

AGENDA
May 8, 2018 at 8:30 a.m.
Foster Conference Room – City Hall
222 Lewis Street River Falls, WI 54022

*****Action May Be Taken On Any Of The Following Items*****

CALL TO ORDER

APPROVAL OF AGENDA/MINUTES

FINANCIAL REPORT

GRANT REQUESTS

1. 208 S Main St – Thermography of WI

OTHER BUSINESS

2. Business or other updates

ADJOURN

MINUTES

April 10th, 2018 at 8:30 a.m.
Foster Conference Room - City Hall
222 Lewis Street River Falls, WI 54022

CALL TO ORDER– Joleen Larson called the meeting to order at 8:33 a.m.

Members present: Joleen Larson, Kerri Olson, Mike Miller, Mike Pepin, Terry McKay, Lori Moran, Amy Halvorson, Chris Blasius

Members Absent: Shari Frisbee

Others present: Amy Peterson

Agenda/Meeting Minutes

The agenda and the March 2018 meeting minutes were reviewed. M/S McKay/Miller to approve the minutes; unanimous.

Financial Report

Olson reviewed the financial receipts and pending obligations.

Grant requests

414 S Main St – Junior’s Restaurant/Tap House – Peterson provided an overview of the project. M/S Pepin/Miller to approve a \$6,000 grant contingent on DRC approval. All in favor.

Other Business

1. Wayfinding Update/Budget Action – Peterson provided an update on the project including presentation of the sign family, proposed locations and staff’s recommendation for partner support. M/S McKay/Blasius to approve a BID financial project commitment of no more than \$15,450. \$7,000 will be provided from the 2017 earmark for the project and the \$8,450 may be spread over 2018/2019. The final amount provided will be contingent on actual bids. All in favor.
2. 2017 Act 189 – Peterson provided the group and update to recent legislation changes regarding financial reporting requirements. Currently the City takes care of the financial audit for the BID.
3. 2017 Community Development Annual Report – Peterson provide members an overview of the Department’s configuration as well as accomplishments in 2017.
4. Business or other updates – No updates as this time.

Next Meeting

Next meeting is June 12th at 8:30 a.m. in the Foster Room, City Hall.

ADJOURNMENT

Meeting adjourned at 9:32 a.m.

2018 BID Receipts & Disbursements

Checking Account balance forward as of December 31, 2017: \$ 25,232.46

<u>Date</u>	<u>Type</u>	<u>Check #</u>	<u>Project or Charge/Use</u>	<u>Amount</u>	<u>Balance</u>
01/12/2018	Debit	2867	Leitch Ins. Agency / liability ins.	- 600.00	\$ 24,632.46
01/31/2018	Debit	2868	Dept. of Financial Inst. / annual report filing fee	- 10.00	\$ 24,622.46
02/07/2018	Debit	2869	River City Stitch / sign grant	- 797.00	\$ 23,825.46
02/16/2018	VOID	2870	VOIDED check, incorrectly written		
02/23/2018	Debit	2871	Remax Synergy / sign grant	- 287.00	\$ 23,538.46
03/14/2018	Debit	2872	PressEnter! / web hosting	- 59.85	\$ 23,478.61
03/23/2018	Credit		2018 assessments paid to BID	+42,000.00	\$ 65,478.61
03/30/2018	Debit	2873	RF CAB/music in park sponsorship	- 1,000.00	\$ 64,478.61

Pending BID Obligations

Grants approved by BID

<u>Date approved</u>	<u>Entity receiving grant</u>	<u>Use of grant money</u>	<u>Amount granted</u>
02/13/2018	Glass Express	façade grant	\$ 7,000.00
03/13/2018	Mei Mei's	sign grant	\$ 1,000.00
04/10/2018	Junior's Restaurant/Tap House	façade grant	\$ 6,000.00
		Total to date:	\$ 14,000.00

Special Projects as outlined in "BID Board 2018 Budget"

<u>Explanation of special project</u>	<u>Estimated amount BID will contribute to project</u>
Division Street Bridge hanging baskets	\$ 6,500.00
Second Street gardens	\$ 1,500.00
Main Street benches/trash bins (purchase & maintenance)	\$ 2,400.00
River Dazzle parade sponsorship	\$ 6,000.00
Main Street banners/partnership with CAB	\$ 3,700.00
Building mural project (continuing & maintenance)	\$ 1,000.00
Large Main Street projects	\$ 2,500.00
	Total to date: \$ 23,600.00

One-time budgeted item

<u>Explanation of one-time budgeted item</u>	<u>Date approved</u>	<u>Amount approved</u>
Wayfinding implementation	02/14/2017	\$ 7,000.00
Wayfinding signage (\$4,250 in 2018; \$4,250 in 2019)	04/10/2018	\$ 4,250.00
	Total to date:	\$ 11,250.00

Summary

Pending Grants approved by BID:	\$ 14,000.00
Pending Special Projects BID participates in:	\$ 23,600.00
Pending One-Time Budgeted item:	<u>\$ 11,250.00</u>
Total pending BID obligations:	\$ 48,850.00

Balance in checking account as of 3/30/2018:	\$ 64,478.61
2018 pending obligations:	<u>\$ 48,850.00</u>
Funds available for grant requests:	\$ 15,628.61

**River Falls Main Street BID Board
Façade & Sign Grant Application**

Owner's Name: Lori Novak Phone #: 715-307-2207
 Applicant/Agent's Name: _____
 Business/Building: Thermography of Wisconsin
 Address of Project: 208 S. Main St.
 Daytime Phone: 715-307-2207 Fax: NA
 Email: ThermofWI@gmail.com

- Project Description: New sign for new business.
- Goal of Project: sign to help people find my business - let people know business is in town
- Project Time Frame: Ready to be hung by May 5
- Estimated Cost of Project: \$375.00

5. Grant Amount Requested

Signs & Awnings	\$ <u>131.00</u>
Building Façade & Exteriors	\$ <u>NA</u>
Total	\$ _____

- Have you contacted the City of River Falls and received approval from the Community Development Department or Design Review Committee? YES / NO
- Name of your Architect, Designer, and Contractor: (if applicable)
- Certificate of Insurance (with the City of River Falls as a notified party) must be obtained and submitted **before** the project is started, with a minimum liability limit of \$300,000.

The application must be completed and signed. ALL related documentation must be submitted prior to consideration.

I understand and agree to comply with all applicable codes, conditions of the Grant Agreement and conditions of approval. I certify that the above and attached information is accurate.

Applicant Signature Lori K Novak Date: 4/19/18
 Print Name Lori K Novak

For City and BID use:

Date complete application received: _____
 City or DRC approval date: _____
 BID Board approval date: _____ Amount Approved: \$ _____
 Conditions of Grant Approval: _____

New
Sign for Thermography of Wisconsin
208 S. Main St. #3

owner is
fixing front of
the building
before sign goes
up + moving boards
for smaller signs

1.5
feet



3 feet

To be ~~is~~ placed



Gilby's Street Dept
 580 South Wasson Lane
 River Falls, WI 54022
 Phone: (715) 425-9322 Fax: (000) 000-0000

Work Order #: 00001741	Technician:	Date: 4/24/18
Company: Thermography Of Wisconsin Name: Lori Novak Address: (715) 307-2207	0000 Odometer: 0 Lic: V.I.N. #: Vehicle Tag #: Retain Parts: <input type="checkbox"/> Destroy Parts: <input type="checkbox"/>	

Hrs.	Labor Description	Total
1.0	Print and layout vinyl for business sign	\$375.00

Vinyl on metal

I accept the work done on my vehicle. I am paying in full at the time of pick-up. A 3% fee will be added to payments made by credit card. A \$35 fee will be added to the final bill for NSF checks. Any unpaid balances will be subject to an additional 1.5% monthly finance charge. We thank you for your business and look forward to seeing you again.

Parts Total:	\$0.00
Labor Total:	\$375.00
Special Repairs Total:	\$0.00
Sub-Total:	\$375.00
State Tax:	\$21.35
Local Tax:	\$0.00
Supply Charge:	\$13.13
Total:	\$409.48
Discount	\$0.00
Total:	\$409.48
Amt Tendered:	0.00
Balance:	409.48

No exchanges on electrical components or special order items. All returns have a 25% restocking. Returns must have original packaging in original condition. All special order parts not picked up within 30 days will be returned to stock with a forfeited deposit. Warranties on the products sold are those made by the manufacturer. Gilby's LLC hereby expressly disclaims all warranties either express or implied, including any implied warranty of merchantability or fitness for a particular purpose. Gilby's LLC neither assumes nor authorizes any other person to assume for the company any liability in connection with the sale of the product. If parts aren't taken within 5 business days of the vehicle leaving the shop, all parts become property of Gilby's LLC.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/25/2015

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 Couri Insurance Agency, Inc. 379 West Main Street Waukesha WI 53188		CONTACT NAME: Reis Insurance - Patrick Murphy PHONE (AC, No, Ext): (715) 425-8721 FAX (AC, No): (715) 425-1768 E-MAIL ADDRESS: pat@reisagency.com	
INSURED Thermography of Wisconsin 208 S. Main Street Suite 3 River Falls WI 54022		INSURER(S) AFFORDING COVERAGE INSURER A: USLI INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** CL1842508237 **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.

LINE 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 GENT. AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			AH 1558800	05/08/2015	05/08/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COMP/OP AGG \$ included Professional Liab. Agg \$ 3,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in WI) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			PER STATUTE DPH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER City of River Falls 222 Lewis Street River Falls WI 54022	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
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