

Village of Spring Lake

Council Work Session

December 11, 2017

7:00 p.m.

102 West Savidge Street (Upstairs Conference Room)
Spring Lake, MI 49456

www.springlakevillage.org

1	7:00 p.m. – DPW Update <ul style="list-style-type: none">• Equipment & Personnel Sharing• SAW Grant• Lift Stations (Lake Street & Holiday Inn)• Miscellaneous
2	7:15 p.m. – Finance Committee Update <ul style="list-style-type: none">• Budget Adjustments• Additional MERS Payment• Fund Balance Policy• Miscellaneous
3	7:30 p.m. – MERS Payment <p>In order for the impact of an additional payment to be recognized in the 2018 Annual Actuarial Valuation Report, the payment must reach MERS by 12/31/17.</p>
4	7:32 p.m. – Board & Committee Appointments <ul style="list-style-type: none">• NOWS Alternate (Joel Tepastte or John Stuparits)• Parks & Recreation (Darcy Dye) – term ending 11/2019
5	7:33 p.m. – Housing Memorandum of Understanding <p>The City of Grand Haven would like to solidify their relationship with the Village regarding housing support for residents within the Village. Attached please find a MOU for housing services.</p>
6	7:36 p.m. – Central Park Reservation ~ Snow Jam <p>Snow Jam is once again scheduled to take place at Central Park. The date is February 10, 2018. There will be a tent for live music, a dart tournament and a friendly Grand Haven vs. Spring Lake Hockey game (weather permitting). Proceeds from the event stay in the community.</p>

7	<p>7:38 p.m. – Ambulance Agreement</p> <p>Council Member TePastte is the representative on the Ambulance Oversight Committee and will be updating Council on the progress towards a new agreement.</p>																																				
8	<p>7:40 p.m. – Traffic Study (Exchange & Jackson)</p> <p>Council had requested staff examine the traffic situation at Exchange & Jackson. A quote was obtained from the leading traffic engineer in the State of Michigan (Pete LaMourie) to investigate options for the intersection.</p>																																				
9	<p>7:45 p.m. - Reconsideration of License Non-Renewal</p>																																				
10	<p>7:47 p.m. - Reconsideration of Summer Sewer Credit</p>																																				
11	<p>7:50 p.m. – Waste Haulers Licensing Agreements</p> <p>Approval of waste hauling licenses is typically a housekeeping item.</p> <table border="1" data-bbox="318 1016 1386 1749"> <thead> <tr> <th colspan="4" style="background-color: #d9e1f2;">Licensed Waste Haulers in the Village</th> </tr> <tr> <th></th> <th style="background-color: #d9e1f2;">Republic/Allied Waste 231-375-2070</th> <th style="background-color: #d9e1f2;">Kuerth Disposal 231-744-4967</th> <th style="background-color: #d9e1f2;">Waste Management 616-724-2148</th> </tr> </thead> <tbody> <tr> <td>Trash Collection 90-96 Gallon Container</td> <td>\$17.55/month</td> <td>\$18.00/month</td> <td>\$16.00/month</td> </tr> <tr> <td>Curbside Recycling With Container Service</td> <td>Included Biweekly</td> <td>Included Weekly</td> <td>\$5.00/month Weekly</td> </tr> <tr> <td>Bag Service</td> <td>\$1.50/bag + \$6.80/month admin</td> <td>\$3.00/bag (75 bags/box)</td> <td>\$2.50/bag + \$5.92/month admin</td> </tr> <tr> <td>Curbside Recycling With Bag Service</td> <td></td> <td>\$3.00/month</td> <td></td> </tr> <tr> <td>Yard Waste</td> <td>\$10.50/month (bag) \$12.50/month (cart)</td> <td>\$90.00/season</td> <td>\$12.50/month + \$25 activation fee</td> </tr> <tr> <td>Christmas Trees</td> <td>Included</td> <td>Included</td> <td>Included</td> </tr> <tr> <td>Spring/Fall Clean-up</td> <td>No Charge*</td> <td>Charge</td> <td>No Charge</td> </tr> </tbody> </table>	Licensed Waste Haulers in the Village					Republic/Allied Waste 231-375-2070	Kuerth Disposal 231-744-4967	Waste Management 616-724-2148	Trash Collection 90-96 Gallon Container	\$17.55/month	\$18.00/month	\$16.00/month	Curbside Recycling With Container Service	Included Biweekly	Included Weekly	\$5.00/month Weekly	Bag Service	\$1.50/bag + \$6.80/month admin	\$3.00/bag (75 bags/box)	\$2.50/bag + \$5.92/month admin	Curbside Recycling With Bag Service		\$3.00/month		Yard Waste	\$10.50/month (bag) \$12.50/month (cart)	\$90.00/season	\$12.50/month + \$25 activation fee	Christmas Trees	Included	Included	Included	Spring/Fall Clean-up	No Charge*	Charge	No Charge
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12	<p>7:55 p.m. - Planning Services Agreement with Grand Haven</p>																																				

	<p>This agreement is reviewed annually. Staff wishes to continue with the collaboration with the City of Grand Haven which affords the Village 4 hours of planning services each week.</p>
13	<p>7:58 p.m. – Communications</p> <ul style="list-style-type: none"> • Citations • Complaint - Crouse • Complaint - Gade • Complaint - Lake Pointe Condos • Compliment - Stahl • Library Calendar (December) • Township Recognition • Village Manager Calendar
14	<p>8:11 p.m. - Minutes</p> <p>Minutes of the November 13, 2017 Work Session and November 20, 2017 regular meeting are attached for review. Should you wish to make edits, please share that information with Chris Burns or Maryann Fonkert prior to December 14, 2017.</p>
15	<p>8:12 - Public Comment</p> <p>Council Work Sessions are open to the public, and as such, the public is invited to speak at the end of each meeting. Each speaker should limit their comments to 3 minutes.</p>
16	<p>8:15 – Adjourn</p>

Village of Spring Lake
December 2017 Budget Adjustments

	Fund	Dept.	Account	Current	Proposed	Change
236-000.000-933.100	DDA Fund	General Services	Sprinkler Maintenance	0	10,000	10,000
236-000.000-801.172	DDA Fund	General Services	Disincorporation Expense	0	1,500	1,500
236-000.000-801.290	DDA Fund	General Services	Professional Services - Stormwater	0	3,000	3,000
236-000.000-933.600	DDA Fund	General Services	Parking Lot Maintenance	15,000	12,500	(2,500)
236-000.000-978.000	DDA Fund	General Services	Paving	150,000	144,572	(5,428)
236-000.000-991.000	DDA Fund	General Services	Debt Service	50,000	43,428	(6,572)
Adjust DDA Fund Expenditures.				Net Change		0
249-000.000-664.000	Building Fund	Revenue	Interest Income	0	500	500
249-381.000-801.172	Building Fund	Zoning/Planning	Disincorporation Expense	0	300	300
249-381.000-910.000	Building Fund	Zoning/Planning	Insurance	1,300	1,425	125
249-381.000-975.000	Building Fund	Zoning/Planning	Appropriation to Fund Balance	-	75	75
Adjust Building Fund Expenditures.				Net Change		0
101-000.000-695.000	General Fund	Revenue	Appropriation from Fund Balance	0	37,000	37,000
101-265.000-931.000	General Fund	Village Hall	Building Repairs and Maintenance	10,000	30,000	20,000
101-441.000-931.000	General Fund	DPW	Building Repairs and Maintenance	3,000	20,000	17,000
Adjust General Fund Budget for roof replacement costs at Village Hall and DPW Building.				Net Change		0
101-101.000-801.172	General Fund	Village Council	Disincorporation Expense	-	4,000	4,000
101-215.000-801.000	General Fund	Clerk/Treasurer	Professional Services	112,000	108,000	(4,000)
Adjust General Fund Budget for Disincorporation costs.				Net Change		0
207-000.000-705.207	Police Fund	Police	MERS Retirement Contribution	-	780	780
207-000.000-804.000	Police Fund	Police	Legal Fees	5,400	4,620	(780)
Adjust current year Police Budget.				Net Change		0


**NORTHWEST OTTAWA WATER SYSTEM
ADMINISTRATIVE COMMITTEE - MEMBERSHIP LIST
2018**

Joseph A. VanderStel, Water Facilities Manager
Telephone: 616-847-3487 - Cell: 616-638-4513
Fax: 616-850-8738
jvanderstel@grandhaven.org



Eric Law, Water Filtration Plant Supervisor
Telephone: 616-847-3488 – Cell: 616-607-4025
elaw@grandhaven.org

CITY OF GRAND HAVEN

Derek Gajdos
519 Washington Ave.
Grand Haven, MI 49417

dgajdos@grandhaven.org
Telephone: 616-847-3493
Fax DPW: 616-847-3470

Alternate: Pat McGinnis - pmcginnis@grandhaven.org

CITY OF FERRYSBURG

Craig Bessinger
17290 Roosevelt Road
P.O. Box 38
Ferrysburg, MI 49409-0038

cbessinger@ferrysburg.org
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Fax: 616-844-0200

Alternate: Matt Schindlbeck – mschindlbeck@ferrysburg.org

VILLAGE OF SPRING LAKE

Christine Burns
102 W. Savidge Street
Spring Lake, MI 49456

christine@springlakevillage.org
Telephone: 616-842-1393
Fax: 616-847-1393

Alternate: NA

SPRING LAKE TOWNSHIP

Gordon Gallagher
101 S. Buchanan Street
Spring Lake, MI 49456

ggallagher@springlaketwp.org
Telephone: 616-842-1340
Fax Office: 616-842-1546

Alternate: John Nash – jnash@springlaketwp.org

GRAND HAVEN CHARTER TOWNSHIP

Bill Cargo
13300 168th Avenue
Grand Haven, MI 49417

bcargo@ght.org
Telephone: 616-842-5988
Fax: 616-842-9419

Alternate: Mark VerBerkmoes – mverberkmoes@ght.org

OTTAWA COUNTY ROAD COMMISSION

Patrick Staskiewicz
P.O. Box 739
Grand Haven, MI 49417

pstaskiewicz@ottawacorc.com
Telephone: 616-850-7206
Fax: 616-850-7237

Alternate: Joe Wallace – jwallace@ottawacorc.com

** Need
a goal?
or John?*



Board and Commission Application

Name: Darcy J. Dye Telephone: (616) 296-0957

Address: 114 N. Fruitport Rd. Date: 15 November 2017

(Mailing address is P.O. Box 182)

Email Address: dlenzgrinden@gmail.com

See

Years as a Village Resident: Attached Occupation¹: Retired Textile/Educator Artist

Background/Interests: I have a Master Naturalist Certification.

For four years I worked in the Prairie Habitat on the Dominican Sisters' campus in Grand

(cont on attached)

Please check the board(s) or commission(s) that you would be willing to serve on:

- | | | |
|---|--|---|
| <input type="checkbox"/> Village Council | <input type="checkbox"/> Friends of Barber School | <input type="checkbox"/> Beautification Committee |
| <input type="checkbox"/> Planning Commission | <input type="checkbox"/> Historic Commission | <input type="checkbox"/> DDA |
| <input type="checkbox"/> Zoning Board of Appeals | <input type="checkbox"/> Development Area Citizens Council | <input type="checkbox"/> Library Liaison |
| <input checked="" type="checkbox"/> Parks & Recreation/Tree Board | <input type="checkbox"/> Spring Lake Lake Board | <input type="checkbox"/> Lloyd's Bayou |

The above boards typically meet on a monthly basis, with the exception of the ZBA which meets on an "as needed" basis. Quorums are required for any board to act, so attendance is important. Do you feel the other board members can count on your regular attendance so that business can be conducted?

Yes No Seasonally - from _____ to _____

Why would you like to be on the board(s) or commission(s) you have selected: (Please use reverse side if necessary)

For the last two years, I have facilitated the Adopt a Garden Program in the Village, working with volunteers to clean out existing
(Cont. on attached)

Concerns for the Village; if any:

One of my personal interests is to help remove invasive plant species growing along the bike trail.

The Village of Spring Lake assures that no person shall, on the grounds of race, color, national origin, or sex be excluded from or participation in, be denied the benefits of, or be otherwise subjected to discrimination under any program or activity. The Village of Spring Lake further assures every effort will be made to ensure nondiscrimination in all of its committees, programs and activities, regardless of the funding source.

¹ Please attach a resume.

Board and Commission Application
Darcy J. Dye

Years as a Village Resident

Seasonal Resident since 2003. Permanent resident since 2014.

Background/Interests (cont.)

Rapids, helping to revitalize and expand their urban prairie. I have participated in planting projects with the River City Wild Ones, helping to introduce Michigan Native species into area parks and schoolyards. I volunteered in the Ada Parks, helping to remove invasives, like garlic mustard and oriental bittersweet. I occasionally give talks on the benefits of planting Michigan Native Wildflowers and consult privately with individuals interested in creating Native gardens on residential property. Wherever I have lived, I have found places to serve with groups who are committed to cleaning up the natural world and making it more accessible to the public.

Why You Would Like to be on the Board... (cont.)

gardens, plant Michigan Native Wildflowers to create butterfly/pollinator spaces, and to plant annuals in the 40-some cement planters around the Village. Until now, the Adopt a Garden Program has operated as an independent, volunteer organization under the umbrella of the non-existent Beautification Committee! For the long-term good of this Program, it seems wise for it to become part of Parks and Recreation. I believe that I bring some skills that may be of benefit to the broader interests of the Parks and Recreation Board.

My husband, David, and I are avid walker/hikers. We take advantage of area parks on an almost daily basis. I would love to give back to the community by serving on the Parks and Recreation Board.



Memorandum of Understanding

Between

City of Grand Haven's Neighborhood Housing Services

And

Village of Spring Lake

This Memorandum of Understanding sets forth the terms and understanding between Neighborhood Housing Services (NHS) a department of the City of Grand Haven located at 11 N 6th Street, Grand Haven, MI 49417 and the Village of Spring Lake a Michigan municipal corporation, located at 102 West Savidge Street, Spring Lake MI 49456 to provide financial support to NHS for the services their office provides to residents located within the Village of Spring Lake.

NHS has provided services to Ottawa county residents since 2007. Since its inception the department has been able to operate on various grant funds. Recent major shifts in funding at the state level have resulted in an over 50% reduction in the funds made available for single family homeownership programs. The rising costs of housing in Ottawa County is making the demand for our services even greater in 2016 and the reduction in state funding is expected to result in a substantial shortfall for NHS in FY 2016/17 and subsequent years. A partnership with neighboring municipalities will allow NHS to continue to provide valuable services to all areas of Ottawa County.

The goals of this partnership are to provide enough funding support to NHS to allow for current services to continue as well as expand current City of Grand Haven only services. This will be accomplished through the roles and responsibilities of each partner as detailed below.

Neighborhood Housing Services will:

- Provide Education services, which are foreclosure prevention, homebuyer education, group and one on one, group financial capability workshops and pre purchase counseling to Village residents through funds from the HEP grant.
- Add Village of Spring Lake to the area served for the NIP program.
- Provide one on one financial coaching through the Financial Empowerment Center.
- Provide a mid-year and end of year report showing the number of Village of Spring Lake residents served in the current year.
- Provide an updated budget mid-year and at the end of the year that shows budget shortfall.

- Provide an invoice to the Village in July of 2018 based on actual clients served from Village of Spring Lake using the calculation method shown below. The amount invoiced will be a percentage of any shortfall in an amount not to exceed NHS's total shortfall and not to exceed \$1,800. Calculation method:

of ~~clients~~ households served for residents of the Village of Spring Lake July 1, 2017 through June 30, 2018.

DIVIDED BY

of clients served through NHS in the City of Grand Haven, Grand Haven Township, Spring Lake Township, Village of Spring Lake and City of Ferrysburg.

EQUALS

Percentage of Shortfall to be billed

Village of Spring Lake and its authorized officials will:

- Respond to requests for payment in a timely manner.
- Respond to requests for municipality data to assist with any and all potential grant writing.
- Provide feedback to NHS staff and allow for adjustments to partnership before ending this arrangement.
- Agree to a partnership that lasts 2 years before full evaluation of funding strategies.
- Agree to a partnership that begins on July 1, 2016 and ends on June 30, 2017 for year 1 invoicing. And a partnership that continues from July 1, 2017 to June 30, 2018 for year 2 invoicing provided all parties have satisfactorily met their agreed upon roles and responsibilities.

This MOU is at-will and may be modified by mutual consent of authorized officials from the City of Grand Haven and the Village of Spring Lake. Any modifications or amendments must be in writing and signed by all parties after the approval of their respective boards and councils. This MOU shall become effective upon signature by the authorized officials from the City of Grand Haven and Village of Spring Lake and will remain in effect until modified or terminated by any one of the partners by mutual consent. In the absence of mutual agreement by the authorized officials from the City of Grand Haven and the Village of Spring Lake this MOU shall end on June 30, 2018 with the anticipation of a new MOU for future years.

City of Grand Haven Neighborhood Housing Services
Rhonda Umstead, Neighborhood Development Coordinator
11 N. 6th Street
Grand Haven MI 49417
616-935-3275
rumstead@grandhaven.org

Village of Spring Lake
Christine Burns, Village Manager
102 West Savidge Street
Spring Lake MI 49456

616-604-6324
christine@springlakevillage.org

NEIGHBORHOOD HOUSING SERVICES:

PRINTED NAME _____ DATE: _____

SIGNATURE _____

VILLAGE OF SPRING LAKE:

PRINTED NAME _____ DATE: _____
Mark A. Powers

SIGNATURE _____

PRINTED NAME _____ DATE: _____
Marvin Hinga

SIGNATURE _____



Fire/Rescue Memo

DATE: December 8, 2017

TO: Grand Haven Charter Township Board of Trustees

FROM: Chief Tom Gerencer

RE: Amendment to Emergency Medical Services Agreement

Please see the attached documents that are referred to as the First Amendment to Emergency Medical Services Agreement, and the Memorandum of Understanding - Enhanced Ambulance Service. Both documents have draft dates of November 14, 2017.

As you may recall, the City of Grand Haven gave notice last December that there was a desire to re-negotiate the ambulance agreement with North Ottawa Community Hospital. However, rather than re-negotiating the entire agreement, the Ambulance Oversight Committee chose to amend the current agreement.

After eleven months of negotiations, the Ambulance Oversight Committee completed the re-negotiation process that ensures increased staffing (*i.e. a third ambulance*) by the Hospital during the busiest hours from 10:00 a.m. through 6:00 p.m. The Hospital will monitor peak service request times, make adjustments it deems appropriate, and notify the Municipalities of the adjustments. When needed, staffing for a third ambulance will be partially provided by local departments with NOCH reimbursing the local departments for their labor costs.

The Hospital and Committee agreed to amend some of the response times (*i.e. decrease priority one calls and increase priority two calls*) to better serve the communities. In addition, the amendment will better monitor and track response times when the NOCH Ambulance is forced to rely upon other ambulance companies such as Pro-Med from Muskegon or American Medical Response from Holland.

Overall, the committee is in agreement that twelve-months will be enough time to determine if the increased ambulance staffing is sufficient. The committee will meet again in March and June of 2018 to review the expected progress.

If you have any questions, please feel free to contact me.

If the Board supports the Ambulance Oversight Committee's recommendation, the following motion could be offered:

s:\village shared documents\village council\work sessions\2017\12112017\7 ght
memo ambulance amendment.docx

Move to authorize the Township Supervisor and Clerk to sign the First Amendment to Emergency Medical Services Agreement, and the Memorandum of Understanding - Enhanced Ambulance Service.

FIRST AMENDMENT TO EMERGENCY MEDICAL SERVICES AGREEMENT

This **FIRST AMENDMENT TO EMERGENCY MEDICAL SERVICES AGREEMENT (this “Amendment”)** is effective as of the last dated signature contained below, **(the “Amendment Effective Date”)** by and between North Ottawa Community Hospital (“**the Hospital**”); and, the City of Ferrysburg, City of Grand Haven, Village of Spring Lake, Grand Haven Charter Township, Spring Lake Township, Robinson Township, and Crockery Township (“**Municipalities**”).

RECITALS

WHEREAS, the Hospital and Municipalities previously entered into a five year Emergency Medical Services Agreement effective January 1, 2013 (**the “Agreement”**);

WHEREAS, this Agreement will terminate on December 31, 2017;

WHEREAS, the Hospital and Municipalities have engaged in negotiations to amend the Agreement for a new one year term;

NOW, THEREFORE, for good and valuable consideration, the receipt and adequacy which is mutually acknowledged, the parties agree as follows.

1. **Unaffected Terms.** All terms and conditions of the Agreement not otherwise revised by this Amendment, shall be extended and remain in full force and effect. Where there exists a conflict between this Amendment and the Agreement, the Amendment shall control.

2. **Section 2.3 (Primary Term and Renewal) is amended, as follows:**

Section 2.3. Primary Term and Renewal. The term of this Agreement shall begin on the Effective Date of this Amendment, and will terminate on December 31, 2018. Between the Effective Date of this Amendment and December 31, 2018, the Hospital and Municipalities shall negotiate as they each deem appropriate for a further extension of the Agreement.

3. **Section 3.4 (Response Time), Subsection A1) is amended as follows (the rest of Subsection A shall remain unchanged):**

1. A. For Priority I Calls, the Response Time shall be as follows:

1) In Urban Service Area 1 and Urban Service Area 2, ninety percent (90%) of all calls shall have a Response Time less than or equal to seven (7) minutes, fifty-nine (59) seconds.

4. **Section 3.4 (Response Time), Subsection B is amended as follows:**
 2. B. For Priority II Calls, the Response Time shall be as follows:
 - 1) In Urban Service Area 1 and Urban Service Area 2, ninety percent (90%) of all calls shall have a Response Time less than or equal to twelve (12) minutes, fifty-nine (59) seconds; and
 - 2) In Non-Urban Service Area 3, ninety percent (90%) of all calls shall have a Response Time less than or equal to seventeen (17) minutes, fifty-nine (59) seconds.
5. **Section 3.4 (Response Time) shall be amended by the addition of a new Subsection D to state as follows:**
 - D. If a Priority I or Priority II Call is downgraded to a lower Priority Call after the Hospital ambulance has been dispatched, the downgraded Response Time shall apply to the run. If a Priority II or Priority III Call is upgraded to a higher Priority Call after the Hospital ambulance has been dispatched, the original Response Time shall apply to the run.
6. **The last paragraph of Section 3.8 (Mutual Aid Plan), beginning with “Copies of the...,” shall be deleted in its entirety, and replaced by the following:**

Copies of the Mutual Aid Plans are attached as Exhibit C. If the Hospital determines that it may not be able to meet the established minimum standards set forth in Section 3.4, the Hospital shall immediately request mutual aid that can be provided to all areas of the Service Area upon receiving a 9-1-1 Call. In mutual aid situations not subject to the terms of Section 3.4, the Hospital’s response time shall be that of the responding mutual aid agency. However, the Hospital’s response time when it dispatches a third ambulance per Section 3.9 below and also requests Mutual Aid or assistance from a Municipality or both, shall be determined by calculating the time it takes for the Hospital ambulance to arrive on the scene; the Response Time shall meet the applicable standard of Section 3.4. The Hospital shall provide payment to a Municipality that provides ambulance driving assistance from the scene back to the Hospital at the rate of forty dollars (\$40.00) for the first hour or portion of an hour; and, prorated to the nearest quarter hour at that same rate for any time after the first hour. Payment time begins when the Municipality is dispatched to the scene, and ends upon the Hospital’s return of the Municipality representative back to the Municipality’s fire station, or otherwise agreed upon location. The Hospital’s insurance does and shall include coverage for the ambulance driving assistance provided by the Municipality. The Municipalities will provide ambulance driving assistance to the Hospital pursuant to this paragraph and the Memorandum of Understanding attached as Exhibit A.

7. **Section 3.9 (Equipment and Staffing) shall be amended by changing the period at the end of Section 3.9 to a semicolon and adding the following:**

however, this contracting prohibition and employment requirement does not apply to situations where the Hospital pays for a person not employed by NOCH to drive a Hospital ambulance from the scene back to the Hospital when such driving assistance is needed. The term “not employed by NOCH” from the previous sentence means not on duty, and not being paid, as a NOCH employee. The term “sufficient operable equipment” for purposes of this Section 3.9 shall mean two ambulances available 24/7/365; and, beginning no later than the Effective Date, a third ambulance to operate Monday through Friday at least eight (8) hours per day, with the hours of operation to be determined by the Hospital.

IN WITNESS HEREOF, the parties have executed this Amendment as of the date(s) set forth below:

Township of Crockery

By: _____
Leon Stille
Its: Supervisor

By: _____
Kathy Buchanan
Its: Clerk

Township of Robinson

By: _____
Kathryn L. Kuck
Its: Supervisor

By: _____
Christine Saddler
Its: Clerk

Village of Spring Lake

Township of Spring Lake

By: _____
John H. Nash
Its: Supervisor

By: _____
H. Carolyn Boersma
Its: Clerk

Charter Township of Grand Haven

By: _____
Mark Reenders
Its: Supervisor

By: _____
Laurie Larsen
Its: Clerk

City of Ferrysburg

By: _____
Mark Powers
Its: President

By: _____
Rebecca Hopp
Its: Mayor

By: _____
Marv Hinga
Its: Clerk/Treasurer

By: _____
Debra Wierenga
Its: Clerk

City of Grand Haven

North Ottawa Community Hospital

By: _____
Geri McCaleb
Its: Mayor

By: _____
Shellee Yaklin
Its: President and CEO

By: _____
Linda Browand
Its: Clerk

NOTE: STREET ADDRESS AND EMAIL ADDRESSES NEED TO BE REVIEWED AND UPDATED FOR PURPOSES OF SECTION 7.1, WHICH IS THE “NOTICE” PROVISION.

EXHIBIT A

MEMORANDUM OF UNDERSTANDING – ENHANCED AMBULANCE SERVICE

This Memorandum of Understanding (MOU) is made as of _____, 2017, between North Ottawa Community Hospital (NOCH) and Crockery Township, Spring Lake Township, Village of Spring Lake, City of Ferrysburg, City of Grand Haven, Grand Haven Township, and Robinson Township (The Governmental Units).

RECITALS

NOCH and the Governmental Units wish to enhance ambulance service under section 4.1 of the current contract. The intention of this MOU is to enhance ambulance services provided by NOCH through a temporary operational partnership with the Governmental Units' Fire Departments. The purpose of the temporary partnership is to reduce the use of mutual aid services from surrounding EMS providers, thus reducing overall response times.

NOCH expects that projected run volumes and increased ground transport revenues will allow NOCH to fund a third ALS ambulance crew at the end of 2018 or beginning of 2019. In the meantime, NOCH and the Governmental Units will partner to provide a third ALS ambulance crew during peak service request times.

This MOU does not expand the Governmental Units responsibility for ambulance services or commit the Governmental Units to ambulance operations should Fire Department personnel not be available due to staffing, level of training, or other Fire Department calls for service. The responsibility for ambulance operations rests solely with NOCH and NOCH will immediately request mutual aid services whenever available resources are exhausted.

TERMS AND CONDITIONS

NOCH Responsibilities

1. NOCH will staff a third ALS ambulance crew from 10am through 6pm, Monday through Friday. NOCH will monitor peak service request times, and make any necessary adjustments it deems appropriate. NOCH will immediately notify the Governmental Units of any such adjustment.
2. NOCH will make every effort to staff the third ALS ambulance crew with NOCH personnel.
3. Should a member of a Governmental Unit Fire Department assist in driving the third ALS ambulance, NOCH remains responsible for all patient and billing reports, drug/IV exchanges, ambulance repair and maintenance, and ambulance cleaning and decontamination.
4. NOCH will reimburse Governmental Units for costs as outlined in the contract.
5. NOCH will provide training to Fire Fighter/Drivers regarding operation of the ambulance, equipment, etc.
6. NOCH will indemnify/insure Fire Fighter/Drivers as outlined in the contract.

Governmental Unit Responsibilities

1. If available, Fire Departments will provide a driver for the aforementioned third ambulance. The driver shall be trained to the EMT level and will function as the second ambulance crew member.
2. Fire Departments will be responsible for payroll record keeping and billing NOCH at the end of each month for the appropriate reimbursement.

(Signature Page Attached)
GRAPIDS 90425-243 477080v1

Draft Date: 11/14/17

2017 0

Time	Date	Type	Area	Alcohol Related	Commercial Vehicles	Pedestrian
15:39	7/18/2016	Sideswipe-S&	Other	No	No	No

Time	Date	Type	Area	Alcohol Related	Commercial Vehicles	Pedestrian
15:05	2/19/2015	Angle	Intersection	No	No	No

Time	Date	Type	Area	Alcohol Related	Commercial Vehicles	Pedestrian
16:12	5/9/2014	Angle	Intersection	No	No	No

2013 0

Time	Date	Type	Area	Alcohol Related	Commercial Vehicles	Pedestrian
15:52	10/15/2012	Sideswipe-S&	Intersection	No	No	No

Time	Date	Type	Area	Alcohol Related	Commercial Vehicles	Pedestrian
16:10	3/28/2011	Other	Other	No	No	No

Bicycle No	Location	Distance	Direction
	S JACKSON ST @ W EXCHANGE ST	75	North

Bicycle No	Location	Distance	Direction
	S JACKSON ST @ W EXCHANGE ST	10	North

Bicycle No	Location	Distance	Direction
	W EXCHANGE ST @ S JACKSON ST	8	North

Bicycle No	Location	Distance	Direction
	W EXCHANGE ST @ S JACKSON ST	5	East

Bicycle No	Location	Distance	Direction
	W EXCHANGE ST @ S JACKSON ST	150	West

Christine Burns

From: Christine Burns
Sent: Thursday, November 2, 2017 10:59 AM
To: 'James Willison'
Subject: RE: FW: Maxwell Dillivan shared "Spring Lake Master Plan photos" with you

Jim,

The Village provides summer sewer credits for residential parcels because they are not allowed to have irrigation meters like commercial properties can (and do) have. Commercial properties typically have separate irrigation meters, where they only pay for the water that they use. I agree that an \$800 water bill is a lot of money. However, you were establishing a lawn and landscaping this summer and we had an extremely dry couple of months in there. I would expect that since your lawn is now established, your water consumption will decrease going forward. The solution is to do what most commercial entities do and that is to install an irrigation meter.

You said, "*I'm told that Grand Haven has some type of portable one, I'm ok with buying one (assuming it reasonable).*" I'm not even sure what it is you are referring to here. I've never heard of a portable irrigation meter. Can you please clarify?

Please keep in mind, the water coming into the Village is on a master meter. We have to pay for everything that passes through that meter. We also have to pay for an equivalent # of gallons of sewer. If Council determines that they want to offer summer sewer credits to commercial entities, staff can certainly make that happen. However, there are costs to provide these services. The Village collects enough to pay for the water and sewer service and a little extra to set aside for infrastructure improvements. If we grant everyone a discount, it only means that the rates go up across the board. We have to generate enough revenue to pay the bills and have a rainy day fund. In other words, if we give you a discount that simply increases the rates for those who don't request it; they are basically subsidizing your green grass and trees. Those folks would argue that those costs should be borne by you as a cost of doing business. The reverse is also true. If we give Kent Vandenbosch a discount, you – as a system user – are helping subsidize *his* business.

It's important to keep in mind that the Village is not a "for-profit" business. We are collecting only what we need to cover our expenditures and metering water/sewer usage is the most equitable way to charge each person/business for their fair share. It sounds like an irrigation meter would solve the issue you are experiencing. If you wish to move in that direction, Mary and the DPW can easily help you with that.

Thanks,

Chris

From: James Willison [mailto:tricityauto6@gmail.com]
Sent: Thursday, November 2, 2017 10:18 AM
To: Christine Burns <christine@springlakevillage.org>
Subject: Re: FW: Maxwell Dillivan shared "Spring Lake Master Plan photos" with you

Thanks for looking into it, However I'm not viewing this as a discount because we know that water did not go into the sewer. Also we put the lawn in because of the planning commissions chairperson came to me with a request to remove the parking lot. When building no one from the village gave me any info or suggests on this matter. I'm simply asking the village to do the right thing and help me find something that is fair and just solution. On many occasions we (the village)

speaking of working with one another on these type of issues. I'm yet to feel like it's true. Simply putting it all on the community merchants does not feel like we've been served well by the village. I understand you feel the village does not have the manpower for many of its shortcomings but there are many ways to fix this without suggesting it's just too bad that's the way it is. **I'm told that Grand Haven has some type of portable one, I'm ok with buying one.(assuming it reasonable)** I'm not comfortable with having to pay a plumber, a meter and a second water service cost. I'm open to ideas I simply can not afford eight hundred dollar water bills. P.S. Last quarter Mary adjusted my bill based on history usage, that felt right to both of us at the time.(before she and I knew of this) Thanks Jim

On Thu, Nov 2, 2017 at 8:51 AM, Christine Burns <christine@springlakevillage.org> wrote:

On a completely separate note, I haven't been ignoring your question on seasonal discounts on sewer use for sprinkling meters. I'm researching our ordinances so I can provide you with an answer.

From: James Willison [mailto:tricityauto6@gmail.com]
Sent: Thursday, November 2, 2017 8:39 AM
To: Christine Burns <christine@springlakevillage.org>
Subject: Re: FW: Maxwell Dillivan shared "Spring Lake Master Plan photos" with you

when I click the link it shows me this.

On Thu, Nov 2, 2017 at 8:26 AM, Christine Burns <christine@springlakevillage.org> wrote:

Hmmm...that's weird. I didn't need a password and other people have been editing without a password.

From: James Willison [mailto:tricityauto6@gmail.com]
Sent: Thursday, November 2, 2017 8:25 AM
To: Christine Burns <christine@springlakevillage.org>
Subject: Re: FW: Maxwell Dillivan shared "Spring Lake Master Plan photos" with you

it appears to need a password.

On Wed, Nov 1, 2017 at 11:20 AM, Christine Burns <christine@springlakevillage.org> wrote:

Here is the Dropbox for photos you may have of the Village. As discussed at the joint meeting, photography is a key component to the Master Plan effectively communicating your vision. Feel free to upload pictures showing things you love about the Village; things that you don't love are welcome, too!

From: Maxwell Dillivan (via Dropbox) [mailto:no-reply@dropbox.com]
Sent: Sunday, October 29, 2017 2:09 PM
To: Christine Burns <christine@springlakevillage.org>
Subject: Maxwell Dillivan shared "Spring Lake Master Plan photos" with you



Hi Chris,

Maxwell Dillivan (maxwelldillivan@gmail.com) invited you to edit the folder "**Spring Lake Master Plan photos**" on Dropbox.

[Go to folder](#)

Enjoy!
The Dropbox team

© 2017 Dropbox

628 E. Savidge – Timeline of Events

Date	Details
07/25/17	Mr. Willison called Mary when he received his water bill. Due to establishing a new lawn, he had used 81,000 gallons of water over the quarter, which resulted in a water bill of \$508.31. Mr. Willison demanded a summer sewer credit, claiming that since the water did not go down the sewer, he shouldn't have to pay for it. In his previous building, he did receive a summer sewer credit because his business and his home were on the same service. Residential customers receive a summer sewer credit. Commercial businesses must install an irrigation meter. Mary (mistakenly) wrote up the billing adjustment of \$203.77, obtained Marv's signature and Lori adjusted Mr. Willison's water bill. At that time, Mary told Mr. Willison that he should consider an irrigation meter. An ¾" irrigation meter costs \$250 and will result in a quarterly water bill (minimum) of \$87.11. A total of 43 commercial establishments currently have irrigation meters.
10/16/17	Mr. Willison used 137,000 gallons of water during the 3rd quarter, which resulted in a water bill of \$799.51. He again called Mary and demanded his summer sewer credit. Mary explained that she had made an error and should not have granted the first credit. She also explained that <i>commercial</i> businesses can install irrigation meters, but only <i>residents</i> receive the summer sewer credit.
11/02/17	Mr. Willison contacted the Village Manager regarding his account (<i>email thread attached</i>).
11/20/17	Mr. Willison attended the Council Meeting, requesting a summer sewer credit and/or an irrigation meter.
12/08/17	Will Dirkse read Mr. Willison's water meter. He has used 19,000 gallons thus far this quarter. This usage indicates 2 things. 1) Mr. Willison's usage for his new building is considerably higher (but within a normal range) than his old building. 2) Irrigation has been discontinued (as we would expect this time of year).
	<p>Points to consider:</p> <ol style="list-style-type: none"> 1. It does appear that substantial irrigation did take place at 628 E. Savidge. 2. The water does not get sent to the wastewater treatment facility. 3. Mary's credit was based on an assumption of 10,000 gallons of "normal" usage, the remaining being used on the lawn. 4. Spring Lake Township does not grant summer sewer credits or irrigation meters to any commercial establishments. 5. Should Council elect to grant Mr. Willison a credit, you are establishing a precedent for future requests from other commercial accounts. 6. Should Council elect to give Mr. Willison an irrigation meter, the rest of the utility customers are essentially paying for that meter.
12/11/17	<p>Options:</p> <ol style="list-style-type: none"> 1. Deny Mr. Willison's request for a credit or a meter. 2. Grant Mr. Willison a summer sewer credit (for the 3rd quarter) based on his water usage for the most recent quarter (Oct/Nov/Dec), with the stipulation that he install an irrigation meter, at his cost, and <i>no further credits will be granted to him</i>. 3. Grant Mr. Willison a summer sewer credit and give him an irrigation meter, with the understanding that every other system user is footing the bill for Mr. Willison's for-profit business.



WATER/SEWER DEPARTMENT

Billing Adjustment Request Form

Date: July 25, 2017

Account Number: SAV1-000628-0000-01

Service Address: 628 E. Sandage

Adjustment Amount Requested: \$203.77

\$2.87
 X 71
 \$203.77

Reason For Adjustment Request: did not receive seasonal sewer discount.

Please approve sewer adjustment of \$203.77, new amt of \$28.70.

Since this is a new, larger building, adjustments were made for the discount + discount amount will be reevaluated next year. *Seasonal average is 7K - use 10K for adjustment.*

Requested By: Mary Paparella

Approved/Denied By: [Signature]

Account Adjusted By: Arce Spelde

Adjustment Date: 7.25.17

History Detail Report

Tuesday, July 25, 2017

average 7K gallons
due to size of bldg
using 10K

1/1

Location ID: SAV1-000630-0000-03
Account #: 0000000648
Service Address: 630 E SAVIDGE ST
Customer Name: J & V ENTERPRISE

Posted	Created	Action Read	Item - or - User Usage	Amount Other Info	Balance
09/09/16	09/09/16 12:17	Payment Posted	R16-062351	\$61.40	\$0.00
08/31/16	08/31/16 14:38	Bill Calculated	07/01/16-07/20/16	\$61.40	\$61.40
08/31/16	08/31/16 11:23	Final Processed	Final Processed		\$0.00
08/01/16	08/01/16 13:46	Payment Posted	R16-061469	\$57.90	\$0.00
07/21/16	07/21/16 9:48	Payment Posted	R16-061154	\$154.40	\$57.90
07/20/16	08/31/16 11:23	Meter Read	Water		\$212.30
		70	9	Act	
07/20/16	07/20/16 9:21	Bill Adjustment	SHUT OFF	\$57.90	\$212.30
07/14/16	07/14/16 10:39	Bill Calculated	04/01/16-06/30/16	\$154.40	\$154.40
07/01/16	07/05/16 16:41	Meter Read	Water		\$0.00
		61	15	Auto	
04/25/16	04/25/16 10:04	Payment Posted	R16-059846	\$120.45	\$0.00
04/18/16	04/18/16 9:07	Bill Calculated	01/01/16-03/31/16	\$120.45	\$120.45
03/28/16	03/30/16 8:58	Meter Read	Water		\$0.00
		46	8	Auto	
01/22/16	01/22/16 10:27	Payment Posted	R16-058529	\$110.75	\$0.00
01/15/16	01/15/16 13:40	Bill Calculated	10/01/15-12/31/15	\$110.75	\$110.75
12/15/15	12/18/15 8:29	Meter Read	Water		\$0.00
		38	6	Auto	
10/22/15	10/22/15 10:43	Payment Posted	R15-057249	\$101.05	\$0.00
10/14/15	10/14/15 10:29	Bill Calculated	07/01/15-09/30/15	\$101.05	\$101.05
09/23/15	09/29/15 14:02	Meter Read	Water		\$0.00
		32	4	Auto	

Total Usage: 42.00

WASTE HAULERS LICENSE APPLICATION

Name of applicant: Jane Dolezal
Business name: Arrowaste, Inc.
Business street address: PO Box 828
Business city, state, zip: Jenison, MI 49429
Business phone: (616) 748-1955
Email: jdolezal@mydisposal.com

Business Officers and Directors

Name	Address, City, State and Zip
1. <u>Thomas J Yonker</u>	<u>13 Old Tamarack Lane, Orland Park, IL 60462</u>
2. _____	_____
3. _____	_____

List shareholders or others holding a ten percent or more interest in your business:

Name	Address, City, State and Zip
1. <u>Thomas J Yonker</u>	<u>13 Old Tamarack Lane, Orland Park, IL 60462</u>
2. _____	_____
3. _____	_____

If business is a partnership, the names and addresses of each partner:

	Address, City, State and Zip
1. _____	_____
2. _____	_____
3. _____	_____

Place where business is maintained:

Name	Address	City, State, Zip
<u>Arrowaste, Inc.</u>	<u>1296 Chicago Dr</u>	<u>Jenison, MI 49428</u>
_____	_____	_____

Proposed day(s) and hours of operation:

Monday - Friday 8 am - 5 pm

List all assumed names by which you propose to do business:

1. Arrowaste, Inc.
2. _____
3. _____
4. _____

Has applicant or person conducting business or managing business on behalf of applicant been convicted of a crime, misdemeanor or of the violation of any municipal ordinance? Yes _____ No X

If so, please provide full particulars:

Have you applied for and received all state licenses required to do business?

Yes _____ No _____ Not applicable X

If so, please furnish us with a copy of such state approval.

The proposed rates to be charged, broken down into the following categories (use separate rate sheet if necessary) Please indicate any changes (increases or decreases) with an asterisk:

Residential

<u>Container Size</u>	<u>Pickups per Week</u>	<u>Rate</u>
1. <u>We do not currently offer residential service in the Village of Spring Lake</u>		
2.	_____	_____
3.	_____	_____
4.	_____	_____

Commercial and Industrial

	<u>Container Size</u>	<u>Pickups Per Week</u>	<u>Rate</u>
1.	<u>2 yd</u>	<u>1x/week</u>	<u>\$40-\$55 / month</u>
2.	<u>6 yd</u>	<u>1x/week</u>	<u>\$95-\$115/month</u>
3.	<u>2 yd</u>	<u>2x/week</u>	<u>\$150-\$170/month</u>
4.	_____	_____	_____

Waste Haulers Application

Page 3

Please provide information on the vehicles to be used by licensee. Provide the make, model, vehicle number, license number(s), packer type and capacity (attach separate sheet if necessary):

<u>Make</u>	<u>Model</u>	<u>Vehicle Number</u>	<u>License Number</u>	<u>Packer Type</u>	<u>Capacity</u>
Autocar FEL	#935		BA18198	Com FEL	30 cubic yards
Autocar FEL	#939		BA38737	Com FEL	30 cubic yards

Do you pick up Christmas Trees? If so, what are the parameters?

No

Spring/Fall Clean-ups will be included in the licensing requirements at no additional charge to the Village. What are the parameters?

N/A

CERTIFICATIONS

a) The applicant certifies he/she/we/they can provide at least one backup vehicle to insure prompt waste removal in the event of equipment failure. Evidence of this ability should be included with this application and may take the form of contracts, leases or arrangements you may wish to propose.

Evidence: We have a fleet of vehicles which includes spare trucks that can be used in the event of equipment failure

Reviewed by Village Manager _____ Date: _____ Signature: _____

b) The applicant certifies he/she/we/they will provide waste removal services to all residential customers desiring such services in the Village of Spring Lake at least once per week.

c) The applicant certifies he/she/we/they have insured each piece of equipment to be used in waste hauling services in the Village of Spring Lake for an amount not less than One Hundred Thousand Dollars (100,000.00) for damage to property and not less than One Million Dollars (1,000,000.00) for injury or death to any person and not less than One Million Dollars (\$1,000,000.00) for injury or death to any person or persons in a single accident.

The applicant further certified that the Village of Spring Lake and its officers and employees are named specifically as additional insureds on applicant's insurance as it pertains to this license application. The applicant certifies that it holds said Village and its employees harmless from any liability claims that may arise as a result of the applicant's operations for collection or hauling of garbage or trash within the limits of the Village and such disclosures are noted on the appropriate insurance.

Evidence: Please see attached COI

Reviewed by Village Manager _____ Date: _____ Signature _____

Note: Certificates of insurance must be provided to the Village Clerk of the Village of Spring Lake or his authorized representative, the Village Manager of the Village of Spring Lake.

d) The applicant certifies he/she/we/they have access to dispose of waste materials only at a properly licensed waste disposal site located within 20 miles of the Village limits of the Village of Spring Lake.

Evidence: We currently utilize several disposal locations including Waste Management transfer station located in Muskegon

Reviewed by Manager _____ Date: _____ Signature: _____

e) Applicant acknowledges that if a license to operate in the Village is granted by the Village Council, said license may be revoked by the Village Council upon the receipt of three complaints by customers that have been acknowledged in writing by the Village Manager in letters of reprimand to the licensee. If more than three letters of reprimand have been sent to licensee, then the license for such licensee shall be deemed automatically revoked 30 days after the mailing of such third letter. The licensee may request a hearing in writing before the Village Council. At the hearing, licensee shall show cause why its license should not be revoked, as requested by Council. It is understood that said hearing shall take place at the next regular public meeting of the Council, after receipt of the licensee's request for a hearing in writing. (See ordinance #154, Section 9-34, Village Code of Ordinances.)

f) The applicant certifies that all equipment to be utilized for work performed in the Village will at all times be identified with the name of the vendor, the address of the licensee and the telephone number where customers of the licensee can contact the licensee or their representative in the local calling area without additional charge for long distance rates.

Evidence: Our Company name and phone number is listed on our trucks

Reviewed by Manager _____ Date: _____ Signature: _____

g) The applicant certifies that the rates charged will at no time exceed the maximum rates approved by the Village Council, although lower rates may be charged. Additional rates for special services to individual customers may be negotiated according to the provisions of the ordinance.

h) The applicant certifies that he will provide and distribute to each of its customers a pamphlet disclosing the name and address of the licensee, the rates being charged, a local phone number of the licensee and the rules of garbage and trash collection applicable to such service within 30 days of the granting of a license by the Village Council and annually thereafter as long as the licensee shall be permitted to operate in the Village.

i) The applicant certifies that he is familiar with the Village Waste Hauling Ordinance and current Waste Hauling Resolution and shall abide by same at all times while licensed by the Village of Spring Lake.

The undersigned hereby certifies that the statements and certifications contained in this application are factual and truthful. Misrepresentation of any of these facts shall be cause for revocation of license. The person signing this license application and certification has the authority to do so on behalf of the company.

Name of Company: Arrowwaste, Inc.

Date: _____

By: JANE DOLEZAL, SAFETY MANAGER
Title: _____

Recommended for approval

Recommended for disapproval

Date: _____ Signature of Manager

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

08/21/2017

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 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 RBN & Associates, Inc. 303 East Wacker Dr Suite 1130 Chicago, IL 60601 Ron Cowell	CONTACT NAME: Ron Cowell	
	PHONE (A/C, No, Ext): 312-856-9400	FAX (A/C, No): 312-856-9425
E-MAIL ADDRESS:		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Nautilus Insurance Company		17370
INSURER B: Hartford Fire Insurance Co.		19682
INSURER C: Rockhill Insurance Company		28053
INSURER D: Trumbull Insurance Company		27120
INSURER E:		
INSURER F:		

INSURED
Arrowaste, Inc.
 PO Box 828
 Jenison, MI 49429

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 <input checked="" type="checkbox"/> Contractual GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		GSP201919311	09/01/2017	09/01/2018	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/POP AGG \$ 2,000,000 Pollution \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		83CSES11201	09/01/2017	09/01/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		FF010726-03	09/01/2017	09/01/2018	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 \$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A		83WNS11200	09/01/2017	09/01/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Village of Spring Lake and its officers and employees are Additional Insureds with respect to the General Liability as required by written contract.

CERTIFICATE HOLDER**CANCELLATION**

VILL102

Village of Spring Lake
 102 W Savidge St.
 Spring Lake, MI 49456

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

#10. yard waste
increase

WASTE HAULERS LICENSE APPLICATION

Name of applicant: Kuerth's Disposal Inc
 Business name: Wayne Kuerth
 Business street address: 2621 Oakm Rd
 Business city, state, zip: Twin Lake MI 49457
 Business phone: (231) 744-4967
 Email: garbage@Kuerth'sdisposal.com

Business Officers and Directors

	Name	Address, City, State and Zip	
1.	Wayne Kuerth	2621 Oakm Rd	Twin Lake MI 49457
2.	Cindy Kuerth	2621 Oakm Rd	Twin Lake MI 49457
3.	Joe Kuerth	1884 Duff Rd	Twin Lake MI 49457

List shareholders or others holding a ten percent or more interest in your business:

	Name	Address, City, State and Zip
1.		
2.		
3.		

If business is a partnership, the names and addresses of each partner:

	Address, City, State and Zip
1.	
2.	
3.	

Place where business is maintained:

Name	Address	City, State, Zip
Kuerth's Disposal Inc	2621 Oakm Rd	Twin Lake MI 49457

Proposed day(s) and hours of operation:

S-F Commercial	6:00 am	5:00 pm
W residential	6:00 am	5:00 pm

List all assumed names by which you propose to do business:

1. Kuerth's Disposal Inc
2. _____
3. _____
4. _____

Has applicant or person conducting business or managing business on behalf of applicant been convicted of a crime, misdemeanor or of the violation of any municipal ordinance? Yes _____ No X

If so, please provide full particulars:

Have you applied for and received all state licenses required to do business?

Yes _____ No _____ Not applicable X

If so, please furnish us with a copy of such state approval.

The proposed rates to be charged, broken down into the following categories (use separate rate sheet if necessary) **Please indicate any changes (increases or decreases) with an asterisk:**

Residential

<u>Container Size</u>	<u>Pickups per Week</u>	<u>Rate</u>
1. <u>attached</u>	<u>* yard waste</u>	
2. _____	<u>* Commercial</u>	
3. _____		
4. _____		

Commercial and Industrial

<u>Container Size</u>	<u>Pickups Per Week</u>	<u>Rate</u>
1. _____		
2. _____		
3. _____		
4. _____		

Waste Haulers Application

Page 3

Please provide information on the vehicles to be used by licensee. Provide the make, model, vehicle number, license number(s), packer type and capacity (attach separate sheet if necessary):

<u>Make</u>	<u>Model</u>	<u>Vehicle Number</u>	<u>License Number</u>	<u>Packer Type</u>	<u>Capacity</u>
-------------	--------------	-----------------------	-----------------------	--------------------	-----------------

List Attached

Do you pick up Christmas Trees? If so, what are the parameters?

Yes - no charge

Spring/Fall Clean-ups will be included in the licensing requirements at no additional charge to the Village. What are the parameters?

No hazardous waste no yard waste pipes board etc
No longer than 5' weight limit per container 35 lbs

CERTIFICATIONS

a) The applicant certifies he/she/we/they can provide at least one backup vehicle to insure prompt waste removal in the event of equipment failure. Evidence of this ability should be included with this application and may take the form of contracts, leases or arrangements you may wish to propose.

Evidence: List Attached

Reviewed by Village Manager _____ Date: _____ Signature: _____

b) The applicant certifies he/she/we/they will provide waste removal services to all residential customers desiring such services in the Village of Spring Lake at least once per week.

c) The applicant certifies he/she/we/they have insured each piece of equipment to be used in waste hauling services in the Village of Spring Lake for an amount not less than One Hundred Thousand Dollars (100,000.00) for damage to property and not less than One Million Dollars (1,000,000.00) for injury or death to any person and not less than One Million Dollars (\$1,000,000.00) for injury or death to any person or persons in a single accident.

The applicant further certified that the Village of Spring Lake and its officers and employees are named specifically as additional insureds on applicant's insurance as it pertains to this license application. The applicant certifies that it holds said Village and its employees harmless from any liability claims that may arise as a result of the applicant's operations for collection or hauling of garbage or trash within the limits of the Village and such disclosures are noted on the appropriate insurance.

Evidence: Attached

Reviewed by Village Manager _____ Date: _____ Signature: _____

Note: Certificates of insurance must be provided to the Village Clerk of the Village of Spring Lake or his authorized representative, the Village Manager of the Village of Spring Lake.

d) The applicant certifies he/she/we/they have access to dispose of waste materials only at a properly licensed waste disposal site located within 20 miles of the Village limits of the Village of Spring Lake.

Evidence: Attached

Reviewed by Manager _____ Date: _____ Signature: _____

e) Applicant acknowledges that if a license to operate in the Village is granted by the Village Council, said license may be revoked by the Village Council upon the receipt of three complaints by customers that have been acknowledged in writing by the Village Manager in letters of reprimand to the licensee. If more than three letters of reprimand have been sent to licensee, then the license for such licensee shall be deemed automatically revoked 30 days after the mailing of such third letter. The licensee may request a hearing in writing before the Village Council. At the hearing, licensee shall show cause why its license should not be revoked, as requested by Council. It is understood that said hearing shall take place at the next regular public meeting of the Council, after receipt of the licensee's request for a hearing in writing. (See ordinance #154, Section 9-34, Village Code of Ordinances.)

f) The applicant certifies that all equipment to be utilized for work performed in the Village will at all times be identified with the name of the vendor, the address of the licensee and the telephone number where customers of the licensee can contact the licensee or their representative in the local calling area without additional charge for long distance rates.

Evidence: Attached

Reviewed by Manager _____ Date: _____ Signature: _____

g) The applicant certifies that the rates charged will at no time exceed the maximum rates approved by the Village Council, although lower rates may be charged. Additional rates for special services to individual customers may be negotiated according to the provisions of the ordinance.

h) The applicant certifies that he will provide and distribute to each of its customers a pamphlet disclosing the name and address of the licensee, the rates being charged, a local phone number of the licensee and the rules of garbage and trash collection applicable to such service within 30 days of the granting of a license by the Village Council and annually thereafter as long as the licensee shall be permitted to operate in the Village.

i) The applicant certifies that he is familiar with the Village Waste Hauling Ordinance and current Waste Hauling Resolution and shall abide by same at all times while licensed by the Village of Spring Lake.

The undersigned hereby certifies that the statements and certifications contained in this application are factual and truthful. Misrepresentation of any of these facts shall be cause for revocation of license. The person signing this license application and certification has the authority to do so on behalf of the company.

Name of Company: Kuerth's Disposal Inc
By: [Signature]
Title: President

Date: 11-28-17

Recommended for approval

Recommended for disapproval

Date: _____ Signature of Manager

Kuerth's Disposal, Inc.

Rate Schedule

Residential

\$18.00 monthly curb service with a 90 gallon cart

\$3.00 fee per bag service/ \$75.00 per box

\$3.00 monthly recycle rate for fee per bag customers

\$90.00 seasonal yard waste service-includes 90 gallon cart

Christmas tree pick up included

Commercial

<u>Container Size</u>	<u>Weekly Pick-ups</u>	<u>Monthly Rate</u>
2 Yard	1	\$ 55.00
	2	100.00
3 Yard	1	\$ 77.00
	2	144.00
4 Yard	1	\$ 96.00
	2	182.00
6 Yard	1	\$130.00
	2	250.00
8 Yard	1	\$165.00
	2	320.00

EQUIPMENT LIST

#1	2011	FORD	1FT8W3BT0FEB35355
#2	2006	FORD	1FTSX21P16EB48391
#3	1995	VOLVO	4V2HCFME8SN698542
#4	1993	MACK	1M2K185CXPM005308
#5	1990	MACK	1M2K166C7LM002346
#6	1989	MACK	1M2K166C3KM001595
#7	1990	IH	1HTSBZRL0LH221840
#8	1992	IH	1HTSCPEL4NH440066
#9	1990	IH	1HTSBZRL7LH221835
#10	1996	IH	1HTSCABN4TH227585
#11	1994	MACK	1M2K195C7RM005016
#12	1985	MACK	1M2K127CXFM008234
#14	1993	IH	1HTSLPLL3PH469967
#15	1994	MACK	1M2K185C2RM005581
#16	1995	IH	1HTSHAAR9SH685997
#17	2002	IH	1HTSLABL32H508421
#18	2001	MACK	1M2K195C51M017833
#19	1991	IH	IHTSBZRL1MH347884
	1996	MACK	1M2K195C0TM007195
	1996	MACK	1M2K191C1TM008653
	2001	MACK	1M2K185C01M008371
	2012	FORD(JOE)	1FTFW1ETXCFA39780



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/28/2017

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 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 Shoreline Insurance Agency Inc 675 W. Broadway Ave. Muskegon MI 49441	CONTACT NAME: Felicia Bright PHONE (A/C No. Ext): (231) 755-1919 FAX (A/C No.): (231) 755-6750 E-MAIL ADDRESS: feliciab@shorelineagency.com														
INSURED Kuerth's Disposal & Recycling C/O Cindy Kuerth 2621 Dalson Rd Twin Lake MI 49457	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:80%;">INSURER(S) AFFORDING COVERAGE</th> <th style="width:20%;">NAIC #</th> </tr> <tr> <td>INSURER A: Acuity</td> <td>14184</td> </tr> <tr> <td>INSURER B: Grand River Ins./Benchmark</td> <td>22608</td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Acuity	14184	INSURER B: Grand River Ins./Benchmark	22608	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
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INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES **CERTIFICATE NUMBER:** CL17102017430 **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.

INBR LTR	TYPE OF INSURANCE	ADDITIONAL INSURED	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 GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			L50683	11/14/2017	11/14/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000 Employment Practices Liability \$ 100,000	
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input checked="" type="checkbox"/> TR			L50683	11/14/2017	11/14/2018	COMBINED SINGLE LIMIT (Per accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist BI split limit \$ 1,000,000	
A	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			L50683	11/14/2017	11/14/2018	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000	
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	Y	N/A	WC5000014	11/10/2017	11/10/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Joseph Kuerth & Wayne Kuerth are excluded on the workers comp. policy.

CERTIFICATE HOLDER (231) 744-2135 Village of Spring Lake 102 W. Savidge Spring Lake, MI 49456	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 D C Liebetreu/FELICI <i>Donald K Liebetreu</i>
--	--

Kent County Refuse Disposal
Material Recovery Facility
977 Wealthy SW
Grand Rapids, MI 49503
Ph. 6166327920

--- RECEIPT ---

Transaction# 4026105

	In	Out
Date:	11/28/17	11/28/17
Time:	10:37 AM	10:37 AM
Attendant:	MLM	MLM
Lane:	01	01

K970 Kuerth's Disposal
2621 Dalson Road
Twin Lake, MI 49457

Truck: K970-0000 Trailer:
Manifest: County: Ottawa
FO:

	LBS	TON
Gross Wt:	38580	19.29
Tare Wt:	38580	19.29
Net Wt:	0	0.00 <-----

Description:	Quantity	Amount	Charge
Recyclables-NonKent County	0.00	0.00	0.00
MI Surcharge:	0.00	0.36	0.00
RIS Fee:	0.00	0.50	0.00
County Surcharge:		1.68	0.00
MI Ash Surcharge:		.12	0.00
CC Processing Fee:		3%	0.00

TOTAL DUE: 0.00

Payment Type: Charge

TOTAL TENDERED: 0.00
CHANGE: 0.00

Signature: 

MUSKEGON COUNTY SOLID WASTE
9366 APPLE AVENUE RAVENNA, MI 49451
PHONE 231-724-6001 FAX 231-724-6004
WEB: WWW.CO.MUSKEGON.MI.US/SOLIDWASTE

Waste In - Charge Scale Ticket

Ticket #:629317 Operator:BKN Date:11/27/2017
Vehicle : 0807 KUERTH #6 PACKER

Customer : KUERTH KUERTH DISPOSAL
Contract : 6A MUSKEGON COUNTY
Material : RESCOUNTYA RESIDENTIAL COUNTY
Source : MUSKEGON
Location : Units : 13.04 TONS
Time In : 12:58:40 Unit price: \$27.0000
Time Out : 13:00:52 -----

Net Amount: \$ 352.08
Gross Wt : 67020 State Fee : \$ 0.00
Tare Wt : 40940 m Local Fee : \$ 0.00

Net Wt : 26080 Lb =====
TOTAL DUE : \$ 352.08

MONDAY - FRIDAY 8:00 AM - 4:30 PM
SATURDAY 8:00 AM - 2:00 PM

GATES CLOSE PROMPTLY AT CLOSING TIMES



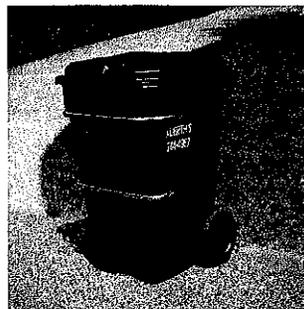
2017 RESIDENTIAL HOLIDAY SCHEDULE

These are the only holidays that will affect your regular pick-up day. If a holiday falls before-or on your pick-up day, your pick-up will be one day late. If a holiday falls on Sunday, it will not affect our normal collection schedule.
Click the date for more info!

- | | | | | | |
|---------------|---------------|---------------|------------------|---------------|--------------------|
| MAY 29 | JULY 4 | SEPT 3 | NOV 23 | DEC 25 | JAN 1, 2018 |
| MEMORIAL DAY | 4TH OF JULY | LABOR DAY | THANKSGIVING DAY | CHRISTMAS DAY | NEW YEARS DAY |

SERVICES

< PREV NEXT >



#.25 increase

WASTE HAULERS LICENSE APPLICATION

Name of applicant: Republic Services

Business name: Republic Services

Business street address: 2611 Olthoff Drive

Business city, state, zip: Muskegon, MI 49444

Business phone: 231-375-2070

Email: KRattinger@republicservices.com

Business Officers and Directors

Name	Address, City, State and Zip
1. _____	_____
2. _____	_____
3. _____	_____

List shareholders or others holding a ten percent or more interest in your business:

Name	Address, City, State and Zip
1. _____	_____
2. _____	_____
3. _____	_____

If business is a partnership, the names and addresses of each partner:

Address, City, State and Zip
1. _____
2. _____
3. _____

Place where business is maintained:

Name	Address	City, State, Zip
<u>Republic Services</u>	<u>2611 Olthoff Dr.</u>	<u>Muskegon, MI 49444</u>
_____	_____	_____

Proposed day(s) and hours of operation:

Monday - Friday 6am - 6pm

List all assumed names by which you propose to do business:

1. Allied Waste Services
2. Republic Services
3. Sunset Waste
4. _____

Has applicant or person conducting business or managing business on behalf of applicant been convicted of a crime, misdemeanor or of the violation of any municipal ordinance? Yes _____ No X

If so, please provide full particulars:

Have you applied for and received all state licenses required to do business?

Yes X No _____ Not applicable _____

If so, please furnish us with a copy of such state approval.

The proposed rates to be charged, broken down into the following categories (use separate rate sheet if necessary) **Please indicate any changes (increases or decreases) with an asterisk:**

Residential

	<u>Container Size</u>	<u>Pickups per Week</u>	<u>Rate</u>
1.	<u>See attachment</u>		
2.	_____		
3.	_____		
4.	_____		

Commercial and Industrial

	<u>Container Size</u>	<u>Pickups Per Week</u>	<u>Rate</u>
1.	_____		
2.	_____		
3.	_____		
4.	_____		

Waste Haulers Application

Page 3

Please provide information on the vehicles to be used by licensee. Provide the make, model, vehicle number, license number(s), packer type and capacity (attach separate sheet if necessary):

<u>Make</u>	<u>Model</u>	<u>Vehicle Number</u>	<u>License Number</u>	<u>Packer Type</u>	<u>Capacity</u>
See attachment					

Do you pick up Christmas Trees? If so, what are the parameters?

Yes, one tree per home.

Spring/Fall Clean-ups will be included in the licensing requirements at no additional charge to the Village. What are the parameters?

The following items will not be accepted: items over 50 pounds, tires, liquid paint, hazardous waste, and construction debris

CERTIFICATIONS

a) The applicant certifies he/she/we/they can provide at least one backup vehicle to insure prompt waste removal in the event of equipment failure. Evidence of this ability should be included with this application and may take the form of contracts, leases or arrangements you may wish to propose.

Evidence: See attachment

Reviewed by Village Manager _____ Date: _____ Signature: _____

b) The applicant certifies he/she/we/they will provide waste removal services to all residential customers desiring such services in the Village of Spring Lake at least once per week.

c) The applicant certifies he/she/we/they have insured each piece of equipment to be used in waste hauling services in the Village of Spring Lake for an amount not less than One Hundred Thousand Dollars (100,000.00) for damage to property and not less than One Million Dollars (1,000,000.00) for injury or death to any person and not less than One Million Dollars (\$1,000,000.00) for injury or death to any person or persons in a single accident.

The applicant further certified that the Village of Spring Lake and its officers and employees are named specifically as additional insureds on applicant's insurance as it pertains to this license application. The applicant certifies that it holds said Village and its employees harmless from any liability claims that may arise as a result of the applicant's operations for collection or hauling of garbage or trash within the limits of the Village and such disclosures are noted on the appropriate insurance.

Evidence: See attachment

Reviewed by Village Manager _____ Date: _____ Signature _____

Note: Certificates of insurance must be provided to the Village Clerk of the Village of Spring Lake or his authorized representative, the Village Manager of the Village of Spring Lake.

d) The applicant certifies he/she/we/they have access to dispose of waste materials only at a properly licensed waste disposal site located within 20 miles of the Village limits of the Village of Spring Lake.

Evidence: See attachment

Reviewed by Manager _____ Date: _____ Signature: _____

e) Applicant acknowledges that if a license to operate in the Village is granted by the Village Council, said license may be revoked by the Village Council upon the receipt of three complaints by customers that have been acknowledged in writing by the Village Manager in letters of reprimand to the licensee. If more than three letters of reprimand have been sent to licensee, then the license for such licensee shall be deemed automatically revoked 30 days after the mailing of such third letter. The licensee may request a hearing in writing before the Village Council. At the hearing, licensee shall show cause why its license should not be revoked, as requested by Council. It is understood that said hearing shall take place at the next regular public meeting of the Council, after receipt of the licensee's request for a hearing in writing. (See ordinance #154, Section 9-34, Village Code of Ordinances.)

f) The applicant certifies that all equipment to be utilized for work performed in the Village will at all times be identified with the name of the vendor, the address of the licensee and the telephone number where customers of the licensee can contact the licensee or their representative in the local calling area without additional charge for long distance rates.

Evidence: Information on all trucks

Reviewed by Manager _____ Date: _____ Signature: _____

g) The applicant certifies that the rates charged will at no time exceed the maximum rates approved by the Village Council, although lower rates may be charged. Additional rates for special services to individual customers may be negotiated according to the provisions of the ordinance.

h) The applicant certifies that he will provide and distribute to each of its customers a pamphlet disclosing the name and address of the licensee, the rates being charged, a local phone number of the licensee and the rules of garbage and trash collection applicable to such service within 30 days of the granting of a license by the Village Council and annually thereafter as long as the licensee shall be permitted to operate in the Village.

i) The applicant certifies that he is familiar with the Village Waste Hauling Ordinance and current Waste Hauling Resolution and shall abide by same at all times while licensed by the Village of Spring Lake.

The undersigned hereby certifies that the statements and certifications contained in this application are factual and truthful. Misrepresentation of any of these facts shall be cause for revocation of license. The person signing this license application and certification has the authority to do so on behalf of the company.

Date: 11/27/17 Name of Company: Republic Services/Allied Waste
By: [Signature]
Title: Municipal Relationship Manager

Recommended for approval

Recommended for disapproval

Date: _____ Signature of Manager _____

1.	Customer provides container	1 pickup per week	\$15.55/month
2.	Licensee provides 90-gallon cart	1 pickup per week	\$17.55/month
3.	Bag service		\$1.50/bag
4.	Bag service administration fee	1 pickup per week	\$6.80/month
5.	Yard waste bag collection	1 pickup per week	\$10.50/month
6.	Yard waste licensee provides 90-gallon cart	1 pickup per week	\$12.50/month
7.	Recycling service for trash service customers	1 pickup every other week	\$0

* A late fee shall be assessed to encourage prompt customer payment. Late fees shall be assessed on customer's accounts at \$5 each month that their account is 30 days or more past due based on the invoice date. The customer must have a past due balance

* A customer shall be assessed a fee of \$25 when the customer's account is placed on service interrupt for non-payment at 60 days from the invoice date. The customer must have a past due balance of \$5 or greater before the service interrupt fee is charge

VILLAGE OF SPRING LAKE VEHICLES

<u>TRUCK #</u>	<u>TYPE</u>	<u>YEAR</u>	<u>MAKE</u>	<u>MODEL</u>	<u>VIN #</u>
2170	RL	2006	MACK	LE613	1M2AC08C76M012668
2095	RL	2005	MACK	LE613	1M2AC08C86M012663
2310	FL	2016	MACK	LE613	1M2AU02C6GM10692
2366	FL	2013	AUTOCAR	ACX	5VCACS6FDH215975
2369	FL	2014	AUTOCAR	ACX	5VCACSUF6GH221770
2379	FL	2016	AUTOCAR	ACX	5VCACSUF5EH217515



ADDITIONAL REMARKS SCHEDULE

AGENCY		NAMED INSURED	
POLICY NUMBER See First Page		REPUBLIC SERVICES, INC. 18500 N. ALLIED WAY PHOENIX, AZ 85054	
CARRIER See First Page	NAIC CODE	EFFECTIVE DATE:	
ADDITIONAL REMARKS			

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM.
 FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

The following provisions apply when required by written contract. As used below, the term certificate holder also includes any person or organization that the insured has become obligated to include as a result of an executed contract or agreement.

GENERAL LIABILITY:

Certificate holder is Additional Insured when required by written contract.
 Coverage is primary and non-contributory when required by written contract.
 Waiver of Subrogation in favor of the certificate holder is included when required by written contract.

AUTO LIABILITY:

Certificate holder is Additional Insured when required by written contract.
 Waiver of Subrogation in favor of the certificate holder is included when required by written contract.

WORKERS COMPENSATION AND EMPLOYERS LIABILITY:

Waiver of Subrogation in favor of the certificate holder is included when required by written contract where allowed by state law.

Stop gap coverage for ND, WA and WY is covered under policy no. WLR C64412917 and stop gap coverage for OH is covered under policy no. WCU C64412899, as noted on page 1 of this certificate.

TEXAS EXCESS INDEMNITY AND EMPLOYERS LIABILITY:

Republic Services, Inc. and its subsidiaries are registered non-subscribers to the Texas Workers Compensation Act. Republic Services, Inc. has filed an approved Indemnity Plan with the Texas Department of Insurance which offers an alternative in benefits to employees rather than the traditional Workers Compensation Insurance in Texas. The excess policy (#TNS C49166436) shown on this certificate provides excess Indemnity and Employers Liability coverage for the approved Indemnity Plan.

Contractual Liability is included in the General Liability and Automobile Liability coverage forms. The General Liability and Automobile Liability policies do not contain endorsements excluding Contractual Liability.

Separation of Insured (Cross Liability) coverage is provided to the Additional Insured, when required by written contract, per the Conditions of the Commercial General Liability Coverage form and the Automobile Liability Coverage form.

10/1/08

Village of Spring Lake

April 17, 2007

Received

WASTE HAULERS LICENSE APPLICATION

Name of applicant: Waste Management Inc

Business name: 11668 Porter St SW

Business street address: _____

Business city, state, zip: Grand Rapids MI 49519

Business phone: 616-724-2148

Email: _____

Business Officers and Directors

Name	Address, City, State and Zip
1. _____	_____
2. _____	_____
3. _____	_____

List shareholders or others holding a ten percent or more interest in your business:

Name	Address, City, State and Zip
1. <u>Public Company</u>	_____
2. _____	_____
3. _____	_____

If business is a partnership, the names and addresses of each partner:

Name	Address, City, State and Zip
1. _____	_____
2. _____	_____
3. _____	_____

Place where business is maintained:

Name	Address	City, State, Zip
_____	_____	_____
_____	_____	_____

Proposed day(s) and hours of operation:

List all assumed names by which you propose to do business:

1. Waste Management 11668 Porter St SW Grand Rapids MI
2. Waste Management of MI 49519
3. _____
4. _____

Has applicant or person conducting business or managing business on behalf of applicant been convicted of a crime, misdemeanor or of the violation of any municipal ordinance? Yes _____ No

If so, please provide full particulars:

Have you applied for and received all state licenses required to do business?

Yes No _____ Not applicable _____

If so, please furnish us with a copy of such state approval.

The proposed rates to be charged, broken down into the following categories (use separate rate sheet if necessary) **Please indicate any changes (increases or decreases) with an asterisk:**

Residential

<u>Container Size</u>	<u>Pickups per Week</u>	<u>Rate</u>
1. _____		
2. _____		
3. _____		
4. _____		

Commercial and Industrial

<u>Container Size</u>	<u>Pickups Per Week</u>	<u>Rate</u>
1. _____		
2. _____		
3. _____		
4. _____		

Waste Haulers Application

Page 3

Please provide information on the vehicles to be used by licensee. Provide the make, model, vehicle number, license number(s), packer type and capacity (attach separate sheet if necessary):

<u>Make</u>	<u>Model</u>	<u>Vehicle Number</u>	<u>License Number</u>	<u>Packer Type</u>	<u>Capacity</u>
-------------	--------------	-----------------------	-----------------------	--------------------	-----------------

See Attached

Do you pick up Christmas Trees? If so, what are the parameters?

Yes - Must be cut into no larger than 4 foot sections

Spring/Fall Clean-ups will be included in the licensing requirements at no additional charge to the Village. What are the parameters?

Bulk pickups except for Refrigerators w/ Freon - No tires unless cut in strips - No Propane tanks - paint cans must be dried up with kitty litter.

CERTIFICATIONS

a) The applicant certifies he/she/we/they can provide at least one backup vehicle to insure prompt waste removal in the event of equipment failure. Evidence of this ability should be included with this application and may take the form of contracts, leases or arrangements you may wish to propose.

Evidence: Attached

Reviewed by Village Manager _____ Date: _____ Signature: _____

b) The applicant certifies he/she/we/they will provide waste removal services to all residential customers desiring such services in the Village of Spring Lake at least once per week.

c) The applicant certifies he/she/we/they have insured each piece of equipment to be used in waste hauling services in the Village of Spring Lake for an amount not less than One Hundred Thousand Dollars (100,000.00) for damage to property and not less than One Million Dollars (1,000,000.00) for injury or death to any person and not less than One Million Dollars (\$1,000,000.00) for injury or death to any person or persons in a single accident.

The applicant further certified that the Village of Spring Lake and its officers and employees are named specifically as additional insureds on applicant's insurance as it pertains to this license application. The applicant certifies that it holds said Village and its employees harmless from any liability claims that may arise as a result of the applicant's operations for collection or hauling of garbage or trash within the limits of the Village and such disclosures are noted on the appropriate insurance.

Evidence: Attached

Reviewed by Village Manager _____ Date: _____ Signature _____

Note: Certificates of insurance must be provided to the Village Clerk of the Village of Spring Lake or his authorized representative, the Village Manager of the Village of Spring Lake.

d) The applicant certifies he/she/we/they have access to dispose of waste materials only at a properly licensed waste disposal site located within 20 miles of the Village limits of the Village of Spring Lake.

Evidence: Autumn Hills RDF Zealand MI

Reviewed by Manager _____ Date: _____ Signature: _____

e) Applicant acknowledges that if a license to operate in the Village is granted by the Village Council, said license may be revoked by the Village Council upon the receipt of three complaints by customers that have been acknowledged in writing by the Village Manager in letters of reprimand to the licensee. If more than three letters of reprimand have been sent to licensee, then the license for such licensee shall be deemed automatically revoked 30 days after the mailing of such third letter. The licensee may request a hearing in writing before the Village Council. At the hearing, licensee shall show cause why its license should not be revoked, as requested by Council. It is understood that said hearing shall take place at the next regular public meeting of the Council, after receipt of the licensee's request for a hearing in writing. (See ordinance #154, Section 9-34, Village Code of Ordinances.)

f) The applicant certifies that all equipment to be utilized for work performed in the Village will at all times be identified with the name of the vendor, the address of the licensee and the telephone number where customers of the licensee can contact the licensee or their representative in the local calling area without additional charge for long distance rates.

Evidence: Equipment Signage

Reviewed by Manager _____ Date: _____ Signature: _____

g) The applicant certifies that the rates charged will at no time exceed the maximum rates approved by the Village Council, although lower rates may be charged. Additional rates for special services to individual customers may be negotiated according to the provisions of the ordinance.

h) The applicant certifies that he will provide and distribute to each of its customers a pamphlet disclosing the name and address of the licensee, the rates being charged, a local phone number of the licensee and the rules of garbage and trash collection applicable to such service within 30 days of the granting of a license by the Village Council and annually thereafter as long as the licensee shall be permitted to operate in the Village.

i) The applicant certifies that he is familiar with the Village Waste Hauling Ordinance and current Waste Hauling Resolution and shall abide by same at all times while licensed by the Village of Spring Lake.

The undersigned hereby certifies that the statements and certifications contained in this application are factual and truthful. Misrepresentation of any of these facts shall be cause for revocation of license. The person signing this license application and certification has the authority to do so on behalf of the company.

Name of Company: Waste Management Inc

Date: 10-16-17

By: Mary Kasnowicz

Title: Operations Specialist

Recommended for approval

Recommended for disapproval

Date: _____ Signature of Manager _____

VILLAGE OF SPRING LAKE TRUCKS 2017

WASTE MANAGEMENT OF MI INC

264272	MACK		BA61430	1M2AC09C66M012033L
310311	INTL		BA78258	3HTMWAFK67N540553
361861	MACK	LE613	AB11404	1M2AC07C32M006121
361914	MACK	LE613	AC78285	1M2AC07C02M006299
361973	MACK	LE613	BA78194	1M2AC07C12M006232
209972	MACK	MRU613	AC67241	1M2AVO2C69M005184
206953	MACK	MRU613	BA42422	1M2K195C13M022451
208338	MACK	MRU613	BA99255	1M2K195CX6M029600
414392	FRTLINER		BA41353	1FVMC5DV8FHGN7898

Residential	Monthly Rate	Service Code	Monthly Maintenance Fee	Service Code	INL Reactivation Fee	Compost Activation Fee	Budget Bag Cost	Shipping & Handling (Bags)	Bag Service Limits	Toter Service Limits	Toter Rental	Add'l Toter	Add'l Toter Svc Code	Recycle Bin Fee
Seasonal (INL/DIL)				SSU	\$16.00	Fee applies to all Residential customers that reinstate (INL) their accounts after being temporarily suspended (DIL) for 3 months or more. Subscription residential accounts that are vacation status for 1 - month to less than 3 months are not subject to this fee. Franchise customers and HOA (Home Owner's Association) accounts are also exempt from this fee.								
64 Gal Toter	We no longer offer service with a 64-gallon toter. If an existing customer has a 64-gallon toter that needs to be replaced, please let the customer know that it may be replaced with a 96 gallon toter at no extra charge if the site no longer has any 64 gallon toters.													
96 Gal Toter	\$16.00	96T							+ 2 bags	Contents of cart	Included w/service			
2nd 96 Gal Toter	\$10.00	9AT								Contents of Cart only	Included w/service			
3rd 96 Gal Toter	\$10.00	9AT								Contents of Cart only	Included w/service			
Compost	\$12.50	96G				\$25.00			+ 5 paper bags	Contents of cart	Included w/service			
Budget Bag Service			\$5.92	RBG			10/\$25.00	\$4.95 up to 3 pkgs	Unlimited					
Activation Fee New business (NBO/NBL)	\$40.00	SRU	This is a one-time only charge that will be assessed to subscription residential customers establishing new service (NBO) with WM or reestablishing service with WM after a move (NBL)											
Recycling	\$5.00	RBN / MOR							\$5/ month for each bin used.					Included w/service
Additional Recycling	\$5.00	RBN / MOR												Included w/service
Service Area Comments:	Check MAS for correct service day.													
	Serviced by 665. Bulk pick up service available for an additional fee.													



CERTIFICATE OF LIABILITY INSURANCE

1/1/2018

DATE (MM/DD/YYYY)
12/7/2016

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 LOCKTON COMPANIES
5847 SAN FELIPE, SUITE 320
HOUSTON TX 77057
866-260-3538

CONTACT NAME:	
PHONE (A/C, No, Ext):	FAX (A/C, No):
E-MAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE	
INSURER A: ACE American Insurance Company	NAIC # 22667
INSURER B: Indemnity Insurance Co of North America	43575
INSURER C: ACE Property & Casualty Insurance Co	20699
INSURER D: ACE Fire Underwriters Insurance Company	20702
INSURER E:	
INSURER F:	

INSURED 1300299 WASTE MANAGEMENT HOLDINGS, INC. & ALL AFFILIATED, RELATED & SUBSIDIARY COMPANIES INCLUDING:
WASTE MANAGEMENT OF MICHIGAN
1668 PORTER
WYOMING MI 49509

COVERAGES **CERTIFICATE NUMBER: 12117927** **REVISION NUMBER: XXXXXXXX**

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 INSD	SUBR 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 <input checked="" type="checkbox"/> XCU INCLUDED <input checked="" type="checkbox"/> ISO FORM CG00010413 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y	Y	HDO G27860825	1/1/2017	1/1/2018	EACH OCCURRENCE \$ 5,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 5,000,000 MED EXP (Any one person) \$ XXXXXXXX PERSONAL & ADV INJURY \$ 5,000,000 GENERAL AGGREGATE \$ 6,000,000 PRODUCTS - COMP/OP AGG \$ 6,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> MCS-90 <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y	Y	MMT H09052884	1/1/2017	1/1/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX \$ XXXXXXXX
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$	Y	Y	XOO G27929242 002	1/1/2017	1/1/2018	EACH OCCURRENCE \$ 15,000,000 AGGREGATE \$ 15,000,000 \$ XXXXXXXX
B A D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WLR C49106944 (AOS) WLR C49106907 (AZ,CA,&MA) SCF C49106981 (WI)	1/1/2017 1/1/2017 1/1/2017	1/1/2018 1/1/2018 1/1/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 3,000,000 E.L. DISEASE - EA EMPLOYEE \$ 3,000,000 E.L. DISEASE - POLICY LIMIT \$ 3,000,000
A	EXCESS AUTO LIABILITY	Y	Y	XSA H09052872	1/1/2017	1/1/2018	COMBINED SINGLE LIMIT \$9,000,000 (EACH ACCIDENT)

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 BLANKET WAIVER OF SUBROGATION IS GRANTED IN FAVOR OF CERTIFICATE HOLDER ON ALL POLICIES WHERE AND TO THE EXTENT REQUIRED BY WRITTEN CONTRACT WHERE PERMISSIBLE BY LAW. CERTIFICATE HOLDER IS NAMED AS AN ADDITIONAL INSURED (EXCEPT FOR WORKERS' COMP/EL) WHERE AND TO THE EXTENT REQUIRED BY WRITTEN CONTRACT.

CERTIFICATE HOLDER**CANCELLATION**

12117927

 VILLAGE OF SPRING LAKE
 102 W. SAVIDGE
 SPRING LAKE MI 49456

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

STATE OF MICHIGAN CERTIFICATE OF NO-FAULT INSURANCE

COMPANY: **ACE AMERICAN INSURANCE COMPANY**

The above insurer certifies that the coverage provided by this policy meets the minimum liability limits prescribed by the law.

POLICY NUMBER
MMT H09052884

EFFECTIVE DATE EXPIRATION DATE
1/1/2017 1/1/2018

YEAR MAKE/MODEL
FLEET

VEHICLE IDENTIFICATION NUMBER

INSURED: **WASTE MANAGEMENT OF MICHIGAN INC.**
1668 PORTER ST SW
GRAND RAPIDS MI 49519

AGENCY/COMPANY ISSUING CARD: **LOCKTON COMPANIES**

COMMERCIAL **PERSONAL**

Note: Lockton is not the insurance carrier.

An authorized Michigan insurer, certifies that it has issued a policy complying with Act 294, P.A. 1972, as amended for the described motor vehicle.

SECRETARY OF STATE'S COPY

C.I. MIS. JUV. **State of Michigan Uniform Municipal Civil Infraction Citation** No. 0125 Dept. No. _____

Complaint No. _____ Offense Code _____

The People of: the State of Michigan Township City Village County

Local Use/Arrest No. _____

OF: _____ of _____

THE UNDERSIGNED SAYS THAT ON: Month 11 Day 29 Year 17 At approximately A.M. P.M. Date Month Day Year

State _____ Driver's License Number _____ Social Security No. _____

Race _____ Sex _____ Hair _____ Weight _____ Height _____ Eyes _____ Occupation/Employer _____

Name (First, Middle, Last) Vaughn William Walters

Street 304 N. Park St

City Spring Lake State MI Zip Code 49456

Vehicle Plate No. _____ Year _____ State _____ Vehicle Description (Year, Make, Color) _____ Type _____

THE PERSON NAMED ABOVE, in violation of § 3.15, D.

UPON 304 N. Park St

AT OR NEAR _____

WITHIN CITY VILLAGE TOWNSHIP OF Spring Lake

COUNTY OF Ottawa DID THE FOLLOWING:

Nuisance Ordinance Building Code
 Licenses Ordinance Plumbing Code
 Zoning Ordinance Electrical Code
 Sign, Lighting & Display Ordinance Mechanical Code
 Animal & Fowl Ordinance Other _____

Describe: Failure to place accessory building in compliant location

AFFIRMATIVE RELIEF REQUESTED

Person in Active Military Service Yes No

THIS VIOLATION IS A CIVIL INFRACTION and is your 2nd violation.

The fine for this violation is \$ 100 and must be paid at the violations bureau by 5:00 p.m. on _____ unless you contact the violations bureau before this time.

NOTE: This is a copy of the Notice of Violation served on the defendant.

I state that the above notice of violation was served on the defendant. The defendant failed to pay the fine specified above or failed to contact the violations bureau on the date and time specified above. Therefore, this civil infraction citation is being issued.

TO THE DEFENDANT: You are required to appear as follows to answer this citation.

SEE DATE BELOW. SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS

Appearance Date: on or before 3-12 Days

Hearing Date (if applicable) on _____ Contact Court

A formal hearing may be requested by either party.

In the 58th DISTRICT Court of OTTAWA COUNTY

Court address & phone number
414 WASHINGTON, GRAND HAVEN, MI 49417

I served a copy of this complaint upon the defendant by first class mail at the defendant's last known address and filed a copy of this complaint with the court.

I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.

Complainant's signature Lucas Hill Month 11 Day 29 Year 17

Officer's Name (printed) Lucas Hill Officer's ID No. 100

Agency ORI MI- Agency Name Village of Spring Lake

UC-03 (rev. 8/94) **Court Copy**

Doubleday Bros. & Co.
Order by Form No. M75

C.I. MIS. JUV. **State of Michigan Uniform Municipal Civil Infraction Citation** No. 0126 Dept. No. _____

Complaint No. _____ Offense Code _____

The People of: the State of Michigan Township City Village County

Local Use/Arrest No. _____

OF: _____ of _____

THE UNDERSIGNED SAYS THAT ON: Month 11 Day 29 Year 17 At approximately A.M. P.M. Date Month Day Year

State _____ Driver's License Number _____ Social Security No. _____

Race _____ Sex _____ Hair _____ Weight _____ Height _____ Eyes _____ Occupation/Employer _____

Name (First, Middle, Last) Vaughn William Walters

Street 304 N. Park St

City Spring Lake State MI Zip Code 49456

Vehicle Plate No. _____ Year _____ State _____ Vehicle Description (Year, Make, Color) _____ Type _____

THE PERSON NAMED ABOVE, in violation of § 30-33

UPON 304 N. Park St

AT OR NEAR _____

WITHIN CITY VILLAGE TOWNSHIP OF Spring Lake

COUNTY OF Ottawa DID THE FOLLOWING:

Nuisance Ordinance Building Code
 Licenses Ordinance Plumbing Code
 Zoning Ordinance Electrical Code
 Sign, Lighting & Display Ordinance Mechanical Code
 Animal & Fowl Ordinance Other _____

Describe: Keeping of unwholesome substances on property - piles of material

AFFIRMATIVE RELIEF REQUESTED

Person in Active Military Service Yes No

THIS VIOLATION IS A CIVIL INFRACTION and is your 1st violation.

The fine for this violation is \$ 50 and must be paid at the violations bureau by 5:00 p.m. on _____ unless you contact the violations bureau before this time.

NOTE: This is a copy of the Notice of Violation served on the defendant.

I state that the above notice of violation was served on the defendant. The defendant failed to pay the fine specified above or failed to contact the violations bureau on the date and time specified above. Therefore, this civil infraction citation is being issued.

TO THE DEFENDANT: You are required to appear as follows to answer this citation.

SEE DATE BELOW. SEE BACK OF CITATION FOR EXPLANATION AND INSTRUCTIONS

Appearance Date: on or before 3-12 Days

Hearing Date (if applicable) on _____ Contact Court

A formal hearing may be requested by either party.

In the 58th DISTRICT Court of OTTAWA COUNTY

Court address & phone number
414 WASHINGTON, GRAND HAVEN, MI 49417

I served a copy of this complaint upon the defendant by first class mail at the defendant's last known address and filed a copy of this complaint with the court.

I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.

Complainant's signature Lucas Hill Month 11 Day 29 Year 17

Officer's Name (printed) Lucas Hill Officer's ID No. 100

Agency ORI MI- Agency Name Village of Spring Lake

UC-03 (rev. 8/94) **Court Copy**

Doubleday Bros. & Co.
Order by Form No. M75

C.I. MIS. JUV. **State of Michigan Uniform Municipal Civil Infraction Citation** No. 0127 Dept. No. _____

Complaint No. _____ Offense Code _____

The People of: the State of Michigan Township City Village County

Local Use/Arrest No. _____

OF: _____ of _____

THE UNDERSIGNED SAYS THAT ON: Month 11 Day 29 Year 17 At approximately A.M. P.M. Date Month Day Year

State _____ Driver's License Number _____ Social Security No. _____

Race _____ Sex _____ Hair _____ Weight _____ Height _____ Eyes _____ Occupation/Employer _____

Name (First, Middle, Last) Vaughn William Walters

Street 304 N. Park St

City Spring Lake State MI Zip Code 49456

Vehicle Plate No. _____ Year _____ State _____ Vehicle Description (Year, Make, Color) _____ Type _____

THE PERSON NAMED ABOVE, in violation of § R105.1

UPON 304 N. Park St

AT OR NEAR _____

WITHIN CITY VILLAGE TOWNSHIP OF Spring Lake

COUNTY OF Ottawa DID THE FOLLOWING:

Nuisance Ordinance Building Code
 Licenses Ordinance Plumbing Code
 Zoning Ordinance Electrical Code
 Sign, Lighting & Display Ordinance Mechanical Code
 Animal & Fowl Ordinance Other _____

Describe: Siding house without permit

AFFIRMATIVE RELIEF REQUESTED

Person in Active Military Service Yes No

THIS VIOLATION IS A CIVIL INFRACTION and is your 1st violation.

The fine for this violation is \$ 50 and must be paid at the violations bureau by 5:00 p.m. on _____ unless you contact the violations bureau before this time.

NOTE: This is a copy of the Notice of Violation served on the defendant.

I state that the above notice of violation was served on the defendant. The defendant failed to pay the fine specified above or failed to contact the violations bureau on the date and time specified above. Therefore, this civil infraction citation is being issued.

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Appearance Date: on or before 3-12 Days

Hearing Date (if applicable) on _____ Contact Court

A formal hearing may be requested by either party.

In the 58th DISTRICT Court of OTTAWA COUNTY

Court address & phone number
414 WASHINGTON, GRAND HAVEN, MI 49417

I served a copy of this complaint upon the defendant by first class mail at the defendant's last known address and filed a copy of this complaint with the court.

I declare under the penalties of perjury that the statements above are true to the best of my information, knowledge, and belief.

Complainant's signature Lucas Hill Month 11 Day 29 Year 17

Officer's Name (printed) Lucas Hill Officer's ID No. 100

Agency ORI MI- Agency Name Spring Lake

UC-03 (rev. 8/94) **Court Copy**

Doubleday Bros. & Co.
Order by Form No. M75

Christine Burns

From: Marv Hinga
Sent: Tuesday, November 28, 2017 10:42 AM
To: Christine Burns
Subject: Linda Crouse Complaint

Good Morning Chris,

Township resident Linda Crouse left you a voice mail yesterday complaining about Village employees blowing leaves into her yard on 17103 Franklin. No village personnel were involved. Only township employees were blowing leaves in that area yesterday.

Marv

From: Cindie Gade [<mailto:cindiegade@gmail.com>]
Sent: Tuesday, December 05, 2017 3:50 PM
To: Megan Doss <megan@specialeventsllc.com>
Subject: abandon house

Dear Mark and Megan:

Several years ago my husband and myself purchased a small house at 107 E Savidge. It was our intention to update this little house and enjoy living in the village.

As time has passed, we realize this is not a good plan. We are watching as commercial buildings empty, rental homes around us are marginally maintained, some pretty sketchy neighbors, and a trashy abandon house across the street.

I've called the Spring Lake office to complain about this abandon dump, with no results. When I look out my front door I look directly into this unsafe hazard. The doors and windows were removed over the summer by a salvage company. We can see trash strewn inside the house, my husband went over to look inside a few days ago. The house has dental chemicals stored in it, files, animal fecal matter and who knows what else.

With all the rules and reminders I receive with tax bills and other notices, is this property owner really exempt from handling this dump? I will tell you that I share my thoughts about that property on a regular basis and tell anyone who will listen that I certainly would not call Spring Lake Family dentistry a community oriented practice. The owner is a lousy neighbor and is probably a lousy dentist.

Please take some time and let me know what the Village plans do about this REALLY unsafe structure, and the empty building next to it.

Sincerely,

Pete and Cindie Gade



102 W. SAVIDGE ST. • SPRING LAKE, MI 49456

PHONE: 616-842-1393 • FAX: 616-847-1393

www.springlakevillage.org

Mr. Pete Gade
Ms. Cindie Gade
107 E. Savidge
Spring Lake, MI 49456

RE: 104 E. Savidge

Dear Mr. & Mrs. Gade,

Council Member Doss and President Powers have asked me to respond to an email that you sent to them regarding the structure at 104 E. Savidge.

I would like to reassure you that the Village has been working to get the structure demolished for the past several months. We agree that it is an eyesore and needs to be removed as soon as possible. Unfortunately, the due process we must follow to get a court to force the owner to demolish or allow us to demolish is not quick, easy or inexpensive. At this time, we are waiting for a court date. Many times, the magistrate will grant the property owner a great deal of time to rectify the situation. Of this we have no control.

I would also like to respond to a few statements in your letter. In your second paragraph, you state, "*We are watching commercial buildings empty, rental homes around us marginally maintained, some pretty sketchy neighbors and a trashy abandoned house across the street.*" Commercial property occupancy is at an all-time high (since 2012). As a matter of fact, a developer has recently purchased 4 buildings downtown with the intent on completely rehabilitating them. Since you moved to your home in 2015, the home on your west was converted from a rental home to a single-family, owner-occupied home. The house on your east was a rental property prior to your arrival; it is registered and inspected regularly and passes all inspections. The blue home across the street from you was previously a rental, but it was purchased by a local engineer who plans on moving his business to that location soon. I cannot pass judgement on the "sketchy" statement, as I do not personally know your neighbors, but they may take offense at your account of their character.

In your 3rd paragraph you state, "*I've called the Spring Lake office to complain about this abandoned dump, with no results.*" We have never spoken, nor have you sent me an email or left me a voicemail. As your Village Manager, it is my job (and desire) to address concerns as they are brought to my attention. Many times, these issues are simply a lack of communication. Had you communicated with me, I could keep you updated on the timeline of the process and hopefully put your mind at ease.

On November 8, 2017 Mary Paparella contacted you via email to inform you of an issue (blowing leaves into the street). She was attempting to help you avoid a citation. The response she received was rather salty. While I understand your frustration at having to look at the Achey house, please know that any

issues with 104 E. Savidge are absolutely *not* Mary Paparella's fault. She felt that she was doing the right thing by reaching out to you in a non-threatening manner.

It is totally your prerogative to tell "anyone who will listen" that Spring Lake Family Dentistry is a "lousy neighbor". Have you communicated your displeasure with Dr. Achey? Perhaps walking across the street and having a conversation with him would help him understand your frustrations at looking at his vacant house. If you find that too unpleasant, perhaps a letter would convey your feelings.

In the meantime, please know that we are following the legal process to get the house removed as soon as possible. We completely agree that it is a detriment to the neighborhood.

Sincerely,



Christine Burns
Village Manager

CC: Village Council

From: Cindie Gade [mailto:cindiegade@gmail.com]
Sent: Tuesday, December 05, 2017 3:50 PM
To: Megan Doss <megan@specialeventsllc.com>
Subject: abandon house

Dear Mark and Megan:

Several years ago my husband and myself purchased a small house at 107 E Savidge. It was our intention to update this little house and enjoy living in the village.

As time has passed, we realize this is not a good plan. We are watching as commercial buildings empty, rental homes around us are marginally maintained, some pretty sketchy neighbors, and a trashy abandon house across the street.

I've called the Spring Lake office to complain about this abandon dump, with no results. When I look out my front door I look directly into this unsafe hazard. The doors and windows were removed over the summer by a salvage company. We can see trash strewn inside the house, my husband went over to look inside a few days ago. The house has dental chemicals stored in it, files, animal fecal matter and who knows what else.

With all the rules and reminders I receive with tax bills and other notices, is this property owner really exempt from handling this dump? I will tell you that I share my thoughts about that property on a regular basis and tell anyone who will listen that I certainly would not call Spring Lake Family dentistry a community oriented practice. The owner is a lousy neighbor and is probably a lousy dentist.

Please take some time and let me know what the Village plans do about this REALLY unsafe structure, and the empty building next to it.

Sincerely,

Pete and Cindie Gade

From: Peter Gade [<mailto:petegade@gmail.com>]
Sent: Wednesday, November 08, 2017 9:14 AM
To: Mary Paparella <Mary@springlakevillage.org>
Subject: Re: leaves

Mary:

We will no longer make an effort to maintain a decent house in the "Village" we will no longer spend hours bagging leaves because our neighbors won't. Our house will fit in with all the other crappy and abandoned and rental houses you support.

On Wed, Nov 8, 2017 at 8:53 AM, Mary Paparella <Mary@springlakevillage.org> wrote:

Good morning Pete & Cindy,

As I was locking the side door last night, I noticed Cindy blowing the leaves onto M-104. Unfortunately, you can't do that. The leaves need to be bagged and placed on the ROW and my DPW crew will pick up as they see them. We supply the bags to residents on M104, so feel free to stop in and pick some up if you need to. Thank you!! :)

Mary

Mary Paparella

Administrative Assistant

Building Department Supervisor

Utility Billing Clerk

Village of Spring Lake

102 W. Savidge

Spring Lake, MI 49456

Spring Lake Village Building Department

Michigan Township Services Muskegon

5855 Airline
Fruitport, MI 49415

Phone (231) 865-3310 or (231)865-6977
Fax (231) 865-6191

12-7-17

Dr. Elias J Achey
102 S Buchanan
Spring Lake, MI 49456

re: 104 E Savidge - Deemed as unsafe

Dear Mr. Achey,

Due to the dilapidated condition of your building located at 104 E Savidge in the Village of Spring Lake, notice is hereby given for condemnation of said structure (see enclosed section 304.1.1 of the 2015 International Property Maintenance Code - items #4 & 8 specifically). Notice is hereby given in accordance with section 107 & 108 of 2015 IPMC to repair or demolish the building within 30 days of this order. Failure to comply may result in fines and/or other legal action to be taken at the discretion of Spring Lake Village officials.

Sincerely,



Greg Mason
Building Official

cc: Lukas Hill - Community Development Director

Christine Burns - Village Manager

Brian Sipe - Spring Lake Village Fire Chief

CAN EMERGENCY PERSONNEL LOCATE YOU? International Fire Code section 505 & 503 require that all buildings be posted with addresses plainly visible and legible from the street or road fronting the property. Letters, numbers and symbols indicating addresses shall be a minimum of 4 inches in height with a ½ inch stroke and shall be contrasting with background colors.

Christine Burns

From: Christine Burns
Sent: Monday, December 4, 2017 2:32 PM
To: 'windyj5353@gmail.com'
Subject: RE: SLT Website Contact Form

Hi Melinda,

Margaret from the township forwarded you email to me (below). Can you please explain the situation to me? I'm not aware of any current issue in that area?

Thanks!

Chris
Christine Burns
Spring Lake Village Manager
102 W. Savidge
Spring Lake, MI 49456
P: 616.842.1393
F: 616.847.1393

-----Original Message-----

From: Margaret Shay [mailto:MShay@springlaketwp.org]
Sent: Monday, December 4, 2017 1:28 PM
To: Christine Burns <christine@springlakevillage.org>
Subject: FW: SLT Website Contact Form

Can you help with this?

Thanks!

Margaret Shay
Deputy Clerk
Spring Lake Township
616-842-1340
www.springlaketwp.org
Sign up for our email newsletter

-----Original Message-----

From: SpringLakeTwp.org [mailto:noreply@springlaketwp.org]
Sent: Friday, December 1, 2017 1:51 PM
To: Margaret Shay <MShay@springlaketwp.org>
Subject: SLT Website Contact Form

Caution! This email is from an external address and contains a link. Use caution when following links as they could open malicious web sites.

From: Melinda K Johnson <windyj5353@gmail.com>

Message Body:

Hello,

I just read our news letter . I wondered where we are with the section of the bike path on the west side of Lake Pointe Condominimums, 917 W. Savidge St., to change the grade to allow water run off and eliminate the water pooling problem?

Thank you. Melinda Johnson

--

This e-mail was sent from a contact form on Spring Lake Township (<http://www.springlaketwp.org>)

Christine Burns

From: Milton Stahl <mkstahl7@att.net>
Sent: Wednesday, November 22, 2017 9:49 AM
To: Christine Burns
Subject: Greetings!

Dear Mrs. Burns: Today I witnessed a most kind and generous act when the vacuum truck and other Village workers removed the leaves from Village property at the north end of Mark Street.

I believe that this is a splendid demonstration of the Village's intention to help property owners whenever possible.

Please accept our thanks. It fits well in this Thanksgiving Season!

Rev. and Mrs. Milton Stahl
523 James



Spring Lake District Library Calendar of Events December 2017



Sun	Mon	Tue	Wed	Thu	Fri	Sat
<p>Questions about library services or programs?</p> <p>Call 616.846.5770 or visit sllib.org</p>	 <p>Facebook.com/SpringLakeDistrictLibrary</p>	 <p>Twitter.com/sldlibrary</p>		<p>Digital Media Lab: Green screen iMac Scanners GarageBand</p>	<p>1 10:30 am Preschool Storytime: <i>On a Bear Hunt</i></p>	<p>2</p>
<p>3 Sunday hours 2-5 pm</p> <p>3-4 pm Music by the Fireplace featuring harpist Mary Wagner</p> 	<p>4 5-8 pm Snowmobile Safety Class: pre-registration required</p>	<p>5 9:45 am Little Movers Storytime 10:45 am Baby Bounce Storytime 7 pm Sufganiyot with Chef Hillary: pre-registration required</p>	<p>6 10 am-3 pm Help with ACA Health Insurance Marketplace Open Enrollment</p> <p>4-5 pm LEGO Block Party</p>	<p>7 10:30 am Preschool Storytime: <i>Bundle Up</i></p> <p>6:30 pm Ornament Painting Workshop; \$5/pre-registration required for adults and ages 16+</p>	<p>8 10:30 am Preschool Storytime: <i>Bundle Up</i></p>	<p>9 2-3 pm Winter Craft Wonderland</p>
<p>10 Sunday hours 2-5 pm</p>	<p>11</p>	<p>12 9:45 am Little Movers Storytime 10:45 am Baby Bounce Storytime Noon-3 pm Closed for library staff potluck</p>	<p>13 9:30 or 10:45 am OAISD Play 'n Learn</p> <p>10 am Email 2: Beyond the Basics; pre-registration required</p>	<p>14 10:30 am Preschool Storytime: <i>The Perfect Gift</i></p> <p>4 pm Full STEAM Ahead; ages 7-12</p>	<p>15 10:30 am Preschool Storytime: <i>The Perfect Gift</i></p>	<p>16</p>
<p>17 Sunday hours 2-5 pm</p>	 <p>Learn languages at sllib.org</p>	<p>19</p>	<p>20 9:30 am OAISD Play 'n Learn for birth-24 months</p> <p>3:30-5 pm Teen 'Scape ages 10-18</p>	<p>21 10 am Tundra Kennels Sled Dogs</p> <p>4 pm SLDL Friends Book Club</p>	<p>22</p>	 <p>23</p>
<p>24 Library Closed Happy Holidays!</p>	<p>25 Library Closed Happy Holidays!</p>	<p>26</p>	<p>27</p>	<p>28 10 am Winter Break Beach Party with Mermaid Sadie</p>	<p>29</p>	<p>30</p>
<p>31 Library Closed</p> 		 <p>Investment Research Center @ sllib.org</p>		 <p>Online resource Consumer Reports @ sllib.org</p>		 <p>Instantly borrow free digital movies, music, eBooks and more!</p>

Library programs and events are photographed or recorded for publicity or promotional purposes of the Library. Persons attending these programs or events consent to the use of their photograph or recording unless they specifically notify Library staff of an objection to such use. No names will be used in conjunction with photographs or recordings without express written consent.

Christine Burns

From: Maryann Fonkert
Sent: Monday, November 27, 2017 10:16 AM
To: Whitney Piersma
Cc: Christine Burns
Subject: RE: Regarding Illegal Short Term Rental

Hi Whitney,

Your home is in a Single Family Residential district, so short-term rentals, per the Village Ordinance Section 8.2 are not a permitted use. A short-term rental falls under the definition of a "Hotel" in the Village Zoning Ordinance and is not permitted in any residential district.

Hotel - Any establishment in which individual cabins, courts, rooms, suites or similar structures or units are rented to transients for temporary periods of time. A "hotel" shall include tourist cabins and homes and motels, but shall not include bed and breakfast establishments. A hotel shall not be considered or construed to be a multiple family dwelling.

The Township's Assessing Department takes care of the Village's assessing needs, but are separate from the Village, so they would not mention any Ordinance issues with you.

The Village does have a rental program that requires all rental homes in the Village to be registered and inspected, but again, these are for long term rentals.

At this time, Council is not looking at allowing short-term rentals in residential districts. You could bring your request to Council to consider amending the Ordinance. There is a time for Statements of Citizens at the end of each Council Work Session and Council meeting. Work Sessions are the 2nd Monday of each month at Village Hall, in the upstairs conference room and Council meetings are the 3rd Monday of each month at Barber School. Both meetings are at 7:00 p.m. This is, however, just a time for statements and not discussion. If you would like to discuss this issue, you can contact Chris Burns, the Village Manager at 616-842-1393 or christine@springlakevillage.org. Chris will be back in the office Wednesday, Nov. 29th.

I hope I have answered all of your questions, but if I have not, please do not hesitate to call or email me.

Best Regards,

Maryann Fonkert
Deputy Clerk
Village of Spring Lake
102 W. Savidge St.
616 842-1393

-----Original Message-----

From: Whitney Piersma [<mailto:whitney.piersma@gmail.com>]
Sent: Friday, November 24, 2017 1:40 PM
To: Maryann Fonkert <Maryann@springlakevillage.org>
Subject: Regarding Illegal Short Term Rental

Hi Maryann,

I am following up about a letter regarding illegal short-term rental of my home.

My home is not currently being used as a short-term rental property as I had only rented it during a few summer weekends, not exceeding the 14 days.

I did not realize it was illegal to rent, nor did the township mention anything about it being illegal when I spoke to them regarding the tax exemption last month. I apologize for any misunderstanding.

Can you please help me understand the steps I would need to take if I would like to rent my home short-term again in coming summers?

Please let me know if there is anything further I need to do to rectify this! Again, my home is not currently being rented.

Thank you,

Whitney Piersma

Christine Burns

From: John Nash <JNash@springlaketwp.org>
Sent: Wednesday, December 6, 2017 9:41 AM
To: Amy Bessinger; Barb Beaune; Brendon O'hara; Brian Sipe; Caroline Zeeff; Carolyn Boersma; Christine Burns; Connie Meiste; Crystal Bultje ; Dana Appel; Denise North; Erik Erhorn; Gordon Gallagher; Heather Singleton; John Nash; John Stuparits; Kathryn Nash; Kyle Botbyl; Linda Anderson ; Lukas Hill; Margaret Shay; Mary Paparella; Pete Eliopoulos; Rhonda Lafave; Ron Brondyke ; Ron Bultje ; Scott Rochon; Sgt. Jason Kik - OCSD (JKik@miottawa.org); Susan Ogden
Subject: FW: Scanned from MFP-07172536 12/06/2017 09:20
Attachments: DOC120617.pdf

Good Morning again,

Attached is a picture of the cover the Michigan Township Association's (MTA) December Focus Magazine, and then a picture of the Township Spotlight article which appeared in that edition of the magazine about SLT.

There are over 1,240 townships in the State of Michigan. Almost all of them are members of the MTA. It would not be too far off to say there is an article about SLT almost every year in one of the twelve issues of the MTA Magazine. Do the math, we are very special because of all the extra effort our staff and elected officials put forth.

This morning I got a call from Jim Lilly, our State Rep. He said there were two bills the legislature was currently considering that will effect municipalities. Funny, before I even said anything to Jim, he said but I know Spring Lake Township is so far ahead of the game the legislation will have no impact on SLT.

Keep up the great WORK !

Thanks to all who will be out on this cold and windy day helping the Salvation Army. This am I got an email for the head of the local Salvation Army asking if we still were planning to ring the bell on this cold and windy day. I told him you better believe it. We are tough and we care !

Have a great day. Jim Koster and I will be out ringing the bell from 5 to 6 pm tonight,

John

Michigan Township Focus

DECEMBER 2017



Cultivating an engaged community

Michigan needs to repurpose
statutory revenue sharing

page 2

Most diverse community is proud
of its past, present—and future

Helping make the holidays merry
and bright for Michiganders

page 10

around state

townships in the spotlight



Spring Lake Township

Spring Lake Township (Ottawa Co.) has more than 14,000 residents who call the township home. The township board strives to create the very best community possible for their residents, and in 2013, earned the first complete Michigan Townships Association “Township of Excellence” designation. And they didn’t stop there—the board has been busy working on many projects to better their community.

One of the many projects recently completed is a new state-of-the-art fire station. The fire department and township board worked together to make decisions that would allow the building to be built without any tax increases to residents. According to officials, the station will have at least a LEED silver certification, and all indications are that it will be LEED gold certified. Along with the new station came a new, Michigan-made fire truck designed to fit the township’s needs.

After collaborative negotiations with Spring Lake Village, officials developed a plan to share the Spring Lake Village

Hall. This plan provided significant savings for both municipalities and increased technical advantages. Residents have one-stop “shopping,” eliminating any past confusion as to which building to go to. The township and the village have been living together happily for more than two years.

The township recently took on the major task of identifying every plot in the Spring Lake Township Cemetery. The cemetery is 182 years old, and the township now has pictures and individual data of each and every plot, which can be accessed on the township website. The township also added a total cemetery irrigation system and re-surfaced all cemetery roads, at no additional cost to taxpayers.

Spring Lake Township has more than 26 miles of paved bike paths, including the North Bank Trail, which is 3.5 miles long and is planned to reach all the way to Grand Rapids in the future. The township is working to complete the newest section of bike path and is doing a great deal of



path maintenance work to existing paths to ensure their safety and condition.

Spring Lake Township—“Where Nature Smiles For Seven Miles”—may be known for its beauty, but local officials and residents agree that there is so much more than meets the eye.





DRAFT MINUTES

**Monday, November 20, 2017
7:00 P.M., Barber School
102 West Exchange Street
Spring Lake, Michigan**

1. Call to Order

President **Powers** called the meeting to order at 7:00 p.m.

2. Pledge of Allegiance

3. Roll Call

Present: Doss, Duer, Hanks, Miller, Powers, TePastte, Van Strate.

Absent: None

4. Approval of the Agenda

Motion by **Doss**, second from **Miller**, to approve the agenda as presented.

Yes: 7 No: 0

5. Consent Agenda

A. Approved the payment of the bills (checks numbered 59296-59392) in the amount of \$417,094.23.

B. Approved the minutes for the October 9, 2017 work session and the October 16, 2017 regular Council meeting.

C. Approved a motion to award the tree trimming and removal bid to Andy's Tree Service for an amount not to exceed \$17,000.

D. Approved a Michigan Bell Franchise Renewal.

Motion by **Doss**, second from **Miller**, to approve the Consent Agenda as presented.

Yes: 7 No: 0

6. General Business

- A. Economic Development Presentation – Dana Kollewehr** – Ms. Kollewehr updated Council on Community Development and a number of activities and services that the Chamber provided for businesses.
- B. Housing Presentation – Rhonda Kleyn** – Ms. Kleyn gave an overview of the Neighborhood Housing Services from their 2016/2017 fiscal year throughout the Village and neighboring communities.
- C. Library Presentation – Megan Doss – Doss** updated Council on the Library, highlighting finances, projects and added services from this past year. Mr. Tom Cousineau also reported on finances and shared Library stats that included number of checkouts and attendance to programs and noted a very generous donation from the Friends of the Library. Doss and Cousineau also acknowledged Library Board President, Mary Egan.

D. Audit Presentation – Doug Vredeveld

Subject: Mr. Doug Vredeveld was in attendance to present his audit findings for fiscal year 2016/2017. A paper copy of the audit was delivered with the Council agenda and available at the meeting for public review.

Mr. Vredeveld went over the 2016/2017 Village audit report with Council and said that after an extensive amount of work they form an opinion, and that the financial statements referred to present fairly, in all material respects, the respective financial position of the Village. Mr. Vredeveld said this represented a good clean audit.

- E. Video Presentation (courtesy of Spring Lake Township) – Manager Burns** shared a new video that was put together showing highlights of what the Township and Village had to offer.

7. Department Reports

- A. Village Manager – Burns** reported that she had been asked to serve on the Board of Directors for Best Financial Credit Union, but after speaking with the Finance Committee, it was determined that if the Village ever wanted to have a banking relationship with the BFCU, it would be considered a conflict of interest if she sat on their Board, so **Burns** said that unless Council directed her otherwise, she would decline the offer.

Burns also shared that an article about her was featured on page 5 in the Public Management magazine.

Burns said that she had received an email from the Coast Guard Festival Committee requesting Council recommend a Village resident to serve on the Coast Guard Festival Committee and that they have asked that this not

be a Council or staff member. **Doss** asked why Council was asked to do this. **Burns** said that this fell into the category of “it’s always been done that way”. **Doss** said that the Festival Committee would vet the person that Council chose anyway so why not find their own person. **Hanks** asked what the benefit to the Village was. **Powers** said that beyond the sense of community cooperation, he did not think there really was a benefit. **Powers** suggested they cut out the middle man and have the CGFC find their own person. **Council** agreed. **Burns** said she would relay that information to Mike Smith.

B. Clerk/Treasurer/Finance Director – Hinga had nothing further to add to his report.

C. OCSO – Burns reported that there had been a Police Commission meeting earlier that day and that at this point, since everything was going well, they would now meet annually.

D. Fire

E. 911

F. DPW - Burns shared John Stuparits’ Cross Connection Control Plan that was formally approved by the DEQ on October 9th. **Burns** said that Stuparits was very proud of this accomplishment and could check one more thing off his list before he retired.

G. Minutes from Various Board & Committees

1. **Parks & Recreation**

2. **DDA**

8. Old Business and Reports by the Village Council -There was no old business.

9. New Business and Reports by Village Council – There was no new business.

10. Status Report: Village Attorney – Attorney **Sullivan** had nothing further to add.

11. Statement of Citizens

James Willison, 626 East Savidge spoke to Council about his concerns for his high-water bills. Willison asked Council to consider crediting him the sewer usage portion of his bill that he has paid and help him find a solution to get an irrigation water meter put in.

Dennis Anastor, Tanglefoot Park resident, spoke to Council about his 2018 seasonal application being rejected and asked Council and Manager Burns to reconsider his application and to let him know the decision.

Dave Klenk, and Pat Hurd, Tanglefoot Park residents, spoke and said they too, were not being allowed to return to the park in 2018 and asked for reconsideration.

Faith Florea, Tanglefoot Park resident, spoke in support of the 3 couples whose applications for 2018 had been denied and asked that their applications be

reconsidered.

12. Adjournment

Motion by **Van Strate**, second from **TePastte**, Village Council adjourned the meeting at 8:03 p.m.

Yes: 7

No: 0

Mark Powers, Village President

Maryann Fonkert, Deputy Clerk



Village of Spring Lake
Draft Minutes Council Work Session

November 13, 2017

7:00 p.m.

**102 West Savidge Street (Upstairs Conference Room)
Spring Lake, MI 49456**

President Powers called the meeting to order at 7:00 p.m.

1. Finance Committee Update

The newly appointed Finance Committee was not able to meet prior to the Work Session. They will be meeting prior to the Council Meeting on November 20, 2017.

2. Downtown & Pathway Lighting

Discussions regarding downtown and pathway lighting are ongoing with the DDA and the Parks & Recreation Board. On November 9, 2017, the DDA agreed to help offset the cost of the pathway lighting project for portion that is within the DDA boundary. Council agreed to seek consultants to write and issue an RFP due to the fact that this was a \$150k +/- project and they needed to be responsible stewards of the taxpayers' money.

3. Tree Trimming & Removal Contract

DPW Foreman Ben VanHoeven solicited bids for tree trimming and removal services. Two bids were received from Andy's Tree Service (\$17,000) and Summit Tree Service (\$18,632.54); West Michigan Tree Service was invited to submit a bid several times, but no bid was received. The Tree Board reviewed the list and recommends approval of the bid from Andy's Tree service for \$17,000.

4. Michigan Bell Franchise Renewal

This is a housekeeping item. Should Council elect not to renew, the franchise payments would cease.

5. Miscellaneous Discussion Items

6. Communications

- Commercial Recycling Complaint – Council directed the Village Manager to seek options for commercial accounts and report back.
- Kamps Violation
- Library Calendar (November)
- MDOT Audit
- Parks & Recreation Board Resignation (Braun)
- Tanglefoot Park Issue
- Traffic Complaint – Council asked the Village Manager to investigate options for the intersection of Exchange and Jackson and report back.
- USPO Parking Complaint – See above.
- Village Manager Calendar

7. **Minutes** - Minutes of the October 9, 2017 Work Session and October 16, 2017 regular meeting are attached for review. Should you wish to make edits, please share that information with Chris Burns or Maryann Fonkert prior to November 17, 2017

8. Public Comment

9. **Adjournment** - Meeting adjourned at 8:17 p.m.

Mark Powers, Village President

Christine Burns, Village Manager