

**LEWISTON CITY COUNCIL AGENDA
CITY COUNCIL CHAMBERS
DECEMBER 3, 2013**

7:00 p.m. Regular Meeting

Pledge of Allegiance to the Flag.
Moment of Silence.

Acceptance of the minutes of the meetings of Feb. 7 & 21, Mar. 6 & 20, Apr. 3 & 17, May 1 & 15, June 5, 19 & 26, July 17, Aug. 14, Sept. 4 & 18, Oct. 2 & 16, Nov. 20 and Dec. 4, 2012.

Public Comment period - Any member of the public may make comments regarding issues pertaining to Lewiston City Government (maximum time limit is 15 minutes for all comments)

ALL ROLL CALL VOTES FOR THIS MEETING WILL BEGIN WITH THE COUNCILOR OF WARD 1.

REGULAR BUSINESS:

1. Public Hearing and Final Passage regarding amendments to the General Assistance Ordinance.
2. Public Hearing and First Passage for re-zoning of the property at 5 Memorial Drive.
3. Hearing on an Appeal for a denial of a Tattoo Artist License.
4. Amendments to the Personnel Policies regarding employees health insurance options.
5. Amendments to the Traffic Schedule regarding parking prohibited on a portion of Water's Edge Drive.
6. Order Authorizing execution of a Municipal Quitclaim Deed for Real Estate located at 50 Pierce Street.
7. Receipt of City Clerk's report regarding valid signatures for the citizen initiative petition regarding the consolidation of the Cities of Lewiston and Auburn and to review proposed election time line.
8. Reports and Updates.
 - A. 2013 Homeland Security Grant Award
 - B. Update on Discussion regarding the Lewiston Auburn Economic Growth Council
9. Any other City Business Councilors or others may have relating to Lewiston City Government.
10. Executive Session to discuss labor union negotiations regarding the city's six employee unions.
11. Executive Session pursuant to MRSA Title 1, section 405(6)(A) to discuss a personnel matter regarding the annual evaluation of the City Administrator.

LEWISTON CITY COUNCIL

MEETING OF DECEMBER 3, 2013

AGENDA INFORMATION SHEET:

AGENDA ITEM NO. 1

SUBJECT:

Public Hearing and Final Passage regarding amendments to the General Assistance Ordinance.

INFORMATION:

The Social Services Director is recommending amendments to the General Assistance ordinance to coincide with recent changes to state law. These amendments would change the ordinance regarding the definition of "eligible person", determine the pro rate share formula and define how to address applicants ineligible for unemployment compensation. Because of the effective date of the state law reflecting these changes, the ordinance language will be retroactive to July 1, 2013.

Note the underlined language is the new proposed language and the words that are struck out are proposed to be deleted.

Please see the attached memorandum from Social Services Director Sue Charron for additional information.

APPROVAL AND/OR COMMENTS OF CITY ADMINISTRATOR:

The City Administrator recommends approval of the requested action.

EATB/kmm

REQUESTED ACTION:

1	2	3	4	5	6	7	M
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That the proposed amendments to the City Code of Ordinances, Chapter 46 "General Assistance", Article I "General", Article III "Eligibility Factors", and Article IV "Determination of Eligibility", to be effective retroactively to July 1, 2013, receive final passage by a roll call vote.

AN ORDINANCE PERTAINING TO GENERAL ASSISTANCE

THE CITY OF LEWISTON HEREBY ORDAINS:

Chapter 46 of the Code of Ordinances of the City of Lewiston, Maine is hereby amended as follows:

CHAPTER 46

GENERAL ASSISTANCE

ARTICLE I. IN GENERAL

Sec. 46-2. Definitions.

The following words, terms and phrases, when used in this chapter, shall have the meanings ascribed to them in this section, except where the context clearly indicates a different meaning:

Eligible person means a person who is qualified to receive general assistance from the municipality, according to the standards of eligibility set forth in this chapter. **“Eligible person” does not include a person who is a fugitive from justice as defined in Title 15, section 201, subsection 4.**

Household means an individual or a group of individuals who share a dwelling unit. When an applicant shares a dwelling unit with one or more individuals, even when a landlord-tenant relationship may exist between individuals residing in the dwelling unit, eligible applicants may receive assistance for no more than their pro rata share of the actual costs of the shared basic needs of that household according to the maximum levels of assistance established in the municipal ordinance. **The pro rata share is calculated by dividing the maximum level of assistance available to the entire household by the total number of household members.** The income of household members not legally liable or otherwise responsible for supporting the household shall be considered as available to the applicant only when there is a pooling of income.

Income means any form of income in cash or in kind received by the household, including net remuneration for services performed, cash received on either secured or unsecured credit, any payments received as an annuity, retirement or disability benefits, veterans' pensions, workers' compensation, unemployment benefits, benefits under any state or federal categorical assistance program, supplemental security income, social security and any other payments from governmental sources, unless specifically prohibited by any law or regulation, court ordered support payments, income from pension or trust funds **and, household income from any other source, including relatives or unrelated household members and any benefit received pursuant to Title 36, chapter 907 and Title 36, section 5219-II, unless used for basic necessities as defined in section 4301, subsection 1.**

ARTICLE III. ELIGIBILITY FACTORS

Sec. 46-68. Use of resources.

- (e) *Forfeiture of benefits.* Any applicant who forfeits receipt of or causes a reduction in

benefits from another public assistance program due to fraud, misrepresentation, a knowing or intentional violation of program rules or a refusal to comply with that program's rules without just cause will be ineligible to receive general assistance to replace the forfeited benefits. To the extent the forfeited benefits can be considered income under general assistance law, the worth of the forfeited benefits will be considered income that is available to the applicant for the duration of the forfeiture. An applicant who is found to be ineligible for unemployment compensation benefits because of a finding of fraud by the Department of Labor pursuant to Title 26, section 1051, subsection 1 is ineligible to receive general assistance to replace the forfeited unemployment compensation benefits for the duration of the forfeiture established by the Department of Labor.

ARTICLE IV. DETERMINATION OF ELIGIBILITY

Sec. 46-97. Income.

- (c) *Types of income.* Income which will be considered in determining an applicant's need includes:
- (8) *Lump sum income.* A lump sum payment received by an applicant or recipient, prior to or subsequent to applying for assistance shall be considered as income available to the household, with the exception of any required payments (i.e., any third party payment which is required as a condition of receiving the lump sum payment, or any payments of bills earmarked for the purpose for which the lump sum payment was made) and any amount of the lump sum payment which the applicant or recipient can document was spent on basic necessities, as described below. The lump sum payment must be prorated over future months according to the following criteria:

The period of proration is determined by disregarding any portion of the lump sum payment that the applicant or recipient has spent to purchase basic necessities, including but not limited to: all basic necessities provided by general assistance; reasonable payment of funeral or burial expenses for a family member; reasonable travel costs related to the illness or death of a family member; repair or replacement of essentials lost due to fire, flood or other natural disaster; repair or purchase of a motor vehicle essential for employment, education, training or other day-to-day living necessities; repayments of loans or credit, the proceeds of which can be verified as having been spent on basic necessities; and payment of bills earmarked for the purpose for which the lump sum is paid. All income received by the household between the receipt of the lump sum payment and the application for assistance is added to the remainder of the lump sum. The period of proration is then determined by dividing the remainder of the lump sum payment by the ~~greater of the~~ verified actual monthly amounts for all of the household's basic necessities ~~or 150% of the applicable federal poverty guidelines~~. That dividend represents the period of proration determined by the administrator to commence on the date of receipt of the lump sum payment. The prorated sum for each month must be considered available to the household for 12 months from the date of application or during the period of proration, whichever is less.

Note: Additions are underlined; deletions are ~~struck-out~~.



**Social Services Department
Sue Charron
Social Services Director**



MEMORANDUM

TO: Mayor Macdonald and Members of the City Council

FR: Sue Charron, Social Services Director

RE: General Assistance Maximums and Ordinance Revisions

DT: November 19, 2013

Enclosed are materials regarding modifications to the General Assistance Food Maximums (Appendix B) and the General Assistance Ordinance. The Food Maximums are effective November 1, 2013 through September 30, 2014. The Ordinance revisions are effective July 1, 2013.

The GA Food Maximums are based on the Thrifty Food Plan. These amounts are equal to the Food Supplement (SNAP) benefit. Hence, the GA Food Maximums must be revised and adopted whenever these amounts increase or decrease.

The SNAP benefits decreased effective November 1, 2013 due to the expiration of the ARRA (American Recovery and Reinvestment Act of 2009), which increased benefits by 13.6 percent in April of 2009 in response to the recession.

The GA Ordinance is based on State Statute Title 22. Ordinance language must reflect the language in the Statute. Hence, the GA Ordinance must be revised and adopted whenever the language in the Statute is amended.

The amendments are cost savings measures and add accountability and equality to the GA program. Additionally, some of the changes bring the GA program regulations in line with the laws that govern State and Federal programs.

*City Hall • 27 Pine Street • Lewiston, Maine • 04240 • Voice Tel. 207-513-3130 • Fax 207-376-3229
• TTY/TDD 207-784-5999 • Email: scharron@ci.lewiston.me.us*

The City of Lewiston does not discriminate against or exclude individuals from its municipal facilities, and/or in the delivery of its programs, activities and services based on an individual person's race, ancestry, color, religion, gender, age, physical or mental disability, veteran status, or limited English speaking ability. For more information about this policy, contact or call Compliance Officer Mike Paradis at (V) 207-513-3140, (TTY) 207-784-5999, or email mparadis@ci.lewiston.me.us.



Social Services Department
Sue Charron
Social Services Director



1. Fugitive felons are no longer eligible to receive GA. They are ineligible for SSI and the Food Supplement benefits.

(GA Ordinance Article I Sec. 46-2) 22 MRSA, §4301, sub-§3 is amended to read:

"Eligible person" does not include a person who is a fugitive from justice as defined in Title 15, section 201, subsection 4.

2. Household members are now only eligible for their pro rata share. Prior to this amendment a household of 3 with a disqualified member was eligible for the maximum of a household of 2 (**\$626**); now the household is only eligible for their pro rata share— 2/3 of the maximum for a household of 3 (\$818 divided by 3x2=**\$545**).

(GA Ordinance Article I Sec. 46-2) 22 MRSA, §4301, sub-§6 is amended to read:

Household means an individual or a group of individuals who share a dwelling unit. **The pro rata share is calculated by dividing the maximum level of assistance available to the entire household by the total number of household members.**

3. The Maine Residents Property Tax Refund (Circuit breaker Program) is now included as income unless the refund is used for basic necessities. This program has been replaced with the Property Tax Fairness Credit and requires one to file a state income tax return in order to receive the refund. Prior to this amendment the refund was prohibited from being used as income in determining an applicant's GA eligibility, even though it was and continues to be allowed as income in determining an applicant's eligibility for a poverty abatement.

(GA Ordinance Article I Sec. 46-2) 22 MRSA, §4301, sub-§6 is amended to read:

Income means any form of income in cash or in kind received by the household, including net remuneration for services performed, cash received on either secured or

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Social Services Department
Sue Charron
Social Services Director



unsecured credit, any payments received as an annuity, retirement or disability benefits, veterans' pensions, workers' compensation, unemployment benefits, benefits under any state or federal categorical assistance program, supplemental security income, social security and any other payments from governmental sources, unless specifically prohibited by any law or regulation, court ordered support payments, income from pension or trust funds **and**, household income from any other source, including relatives or unrelated household members **and any benefit received pursuant to Title 36, chapter 907 and Title 36, section 5219-II, unless used for basic necessities as defined in section 4301, subsection 1.**

4. Applicants who forfeit their Unemployment Compensation benefits due to a finding of fraud by the Department of Labor are no longer eligible to receive GA to replace the forfeited benefits. Applicants who forfeit their TANF benefits due to a TANF program violation are ineligible to receive GA to replace the forfeited benefits.

(GA Ordinance Article III Sec. 46-68) 22 MRSA, §4317 is amended to read:

An applicant who is found to be ineligible for unemployment compensation benefits because of a finding of fraud by the Department of Labor pursuant to Title 26, section 1051, subsection 1 is ineligible to receive general assistance to replace the forfeited unemployment compensation benefits for the duration of the forfeiture established by the Department of Labor.

5. Lump sum calculations are now based on verified actual expenses rather than on 150% of the Federal Poverty Levels (FPL). Because the majority of the GA applicants' actual expenditures are much lower than the FPL, the applicants essentially received more GA than they were entitled to by calculating the lump sum on the FPL.

(GA Ordinance Article IV Sec. 46-97) 22 MRSA, §4301, sub-§7 is amended to read:

The period of proration is then determined by dividing the remainder of the lump sum payment by the **greater of the** verified actual monthly amounts for all of the household's basic necessities **or 150% of the applicable federal poverty guidelines.**

DHHS requires verification that the municipality has adopted the maximums.

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LEWISTON CITY COUNCIL
MEETING OF DECEMBER 3, 2013

AGENDA INFORMATION SHEET:

AGENDA ITEM NO. 2

SUBJECT:

Public Hearing and First Passage for re-zoning of the property at 5 Memorial Drive.

INFORMATION:

Administrators at John F. Murphy Homes have submitted a petition to the City to rezone the property at 5 Memorial Drive from the Medium Density Residential (MDR) District to the Highway Business (HB) District to allow places of indoor assembly, amusement or culture and academic uses as permitted in support of their interest in developing the property.

The Planning Board held a public hearing on this proposal at their October 28, 2013 meeting and voted 5-1-1 to recommend passage of this item.

Please see attached material from City Planner David Hediger.

APPROVAL AND/OR COMMENTS OF CITY ADMINISTRATOR:

The City Administrator recommends approval of the requested item.

EAB/kmm

REQUESTED ACTION:

1	2	3	4	5	6	7	M
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That the proposed amendment to re-zone the property at 5 Memorial Drive from the Medium Density Residential (MDR) District to the Highway Business (HB) District, receive first passage by a roll call vote and that the public hearing on said rezoning be continued to the next regularly scheduled City Council meeting.



CITY OF LEWISTON

Department of Planning & Code Enforcement



TO: Mayor and City Council
FROM: David Hediger, City Planner
DATE: November 22, 2013
RE: Petition to rezone 5 Memorial Drive

Stoneybrook Consultants, Inc. on behalf of John F. Murphy Homes (JMH) has submitted a petition pursuant to Article VII, Section 4 and Article XVII, Section 5 of the Zoning and Land Use Code of the City of Lewiston rezone the property at 5 Memorial Drive from the Medium Density Residential (MDR) district to the Highway Business (HB) district to allow places of indoor assembly, amusement or culture and academic uses as a permitted use in support of JMH's interest in developing the property.

On October 28, 2013, the Planning Board voted 5-1-1 pursuant to Article VII, Section 4 and Article XVII, Section 5 of the aforementioned code to send a favorable recommendation for the City Council's consideration to rezone the property at 5 Memorial Drive from the Medium Density Residential (MDR) district to the Highway Business (HB) district.

This approximately 23 acre property is located at the end of Memorial Drive. The lot is split zoned with approximately 2.10 acres located in the HB district. The remaining portion is zoned MDR and Resource Conservation (RC). The petitioner's request is to rezone that remaining MDR portion to HB. The RC would remain unchanged. About half of the property currently abuts the HB district running parallel to Main Street. The other half abuts an existing MDR district, the Androscoggin River, and Stetson Brook. The MDR zoned land abutting 5 Memorial Drive consists of one-single family dwelling at 86 Northwoods Road and the Androscoggin Land Trust's Rancourt Preserve.

The rezoning is for the purpose of JMH purchasing the property and developing the site with an indoor recreation facility with pools, gym and meeting rooms. The facility would be available to the public. JMH may also develop facilities to accommodate many school programs current offered by JMH at other locations. The MDR district does not allow places of indoor assembly, amusement or culture. It allows academic institutions as a conditional use. Rezoning the land to HB will allow both uses as a permitted use. Rezoning the property will eliminate an existing split zoned property and expand upon an abutting HB district in support of providing adequate land area for JMH to develop the multiple uses and services they are interested in providing.

The petitioner has made reference to the comprehensive plan in support of the request. They have also expressed interest in working with the City and the Land Trust in expanding the existing trail network and recreational opportunities along the river should the rezoning pass and upon seeking future development review of the site.



City of Lewiston
Planning & Code Enforcement
Gil Arsenault, Director



MEMORANDUM

To: City Clerk's Office
City Council Members

From: David Hediger

Date: November 1, 2013

Subject: Planning Board Action

The Planning Board took the following action at their public meeting held on October 28, 2013 regarding a petition submitted by Stoneybrook Consultants, Inc. on behalf of John F. Murphy Homes to rezone the property at 5 Memorial Drive from the Medium Density Residential (MDR) district to the Highway Business (HB) district:

MOTION: by **Walter Hill** pursuant to Article VII, Section 4 and Article XVII, Section 5 of the Zoning and Land Use Code to send a favorable recommendation for the City Council's consideration to rezone the property at 5 Memorial Drive from the Medium Density Residential (MDR) district to the Highway Business (HB) district. Second by **Matthew Mastrogiamo**.

VOTED: **5-1-1 (Passed)**
Michael Marcotte Opposed
Kevin Morissette Abstained

c: Ed Barrett, City Administrator
Planning Board Members



Stoneybrook Consultants, Inc.

456 Buckfield Road
Turner, Maine 04282
(207) 514-7491 voice
(207) 514-7492 fax

October 9, 2013

David Hediger, City Planner
Department of Planning & Code Enforcement
City of Lewiston
27 Pine Street
Lewiston, ME 04240-7201

Re: John F. Murphy Homes
5 Memorial Avenue - Rezoning Request

Dear David:

On behalf of John F. Murphy Homes (JMH), I am pleased to provide the attached petitions requesting that the property located at 5 Memorial Avenue be rezoned from Medium Density Residential (MDR) to Highway Business (HB). JMH has a purchase/sales agreement to buy this property and hopes to develop the site with an indoor recreational use that is not allowed in the MDR district as we have discussed.

I hope you find this information acceptable for processing. Please let me know if you have any questions.

Respectfully Yours,

STONEBROOK CONSULTANTS, INC.

Michael F. Gotto

cc: Peter Kowalski

AN ORDINANCE PERTAINING TO THE ZONING AND LAND USE CODE

THE CITY OF LEWISTON HEREBY ORDAINS:

Appendix A of the Code of Ordinances of the City of Lewiston, Maine is hereby amended as follows:

APPENDIX A

ZONING AND LAND USE CODE

ARTICLE IV. ESTABLISHMENT OF DISTRICTS

Section 1. Zoning Map.

The "Official Zoning Map, City of Lewiston," adopted pursuant to this section, is hereby amended by rezoning a portion of property located at 5 Memorial Avenue, more fully shown on Exhibit "A" attached hereto, from Medium Density Residential (MDR) to Highway Business (HB).

REASONS FOR THE PROPOSED AMENDMENT

The petitioner, John F. Murphy Homes (JMH), plans to purchase the properties located at 3 & 5 Memorial Avenue to create a campus for its facilities. All of 3 Memorial Avenue and a portion of 5 Memorial Avenue is currently zoned HB. Key to the purchase and development of this site for JMH is their ability to construct an indoor recreational facility, open for public use, with heated pool(s), gym and public meeting rooms. With a total of about 23 acres, this property would support such a facility and an expansion of the many school programs offered by JMH if both lots are located entirely within the HB district. There is not enough room on the property to support the recreational facilities alone with the current district boundaries. This proposal would also place all of the property located at 5 Memorial Avenue in the same district, instead of the current mapping which divides the parcel.

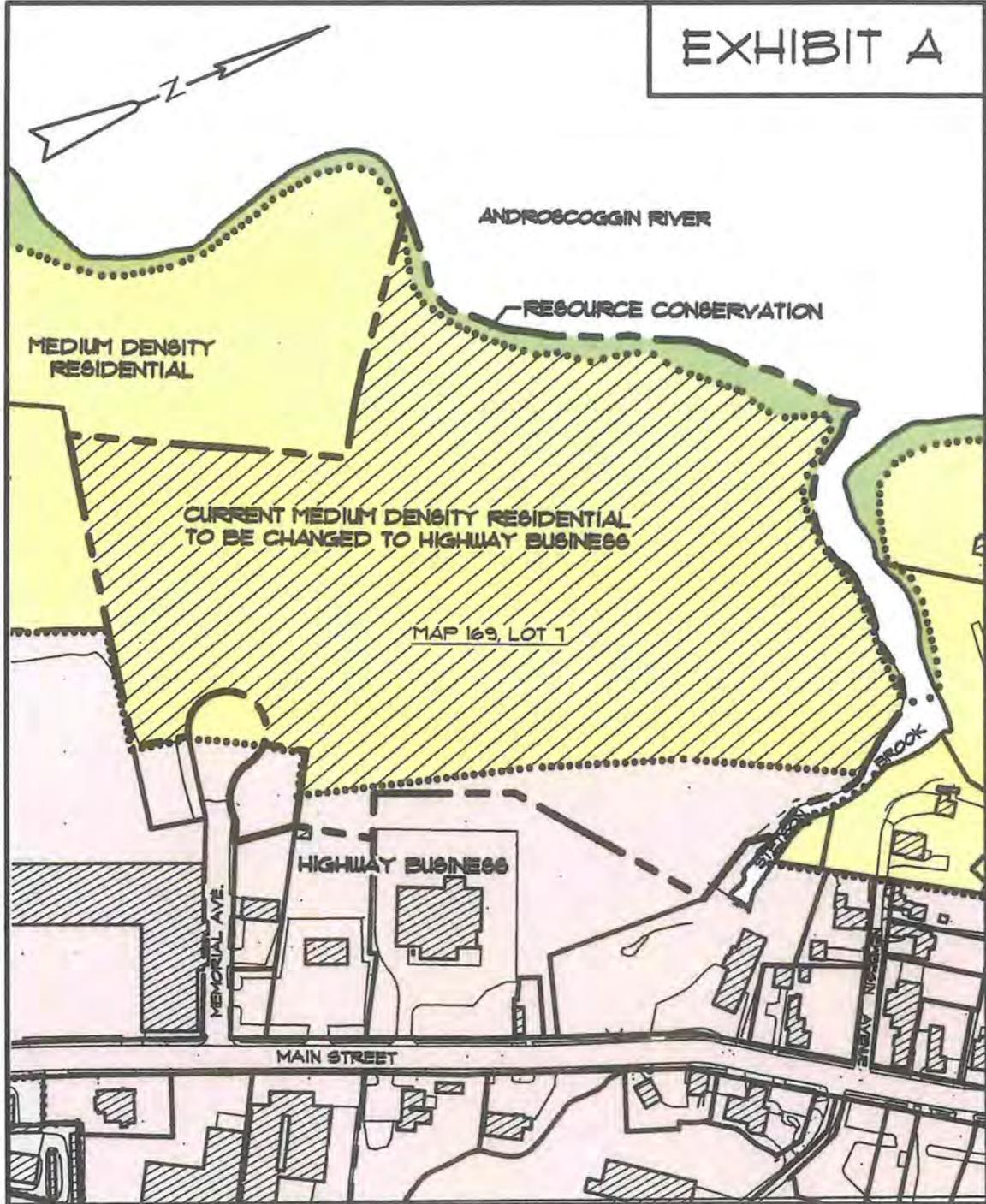
CONFORMANCE WITH THE COMPREHENSIVE PLAN

The proposal is in conformance with the Comprehensive Plan, because it:

1. Promotes the orderly growth and development of the appropriate areas of the City while making efficient use of public services . . . (Land Use, Goals, #1, page 123). All utility services available on Memorial Avenue and will not need to be extended to serve this site. The property is located on Memorial Avenue about 500' from the major Main Street travel corridor and the intersection of these two streets has been found to be suitable for the proposed development of this site. Memorial Drive provides access to the rear of the Marden's shopping plaza and this site is adjacent to the Marden's Plaza and other commercial developments at Moody's Collision Center and Reggie's Car Mart.

2. Utilizes those land use polices that were established in the 1988 Comprehensive Land Use Plan that remain valid to establish/revise zoning districts, and enact, revise, administer and enforce other ordinances and programs . . . (Land Use, Strategies, B, page 123).

EXHIBIT A



ZONING MAP AMENDMENT GRAPHIC

5 MEMORIAL AVENUE PROPERTY
APPLICANT: JOHN F. MURPHY HOMES
SCALE: NOT TO SCALE
DATE OF GRAPHIC: AUGUST 30, 2013
SOURCE: CITY OF LEWISTON GIS
PUBLICATION DATE: 2006 (WITH UPDATES)

Stoneybrook
Consultants, Inc.

PURCHASE AND SALE AGREEMENT

THIS AGREEMENT is made at Lewiston, Maine, this 9th day of ~~July~~^{Sept}, 2013,

BETWEEN

Atlantic Refinance, LLC, A Delaware Limited liability Company with a place of business in Portland, Maine, hereinafter referred to as Seller,

AND

John F. Murphy Homes, Inc, a Maine corporation with a place of business in Auburn, Maine, hereinafter referred to as Buyer.

RECITALS

A. Seller is the owner of the land situated off of Memorial Avenue and Main Street, in Lewiston, Maine, shown on Map 169 of the Assessor of the City of Lewiston as Lot 7& 8 and which is more particularly described in the deeds from ATL Holdings, LLC to Seller dated December 31, 2005 and recorded in the Androscoggin County Registry of Deeds in Book 7088, Page 253 and Book 7088, Page 221 (hereinafter referred to as the "Real Estate").

B. Seller is desirous of selling same.

C. Buyer is desirous of purchasing same.

AGREEMENT

NOW, THEREFORE, in consideration of the mutual covenants, agreements, and undertakings hereinafter expressed, the parties agree as follows:

SECTION 1: Purchase and Sale. Seller agrees to sell and Buyer agrees to purchase the Real Estate in accordance with the terms of this Agreement.

SECTION 2: Purchase Price. The purchase price for the acquisition of the Real Estate shall be ~~_____~~ Dollars (\$~~_____~~).

SECTION 3: Payment. The purchase price shall be paid in the following manner:

3.1 There shall be an initial down payment of ten Dollars (\$10.00), the receipt of which is hereby acknowledged.

3.2 The balance of the purchase price, [REDACTED] shall be paid at the Closing.

SECTION 4: Closing. The Closing shall take place at Buyer's election but not later than five o'clock (5:00) p.m., prevailing time, thirty (30) days after the expiration of the Inspection Period provided in Section 12 unless otherwise extended as provided below at the offices of Isaacson & Raymond, P.A., 75 Park Street, Lewiston, Maine, or such other place as the parties may mutually select.

SECTION 5: Conveyance and Payment.

5.1 Conveyance shall be made by Quitclaim Deed with Covenant conveying good marketable title to said Real Estate, in accordance with the standards adopted by the Maine Bar Association, free and clear of encumbrances, except for conventional utility easements and such restrictions as would not make the title unmarketable. The title shall also be insurable by any reputable title insurance company licensed to do business in the State of Maine. Seller will execute such affidavits as may appropriately be required by the applicable title insurance company to cause the deletion of the standard mechanics lien exception from the to-be-issued title insurance policy.

5.2 Buyer will make all payments by certified, cashier's or attorney trust account check.

SECTION 6: Taxes. Real estate taxes assessed by the city of Lewiston, Maine, shall be prorated at the Closing.

SECTION 7: Buyer's Contingencies. Buyer may terminate Buyer's obligation to purchase hereunder and will be entitled to a refund of the initial down payment if any of the following contingencies occur:

7.1 Violations. There are existing violations of zoning ordinances or other laws, ordinances or restrictions applicable to the Premises.

7.2 Environmental. There are hazardous or toxic substances, underground storage tanks, or asbestos on the Premises as these terms are defined in Federal, State or local ordinances and regulations. Environmental examination and testing of the site revealing hazardous materials, toxic materials, contamination or other substances or materials on the property which would require further testing, mediation and/or monitoring, the result of which would or could negatively affect Buyer's development plans for the property.

7.3 Pending Claims. There are claims, demands, liabilities or actions pending or threatened against Seller or the Premises (including, without limitation, condemnation proceedings) which constitute or might ripen into a lien or claim against the real estate or which could prevent, prohibit, delay or interfere with Buyer's proposed use of the real estate or which could deprive Buyer of any portion thereof.

7.4 Marden Realty Option to Purchase. The Seller must provide Marden Realty by registered mail its notice to sell the former Memorial Park subdivision property in accordance with the option language set forth in the deed recorded in Book 995 and Page 105.

- 7.5 **Sewer and Drain Pipe Easements.** Verification by Buyer's consultants that the various sewer and drain pipe easements of record do not negatively impact the proposed use of the property as reasonably determined by Buyer.
- 7.6 **Gulf Island Spur.** Verification of the location of that strip of land sometimes referred to as the "Spur" or the "Gulf Island Spur", including but not limited to any rights over this strip which may have been reserved by CMP, and a determination by Buyer that its location or any of these reserved rights will not have an adverse impact on its development plans.
- 7.7 **Memorial Drive Completion.** Confirmation that the City will complete, at its cost, the improvements to Memorial Drive (including the turnaround that the current depiction of the road reflects but which was never built).
- 7.8 **Union Water Power Rights.** Verification reasonably satisfactory to Buyer that no adverse impact on the property or its intended use exists based upon a reference, found on an unrecorded Aliberti, LaRochelle and Hodson plan of the area, to certain rights deriving from the Franklin Company to Union Water Power and thereafter to Lewiston Crushed Stone.
- 7.9 **Morrell Right of Way.** Confirmation that no adverse impact to the property or Murphy Homes' intended use results from (a) the location of a reserved right-of-way in favor of Abbie F. Morrell per her deed in Book 349, Page 485 and (b) the reservation to widen a certain road in favor of Lura Greenleaf per her deed in Book 843, Page 71.
- 7.10 **Pompilly Rights.** Verification that there is no adverse impact on the property or its potential use based upon a recital of certain rights held by Isaiah and Samuel Pompilly per deeds recorded in Book 171, Page 253 and Book 621, Page 328.
- 7.11 **Undischarged Liens.** That any recorded mortgage, lien, writ or other financial encumbrance filed against the property or Seller, arising between the date of the P&S and the closing, which cannot be fully satisfied and discharged by payment at closing from the purchase price, will permit Murphy Homes to terminate the agreement and receive immediate refund of any earnest money deposit.
- 7.12 **Zoning Changes.** Murphy Homes obtaining zoning changes from the City of Lewiston, which shall be final and unappealable, that it deems reasonably necessary for its intended business purposes.
- 7.13 **Wetlands.** That any wetlands on the site do not adversely impact Murphy Homes' intended use of the property or may result in potential costs which would render any project prohibitive as determined solely by Murphy Homes.

SECTION 8: Succession. This Agreement and the provisions herein shall be binding on the respective heirs, personal representatives, successors and assigns of Seller and Buyer.

SECTION 9: Miscellaneous.

9.1 Transfer Tax. State of Maine Transfer Taxes shall be paid one-half by Seller and one-half by Buyer in accordance with Maine Revised Statutes.

9.2 Entry. Buyer shall have the right to enter upon the Real Estate at reasonable times upon reasonable advance notice to Seller for the purpose of making studies for Buyer's proposed use.

9.3 Possession. At the time of Closing, Seller will deliver over exclusive possession of the Real Estate to Buyer, in the same condition as it now is, reasonable wear and tear excepted.

9.4 Brokers. Each party represents to the other that no real estate broker has been retained by the parties. Each party will defend and hold the other harmless from claims arising contrary to the party's said representations.

9.5 Time. Time is of the essence in all matters relating to this Agreement.

9.7 Disclaimer. The Premises are sold AS IS and WHERE IS. No warranties, guaranties or representations of any kind are made by Seller or Seller's agent, and all warranties are disclaimed with respect to the acreage, location and/or boundaries of the Premises or improvements thereon, title to the Premises, access to the Premises, environmental compliance, or its compliance with any applicable zoning or land use regulations, law, or ordinances.

9.8 Title Exceptions. Buyer shall examine the title to the Real Estate and report in writing any valid objections (hereafter "exceptions") thereto based on the Standards

adopted by the Maine State Bar Association. Any exceptions to the title which would be disclosed by examination of the records shall be deemed to have been accepted unless reported in writing at or prior to closing. If Buyer objects to any exceptions to the title, Seller shall may decide to attempt to remove such exceptions at Seller's own expense within ninety (90) days thereafter. But if, notwithstanding Seller's efforts, such exceptions cannot be removed within the said ninety (90) day time period, or such additional period as Buyer, in Buyer's sole discretion, may allow, Buyer may elect to terminate this Agreement. Buyer shall notify Seller of such election, in which case the down payment shall be returned to Buyer and the obligations of all parties under this Agreement shall thereupon terminate. Alternatively, Buyer may elect to purchase the Real Estate under the provisions of this Agreement subject to any such title exceptions which cannot be removed. If any such exception is a lien securing indebtedness of a definitely ascertainable amount, Buyer shall have the right to deduct the amount of such indebtedness from the purchase price payable at Closing.

9.9 Entire Agreement. This Agreement contains the entire and only agreement between the parties and no oral statements or representations or prior written matter not contained in this Agreement shall have any force and effect.

9.10 Governing Law. This Agreement and the transaction contemplated by it shall be governed by the laws of the State of Maine.

9.11 Notices. Any notices required by or useful under the terms of this Agreement shall be given, in the case of Seller, to:

James Hanley
50 Portland Pier, Ste. 400
Portland, ME 04101

With a copy to :
Daniel A. D'Auteuil, Jr.
Isaacson & Raymond, P.A.
P O Box 891
Lewiston, Me 04243-0891

and, in the case of Buyer, to:

Peter Kowalski
John F. Murphy Homes, Inc.
800 Center Street
Auburn, ME 04210

With a copy to:

Kim Visbaras
Visbaras Law, LLC
195 Center Street
Auburn, ME 04210

or such other persons and addresses as the appropriate party may hereafter designate. All such notices shall be sent certified mail, prepaid, deliver to addressee only.

9.12 Amendment. This Agreement may not be amended, modified or revoked except by a writing signed by the party against whom enforcement of the amendment, modification or revocation is sought.

9.13 Real Estate Withholding Tax. Seller shall provide Buyer at closing the following:

- a. A resolution that the Seller by vote of its members has duly authorized the sale of the Real Estate.
- b. An incumbency certificate from the Registered Agent identifying all of the members of the LLC, and listing a member or manager authorized to execute the documents.

C. An executed Form REW3

SECTION 10: Underground Fuel Storage Tank. Pursuant to the requirements of

Maine Law, the undersigned Seller discloses to Buyer that there (*check one*):

are no underground oil (or other fuel) storage facilities located on said Real Estate to the best of my/our knowledge.

is one or more underground oil (or other fuel) storage facility(ies) located on said property, that the registration number(s) of the facility(ies) is/are as follows: _____

_____, that the facility(ies) (*check one*):

- has
 has not

been abandoned in place pursuant to 38 ME. REV. STAT. ANN. §566-A, and that the facility(ies) are subject to regulation, including registration requirements, by the State of Maine Department of Environmental Protection.

SECTION 11: Expenses. The parties hereto shall pay their own expenses, including, without limitation, fees and expenses of their agents, representatives, counsel, accountants, and other experts incidental to the preparation of this Agreement and the consummation of the transactions provided herein.

SECTION 12: Right to Inspect, Survey and Test. The Buyer is encouraged to seek information from professionals regarding any specific issue or concern. All inspections will be done by inspectors chosen and paid for by the Buyer. If the result of any inspection or other condition specified herein is reasonably unsatisfactory to the Buyer, Buyer may declare the contract null and void by notifying the Seller in writing within 90 days of the date of this agreement ("Inspection Period"), and any earnest money shall be returned to the Buyer. If the Buyer does not notify the Seller that an inspection is unsatisfactory within the time period set forth

above, this contingency is waived by the Buyer. In the absence of inspection(s) mentioned above, the Buyer is relying completely upon Buyer's own opinion as to the condition of the property. Buyer may extend the Inspection Period for an additional 30 days upon written notice to Seller as provided in Section 9.11 and upon payment of an additional nonrefundable deposit of \$5,000.00.

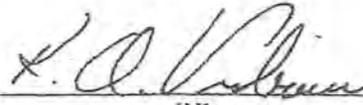
SECTION 13: Environmental Testing. The Buyer, at the Buyer's expense, may perform or have performed on the Premises such reasonable and customary environmental testing as the Buyer or its financing lenders may require. Such test(s) shall be performed prior to the Closing Date and the method of testing approved by the Seller. The Seller permits the Buyer or its testing agent(s) full access to the Premises at a reasonable time and after reasonable notice in order to perform the required and approved testing, including the right to access the real estate by disturbing pavement and other portions of the improvements on the Premises. If the Buyer decides to continue with the purchase, the Buyer shall be wholly responsible for any remediation determined necessary as the result of such testing. Regardless of whether Buyer decides to continue to purchase the premises the Buyer shall be wholly responsible for any cost associated with restoring the Premises to the condition it was in prior to any such testing, which restoration shall occur prior to the Closing or within 30 days of termination of the Agreement. If Buyer chooses not to complete the remediation determined necessary, either party may terminate this agreement and the down payment shall be returned. Buyer shall provide Seller with copies of the results of all such tests. Seller acknowledges and consents to inspection already performed on the site by Buyer as follows:

1. Preliminary site investigation by Buyer's architect, builder and land use consultant
2. Preliminary survey work
3. Preliminary wetlands mapping and

4. Traffic assessment

SECTION 14. Default. In the event either party shall default on any of its obligations herein, the non-defaulting party may seek to employ any and all available legal and equitable remedies. If either party seeks specific performance, that claim shall be brought in the Maine Superior Court. The prevailing party in litigation shall be entitled to collect all of their expenses incurred in collecting or enforcing this contract, including, but not limited to, attorneys' fees, paralegal and abstracter fees and costs of suit.

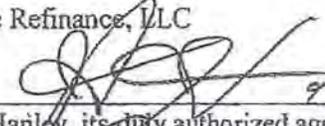
IN WITNESS WHEREOF, the parties hereto have hereunto set their hands and seals on the day and year first above written.

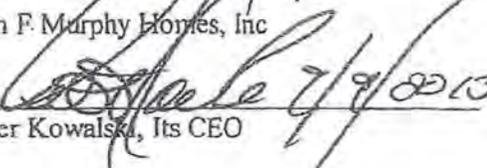


Witness

AS TO BOTH

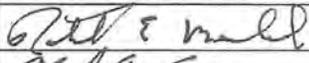
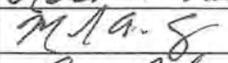
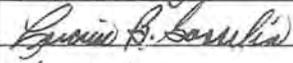
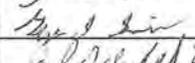
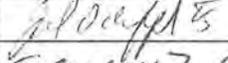
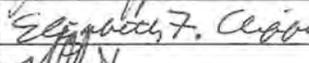
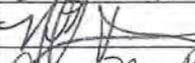
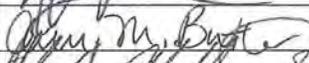
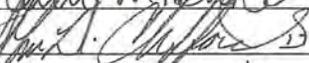
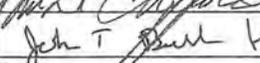
Witness

Atlantic Refinance, LLC
By: 
9-9-13
James Hanley, its duly authorized agent

John F. Murphy Homes, Inc
By: 
7/9/2013
Peter Kowalski, Its CEO

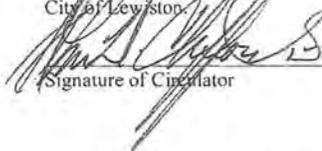
**PETITION TO AMEND THE CITY OF LEWISTON
ZONING AND LAND USE CODE**

Pursuant to Appendix A, Article XVII, Section 5, Amendments of the City of Lewiston Zoning and Land Use Code, we the undersigned residents of the City of Lewiston, being eighteen (18) year of age or older, do hereby petition the City of Lewiston to amend the "Official Zoning Map" by rezoning a portion the property located at 5 Memorial Avenue as shown on Exhibit "A" attached hereto:

	SIGNATURE	PRINTED NAME	PHYSICAL STREET ADDRESS (No PO Boxes)	DATE
✓ 1		ROBERT C. MUNNICH	2001 W. ST.	9/25/13
✓ 2		MARK A. CAYEA	97 Summit Ave	9-25-13
✓ 3		LUCIANO B. CASSELLA	625 COLLEGE ST.	9-25-13
✓ 4		GEORGE T. SIMONES	115 Wellman St	09-25-13
✓ 5		JOHN D. CLIFFORD	134 Pond Rd	9/25/13
✓ 6		ELIZABETH F. CLIFFORD	14 WARE ST	9/30/13
✓ 7		MICHAEL DUPUY	10 LANE ST	10/1/13
✓ 8		ANN BUTLER	20 WARE ST.	10/7/13
✓ 9		JOHN D. CLIFFORD	14 WARE ST	10/7/13
✓ 10		JOHN T. BULLER JR	20 WARE ST	10/7/13
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CIRCULATOR'S VERIFICATION

I hereby verify that I am the Circulator of this petition, that all the signatures to this petition were made in my presence, and to the best of my knowledge and belief, each signature is that of the person it purports to be, and each person is a resident of the City of Lewiston.


Signature of Circulator

JOHN D. CLIFFORD
Printed Name of Circulator

10/7/2013
Date

REGISTRAR'S CERTIFICATION

I hereby certify and verify that the names of all of the petitioners listed as valid appear on the voting list as registered voters in the City of Lewiston.

Total Valid: 10

Total Invalid: 0


Signature of Registrar/Deputy Registrar

Date: 10/15/2013

PETITION TO AMEND THE CITY OF LEWISTON
ZONING AND LAND USE CODE

Pursuant to Appendix A, Article XVII, Section 5, Amendments of the City of Lewiston Zoning and Land Use Code, we the undersigned residents of the City of Lewiston, being eighteen (18) year of age or older, do hereby petition the City of Lewiston to amend the "Official Zoning Map" by rezoning a portion the property located at 5 Memorial Avenue as shown on Exhibit "A" attached hereto:

	SIGNATURE	PRINTED NAME	PHYSICAL STREET ADDRESS (No PO Boxes)	DATE
1	<i>Joshua Lussier</i>	Joshua Lussier	75 Webber Ave	10/8/13
2	<i>Bethann Provost</i>	Bethann Provost	24 Wood St	10/9/13
3	<i>James Miquel</i>	James Miquel	24 Wood St	6/9/13
4	<i>Michael Barber</i>	Michael Barber	10 Wood St	10/8/13
5	<i>Holly Warner</i>	Holly Warner	93 Elm St	6/3/13
6	<i>Bruce Lovett</i>	BRUCE LOVETT	44 Autumn Ln	10/8/13
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CIRCULATOR'S VERIFICATION

I hereby verify that I am the Circulator of this petition, that all the signatures to this petition were made in my presence, and to the best of my knowledge and belief, each signature is that of the person it purports to be, and each person is a resident of the City of Lewiston.

Ann Bentley
 Signature of Circulator

Ann Bentley
 Printed Name of Circulator

10/8/13
 Date

REGISTRAR'S CERTIFICATION

I hereby certify and verify that the names of all of the petitioners listed as valid appear on the voting list as registered voters in the City of Lewiston.

Total Valid: 2

Total Invalid: 7

Ann Bentley
 Signature of Registrar/Deputy Registrar

Date: 10/13/2013

**PETITION TO AMEND THE CITY OF LEWISTON
ZONING AND LAND USE CODE**

Pursuant to Appendix A, Article XVII, Section 5, Amendments of the City of Lewiston Zoning and Land Use Code, we the undersigned residents of the City of Lewiston, being eighteen (18) year of age or older, do hereby petition the City of Lewiston to amend the "Official Zoning Map" by rezoning a portion the property located at 5 Memorial Avenue as shown on Exhibit "A" attached hereto:

	SIGNATURE	PRINTED NAME	PHYSICAL STREET ADDRESS (No PO Boxes)	DATE
✓1		Jennifer Marin	168 Rosedale St	10-8-13
✓2		Brittany Robbins	1 Highland Ave	10-8-13
✓3		Judie Westlund Saunio	101. W. Bay Ave Apt 2	10-8-13
✓4		Cheryl Carr	17 Wood St	10-8-13
✓5		Stephen Holt	183 Webster St.	10-8-13
✓6		Taffy Scudamore	91 Dove Ave Apt 2	10/8/13
✓7		Lindsey Gummont	15 Androscoquin Ave	10/8/13
✓8		Chastity Rolfe	160 Ash St. Apt 3	10/8/13
✓9		Tyler Sheehan	95 Gaydon Rd	10/8/13
✓10		Kimberly Sevey	211 Central Ave	10-8-13
✓11		David Boucher	314 Pond Road	10-8-13
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CIRCULATOR'S VERIFICATION

I hereby verify that I am the Circulator of this petition, that all the signatures to this petition were made in my presence, and to the best of my knowledge and belief, each signature is that of the person it purports to be, and each person is a resident of the City of Lewiston.

Signature of Circulator

Ann Bentley
Printed Name of Circulator

10/8/13
Date

REGISTRAR'S CERTIFICATION

I hereby certify and verify that the names of all of the petitioners listed as valid appear on the voting list as registered voters in the City of Lewiston.

Total Valid: 11

Total Invalid: 0

Signature of Registrar/Deputy Registrar

Date: 10/15/2013

PETITION TO AMEND THE CITY OF LEWISTON
ZONING AND LAND USE CODE

Pursuant to Appendix A, Article XVII, Section 5, Amendments of the City of Lewiston Zoning and Land Use Code, we the undersigned residents of the City of Lewiston, being eighteen (18) year of age or older, do hereby petition the City of Lewiston to amend the "Official Zoning Map" by rezoning a portion the property located at 5 Memorial Avenue as shown on Exhibit "A" attached hereto:

	SIGNATURE	PRINTED NAME	PHYSICAL STREET ADDRESS (No PO Boxes)	DATE
✓1	<i>James Craven</i>	JAMES CRAVEN	41 Russell st	9/24/13
✓2	<i>Margaret Craven</i>	MARGARET CRAVEN	41 Russell st	9/24/13
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CIRCULATOR'S VERIFICATION

I hereby verify that I am the Circulator of this petition, that all the signatures to this petition were made in my presence, and to the best of my knowledge and belief, each signature is that of the person it purports to be, and each person is a resident of the City of Lewiston.

Ann Bentley Ann Bentley 10/8/13
 Signature of Circulator Printed Name of Circulator Date

REGISTRAR'S CERTIFICATION

I hereby certify and verify that the names of all of the petitioners listed as valid appear on the voting list as registered voters in the City of Lewiston.

Total Valid: 2 Total Invalid: 0

Leanne M. [Signature] Date: 10/15/2013
 Signature of Registrar/Deputy Registrar

PETITION TO AMEND THE CITY OF LEWISTON
ZONING AND LAND USE CODE

Pursuant to Appendix A, Article XVII, Section 5, Amendments of the City of Lewiston Zoning and Land Use Code, we the undersigned residents of the City of Lewiston, being eighteen (18) year of age or older, do hereby petition the City of Lewiston to amend the "Official Zoning Map" by rezoning a portion the property located at 5 Memorial Avenue as shown on Exhibit "A" attached hereto:

	SIGNATURE	PRINTED NAME	PHYSICAL STREET ADDRESS (No PO Boxes)	DATE
✓ 1		Debra Dodge	13 Nancy Street	10/1/13
✓ 2		HOPE MOORE	12 Coburn St	10/8/13
✓ 3		Heather Weiss	74 Cram Ave	10/31/13
✓ 4		RACHEL BLACKERBY	151 Horton St	10/3/13
✓ 5		Steve Smith	43 Rosedale St	10-4-13
✓ 6		Andrew Frenette	93 Howe St	10-4-13
✓ 7		Heather Fulgham	506 Sabattus St	10-4-13
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CIRCULATOR'S VERIFICATION

I hereby verify that I am the Circulator of this petition, that all the signatures to this petition were made in my presence, and to the best of my knowledge and belief, each signature is that of the person it purports to be, and each person is a resident of the City of Lewiston.

 Ann Bentley 10/1/13
 Signature of Circulator Printed Name of Circulator Date

REGISTRAR'S CERTIFICATION

I hereby certify and verify that the names of all of the petitioners listed as valid appear on the voting list as registered voters in the City of Lewiston.

Total Valid: 7 Total Invalid: 13

 Date: 10/13/2013
 Signature of Registrar/Deputy Registrar

LEWISTON CITY COUNCIL
MEETING OF DECEMBER 3, 2013

AGENDA INFORMATION SHEET:

AGENDA ITEM NO. 3

SUBJECT:

Hearing on an Appeal for a denial of a Tattoo Artist License.

INFORMATION:

Eric Pelletier applied for a tattoo artist license on November 19, 2013. A Police Department background check is required prior to issuance of this license. The background check showed criminal convictions of Class A, B and C crimes.

The Business License ordinance of the City Code of Ordinances states a license shall be denied to an applicant if they are convicted of a Class A, B or C crime and if the crime is rationally related to the regulation of the business license being sought. The Police Department feels his previous felonies and convictions are related and therefore his license has been denied.

On November 19, Mr. Pelletier submitted a request to appeal the denial. Under the Code of Ordinances, the City Council shall conduct a hearing to hear the applicant's appeal and to make a determination. The applicant has been notified of the hearing date.

APPROVAL AND/OR COMMENTS OF CITY ADMINISTRATOR:

The City Administrator reserves comment on this issue until the hearing.

EAB/kmm

REQUESTED ACTION:

1	2	3	4	5	6	7	M
---	---	---	---	---	---	---	---

To conduct a hearing for the appeal and to make a determination on Mr. Pelletier's request for the issuance of his tattoo license.

I Eric Pelletier am requesting that the matter of my receiving a license to be a tattoo artist in Lewiston has been denied based a criminal conviction that I have from 1992. I had a license to practice in Auburn for over 6 years and am now looking to ~~open~~ practice at a ~~new~~ hopefully new business. The business will be owned by Angela Freed. The city of Auburn has similar stipulations for approving a tattoo license, the city council of auburn made an exception based on the fact that the conviction is over 20 yrs old. I am looking to get on the agenda for December 3, 2013. The only thing I ~~can~~ know how to do is tattoo which I have done for over 15 yrs, I have know other way to support my family. Thanks you very much for considering this matter.

Eric Pelletier
11/19/2013

RECEIVED

NOV 19 2013

LEWISTON
CITY CLERK'S OFFICE

CITY OF LEWISTON, MAINE
Business License Application

Application date 11/19/13 Opening date _____ Expiration date _____

License applied for: Eric Pelletier Tattooing

New Other _____ Application fee \$105.-

Full year fee \$185 Half year fee _____ + \$21. Background Check Non-Refundable

\$311.00
total

ALL QUESTIONS MUST BE ANSWERED IN FULL

Shin Deep tattoos BUSINESS Eric Pelletier APPLICANT

Business name Shin Deep tattoos Full name Eric Pelletier

Business address 417 main st Maiden name A/K/A _____

City Lewiston State ME Zip 04240 Date of birth 6/10/70

Mailing address 417 main st Home address 58 Jordan Ave

City Lewiston State ME Zip 04240 City Brunswick State ME Zip 04011

Business phone _____ Home phone (207) 751-3621

Cell phone (207) 751-3621 Driver's Lic.# & State 3529187

Is applicant a corporation? Yes ___ No (If yes, complete Supplement Questionnaire)

Has applicant(s) ever been convicted of any violation of the law, other than minor traffic violations, of any State of the United States, within the past 5 years? Yes No _____ (If yes, complete the following)

Name Eric Pelletier Date of conviction March 1992

Offense Robbery Location Lewiston

Disposition sentence 12 yrs prison time served

Does applicant(s) own the premises? Yes ___ No (If no, give name and address of owner.)

Name Pick ^{double eagle} Bretton Address 417 main st

If manager is to be employed, complete the following:

Angela Reed 58 Jordan Ave (207) 440-3579 11/7/83
Name Home Address Phone Date of Birth

Maiden Name Reed

Has manager ever been convicted of any violation of the law, other than minor traffic violations, of any State or the United States, within the past 5 years? Yes _____ No (If yes, complete the following)

Name _____ Date of conviction _____

Offense _____ Location _____

Disposition _____

IF Adult Amusement Device, number of devices n/a

IF Boardinghouse, do you serve liquor? n/a Yes No Malt only # of people

IF Flammable Liquid Storage, is it n/a Retail or Not for retail sale

Specify n/a Type of flammable liquid Amount in gallons

IF Group Care Facility, do you serve liquor? n/a Yes No Malt only # of people

IF Inn Keeper, do you serve liquor? n/a Yes No Malt only # of rooms

IF Lodging House, Number of rooms n/a

IF Mobile Home Park, Number of spaces n/a

IF Theater, Seating n/a Occupancy load _____

THE OMISSION OF FACTS OR ANY MISPRESENTATION OF ANY OF THE INFORMATION ON THIS APPLICATION SHALL BE SUFFICIENT GROUNDS FOR THE REFUSAL OF SUCH LICENSE.

CERTIFICATE OF APPLICANT AND WAIVER OF CONFIDENTIALITY

READ CAREFULLY BEFORE SIGNING

I hereby authorize the release of any criminal history record information to the City Clerk's Office or Licensing Authority. I understand that this information shall become public record, and I hereby waive any rights of privacy with respect hereto.


Signature of Applicant

11-19-13
Date



City of Lewiston, Maine

Department of City Clerk

Kathleen M. Montejo, MMC
City Clerk & Registrar of Voters

Kelly J. Brooks, CMC
Deputy City Clerk



November 21, 2013

Eric Pelletier
58 Jordan Avenue
Brunswick, ME 04011

Dear Mr. Pelletier,

This is to officially notify you that your application for a Tattooing license, which you applied for on November 19, 2013, has been denied.

A routine check with the State Bureau of Identification and the Lewiston Police Department has revealed that on 07/08/1992, you were convicted of Burglary (Class B) and Robbery (Class A) and on 01/09/2002 you were convicted of Escape (Class C).

Section 22-35 Sub-section (a) of the Code of Ordinances states that in any case where the city requires the approval of the building inspector, health officer, *police chief*, fire chief or any other city official prior to issuance of the license, it shall be the duty of the city clerk to notify in writing the officials whose approvals are required. The officials so notified, or their duly delegated representatives, shall approve or disapprove the application without delay and shall note their approval or disapproval thereon, stating the reasons for any disapproval. (see attached)

Section 22-35 Subsection b (3) of the Code of Ordinances states that a license under this chapter shall be denied if the council makes a finding that the applicant has been convicted of (a) any Class A, Class B or Class C crime, or (b) a crime committed under the laws of the United States of America or of any other state or territory thereof, which is punishable (whether or not such punishment was actually imposed) by a sentence at least as harsh as that which is authorized for the commission of a Class C crime under Maine law; provided that such conviction was for an offense which is rationally related to the regulation of the business sought to be licensed.

You have the right to appeal this decision to the City Council under Section 22-36 of the Code of Ordinances should you so choose. This must be filed in writing and must state the basis for the appeal.

Yours truly,

A handwritten signature in cursive script that reads "Kelly J. Brooks".

Kelly J. Brooks, CMC
Deputy City Clerk
Lewiston, Maine

Attachment

City of Lewiston Maine
Police Department
171 Park Street

Michael J. Bussiere

Chief of Police

TO: Kelly Brooks, Deputy City Clerk
FROM: Lt. Adam D. Higgins
DATE: November 20, 2013
REF: Tattoo license application for **Eric Pelletier DOB 06-10-70**

We have reviewed the Lewiston Police Department records as well as Mr. Pelletier's SBI records. I found that Eric Pelletier DOB 06-10-70 has been convicted in Maine for 3 separate felonies.

On 07-08-1992 Mr. Pelletier was convicted of Burglary (Class B)
On 07-08-1992 Mr. Pelletier was convicted of Robbery (Class A)
On 01-09-2002 Mr. Pelletier was convicted of Escape (Class C)

Sec. 22-35. Compliance with rules and regulations required; approval, disapproval by city officials, council.

(3) The applicant has been convicted of (a) any Class A, Class B or Class C crime, or (b) a crime committed under the laws of the United States of America or of any other state or territory thereof, which is punishable (whether or not such punishment was actually imposed) by a sentence at least as harsh as that which is authorized for the commission of a Class C crime under Maine law provided that such conviction was for an offense which is rationally related to the regulation of the business sought to be licensed;

With the above information I am denying Mr. Pelletier's application for a tattoo license.

(CRSA)

Identification

Subject Name(s)

PELLETIER, ERIC
PELLETIER, ERIC L
PELLETIER, ERIC LEE

Subject Description

FBI Number

State Id Number

DOC Number

MER005643 (ME)

Unknown/NA

Social Security Number

Driver's License Number

Unknown/NA

Unknown/NA

Miscellaneous Numbers

Unknown/NA

Sex

Race

Skin Tone

MALE

White

MEDIUM

Height

Weight

Date of Birth

5'8" (2012-11-12)

170 Pounds (2012-11-12)

1970-06-10

5'9" (1991-06-13)

160 Pounds (1991-06-13)

5'8"

175 Pounds

Hair Color

Eye Color

Fingerprint Pattern

Brown (2012-11-12)

Brown (2012-11-12)

Unknown/NA

Brown (1991-06-13)

Brown (1991-06-13)

Brown

Blue

Scars, Marks, and Tattoos

Code

Description, Comments, and Images

Unknown Code

SC ABDOM SCAR ON STOMACH SC ABDOM (ME0010200)

Contact agency for image

Unknown Code

TAT RF ARM SKELETON HEAD TAT RF ARM (ME0010200)

Contact agency for image

Blood Type

Medical Condition

Unknown/NA

Unknown/NA

Place of Birth

Citizenship

Ethnicity

ME

US (2012-11-12)

Unknown/NA

US (1991-06-13)

Marital Status

Religion

Unknown/NA

Unknown/NA

Employment

Unknown/NA

Residence

Residence as of

2013-03-08

Location Type

PHYSICAL

Mailing Address

128 COLLEGE ST
LEWISTON, ME 04240

Telephone

Residence as of

2012-11-12

Location Type

PHYSICAL

Mailing Address

128 COLLEGE ST
LEWISTON, ME

Telephone

Residence as of

2006-09-15

Location Type

PHYSICAL

Mailing Address

100 WALNUT ST
LEWISTON, ME US

Telephone

Residence as of

2006-09-15

Location Type

PHYSICAL

Mailing Address

107 MORTON ST
LEWISTON, ME US

Telephone

Residence as of

2006-09-15

Location Type

PHYSICAL

Mailing Address

700 LISBON STREET
LEWISTON, ME US

Telephone

Residence as of

2006-09-15

Location Type

PHYSICAL

Mailing Address

GIMMELS TRAILER PARK
LISBON, ME US

Telephone

Residence as of

2006-09-15

Location Type

PHYSICAL

Mailing Address

GRIMMELS TRAILER PARK
LEWISTON, ME US

Telephone

Residence as of

2006-09-15

Location Type

PHYSICAL

Mailing Address

11-3 P.V.A.
LEWISTON, ME US

Telephone
Residence as of 2006-09-15
Location Type PHYSICAL
Mailing Address 62 MAIN ST
LISBON FALLS, ME US

Telephone
Residence as of 2006-09-15
Location Type PHYSICAL
Mailing Address 122 BARTLETT ST
LEWISTON, ME US

Telephone
Residence as of 1991-06-13
Location Type PHYSICAL
Mailing Address 122 BARTLETT ST
LEWISTON, ME US

Telephone

Fingerprint Images

Unknown/NA

Palmprint Images

Unknown/NA

Photo Images

Unknown/NA

DNA Data

Unknown/NA

Caution Information

Firearms Disqualified D - Disqualified

Criminal History

Cycle 001

Tracking Number 496092A
Earliest Event Date 1989-02-24

Arrest (Cycle 001)
Arrest Date 1989-02-24
Arresting Agency ME0010500
Subject Name(s) PELLETIER, ERIC L
Arrest Type Adult
Charge

Charge Number 496092A 003
Charge Tracking Number 496092A
Charge Case Number
Agency ME0010500
Offense Date 1989-02-24
Charge Description DISORDERLY CONDUCT (Charge Class E)
Statute 17-A MRSA SUBSECTION 501
State Offense Code 5140 (ME)
Severity Misdemeanor

Prosecutor Disposition No data supplied

Court Disposition (Cycle 001)

Court Agency ME001025J

Charge

Charge Number 496092A 003
Charge Tracking Number 496092A
Charge Case Number 89-03392
Agency ME001025J
Offense Date 1989-02-24
Charge Description DISORDERLY CONDUCT (Charge Class E)
Statute MRSA
State Offense Code 5140 (ME)
Severity Misdemeanor
Disposition GUILTY (1989-05-09; ME)

Sentencing (Cycle 001)

Sentencing Agency ME001025J

Court Case Number 89-03392

Charge Number 496092A 003

Charge Tracking Number 496092A

Sentence 1989-05-09: FINED \$100.00 (1989-05-09)

Corrections No data supplied

Cycle 002

Tracking Number 496096A

Earliest Event Date 1989-07-21

Arrest (Cycle 002)

Arrest Date 1989-07-21

Arresting Agency ME0060100

Subject Name(s) PELLETIER, ERIC

Arrest Type Adult

Charge

Charge Number 496096A 002
Charge Tracking Number 496096A

Charge Case Number
Agency ME0060100
Offense Date 1989-07-21
Charge Description TERRORIZING (Charge Class D)
Statute 17-A MRSA SUBSECTION 210
State Offense Code 5068 (ME)
Severity Misdemeanor

Prosecutor Disposition No data supplied

Court Disposition (Cycle 002)

Court Agency ME006045J

Charge

Charge Number 496096A 002
Charge Tracking Number 496096A
Charge Case Number 89-10636
Agency ME006045J
Offense Date 1989-07-21
Charge Description TERRORIZING (Charge Class D)
Statute MRSA
State Offense Code 5068 (ME)
Severity Misdemeanor
Disposition GUILTY (1990-05-17; ME)

Sentencing (Cycle 002)

Sentencing Agency ME006045J

Court Case Number 89-10636

Charge Number 496096A 002

Charge Tracking Number 496096A

Sentence 1990-05-17: INCARCERATED 2 days JAIL (1990-05-17)

Corrections No data supplied

Cycle 003

Tracking Number 496105A

Earliest Event Date 1989-08-20

Arrest (Cycle 003)

Arrest Date 1989-08-20

Arresting Agency ME0060100

Subject Name(s) PELLETIER, ERIC

Arrest Type Adult

Charge

Charge Number 496105A 001
Charge Tracking Number 496105A
Charge Case Number
Agency ME0060100

Offense Date 1989-08-20
Charge Description TERRORIZING (Charge Class D)
Statute 17-A MRSA SUBSECTION 210
State Offense Code 5068 (ME)
Severity Misdemeanor

Prosecutor Disposition No data supplied

Court Disposition (Cycle 003)

Court Agency ME006045J

Charge

Charge Number 496105A 001
Charge Tracking Number 496105A
Charge Case Number 89-10631
Agency ME006045J
Offense Date 1989-08-20
Charge Description TERRORIZING (Charge Class D)
Statute MRSA
State Offense Code 5068 (ME)
Severity Misdemeanor
Disposition GUILTY (1990-05-17; ME)

Sentencing (Cycle 003)

Sentencing Agency ME006045J

Court Case Number 89-10631

Charge Number 496105A 001

Charge Tracking Number 496105A

Sentence 1990-05-17: INCARCERATED 2 days JAIL (1990-05-17)

Corrections No data supplied

Cycle 004

Tracking Number 496107A

Earliest Event Date 1989-08-21

Arrest (Cycle 004)

Arrest Date 1989-08-21

Arresting Agency ME0060100

Subject Name(s) PELLETIER, ERIC

Arrest Type Adult

Charge

Charge Number 496107A 001
Charge Tracking Number 496107A
Charge Case Number
Agency ME0060100
Offense Date 1989-08-21
Charge Description CRIMINAL MISCHIEF (Charge Class D)

Statute 17-A MRSA SUBSECTION 806

State Offense Code 4958 (ME)

Severity Misdemeanor

Prosecutor Disposition No data supplied

Court Disposition (Cycle 004)

Court Agency ME006045J

Charge

Charge Number 496107A 001

Charge Tracking Number 496107A

Charge Case Number 89-10632

Agency ME006045J

Offense Date 1989-08-21

Charge Description CRIMINAL MISCHIEF (Charge Class D)

Statute MRSA

State Offense Code 4958 (ME)

Severity Misdemeanor

Disposition GUILTY (1990-05-17; ME)

Sentencing (Cycle 004)

Sentencing Agency ME006045J

Court Case Number 89-10632

Charge Number 496107A 001

Charge Tracking Number 496107A

Sentence 1990-05-17: INCARCERATED 30 days JAIL - SUSPENDED ALL BUT 2 DAYS (1990-05-17)

1990-05-17: RESTITUTION \$49.95 (1990-05-17)

Corrections No data supplied

Cycle 005

Tracking Number 496108A

Earliest Event Date 1990-03-19

Arrest (Cycle 005)

Arrest Date 1990-03-19

Arresting Agency ME0010200

Subject Name(s) PELLETIER, ERIC L

Arrest Type Adult

Charge

Charge Number 496108A 001

Charge Tracking Number 496108A

Charge Case Number

Agency ME0010200

Offense Date 1990-03-19

Charge Description

THEFT BY UNAUTHORIZED TAKING OR TRANSFER (Charge
Class E)

Statute 17-A MRSA SUBSECTION 353

State Offense Code 5089 (ME)

Severity Misdemeanor

Prosecutor Disposition No data supplied

Court Disposition (Cycle 005)

Court Agency ME001025J

Charge

Charge Number 496108A 001

Charge Tracking Number 496108A

Charge Case Number 90-04554

Agency ME001025J

Offense Date 1990-03-19

Charge Description THEFT BY UNAUTHORIZED TAKING OR TRANSFER (Charge
Class E)

Statute MRSA

State Offense Code 5089 (ME)

Severity Misdemeanor

Disposition GUILTY (1990-05-16; ME)

Sentencing (Cycle 005)

Sentencing Agency ME001025J

Court Case Number 90-04554

Charge Number 496108A 001

Charge Tracking Number 496108A

Sentence 1990-05-16: INCARCERATED 24 hours JAIL (1990-05-16)

Corrections No data supplied

Cycle 006

Tracking Number 496114A

Earliest Event Date 1990-06-13

Arrest (Cycle 006)

Arrest Date 1990-06-13

Arresting Agency ME0010200

Subject Name(s) PELLETIER, ERIC L

Arrest Type Adult

Charge

Charge Number 496114A 002

Charge Tracking Number 496114A

Charge Case Number

Agency ME0010200

Offense Date 1990-06-13

Charge Description THEFT (Charge Class D)

Statute 999998

State Offense Code 999998 (ME)

Severity Misdemeanor

Prosecutor Disposition No data supplied

Court Disposition (Cycle 006)

Court Agency ME001015J

Charge

Charge Number 496114A 002

Charge Tracking Number 496114A

Charge Case Number CR-90-609

Agency ME001015J

Offense Date 1990-06-13

Charge Description THEFT (Charge Class D)

Statute THEFT MRSA

State Offense Code 999998 (ME)

Severity Misdemeanor

Disposition GUILTY (1991-08-22; ME)

PROBATION VIOLATED (1991-12-02; ME)

PROBATION VIOLATED (1992-04-09; ME)

Sentencing (Cycle 006)

Sentencing Agency ME001015J

Court Case Number CR-90-609

Charge Number 496114A 002

Charge Tracking Number 496114A

Sentence 1991-08-22: CONCURRENT with case CR-91-399 charge number 1 (1991-08-22)

1991-08-22: INCARCERATED 11 months DEPARTMENT OF CORRECTIONS - 30 DAYS SUSPENDED (1991-08-22)

1991-08-22: PROBATION 1 years (1991-08-22)

1991-12-02: CONCURRENT with case CR-91-399 charge number 1 (1991-12-02)

1991-12-02: INCARCERATED 60 days ANDROSCOGGIN COUNTY JAIL (1991-12-02)

1991-12-02: PROBATION CONTINUED (1991-12-02)

1991-12-02: PROBATION PARTIALLY REVOKED (1991-12-02)

1992-04-09: CONCURRENT with case CR-91-399 charge number 1 (1992-04-09)

1992-04-09: INCARCERATED 8 months ANDROSCOGGIN COUNTY JAIL (1992-04-09)

1992-04-09: PROBATION REVOKED (1992-04-09)

1992-04-09: PROBATION TO TERMINATE (1992-04-09)

Corrections No data supplied

Cycle 007

Tracking Number 496111A
Earliest Event Date 1991-06-13

Arrest (Cycle 007)
Arrest Date 1991-06-13
Arresting Agency ME0010200
Subject Name(s) PELLETIER, ERIC

Arrest Type Adult

Charge

Charge Number 496111A 001
Charge Tracking Number 496111A
Charge Case Number C-10888
Agency ME0010200
Offense Date 1991-06-13
Charge Description CRIMINAL TRESPASS (Charge Class D)
Statute 999998
State Offense Code 999998 (ME)
Severity Misdemeanor

Prosecutor Disposition No data supplied

Court Disposition (Cycle 007)

Court Agency ME001015J

Charge

Charge Number 496111A 001
Charge Tracking Number 496111A
Charge Case Number CR-91-399
Agency ME001015J
Offense Date 1991-06-13
Charge Description CRIMINAL TRESPASS (Charge Class D)
Statute CRIMINAL TRESPASS MRSA
State Offense Code 999998 (ME)
Severity Misdemeanor
Disposition GUILTY (1991-09-22; ME)
PROBATION VIOLATED (1991-12-02; ME)
PROBATION VIOLATED (1992-04-09; ME)

Sentencing (Cycle 007)

Sentencing Agency ME001015J

Court Case Number CR-91-399

Charge Number 496111A 001
Charge Tracking Number 496111A

Sentence 1991-09-22: INCARCERATED 11 months DEPARTMENT OF
CORRECTIONS - ALL BUT 30 DAYS SUSPENDED (1991-09-22)
1991-09-22: PROBATION 1 years (1991-09-22)
1991-09-22: RESTITUTION REQUIRED (1991-09-22)
1991-12-02: CONCURRENT with case CR-90-609 charge number 2
(1991-12-02)

1991-12-02: INCARCERATED 60 days ANDROSCOGGIN COUNTY JAIL (1991-12-02)
1991-12-02: PROBATION CONTINUED (1991-12-02)
1991-12-02: PROBATION PARTIALLY REVOKED (1991-12-02)
1992-04-09: CONCURRENT with case CR-90-609 charge number 2 (1992-04-09)
1992-04-09: INCARCERATED 8 months ANDROSCOGGIN COUNTY JAIL (1992-04-09)
1992-04-09: PROBATION TERMINATED (1992-04-09)

Corrections No data supplied

Cycle 008

Tracking Number 496119A
Earliest Event Date 1991-06-13

Arrest (Cycle 008)
Arrest Date 1991-06-13
Arresting Agency ME0010200
Subject Name(s) PELLETIER, ERIC

Arrest Type Adult

Charge

Charge Number 496119A 001
Charge Tracking Number 496119A
Charge Case Number
Agency ME0010200
Offense Date 1991-06-13
Charge Description CRIMINAL TRESPASS (Charge Class E)
Statute 17-A MRSA SUBSECTION 402
State Offense Code 5118 (ME)
Severity Misdemeanor

Prosecutor Disposition No data supplied

Court Disposition (Cycle 008)
Court Agency ME001025J

Charge

Charge Number 496119A 001
Charge Tracking Number 496119A
Charge Case Number 91-09249
Agency ME001025J
Offense Date 1991-06-13
Charge Description CRIMINAL TRESPASS (Charge Class E)
Statute MRSA
State Offense Code 5118 (ME)
Severity Misdemeanor
Disposition GUILTY (1991-11-26; ME)

Sentencing (Cycle 008)

Sentencing Agency ME001025J

Court Case Number 91-09249

Charge Number 496119A 001

Charge Tracking Number 496119A

Sentence 1991-11-26: INCARCERATED 43 hours JAIL (1991-11-26)

Corrections No data supplied

Cycle 009

Tracking Number 496124A

Earliest Event Date 1991-09-26

Arrest (Cycle 009)

Arrest Date 1991-09-26

Arresting Agency ME0010200

Subject Name(s) PELLETIER, ERIC

Arrest Type Adult

Charge

Charge Number 496124A 001

Charge Tracking Number 496124A

Charge Case Number

Agency ME0010200

Offense Date 1991-09-26

Charge Description BURGLARY (Charge Class B)

Statute 17-A MRSA SUBSECTION 401

State Offense Code 5115 (ME)

Severity Felony

Charge

Charge Number 496124A 002

Charge Tracking Number 496124A

Charge Case Number

Agency ME0010200

Offense Date 1991-09-26

Charge Description THEFT BY UNAUTHORIZED TAKING OR TRANSFER (Charge Class D)

Statute 17-A MRSA SUBSECTION 353

State Offense Code 5088 (ME)

Severity Misdemeanor

Prosecutor Disposition No data supplied

Court Disposition (Cycle 009)

Court Agency ME001015J

Charge

Charge Number 496124A 001

Charge Tracking Number 496124A
Charge Case Number CR-92-42
Agency ME001015J
Offense Date 1991-09-26
Charge Description BURGLARY (Charge Class B)
Statute MRSA
State Offense Code 5115 (ME)
Severity Felony
Disposition GUILTY (1992-07-08; ME)

Charge

Charge Number 496124A 002
Charge Tracking Number 496124A
Charge Case Number CR-92-42
Agency ME001015J
Offense Date 1991-09-26
Charge Description THEFT BY UNAUTHORIZED TAKING OR TRANSFER (Charge Class D)
Statute MRSA
State Offense Code 5088 (ME)
Severity Misdemeanor
Disposition GUILTY (1992-07-08; ME)

Sentencing (Cycle 009)
Sentencing Agency ME001015J
Court Case Number CR-92-42
Charge Number 496124A 002
Charge Tracking Number 496124A
Sentence 1992-07-08: CONCURRENT with case CR-92-206 charge number 2 (1992-07-08)
1992-07-08: INCARCERATED 9 months ANDROSCOGGIN COUNTY JAIL (1992-07-08)

Sentencing (Cycle 009)
Sentencing Agency ME001015J
Court Case Number CR-92-42
Charge Number 496124A 001
Charge Tracking Number 496124A
Sentence 1992-07-08: INCARCERATED 5 years DEPARTMENT OF CORRECTIONS - ALL BUT 3 YEARS SUSPENDED (1992-07-08)
1992-07-08: PROBATION 4 years (1992-07-08)

Corrections No data supplied

Cycle 010

Tracking Number 496130A
Earliest Event Date 1992-03-09

Arrest (Cycle 010)
Arrest Date 1992-03-09
Arresting Agency ME0010200
Subject Name(s) PELLETIER, ERIC

Arrest Type Adult

Charge

Charge Number 496130A 001
Charge Tracking Number 496130A
Charge Case Number
Agency ME0010200
Offense Date 1992-03-09
Charge Description ROBBERY (Charge Class A)
Statute 17-A MRSA SUBSECTION 651(1)(C)
State Offense Code 4293 (ME)
Severity Felony

Prosecutor Disposition No data supplied

Court Disposition (Cycle 010)

Court Agency ME001015J

Charge

Charge Number 496130A 001
Charge Tracking Number 496130A
Charge Case Number CR-92-206
Agency ME001015J
Offense Date 1992-03-09
Charge Description ROBBERY (Charge Class A)
Statute MRSA
State Offense Code 4293 (ME)
Severity Felony
Disposition GUILTY (1992-07-08; ME)
PROBATION VIOLATED (1995-01-04; ME)
PROBATION VIOLATED (2001-05-22; ME)

Sentencing (Cycle 010)

Sentencing Agency ME001015J

Court Case Number CR-92-206

Charge Number 496130A 001

Charge Tracking Number 496130A

Sentence 1992-07-08: CONCURRENT with case CR-92-42 charge number 1
(1992-07-08)
1992-07-08: INCARCERATED 12 years DEPARTMENT OF
CORRECTIONS - ALL BUT 3 YEARS SUSPENDED (1992-07-08)
1992-07-08: PROBATION 4 years (1992-07-08)
1995-01-04: INCARCERATED 1 years UNSERVED PORTION OF
ORIGINAL SENTENCE (1995-01-04)
1995-01-04: PROBATION CONTINUED (1995-01-04)
1995-01-04: PROBATION PARTIALLY REVOKED (1995-01-04)

2001-05-22: INCARCERATED 4 years DEPARTMENT OF
CORRECTIONS (2001-05-22)
2001-05-22: PROBATION CONTINUED (2001-05-22)
2001-05-22: PROBATION PARTIALLY REVOKED (2001-05-22)

Corrections No data supplied

Cycle 011

Tracking Number 496144A
Earliest Event Date 1994-06-21

Arrest (Cycle 011)
Arrest Date 1994-06-21
Arresting Agency ME0010200
Subject Name(s) PELLETIER, ERIC L

Arrest Type Adult

Charge

Charge Number 496144A 002
Charge Tracking Number 496144A
Charge Case Number
Agency ME0010200
Offense Date 1994-06-21
Charge Description ASSAULT (Charge Class D)
Statute 17-A MRSA SUBSECTION 207
State Offense Code 5064 (ME)
Severity Misdemeanor

Prosecutor Disposition No data supplied

Court Disposition (Cycle 011)
Court Agency ME001025J

Charge

Charge Number 496144A 002
Charge Tracking Number 496144A
Charge Case Number 94-03283
Agency ME001025J
Offense Date 1994-06-21
Charge Description ASSAULT (Charge Class D)
Statute MRSA
State Offense Code 5064 (ME)
Severity Misdemeanor
Disposition GUILTY (1995-01-10; ME)

Sentencing (Cycle 011)
Sentencing Agency ME001025J

Court Case Number 94-03283
Charge Number 496144A 002

Corrections No data supplied

Cycle 012

Tracking Number 496146A
Earliest Event Date 1995-05-19

Arrest (Cycle 012)
Arrest Date 1995-05-19
Arresting Agency ME0060300
Subject Name(s) PELLETIER, ERIC

Arrest Type Adult

Charge

Charge Number 496146A 001
Charge Tracking Number 496146A
Charge Case Number
Agency ME0060300
Offense Date 1995-05-19
Charge Description ESCAPE (Charge Class C)
Statute 17-A MRSA SUBSECTION 755
State Offense Code 4943 (ME)
Severity Felony

Prosecutor Disposition No data supplied

Court Disposition (Cycle 012)
Court Agency ME006025J

Charge

Charge Number 496146A 001
Charge Tracking Number 496146A
Charge Case Number CR 1995-20390
Agency ME006025J
Offense Date 1995-05-19
Charge Description ESCAPE (Charge Class C)
Statute MRSA
State Offense Code 4943 (ME)
Severity Felony
Disposition GUILTY (2002-01-09; ME)

Sentencing (Cycle 012)

Sentencing Agency ME006025J
Court Case Number CR 1995-20390
Charge Number 496146A 001
Charge Tracking Number 496146A
Sentence

2002-01-09: CONSECUTIVE with case ANDSCCR199200209
charge number 1 (2002-01-09)
2002-01-09: INCARCERATED 10 months DEPARTMENT OF
CORRECTIONS (2002-01-09)

Corrections No data supplied

Cycle 013

Tracking Number 000307B
Earliest Event Date 2012-11-11

Arrest (Cycle 013)
Arrest Date 2012-11-12
Arresting Agency ME0010200
Subject Name(s) PELLETIER, ERIC

Arrest Type Adult

Charge

Charge Number 000307B 001
Charge Tracking Number 000307B
Charge Case Number 12LEW-2456-AR
Agency ME0010200
Offense Date 2012-11-12
Charge Description DOMESTIC VIOLENCE ASSAULT (Charge Class D)
Statute 17-A MRSA SUBSECTION 207-A(1)(A)
State Offense Code 11286 (ME)
Severity Misdemeanor

Prosecutor Disposition (Cycle 013)
Prosecutor Case Number D3_12-8253
Prosecutor Agency ME001013A

Charge

Charge Number 000307B 001
Charge Tracking Number 000307B
Charge Case Number D3_12-8253
Agency ME001013A
Offense Date 2012-11-11
Charge Description DOMESTIC VIOLENCE ASSAULT (Charge Class D)
Statute 17-A MRSA SUBSECTION 207-A(1)(A)
State Offense Code 11286 (ME)
Severity Misdemeanor
Disposition ADDED (Other)

Court Disposition (Cycle 013)
Court Agency ME001025J

Charge

Charge Number 000307B 001
Charge Tracking Number 000307B

Charge Case Number LEWDCCR201203476

Agency ME001025J

Offense Date 2012-11-11

Charge Description DOMESTIC VIOLENCE ASSAULT (Charge Class D)

Statute MRSA

State Offense Code 11286 (ME)

Severity Misdemeanor

Disposition GUILTY (2013-02-26; ME)

Sentencing (Cycle 013)

Sentencing Agency ME001025J

Court Case Number LEWDCCR201203476

Charge Number 000307B 001

Charge Tracking Number 000307B

Sentence 2013-02-26: INCARCERATED 364 days ALL BUT 0 years 0 months
110 days 0 hours suspended (2013-02-26)

2013-02-26: PROBATION 2 years (2013-02-26)

Corrections No data supplied

Index of Agencies

Agency DISTRICT ATTORNEYS OFFICE AUBURN; ME001013A

Contact

Agency Telephone 207-7841397

Agency Facsimile

Agency Email Address

Mailing Address 2 TURNER ST
AUBURN, ME 04210

Agency SUPERIOR COURT AUBURN; ME001015J

Contact

Agency Telephone 207-7845450

Agency Facsimile

Agency Email Address

Mailing Address PO BOX 3660
AUBURN, ME 04210

Agency LEWISTON PD; ME0010200

Contact

Agency Telephone 207-5133137

Agency Facsimile

Agency Email Address

Mailing Address 171 PARK STREET
LEWISTON, ME 04240

Agency 8TH DISTRICT COURT LEWISTON; ME001025J

Contact

Agency Telephone	207-7954800
Agency Facsimile	
Agency Email Address	
Mailing Address	PO BOX 1345 LEWISTON, ME 04243
<hr/>	
Agency Contact	LISBON FALLS PD; ME0010500
Agency Telephone	207-3532500
Agency Facsimile	
Agency Email Address	
Mailing Address	300 LISBON ST LISBON, ME 04252
<hr/>	
Agency Contact	MAINE CORRECTIONAL, WINDHAM; ME003015C
Agency Telephone	207-8937111
Agency Facsimile	
Agency Email Address	
Mailing Address	PO BOX 260 SOUTH WINDHAM, ME 04082
<hr/>	
Agency Contact	AUGUSTA PD; ME0060100
Agency Telephone	207-6262370
Agency Facsimile	
Agency Email Address	
Mailing Address	33 UNION STREET AUGUSTA, ME 04330
<hr/>	
Agency Contact	SUPERIOR COURT AUGUSTA; ME006025J
Agency Telephone	207-6229357
Agency Facsimile	
Agency Email Address	
Mailing Address	95 STATE ST AUGUSTA, ME 04330
<hr/>	
Agency Contact	HALLOWELL PD; ME0060300
Agency Telephone	207-6229710
Agency Facsimile	
Agency Email Address	
Mailing Address	1 WINTHROP STREET HALLOWELL, ME 04347
<hr/>	
Agency Contact	7TH DISTRICT COURT AUGUSTA; ME006045J
Agency Telephone	207-2878075

Agency Facsimile
Agency Email Address
Mailing Address

145 STATE STREET
AUGUSTA, ME 04330

Agency
Contact
Agency Telephone
Agency Facsimile
Agency Email Address
Mailing Address

STATE PRISON - WARREN; ME007015C

207-3543000

807 CUSHING ROAD
WARREN, ME 04864

LEWISTON CITY COUNCIL

MEETING OF DECEMBER 3, 2013

AGENDA INFORMATION SHEET:

AGENDA ITEM NO. 4

SUBJECT:

Amendments to the Personnel Policies regarding employee health insurance options.

INFORMATION:

City Administration is recommending an amendment to the Personnel Policies regarding options for employee health insurance programs which offer higher deductibles with lower premium costs. This issue was reviewed in a Council workshop in November. Please see the attached memorandum from Deputy City Administrator Phil Nadeau for additional information.

APPROVAL AND/OR COMMENTS OF CITY ADMINISTRATOR:

The City Administrator recommends approval of the requested action.

E. ASIKMIN

REQUESTED ACTION:

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To approve the amendments to the Personnel Policies for employee health insurance options, as recommended by City Administration.

(Note - Full copy of the amendment is attached. Additions are underlined and ~~deletions~~ have strike-out lines.)



The Office of
Deputy City Administrator
Phil Nadeau
MEMORANDUM

TO: Mayor and City Council
FR: Phil Nadeau
RE: New Health Insurance Options for Non-Union Personnel & Other Related Amendments

DT: 11.19.13

In order for the city to offer more health insurance plan options to non-union personnel, the City Council may approve up to three MMEHT (Maine Municipal Employee Health Trust) health insurance plans. The Personnel Policy currently offers only the POS (Point-of-Service) C option. The City Administrator's Office is urging the Council to approve two more plan options for non-union employees: PPO (Preferred Provider Organization) 500 and PPO 1500. These plans are higher deductible plans which carry lower premium cost for both the city and for the employee (see enclosed materials for cost differences).

We are also recommended that the policy be amended to allow the City to incentivize the selection of these lower premium programs by approving the creation of a Health Reimbursement Arrangement (HRA) plan which will assist the employee in paying for the higher out of pocket costs associated with these higher deductible plans. Though it is far too complex a task to outline the similarities and differences of POS and PPO plans, the recommended proposals will offer plan options to employees that will create potential cost savings for both employees and the city.

A second proposed health care Personnel Policy amendment will establish the use of our new appointment calendar software as a requirement for all employees for scheduling an annual appointment with the city's Health Care Educator (HCE). Employing this simple software has produced a 24/7 opportunity for employees to take responsibility for scheduling their required appointments, both for themselves and, if applicable, their spouses. Failure to comply with the requirement results in the employee paying a higher premium until such time as they fulfill all HCE compliance requirements.

In order for these health plan options to be offered to union employees, all new plans must be approved by the unions through the collective bargaining process. The City Administrator's Office will be prohibited from discussing any activity associated with the collective bargaining process during any public meeting, but will be happy to fully inform the Council of progress in this area during scheduled executive sessions.

There will clearly be more to discuss during the work session, and we look forward to sharing all the information that we have gathered over these last few months.



The Office of
Deputy City Administrator
Phil Nadeau
MEMORANDUM

TO: Mayor and City Council

FR: Phil Nadeau

CC:

RE: City Personnel Policy Amendment – Addition of PPO 500 & 1500 Health Insurance Plans; New Health Reimbursement Arrangement Accounts; and Amendments requiring Employee use of the Health Care Educator Appointment Calendar

DT: 11.19.13

The City Administrator's Office is recommending approval of the following amendments to the City Policy Manual, Personnel Policy section:

That the "HEALTH INSURANCE" section in the Personnel Policy be amended as follows:

"The City of Lewiston shall provide the Maine Municipal Employees Health Trust (MMEHT) Dual Option Point-of-Service (POS) C Comprehensive plan, the Preferred Provider Organization (PPO) 500, 1500 or comparable plans providing substantially similar coverages and deductibles (single, two-person, or family plan) to those eligible Employees and their eligible dependents.

Eligible Employees shall be eligible for authorized to receive this insurance on the first (1st) day of the month following the month they begin work for the City. Employees will pay a portion of the annual premium for the Point of Service (POS) -C, PPO 500 or 1500 (single, two-person or family plan). Employee contributions for the POS-C, PPO 500 and PPO 1500 Plans will be in accordance to the schedule outlined in the City Personnel Policy entitled HEALTH CARE MANAGEMENT SYSTEM FOCUSING ON PREVENTION focusing on health care prevention

The City Administrator's Office is recommending approval of the following amendments to the City Policy Manual, Personnel Policy section:

That the "FLEXIBLE BENEFIT PLAN" section in the Personnel Policy be amended as follows:

FLEXIBLE SPENDING ACCOUNT BENEFIT AND HEALTH REIMBURSEMENT ARRANGEMENT PLAN BENEFIT
"For all eligible employees, ~~the~~ City of Lewiston shall provide a Flexible Spending Account and Health Reimbursement Arrangement Benefits Plan (through a third party administrator) as allowed under Section 125 of the Internal Revenue Code. Eligible Employees shall bear the cost of either the Medical Reimbursement-Flexible Spending Account and/or Dependent Care Options, except for a yearly contribution from the City of Lewiston of \$200 in the Medical Reimbursement- Flexible

Spending Account of those employees who are not covered by a labor agreement and are participating in the Health Care Management System.

For those employees electing to participate in the MMEHT PPO 500 or 1500 health insurance plans, the City of Lewiston shall contribute funds to the employee's Health Reimbursement Arrangement in accordance with the following schedule:

- A. PPO 500: \$600 Single Plan; \$1,200 Family Plan; \$1,200 Employee/Spouse Plan
- B. PPO 1500: \$1,200 Single Plan; \$3,000 Family Plan; \$3,000 Employee Spouse Plan

Employees not opting to participate in the Flexible Benefits Plan or the Health Reimbursement Arrangement immediately upon being employed or not ~~sustaining a lifestyle change~~ complying with the requirements outlined in the HEALTH CARE MANAGEMENT SYSTEM FOCUSING ON PREVENTION section of the City Personnel Policy during the year, will not be eligible to participate until the next calendar year or shall pay applicable penalties outlined in the HEALTH CARE MANAGEMENT SYSTEM FOCUSING ON PREVENTION until such time as they are fully compliant."

The City Administrator's Office is also recommending approval of the following amendments to the City Policy Manual, Personnel Policy section:

That the "HEALTH CARE MANAGEMENT SYSTEM FOCUSING ON PREVENTION" section in the Personnel Policy, sub-section "Health Risk Analysis and Educators" be amended as follows:

"After the initial consultation, each member will receive at least one additional face to face meeting annually. Such meetings will be primarily designed to be on the job site for the employees and in a private setting. Depending on the results of the health risk analysis and the goals of the member, additional meetings will be scheduled. Should an in-person consultation not be practical, phone and email communication may become alternatives if approved by the City Administrator or the Deputy City Administrator.

Both Employees and spouses must schedule their appointment with the HCE using the city-provided online calendar software or, if no computer is available, call or email the Human Resources office, no later than March 31st of each year.

The following will result in changing the premium payment from 10% to 25% effective in the first January paycheck if the following occur (with exceptions noted):

- Employee or spouse fail to schedule their appointment between January 1st and March 31st of each year.
- Employee or spouse fail to appear for a scheduled appointment (only significant matters of a serious and personal nature will serve as cause for a waiver to be issued by the City Administrator or Deputy City Administrator).
- Appointments cancelled by the HCE will be rescheduled by the HCE within 14 days of the cancellation and shall not result in any penalty to the Employee or spouse on the condition that the Employee and/or spouse agree to a new appointment date that will occur no later than February 28th of each year.
- Unless management disputes an Employee's claim that a cancellation or "no show" was job related, job related duties that result in Employee cancellations or "no shows" shall require the HCE to reschedule the appointment within 14 days of the cancellation and shall not result

- in any penalty to the Employee on the condition that the Employee agree to a new appointment date that will occur no later than February 28th of each year.
- Employees and spouses without access to a computer must ensure that they call or email Human Resources early enough so that staff may assist in scheduling the appointment for the Employee or spouse no later than March 31st.



**Value Based Purchasing Incentives and "Providers of Distinction"
Effective January 1, 2014
for POS C, POS 200, PPO 500, PPO 1000, PPO 1500 and PPO 2500**

INTRODUCTION

Variations in the cost and quality of health care across Maine are real; unwarranted variations exist in process, outcomes, satisfaction and cost. To address these variations, plan sponsors are reporting information and creating plan design incentives to influence purchasing behavior. **For calendar year 2014, the Maine Municipal Employees Health Trust (MMEHT) will continue to include value based purchasing features and incentives, often called "tiered networks", as part of its health insurance plans. If you are enrolled in the POS C, POS 200, PPO 500, PPO 1000, PPO 1500, or PPO 2500 plan, these programs will apply to you.**

The Board of Trustees adopted the *MMEHT Providers of Distinction* based on the methodology described below. There are three broad categories for tiering, which include hospitals, specific procedures at specified hospitals, and primary care physicians (PCPs). The Health Trust will introduce financial incentives to Trust participants who voluntarily use preferred facilities or providers. These incentives will provide the best benefit should a member choose to use one of the *MMEHT Providers of Distinction*.

In an effort to make these programs easier for our members to understand and to use, we have developed the following Q&A. If you have any other questions regarding this program, please call the Health Trust Member Service Representatives at 1-800-852-8300.

What are tiered networks?

Tiered networks allow members to reduce their copays and out-of-pocket costs by seeking care from Providers of Distinction – primary care doctors and hospitals that have demonstrated the highest quality and safety and lowest costs.

Which MMEHT health plans use the tiered networks?

All MMEHT health plans (with the exception of the POS A plan and the Retiree Group Companion Plan) use the tiered networks, although to a varying degree. The POS C plan only uses tiered networks for the Preferred PCP designation. The POS 200 plan and all of the PPO plans use the Preferred PCP designation, as well as the Preferred Facility designations for preferred hospitals (as described below).

What is the advantage to using a Preferred PCP?

If your Primary Care Physician is designated as a Preferred PCP, your office visit copay will be reduced to \$10 per visit if you are enrolled in the POS C, POS 200, PPO 500, or PPO 1000 plan; or to \$15 if you are enrolled in the PPO 1500 or PPO 2500 plan.

How do I find out if my Primary Care Physician is a Preferred PCP?

Log on to the Maine Health Management Coalition's website at www.getbettermaine.org and enter the required information for your doctor. A doctor or practice will only be considered Preferred if they rate "Good", "Better", or "Best" in at least two categories, based on quality of care.

What is the advantage to using a Preferred Hospital Facility?

If you receive inpatient or outpatient surgical services from a Preferred Hospital Facility ("Hospital of Distinction"), the deductible amount applicable to qualifying services that you receive from the hospital will be waived (if you are covered by the POS 200, PPO 500, or PPO 1000 plan), or reduced by \$1,000 (if you are covered by the PPO 1500 or PPO 2500 plan). Please note that separately billed services, such as anesthesiology, lab, x-ray and advanced imaging, or emergency room services, will still be subject to any applicable deductible, copay, or coinsurance amount.

Which hospitals are included as “Preferred Facilities”?

Effective January 1, 2014, there are 20 hospitals on the Preferred Hospital Facility list. Please refer to the section titled “MMEHT Hospitals of Distinction” (below) for the current list.

What is the advantage to using a Preferred Hospital Facility for Specified Procedures?

If you receive services from one of the Preferred Hospital Facilities for Specified Procedures, any deductible and coinsurance amount applicable to the specified surgeries (as listed below) will be waived. Please note that separately billed services such as anesthesiology or pathology claims will still be subject to any applicable deductible, copay, or coinsurance amount.

Which hospitals are included as “Preferred Facilities” for procedures, and for which procedures?

Effective January 1, 2014, there are five Preferred Hospital Facilities for **Knee and Hip Replacement Surgery** and two Preferred Hospital Facilities for **Bariatric Surgery**. There is one Preferred Hospital Facility for **Spine Surgery**. Please refer to the section titled “MMEHT Hospitals of Distinction – Specified Procedures” (below) for the current list.

MMEHT HOSPITALS OF DISTINCTION

HOSPITAL TIERING	Preferred Facility (“Tax-Id”)
Incentives For qualifying services received at the Preferred Facility	★Reduced Out of Pocket (OOP) by Waived or Reduced Deductible POS 200 – Reduced OOP by \$200 (deductible waived) PPO 500 – Reduced OOP by \$500 (deductible waived) PPO 1000 – Reduced OOP by \$1000 (deductible waived) PPO 1500 – Reduced OOP by \$1000 (deductible reduced by \$1000) PPO 2500 – Reduced OOP by \$1000 (deductible reduced by \$1000)

The MMEHT Board of Trustees adopted the following hospital list approved through sound methodology in partnership with Anthem Blue Cross and Blue Shield in Maine and in accordance with the Maine Health Management Coalition (MHMC) quality metrics. Each preferred hospital meets minimum criteria in four categories: **Effective** (treatment of heart failure and pneumonia), **Safe** (preventing surgical infections, medication safety, national safe practice survey, falls with injury, and preventing harm to babies from elective early deliveries), **Patient Experience**, and **Cost**. The methodology weights **Quality Care (effective, safe and patient experience– based on MHMC measures)** 70% and **Cost (based upon Anthem’s July – December 2012 unit costs)** 30%. Hospitals designated as “preferred” or tier one will continue to be considered “preferred” for all covered services they perform with the exception of knee and hip replacement surgery, bariatric surgery, and spine surgery, as outlined above. **It is important to note that any separately billed services, such as anesthesiology or pathology claims, will be processed subject to any applicable cost shares.**

20 PREFERRED HOSPITALS

Bridgton Hospital (Bridgton)
Central Maine Medical Center (Lewiston)
Charles A. Dean Memorial Hospital (Greenville)
Franklin Memorial Hospital (Farmington)
H.D. Goodall Hospital (Sanford)
LincolnHealth (Boothbay Harbor/Damariscotta)
Maine Coast Memorial Hospital (Ellsworth)
MaineGeneral Medical Center (Augusta-Waterville)
Maine Medical Center (Portland)
Mercy Hospital (Portland)

Mid Coast Hospital (Brunswick)
Mount Desert Island Hospital (Bar Harbor)
Northern Maine Medical Center (Fort Kent)
Parkview Adventist Medical Center (Brunswick)
Pen Bay Medical Center (Rockport)
Redington-Fairview General Hospital (Skowhegan)
Southern Maine Medical Center (Biddeford)
St. Joseph Hospital (Bangor)
St. Mary’s Regional Medical Center (Lewiston)
York Hospital (York)

MMEHT HOSPITALS OF DISTINCTION – Specified Procedures

HOSPITAL TIERING	Preferred Facility for <i>Procedure</i>
Incentives	<ul style="list-style-type: none"> ★ Waived deductible ★ Waived coinsurance (\$0 out-of-pocket costs for hospital charges) POS 200, PPO 500, PPO 1000, PPO 1500, and PPO 2500 Plans

The MMEHT Board of Trustees adopted the following procedure list at specified hospitals approved through sound methodology in partnership with Anthem Blue Cross Blue Shield’s Blue Distinction Program. These incentives build on the Preferred Facility program (outlined below) by adding an additional quality component for designated procedures. The incentives will only be available when the designated surgery is performed at the designated hospital listed below. **It is important to note that any separately billed services, such as anesthesiology or pathology claims, will be processed subject to any applicable cost shares.**

Designated Procedure or Surgery

Designated Hospital(s)

Knee and Hip Replacement Surgery

Central Maine Medical Center (Lewiston)
 MaineGeneral (Augusta/Waterville)
 Mercy Hospital (Portland)
 St. Joseph Hospital (Bangor)
 St. Mary’s Regional Medical Center (Lewiston)

Bariatric Surgery

Central Maine Medical Center (Lewiston)
 Maine Medical Center (Portland)

Spine Surgery

Mercy Hospital (Portland)

MMEHT PRIMARY CARE PHYSICIANS OF DISTINCTION

PCPs	Preferred PCPs
Primary Care Physicians	Providers with at least two “Good”, “Better”, or “Best” ratings from the Maine Health Management Coalition website: www.getbettermaine.org
Incentives	<ul style="list-style-type: none"> ★ Reduced Office Visit Copays POS C \$10 PPO 1000 \$10 POS 200 \$10 PPO 1500 \$15 PPO 500 \$10 PPO 2500 \$15

The MMEHT Board of Trustees adopted a listing of Primary Care Physicians (PCPs) as its preferred tier or MMEHT Providers of Distinction based on the Maine Health Management Coalition’s (MHMC) **quality** (effective care and safety) metrics as reported on the Coalition’s website (www.getbettermaine.org). The Maine Health Management Coalition’s Pathways to Excellence (PTE) Steering Committee has developed a set of metrics to measure how effectively primary care practices manage their patients with chronic conditions and how pediatric practices manage their patients.

The Maine Health Management Coalition Foundation publishes quality data on Primary Care Physicians (PCPs). Doctors who treat adults voluntarily submit clinical information to Bridges to Excellence and/or the National Committee on Quality Assurance. These organizations in turn conduct assessments and generate rankings regarding the quality of the care being provided. The participating Primary Care Physicians may also submit information about the tools they use in maintaining and transferring medical information, and assisting their patients.

Bridges to Excellence and the National Committee on Quality Assurance are independent, non-profit organizations that publish information about how well doctors and their staffs across the U.S. are doing at taking care of their patients. Once a ranking is given it remains valid for two to three years.

The Maine Health Management Coalition’s website, www.getbettermaine.org, is a link to the doctor ratings. A doctor or practice will be considered preferred if they rate “Good”, “Better” or “Best” in at least two categories. Categories include effective, safe and satisfactory care. If a doctor is not rated, receives a low score, or does not report, that doctor will not be considered preferred.

THE FUTURE

The MMEHT Board of Trustees will periodically evaluate the methodology utilized and the published *MMEHT Providers of Distinction*. The MMEHT will inform members of any methodology or hospital list changes.

For how long is the MMEHT Providers of Distinction tier Effective January 1, 2014 in place?

The MMEHT Board of Trustees approved the use of the MMEHT Providers of Distinction hospital lists for the entire 2014 calendar year. However, the Board of Trustees reserves the right to consider modifications during the year should there be some compelling reason(s) to explore a change (such as a drop in safety rating or an unintentional error.) The MMEHT Board of Trustees approved the use of the MMEHT Providers of Distinction PCP lists as noted on the Maine Health Management Coalition website, www.getbettermaine.org. MHMC ratings can change periodically throughout the year; they will notify physicians of any changes.

What is the best resource to help me determine what providers to see?

The first place to start is to contact our MMEHT Member Service Representatives at 1-800-852-8300 or htservice@memun.org. We will always have access to the current listing of hospitals designated as *MMEHT Providers of Distinction*. This listing may also be found on the MMEHT website, www.mmeht.org. To find out if your PCP has achieved the required rating to be designated as an *MMEHT Provider of Distinction*, please visit the Maine Health Management Coalition website, www.getbettermaine.org to see their specific ratings on individual categories. A doctor or practice will be considered preferred if they rate "Good", "Better" or "Best" in at least two categories.

MMEHT/ANTHEM HOSPITAL TIERING METHODOLOGY

The MMEHT will use the performance reported on the Maine Health Management Coalition's website (www.getbettermaine.org) and will augment those data with Anthem hospital unit cost data from the most recent year (i.e., July through December 2012). The Coalition website presents performance in the following three categories: **Effective** (treatment of heart failure and pneumonia), **Safe** (preventing surgical infections, medication safety, national safe practice survey, falls with injury, and preventing harm to babies from elective early deliveries), and **Patient Experience**. Based on these three categories and the Anthem hospital cost data the MMEHT will employ the following weighting:

Effective January 1, 2014: Effective = 30% Safe = 30% Patient Experience = 10% Cost = 30%

Using the Maine Health Management Coalition icons for "Low", "Good", "Better", and "Best" the values will be:

Low = 1 Good = 2 Better = 3 Best = 4

"Low" is designated for performance below the national average, "good" represents average, "better" reflects better than the national average, and "best" indicates performance in the top 10% of the nation's hospitals. The math is fairly straightforward. In the **Safe** category, since there are five measures, the maximum value a hospital can receive is 20 (4 x 5). If, for example, a hospital achieved four "betters" and one "best" the raw score would be 16 (4+3+3+3+3=16). The raw score is divided by the maximum value (20) and that percentage (.8) is multiplied by 30 (the weighting factor) to reach a **Safe** score of 24. For those instances when a hospital's performance is indicated as "Not Enough Data" or "Unable to Determine", those items will not be included in the categories denominator.

The same approach is used for the **Effective** measures where the maximum value is 8 (4 x 2). One "best" and one "better" would result in a raw score of 7. The raw score is divided by the maximum (8) producing a percentage (.875) applied to the weighting factor (30) for an **Effective** score of 26.25. For **Patient Experience** only the overall patient experience score from the Hospital Consumer Assessment of Healthcare Providers and Systems survey will be used.

Unlike the other categories, the **Cost** scoring is established as follows:

Based upon Anthem Unit Cost Data for July through December 2012:

- 8% or greater above the Anthem Network average = 0
- Between 4% and 7.9% above the Anthem Network average = 1
- Between the Anthem Network average and 3.9% above the Anthem Network average = 2
- Below the Anthem Network average to 4.9% below the Anthem Network average = 3
- 5% or greater below the Anthem Network average = 4

As in 2013, MMEHT used a total score of 60% of available points as the threshold for preferred status in 2014. In order to receive a score equal to or greater than 60% (or .6), a hospital will have performed "better" or above average in the majority of categories. MMEHT, with Anthem, will update its preferred hospital network annually based upon the MHMC publicly reported results available on July 1st and Anthem's updated hospital unit cost data.

NOTES



MAINE MUNICIPAL EMPLOYEES HEALTH TRUST

MEDICAL PROGRAM SUMMARY - January 1, 2014 to December 31, 2014

All benefits shown are In-Network. Services received Out-of-Network, if covered, may be paid at a lower level of benefits. Please consult your Plan Document or Summary Plan Description booklet for more information.

All figures shown (deductibles, copays, and coinsurance) reflect what the Member pays towards the cost of services.

	1 POS A Traditional	2 POS C Comprehensive	3 POS 200	4 PPO 500	5 PPO 1000	6 PPO 1500	7
DEDUCTIBLE Individual / Family	\$0 (No deductible)	\$0 (No deductible)	\$200 / \$400	\$500 / \$1,000	\$1,000 / \$2,000	\$1,500 / \$3,000	\$2,500 / \$5,000
CO-INSURANCE (Member pays)	10% for most services	10% for most services	20%	20%	20%	20%	20%
OUT OF POCKET MAXIMUM Deductible plus Coinsurance Individual / Family	\$500 / \$1,000	\$1,000 / \$2,000	\$1,200 / \$2,400	\$1,500 / \$3,000	\$2,000 / \$4,000	\$3,000 / \$6,000	\$3,500 / \$7,000
COPAYS:							
Office Visit Copay	\$10	\$15 (PCP or Specialist) / \$10 PCP Provider of Distinction	\$15 PCP / \$20 Specialist / \$10 PCP Provider of Distinction	\$20 PCP / \$30 Specialist / \$10 PCP Provider of Distinction	\$20 PCP / \$30 Specialist / \$10 PCP Provider of Distinction	\$25 PCP / \$35 Specialist / \$15 PCP Provider of Distinction	\$25 PCP / \$35 Specialist / \$15 PCP Provider of Distinction
Mental Health Outpatient Copay	\$10	\$15	\$15	\$20	\$20	\$25	\$25
Emergency Room Copay	\$100	\$100	\$100	\$150	\$150	\$150	\$150
Walk-In Center Copay	\$10	\$15	\$20	\$30	\$30	\$35	\$35
PREVENTIVE CARE:							
Preventive Care, including mammograms, Pap tests, women's preventive health services, colonoscopies, PSA tests, and routine physicals	0%	0%	0%; deductible waived	0%; deductible waived	0%; deductible waived	0%; deductible waived	0%; deductible waived
Preventive Lab and X-Ray	0%	0%	0%; deductible waived	0%; deductible waived	0%; deductible waived	0%; deductible waived	0%; deductible waived
Preventive Eye Exams (Limited benefits)	0%	0%	0%; deductible waived	0%; deductible waived	0%; deductible waived	0%; deductible waived	Not Covered (Exams for children under age 5 covered under preventive care)
OTHER SERVICES:							
In Patient Hospital Services	10% (0% for Physician Services)	10% (0% for Physician Services)	Deductible then 20%	Deductible then 20%	Deductible then 20%	Deductible then 20%	Deductible then 20%
Out Patient Surgical Facility	\$100 copay	\$100 copay	Deductible then 20%	Deductible then 20%	Deductible then 20%	Deductible then 20%	Deductible then 20%
Diagnostic Lab & X-Ray	0%	0%	Deductible then 20%	Deductible then 20%	Deductible then 20%	Deductible then 20%	Deductible then 20%
Advanced Imaging (MRI/CT/PET)	\$100 copay Copays limited to \$300 per Cal Yr	\$100 copay Copays limited to \$300 per Cal Yr	Deductible then 20%	Deductible then 20%	Deductible then 20%	Deductible then 20%	Deductible then 20%
Chiropractic Care	\$10 copay Limited to 36 visits per Cal Yr	\$15 copay Limited to 36 visits per Cal Yr	\$20 copay Limited to 36 visits per Cal Yr Deductible then 20%	\$30 copay Limited to 36 visits per Cal Yr Deductible then 20%	\$30 copay Limited to 36 visits per Cal Yr Deductible then 20%	\$35 copay Limited to 36 visits per Cal Yr Deductible then 20%	\$35 copay Limited to 36 visits per Cal Yr Deductible then 20%
Physical, Speech and Occupational Therapy	\$10 copay Limited to 75 Visits per Cal Yr (Combined Limit)	\$15 copay Limited to 75 Visits per Cal Yr (Combined Limit)	\$15 copay Limited to 75 Visits per Cal Yr (Combined Limit)	\$20 copay Limited to 75 Visits per Cal Yr (Combined Limit)	\$20 copay Limited to 75 Visits per Cal Yr (Combined Limit)	\$20 copay Limited to 75 Visits per Cal Yr (Combined Limit)	\$20 copay Limited to 75 Visits per Cal Yr (Combined Limit)
PRESCRIPTION DRUGS (5 TIER): Tier 1-Select Generic / Tier 1-Standard / Tier 2 / Tier 3 / Tier 4-Specialty and 1-Insulin	5-Tier Rx	5-Tier Rx	5-Tier Rx	5-Tier Rx	5-Tier Rx	5-Tier Rx	5-Tier Rx
RX COPAY (30 day supply)	\$4/\$10/\$30/\$50/\$60	\$4/\$10/\$30/\$50/\$60	\$4/\$10/\$30/\$50/\$60	\$4/\$10/\$30/\$50/\$60	\$4/\$10/\$30/\$50/\$60	\$4/\$10/\$30/\$50/\$60	\$4/\$10/\$30/\$50/\$60
RX COPAY (31-90 day supply)	\$8/\$20/\$60/\$100/\$120	\$8/\$20/\$60/\$100/\$120	\$8/\$20/\$60/\$100/\$120	\$8/\$20/\$60/\$100/\$120	\$8/\$20/\$60/\$100/\$120	\$8/\$20/\$60/\$100/\$120	\$8/\$20/\$60/\$100/\$120
OTHER:							
Voluntary Value-Based Incentives	N/A	Financial Incentives To Use MMEHT Providers of Distinction: Preferred Primary Care Physicians (getbettermaine.org ratings)	Financial Incentives To Use MMEHT Providers of Distinction: Preferred Hospitals (Procedure and "Tax ID") and Preferred Primary Care Physicians	Financial Incentives To Use MMEHT Providers of Distinction: Preferred Hospitals (Procedure and "Tax ID") and Preferred Primary Care Physicians	Financial Incentives To Use MMEHT Providers of Distinction: Preferred Hospitals (Procedure and "Tax ID") and Preferred Physicians (getbettermaine.org ratings)	Financial Incentives To Use MMEHT Providers of Distinction: Preferred Hospitals (Procedure and "Tax ID") and Preferred Physicians (getbettermaine.org ratings)	Financial Incentives To Use MMEHT Providers of Distinction: Preferred Hospitals (Procedure and "Tax ID") and Preferred Physicians (getbettermaine.org ratings)
Cap on In-Network Copays (includes medical and Rx copays) Individual / Family	\$5,850 / \$11,700	\$5,350 / \$10,700	\$5,150 / \$10,300	\$4,850 / \$9,700	\$4,350 / \$8,700	\$3,350 / \$6,700	\$2,850 / \$5,700

MMEHT

This is a summary for comparative purposes only. In the case of any discrepancies, the official contract or plan document will govern.

MAINE MUNICIPAL EMPLOYEES HEALTH TRUST

MEDICAL PROGRAM SUMMARY - January 1, 2014 to December 31, 2014

TYPES OF PLANS

	1 POS A Traditional	2 POS C Comprehensive	3 POS 200	4 PPO 500	5 PPO 1000	6 PPO 1500	7
TYPE OF PLAN	POINT OF SERVICE PLAN	POINT OF SERVICE PLAN	POINT OF SERVICE PLAN	PREFERRED PROVIDER PLAN	PREFERRED PROVIDER PLAN	PREFERRED PROVIDER PLAN	PREFERRED PROVIDER PLAN
PCP Designation	Required	Required	Required	Recommended	Recommended	Recommended	Recommended
Referrals Required?	Yes	Yes	Yes	No	No	No	No
DESCRIPTION	<p>A POS, or Point of Service, plan begins with Anthem's HMO Choice network. Benefits are paid at the In-Network (higher) level for services received from the member's PCP, or from other In-Network providers with a referral from the PCP. Some services require that a member obtain prior authorization in order for benefits to be paid at the higher level of coverage. Benefits are paid at the Out-of-Network (lower) level for services received without a referral (except as designated by the plan), or for services received from Out-of-Network providers.</p>	<p>A POS, or Point of Service, plan begins with Anthem's HMO Choice network. Benefits are paid at the In-Network (higher) level for services received from the member's PCP, or from other In-Network providers with a referral from the PCP. Some services require that a member obtain prior authorization in order for benefits to be paid at the higher level of coverage. Benefits are paid at the Out-of-Network (lower) level for services received without a referral (except as designated by the plan), or for services received from Out-of-Network providers.</p>	<p>A POS, or Point of Service, plan begins with Anthem's HMO Choice network. Benefits are paid at the In-Network (higher) level for services received from the member's PCP, or from other In-Network providers with a referral from the PCP. Some services require that a member obtain prior authorization in order for benefits to be paid at the higher level of coverage. Benefits are paid at the Out-of-Network (lower) level for services received without a referral (except as designated by the plan), or for services received from Out-of-Network providers.</p>	<p>A PPO plan is an arrangement where the health plan contracts with independent physicians, hospitals and other health care providers who become members of a preferred provider network. The member may direct his/her care and elect either In-Network or Out-of-Network providers. However, it will cost more to see an Out-of-Network provider. The member is not required to obtain referrals from his/her PCP.</p>	<p>A PPO plan is an arrangement where the health plan contracts with independent physicians, hospitals and other health care providers who become members of a preferred provider network. The member may direct his/her care and elect either In-Network or Out-of-Network providers. However, it will cost more to see an Out-of-Network provider. The member is not required to obtain referrals from his/her PCP.</p>	<p>A PPO plan is an arrangement where the health plan contracts with independent physicians, hospitals and other health care providers who become members of a preferred provider network. The member may direct his/her care and elect either In-Network or Out-of-Network providers. However, it will cost more to see an Out-of-Network provider. The member is not required to obtain referrals from his/her PCP.</p>	<p>A PPO plan is an arrangement where the health plan contracts with independent physicians, hospitals and other health care providers who become members of a preferred provider network. The member may direct his/her care and elect either In-Network or Out-of-Network providers. However, it will cost more to see an Out-of-Network provider. The member is not required to obtain referrals from his/her PCP.</p>
	<ul style="list-style-type: none"> In-Network Providers - Members select a Primary Care Physician (PCP) from within the Anthem HMO Choice network. To receive the In-Network level of benefits under this plan, the member must follow a plan of care from their PCP, and must receive referrals from their PCP when necessary. 	<ul style="list-style-type: none"> In-Network Providers - Members select a Primary Care Physician (PCP) from within the Anthem HMO Choice network. To receive the In-Network level of benefits under this plan, the member must follow a plan of care from their PCP, and must receive referrals from their PCP when necessary. 	<ul style="list-style-type: none"> In-Network Providers - Members select a Primary Care Physician (PCP) from within the Anthem HMO Choice network. To receive the In-Network level of benefits under this plan, the member must follow a plan of care from their PCP, and must receive referrals from their PCP when necessary. 	<ul style="list-style-type: none"> Network (Preferred) Providers: Benefits to the member include lower deductibles and higher coinsurance reimbursements than services provided Out-of-Network. In some plans, the annual deductible is waived and replaced by a minimum copay for certain services performed in a Network provider's office. 	<ul style="list-style-type: none"> Network (Preferred) Providers: Benefits to the member include lower deductibles and higher coinsurance reimbursements than services provided Out-of-Network. In some plans, the annual deductible is waived and replaced by a minimum copay for certain services performed in a Network provider's office. 	<ul style="list-style-type: none"> Network (Preferred) Providers: Benefits to the member include lower deductibles and higher coinsurance reimbursements than services provided Out-of-Network. In some plans, the annual deductible is waived and replaced by a minimum copay for certain services performed in a Network provider's office. 	<ul style="list-style-type: none"> Network (Preferred) Providers: Benefits to the member include lower deductibles and higher coinsurance reimbursements than services provided Out-of-Network. In some plans, the annual deductible is waived and replaced by a minimum copay for certain services performed in a Network provider's office.
	<ul style="list-style-type: none"> Self-Referred and Out-of-Network Providers - Members may receive care from In-Network providers without referral from the PCP, or may self-refer to providers not in the HMO Choice network. This will result in higher out-of-pocket costs to the member. 	<ul style="list-style-type: none"> Self-Referred and Out-of-Network Providers - Members may receive care from In-Network providers without referral from the PCP, or may self-refer to providers not in the HMO Choice network. This will result in higher out-of-pocket costs to the member. 	<ul style="list-style-type: none"> Self-Referred and Out-of-Network Providers - Members may receive care from In-Network providers without referral from the PCP, or may self-refer to providers not in the HMO Choice network. This will result in higher out-of-pocket costs to the member. 	<ul style="list-style-type: none"> Out-of-Network Providers: Members may receive care from a provider (doctor or hospital) who is not on the list of preferred providers. Such services may have a higher deductible or copay and lower coinsurance reimbursement. 	<ul style="list-style-type: none"> Out-of-Network Providers: Members may receive care from a provider (doctor or hospital) who is not on the list of preferred providers. Such services may have a higher deductible or copay and lower coinsurance reimbursement. 	<ul style="list-style-type: none"> Out-of-Network Providers: Members may receive care from a provider (doctor or hospital) who is not on the list of preferred providers. Such services may have a higher deductible or copay and lower coinsurance reimbursement. 	<ul style="list-style-type: none"> Out-of-Network Providers: Members may receive care from a provider (doctor or hospital) who is not on the list of preferred providers. Such services may have a higher deductible or copay and lower coinsurance reimbursement.
	<p>A Point of Service plan allows members to receive services from both In-network and out-of-network providers. How benefits will be paid (either at the In-network or out-of-network level) is determined when the member actually receives the service (i.e., at the point of service).</p>	<p>A Point of Service plan allows members to receive services from both In-network and out-of-network providers. How benefits will be paid (either at the In-network or out-of-network level) is determined when the member actually receives the service (i.e., at the point of service).</p>	<p>A Point of Service plan allows members to receive services from both In-network and out-of-network providers. How benefits will be paid (either at the In-network or out-of-network level) is determined when the member actually receives the service (i.e., at the point of service).</p>	<p>Similar to the POS plan, patients may choose to receive care from providers who do not participate in the network. However, in most cases the member will be responsible for paying higher out of pocket costs for services received from Out-of-Network providers.</p>	<p>Similar to the POS plan, patients may choose to receive care from providers who do not participate in the network. However, in most cases the member will be responsible for paying higher out of pocket costs for services received from Out-of-Network providers.</p>	<p>Similar to the POS plan, patients may choose to receive care from providers who do not participate in the network. However, in most cases the member will be responsible for paying higher out of pocket costs for services received from Out-of-Network providers.</p>	<p>Similar to the POS plan, patients may choose to receive care from providers who do not participate in the network. However, in most cases the member will be responsible for paying higher out of pocket costs for services received from Out-of-Network providers.</p>
Flexible Choice - Plan Program Combinations							
Single Program Options:	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Dual Program Options:	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Triple Program Options:	Yes	Yes	Yes	Yes	Yes	Yes	Yes

MMEDT

This is a summary for comparative purposes only. In the case of any discrepancies, the official contract or plan document will govern.



Maine Municipal Employees Health Trust

MONTHLY RATES
EFFECTIVE DATE: JANUARY 1, 2014

LEWISTON

RATED GROUP

	POS-A Traditional	POS-C Comprehensiv	POS-200	PPO-500	PPO-1000	PPO-1500	PPO-2500
Single Person	841.78	740.77	631.34	597.67	572.41	521.91	471.39
Employee & Spouse	1,888.06	1,661.49	1,416.04	1,340.52	1,283.88	1,170.60	1,057.31
Employee & Child(ren)	1,373.46	1,208.64	1,030.10	975.16	933.95	851.54	769.14
Family	1,888.06	1,661.49	1,416.04	1,340.52	1,283.88	1,170.60	1,057.31

Retiree (with Medicare) - Retiree Group Companion Plan

Single Person	420.36
Two Person	840.71

¹ Dental

Single Person	\$39.30
Employee & Spouse	\$67.84
Employee & Child(ren)	\$129.48
Family	\$129.48

² Vision

Single Person	\$5.31
Employee & Spouse	\$10.62
Employee & Child(ren)	\$11.37
Family	\$18.18

Income Protection Plan (short term disability)

Employee may select 40%, 55% or 70% of annual salary
\$1.90 per month for each \$100 of monthly coverage

Long Term Disability

³ Employer Paid: \$0.40 per \$100 of covered payroll

⁴ Employee Paid: Age banded

Life Insurance

Basic Life (including AD&D)	\$0.30 per \$1,000 of coverage, per month No cost if enrolled in health insurance
Supplemental Life	\$0.30 per \$1,000 of coverage, per month
Dependent Life	Option A \$1.50 Option B \$3.20

1 - Dental coverage has no minimum participation requirement

2 - Vision coverage has no minimum participation requirement

3 - Long Term Disability must have 100% enrollment if employer-paid

4 - Long Term Disability requires minimum 25% enrollment if employee-paid

LEWISTON CITY COUNCIL
MEETING OF DECEMBER 3, 2013

AGENDA INFORMATION SHEET:

AGENDA ITEM NO. 5

SUBJECT:

Amendments to the Traffic Schedule regarding parking prohibited on a portion of Water's Edge Drive.

INFORMATION:

Due to the problems encountered by the No Name Pond beach area residents, City Administration is recommending restricted parking in the area of the beach to protect the watershed area and to address traffic safety concerns. At the November 19 Council meeting, the Council approved parking restrictions on No Name Pond Road. A resident of Water's Edge Drive requested similar parking restrictions to protect his neighborhood from the same issue. The Police Department reviewed his request and concurs with this change.

Please see the memorandum from the Police Department for additional information on this item.

APPROVAL AND/OR COMMENTS OF CITY ADMINISTRATOR:

The City Administrator recommends approval of the requested action.



REQUESTED ACTION:

1	2	3	4	5	6	7	M
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To adopt the proposed amendments to the Traffic Schedule for Water's Edge Drive and to prohibit parking from April 15 - November 15 on both sides of Water's Edge Drive for 100 ft on the easterly side and 200 ft on the westerly side.



The Office of
Deputy City Administrator
Phil Nadeau
MEMORANDUM

TO: Mayor and City Council
FR: Phil Nadeau
CC:
RE: Proposal to restrict parking on a section of Waters Edge Drive
DT: 12.3.13

Prior to the Council's 11.19.13 approval to restrict parking on No Name Pond Road, Waters Edge Drive resident John Brubeck testified that the Waters Edge Drive Homeowners Association would be supportive of additional parking restrictions on Waters Edge Drive to address vehicles that may elect to park on that street given the now approved parking restrictions on No Name Pond Road.

Accordingly, the City Administrator's Office has taken action to mail notices to all Waters Edge Drive property owners. Additionally, given that this proposal has the support of the homeowners association, Administration will request approval of the traffic schedule amendment which will restrict parking beginning at the intersection of Waters Edge Drive and No Name Pond Road traveling northerly on Waters Edge Drive in accordance with the distances specified in the enclosed agenda materials. Sgt. Chick has recommended two sets of distances with a longer distance on the western side of Waters Edge Drive to address the potential safety issues associated with a downhill curve in the street (see enclosed map).

Consistent with the approval for No Name Pond Road, the parking shall be restricted on both sides of the street from April 15th through November 15th and will be enforced with towing for violators.



POLICE DEPARTMENT

Sgt. David K. Chick
Inspector of Police



DATE: November 20, 2013
TO: Traffic Schedule Review
FROM: Sgt. David Chick, Inspector of Police
Subject: Waters Edge Drive

**Traffic Schedule Amendment – Chapter 70 Section 140
Parking Prohibited – All Times – Specified Places (Section 50)**

Submitted as a result of a request made by a resident, which was presented directly to City Council, during the process of active discussions for consideration and approval of a similar parking prohibition being made on No Name Pond Rd.

NOTE: (Additions are double underlined; deletions are ~~struck out~~).

Section 50 – Parking Prohibited – All Times – Specified Places

WATERS EDGE DRIVE **Odd numbered side, easterly side, beginning at No Name Pond Rd and extending northerly for 100'. No Parking April 15th through November 15th; Violators may be towed.**

Even numbered side, westerly side, beginning at No Name Pond Rd and extending northerly for 200'. No Parking April 15th through November 15th; Violators may be towed.

If this amendment is approved, this would require Public Works department to install sign(s) and marking(s) pertaining to the intended designations.

Sgt. David Chick, Inspector of Police

**cc: Michael Bussiere
Ed Barrett – City Hall; Phil Nadeau – City Hall; Lincoln Jeffers – City Hall;
Kathy Montejo – City Clerk; Steve Murch – Public Works; Paul Ouellette – Fire**



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POLICE DEPARTMENT

Sgt. David K. Chick
Inspector of Police



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Dependability

LEWISTON CITY COUNCIL
MEETING OF DECEMBER 3, 2013

AGENDA INFORMATION SHEET:

AGENDA ITEM NO. 6

SUBJECT:

Order Authorizing execution of a Municipal Quitclaim Deed for Real Estate located at 50 Pierce Street.

INFORMATION:

The Council is asked to approve a municipal quitclaim deed for the property located at 50 Pierce Street. The quitclaim deed will release any interest the City may have by virtue of undischarged real estate tax liens or utility liens on this property.

Please see the memorandum from Finance Director Heather Hunter for additional information.

APPROVAL AND/OR COMMENTS OF CITY ADMINISTRATOR:

The City Administrator recommends approval of the requested action.

EAB/kmm

REQUESTED ACTION:

1	2	3	4	5	6	7	M
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To approve the Order authorizing execution of a municipal quitclaim deed for real estate located at 50 Pierce Street.



**City of Lewiston Maine
City Council Order
December 3, 2013**

**Order, Authorizing Execution of a Municipal Quitclaim Deed – Real Estate
Located at 50 Pierce Street.**

WHEREAS, the owner, Watkins Property Management, failed to pay their real estate taxes on a timely basis for 50 Pierce Street (Tax Map 195, Lot 500, Parcel 00-005327); and

WHEREAS, a real estate tax lien in the amount of \$519.06 was recorded on June 17, 2011 (Book 8182 Page 12), matured on December 17, 2012, and was paid on January 17, 2013; and

WHEREAS, payment will be received in full for the FY2012, FY2013, and the first half of FY2014 real estate taxes with the sale of property scheduled for December 4, 2013;

NOW, THEREFORE, BE IT ORDERED by the CITY COUNCIL of the CITY of LEWISTON that a quitclaim deed for 50 Pierce Street be issued to release the City's interest in the property back to the owner upon payment in full at closing of all outstanding amounts owed to the City on this property.



Finance Department

Heather Hunter
Director of Finance/Treasurer
hhunter@lewistonmaine.gov



TO: Mayor Robert E. Macdonald
And Members of the City Council

FROM: Heather Hunter, Finance Director/Treasurer

SUBJECT: **Quitclaim Deeds**

DATE: November 25, 2013

One of the most powerful collection tools in a municipality's arsenal is the ability to lien properties for delinquent taxes (real and special only), water and sewer balances, and most recently stormwater balances. Once a lien is recorded, eighteen months must lapse without payment before the lien matures. Prior to maturity, the City Council may waive the right to foreclose on a maturing lien as you have done in the past. If the lien is permitted to mature, the municipality may elect to foreclose on the property or if subsequent payment is received return the property to its owner via a quitclaim deed.

At your December 3rd meeting, there will be a quitclaim deed requiring your action for the following property dealing with a matured tax lien. The property is being sold and the taxes owed of \$1,336.03 (FY2013-FY2014), will be brought current.

Former Owner: Watkins Property Management
Deed Released to: Watkins Property Management
Address: 50 Pierce Street
Tax Map: 195 Lot 500 Parcel: 00-005327
Type of Lien: Tax Lien Filed: 6/17/11 (B8182 P12)
Matured: 12/17/12 Paid: 1/17/13

At this time, I am requesting you approve the quitclaim order for the above account so the property can be released from the City to the owner.

Please feel free to contact me with any questions or concerns you may have. I will also be available at the meeting to address comments.

LEWISTON CITY COUNCIL

MEETING OF DECEMBER 3, 2013

AGENDA INFORMATION SHEET:

AGENDA ITEM NO. 7

SUBJECT:

Receipt of City Clerk's report regarding valid signatures for the citizen initiative petition regarding the consolidation of the Cities of Lewiston and Auburn and to review proposed election time line.

INFORMATION:

The City's Elections Ordinance requires the City Clerk to issue a report to the City Council verifying the number of voter signatures that have been approved for any citizen initiative petitions. The petition regarding the consolidation of the Cities of Lewiston and Auburn was submitted shortly after election day and has the required minimum number of valid signatures. The City Clerk's report is attached. The minimum number of valid signatures was submitted to the City of Auburn at the beginning of the fall and have been verified as well.

Also attached is a potential time line for the election of the Charter Commissioners, should the City Council choose to set the election date to coincide with the June 10, 2014 state primary election.

APPROVAL AND/OR COMMENTS OF CITY ADMINISTRATOR:

The City Administrator recommends approval of the requested action.

EAR/kmm

REQUESTED ACTION:

1	2	3	4	5	6	7	M
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1) To accept the City Clerk's report regarding verified petition signatures for the petition to consolidate the Cities of Lewiston and Auburn.

2) To review the proposed time line for the election of three Joint Charter Commissioners for the purpose of drafting a consolidation agreement.



City of Lewiston, Maine

Department of City Clerk

Kathleen M. Montejo, MMC
City Clerk & Registrar of Voters

Kelly J. Mercier, CMC
Deputy City Clerk



CITY CLERK'S REPORT REGARDING VERIFIED PETITION SIGNATURES

Pursuant to Section 32-27 of the City's Elections Ordinance, the City Clerk is required to submit a report to the City Council within ten days of the closing date of any citizen initiative and referendum petition.

The following report is submitted to the City Council:

Name of Petition:	Petition to the Lewiston City Council to Consolidate the City of Lewiston with the City of Auburn and Request that Three Persons Be Elected by the Voters of the City of Lewiston to serve as members of a Joint Charter Commission for the purpose of drafting a Consolidation Agreement
Date Petition Issued to Organizers:	May 28, 2013
Date Last Petition Submitted for Filing:	November 6, 2013
Number of Valid Signatures Required:	1,000 (as required by MRSA Title 30-A, Sec 2152)
Number of Valid Signatures Verified:	1,022 (Note: An additional 332 signatures were submitted but not verified because the minimum number was met.)

Copies of blank petition form are attached for reference

I, Kathleen Montejo, Lewiston City Clerk, hereby declare to the Lewiston City Council that the citizen initiative petition regarding the Consolidation of the Cities of Lewiston and Auburn, issued by my office on May 28, 2103 and verified by my office on November 12, 2013, contains the number of valid voter signatures as required under Maine State Statutes, Title 30-A, Section 2152 and is hereby deemed valid and in effect.

ATTEST:


Kathleen M. Montejo, MMC

November 15, 2013

PETITION TO THE LEWISTON CITY COUNCIL TO CONSOLIDATE THE CITY OF LEWISTON WITH THE CITY OF AUBURN AND REQUEST THAT THREE PERSONS BE ELECTED BY THE VOTERS OF THE CITY OF LEWISTON TO SERVE AS MEMBERS OF A JOINT CHARTER COMMISSION FOR THE PURPOSE OF DRAFTING A CONSOLIDATION AGREEMENT.

We, the undersigned, are duly qualified voters of the City of Lewiston, residing respectively at the addresses placed opposite our names, and hereby propose to consolidate the City of Lewiston with the City of Auburn. We hereby petition the City Council to submit to the voters of the City of Lewiston, at the next special or regular municipal election, the election of three persons to serve as members of a joint charter commission for the purpose of drafting a consolidation agreement to present to the voters at a later date, as provided in 30-A M.R.S.A. § 2152. The candidates shall be nominated by petition in accordance with Section 7.02 of the City of Lewiston Charter, and elected in accordance with Article VII of the City of Lewiston Charter.

NOTE: One thousand signatures are required under Title 30-A M.R.S.A. § 2152

	SIGNATURE	PRINTED NAME	RESIDENCE ADDRESS	DATE
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CIRCULATOR'S OATH

I, _____, a registered voter of Lewiston, do solemnly affirm that I personally circulated this petition and each of the signatures contained herein were made in my presence, that to the best of my knowledge and belief each signature is the signature of the person whose name it purports to be, and that at time of the signing of each of the above signatures, I made certain that the person affixing his name thereto had reasonable knowledge of the purpose of the Petition.

Dated: _____ Signature of Circulator: _____

Please print name and address: _____

State of Maine
 _____, SS. _____, 2013

Personally appeared the above named _____ who made oath to the truth of the foregoing.

Before me,

 Notary Public/Attorney-at-Law

CERTIFICATION OF REGISTRAR

_____, 2013

I hereby certify that I am a Deputy Registrar of Voters of the City of Lewiston, Maine, and I have certified the following number of signatures on this petition: _____

Date: _____

 Signature - Registrar of Voters

POTENTIAL TIMELINE FOR ELECTION OF COMMISSION TO DRAFT CHARTER FOR MERGING LEWISTON & AUBURN

What follows is a preliminary timeline for election of Charter Commissioners for the purpose of drafting a charter to merge the cities of Lewiston and Auburn. It has been developed based on the assumption that the election of commissioners will be scheduled for the primary election to be held on June 10, 2014. I would note that it would seem appropriate for Lewiston and Auburn to coordinate efforts in regard to scheduling this election so that both cities will elect commissioners at the same time.

Background - Under the statutes (MRSA Title 30-A, Sec 2151 – 2156), when 1,000 valid signatures are submitted on a petition to consolidate two or more municipalities, the City Council shall schedule at the next available election, the election of three Joint Charter Commissioners (three from Lewiston and three from Auburn). Once elected, the six Joint Charter Commission members are tasked with drafting a consolidation agreement.

November 2013 – 1,000 signatures have been submitted and verified on a Lewiston petition to start the formal process to consolidate the Cities of Lewiston and Auburn.

December 3, 2014 City Council meeting – Receive report on submission and completion of consolidation petition

January 7, 2014 City Council meeting – Workshop issue with new City Council

January 21, 2014 City Council meeting– Vote to set election date for the Joint Charter Commissioners as June 10, 2014

February 10, 2014 – Nomination papers become available for the Joint Charter Commission seats (120 days before election day by Lewiston Charter)

April 11, 2014 – Filing deadline for nomination papers for Joint Charter Commission seats (60 days before election day by Lewiston Charter)

June 10, 2014 – Election Day Top three candidates receiving the most votes are elected to serve as the three Joint Charter Commissioners from Lewiston

LEWISTON CITY COUNCIL

MEETING OF DECEMBER 3, 2013

AGENDA INFORMATION SHEET:

AGENDA ITEM NO. 8A

SUBJECT:

Report and Update - 2013 Homeland Security Grant Award

INFORMATION:

The City has once again been awarded grants related to homeland security. This year's grants total \$149,454.55. Staff has developed a proposed list of items to be funded from these grants as detailed on the attached memo from Fire Chief Paul LeClair.

At this time, we would appreciate your review of these proposed uses and any questions, comments, or suggestions you might have prior to finalizing the proposal and presenting it for final approval at your next meeting.

APPROVAL AND/OR COMMENTS OF CITY ADMINISTRATOR:

The City Administrator recommends approval of the requested action.

EAS/kmm

REQUESTED ACTION:

1	2	3	4	5	6	7	M
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To review and comment on the proposed uses of 2013 Homeland Security Grant funds.

Lewiston Fire Department



Paul M. LeClair
Fire Chief

Bruce H. McKay
Assistant Chief



November 20, 2013

To: Administrator Barrett

From: Chief LeClair

Re: 2013 Homeland Security Grant Award

The City of Lewiston has been awarded 2013 Homeland Security Grant Program funding through the Maine Emergency Management Agency. Lewiston is one of six Metro Cities in the State of Maine to receive Homeland Security Grant funding to improve preparedness and response capabilities for Homeland security related events. Grant funds were awarded from the following programs.

- \$110,834.85 from the State Homeland Security Program (SHSP)
- \$38,619.70 from the Law Enforcement Terrorism Prevention Program (LETPP)
- **Total Grant award: \$149,454.55**

Once the City Council approves the appropriation of the grant award, I will submit grant applications for the following items in line with Homeland Security Grant criteria:

- | | |
|---|-------------|
| • Fire Department Self Contained Breathing Apparatus | \$10,000.00 |
| • Fire Apparatus Mobile and Portable Radios | \$38,000.00 |
| • Fire Department Hazardous Materials Operations Training | \$4,400.00 |
| • 911 Communications Center Portable Radios | \$4,500.00 |
| <i>Matching funding with the City of Auburn</i> | |
| • Cobra Team Equipment | \$18,800.00 |
| <i>Matching funding with the City of Auburn</i> | |
| • Police Department Mobile Radios | \$43,500.00 |
| • Surveillance Network Maintenance | \$5,000.00 |
| • Lewiston School Department Security Project | \$20,000.00 |
| • Lewiston Emergency Response Plan | \$5,000.00 |

Background: Since 2004 the City of Lewiston has been awarded Homeland Security Grant Funding for equipment, training and practical skill exercises. Grant applications are submitted to the Maine Emergency Management Agency for review and approval. Applications are drafted based on the strict guidelines published by the US Department of Homeland Security.

Prior projects that have been funded by Homeland Security Grants include:

- Lewiston Public Safety Agency radios, repeaters and towers
- IMC Records Management Software and computer hardware
- Surveillance and Access equipment for City and School facilities
- Lewiston High School Generator (Shelter)
- Haz-Mat Team equipment and training
- Public Safety exercises
- Lewiston City Hall Generator and UPS Backup
- Air Packs for Fire and Cobra Team
- 911 Communications Center Equipment and Software
- Public Works Training Center

http://www.maine.gov/mema/homeland/home_grants_current.shtml

LEWISTON CITY COUNCIL
MEETING OF DECEMBER 3, 2013

AGENDA INFORMATION SHEET:

AGENDA ITEM NO. 10

SUBJECT:

Executive Session to discuss labor union negotiations regarding the city's six employee unions.

INFORMATION:

The Maine State Statutes, Title 1, section 405, define the permissible grounds and subject matters of executive sessions for public meetings.

APPROVAL AND/OR COMMENTS OF CITY ADMINISTRATOR:

The City Administrator recommends approval of the requested action.

EAB/kmm

REQUESTED ACTION:

1	2	3	4	5	6	7	M
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To enter into an Executive Session pursuant to MRSA Title 1, section 405 (6) (D) to discuss Labor Negotiations regarding the city's six employee unions - International Association of Firefighters, Local 785; Maine State Employees Association, Local 1989; Maine Association of Police; Lewiston Police Supervisory Command Unit; Lewiston Professional Technical Unit, Local 3855 and Lewiston Public Works Unit, Local 1458.

LEWISTON CITY COUNCIL
MEETING OF DECEMBER 3, 2013

AGENDA INFORMATION SHEET:

AGENDA ITEM NO. 11

SUBJECT:

Executive session pursuant to MRSA Title 1, section 405(6)(A) to discuss a personnel matter regarding the annual evaluation of the City Administrator.

INFORMATION:

The Maine State Statutes, Title 1, section 405, define the permissible grounds and subject matters of executive sessions for public meetings.

APPROVAL AND/OR COMMENTS OF CITY ADMINISTRATOR:

Entering into executive session is permitted and defined under Maine State Statutes.

EATB/kmm

REQUESTED ACTION:

1	2	3	4	5	6	7	M
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To enter into an executive session pursuant to MRSA Title 1, section 405(6)(A) to discuss a personnel matter regarding the annual evaluation of the City Administrator.