

**BOARD OF TRUSTEES
VILLAGE OF WARWICK
JUNE 2, 2025
AGENDA**

**LOCATION:
VILLAGE HALL
77 MAIN STREET, WARWICK, NY
7:30 P.M.**

**Call to Order
Pledge of Allegiance
Roll Call**

1. Introduction by Mayor Newhard.
2. Acceptance of Minutes: May 19, 2025

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____

Trustee McKnight ____ Mayor Newhard ____

3. Authorization to Pay all Approved and Audited Claims in the amount of
\$_____.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____

Trustee McKnight ____ Mayor Newhard ____

Announcements

1. Village of Warwick Tax Collection begins June 1, 2025. Residents can pay their village taxes without penalty through July 1, 2025. Tax bills can be viewed & paid online at www.villageofwarwickny.gov or paid by mail or in person at Village Hall, Monday – Friday from 8:30 a.m. – 4:00 p.m.

Correspondence

1. Updated Village of Warwick Chemical Bid Recommendation chart for FY2025-26 from H2O Innovation Senior Area Manager, Michael Herbert detailing the correct proposal rates for Slack Chemical and Coyne Chemical. The revisions do not affect the bid awards granted on May 19, 2025.

Public Comment - Agenda Items Only

GUIDELINES FOR PUBLIC COMMENT

The public may speak only during the meeting's Public Comment period and at any other time a majority of the Board allows. Speakers must be recognized by the presiding officer, step to the front of the room/microphone, give their name, residency, and organization, if any. Speakers must limit their remarks to three minutes (this time limit may be changed to accommodate the number of speakers) and may not yield any remaining time they may have to another speaker. Board members may, with the permission of the mayor, interrupt a speaker during their remarks, but only for the purpose of clarification or information. The Village Board is not required to accept or respond to questions from the public at meetings but may request that inquiries be submitted in writing to be responded to at a later date. All remarks must be addressed to the Board as a body and not to individual Board members. Interested parties or their representatives may also address the Board by written communications.

Motions

Trustee Cheney's Motions

1. **MOTION** to approve payment #3 in the amount of \$305,928.37 to TAM Enterprises, Inc. for the Relocation of the Maple Avenue Booster Station Project as per the recommendation of Village Engineer, Barton & Loguidice. Funds are appropriated in budget code H8320.2000.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____
Trustee McKnight ____ Mayor Newhard ____

2. **MOTION** to add one (1) additional Intern (seasonal) position to the Village of Warwick Civil Service position control and authorize the Mayor to sign form MSD-222 in accordance with Orange County Civil Service requirements.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____
Trustee McKnight ____ Mayor Newhard ____

3. **FY-2026 ORANGE URBAN COUNTY CONSORTIUM COMMUNITY DEVELOPMENT PROGRAM GOVERNING BODY AUTHORIZING RESOLUTION –**
(Project Name)

The Village of Warwick is hereby submitting its Application for consideration under the FY-2026 Orange CDBG Urban County Consortium Community Development Program and the chief elected official or executive officer is hereby authorized to submit this Application for _____ (Project Name) as described in the proposal. Input from citizens and groups has been received and considered and an application has been prepared which addresses their community concerns. They further certify that they have read and understood the Orange CDBG Urban County Consortium Community Development Guidelines for the FY-2026 program year and have met all of its applicable requirements and that the information contained in the Application is accurate and true to the best of their knowledge. If awarded CDBG funds, the Municipality shall implement the activities in a manner to ensure compliance with all applicable federal, state, and local laws and regulations.

_____ presented the foregoing resolution which was
seconded by _____,

The vote on the foregoing resolution was as follows:

Barry Cheney, Trustee, voting _____
Carly Foster, Trustee, voting _____
Thomas McKnight, Trustee, voting _____
Mary Collura, Trustee, voting _____
Michael Newhard, Mayor, voting _____

4. **MOTION** to grant permission to the Warwick Fire Department to use Veterans Memorial Park to hold their annual carnival per their letter dated May 1, 2025. Set up to begin on Sunday, June 22, 2025, and breakdown will be completed by Monday, June 30, 2025. The carnival will be open to the public from 6:00 p.m. to 10:00 p.m. Wednesday, June 25, 2025, through Friday, June 27, 2025, and from 6:00 p.m. to 11:00 p.m. on Saturday, June 28, 2025. Fireworks are scheduled for Saturday, June 28, 2025, with a rain date of Sunday, June 29, 2025. Request includes use of alcohol in the park. Completed park permit, approval of event details, traffic and parking plans from DPW Supervisor, Mike Moser, and proof of insurance and Host Liquor Liability have been received. The carnival set up must be in coordination with DPW Supervisor, Michael Moser. Approval pending receipt of the Warwick Fire Department carnival exclusion endorsement from their insurance carrier. Approval is also pending execution of amended contracts between the Village of Warwick and July 4 Ever Fireworks Inc. and the Warwick Fire Department and July 4 Ever Fireworks Inc. with the advice of the Village Attorney. Once received and approved by the Village Attorney, the Mayor is authorized to sign the same.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____

Trustee McKnight ____ Mayor Newhard ____

5. **MOTION** to hire Ronald Clum, CPA to prepare the Village of Warwick's Annual Financial Report (AFR) with staff assistance in providing and locating the necessary back-up documentation in order to file the AFR with the New York State Comptroller's Office for the year ended May 31, 2025, and to authorize the mayor to sign the engagement letter dated May 12, 2025. Funds are appropriated in FY25-26 budget code A1320.4005.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____

Trustee McKnight ____ Mayor Newhard ____

Trustee McKnight's Motions

6. **MOTION** to transfer \$250,000 from General Fund to Infrastructure Reserve Account as per the FY2024-2025 Adopted Budget per the Village Treasurer's memo dated May 27, 2025.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____

Trustee McKnight ____ Mayor Newhard ____

7. **MOTION** to transfer \$54,473.93 from Equipment Reserve to General Fund as per the FY2024-2025 Adopted Budget for the purchase of a pressure washer and Bobcat equipment per the Village Treasurer's memo dated May 27, 2025.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____

Trustee McKnight ____ Mayor Newhard ____

8. **MOTION** to transfer \$33,790.94 from Money in Lieu of Parks to General Fund as per the FY2024-2025 Adopted Budget for the Dog Park and Kayak Project per the Village Treasurer's memo dated May 27, 2025.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____

Trustee McKnight ____ Mayor Newhard ____

9. **MOTION** to grant permission to the Town of Warwick Police Department to use Veterans Memorial Park for National Night Out 2025 on Tuesday, August 5, 2025, from 3:00 p.m. to 11:00 p.m. Request includes use of the Veterans Memorial Park Pavilion, including pavilion lights, use of electricity, restrooms, sound system, and the presence of food trucks. Completed park permit has been received. Approval is pending NYMIR's confirmation of acceptable insurance coverage and receipt of proper insurance from participating food trucks.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____

Trustee McKnight ____ Mayor Newhard ____

10. **MOTION** to grant permission to Wickham Works to host a 'Strawberry Picnic Potluck' in the pavilion at Stanley Deming Park on Saturday, June 21, 2025 from 1:00 p.m. to 3:00 p.m., with setup to begin at 11:00 a.m. and breakdown to be completed by 4:00 p.m. Permission includes the use of the pavilion area, restrooms, portable speakers, and tents. Village of Warwick DPW to provide: five (5) eight foot tables, forty (40) chairs, two (2) garbage cans and one (1) recycling can. Completed park permit, proof of insurance, and security deposit have been received.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____

Trustee McKnight ____ Mayor Newhard ____

Public Comment – *Non-Agenda Items*

Final Comments from the Board

Executive Session, if applicable

Adjournment

**BOARD OF TRUSTEES
VILLAGE OF WARWICK
JUNE 2, 2025
ADDENDUM NO. 1**

11. **MOTION** to approve the Application for Corrected Village Tax Roll for the Year 2025 for FY2025-26 tax bill # 2402, for 7 Cowdrey Street, Warwick, NY 10990, SBL 232-8-1.-1, due to clerical error, per the request of Village Assessor, Deborah Eurich.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____
Trustee McKnight ____ Mayor Newhard ____

12. **MOTION** to approve the Application for Corrected Village Tax Roll for the Year 2025 for FY2025-26 tax bill # 805, for 12 Howe Street, Warwick, NY 10990, SBL 210-14-7, due to clerical error, per the request of Village Assessor, Deborah Eurich.

The vote on the foregoing **motion** was as follows:

Trustee Cheney ____ Trustee Foster ____ Trustee Collura ____
Trustee McKnight ____ Mayor Newhard ____

77 Main Street
Post Office Box 369
Warwick, NY 10990
www.villageofwarwick.org



(845) 986-2031
FAX (845) 986-6884
mayor@villageofwarwick.org
clerk@villageofwarwick.org

VILLAGE OF WARWICK

INCORPORATED 1867

LEGAL NOTICE PUBLICATION OF NOTICE OF COLLECTION OF TAXES REAL PROPERTY TAX LAW SEC. 1428

NOTICE IS HEREBY GIVEN that the fiscal year 2025-2026 Village of Warwick tax roll and warrant have been delivered to the Village of Warwick for the collection of taxes levied on such roll. **The Village of Warwick tax payment schedule is as follows:**

- **June 1 – July 1, no penalty.**
- July 2 – July 31, 5% penalty;
- August 1 – August 31, 6% penalty;
- September 1 – September 30, 7% penalty;
- October 1 – October 31, 8% penalty.
- After these dates, Village taxes are payable to the Orange County Commissioner of Finance in Goshen, NY from Nov. 1 through Nov. 15. Unpaid taxes after November 15 will be re-levied onto the January County/Town tax bill.

Payment Methods:

- Online at www.villageofwarwick.org (fees apply)
- By mail: Village of Warwick, Attn: Village Clerk, P.O. Box 369, Warwick, NY 10990
- Secure night drop: Located on the front of Village Hall, 77 Main Street, Warwick, NY.
- In person: Village Hall, 77 Main Street, Warwick, NY 10990 Monday through Friday, excluding holidays, between the hours of 8:30 a.m. and 4:00 p.m.

**RAINA ABRAMSON
VILLAGE CLERK
VILLAGE OF WARWICK, NEW YORK**

Dated: May 23, 2025


VILLAGE OF WARWICK CHEMICAL BIDS & RECOMMENDATIONS								
PLEASE ACCEPT THIS SPREADSHEET AS MY FORMAL RECOMMENDATIONS FOR THE FISCAL YEAR: 2025 / 2026 Michael Herbert (DATED & SUBMITTED 4/1/2025 - RESUBMITTED 5/21/25)								
Recommended								
FACILITY	CHEMICAL	PVS Mini Bulk Inc.	WECHSLER	TMB THORNTON, MUSSO & BELLEMIN	SLACK	CLEAN WATERS	AMREX	COYNE
RWTP WWTP	PACI				6.49			
RWTP	SODIUM HYPOCHLORITE (LIQUID 12.5%) GALLON	3.69	3.24		6.99		2.65	
RWTP / WWTP	SODIUM HYDROXIDE (CAUSTIC BEADS) POUNDS				1.034			1.0971
MWTP	SODIUM HYDROXIDE (LIQUID CAUSTIC 25%) GALLON				2.479			6.7551
WWTP	SODIUM BISULFITE 38% GALLON				3.79		2.97	
RWTP	SODIUM PERMANGANATE (LIQUID 20%) GALLON				13.49			15.01
MWTP	CITRIC ACID (LIQUID 50%) GALLON				12.44			12.5
RWTP / MWTP	BLENDED ORTHO PHOSPHATE GALLON				13.28			12.05
WWTP	CHARGE PACK 282 POLYMER (LIQUID)					24.54		
WWTP	POTASSIUM PERMANGANATE POUNDS				4.99			2.64
CONTACT FOR ORDERING ----->		N/A	GREG TAYLOR 845-794-9600	JAMES COVINGTON 225-485-2390	TRAVIS RUMBLE 315-778-1245	STEVE WARDELL 315-778-5218	SALES OFFICE 607- 772-8784	KEVIN BRASSARD 215-785-3000

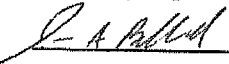
Contractor's Application for Payment

Owner:	Village of Warwick	Owner's Project No.:	1334.019.001
Engineer:	Barton & Loguidice	Engineer's Project No.:	1334.019.001
Contractor:	TAM Enterprises Inc	Contractor's Project No.:	2448
Project:	The Relocation of Maple Ave Booster Pump Station		
Contract:			
Application No.:	3	Application Date:	4/30/2025
Application Period:	From 4/1/2025	to	4/30/2025

1. Original Contract Price	\$ 1,060,000.00
2. Net change by Change Orders	\$ -
3. Current Contract Price (Line 1 + Line 2)	\$ 1,060,000.00
4. Total Work completed and materials stored to date (Sum of Column G Lump Sum Total and Column J Unit Price Total)	\$ 369,417.91
5. Retainage	
a. 5% X \$ 369,417.91 Work Completed =	\$ 18,470.90
b. 5% X \$ - Stored Materials =	\$ -
c. Total Retainage (Line 5.a + Line 5.b)	\$ 18,470.90
6. Amount eligible to date (Line 4 - Line 5.c)	\$ 350,947.01
7. Less previous payments (Line 6 from prior application)	\$ 45,018.64
8. Amount due this application	\$ 305,928.37
9. Balance to finish, including retainage (Line 3 - Line 4 + Line 5.c)	\$ 709,052.99

Contractor's Certification
The undersigned Contractor certifies, to the best of its knowledge, the following:
(1) All previous progress payments received from Owner on account of Work done under the Contract have been applied on account to discharge Contractor's legitimate obligations incurred in connection with the Work covered by prior Applications for Payment;
(2) Title to all Work, materials and equipment incorporated in said Work, or otherwise listed in or covered by this Application for Payment, will pass to Owner at time of payment free and clear of all liens, security interests, and encumbrances (except such as are covered by a bond acceptable to Owner indemnifying Owner against any such liens, security interest, or encumbrances); and
(3) All the Work covered by this Application for Payment is in accordance with the Contract Documents and is not defective.

Contractor: TAM Enterprises Inc - Brian Cutler, VP	
Signature: 	Date: 5/7/25

Recommended by Engineer By:  Title: Sr. Associate Date: 5/15/2025	Approved by Owner By: _____ Title: _____ Date: _____
Approved by Funding Agency By: _____ Title: _____ Date: _____	By: _____ Title: _____ Date: _____

Progress Estimate - Lump Sum Work

Contractor's Application for Payment

Owner: Village of Warwick
 Engineer: Barton & Loguidice
 Contractor: TAM Enterprises Inc
 Project: The Relocation of Maple Ave Booster Pump Station
 Contract:

Owner's Project No.: 1334.019.001
 Engineer's Project No.: 1334.019.001
 Contractor's Project No.: 2448

Application No.: 3 Application Period: From 04/01/25 to 04/30/25 Application Date: 04/30/25

A	B	C	D	E	F	G	H	I
Item No.	Description	Scheduled Value (\$)	Work Completed (D + E) From Previous Application (\$)	This Period (\$)	Materials Currently Stored (not in D or E) (\$)	Work Completed and Materials Stored to Date (D + E + F) (\$)	% of Scheduled Value (G / C) (%)	Balance to Finish (C - G) (\$)
Original Contract								
1	Bonds and Insurance	\$27,000.00	27,000.00	-	-	27,000.00	100%	\$0.00
2	Submittals	\$50,000.00	-	25,000.00	-	25,000.00	50%	\$25,000.00
3	Mobilization / Demobilization	\$28,425.55	14,212.78	-	-	14,212.78	50%	\$14,212.77
4	Grand St. Site Preparation	\$17,643.01	6,175.26	-	-	6,175.26	35%	\$11,468.35
5	Maple Ave. Booster Station Site preparation.	\$14,184.60	-	-	-	-	0%	\$14,184.60
6	Gas excavation from main to meter	\$12,067.16	-	-	-	-	0%	\$12,067.16
7	Sidewalk Prep and Installation	\$15,000.00	-	-	-	-	0%	\$15,000.00
8	C103 Assemble New Header on site, Cut In New Header, New water service across the road	\$17,431.45	-	-	-	-	0%	\$17,431.45
9	C103 Water install Dual 8" Dip to USEMCO	\$37,437.16	-	-	-	-	0%	\$37,437.16
10	C103 Proposed Drywell + 561 SDR35, Drainage installation	\$8,346.54	-	-	-	-	0%	\$8,346.54
11	Excavate, Prep Backfill for Foundation for USEMCO Building	\$14,523.08	-	-	-	-	0%	\$14,523.08
12	Foundation and Pour Stair pads SUB	\$35,000.00	-	-	-	-	0%	\$35,000.00
13	Set and complete USEMCO Building (Payment Schedule to be 50 % to be paid after approval of Submittal, 45% to be paid after successful start up with 5% retainage.)	\$490,731.70	-	245,365.85	-	245,365.85	50%	\$245,365.85
14	Strip Top Soil, Prep for Paving	\$11,999.62	-	-	-	-	0%	\$11,999.62
15	C103 Pave New Driveway	\$35,843.50	-	-	-	-	0%	\$35,843.50
16	Excavation and Backfill of PRV Valve Vault	\$16,038.00	-	-	-	-	0%	\$16,038.00
17	Installation of PRV Valve Vault, Pipe Fittings, Restoration	\$103,328.03	-	51,664.02	-	51,664.02	50%	\$51,664.01
18	Start up and testing	\$20,000.00	-	-	-	-	0%	\$20,000.00
19	Punch List Items	\$15,000.00	-	-	-	-	0%	\$15,000.00
20	Traffic and Safety	\$15,000.00	-	-	-	-	0%	\$15,000.00
21	General Field order Allowance	\$75,000.00	-	-	-	-	0%	\$75,000.00
Original Contract Totals		\$ 1,060,000.00	\$ 47,388.04	\$ 322,029.87	\$ -	\$ 369,417.91	35%	\$690,582.09
Change Orders								

Lump Sum

EICDC C-620 Contractor's Application for Payment
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Progress Estimate - Lump Sum Work

Contractor's Application for Payment

Owner:	Village of Warwick	Owner's Project No.:	1334.019.001
Engineer:	Barton & Loguidice	Engineer's Project No.:	1334.019.001
Contractor:	TAM Enterprises Inc	Contractor's Project No.:	2448
Project:	The Relocation of Maple Ave Booster Pump Station		
Contract:			

Application No.: 3 Application Period: From 04/01/25 to 04/30/25 Application Date: 04/30/25

A	B	C	D	E	F	G	H	I
Item No.	Description	Scheduled Value (\$)	Work Completed		Materials Currently Stored (not in D or E) (\$)	Work Completed and Materials Stored to Date (D + E + F) (\$)	% of Scheduled Value (G / C) (%)	Balance to Finish (C - G) (\$)
			(D + E) From Previous Application (\$)	This Period (\$)				
Change Order Totals		\$ -	\$ -	\$ -	\$ -	\$ -		\$ -
Original Contract and Change Orders								
Project Totals		\$ 1,060,000.00	\$ 47,388.04	\$ 322,029.87	\$ -	\$ 369,417.91	35%	\$ 690,582.09

SECTION 01 29 00.10

LIEN WAIVER AND RELEASE

WHEREAS, TAM Enterprises Inc hereafter called the "Undersigned," having entered into a written contract or purchase order with the Village of Warwick, hereafter call the "Owner", for the supplying of materials and/or the furnishing of labor and materials, or the furnishing of labor only for the project known as the Relocation of Maple Avenue Water Booster Station.

WHEREAS, Undersigned has requisitioned a PARTIAL/FINAL payment from the Owner pursuant to such contract or purchase order.

NOW, THEREFORE, for good and valuable consideration including the PARTIAL/FINAL payment of \$305,928.37 provided for herein, Undersigned agrees as follows:

- 1) Upon receiving payment from the Owner, the payment to which this instrument refers, Undersigned agrees not in any way to claim or file a mechanic's lien or other lien against said project, premises or any part thereof, or on the monies or other consideration due to become due for the Owner for any of the materials heretofore furnished or work or labor performed or furnished by the Undersigned. Further, the Undersigned hereby formally and irrevocably releases and waives in writing every and any lien, charges or claim of any nature whatsoever that it has, or as to which it may at any time have been entitled, up to and including the date hereof in connection with the said project, except for any unpaid retained monies unless the payment herein is payment of retainage, which lien waiver shall be for the benefit of the Owner of the Project.
- 2) The Undersigned further says that all monies due for this work which includes all labor, material, fuel, transportation and equipment, fringe benefits, pension funds, apprentice training programs, employee vacations, welfare funds, and similar funds and payments as well as all applicable sales and used taxes, royalties, commissions, permits, bonds, guarantees, insurances, licenses, or patent fees have been paid in full except as noted below. (If none write "NONE").

None

And that there are no persons in a position to have or file a lien against the above mentioned work and/or the premises on which the same is located on account of any labor or materials furnished to Undersigned or any of the Undersigned's subcontractors or suppliers.

- 3) Undersigned agrees that the lien waiver appearing in Paragraph "1" hereof shall be deemed to be in compliance with the Lien Law of the State of New York.
- 4) Undersigned agrees that any of its subcontractors or suppliers being entitled to any of the proceeds of the within payments have been paid except as noted below. (If none write "NONE").

None

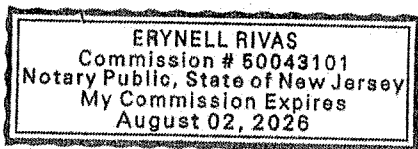
- 5) Furthermore, Undersigned hereby formally and irrevocably releases and waives any rights to make a claim upon any labor and material payment bond issued to the Owner, for this project on account of the labor, services, materials, fixtures or supplies heretofore furnished to this date by the Undersigned for the said project.
- 6) Furthermore, Undersigned hereby formally and irrevocably releases the Owner from all claims of liability, loss or damage to the Undersigned except as noted otherwise herein for anything furnished or performed in connection with, relating to or arising out of the contract or out of the work covered by said contract, including, but not limited to, all claims for extra work, labor or materials, delays or increased costs due to changed conditions, loss of efficiency or productivity, non-sequential work operations, delays, acceleration, suspension of work, and for any prior act, neglect or default on the part of the Owner, or any of its officers, agents or employees in connection therewith, up to and including the date of this waiver, except for any unpaid retained monies.
- 7) The Undersigned further acknowledges that neither the aforesaid payment nor acceptances by the Owner, of the work covered by the aforementioned contract and/or purchase order shall in any way or manner operate as, or constitute a release or waiver of the Undersigned's obligations, undertaking or liabilities under said contract or purchase order or in any way affect or limit the same.

This Agreement shall run to the benefit of the Owner, its successors and assigns; signed and dated this 7th day of May, 2025.

AMOUNT OF THIS

PARTIAL FINAL PAYMENT:

\$ \$305,928.37



Brian Cutler

Office/Authorized Signature

Brian Cutler / V.P.

Printed Name and Title

Sworn to before me this 7th day of May, 2025.

[Signature]

Notary Public

END OF SECTION



DEPARTMENT OF HUMAN RESOURCES

Alison Tyack
Deputy Commissioner

Langdon C. Chapman
Commissioner

Tamara Hunter
Deputy Commissioner

Steven M. Neuhaus
County Executive

255 Main St.
Goshen, NY 10924
TEL: (845) 291-2707 FAX: (845) 378-2373
www.orangecountygov.com

May 23, 2025

Mr. Michael Newhard
Village of Warwick
77 Main Street
PO Box 369
Warwick, NY 10990

Dear Mr. Newhard:

The Orange County Department of Human Resources has reviewed the duties statement submitted by the Village of Warwick. Based on the information contained in the duties statement, effective May 23, 2025, one (1) Intern (seasonal) position (#07672) has been created and allocated to the Non-Competitive class.

To record an appointment into this position, please submit a Personnel Change Form (MSD-426B) and employment applications to this office for review and approval.

Enclosed is a copy of the duties statement for your records. Should you have any questions, please do not hesitate to call me at 291-2714 or by e-mail at dcross@orangecountygov.com.

Sincerely,

Denise Cross
Director of Personnel Management

Enclosure

AN EQUAL OPPORTUNITY EMPLOYER

Civil Service Law, Section 22: Certification for positions. Before any new position in the service of a civil division shall be created or any existing position in such service shall be reclassified, the proposal therefore, including a statement of the duties of the position, shall be referred to the municipal commission having jurisdiction and such commission shall furnish a certificate stating the appropriate civil service title for the proposed position or the position to be reclassified. Any such new position shall be created or any such existing position reclassified only with the title approved and certified by the commission. Effective 1978

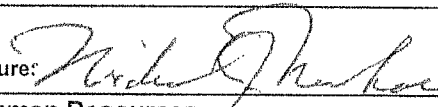
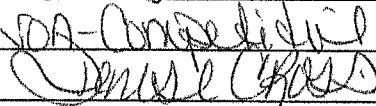
**Orange County Department of Human Resources
County Government Center, Goshen, NY 10924
New Position Duties Statement**

Department head or other authority requesting the creation of a new position, prepare a separate description for each new position to be created except that one description may cover two or more identical positions in the same organizational unit.
Forward one typed copy to this Department.

- | | | |
|---|--|-----------------------------|
| 1. Department | Bureau, Division, Unit or Section | Location of Position |
| Village of Warwick, 77 Main Street, Warwick, NY 10990 | | |
- 2. Description of Duties:** Describe the work in sufficient detail to give a clear word picture of the job. Use a separate paragraph for each kind of work and describe the more important or time-consuming duties first. In the left column, estimate how the total working time is divided.

Percent of Work Time	Job Duties
100%	<p>Class Title: Intern (Seasonal) Title #: 1345</p> <p>The work involves responsibility for providing research projects. Work is carried out in accordance with established policies and procedures and involves the study of problems, gathering relevant information and developing and preparing reports with findings and recommendations designed to assist management in the decision-making process. Work is performed under the general supervision of the department head where assigned. Does related work as required.</p> <p><u>TYPICAL WORK ACTIVITIES:</u></p> <p>Conducts surveys and collects information; Develops public information programs and public relations materials. Inter-acts with the public in the collection and dissemination of information. Attends meetings and workshops and makes oral and written presentations. Participates in special projects.</p> <p><u>FULL PERFORMANCE KNOWLEDGES, SKILLS, ABILITIES AND PERSONAL CHARACTERISTICS</u> Ability to follow directions; ability to work well with others; ability to apply classroom training to the workplace; dependability; ability to gather and analyze facts, place them in perspective and reach supportable conclusions; ability to communicate effectively both orally and in writing; physical condition commensurate with the demands of the position.</p>

Create one (1) Intern (Seasonal)
 non-competitive position effective
 5/23/25. # 07672.

3. Names and Titles of Persons Supervising this position (General, Direct, Administrative, etc.)		
<u>Name</u>	<u>Title</u>	<u>Type of Supervision</u>
Michael J. Newnand	Mayor	General
Raina Abramson	Village Clerk	General
4. Names and Titles of Persons Supervised by Employee in this position		
<u>Name</u>	<u>Title</u>	<u>Type of Supervision</u>
5. Names and Titles of Persons doing substantially the same kind and level of work as will be done by the incumbent of this new position		
<u>Name</u>	<u>Title</u>	<u>Location of Position</u>
6. What minimum qualifications do you think should be required for this position?		
<p>Education: High School <u> 0 </u> Years</p> <p> College <u> 0 </u> Years, with specialization in _____</p> <p> Other <u> 0 </u> Years, with specialization in _____</p> <p>Experience: (list amount and type)</p> <p>Essential knowledges, skills and abilities:</p> <p>Type of license or certificate required:</p>		
7. The above statements are accurate and complete.		
Date: 5/21/25 Title: Mayor		Signature: 
Certificate of Orange County Department of Human Resources		
8. In accordance with the provisions of Civil Service Law Section 22, the Orange County Department of Human Resources certifies that the appropriate civil service title for the position described is:		
Title: <u>Indexer (Seasonal)</u>		
Jurisdictional Classification: <u>NOA-Orange did not</u>		
Date: 5/23/25	Signature: 	
Action by Legislative Body or Other Approving Authority		
9. Creation of described position		
<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved		
Date:	Signature:	

Return One Completed Copy To The Orange County Department of Human Resources



Steven M. Neuhaus
County Executive

OFFICE OF COMMUNITY DEVELOPMENT

Nicole Andersen, Director
40 Matthews Street, Suite 307A
Goshen, NY 10924
Tel: (845) 615-3820

Email: CommDev@orangecountygov.com

April 9, 2025

Dear Urban County Consortium Member:

We are pleased to announce the start of the FY-2026 Community Development Block Grant (CDBG) Municipal Grant Application process. The application will only be transmitted via email to the municipalities that participate in the Orange County CDBG Urban County. Please feel free to share the information with any other interested party including your municipal engineers and grant writers. Here are some important bullets to note regarding this year's application process:

1. Applicants must hold a public hearing to inform citizens of the municipality's opportunity to apply for CDBG funding, review its community development needs, and obtain citizen input, particularly from people with low to moderate income regarding potential projects, and to authorize the Municipal Official to apply.
2. CDBG applications are due **Friday, June 20, 2025 at 4:00 p.m.** via email: nandersen@orangecountygov.com. The Municipal resolution and Fair Housing Resolution should be submitted by July 17, 2025, if not available by June 20, 2025.
3. At least one representative employed by (not contracted by) the Applicant/Municipality must attend a MANDATORY Virtual CDBG Application Workshop on Wednesday, April 30, 2025, from 9:30 am to 11:00 via Microsoft Teams. There can be no exceptions to the application deadline or attendance at the meeting. We suggest that the Municipal Official, Primary Contact, AND Project Manager/Engineer (if applicable) attend. This year's workshop will be different than those in the past, as we will review and focus on the application as well as the agreement that municipalities will execute with the County of Orange to receive the CDBG funds for reimbursement of the project. To register and be sent the Microsoft Teams Invites for the CDBG workshop, e-mail a list of Attendees with their Contact Information to nandersen@orangecountygov.com.
4. Please reach out to me with any project ideas so that we can discuss the project in more detail to determine eligibility before you apply.

Thank you for your continued interest in this important program and we look forward to assisting you with your CDBG application. Please do not hesitate to contact me at (845) 615-3819, nandersen@orangecountygov.com or John Amante at (845) 615-3808, jamante@orangecountygov.com.

Sincerely,
Nicole Andersen
Nicole Andersen
Director of Community Development

Orange County Office of Community Development FY-2026 Program Year Calendar

WARWICK FIRE DEPARTMENT

CHIEF – ANDREW LEMIN
ALemin@warwickfire.org

1ST ASST. CHIEF – KELLY BROCK
KBrock@warwickfire.org

2ND ASST. CHIEF – KEVIN HUGHES
KHughes@warwickfire.org

SAFETY OFFICER – CHRIS DIMARCO
safety1@warwickfire.org



PRESIDENT – MELISSA STEVENS
President@warwickfire.org

VICE PRESIDENT – CHRIS GARDNER
VicePresident@warwickfire.org

SECRETARY – DEB SCHWEIKART
Secretary@warwickfire.org

TREASURER – LISA RYAN
Treasurer@warwickfire.org

May 1, 2025

Board of Trustees Village of Warwick
PO Box 369
Warwick, NY 10990

Re: 2025 Warwick Fire Department Carnival

Dear Members of the Village Board:

Please be advised that the Warwick Fire Department plans to hold its annual carnival this year in Veterans Memorial Park. The Carnival will run from Wednesday June 25th to Saturday June 28th, 2025. Set up for the event will begin on Sunday June 22nd, and breakdown and clean-up will be completed by June 30th. The Carnival will be open from 6:00 PM to 10:00 PM Wednesday through Friday and 6:00 PM to 11:00 PM on Saturday. Fireworks are scheduled for Saturday, June 28th, with a rain date of Sunday, June 29th. An application for the use of the park has been submitted, with the map marked indicating the use of the whole park, that will be used for set up and operation of the carnival. A letter from the Village of Warwick DPW Supervisor has also been submitted.

Per the Village of Warwick Facility Use Request Information: The Carnival will provide food and rides at a cost to the attendees. A detailed map is attached to the facility request. The Warwick Fire Department will provide garbage disposal containers and porta pottys. The Warwick Police Department, Warwick Fire Department and Warwick Ambulance have been notified of the Carnival. The Warwick Fire Department will provide lights as needed. The required insurance certificates and paperwork is attached.

Please feel free to contact me with any questions at (845) 494-3810 or by email
Secretary@warwickfire.org

Deborah Schweikart

77 Main Street
Post Office Box 369
Warwick, NY 10990
www.villageofwarwick.org



(845) 986-2031
FAX (845) 986-6884
mayor@villageofwarwick.org
clerk@villageofwarwick.org

VILLAGE OF WARWICK

INCORPORATED 1867

April 23, 2025

Melissa Stevens, Department President
Warwick Fire Department
PO Box 31
Warwick, NY 10990

Re: Warwick Fire Department Carnival and Fireworks

A site visit was held on April 15, 2025, in Memorial Park with Warwick Fire Department representatives to discuss Carnival event details and parking plans. Event details and traffic/parking plans discussed are acceptable and approved.

Mike Moser
DPW Supervisor
Village of Warwick
dpw@villageofwarwick.org



VILLAGE OF WARWICK

INCORPORATED 1867

Warwick Fire Department Carnival – 2025 Checklist

The following items must be received by the Village Clerk ***at least 90 days prior to the desired Board meeting*** for which they will go before the Village Board for consideration:

ALL REQUESTS & INSURANCE MUST REFLECT ALL DATES OF THE EVENT

1. Forms the Warwick Fire Department needs to provide to the Village of Warwick

☒ Cover letter as specified on the 'Facility Use Request Instructions for Gatherings Greater Than 200 People', the details all the events taking place such as carnival, fireworks, etc., including:

- ☒ A statement specifying whether food or beverage is intended to be prepared, served or distributed. If food or beverages are intended to be prepared, sold or distributed, a statement specifying the method of preparation and distribution of such food or beverage such as food trucks or open grills and the method of disposing of garbage, trash, rubbish or any other refuse arising therefrom. If food or beverage is to be prepared, sold and distributed, a plan or drawing to scale must be attached to the application showing the buildings or other structures from which the food or beverages shall be prepared, sold or distributed.

****A permit is required from the Orange County Department of Health when offering or selling any food to the public. It is the applicant's responsibility to contact the Orange County Department of Health to obtain necessary permits. Contact the Orange County Department of Health for further information.***

- ☒ A statement specifying that the Warwick Police Department, Warwick Fire Department, and Warwick EMS have been notified of the event, including any recommendations from the aforesaid Departments.
- ☒ A statement specifying whether any outdoor lights or signs are to be utilized, and, if so, a map showing the number, location, size, type of such lights and signs.
- ☒ A statement specifying whether any camping or housing facilities are to be available, and, if so, a plan drawn to scale showing the intended number and location of the same.

- ☒ A statement specifying the contemplated duration of assembly and use.
- ☒ A detailed map showing the location of the event including any structures to be erected for the purpose of the assembly.
- ☒ A plan drawn to scale showing the layout of any parking area for motor vehicles, including disability parking spots and the means of egress from and ingress to such parking area.
- ☒ Completed Village of Warwick 'Facility Use Permit Application for Gatherings Greater Than 200 People on Village-Owned Property'
- ☒ A letter from the DPW Supervisor providing pre-approval of the event details and parking plan. The DPW Supervisor can be reached at (845) 986-2031 ext. 110 or dpwsupervisor@villageofwarwick.org. **New 2025**
- ☐ ~~\$500 security deposit~~ – *WFD is exempt
- ☒ Certificate of Insurance from the Warwick Fire Department to the Village of Warwick including the primary and non-contributory basis form (*form ACORD 25*)
 - *COI must include required limits as specified in the 'Facility Use Permit Application for Gatherings Greater Than 200 People on Village-Owned Property'
 - *COI must include **Host Liquor Liability Coverage** if applicable.
 - *Liability coverage must include mechanical rides / bounce houses/ inflatable slides
- ☒ Warwick Fire District Policy Endorsement, Addition of Primary and Noncontributory
- ☐ Warwick Fire District Policy Endorsement, Deletion of Exclusion

2. Forms required from July 4 Ever Fireworks

- ☒ Indemnity & Hold Harmless between July 4 Ever Fireworks and Village of Warwick.
- ☒ Signed contract between July 4 Ever Fireworks and Warwick Fire Department.
- ☒ Proof of Worker's Compensation from July 4 Ever Fireworks to The Village of Warwick
- ☒ Proof of Worker's Compensation from July 4 Ever Fireworks to The Warwick Fire Dept / District
- ☒ Certificate of Insurance from July 4 Ever Fireworks to the Village of Warwick including the primary and non-contributory basis form (*form ACORD 25*)
- ☒ Certificate of Insurance from July 4 Ever Fireworks to the Warwick Fire Dept / District including the primary and non-contributory basis form (*form ACORD 25*)

- ☒ Proof of Disability (DB-120.1 (10-17)) from July 4 Ever Fireworks to The Village of Warwick
- ☒ Proof of Disability (DB-120.1 (10-17)) from July 4 Ever Fireworks to Warwick Fire Dept / District
- ☒ Commercial General Liability (ECG 20 592 05 09) - Name of Additional Insured Person(s) or Organization(s) – Village of Warwick and Warwick Fire District / Department

3. Forms required from Gillette Shows

- ☒ Signed Agreement between Gillette Shows, LLC and Warwick Fire Department to furnish a combination of rides and concessions known as Gillette Shows
- ☒ Signed Indemnity and Hold Harmless Agreement between Gillette, The Warwick Fire Dept / District, and Village of Warwick
- ☒ Certificate of Insurance from Gillette Shows Inc. to the Warwick Fire District and Warwick Fire Department including the primary and non-contributory basis form (*form ACORD 25*)
- ☒ Non-Contributory Endorsement for Additional Insureds from Gillette Shows, Inc. to the Warwick Fire District and Warwick Fire Department (LD-20287)
- ☒ Certificate of Insurance from Gillette Shows Inc. to the Village of Warwick including the primary and non-contributory basis form (*form ACORD 25*)
- ☒ Non-Contributory Endorsement for Additional Insureds from Gillette Shows, Inc. to the Village of Warwick, trustees, employees, and agents (LD-20287)
- ☒ Commercial General Liability (CG 20 26 07 04) - Name of Additional Insured Person(s) or Organization(s) – Warwick Fire District and Warwick Fire Department
- ☒ Commercial General Liability (CG 20 26 07 04) - Name of Additional Insured Person(s) or Organization(s) – The Village of Warwick, its trustees, employees, and agents
- ☒ Proof of Worker's Compensation (C-105.2 (9-07)) from Gillette Shows, Inc to The Village of Warwick, its trustees, employees, and agents
- ☒ Proof of Worker's Compensation (C-105.2 (9-07)) from Gillette Shows, Inc to Warwick Fire Dept / District, its trustees, employees, and agents
- ☒ Proof of Disability (DB-120.1 (10-17)) from Gillette Shows to The Village of Warwick
- ☒ Proof of Disability (DB-120.1 (10-17)) from Gillette Shows to Warwick Fire Dept / District

77 Main Street
Post Office Box 369
Warwick, NY 10990
www.villageofwarwick.org



(845) 986-2031
FAX (845) 986-6884
mayor@villageofwarwick.org
clerk@villageofwarwick.org

VILLAGE OF WARWICK

INCORPORATED 1867

FACILITY USE PERMIT APPLICATION FOR GATHERINGS GREATER THAN 200 PEOPLE ON VILLAGE-OWNED PROPERTY

Date Request Submitted: 5-1-2025

Title of Event: Warwick Fire Department Carnival

Purpose of Event: Fire Department Fundraiser

SECTION 1: REQUESTED VILLAGE-OWNED PROPERTY

☐ Railroad Green ☐ Stanley-Deming Park ☐ Lewis Woodlands

☒ Veterans Memorial Park ☒ Veterans Memorial Park Pavilion

**Please use the attached map to indicate the specific area(s) to be used within each park.*

Village of Warwick Parking Lots - check all that apply:

☐ South Street Lot ☐ 1st Street Lot ☐ Chase Lot (non-permit only)
☐ Spring Street Lot ☐ Wheeler & Spring St. Lot ☐ Upper CVS Lot ☐ Lower CVS Lot

Village of Warwick Streets: _____

SECTION 2: DATE AND TIME REQUESTED

Date(s) Requested: June 22nd through June 30th Rain Date(s) Requested: _____

Arrival Time: 0900 Departure Time: 5 PM

Event Start Time: 5 PM Event End Time: 11 PM

SECTION 3: APPLICANT INFORMATION

Check one: ☒ Non-Profit Organization ☐ Commercial/Business Organization ☐ Family

**For-profit activities are prohibited.*

Applicant's Name/Responsible Party: Deborah Schweikart, Warwick Fire Department

**Person of responsibility representing the organization must be a Town of Warwick resident.*

PO Box 31
Warwick, NY 10990

Mailing Address of Responsible Party: _____

Residential Address of Responsible Party: 72 Southern Lane, Warwick, NY 10990

Email Address: secretary@warwickfire.org Cell Phone: 845-494-3810

Proof of Town of Warwick Residency of Responsible Party: ☒ Driver's License ☐ Utility Bill

Name of Organization (if Applicable): Warwick Fire Department

Organization's Phone: 845-986-fire Email Address: secretary@warwickfire.org

Name of Organization's Director(s)/Officer(s): Melissa Stevens, President

Mailing Address of Organization: PO Box 31
Warwick, NY 10990

Physical Address of Organization: 25 Church St Ext, Warwick, NY 10990

SECTION 4: EVENT INFORMATION

Maximum Number of People Intended at the Event: over 200

of Adults: _____ # of Under 18 Yrs. Old: _____

Expected Number of Vehicles Intended at the Event: over 100

Please explain the parking plan for the event: Warwick Fire Department Fire Police will park cars as they enter Memorial Park

WILL YOUR EVENT INCLUDE:

CHECK YES OR NO

Greater than 200 people at any given time <i>If no, DO NOT complete this form. Please complete form: FACILITY USE PERMIT APPLICATION FOR GATHERINGS OF LESS THAN 200 PEOPLE.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Music / Loudspeakers / Sound System <i>If yes, explain: _____</i> <i>Location of Music/Loud Speakers/ Sounds System: _____</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Parade, walk, road race, etc. <i>Request must include in writing a clear layout of the intended route AND a letter from the Warwick Police Department approving the route and police resources</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Tent(s) <i>Include a map detailing the placement of the tent(s).</i> <i>Date & time tent will be set up: _____</i> <i>Date & time tent will be removed: _____</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

RVs, Campers, Food Trucks, etc. If yes, explain: _____	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Admission Fee to Be Charged If yes, please list the admission fee: _____	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Alcohol <i>Host Liquor Liability Insurance is required.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Food will be served or sold If yes, explain the method of food distribution and disposal of trash: Food will be sold by vendors of carnival - disposal bins will be provided _____ <small>*A permit is required from the Orange County Department of Health when offering or selling any food to the public. It is the applicant's responsibility to contact the Orange County Department of Health to obtain necessary permits. Contact the Orange County Department of Health for further information. *Applicants must provide a drawing to scale showing where the food will be served/sold and where trash will be disposed.</small>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Rides: Mechanical Carnival Rides, Bounce House, Inflatable Slide, etc. If yes, explain: _____ <i>Additional contract(s) and/or insurance is required.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Animals: (Example, horses, pony rides, petting zoo, etc.) If yes, explain: _____	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Portable Toilets <i>Placement of portable toilets must be detailed on the map that is required with the application.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Other Please explain: _____	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SPECIAL REQUESTS:
CHECK YES OR NO

Road Closure List road(s): _____ Closed between the hours of _____ and _____ Number of 'No Parking' meter bags requested, if applicable: _____	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Use of Village owned tables and chairs <i>Veterans Memorial Park Pavilion Only. No. of Tables _____ No. of Chairs _____</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Use of Electricity	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Use of Memorial Park Football/Over 35 Field Lights <i>Additional fee required for use of field lights.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Use of Memorial Park Pavilion Lights	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Use of Village of Warwick Restrooms <i>Memorial Park and Stanley Deming Park only.</i>	Yes _____ No <u>X</u>
Other <i>Please explain: _____</i>	Yes _____ No <u>X</u>

SECTION 5: FEES/SECURITY DEPOSIT

Fees and Security Deposit are Due Upon Application / Checks payable to: The Village of Warwick

- ☐ Memorial Park Football/Over 35 Field Lights (circle one) - \$10 per day or \$300 per season
- ☐ \$500 Security Deposit (*Must be a Separate Payment*)

TOTAL FEE: \$ WAIVED (excluding security deposit)

SECTION 6: INDEMNITY & HOLD HARMLESS

The undersigned is over 21 years of age and has read this form and attached regulations and agrees to comply with them. He/she agrees to be responsible to the Village of Warwick for the use and care of the facilities. He/she, on behalf of Warwick Fire Department (Name of Organization) does hereby covenant and agree to defend, indemnify and hold harmless the Village of Warwick from and against any and all liability, loss, damages, claims, or actions (including costs and attorneys' fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of or in connection with the actual or proposed use of Village's property, facilities and/or services by Warwick Fire Department (Name Organization).

Additionally, I agree to accept notices or summonses issued with respect to the application or the conduct of the assembly or use in any manner involving it arising out of the application, construction or application of Chapter 39 'Assemblies, Public' of the Village Code of the Village of Warwick.

Furthermore, I authorize the Village of Warwick or its lawful agents to observe the event at any time for the purpose of inspecting the same, the facilities provided and the cleaning of the premises after the termination of the assembly.

Deborah Schweikart
 Printed Name of Applicant/Responsible Party


 Signature of Applicant/Responsible Party 5-1-2025
 Date

Office Use Only:

Security Deposit Check # <u>NA</u>	Certificate of Insurance <u>✓</u>	Host Liquor Liability <u>✓</u>
Fees Received <u>NA</u>	Park Map(s) <u>✓</u>	Police Dept. <u>✓</u>
Facility Use Calendar <u>✓</u>	Parade Calendar <u>NA</u>	DPW Pre-Approval <u>✓</u>

*Certificates of Insurance Reviewed by Village Insurance Carrier ✓

INDEMNITY & HOLD HARMLESS

FACILITY USER does hereby covenant and agree to defend, indemnify and hold harmless the Village of Warwick from and against any and all liability, loss, damages, claims, or actions (including costs and

attorneys' fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of or in connection with the actual or proposed use of the Village of Warwick property, facilities and/or services. I have read and understand the Facilities Use Requirements:

Deborah Schweikart

Printed Name of Applicant/Responsible Party



Signature of Applicant/Responsible Party

5-1-2025

Date

RONALD E. CLUM, CPA
165 Beamer Road, Walden, New York 12586
ronclum@yahoo.com
845-467-8243

May 12, 2025

Village of Warwick
Attn: Honorable Mayor Newhard
77 Main Street
PO Box 369
Warwick, NY 10990

Mayor Newhard:

I am pleased to confirm our understanding of the nature and limitations of the services I am to provide for the Village of Warwick, New York for the year ended May 31, 2025.

I will help in the preparation of the Annual Financial Report ("AFR") with staff assistance in providing and locating the necessary back-up documentation to file it with the New York State Comptroller's Office for the year ended May 31, 2025. This engagement is solely to assist the Village in the reporting requirement in accordance with the Office of the State Comptroller of New York State. Some of the procedures that would be anticipated would be as follows:

- Analyzing the bank reconciliations and assist the treasurer with accuracy and completeness
- Prepare a cash schedule and collateral calculation as of May 31, 2024 to complete the necessary supplemental schedules of the AFR
- Review and compare revenues and expenditures for the year end May 31, 2025 to May 31, 2024, to identify any potential mis-postings
- Review fund balances to the prior year to ensure accuracy
- Prepare a due to/due from schedule to ensure that it is in balance
- Prepare a debt schedule for the year ended May 31, 2025 to complete the necessary supplemental schedules of the AFR
- Help to prepare and file your AFR with assistance from the treasurer as required by the NYS Comptroller's Office
- Propose journal entries where need be to correct account balances at May 31, 2025

Because this agreed-upon procedure does not constitute an audit as defined under Generally Accepted Accounting Principles, I will not express an opinion on the Village of Warwick' financial statements or any elements, accounts, or items thereof.

You are responsible for making all management decisions and performing all management functions; for designating an individual with suitable skill, knowledge, and/or experience to oversee the services I will provide; and for evaluating the adequacy and results of those services and accepting responsibility for them.

I plan to begin my procedures on approximately June 15, 2025 and the engagement should be completed by July 15, 2025.

Fees for the above services will be billed at the rate of \$175.00 per hour.

I appreciate the opportunity to assist you and believe this letter accurately summarizes the significant terms of our engagement. If you have any questions, please let me know. If you agree with the terms of this engagement as described in this letter, please sign and return this letter to me, or email at ronclum@yahoo.com.

Sincerely,



Ronald E. Clum, CPA

5/12/25

Date

Michael J Newhard, Village Mayor

Date

RONALD E. CLUM, CPA
165 Beamer Road, Walden, New York 12586

May 12, 2025

In order to complete the Annual Financial Report (AFR) and submit on a timely basis I will need the following documents at the time of the field visit:

- Trial Balance Printout for May 31, 2025
- Revenue Control Report for the year that shows Original Budget, Adjusted Budget, and Actual fiscal year to date amounts for the year ended May 31, 2025. Please note that the total revenues should tie out to the revenue total on the trial balance
- Expenditure Control Report for the year that shows Original Budget, Adjusted Budget, and Actual fiscal year to date amounts for the year ended May 31, 2025. Please note that the total expenditures should tie out to the expenditure total on the trial balance
- Printout in excel of the complete General Ledger for the calendar year 2025
- Please photocopy every bank statement and associated bank reconciliation for December of 2025. (I do not need the entire year photocopied). The reconciled balance should agree to the amount on the Trial Balance as of May 31, 2025
- An accounts receivable listing that balances to the amount on the Trial Balance at May 31, 2025
- An accounts payable listing that balances to the amount on the Trial Balance at May 31, 2025
- A workpaper that proves out the accrued liabilities at May 31, 2025. The workpaper should contain the payroll register that covers the periods in May 2025 and June 2025.
- Photocopy of the Adopted Budget for the fiscal year end May 31, 2025 and May 31, 2026
- Photocopy of the ERS and PFRS bill that was paid during the 2025.
- Listing of all outstanding debt including BAN's and Serial Bonds along with the amortization schedules, if any
- Photocopy of any new BAN's or Serial Bonds issued during the fiscal year 2025, if any
- If there was any additions or deletions to the reserves, I will need to see the resolutions authorizing any such transactions
- A listing of all guarantee and Bid Deposits that tie into the balances on the T&A trial balance or other accounts you have.
- Copies of Collateral Letters at May 31, 2025
- Number of full-time and part-time employees to complete *Employee and Retirement Benefits* of the AFR. Also, number of police officers broken down between part-time and full-time
- Copies of GASB reports for PFRS and ERS, which can be downloaded from the retirement system
- Schedule of COVID money received, expenditures through May 31, 2025, and remaining balance. Copies of reports filed regarding COVID as well

77 Main Street
Post Office Box 369
Warwick, NY 10990
www.villageofwarwick.org



(845) 986-2031
FAX (845) 986-6884
mayor@villageofwarwick.org
clerk@villageofwarwick.org

VILLAGE OF WARWICK
INCORPORATED 1867

Budget Transfer Request
For Board of Trustee Approval – Meeting June 2, 2025


FY 2024-2025 Transfer per Budget

Transfer \$250,000 from General Fund to Infrastructure Reserve Account as per the 2024-2025 Adopted Budget.

Transfer \$54,473.93 from Equipment Reserve to General fund as per the 2024-2025 Adopted Budget for the purchase of a pressure washer and Bobcat equipment.

Transfer \$33,790.94 from Money in Lieu of Parks to General fund as per the 2024-2025 Adopted Budget for the Dog Park Project and Kayak Project.

Respectfully submitted,


Sadie Andryshak
Village Treasurer

Report Date: May 27, 2025

May 21, 2025
09:24 AM

VILLAGE OF WARWICK
Expenditure Detail Inquiry

Page No: 1

Account No: A-7140-4900
Description: Parks - Special Projects
Starting Date: 0
* Transaction is included in Previous and/or Opening Balance
En = PO Line Item First Encumbrance Date
Type: Sub Account
Ending Date: 05/21/25
** Transaction is not included in Balance
BC = Blanket Control
Po Transactions: Summarized
BS = Blanket Sub

Date	Description	Trans Amount	Balance
06/05/23	Add Acct New: 0.00 Adopted Budget	0.00	0.00
06/01/24	Change To Acct Old: 0.00 New: 60500.00 Adopted Budget Post Ref: B 1317 135	60,500.00	60,500.00
06/26/24	PO 24001946 1 Void Memorial Park BR Locks Vn TECHLOCK TECH LOCK & KEY En 06/24/24	3,260.00 **	60,500.00
06/26/24	PO 24001956 1 Void Heavy Duty Doors Vn HOMED50 HOME DEPOT CREDIT SERVICES En 06/24/24	2,036.00 **	60,500.00
07/02/24	PO 24001946 3 Paid Ck 30017 PrR Memorial Park BR Locks Vn TECHLOCK TECH LOCK & KEY En 06/01/24	3,260.00-**	60,500.00
07/02/24	PO 24001956 2 Paid Ck 30006 PrR Heavy Duty Doors Vn HOMED50 HOME DEPOT CREDIT SERVICES En 06/01/24	2,036.00-**	60,500.00
07/16/24	PO 25000222 1 Paid Ck 30093 Dog Park Fence Material Pymt Vn BILTWEILL BILT-WELL FENCE CO INC En 07/10/24	9,515.00-	50,985.00
08/28/24	PO 25000453 1 Void Dog Park Fence Project Vn BILTWEILL BILT-WELL FENCE CO INC En 08/26/24	14,272.00 **	50,985.00
09/04/24	PO 25000222 2 Paid Ck 30293 Dog Park Fence Material Pymt Vn BILTWEILL BILT-WELL FENCE CO INC En 08/28/24	14,272.00-	36,713.00
09/04/24	PO 25000460 1 Paid Ck 30304 Dog Park Water Line Vn SCHMID50 SCHMIDT'S WHOLESALE, INC. En 08/26/24	189.86-	36,523.14
09/24/24	PO 25000604 6 Paid Ck 30358 Dog Park Maintenace Vn WADES050 WADESON HOME CENTER INC En 09/16/24	124.00-	36,399.14
10/08/24	PO 25000686 1 Paid Ck 30441 Dog Park Road & Lot Vn TILCON TILCON NEW YORK INC En 10/01/24	1,208.48-	35,190.66
10/22/24	PO 25000749 2 Paid Ck 30515 Dog Park Supplies Vn LOWES LOWE'S En 10/10/24	94.56-	35,096.10
10/22/24	PO 25000767 3 Paid Ck 30525 Dog Park Project Vn WADES050 WADESON HOME CENTER INC En 10/16/24	132.94-	34,963.16
11/19/24	PO 25000903 1 Paid Ck 30622 Dog Park Project Vn HOMED50 HOME DEPOT CREDIT SERVICES En 11/12/24	93.00-	34,870.16

VILLAGE OF WARWICK

Fiscal Year June 1, 2024 - May 31, 2025

GENERAL FUND REVENUE

Revenue Code	** Revenue Other Than Real Estate Taxes **	
A 1081	Payments in Lieu of Taxes	88,275
A 1090	Interest & Penalties (Real Estate Tax)	9,000
A 1120	Sales Tax	1,250,000
A 1130	Utilities Tax	90,000
A 1170	Franchise Fees	100,000
A 1255	Clerk Fees	1,200
A 1289	Grant - LGRMIF Records Management (A.1410.4950)	40,942
A 1289	Grant - Justice Court Assistance Program (A.1110.4950)	10,000
A 1289	Grant - HUD/CDBG 2023 - South Street ADA Sidewalks (A.5110.4400)	112,000
A 1289	Grant - Safe Streets for All (A.5110.4400)	170,000
A 1289	Grant - Feasibility Study (A.1440.4000)	50,000
A 1289	Feasibility Study Reimbursement from Town	25,000
A.1560	Safety Inspection Fees	1,000
A 1603	Registrar Fees (A.4020.4000)	17,000
A 1689	Health Insurance Reimbursement (A.9060.8000)	6,600
A 1750	Bus Operations (A.5010.4950)	7,000
A 1789	Other Transportation Departmental Income	1,500
A 2025	Utility Charges Reimbursement	2,000
A 2110	Zoning Board Fees	1,500
A 2115	Planning Board Fees	2,000
A 2350	Youth Recreation Service - Town & Program Fees (A.7310.1000)	102,000
A 2401	Bank Interest & Earnings	50,000
A 2501	Business & Occupational Licenses (Paddlers Permits)	1,500
A 2555	Building Permits	42,500
A 2590	C/O Fees	15,000
A 2810	Fines & Forfeited Bail	100,000
A 2655	Alarm Fines	2,000
A 2750	AIM-Related Payments (Office of State Comptroller)	28,312
A 3005	Mortgage Tax	85,000
A 3591	NYS DOT Highway Capital Projects CHIPS	213,548
A 3820	Youth Programs - State Aid	4,000
A 2801	Transfer from Infrastructure Reserve-Pole Barn	155,174
A 2801	Transfer from Money in Lieu of Parks-Dog Park, Over 35 field, Deming light pole (A7140.4950)	58,000
A 2801	Transfer from Equipment Reserve - Tool cat/Skid steer, hot water pressurer washer (A.5110.2350, A1640.2350)	75,000
TOTAL GENERAL FUND REVENUE		2,917,051

May 21, 2025
09:45 AM

VILLAGE OF WARWICK
Expenditure Detail Inquiry

Page No: 1

Account No: A-5110-2350
Description: Streets - Equipment
Starting Date: 0
Type: Sub Account
Ending Date: 05/21/25
Po Transactions: Summarized
* Transaction is included in Previous and/or Opening Balance ** Transaction is not included in Balance
En = PO Line Item First Encumbrance Date BC = Blanket Control BS = Blanket Sub

Date	Description	Trans Amount	Balance
06/05/23	Add Acct New: 0.00 Adopted Budget	0.00	0.00
06/01/24	Change To Acct Old: 0.00 New: 78500.00 Adopted Budget Post Ref: B 1317 111	78,500.00	78,500.00
08/22/24	PO 25000421 1 Paid Ck 30232 Bobcat UW56 Vn DOOSA005 DOOSAN BOBCAT En 08/14/24	49,142.92-	29,357.08
10/23/24	PO 25000797 1 Paid Ck 30545 HOT PATCHER DUMP TRAILER Vn TOWNOF40 TOWN OF WARWICK - DPW En 10/23/24	17,405.50-	11,951.58
04/22/25	PO 25001755 1 Paid Ck 31249 Chainsaw Vn DOMBRO50 DOMBROWSKI LAWN & GARDEN En 04/15/25	427.99-	11,523.59

Equipment Reserve

VILLAGE OF WARWICK
Fiscal Year June 1, 2024 - May 31, 2025

GENERAL FUND REVENUE		
Revenue Code	** Revenue Other Than Real Estate Taxes **	
A 1081	Payments in Lieu of Taxes	88,275
A 1090	Interest & Penalties (Real Estate Tax)	9,000
A 1120	Sales Tax	1,250,000
A 1130	Utilities Tax	90,000
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A 1289	Grant - LGRMIF Records Management (A.1410.4950)	40,942
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A 2115	Planning Board Fees	2,000
A 2350	Youth Recreation Service - Town & Program Fees (A.7310.1000)	102,000
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A 2501	Business & Occupational Licenses (Peddlers Permits)	1,500
A 2555	Building Permits	42,500
A 2580	C/O Fees	15,000
A 2610	Fines & Forfeited Bail	100,000
A 2655	Alarm Fines	2,000
A 2750	AIM-Related Payments (Office of State Comptroller)	28,312
A 3005	Mortgage Tax	85,000
A 3591	NYS DOT Highway Capital Projects CHIPS	213,548
A 3820	Youth Programs - State Aid	4,000
A 2801	Transfer from Infrastructure Reserve-Pole Barn	155,174
A 2801	Transfer from Money in Lieu of Parks-Dog Park, Over 35 field, Deming light pole (A7140.4950)	58,000
A 2801	Transfer from Equipment Reserve - Tool cat/Skid steer, hot water pressurer washer (A.5110.2350, A1640.2350)	75,000
TOTAL GENERAL FUND REVENUE		2,917,051

VILLAGE OF WARWICK

Account Code	Account Description	2025 Appropriation	2024 Modified Appropriation	2024 Actual as of 3/15/2024	2023 Actual	2022 Actual	2021 Actual
SANITATION							
A-8140-1	Storm Sewer/Drainage - Personal Service	7,828	12,750	13,195	6,437	5,380	1,764
A-8140-4	Storm Sewer/Drainage - Contractual Expenditures	17,000	17,000	8,774	40,097	7,804	4,874
A-8160-2	Refuse - Equipment	10,000	10,000	5,000	5,500	5,500	9,850
A-8160-4	Refuse - Contractual Expenditures	50,000	50,000	34,441	42,108	33,578	42,449
	<i>Totals</i>	84,828	89,750	61,410	94,142	52,263	58,737
COMMUNITY ENVIRONMENT							
A-8560-4	Shade Trees - Contractual Expenditures	47,250	48,750	25,851	38,732	24,279	25,078
	<i>Totals</i>	47,250	48,750	25,851	38,732	24,279	25,078
EMPLOYEE BENEFITS							
A-9010-8	State Retirement - Employee Benefits	221,326	189,413	189,203	152,945	212,696	181,327
A-9030-8	Social Security - Employee Benefits	103,843	108,816	78,089	89,155	88,554	87,569
A-9035-8	Medicare - Employee Benefits	24,268	25,449	18,263	20,850	20,709	20,480
A-9040-8	Workers Compensation - Employee Benefits	111,131	100,230	91,204	94,648	96,103	103,269
A-9045-8	Disability Insurance - Employee Benefits	500	500	48	53	75	70
A-9050-8	Unemployment Insurance - Employee Benefits	1,000	1,000	71	190	-	1,127
A-9060-8	Hospital & Medical Insurance - Employee Benefits	986,000	980,030	704,560	831,790	779,815	740,856
	<i>Totals</i>	1,428,068	1,405,408	1,061,438	1,189,631	1,197,752	1,134,698
DEBT SERVICE							
A-9730-8	BAN - Principal	-	-	-	-	-	-
A-9730-7	BAN - Interest	-	-	-	-	-	-
	<i>Totals</i>	-	-	-	-	-	-
INTERFUND TRANSFERS							
A-9901-9	Interfund Transfer - Interfund Transfers	250,000	250,000	-	450,000	250,000	250,000
GENERAL FUND TOTAL EXPENDITURES		6,686,177	7,107,699	6,019,375	5,467,854	5,182,937	4,906,519

TOWN OF WARWICK

DEPARTMENT OF POLICE

132 KINGS HIGHWAY
WARWICK N.Y. 10990
(845) 986-5000 FAX (845) 986-5020

RECEIVED

MAY 27 2025

VILLAGE OF WARWICK
CLERK'S OFFICE

Chief John D. Rader NA 236
jrader@townofwarwickpd.org

May 27, 2025

Village of Warwick Board of Trustees
Warwick Village Hall
77 Main Street
Warwick, NY 10990

**Subject: Request for Use of Veteran's Memorial Park on August 5, 2025 for
National Night Out**

Dear Mayor Newhard and Honorable Members of the Village Board,

I am writing to respectfully request the use of Veteran's Memorial Park on **Tuesday, August 5, 2025**, for the observance of **National Night Out**, a community-building event that promotes police-community partnerships and neighborhood camaraderie.

National Night Out is a nationwide initiative that aims to enhance relationships between neighbors and law enforcement while fostering a true sense of community. This event has become a cherished tradition in towns and cities across the country, offering families and individuals a safe, positive, and festive environment to connect with local first responders and community organizations.


By hosting National Night Out in Warwick, we hope to:

- Strengthen the bond between residents and our local police, fire, and EMS departments
- Promote public safety and crime prevention awareness
- Provide free, family-friendly entertainment and activities for all ages
- Encourage civic engagement and collaboration among community members

Veteran's Memorial Park is an ideal location due to its accessibility, size, and central location within the village. We anticipate a well-attended event with activities such as safety demonstrations, children's games, food vendors, live music, and informational booths.

We are committed to working closely with the Village of Warwick to ensure all necessary permits, insurance, and logistical requirements are met well in advance of the event date.

Thank you for your time and consideration. We look forward to your support in making National Night Out 2025 a meaningful and memorable evening for the Warwick community.

A handwritten signature in black ink, appearing to read "John D. Rader". The signature is fluid and cursive, with a large initial "J" and "R".

John D. Rader
Chief of Police

77 Main Street
Post Office Box 369
Warwick, NY 10990
www.villageofwarwick.org



(845) 986-2031
FAX (845) 986-6884
mayor@villageofwarwick.org
clerk@villageofwarwick.org

VILLAGE OF WARWICK
INCORPORATED 1867

**FACILITY USE PERMIT APPLICATION
FOR GATHERINGS GREATER THAN 200 PEOPLE
ON VILLAGE-OWNED PROPERTY**

Date Request Submitted: May 9, 2025

Title of Event: National Night Out 2025

Purpose of Event: Community engagement

SECTION 1: REQUESTED VILLAGE-OWNED PROPERTY

☐ Railroad Green ☐ Stanley-Deming Park ☐ Lewis Woodlands

☒ Veterans Memorial Park ☐ Veterans Memorial Park Pavilion

**Please use the attached map to indicate the specific area(s) to be used within each park.*

Village of Warwick Parking Lots - check all that apply:

☐ South Street Lot ☐ 1st Street Lot ☐ Chase Lot (non-permit only)
☐ Spring Street Lot ☐ Wheeler & Spring St. Lot ☐ Upper CVS Lot ☐ Lower CVS Lot

Village of Warwick Streets: _____

SECTION 2: DATE AND TIME REQUESTED

Date(s) Requested: Aug 5, 2025 Rain Date(s) Requested: Aug 13, 2025

Arrival Time: 3:00 PM Departure Time: 11:00 PM

Event Start Time: 5:00 PM Event End Time: 8:00 PM

SECTION 3: APPLICANT INFORMATION

Check one: ☒ Non-Profit Organization ☐ Commercial/Business Organization ☐ Family
**For-profit activities are prohibited.*

Applicant's Name/Responsible Party: Town of Warwick Police Department
**Person of responsibility representing the organization must be a Town of Warwick resident.*

Mailing Address of Responsible Party: 132 Kings Highway Warwick NT 10990

Residential Address of Responsible Party: Same

Email Address: jradere@townofwarwickpd.org Cell Phone: 845-879-9629

Proof of Town of Warwick Residency of Responsible Party: ☐ Driver's License ☐ Utility Bill

Name of Organization (if Applicable): Town of Warwick Police

Organization's Phone: 845-986-5000 Email Address: jradere@townofwarwickpd.org

Name of Organization's Director(s)/Officer(s): Chief John Rader

Mailing Address of Organization: 132 Kings Hwy Warwick, NT 10990

Physical Address of Organization: Same

SECTION 4: EVENT INFORMATION

Maximum Number of People Intended at the Event: 1000+

of Adults: 800+ # of Under 18 Yrs. Old: 200+

Expected Number of Vehicles Intended at the Event: 200+

Please explain the parking plan for the event: for designated parking areas in the area of the ball fields

WILL YOUR EVENT INCLUDE:

CHECK YES OR NO

Greater than 200 people at any given time <i>If no, DO NOT complete this form. Please complete form: FACILITY USE PERMIT APPLICATION FOR GATHERINGS OF LESS THAN 200 PEOPLE.</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Music / Loudspeakers / Sound System <i>If yes, explain:</i> <i>Location of Music/Loud Speakers/ Sounds System:</i>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Parade, walk, road race, etc. <i>Request must include in writing a clear layout of the intended route AND a letter from the Warwick Police Department approving the route and police resources</i>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Tent(s) <i>Include a map detailing the placement of the tent(s).</i> <i>Date & time tent will be set up:</i> <i>Date & time tent will be removed:</i> <u>Small pop-up tents</u>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

RVs, Campers, Food Trucks, etc. If yes, explain: <u>food trucks, barbecue</u>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Admission Fee to Be Charged If yes, please list the admission fee: _____	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Alcohol Host Liquor Liability Insurance is required.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Food will be served or sold If yes, explain the method of food distribution and disposal of trash: <u>food trucks</u> <u>trash disposal by police</u> <small>*A permit is required from the Orange County Department of Health when offering or selling any food to the public. It is the applicant's responsibility to contact the Orange County Department of Health to obtain necessary permits. Contact the Orange County Department of Health for further information. *Applicants must provide a drawing to scale showing where the food will be served/sold and where trash will be disposed.</small>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Rides: Mechanical Carnival Rides, Bounce House, Inflatable Slide, etc. If yes, explain: _____ Additional contract(s) and/or insurance is required.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Animals: (Example, horses, pony rides, petting zoo, etc.) If yes, explain: _____	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Portable Toilets Placement of portable toilets must be detailed on the map that is required with the application.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Other Please explain: _____	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SPECIAL REQUESTS:
CHECK YES OR NO

Road Closure List road(s): _____ Closed between the hours of _____ and _____ Number of 'No Parking' meter bags requested, if applicable: _____	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Use of Village owned tables and chairs Veterans Memorial Park Pavilion Only. No. of Tables _____ No. of Chairs _____	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Use of Electricity	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Use of Memorial Park Football/Over 35 Field Lights Additional fee required for use of field lights.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Use of Memorial Park Pavilion Lights	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Use of Village of Warwick Restrooms Memorial Park and Stanley Deming Park only.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Other Please explain: _____	Yes <input type="checkbox"/> No <input type="checkbox"/>

SECTION 5: FEES/SECURITY DEPOSIT

Fees and Security Deposit are Due Upon Application / Checks payable to: The Village of Warwick

☐ Memorial Park Field Lights -

The Daniel Prial Field /Football Field (circle one) \$10 per day or \$300 per season

☐ \$500 Security Deposit (*Must be a Separate Payment*)

TOTAL FEE: \$ _____ (excluding security deposit)

SECTION 6: INDEMNITY & HOLD HARMLESS

The undersigned is over 21 years of age and has read this form and attached regulations and agrees to comply with them. He/she agrees to be responsible to the Village of Warwick for the use and care of the facilities. He/she, on behalf of Town of Warwick PA (Name of Organization) does hereby covenant and agree to defend, indemnify and hold harmless the Village of Warwick from and against any and all liability, loss, damages, claims, or actions (including costs and attorneys' fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of or in connection with the actual or proposed use of Village's property, facilities and/or services by Town of Warwick PA (Name Organization).

Additionally, I agree to accept notices or summonses issued with respect to the application or the conduct of the assembly or use in any manner involving it arising out of the application, construction or application of Chapter 39 'Assemblies, Public' of the Village Code of the Village of Warwick.

Furthermore, I authorize the Village of Warwick or its lawful agents to observe the event at any time for the purpose of inspecting the same, the facilities provided and the cleaning of the premises after the termination of the assembly.

John Rader [Signature] 5/27/2025
Printed Name of Applicant/Responsible Party Signature of Applicant/Responsible Party Date

Office Use Only:

Security Deposit Check # NA

Certificate of Insurance ☒

Host Liquor Liability NA

Fees Received NA

Park Map(s) ☒

Police Dept. ☒

Facility Use Calendar _____

Parade Calendar NA

DPW Pre-Approval _____

*Certificates of Insurance Reviewed by Village Insurance Carrier _____

INDEMNITY & HOLD HARMLESS

FACILITY USER does hereby covenant and agree to defend, indemnify and hold harmless the Village of Warwick from and against any and all liability, loss, damages, claims, or actions (including costs and

attorneys' fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of or in connection with the actual or proposed use of the Village of Warwick property, facilities and/or services. I have read and understand the Facilities Use Requirements:

John Rader

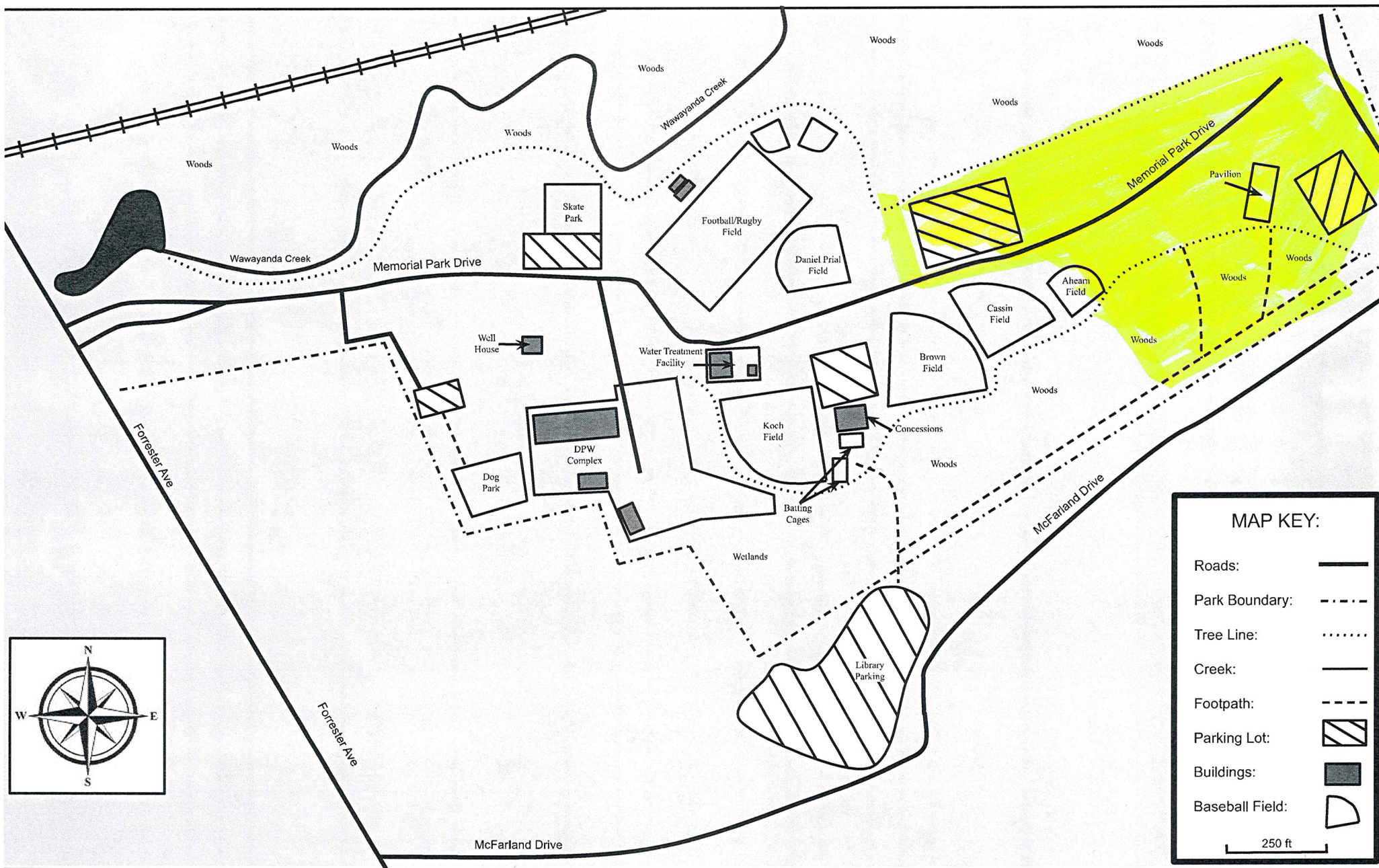
Printed Name of Applicant/Responsible Party

John Rader

Signature of Applicant/Responsible Party

5/9/2025

Date



VETERANS MEMORIAL PARK

Village of Warwick 2024



WICKHAM
WORKS

COLLABORATE. SHARE. MAKE.

RECEIVED

MAY 15 2025

VILLAGE OF WARWICK
CLERK'S OFFICE

Wickham Works
3 Forester Avenue, Unit 8
Warwick, NY 10990

May 15, 2025

Dear Village of Warwick Trustees,

Wickham Works requests permission to host a "Strawberry Picnic Potluck" in the pavilion at Stanley Deming Park on Saturday, June 21st from 1 - 3pm.

This picnic is a community engagement event, part of the Warwick Artist-in-Residence pilot program with artist Nicole Hixon. The event is the culmination of her installation, The Divine Feminine: Feeding Nature, installed for Treecycle 2025. At that time, we anticipate that the organic sculpture will have strawberries growing from her head piece.

The event would start at 1pm, directly following the Monarch Village Festival at Park Avenue school, as discussed with Abbey Ashley. It would consist of strawberry-themed craft tables hosted by Wickham Works. For the potluck, the audience is invited to bring strawberry-themed items to share.

The event would be scheduled to wrap up at 3pm. In addition to the open invitation to the Monarch Village festival participants, invitations would be sent to the school district's S.E.P.T.A. families. We anticipate attendance of 60 - 80 people.

We would like to request the following:

- Five 8' tables from the DPW, and 40 chairs.
- Use of Pavilion area and bathrooms.
- Two garbage cans. One recycling can.

Thank you for your consideration.

Sincerely,

Melissa Shaw-Smith
Director, Wickham Works

77 Main Street
Post Office Box 369
Warwick, NY 10990
www.villageofwarwick.org



(845) 986-2031
FAX (845) 986-6884
mayor@villageofwarwick.org
clerk@villageofwarwick.org

VILLAGE OF WARWICK

INCORPORATED 1867

Facility Use Request Form **For Gatherings of Less Than 200 People**

ONLY USE THIS FORM IF YOUR EVENT WILL HAVE 200 PEOPLE OR LESS

Date Request Submitted: May 9th 2025

Title of Event: Artist-in-Residence Strawberry Picnic

Purpose of Event: Community engagement for art installation by Nicole Nixen

SECTION 1: REQUESTED VILLAGE-OWNED PROPERTY

☐ Railroad Green ☒ Stanley-Deming Park ☐ Lewis Woodlands

☐ Veterans Memorial Park ☐ Veterans Memorial Park Pavilion

**Please use the attached map to indicate the specific area(s) to be used within each park.*

Village of Warwick Parking Lots - check all that apply:

☐ South Street Lot ☐ 1st Street Lot ☐ Chase Lot (non-permit only)
☐ Spring Street Lot ☐ Wheeler & Spring St. Lot ☐ Upper CVS Lot ☐ Lower CVS Lot

Village of Warwick Streets: _____

SECTION 2: DATE AND TIME REQUESTED

Date(s) Requested: June 21 Rain Date Requested: —

Arrival Time: 11 am Departure Time: 4 pm

Event Start Time: 1 pm Event End Time: 3 pm

SECTION 3: APPLICANT INFORMATION

Check one: ☒ Non-Profit Organization ☐ Commercial/Business Organization ☐ Family
**For-profit activities are prohibited.*

Applicant's Name/Responsible Party: MELISSA SHAW-SMITH, WICKHAM WORKS
**Person of responsibility representing the organization must be a Town of Warwick resident.*

Mailing Address of Responsible Party: 3 FORESTER AVE, UNIT 8, WARWICK, NY 10990

Email Address: mshawsmith@wickhamworks.org Cell Phone: 917-922-0943

Proof of Town of Warwick Residency of Responsible Party: ☒ Driver's License ☐ Utility Bill

Name of Organization (if Applicable): WICKHAM WORKS

Name of Organization's Director(s)/Officer(s): KENNETH EICHER, BOARD CHAIR

Organization's Phone: 329-222-4930 Email Address: info.wickham-works@gmail.com

Mailing Address of Organization: 3 FORESTER AVE, #8, WARWICK, NY 10990

Physical Address of Organization: Warwick Valley Community Center, 11 Hamilton Ave, Warwick

SECTION 4: EVENT INFORMATION

Maximum Number of People Intended at the Event: 80

** If greater than 200 people, at any given time DO NOT complete this form. See instructions.*

of Adults: 30 # of People Under 18: 50

Expected Number of Vehicles Intended at the Event: 10

Please explain the parking plan for the event: Monarch Festival participants will be encouraged to walk down from Park Ave. School

WILL YOUR EVENT INCLUDE:

CHECK YES OR NO

Greater than 200 people at any given time <i>If yes, DO NOT complete this form. Please complete form: FACILITY USE PERMIT APPLICATION FOR GATHERINGS GREATER THAN 200 PEOPLE</i>	Yes _____ No <u>✓</u>
Music / Loudspeakers / Sound System <i>If yes, explain:</i> <u>Portable bluetooth speakers at Pavilion only</u> <i>Location of Music/Loud Speakers/ Sounds System:</i> _____	Yes <u>✓</u> No _____
Parade, walk, road race, etc. <i>Request must include in writing a clear layout of the intended route AND a letter from the Warwick Police Department approving the route and police resources.</i>	Yes _____ No <u>✓</u>
Tent(s) <i>Include a map detailing the placement of the tent(s).</i> Date & time tent will be set up: _____ Date & time tent will be removed: _____ <u>Possibly one or two pop-ups</u>	Yes <u>✓</u> No _____

RVs, Campers, Food Trucks, etc. <i>If yes, explain:</i> _____	Yes _____ No <input checked="" type="checkbox"/>
Admission Fee to Be Charged <i>If yes, please list the admission fee:</i> _____	Yes _____ No <input checked="" type="checkbox"/>
Alcohol <i>Host Liquor Liability Insurance is required.</i>	Yes _____ No <input checked="" type="checkbox"/>
Food will be served or sold <i>If yes, explain the method of food distribution and disposal of trash:</i> <u>Potluck Picnic - bring your own</u>	Yes _____ No <input checked="" type="checkbox"/>
<small>*A permit is required from the Orange County Department of Health when offering or selling any food to the public. It is the applicant's responsibility to contact the Orange County Department of Health to obtain necessary permits. Contact the Orange County Department of Health for further information. *Applicants must provide a drawing to scale showing where the food will be served/sold and where trash will be disposed.</small>	
Rides: Mechanical Carnival Rides, Bounce House, Inflatable Slide, etc. <i>If yes, explain:</i> _____ <i>Additional contract(s) and/or insurance is required.</i>	Yes _____ No <input checked="" type="checkbox"/>
Animals: (Example, horses, pony rides, petting zoo, etc.) <i>If yes, explain:</i> _____	Yes _____ No <input checked="" type="checkbox"/>
Portable Toilets <i>Placement of portable toilets must be detailed on the map that is required with the application.</i>	Yes _____ No <input checked="" type="checkbox"/>
Other <i>Please explain:</i> _____	Yes _____ No <input checked="" type="checkbox"/>

SPECIAL REQUESTS:
CHECK YES OR NO

Road Closure <i>List road(s):</i> _____ <i>Closed between the hours of</i> _____ <i>and</i> _____ <i>Number of 'No Parking' meter bags requested, if applicable:</i> _____	Yes _____ No <input checked="" type="checkbox"/>
Use of Village-owned tables and chairs <i>Veterans Memorial Park Pavilion Only. No. of Tables</i> <u>5</u> <i>No. of Chairs</i> <u>40</u>	Yes <input checked="" type="checkbox"/> No _____
Use of Electricity	Yes <input checked="" type="checkbox"/> No _____
Memorial Park Field Lights - The Daniel Prial Field/Football Field <i>Additional fee required for use of field lights.</i>	Yes _____ No <input checked="" type="checkbox"/>

Use of Memorial Park Pavilion Lights	Yes _____ No <u>✓</u>
Use of Village of Warwick Restrooms <i>Memorial Park and Stanley Deming Park only.</i>	Yes <u>✓</u> No _____
Other <i>Please explain: _____</i>	Yes _____ No <u>✓</u>

SECTION 5: FEES/SECURITY DEPOSIT

Fees and Security Deposit are Due Upon Application / Checks payable to: The Village of Warwick

☒ \$200 Security Deposit - (***Must be a Separate Payment***)

☐ Memorial Park Field Lights -

The Daniel Prial Field / Football Field (circle one) - \$10 per day or \$300 per season

☐ \$200 Security Deposit - (***Must be a Separate Payment***)

TOTAL FEES: \$ 200 (excluding security deposit)

SECTION 6: INDEMNITY & HOLD HARMLESS

The undersigned is over 21 years of age and has read this form and attached regulations and agrees to comply with them. He/she agrees to be responsible to the Village of Warwick for the use and care of the facilities. He/she, on behalf of WICKHAM WORKS (Name of Organization) does hereby covenant and agree to defend, indemnify and hold harmless the Village of Warwick from and against any and all liability, loss, damages, claims, or actions (including costs and attorneys' fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of or in connection with the actual or proposed use of Village's property, facilities and/or services by WICKHAM WORKS (Name Organization).

MELISSA SHAW-SMITH
Printed Name of Applicant/Responsible Party

M. Shaw-Smith
Signature of Applicant/Responsible Party

5-9-25
Date

Office Use Only:

Security Deposit Check # 562

Fees Received NA

DPW Pre-Approval NA

Certificate of Insurance ✓

Park Map(s) ✓

Facility Use Calendar ✓

Host Liquor Liability NA

Police Dept. Approval NA

Parade Calendar NA

Permit Holder. Applicants are urged to bring extra plastic garbage bags to facilitate cleanup.

17. Any organization with youths under 18 years old requires the presence of adequate adult supervision at all times.
18. Supervision and parking are the responsibility of the applicant organization/individual.
19. Permits may be revoked at any time.
20. All posted rules must be adhered to.
21. No field or building alterations (lining of fields, erecting goal posts or structures, etc.) are allowed without prior approval.
22. The emergency telephone number for police is 911 or 986-5000; fire and ambulance 911.
23. Prior to the start of the event, an announcement should be made to your group regarding emergency evacuation procedures, for example pointing out posted procedures, direction for exiting, procedures for emergency helicopter landing, etc. Need pamphlet to hand out to applicants.
24. In the event of an accident, please notify the Village Clerk at (845) 986-2031 before the end of the next business day.
25. The Village of Warwick does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations.

INDEMNITY & HOLD HARMLESS

FACILITY USER does hereby covenant and agree to defend, indemnify, and hold harmless the Village of Warwick from and against any and all liability, loss, damages, claims, or actions (including costs and attorneys' fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of or in connection with the actual or proposed use of the Village of Warwick property, facilities and/or services.

I have read and understand the Facilities Use Requirements:

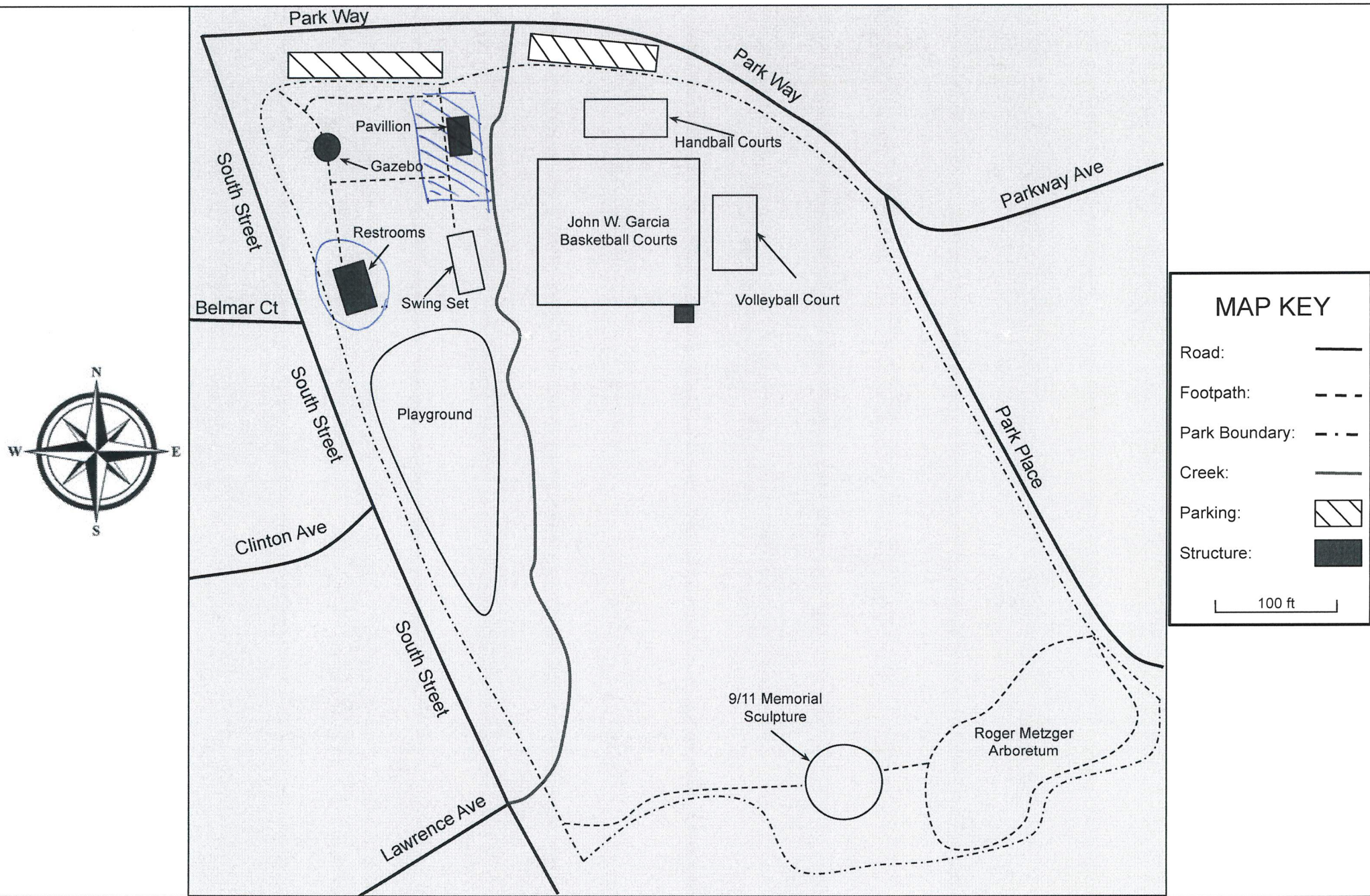
MELISSA SHAW-SMITH

Printed Name of Applicant/Responsible Party

M. Shaw-Smith

Signature of Applicant/Responsible Party

Date 5-9-25



DATE: May 29, 2025

TO: Warwick Village Board

FROM: Deborah A. Eurich, IAO, Assessor



RE: Application for Corrected Tax Bill, 232-8-1.-1, 7 Cowdrey Street

Kindly approve the attached application for corrected tax bill.

Mr. Coscette's Veteran's exemption application, originally filed October 15, 2024 was approved for Combat Veteran's exemption for 2025, however it was erroneously entered on the data file on the 2023 roll year. After verifying a data item on the 2023 file, I apparently did not switch back to the 2025 roll year to enter the exemption, and the RPS software allowed the change to a prior year file.

The total assessment for the property is 25,000. The taxable assessment for the parcel should be 22,183 for Village tax purposes, based on the 2,817 reduction for Combat Veteran's exemption.

I have attached a copy of the corrected tax roll application, corrected calculations, tax bill, exemption application and audit report showing the error for your information.

Please don't hesitate to contact me with any questions.



NEW YORK STATE DEPARTMENT OF TAXATION & FINANCE
OFFICE OF REAL PROPERTY TAX SERVICES

APPLICATION FOR CORRECTED VILLAGE TAX ROLL
FOR THE YEAR 20 25

Part 1: To be completed in duplicate by Applicant. APPLICANT MUST SUBMIT BOTH COPIES TO VILLAGE ASSESSOR (OR CHAIRMAN OF VILLAGE BOARD OF ASSESSORS). NOTE: To be used only prior to expiration of warrant for collection. For wholly exempt parcel, attach statement signed by assessor or majority of board of assessors substantiating that assessor(s) have obtained proof that parcel should have been granted tax exempt status on tax roll. If parcel is located in a village that has ceased to be an assessing unit, you must instead complete form RP-554 and submit it to the county director of real property tax services.

Coscette Income Only Trust

Ia. Name of Owner

Day 845 238-5467

Evening ()

2. Telephone Number

7 Cowdrey St

Warwick, NY 10990

Ib. Mailing Address

7 Cowdrey St

3. Parcel Location (if different than Ib.)

232-8-1.-1

4. Description of real property as shown on tax roll or tax bill (Include tax map designation)

5. Account No. 232-8-1.-1
(as it appears on tax bill)

6. Amount of taxes currently billed \$1,106.98

7. I hereby request a correction of real property tax levied by the village, for the following reasons (use additional sheets if necessary).
Timely filed and approved veterans exemption not applied to file correctly

May 29, 2025
Date

Mari E Cosatte
Signature of Applicant

PART II: For use by VILLAGE ASSESSOR'S USE: Village Assessor shall attach written report (including documentation of error in essential fact) and recommendation. Indicate type of error and paragraph of subdivision 2, 3 or 7 of Section 550 under which error falls.

Date application received: 5/29/2025

Period of warrant for collection of taxes: June 2025

Last day for collection of taxes without interest: June 30, 2025

Recommendation: ☐ Approve application* ☐ Deny Application

5/29/25
Date

[Signature]
Signature of Assessor

PART III: For Village Board of Trustees' use:

APPLICATION APPROVED

Amount of taxes currently billed: \$ _____

Notice of approval mailed to applicant on (enter date): _____

Corrected tax: \$ _____

Order transmitted to collecting officer on (enter date): _____

APPLICATION DENIED

Reasons: _____

Date

Signature of Chief Executive Officer
or Official Designated by Resolution

Part IV. For use by COLLECTING OFFICER:

Payment may be made without interest and penalties ONLY if (1) the application has been filed with the Village Assessor during the period when taxes may be paid without interest (see "Date application received" in Part II of this form) AND (2) the corrected tax is paid within eight days of the date on which the notice of approval is mailed to the applicant (see Part III of this form). If either of these conditions is not satisfied, interest and/or penalties must be paid on the corrected tax.

Order from village board of trustees received:

_____ Date

Corrected tax due: \$ _____

Interest and penalties (if applicable): \$ _____

Total corrected tax due: \$ _____

Tax roll corrected:

_____ Date

Tax bill corrected:

_____ Date

Application and Order annexed to tax roll:

_____ Date

Payment of corrected tax received:

_____ Date

_____ Date

_____ Signature of Collecting Officer

232-8-1.-1 - Coscette Income Only Trust - Application for Corrected Tax Bill

2025 Actual Tax Bill:

Description	Taxable Asmt	Rate	Tax Amt
General Tax	25,000	38.60733300	\$965.18
Sewer Improvement	4,000	16.78187900	\$67.13
Warwick Water	4,000	18.66670300	\$74.67
			\$1,106.98

Corrected Tax Bill:

Description	Taxable Asmt	Rate	Tax Amt
General Tax	22,183	38.60733300	\$856.43
Sewer Improvement	4,000	16.78187900	\$67.13
Warwick Water	4,000	18.66670300	\$74.67
			\$998.23

Actual Tax Bill	\$1,106.98
Corrected Tax Bill	\$998.23
Difference to Refund	\$108.75

Collection: Village 2025

Fiscal Year Start: 6/1/2025

Fiscal Year End: 5/31/2026

Warrant Date: 6/1/2025

Total Tax Due (minus penalties & interest) \$1,106.98

Tax Bill #	SWIS	Tax Map #	Status
002404	335405	232-8-1.-1	Unpaid
Address	Municipality	School	
7 Cowdrey St	Village of Warwick	Warwick Csd	

Owners

Coscette Income Only
Coscette Patrick J Trustee
7 Cowdrey St
Warwick, NY 10990

Property Information

Roll Section: 1
Property Class: 1 Family Res
Lot Size: 0.01 x 0.01

Assessment Information

Full Market Value: 280900.00
Total Assessed Value: 25000.00
Uniform %: 8.90

Description	Tax Levy	Percent Change	Taxable Value	Rate	Tax Amount
General Tax	3561689	3.2000	25000.000	38.60733300	\$965.18
Sewer Improvement	428000	0.0000	4000.000	16.78187900	\$67.13
Warwick Water	476070	0.0000	4000.000	18.66670300	\$74.67

Total Taxes: \$1,106.98

Mail Payments To:

Village of Warwick
Attn: Village Clerk
77 Main Street/P.O. Box 369 Warwick, NY. 10990



Application for Alternative Veterans Exemption from Real Property Taxation

RP-458-a
(11/20)

RECEIVED
06-15-2024
VILLAGE OF WARWICK
CLERK'S OFFICE

See instructions, Form RP-458-a-I, for assistance in completing this form.

1. Name(s) of owner(s) PATRICK H. COSCETTE MARIE E. COSCETTE PATRICK J COSETTE COSCETTE TRUST		
2. Mailing address of owner(s) (number and street or PO box) 7 COWDREY STREET		
3. Location of property (street address) 7 COWDREY ST.		
City, village, or post office WARWICK	State NY	ZIP code 10990
City, town, or village WARWICK	State NY	ZIP code 10990
Daytime contact number 845-238-5467	Evening contact number cell-845-500-3714	Date of purchase of real property 1-10-2012
Email address ciao4@optonline.net		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 232-8-1-1
Name(s) of any non-owner spouse(s)		
Address(es) of primary residence(s) if different from above:		

4. Is the owner a veteran who served in the active military, naval, or air service of the United States? Yes ☒ No ☐
If No, indicate the relationship of the owner to veteran who rendered such service: _____
If Yes, is the veteran also the unmarried surviving spouse of a veteran? Yes ☐ No ☒
VS
5. Indicate the branch of veteran's service and dates of active service: **NAVY 3/26/79- 3/24/82**
Attach written evidence.
6. Was the veteran discharged or released from active service under honorable conditions? Yes ☒ No ☐
If Yes, attach written evidence.
If No, did the veteran receive a letter from the New York State Division of Veterans' Services stating that the veteran now meets the character discharge criteria for all of the benefits and services listed in the Restoration of Honor Act? If Yes, attach a copy of the letter Yes ☐ No ☐
7. Did the veteran serve in a combat zone or combat theater? Yes ☒ No ☐
If Yes, where did the veteran serve and when was that service performed? **AFGHANISTAN 3/2011-7/2013**
Attach written evidence.
8. Did the veteran receive a compensation rating from the United States Veteran's Administration or from the United States Department of Defense as a result of a service connected disability? Yes ☐ No ☒
If Yes, what is (was) the veteran's compensation rating? _____
Attach written evidence showing the date the rate was established.
Mark an X in the box if the rating is permanent: ☐
If No, did the veteran die in service of a service connected disability or in the line of duty while serving during wartime? If Yes, attach written evidence Yes ☐ No ☒
9. Is the property the primary residence of the veteran, unmarried surviving spouse of the veteran, or the Gold Star parent? Yes ☒ No ☐
If No, is the veteran, unmarried surviving spouse of the veteran, or the Gold Star parent the owner of the property and absent from the property due to medical reasons or institutionalization? Yes ☐ No ☐
Explain: _____

10. Is the property used exclusively for residential purposes? Yes ☒ No ☐
 If No, describe the non-residential use of this property and state what portion is so used: _____

11. Date the title to this property was acquired: 11/01/2012. Attach copy of deed.

12. Has the owner(s) ever received, or is the owner(s) now receiving a veterans exemption based on eligible funds on property in New York State? Yes ☐ No ☒

If Yes, the amount of eligible funds used in the purchase was \$ _____

Does that eligible funds exemption cover the same property listed on page 1? Yes ☐ No ☐

If No, enter the location of this property in New York State:

Street address		
Village	City/town	School district

If Yes, are you submitting this application only because you are seeking a school tax exemption?
 (Mark Yes if you want to apply for a new school tax exemption without having any changes made to your existing eligible funds exemption; mark No if you want your existing eligible funds exemption to be replaced with the alternative veterans exemption.) Yes ☐ No ☐

Certification

I (we) hereby certify that all statements made on this application are true and correct to the best of my (our) knowledge and belief and I (we) understand that any willful false statement made herein will subject me (us) to the penalties prescribed in the Penal Law.

All owners must sign this application

Signature of owner(s) <i>[Signature]</i>	Date <u>10/15/24</u>
Signature of owner(s) <i>Marie E Corcette</i>	Date <u>10/15/24</u>

Signature of owner(s)	Date
Signature of owner(s)	Date

For Assessor's Use Only

Alternative veterans exemption (RP-458-a)	Assessment	Period of war, active service, or expeditionary medal recipient (15% or ceiling max.) approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Combat zone service (including expeditionary medal) (10% or ceiling max.) approved <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Service connected disability rating _____ (× 50% or ceiling max.) approved <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Total
Village		<u>15</u>	<u>10</u>		<u>25</u>
Town/City					
County					
School district					

Name of assessor (please print)	
Signature of assessor <i>[Signature]</i>	Date <u>12/3/24</u>

Parcel Id 335405 15122

221-1-88

User Name	Table Name	Column Name	Old Value	New Value	Date Changed
vil	EXEMPT	EX_VILLAGE_FLAG	1	DELETE: no data inserted	12/3/2024 21:45:12
vil	EXEMPT	EX_VILLAGE_FLAG	INSERT:no data deleted	1	12/3/2024 21:45:12
vil	EXEMPT	ROLL_YR	2025	DELETE: no data inserted	12/3/2024 21:45:12
vil	EXEMPT	ROLL_YR	INSERT:no data deleted	2025	12/3/2024 21:45:12
vil	EXEMPT	ROLL_YR	INSERT:no data deleted	2025	12/3/2024 21:45:12
vil	EXEMPT	UNIT_NBR	INSERT:no data deleted	000000	12/3/2024 21:45:12
vil	EXEMPT	UNIT_NBR	000000	DELETE: no data inserted	12/3/2024 21:45:12
vil	EXEMPT	UNIT_NBR	INSERT:no data deleted	000000	12/3/2024 21:45:12

Parcel Id 335405 15649

232-8-1.-1

User Name	Table Name	Column Name	Old Value	New Value	Date Changed
vil	EXEMPT	EX_AMT	0	3255	12/3/2024 21:55:10
vil	EXEMPT	EX_CODE	INSERT:no data deleted	41131	12/3/2024 21:55:10
vil	EXEMPT	EX_INIT_YR	INSERT:no data deleted	2023	12/3/2024 21:55:10
vil	EXEMPT	EX_NUM	INSERT:no data deleted	1	12/3/2024 21:55:10
vil	EXEMPT	EX_PCT	INSERT:no data deleted	25	12/3/2024 21:55:10
vil	EXEMPT	EX_VILLAGE_FLAG	INSERT:no data deleted	1	12/3/2024 21:55:10
vil	EXEMPT	ROLL_YR	INSERT:no data deleted	2023	12/3/2024 21:55:10
vil	EXEMPT	UNIT_NBR	INSERT:no data deleted	000000	12/3/2024 21:55:10

to
correct

DATE: May 29, 2025

TO: Warwick Village Board

FROM: Deborah A. Eurich, IAO, Assessor



RE: Application for Corrected Tax Bill, 210-14-7, 12 Howe Street

Kindly approve the attached application for corrected tax bill.

Mr. Hallik's Veteran's renewal exemption application for Change in Service-Connected Disability Rating, originally filed October 29, 2024 was approved for 100% disability rating for 2025, however it was erroneously entered on the data file on the 2023 roll year. After verifying a data item on the 2023 file, I apparently did not switch back to the 2025 roll year to enter the exemption, and the RPS software allowed the change to a prior year file.

The total assessment for the property is 33,000. The taxable assessment for the parcel should be 24,549 for Village tax purposes, based on the 2,817 reduction for Combat Veteran's exemption (already reflected on the bill) and a 5,634 reduction for Disability.

I have attached a copy of the corrected tax roll application, corrected calculations, tax bill, exemption application and audit report showing the error for your information.

Please don't hesitate to contact me with any questions.



NEW YORK STATE DEPARTMENT OF TAXATION & FINANCE
OFFICE OF REAL PROPERTY TAX SERVICES

APPLICATION FOR CORRECTED VILLAGE TAX ROLL
FOR THE YEAR 20 25

Part 1: To be completed in duplicate by Applicant. APPLICANT MUST SUBMIT BOTH COPIES TO VILLAGE ASSESSOR (OR CHAIRMAN OF VILLAGE BOARD OF ASSESSORS). NOTE: To be used only prior to expiration of warrant for collection. For wholly exempt parcel, attach statement signed by assessor or majority of board of assessors substantiating that assessor(s) have obtained proof that parcel should have been granted tax exempt status on tax roll. If parcel is located in a village that has ceased to be an assessing unit, you must instead complete form RP-554 and submit it to the county director of real property tax services.

Jason Allen & Janell Hallik

Ia. Name of Owner

Day 845, 544-5223

Evening ()

2. Telephone Number

12 Howe St

Warwick, NY 10990

Ib. Mailing Address

12 Howe St

3. Parcel Location (if different than Ib.)

210-14-7

4. Description of real property as shown on tax roll or tax bill (Include tax map designation)

5. Account No. 210-14-7

(as it appears on tax bill)

6. Amount of taxes currently billed \$1,498.51

7. I hereby request a correction of real property tax levied by the village, for the following reasons (use additional sheets if necessary).

Approved 100% disability rating change to veterans exemption not applied to file correctly

5/29/25

Date

Janell Hallik

Signature of Applicant

PART II: For use by VILLAGE ASSESSOR'S USE: Village Assessor shall attach written report (including documentation of error in essential fact) and recommendation. Indicate type of error and paragraph of subdivision 2, 3 or 7 of Section 550 under which error falls.

Date application received: 5/29/2025

Period of warrant for collection of taxes: June 2025

Last day for collection of taxes without interest: June 30, 2025

Recommendation: ☐ Approve application* ☐ Deny Application

5/29/2025

Date

[Signature]

Signature of Assessor

PART III: For Village Board of Trustees' use:

APPLICATION APPROVED

Amount of taxes currently billed: \$ _____

Notice of approval mailed to applicant on (enter date): _____

Corrected tax: \$ _____

Order transmitted to collecting officer on (enter date): _____

APPLICATION DENIED

Reasons: _____

Date

Signature of Chief Executive Officer
or Official Designated by Resolution

Part IV. For use by COLLECTING OFFICER:

Payment may be made without interest and penalties ONLY if (1) the application has been filed with the Village Assessor during the period when taxes may be paid without interest (see "Date application received" in Part II of this form) AND (2) the corrected tax is paid within eight days of the date on which the notice of approval is mailed to the applicant (see Part III of this form). If either of these conditions is not satisfied, interest and/or penalties must be paid on the corrected tax.

Order from village board of trustees received:

Corrected tax due: \$ _____

Date

Interest and penalties (if applicable): \$ _____

Total corrected tax due: \$ _____

Tax roll corrected:

Date

Tax bill corrected:

Date

Application and Order annexed to tax roll:

Date

Payment of corrected tax received:

Date

Date

Signature of Collecting Officer

210-14-7 - Hallik - Application for Corrected Tax Bill

2025 Actual Tax Bill:

Description	Taxable Asmt	Rate	Tax Amt
General Tax	30,183	38.60733300	\$1,165.29
Sewer Improvement	9,400	16.78187900	\$157.75
Warwick Water	9,400	18.66670300	\$175.47
			<u>\$1,498.51</u>

Corrected Tax Bill:

Description	Taxable Asmt	Rate	Tax Amt
General Tax	24,549	38.60733300	\$947.77
Sewer Improvement	9,400	16.78187900	\$157.75
Warwick Water	9,400	18.66670300	\$175.47
			<u>\$1,280.99</u>

Actual Tax Bill	\$1,498.51
Corrected Tax Bill	<u>\$1,280.99</u>
Difference	\$217.52

Collection: **Village 2025**

Fiscal Year Start: 6/1/2025

Fiscal Year End: 5/31/2026

Warrant Date: 6/1/2025

Total Tax Due (minus penalties & interest) \$1,498.51

Tax Bill #	SWIS	Tax Map #	Status
000805	335405	210-14-7	Unpaid
Address	Municipality	School	
12 Howe St	Village of Warwick	Warwick Csd	

Owners

Hallik Jason Allen
Hallik Janell
12 Howe St
Warwick, NY 10990

Property Information

Roll Section: 1
Property Class: 1 Family Res
Lot Size: 50.00 x 184.00

Assessment Information

Full Market Value: 370800.00
Total Assessed Value: 33000.00
Uniform %: 8.90

Exemption	Amount
VET COM CT	2817.00

Description	Tax Levy	Percent Change	Taxable Value	Rate	Tax Amount
General Tax	3561689	3.2000	30183.000	38.60733300	\$1,165.29
Sewer Improvement	428000	0.0000	9400.000	16.78187900	\$157.75
Warwick Water	476070	0.0000	9400.000	18.66670300	\$175.47

Total Taxes: \$1,498.51

Mail Payments To:

Village of Warwick
Attn: Village Clerk
77 Main Street/P.O. Box 369 Warwick, NY. 10990



Department of Taxation and Finance
Office of Real Property Tax Services

RECEIVED

OCT 29 2024

RP-458-a-Dis (1/16)

Renewal Application for Alternative Veterans Exemption from Real Property Taxation Based on Change in Service-Connected Disability Compensation Rating

VILLAGE OF WARWICK
CLERK'S OFFICE

Name(s) of owner(s) Jason & Janell Hallik		
Mailing address of owner(s) (number and street or PO box) 12 Howe St. Warwick 10990		Location of property (street address) 12 Howe St. Warwick, NY 10990
City, village, or post office Warwick	State NY	ZIP code 10990
Daytime contact number (845) 544-5223	Evening contact number (845) 544-5223	Date of purchase of real property 04-20-200
E-mail address Janellehallik@gmail.com		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 210-14-7

Eligibility

- Does the veteran currently* have a service-connected disability compensation rating from the United States Veteran's Administration or Department of Defense? Yes ☒ No ☐
If the rating has changed, attach written evidence of the new rating. Indicate prior rating: 0 and new rating: 100
Is this new compensation rating permanent? Yes ☒ No ☐
- If the veteran is deceased, fill out the date of death, and attach written evidence of the veteran's compensation rating at the time of death Date of veteran's death

Certification

I (we) hereby certify that all statements made on this application are true and correct to the best of my knowledge and belief and I (we) understand that any willful false statement made herein will subject me (us) to the penalties prescribed therefore in the Penal Law.

All owners must sign application

Signature of owner(s) Hallik	Date 10/29/24
Signature of owner(s) Janell Hallik	Date 10/29/24

Signature of owner(s)	Date
Signature of owner(s)	Date

Instructions

General instructions

When the alternative veterans exemption is granted based in part on a service-connected disability rating received from the United States Veterans Administration or the United States Department of Defense, evidence of continued exemption eligibility must be provided by the property owner if the disability rating increases or decreases.

The change in percentage of disability rating must be certified on this form (RP-458-a-Dis) and filed with the assessor prior to taxable status date in order for the exemption to be properly adjusted. Where property is located in a village which assesses, a separate renewal application should be filed with both the village and town assessors.

Taxable status date for most towns is March 1. Westchester County towns have either a May 1 or June 1 taxable status date; contact the assessor. In Nassau county, the taxable status date for towns is January 2. Taxable status date for most villages which assess is January 1; however, the village clerk should be consulted to insure certainty. Charter provisions control the taxable status date in cities, but in the City of New York, applications for this exemption may be filed on or before March 15. To ascertain the correct taxable status dates in cities, inquiry should be made of city assessors.



NYS BOARD OF REAL PROPERTY SERVICES
APPLICATION FOR ALTERNATIVE VETERANS EXEMPTION
FROM REAL PROPERTY TAXATION

(General information and instructions for completing this form are contained in Form RP-458-a-Ins)

1. Name and telephone no. of owner(s)

JASON HALLIK

2. Mailing address of owner(s)

12 Howe ST
WARWICK NY 10990

Day No. (845) 544 1911

Evening No. ()

3. Location of property (see instructions)

12 Howe ST

Street address

WARWICK NY 10990

City/Town

WARWICK
Village (if any)

RECEIVED

OCT 07 2009

Property identification (see tax bill or assessment roll)

VILLAGE OF WARWICK
VILLAGE CLERKS OFFICE

Tax map number or section/block/lot

210-14-7

4. Is the owner a veteran who served in the active military, naval or air service of the United States? ☒ Yes ☐ No
If No, indicate the relationship of the owner to veteran who rendered such service: _____
If Yes, is the veteran also the unmarried surviving spouse of a veteran? ☐ Yes ☐ No

5. Indicate branch of veterans service and dates of active service: U.S. MARINE CORPS
(Attach written evidence)

6. Was the veteran discharged or released from the active service under honorable conditions? ☒ Yes ☐ No
(Attach written evidence)

7. Did the veteran serve in a combat zone or combat theater? ☒ Yes ☐ No
If Yes, where did the veteran serve and when was such service performed? IRAQ
(Attach written evidence)

8. Has the veteran received, or did the veteran receive prior to his/her death, a compensation rating from the United States Veteran's Administration or from the United States Department of Defense as a result of a service connected disability? ☐ Yes ☐ No
If Yes, what is (was) the veteran's compensation rating? Add 100% for 2025
(Attach written evidence showing the date such rate was established)

☐ check if rating is permanent?

If No, did the veteran die in service of a service connected disability or in the line of duty while serving during wartime? ☐ Yes ☐ No (Attach written evidence)

9. Is the property the primary residence of the veteran, unmarried surviving spouse of the veteran or Gold Star parent? ☐ Yes ☐ No
If No, is the veteran, unmarried surviving spouse of the veteran or Gold Star parent the owner of the property and absent from the property due to medical reasons or institutionalization? ☐ Yes ☐ No
Explain: _____

10. Is the property used exclusively for residential purposes? ☒ Yes ☐ No
If No, describe the non-residential use of this property and state what portion is so used. _____

Parcel Id 335405 3223

207-1-

User Name	Table Name	Column Name	Old Value	New Value	Date Changed
vil	EXEMPT	EX_AMT	0	5340	12/3/2024 21:47:50
vil	EXEMPT	EX_AMT	0	2670	12/3/2024 21:47:50
vil	EXEMPT	EX_CODE	INSERT:no data deleted	41131 ✓	12/3/2024 21:47:50
vil	EXEMPT	EX_CODE	INSERT:no data deleted	41141 ✓	12/3/2024 21:47:50
vil	EXEMPT	EX_INIT_YR	INSERT:no data deleted	2025 ✓	12/3/2024 21:47:50
vil	EXEMPT	EX_INIT_YR	INSERT:no data deleted	2025 ✓	12/3/2024 21:47:50
vil	EXEMPT	EX_NUM	INSERT:no data deleted	1	12/3/2024 21:47:50
vil	EXEMPT	EX_NUM	INSERT:no data deleted	1	12/3/2024 21:47:50
vil	EXEMPT	EX_PCT	INSERT:no data deleted	50 ✓	12/3/2024 21:47:50
vil	EXEMPT	EX_PCT	INSERT:no data deleted	25 ✓	12/3/2024 21:47:50
vil	EXEMPT	EX_VILLAGE_FLAG	INSERT:no data deleted	1	12/3/2024 21:47:50
vil	EXEMPT	EX_VILLAGE_FLAG	INSERT:no data deleted	1	12/3/2024 21:47:50
vil	EXEMPT	ROLL_YR	INSERT:no data deleted	2025	12/3/2024 21:47:50
vil	EXEMPT	ROLL_YR	INSERT:no data deleted	2025	12/3/2024 21:47:50
vil	EXEMPT	UNIT_NBR	INSERT:no data deleted	000000	12/3/2024 21:47:50
vil	EXEMPT	UNIT_NBR	INSERT:no data deleted	000000	12/3/2024 21:47:50

ok

Parcel Id 335405 3653

210-14-7

User Name	Table Name	Column Name	Old Value	New Value	Date Changed
vil	EXEMPT	EX_AMT	0	6510	12/3/2024 21:53:35
vil	EXEMPT	EX_AMT	0	3255	12/3/2024 21:53:35
vil	EXEMPT	EX_AMT	3255	0	12/3/2024 21:53:35
vil	EXEMPT	EX_CODE	INSERT:no data deleted	41141	12/3/2024 21:53:35
vil	EXEMPT	EX_INIT_YR -	INSERT:no data deleted	2023 X	12/3/2024 21:53:35
vil	EXEMPT	EX_NUM	INSERT:no data deleted	1	12/3/2024 21:53:35
vil	EXEMPT	EX_PCT	INSERT:no data deleted	100	12/3/2024 21:53:35
vil	EXEMPT	EX_VILLAGE_FLAG	INSERT:no data deleted	1	12/3/2024 21:53:35
vil	EXEMPT	ROLL_YR -	INSERT:no data deleted	2023 X	12/3/2024 21:53:35
vil	EXEMPT	UNIT_NBR	INSERT:no data deleted	000000	12/3/2024 21:53:35
vil	EXEMPT	EX_ADJ_CO	3798	DELETE: no data inserted	12/3/2024 21:53:35
vil	EXEMPT	EX_ADJ_CO	INSERT:no data deleted	3798	12/3/2024 21:53:35
vil	EXEMPT	EX_ADJ_TOWN	3255	DELETE: no data inserted	12/3/2024 21:53:35
vil	EXEMPT	EX_ADJ_TOWN	INSERT:no data deleted	3255	12/3/2024 21:53:35
vil	EXEMPT	EX_ADJ_VLG	INSERT:no data deleted	3744	12/3/2024 21:53:35
vil	EXEMPT	EX_ADJ_VLG	3744	DELETE: no data inserted	12/3/2024 21:53:35
vil	EXEMPT	EX_AMT	3255	DELETE: no data inserted	12/3/2024 21:53:35
vil	EXEMPT	EX_AMT	INSERT:no data deleted	3255	12/3/2024 21:53:35
vil	EXEMPT	EX_AMT_CO	INSERT:no data deleted	3255	12/3/2024 21:53:35
vil	EXEMPT	EX_AMT_CO	3798	DELETE: no data inserted	12/3/2024 21:53:35
vil	EXEMPT	EX_AMT_TOWN	3255	DELETE: no data inserted	12/3/2024 21:53:35
vil	EXEMPT	EX_AMT_TOWN	INSERT:no data deleted	3255	12/3/2024 21:53:35
vil	EXEMPT	EX_AMT_VLG	3744	DELETE: no data inserted	12/3/2024 21:53:35
vil	EXEMPT	EX_AMT_VLG	INSERT:no data deleted	3255	12/3/2024 21:53:35
vil	EXEMPT	EX_CODE	41131	DELETE: no data inserted	12/3/2024 21:53:35
vil	EXEMPT	EX_CODE	INSERT:no data deleted	41131	12/3/2024 21:53:35
vil	EXEMPT	EX_INIT_YR	2010	DELETE: no data inserted	12/3/2024 21:53:35
vil	EXEMPT	EX_INIT_YR	INSERT:no data deleted	2010	12/3/2024 21:53:35
vil	EXEMPT	EX_NUM	1	DELETE: no data inserted	12/3/2024 21:53:35
vil	EXEMPT	EX_NUM	INSERT:no data deleted	1	12/3/2024 21:53:35
vil	EXEMPT	EX_PCT	25	DELETE: no data inserted	12/3/2024 21:53:35
vil	EXEMPT	EX_PCT	INSERT:no data deleted	25	12/3/2024 21:53:35

to correct