

**TOWN OF NORTHBRIDGE  
BOARD OF SELECTMEN'S MEETING  
VIRTUAL MEETING USING ZOOM  
April 26, 2021 at 7:00 PM**

**Join Zoom Meeting:** <https://us02web.zoom.us/j/85676949379?pwd=aFJoa0xGeTN6OEtdNEh0b05hd092UT09>

**Meeting ID:** 856 7694 9379

**Passcode:** 882059

**Dial by phone:** 1 646 558 8656

**Please mute your microphone unless you are speaking or want to speak. Inappropriate comments and/or disruptive behavior will result in immediate dismissal.**

**Call Meeting to Order:** Pursuant to Governor Baker's March 12, 2020 Order Suspending Certain Provisions of the Open Meeting Law, G.L. c. 30A, §18, and the Governor's March 15, 2020 Order concerning imposition on strict limitations on the number of people that may gather in one place, meetings of the Northbridge Board of Selectmen will be conducted via remote participation to the greatest extent possible. No in-person attendance of members of the public will be permitted, but every effort will be made to ensure that the public can adequately access the proceedings as provided for in the Order.

**PLEDGE OF ALLEGIANCE**

**I. APPROVAL OF MINUTES**

**II. PUBLIC HEARING**

**III. APPOINTMENTS:**

**Joint Appointment By the Board of Selectmen and Planning Board:** A. Andrew Howden, Planning Board (Associate Member) / Present: Brian Massey, Plan. Bd. Chairman

**B. By the Town Manager:** Jonathan Shenian, Jr., Heavy Equipment Operator / Present: Jamie Luchini, Highway Supt.

**IV. CITIZENS' COMMENTS/INPUT**

**V. DECISIONS**

**C.** Village Congregational Church - Harvest Festival [Saturday, September 25, 2021]/Request **1)** to hang a banner across Church Street from Sunday, September 12, 2021 to Sunday September 26, 2021 **2)** to close Church Street from the corner from Church Street and Linwood Avenue to the Church Street and Park Street intersection in front of the post office, **3)** use of Memorial Park, on Saturday, September 25, 2021 from 8 AM, until 4 PM, **4)** application for a One-Day Weekday Entertainment license on Saturday, September 25, 2021 from 8 AM, until 4 PM/**Present:** Harriet Forman

**D.** Northbridge Operation Graduation/Request to hang a banner across Church Street beginning May 23, 2021 until May 30, 2021 to congratulate the class of 2021[**Present:** Julie Cray]

**E.** REPM, Inc. [Stone Hill Condos] / Vote to accept monetary gift in the amount of \$50,000

**F.** Devaney Energy / Request reduction in Underground Storage Tank License Fee

**VI. DISCUSSIONS**

**VII. TOWN MANAGER'S REPORT**

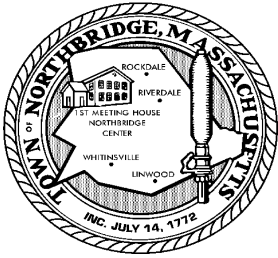
**VIII. SELECTMEN'S CONCERNS**

**IX. ITEMS FOR FUTURE AGENDA**

**X. CORRESPONDENCE**

**XI. EXECUTIVE SESSION**

|                             |                          |
|-----------------------------|--------------------------|
| Town Clerk: 2 Hard copies   | <input type="checkbox"/> |
| Web: Post time-stamped copy | <input type="checkbox"/> |



# A.

TOWN OF NORTHBRIDGE, MASSACHUSETTS

## COMMUNITY PLANNING & DEVELOPMENT

R. Gary Bechtholdt II, Town Planner  
7 Main Street Whitinsville, MA 01588  
Phone: (508) 234.2447 Fax: (508) 234.0814  
[gbechtholdt@northbridgemass.org](mailto:gbechtholdt@northbridgemass.org)

### MEMORANDUM

Date: April 22, 2021

TO: ALICIA M. CANNON, CHAIR BOARD OF SELECTMEN  
Adam D. Gaudette, Town Manager

From: R. Gary Bechtholdt II, Town Planner

RE: **PLANNING BOARD ASSOCIATE MEMBER**  
Andrew Howden Appointment to fill Vacancy

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Please be advised at its meeting of April 13, 2021, the Planning Board, upon motion duly made and seconded voted unanimously to recommend the appointment of Andrew Howden to serve as Associate Member.

The Planning Board feels Mr. Howden will be a worthy addition and appreciates his willingness to volunteer his time to serve in this capacity on the Planning Board.

In accordance with §173-49.2 [Associate Planning Board member] of the Northbridge Zoning Bylaw, the Planning Board and Board of Selectmen shall hold a joint vote to appoint an associate member of the Board. The appointment shall be for a term of 3-years.

Arrangements have been made for Brian Massey, Planning Board Chair and Andrew Howden, Candidate to attend Monday, April 26, 2021 (BOS meeting) to consider the joint appointment.

Take care & be well.

Cc: Town Clerk  
/File

TALENT BANK APPLICATION

please return to:

BOARD OF SELECTMEN  
Northbridge Town Hall  
7 Main Street  
Whitinsville, MA 01588

Pursuant to Town bylaw §4-209 (Eligibility for service),  
you must be a registered voter in order to serve.

yes per  
Town Clerk 2.26.21

Date: 2/23/21

Name Andrew Holden

P.O. Box \_\_\_\_\_

Home Address XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Email Address XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Telephone XXXXXXXXXXXXXXXXXXXX

Cell \_\_\_\_\_

Business Software - Oracle of America

Address 10 van de graaff dr. Burlington MA Tel. 203-274-2023

Current Occupation/Title Customer Experience Applications manager

Education Central CT State U. - BS marketing

Governmental, Civic & Community Activities CT Army national guard - Hon. discharge  
Eagle Scout, Oracle MAVEN Society

Charitable & Educational Activities Pre-covid - Food bank at Burlington  
Clothes for kids - Allston

Town Committees or Offices \_\_\_\_\_

I am interested in the following Committees: Zoning appeals, Economic dev, planning

Please indicate whether the applicant and/or any family members are employed by the Town of  
Northbridge. No

NAME: Andrew Howden

PRECINCT#

TOWN OF NORTHBRIDGE

COMMITTEE INTEREST (Indicate Committee preference)

- |                   |    |
|-------------------|----|
| 1. Economic dev.  | 4. |
| 2. Zoning appeals | 5. |
| 3. Planning       | 6. |

not sure of the ask

Present Interest or business affiliation (dates, places)

2019-2020                      2015-present  
Northbridge ub Scots, oracle waven (company volunteers for vets) - various places  
Experience: Volunteer, social service, business (dates, places)  
worked with city of Boston technology dept. and teams on large scale HR initiatives and technology rollouts

Deep knowledge of technology and enterprise systems as well as the procurement process for multi-million dollar acquisitions and sales (10 yrs exp)  
Special skills and education (be specific)

I have specific understandings of progressive agendas, streamlining operations  
How experience relates to particular committee interest  
improving efficiencies for large organizations. I have years of government and municipal partnership experience, leading committees and working with large and small groups to make ideas a reality.

ADDITIONAL COMMENTS:

Mail completed form to:

Northbridge Town Hall  
Office of the Town Manager  
7 Main Street  
Whitinsville, MA 01588



# Town of Northbridge Department of Public Works

# B.

11 Fletcher Street, P.O. Box 88

Whitinsville, Massachusetts 01588-0088

Tel. No. (508) 234-3581 – Fax. No. (508) 234-0807

*Jamie C. Luchini*  
*DPW Superintendent – Highways, Grounds & Facilities*

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## MEMORANDUM

Date: March 18, 2021

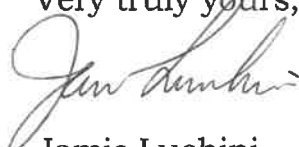
RE: Heavy Equipment Operator Position

To: Adam Gaudette  
Town Manager

Mr. Gaudette,

We received four applications for the position of Heavy Equipment Operator. All four applicants were interviewed on March 15, 2021. After the interviews, we decided on the most qualified for the position available and checked references. At this time, we would like to recommend Jonathan Shenian Jr. for the available position, pending a pre-employment physical and CORI check.

Very truly yours,



Jamie Luchini

# JONATHAN SHENIAN JR.

XXXXXXXXXXXXXXXXXXXX  
jshenian408@gmail.com  
XXXXXXXXXXXXXXXXXXXX

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February 18, 2021

Northbridge DPW

RE: Truck Driver, Equipment Operator

Dear Hiring Manager,

Please accept this letter as an expression of my interest in the Truck Driver, Equipment Operator position. I am a highly motivated and progress-focused CDL Truck Driver, Heavy Equipment Operator with a long-standing background in this industry. With a track record of initiative and dependability, I have devised strategic initiatives which I believe will prove valuable to Northbridge DPW.

Throughout the course of my career, I have perfected my driving and operating abilities. I am a capable and consistent problem-solver skilled at prioritizing and managing projects with proficiency.

In my previous role, I contributed leadership, motivation, and experience toward team efforts and business improvements. I am progressive minded and in tune with new developments in my field. I have proven to be effective and collaborative with strong decision-making talents. I enjoy collective brainstorming sessions which all me to coordinate activities to achieve a common goal.

Please take a moment to review my attached resume and credentials. I would greatly appreciate the opportunity to speak with you regarding my candidacy.

Thank you for your consideration.

Sincerely,

Jonathan Shenian Jr.



- Kept various types of machinery in proper working order by repairing and replacing malfunctioning parts.

**CDL Truck Driver, 04/2020 to 12/2020**

**McCarthy Pools – Southborough, MA**

- Maintained safe driving record by observing all road rules, remaining cautious and alert in unfamiliar areas and keeping control of vehicle at all times.
- Maximized load safety by balancing, securing and weighing products.
- Completed daily inspections, basic maintenance and common repair actions to keep equipment operating at full capacity.

**Automotive Technician, 05/2015 to 04/2018**

**Cappy's Automotive – Douglas, MA**

- Disassembled and repaired diesel engines in automobiles, trucks, buses and construction vehicles.
- Used specialty equipment, standard tools, and gauges to complete assessments and repairs.
- Welded metal parts with gas welding equipment as specified by layout, welding diagram, or work order.
- Employed wide variety of hand and power tools including hoists, drills, precision measuring instruments and electronic testing devices.
- Performed preventative maintenance on engines, transmissions, tires and other vehicle systems.
- Performed various engine repairs and rebuilds on Cummins, Duramax and Powerstroke Diesel engines in both stock form and high performance applications.

**Infantry Rifleman, 01/2008 to 11/2014**

**US Army**

- Held highest position of light infantry platoon sergeant (E7) responsible for welfare, morale, safety, physical fitness and combat readiness of more than 20 enlisted soldiers in a light infantry platoon.
- Combat deployments in both Operation Iraqi Freedom and Operation New Dawn, awarded the Combat Infantryman's Badge during both.
- Graduate of Airborne School, Air Assault School, Ranger School, Combat Lifesaver Course and John F. Kennedy school of Special Warfare.
- Earned the Expert Infantryman's Badge, (3 )Army Commendation Medals, (4 ) Army Achievement Medals, (2) Good Conduct Medals and The Army Physical Fitness Badge.
- Advised and assisted in over 300 combat and training operations in Iraq, Kuwait, South Korea, Germany, Ireland and the United States.
- Selected as Non-commissioned officer of the Month twice.

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**EDUCATION**

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**High School:** Automotive Technology

**Blackstone Valley Regional Vocational Technical High School - Upton, MA**

**GED:** 10/2007

**Quinsigamond Community College - Worcester, MA**

**Associate of Science:** General Studies

**Columbia College - Columbia, MO**

**Associate of Science:** Criminal Justice

**Quinsigamond Community College - Worcester, MA**

**Melissa Ciaramitaro**

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**From:** Harriet Forman <harrietf@charter.net>  
**Sent:** Monday, April 12, 2021 11:32 AM  
**To:** Melissa Ciaramitaro  
**Subject:** VCC - Banner and Road Closure

Hi Melissa,

1.) I am writing to request that the Village Congregational Church be permitted to have a banner hung across Church Street to advertise their Harvest Festival. We would appreciate it being up from Sept. 12-26, 2021. We have the banner, and would need the Fire Dept. to hang it for us.

2.) We also request that a portion of Church St. be closed during the hours of the fair on Saturday, Sept. 25. We would need the road closed off from 8:00 am until 4:00 pm. The fair runs from 9 am until 3 pm, but we need to be able to safely set up and take down using the street area between the church and the town common. The length of Church St. we would need closed would extend from the corner of the Common at the intersection of Church St. and Linwood Ave., up to the intersection of Church St. and Park St., in front of the Post Office.

Thank you so much,  
Harriet Forman

## Memorial Park Request Form

Event Date: September 25, 2021 Time: 9:00 am to 3:00 pm

Rain date: September 26, 2021

Organization: Village Congregational Church

**Description of the event:**

Community Harvest Festival including a tag sale, crafts, entertainment, raffles, and array of foods, drinks, music, and children's games. Open to the public.

|                                    |   |  |
|------------------------------------|---|--|
| Do you plan to serve alcohol?      | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| Do you plan to serve food?         | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| Do you plan to have entertainment? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |

Contact information: Harriet Forman, Claudia Dexter 508-234-9998, 508-234-7901.  
(Name) (Phone)

Next available agenda: \_\_\_\_\_

Date approved: \_\_\_\_\_

Date and time available: \_\_\_\_\_

cc: Chief of Police  
DPW Director

Prior to consideration by the Board of Selectmen, any requests concerning the use of the Town Common shall be jointly referred to the Director of Public Works and the Chief of Police for comment. If they deem the use appropriate, they are encouraged to recommend any condition they feel necessary to protect the public's safety and preserve the character and integrity of the Town Common. These conditions would then be incorporated into the formal approval, which would be issued by the Board of Selectmen.

**Note:** *At their meeting of December 5, 2005, the Selectmen voted unanimously to approve the above policy as amended by Selectman Davis: **That there will be no vehicular traffic allowed on the Common without prior approval from the DPW Director or the Police Department.***

Please note in addition to this form we will also need the following:

\_\_\_\_\_ Business Certificate/Articles of Organization [If applicable]

\_\_\_\_\_ Hold Harmless Agreement

\_\_\_\_\_ Certificate of Insurance [Naming the Town as an additional insured]

**USE OF TOWN OF NORTHBRIDGE**

**PUBLIC WAYS FOR USE OF MEMORIAL PARK**

**EVENT: Village Congregational Harvest Festival**

**RELEASE OF CLAIMS, INDEMNITY AND HOLD HARMLESS AGREEMENT**

***\*\*\*Please read this document thoroughly before completing and signing\*\*\****

I, Vincent Osterman, Moderator of Village Congregational Church, in consideration of my use of the Town of Northbridge's Public Ways for a non-town sponsored event on Sept. 25, 2021, and for other good and valuable consideration hereby acknowledged, do hereby agree to forever RELEASE the Town of Northbridge, its employees, agents, officers, volunteers, or contractors (the "Town"), from any and all claims, actions, rights of action and causes of action, damages, costs, loss of services, expenses, compensation and attorneys' fees that may have arisen in the past, or may arise in the future, directly or indirectly, from known and unknown personal injuries which I or my guests, employees, agents, successors or assigns may have as the result of my use or the use of my guests, employees or agents of the Town of Northbridge's Public Ways for a non-town sponsored event on Sept. 25, 2021, and all activities related thereto.

I further promise, to INDEMNIFY, REIMBURSE, DEFEND, and HOLD HARMLESS the Town against any and all legal claims and proceedings of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, including damages, costs and attorneys' fees, arising from personal injuries to myself or others or property damage resulting from my use, or the use of my guests, employees or agents, of the Town of Northbridge's Public Ways for a non-town sponsored event on Sept. 25, 2021, and all activities related thereto.

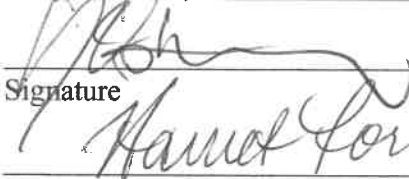
I hereby further covenant for myself, my successors and assigns not to sue the said Town on account of any such claim, demand or liability.

I am fully aware that by signing this document I am releasing the Town from liability that may arise as a result of the acts or omissions of the Town. Additionally, it is my intent to release the above mentioned parties from liability and defend and indemnify said parties for liability relating to any accident and resulting injuries and/or death that may occur as a result of my use, or the use of my guests, employees or agents, of the Town of Northbridge's Public Ways for a non-town sponsored event on Sept. 25, 2021, and all activities related thereto.

To the extent I am signing this document on behalf of an organization, corporation, association or similar entity, I represent that I am fully authorized by said entity to execute this document.

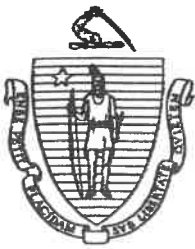
Witness my hand and seal this 12th day of April, 2021.

Name (Printed): Vincent Osterman

Signature 

Witness

**THIS FORM MAY NOT BE ALTERED**



The Commonwealth of Massachusetts  
 Department of Industrial Accidents  
 Office of Investigations  
 600 Washington Street  
 Boston, MA 02111  
 www.mass.gov/dia

**FORM MUST BE FILLED  
 OUT COMPLETELY**

If you carry Workers Comp. Insurance, you must provide proof to the Town in the form of a Certificate of Insurance.

**Workers' Compensation Insurance Affidavit: General Businesses**

**Applicant Information**

**Please Print Legibly**

Business/Organization Name: Village Congregational Church, Whitinsville, MA

Address: 5 Church St. Whitinsville, MA 01588

City/State/Zip: Vincent Osterman

Phone #: 5 Church St.

**Are you an employer? Check the appropriate box:**

1.  I am an employer with 7 employees (full and/or part-time).\*
2.  I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]
3.  We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]\*\*
4.  We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

**Business Type (required):**

5.  Retail
6.  Restaurant/Bar/Eating Establishment
7.  Office and/or Sales (incl. real estate, auto, etc.)
8.  Non-profit
9.  Entertainment
10.  Manufacturing
11.  Health Care
12.  Other church

\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

\*\*If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

**I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.**

Insurance Company Name: The Travelers Indemnity Co. of CT

Insurer's Address: One Tower Square

City/State/Zip: Hartford, CT 06183

Policy # or Self-ins. Lic. # UB5J484859

Expiration Date: 10/1/2021

**Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).**

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

**I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.**

Signature: [Handwritten Signature]

Date: 4/13/21

Phone #: 508-234-7901

**Official use only. Do not write in this area, to be completed by city or town official.**

City or Town: Northbridge

Permit/License # \_\_\_\_\_

Issuing Authority (circle one):

1. Board of Health 2. Building Department 3. City/Town Clerk 4. **Licensing Board** 5. Selectmen's Office  
 6. Other \_\_\_\_\_

Contact Person: Melissa Wetherbee

Phone #: 508-234-2095



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/5/2021

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).

|  |  |  |                                 |
|--|--|--|---------------------------------|
| <b>PRODUCER</b><br>Gaudette Insurance Agency, Inc.<br>1 Plummers Corner<br>Whitinsville MA 01588                               | <b>CONTACT NAME:</b> Caren Fortin<br><b>PHONE (A/C No. Ext):</b> 508-266-6442<br><b>E-MAIL ADDRESS:</b> cfortin@gaudette-insurance.com | <b>FAX (A/C No.):</b> 508-234-8121   |                                 |
|  | <b>INSURER(S) AFFORDING COVERAGE</b>   |  |                                 |
| <b>INSURED</b><br>Village Congregational Church<br>Treasurer, Prudential Committee<br>5 Church Street<br>Whitinsville MA 01588 | VILLCON-01   | <b>INSURER A :</b> Great American Insurance Compa<br><b>INSURER B :</b> The Travelers Indemnity Compan<br><b>INSURER C :</b><br><b>INSURER D :</b><br><b>INSURER E :</b><br><b>INSURER F :</b> | <b>NAIC #</b><br>16691<br>25658 |

**COVERAGES**

CERTIFICATE NUMBER: 149364551

REVISION NUMBER:

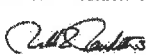
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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 INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS   |
|----------|---|-----------|----------|---------------|-------------------------|-------------------------|--|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: | Y         |          | PAC0660781    | 1/1/2021                | 1/1/2022                | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000<br>MED EXP (Any one person) \$ 5,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 3,000,000<br>PRODUCTS - COMP/OP AGG \$ 3,000,000<br>\$ |
|          | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY<br><input type="checkbox"/> HIRED AUTOS ONLY<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS ONLY   |           |          |               |                         |                         | COMBINED SINGLE LIMIT (Ea accident) \$<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$  |
| A        | <input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br><input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000                                     |           |          | UMB0660782    | 1/1/2021                | 1/1/2022                | EACH OCCURRENCE \$ 3,000,000<br>AGGREGATE \$ 3,000,000<br>\$   |
| B        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below   | Y/N<br>N  | N/A      | UB5J484859    | 10/1/2020               | 10/1/2021               | <input checked="" type="checkbox"/> PER STATUTE<br><input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>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)  
 RE: Harvest Festival Saturday, September 25, 2021 (Rain Date Sunday, September 26, 2021)

Town of Northbridge is Additional Insured under General Liability if required by contract, per form CG8970 attached.

**CERTIFICATE HOLDER****CANCELLATION**

|   |   |
|---|---|
| Town of Northbridge<br>7 Main Street<br>Whitinsville MA 01588 | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE<br> |
|---|---|

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Commonwealth of Massachusetts  
Department of Revenue  
Christopher C. Harding, Commissioner

mass.gov/dor

Letter ID: L1932917376  
Notice Date: December 3, 2018  
MA Taxpayer ID: 10754087



## CERTIFICATE OF EXEMPTION



VILLAGE CONGREGATIONAL CHURCH IN  
PO BOX 217  
WHITINSVILLE MA 01588-0217

000238

Attached below is your Certificate of Exemption (Form ST-2). Cut along the dotted line and display at your place of business. You must report any change of name or address to us so that a revised ST-2 can be issued.

DETACH HERE



MASSACHUSETTS DEPARTMENT OF REVENUE

Form ST-2

### Certificate of Exemption

VILLAGE CONGREGATIONAL CHURCH IN  
WHITINSVILLE  
PO BOX 217  
WHITINSVILLE MA 01588-0217

MA Taxpayer ID: 10754087  
Certificate Number: 49846272

This certifies that the organization named above is an exempt purchaser under Chapter 64H, section 6(d) or (e) of the Massachusetts General Laws. All purchases of tangible personal property by this organization are exempt from taxation to the extent that such property is used in the conduct of the business of the purchaser. Misuse of this certificate by any tax-exempt organization or unauthorized use of this certificate by any individual will lead to revocation. Willful misuse of this certificate is subject to criminal sanctions of up to one year in prison and \$10,000 (\$50,000 for corporations) in fines. This certificate is non-transferable and may be suspended or revoked for failure to comply with state laws and regulations.

Effective Date: January 4, 2019

Expiration Date: January 3, 2029

THE COMMONWEALTH OF MASSACHUSETTS  
TOWN OF NORTHBRIDGE

APPLICATION FOR A ONE-DAY WEEKDAY ENTERTAINMENT  
LICENSE

TO THE LICENSING AUTHORITIES:

The undersigned hereby applies for a License in accordance with the provisions of the Statutes relating thereto  
(FULL NAME OF PERSON, FIRM OR CORPORATION MAKING APPLICATION):

Village Congregational Church, Whitinsville, MA

TO: Obtain a One-day Entertainment License for:


|                                      |   |   |  |   |  |  |
|--------------------------------------|---|---|--|---|--|--|
| <b>Type:</b> (Check all that apply): |   |   | <input type="checkbox"/> Concert   | <input type="checkbox"/> Dance                                | <input checked="" type="checkbox"/> Exhibition | <input type="checkbox"/> Cabaret Public Show |
|                                      |   |   | <input type="checkbox"/> Live band   | <input checked="" type="checkbox"/> Other: <u>Disc Jockey</u> |  |  |
| <b>Includes:</b>                     | <input type="checkbox"/> Dancing by patrons | <input type="checkbox"/> Dancing by entertainers or performers              | <input checked="" type="checkbox"/> Recorded music                                     |   |  |  |
|                                      | <input type="checkbox"/> Live music         | <input checked="" type="checkbox"/> Amplification System                    | <input type="checkbox"/> Floor show  |   |  |  |
|                                      | <input type="checkbox"/> Light show         | <input type="checkbox"/> Theatrical exhibition, play or moving picture show | <input type="checkbox"/> Other dynamic audio or visual show (whether live or recorded) |   |  |  |
|                                      |   |   | <input type="checkbox"/> INDOOR  | <input checked="" type="checkbox"/> OUTDOOR                   | <input type="checkbox"/> BOTH                  |  |

GIVE LOCATION BY STREET AND NUMBER:

AT: 5 Church St. Whitinsville, MA and Northbridge Town Common  
in said Town of Northbridge in accordance with the rules and regulations made under authority of said Statutes.

ON: (date and time)\* September 25, 2021, 9 am - 3 pm

Print Name: Vincent Osterman  
Address: 5 Church St.  
City: Whitinsville, MA  
State, Zip: 01588  
Phone: 508-234-7901  
Email: office@vccucc.org

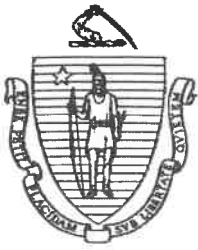
  
(Signature of Applicant)

|           |        |        |
|-----------|--------|--------|
| Received: | _____  | _____  |
|           | (Date) | (Time) |
| Agenda:   | _____  |        |

\_\_\_\_\_  
Date License Granted

**\*\*Please note a separate application is needed for a one-day Sunday Entertainment**





The Commonwealth of Massachusetts  
 Department of Industrial Accidents  
 Office of Investigations  
 600 Washington Street  
 Boston, MA 02111  
 www.mass.gov/dia

**FORM MUST BE FILLED  
 OUT COMPLETELY**

If you carry Workers Comp. Insurance, you must provide proof to the Town in the form of a Certificate of Insurance.

**Workers' Compensation Insurance Affidavit: General Businesses**

**Applicant Information**

**Please Print Legibly**

Business/Organization Name: Village Congregational Church, Whitinsville, MA

Address: 5 Church St. Whitinsville, MA 01588

City/State/Zip: Vincent Osterman Phone #: 5 Church St.

**Are you an employer? Check the appropriate box:**

- 1.  I am an employer with 7 employees (full and/or part-time).\*
- 2.  I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]
- 3.  We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]\*\*
- 4.  We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]

**Business Type (required):**

- 5.  Retail
- 6.  Restaurant/Bar/Eating Establishment
- 7.  Office and/or Sales (incl. real estate, auto, etc.)
- 8.  Non-profit
- 9.  Entertainment
- 10.  Manufacturing
- 11.  Health Care
- 12.  Other church

\*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

\*\*If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

**I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.**

Insurance Company Name: The Travelers Indemnity Co. of CT

Insurer's Address: One Tower Square

City/State/Zip: Hartford, CT 06183

Policy # or Self-ins. Lic. # UB5J484859 Expiration Date: 10/1/2021

**Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).**

Failure to secure coverage as required under Section 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

**I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.**

Signature: [Handwritten Signature] Date: 4/13/21

Phone #: 508-234-7901

**Official use only. Do not write in this area, to be completed by city or town official.**

City or Town: Northbridge Permit/License # \_\_\_\_\_

**Issuing Authority (circle one):**

- 1. Board of Health
- 2. Building Department
- 3. City/Town Clerk
- 4. **Licensing Board**
- 5. Selectmen's Office
- 6. Other \_\_\_\_\_

Contact Person: Melissa Wetherbee Phone #: 508-234-2095



Commonwealth of Massachusetts  
Department of Revenue  
Christopher C. Harding, Commissioner

mass.gov/dor

Letter ID: L1932917376  
Notice Date: December 3, 2018  
MA Taxpayer ID: 10754087



## CERTIFICATE OF EXEMPTION



VILLAGE CONGREGATIONAL CHURCH IN  
PO BOX 217  
WHITINSVILLE MA 01588-0217

000238

Attached below is your Certificate of Exemption (Form ST-2). Cut along the dotted line and display at your place of business. You must report any change of name or address to us so that a revised ST-2 can be issued.

DETACH HERE



MASSACHUSETTS DEPARTMENT OF REVENUE

Form ST-2

### Certificate of Exemption

VILLAGE CONGREGATIONAL CHURCH IN  
WHITINSVILLE  
PO BOX 217  
WHITINSVILLE MA 01588-0217

MA Taxpayer ID: 10754087  
Certificate Number: 49846272

This certifies that the organization named above is an exempt purchaser under Chapter 64H, section 6(d) or (e) of the Massachusetts General Laws. All purchases of tangible personal property by this organization are exempt from taxation to the extent that such property is used in the conduct of the business of the purchaser. Misuse of this certificate by any tax-exempt organization or unauthorized use of this certificate by any individual will lead to revocation. Willful misuse of this certificate is subject to criminal sanctions of up to one year in prison and \$10,000 (\$50,000 for corporations) in fines. This certificate is non-transferable and may be suspended or revoked for failure to comply with state laws and regulations.

Effective Date: January 4, 2019

Expiration Date: January 3, 2029



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/5/2021

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).

|  |  |  |
|--|--|--|
| <b>PRODUCER</b><br>Gaudette Insurance Agency, Inc.<br>1 Plummers Corner<br>Whitinsville MA 01588                               | <b>CONTACT NAME:</b> Caren Fortin<br><b>PHONE (A/C. No. Ext):</b> 508-266-6442<br><b>E-MAIL ADDRESS:</b> cfortin@gaudetite-insurance.com | <b>FAX (A/C. No.):</b> 508-234-8121  |
|  | <b>INSURER(S) AFFORDING COVERAGE</b>   |  |
| <b>INSURED</b><br>Village Congregational Church<br>Treasurer, Prudential Committee<br>5 Church Street<br>Whitinsville MA 01588 | VILLCON-01   | <b>INSURER A:</b> Great American Insurance Compa<br><b>INSURER B:</b> The Travelers Indemnity Compan<br><b>INSURER C:</b><br><b>INSURER D:</b><br><b>INSURER E:</b><br><b>INSURER F:</b> |
|  |  | <b>NAIC #</b><br>16691<br>25658  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**COVERAGES**

CERTIFICATE NUMBER: 149364551

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 INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS   |
|----------|---|-----------|----------|---------------|-------------------------|-------------------------|--|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: | Y         |          | PAC0660781    | 1/1/2021                | 1/1/2022                | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000<br>MED EXP (Any one person) \$ 5,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 3,000,000<br>PRODUCTS - COMP/OP AGG \$ 3,000,000<br>\$ |
|          | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY<br><input type="checkbox"/> HIRED AUTOS ONLY<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS ONLY   |           |          |               |                         |                         | COMBINED SINGLE LIMIT (Ea accident) \$<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$<br>\$  |
| A        | <input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br><input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000   |           |          | UMB0660782    | 1/1/2021                | 1/1/2022                | EACH OCCURRENCE \$ 3,000,000<br>AGGREGATE \$ 3,000,000<br>\$   |
| B        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below   | Y/N<br>N  | N/A      | UB5J484859    | 10/1/2020               | 10/1/2021               | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>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)

RE: Harvest Festival Saturday, September 25, 2021 (Rain Date Sunday, September 26, 2021)

Town of Northbridge is Additional Insured under General Liability if required by contract, per form CG8970 attached.

**CERTIFICATE HOLDER****CANCELLATION**
 Town of Northbridge  
 7 Main Street  
 Whitinsville MA 01588

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

© 1988-2015 ACORD CORPORATION. All rights reserved.

**Melissa Ciaramitaro**

---

**From:** Julie <jbcray@charter.net>  
**Sent:** Monday, April 19, 2021 1:03 PM  
**To:** Melissa Ciaramitaro  
**Cc:** Julie Cray  
**Subject:** Fwd: Northbridge Operation Graduation Banner.pdf  
**Attachments:** Northbridge Operation Graduation Banner.pdf

Dear Melissa,

Below is the pdf file of the banner I am seeking permission to hang in town as we discussed starting May 23, and / or May 21, which is the senior's official last day through Saturday May 29, 2021

Would it be possible for me to get on the next Selectman's meeting to ask for permission?

Thank you for your support and guidance as to what I do next. My printer was given your banner requirements about wind holes, size, etc. but I don't want to move forward with printing until I receive an approval.

I look forward to hearing back from you soon.

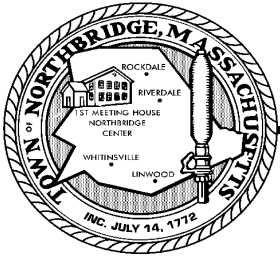
Julie Cray  
508 735 6806

Sent from my iPhone

Begin forwarded message:

**From:** Julie <jbcray@charter.net>  
**Date:** April 19, 2021 at 8:24:20 AM EDT  
**To:** Julie Cray <jbcray@charter.net>  
**Subject:** Northbridge Operation Graduation Banner.pdf

E  
Sent from my iPhone



# COMMUNITY PLANNING & DEVELOPMENT

E.

R. Gary Bechtholdt II, Town Planner  
7 Main Street Whitinsville, MA 01588  
Phone: (508) 234.2447 Fax: (508) 234.0814  
[gbechtholdt@northbridgemass.org](mailto:gbechtholdt@northbridgemass.org)

## MEMORANDUM

Date: April 12, 2021

TO: ALICIA M. CANNON, CHAIR BOARD OF SELECTMEN  
Adam D. Gaudette, Town Manager

From: R. Gary Bechtholdt II, Town Planner

RE: **STONE HILL CONDOMINIUMS**  
Monetary Donation -Acceptance of Gift

---

Arrangements have been made for the Board of Selectmen (Monday, April 26, 2021) to accept a monetary donation (/gift) from REPM, Inc., Owner/Developer of the Stone Hill Condominiums.

The funds in the amount of \$50,000.00 represents the second payment totaling \$467,500.00 for the Stone Hill Condominiums, where the Planning Board, as part of its Special Permit approval, allowed for payment in lieu of affordable units.

Reference is made to Planning memorandum dated February 01, 2021 attached hereto. Where monetary donation (/gift) is to be provided to the Town in accordance with the buildout schedule of the Stone Hill Condominiums Senior Living Development off Church Street.

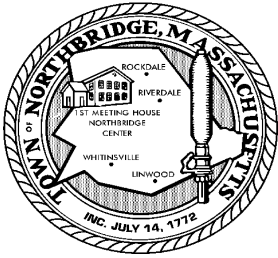
Planning suggests monetary donation be designated for the Senior Center. If agreeable, the Board may vote as follows:

*Vote to accept monetary donation (/gift) in the amount of \$50,000.00 from REPM, Inc. to be expended under the direction of the Director of Council on Aging towards capital improvements and/or programs at the Northbridge Senior Center.*

If you should require additional information or have any questions please contact the Planning office.

Take care & be well.

Cc: Planning Board      Bldg. Dept.      REPM, Inc.      /File



## COMMUNITY PLANNING & DEVELOPMENT

R. Gary Bechtholdt II, Town Planner  
7 Main Street Whitinsville, MA 01588  
Phone: (508) 234.2447 Fax: (508) 234.0814  
[gbechtholdt@northbridgemass.org](mailto:gbechtholdt@northbridgemass.org)

### MEMORANDUM

Date: February 01, 2021

TO: ALICIA M. CANNON, CHAIR BOARD OF SELECTMEN  
Adam D. Gaudette, Town Manager

From: R. Gary Bechtholdt II, Town Planner

RE: **STONE HILL CONDOMINIUMS**  
Monetary Donation -Acceptance of Gift

---

Arrangements have been made for the Board of Selectmen (Monday, February 08, 2021) to accept a monetary donation (/gift) from REPM, Inc., Owner/Developer of the Stone Hill Condominiums.

The funds, in the amount of \$50,000.00 represents the first of seven (7) payments (monetary donations) totaling \$467,500.00 for the Stone Hill Condominiums, where the Planning Board, as part of its Special Permit approval, allowed for payment in lieu of affordable units.

In accordance with the Planning Board Special Permit [03-SPP-2019], the monetary donation (/gift) in the amount of \$467,500.00 shall be allocated (earmarked) for the following:

- \$50,000 towards design/construction of a pocket-park at the site of the former Rockdale Youth Center;
- \$50,000 to the Senior Center to be used for capital improvements and/or programs;
- \$200,000 towards design/construction of bike path and/or walking trails along Linwood Ave (Mumford Riverwalk);
- \$50,000 towards improvements to Linwood Playground;
- \$50,000 towards roadway and/or sidewalk improvements along Church Street;
- \$50,000 to be deposited into Northbridge's CPA -Community Preservation Act funds; &
- \$17,500 towards planning initiatives

The monetary donations (/gift) is to be provided to the Town in accordance with the buildout schedule for the 104-unit Senior Living Development off Church Street. The above noted listing is not arranged in any priority or otherwise.

As part of its acceptance of gift, the Board of Selectmen may designate funds towards any of the specified activities above. Planning suggests monetary donation (\$50,000) be designated for the Linwood Playgrounds, to be expended under the direction of the Playground & Recreation Commission. If agreeable, the Board may take a vote as follows:

*Vote to accept monetary donation (/gift) in the amount of \$50,000.00 from REPM, Inc. to be expended towards improvements to the Linwood Playground, under the direction of the Playground & Recreation Commission.*

If you should require additional information or have any questions please contact the Planning office. Take care & be well.

F.



April 10, 2021  
Northbridge Selectmen  
Attn: Sharon L Susienka

**PROPOSAL**

Dear Sharon

Devaney Energy- License Fee

Here's what you we are looking for:

- We are looking to pay for one license fee not x 50
- This how all towns bill if you are required to get a license.
- We will still have to get all required permits for every propane tank and gas line installed for the town of Northbridge.
- If these homes we not Condos just Duplexes we would put the same amount of tanks in the same spots but no license would be required.
- We are looking to pay our fair share as always.

I hope this will answer all of your questions and I invite you to visit our website [www.devaneyenergy.com](http://www.devaneyenergy.com). Call me anytime for any further information.

Sincerely,

John Holmes  
Energy Specialist  
617-293-5871  
[jholmes@devaneyenergy.com](mailto:jholmes@devaneyenergy.com)

John Holmes

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Kristine Daniels

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