

It is expected that a Quorum of the Personnel Committee, Administration Committee, and Common Council will be attending this meeting: (although it is not expected that any official action of any of those bodies will be taken)

**CITY OF MENASHA
Board of Public Works
Third Floor Council Chambers
140 Main Street, Menasha
January 18, 2010
6:50 PM
or immediately following the Administration Committee
AGENDA**

- A. CALL TO ORDER
- B. ROLL CALL/EXCUSED ABSENCES
- C. MINUTES TO APPROVE
 - 1. [January 4, 2010](#)
- D. ACTION ITEMS
 - 1. [Street Use Application – Team Hailey 5K Run/Walk for a Cure; Saturday, April 17, 2010; 8:00 A M – 10:30 AM](#)
 - 2. [R-3-10 Resolution Supporting the Formation of the Fox Cities Regional Transit Authority](#)
 - 3. [O-3-10 Ordinance Pertaining to Excavation Permits \(Alderman Michael Taylor\)](#)
- E. ADJOURNMENT

"Menasha is committed to its diverse population. Our Non-English speaking population and those with disabilities are invited to contact the Menasha City Clerk at 967-3603 24-hours in advance of the meeting for the City to arrange special accommodations."

CITY OF MENASHA
Board of Public Works
Third Floor Council Chambers
140 Main Street, Menasha
January 4, 2010
MINUTES

A. CALL TO ORDER

Meeting called to order by Chairman Taylor at 6:42 p.m.

B. ROLL CALL/EXCUSED ABSENCES

PRESENT: Ald. Englebert, Benner, Roush, Taylor, Wisneski, Pack, Hendricks, Zelinski
ALSO PRESENT: Mayor Merkes, CA/HRD Captain, PC Stanke, DPW Radtke, CDD Keil,
C/T Stoffel, Clerk Galeazzi, and the Press.

C. MINUTES TO APPROVE

1. [December 21, 2009](#)

Moved by Ald. Pack, seconded by Ald. Wisneski to approve minutes.

Discussion ensued on the motions made on the expiration of 90-day trial period for stop sign on First Street at Ice Street. CA/HRD Captain explained the ruling of the motions.

DPW Radtke explained how a 90-day trial works.

Motion carried on voice vote.

D. ACTION ITEMS

None

E. ADJOURNMENT

Moved by Ald. Pack, seconded by Ald. Wisneski to adjourn at 6:50 p.m.

Motion carried on voice vote.

Respectfully submitted by Deborah A. Galeazzi, WCMC, City Clerk



STREET USE APPLICATION

Sponsored by: Team Hailey 5K / PLGA Foundation

Responsible Person: Peg Meltz

Address: 1500 Alean Dr
Menasha, WI 54952

Phone: 954-5355

Email Address: pmeltz@new.m.com

Street Route: (Attach Map) _____
Description of Use: 5K Run/Walk

| | |
|------------------|-------------------|
| Street Use Date: | <u>4/17/10</u> |
| Start Time: | <u>8:00 A</u> |
| End Time: | <u>10:30 A</u> |
| Number of Units: | <u>estim. 600</u> |

Liability Insurance has been secured in the amount of \$ 1,000,000 each occurrence with the City of Menasha named as the additional insured.

Insurance Company Star Insurance Policy No. _____
(Attached is a copy of the insurance certificate)

National Casualty Co., Nationwide Life Insurance

Date: 12/28/09 Applicant's Signature: Peg Meltz

Permit Fee: Each application for a Street Use Permit shall be accompanied by a fee of Twenty-Five Dollars (\$25.00). Make checks payable to City of Menasha. See highlighted portion of the attached City of Menasha Municipal Code.

Note to events planning to use City Parks and/or greenspace: Any multi-day event or event which plans to sell beer and/or wine to the public must appear before the Parks and Recreation Board.

TO BE COMPLETED BY CITY STAFF

Scheduled Park & Recreation Board Review Date: _____

Not Required: Approved: _____ Denied: _____

Scheduled Common Council Review Date: 2/1/10

Approved: _____ Denied: _____

APPROVAL:

Police Dept. [Signature] Fire Dept. [Signature] Public Works Dept. MR City Attorney [Signature]

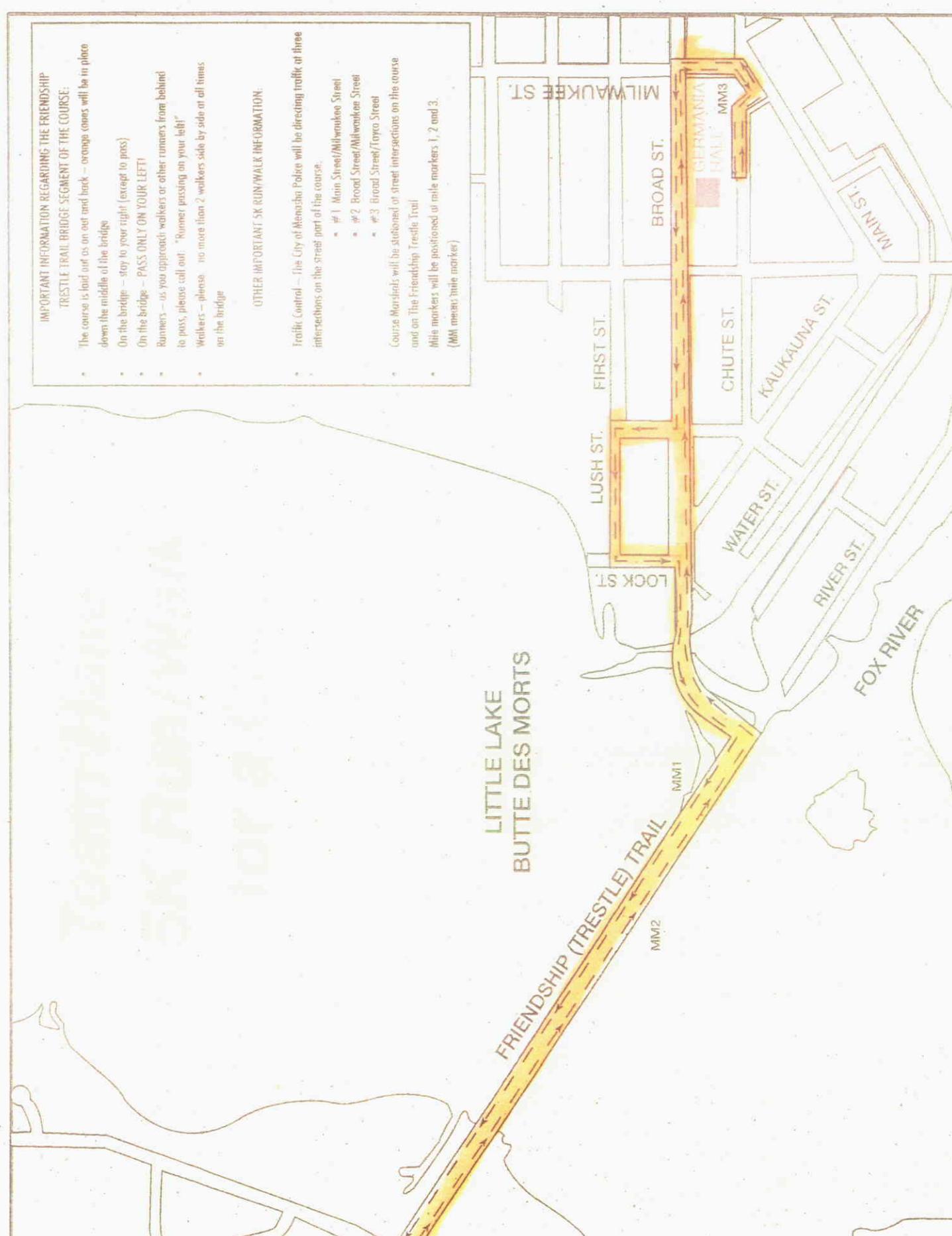
**IMPORTANT INFORMATION REGARDING THE FRIENDSHIP
TRESTLE TRAIL BRIDGE SEGMENT OF THE COURSE:**

- The course is laid out as on out and back - orange cones will be in place down the middle of the bridge
- On the bridge - stay to your right (except to pass)
- On the bridge - PASS ONLY ON YOUR LEFT!
- Runners - as you approach walkers or other runners from behind to pass, please call out: "Runner passing on your left"
- Walkers - please no more than 2 walkers side by side at all times on the bridge

OTHER IMPORTANT 5K RUN/WALK INFORMATION:

- Traffic Control - The City of Menasha Police will be directing traffic at three intersections on the street part of the course.
 - #1 Main Street/Milwaukee Street
 - #2 Broad Street/Milwaukee Street
 - #3 Broad Street/Taylor Street
- Course Marshals will be stationed at street intersections on the course and on The Friendship Trestle Trail
- Mile markers will be positioned at mile markers 1, 2 and 3. (MM means mile marker)

**LITTLE LAKE
BUTTE DES MORTS**



FRIENDSHIP (TRESTLE) TRAIL

MM2

MM1

MM3

N. LAKE ST.

MILWAUKEE ST.

BROAD ST.

FIRST ST.

LUSH ST.

LOCK ST.

CHUTE ST.

KAUKAUNA ST.

WATER ST.

RIVER ST.

FOX RIVER

MAIN ST.

GERMANIA HALL

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/22/2009

PRODUCER (260) 467-5690 FAX: (260) 467-5651
STAR Insurance - Fort Wayne Office
2130 East DuPont Road

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

Fort Wayne IN 46825

INSURERS AFFORDING COVERAGE NAIC #

INSURED

INSURER A NATIONAL CASUALTY COMPANY 11991

ROAD RUNNERS CLUB OF AMERICA/2010

INSURER B NATIONWIDE LIFE INS. CO. 66869

AND ITS MEMBER CLUBS

7410 SKYLINE DRIVE

FREDERICK MD 21702-3652

INSURER C

INSURER D

INSURER E

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR ADD'L LTR | INSRD | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS |
|----------------|-------|--|---------------------------|----------------------------------|-----------------------------------|--|
| A | | GENERAL LIABILITY | KRO 0000000754800 | 12/31/2009 | 12/31/2010 | EACH OCCURRENCE \$ 1,000,000 |
| | | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 |
| | | <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR | | | | MED EXP (Any one person) \$ 5,000 |
| | | <input checked="" type="checkbox"/> LEGAL LIAB. TO PART. | | | | PERSONAL & ADV INJURY \$ 1,000,000 |
| | | \$1,000,000 | | | | GENERAL AGGREGATE \$ NONE |
| | | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | PRODUCTS - COMP/OP AGG \$ 1,000,000 |
| | | <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | A&M AGGREGATE \$5,000,000 | | | ABUSE & MOLESTATION 500,000 |
| A | | AUTOMOBILE LIABILITY | KRO 0000000754800 | 12/31/2009 | 12/31/2010 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 |
| | | <input type="checkbox"/> ANY AUTO | | | | BODILY INJURY (Per person) \$ |
| | | <input type="checkbox"/> ALL OWNED AUTOS | | | | BODILY INJURY (Per accident) \$ |
| | | <input type="checkbox"/> SCHEDULED AUTOS | | | | PROPERTY DAMAGE (Per accident) \$ |
| | | <input checked="" type="checkbox"/> HIRED AUTOS | | | | |
| | | <input checked="" type="checkbox"/> NON-OWNED AUTOS | | | | |
| | | GARAGE LIABILITY | | | | AUTO ONLY - EA ACCIDENT \$ |
| | | <input type="checkbox"/> ANY AUTO | | | | OTHER THAN EA ACC \$ |
| | | EXCESS/UMBRELLA LIABILITY | | | | AUTO ONLY AGG \$ |
| | | <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE | | | | EACH OCCURRENCE \$ |
| | | <input type="checkbox"/> DEDUCTIBLE | | | | AGGREGATE \$ |
| | | <input type="checkbox"/> RETENTION \$ | | | | \$ |
| | | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | | | WC STATU-TORY LIMITS OTH-ER |
| | | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? | | | | E L EACH ACCIDENT \$ |
| | | If yes, describe under SPECIAL PROVISIONS below | | | | E L DISEASE - EA EMPLOYEE \$ |
| | | | | | | E L DISEASE - POLICY LIMIT \$ |
| B | | OTHER EXCESS ACCIDENT & MEDICAL | SPX 0000003732100 | 12/31/2009 | 12/31/2010 | EXCESS MEDICAL \$10,000 |
| | | | | 12:01 A.M. | 12:01 A.M. | \$250 DEDUCTIBLE PER CLAIM |
| | | | | | | AD & SPECIFIC LOSS \$2,500 |

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
CERTIFICATE HOLDER IS NAMED AS AN ADDITIONAL INSURED AS RESPECTS THEIR INTEREST IN THE OPERATIONS OF THE NAMED INSURED.

DATE & EVENT: 04/17/10 TEAM HAILEY 5K RUN/WALK FOR A CURE

INSURED CLUB: TEAM HAILEY 5K RUN/WALK FOR A CURE, ATTN: PEG MELTZ; 1500 ALCAN DR.; MENASHA, WI 54952

CERTIFICATE HOLDER

04/17/10 CITY OF MENASHA, WI
ATTN: PAMELA CAPTAIN
140 MAIN STREET
MENASHA, WI 54952

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

John Lefever/JR



ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/22/2009

PRODUCER (260) 467-5690 FAX: (260) 467-5651
STAR Insurance - Fort Wayne Office
2130 East DuPont Road

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

Fort Wayne IN 46825

INSURERS AFFORDING COVERAGE NAIC #

INSURED

INSURER A NATIONAL CASUALTY COMPANY 11991

ROAD RUNNERS CLUB OF AMERICA/2010

INSURER B NATIONWIDE LIFE INS. CO. 66869

AND ITS MEMBER CLUBS

7410 SKYLINE DRIVE

FREDERICK MD 21702-3652

INSURER C

INSURER D

INSURER E

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR ADD'L LTR | INSRD | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS |
|----------------|-------|---|-------------------|----------------------------------|-----------------------------------|--|
| A | | GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> LEGAL LIAB. TO PART. \$1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | KRO 0000000754800 | 12/31/2009 | 12/31/2010 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ NONE PRODUCTS - COMP/OP AGG \$ 1,000,000 ABUSE & MOLESTATION 500,000 |
| A | | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS | KRO 0000000754800 | 12/31/2009 | 12/31/2010 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| | | GARAGE LIABILITY <input type="checkbox"/> ANY AUTO | | | | AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY AGG \$ |
| | | EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$ | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$ |
| | | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below | | | | JWC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ |
| B | | OTHER EXCESS ACCIDENT & MEDICAL | SPX 0000003732100 | 12/31/2009 | 12/31/2010 | EXCESS MEDICAL \$10,000 \$250 DEDUCTIBLE PER CLAIM AD & SPECIFIC LOSS \$2,500 |

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 CERTIFICATE HOLDER IS NAMED AS AN ADDITIONAL INSURED AS RESPECTS THEIR INTEREST IN THE OPERATIONS OF THE NAMED INSURED.

DATE & EVENT: 04/17/10 TEAM HAILEY 5K RUN/WALK FOR A CURE

INSURED CLUB: TEAM HAILEY 5K RUN/WALK FOR A CURE, ATTN: PEG MELTZ; 1500 ALCAN DR.; MENASHA, WI 54952

CERTIFICATE HOLDER

04/17/10 PLGA FOUNDATION
 ATTN: AMY WEINSTEIN
 98 RANDOM FARMS DRIVE
 CHAPPAQUA, NY 10514

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

John Lefever/JR



SAMPLE

RESOLUTION SUPPORTING
THE FORMATION OF THE
FOX CITIES REGIONAL TRANSIT AUTHORITY

WHEREAS, the (your municipality, board, commission or organization) believes it is essential to maintain quality public transportation for the sake of all citizens in the Fox Cities; and

WHEREAS, public transportation is a critical tool in economic development, job creation, maintaining an affordable cost of living, increasing mobility and self-sufficiency and reducing unemployment as the backbone of a strong regional economy; and

WHEREAS, federal public transportation operating assistance greatly aids in providing the above-mentioned quality services; and

WHEREAS, the Fox Cities Urbanized Area is expected to exceed a population of 200,000 in the 2010 Census, resulting in a loss of federal public transit operating assistance; and

WHEREAS, the Governor and state legislature of the State of Wisconsin, through the adopted 2009-11 biennial state budget established four regional transit authorities; and

WHEREAS, the Fox Cities Urbanized Area was not included in the above-mentioned budget; and

WHEREAS, the (your municipality, board, commission or organization) believes that the Fox Cities Urbanized Area should be given the authority to explore a sustainable future as a Regional Transit Authority, with control by individual communities and entities as to if and how they will participate; and

WHEREAS, the voters should be allowed to determine whether to fund the RTA.

NOW, THEREFORE, BE IT RESOLVED, that the (municipality, board or commission) hereby requests that the Fox Cities Urbanized Area be given the authority by the Wisconsin state legislature to form the Fox Cities Regional Transit Authority, that the authority will be created when municipalities adopt a resolution authorizing the municipality to become a member of the Regional Transit Authority and that each resolution is ratified by the electors at a referendum held in the municipality.

Adopted _____

Approved _____

Title
Organization

ORDINANCE O-03-10

AN ORDINANCE PERTAINING TO EXCAVATION PERMITS

Introduced by Alderman Michael Taylor

The Common Council of the City of Menasha does hereby ordain as follows:

SECTION 1: Amend Title 6, Chapter 2, SEC.6-2-3(d)(2) of the Code of Ordinances of the City of Menasha, Wisconsin as follows:

Title 6 – Public Works

CHAPTER 2

Streets and Sidewalks

SEC. 6-2-3 EXCAVATIONS OF STREETS, ALLEYS, PUBLIC WAYS AND GROUND.

(d) CITY STANDARDS; FEES.

(2) Fees. ~~The fee for a street opening permit shall be Ten Dollars (\$10.00). The fee for an annual street opening permit shall be One Hundred Dollars (\$100.00). Permit fees shall be paid to the City Treasurer who shall issue his receipt therefor.~~ Fees for the permits described above shall be established by the Board of Public Works.

SECTION 2: This amending Ordinance shall take effect upon passage and publication as provided by law.

Passed and approved this _____ day of _____, 2010.

Donald Merkes, Mayor

ATTEST:

Deborah A. Galeazzi, City Clerk