

**CITY OF MEDINA
AGENDA FOR COUNCIL MEETING**

November 14, 2016
Medina City Hall
7:30 p.m.

Call to Order.

Public Hearings.

- 1) To consider the Planning Commission Recommendation to amend the Special Planning District 1 (SPD-1) Design Guidelines for the South Court Senior Village development.

- 2) To consider the Planning Commission Recommendation to rezone 1011 Wadsworth Road from R-2, Medium Density Residential to R-4, Multi-Family Residential.

Roll Call.

Reading of minutes. (October 24, 2016 & October 27, 2016-Special)

Reports of standing committees.

Requests for council action.

Reports of municipal officers.

Notices, communications and petitions.

Unfinished business.

Introduction of visitors.

(speakers limited to 5 min.)

Introduction and consideration of ordinances and resolutions.

Ord. 151-16

An Ordinance authorizing the Mayor to enter into a renewal contract with United Healthcare for healthcare insurance for the employees of the City of Medina.

Ord. 152-16

An Ordinance authorizing the Mayor to advertise for competitive bids and to award a contract to the successful bidder for a one year supply of the various kinds of maintenance materials needed for the streets and water lines, including but not limited to salt, the chemicals for use in the treatment of water, and water meters to be used by the various departments of the City of Medina, Ohio.

Ord. 153-16

An Ordinance authorizing the increase of the expenditure to Your Construction for the Private Owner Rehabilitation Project at 3881 Claythorne Place, Brunswick as part of the PY14 CHIP Grant.

(emergency clause requested)

Ord. 154-16

An Ordinance authorizing the Mayor to solicit Requests for Proposals (RFP's) for liability and property insurance for the City of Medina.

Ord. 155-16

An Ordinance of the Council of the City of Medina, Ohio, certifying that when a municipal obligation was incurred sums were lawfully appropriated in the funds to satisfy the obligation and sufficient sums currently exist to satisfy this obligation according to the attached sheet(s).
(emergency clause requested)

Ord. 156-16

An Ordinance authorizing the expenditure of \$56,000.00 to CT Consultants for the soft coasts related to the implementation and administration of the 2014 Downtown Revitalization Grant.
(emergency clause requested)

Ord. 157-16

An Ordinance amending Ordinance No. 165-15, passed December 22, 2015. (Amendments to 2016 Budget)

Council comments.

Adjournment.

MEDINA CITY COUNCIL
Monday, October 24th, 2016

Opening:

Medina City Council met in regular, open session on Monday, October 24, 2016. The meeting was called to order at 7:30 p.m. by President of Council John Coyne who led the Pledge of Allegiance.

Roll Call:

The roll was called with the following members of Council present P. Rose, J. Shields, D. Simpson, J. Coyne, B. Hilberg, M. Kolesar, and B. Lamb.

Also present were the following members of the Administration: Mayor Dennis Hanwell, Keith Dirham, Nino Piccoli, Patrick Patton, Chief Berarducci, Chief Painter, Jonathan Mendel, Dan Gladish and Jarrod Fry

Minutes:

Mr. Shields moved that the minutes from the regular meeting on October 11th, 2016, as prepared and presented by the Clerk be approved, seconded by Mr. Simpson. The roll was called and the minutes were approved by the yeas of J. Shields, D. Simpson, J. Coyne, B. Hilberg, M. Kolesar, B. Lamb and P. Rose.

Reports of Standing Committees:

Finance Committee: Mr. Coyne had no report.

Health, Safety & Sanitation Committee:

Public Properties Committee: Mr. Shields had no report.

Special Legislation Committee: Mr. Lamb had no report.

Streets & Sidewalks Committee: Mr. Simpson had no report.

Water & Utilities Committee: Mr. Hilberg had no report.

Emerging Technologies Committee: Mr. Rose had no report.

Requests for Council Action:

Finance Committee

- 16-169-10/24 – Budget Amendments
- 16-170-10/24 – 2017 Health, Dental and Life Insurance Renewal
- 16-171-10/24 – 2017 Material Bids
- 16-172-10/24 – Expenditure to CT Consultants – PY14 Downtown Revitalization Grant
- 16-173-10/24 – Increase P.O. #2016-1512 – Your Construction
- 16-174-10/24 – RFP's Property & Liability Insurance
- 16-175-10/24 – Payment Over \$3,000 - ODOT

Reports of Municipal Officers:

Dennis Hanwell, Mayor, reported the following:

- 1) Thanks to Council for efforts.
- 2) City Wellness - Zero increase in 2017 for health insurance, dental insurance or life insurance. SERB avg. is 4.5% increase overall which includes self-funded plans. Fully insured plans are more in the 8-10% increase range. 2016 rate was about \$2.6m so 10% savings equals about \$260,000. Wellness program helpful in same.
- 3) Farmer's Market complete for year. Thanks to Main Street Medina and new Coordinator Nancy Romans for successful events.
- 4) Veterans Day Concert - Wednesday November 9th, 7 p.m. at St. Francis Church, 606 East Washington St. Parking available at church, 620 East Smith, and 600 East Smith Rd. Concert called "A Community Celebration—Americans We! "

Keith Dirham, Finance Director, reported that the budgets have all been reviewed individually and he will be combining and submitting the whole budget for final review and approval very soon.

Greg Huber, Law Director, had no report.

Chief Berarducci, Police Department, had no report.

Jonathon Mendel, Planning Community Director, congratulated Kimberly Marshall, our hard working Economic Development Director on her recent award from Heritage Ohio. On October 11th at the Heritage Ohio State Conference in Cincinnati, Ohio, Kimberly was named the Best Public Leader in Revitalization in the State of Ohio. This is well deserved recognition for her dedication and hard work for the Medina community.

Please also congratulate Main Street Medina for the Best Residential Rehabilitation Award of 530 South Court Street in Medina, Ohio at Heritage Ohio's State conference. It was a great project and shows the potential of our older neighborhoods. The award was accepted by downtown Medina business owners Katie Heinz and Julie McNabb of JK Gift Shop and Interior Design Studio. Julie, Katie, and former Main Street Medina Executive Director Matt Wiederhold were instrumental in the execution and success of the project.

Chief Painter, Fire Chief, had no report.

Kimberly Marshall, Economic Development Director, reported that on Wednesday, October 19, 2016, Bethany Dentler, Executive Director of the Medina County Economic Development Corporation and herself were presenters at the Ohio Economic Development Association Annual Summit. Their presentation was titled Innovative Workforce Solutions: How a County Came Together to Fight the WAR For Talent. This presentation highlighted The Made in Medina County Manufacturing Showcase event that took place in November last year and all the work and collaboration that took place around the county to bring it all together. They submitted the project for the OEDA Annual Excellence Awards for the category of Workforce Innovation. She is very

pleased to announce that they took 2nd place. The presentation was well attended and it was great to receive statewide recognition for the City of Medina and Medina County.

On Friday, October 14th, the City, along with the Medina Chamber of Commerce, the Medina County Economic Development Corp, and Main Street Medina, held 6 ribbon cutting events, they were as follows:

- a) South Court Pet Grooming located at 426 S Court Street, new business.
- b) Older, Wiser, Life Services, LLC located at 257 S Court Street which is a second location for this business and new to Medina.
- c) BK Fitness & Training located at 620 E Smith Rd., Unit W-1, this is a new business.
- d) O&P Services located at 799 N Court St., celebrated at 20th Anniversary.
- e) It's A Dogs Life Pet Daycare, Resort & Spa is located at 245 Medina Street. This is a new business.
- f) Interior Design Studio & JK Gift Shop, 207 S Court Street in Medina, both businesses expanded their space under one roof.

We appreciate all of the investment made by these small businesses and we wish them all success for future growth.

Mike Wright, Recreation Center Director, was not in attendance.

Jansen Wehrley, Parks and Recreation Director, was not in attendance.

Dan Gladish, Building Official, had no report.

Patrick Patton, City Engineer, reported curb replacement is still taking place. W. Smith Reconstruction Project is getting started, there will be a 17 day culvert closure. ODOT is to start US 42 Project, they are working on getting letters out to the residents. The Municipal Pool project is making progress and they are ahead of schedule.

Nino Piccoli, Service Director, stated he appreciates the support of the Mayor and Council with recycling.

Notices, Communications and Petitions:

There were none.

Unfinished Business:

There was none.

Introduction of Visitors:

There were none.

Introduction and Consideration of Ordinances and Resolutions:

Ord. 145-16:

An Ordinance amending Ordinance No. 165-15, passed December 22, 2015. (Amendments to 2016 Budget) Mr. Shields moved for the adoption of Ordinance/Resolution No. 145-16,

seconded by Mr. Simpson. The roll was called and Ordinance/Resolution No. 145-16 passed by the yea votes of D. Simpson, J. Coyne, B. Hilberg, M. Kolesar, B. Lamb, P. Rose, and J. Shields.

Ord. 146-16:

An Ordinance authorizing the payment of \$36,100.00 to Your Construction for the Private Home Rehabilitation at 931 Dawn Court, Medina as part of the PY14 CHIP Grant Program. Mr. Shields moved for the adoption of Ordinance/Resolution No. 146-16, seconded by Mr. Simpson. Mr. Shields moved that the emergency clause be added to Ordinance/Resolution No. 146-16, seconded by Mr. Simpson. The roll was called on adding the emergency clause and was approved by the yea votes of J. Coyne, B. Hilberg, M. Kolesar, B. Lamb, P. Rose, J. Shields, and D. Simpson. The roll was called and Ordinance/Resolution No. 146-16 passed by the yea votes of B. Hilberg, M. Kolesar, B. Lamb, P. Rose, J. Shields, D. Simpson, and J. Coyne.

Res. 147-16:

A Resolution accepting the amounts and rates as determined by the Budget Commission, authorizing the necessary tax levies, and certifying them to the County Auditor. Mr. Shields moved for the adoption of Ordinance/Resolution No. 147-16, seconded by Mr. Simpson. Mr. Shields moved that the emergency clause be added to Ordinance/Resolution No. 147-16, seconded by Mr. Simpson. The roll was called on adding the emergency clause and was approved by the yea votes of M. Kolesar, B. Lamb, P. Rose, J. Shields, D. Simpson, J. Coyne, and B. Hilberg. The roll was called and Ordinance/Resolution No. 147-16 passed by the yea votes of B. Lamb, P. Rose, J. Shields, D. Simpson, J. Coyne, B. Hilberg, and M. Kolesar.

Ord. 148-16:

An Ordinance authorizing the Mayor to advertise for Request for Proposals (RFP's)/bids and to award a contract to the successful bidder for the purchase of a head end equipment package for the Cable TV Department. Mr. Shields moved for the adoption of Ordinance/Resolution No. 148-16, seconded by Mr. Simpson. Mr. Shields moved that the emergency clause be added to Ordinance/Resolution No. 148-16, seconded by Mr. Simpson. The roll was called on adding the emergency clause and was approved by the yea votes of P. Rose, J. Shields, D. Simpson, J. Coyne, B. Hilberg, M. Kolesar, and B. Lamb. The roll was called and Ordinance/Resolution No. 148-16 passed by the yea votes of J. Shields, D. Simpson, J. Coyne, B. Hilberg, M. Kolesar, B. Lamb and P. Rose.

Council Comments:

Mr. Kolesar congratulated Kimberly Marshall on her award and a job well done.

Mr. Simpson also congratulated Kimberly Marshall and reminded everyone to vote.

Mr. Shields spoke of voting, especially for our very own Mark Kolesar and wished him good luck at the polls. Mr. Shields thanked our City Service Director Nino Piccoli for a fine job with the City auction this past weekend, it was well organized and well run.

Mr. Coyne expressed his excitement for the Cleveland Indians going to the World Series.

Medina City Council
October 24th, 2016

Adjournment:

There being no further business before Council, the meeting adjourned at 7:56 p.m.

Kathy Patton, CMC - Clerk of Council

John M. Coyne, President of Council

MEDINA CITY COUNCIL
Thursday, October 27, 2016 – Special Council Meeting

Opening:

Medina City Council met in special open session on Thursday, October 27, 2016. The meeting was called to order at 5:15 p.m. by President of Council John.

Roll Call:

The roll was called with the following members of Council present J. Shields, J. Coyne, B. Hilberg, M. Kolesar, B. Lamb and P. Rose. D. Simpson was absent.

Introduction and Consideration of Ordinances and Resolutions:

Ord. 149-16:

An Ordinance amending Ordinance No. 165-15, passed December 22, 2015. (Amendments to 2016 Budget) Mr. Shields moved to approve, seconded by Mr. Kolesar. The roll was called and Ordinance/Resolution No. 149-16 passed by the yea votes of J. Coyne, B. Hilberg, M. Kolesar, B. Lamb, P. Rose, and J. Shields.

Ord. 150-16:

An Ordinance authorizing the Mayor to enter into an Agreement with Medina United Methodist Church and Mark Klaus, LLC for the use of parking lot areas located on South Court Street. Mr. Shields moved that the emergency clause be added to Ordinance/Resolution No. 150-16, seconded by Mr. Kolesar. The roll was called on adding the emergency clause and approved by the yea votes of B. Lamb, P. Rose, J. Shields, J. Coyne, and B. Hilberg. M. Kolesar abstained. The roll was called and Ordinance/Resolution No. 150-16 passed by the yea votes of B. Lamb, P. Rose, J. Shields, J. Coyne, and B. Hilberg. M. Kolesar abstained.

Adjournment:

There being no further business before Council, the meeting adjourned at 5:23 p.m.

Kathy Patton, CMC - Clerk of Council

John M. Coyne, President of Council

ORDINANCE NO. 151-16

AN ORDINANCE AUTHORIZING THE MAYOR TO ENTER INTO A RENEWAL CONTRACT WITH UNITED HEALTHCARE FOR HEALTH CARE INSURANCE FOR THE EMPLOYEES OF THE CITY OF MEDINA.

BE IT ORDAINED BY THE COUNCIL OF THE CITY OF MEDINA, OHIO:

SEC. 1: That the Mayor is hereby authorized and directed to enter into a renewal contract with United Healthcare to provide health care insurance for the employees of the City of Medina, Ohio for the year 2017.

SEC. 2: That a copy of the Contract is marked Exhibit A, attached hereto and incorporated herein.

SEC. 3: That it is found and determined that all formal actions of this Council concerning and relating to the passage of this Ordinance were adopted in an open meeting of this Council, and that all deliberations of this Council and any of its committees that resulted in such formal action, were in meetings open to the public, in compliance with the law.

SEC. 4: That this Ordinance shall be in full force and effect at the earliest period allowed by law.

PASSED: _____

SIGNED: _____
President of Council

ATTEST: _____
Clerk of Council

APPROVED: _____

SIGNED: _____
Mayor

CITY OF MEDINA

Medical Proposed Rates and Alternate Plans

UnitedHealthcare
Medical Proposed Rates with Alternate Plan Designs

Customer Name: CITY OF MEDINA
 Medical Policy: 00753527
 Renewal Date: January 1, 2017

The numbers below are on an illustrative basis. Rates are subject to Underwriting approval.

Option 1: Current	
AG-3X MOD (Traditional with Deductible) Rx Plan: H9 MOD	
Plan Name	Choice + Insurance *
Product	3M-2 MOD
Option	Single Option
Multiple Option with:	Option(s) N/A
HRA or HSA	No
Benefits*	
Office Copay (PCP/SPC)	PCP \$20, SPC \$40
Hospital Copays	OP N/A, IP N/A
UC/ER/Major Diag Copay	UC \$20, ER \$100, Maj Diag N/A
Other	ENRP
Deductible	500/1000 (Emb)
Coinsurance	80%
Out-of-Pocket	1000/2000
Pharmacy	\$15/30/50; 2.5x for M.O.
Out-of-Pocket (Single/Family)	
Deductible	1000/2000 (Emb)
Coinsurance	60%
Out of Pocket	3000/6000
Enrollment	
Employee	39
Employee + Family	86
Total	125
Rates (Employee/Family)	
Employee	\$773.28 \$773.28
Employee + Family	\$2,126.51 \$2,126.51
Monthly Cost	\$213,038 \$213,038
Annual Cost	\$2,556,453 \$2,556,453
Change from Current	0.0%

*High level benefit summary. Please see your plan summary for more detailed benefit description.

The numbers above are on an illustrative basis. Rates are subject to Underwriting approval.

For markets moving to service fees, current rates (applicable for renewals only) include commission expenses. Proposed rates, for your convenience, include any applicable producer service fees. Producer service fees are not a contingency of obtaining insurance coverage but are fees agreed to between you (client) and your producer/service provider for service rendered on behalf of client.

For markets continuing to pay commissions, both the current (applicable for renewals only) and proposed rates include commissions.

UnitedHealthcare

Medical Quote Assumptions

Customer Name: CITY OF MEDINA
 Medical Policy: 00753527
 Renewal Date: January 1, 2017

The rates quoted here are based on the following assumptions. Changes to these assumptions may result in an adjustment to rates.

Medical Quote Assumptions

- Rates are guaranteed for the contract period of 1/1/17 through 12/31/17.
- Rates are based on your submitted census. UnitedHealthcare reserves the right to adjust the rates from audit date back to effective date if any of the following changes:
 - Enrollment +/- 10%
 - Average Contract Size +/- 10%
 - Area Factor +/- 7.5%
 - Age/Sex Factor +/- 10%
 - Any Material Changes
 - Cobra enrollees are more than 10% of enrollment
- Employer contributes a minimum of 90% toward the employee only rates and 90% toward the dependent rates.
- Requires a minimum participation level of 75%.
- 2007 & 2011 Certificate of Coverage plans include the deductible in the out of pocket maximums.
- This offer, unless otherwise stated herein, completely replaces all other previous offers or portions thereof. Any previous offers that may have been extended are hereby null and void.

- Quote includes UHC fulfilled Simply Engaged.

UnitedHealthcare reserves the right to adjust the rates and/or fees (i) in the event of any changes in federal, state or other applicable legislation or regulation; (ii) in the event of any changes in Plan design required by the applicable regulatory authority (i.e. mandated benefits) or by the Plan Sponsor; and (iii) as otherwise permitted in our policy.

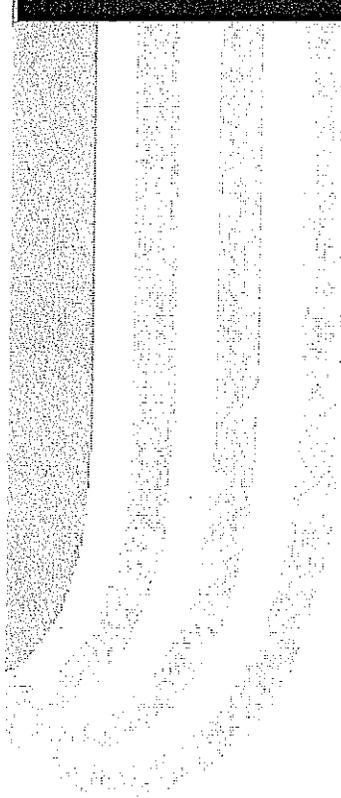
This premium may include state and federal taxes and fees.

Premium rates and/or product forms included herein are subject to approval by regulators. If rates or product forms offered herein are subsequently modified by regulators we will immediately advise you of the change in plan design and retroactively adjust premium in subsequent billings.

Plan design and corresponding premium rates offered herein represent a coverage option that is consistent with your current group size (based on most recent census or survey information) and closely matches your current coverage. Additional coverage options may be available to you.

At your request, a service fee to be paid to your producer/service agent of \$11.00 PEPM has been added as an expense item where service fees apply.

Agents may receive commissions and other compensation from us and these costs may be reflected in your premium or fee. Separately, you may have contracted with producers to provide services directly for your group and have agreed to pay them a 'service fee'. Since 'service fees' are not a contingency of the purchase of health insurance such fees are not part of your premium but may be included in your bill under total amount due.



A Renewal for
City of Medina

Issued on: October 6, 2016



Employee Basic Life Insurance		Class 1 BL2126 Primary
Legal Entity	United Healthcare Insurance Company	
Eligibility	All Active Full Time Employees working a minimum of 30 hours per week.	
Basic Annual Earnings (BAE) Definition	Not Applicable	
Benefit	\$25,000	
Benefit Maximum	\$25,000	
New Hire Guarantee Issue Limit	\$25,000	
Evidence of Insurability Requirements	Required for late entrants and amounts over Guarantee Issue amount. Also required for all coverage if minimum participation level is not met.	
Benefit Reduction	60%@70	
Coverage Termination	At Employee's Retirement	
Suicide Limitation	Excluded	
Accelerated Death Benefit	50% of applicable benefit	
Life Expectancy	12 months	
Waiver of Premium	Included	
Elimination Period	9 months	
Disabled Prior To Age	Prior to age 60	
Benefits Payable to Age	To Age 65	
Portability	Excluded	
Conversion	Included; Must apply within 30 days of coverage termination	
Assumed Enrollment and Rates		
Number of Employees	155	
Volume of Insurance	\$3,862,500	
Rate Basis	Composite per \$1,000 of coverage	
Monthly Rate	\$0.210	\$0.210
Monthly Premium	\$9,733.50	\$9,733.50
Annual Premium	\$9,733.50	\$9,733.50
Employer Contribution	100%	
Participation Requirements	100%	
Broker Commissions	Standard Graded	
Rate Guarantee (in months)	24	

Employee Basic AD&D Insurance	Class 1 ADD2161 Primary	United Healthcare Insurance Company
Legal Entity		
Eligibility	All Active Full Time Employees working a minimum of 30 hours per week.	
Basic Annual Earnings Definition	Not Applicable	
Benefit		\$25,000
Benefit Maximum		\$25,000
Loss Occurrence Period		180 days
Seat Belt Benefit		10.0% to \$10,000
Seat Belt & Air Bag Benefit		10.0% to \$20,000
Loss of Life		100%
Quadriplegia		100%
Paraplegia		50%
Hemiplegia		50%
Loss of one hand		50%
Loss of one foot		50%
Loss of sight of one eye		50%
Loss of both hands or both feet		100%
Loss of sight of both eyes		100%
Loss of one hand and sight of one eye		100%
Loss of one foot and sight of one eye		100%
Loss of thumb and index finger of same hand		25%
Loss of speech		25%
Loss of hearing		25%
Limitations and Exclusions		
Benefit Reduction		50%@70
Coverage Termination		At Employee's Retirement
Exclusions		Standard
Assumed Enrollment and Rates		
Number of Employees		155
Volume of Insurance		\$3,882,500
Rate Basis		Composite per \$1,000 of coverage
Monthly Rate	\$0.020	\$0.020
Monthly Premium	\$372.00	\$372.00
Annual Premium	\$927.00	\$927.00
Employer Contribution		100%
Participation Requirements		100%
Broker Commissions		Standard Graded
Rate Guarantee (in months)		24

Employee Supplemental Life Insurance		Class 1 SUPL10323 Primary	
Legal Entity		United Healthcare Insurance Company	
Eligibility		All Active Full Time Employees working a minimum of 30 hours per week.	
Basic Annual Earnings Definition		The Annual Earnings received from the Covered Person's Employer for the year ending immediately prior to the Policy Anniversary period. Annual Earnings do not include commissions, bonuses, overtime pay and other extra compensation.	
Benefit		Increments of \$25,000	
Benefit Maximum		\$100,000, not to exceed 5 times BAE	
New Hire Guarantee Issue Limit		\$50,000	
Open Enrollment		Not Included	
Portability		Required for late entrants and amounts over Guarantee Issue amount. Also required for all coverage if minimum participation level is not met.	
Evidence of Insurability Requirements		65% @ 65, 50% @ 70	
Benefit Reduction		At Employee's Retirement	
Coverage Termination		2 Years	
Suicide Limitation		50% of applicable benefit	
Additional Features		12 months	
Accelerated Death Benefit		Included	
Life Expectancy		9 months	
Waiver of Premium		Prior to age 60	
Elimination Period		To Age 65	
Disabled Prior To Age		Included. Must apply within 30 days of coverage termination.	
Benefits Payable to Age		Minimum \$5,000	
Portability		Maximum \$500,000	
Minimum		70	
Maximum		Included; Must apply within 30 days of coverage termination	
Maximum Age to Port		Available	
Conversion		Available	
eAPP Evidence of Insurability			
Personalized Enrollment Forms			
Assumed Enrollment and Rates			
Number of Employees		47	
Volume of Insurance		\$3,038,750	
Rate Basis		Unisex Uniltobacco Age-banded per \$1,000 of coverage	
Monthly Rate		Unisex	Unisex/W
Under 25		\$0.070	\$0.070
25 - 29		\$0.070	\$0.070
30 - 34		\$0.080	\$0.080
35 - 39		\$0.100	\$0.100
40 - 44		\$0.180	\$0.180
45 - 49		\$0.330	\$0.330
50 - 54		\$0.520	\$0.520
55 - 59		\$0.860	\$0.860
60 - 64		\$1.220	\$1.220
65 - 69		\$2.110	\$2.110
70 - 74		\$3.150	\$3.150
75 and above		\$5.750	\$5.750
Monthly Premium		\$18,461.7	\$18,461.7
Annual Premium		\$16,154.00	\$16,154.00
Employer Contribution		0%	
Participation Requirements		20%	
Broker Commissions		Standard Graded	
Rate Guarantee (in months)		24	

Class 1 SUPSPL0326 SUPCHL0038 Primary																																											
Dependent Supplemental Life Insurance	United Healthcare Insurance Company																																										
Legal Entity																																											
Eligibility	All Active Full Time Employees working a minimum of 30 hours per week.																																										
Spouse Benefit	Increments of \$5,000																																										
Spouse Benefit Maximum	\$50,000 not to exceed 50.0% of Employee amount																																										
Spouse Guarantee Issue Amount	\$20,000																																										
Child Benefit																																											
Live birth - 14 days	\$0																																										
14 days and Over	Increments of \$2,000																																										
Child Benefit Maximum	\$10,000 not to exceed 50.0% of Employee amount																																										
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Number of Child Units																																											
Volume of Insurance- Spouse																																											
Volume of Insurance- Child(ren)																																											
Rate Basis- Spouse	Unisex Uniltobacco Age-banded per \$1,000 of coverage																																										
Rate Basis- Child(ren)	Composite per \$1,000 of coverage																																										
Monthly Rate- Spouse	<table border="1"> <thead> <tr> <th>Age Group</th> <th>Current</th> <th>Renewal</th> </tr> </thead> <tbody> <tr><td>Under 25</td><td>\$0.070</td><td>\$0.070</td></tr> <tr><td>25 - 29</td><td>\$0.070</td><td>\$0.070</td></tr> <tr><td>30 - 34</td><td>\$0.080</td><td>\$0.080</td></tr> <tr><td>35 - 39</td><td>\$0.100</td><td>\$0.100</td></tr> <tr><td>40 - 44</td><td>\$0.180</td><td>\$0.180</td></tr> <tr><td>45 - 49</td><td>\$0.330</td><td>\$0.330</td></tr> <tr><td>50 - 54</td><td>\$0.520</td><td>\$0.520</td></tr> <tr><td>55 - 59</td><td>\$0.880</td><td>\$0.880</td></tr> <tr><td>60 - 64</td><td>\$1.220</td><td>\$1.220</td></tr> <tr><td>65 - 69</td><td>\$2.110</td><td>\$2.110</td></tr> <tr><td>70 - 74</td><td>\$3.150</td><td>\$3.150</td></tr> <tr><td>75 and above</td><td>\$5.750</td><td>\$5.750</td></tr> <tr><td></td><td>\$0.170</td><td>\$0.170</td></tr> </tbody> </table>	Age Group	Current	Renewal	Under 25	\$0.070	\$0.070	25 - 29	\$0.070	\$0.070	30 - 34	\$0.080	\$0.080	35 - 39	\$0.100	\$0.100	40 - 44	\$0.180	\$0.180	45 - 49	\$0.330	\$0.330	50 - 54	\$0.520	\$0.520	55 - 59	\$0.880	\$0.880	60 - 64	\$1.220	\$1.220	65 - 69	\$2.110	\$2.110	70 - 74	\$3.150	\$3.150	75 and above	\$5.750	\$5.750		\$0.170	\$0.170
Age Group	Current	Renewal																																									
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Monthly Rate- Child(ren)																																											
Annual Premium																																											
<i>Rounding of premium may occur</i>																																											
Employer Contribution	0%																																										
Participation Requirements	20%																																										
Broker Commissions	Standard Graded																																										
Rate Guarantee (in months)	24																																										

City of Medina Life Assumptions
Effective Date: January 1, 2017

General Assumptions

We reserve the right to change rates and/or plan provisions if the number of lives or volume of insurance change by more than 10% before, on, or after the effective date listed above or if factors used to generate this quote such as group demographics or effective date are changed, found to be incomplete or incorrect.

Rates assume no changes in legislation or regulation that affects the benefits payable, eligibility or contract.

Rates assume standard administrative services including Claims & Data processing, Enrollment & Billing, Customer Service, Case Management, Provider Relations, and Reporting.

Assumed contract situs is Ohio

Employees must be U.S. citizens or residents regularly working and living in the U.S. Coverage for U.S. citizens working outside of the U.S. must be approved in writing by us. Approval depends on locale and length of assignment.

Employers assumed primary business is classified as 9111 SIC Code.

Rates may increase on renewal in accordance with the terms of the policy.

Life and AD&D Assumptions

Coverage for dependents will not be effective until the day after discharge if confined in a Hospital or Medical Facility on the effective date.

Dependent children are covered to age 26 for Supplemental dependent life.

Continuity of Coverage/No Loss No Gain for previously covered employees is included.

Limitations for AD&D: Disease, bodily or mental infirmity, suicide or intentionally self-inflicted injury, commission of an assault or felony, war, use of any drug unless prescribed by a physician, driving while intoxicated, engaging in any hazardous activities, or travel in a private aircraft. Additional exclusions may apply depending upon the plan design of the employer.

Additional features included: Beneficiary Services, Will and Trust Preparation Service, Travel Assistance and Wealth Management Account.

This proposal is valid for 90 days from the issued date, unless otherwise noted within this document.

Brokers and agents may receive commissions, bonuses and other compensation for selling the products presented in this proposal. The cost of this compensation may be directly or indirectly reflected in the premium or fees for those products. Contact your broker and/or agent if you have questions regarding their compensation relating to products in this proposal.

This proposal is subject to negotiation and execution of a written agreement, which will supersede the proposal contents. This proposal does not constitute an agreement, and is based on assumptions made from the written information in our possession and provided by you. We retain the right to modify our proposal if the information upon which this proposal is based is changed or is supplemented.

We consider much of the information contained in the proposal to be proprietary or otherwise confidential, and are releasing this proposal to you on the understanding that you and your representatives will only use it, and any data included in the proposal, for the specific purpose of evaluating its content. If this is not consistent with your understanding, please notify us before reviewing the proposal.

In addition, by accepting and reviewing the contents of this proposal, you and your agents or other designees agree, to the extent permitted by law, that certain information contained herein, or other information provided to you in connection with this proposal response or associated request for proposal (RFP), is proprietary and/or confidential to UnitedHealthcare and its related entities, and may not be copied, used, distributed or disclosed without prior written consent from an authorized representative of UnitedHealthcare and its related entities, other than is necessary to evaluate this proposal.

Dental Insurance

A Renewal for

CITY OF MEDINA

Issued on: October 10, 2016



UnitedHealthcare®

CITY OF MEDINA Dental Renewal
Effective Date: January 1, 2017

Dental Services	Passive PPO P9279 CS0	
Legal Entity	UnitedHealthcare Insurance Company Primary Plan	
	In Network	Out of Network
Diagnostic Services		
Periodic Oral Evaluation	80%	80%
Radiographs	80%	80%
Lab and Other Diagnostic Tests	80%	80%
Preventive Services		
Dental Prophylaxis (Cleaning)	80%	80%
Fluoride Treatment	80%	80%
Sealants	80%	80%
Space Maintainers	80%	80%
General Services		
Restorations (Amalgams or Composite)*	80%	80%
Emergency Treatment/General Services	80%	80%
Simple Extractions	80%	80%
Oral Surgery (incl. surgical extractions)	80%	80%
Periodontics	80%	80%
Endodontics	80%	80%
Major Services		
Inlays/Onlays/Crowns	80%	80%
Dentures and Removable Prosthetics	80%	80%
Fixed Partial Dentures (Bridges)	80%	80%
Orthodontic Services		
Orthodontia	60%	60%
Orthodontia Eligibility	Child Only (Up to Age 19)	
Deductible	\$25/\$50	\$25/\$50
Deductible applies to Prev. & Diag.	No	No
Annual Max	\$1,000	\$1,000
Lifetime Ortho Max	\$1,000	\$1,000
Waiting Period applies	No	No
Out of Network Basis	UCR 90th	
PPO Network	Options PPO 30	
CMM-Annual Roll-Over	Yes	
Assumed Enrollment and Rates	Current	Renewal
Employee	38 \$31.46	\$31.46
Employee + Family	86 \$91.77	\$91.77
	124	
Monthly Premium	\$9,087.20	\$9,087.20
Annual Premium	\$109,052.40	\$109,052.40
Renewal Action	0.0%	
Employer Contribution	Contributory	
Participation Requirements	75% of Eligible Employees	
Dependent Children Coverage	To Age 26	
Contract Basis	Fully Insured	
Benefit Period Basis	Calendar Year	
Exclusions and Limitations	Standard	
Broker Commissions	0%	
Rate Guarantee	12 Months	

General Assumptions

- We reserve the right to change rates and/or plan provisions if the number of lives or volume of insurance change by more than 10% before, on, or after the effective date listed above or if factors used to generate this quote such as group demographics or effective date are changed, found to be incomplete or incorrect.
- Rates assume no changes in legislation or regulation that affects the benefits payable, eligibility or contract.
- Rates assume standard administrative services including Claims & Data processing, Enrollment & Billing, Customer Service, Case Management, Provider Relations, and Reporting.
- Assumed contract situs is Ohio.
- Employees must be U.S. citizens or residents regularly working and living in the U.S. Coverage for U.S. citizens working outside of the U.S. must be approved in writing by us. Approval depends on locale and length of assignment.
- Employer's assumed primary business is classified as 9199.
- Rates may increase on renewal in accordance with the terms of the policy.

Dental Assumptions

This premium may include state and federal taxes and fees.

Rates listed above assume the plan designs quoted. Rates may change, if plan design changes.

Our contract covers only those procedures performed in the United States.

One or more of these plan design offerings include the MaxMultiplier benefit.

Some of the unused portion of your annual maximum may be available in future periods.

Please contact your sales representative for more details on the network quoted in your proposal.

The In- and Out-of-Network Plan Deductibles, Maximums and Lifetime Ortho Maximums are combined.

Participation in qualifying dental and vision plans must be 75 percent or greater of eligible medical employees for Packaged Savings to be activated.

* Please contact your sales representative to confirm specific plan Restorations (Amalgams or Composite) coverage.

Quote is based on Average Contract Size (ACS) of 2.60

United Healthcare reserves the right to adjust the above rates should enrollment or ACS fluctuate by +/- 10%.

Please note that the summary of benefits in this document provides a brief description of coverage. State mandates may preclude certain benefit plan design features. This is not a policy, certificate of insurance or coverage document. For complete details on coverage, exclusions, limitations and the terms under which coverage may continue, please contact your sales representative.

This proposal is valid for 90 days from the issued date, unless otherwise noted within this document.

Brokers and agents may receive commissions, bonuses and other compensation for selling the products presented in this proposal. The cost of this compensation may be directly or indirectly reflected in the premium or fees for those products. Contact your broker and/or agent if you have questions regarding their compensation relating to products in this proposal.

This proposal is subject to negotiation and execution of a written agreement, which will supersede the proposal contents. This proposal does not constitute an agreement, and is based on assumptions made from the written information in our possession and provided by you. We retain the right to modify our proposal if the information upon which this proposal is based is changed or is supplemented.

We consider much of the information contained in the proposal to be proprietary or otherwise confidential, and are releasing this proposal to you on the understanding that you and your representatives will only use it, and any data included in the proposal, for the specific purpose of evaluating its content. If this is not consistent with your understanding, please notify us before reviewing the proposal.

In addition, by accepting and reviewing the contents of this proposal, you and your agents or other designees agree, to the extent permitted by law, that certain information contained herein, or other information provided to you in connection with this proposal response or associated request for proposal (RFP), is proprietary and/or confidential to UnitedHealthcare and its related entities, and may not be copied, used, distributed or disclosed without prior written consent from an authorized representative of UnitedHealthcare, other than is necessary to evaluate this proposal.

ORDINANCE NO. 152-16

AN ORDINANCE AUTHORIZING THE MAYOR TO ADVERTISE FOR COMPETITIVE BIDS AND TO AWARD A CONTRACT TO THE SUCCESSFUL BIDDER FOR A ONE YEAR SUPPLY OF THE VARIOUS KINDS OF MAINTENANCE MATERIALS NEEDED FOR THE STREETS AND WATER LINES, INCLUDING BUT NOT LIMITED TO SALT, THE CHEMICALS FOR USE IN THE TREATMENT OF WATER, AND WATER METERS TO BE USED BY THE VARIOUS DEPARTMENTS OF THE CITY OF MEDINA, OHIO.

BE IT ORDAINED BY THE COUNCIL OF THE CITY OF MEDINA, OHIO:

SEC. 1: That the Mayor is hereby authorized and directed to advertise for competitive bids and to award a contract to the successful bidder for a one year supply of the various kinds of maintenance materials needed for the streets and water lines, including but not limited to salt, the chemicals for use in the treatment of water, and water meters, to be used by the various departments of the City of Medina in accordance with specifications on file in the office of the Mayor.

SEC. 2: That it is found and determined that all formal actions of this Council concerning and relating to the passage of this Ordinance were adopted in an open meeting of this Council, and that all deliberations of this Council and any of its committees that resulted in such formal action, were in meetings open to the public, in compliance with the law.

SEC. 3: That this Ordinance shall be in full force and effect at the earliest period allowed by law.

PASSED: _____

SIGNED: _____

President of Council

ATTEST: _____

APPROVED: _____

Clerk of Council

SIGNED: _____

Mayor

ORDINANCE NO. 153-16

AN ORDINANCE AUTHORIZING THE INCREASE OF THE EXPENDITURE TO YOUR CONSTRUCTION FOR THE PRIVATE OWNER REHABILITATION PROJECT AT 3881 CLAYTHORNE PLACE, BRUNSWICK AS PART OF THE PY14 CHIP GRANT, AND DECLARING AN EMERGENCY.

WHEREAS: Due to a change order in the amount of \$600.00, it is deemed necessary to increase Purchase Order #2016001512 from \$24,540.00 to \$25,696.00, which requires Council approval; and

NOW, BE IT ORDAINED BY THE COUNCIL OF THE CITY OF MEDINA, OHIO:

SEC. 1: That the Purchase Order #2016001512 for Your Construction is hereby authorized to be increased to \$25,696.00 relative to Activity #AC-14-02 of the PY14 CHIP Grant.

SEC. 2: That the funds to cover this expenditure are available in Account No. 139-0404-52215.

SEC. 3: That it is found and determined that all formal actions of this Council concerning and relating to the passage of this Ordinance were adopted in an open meeting of this Council, and that all deliberations of this Council and any of its committees that resulted in such formal action, were in meetings open to the public, in compliance with the law.

SEC. 4: That this Ordinance shall be considered an emergency measure necessary for the immediate preservation of the public peace, health and safety, and for the further reason the work has been performed; wherefore, this Ordinance shall be in full force and effect immediately upon its passage and signature by the Mayor.

PASSED: _____

SIGNED: _____

President of Council

ATTEST: _____

APPROVED: _____

Clerk of Council

SIGNED: _____

Mayor

ORDINANCE NO. 154-16

AN ORDINANCE AUTHORIZING THE MAYOR TO SOLICIT REQUESTS FOR PROPOSAL (RFP's) FOR LIABILITY AND PROPERTY INSURANCE FOR THE CITY OF MEDINA.

BE IT ORDAINED BY THE COUNCIL OF THE CITY OF MEDINA, OHIO:

- SEC. 1:** That the Mayor is hereby authorized and directed to solicit Requests for Proposals (RFP's) for liability and property insurance for the City of Medina.
- SEC. 2:** That a copy of the Request for Proposals is hereby attached and marked Exhibit A.
- SEC. 3:** That it is found and determined that all formal actions of this Council concerning and relating to the passage of this Ordinance were adopted in an open meeting of this Council, and that all deliberations of this Council and any of its committees that resulted in such formal action, were in meetings open to the public, in compliance with the law.
- SEC. 4:** That this Ordinance shall be in full force and effect at the earliest period allowed by law.

PASSED: _____

SIGNED: _____
President of Council

ATTEST: _____
Clerk of Council

APPROVED: _____

SIGNED: _____
Mayor

ORDINANCE NO. 155-16

AN ORDINANCE OF THE COUNCIL OF THE CITY OF MEDINA, OHIO, CERTIFYING THAT WHEN A MUNICIPAL OBLIGATION WAS INCURRED SUMS WERE LAWFULLY APPROPRIATED IN THE FUNDS TO SATISFY THE OBLIGATION AND SUFFICIENT SUMS CURRENTLY EXIST TO SATISFY THIS OBLIGATION ACCORDING TO THE ATTACHED SHEET(S), AND DECLARING AN EMERGENCY.

WHEREAS: Certain certifications are necessary for the continued operations of Municipal Services; and

WHEREAS: This Ordinance will provide for the efficient and lawful certifications to provide Municipal Services as required by Ohio Revised Code Section 5705.41(D); and

NOW, THEREFORE BE IT ORDAINED BY THE COUNCIL OF THE CITY OF MEDINA, OHIO:

SEC. 1: That the Finance Director is authorized to draw warrants for the payment of municipal expenses pursuant to the attached Exhibit "A" which is incorporated herein.

SEC. 2: That it is found and determined that all formal actions of this Council concerning and relating to the passage of this Ordinance were adopted in an open meeting of this Council, and that all deliberations of this Council and any of its committees that resulted in such formal action, were in meetings open to the public, in compliance with the law.

SEC. 3: That this Ordinance shall be considered an emergency measure necessary for the immediate preservation of the public peace, health and safety, and for the further reason because of the immediate need for the authorization of expenditures, this Resolution shall be in full force and effect immediately upon its passage and signature by the Mayor.

PASSED: _____

SIGNED: _____

President of Council

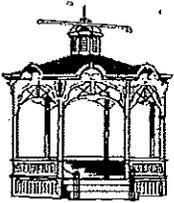
ATTEST: _____

APPROVED: _____

Clerk of Council

SIGNED: _____

Mayor



City of Medina

132 North Elmwood Ave P.O. Box 703
Medina, OH 44258
PH: 330-725-8861
FAX: 330-722-9058

PURCHASE ORDER

ORD. 155-16
EXH. A

No. 2016001326

Show this Purchase Order Number on all correspondence, invoices, shipping papers and packages.

DELIVER AND SHIP TO THIS DEPT.
ENG DEPT - PAT PATTON
CITY OF MEDINA
132 N ELMWOOD AVE
MEDINA OH 44256

NAME AND ADDRESS OF VENDOR
000584
TREASURER STATE OF OHIO
ODOT-OFFICE OF ESTIMATING - #4
1980 WEST BROAD ST, 1ST FLOOR
COLUMBUS OH 43223

PURCHASE ORDER DATE
06/27/16

TERMS:

1. City of Medina is exempt from excise or sales tax.
2. Purchase order number must appear on all invoices, packages, packing slips, shipping papers and all other correspondence.
3. Delivery must be prepaid to destination shown above or billed to same.
4. No change may be made in this order without consent of the Director of Finance.

DO NOT DUPLICATE THIS ORDER

LINE NO.	DESCRIPTION	ACCOUNT NUMBER	QUANTITY ORDERED	UNIT MEAS.	UNIT PRICE	EXTENSION
001	ADD'L DUE-SR3/REAGN INTERSECTN FINANCE COMMITTEE APPROVED 6/27/16	108-0610-54411	0		.00	18911.14
TOTAL AMOUNT NOT TO EXCEED						18911.14

Order is to be entered in accordance with prices, delivery and specifications shown above.

FEDERAL TAX ID:
34-6001856

THEN AND NOW CERTIFICATION

I hereby certify that the amount necessary to meet this obligation was then (at time of the order or contract) and is now lawfully appropriated for such purpose and was then and is now in the Treasury and free from previous encumbrances.

This amount has been lawfully appropriated for such purpose and is in the treasury or in process of collection.

SEND ALL INVOICES TO:
City of Medina
132 North Elmwood Ave
P.O. Box 703
Medina, OH 44258

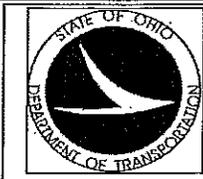
Robert W. Johnson
DIRECTOR OF FINANCE

AUTHORIZED SIGNATURE

JOB # 706

PO# 2016-B26 Line# 1

Partial Complete X



Accounts Receivable

Date: 10/7/16
Approved: [Signature]

The Ohio Department of Transportation

In Account With:

City of Medina
132 North Elmwood Avenue
Medina, Ohio 44256

Address questions concerning this invoice to:
Daniel Balsley
Ohio Department of Transportation
Project Accounting
Phone: 614-387-7950

Invoice Number	FAP Number	PID	Project #	Project Description	County	District
F15072	E032(624)	24130	120565	MED SR 0003 12.98	Medina	3

Description of Work Done:

Improving 0.32 MI of SR 3 at intersection of Reagan Parkway by wideing, New Turn Lanes, Signs and Pavement Markings

The City of Medina agrees to assume and bear 100% of the entire cost of the improvement, less the amount of Federal aid and State funds set aside by the Director of Transportation of the State of Ohio for the financing of this project.

Costs to the City of Medina:	Construction Contract Costs	\$	81,583.28
	Less Deposit	\$	(65,076.74)
	Construction Inspection Costs	\$	8,907.86
	Less Deposit	\$	(6,503.26)
	Balance		\$18,911.14

Amount Due State of Ohio \$18,911.14

Please Return Bottom Portion of Invoice with Payment

Make Check Payable To:

The Treasurer of the State of Ohio
C/O The Ohio Department of Transportation

Invoice Number:	F15072
Amount Due:	\$18,911.14

Remit To:

Division of Finance - Accounts Receivable
1980 West Broad Street
Columbus, Ohio 43223

Daniel Balsley 6/16/16
Manager, Project Accounting Date

	Project 1	Project 2	Total
Actual Cost	\$405,433.08	\$68,886.28	\$474,319.36
Actual Percentage	85.48%	14.52%	100.00%
Incidental Items Cost	\$ 74,728.71	\$ 12,697.00	\$ 87,425.71
Incidental Items Percentage	85.48%	14.52%	100.00%
Total Contract Cost	\$ 480,161.79	\$ 81,583.28	\$ 561,745.07
Less Federal Share	\$ (384,129.43)		\$ (384,129.43)
Less State Share	\$ (96,032.36)		\$ (96,032.36)
Total Inspection Cost	\$ 52,427.62	\$ 8,907.86	\$ 61,335.48
Less Federal Share	\$ (41,942.10)		\$ (41,942.10)
Less State Share	\$ (10,485.52)		\$ (10,485.52)
Total Project Cost	\$ 532,589.41	\$ 90,491.14	\$ 623,080.55
Less Federal Share	\$ (426,071.53)	\$ -	\$ (426,071.53)
Less State Share	\$ (106,517.88)	\$ -	\$ (106,517.88)
Total Local Cost	\$ -	\$ 90,491.14	\$ 90,491.14

Total Cost to the City of Medina

Total Contract Cost	\$ 561,745.07
Total Inspection Cost	\$ 61,335.48
Total Project Cost	<u>\$ 623,080.55</u>
Less Federal Share	\$ (426,071.53)
Less State Share	<u>\$ (106,517.88)</u>
Total Local Share	\$ 90,491.14
Less Deposit	\$ 71,580.00
Total Due from Local	<u><u>\$ 18,911.14</u></u>

ORDINANCE NO. 156-16

AN ORDINANCE AUTHORIZING THE EXPENDITURE OF \$56,000.00 TO CT CONSULTANTS FOR THE SOFT COSTS RELATED TO THE IMPLEMENTATION AND ADMINISTRATION OF THE 2014 DOWNTOWN REVITALIZATION GRANT, AND DECLARING AN EMERGENCY.

WHEREAS: Ordinance No. 31-15, passed March 9, 2015 authorized the Mayor to enter into a Professional Services Agreement with CT Consultants Inc. for the administration and implementation of the Medina Downtown Revitalization Grant; and

NOW, THEREFORE, BE IT ORDAINED BY THE COUNCIL OF THE CITY OF MEDINA, OHIO:

SEC. 1: That the expenditure of \$56,000.00 to CT Consultants for the soft costs related to the 2014 Downtown Revitalization Grant is hereby authorized.

SEC. 2: That the funds to cover the expenditure, in the amount of \$56,000.00, are available in Account No. 125-0404-52215.

SEC. 3: That it is found and determined that all formal actions of this Council concerning and relating to the passage of this Ordinance were adopted in an open meeting of this Council, and that all deliberations of this Council and any of its committees that resulted in such formal action, were in meetings open to the public, in compliance with the law.

SEC. 4: That this Ordinance shall be considered an emergency measure necessary for the immediate preservation of the public peace, health and safety, and for the further reason per the grant agreement, all projects must be paid out by November 30, 2016; wherefore, this Ordinance shall be in full force and effect immediately upon its passage and signature by the Mayor.

PASSED: _____

SIGNED: _____

President of Council

ATTEST: _____

APPROVED: _____

Clerk of Council

SIGNED: _____

Mayor

ORDINANCE NO. 157-16

**AN ORDINANCE AMENDING ORDINANCE NO. 165-15,
PASSED DECEMBER 22, 2015.** (Amendments to 2016 Budget)

BE IT ORDAINED BY THE COUNCIL OF THE CITY OF MEDINA, OHIO:

SEC. 1: That Ordinance No. 165-15, passed December 22, 2015, shall be amended by the following additions:

<u>Account No./Line Item</u>	<u>Additions</u>
107-0110-50111 (Montville Fire Contract Funds)	100,000.00 *
902-0355-52215 (Bicentennial Fund – Coloring Book)	500.00 *
104-0301-53315 (Donation)	3,380.12 *

SEC. 2: That it is found and determined that all formal actions of this Council concerning and relating to the passage of this Ordinance were adopted in an open meeting of this Council, and that all deliberations of this Council and any of its committees that resulted in such formal action, were in meetings open to the public, in compliance with the law.

SEC. 3: That this Ordinance shall be in full force and effect at the earliest period allowed by law.

* - new appropriation

PASSED: _____

SIGNED: _____

President of Council

ATTEST: _____

APPROVED: _____

Clerk of Council

SIGNED: _____

Mayor