

BOARD OF SELECTMEN
AGENDA
Tuesday, June 7, 2016

Regular Meeting – 7:00 p.m.

Al Merritt Media and Cultural Center,
600 Market Street

*****NOTE*****

As a result of changes in the Open Meeting Law, the chair must announce at the outset of every meeting that the meeting is being recorded and transmitted via cable television.

7:00 p.m.

Pledge of Allegiance

Request for amended weekday entertainment license to allow for acoustic music outdoors, Legal C Bar, Market Street

Yard Waste Facility policy

Request for an exemption under Massachusetts General Laws Chapter 268A, Section 20 (B) by Veterans Services for public safety dispatcher and call firefighter Michael DiCoratofor provision of food at patriotic cookout

Contract with library bargaining unit

Perley Burrill update

Needham Road update

Public comment period

Use of Town facilities:

Common, Veterans Services, cookout June 22, 23
Common, Library, summer reading program, June 24

One-day liquor license:

None

Minutes:

April 25, 2016; May 9, 2016

Proclamations:

ADA Day

Administrative matters:

Signing of warrants

TOWN OF LYNNFIELD
Attn: Selectmen's Office
55 Summer Street
Lynnfield, MA 01940
Phone 781-334-9412 -- fax #781-334-9419

Amended Application for Entertainment on Week Days

Return this form along with the Workers' Compensation Insurance Affidavit and applicable license fee. Checks are to be made payable to the Town of Lynnfield.

ANNUAL FEE: \$100.00

4/28/2016

(Date)

NAME OF BUSINESS: Legal Sea Foods

PHONE #: 781-234-6500

BUSINESS ADDRESS: 220 Market Place

TYPE OF ENTERTAINMENT:

Wide screen television/background music "Gravy" and acoustic music

(Insert Description of Entertainment)

Name, address and phone number of owner of premises

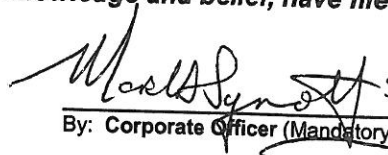
Roger S. Berkowitz, Legal Sea Foods, LLC

One Seafood Way, Boston, MA 02210; (617) 530-9000

I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Legal Sea Foods, LLC

*Signature of Individual or Corporate Name (Mandatory)



By: Corporate Officer (Mandatory, if applicable)

[Redacted]
**Social Security # or Federal Identification Number

***This license will not be issued unless the applicant signs this certification clause.**

****Your social security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Mass. G.L. c.62C s.49A.**

Effective 02/11/2008

File: PERMIT APPLICATIONS.Entertainment Week Day

Date: March 31, 2016

Access Policy for Lynnfield Yard Waste Facility

The Yard Waste Facility is located behind the Town Hall at 55 Summer Street. It is open to Lynnfield residents only, who have current recycling stickers, beginning the first Saturday in April (weather permitting) and closing December 1st.

The Yard Waste Facility will be open starting the first Saturday of April (weather permitting) as follows:

Wednesdays	7:30 AM – 3:00 PM
Saturdays	7:30 AM – 3:00 PM
Sundays (from Nov 1st - Dec 1st)	7:30 AM – 3:00 PM

The Yard Waste Facility will close December 1st.

Extending the Facility season will be based on weather and funding.

The Facility will accept leaves, brush, limbs smaller than 6 inches and grass clippings. The facility is not open to landscapers or contractors.

To use the Facility you must have a current recycling sticker. Recycling stickers are valid from April 1st to December 1st each year. Next season's Recycling Facility stickers will be sold beginning in March.

If you need to purchase a recycling sticker you may do so by stopping by the DPW Office at any time Monday – Thursday 8:00 AM to 4:30 PM and Friday 8:00 AM to 3:30 PM at Town Hall. **The vehicle registration must be shown in order to purchase sticker.**

On Saturdays, stickers may be purchased from the attendant at the Facility with registration of the vehicle that will be used. **Vehicles with commercial plates must purchase stickers in the DPW Office during the week.**

The cost is \$10 (\$5 for seniors over 65). If you have any questions you may call the DPW Office at 781-334-9500 or email us at dpw@town.lynnfield.ma.us

Commercial Vehicle Policy

- Pickup trucks only
- Must show a current Lynnfield Vehicle Registration
- Resident has no other vehicle registered in town (*as per validated with the Town Clerk Office*)
- No dump bodies
- No Landscaping/Contracting trucks with company lettering
- Must purchase sticker at DPW Office during the week

Definition of Resident: (any one of the below)

- Valid MA Driver's License with Lynnfield Address
- Registered to Vote in Lynnfield Validate with Voter List from Town Clerk

**DISCLOSURE BY MUNICIPAL EMPLOYEE
OF FINANCIAL INTEREST IN A MUNICIPAL CONTRACT
AS REQUIRED BY G. L. c. 268A, § 20(b)**

MUNICIPAL EMPLOYEE INFORMATION	
Name of municipal employee:	
Title/ Position	
Fill in this box if it applies to you.	If you are a municipal employee because a municipal agency has contracted with your company or organization, please provide the name and address of the company or organization.
Agency/ Department	
Agency Address	
Office phone:	
Office e-mail:	
	Check one: <input type="checkbox"/> Elected or <input type="checkbox"/> Non-elected
Starting date as a municipal employee.	
BOX # 1 Select either STATEMENT #1 or STATEMENT #2. Write an X beside your financial interest.	<p>ELECTED MUNICIPAL EMPLOYEE</p> <p>I am an elected municipal employee.</p> <p><input type="checkbox"/> STATEMENT #1: I had one of the following financial interests in a contract made by a municipal agency before I was elected to my municipal employee position. I will continue to have this financial interest in a municipal contract. OR</p> <p><input type="checkbox"/> STATEMENT #2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
BOX # 2 Select either STATEMENT #1 or STATEMENT #2.	<p>NON-ELECTED, COMPENSATED MUNICIPAL EMPLOYEE</p> <p>I am a non-elected municipal employee.</p> <p><input type="checkbox"/> STATEMENT # 1: I had one of the following financial interests in a contract made by a municipal agency before I took a position as a non-elected municipal employee. I will continue to have this financial interest in a municipal contract.</p>

<p>Write an X beside your financial interest.</p>	<p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> A municipal agency has a contract with me, but not an employment contract.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p>-- OR --</p> <p><input type="checkbox"/> STATEMENT # 2: I will have a new financial interest in a contract made by a municipal agency.</p> <p>My financial interest in a municipal contract is:</p> <p><input type="checkbox"/> I have a non-elected, compensated municipal employee position.</p> <p><input type="checkbox"/> A municipal agency has a contract with me.</p> <p><input type="checkbox"/> I have a financial benefit or obligation because of a contract that a municipal agency has with another person or an entity, such as a company or organization.</p> <p><input type="checkbox"/> I work for a company or organization that has a contract with a municipal agency, and I am a "key employee" because the contract identifies me by name or it is otherwise clear that the city or town has contracted for my services in particular.</p>
<p>FINANCIAL INTEREST IN A MUNICIPAL CONTRACT</p>	
<p>Name and address of municipal agency that made the contract</p>	
<p>Please put in an X to confirm these facts.</p>	<p>"My Municipal Agency" is the municipal agency that I serve as a municipal employee.</p> <p>The "contracting agency" is the municipal agency that made the contract.</p> <p><input type="checkbox"/> My Municipal Agency is not the contracting agency.</p> <p><input type="checkbox"/> My Municipal Agency does not regulate the activities of the contracting agency.</p> <p><input type="checkbox"/> In my work for my Municipal Agency, I do not participate in or have official responsibility for any of the activities of the contracting agency.</p> <p><input type="checkbox"/> The contract was made after public notice or through competitive bidding.</p>
<p>FILL IN THIS BOX OR THE BOX BELOW</p>	<p>ANSWER THE QUESTION IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND YOU.</p> <p>- Please explain what the contract is for.</p>
<p>FILL IN THIS BOX OR THE BOX ABOVE</p>	<p>ANSWER THE QUESTIONS IN THIS BOX IF THE CONTRACT IS BETWEEN THE CITY OR TOWN AND ANOTHER PERSON OR ENTITY.</p> <p>- Please identify the person or entity that has the contract with the municipal agency.</p> <p>- What is your relationship to the person or entity?</p> <p>- What is the contract for?</p>

What is your financial interest in the municipal contract?	- Please explain the financial interest and include the dollar amount if you know it.
Date when you acquired a financial interest	
What is the financial interest of your immediate family?	- Please explain the financial interest and include the dollar amount if you know it.
Date when your immediate family acquired a financial interest	
Write an X to confirm each statement.	<p>FOR A CONTRACT FOR PERSONAL SERVICES –</p> <p>Answer the questions in this box ONLY if you will have a contract for personal services with a municipal agency (i.e., you will do work directly for the contracting agency).</p> <p>I will have a contract with a municipal agency to provide personal services.</p> <p><input type="checkbox"/> The services will be provided outside my normal working hours as a municipal employee.</p> <p><input type="checkbox"/> The services are not required as part of my regular duties as a municipal employee.</p> <p><input type="checkbox"/> For these services, I will be compensated for not more than 500 hours during a calendar year.</p>
Employee signature:	
Date:	

Attach additional pages if necessary.

NOT A PERSONAL SERVICES CONTRACT -- File disclosure with the city or town clerk.

SEE CERTIFICATION AND APPROVAL REQUIRED FOR PERSONAL SERVICES CONTRACTS, BELOW.

FOR CONTRACTS FOR PERSONAL SERVICES ONLY:

If you are disclosing a financial interest in a contract for personal services with a municipal agency, you must file the Certification below signed by the head of the contracting agency, and you must get approval of the exemption from the city council, board of aldermen, board of selectmen or town council.

CERTIFICATION BY HEAD OF CONTRACTING AGENCY

	INFORMATION ABOUT HEAD OF CONTRACTING AGENCY
Name:	
Title/ Position	
Municipal Agency:	
Agency Address:	
Office Phone:	
	CERTIFICATION
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to my municipal agency, identified above. I certify that no employee of my agency is available to perform the services described above as part of his or her regular duties.
Signature:	
Date:	

**APPROVAL BY CITY COUNCIL, BOARD OF ALDERMEN,
BOARD OF SELECTMEN OR TOWN COUNCIL**

	INFORMATION ABOUT APPROVING BODY
Name:	
Title/ Position	
Agency Address:	
Office Phone:	
	APPROVAL
	I have received a disclosure under G.L. c. 268A, § 20(b) from a municipal employee who seeks to provide personal services to a municipal agency, identified above. The exemption under § 20(b) is approved.
Signature:	On behalf of the Council or Board, I sign this approval.
Date:	

**Attach additional pages if necessary.
File disclosure, Certification and Approval with the city or town clerk.**

TOWN OF LYNNFIELD, MASSACHUSETTS



Office of
**DIVISION OF ZONING
ENFORCEMENT & INSPECTION**

Building Department
Town Hall
Summer Street
Lynnfield, Mass. 01940
(781) 334-9470

May 31, 2016

BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Alexander Styller
239 Commercial Street
Unit B
Malden, Ma 02148

Re: Notice to Cease and Desist From Violation of Zoning Bylaws

Dear Mr. Styller:

I am writing in my capacity as Building Inspector of the Town of Lynnfield, Massachusetts (the "Town").

The records in the Town's Assessors' office show that you are the owner of the real property known and numbered as 8 Needham Road (the "Premises"). A review of the "Airbnb" web site discloses that you are offering to make the Premises, in whole or in part, available for lodging purposes on a short-term rental basis. Under zoning law, such a use would either be a "hotel" use or a "lodging or rooming house use." I am sending you this letter because the Premises are located in either the Single Residence RC District of the Town. A hotel use is forbidden in both districts. A lodging house use is likewise forbidden, except by special permit. I am writing because the records of the Town show that you have not obtained such a special permit.

This letter constitutes formal, legal notice that the Premises stand in violation of the Zoning Bylaws for the reason set forth above. You are hereby ORDERED to cease and desist from such violation forthwith, and specifically to remove all mention of the Premises from the Airbnb web site and any similar marketing platform. If you have failed, within a period of thirty (30) days from the date hereof, to comply with the said terms and conditions, I will proceed with enforcement action which may include, without limitation, the issuance of fines and/or the commencement of a suit for injunctive relief in Essex Superior Court.

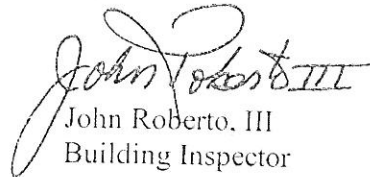
Alexander Styller

May 31, 2016

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You have the right to appeal from this order to the Town's Zoning Board of Appeals within thirty (30) days. It is my practice to stay enforcement pending the outcome of such an appeal. Kindly address any correspondence concerning this matter to Town Counsel Thomas A. Mullen, 40 Salem Street, Suite 12, Lynnfield, MA 01940, but please note that such correspondence does NOT constitute an appeal or delay the implementation of this order.

Sincerely,



John Roberto, III
Building Inspector

cc: Alexandra Styller (by first class mail, postage prepaid)
c: Lynnfield Cease&Desist-AirB,&B

TOWN of LYNNFIELD PUBLIC PARKS/ GROUNDS
 FACILITIES USE PERMIT APPLICATION

<u>LYNNFIELD COMMONS</u>	<u>JORDAN PARK</u>	<u>NEWHALL PARK</u>	<u>GLEN MEADOW PARK</u>	<u>PILLINGS POND PARK</u>
<input checked="" type="checkbox"/> Use of Town Hall Parking lot	Parking lot for ___ cars	Parking lot for ___ cars	Parking lot for ___ cars	___ Use of canoe landing
<input checked="" type="checkbox"/> Electricity ___ outlets	___ Tot lot	___ Tot lot	___ Tot lot	___ List of chemicals, fuels, or other potentially harmful materials to be used for this event
<input checked="" type="checkbox"/> Need to block off	___ Baseball field1	___ Baseball Field	___ Baseball Field	
___ S. Common St.	___ Baseball field2	___ Back field area	___ Picnic/hut area	
<input checked="" type="checkbox"/> Trash barrels needed	___ Soccer field	___ Tennis Court1	___ Tennis Court1	
		___ Tennis court2	___ Tennis Court2	
		___ Tennis Court3	___ Tennis Court3	

ONLY THOSE FACILITIES OR EQUIPMENT REQUESTED ON THIS APPLICATION MAY BE USED

DATE(S) WANTED JUNE 27, 2016 TIME IN & OUT of Event 6:00 - 8:00 PM

ORGANIZATION VETERAN'S SERVICES PURPOSE (Explain fully) PAO DAY/MEMORIAL DAY

COOKOUT TO REPLACE MEMORIAL DAY PAID-OUT.

We will will not be providing food/ beverages We will need ___ dumpster * We expect 400 people We will need 2 hours before and 2 after event for setup and cleanup We ___ will not charge admission We will ___ will not need traffic barrels/signs

We will not be using electricity We will ___ will not be providing Port-a-Potty**

* fee of \$100 per dumpster

**to be supplied by organization

PLEASE BE AWARE OF THE FOLLOWING RULES AND REGULATIONS FOR USE OF ANY LYNNFIELD PUBLIC PROPERTY: NO USE OF TOBACCO PRODUCTS, NO ALCOHOLIC BEVERAGES ON PREMISES, AT ANY TIME. WE ASK YOU TO ANNOUNCE THESE RULES TO YOUR PATRONS EITHER ORALLY OR IN WRITING. Please initial that you have read the attached Rules & Regulations with this permit

USER'S PRINTED NAME BRUCE E. STEGEL DATE 5/31/16

ORGANIZATION VETERAN'S SERVICES DAYTIME PHONE# 781-334-9874 CELL PHONE# 781-254-1160

ORGANIZATIONS AUTHORIZED SIGNATURE Bruce E. Stegel DATE 5/31/16

ADDRESS (For Billing Purposes) Town Hall Town: LYNNFIELD State: MA Zip: 01940

DIRECTOR of PUBLIC WORKS SIGNATURE _____ DATE ___/___/___

Note: All Rental Applications must be approved by the Recreation Committee before submitting to the Director of Public Work's Office.

REQUESTS MUST BE MADE AT LEAST ONE WEEK PRIOR TO THE EVENT

Note: There will be a minimum three hour charge if a DPW employee is required

TOWN of LYNNFIELD PUBLIC PARKS/ GROUNDS
FACILITIES USE PERMIT APPLICATION

LYNNFIELD COMMONS

JORDAN PARK

NEWHALL PARK

GLEN MEADOW PARK

PILLINGS POND PARK

Use of Town Hall Parking lot _____ cars
 _____ Electricity _____ outlets
 _____ Need to block off _____
 S. Common St. _____
 Trash barrels needed 3
 _____ Use of canoe landing
 _____ List of chemicals, fuels, or other potentially harmful materials to be used for this event _____
 _____ Tot lot
 _____ Baseball Field
 _____ Back field area
 _____ Soccer field
 _____ Tennis Court1
 _____ Tennis court2
 _____ Tennis Court2
 _____ Tennis Court3

ONLY THOSE FACILITIES OR EQUIPMENT REQUESTED ON THIS APPLICATION MAY BE USED

DATE(S) WANTED 6/24/2016 TIME IN & OUT of Event 11am - 2:30pm

ORGANIZATION Lynnfield Public Library PURPOSE (Explain fully) Summer Reading Kickoff Party
12pm will be lawn games, and at 1pm will be a guest storyteller in the Meeting House

We will will not be providing food/ beverages We will need _____ dumpster * We expect 100 people We will need 1/2 hours before and 1/2 after event for setup and cleanup We will will not charge admission We will _____ will not need traffic barrels/signs
 We will will not be providing Port-a-Potty**
 * fee of \$100 per dumpster
 **to be supplied by organization

PLEASE BE AWARE OF THE FOLLOWING RULES AND REGULATIONS FOR USE OF ANY LYNNFIELD PUBLIC PROPERTY: NO USE OF TOBACCO PRODUCTS, NO ALCOHOLIC BEVERAGES ON PREMISES, AT ANY TIME. WE ASK YOU TO ANNOUNCE THESE RULES TO YOUR PATRONS EITHER ORALLY OR IN WRITING. Please initial that you have read the attached Rules & Regulations with this permit [initials]

USER'S PRINTED NAME Jonathan Nichols DATE 6/1/16
 ORGANIZATION Lynnfield Public Library DAYTIME PHONE# 781.334.5411
 ORGANIZATION AUTHORIZED SIGNATURE Holly Meehan CELL PHONE# _____
 ADDRESS (For Billing Purposes) _____ DATE 6/1/16 Zip: _____
 DIRECTOR of PUBLIC WORKS SIGNATURE _____ Town: _____ State: _____ DATE ____/____/____

Note: All Rental Applications must be approved by the Recreation Committee before submitting to the Director of Public Work's Office.

REQUESTS MUST BE MADE AT LEAST ONE WEEK PRIOR TO THE EVENT

Note: There will be a minimum three hour charge if a DPW employee is required

PROCLAMATION

We, the Board of Selectmen of the Town of Lynnfield, Massachusetts, by virtue of the authority vested in us by the people of Lynnfield as elected officials, do hereby proclaim July 26, 2016, as

*Spirit of the 26th Anniversary of the
Americans with Disability Act (ADA) Day*

We urge all citizens of the Town of Lynnfield, its community leaders, businesses and government officials, to celebrate the contributions that people with disabilities have made and continue to make.

As Selectmen for the Town of Lynnfield, we renew our commitment to upholding the nondiscrimination principles of the ADA.

We urge that all citizens support the efforts of the Independent Living Center of the North Shore and Cape Ann, Inc., which is the voice of all persons with disabilities and their families. This proclamation is an acknowledgement of the rights of all persons with disabilities under the ADA and their daily activities, struggles and triumphs here in our Town.

In witness whereof, we have hereby set our hands and seal of the Town of Lynnfield this 7th day of June, 2016.

Philip B. Crawford, Chairman

Christopher J. Barrett, Vice Chairman

Richard P. Dalton, Selectman



INDEPENDENT LIVING CENTER of the North Shore and Cape Ann, Inc.

27 CONGRESS STREET, SUITE 107 · SALEM, MA 01970
(978) 741-0077 v/tty · TOLL FREE: (888) 751-0077 v/tty
FAX: (978) 741-1133 · WEB ADDRESS: www.ilcnscsca.org

Member: Aging & Disability Resource Consortium of the Greater North Shore

SERVING:

Beverly

May 13, 2016

Danvers

Essex

Gloucester

Hamilton

Ipswich

Lynn

Lynnfield

Manchester
By-The-Sea

Marblehead

Melrose

Middleton

Nahant

North Reading

Peabody

Reading

Rockport

Rowley

Salem

Saugus

Stoneham

Swampscott

Topsfield

Wakefield

Wenham

James Boudreau, Town Administrator
Town of Lynnfield
Town Hall
55 Summer Street
Lynnfield, MA 01940-1861

Dear Town Administrator Boudreau:

July 26, 2016 marks the Twenty-Sixth Anniversary of the signing of the Americans with Disabilities Act (ADA). To commemorate this anniversary, the Independent Living Center of the North Shore and Cape Ann, Inc. (ILCNCSA) requests that the Town of Lynnfield proclaim July 26, 2016 as "ADA Day". The ILCNSCA will designate one of our employees, and perhaps a Board Member, to visit Lynnfield to receive this proclamation and we will send a press release to the local press in order to further publicize your issuing of this important proclamation.

If you can honor this request please contact me, at (978) 741-0077 x 140 to arrange a location, date and time for this proclamation issuance event. If possible, we would like to have the issuance event before or during the week of July 18-22, 2016. If you cannot arrange to issue your proclamation to ILCNSCA directly, you may send it by mail to Mary Margaret Moore, Executive Director, at the address above.

For your convenience, I have enclosed a sample proclamation that you may adapt for your municipality. If you have any questions or need further information, please contact me at (978) 741-0077 x 140, by fax at (978) 741-1133 or by email at smcduff@ilcnscsca.org. Thank you.

Yours truly,

Shawn McDuff
Deputy Director

CC: Mary Margaret Moore, Executive Director; Joe Karaman, Board President,
ILCNCSA; File

Enclosure: Proclamation sample