

December Highway Report

Another \$115,282.75 has been submitted to CHIP,s for payment in March of 2022, right now we have approx..\$32,000 and change that we can claim and will be claiming more as soon as some check,s come back.

We have borrowed Town of Rathbone,s chipper again and will be cutting tree,s and brush back to accomadate oil and stone work.

The septic tank is in at the shop with final plumbing to be finished by end of month hopefully.

We still have afew thing,s to do to satisfy OSHA and PESH, But other than a little painting it is almost done.

I have been getting paperwork and taking pictures to meet with FEMA on flooding which should from all account,s happen shortly after the first of the year.

We have hired James Brarens Jr. to fill Hayden,s position, he will be starting Jan. 3rd, 2022, all his paperwork has been completed and will be turned in next week, he will be going for a drug test the week of Dec.27.

**NEW YORK STATE DEPARTMENT OF TRANSPORTATION
REQUEST FOR PAYMENT FROM PAVE-NY FUNDING**

**MUNICIPAL DESCRIPTION**

Name of Municipality: TownofLindley

Municipal Code: 640471

PROJECT LISTING CAPITAL PROJECTS FOR WHICH PAYMENT IS REQUESTED

	TOTAL PROJECT COST <i>(Please enter this amount first)</i>	REIMBURSEMENT REQUESTED <i>(Don't exceed project cost)</i>
1. Route/Name/Other: Gibson rd. Location: From .900 miles N To Town Line Project Type: Hwy. Resurfacing Mileage Treated: .490 Sub Project Type: One course surf. treat(chip seals/oil & stone)	\$ 150,000.00	\$ 20,658.91 First Payment? <input checked="" type="radio"/> Yes <input type="radio"/> No Final Payment? <input type="radio"/> Yes <input checked="" type="radio"/> No
2. Route/Name/Other: Gibson rd. Location: From County Rte 5 To .900 miles north Project Type: Hwy. Resurfacing Mileage Treated: .900 Sub Project Type: One course surf. treat(chip seals/oil & stone)	\$ 150,000.00	\$ 22,625.39 First Payment? <input checked="" type="radio"/> Yes <input type="radio"/> No Final Payment? <input type="radio"/> Yes <input checked="" type="radio"/> No
3. Route/Name/Other: Lateral rd. Location: From County Rte. 73 To Dead End Project Type: Hwy. Resurfacing Mileage Treated: .180 Sub Project Type: Two course surf. treat(chip seals/oil & stone)	\$ 75,000.00	\$ 4,510.13 First Payment? <input checked="" type="radio"/> Yes <input type="radio"/> No Final Payment? <input type="radio"/> Yes <input checked="" type="radio"/> No

TOTAL AMOUNT CLAIMED: \$ 47,794.43**CERTIFICATION**

I hereby certify that the total amount claimed for this payment is for unreimbursed expenditures between the dates of 07/08/2021 and 09/23/2021 for rehabilitation and reconstruction of local highways and roads per NYSDOT Program Guidelines, including right-of-way acquisition, preliminary engineering, and construction supervision and inspection where the service life of each project is at least ten years or the project is either: (1) microsurfacing; (2) paver placed surface treatment; (3) single course surface treatment involving chip seals or oil and stone; or (4) double course surface treatment involving chip seals or oil and stone. I hereby certify that, for any above street alteration project where street level pedestrian walkways cross curbs, curb ramps with detectable warnings were installed before the improvement or were installed during the alteration project and are ADA-compliant. I also hereby certify that appropriate local or state design and construction standards were followed for all projects on this form.

Street/Highway Superintendent Name:
Kevin Putman

Phone Number: 6075237294**Date signed:** 11/24/2021

E-mail address (optional):
lindleyhighwayny@gmail.com

Signature

CP73 (May 2021)

**NEW YORK STATE DEPARTMENT OF TRANSPORTATION
REQUEST FOR PAYMENT FROM REIMBURSEMENT PROGRAM**



Select one CHIPS State Touring Routes

MUNICIPAL DESCRIPTION

Name of Municipality: TownofLindley

Municipal Code: 640471

PROJECT LISTING CAPITAL PROJECTS FOR WHICH PAYMENT IS REQUESTED	TOTAL PROJECT COST (Please enter this amount first)	REIMBURSEMENT REQUESTED (Don't exceed project cost)
1. Route/Name/Other: Lateral rd. Location: From County Rte.73 To Dead end Project Type: Hwy. Resurfacing Sub Project Type: Two course surf. treat(chip seals/oil & stone)	\$ 75,000.00	\$ 4,871.46 Final Project Payment? <input type="radio"/> Yes <input checked="" type="radio"/> No
2. Route/Name/Other: Scott rd. Location: From County Rte.73 To Town Line Project Type: Hwy. Resurfacing Sub Project Type: Two course surf. treat(chip seals/oil & stone)	\$ 150,000.00	\$ 22,954.17 Final Project Payment? <input type="radio"/> Yes <input checked="" type="radio"/> No
3. Route/Name/Other: Morgan Creek Rd. Location: From 500' E of Anglehart Rd. To 4,224' east Project Type: Hwy. Resurfacing Sub Project Type: Two course surf. treat(chip seals/oil & stone)	\$ 250,000.00	\$ 39,662.69 Final Project Payment? <input type="radio"/> Yes <input checked="" type="radio"/> No
TOTAL AMOUNT CLAIMED:		\$ 67,488.32

CERTIFICATION

I hereby certify that the total amount claimed for this payment is for unreimbursed expenditures between the dates of 07/07/2021 and 09/09/2021 for construction, reconstruction or improvement of local highways, bridges, highway-railroad crossings, and/or other local facilities per NYS DOT Program Guidelines, including right-of-way acquisition, preliminary engineering, and construction supervision and inspection where the service life of each project is at least ten years or the project is either: (1) microsurfacing; (2) paver placed surface treatment; (3) single course surface treatment involving chip seals or oil and stone; or (4) double course surface treatment involving chip seals or oil and stone. I hereby certify that, for any above street alteration project where street level pedestrian walkways cross curbs, curb ramps with detectable warnings were installed before the improvement or were installed during the alteration project and are ADA-compliant. I also hereby certify that appropriate local or state design and construction standards were followed for all projects on this form.

Street/Highway Superintendent Name:

Kevin Putman

Phone Number: 6075237294**Date signed:** 11/24/2021**E-mail address (optional):**

lindleyhighwayny@gmail.com

Signature