

STATE OF NEW YORK MASTER CONTRACT FOR GRANTS FACE PAGE

STATE AGENCY: NYS Department of State One Commerce Plaza 99 Washington Avenue – Suite 1010 Albany, NY 12231	BUSINESS UNIT/DEPT ID: DOS01/3800000 CONTRACT NUMBER: C1000686 CONTRACT TYPE: <input type="checkbox"/> Multi-Year Agreement <input type="checkbox"/> Simplified Renewal Agreement <input checked="" type="checkbox"/> Fixed Term Agreement
CONTRACTOR SFS PAYEE NAME: FINE TOWN OF	TRANSACTION TYPE: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input checked="" type="checkbox"/> Amendment
CONTRACTOR DOS INCORPORATED NAME: n/a	PROJECT NAME: Clifton-Fine Waterfront Revitalization
CONTRACTOR IDENTIFICATION NUMBERS: NYS VENDOR ID Number: 1000002701 Federal Tax ID Number: 15-6000948 DUNS Number (if applicable): n/a	AGENCY IDENTIFIER: NC 15-LWRP-6 CFDA NUMBER (Federally Funded Grants Only): n/a
CONTRACTOR PRIMARY MAILING ADDRESS: Town of Fine 4078 State Highway 3 Star Lake, NY 13690 CONTRACTOR PAYMENT ADDRESS: <input checked="" type="checkbox"/> Check if same as primary mailing address CONTRACTOR MAILING ADDRESS <input checked="" type="checkbox"/> Check if same as primary mailing address	CONTRACTOR STATUS: <input type="checkbox"/> For Profit <input checked="" type="checkbox"/> Municipality, Code: <input type="checkbox"/> Tribal Nation <input type="checkbox"/> Individual <input type="checkbox"/> Not-for-Profit Charities Registration Number: n/a Exemption Status/Code: 3A/02 <input type="checkbox"/> Sectarian Entity

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<p>CURRENT CONTRACT TERM:</p> <p>FROM: 9/1/2016 TO: 8/31/2019</p> <p>CURRENT CONTRACT PERIOD:</p> <p>FROM: 9/1/2016 TO: 8/31/2019</p> <p>AMENDED TERM:</p> <p>FROM: TO:</p> <p>AMENDED PERIOD:</p> <p>FROM: TO:</p>	<p>CONTRACT FUNDING AMOUNT: (<i>Multi-year</i> – enter total projected amount of the contract; <i>Fixed Term/Simplified Renewal</i> – enter current period amount)</p> <p>CURRENT: \$68,900.00</p> <p>AMENDED:</p> <p>FUNDING SOURCES:</p> <p style="margin-left: 40px;"> <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other </p>																														
<p>FOR MULTI-YEAR AGREEMENTS ONLY – CONTRACT PERIOD AND FUNDING AMOUNT: (Out years represent projected funding amounts)</p>																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">#</th> <th style="width: 25%;">CURRENT PERIOD</th> <th style="width: 25%;">CURRENT AMOUNT</th> <th style="width: 25%;">AMENDED PERIOD</th> <th style="width: 20%;">AMENDED AMOUNT</th> </tr> </thead> <tbody> <tr><td>1</td><td></td><td></td><td></td><td></td></tr> <tr><td>2</td><td></td><td></td><td></td><td></td></tr> <tr><td>3</td><td></td><td></td><td></td><td></td></tr> <tr><td>4</td><td></td><td></td><td></td><td></td></tr> <tr><td>5</td><td></td><td></td><td></td><td></td></tr> </tbody> </table>		#	CURRENT PERIOD	CURRENT AMOUNT	AMENDED PERIOD	AMENDED AMOUNT	1					2					3					4					5				
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<p>ATTACHMENTS PART OF THIS AGREEMENT:</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p><input type="checkbox"/> Attachment A:</p> <p><input checked="" type="checkbox"/> Attachment B:</p> <p><input checked="" type="checkbox"/> Attachment C: Work Plan</p> <p><input type="checkbox"/> Attachment D: Payment and Reporting Schedule</p> <p><input type="checkbox"/> Other:</p> </div> <div style="width: 48%;"> <p><input type="checkbox"/> A-1 Program Specific Terms and Conditions</p> <p><input type="checkbox"/> A-2 Federally Funded Grants</p> <p><input type="checkbox"/> B-1 Expenditure Based Budget</p> <p><input type="checkbox"/> B-2 Performance Based Budget</p> <p><input type="checkbox"/> B-3 Capital Budget</p> <p><input checked="" type="checkbox"/> B-1(A) Expenditure Based Budget (Amendment)</p> <p><input type="checkbox"/> B-2(A) Performance Based Budget (Amendment)</p> <p><input type="checkbox"/> B-3(A) Capital Budget (Amendment)</p> </div> </div>																															

IN WITNESS THEREOF, the parties hereto have executed or approved this Master Contract on the dates below their signatures.

CONTRACTOR:

Town of Fine
4078 State Highway 3
Star Lake, NY 13690

By: _____

Printed Name

Title: _____

Date: _____

STATE AGENCY:

NYS Department of State
One Commerce Plaza
99 Washington Avenue – Suite 1010
Albany, NY 12231

By: _____

Printed Name

Title: _____

Date: _____

STATE OF NEW YORK

COUNTY OF _____

On the ____ day of _____, _____, before me personally appeared _____, to me known, who being by me duly sworn, did depose and say that he/she resides at _____, that he/she is the _____ of the _____, the contractor described herein which executed the foregoing instrument; and that he/she signed his/her name thereto as authorized by the contractor name on the face page of this Master Contract.

(Notary) _____

ATTORNEY GENERAL'S SIGNATURE

By: _____

Printed Name

Title: _____

Date: _____

STATE COMPTROLLER'S SIGNATURE

By: _____

Printed Name

Title: _____

Date: _____

NEW YORK STATE - DEPARTMENT OF STATE

CONTRACT MODIFICATION FORM

Recipient: Town of Fine
Contract #: C1000686
Region: NC
Type of Modification: Budget Modification

Budget Category Changes: ,

- ☒ A. Salaries
- ☐ B. Travel
- ☒ C. Supplies
- ☐ D. Equipment
- ☒ E. Contractual
- ☒ F. Other

Reason and Justification for changes:

The Salaries were revised to reflect the correct titles and compensation of Town employees; also due to workload the Town employees are not able to complete all of the construction as previously planned so funds were shifted from Salaries to Contractual for construction; Supplies was reduced because more of the cost of construction materials for the visitor information center was included in Contractual rather than a direct cost to the Town; Contractual and Other were revised to reflect planned match from the Town including Attorney fees, advertisements, and postage for RFP, bid notices, and public meetings.

RECIPIENT APPROVAL:

_____ Signature of Authorized Official	_____ Date
_____ Name of Authorized Official	_____ Title of Authorized Official

FOR DOS USE ONLY:

Program Representative Action: _____ Approved _____ Disapproved

_____ Signature of Program Representative	_____ Date
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Fiscal Representative Action: _____ Approved _____ Disapproved

_____ Signature of Fiscal Representative	_____ Date
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BUDGET COMPARISON SUMMARY

Contractor Name Town of Fine
Contract Number C1000686
Match Percentage 50%

Category	Current Budget	Change +/-	Amended Budget
A. Salaries	\$30,000.00	-\$25,000.00	\$5,000.00
B. Travel	\$0.00	\$0.00	\$0.00
C. Supplies	\$20,000.00	-\$17,500.00	\$2,500.00
D. Equipment	\$75,800.00	-\$75,800.00	\$0.00
E. Contractual	\$0.00	\$130,200.00	\$130,200.00
F. Other	\$12,000.00	-\$11,900.00	\$100.00
TOTAL PROJECT COST	\$137,800.00	\$0.00	\$137,800.00
Total State Share	\$68,900.00		\$68,900.00
Total Local Share	\$68,900.00		\$68,900.00

ATTACHMENT B-1 – EXPENDITURE BASED BUDGET

A. Salaries	\$5,000.00
B. Travel	\$0.00
C. Supplies	\$2,500.00
D. Equipment	\$0.00
E. Contractual Services	\$130,200.00
F. Other	\$100.00

TOTAL PROJECT COST	\$137,800.00
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Total State Funds	\$68,900.00
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Total Local Share	\$68,900.00
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MWBE Goals:

State funds subject to MWBE goals		\$68,900.00
MBE Goal:	15%	\$10,335.00
WBE Goal:	15%	\$10,335.00

A. SALARIES (including fringe benefits)

<u>Title</u>	<u>Annual Salary</u>	<u>Amount Charged to Project</u>
Medium Equipment Operator	\$33.21/hour	\$1,500.00
Heavy Equipment Operator	\$40.49/hour	\$1,500.00
Superintendent	\$73,484.00/year	\$2,000.00

\$5,000.00**B. TRAVEL****SUBTOTAL****\$0.00****C. SUPPLIES**

Supplies and materials for construction of a visitor information center and selected enhancements such as paint, concrete, crushed stone, sand, wood, signage, lighting, landscaping, hardware, septic system materials, piping, topsoil, seeding.

SUBTOTAL**\$2,500.00****D. EQUIPMENT****SUBTOTAL****\$0.00****E. CONTRACTUAL SERVICES**

Contractual construction services to construct the visitor information center and associated enhancements.....\$121,800.00
Subcontractor: To be determined

Contractual services for regional branding/tourism strategy/marketing.....\$1,250.00
Subcontractor: To be determined

Contractual services from Town Attorney to prepare and review contracts, review bids\$6,700.00
Subcontractor: Pease & Gustafson, LLP
33 Main St - Potsdam, NY, 13676

Advertisements in local media for RFP opportunities.....\$450.00
Subcontractor: To be determined

SUBTOTAL**\$130,200.00**

F. OTHER

Postage for mailing notices for bidding and public meetings.....	\$100.00
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SUBTOTAL**\$100.00**