300 kVA	1		300 kVA	1
75 kVA	5		75 kVA	5
30 kVA	4		30 kVA	4
15 kVA	1		15 kVA	1

An estimated annual energy savings of 53,191 kWh can be realized from this measure; therefore, an estimated total cost savings of \$9,574 can be obtained.

Implementation

The implementation of this measure requires the purchase and installation of eleven Rex high-efficiency transformers as well as the removal of the old transformers. The installation of the transformers will require a temporary shutdown of power for affected areas. It is recommended that the project be completed during the summer months, if possible, to minimize/avoid disruptions to the school. The total material and installation cost of the transformers is shown below:

Energy Conservation Measure	Total Project Cost	Estimated Utility Incentives	Net Customer Cost	Annual Savings		Payback (yrs)
				kWh	Cost	
High Efficiency Transformers	\$84,127	\$10,638	\$73,489	53,191	\$9,574	7.7

Utility incentives of \$10,638 are estimated to be obtained as well; therefore, the adjusted customer cost is estimated at \$73,489. The simple payback is calculated as follows:

$$\text{Payback Period} = \frac{\text{Customer Cost}}{\text{Cost Savings}} = \frac{\$73,489}{\$9,574} = 7.7 \text{ years}$$

ECM #2 – Building Automation Controls & VFD's at the Fairhaven High School

Existing Condition

Fairhaven High School has an existing building automation system. However, many pieces of HVAC equipment are not tied into this system and are reliant on antiquated and poorly performing pneumatic controls. Functionality is very limited with these controls so often times equipment runs much longer than necessary and excessive energy is consumed.

Energy Conservation Measure Details

It is recommended that additional HVAC equipment is integrated into the existing building management system. This will allow for advanced scheduling, optimal start/stop, demand control ventilation, DDC temperature control, trending capabilities, remote access, as well as alert notifications. The result will be a much tighter controlled system that consumes less energy and provides valuable information for the facilities staff. Below is a listing of the proposed scope of work for this measure:

Stage & Auditorium: ACU-2&3

- A Honeywell Spyder control panel will be fabricated and programmed to operate each RTU.
- A Honeywell TR42 room sensor will be used to control the unit with local temperature adjustment.
- A VFD will be furnished and installed on the supply fan. The fan will modulate based on heat, cool, and ventilation demands.
- A CO2 sensor will be installed for demand control ventilation.
- Optimum start/stop schedules will be utilized.
- Outside air damper actuator will be converted from pneumatic to electronic.
- Existing pneumatic HW Valve will be retrofitted to electronic.

Main Office: ACU-1 + VAV Boxes (9)

- A Honeywell BACnet Spyder controller will be furnished, installed, and programmed for each terminal box.
- A hard-wired digital wall sensor with set point and temporary occupancy will be furnished and installed for each zone.
- Existing 24VAC transformers are to be reused.
- A modulating hot water valve will be furnished to replace the existing base board radiation pneumatic valve.
- A Honeywell Spyder control panel will be fabricated and programmed to operate the RTU.
- The RTU will be programmed to operate as VVT zoning.
- A VFD will be furnished and installed on the supply fan. The fan will modulate based on heat, cool, and ventilation demands.
- A CO2 sensor will be installed for demand control ventilation.
- Optimum start/stop schedules will be utilized.
- Outside air damper actuator will be converted from pneumatic to electronic.

Café H/V-3

- A Honeywell Spyder control panel will be fabricated and programmed to operate the air handling unit.
- A Honeywell TR42 room sensor will be used to control the unit with local temperature adjustment.
- A VFD will be furnished and installed on the supply fan. The fan will modulate based on heat, cool, and ventilation demands.
- A CO2 sensor will be installed for demand control ventilation.
- Optimum start/stop schedules will be utilized.
- Outside air damper actuator will be converted from pneumatic to electronic.
- Existing pneumatic baseboard HW Valve will be retrofitted to electronic.
- Existing pneumatic duct reheat HW Valve will be retrofitted to electronic.

Exhaust Fan Controls (13)

- BACnet RIB relays will be used to start/stop exhaust fans and monitor run status.
- Existing pneumatic damper actuators will be converted from pneumatic to electronic.

AHU-1 thru AHU-4 (these units are already tied to the BMS)

- A VFD will be furnished and installed on the supply fan. The fan will modulate based on heat, cool, and ventilation demands.

Implementation

The implementation of this measure requires the purchase and installation of the necessary sensors, actuators, valves, and controllers. Programming and training are also included in the scope of work. The pricing quoted is for 1st shift work so it is recommended that this project is installed over the summer. The total material and installation cost of the control system is shown below:

Energy Conservation Measure	Total Project Cost	Estimated Utility Incentives	Net Customer Cost	Annual Savings		Annual Savings		Total Cost Savings	Payback (yrs)
				kWh	Cost	Therms	Cost		
Energy Management System with VFD's	\$99,300	\$9,600	\$89,700	105,631	\$19,014	4,868	\$4,868	\$23,882	3.8

Utility incentives of \$9,600 are estimated to be obtained; therefore, the adjusted customer cost is estimated at \$89,700. The simple payback is calculated as follows:

$$\text{Payback Period} = \frac{\text{Customer Cost}}{\text{Cost Savings}} = \frac{\$89,700}{\$23,882} = 3.8 \text{ years}$$

Notes / Clarifications:

- During commissioning, any mechanical deficiencies will be documented, and repairs will be quoted as required.
- All control wiring to be installed per electrical code.
- All exposed wiring to be installed in EMT. All wiring above acoustical ceilings to be open plenum cable.
- One-year warranty on labor, materials, and workmanship.
- Point-to-point CAD control drawings will be provided.
- All work is to be during normal business hours, Monday-Friday: 7:00AM-3:30PM.

ECM #3 – LED Lighting at the Fairhaven High School

Existing Condition

Fairhaven High School has already converted most of the lighting in the building to LED's. There are, however, many 8" downlights that still utilize compact fluorescent bulbs.

Energy Conservation Measure Details

It is recommended that the 8" fluorescent downlights be retrofitted with new 8" LED downlights. These LED lights consume less energy and have an extremely long life.

Implementation

The implementation of this measure requires the purchase and installation of (106) new LED downlights. Also included is recycling of the old compact fluorescent bulbs. The total material and installation cost of the LED downlights is shown below:

Energy Conservation Measure	Total Project Cost	Estimated Utility Incentives	Net Customer Cost	Annual Savings		Payback (yrs)
				kWh	Cost	
LED Lighting	\$14,767	\$0	\$14,767	17,384	\$3,129	4.7

There is currently an upstream rebate available for the proposed LED downlights of \$15 per fixture. This rebate has been factored into the above pricing and the net customer cost is \$14,467. The simple payback is calculated as follows:

$$\text{Payback Period} = \frac{\text{Customer Cost}}{\text{Cost Savings}} = \frac{\$14,767}{\$3,129} = 4.7 \text{ years}$$



Installation and Warranty Information

If you decide to proceed with this proposal, Energy Source will be responsible for the following tasks:

- Develop final equipment specifications and equipment layout
- Processing and filing of applications for utility incentives
- Material ordering and receiving
- Dismantling and removing existing systems from premises
- Construction
- Final walk-through with you
- Development and delivery of comprehensive project completion manual.

Installation

All installation staff will agree to submit to a CORI check before proceeding with project.

The removal and disposal of asbestos and toxic materials if present are the owner's responsibility and should be determined before proceeding with the project.

Warranty

Included with your project is a one-year warranty on all labor and materials provided by Energy Source. At the end of the first-year materials remain covered by standard warranties provided by their manufacturers. Warranty periods begin when the installation is completed. The owner has a one-month period following the completion of the installation to accept or reject work performed by Energy Source, after which time we will assume that the work has been accepted.



Commonwealth of Massachusetts

F2b

DEPARTMENT OF HOUSING &
COMMUNITY DEVELOPMENT

Charles D. Baker, Governor ♦ Karyn E. Polito Lt. Governor ♦ Jennifer D. Maddox, Undersecretary

October 1, 2021

Ms. Wendy Graves
Interim Town Administrator, Town of Fairhaven
40 Center Street
Fairhaven, MA 02719

Dear Ms. Graves:

RE: Fairhaven 997 Application

Thank you for submitting this application to the FY2022 Community One Stop for Growth. The three One Stop partner agencies worked together to carefully review and evaluate all eligible applications and recommended the most ready and highest-impact projects for a grant. Your application was reviewed by the program(s) that could best serve the project's funding needs.

On behalf of the Baker-Polito Administration, I am pleased to inform you that a grant in the amount of **\$75,000.00** from the **Community Planning** grant program has been approved. Congratulations on being one of the successful applicants.

This award is contingent the execution of a grant contract between the Town of Fairhaven and the Department of Housing and Community Development DHCD and the satisfaction of its special conditions and requirements. We will send the grant contract to the contact person identified in your application. We will also send grant administration and contract requirement guidance to highlight contractual and regulatory obligations before proceeding with activities authorized for grant funding. If you have any questions, please contact Chris Kluchman, FAICP, Acting Director at Chris.Kluchman@mass.gov, and Filipe Zamborlini, Community Grants Coordinator at Filipe.Zamborlini@mass.gov.

Finally, please note that public announcement of this award is embargoed until the Administration has had the opportunity to formally announce it through a local event and/or media release. Please refrain from sharing or publicizing news about this award outside of your organization until it is officially announced.

Congratulations once again. We look forward to working with you to address the Town of Fairhaven's housing and community development needs.

Sincerely, .

Jennifer D. Maddox
Undersecretary, DHCD



Wendy Graves <wgraves@fairhaven-ma.gov>

Fwd: Community Planning Grant Embargo Lifted

1 message

Paul Foley <pfoley@fairhaven-ma.gov>

Thu, Nov 18, 2021 at 1:59 PM

To: Wendy Graves <wgraves@fairhaven-ma.gov>

Wendy,

Please find attached the award letter and below is the email lifting the embargo on announcing it.

Let me know if you need anything else.

Thanks,

Paul

Paul H. Foley, AICP

Director of Planning & Economic Development

Fairhaven, Massachusetts

Town Hall, 40 Center Street

(508) 979-4082 EXT. 122

----- Forwarded message -----

From: **Zamborlini, Filipe (OCD)** <Filipe.Zamborlini@mass.gov>

Date: Mon, Oct 25, 2021 at 3:37 PM

Subject: Community Planning Grant Embargo Lifted

To: Zamborlini, Filipe (OCD) <filipe.zamborlini@state.ma.us>

Cc: Kluchman, Chris (OCD) <chris.kluchman@state.ma.us>

Dear Community Planning Grantees,

The Community Planning Grant Program has been publicly announced today. **The embargo in place until this announcement is lifted effective immediately for the Community Planning Grant Program.** Please let us know if you have any questions. Please find a press release including the announcement here: Baker-Polito Administration Announces Over \$66 Million in MassWorks Funding | Mass.gov.

Best,

Filipe

Filipe Zamborlini

Community Grants Coordinator, Community Services Division

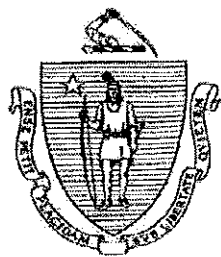
Department of Housing and Community Development (DHCD)

100 Cambridge Street, Suite 300

Boston, MA 02114

filipe.zamborlini@mass.gov

Please note: DHCD staff are working remotely, I check email frequently and will respond as soon as possible.



OFFICE OF THE GOVERNOR
COMMONWEALTH OF MASSACHUSETTS
STATE HOUSE • BOSTON, MA 02133
(617) 725-4000

CHARLES D. BAKER
GOVERNOR

KARYN E. POLITO
LIEUTENANT GOVERNOR

November 15, 2021

Dear Ms. Wendy Graves,

Congratulations! I am pleased to notify you that the Town of Fairhaven has been awarded a Recycling Dividends Program grant of \$11,000 through the Sustainable Materials Recovery Program. I want to thank you for your commitment to reducing waste and increasing recycling for the benefit of our communities and the environment.

Enclosed you will find further instructions from the Department of Environmental Protection on next steps. Please feel free to contact Wilfred Mbah if you have any questions.

Governor Charles D. Baker

A handwritten signature in cursive script, reading "Charles Baker".

Lt. Governor Karyn E. Polito

A handwritten signature in cursive script, reading "Karyn E. Polito".



Commonwealth of Massachusetts
Executive Office of Energy & Environmental Affairs

Department of Environmental Protection

One Winter Street Boston, MA 02108 • 617-292-5500

Charles D. Baker
Governor

Karyn E. Polito
Lieutenant Governor

Kathleen A. Theoharides
Secretary

Martin Suuberg
Commissioner

November 15, 2021

Wendy Graves
Interim Town Administrator
Town of Fairhaven
40 Center Street
Fairhaven, MA 02719

Dear Ms. Graves,

Congratulations! It is my pleasure to inform you that the Massachusetts Department of Environmental Protection (MassDEP) has awarded the Town of Fairhaven Recycling Dividends Program funds under the Sustainable Materials Recovery Program. The Town of Fairhaven has earned 10 points and will receive \$11,000.

The Sustainable Materials Recovery Program (SMRP) was created under 310 CMR 19.300-303 and the Green Communities Act, which directs a portion of the proceeds from the sale of Waste Energy Certificates to recycling programs approved by MassDEP. The Recycling Dividends Program (RDP) provides payments to municipalities that have implemented specific programs and policies proven to maximize reuse, recycling, and waste reduction. We are awarding over \$3.1 million in RDP payments to 226 municipalities in this round of funding. The next application for SMRP funding will be released in April 2022.

Recycling programs play a vital role in limiting our dependence on landfills and incinerators, reducing greenhouse gas emissions and supporting economic activity in the Commonwealth. Recycling Dividend Program funds foster investment in local programs including recycling equipment, organics diversion, outreach and education, pilot programs, school recycling, toxics reduction and more. MassDEP has invested in developing nationally recognized tools to assist municipalities with reducing recycling contamination and improving public awareness of smart recycling practices. We encourage you to utilize the Recycling IQ Kit and Recycle Smart MA website and to consult with your MassDEP Municipal Assistance Coordinator for assistance in implementing these best practices.

To accept your Recycling Dividends Program (RDP) award, please sign and return the attached RDP Contract via email before January 15, 2022. After we receive your signed contract, funds will be sent to your community. Should you have any questions, please email Wilfred Mbah at Wilfred.Mbah@mass.gov.

The increased challenge of maintaining our vital solid waste and recycling programs during a pandemic underscores the critical role of local government in keeping our communities safe and clean. Thank you for your continued commitment to recycling and waste reduction in Massachusetts.

Sincerely,

Martin Suuberg
Commissioner

cc: **Vincent Furtado, Public Health Superintendent**



Town of Fairhaven
Massachusetts
Office of the Town Administrator
40 Center Street
Fairhaven, MA 02719
Tel: (508) 979-4023
selectboard@Fairhaven-MA.gov

MEMO

Date: November 22, 2021
From: Office of the Town Administrator/ Select Board
To: Town Departments/ Residents
Re: 2021 Town Report Cover Photos

The Fairhaven Select Board is calling for photo submissions for the 2021 Annual Town Report. Please send your digital photos to Selectboard@Fairhaven-MA.gov. No more than three submissions per person, please. Deadline is Monday, January 3, 2022.

Sincerely,

Vicki L. Oliveira
Assistant to the Town Administrator