City of Fall River Massachusetts
Office of the City Clerk

ALISON M. BOUCHARD
CITY CLERK

INÊS LEITE
ASSISTANT CITY CLERK

NOVEMBER 22, 2013

MEETINGS SCHEDULED FOR NEXT WEEK

TUESDAY, NOVEMBER 26, 2013

6:00 P.M. CITY COUNCIL PUBLIC HEARING – TAX CLASSIFICATION

6:30 P.M. COMMITTEE ON FINANCE

AGENDA

7:00 P.M. REGULAR MEETING OF THE CITY COUNCIL

PRIORITY MATTERS

1. *Mayor and order for employment agreement of Director of Human Resources
2. *Mayor and order for gift of $53,300 for construction of the Inclusion Playground at Kennedy Park

PRIORITY COMMUNICATIONS

3. Board of Election Commissioners re Official Results of City Election held on November 5, 2013

COMMITTEE REPORTS

Committee on Real Estate recommending:

Adoption:

4. *Order – Offer from Jose Pacheco d/b/a Dream Homes, LLC for former Orin Fowler School, 286 Sprague Street – $6,100
5. *Order – Offer from Randy Botelho for former Hugo A. Dubuque School, 330 Oak Grove Avenue – $20,000
6. *Order – Acquisition of 0 Hancock Street by the Sewer Commission – $23,000

ORDINANCES

Proposed:

7. *Appendix A – Fee Schedule amendments

Second reading and enrollment:

8. *Traffic, misc.

Second reading and enrollment, as amended:

9. *Submission of enterprise budgets, proposed fee increases or creation of new fees

RESOLUTIONS

10. *Committee on Public Works and Transportation meet with various parties re: repairing of street and sidewalks excavated to install or repair public utilities
11. *Consideration be given to name the Carousel at Battleship Cove in honor of Daniel Bogan

CITATIONS

12. Andrew Fallon – 2013 Mass. State Wresting Champion and New England Champion in Wrestling
13. Claudette Correiro – Celebration of 70th birthday on November 30, 2013
14. Helen Rego – Celebration of 80th birthday on June 5, 2014

ORDERS – HEARINGS FOR TONIGHT

Storage of combustible liquids:

15. 1244 Davol Realty Associates, LLC d/b/a Rectorseal Corp. to store 8,000 gallons of assorted consumer products 1B & 1C aboveground at 1190 Davol Street

One Government Center • Fall River, MA 02722
TEL 508-324-2220 • FAX 508-324-2211 • EMAIL city_clerks@fallriverma.org

ORDERS – HEARINGS TO BE SCHEDULED

Pole location:

16. MA Electric – One (1) pole location – Riverview Street

Joint pole location:

17. MA Electric and Verizon – One (1) joint pole location – Ashley Street

ORDERS – NO HEARING REQUIRED – None

ORDERS – MISCELLANEOUS

18. Police Chief's report on licenses
19. Auto body shop renewals
20. Auto repair shop renewals
21. Adoption of the percentage of the local tax levy for Fiscal Year 2014

COMMUNICATIONS – INVITATIONS – PETITIONS

22. *Claims
23. Structure Over Public Way – Two (2) banners on Bedford and South Main Streets – Children's Christmas Parade

BULLETINS – NEWSLETTERS – NOTICES – None

Alison M. Bouchard

City Clerk

City of Fall River
Massachusetts

Department of Financial Services

TREASURER • COLLECTOR • AUDITOR • ASSESSOR

Board of Assessors

RECEIVED
2013 NOV 21 P 4: 24
CITY CLERK
FALL RIVER, MA

WILLIAM A. FLANAGAN
Mayor

DONALD A. BERUBE
Administrator of Assessing

November 18 , 2013

Mayor William A. Flanagan
Members of the Fall River City Council
One Government Center
Fall River, MA 02722

RE: 2014 FISCAL YEAR TAX FACTOR

Dear Mayor Flanagan and Councilors,

The public hearing concerning the classification of property within the City of Fall River has been scheduled for Tuesday, November 26, 2013 within the City Council Chambers.
The hearing will be held in order to establish a tax factor. If a tax factor of 1.00 is established, Fall River would have an approximate single tax rate of $ 15.80 for fiscal year 2014.
The single rate would apply to all residential, commercial, industrial, and personal property.
The classification hearing is a process that allows a reallocation of the percentage of the local tax levy to be borne by each class of property.

Legislation mandates that the tax factor cannot exceed 1.75. As the factor increases from 1.00 to 1.75, the residential rate declines, and therefore, the commercial, industrial, and personal property (C.I.P.) tax rate increases. Historically, the City of Fall River has utilized the approximate maximum tax factor available each year since February 14, 1989.

We have received the final certification of values, and the minimum residential factor is 77.92%

The 2014 fiscal year local tax levy is $ 82,673,085. Therefore, using the same tax factor as last year (1.70) for fiscal year 2014, the estimated residential rate would be $ 12.54 and the C.I.P. rate would be $ 26.85.

A copy of the various rates that would result from tax factors ranging from 1.00 to 1.75 have been attached to this letter for your review. Before any tax factor can be utilized, it must be adopted by the City Council and approved by the Mayor. If any additional information is required, please feel free to contact City Administrator Shawn Cadime.

Sincerely,

Stephen R. Long
Clerk, Board of Assessors

One Government Center • Fall River, MA 02722
TEL (508) 324-2300 • FAX (508) 324-2301 • EMAIL dberube@fallriverma.org

CITY OF FALL RIVER SHIFT SCENARIO @ last year factor 1.7O

	AVG Single Family	TAX RATE	AVG TAX BILL	INCREASE
FISCAL 2013	210,000	11.93	2,505.30	
FISCAL 2014	206,800	12.54	2,593.27	87.97

	SMALL Commercial	TAX RATE	AVG TAX BILL	INCREASE
FISCAL 2013	464,000	25.43	11,799.52	
FISCAL 2014	454,720	26.85	12,209.23	409.71

FACTOR SCENARIO

Residential Value	Single tax rate% Tax bill	tax increase Tax bill	shift 125 % Tax bill	Tax bill increase Tax bill	shift 150 % Tax bill	Tax bill increase Tax bill	shift 175 % Tax bill	Tax bill decrease Tax bill
206,800.00	3,267.44	674.17	3,025.48	432.21	2,785.60	192.33	2,545.71	(47.56)

Commercial Value	single tax rate% Tax bill	tax decrease Tax bill	shift 125 % Tax bill	Tax bill decrease Tax bill	shift 150 % Tax bill	Tax bill decrease Tax bill	shift 175 % Tax bill	Tax bill Increase Tax bill
454,720.00	7,184.58	(5,024.66)	8,976.17	(3,233.06)	10,772.32	(1,436.92)	12,568.46	359.23

Factors	Res Tax Rate	CIP Tax Rate
1	15.8	15.8
1.25	14.63	19.74
1.5	13.47	23.69
1.7	12.54	26.85
1.75	12.31	27.64

What If...Scenario Worksheet

CLASS	VALUE	%	
Res	4,043,478,165	77.2561%	R & O %
O S	0	0.0000%	77.2561%
Com	701,672,194	13.4064%	
Ind	333,272,164	6.3676%	C I P %
PP	155,439,300	2.9699%	22.7439%
Total	5,233,861,823	100.0000%	

PAGE DOWN TO COMPLETE DATA ENTRY

CLASSIFICATION OPTIONS

	Residential Exempt
	Small Commercial Exemption

LEVY

$82,673,085	Estimated Levy
15.80	Single Tax Rate

Note:
This table should be used for planning purposes only. Actual calculations may differ slightly due to rounding. For actual calculations, complete Recap.

CIP Shift	Res Factor	Share Percentages						Levy Amounts						Estimated Tax Rates				
		Res	O S	Com	Ind	PP	Total	Res	O S	Com	Ind	PP	Total	Res	O S	Com	Ind	PP
1.01	99.7056	77.0287	0.0000	13.5405	6.4313	2.9996	100.0000	63,681,981	0	11,194,315	5,316,947	2,479,842	82,673,085	15.75		15.95	15.95	15.95
1.02	99.4112	76.8012	0.0000	13.6745	6.4950	3.0293	100.0000	63,493,950	0	11,305,150	5,369,590	2,504,395	82,673,085	15.70		16.11	16.11	16.11
1.03	99.1168	76.5738	0.0000	13.8086	6.5586	3.0590	100.0000	63,305,919	0	11,415,985	5,422,233	2,528,948	82,673,085	15.66		16.27	16.27	16.27
1.04	98.8224	76.3464	0.0000	13.9427	6.6223	3.0887	100.0000	63,117,888	0	11,526,820	5,474,876	2,553,501	82,673,085	15.61		16.43	16.43	16.43
1.05	98.5280	76.1189	0.0000	14.0767	6.6860	3.1184	100.0000	62,929,858	0	11,637,654	5,527,519	2,578,054	82,673,085	15.56		16.59	16.59	16.59
1.06	98.2336	75.8915	0.0000	14.2108	6.7497	3.1481	100.0000	62,741,827	0	11,748,489	5,580,162	2,602,607	82,673,085	15.52		16.74	16.74	16.74
1.07	97.9392	75.6640	0.0000	14.3448	6.8133	3.1778	100.0000	62,553,796	0	11,859,324	5,632,805	2,627,160	82,673,085	15.47		16.90	16.90	16.90
1.08	97.6448	75.4366	0.0000	14.4789	6.8770	3.2075	100.0000	62,365,765	0	11,970,159	5,685,448	2,651,713	82,673,085	15.42		17.06	17.06	17.06
1.09	97.3504	75.2092	0.0000	14.6130	6.9407	3.2372	100.0000	62,177,735	0	12,080,994	5,738,091	2,676,266	82,673,085	15.38		17.22	17.22	17.22
1.10	97.0560	74.9817	0.0000	14.7470	7.0044	3.2669	100.0000	61,989,704	0	12,191,828	5,790,734	2,700,819	82,673,085	15.33		17.38	17.38	17.38
1.11	96.7616	74.7543	0.0000	14.8811	7.0681	3.2966	100.0000	61,801,673	0	12,302,663	5,843,377	2,725,371	82,673,085	15.28		17.53	17.53	17.53
1.12	96.4672	74.5268	0.0000	15.0152	7.1317	3.3263	100.0000	61,613,643	0	12,413,498	5,896,020	2,749,924	82,673,085	15.24		17.69	17.69	17.69
1.13	96.1729	74.2994	0.0000	15.1492	7.1954	3.3560	100.0000	61,425,612	0	12,524,333	5,948,663	2,774,477	82,673,085	15.19		17.85	17.85	17.85
1.14	95.8785	74.0720	0.0000	15.2833	7.2591	3.3857	100.0000	61,237,581	0	12,635,168	6,001,306	2,799,030	82,673,085	15.14		18.01	18.01	18.01
1.15	95.5841	73.8445	0.0000	15.4174	7.3228	3.4154	100.0000	61,049,550	0	12,746,002	6,053,949	2,823,583	82,673,085	15.10		18.17	18.17	18.17
1.16	95.2897	73.6171	0.0000	15.5514	7.3864	3.4451	100.0000	60,861,520	0	12,856,837	6,106,592	2,848,136	82,673,085	15.05		18.32	18.32	18.32
1.17	94.9953	73.3897	0.0000	15.6855	7.4501	3.4748	100.0000	60,673,489	0	12,967,672	6,159,235	2,872,689	82,673,085	15.01		18.48	18.48	18.48
1.18	94.7009	73.1622	0.0000	15.8195	7.5138	3.5045	100.0000	60,485,458	0	13,078,507	6,211,878	2,897,242	82,673,085	14.96		18.64	18.64	18.64
1.19	94.4065	72.9348	0.0000	15.9536	7.5775	3.5342	100.0000	60,297,427	0	13,189,342	6,264,521	2,921,795	82,673,085	14.91		18.80	18.80	18.80
1.20	94.1121	72.7073	0.0000	16.0877	7.6411	3.5639	100.0000	60,109,397	0	13,300,176	6,317,164	2,946,348	82,673,085	14.87		18.95	18.95	18.95
1.21	93.8177	72.4799	0.0000	16.2217	7.7048	3.5936	100.0000	59,921,366	0	13,411,011	6,369,807	2,970,900	82,673,085	14.82		19.11	19.11	19.11
1.22	93.5233	72.2525	0.0000	16.3558	7.7685	3.6233	100.0000	59,733,335	0	13,521,846	6,422,450	2,995,453	82,673,085	14.77		19.27	19.27	19.27
1.23	93.2289	72.0250	0.0000	16.4899	7.8322	3.6529	100.0000	59,545,304	0	13,632,681	6,475,093	3,020,006	82,673,085	14.73		19.43	19.43	19.43
1.24	92.9345	71.7976	0.0000	16.6239	7.8958	3.6826	100.0000	59,357,274	0	13,743,516	6,527,737	3,044,559	82,673,085	14.68		19.59	19.59	19.59
1.25	92.6401	71.5701	0.0000	16.7580	7.9595	3.7123	100.0000	59,169,243	0	13,854,351	6,580,380	3,069,112	82,673,085	14.63		19.74	19.74	19.74

What If...Scenario Worksheet

CIP Shift	Res Factor	Share Percentages						Levy Amounts						Estimated Tax Rates				
		Res	O S	Com	Ind	PP	Total	Res	O S	Com	Ind	PP	Total	Res	O S	Com	Ind	PP
1.26	92.3457	71.3427	0.0000	16.8921	8.0232	3.7420	100.0000	58,981,212	0	13,965,185	6,633,023	3,093,665	82,673,085	14.59		19.90	19.90	19.90
1.27	92.0513	71.1153	0.0000	17.0261	8.0869	3.7717	100.0000	58,793,181	0	14,076,020	6,685,666	3,118,218	82,673,085	14.54		20.06	20.06	20.06
1.28	91.7569	70.8878	0.0000	17.1602	8.1505	3.8014	100.0000	58,605,151	0	14,186,855	6,738,309	3,142,771	82,673,085	14.49		20.22	20.22	20.22
1.29	91.4625	70.6604	0.0000	17.2942	8.2142	3.8311	100.0000	58,417,120	0	14,297,690	6,790,952	3,167,324	82,673,085	14.45		20.38	20.38	20.38
1.30	91.1681	70.4329	0.0000	17.4283	8.2779	3.8608	100.0000	58,229,089	0	14,408,525	6,843,595	3,191,876	82,673,085	14.40		20.53	20.53	20.53
1.31	90.8737	70.2055	0.0000	17.5624	8.3416	3.8905	100.0000	58,041,059	0	14,519,359	6,896,238	3,216,429	82,673,085	14.35		20.69	20.69	20.69
1.32	90.5793	69.9781	0.0000	17.6964	8.4053	3.9202	100.0000	57,853,028	0	14,630,194	6,948,881	3,240,982	82,673,085	14.31		20.85	20.85	20.85
1.33	90.2849	69.7506	0.0000	17.8305	8.4689	3.9499	100.0000	57,664,997	0	14,741,029	7,001,524	3,265,535	82,673,085	14.26		21.01	21.01	21.01
1.34	89.9905	69.5232	0.0000	17.9646	8.5326	3.9796	100.0000	57,476,966	0	14,851,864	7,054,167	3,290,088	82,673,085	14.21		21.17	21.17	21.17
1.35	89.6961	69.2958	0.0000	18.0986	8.5963	4.0093	100.0000	57,288,936	0	14,962,699	7,106,810	3,314,641	82,673,085	14.17		21.32	21.32	21.32
1.36	89.4017	69.0683	0.0000	18.2327	8.6600	4.0390	100.0000	57,100,905	0	15,073,533	7,159,453	3,339,194	82,673,085	14.12		21.48	21.48	21.48
1.37	89.1073	68.8409	0.0000	18.3668	8.7236	4.0687	100.0000	56,912,874	0	15,184,368	7,212,096	3,363,747	82,673,085	14.08		21.64	21.64	21.64
1.38	88.8130	68.6134	0.0000	18.5008	8.7873	4.0984	100.0000	56,724,843	0	15,295,203	7,264,739	3,388,300	82,673,085	14.03		21.80	21.80	21.80
1.39	88.5186	68.3860	0.0000	18.6349	8.8510	4.1281	100.0000	56,536,813	0	15,406,038	7,317,382	3,412,853	82,673,085	13.98		21.96	21.96	21.96
1.40	88.2242	68.1586	0.0000	18.7690	8.9147	4.1578	100.0000	56,348,782	0	15,516,873	7,370,025	3,437,405	82,673,085	13.94		22.11	22.11	22.11
1.41	87.9298	67.9311	0.0000	18.9030	8.9783	4.1875	100.0000	56,160,751	0	15,627,707	7,422,668	3,461,958	82,673,085	13.89		22.27	22.27	22.27
1.42	87.6354	67.7037	0.0000	19.0371	9.0420	4.2172	100.0000	55,972,720	0	15,738,542	7,475,311	3,486,511	82,673,085	13.84		22.43	22.43	22.43
1.43	87.3410	67.4762	0.0000	19.1711	9.1057	4.2469	100.0000	55,784,690	0	15,849,377	7,527,954	3,511,064	82,673,085	13.80		22.59	22.59	22.59
1.44	87.0466	67.2488	0.0000	19.3052	9.1694	4.2766	100.0000	55,596,659	0	15,960,212	7,580,597	3,535,617	82,673,085	13.75		22.75	22.75	22.75
1.45	86.7522	67.0214	0.0000	19.4393	9.2330	4.3063	100.0000	55,408,628	0	16,071,047	7,633,240	3,560,170	82,673,085	13.70		22.90	22.90	22.90
1.46	86.4578	66.7939	0.0000	19.5733	9.2967	4.3360	100.0000	55,220,597	0	16,181,881	7,685,883	3,584,723	82,673,085	13.66		23.06	23.06	23.06
1.47	86.1634	66.5665	0.0000	19.7074	9.3604	4.3657	100.0000	55,032,567	0	16,292,716	7,738,526	3,609,276	82,673,085	13.61		23.22	23.22	23.22
1.48	85.8690	66.3390	0.0000	19.8415	9.4241	4.3954	100.0000	54,844,536	0	16,403,551	7,791,169	3,633,829	82,673,085	13.56		23.38	23.38	23.38
1.49	85.5746	66.1116	0.0000	19.9755	9.4877	4.4251	100.0000	54,656,505	0	16,514,386	7,843,812	3,658,381	82,673,085	13.52		23.54	23.54	23.54
1.50	85.2802	65.8842	0.0000	20.1096	9.5514	4.4548	100.0000	54,468,475	0	16,625,221	7,896,455	3,682,934	82,673,085	13.47		23.69	23.69	23.69

What If...Scenario Worksheet

CIP Shift	Res Factor	Share Percentages						Levy Amounts						Estimated Tax Rates				
		Res	O S	Com	Ind	PP	Total	Res	O S	Com	Ind	PP	Total	Res	O S	Com	Ind	PP
1.51	84.9858	65.6567	0.0000	20.2437	9.6151	4.4845	100.0000	54,280,444	0	16,736,055	7,949,099	3,707,487	82,673,085	13.42		23.85	23.85	23.85
1.52	84.6914	65.4293	0.0000	20.3777	9.6788	4.5142	100.0000	54,092,413	0	16,846,890	8,001,742	3,732,040	82,673,085	13.38		24.01	24.01	24.01
1.53	84.3970	65.2019	0.0000	20.5118	9.7425	4.5439	100.0000	53,904,382	0	16,957,725	8,054,385	3,756,593	82,673,085	13.33		24.17	24.17	24.17
1.54	84.1026	64.9744	0.0000	20.6458	9.8061	4.5736	100.0000	53,716,352	0	17,068,560	8,107,028	3,781,146	82,673,085	13.28		24.33	24.33	24.33
1.55	83.8082	64.7470	0.0000	20.7799	9.8698	4.6033	100.0000	53,528,321	0	17,179,395	8,159,671	3,805,699	82,673,085	13.24		24.48	24.48	24.48
1.56	83.5138	64.5195	0.0000	20.9140	9.9335	4.6330	100.0000	53,340,290	0	17,290,229	8,212,314	3,830,252	82,673,085	13.19		24.64	24.64	24.64
1.57	83.2194	64.2921	0.0000	21.0480	9.9972	4.6627	100.0000	53,152,259	0	17,401,064	8,264,957	3,854,805	82,673,085	13.15		24.80	24.80	24.80
1.58	82.9250	64.0647	0.0000	21.1821	10.0608	4.6924	100.0000	52,964,229	0	17,511,899	8,317,600	3,879,358	82,673,085	13.10		24.96	24.96	24.96
1.59	82.6306	63.8372	0.0000	21.3162	10.1245	4.7221	100.0000	52,776,198	0	17,622,734	8,370,243	3,903,910	82,673,085	13.05		25.12	25.12	25.12
1.60	82.3362	63.6098	0.0000	21.4502	10.1882	4.7518	100.0000	52,588,167	0	17,733,569	8,422,886	3,928,463	82,673,085	13.01		25.27	25.27	25.27
1.61	82.0418	63.3823	0.0000	21.5843	10.2519	4.7815	100.0000	52,400,136	0	17,844,403	8,475,529	3,953,016	82,673,085	12.96		25.43	25.43	25.43
1.62	81.7475	63.1549	0.0000	21.7184	10.3155	4.8112	100.0000	52,212,106	0	17,955,238	8,528,172	3,977,569	82,673,085	12.91		25.59	25.59	25.59
1.63	81.4531	62.9275	0.0000	21.8524	10.3792	4.8409	100.0000	52,024,075	0	18,066,073	8,580,815	4,002,122	82,673,085	12.87		25.75	25.75	25.75
1.64	81.1587	62.7000	0.0000	21.9865	10.4429	4.8706	100.0000	51,836,044	0	18,176,908	8,633,458	4,026,675	82,673,085	12.82		25.91	25.91	25.91
1.65	80.8643	62.4726	0.0000	22.1206	10.5066	4.9003	100.0000	51,648,013	0	18,287,743	8,686,101	4,051,228	82,673,085	12.77		26.06	26.06	26.06
1.66	80.5699	62.2451	0.0000	22.2546	10.5702	4.9300	100.0000	51,459,983	0	18,398,577	8,738,744	4,075,781	82,673,085	12.73		26.22	26.22	26.22
1.67	80.2755	62.0177	0.0000	22.3887	10.6339	4.9597	100.0000	51,271,952	0	18,509,412	8,791,387	4,100,334	82,673,085	12.68		26.38	26.38	26.38
1.68	79.9811	61.7903	0.0000	22.5227	10.6976	4.9894	100.0000	51,083,921	0	18,620,247	8,844,030	4,124,887	82,673,085	12.63		26.54	26.54	26.54
1.69	79.6867	61.5628	0.0000	22.6568	10.7613	5.0191	100.0000	50,895,891	0	18,731,082	8,896,673	4,149,439	82,673,085	12.59		26.69	26.69	26.69
1.70	79.3923	61.3354	0.0000	22.7909	10.8249	5.0488	100.0000	50,707,860	0	18,841,917	8,949,316	4,173,992	82,673,085	12.54		26.85	26.85	26.85
1.71	79.0979	61.1080	0.0000	22.9249	10.8886	5.0785	100.0000	50,519,829	0	18,952,751	9,001,959	4,198,545	82,673,085	12.49		27.01	27.01	27.01
1.72	78.8035	60.8805	0.0000	23.0590	10.9523	5.1082	100.0000	50,331,798	0	19,063,586	9,054,602	4,223,098	82,673,085	12.45		27.17	27.17	27.17
1.73	78.5091	60.6531	0.0000	23.1931	11.0160	5.1379	100.0000	50,143,768	0	19,174,421	9,107,245	4,247,651	82,673,085	12.40		27.33	27.33	27.33
1.74	78.2147	60.4256	0.0000	23.3271	11.0796	5.1676	100.0000	49,955,737	0	19,285,256	9,159,888	4,272,204	82,673,085	12.35		27.48	27.48	27.48
1.75	77.9203	60.1982	0.0000	23.4612	11.1433	5.1973	100.0000	49,767,706	0	19,396,091	9,212,531	4,296,757	82,673,085	12.31		27.64	27.64	27.64

WILLIAM A. FLANAGAN
Mayor

City of Fall River
Massachusetts
Office of the Mayor

RECEIVED

2013 NOV 22 A 11:40

CITY CLERK
FALL RIVER, MA

November 21, 2013

The Honorable City Council
City of Fall River
One Government Center
Fall River, MA 02722

Honorable Members of the Council:

I am placing before you for your consideration and approval the following items:

1. Madeline Coelho, Director of Human Resources, Employment Contract.

Should you have any questions or concerns in regard to this matter, please do not hesitate to contact me.

Sincerely,

William A. Flanagan
Mayor

One Government Center • Fall River, MA 02722
TEL (508) 324-2600 • FAX (508) 324-2626 • EMAIL mayor@fallriverma.org

City of Fall River, *In City Council*

ORDERED, that the employment agreement between the City of Fall River and the Director of Human Resources is hereby approved in the form attached hereto pursuant to Section 50-73 of the Revised Ordinances of the City of Fall River.

EMPLOYMENT AGREEMENT

This employment agreement is made by and between the City of Fall River, a municipal corporation, One Government Center, Fall River, Massachusetts 02722 (hereinafter called the "City") and Madeline Coelho, (hereinafter referred to as "EMPLOYEE").

In consideration of the mutual promises and agreements herein contained, the City hires and employs the EMPLOYEE and the EMPLOYEE agrees to work for and enter into the service of the City in accordance with the following terms hereby agreed upon.

DUTIES

The EMPLOYEE shall work as Director of Human Resources, as that term is defined in Section 50-72 of the Code of Ordinances of the City of Fall River, under the supervision and direction of the Mayor and pursuant to authority set forth in City Ordinance § 50-75. The Director of Human Resources shall perform any and all duties as outlined in City Ordinance §50-75 and any and all duties that may be assigned to her by the Mayor or his designee, including, but not limited to, the following:

A. To act as Director of Human Resources and direct its daily operations;
B. To discharge those duties required of the Director of Human Resources prescribed by applicable ordinances, statues, and executive orders;
C. To serve, at the Mayor's discretion, as the Mayor's designee in employee contract negotiations;
D. To consult with, inform, and seek the advice of senior city management officials and to coordinate with those officials, the city's position within the collective bargaining process;
E. To monitor the operation of the employee grievance process and serve as the final step, within the municipal structure, in such process;
F. To develop and maintain uniform personnel policies, including a consistent system of position descriptions, classifications, and accompanying compensation levels for all city employees, including those employed under state and federal programs, subject to the approval of the Mayor and the City Council to the extent required by law;
G. To maintain personnel records keeping system for all City employees (excluding Police, Fire and School departments);
H. To develop and coordinate programs for the improvement of employee morale and effectiveness, including training, career advancement, safety, health, counseling and welfare programs subject to the approval of the Mayor and of the City Council to the extent required by law;
I. To consult with and inform department heads and city officials on all aspects of personnel, labor relations, and Civil Service regulations and procedures;
J. To advise the Mayor in the development of recruitment procedures for management level employees, and to recommend annually to the Mayor the compensation levels and fringe benefits for all city employees not covered under collective bargaining agreements;
K. To serve as the Affirmative Action Officer of the City and annually update the Affirmative Action Plan;

EMPLOYMENT AGREEMENT

L. To assist the Corporation Counsel's Office in any matter regarding questions pertaining to Personnel and Training, such assistance shall include attendance at any hearings, trials, or meetings as the Corporation Counsel's Office may require;
M. To conduct periodic studies of city personnel practices including studies of compensation levels and fringe benefits, and studies of the utilization and disposition of the municipal work force;
N. To serve as the Sexual Harassment Officer of the city and to periodically update the City's Sexual Harassment Policy;
O. To monitor the enforcement of and periodic update of all other City policies relating personnel and training;
P. To perform all duties set out in Chapter 50 of the City's Ordinances; and
Q. To undertake such other duties as may be required by the Mayor or his designee.

PERFORMANCE

The EMPLOYEE shall devote sufficient time, skill and attention to her employment as Director of Human Resources and shall perform her duties in an efficient, trustworthy, and professional manner, adhering strictly to the City policies, and shall at all times act in the best interest of the City.

PERFORMANCE EVALUATION

The EMPLOYEE'S performance may be reviewed and evaluated by the Mayor or his designee via a written evaluation instrument during the term of this AGREEMENT for the purpose of evaluating the overall effectiveness of the EMPLOYEE in her position. In the event that the City of Fall River establishes a performance evaluation program for determining increment raises, adjustments and/or merit pay for its employees then the CITY may at its option require the EMPLOYEE to participate in said performance evaluation program.

COMPENSATION AND BENEFITS

The City agrees to pay EMPLOYEE an annual base salary of eighty six thousand five hundred and ninety two dollars fifty nine cents ($86,592.59) payable at the same time and manner as other employees of the City of Fall River. Said salary shall become effective commencing December 1, 2013. Any increases or raises shall be negotiated between EMPLOYEE and the Mayor.

The base salary shall be adjusted annually on January 1 according to the CPI-U urban index.

The EMPLOYEE shall be entitled to the following benefits:

A. Health and Dental Insurance;

B. Retirement Benefits;

C. Life Insurance;

D. Voluntary Deferred Compensation;

EMPLOYMENT AGREEMENT

E. Sick leave shall used and paid in accordance with City Ordinance §§ 50-121 to 50-170;

F. Holidays and bereavement leave in accordance with the AFSCME agreement;

G. Personal days in accordance with City Ordinance § 50-192; and

H. Five weeks vacation per calendar year during the life of the contract. The time for such vacation in each year shall be reasonably approved by the Mayor. Any unused vacation time shall be paid to EMPLOYEE at the end of each fiscal year.

TERM

This employment agreement shall be for the period of December 1, 2013 to December 31, 2015 and may be renewed by mutual agreement of the parties. The City may terminate this employment agreement during its term for any reason by providing employee with written notice of said intent no less than sixty days (60) days prior to the effective date of such termination. Employee may terminate this employment agreement during its term for any reason by providing employer with written notice of said intent no less than (30) days prior to the effective date of resignation. Upon termination of this Agreement for any reason, EMPLOYEE shall receive payment for any unused vacation and sick time.

NON-ASSIGNMENT

EMPLOYEE shall not be allowed to assign this contract, nor any of the rights and duties herein, without the prior written consent of the City.

ENTIRE AGREEMENT/AMENDMENT

This instrument contains the entire agreement among the parties hereto with respect to the subject matter hereof and may be changed or modified only by written instruments duly executed by both parties. Upon commencement of this employment agreement, all prior agreements shall terminate, and said employment agreement shall control, bind and inure the parties hereto.

MASSACHUSETTS LAW

This agreement shall be construed and interpreted in accordance with the laws of the Commonwealth of Massachusetts. A determination by a court of competent jurisdiction that any portion of this agreement is invalid shall not thereby render any other part thereof invalid.

IN WITNESS WHEREOF, the parties have executed this Agreement this _____ day of November 2013.

_____	_____
William A. Flanagan, Mayor	Madeline Coelho
Dated:_____	Dated:_____

EMPLOYMENT AGREEMENT

Approved as to form and manner of execution

_____ Dated: _____

Elizabeth Sousa, Corporation Counsel

2

City of Fall River
Massachusetts
Office of the Mayor

RECEIVED
2013 NOV 21 P 4:29
CITY CLERK
FALL RIVER, MA

WILLIAM A. FLANAGAN
Mayor

November 21, 2013

The Honorable City Council
City of Fall River
One Government Center
Fall River, MA 02722

Dear Honorable Council Members:

I am attaching herewith, for your consideration and approval, a letter from the Kennedy Park Inclusion Playground Committee. This request is to gift to the City of Fall River $53,300.00 for the exclusive use of construction and purchase expenses related to the Inclusion Playground being constructed at the Kennedy Park grove area. This project is a perfect example of what we can accomplish with public/private partnerships.

Sincerely,

William A. Flanagan, Mayor

One Government Center • Fall River, MA 02722
TEL (508) 324-2600 • FAX (508) 324-2626 • EMAIL mayor@fallriverma.org

2

RECEIVED

2013 NOV 21 P 4:01

CITY CLERK
FALL RIVER, MA

K.P.I.P.

Kennedy Park Inclusion Playground

November 21, 2013

Dear Honorable Council,

We are writing to formally present to the City of Fall River the gift of funds we have raised towards the construction of the Inclusion Playground at Kennedy Park.

It is with pleasure that the KPIP Committee present to the City at this time a gift in the amount of $53,500.00.

Previously, a pledge that was made to the Committee by the Fall River Disability Commission in the amount of $25,000.00 was presented directly to the city on the Committee's behalf.

Further, the Committee plans to a future donation in early 2014 which will serve to complete our fundraising efforts toward this project.

Sincerely,

The Kennedy Park Inclusion Playground Committee

City of Fall River, *In City Council*

2

ORDERED, that under the provisions of M.G.L. Chapter 44, Section 53A, the Department of Community Maintenance be and the same is hereby authorized to accept a gift from the Kennedy Park Inclusion Playground Committee in the amount of $53,500 towards the construction of the Inclusion Playground at Kennedy Park.

City of Fall River, *In City Council*

4

ORDERED, that the City Council of the City of Fall River hereby accepts the recommendation of the Real Estate Committee and orders that the former Orin Fowler School, 286 Sprague Street (Assessors Map G-21-0065), be conveyed to Jose Pacheco d/b/a Dream Homes, LLC for the sum of $6,100 as set forth in Jose Pacheco's Response to said RFP, subject to the terms and conditions as set forth in said RFP, and further subject to the negotiation and execution of a Purchase & Sales Agreement in a form determined and acceptable by the Corporation Counsel and the execution of a Quitclaim Deed in a form also acceptable to the Corporation Counsel.

ORDERED, that the City Council of the City of Fall River hereby accepts the recommendation of the Real Estate Committee and orders that the former Hugo A. Dubuque School, 330 Oak Grove Avenue (Assessors Map L-11-0039), be conveyed to Randy Botelho for the sum of $20,000 as set forth in Randy Botelho's Response to said RFP, subject to the terms and conditions as set forth in said RFP, and further subject to the negotiation and execution of a Purchase & Sales Agreement in a form determined and acceptable by the Corporation Counsel and the execution of a Quitclaim Deed in a form also acceptable to the Corporation Counsel.

City of Fall River, *In City Council*

6

ORDERED, that the Mayor is hereby authorized to acquire a certain parcel of land located on 0 Hancock Street, Fall River, Massachusetts, Lot D-11-153 for $23,000.00. The acquisition of said lot has been approved by the Sewer Commission and ownership of said lot will assure continued drainage so as to avoid the potential development and increase of flooding. Said Lot is bounded and described as follows:

Beginning at a point on the northerly side of Hancock Street 200 Feet westerly from the northwesterly corner of Preston and Hancock Streets and at the southeasterly corner of the parcel to be described; thence running northerly ninety four and 87/100 (94.87) feet for a corner; thence running southerly ninety five and 47/100 (95.47) feet to Hancock Street for a corner; thence running easterly along the northerly line of said Hancock Street one hundred (100) feet to point of beginning, containing 9,517 square feet of land, more or less.

CITY OF FALL RIVER
IN CITY COUNCIL
NOV 12 2013
Referred to the
Committee on Real Estate

7

City of Fall River
Massachusetts
Department of Financial Services
TREASURER • COLLECTOR • AUDITOR • ASSESSOR

WILLIAM A. FLANAGAN
Mayor

JOHN L. NUNES, CMMT, CMMC
Director of Financial Services/Treasurer

PAULIANNE MARTINS-TEIXEIRA
Assistant Treasurer

11/18/2013

To: Alison M. Bouchard

City Clerk

From: John L. Nunes, CMMT/CMMC

Director of Financial Services / Treasurer

Re: Eliminated Fees

At your earliest opportunity, please contact City Council President Linda Pereira with regards to having the attached ordinance approved by the Council.

These fees were eliminated in 2008 and need to be reinstated as they were at that time.

Please know that no adjustments have been made to said fees.

If you have any questions, please do not hesitate to contact me.

RECEIVED
2013 NOV 18 P 3:23
CITY CLERK
FALL RIVER, MA

One Government Center • Fall River, MA 02722
TEL (508) 324-2260 • FAX (508) 324-2040 • EMAIL jnunes@fallriverma.org

City of Fall River, *In City Council*

7

BE IT ORDAINED by the City Council of the City of Fall River, as follows:

That Appendix A - Fee Schedule of Revised Ordinances of the City of Fall River, Massachusetts, 1999 be amended as follows:

Section 1.
By inserting under Chapter 10, which chapter relates to Buildings and Building Regulations, the following:

§ 10-38. Building permit fees.

(1)	Maintenance and renovations:	
	Up to $1,000.00	$46.00
	From $1,001.00 up to $2,000.00	$52.00
	From $2,001.00 up to $3,000.00	$58.00
	From $3,001.00 up to $4,000.00	$64.00
	From $4,001.00 up to $5,000.00	$70.00
	From $5,001.00 up to $10,000.00	$75.00
	$10,001.00 and above, without limit, per $1,000.00	$9.00
(2)	New Construction:	
	Residential-per square foot, which includes basements & decks	$0.19
	Commercial-per square foot all accessible areas	$0.22
(3)	Wood burning stove	$31.00
(4)	Moving Building	$250.00
(5)	Demolishing, each building	$125.00
(6)	Written zoning opinion	$37.00
(7)	Certificate of Occupancy:	
	a. Residential	$ 62.00
	b. Commercial	$125.00
(8)	Re-inspection	$37.00
(9)	Certificate of Inspection for special use groups	$75.00
	State Mandated	$137.00

§ 10-121. Plumbing and gas permit fees.

(1)	Plumbing permit fees (residential)	
	a. Processing fee	$43.00
	b. Plus, per fixture/appurtenance	$12.00
(2)	Plumbing permit fees (commercial):	
	a. Processing fee	$72.00
	b. Plus, per fixture/appurtenance	$14.00
(3)	Plumbing permit fees (industrial):	
	a. Processing fee	$86.00
	b. Plus, per fixture/appurtenance	$17.00

(4) Gas permit fees (residential):

1—199,000 Btu's	$43.00 plus $12.00 per appliance/item
200,000—299,000 Btu's	$65.00 plus $12.00 per appliance/item
300,000—399,000 Btu's	$86.00 plus $12.00 per appliance/item
400,000—499,000 Btu's	$108.00 plus $12.00 per appliance/item
500,000—599,000 Btu's	$130.00 plus $12.00 per appliance/item
600,000—699,000 Btu's	$151.00 plus $12.00 per appliance/item
700,000—799,000 Btu's	$173.00 plus $12.00 per appliance/item
800,000--899,000 Btu's	$194.00 plus $12.00 per appliance/item
900,000—1,000,000 No Btu's Limit	$216.00 plus $12.00 per appliance/item

(5) Gas permit fee (commercial):

1—199,000 Btu's	$65.00 plus $14.00 per appliance/item
200,000—299,000 Btu's	$86.00 plus $14.00 per appliance/item
300,000--399,000 Btu's	$108.00 plus $14.00 per appliance/item
400,000—499,000 Btu's	$130.00 plus $14.00 per appliance/item
500,000—599,000 Btu's	$151.00 plus $14.00 per appliance/item
600,000—699,000 Btu's	$173.00 plus $14.00 per appliance/item
700,000—799,000 Btu's	$194.00 plus $14.00 per appliance/item
800,000--899,000 Btu's	$216.00 plus $14.00 per appliance/item
900,000—999,000 Btu's	$238.00 plus $14.00 per appliance/item
Over 999,000 Btu's	Add $22.00 for each 500,000 Btu or ratio thereof, plus $14.00 per appliance/item

(6) Gas permit fees (industrial):

1—199,000 Btu's	$ 72.00 plus $16.00 per appliance/item
200,000—299,000 Btu's	$101.00 plus $16.00 per appliance/item
300,000--399,000 Btu's	$122.00 plus $16.00 per appliance/item
400,000—499,000 Btu's	$144.00 plus $16.00 per appliance/item
500,000—599,000 Btu's	$173.00 plus $16.00 per appliance/item

600,000—699,000 Btu's	$194.00 plus $16.00 per appliance/item
700,000—799,000 Btu's	$216.00 plus $16.00 per appliance/item
800,000--899,000 Btu's	$238.00 plus $16.00 per appliance/item
900,000—999,000 Btu's	$266.00 plus $16.00 per appliance/item
Over 999,000 Btu's	Add $24.00 for each 500,000 Btu or ratio thereof, plus $16.00 per appliance/item

(7) Late filing fee: Work is started without a permit/notice	Fee doubled
(8) Re-inspection fee: Work not ready, violations noted, test failure	$43.00

§ 10-176. Electrical permit fees.

(1) Complete residential wiring, includes service, outlets, major appliances:	
a. With oil or gas burners and attached garage	$100.00
b. With electric heat and attached garage	$119.00
(2) Temporary service and meter work	$56.00
(3) Garage, separate from home	$50.00
(4) Major appliances, per unit	$37.00
(5) Outlet, receptacles, switches, fixtures, old house, per rehab unit	$62.00
(6) Increase or replace service	$62.00
(7) Swimming pools, septic systems	$50.00
(8) Fire alarms, burglar alarms	$37.00
(9) Oil burner, gas burner or electric heat	$37.00
(10) Annual permit	$312.00
(11) Carnivals-concessions	$62.00
(12) Commercial:	
a. Estimated cost $1.00 to $3,000.00	$50.00
b. Estimated cost each additional $1,000.00	$5.00
(13) Re-inspection each	$31.00
(14) Surcharge for commencing work without a permit	Fee doubled
Late application surcharge fee per day	$62.00

Section 2.
By inserting under Chapter 66, which chapter relates to Streets, Sidewalks and Other Public Places, the following:

§ 66-251 Permit for temporary closure of sidewalk (up to 14 days)	$100.00

Section 3.
By inserting under Chapter 70, which chapter relates to Traffic, the following:

§ 70-345 Parking Meter Fees	
Thirty-minute zones	$0.25
One-hour zones	$0.50
Two-hour zones	$1.00

City of Fall River, *In City Council*

8

BE IT ORDAINED by the City Council of the City of Fall River, as follows:

That Chapter 70 of the Revised Ordinances of the City of Fall River, Massachusetts, 1999, which chapter relates to traffic be amended as follows:

Section 1.

By inserting in Section 70-374(4), which section relates to thirty (30) minute parking during certain hours, 8:00 a.m. to 5:00 p.m., Monday – Friday and 8:00 a.m. – 4:00 p.m. Saturday, in proper alphabetical order the following:

Pleasant Street, north side, starting at a point 63 feet west of Notre Dame Street, for a distance of 25 feet westerly

Section 2.

By inserting in Section 70-374 (31), which section relates to thirty (30) minute parking during certain hours, 8:00 a.m. to 6:00 p.m., Monday – Friday, in proper alphabetical order the following:

South Main Street, east side, starting at a point 130 feet south of Osborn Street, for a distance of 30 feet southerly

Section 3.

By striking out in Section 70-387, which section relates to handicapped parking the following:

Division Street, south side, starting at a point 20 fee east of Beacon Street, for a distance of 20 feet easterly
Dwelly Street, north side, starting at a point 108 feet east of South Main Street, for a distance of 20 feet easterly
Hood Street, north side, starting at a point 73 feet west of North High Street, for a distance of 20 feet westerly
Keeley Street, south side, starting at a point 544 feet west of County Street, for a distance of 25 feet westerly
Linden Street, east side, starting at a point 329 feet north of Bank Street, for a distance of 20 feet northerly
Merino Street, north side, starting at a point 49 feet west of Pitman Street, for a distance of 20 feet westerly
Orange Street, east side, starting at a point 20 feet north of Cherry Street, for a distance of 25 feet northerly
Robeson Street, east side, starting at a point 220 feet south of Prospect Street, for a distance of 25 feet southerly
St. Mary Street, west side, starting at a point 20 feet north of Norfolk Street, for a distance of 20 feet northerly
Walnut Street, north side, starting at a point 125 feet east of Durfee Street, for a distance of 20 feet easterly

CITY OF FALL RIVER
IN CITY COUNCIL
NOV 12 2013
Passed through
first reading

City of Fall River, *In City Council*

BE IT ORDAINED by the City Council of the City of Fall River, as follows:

That Chapter 2 of the Revised Ordinances of the City of Fall River, Massachusetts, 1999, which chapter relates to Administration, be amended as follows:

Section 1

By striking Sec. 2-182 in its entirety and inserting in place thereof, the following:

Sec. 2-182. Annual budget.

(a) Submission to city council.
Notwithstanding any provision of the Massachusetts General Laws or Fall River Ordinance to the contrary, including M.G.L.A. c. 44, § 32, the mayor shall submit to the city council the annual budget, which shall be a statement of the amounts recommended by him for proposed expenditures of the city for the next fiscal year, not later than June 1.

(b) Reports to city council.
Budget updates shall be made during the first regular meeting of the City Council in the months of January, April and October.

Section 2

By inserting the following new sections to read as follows:

Sec. 2-183. Submission of enterprise budgets to city council.
Notwithstanding any provision of the Massachusetts General Laws or Fall River Ordinance to the contrary, including M.G.L.A. c. 44, § 32, the mayor shall submit to the city council all enterprise budgets, which shall be a statement of the amounts recommended by him for proposed expenditures of the city for the next fiscal year, not later than April 1.

Sec. 2-184. Submission of any proposed fee increases or creation of new fees.
The Mayor shall submit to the city council all proposed increases in fees and any proposed new fees by May 1.

CITY OF FALL RIVER
IN CITY COUNCIL
NOV 12 2013
Passed through first reading, as amended

City of Fall River, *In City Council*

10

(Councilor Daniel M. Rego)

WHEREAS, many streets and sidewalks are excavated to install or repair public utilities, and

WHEREAS, many times these street openings are not repaired correctly or in a timely manner, now therefore

BE IT RESOLVED, that the Director of Public Utilities, the Director of Community Maintenance, the City Engineer and representatives of utility companies be invited to a future meeting of the Committee on Public Works and Transportation to discuss these matters.

City of Fall River, *In City Council*

11

(Councilor David J. Dennis)

WHEREAS, plans to construct the antique carousel in Battleship Cove were spearheaded by Daniel Bogan, and

WHEREAS, the carousel was built in 1920 and served children in Lincoln Park for over seventy years, and

WHERAS, this irreplaceable antique was preserved due to the hard work of Daniel Bogan, now therefore

BE IT RESOLVED, that once the necessary repairs and improvements are completed at the carousel, consideration be given to naming this wonderful tourist attraction in his honor.

CC

22

RECEIVED

2013 NOV -7 A 10:56

CITY CLERK
FALL RIVER, MA

13-138

CLAIM FORM
City of Fall River, Massachusetts

Name: Pauline Feliciano (Kevin Feliciano)

Address: 17 weybosset ST

Phone #: 508 4934024

Type of Claim: ____ M.G.L. Chapter 84 ____ M.G.L. Chapter 258 ____ Other

Date of Incident: 10:24
Time of Incident: between 1-3
Location of Incident: 17 weybosset ST, F.R. ma

Provide a detailed description of your claim (attach additional sheets if necessary):

On 10-24 my nephew had called me and told me that the D.P.W. Just damaged my camper. I then called my Son Kevin to see the camper. Upon Arrival the D.P.W. truck had left the scene of the acident. my Son called the Fall River Policedept. and D.P.W. spoke to a MR. Perry who then sent over hes forman by the name of Jay. speakin with Jay we dertermined that the Bins and the bucket had damaged my camper when lifting barrel to empty. Jay stayed with me until 6:30. Police didnt arive until 7:40. Further inspection f my 1999 ford explorer which is Attached to camper Reveiled no damage from pact. I was then informed By MR. Perry that I would have to seek the law dept t city hall as far as the operator I was told he was a union member that they dnt no what the are going to do with him. meanwhile my camper is n storge facility unusable. my husband is upset camper is used in summer r camping. And winter in maine for hunting. all hunting trips Remain n stand still.

*You should consult with your own attorney in preparing this Claim Form to understand your legal rights

any & 2 Copies Law
1 DPW
1 CC

22

TEL. (508) 678-3000

Westport Auto & RV Center

Auto and RV Sales and Consignments
RV SUPPLIES - PROPANE FUEL
1058 STATE ROAD WESTPORT, MA 02790

MA and RI APPRAISERS LICENSE

RECEIVED
2013 NOV -7 A 10:56
CITY CLERK
FALL RIVER, MA

NAME PAULINE FELICIANO
ADDRESS 17 WEYBOSSET ST.
FALL RIVER MA 02723

DATE 10-7-13
PHONE
DATE WANTED

YEAR-MODEL-COLOR	MAKE	BODY TYPE	LICENSE NO.	SERIAL NO.	MILEAGE
1982	PROWLER LITE	TRAVEL TRAILER	C14405	1EC1B1514C2335658	

REPAIR	REPLACE	PARTS, PRICES SUBJECT TO CHANGE	PARTS	LABOR	PAIN
	✓	L Rear Corner Molding	15.00	—	
	✓	Rear Panel 35 in x 7 ft #3	50.00	4.5	
	✓	L. Side Panel 13 ft x 9 in #2	30.00	2.0	
	✓	" " " 13 ft x 22 in #3	50.00	4.0	
	✓	" " " 13 ft x 22 in #4	50.00	4.0	
		R&R L. Side Window Ft	—	1.0	
		R&R " " " Rear	—	1.0	
		R&R Rear Window	—	1.0	
	✓	Rear Decal	75.00	0.5	
	✓	Bath Room Inner Panels	75.00	8.0	

Estimate Charge

Estimate is Pd. 50.00

Labor 26.0	2340.00
Parts	345.00
Tax	21.56
Estimate Sunlight	50.00
	$ 2,756.56

This Camper is in good shape
Value of this Camper is about $ 3500.00

This is an advance estimate only

TOTAL

22

Commonwealth of Massachusetts
Motor Vehicle Crash Police Report

Date of Crash	Time of Crash	City/Town	Number Vehicles	Number Injured	Speed Limit	State Police
10/24/2013	1624 24HR	Fall River	2	0	Lat. / Lon.	Local Police ☒ MBTA Police ☐ Other:

AT INTERSECTION: < LOCATION > **NOT AT INTERSECTION:**

1 1 Route# Direction Name of Roadway/Street

At

Route# Direction Name of Intersecting Roadway/Street

Also at Intersection with

2 1 Route# Direction Name of Intersecting Roadway/Street

Route# Direction 17 Address # WEYBOSSET ST Name of Roadway/Street

RECEIVED 2013 NOV -7 A 10:56 CITY CLERK FALL RIVER, MA

Feet N S E W of Mile Marker or Exit Number

Feet N S E W of Route# Intersecting Roadway/Street

Feet N S E W of Landmark

2 9 2 10 3 11

3 Please Select One of the Following: ☒ Vehicle 1 1 #Occupants ☐ Hit/Run ☐ Moped

13-2227-AC

License # S99628040 St MA DOB/Age [redacted]

Sex M Lic. Class D 18 18 Lic. Restrictions 1 19 CDL Endorsement

Reg # M83137 Reg Type MU Reg State MA

Veh Year 2011 Veh Make Mack Veh Config. 8 20

4 1 Operator LEDOUX, KEVIN (Last First Middle)

Address 29 BUCKLEY ST APT 1

City FALL RIVER State MA Zip 02723

Insurance Company LIBERTY MUTUAL

Owner CITY OF FALL RIVER (Last First Middle)

Address 1 GOVERNMENT CTR

City FALL RIVER State MA Zip 02721

Vehicle Action Prior to Crash 97 21

Damaged Area Code: (Circle Up to Three)

5 2 Vehicle Travel Direction: N ☒ E W Responding to Emergency? 2

Event Sequence 2 22 22 22 22

Citation # (If Issued)

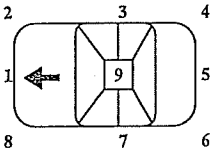
Most Harmful Event 2 23

Viol. 1: Ch/Sec/Sub / Viol. 2: Ch/Sec/Sub /

Driver Contributing Code 19 24 24

6 1 Viol. 3: Ch/Sec/Sub / Viol. 4: Ch/Sec/Sub /

Underride/Override 1 25 Towed 2



0 None, 10 Undercarriage, 11 Totaled, 97 Other, 99 Unknown

Please fill out for operator and all occupants involved

Name (Last First Middle)	Address	DOB/Age	Sex	26 Seat Pos.	27 Safety System	28 Airbag Status	29 Airbag Switch	30 Eject Code	31 Trap Code	32 Injury Status	33 Transp. Code	Medical Facility
Operator	See Above	---------	---	---	0	5	4	3	0	5	1	

2 13

7 1 Please Select One of the Following: ☒ Vehicle 2 0 #Occupants ☐ Non-Motorist A Type 14 Action 15 Location 16 Condition 17 ☐ Hit/Run ☐ Moped

License # St DOB/Age

Sex Lic. Class 18 18 Lic. Restrictions 19 CDL Endorsement

Reg # C14405 Reg Type ZZ Reg State MA

Veh Year 1982 Veh Make Other (Not Listed) Veh Config. 97 20

8 4 Operator Driverless M.V. (Last First Middle)

Address

City State Zip

Insurance Company LIBERTY MUTUAL

Owner FELICIANO, PAULINE (Last First Middle)

Address 17 WEYBOSSET ST APT 3

City FALL RIVER State MA Zip 02723

Vehicle Action Prior to Crash 11 21

Damaged Area Code: (Circle Up to Three)

Vehicle Travel Direction: N S E W Responding to Emergency? 2

Event Sequence 10 22 22 22 22

Citation # (If Issued)

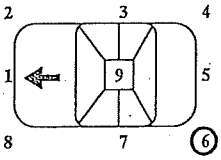
Most Harmful Event 10 23

Viol. 1: Ch/Sec/Sub / Viol. 2: Ch/Sec/Sub /

Driver Contributing Code 1 24 24

Viol. 3: Ch/Sec/Sub / Viol. 4: Ch/Sec/Sub /

Underride/Override 1 25 Towed 2



0 None, 10 Undercarriage, 11 Totaled, 97 Other, 99 Unknown

Please fill out for operator/non-motorist and all occupants involved

Name (Last First Middle)	Address	DOB/Age	Sex	26 Seat Pos.	27 Safety System	28 Airbag Status	29 Airbag Switch	30 Eject Code	31 Trap Code	32 Injury Status	33 Transp. Code	Medical Facility
Operator/Non-Motorist	See Above	---------	---	---	0	5	4	0	0	5	1	

#10364 CRA-65 REV 1.0 09/01 G003188

22

Shows outside visible crack

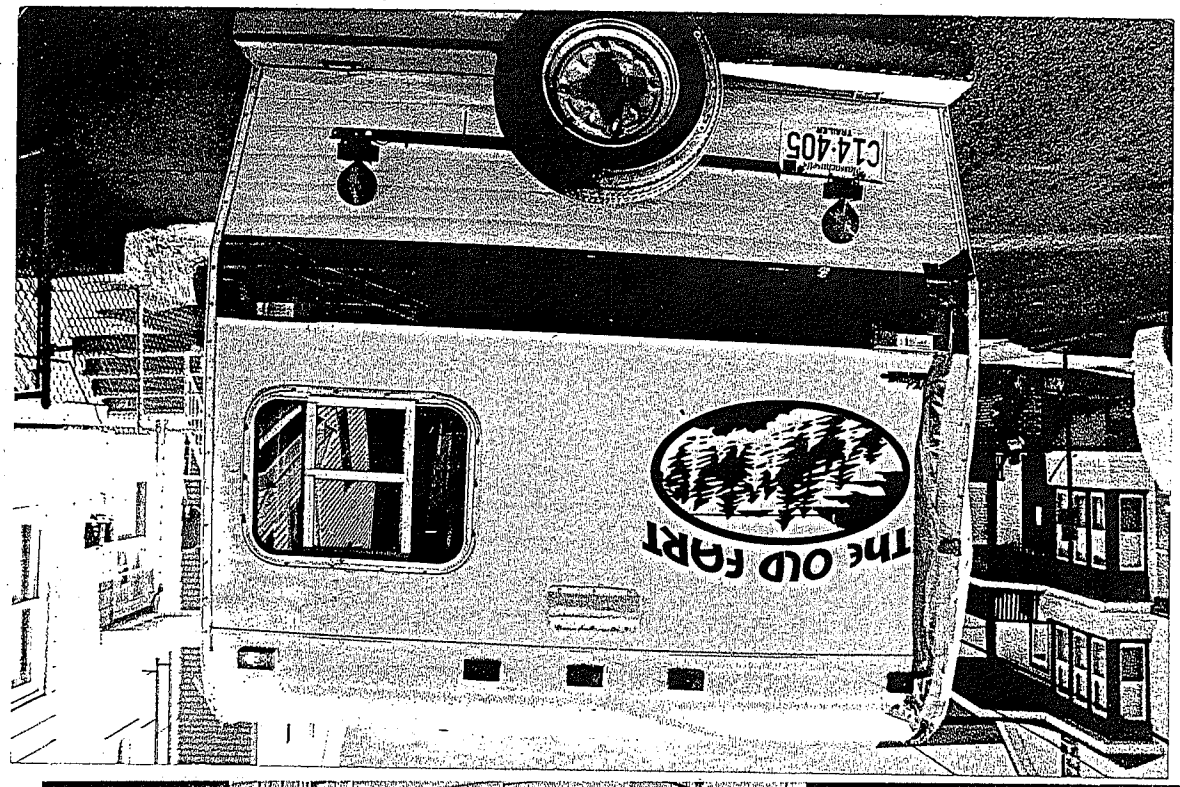
damage starts at about 34ft. to almost estimated 8ft

Shows where damage
went thru wall
into bath room area

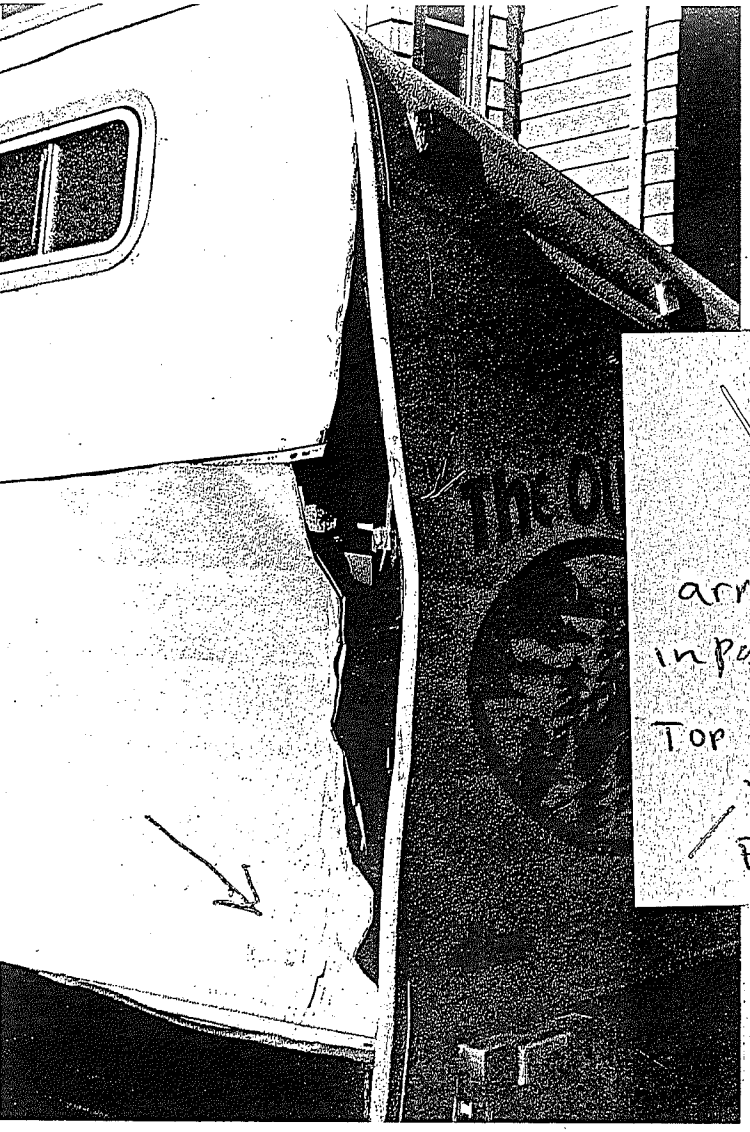
22

Overall damage/
to Rear bathroom
area

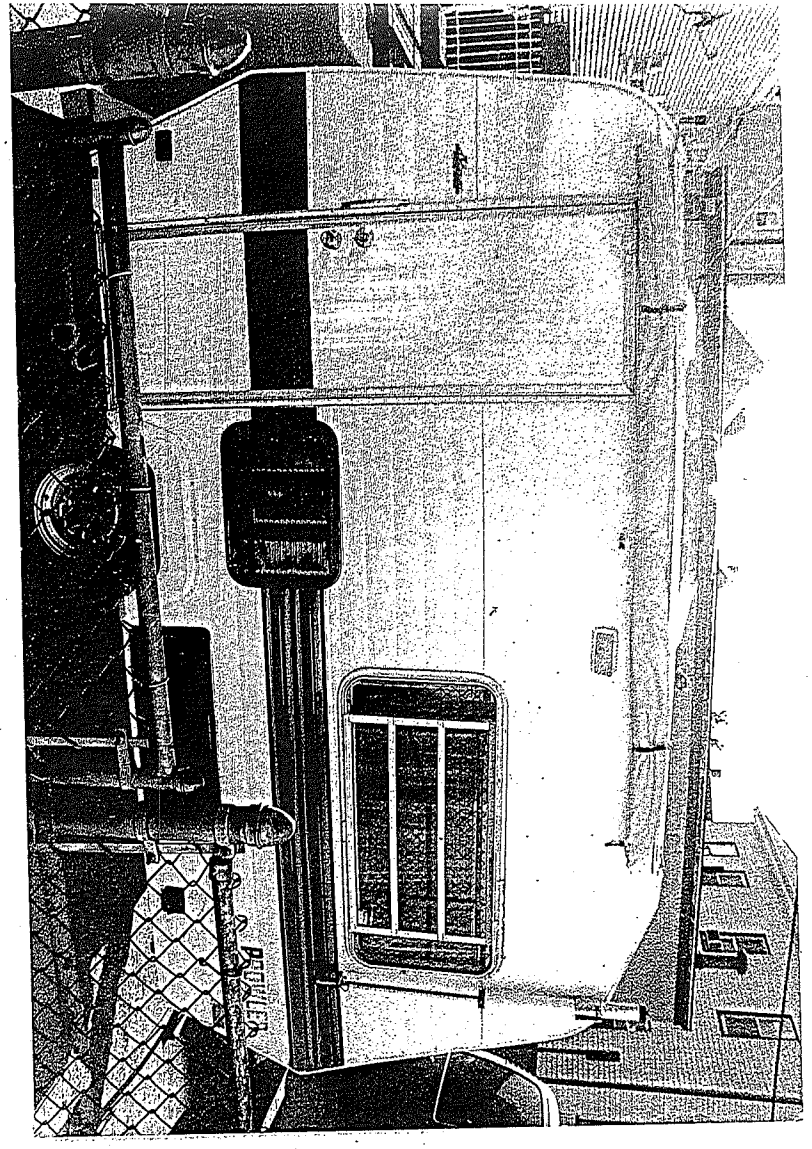
corner inside
medicine cabinet

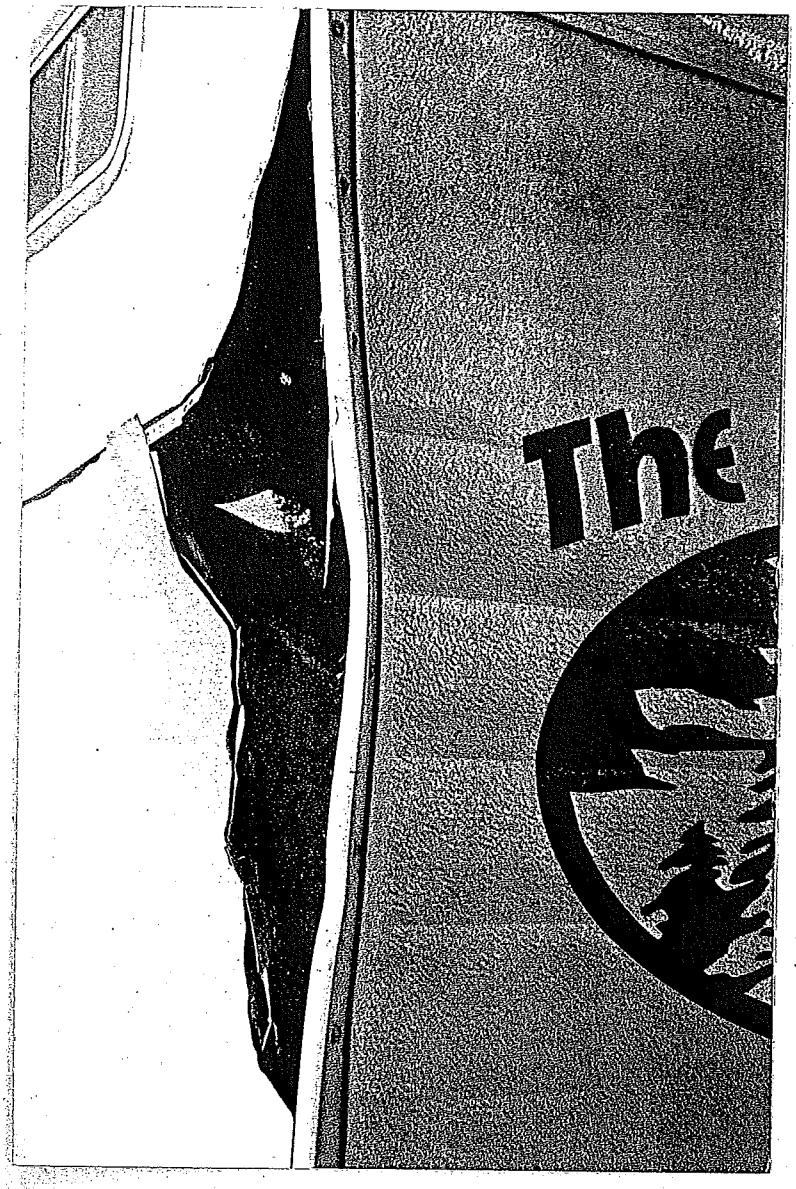


Side view
vechile
Taped up 2 cover
the weather



d/s/Rear
torn open
arrow shows where
impact marks are
Top Arrow is where
yellow paint is
From Fork Lift





Seam + main edge
support bent over
to the Right 8inches

22

CLAIM FORM
City of Fall River, Massachusetts

RECEIVED
2013 NOV 14 P 12:56
CITY CLERK
FALL RIVER, MA

13-139

Name: HORACE ETHIER

Address: 42 WELLMEADOW WAY
TIVERTON RI 02878

Phone #: (401) 624 2779

CELL 401 862 4662

Type of Claim: _____M.G.L. Chapter 84 _____M.G.L. Chapter 258 _____Other

Date of Incident: 11-14-13
Time of Incident: 11:10 AM
Location of Incident: JEFFERSON ST

Provide a detailed description of your claim (attach additional sheets if necessary):

I HAD STOPPED AT QUECHAN AND JEFFERSON TO LET AN AMARAL TRUCK TO ENTER STREET, I BLEW A TIRE AT A POT HOLE NORTH OF WARREN AVE.

FRONT RIGHT TIRE
MICHELIN D7 215/55R17

original + 2 copies Law
1 DPW
1 Shawn
1 city Journal
1 city clerk

* You should consult with your own attorney in preparing this Claim Form to understand your legal rights.

22

No main.
So,
MICHELEN
$228.44
INSTALLED
HAVE
ORDER

SACUCCI

CC

22

RECEIVED

2013 NOV 18 P 2:33

CITY CLERK 13-140
FALL RIVER, MA

CLAIM FORM
City of Fall River, Massachusetts

Name: Maria Quiterio

Address: 244 Brownell St.
Fall River, MA

Phone #: 508-674-2927

Type of Claim: _____ M.G.L. Chapter 84 _____ M.G.L. Chapter 258 _____ Other

Date of Incident: Oct. 28. 2013
Time of Incident: overnight
Location of Incident: Brownell St.

Provide a detailed description of your claim (attach additional sheets if necessary):

I woke up in the morning around 10am to go to work, I went outside and noticed the street was covered in mudd and water, including my car. I walked to my car opened the doors found my car flooded up to the seats with water and mudd. My car did not start up, nor turned over. My car was considered a total loss.

Arg & 2 Copies Law
1 Water
1 CC
1 City Clerk
1 City Council
1 Shawn

* Please consult with your own attorney in preparing this Claim Form to understand your legal rights

* Please file this Claim Form with: City Clerk, One Government Center, 2nd Floor, Fall River, MA 02722

CC

22

CLAIM FORM
City of Fall River, Massachusetts

RECEIVED
2013 NOV 18 P 2:33
CITY CLERK 13-141
FALL RIVER, MA

Name: Zelia Quiterio

Address: 244 Brownell St
Fall River Ma. 02720

Phone #: 508-730-1641

Type of Claim: _____ M.G.L. Chapter 84 _____ M.G.L. Chapter 258 _____ Other

Date of Incident: Oct. 28 2013
Time of Incident: Overnight
Location of Incident: Brownell St.

Provide a detailed description of your claim (attach additional sheets if necessary):

My car got flooded do to the main water pipe and my car now is considered a total loss. My seats and carpet was flooded with mud and water.

original & 2 copies Law
1 Water
1 CC
1 City Clerk
1 City Council
1 Shaun

* Please consult with your own attorney in preparing this Claim Form to understand your legal rights.

* Please file this Claim Form with: City Clerk, One Government Center, 2nd Floor, Fall River, MA 02722

CC

22

RECEIVED

2013 NOV 19 P 12:07

CITY CLERK
FALL RIVER, MA

CLAIM FORM
City of Fall River, Massachusetts

13-142

Name: TAERESA AMARA

Address: 55 MARCHAND ST.

Phone #: 508-679-3638

Type of Claim: _____ M.G.L. Chapter 84 _____ M.G.L. Chapter 258 _____ Other

Date of Incident: 10/27/13
Time of Incident:
Location of Incident: 55 MARCHAND ST.

Provide a detailed description of your claim (attach additional sheets if necessary):

POLICE DOG ATTACHED MY DOG -

3 VET BILLS - TOTAL $171.15

original + 2 copies law
1 Police Dept
1 Shawn
1 CC
1 city clerk

*You should consult with your own attorney in preparing this Claim Form to understand your legal rights

(151)

22

SWANSEA VETERINARY CENTER
333 SWANSEA MALL DRIVE
SWANSEA, MA 02777
(508) 676-2705

RECEIVED
2013 NOV 19 P 12:07
CITY CLERK
FALL RIVER, MA

Theresa Amaral
55 Marchand St
FALL RIVER, MA 02723

Client ID: 3862
Invoice #: 39521
Date: 10/28/2013

Patient ID: 3862-1 | Species: Canine | Weight: 39.00 pounds
Patient Name: Raggs | Breed: Terrier Mix | Birthday: 11/23/2007 | Sex: Spayed Female

	Description	Staff Name	Quantity	Total
10/28/2013	EXAMINATION - SICK/MED PROBLEM	Dr. CARLOS D. SILVERA, B	1.00	$58.00
	CLIP AND CLEAN WOUND		1.00	$20.00
	Amoxicillin 250 mg		28.00	$13.20 T
	Previcox 227mg		2.00	$8.58 T
			Patient Subtotal:	**$99.78**

Instructions

Gently brush teeth and the gum line at the base of the teeth once daily to help prevent tartar and gum disease. Use a toothpaste specifically made for dogs and cats.

You have been given an antibiotic to use at home. It is very unusual, but some side effects have been reported in pets who are sensitive to antibiotics. If your pet stops eating, develops loose stools, vomits or develops a rash, stop the medication and call the hospital.

You have been given a NSAID (pain medication) to use at home. Please follow dosing instructions very carefully. Do not increase dosage without consulting with your pet's doctor.
It is very unusual, but some side effects have been reported in pets using NSAID's. If your pet stops eating, develops loose or bloody stools, or begins to vomit, stop the medication and call the hospital.

Also, if using a NSAID for long periods of time, annual bloodwork screening may be required to monitor your pets health during treatment. Your pet's doctor will discuss these options.

Reminder

07/25/2014	LYME DISEASE BOOSTER
	LEPTOSPIRA ANNUAL BOOSTER
	EXAMINATION - ANNUAL
	4DX PLUS SNAP HEARTWORM TEST
07/25/2016	DHPP 3YR BOOSTER
	RABIES CANINE 3 YEAR BOOSTER

Invoice Total:	**$99.78**
State Sales Tax :	$1.37
Total:	$101.15
Invoice Balance Due:	$101.15
Discover Card:	($101.15)
Less Payment:	($101.15)
Invoice Balance Due:	**$0.00**
Balance Due:	**$0.00**

The Doctors and Staff of Swansea Veterinary Center appreciate your business and the opportunity to provide your pets with quality health care. Thank you!

22

Fall River Police Department
Case Report

Incident #: 13-7207-OF
Call #: 13-72016

RECEIVED
2013 NOV 19 P 12:07
CITY CLERK
FALL RIVER, MA

Date/Time Reported: 10/27/2013 1813
Report Date/Time: 10/27/2013 1913
Status: No Crime Involved
Reporting Officer: Sergeant Jeffrey Richard

Signature: _____

EVENTS(S)

LOCATION TYPE: Department/Discount Store Zone: Zone 077, Sec 8
WALMART
638 QUEQUECHAN ST
FALL RIVER MA

1 K-9 Deployment

NARRATIVE FOR SERGEANT JEFFREY RICHARD

Ref: 13-7207-OF

Entered: 10/27/2013 @ 1915 Entry ID: A478
Modified: 10/27/2013 @ 1932 Modified ID: A478

On Sunday 10/27/13 I Sergeant Jeffrey Richard, was assigned as patrol supervisor S2 of the FRPD Uniform Division. Around 1830 hours, units responded to the area of Walmart on Brayton Avenue regarding a Chrysler 300 which the caller stated contained a male which was believed to be wanted for a shooting. At this time, not much more information was readily available from dispatch. A short time later later, FRPD units located the vehicle in the area of McGowen Street at which point the vehicle quickly pulled over and a black male fitting the given description exited. This male then began to run North, with Officer Andre DeMelo following. The call number for this case is: 13-72016.

When it became apparent to Ofc. DeMelo that he could not apprehend the male, he broke off the foot pursuit. A perimeter was set around the area by several units and a yard to yard search was commenced. During the yard to yard search, K9 Oro and I were checking behind 55 Marchand Street. As we walked past the rear deck at this location, a small Cocker Spaniel type dog came off the porch and approached K9 Oro and I. I attempted to warn the dog back by yelling, however he approached and a small scuffle ensued between the two dogs during which the Spaniel was bitten on the left ear by K9 Oro.

I was able to separate the two dogs, during which I sustained a very minor laceration on the knuckle of my left index finger. K9 Oro was then secured in the cruiser and I was able to check on the Spaniel as well as speak to it's owner, Terry Amaral.

The Spaniel appeared sore on the ear but did not look to be injured and no blood or cuts were visible on the animal. Mrs. Amaral stated that she believed the dog was OK and that she would monitor him for any problems. I left my contact information with her and informed her that she could contact me with any questions. Mrs. Amaral was very polite and stated that she would not call unless something was wrong.

** Portions of this report have been redacted **

22

SWANSEA VETERINARY CENTER
333 SWANSEA MALL DRIVE
SWANSEA, MA 02777
(508) 676-2705

RECEIVED
2013 NOV 19 P 12:07
CITY CLERK
FALL RIVER, MA

Theresa Amaral
55 Marchand St
FALL RIVER, MA 02723

Client ID: 3862
Invoice #: 39595
Date: 10/31/2013

Patient ID: 3862-1	Species: Canine	Weight: 39.00 pounds.	
Patient Name: Raggs	Breed: Terrier Mix	Birthday: 11/23/2007	Sex: Spayed Female

	Description	Staff Name	Quantity	Total
10/31/2013	EXAMINATION - RECHECK	Dr. Kimberly Morrissey, DVM	1.00	$35.00
			Patient Subtotal:	**$35.00**

Reminder

07/25/2014	LYME DISEASE BOOSTER
	LEPTOSPIRA ANNUAL BOOSTER
	EXAMINATION - ANNUAL
	4DX PLUS SNAP HEARTWORM TEST
07/25/2016	DHPP 3YR BOOSTER
	RABIES CANINE 3 YEAR BOOSTER

Invoice Total:	**$35.00**
Total:	$35.00
Invoice Balance Due:	$35.00
Discover Card:	($35.00)
Less Payment:	($35.00)
Invoice Balance Due:	**$0.00**
Balance Due:	**$0.00**

The Doctors and Staff of Swansea Veterinary Center appreciate your business and the opportunity to provide your pets with quality health care. Thank you!

22

SWANSEA VETERINARY CENTER
333 SWANSEA MALL DRIVE
SWANSEA, MA 02777
(508) 676-2705

RECEIVED
2013 NOV 19 P 12:07
CITY CLERK
FALL RIVER, MA

Theresa Amaral
55 Marchand St
FALL RIVER, MA 02723

Client ID: 3862
Invoice #: 39841
Date: 11/11/2013

Patient ID: 3862-1	Species: Canine	Weight: 39.00 pounds	
Patient Name: Raggs	Breed: Terrier Mix	Birthday: 11/23/2007	Sex: Spayed Female

	Description	Staff Name	Quantity	Total
11/11/2013	EXAMINATION - RECHECK	Dr. Kimberly Morrissey, DVM	1.00	$35.00
			Patient Subtotal:	**$35.00**

Reminder

07/25/2014	LYME DISEASE BOOSTER
	LEPTOSPIRA ANNUAL BOOSTER
	EXAMINATION - ANNUAL
	4DX PLUS SNAP HEARTWORM TEST
07/25/2016	DHPP 3YR BOOSTER
	RABIES CANINE 3 YEAR BOOSTER

Invoice Total:	**$35.00**
Total:	$35.00
Invoice Balance Due:	$35.00
Discover Card:	($35.00)
Less Payment:	($35.00)
Invoice Balance Due:	**$0.00**
Balance Due:	**$0.00**

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