

SELECT BOARD MEETING AGENDA

DATE: Monday, September 25, 2017 at 6:30 pm
HELD: Public Safety Complex (2nd Floor Meeting Room) 20 George Bennett Rd, Lee

The Select Board reserves the right to make changes as deemed necessary during the meeting. Public Comment limited to 3 minutes.

1. **Call meeting to Order – 6:30 pm**
2. **Public Comment**
3. **Randy Stevens, Highway Supervisor – Chimney Bids**
Present the chimney bids and recommendation.
4. **Toby Van Aken, Transfer Station Manager**
 - a. **Swap Shop** - *Present a final plan for the new Swap Shop including costs.*
 - b. **Swap Shop** - *Request permission from the Board to close the Swap Shop during the construction of the new Swap Shop.*
 - c. **Bulky Fees** - *Discuss changing the process relative to taking in bulky items and collecting fees.*
5. **Selectman Scott Bugbee, Department Head Training**
Present optional dates for department head group training to take place this fall.
6. **Paul Gasowski, Sustainability Committee Training – Logo**
Request the Board's approval to utilize the presented logo for Sustainability Committee business.
7. **Deborah Schanda – Revised Town Buildings Site Plan**
Present AG Architects quote to update the Town Center site plan with the Select Board specified revisions.
8. **Julie Glover, Town Administration**
 - a. *Facility Committee and Select Board Plans for Town Buildings in E-Crier*
 - b. *FY19 Budget Calendar*
 - c. *SRPC Map Geo Proposal*
 - d. *Unpaid Taxes Allowance with respect to the Unassigned Fund Balance*
 - e. *Miscellaneous*
9. **Motion to accept the Consent Agenda as presented:**
 - a. *Business Card Resolution*
 - b. *Notice of Intent to Excavate x2*
 - c. *Notice of Intent to Cut*
 - d. *7th Annual King Challenge Charity Bicycle Ride Announcement*
 - e. *Town of Nottingham Notice of Public Hearing*
 - f. *Public Meeting Minutes from 9/4, 9/8 and 9/11/2017*
 - g. *Manifest #6*
 - h. *Weeks Payroll Ending September 24, 2017*
10. **Motion to enter into Non-Public Session–NH RSA 91-A:3II (a) TS Mgr Review (a) Fire Chief special details (a) Fire Chief PARs (2) Roll Call Vote required**
11. **Motion to seal the Non-Public Session Minutes (if necessary.) Roll Call Vote required.**
12. **Miscellaneous/Unfinished Business**
13. **Adjournment**

Posted: Town Hall, Public Safety Complex, Public Library and on leenh.org on September 22, 2017

Individuals needing assistance or auxiliary communication equipment due to sensory impairment or other disabilities should contact the Town Office at 659-5414. Please notify the town six days prior to any meeting so we are able to meet your needs.



TOWN of LEE
7 MAST RD, LEE, NH 03861
(603) 659-5414

Office Use Only
Meeting Date: [Click here to enter a date.](#) 9/25/17
Agenda Item No. [Click here to enter number.](#) 3

BOARD OF SELECTMEN
MEETING AGENDA REQUEST
9/25/2017

Agenda Item Title: Highway Annex Chimney Replacement Quotes

Requested By: Randy Stevens

Date: 9/21/2017

Contact Information: Randy Stevens rstevens@leenh.org

Presented By: Randy Stevens, Highway Supervisor

Description: Sent out half a dozen request for quotes for the replacement of the failing and unsafe Highway Annex chimney. Received two quotes back, both from in town contractors. Asked for separate pricing if contractor takes down chimney or Highway takes down old chimney.

Financial Details: \$1,655 - \$3,300. Funds to be taken from the Town Buildings Capital Reserve Fund. Trustees of Trust Funds have given pre- approval for expenditure.

Legal Authority NH RSA 41:8; 35:1

Legal Opinion: Enter a summary; attach copy of the actual opinion

REQUESTED ACTION OR RECOMMENDATIONS:

Motion:

Move to have David Allen Masonry (low quote) replace the Highway Annex chimney per his quote assuming certificate of insurance is acceptable. Move to have Kevin Kukesh Mason Contractor as a back up contractor per his quote. Project to be funded from the Town Buildings Capital Reserve Fund.

Highway Annex Chimney Replacement Quotes

Contractor	Highway Department Take Down	Vendor Take Down
Kevin Kukesh Mason Contractor -Lee	2,800	3,300
David M Allen Masonry - Lee	1,655	2,105

Denise Duval

From: Toby VanAken
Sent: Thursday, September 21, 2017 8:32 AM
To: Denise Duval
Subject: SWAP SHOP

Contacts: Denise Duval

GOOD MORNING

RANDY AND I TALKED, WE CAN BUILD IN HOUSE

FRAMING MATERIAL – \$8000.00

3000LB SLAB - \$ 125/YD – 17.78 = \$2222.50
SEACOAST REDIMAX

STEEL; #4 RE-BAR AND #4 CORNER BARS FOR RE-ENFORCEMENT; \$628.80
COHEN STEEL

SWAP SHOP ROUGH ESTIMATE; \$10,851.30

ANY ? CALL
THANKS

TOWN OF LEE

Toby Van Aken
Transfer Station Manager
11 Recycling Center Rd. Lee NH 03861
Ph, 603-659-2239 Fax; 603-659-7202
Email: tvanaken@leenh.org

Timothy Oliver shared this file using Google Sheets

swap shop lee,nh

Sign In

SIGN UP TO VIEW

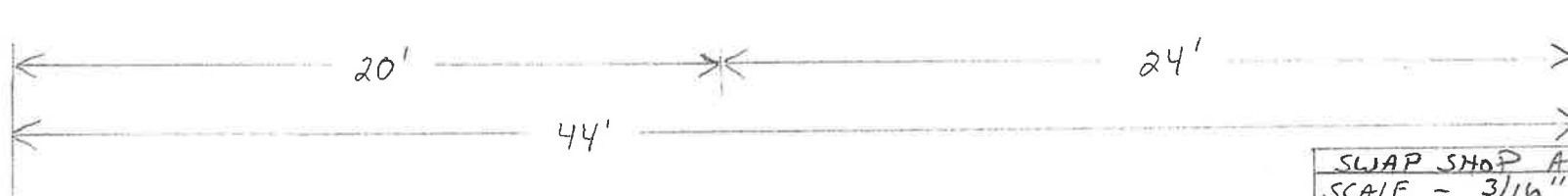
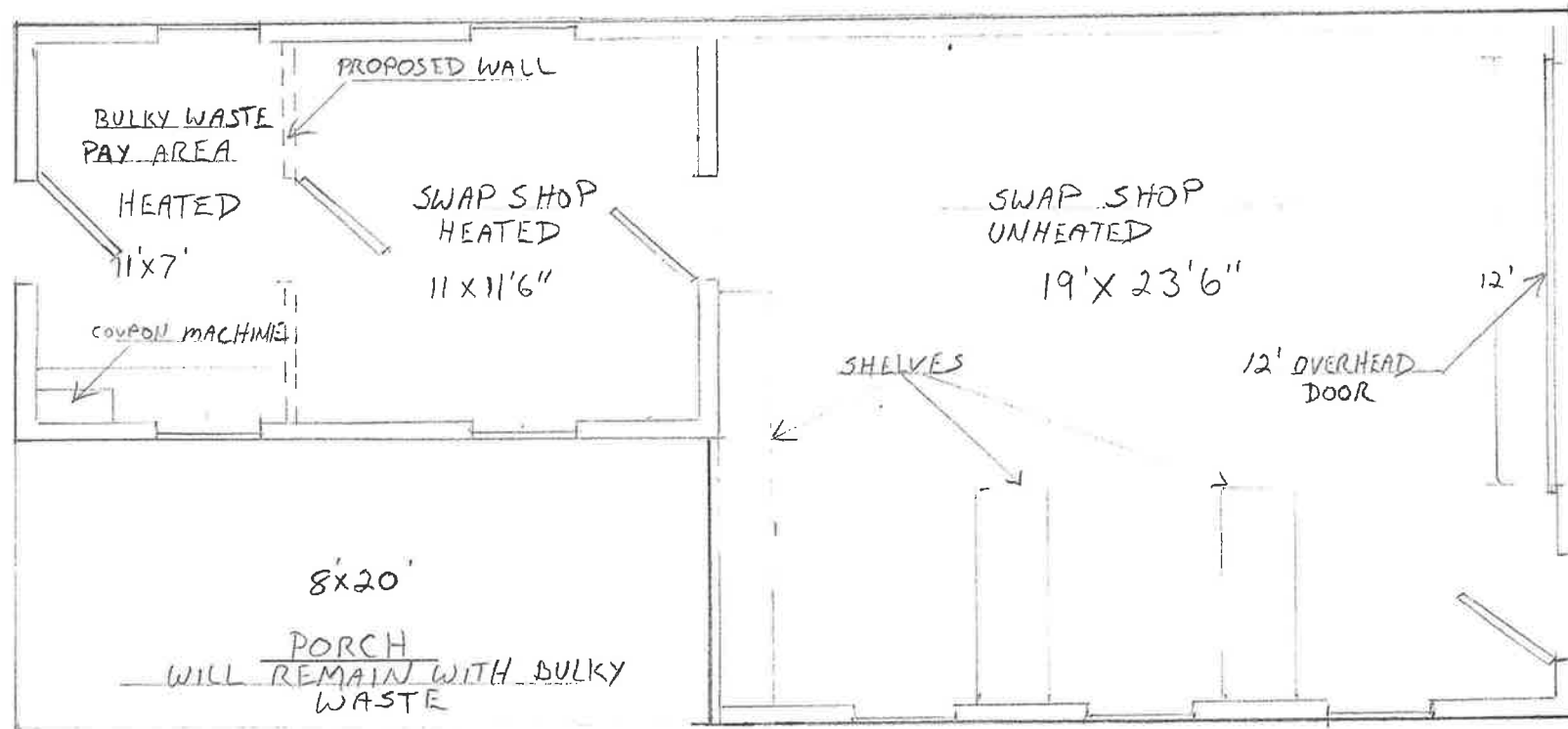
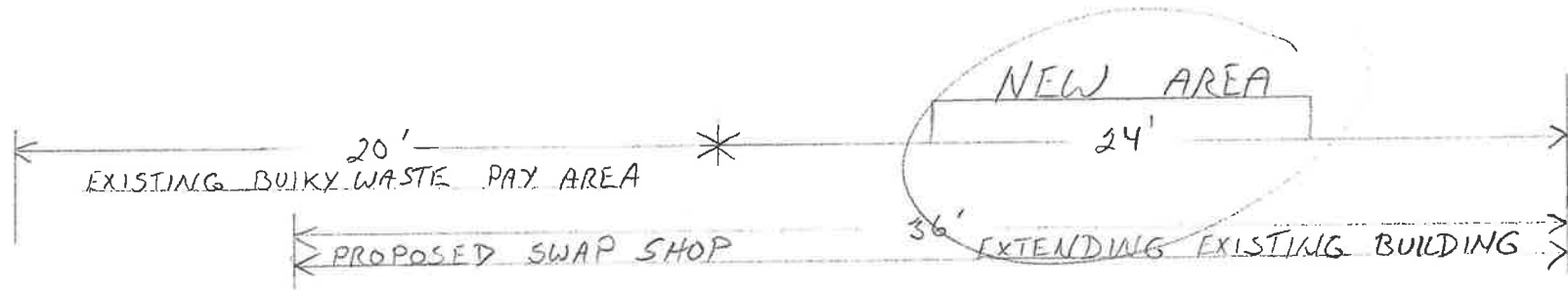
DESC	QTY	COST EA	TOTAL
2X10X14	4	\$22.24	\$88.96
2X8X14	46	\$12.69	\$583.74
2X6X8	80	\$5.77	\$461.60
2X8X12	45	\$10.94	\$492.30
1X3X16	24	\$3.44	\$82.56
2X4X16	16	\$7.22	\$115.52
15/32 4X8 PLYWOOD SOUTHERN PINE	2	\$20.55	\$41.10
FOAM FOUNDATION	2	\$15.00	\$30.00
SIDING PANELS	28	\$25.83	\$723.24
SCREWS BAG	2	\$32.92	\$65.84
DOOR			\$0.00
WINDOW			\$0.00
GARAGE DOOR	1	\$875.00	\$875.00
WINDOWS	3	\$349.48	\$1,048.44
DOORWINDOW FLASHING	2	\$75.00	\$150.00
7/16 in. x 48 in. x 8ft. Oriented Strand Board	20	\$16.25	\$325.00
MISC HARWARE	2	\$325.00	\$650.00
GRACE ICE AND WATER SHIELD	1	\$190.19	\$190.19
UNDERLAYMENT ROOFING GRACE	2	\$75.31	\$150.62
Royal Sovereign Charcoal 25-Year 3-Tab Shingles (33.33 sq. ft. per Bundle)	60	\$29.00	\$1,740.00
1 in. x 6 in. x 16 ft. White Primed Finger-Joint Trim Board	7	\$26.43	\$185.01
			\$0.00
			\$7,999.12

~~XXXXXXXXXXXX~~
~~XXXXXXXXXXXX~~
~~XXXXXXXXXXXX~~

SWAP
shop
In House

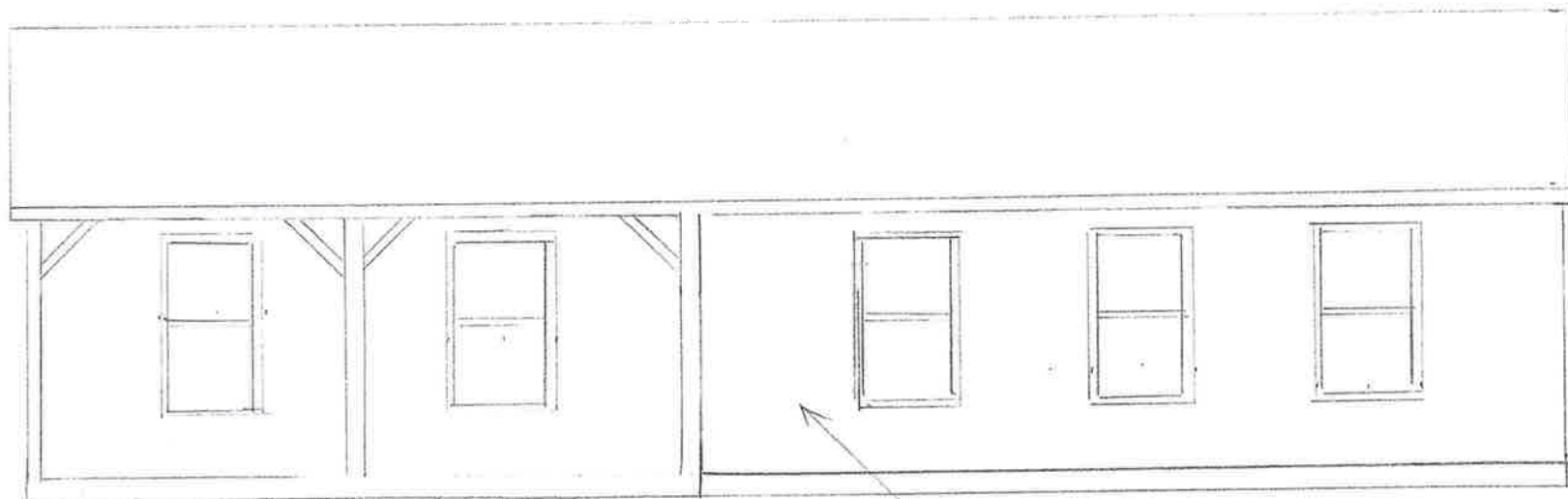
Material
\$ 8000

PROPOSED ADDITION TO BULKY WASTE BUILDING FOR SWAP SHOP



SWAP SHOP ADDITION
 SCALE - 3/16" = 1'0"
 DATE - 8/28/17 PAGE 3
 DRAWN BY C. BELYEA

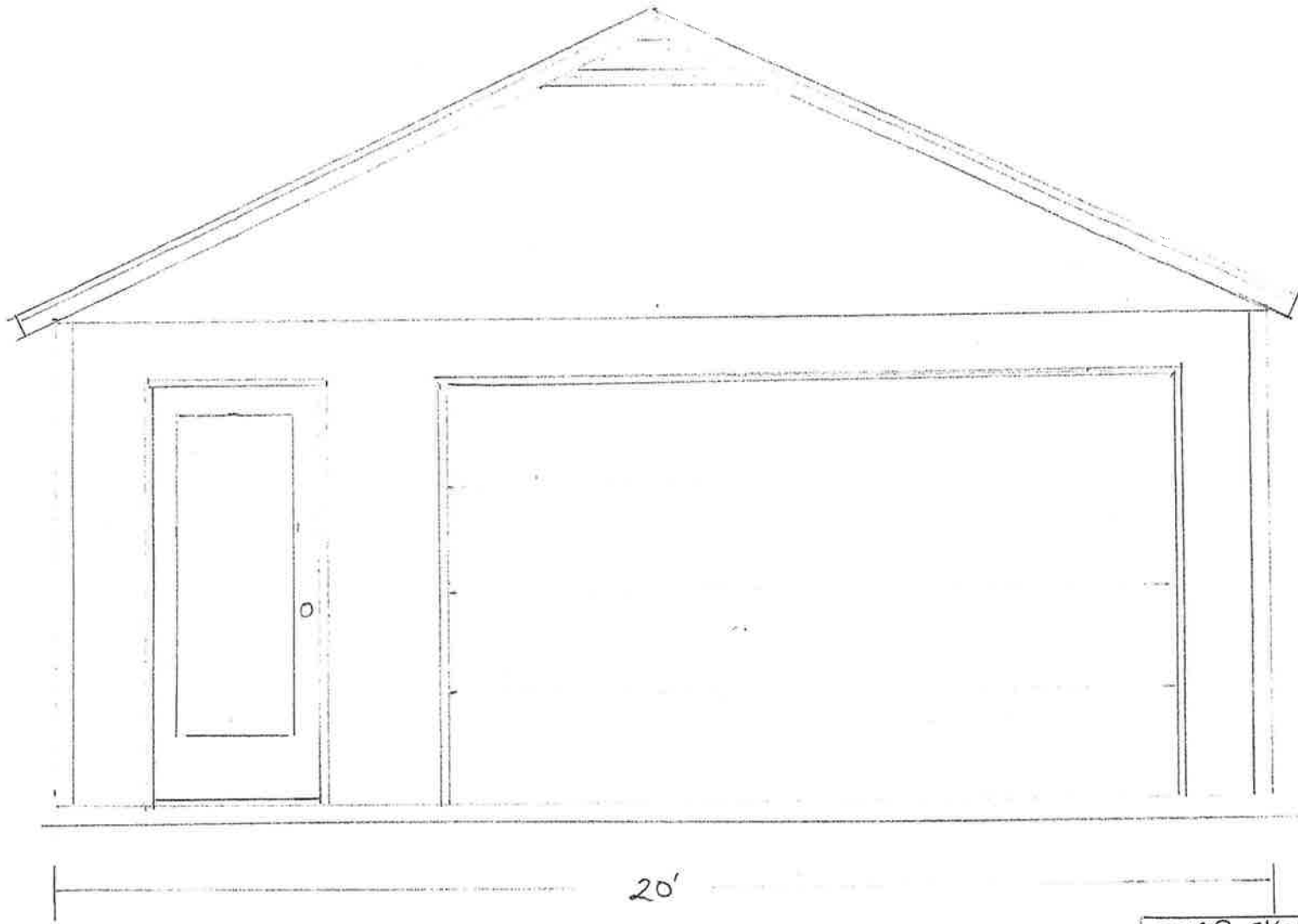
PROPOSED ADDITION TO BULKY WASTE BUILDING FOR SWAP SHOP
SOUTH VIEW



TRIM + SIDING TO MATCH
EXISTING

SWAP SHOP ADDITION
SCALE 3/16" = 1'0"
DATE 8/28/17 PAGE 1
DRAWN BY C. BELYEA

PROPOSED ADDITION TO BULKY WASTE BUILDING FOR SWAP SHOP
EAST VIEW



SWAP SHOP ADDITION
SCALE 3/8" = 1'0"
DATE 8/28/17 PAGE 2
DRAWN BY C. BELYEA



TOWN of LEE
7 MAST RD, LEE, NH 03861
(603) 659-5414

Office Use Only

Meeting Date: September 25, 2017

Agenda Item No. 4b

BOARD OF SELECTMEN
MEETING AGENDA REQUEST
9/25/2017

Agenda Item Title: Swap Shop Hours

Requested By: Toby Van Aken

Date: 9/20/2017

Contact Information: 603-659-2239

Presented By: Toby Van Aken, Transfer Station Manager

Description: Request permission to close the Swap Shop during the construction of the new Swap Shop.

Financial Details: N/A

Legal Authority RSA 41:8; 41:11-a

Legal Opinion: Enter a summary; attach copy of the actual opinion

REQUESTED ACTION OR RECOMMENDATIONS:

Motion: Move to grant the Transfer Station Manager permission to close the Swap Shop for the time period during the construction of the new Swap Shop.

LEE SUSTAINABILITY COMMITTEE

LEE, NH

Sustainable now
and into the future





TOWN of LEE
7 MAST RD, LEE, NH 03861
(603) 659-5414
Email: dduval@leenh.org

Office Use Only
Meeting Date: 9/25/17
Agenda Item No. 7

BOARD OF SELECTMEN
9/25/17 **MEETING AGENDA REQUEST**
(Meeting Date Requested)

Agenda Item Title: Town Hall, Library Historical Society Museum

Revised site plan

Requested By: Scott Bugbee Date: 9/20/17

Contact Information: deborahschanda@gmail.com

Presented By: Deborah Schanda

Description: Present AG Architects quote to update site plan per Revised square footage additions

Financial Details: Cost as specified: \$1,250.⁰⁰

Legal Authority (usually NH RSA or Town Ordinance/Policy): _____

Legal Opinion: _____

REQUESTED ACTION OR RECOMMENDATIONS:

Discussion to move forward is requesting quote for a perspective rendering.

FY 19 Budget Calendar

October 2017

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
1	2	3	4	5	6	7
8	9 Select Board 6:30 pm	10	11	12	13	14
15	16	17	18	19	20	21
22	23 Select Board 6:30 pm	24	25	26	27	28
29	30	31				

FY 19 Budget Calendar

November 2017

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
			1	2	3	4
5	6 Select Board 6:30 pm	7	8	9	10 Veteran's Day (celebrated)	11
12	13	14	15	16	17	18
19	20 Select Board 6:30 pm	21	22	23 Thanksgiving	24 Thanksgiving	25
26	27	28	29	30		

FY 19 Budget Calendar

December 2017

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
					1	2
3	4 Select Board 6:30 pm	5	6	7	8	9
10	11	12	13	14	15	16
17	18 Select Board 6:30 pm ABC Budget Presentation	19	20	21	22	23
24	25 Christmas	26	27	28	29	30
31						

FY19 Budget Calendar

January 2018

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	1 New Year's Day	2 Select Board 6:30 pm 1 st Budget Public Hearing Approve Default Budget Review Draft Warrant	3	4	5 Last Day for Petition Bond WA	6
7	8	9 Last Day to Submit Petition WA	10	11	12	13
14	15 MLK Holiday	16 Select Board 6:30 pm 2 nd Budget Public Hearing Last Day Bond Public Hearing	17	18	19	20
21	22 Select Board 6:30pm Finalize Budget & Warrant	23	24 First Day to Declare Candidacy	25	26	27
28	29 Select Board 6:30pm Last Day to Post Warrant & Budget	30	31			

FY 19 Budget Calendar

February 2018

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
				1	2 Last Day to file Candidacy	3 Deliberative Session
4	5	6	7	8	9	10 Deliberative Session Snow Day
11	12 Select Board 6:30 pm	13	14	15	16	17
18	19 President's Day	20	21	22	23	24
25	26 Select Board 6:30 pm Last Day Public Hearing to Establish Special Revenue Fund	27	28			

FY 19 Budget Calendar

March 2018

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
				1	2	3
4	5	6 Town Reports Due	7	8	9	10
11	12 Select Board 6:30 pm	13 Ballot Session	14	15	16	17
18	19	20	21	22	23	24
25	26 Select Board 6:30 pm	27	28	29	30	31

\$1,000/annual



SRPC will be launching a regional web-GIS viewer called MapGeo. MapGeo provides a customized view of parcel and assessing data, allowing municipal officials to maintain the privacy of sensitive information while providing enhanced public access to property data. Users of MapGeo can control which data layers are visible, draw on and label features, and share or print their own map. The data layers immediately available are listed below, with additional capacity to develop customized layers. SRPC is excited to be able to offer this innovative online tool to the region.

DATA LAYERS

Parcels and Assessing Data

Land Use and Zoning

- Land Use
- Regional & Local Zoning

Natural Resources

- FEMA Floodplain & Base Flood Elevation
- Conservation Land – updates reflected immediately!
- Wetlands & Prime Wetlands
- Aquifer Transmissivity
- Watershed Boundaries (subwatershed and watershed)
- Soils & Prime Farmland
- Wildlife Action Plan – Habitat Land Cover
- Wildlife Action Plan – Highest Ranked Habitats

Economic Development


- Workplace Destinations
- Median Household Income
- Poverty Rate
- Sites of Interest

Base Features

- 20' & 100' Contours
- RPC Boundaries
- Municipal Boundaries

Transportation

- Aerial Imagery
- Project Portfolio
- 2010 Census Urbanized Areas
- Urban Compact Area
- Recreational Trails – opportunities to map and add your trails!
- GACIT Districts
- Bridge Inventory

 **Questions?**
Contact Rachael Mack, GIS Planner at rmack@strafford.org or at 603-994-3500



SERVICES AGREEMENT
between the
TOWN OF LEE
and the
STRAFFORD REGIONAL PLANNING COMMISSION

The Town of Lee, hereafter referred to as the Town, and the Strafford Regional Planning Commission, hereafter referred to as the Commission, mutually agree as follows:

1. SCOPE OF SERVICES. The Commission shall perform, in a proper and professional manner, the following services:
 1. Attached as Exhibit A Scope of Services.
2. TIME OF PERFORMANCE. The Commission will perform work set forth in the Scope of Services during the period beginning November 1, 2017 and ending December 31, 2018.
3. COMPENSATION. The Town agrees to pay the Commission an annual fee of \$1,000.
4. PAYMENT SCHEDULE. The Town agrees to pay the Commission the fee on an annual basis. The Commission will send an invoice within 60 days of the commencement of services, and the Town will remit payment within 30 days of receipt of the invoice.
5. TERMINATION OF AGREEMENT FOR CAUSE. If there is any default by the Commission in the performance of its duties under this agreement, the Town shall send written notice to the Commission specifying the nature of the default. The Commission shall have 5 working days from the date of receipt of the written notice to cure any claimed default. If the Commission does not cure the claimed default within 5 working days from the receipt of the written notice, the Town shall have the right to terminate this agreement by another written notice to the Commission specifying the date of termination which shall be not less than 5 days from the date of the notice of termination. In that event, all finished or unfinished documents and data prepared by the Commission shall, at the option of the Town, become its property, and the Commission shall receive just and equitable compensation for such work as performed by the Commission for the Town.
6. ENTIRE AGREEMENT. It is expressly understood and agreed by the Town and the Commission that this Agreement represents their entire negotiations and agreements made by them. Both parties may expressly agree to a written amendment of this Agreement.

IN WITNESS THEREOF, the Town and the Commission have executed this Agreement on the day and year first written below.

For the Town:

Julie E. Glover, Town Administrator

Date

For the Commission:

Cynthia Copeland, AICP, Executive Director

Date

EXHIBIT A

SCOPE OF SERVICES

The Commission will host the Town's digital tax parcel data and corresponding CAMA database, current to the calendar year at the commencement of this contract, on the Commission's MapGeo website. The Town is responsible for providing the most current digital tax parcel data and CAMA database to the Commission for use within 30 days of the start of this contract in order to process and incorporate the data into the site. The Commission is not responsible for conducting any updates to either the digital tax parcel data or CAMA database, nor is it responsible for errors or omissions in the data provided by the Town.

Features and benefits included with MapGeo:

- Digital Tax Property Record including: Google Street View image, address, map-lot number, ownership, land area, data source, and date last updated
- Search property records by name, address, and location or manually select a property from the digital tax parcel data layer
- Access to 25+ additional data layers related to natural resources, economic development, transportation, land use, and zoning
- Additional data layers (e.g., conservation land, recreational trails) updated frequently
- Four unique base maps available
- Add custom labels, figures, and measurements to the map
- Overlay different combinations of data layers
- Create custom maps and send it to others using a shareable link or print as a formatted PDF

Audit Year	2013	2014	2015	2016	2017	
History of current year lien						
Lien Year	2011	2012	2013	2014	2015	Average
Uncollected BOY	<u>279,210.07</u>	<u>223,305.29</u>	<u>206,151.24</u>	<u>227,313.68</u>	<u>212,519.65</u>	
Uncollected EOY	196,848.70	157,871.85	88,074.67	109,183.52	144,833.88	
% of Prior Year Balance Uncollected at Year End	70.50%	70.70%	42.72%	48.03%	68.15%	60.02%

History of lien 2 years old

Lien Year	2010	2011	2012	2013	2014	
Uncollected BOY	<u>292,231.52</u>	<u>196,848.70</u>	<u>157,871.85</u>	<u>88,074.67</u>	<u>109,183.52</u>	
Uncollected EOY	25,134.53	43,417.39	10,835.04	16,234.81	8,356.95	
% of Prior Year Balance Uncollected at Year End	8.60%	22.06%	6.86%	18.43%	7.65%	12.72%

At Current Fiscal Year End

		5 Year Average Uncollected	
Current Year Lien	260,825.77	60.02%	156,551.00
Prior Year Lien	144,833.88	12.72%	18,425.00
			<u>174,976.00</u>

Estimated Allowance on current and 1 year old lien



BUSINESSCARD RESOLUTION FORM FOR THE MUNICIPALITY OF

Town of Lee

Print Municipality Name

Officer's Certificate Regarding BusinessCard Agreement Authorization

The undersigned, the Board of Selectmen, and duly authorized officer of Town of Lee
(the "Municipality"), a municipality created under the laws of the State of New Hampshire, hereby certifies that the following resolutions were adopted by the Governing Body of the Municipality at a duly called and held meeting at which a quorum was present and acting throughout, and that such resolutions are now in full force and effect:

RESOLVED, that the following officer(s) of this Municipality:

<u>Name</u>	<u>Title</u>
<u>Joanne Clancy</u>	<u>Finance Officer</u>
<u>Denise Duval</u>	<u>Town Secretary</u>
<u>Colleen Brewster</u>	<u>Accounting Assistant</u>

is/are hereby authorized and empowered, for and in behalf and in the name of the Municipality (i) to execute and deliver to People's United Bank, National Association (the "Bank") a BusinessCard Application for business purposes (the "Agreement") setting forth the conditions on which the Bank shall on request issue MasterCard ("Credit Cards") jointly in the names of the Municipality and authorized employees or other persons, for use only in connections with the business of the Municipality, and (ii) to perform any act and to execute and deliver all instruments and documents which may be deemed necessary to carry out the purposes of the Agreement and these resolutions.

BE IT FURTHER RESOLVED, that each employee or other person designated in writing to the Bank at any time for the purposes of the Agreement by any officer named in the immediately preceding resolution, is hereby authorized to use the Credit Card(s) issued pursuant to the Agreement in the joint names of such employee or other person and the Municipality, and to charge purchases for the amount of the Municipality by means of such Credit Card(s) and in connection therewith to sign sales drafts on behalf of the Municipality evidencing such purchases.

BE IT FURTHER RESOLVED, that the Bank be requested to extend credit to the Municipality with respect to charges for the account of the Municipality pursuant to the provisions of the Agreement.

BE IT FURTHER RESOLVED, that these resolutions shall have force and effect of a continuing agreement between the Bank and the Municipality, on which agreement the Bank may rely and the Municipality shall be bound until the Bank is otherwise advised in writing by one of the above-named officers of the Municipality.

IN WITNESS WHEREOF, I/we have signed this Officer's Certificate on the 25 day of Sept., 2017.

Attest:

Signature

Chariman, Board of Selectmen and duly authorized officer

Title

John LaCourse

Print Name

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION
NOTICE OF INTENT TO EXCAVATE
RSA 72-B

2017

For Tax Year April 1, 17 to March 31, 18

(Assigned by Municipality)

YR	TOWN	OP#
17	255	02 - E

PLEASE TYPE or PRINT (If filling in form on-line; use TAB key to move through fields)

- Town/City of: LEE NH (AUGEN)
- Tax Map/Block/Lot #: 35-009
- Name of Access Road: RT 152
- Total Acreage of Lot: 79A
- Date of Permit per RSA 155-E:2: _____
or (Municipal Excavation Permit)
- Date of Report, if required, per RSA 155-E:2, 1(d): _____
- Permit Number per RSA 485-A:17, if any: _____
(Alteration of Terrain Permit)
- Incidental Construction/155-E:2-a Exception: Check if YES
- Total Permitted Area (acres): 79A
- Excavation Area (acres) as of April 1: 10A
- Reclaimed Area (acres) as of April 1: 36A
- Remaining Cubic Yards of Earth to Excavate: 400000³ yds
- Type of Ownership:
 - Owner of land
 - Previous owner retaining deeded earth excavation rights
 - Owner of earth or earth excavation rights on public lands (Fed., State, Municipal, etc) or, removes earth from public lands or right-of-ways

14. DESCRIPTION OF EARTH TO BE EXCAVATED DURING TAX YEAR

EARTH TYPE	ESTIMATED CUBIC YARDS (CY)
GRAVEL	
SAND	<u>400000³ yds.</u>
LOAM	
STONE PRODUCTS	
OTHER ()	
TOTAL	<u>400000³ yds</u>

15. CHECK THE BOX THAT DESCRIBES THIS INTENT

- ORIGINAL WITH \$100 FEE (check payable to State of New Hampshire)
- ORIGINAL WITH NO FEE (excavation of 1,000 cubic yards or less)
- SUPPLEMENTAL WITH \$100 FEE (exceeding original estimate of 1,000 cubic yards or less)
- SUPPLEMENTAL WITH NO FEE (fee previously paid with original intent)

16. We hereby assume responsibility for reporting all earth excavated within 30 days of completion or by the end of the tax year, whichever comes first. (If a Corporation, an Officer must sign.)

WILLIAM CHICK
PRINT CLEARLY OR TYPE NAME OF OWNER
William Chick 9/14/17
SIGNATURE (in ink) OF OWNER(S) OR OFFICER(S) DATE SIGNED

PRINT SIGNATORY NAME (AND TITLE IF APPLICABLE)
SIGNATURE (in ink) OF OWNER(S) OR OFFICER(S) DATE SIGNED

PRINT SIGNATORY NAME (AND TITLE IF APPLICABLE)
William Chick

MAILING ADDRESS 230 P. SLASSIC RD.

CITY OR TOWN NEW FIELDS STATE NH ZIP CODE 03856

E-MAIL ADDRESS _____

HOME PHONE (Enter number without dashes) 603-772-3735 CELL PHONE (Enter number without dashes) 603 583 05856

DATE INTENT SENT TO TOWN: 9/18/17

E-MAIL REPORT & CERTIFICATE? YES NO
If NO, Report and Certificate will be mailed to the address above.

TO BE COMPLETED BY MUNICIPAL ASSESSING OFFICIALS

Amount of Security Required \$ _____

Security Posted (Bond, Certified Check, etc.) \$ _____

SIGNATURES OF MUNICIPAL ASSESSING OFFICIALS & DATE

The Municipal Assessing Officials hereby acknowledge receipt of the Notice of Intent to Excavate and certify that:

- All owners of record have signed the Intent;
- If the land is in Current Use, the land use change tax shall be assessed on the non-qualifying land;
- The form is complete; and
- Any bond required under RSA 72-B:5 has been received.
- The Tax Collector shall be notified within 30 days of signing the Intent pursuant to RSA 72-B:8

SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL	DATE
SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL	DATE
SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL	DATE
SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL	DATE
SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL	DATE

FOR DRA USE ONLY

SIGNED ORIGINAL COPY - RETAINED BY CITY/TOWN

SIGNED COPY TO - OWNER, RETURNED BY MUNICIPAL ASSESSING

NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION
NOTICE OF INTENT TO EXCAVATE
RSA 72-B

WORKSHEET
2017

For Tax Year April 1, 17 to March 31, 18

(Assigned by Municipality)

YR TOWN OP#
17 - 255 - 03 - E

PLEASE TYPE or PRINT (if filing in form on-line; use TAB key to move through fields)

- 1. Town/City of: LEE NH (CARLEND)
- 2. Tax Map/Block/Lot #: 18-004
- 3. Name of Access Road: CARLEND RD.
- 4. Total Acreage of Lot: 3.0A
- 5. Date of Permit per RSA 155-E:2: _____
or _____
(Municipal Excavation Permit)
- 6. Date of Report, if required, per RSA 155-E:2, 1(d): _____
- 7. Permit Number per RSA 485-A:17, if any: _____
(Alteration of Terrain Permit)
- 8. Incidental Construction/155-E:2-a Exception: Check if YES
- 9. Total Permitted Area (acres): 2.0A
- 10. Excavation Area (acres) as of April 1: 2.1A
- 11. Reclaimed Area (acres) as of April 1: 1.8A
- 12. Remaining Cubic Yards of Earth to Excavate: 15000³yd
- 13. Type of Ownership:
 - Owner of land
 - Previous owner retaining deeded earth excavation rights
 - Owner of earth or earth excavation rights on public lands (Fed., State, Municipal, etc) or, removes earth from public lands or right-of-ways

14. DESCRIPTION OF EARTH TO BE EXCAVATED DURING TAX YEAR

EARTH TYPE	ESTIMATED CUBIC YARDS (CY)
GRAVEL	
SAND	5000 ³ yd
LOAM	
STONE PRODUCTS	10000 ³ yd
OTHER ()	
TOTAL	15000 ³ yd

15. CHECK THE BOX THAT DESCRIBES THIS INTENT

- ORIGINAL WITH \$100 FEE (check payable to State of New Hampshire)
- ORIGINAL WITH NO FEE (excavation of 1,000 cubic yards or less)
- SUPPLEMENTAL WITH \$100 FEE (exceeding original estimate of 1,000 cubic yards or less)
- SUPPLEMENTAL WITH NO FEE (fee previously paid with original intent)

16. We hereby assume responsibility for reporting all earth excavated within 30 days of completion or by the end of the tax year, whichever comes first. (If a Corporation, an Officer must sign.)

WILLIAM CHICK
PRINT CLEARLY OR TYPE NAME OF OWNER
William Chick
SIGNATURE (in ink) OF OWNER(S) OR OFFICER(S) 9/14/17
DATE SIGNED

PRINT SIGNATORY NAME (AND TITLE IF APPLICABLE) _____
SIGNATURE (in ink) OF OWNER(S) OR OFFICER(S) _____ DATE SIGNED _____

PRINT SIGNATORY NAME (AND TITLE IF APPLICABLE) WILLIAM CHICK

MAILING ADDRESS <u>230 PISCASSIC RD</u>		
CITY OR TOWN <u>NEWFIELDS</u>	STATE <u>NH</u>	ZIP CODE <u>03856</u>
E-MAIL ADDRESS _____		
HOME PHONE (Enter number without dashes) <u>603-772-3735</u>	CELL PHONE (Enter number without dashes) <u>603-583-05856</u>	

DATE INTENT SENT TO TOWN: 9/18/17
E-MAIL REPORT & CERTIFICATE? YES NO
If NO, Report and Certificate will be mailed to the address above.

TO BE COMPLETED BY MUNICIPAL ASSESSING OFFICIALS

Amount of Security Required \$ _____
Security Posted (Bond, Certified Check, etc.) \$ _____

SIGNATURES OF MUNICIPAL ASSESSING OFFICIALS & DATE
The Municipal Assessing Officials hereby acknowledge receipt of the Notice of Intent to Excavate and certify that:

- All owners of record have signed the Intent;
- If the land is in Current Use, the land use change tax shall be assessed on the non-qualifying land;
- The form is complete; and
- Any bond required under RSA 72-B:5 has been received.
- The Tax Collector shall be notified within 30 days of signing the Intent pursuant to RSA 72-B:6

SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL _____	DATE _____
SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL _____	DATE _____
SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL _____	DATE _____
SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL _____	DATE _____

FOR DRA USE ONLY

SIGNED ORIGINAL COPY - RETAINED BY CITY/TOWN

(Assigned by Municipality)

YR TOWN OP# T

For Tax Year April 1, 17 to March 31, 18

PLEASE TYPE OR PRINT (If filling in form on-line, use TAB Key to move through fields)

1. Town/City of LEE
 2. Tax Map/Block/Lot or USFS Sale Name & Unit No.
MAP 23, LOT 3
 3. Intent Type: Original Supplemental _____
 (.Original Intent Number)

4. Name of Access Road: HIGH ROAD
 5a. Acreage of Lot: 81.98 Acreage of Cut: 50
 5b. Anticipated Start Date: 9/22/2017

6. Type of ownership (check only one):
 a. Owner of Land and Stumpage (Joint Tenants)
 b. Owner of Land and Stumpage (Tenants in Common)
 c. Previous owner retaining deeded timber rights
 d. Owner/Purchaser of stumpage & timber rights on public lands (Fed., State, municipal, etc.) or Utility Easements

REPORT OF CUT / CERTIFICATE TO BE SENT TO:
 OWNER OR **LOGGER/FORESTER**
 BY MAIL OR **E-MAIL**

7. We hereby accept responsibility for reporting all timber cut within 60 days after the completion of the operation or by May 15, whichever comes first. We also assume responsibility for any yield tax which may be assessed. (If a corporation, an officer must sign.)

Attach a signature page for additional owners.
 9/17/17
 SIGNATURE (in ink) OF OWNER(S) OR CORPORATE OFFICER(S) DATE SIGNED
DEAN H. RUBINE

PRINT CLEARLY OR TYPE NAME OF OWNER(S) OR CORPORATE OFFICER(S)
 9/17/17
 SIGNATURE (in ink) OF OWNER(S) OR CORPORATE OFFICER(S) DATE SIGNED

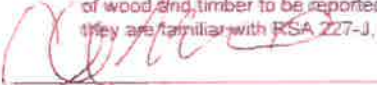
RUTH J. SAMPLE
 PRINT CLEARLY OR TYPE NAME OF OWNER(S) OR CORPORATE OFFICER(S)
116 HIGH ROAD
 MAILING ADDRESS
LEE NH 03861
 CITY OR TOWN STATE ZIP CODE
ruth.sample@unh.edu
 E-MAIL ADDRESS
(603) 659-3808
 HOME PHONE (Enter number without dashes) CELL PHONE (Enter number without dashes)

8. Description of Wood or Timber To Be Cut

Species	Estimated Amount To Be Cut	
White Pine	50	MBF
Hemlock	15	MBF
Red Pine	2	MBF
Spruce & Fir		MBF
Hard Maple		MBF
White Birch	1	MBF
Yellow Birch	2	MBF
Oak	10	MBF
Ash	1	MBF
Soft Maple	5	MBF
Beech/Pallet/Tie Logs	15	MBF
Other (Specify)		MBF
Pulpwood		Tons
Spruce & Fir		
Hardwood & Aspen		
Pine		
Hemlock		
Biomass Chips	1,500	
Miscellaneous		Tons
High Grade Spruce/Fir		
Cordwood & Fuelwood	75	Cords

9. Species and Amount of Wood or Timber For Personal Use or Exempt. See exemptions on back of form.

Species	Amount
---------	--------

10. By signing below, the ~~owner~~ **Logger/Forester** or ~~person responsible for cutting~~ hereby accepts responsibility for verifying the volumes of wood and timber to be reported by the owner, and certifies that they are familiar with RSA 227-J, the timber harvest laws.
 9/13/17
 SIGNATURE (in ink) OF PERSON RESPONSIBLE FOR CUT DATE

CHARLES A. MORENO
 PRINT CLEARLY OR TYPE NAME OF PERSON RESPONSIBLE FOR CUT
P.O. BOX 60
 MAILING ADDRESS
CENTER STRAFFORD NH 03815
 CITY OR TOWN STATE ZIP CODE
(603) 234-0444 cmforestry@metrocast.net
 PHONE NUMBER E-MAIL ADDRESS

FOR MUNICIPAL ASSESSING OFFICIALS ONLY

The Selectmen/Municipal Assessing Officials hereby certify that:
 1. All owners of record have signed the Intent.
 2. The land is not under the Current Use Unproductive category.
 3. The form is complete and accurate; and
 4. Any timber tax bond required has been received.
 5. The tax collector will be notified within 30 days of receipt pursuant to RSA 79:10.
 6. This form to be forwarded to DRA within 30 days.

SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL DATE SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL DATE SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL DATE
 SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL DATE SIGNATURE OF MUNICIPAL ASSESSING OFFICIAL DATE

Town of Nottingham
P.O. Box 114
Nottingham NH
03290
Planning & Zoning



Office 603-679-9597
Fax 603-679-1013

NOTICE OF PUBLIC HEARING TO REVOKE PLANNING BOARD APPROVAL
Town of Nottingham
LEGAL/PUBLIC NOTICE
September 27, 2017

Notice is hereby given in accordance with RSA 676:4-a that the Planning Board will hold a public hearing on September 27, 2017 at 7:00pm at the Nottingham Town Hall for the purpose of considering whether to revoke a plan for Map 3, Lot 10, on Old Turnpike Rd, previously-approved on November 16, 2005 and filed with the Rockingham County Register of Deeds as Plan D-33445 and also Book 4626 Page 1507. The Board is considering revocation for failure of compliance with conditions of approval. Should a decision not be reached at the public hearing, this application will stay on the Planning Board agenda until such time as it is either approved or disapproved.

Per order of the Nottingham Planning Board
JoAnna Arendarczyk
Nottingham Land Use Clerk

Questions? Contact the Land Use Clerk, JoAnna Arendarczyk
Ph.: (603) 679-9597 ext. 1 **E-mail:** plan.zone@nottingham-nh.gov
Mail written comments to the Nottingham Planning Board: PO Box 114, Nottingham, NH 03290
For materials pertaining to the hearing go to: <http://www.nottingham-nh.gov/planning-board>
THE PUBLIC IS WELCOME TO ATTEND

Julie Glover

From: arlonchaffee@gmail.com on behalf of Arlon Chaffee <arlon@lococycling.com>
Sent: Thursday, September 14, 2017 10:56 AM
To: Julie Glover
Cc: Tom Dronsfield
Subject: Charity Bicycle Ride - October 21st - passes through Lee
Attachments: Town of Lee NH (2).pdf

Julie - the 7th Annual King Challenge charity bicycle ride will take place on Saturday Oct 21st. The ride starts and finishes at Timberland in Stratham. The route again comes through Lee: Camp Lee> Rt 152 W> Demerit> Cartland> Lee Hill> Wednesday Hill.

The ride starts at 9AM at in Stratham so the fastest riders would hit Campground Rd town line around 10:30AM. Remaining riders would be coming through town approx 10:45-11:45AM then onto Weds Hill.

These times are estimates as we'll be 25-30 miles into the ride and cyclists ride at their own pace and take their own time at the rest stop in Epping and the water stop on Cartland Rd. There is a "lead pack" of 75-80 riders led by trained motorcyclists and followed by a "sag-wagon"; they are the fast group with other riders as individuals, pairs or smaller groups of 3-15 riders.

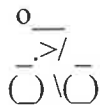
We expect up to 400 riders this year but, by the time they reach Lee, they should be fairly spread out. We have all corners marked with (pole mounted) arrows and put up motorist Caution signs during the week before the event. All signs should be removed by a sweep vehicle that day or, latest, within 24 hours. Riders are instructed to obey the rules of the road.

I am sending along a cert of insurance - see attached. I am also cc'ing Chief Dronsfield, in case we need to discuss any public safety aspects of the ride.

Of course, I am happy to answer any questions either of you may have.

Thanks!

Arlon



Friends don't let friends ride slow

Arlon A. Chaffee
Big Wheel, LOCO Cycling, Inc.
PO Box 471
Newmarket NH 03857
Phone: 603.682.9954

Please consider the environment before printing this e-mail



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/19/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Fairly Consulting Group, LLC 1800 S. Washington, Suite 400 Amarillo, TX 79102	CONTACT NAME: Fairly Group Certificates PHONE (A/C, No, Ext): (806) 376-4761 E-MAIL ADDRESS: certs@fairlygroup.com	FAX (A/C, No): (806) 337-1859
	INSURER(S) AFFORDING COVERAGE	
INSURED USA Cycling, Inc. 210 USA Cycling Point, Suite 100 Colorado Springs, CO 80919	INSURER A: Lexington Insurance Company	NAIC # 19437
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		015375404	12/31/2016	12/31/2017	
	GEN'L AGGREGATE LIMIT APPLIES PER:					
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC					
	<input checked="" type="checkbox"/> OTHER: per Event					
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
						\$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR					EACH OCCURRENCE \$
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					PER STATUTE OTH-ER
	<input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y / <input checked="" type="checkbox"/> N				E L EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> <input checked="" type="checkbox"/> N / A				E L DISEASE - EA EMPLOYEE \$
						E L DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Job 2017-406
Endorsement LEXDOC21 (LX0404) SCHEDULE OF NAMED INSUREDS: Event Organizers and/or Promoters are Named Insureds. It shall be a condition of coverage that all organizers/promoters for whom coverage is afforded under this policy execute a USAC Event Permit Application and coverage will be afforded only for the specific event and date on the permit.

The General Liability policy includes a blanket automatic additional insured endorsement that provides additional insured status to the certificate holder only when there is a written contract between a named insured and the certificate holder that requires such status. Please see attached endorsement LX4309 SEE ATTACHED ACORD 101

CERTIFICATE HOLDER Town of Lee NH 7 Mast Rd. Lee, NH 03861	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE



ADDITIONAL REMARKS SCHEDULE

AGENCY Fairly Consulting Group, LLC		NAMED INSURED USA Cycling, Inc. 210 USA Cycling Point, Suite 100 Colorado Springs, CO 80919	
POLICY NUMBER SEE PAGE 1			
CARRIER SEE PAGE 1	NAIC CODE SEE P 1	EFFECTIVE DATE: SEE PAGE 1	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

Description of Operations/Locations/Vehicles:
(06/14) - Additional Insured - Designated Person or Organization.

Event Number: 2017-406
Event Name: King Challenge
Event Location: Stratham, NH
Event Date(s): 10/21/2017
Includes Kids Fun Ride

ENDORSEMENT

This endorsement, effective 12:01 AM 12/31/2016

Forms a part of policy no.: 015375404

Issued to: USA CYCLING, INC.

By: LEXINGTON INSURANCE COMPANY

ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION

(Based on CG 2026 04/13)

This endorsement modifies insurance provided by the following:

COMMERCIAL GENERAL LIABILITY POLICY

SCHEDULE

Name of Additional Insured Person(s) or Organization(s)

AS REQUIRED BY WRITTEN CONTRACT

Information required to complete this Schedule, if not shown above, will be shown in the Declarations

A. Section II - Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in Mole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III - Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we **will** pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or

2. Available under the applicable Limits of Insurance shown in the Declarations;
whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations

All other terms and conditions of the policy remain the same.



Authorized Representative