

MILFORD SELECT BOARD: AGENDA
July 11, 2022 – 6:00 PM, ROOM 03, TOWN HALL

A.) SIGNING OF WARRANT, APPROVAL of Minutes, June 13, 2022
EXECUTIVE SESSION Minutes, June 13, 2022

B.) INVITATION TO SPEAK

Remote Public Hearing/Invitation to Speak access now requires advanced registration. Please register online here: <http://tiny.cc/cd0tuz> Any member of the public may now register to access the zoom webinar as an attendee. Public attendees will be able to view the zoom LIVE and request to speak at the “Public Hearing/Invitation to Speak.”

C.) PUBLIC HEARINGS

D.) SCHEDULED APPOINTMENTS

1. Ray's Automart dba The 5th Element, LLC, re: Transfer of Class II License
2. Restaurant Ecuatoriano La Fogata de Flor, Inc., re: Transfer of Common Victualler license
3. Miranda Industries, LLC dba Acai Central, re: Amendment to Common Victualler License-Change of Name
4. Pin Pan Pollo Corp, re: Common Victualler License
5. Finance Director, re: 33B Transfers
6. Police Chief, re: Traffic Constables Policy
7. Milford TV, re: Annual Report
8. Town Counsel, re: Comcast Contract
9. Town Counsel, re: Birch Street 40B Project

E.) TOWN ADMINISTRATOR'S REPORT

F.) OLD BUSINESS

G.) NEW BUSINESS

1. Human Resources Director, re: Appointment-Assistant Animal Control Officer
2. Downtown Revitalization Committee, re: Resignation
3. Downtown Revitalization Committee, re: Appointment
4. 4th of July Parade Committee, re: Acceptance of Gifts
5. Building Commissioner, re: Assistant Position
6. Police Chief, re: Illegal Parking and Illegal Dumping Signs-Old Cedar Street
7. Police Chief, re: No Parking Here to Corner Sign-Pond Street
8. Annual Appointments

H.) CORRESPONDENCE

I.) EXECUTIVE SESSION

The listing of matters above are those reasonably anticipated by the Chair which may be discussed at the meeting. Not all items listed may be discussed and other items not listed may also be brought up for discussion to the extent permitted by law.

D-1
7-11-22

DEPARTMENT HEAD REVIEW FORM

- 1. Name of Business: **Ray's Automart dba The 5th Element, LLC**
- 2. Address: **232 West Street**
Assessors ID#: **Map ___ Block ___ Lot ___ Zone _**
- 3. Has applied for: **Transfer of Class II License from Geara Enterprises, Inc. dba Milford Goodyear Getty**
- 4. Selectmen will take action on: **7/11/2022**
- 5. Abutters Notified: **__N/A__** Published: **__N/A**
- 6. Inquiry Sent To Dept. Heads on:
- 7. Please Respond By: **___**
- 8. License Approved: **_____** Denied: **_____** Tabled: **_____** On **_____**

.....
Building Commissioner: (Zoning, Occupancy, Building/Handicap Access, Restroom Handicap Access, etc.) **CC zone, allowable use, building is accessible, no public restrooms**

Town Planner: (Site Plan/Special Permit; Other Requirements/Stipulations) **Ok-no change of actual use**

Tax Collector: (Outstanding Taxes) **No outstanding taxes**

Town Treasurer: (Outstanding Tax Liens) **None**

Fire Chief: (Information/Comment) **No objections**

Police Chief: (Information/Comment) **No issues**

Criminal Offense Record Info: (CORI) Approved Disapproved

Board of Health: (Information/comment) **In compliance**

Dept. Head Signature: _____ **Date:** _____

.....
Contact Name/Manager: *Ravil Abilkadirov D.O.B.*

SS #

Phone: **e-mail:**



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main St. (Route 16), Milford, Massachusetts 01757-2679

508-634-2303

Fax 508-634-2324

www.milfordma.gov

LICENSE APPLICATION (CHECK ONE)

- APPLICATION FOR A NEW LICENSE
- TRANSFER OF AN EXISTING LICENSE
- AMENDMENT TO EXISTING LICENSE (Change of operating days/hours, change of location, etc.) *describe on reverse*

- | | |
|---|---|
| 1. <input type="checkbox"/> AUCTIONEER | 11. <input type="checkbox"/> LIVE ENTERTAINMENT (<i>describe on reverse</i>) |
| 2. <input type="checkbox"/> BOARDING HOUSE | 12. <input type="checkbox"/> AUTOMATIC AMUSEMENT (Coin-Operated Games) |
| 3. <input type="checkbox"/> BOWLING ALLEY(S) | 13. <input type="checkbox"/> TRANSIENT VENDORS |
| 4. <input type="checkbox"/> COMMON VICTUALLER | 14. <input type="checkbox"/> CARNIVAL/CIRCUS Location: _____ |
| 5. <input type="checkbox"/> FORTUNE TELLER | 15. <input type="checkbox"/> CHRISTMAS TREE SALES |
| 6. <input type="checkbox"/> HAWKERS/PEDDLERS | \$ <input type="checkbox"/> VALUE OF GOODS |
| 7. <input type="checkbox"/> INNHOLDERS | 16. <input type="checkbox"/> CLASS I (NEW CARS) |
| 8. <input type="checkbox"/> POOL TABLES | <input checked="" type="checkbox"/> CLASS II (USED CARS) |
| 9. <input type="checkbox"/> 2 ND HAND/ANTIQUA DEALER | <input type="checkbox"/> CLASS III (JUNK CARS) - Public Hearing Required (Describe on Reverse) |
| 10. <input type="checkbox"/> PAWNBROKER | 17. <input type="checkbox"/> WORKERS COMPENSATION IF NEEDED |

SEE ADDITIONAL INFORMATION REQUIRED BELOW

BUSINESS NAME: RAY'S AUTOMART DDA THE STRELEMENT LLC

BUSINESS ADDRESS: 232 West Street 3

DAYS/HOURS OF OPERATION 8-4 M-S
(Some Sunday licenses may require approval of State DPS)

I/We, the undersigned, apply for this license in accordance with the provisions of all Statutes relating thereto. I/We further certify, under penalties of perjury, that, to the best of my/our knowledge and belief, I/We have filed all state tax returns and paid all state taxes required under law.

NAME OF APPLICANT: Davil Abilkaditov

MAILING ADDRESS: _____

EMAIL ADDRESS: _____

APPLICANT'S DATE OF BIRTH: _____

Social Security No. (Mandatory) _____ and _____ Federal Identification No. (Mandatory)

APPLICANT'S SIGNATURE: Davil (Individual or Corporate Officer) DATE: 06/13/22

Type or print name on this line _____ Daytime Telephone Number _____

IMPORTANT: Read this section carefully. Provide required information on reverse side. *Additional Information Required:*

- License # Above
- 1 Provide copy of State and/or County Auctioneer's License
 - 3, 8, 12 Indicate number of alleys, pool tables and number and types of coin-operated games
 - 6, 9, 10, 13 Request Town By Laws, which states applicant's responsibility
 - 6, 13 Describe in detail: type, quantity, and cost (to you) of goods to be offered for sale
 - 11 Describe in detail: type of live entertainment to be licensed
 - 14 Applicant must request and agree to abide by established policy

CONTINUE APPLICATION PROCESS ON REVERSE SIDE OF THIS FORM

D-2
7-11-22

DEPARTMENT HEAD REVIEW FORM

- 1. Name of Business: **Restaurant Ecuatoriano La Fogata de Flor, Inc.**
- 2. Mailing Address: **94 Main Street**
Assessors ID#: **Map 48 Block 0 Lot 513 Zone CA**
- 3. Has applied for: **Transfer of Common Victualler License from Bahia & Bakery Restaurant**
- 4. Selectmen will take action on: **7/11/2022**
- 5. Abutters Notified: N/A Published: N/A
- 6. Inquiry Sent To Dept. Heads on:
- 7. Please Respond By:
- 8. License Approved: Denied: Tabled: On

.....
Building Commissioner: (Zoning, Occupancy, Building/Handicap Access, Restroom Handicap Access, etc.) **CA zone, allowable use, occupant load 14, building and restrooms not accessible**

Town Planner: (Site Plan/Special Permit; Other Requirements/Stipulations) **Ok-no change of actual use**

Tax Collector: (Outstanding Taxes) **No outstanding taxes**

Town Treasurer: (Outstanding Tax Liens) **None**

Fire Chief: (Information/Comment) **No objections**

Police Chief: (Information/Comment) **No issues**

Criminal Offense Record Info: (CORI) Approved Disapproved

Board of Health: (Information/comment) **No violations**

Dept. Head Signature: _____ **Date:** _____

.....
Contact Name/Manager: *Rosa Flor Daquilema Sauce D.O.B.*
SS #
Phone: 973-332-7277 **e-mail:** *rosaflordaquilema@gmail.com*



MILFORD SELECT BOARD

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LICENSE APPLICATION

(CHECK ONE)

- APPLICATION FOR A NEW LICENSE
- TRANSFER OF AN EXISTING LICENSE
- AMENDMENT TO EXISTING LICENSE (Change of operating days/hours, change of location, etc.) *describe on reverse*

- | | |
|---|---|
| 1. <input type="checkbox"/> AUCTIONEER | 11. <input type="checkbox"/> LIVE ENTERTAINMENT (<i>describe on reverse</i>) |
| 2. <input type="checkbox"/> BOARDING HOUSE | 12. <input type="checkbox"/> AUTOMATIC AMUSEMENT (Coin-Operated Games) |
| 3. <input type="checkbox"/> BOWLING ALLEY(S) | 13. <input type="checkbox"/> TRANSIENT VENDORS |
| 4. <input checked="" type="checkbox"/> COMMON VICTUALLER | 14. <input type="checkbox"/> CARNIVAL/CIRCUS Location: _____ |
| 5. <input type="checkbox"/> FORTUNE TELLER | 15. <input type="checkbox"/> CHRISTMAS TREE SALES |
| 6. <input type="checkbox"/> HAWKERS/PEDDLERS | \$ <input type="checkbox"/> VALUE OF GOODS |
| 7. <input type="checkbox"/> INNHOLDERS | 16. <input type="checkbox"/> CLASS I (NEW CARS) |
| 8. <input type="checkbox"/> POOL TABLES | <input type="checkbox"/> CLASS II (USED CARS) |
| 9. <input type="checkbox"/> 2 ND HAND/ANTIQUA DEALER | <input type="checkbox"/> CLASS III (JUNK CARS) - Public Hearing Required (Describe on Reverse) |
| 10. <input type="checkbox"/> PAWNBROKER | 17. <input type="checkbox"/> WORKERS COMPENSATION IF NEEDED |

SEE ADDITIONAL INFORMATION REQUIRED BELOW

BUSINESS NAME: Restaurant Ecuatoriano La fogata de flor inc.

BUSINESS ADDRESS: 94 main street

DAYS/HOURS OF OPERATION Monday to Sunday from 5 to 12
(Some Sunday licenses may require approval of State DPS)

I/We, the undersigned, apply for this license in accordance with the provisions of all Statutes relating thereto. I/We further certify, under penalties of perjury, that, to the best of my/our knowledge and belief, I/We have filed all state tax returns and paid all state taxes required under law.

NAME OF APPLICANT: Rosa Flor DAquilema Sauce

MAILING ADDRESS: _____

EMAIL ADDRESS: rosafordaquilema@gmail.com

APPLICANT'S DATE OF BIRTH: _____

_____ and _____
Social Security No. (Mandatory) Federal Identification No. (Mandatory)

APPLICANT'S SIGNATURE: Rosa Daquilema S. DATE: 05/09/2022
(Individual or Corporate Officer)

Rosa Flor DAquilema Sauce
Type or print name on this line Daytime Telephone Number

IMPORTANT: Read this section carefully. Provide required information on reverse side. *Additional Information Required:*
License # Above

- 1 Provide copy of State and/or County Auctioneer's License
- 3, 8, 12 Indicate number of alleys, pool tables and number and types of coin-operated games
- 6, 9, 10, 13 Request Town By Laws, which states applicant's responsibility
- 6, 13 Describe in detail: type, quantity, and cost (to you) of goods to be offered for sale
- 11 Describe in detail: type of live entertainment to be licensed
- 14 Applicant must request and agree to abide by established policy

CONTINUE APPLICATION PROCESS ON REVERSE SIDE OF THIS FORM

D-3
7-11-22

DEPARTMENT HEAD REVIEW FORM

1. Name of Business: **Miranda Industries, LLC dba Acai Central**
2. Mailing Address: **8 Central Street**
3. **Land Parcel:** **200 Main Street**
Assessors ID#: **Map 48 Block 0 Lot 430 Zone CA**

4. **Has applied for:** **Amendment to Common Victualler License- Change of Name**
5. Selectmen will take action on: **Monday July 11, 2022**
6. Abutters Notified: N/A Published: N/A
7. Inquiry Sent To Dept. Heads on:
8. Please Respond By:
9. License Approved: Denied: Tabled: On

.....
Building Commissioner: (Zoning, Occupancy, Building/Handicap Access, Restroom Handicap Access, etc.) **CA zone, allowable use, building is not accessible**

Town Planner: (Site Plan/Special Permit; Other Requirements/Stipulations)
Ok-no change of actual use

Tax Collector: (Outstanding Taxes) **No outstanding taxes**

Town Treasurer: (Outstanding Tax Liens) **None**

Fire Chief: (Information/Comment) **No objections**

Police Chief: (Information/Comment) **No issues**

Criminal Offense Record Info: (CORI) Approved Disapproved

Board of Health: (Information/comment) **No violations**

Dept. Head Signature: _____ **Date:** _____

.....
Contact Name/Manager: *Tarik Miranda*

Phone:

e-mail:



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LICENSE APPLICATION (CHECK ONE)

- APPLICATION FOR A **NEW** LICENSE
- TRANSFER OF AN **EXISTING** LICENSE
- AMENDMENT TO EXISTING LICENSE** (Change of operating days/hours, change of location, etc.) *describe on reverse*

- | | |
|---|---|
| 1. <input type="checkbox"/> AUCTIONEER | 11. <input type="checkbox"/> LIVE ENTERTAINMENT (<i>describe on reverse</i>) |
| 2. <input type="checkbox"/> BOARDING HOUSE | 12. <input type="checkbox"/> AUTOMATIC AMUSEMENT (Coin-Operated Games) |
| 3. <input type="checkbox"/> BOWLING ALLEY(S) | 13. <input type="checkbox"/> TRANSIENT VENDORS |
| 4. <input checked="" type="checkbox"/> COMMON VICTUALLER | 14. <input type="checkbox"/> CARNIVAL/CIRCUS Location: _____ |
| 5. <input type="checkbox"/> FORTUNE TELLER | 15. <input type="checkbox"/> CHRISTMAS TREE SALES |
| 6. <input type="checkbox"/> HAWKERS/PEDDLERS | \$ <input type="checkbox"/> VALUE OF GOODS |
| 7. <input type="checkbox"/> INNHOLDERS | 16. <input type="checkbox"/> CLASS I (NEW CARS) |
| 8. <input type="checkbox"/> POOL TABLES | <input type="checkbox"/> CLASS II (USED CARS) |
| 9. <input type="checkbox"/> 2 ND HAND/ANTIQUA DEALER | <input type="checkbox"/> CLASS III (JUNK CARS) - Public Hearing Required (Describe on Reverse) |
| 10. <input type="checkbox"/> PAWNBROKER | 17. <input type="checkbox"/> WORKERS COMPENSATION IF NEEDED |

SEE ADDITIONAL INFORMATION REQUIRED BELOW

BUSINESS NAME: Yasai Bowl changing to Acai Central

BUSINESS ADDRESS: 8 Central Street Milford MA

DAYS/HOURS OF OPERATION _____
(Some Sunday licenses may require approval of State DPS)

I/We, the undersigned, apply for this license in accordance with the provisions of all Statutes relating thereto. I/We further certify, under penalties of perjury, that, to the best of my/our knowledge and belief, I/We have filed all state tax returns and paid all state taxes required under law.

NAME OF APPLICANT: TARIK MIRANDA

MAILING ADDRESS: _____

EMAIL ADDRESS: _____

APPLICANT'S DATE OF BIRTH: _____

Social Security No. (Mandatory) _____ Federal Identification No. (Mandatory) _____

APPLICANT'S SIGNATURE: TARIK MIRANDA (Individual or Corporate Officer) DATE: 06-28-2022

Type or print name on this line _____ Daytime Telephone Number _____

IMPORTANT: Read this section carefully. Provide required information on reverse side. *Additional Information Required:*

- License # Above
- 1 Provide copy of State and/or County Auctioneer's License
- 3, 8, 12 Indicate number of alleys, pool tables and number and types of coin-operated games
- 6, 9, 10, 13 Request Town By Laws, which states applicant's responsibility
- 6, 13 Describe in detail: type, quantity, and cost (to you) of goods to be offered for sale
- 11 Describe in detail: type of live entertainment to be licensed
- 14 Applicant must request and agree to abide by established policy

CONTINUE APPLICATION PROCESS ON REVERSE SIDE OF THIS FORM

D-4
7-11-22

DEPARTMENT HEAD REVIEW FORM

- 1. Name of Business: **PIN PAN POLLO CORP**
- 2. Mailing Address: **20 Exchange Street**
Assessors ID#: **Map 48 Block 0 Lot 381 Zone CA**
- 3. Has applied for: **Common Victualler License**
- 4. Selectmen will take action on: **7/11/2022**
- 5. Abutters Notified: N/A Published: N/A
- 6. Inquiry Sent To Dept. Heads on:
- 7. Please Respond By:
- 8. License Approved: _____ Denied: _____ Tabled: _____ On _____

.....
Building Commissioner: (Zoning, Occupancy, Building/Handicap Access, Restroom Handicap Access, etc.) **CA zone, allowable use, occupant load 24, Building and restrooms not accessible**

Town Planner: (Site Plan/Special Permit; Other Requirements/Stipulations) **Ok-no change of actual use**

Tax Collector: (Outstanding Taxes) **No outstanding taxes**

Town Treasurer: (Outstanding Tax Liens) **None**

Fire Chief: (Information/Comment) **No objections**

Police Chief: (Information/Comment) **No issues**

Criminal Offense Record Info: (CORI) Approved Disapproved

Board of Health: (Information/comment) **No violations**

Dept. Head Signature: _____ **Date:** _____

.....
Contact Name/Manager: *Angel Carchipulla Cuenca*
Phone: _____ **e-mail:** _____



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LICENSE APPLICATION (CHECK ONE)

- APPLICATION FOR A NEW LICENSE
- TRANSFER OF AN EXISTING LICENSE
- AMENDMENT TO EXISTING LICENSE (Change of operating days/hours, change of location, etc.) *describe on reverse*

- | | |
|---|---|
| 1. <input type="checkbox"/> AUCTIONEER | 11. <input type="checkbox"/> LIVE ENTERTAINMENT (<i>describe on reverse</i>) |
| 2. <input type="checkbox"/> BOARDING HOUSE | 12. <input type="checkbox"/> AUTOMATIC AMUSEMENT (Coin-Operated Games) |
| 3. <input type="checkbox"/> BOWLING ALLEY(S) | 13. <input type="checkbox"/> TRANSIENT VENDORS |
| 4. <input checked="" type="checkbox"/> COMMON VICTUALLER | 14. <input type="checkbox"/> CARNIVAL/CIRCUS Location: _____ |
| 5. <input type="checkbox"/> FORTUNE TELLER | 15. <input type="checkbox"/> CHRISTMAS TREE SALES |
| 6. <input type="checkbox"/> HAWKERS/PEDDLERS | \$ <input type="checkbox"/> VALUE OF GOODS |
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| 8. <input type="checkbox"/> POOL TABLES | <input type="checkbox"/> CLASS II (USED CARS) |
| 9. <input type="checkbox"/> 2 ND HAND/ANTIQUA DEALER | <input type="checkbox"/> CLASS III (JUNK CARS) - Public Hearing Required (Describe on Reverse) |
| 10. <input type="checkbox"/> PAWNBROKER | 17. <input type="checkbox"/> WORKERS COMPENSATION IF NEEDED |

SEE ADDITIONAL INFORMATION REQUIRED BELOW

BUSINESS NAME: Pin Pan Pollo Corp

BUSINESS ADDRESS: 20 Exchange Street Milford MA 01757

DAYS/HOURS OF OPERATION Monday, Tuesday, Thursday, Friday, Saturday, Sunday 8:00am - 11:00pm
(Some Sunday licenses may require approval of State DPS)

I/We, the undersigned, apply for this license in accordance with the provisions of all Statutes relating thereto. I/We further certify, under penalties of perjury, that, to the best of my/our knowledge and belief, I/We have filed all state tax returns and paid all state taxes required under law.

NAME OF APPLICANT: Angel Carchipulla Cuenca

MAILING ADDRESS: _____

EMAIL ADDRESS: _____

APPLICANT'S DATE OF BIRTH: _____

Social Security No. (Mandatory) and Federal Identification No. (Mandatory)

APPLICANT'S SIGNATURE: DATE: 4/4/2022

Angel Carchipulla Cuenca
Type or print name on this line (Individual or Corporate Officer) Daytime Telephone Number _____

IMPORTANT: Read this section carefully. Provide required information on reverse side. *Additional Information Required:*
License # Above

- 1 Provide copy of State and/or County Auctioneer's License
- 3, 8, 12 Indicate number of alleys, pool tables and number and types of coin-operated games
- 6, 9, 10, 13 Request Town By Laws, which states applicant's responsibility
- 6, 13 Describe in detail: type, quantity, and cost (to you) of goods to be offered for sale
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- 14 Applicant must request and agree to abide by established policy

CONTINUE APPLICATION PROCESS ON REVERSE SIDE OF THIS FORM

D-5
7-11-22

Town of Milford
FY 2022 - Chapter 44 Section 33B - Transfer Funds Between Line Items
6/30/2022

| <u>Department</u> | <u>Transfer From</u> | <u>Amount</u> | <u>Transfer To</u> |
|------------------------------------|------------------------------|---------------|------------------------------|
| 135-Accounting | 135-5300 - General Expenses | 46.00 | 135-5110 - Personal Services |
| 148- General Government | 148-5110 - Personal Services | 12,000.00 | 148-5300 - General Expenses |
| 151- Legal | 151-5300 - General Expenses | 6,690.00 | 151-5110 - Personal Services |
| 155- IT | 914-5110 - Personal Services | 56,000.00 | 155-5300 - General Expenses |
| 210- Police | 210-5110 - Personal Services | 25,000.00 | 210-5300 - General Expenses |
| 292- Animal Control | 148-5110 - Personal Services | 1,000.00 | 292-5110 - Personal Services |
| 292 - Animal Control | 148-5110 - Personal Services | 1,800.00 | 292-5300 - General Expenses |
| 192- Public Building & Property | 914-5110 - Personal Services | 40,000.00 | 192-5300 - General Expenses |
| 192- Public Building & Property | 148-5110 - Personal Services | 1,500.00 | 192-5110 - Personal Services |
| 421- HWY | 421-5110 - Personal Services | 3,000.00 | 421-5300 - General Expenses |
| 424 - Street Lighting | 914-5110 - Personal Services | 10,000.00 | 424-5110 - Personal Services |
| 491- Vernon Grove | 914-5110 - Personal Services | 80.00 | 491-5110 - Personal Services |
| 491- Vernon Grove | 914-5110 - Personal Services | 5,000.00 | 491-5300 - General Expenses |
| 650 - Parks | 650-5110 - Personal Services | 15,000.00 | 650-5300 - General Expenses |



D-6
7-11-22

MILFORD POLICE DEPARTMENT

James F. Falvey
Chief of Police

250 Main Street * Milford, MA 01757 * Tel. (508) 473-1113 * Fax (508) 473-5087

TO: Richard Villani, Esq., Town Administrator
FROM: James F. Falvey, Chief of Police
DATE: June 27, 2022
RE: Traffic Constables

Dear Mr. Villani,


Attached is a new policy I am requesting the Select Board to approve Traffic Constables for the Milford Police Department. Traffic Constables would basically do the same duties that Auxiliary Police Officers did in the past except they will no longer have any police powers. There are several other changes like their uniforms can no longer look like a Police Officer. This proposed policy addresses in detail what they can and can't do as a Traffic Constable.

Town Counsel Gerry Moody has reviewed the policy and made several recommendations and was very helpful.

With the loss of the Auxiliary Police Force due to changes in the law from Police Reform, I believe this proposal if approved would help the Milford Police Department to better serve the town of Milford in many ways.

Sincerely,

James F. Falvey
Chief of Police
Town of Milford

| | |
|---|--|
|  | <p><i>Milford Police Department</i></p> <p><i>Rules and Procedures</i></p> |
| <p>22-00</p> | <p>Policy: Traffic Constables</p> |
| <p>Disseminated:</p> | <p>Amended:</p> |

I. GENERAL CONSIDERATIONS AND GUIDELINES

The need for competent and safe traffic control throughout the town of Milford is a paramount concern. Primarily, traffic details are performed by police officers. The purpose of this policy is to establish civilian Traffic Constables to provide traffic detail coverage when no full-time or special police officer is available to perform such function.

II. POLICY

Traffic Constables will be assigned to direct and control traffic to ensure its smooth and safe flow. Traffic Constables must demonstrate a firm commitment to carry out assignments in a competent, timely, and professional manner. It is the policy of the Milford Police Department to provide guidance to Traffic Constables through various policies, procedures, regulations and trainings, which have been established to direct members in the performance of their duties and responsibilities. Additionally, this policy is meant to address the following:

- A. To clearly state Traffic Constables do not have the status of sworn law enforcement officers or regular Constables.
 - B. To describe the duties of Traffic Constables.
 - C. To ensure that Traffic Constables are trained in the duties which they are expected to perform.
 - D. To ensure the uniforms of Traffic Constables are clearly distinguishable from those of sworn police officers.
-

III. DEFINITIONS

- A. Traffic Constable: a non-sworn per diem employee of the town of Milford Police Department whose duties are restricted to traffic control, direction and work zone safety only.

IV. PROCEDURES

- A. Traffic Constables are not sworn police officers and are not covered by M.G.L. c. 41 § 98 or c. 41 § 111F. They have absolutely no authority to issue citations, effect seizures, serve warrants and other process, or make arrests.
 - B. Traffic Constables are appointed by the Select Board, upon recommendation of the Chief of Police, for a period of one year.
 - C. All Traffic Constables must pass a criminal background check prior to assuming any duties, if not a retired Milford Police Officer.
 - D. There is no automatic renewal.
 - E. A Traffic Constable's availability and frequency of work may contribute to any decision regarding reappointment.
 - F. Traffic Constables shall submit a Letter of Interest to the Traffic Constable Supervisor each year by May 1st requesting to be reappointed.
 - G. Traffic Constables shall provide a letter to the Traffic Constable Unit Supervisor each year by May 1st, signed by a registered physician, stating such person is capable of performing the duties of a Traffic Constable as described in this policy.
 - H. Traffic Constables shall inform the Traffic Constable Supervisor of any medical condition which could impact the performance of their duties as a Traffic Constable.
 - I. The power of Traffic Constables is strictly limited to the direction, control, and regulation of vehicular traffic. Such power shall only be exercised when in uniform, and only while performing an official assignment given by the police department.
 - J. Traffic Constables shall obey, without reservation, the regulations of the department and all lawful commands of police officers.
 - K. Traffic Constables are used, at the sole discretion of the Chief of Police, to direct traffic and facilitate the smooth flow of vehicular and pedestrian traffic.
 - L. The Chief of Police, or designee may require Traffic Constable Members to assist.
-

- M. Traffic Constables are not covered by any collective bargaining agreement.
- N. Traffic Constables are not covered by any collective bargaining agreement and as such do not have any right of grievance.
- O. Upon request, Traffic Constables shall support, aid, and assist police officers in the lawful performance of their duties.

DUTIES

- A. Working at assigned locations; performs traffic control duties including manually directing traffic, operating traffic signal controls and placing traffic cones and barricades to safely direct and control traffic flow.
- B. Renders assistance to motorists when appropriate.
- C. Assists the public with information regarding directions, street locations, points of interest, etc.
- D. Observes and reports hazardous conditions/situations.
- E. Reports to the Shift Supervisor / OIC when necessary and receives direction from the same.

WEAPONS

Traffic Control Constables are not authorized to wear a badge, carry a firearm, baton, pepper spray or any other weapon of any kind while on duty as a Traffic Control Constable.

TRAINING / KNOWLEDGE / SKILLS

- A. Traffic Constables may be required to complete any such annual in-service training as required by the Chief of Police. CPR will be required annually.
- B. Knowledge of hand traffic signals, cone/traffic patterns and manual operation of traffic signals is required.
- C. An initial safety course may be required for all constables who are not former police officers; such as, the MMA – MIIA “Work Zone Safety for Public Works Highway and Police” course or their “Work Zone Safety” course.
- D. Knowledge of the town’s geography, streets, and business is required.

UNIFORMS and EQUIPMENT

- A. Traffic Constables shall wear the following uniform while on-duty:
 - 1. Pants: Black uniform/BDU style pants in good order.
-

2. Shirt: ANSI Approved (green) short or long sleeve shirt (Traffic Constable Patches on both shoulders) Stenciled "TRAFFIC" on back.
 3. Jacket: ANSI Approved (green)
 4. Hat: Black baseball style with mini Traffic Constable Patch affixed on front of hat
 5. Foot Wear: Black boot/shoe/sneaker
- B. Traffic Constables must be equipped with a flashlight when working in evening lighting conditions.
 - C. High Visibility reflective shirts and outerwear jackets must be stenciled "TRAFFIC" in white and meet the ANSI standards.
 - D. All uniforms and equipment will be purchased by the Traffic Constable.
 - E. Traffic Constables are not allowed to operate police department vehicles and they are not allowed to obtain a Blue Light Permit for their personal vehicle.

COMMUNICATION

Traffic Constables shall be issued a portable radio when available in order to effectively keep two way communications. Portable radios are department property and must be properly maintained and securely kept. Any damaged or lost portable radio must be immediately reported to the Shift Supervisor detailing the circumstance regarding the damage or loss.

VIOLATIONS

Any violations of this policy may result in a suspension or revocation of appointment as a Traffic Constable, as determined by the Chief of Police.

D-9
7-11-22



June 16, 2022

David Consigli
Chairman, Milford Zoning Board of Appeals
Town Hall
52 Main Street
Milford, Massachusetts 01757

Re: Lot 31, Birch Street
Comprehensive Permit – Request for Insubstantial Change

Dear Mr. Consigli:

On behalf of Milford Avalon, Inc., a limited dividend corporation and wholly owned subsidiary of AvalonBay Communities, Inc. (the “Applicant”), in conjunction with 88 Corp., as land owner, this letter is a request that the Milford Zoning Board of Appeals (the “Board”) determine that the proposed changes described below are insubstantial changes to the Development (as defined below) pursuant to 760 CMR 56.05(11) of the regulations governing comprehensive permits issued under M.G.L. c. 40B. Submitted herewith are plans relative to the proposed changes. A reduced version of the new site plan is attached to this letter as Exhibit A (the “Modified Site Plan”). A list of new site plan drawings which are being submitted with this letter is attached hereto as Exhibit B (the “New Site Plan Drawings”). A list of new architectural plans which are being submitted with this letter is attached hereto as Exhibit C (the “New Architectural Plans”), and together with the Modified Site Plan and the New Site Plan Drawings, the “Modified Plans”).

Please note that the submission of this letter and the requested changes are without prejudice to the Applicant’s rights under the existing Comprehensive Permit (as defined herein) for the Development, all of which the Applicant reserves. Without limiting the generality of the foregoing, the Applicant (i) does not abandon any of its rights under the existing Comprehensive Permit, and (ii) reserves the right at any time to withdraw the requested changes and to proceed with the Development as set forth in the existing Comprehensive Permit for whatever reason, including, without limitation, if the requested changes are not permitted by the Board, if an appeal is taken by any party with respect to such changes, if other necessary permits, approvals and consents for the requested changes are not approved, or if the Applicant does not proceed with the Development.

I. BACKGROUND

1. On or about December 28, 2017, 88 Corp. applied for a comprehensive permit pursuant to M.G.L. c. 40B to construct one hundred sixty-two (162) units of rental housing and

three hundred twenty-four (324) parking spaces on approximately 27.32 acres located at Lot 31, Birch Street (the "Development Site"), Milford, Massachusetts.

2. The Board issued a comprehensive permit (as subsequently amended, the "Comprehensive Permit") by virtue of a Decision (the "Original Decision") dated as of July 17, 2018 and filed with the Milford Town Clerk on July 27, 2018.
3. As set forth in the Original Decision, the Original Development was to consist of up to one hundred sixty-two (162) units of rental housing in no more than four (4) buildings, including a clubhouse, recreational facilities and associated infrastructure improvements, and no more than three hundred twenty-four (324) parking spaces (the "Original Development").
4. Construction and Bonding Condition #31 and Section G of the Original Decision contemplate potential changes to the Original Development, which changes may be determined by the Board to be insubstantial changes or substantial changes, as those terms are used in 760 CMR 56.05(11).
5. On or about November 21, 2019, 88 Corp. applied for approval of a number of changes to the Original Development, including: (i) reducing the number of residential buildings from four (4) to three (3), with the addition of a new floor on each residential building; and (ii) integrating the clubhouse and residential facilities with the residential buildings (the Original Development, as so modified, the "Development"). The Board issued a Decision approving the modifications to the Original Development as a substantial change, which Decision is dated as of January 8, 2020 and filed with the Milford Town Clerk on January 8, 2020.
6. By this letter, the Applicant requests as insubstantial changes to the Comprehensive Permit the following: (i) changes to the approved plan as reflected on the Modified Site Plan; and (ii) certain other modifications to the Comprehensive Permit as set forth below.

II. PROPOSED MODIFICATIONS

The Applicant's proposed modifications to the Development constitute certain minor modifications to the buildings' dimensionality, elimination or reallocation of previously approved amenities spaces, and the reconfiguration of parking fields. As addressed in Section III below, 760 CMR 56.07(4)(c) sets forth certain criteria which are generally considered a substantial change to a Chapter 40B project: (i) a 10%⁺ increase in building height; (ii) a 10%⁺ increase in proposed units; (iii) a reduction in site size of 10%⁺ in excess of any decrease in proposed units; (iv) a change in building type; and (v) a change from one form of housing tenure to another. The proposed modifications to the Development do not meet any of these criteria.

1. Changes to the Plan: The Modified Plans include the following changes:

- (a) The replacement of the currently contemplated dwelling units with the Applicant's prototype dwelling units, which units are largely within the previously approved building footprints as depicted on the diagram attached hereto as Exhibit D.

(b) The buildings' maximum building height shall be the same or lower than then the previously approved Development.

(c) The reconfiguration of Development amenities, including the elimination of the pool area, to allow for (i) a reconfigured, more efficient parking field (which shall continue to have 324 parking spaces, as previously approved), and (ii) a landscaped barbeque area with outdoor seating, all as depicted on the Modified Plans.

Although the primary elements of the utility and grading plans will remain unchanged from those approved by the Comprehensive Permit, there may be minor changes to account for the Modified Site Plan. If the Board requires additional information on these minor changes, the Applicant can provide additional detail.

Except for as otherwise set forth above, the overall plan remains essentially the same as was approved by the Comprehensive Permit. The final plans for the Development will be updated to be consistent with the Modified Plans. All references to the plans in the Comprehensive Permit will be modified to mean the original plans as modified by the Modified Plans.

2. Extension of Comprehensive Permit's Term. Notwithstanding anything to the contrary as set forth in Section E.1 of the Original Decision, the Applicant requests to extend the date on which the Comprehensive Permit will lapse, pursuant to 760 CMR 56.05(12)(c), to July 1, 2023.

3. Changes to Request for Waivers. The Applicant requests modifications to the Request for Waivers previously approved by the Board as Exhibit C to the Comprehensive Permit to reflect the changes to the Development as reflected in the Modified Plans.

4. Change in Subsidizing Agency. By this letter, the Applicant also wishes to notify the Board that it is evaluating whether to change its subsidizing agency from MassHousing ("MassHousing"), the subsidizing agency that issued the Project Eligibility Letter for the Development, to the Department of Housing and Community Development ("DHCD") through its Local Initiative Program ("LIP"). The Applicant has been in communication with the Select Board regarding this potential conversion. The contemplated change in subsidizing agency will not affect any other aspect of the Development. Accordingly, by this letter, the Applicant is requesting the ability to convert the Development to a LIP project. Should that occur, the Town will be a party to a regulatory agreement between the Applicant, DHCD and the Town, and there will be no need for a so-called "springing regulatory agreement" as referenced in Condition 7 to the Comprehensive Permit.

III. DISCUSSION

As set forth in 760 CMR 56.05(11), after the issuance of a comprehensive permit granted by a zoning board, an applicant desiring to change aspects of its proposal may notify the board in writing. The factors to take into account when determining whether a change is substantial or

insubstantial are set forth in 760 CMR 56.07(4)(c) and (d), respectively. The minor proposed modifications to the Development contemplated herein, as described above, clearly do not involve the types of material changes set forth in 760 CMR 56.07(4)(c). Rather, with regard to the plan changes, the proposed modifications to the Development are the types of changes that are not described as substantial changes in 760 CMR 56.07(4)(d), as follows:

- (1) there will be no increase in the buildings' heights;
- (2) there will be no increase in the number of proposed units;
- (3) there is no change in the building types;
- (4) there is no change from rental property to home ownership; and
- (5) there will be no reduction in site size.

Further, a change in subsidizing agency (addressed above) that does not affect any other aspect of the project is expressly listed at 760 CMR 56.07(d)(5) as a generally insubstantial change; the contemplated change in subsidizing agency to DHCD will not affect any other aspect of the Development.

The Applicant respectfully requests that the Board consider this matter at its next regularly scheduled meeting.

Thank you very much for your consideration.

Very truly yours,

DocuSigned by:

42D6357E9FE94C4...

Steven Schwartz
Attorney for Applicant, and on behalf of 88
Corp.

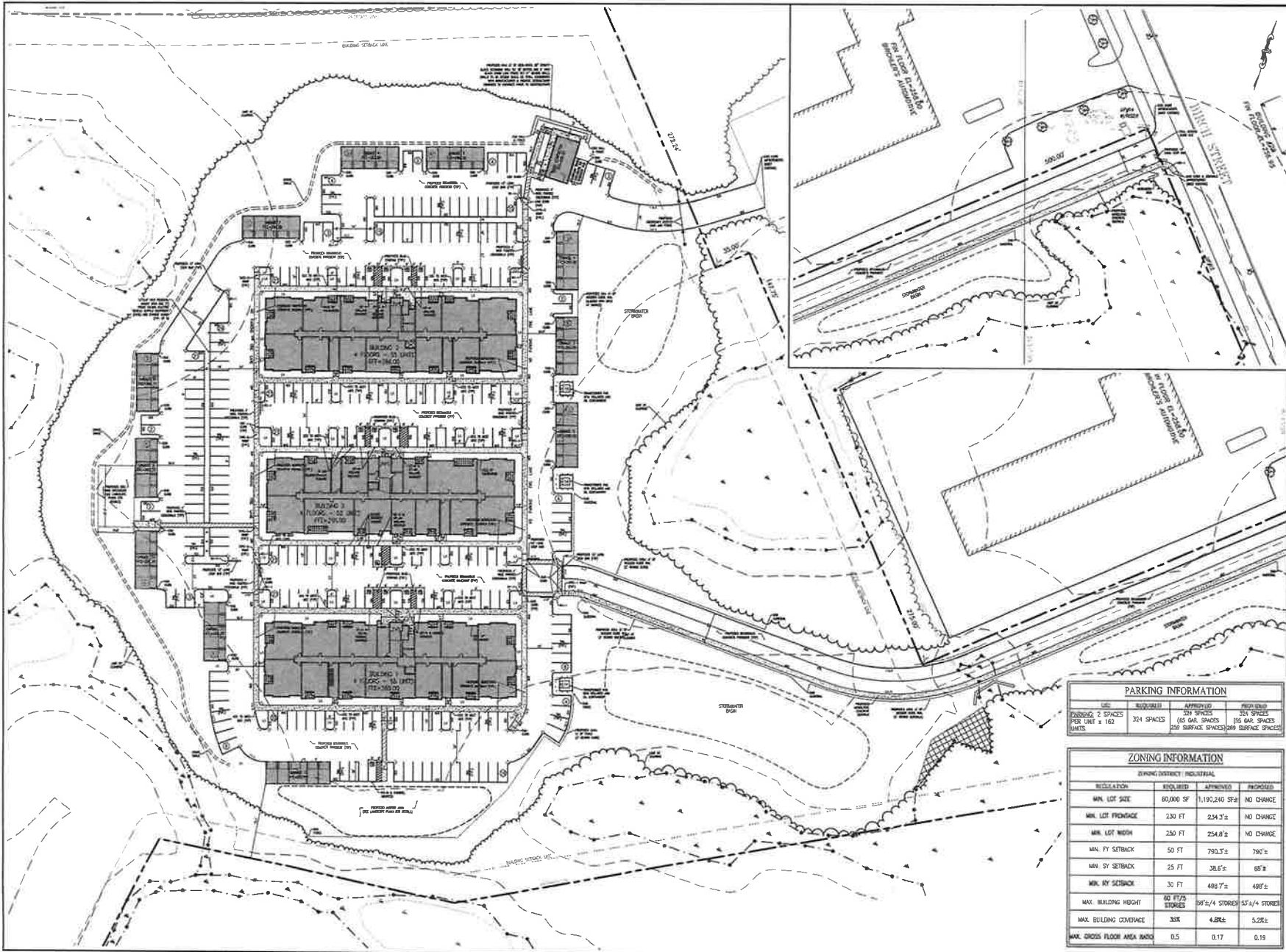
cc: Gerald Moody, Esq. – Town Counsel
Larry Dunkin – Town Planner
Francis Yuen – AvalonBay Communities, Inc.
David Gillespie – AvalonBay Communities, Inc.
Kevin Lobisser – 88 Corp.
Steven Greenwald, Esq. – Greenwald & Greenwald LLP, attorney for 88 Corp.

Enc.: New Site Plan Drawings
New Architectural Plans

EXHIBIT A

REDUCED VERSION OF MODIFIED SITE PLAN

(See Attached.)



NOT FOR CONSTRUCTION

CDG PROJECT # 22000

REVISIONS:

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SEAL:

PHILIP R. HENRY, P.E.

CIVIL ENGINEER

CIVIL DESIGN GROUP, LLC

31 HIGH STREET, SUITE 307
 NORTH ANDOVER, MA 01845
 www.cdengineering.com
 p: 978-794-5400 f: 978-965-3971

PREPARED FOR:

AvalonBay COMMUNITIES

600 ATLANTIC AVENUE, 20TH FLOOR
 BOSTON, MA 02210

PROJECT:

BIRCH STREET PLACE

BIRCH STREET
 MILFORD, MASSACHUSETTS 01757

SCALE:

 GRAPHIC SCALE IN FEET

SHEET:

SITE PLAN

1

DATE: 06/15/2022

PARKING INFORMATION

| LOT | REQUIRED | APPROX. LOT | PROVIDED |
|---------------------------------------|------------|--|--|
| FOUNDING & SPACES PER UNIT x 60 UNITS | 324 SPACES | 287 SPACES (65 GAR. SPACES 222 SURFACE SPACES) | 324 SPACES (66 GAR. SPACES 258 SURFACE SPACES) |

ZONING INFORMATION

| REGULATION | BIRCH STREET INDUSTRIAL | | |
|-----------------------------|-------------------------|---------------|---------------|
| | REQUIRED | APPROVED | PROPOSED |
| MIN. LOT SIZE | 60,000 SF | 1,190,240 SF± | NO CHANGE |
| MIN. LOT FRONTAGE | 230 FT | 234.3'± | NO CHANGE |
| MIN. LOT WIDTH | 250 FT | 254.8'± | NO CHANGE |
| MIN. FT SETBACK | 50 FT | 750.3'± | 750'± |
| MIN. SY SETBACK | 25 FT | 38.6'± | 85'± |
| MIN. IY SETBACK | 30 FT | 490.7'± | 490'± |
| MAX. BUILDING HEIGHT | 50 FT/5 STORES | 39'±/4 STORES | 53'±/4 STORES |
| MAX. BUILDING COVERAGE | 35% | 4.85% | 5.25%± |
| MAX. GROSS FLOOR AREA RATIO | 0.5 | 0.17 | 0.19 |

EXHIBIT B

LIST OF NEW SITE PLAN DRAWINGS

| | <u>Sheet</u> |
|----------------|--------------|
| Cover Sheet | T0.01 |
| Site Plan | 1 |
| Landscape Plan | L1 |
| Lighting Plan | L2 |

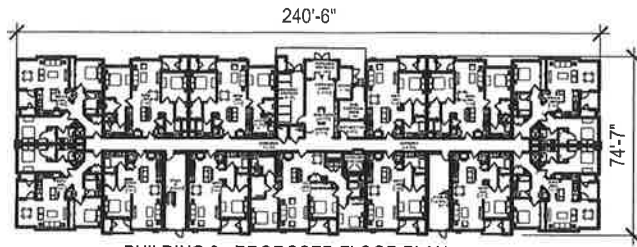
EXHIBIT C

LIST OF NEW ARCHITECTURAL PLANS

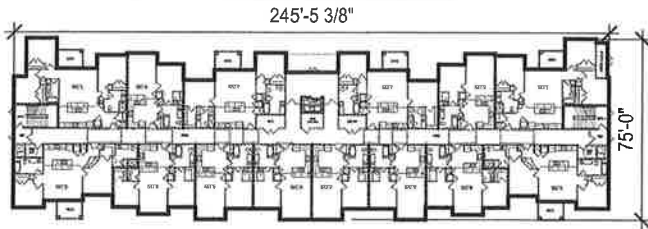
| | <u>Sheet</u> |
|---|--------------|
| Overall Floor Plan – Building 1 – Level 1 | A1.1.01 |
| Overall Floor Plan – Building 1 – Level 2 | A1.1.02 |
| Overall Floor Plan – Building 1 – Level 3 | A1.1.03 |
| Overall Floor Plan – Building 1 – Level 4 | A1.1.04 |
| Overall Floor Plan – Building 1 – Loft Level | A1.1.05 |
| Overall Floor Plan – Building 1 – Roof Level | A1.1.06 |
| Overall Floor Plan – Building 2 – Level 1 | A1.2.01 |
| Overall Floor Plan – Building 2 – Level 2 | A1.2.02 |
| Overall Floor Plan – Building 2 – Level 3 | A1.2.03 |
| Overall Floor Plan – Building 2 – Level 4 | A1.2.04 |
| Overall Floor Plan – Building 2 – Loft Level | A1.2.05 |
| Overall Floor Plan – Building 2 – Roof Level | A1.2.06 |
| Trash Facility, Garage and Accessible Garage Plans | A1.2.07 |
| Building 1 Elevations | A4.01 |
| Building 1 Elevations | A4.02 |
| Building 2 Elevations | A4.03 |
| Building 2 Elevations | A4.04 |
| Garage Structures / Trash Facility Elevations | A4.05 |

EXHIBIT D

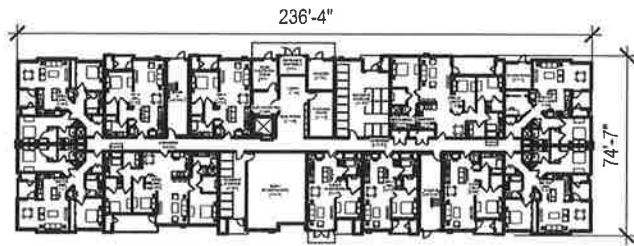
BUILDING FOOTPRINT COMPARISON



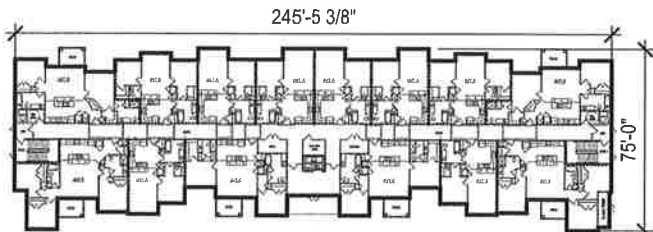
BUILDING 3 - PROPOSED FLOOR PLAN



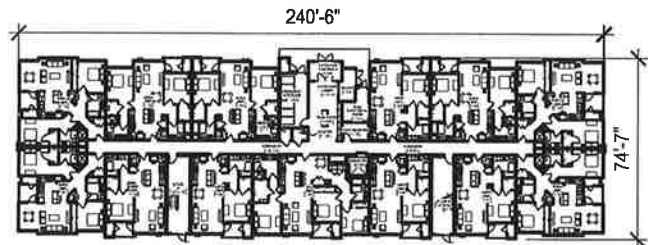
BUILDING 3 - APPROVED FLOOR PLAN



BUILDING 2 - PROPOSED FLOOR PLAN



BUILDING 2 - APPROVED FLOOR PLAN



BUILDING 1 - PROPOSED FLOOR PLAN



BUILDING 1 - APPROVED FLOOR PLAN

AVALON KANSO MILFORD

BIRCH STREET
MILFORD, MA



| UNIT MATRIX | BUILDING 1 | BUILDING 2 | BUILDING 3 | TOTAL PER TYPE |
|--------------------|------------|------------|------------|----------------|
| 1 BEDROOM | 14 | 13 | 14 | 41 |
| 1 BEDROOM + DEN | 8 | 13 | 6 | 25 |
| 2 BEDROOM | 31 | 18 | 31 | 80 |
| 3 BEDROOM | 4 | 8 | 4 | 16 |
| TOTAL PER BUILDING | 56 | 52 | 55 | 162 |

PROGRAM SUMMARY:

162 RESIDENTIAL UNITS
(41) 1 BR, (25) 1 BR/DEN, (80) 2 BR & (16) 3BR

3,864 SF AMENITY
2,716 SF BACK OF HOUSE
222,963 SF RESIDENTIAL

GROSS FLOOR AREA (GSF):
BUILDING 1: 71,847 SF
BUILDING 2: 70,230 SF
BUILDING 3: 71,847 SF
DETACHED GARAGE 1: 1,323 SF
DETACHED GARAGE 2: 1,194 SF
TRASH FACILITY: 536 SF
228,125 SF GSF TOTAL

BUILDING FOOTPRINTS:
BUILDING 1: 17,166 SF
BUILDING 2: 17,021 SF
BUILDING 3: 17,759 SF
DETACHED GARAGE 1: 1,323 SF
DETACHED GARAGE 2: 1,194 SF
65,532 SF AGGREGATE FOOTPRINT

BUILDING HEIGHT: 4 STORIES
BUILDING HEIGHT FROM AVERAGE GRADE TO MEAN ROOF: 33'-0"

NOTES:

1. Building height, per the Milford Zoning ByLaw, is the vertical distance from the average finished grade of the adjacent ground to the top of the structure.
2. The highest roof beam of a flat roof, the peak of a mansard roof, or the height of the highest gable or tower.
3. Street frontage, per the Milford Zoning ByLaw, is the sum of the gross front lot area of the several lots of a building with its maximum setbacks on the same lot, including covered porches, all dimensions are measured between lot lines of roads.

| DRAWING LIST | | SITE PLAN SUBMISSION |
|--------------|--|----------------------|
| SHEET NUMBER | SHEET NAME | |
| T0.01 | PROJECT COVER / DRAWING LIST / PROJECT INFO | X |
| 01 | SITE PLAN | X |
| L1 | LANDSCAPE PLAN | X |
| L2 | LIGHTING PLAN | X |
| A1.1.01 | OVERALL FLOOR PLAN - BUILDING 1 - LEVEL 1 | X |
| A1.1.02 | OVERALL FLOOR PLAN - BUILDING 1 - LEVEL 2 | X |
| A1.1.03 | OVERALL FLOOR PLAN - BUILDING 1 - LEVEL 3 | X |
| A1.1.04 | OVERALL FLOOR PLAN - BUILDING 1 - LEVEL 4 | X |
| A1.1.05 | OVERALL FLOOR PLAN - BUILDING 1 - LOFT LEVEL | X |
| A1.1.06 | OVERALL FLOOR PLAN - BUILDING 1 - ROOF LEVEL | X |
| A1.2.01 | OVERALL FLOOR PLAN - BUILDING 2 - LEVEL 1 | X |
| A1.2.02 | OVERALL FLOOR PLAN - BUILDING 2 - LEVEL 2 | X |
| A1.2.03 | OVERALL FLOOR PLAN - BUILDING 2 - LEVEL 3 | X |
| A1.2.04 | OVERALL FLOOR PLAN - BUILDING 2 - LEVEL 4 | X |
| A1.2.05 | OVERALL FLOOR PLAN - BUILDING 2 - LOFT LEVEL | X |
| A1.2.06 | OVERALL FLOOR PLAN - BUILDING 2 - ROOF LEVEL | X |
| A1.2.07 | TRASH FACILITY, GARAGE AND ACCESSIBLE GARAGE PLANS | X |
| AA.01 | BUILDING 1 - ELEVATIONS | X |
| AA.02 | BUILDING 1 - ELEVATIONS | X |
| AA.03 | BUILDING 2 - ELEVATIONS | X |
| AA.04 | BUILDING 2 - ELEVATIONS | X |
| AA.05 | GARAGE STRUCTURES / TRASH FACILITY ELEVATIONS | X |

SUBMISSIONS:

JUNE 15TH, 2022 **INSUBSTANTIAL CHANGE MODIFICATION**



© The Architectural Team, Inc.
50 Commandant's Way at Admiral's Hill
Chelsea MA 02150
O 617.869.4402
F 617.884.4329
architecturalteam.com

PROJECT CONTACT INFORMATION:

OWNER: AVALONBAY COMMUNITIES
880 ATLANTIC AVE, 30TH FLOOR
ROSLINDEN, MA 02070
PHONE N. 617.643.8888
FAX N. 617.964.6229

ARCHITECT: THE ARCHITECTURAL TEAM
50 COMMANDANT'S WAY AT ADMIRAL'S HILL
CHELSEA, MA 02150
PHONE N. 617.869.4402
FAX N. 617.884.4329

CIVIL ENGINEER: CIVIL DESIGN GROUP
21 HIGH STREET 7, SUITE 200
NORTH ANDOVER, MA 01854
PHONE N. 978.764.3488
FAX N.

LANDSCAPE ARCHITECT: HAWK DESIGN, INC.
25 PLAZARD ST
SOUTHAMPTON, MA 01088
PHONE N. 508.833.6888
FAX N.

STRUCTURAL ENGINEER: VISTAS & VISTAS ENGINEERS
108 WINDY STREET, SUITE 201
WESTPORT, MA 01891
PHONE N. 781.823.2445
FAX N. 817.824.2261

FIRE PROTECTION, PLUMBING, MECHANICAL, ELECTRICAL ENGINEER: R.W. SULLIVAN ENGINEERING
108 WINDY STREET, SUITE 201
WESTPORT, MA 01891
PHONE N. 817.824.2267
FAX N. 817.823.8008

Consultant:

Revision:

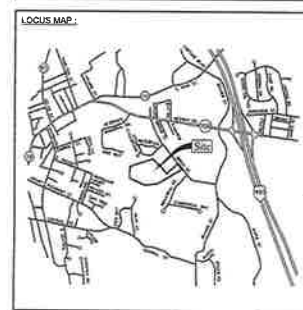
Architect of Record:

Drawn: MAC
Checked: VH
Scale:
Key Plan:

Project Name:
AVALON KANSO MILFORD

BIRCH STREET MILFORD, MA

Sheet Name:

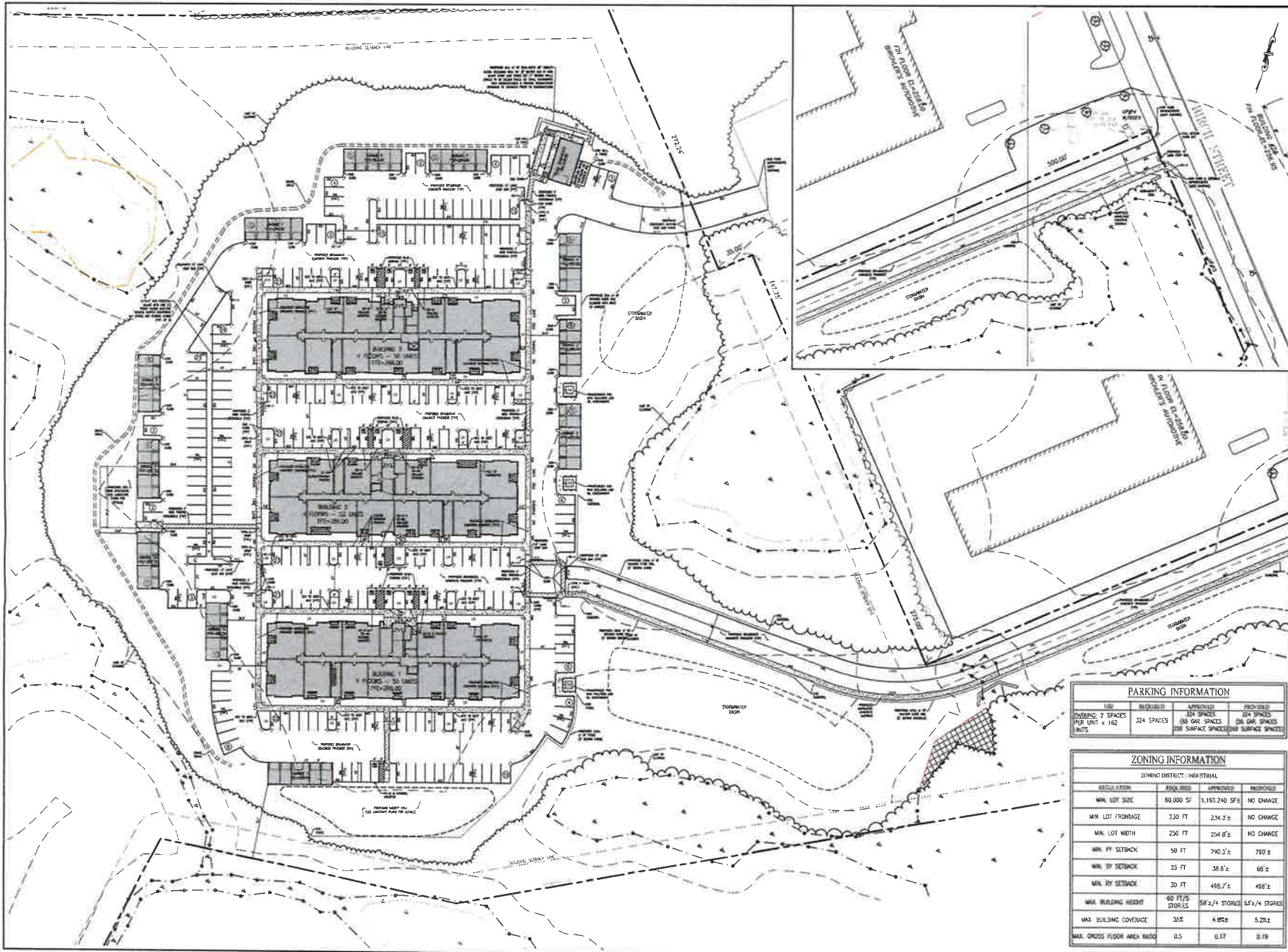


PROJECT COVER / DRAWING LIST / PROJECT INFO

Project Number:
22009.00

Issue Date:
06/15/2022

Sheet Number:
T0.01



NOT FOR CONSTRUCTION

CCC PROJECT # 20000

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SEAL:

PHILIP R. HENRY, P.E.

CIVIL ENGINEER

CIVIL DESIGN GROUP, LLC

31 HIGH STREET, SUITE 207
 NORTH ANDOVER, MA 01845
 www.cdengineering.com
 p: 978-794-5400 f: 978-965-3971

PREPARED FOR:

AvalonBay COMMUNITIES

600 ATLANTIC AVENUE, 20TH FLOOR
 BOSTON, MA 02210

PROJECT:

BIRCH STREET PLACE

BIRCH STREET
 MILFORD, MASSACHUSETTS 01757

SCALE:

SHEET:

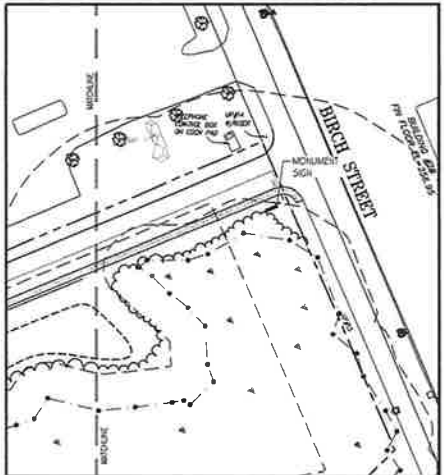
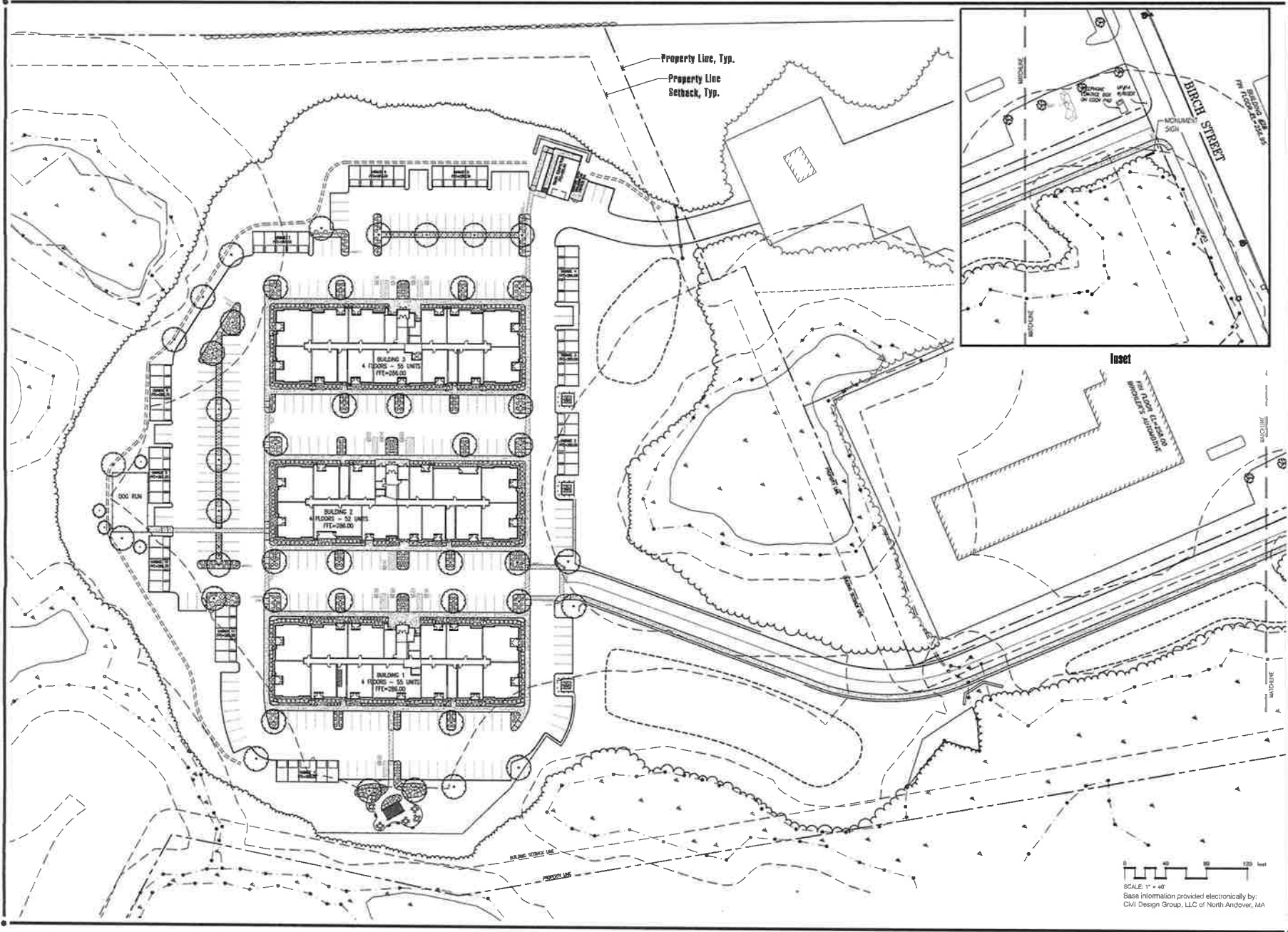
SITE PLAN

1

DATE: 06/12/2022

| PARKING INFORMATION | | | |
|---------------------------------------|------------|--------------------|--------------------|
| USE | REQUIRED | APPROVED | PROVIDED |
| OVERALL | 324 SPACES | 234 SPACES | 234 SPACES |
| OVERALL 2 SPACES PER UNIT x 142 UNITS | | 10 GAR SPACES | 10 GAR SPACES |
| | | 234 SURFACE SPACES | 234 SURFACE SPACES |

| ZONING INFORMATION | | | |
|---------------------------|-----------------|------------------|------------------|
| ZONING DISTRICT: IND-STRA | | | |
| REGULATION | PROPOSED | APPROVED | PREVIOUS |
| MIN. LOT SIZE | 80,000 SF | 1,190,240 SF± | NO CHANGE |
| MIN. LOT FRONTAGE | 230 FT | 234.3'± | NO CHANGE |
| MIN. LOT WIDTH | 250 FT | 254.8'± | NO CHANGE |
| MIN. FT SETBACK | 50 FT | 740.2'± | 730'± |
| MIN. SY SETBACK | 25 FT | 38.6'± | 66'± |
| MIN. TY SETBACK | 30 FT | 498.7'± | 498'± |
| MAX. BUILDING HEIGHT | 60 FT/5 STORIES | 58 ± 1/4 STORIES | 62 ± 1/4 STORIES |
| MAX. BUILDING COVERAGE | 35% | 4.85% | 5.25%± |
| MAX. GROSS FLOOR AREA W/O | 0.5 | 0.17 | 0.18 |



Hawk Design, Inc.
Landscape Architecture
Land Planning
Sagamore, MA
508-839-8000
info@hawkdesigninc.com

DATE: 6/15/22



Revisions:
None Date: 06/15/22

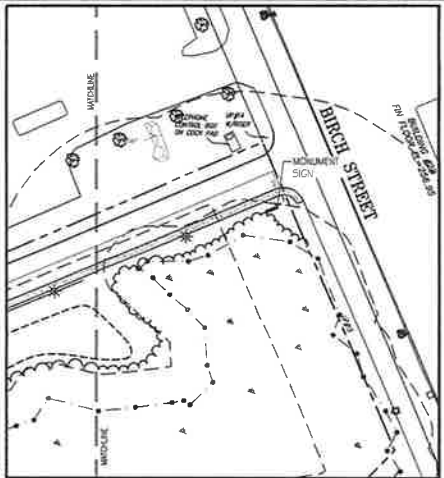
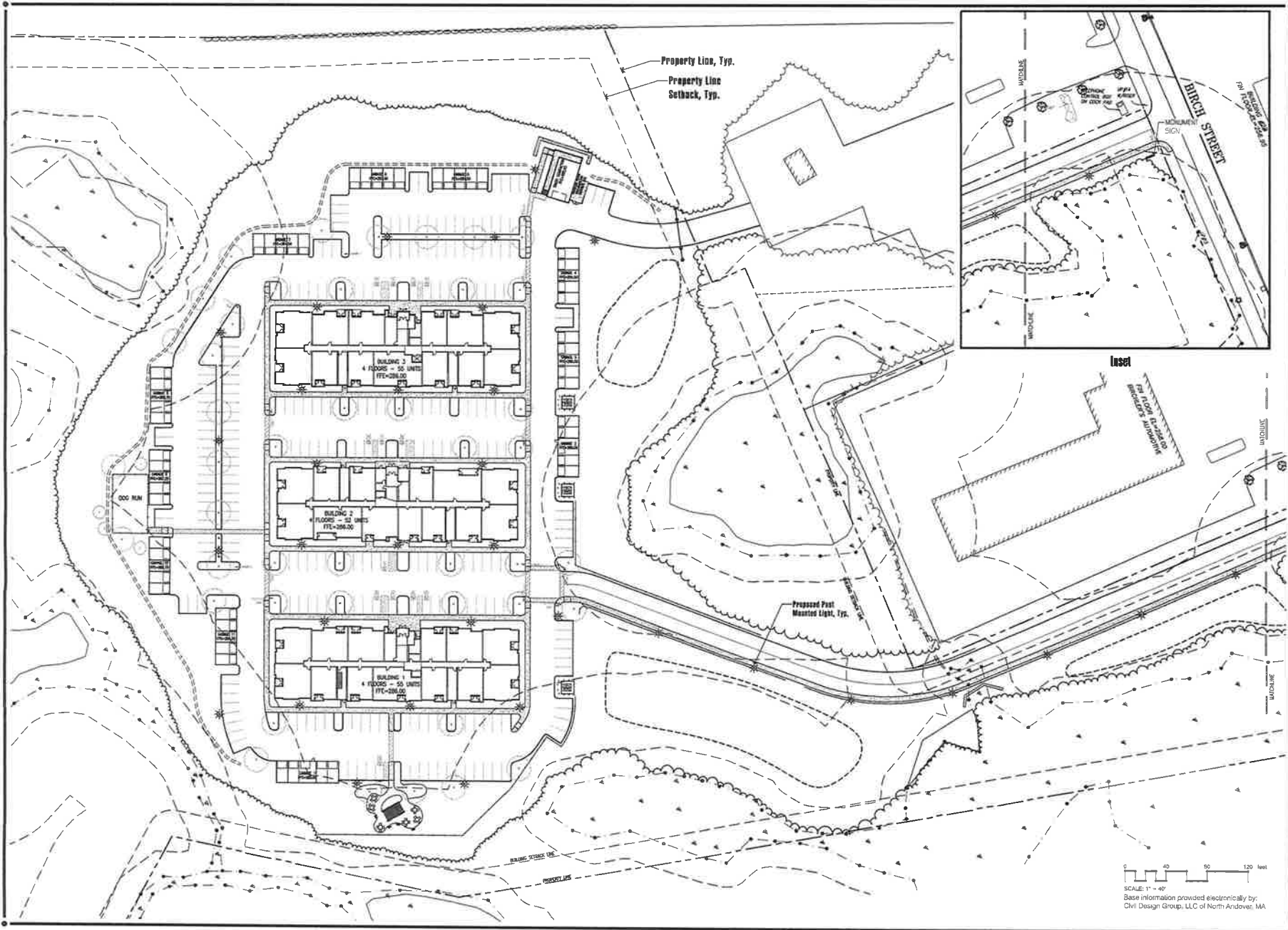
Kanso Milford
Birch Street, Milford, Massachusetts
Prepared for: AvalonBay Communities, Boston, Massachusetts

Drawn By: DML Checked By: YSL

Landscape Plan

Scale: 1" = 40'

Sheet: **L1**



Hawk Design, Inc.
Landscape Architecture
Land Planning
Sagamore, MA
508-633-8888
info@hawkdesigninc.com

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Date: 6/15/22
Revisions:
No. Date Description

Kanso Milford
Birch Street, Milford, Massachusetts
Prepared for: AvalonBay Communities, Boston, Massachusetts

Drawn by: DKL, Checked by: TEB

Lighting Plan

Scale: 1" = 40'-0"

Sheet: **L2**

0 40 80 120 feet
SCALE: 1" = 40'
Base information provided electronically by:
Civil Design Group, LLC of North Andover, MA

tat

© The Architectural Team, Inc.
 50 Commandant's Way at Admiral's Hill
 Chelsea MA 02150
 O 617.889.440
 F 617.884.432
 architecturteam.com

Consultant:

Revision:

Architect of Record:

Drawn: MAC

Checked: VH

Scale: 1/8" = 1'-0"

Key Plan:

Project Name:
**AVALON KANSO
 MILFORD**

**BIRCH STREET
 MILFORD, MA**

Sheet Name:

**OVERALL FLOOR PLAN -
 BUILDING 1 - LEVEL 1.**

Project Number:

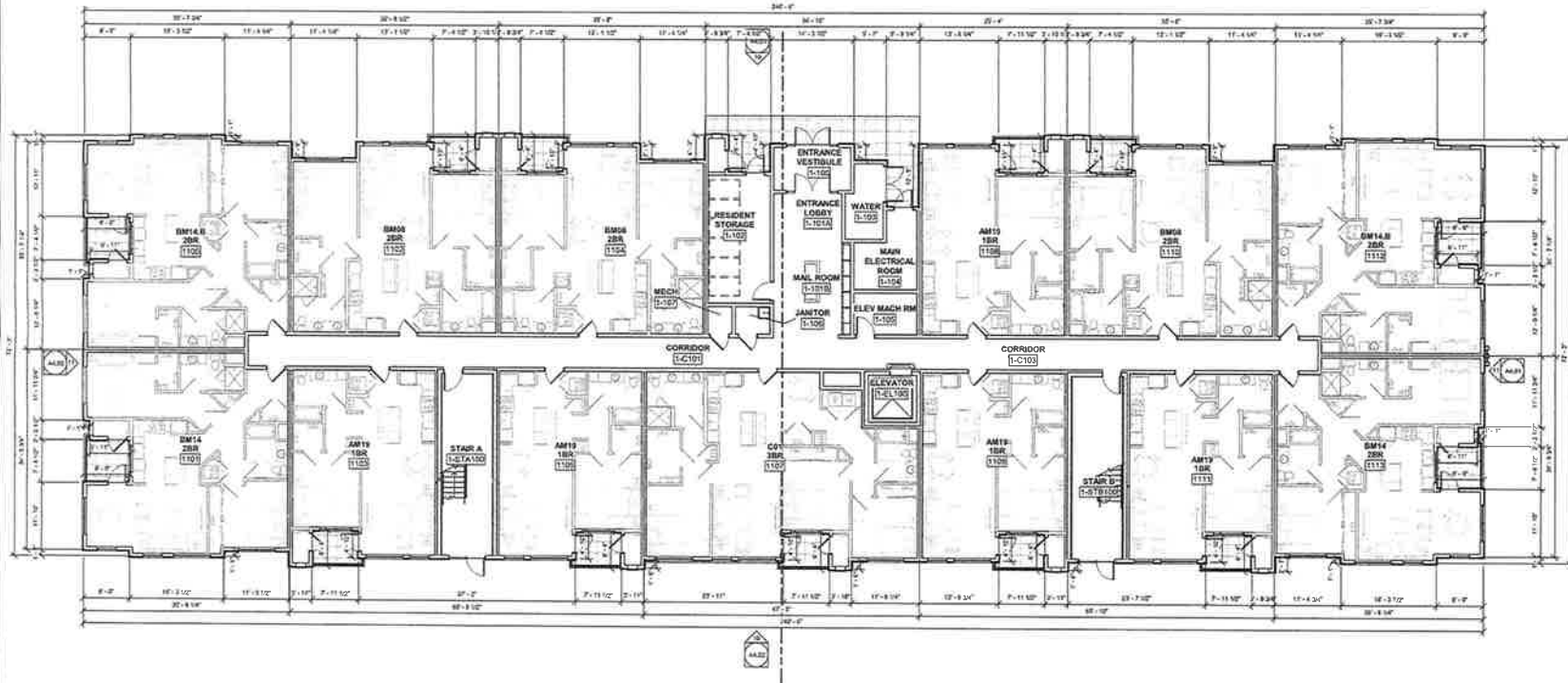
22009.00

Issue Date:

06/15/2022

Sheet Number:

A1.1.01



10 OVERALL FLOOR PLAN - BLDG 1 - LEVEL 1
 Scale: 1/8" = 1'-0"

tat

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 50 Commandant's Way at Admirals Hill
 Chelsea MA 02150
 O 617.889.440
 F 617.884.432
 architecturalteam.com

Consultant:

Revision:

Architect of Record:

Drawn: MAC

Checked: VH

Scale: 1/8" = 1'-0"

Key Plan:

Project Name:
**AVALON KANSO
 MILFORD**

**BIRCH STREET
 MILFORD, MA**

Sheet Name:

**OVERALL FLOOR PLAN -
 BUILDING 1 - LEVEL 2.**

Project Number:

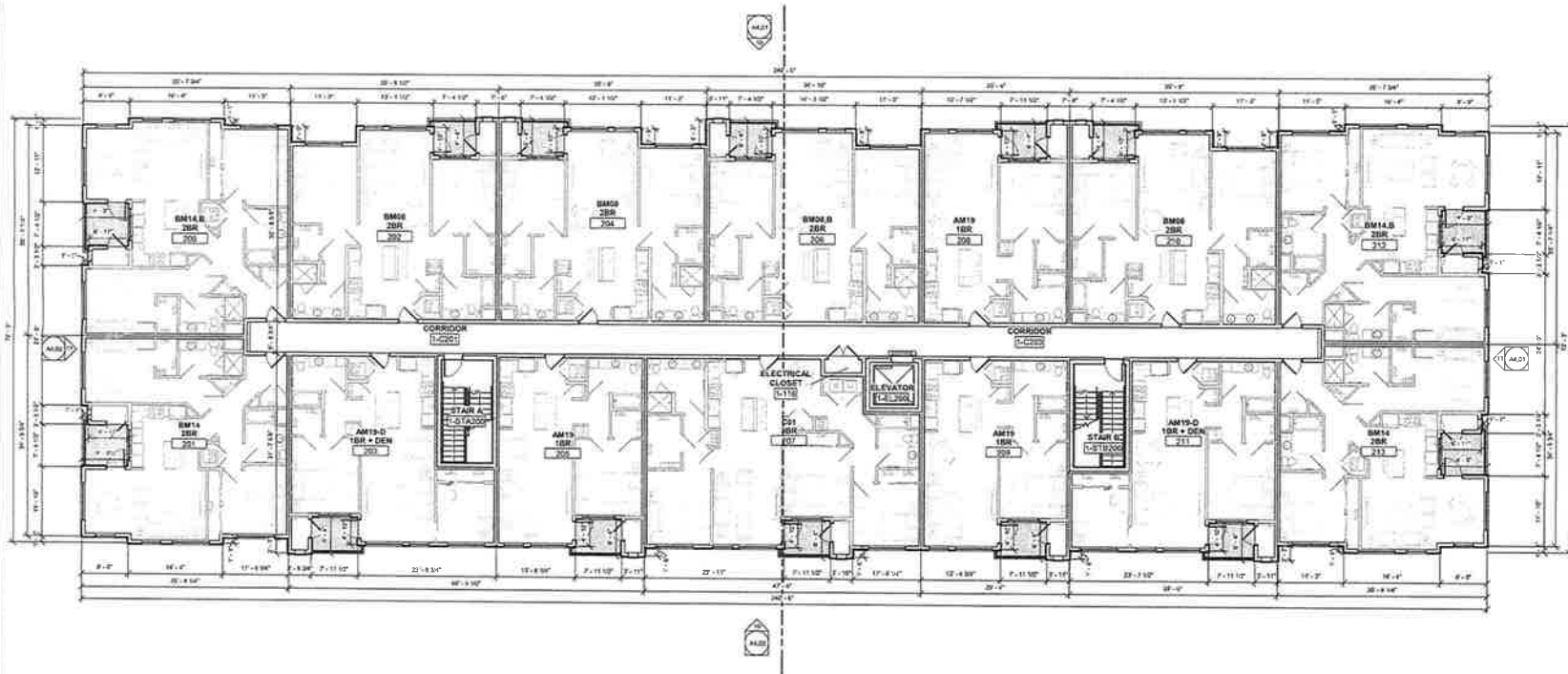
22009.00

Issue Date:

06/15/2022

Sheet Number:

A1.1.02



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 F 617.884.432
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Consultant:

Revision:

Architect of Record:

Drawn: MAC

Checked: VH

Scale: 1/8" = 1'-0"

Key Plan:

Project Name:
**AVALON KANSO
 MILFORD**

**BIRCH STREET
 MILFORD, MA**

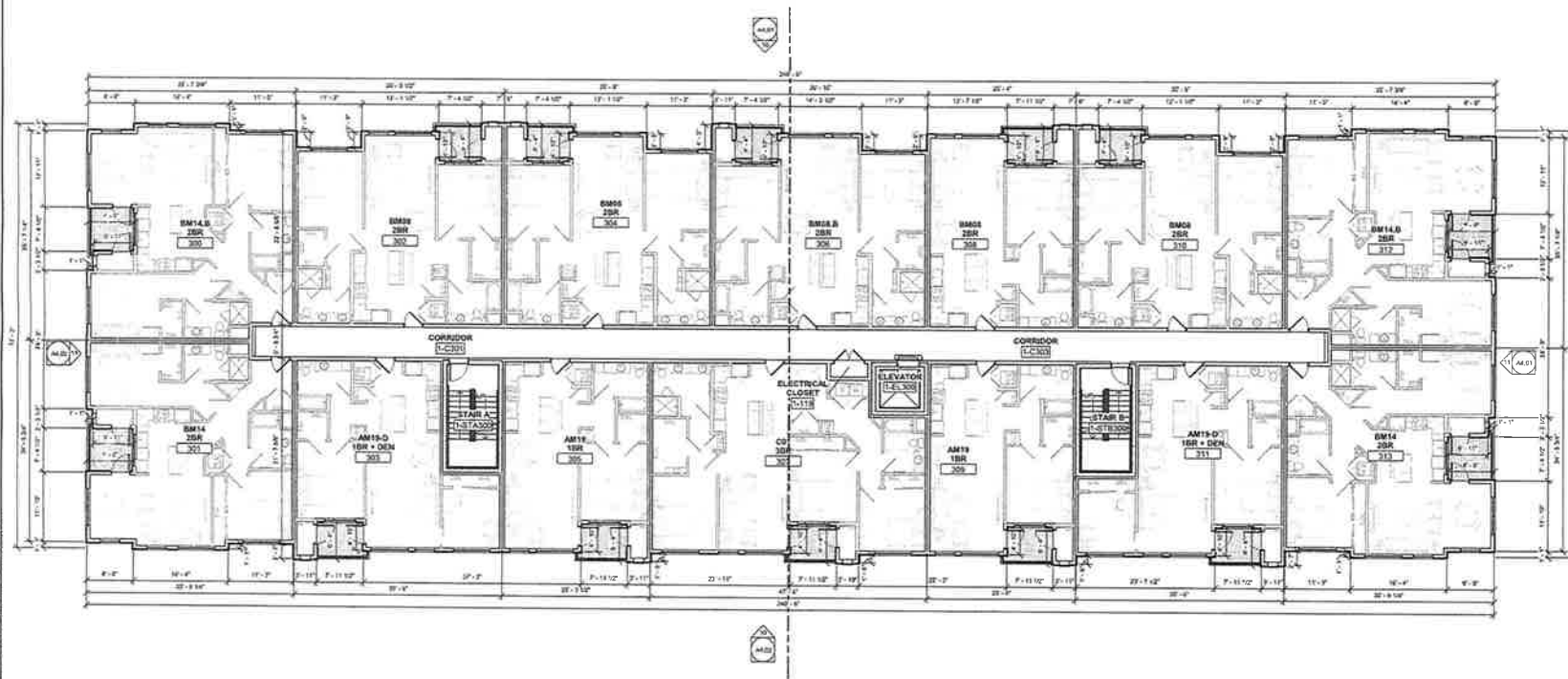
Sheet Name:
**OVERALL FLOOR PLAN -
 BUILDING 1 - LEVEL 3.**

Project Number:
 22009.00

Issue Date:
 06/15/2022

Sheet Number:

A1.1.03



10 OVERALL FLOOR PLAN - BLDG 1 - LEVEL 3
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Revision:

Architect of Record:

Drawn: MAC

Checked: VH

Scale: 1/8" = 1'-0"

Key Plan:

Project Name:
**AVALON KANSO
MILFORD**

**BIRCH STREET
MILFORD, MA**

Sheet Name:

**OVERALL FLOOR PLAN -
BUILDING 1 - LEVEL 4.**

Project Number:

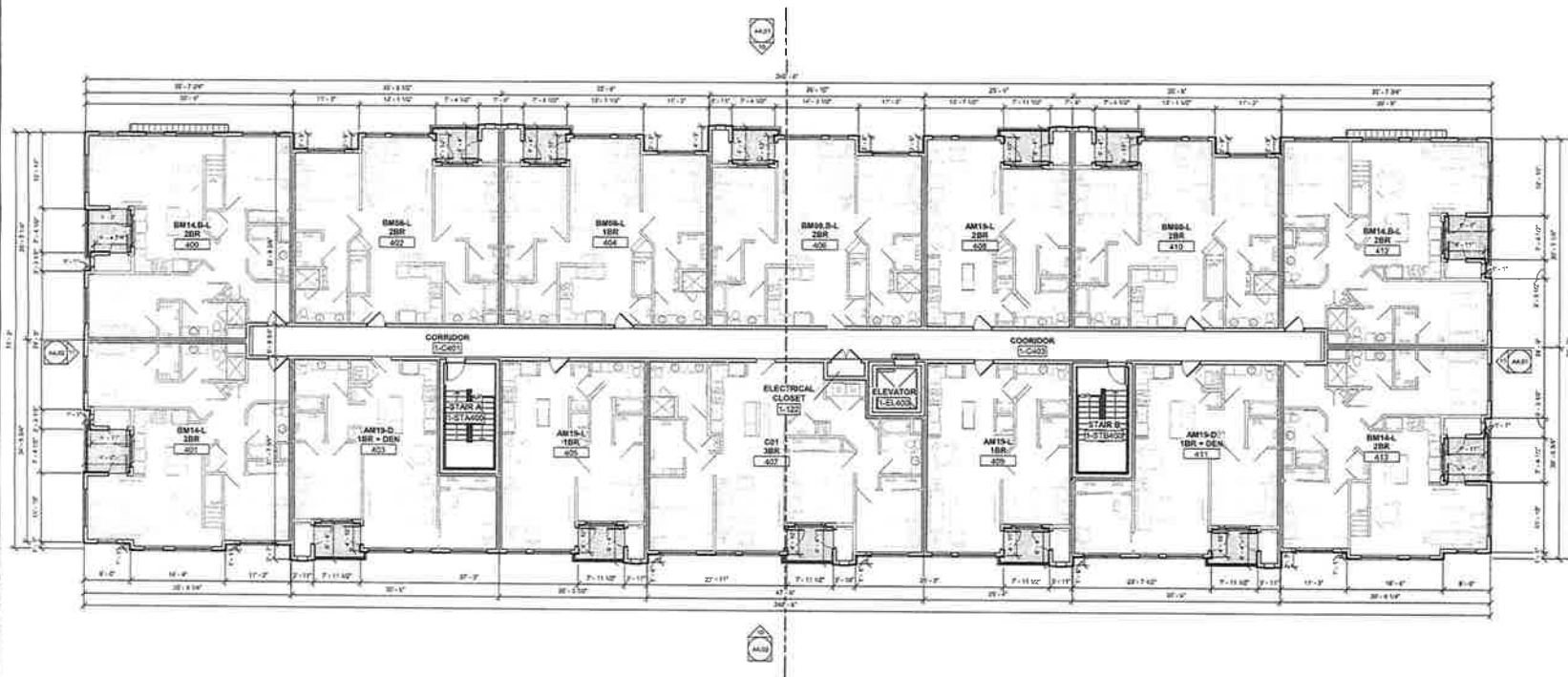
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Issue Date:

06/15/2022

Sheet Number:

A1.1.04



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Consultant:

Revision:

Architect of Record:

Drawn: MAC
 Checked: VH
 Scale: 1/8" = 1'-0"
 Key Plan:

Project Name:
**AVALON KANSO
 MILFORD**

**BIRCH STREET
 MILFORD, MA**

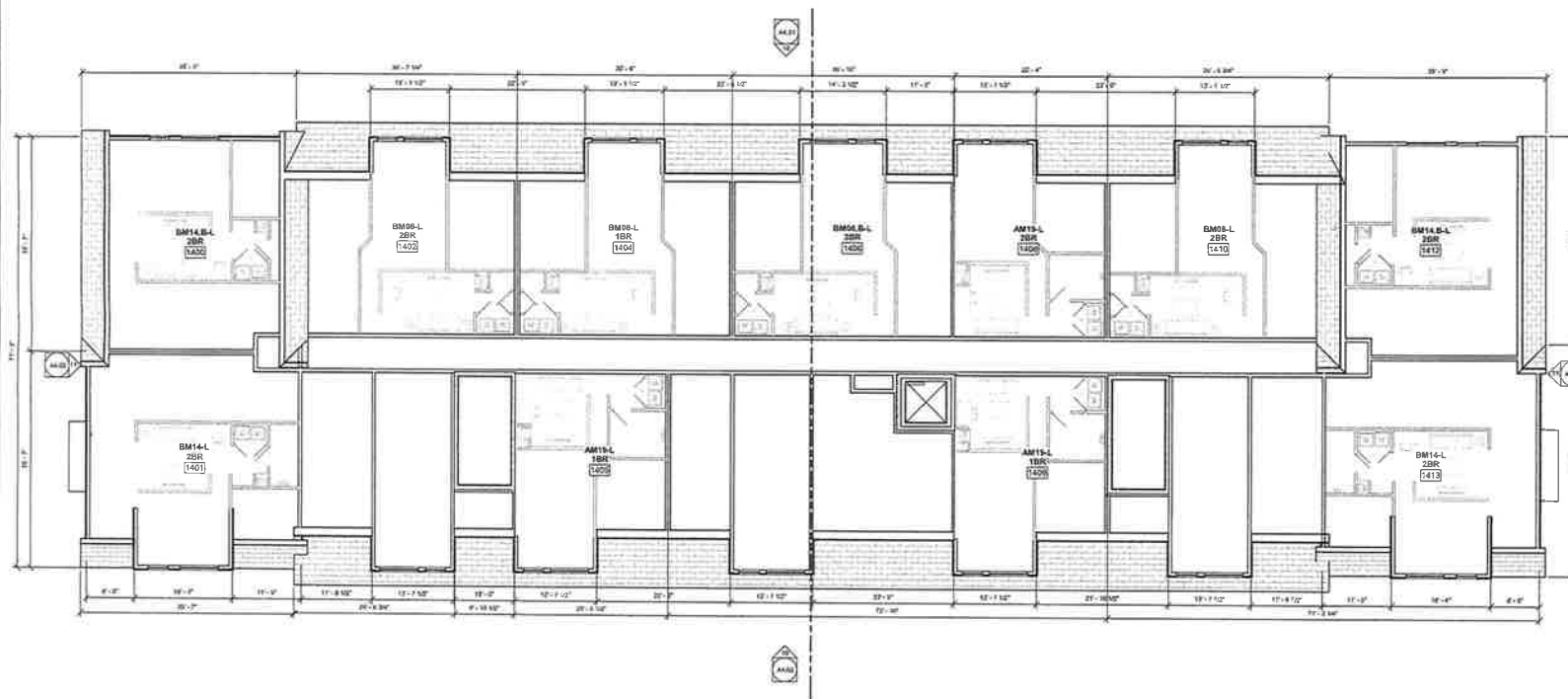
Sheet Name:
**OVERALL FLOOR PLAN - BLDG 1 - LOFT
 LEVEL**

Project Number:
 22009.00

Issue Date:
 06/15/2022

Sheet Number:

A1.1.05



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Consultant:

Revision:

Architect of Record:

Drawn: MAC
Checked: VH
Scale: 1/8" = 1'-0"
Key Plan:

Project Name:
**AVALON KANSO
MILFORD**

**BIRCH STREET
MILFORD, MA**

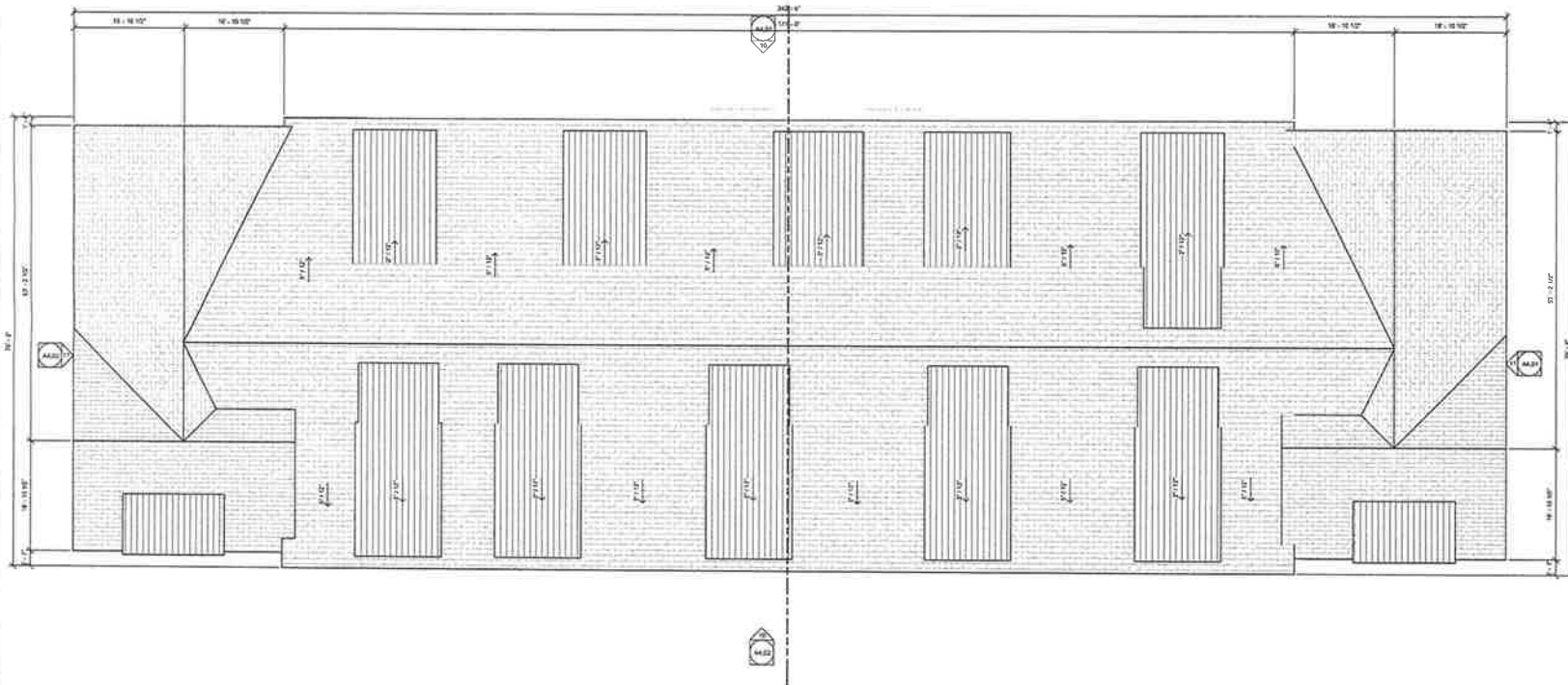
Sheet Name:
**OVERALL FLOOR PLAN -
BUILDING 1 - ROOF
LEVEL.**

Project Number:
22009.00

Issue Date:
06/15/2022

Sheet Number:

A1.1.06



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10 OVERALL FLOOR PLAN - BLDG 1 - ROOF LEVEL
Scale: 1/8" = 1'-0"

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Revision:

Architect of Record:

Drawn: MAC

Checked: VH

Scale: 1/8" = 1'-0"

Key Plan:

Project Name:
**AVALON KANSO
 MILFORD**

**BIRCH STREET
 MILFORD, MA**

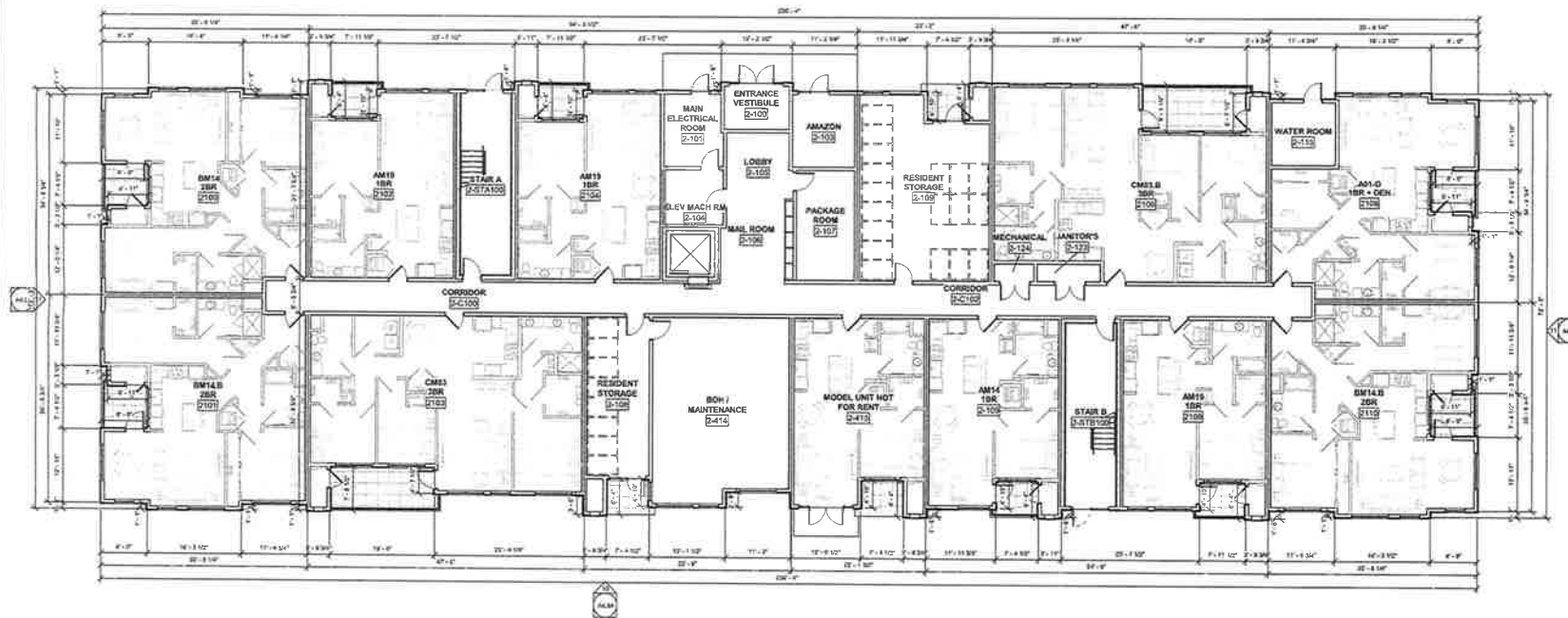
Sheet Name:
**OVERALL FLOOR PLAN -
 BUILDING 2 - LEVEL 1.**

Project Number:
 22009.00

Issue Date:
 06/15/2022

Sheet Number:

A1.2.01



06/15/2022 11:30:05 AM
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Consultant:

Revision:

Architect of Record:

Drawn: MAC
 Checked: VH
 Scale: 1/8" = 1'-0"
 Key Plan:

Project Name:
**AVALON KANSO
 MILFORD**

**BIRCH STREET
 MILFORD, MA**

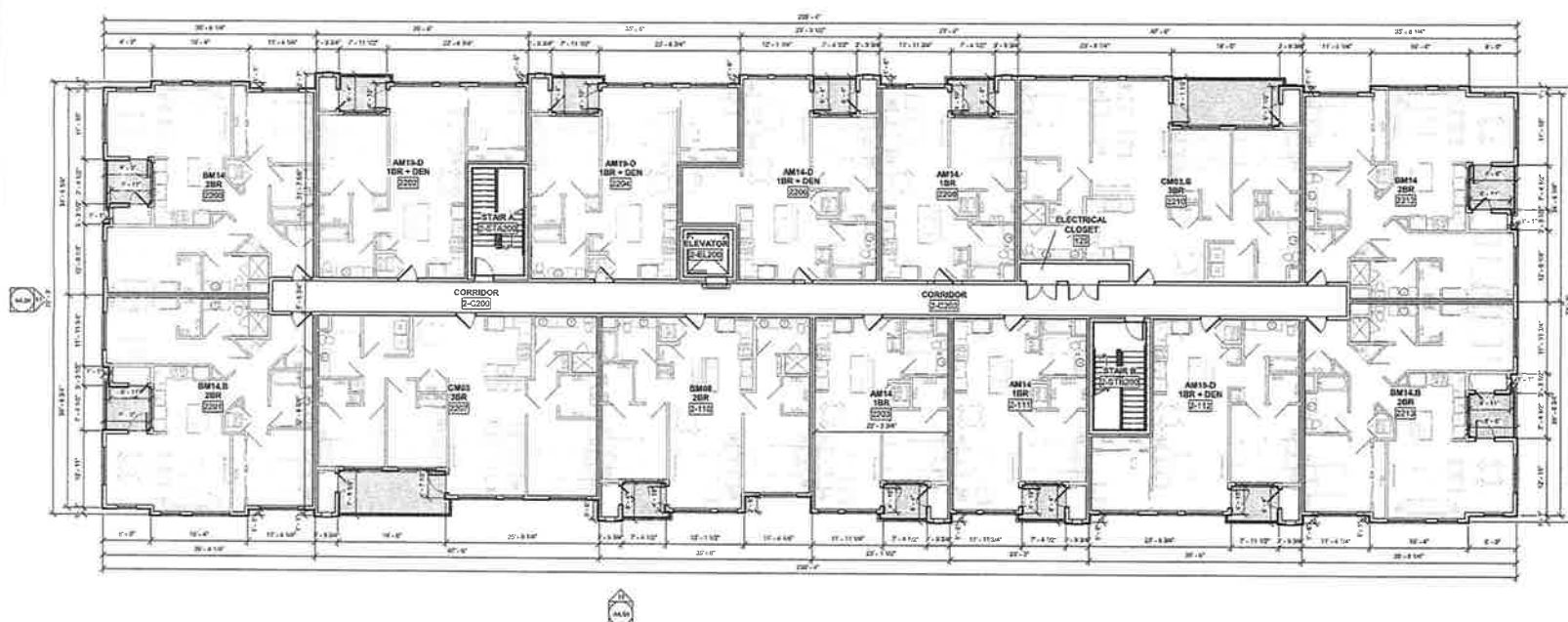
Sheet Name:
**OVERALL FLOOR PLAN -
 BUILDING 2 - LEVEL 2.**

Project Number:
 22009.00

Issue Date:
 06/15/2022

Sheet Number:

A1.2.02



6/15/2022 3:42:07 PM
 R:\32272000\001 - Work\Avalon\Milford\02 - BLDG 2 - Overall Floor Plan - Level 2.dwg

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Consultant:

Revision:

Architect of Record:

Drawn: MAC
 Checked: VH
 Scale: 1/8" = 1'-0"
 Key Plan:

Project Name:
**AVALON KANSO
 MILFORD**

**BIRCH STREET
 MILFORD, MA**

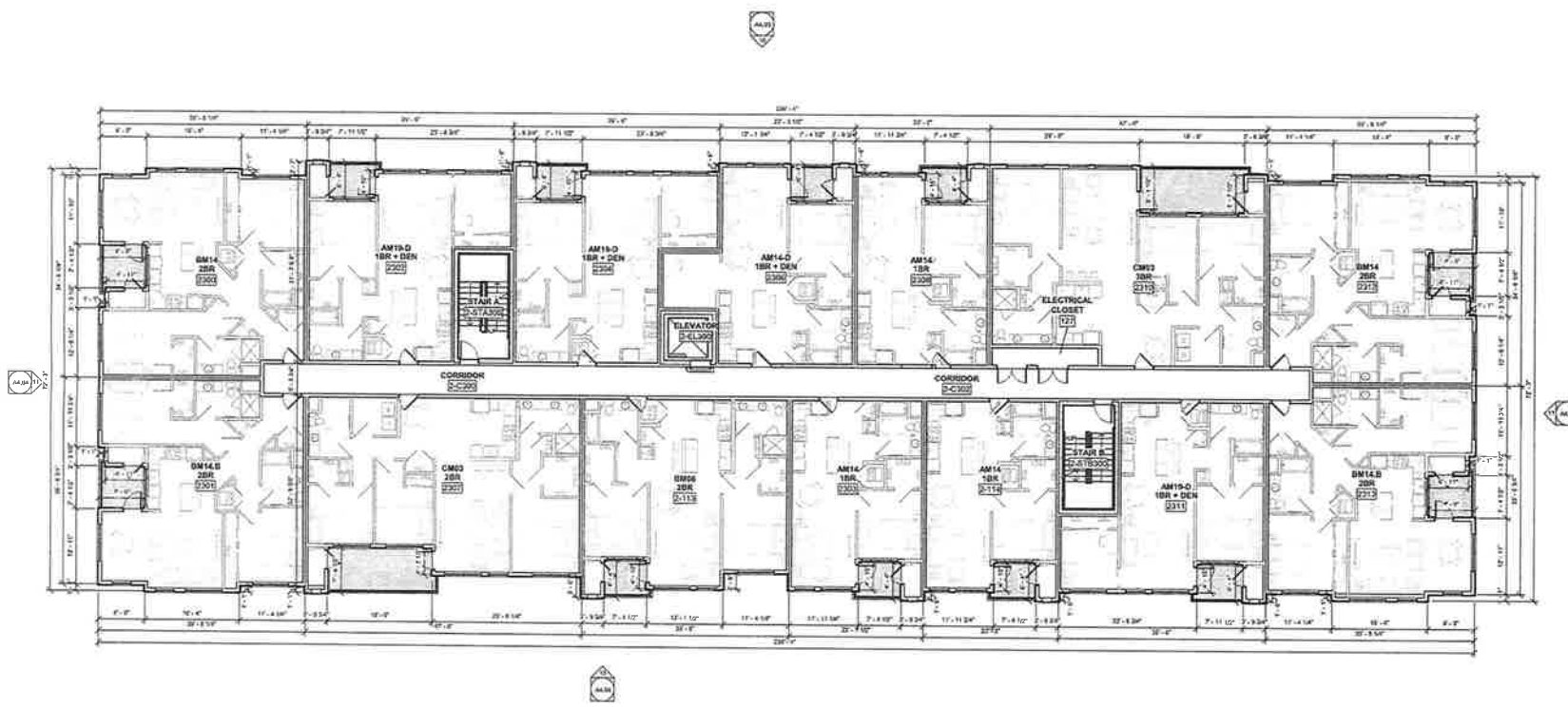
Sheet Name:
**OVERALL FLOOR PLAN -
 BUILDING 2 - LEVEL 3.**

Project Number:
 22009.00

Issue Date:
 06/15/2022

Sheet Number:

A1.2.03



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Drawn: MAC
 Checked: VH
 Scale: 1/8" = 1'-0"
 Key Plan:

Project Name:
**AVALON KANSO
 MILFORD**

**BIRCH STREET
 MILFORD, MA**

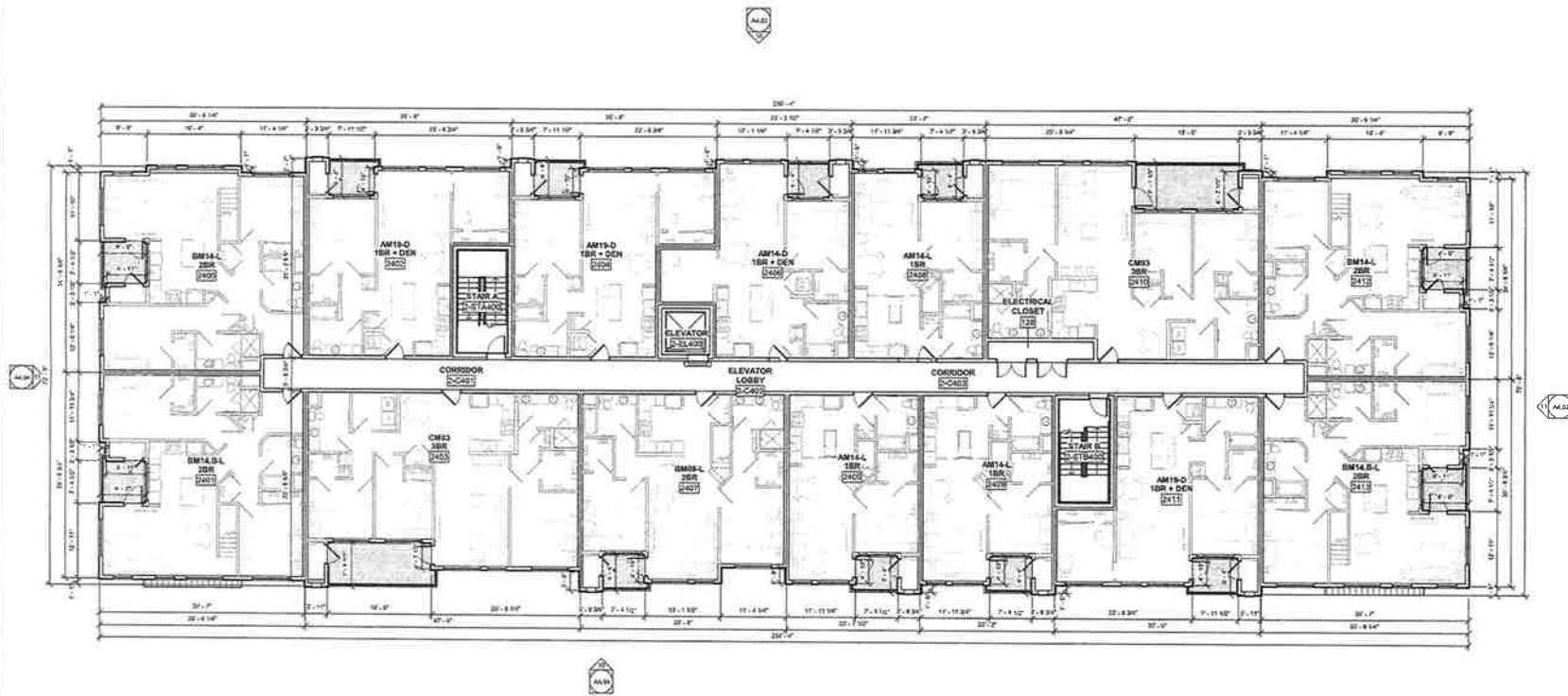
Sheet Name:
**OVERALL FLOOR PLAN -
 BUILDING 2 - LEVEL 4.**

Project Number:
 22009.00

Issue Date:
 06/15/2022

Sheet Number:

A1.2.04



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Drawn: MAC
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 Key Plan:

Project Name:
**AVALON KANSO
 MILFORD**

**BIRCH STREET
 MILFORD, MA**

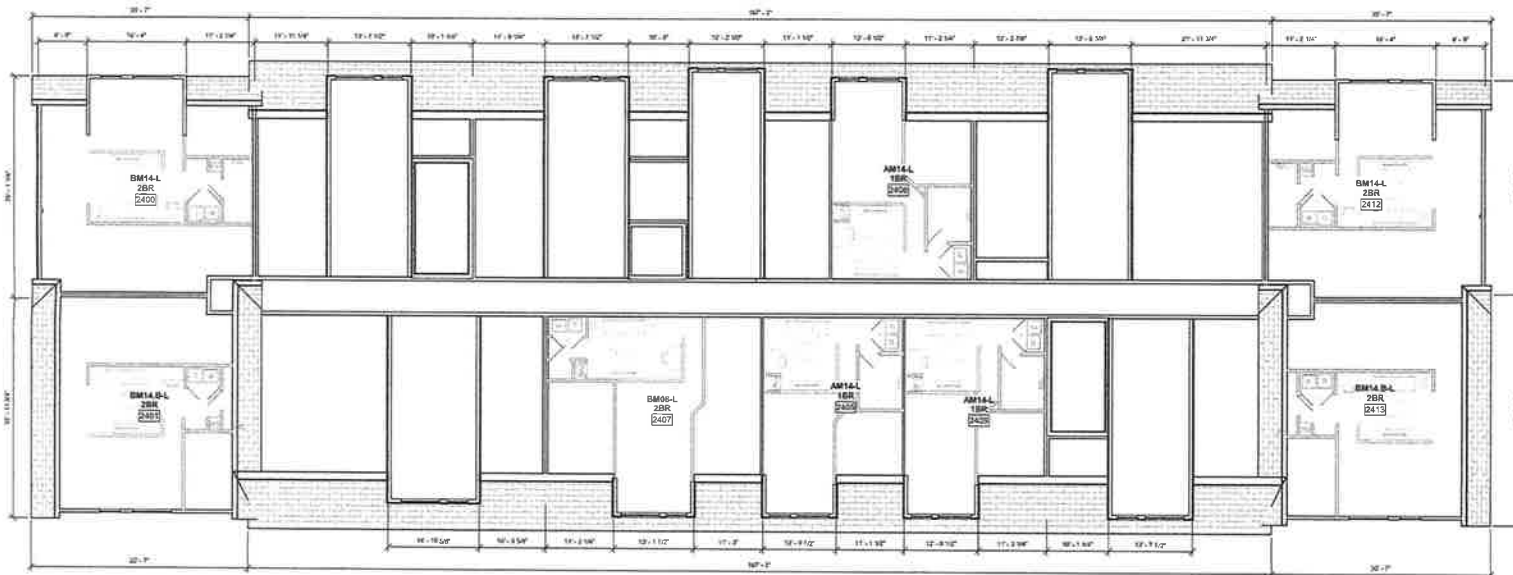
Sheet Name:
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 BUILDING 2 - LOFT
 LEVEL.**

Project Number:
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Issue Date:
 06/15/2022

Sheet Number:

A1.2.05



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10 OVERALL FLOOR PLAN - BLDG 2 - LOFT LEVEL
 Scale: 1/8" = 1'-0"

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Architect of Record:

Drawn: Author

Checked: Checker

Scale: 1/8" = 1'-0"

Key Plan:

Project Name:
**AVALON KANSO
 MILFORD**

**BIRCH STREET
 MILFORD, MA**

Sheet Name:

**TRASH FACILITY,
 GARAGE AND
 ACCESSIBLE GARAGE
 PLANS**

Project Number:

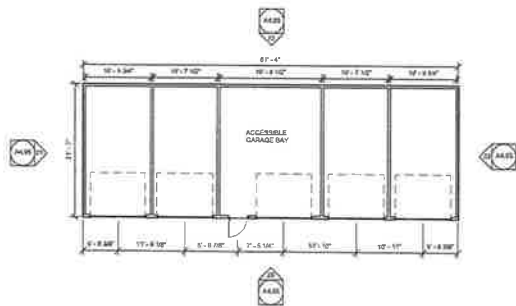
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Issue Date:

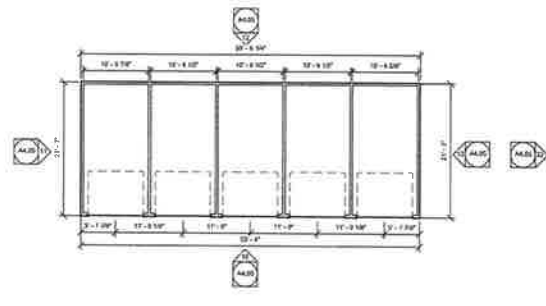
06/15/2022

Sheet Number:

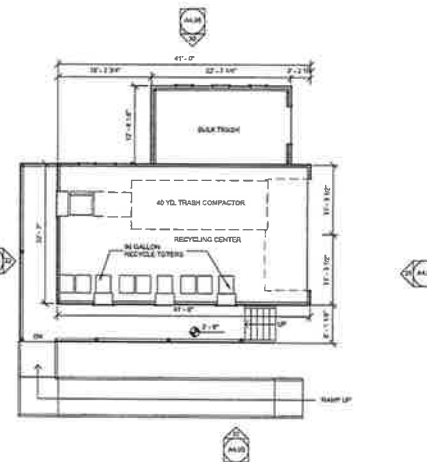
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30 ACCESSIBLE GARAGE PLAN
 Scale: 1/8" = 1'-0"



20 GARAGE PLAN
 Scale: 1/8" = 1'-0"

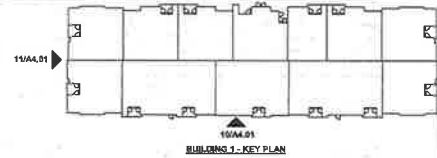


10 TRASH FACILITY PLAN
 Scale: 1/8" = 1'-0"

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 BMS 20220202.dwg
 Avalon Milford 22009.00 317_AVALON_MILFORD_CENTRAL_V01.dwg

MATERIAL KEY

- EL01 - VERTICAL VINYL SIDING
- EL02 - VINYL LAP SIDING
- EL03 - HAZEL ELEMENT PANEL
- EL04 - VERTICAL BRICK
- EL05 - ALUMINUM CLUTTERTRAY
- EL06 - ALUMINUM GUARDRAIL
- EL07 - ASPHALT SHINGLE ROOF



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Architect of Record:

Drawn: MAC

Checked: VH

Scale: As indicated

Key Plan:

Project Name:
**AVALON KANSO
 MILFORD**

**BIRCH STREET
 MILFORD, MA**

Sheet Name:
**BUILDING 1 -
 ELEVATIONS.**

Project Number:
22009.00

Issue Date:
06/15/2022

Sheet Number:

A4.01



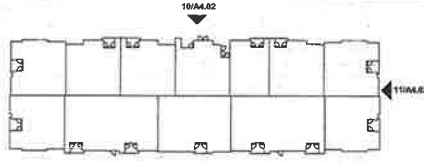
11 BUILDING 1 - OVERALL BUILDING ELEVATION - EAST
 Scale: 1/8" = 1'-0"



10 BUILDING 1 - OVERALL BUILDING ELEVATION - NORTH
 Scale: 1/8" = 1'-0"

06/16/2022 3:40:07 PM
 100 383 22009.00 - AVALON KANSO MILFORD - CENTRAL - V01.rvt

MATERIAL KEY
 CL14 - WHITE VINYL SIDING
 CL15 - WHITE LAM. SIDING
 CL16 - RED CEDAR SHAKES
 CL18 - HWY. WINDOW
 CL19 - ALUMINUM STORMDOOR
 CL20 - ALUMINUM SLIDING DOOR
 CL21 - METAL VINYL SIDING



BUILDING 1 - KEY PLAN

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Revision:

Architect of Record:

Drawn: MAC
 Checked: VH
 Scale: As indicated
 Key Plan:

Project Name:
AVALON KANSO MILFORD

BIRCH STREET MILFORD, MA
 Sheet Name:
BUILDING 1 - ELEVATIONS.

Project Number:
22009.00

Issue Date:
06/15/2022

Sheet Number:
A4.02



11 BUILDING 1 - OVERALL BUILDING ELEVATION - WEST
 Scale: 1/8" = 1'-0"

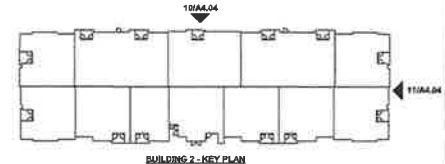


10 BUILDING 1 - OVERALL BUILDING ELEVATION - SOUTH
 Scale: 1/8" = 1'-0"

06/15/2022 1:32:47 PM
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MATERIAL KEY

- BL01 - BRICK (CLAY TILE) SIDING
- BL02 - VINYL LAP SIDING
- BL03 - BRICK CONCRETE FINISH
- BL04 - VINYL WINDOW
- BL05 - ALUMINUM TRIM/DOOR
- BL06 - ALUMINUM SLIPSIDE
- BL07 - ASPHALT SHINGLE ROOF



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Drawn: MAC
 Checked: VH
 Scale: As indicated
 Key Plan:

Project Name:
AVALON KANSO MILFORD

BIRCH STREET MILFORD, MA

Sheet Name:
BUILDING 2 - ELEVATIONS.

Project Number:
 22009.00

Issue Date:
 06/15/2022

Sheet Number:

A4.04



11 BUILDING 2 - OVERALL BUILDING ELEVATION - WEST
 Scale: 1/8" = 1'-0"

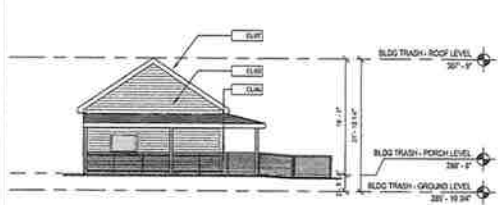
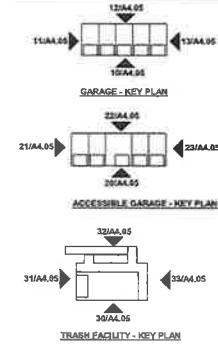


10 BUILDING 2 - OVERALL BUILDING ELEVATION - SOUTH
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MATERIAL KEY

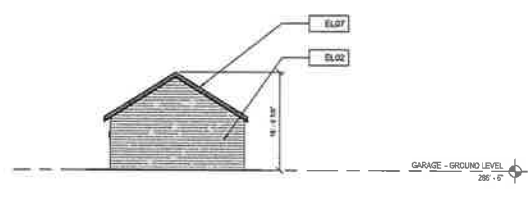
- EL01 - BRICK, IMPERFORATED
- EL02 - VINYL LAP SIDING
- EL03 - PINK GRANITE PANEL
- EL04 - VINYL WINDOW
- EL05 - ALUMINUM STOREROOM
- EL06 - ALUMINUM GUARDRAIL
- EL07 - ASPH/FLT BRICK ROOF
- EL09 - GARAGE DOOR



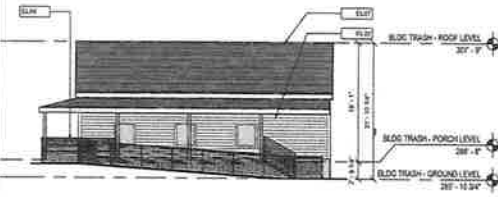
33 TRASH FACILITY - ELEVATION B
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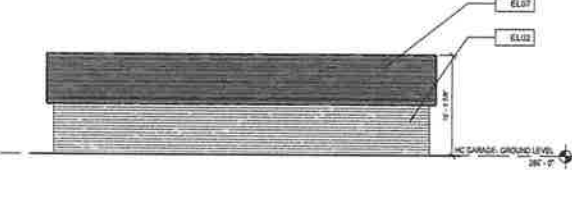
23 HC GARAGE - ELEVATION D
Scale: 1/8" = 1'-0"



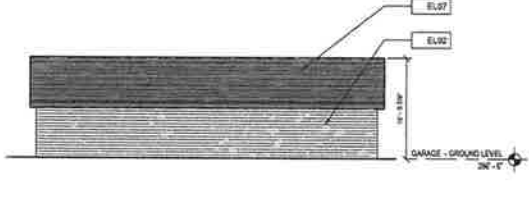
13 GARAGE - ELEVATION D
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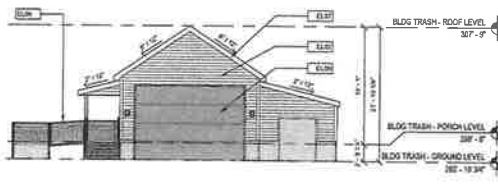
32 TRASH FACILITY - ELEVATION C
Scale: 1/8" = 1'-0"



22 HC GARAGE - ELEVATION C
Scale: 1/8" = 1'-0"



12 GARAGE - ELEVATION C
Scale: 1/8" = 1'-0"



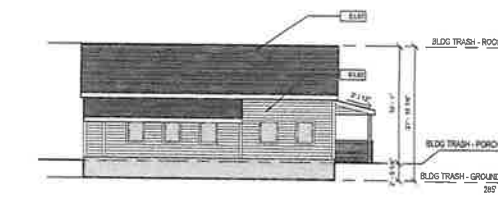
31 TRASH FACILITY - ELEVATION D
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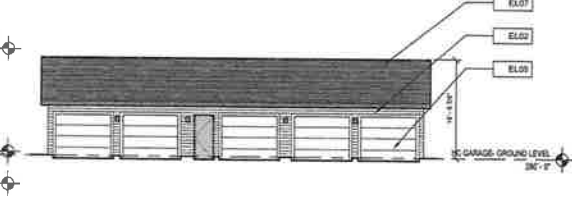
21 HC GARAGE - ELEVATION B
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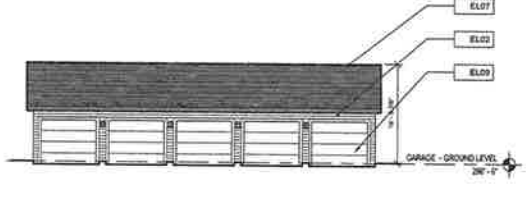
11 GARAGE - ELEVATION B
Scale: 1/8" = 1'-0"



30 TRASH FACILITY - ELEVATION A
Scale: 1/8" = 1'-0"



20 HC GARAGE - ELEVATION A
Scale: 1/8" = 1'-0"



10 GARAGE - ELEVATION A
Scale: 1/8" = 1'-0"

Consultant:

Revision:

Architect of Record:

Drawn: MAC
Checked: VH
Scale: As indicated
Key Plan:

Project Name:
AVALON KANSO MILFORD

BIRCH STREET MILFORD, MA

Sheet Name:

GARAGE STRUCTURES / TRASH FACILITY ELEVATIONS.

Project Number:
22009.00

Issue Date:
06/15/2022

Sheet Number:

A4.05



E-1
7-21-22

Department of Human Resources

Town of Milford, MA
52 Main Street – Room 10
Milford, MA 01757

KRISTIN MELPIGNANO

HUMAN RESOURCES DIRECTOR

Telephone: (774) 462-3309

Fax: (508) 634-2324

E-mail: Kmelpignano@townofmilford.com

TO: Thomas J. O'Loughlin, Esq., Chairman
Michael K. Walsh
Paul Mazzuchelli
Richard A. Villani, Town Administrator

FROM: Kristin Melpignano, HR Director

RE: APPOINTMENT OF ASSISTANT ANIMAL CONTROL OFFICER

DATE: June 13, 2022

The position of Assistant Animal Control Officer was advertised both on the Town website as well as Indeed.com. We received 51 applications for this position.

I reviewed the resumes with the Animal Control Officer and Town Administrator and selected two (2) candidates to be interviewed. The candidates were interviewed by Animal Control Officer Keith Haynes and me.

After careful consideration, we are recommending Mark Nicholson for the position. Mr. Nicholson has worked for the past twenty-three (23) years as a Pest Control and Wildlife specialist and is a Certified Animal Control Officer. He is familiar with and has handled many types of animals. In addition, Mr. Nicholson has a background in police procedures and security, with an impressive list of certifications.

If you approve this recommendation, I request that he be placed at Grade 4/Step 1 under Article 2 with a starting rate of \$27.88/hour. We would ask that he be allowed to begin working on July 9, 2022.

Thank you for your consideration.

Enclosure

cc: Board of Selectmen
Files

E-2
7-11-22

June 22, 2022

Mr. Thomas O'Loughlin, Chair
Milford Select Board
52 Main Street
Milford, Ma. 01757

Dear Mr. O'Loughlin,

Please accept this letter as formal notification that I am resigning from the Milford Downtown Revitalization Committee effective June 1, 2022.

I would like to acknowledge the significant accomplishments of the committee and that it has been a rewarding experience contributing to the planning and direction of the Downtown district.

Although Covid has significantly affected the committee's ability to make progress over the last 2 years, the volunteers and town administrators have worked together to keep the vision of "Work, Play, Live" moving forward.

I wish the DRC continued success in the future.

Sincerely,



Pete Moynihan

CC: Rick Villani
Ronald Pagnini

Richard Villani

E-3
7-11-22

From: paga1948@aol.com
Sent: Tuesday, May 31, 2022 2:12 PM
To: Richard Villani; Ronald Pagnini
Subject: new member on our committee

CAUTION: This email originated from outside the Town of Milford. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Rick, I forgot to mention to you that we voted in a new member. Her name is Christine Schadler. Can you please start the process. Should she come to your office to fill out paper work? Please let me know the procedure so I can inform her.

Thank you,
Ronnie



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

If you would like to serve on any of the local government boards whose members are appointed by the Board of Selectmen, please complete this application, providing all information requested, and return to the Board of Selectmen at the above address. Your application will remain on file for **three years**. If you have not had an opportunity for appointment within that time period, please reapply, so that your application can remain current. Thank you for your interest. (All information required on this form should be typed or printed clearly.)

YOUR NAME Christine Schadler

YOUR ADDRESS L. _____

TELEPHONE NO. FOR WEEKDAYS _____ & EVENINGS() _____

EMAIL ADDRESS C. _____

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Bachelors in Mgmt.

EXPERIENCE I own several businesses, companies, Commercial properties, etc.

INTERESTS Town Betterment

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input checked="" type="checkbox"/> Other (Describe Below) |

Downtown revitalization

FOR OFFICE USE ONLY: Date Rec'd 6-13-22 Recorded 6-13-22 Application Expires 6-13-25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN
 Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
 508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

If you would like to serve on any of the local government boards whose members are appointed by the Board of Selectmen, please complete this application, providing all information requested, and return to the Board of Selectmen at the above address. Your application will remain on file for **three years**. If you have not had an opportunity for appointment within that time period, please reapply, so that your application can remain current. Thank you for your interest. (All information required on this form should be typed or printed clearly.)

YOUR NAME Brian William Long

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () _____ & EVENINGS() _____

EMAIL ADDRESS _____

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION University of Massachusetts - BA, History

EXPERIENCE Professional - 14 years in Staffing/HR Industry, mostly focused on IT recruiting - experience includes sourcing, interviewing, salary negotiations, benefits negotiation, offers, onboarding. Personal - Town Government for 6+ years; Historical studies; Public Transportation and Highway Infrastructure studies

INTERESTS Finance, HR/Personnel/Benefits, Staffing/Interviewing, History/Historical Preservation, Highway/Roadway/Railway Infrastructure, Public Transportation

Please indicate below if you are a Town Employee or serve on any Town Board.

Town Meeting Member; PTAC - Chair; TMSIC - Participating Applicant

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input checked="" type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input checked="" type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

Downtown Revitalization

FOR OFFICE USE ONLY: Date Rec'd 3-11-21 Recorded 3-11-21 Application Expires 3-11-24
 Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME LAURA VALORIE

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (508) _____ & EVENINGS (____) _____

EMAIL ADDRESS _____

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS: MARKETING AND BUSINESS COMMUNICATION
BRYANT COLLEGE

EXPERIENCE RETAIL MANAGEMENT (1990--2018)
PRESENTATION MANAGER
RETAIL REMODEL SUPERVISOR

INTERESTS ART HISTORY / PAINTING
INTERIOR DESIGN, DISPLAY, CONSTRUCTION
EUROPEAN HISTORY
TRAVEL, CULTURE, FOOD INFLUENCE

Please indicate below if you are a Town Employee or serve on any Town Board.

Laura Valorie
8/17/19

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

DOWNTOWN REVITALIZATION COMMITTEE

FOR OFFICE USE ONLY: Date Rec'd 8-17-19 Recorded _____ Application Expires 8-17-22
Referred to Board Chair for Review/Comment/Recommendation _____

E-4
7-11-22

4th OF JULY PARADE COMMITTEE

ACCEPTANCE OF GIFT(S)

| | |
|---------------------------|-------------------|
| Milford Power, LLC | \$145.00 |
| Milford Power, LLC | \$1,000.00 |

E-5
7-11-22



Town of Milford
Department Of Inspections

52 Main Street, Milford, MA 01757
Tel. (508) 634-2313 Fax (508) 473-2358

John Erickson
Building Commissioner / Zoning Officer
E-mail: Jerickson@Townofmilford.com

MEMORANDUM

To: Atty. Richard Villani, Town Administrator
From: John Erickson, Building Commissioner
RE: Assistant, Dept. of Inspections
Date: July 6, 2022

The newly created position of "Assistant, Department of Inspections" has been posted internally by Human Resource Director, Kristin Melpignano. The only applicant was Jennifer Cenedella, our current Administrative Specialist in the Department. Jennifer is imminently qualified to be promoted to the position of Assistant, and I strongly recommend that the Select Board appoint Jennifer Cenedella to the position of "Assistant, Department of Inspections". If this appointment is made, we will then be able to post for the position of "Administrative Specialist" for the Department of Inspections, which will be vacant if Jennifer is promoted.



E-6
7-11-22

MILFORD POLICE DEPARTMENT

James F. Falvey
Chief of Police

250 Main Street * Milford, MA 01757 * Tel. (508) 473-1113 * Fax (508) 473-5087

TO: Richard Villani, Esq., Town Administrator
FROM: James F. Falvey, Chief of Police
DATE: July 6, 2022
RE: Illegal Parking and Illegal Dumping.

Dear Mr. Villani,

Deputy Police Chief R. Tusino and Highway Surveyor S. Crisafulli have worked in concert to address illegal parking and dumping on town property located behind Wendy's Restaurant on Old Cedar St.

They recommend signage be erected on both sides and the entire length of Old Cedar St. The signage should state; **NO PARKING, VEHICLES WILL BE TOWED AT OWNERS EXPENSE**. The second group of signs should state; **TOWN PROPERTY NO DUMPING, MAX FINE WILL BE IMPOSED**.

By erecting these signs along Old Cedar St Milford Police Officers will have the ability to address these ongoing issues that plague the community.

Sincerely,
Chief of Police
James F. Falvey



E-7
7-11-22

MILFORD POLICE DEPARTMENT

James F. Falvey
Chief of Police

250 Main Street * Milford, MA 01757 * Tel. (508) 473-1113 * Fax (508) 473-5087

TO: Richard Villani, Esq., Town Administrator
FROM: James F. Falvey, Chief of Police
DATE: July 6, 2022
RE: Citizen Complaint for parking violations on Pond St

Dear Mr. Villani,

In response to numerous complaints from residents that reside on Pond St about trying to pull onto Main St I have directed Deputy Chief R Tusino to investigate and recommend a traffic solution. Deputy Chief R Tusino recommends the following signage be erected.

Erect, **NO PARKING HERE TO CORNER** signs on both sides of Pond St, 100 feet in from the Main St intersection. If vehicles are not allowed to park within 100 feet of the intersection motorists will have a clear unobstructed line of sight in both directions.

Sincerely,
Chief of Police
James F. Falvey

E-8
7-11-22

2022 APPOINTMENTS

Term Expires

COMMISSION ON DISABILITY (9) (3 Year Terms)

| | |
|----------------|---------|
| <i>Vacancy</i> | 6/30/25 |
| <i>Vacancy</i> | |
| <i>Vacancy</i> | |
| <i>Vacancy</i> | |

COMMUNITY SCHOOL USE COMMITTEE- (3 Year terms)

| | |
|----------------|---------|
| <i>Vacancy</i> | 6/30/25 |
|----------------|---------|

COUNCIL ON AGING (9) (3 Year Terms)

| | |
|----------------|---------|
| <i>Vacancy</i> | 6/30/23 |
|----------------|---------|

FAIR HOUSING COMMITTEE (5) (1 Year Terms)

| | |
|----------------|---------|
| <i>Vacancy</i> | 6/30/23 |
| <i>Vacancy</i> | 6/30/23 |
| <i>Vacancy</i> | 6/30/23 |

MILFORD CULTURAL COUNCIL (13) (3 Year Terms)

| | |
|----------------|---------|
| <i>Vacancy</i> | 7/11/25 |
| <i>Vacancy</i> | 7/11/25 |

ZONING BOARD OF APPEALS (8) (5 Year Terms, 3 Year Terms for Alternate)

| | | |
|----------------|----------|---------|
| <i>Vacancy</i> | (Alt. 2) | 6/30/24 |
|----------------|----------|---------|

MILFORD YOUTH COMMISSION (21) (3 Year Terms)

| | |
|----------------|---------|
| <i>Vacancy</i> | 6/30/25 |
|----------------|---------|

COMMISSION ON DISABILITY

VACANCIES:

FOUR (4)

ONLY ONE (1) APPLICATION ON FILE



MILFORD SELECT BOARD

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YOUR NAME Daniel "Scott" Wilson

YOUR ADDRESS

TELEPHONE NO. FOR WEEKDAYS () & EVENINGS ()

EMAIL ADDRESS

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS in Plant & Soil Science university of Massachusetts Amherst 1986. MBA Bentley College 199

EXPERIENCE 6 years as a head grower, and 2 years owning a retail/wholesale garden center. 27 years in the print industry, designing mailrooms, print centers, and office printing in the S&P 500 arena. Develop process improvements around print in large coporations such as. Raytheon, Deutche Banc, Goldman Sachs, etc. I have had numerous teams that I managed over my career. Developed and successfully ran an online store, with website, email lists, and social media.

INTERESTS Fishing and building fishing rods. Reading, especially history. Lapidary, Gardening, Visiting historical sites in the U.S. home improvement.

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
| <input checked="" type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input checked="" type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input checked="" type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input checked="" type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input checked="" type="checkbox"/> Other (Describe Below) |

Animal Resecue, etc.

FOR OFFICE USE ONLY: Date Rec'd 7-1-22 Recorded 7-1-22 Application Expires 7-1-25
Referred to Board Chair for Review/Comment/Recommendation

COMMUNITY SCHOOL USE COMMITTEE

VACANCIES:

One (1)

COMMITTEE RECOMMENDATION:

Based on input from the Committee the following names should be considered:

William Farrell

Justin Dulak

Samantha Cesario

Lena Pires

From: Jeremy Kearnan <jpkernan@gmail.com>
Sent: Friday, June 10, 2022 11:07 AM
To: Lena Pires; jligor@milfordma.com
Subject: Re: Member Recommendation-Vacancy

CAUTION: This email originated from outside the **Town of Milford**. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hi Lena - based on input from the committee, the following names should be considered.

- William Farrell
- Justin Dulak
- Samantha Cesario



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME William Farrell
YOUR ADDRESS 111.
TELEPHONE NO. FOR WEEKDAYS (508) 282-0348 & EVENINGS () SAME
EMAIL ADDRESS 111.

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS - Accounting (Bentley University)
MBA - Lake Forest Graduate School of Mgmt.
EXPERIENCE 40 years with large corporations in controllership
and strategic planning roles.
INTERESTS sports, Reading, cribbage

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input checked="" type="checkbox"/> Community School Use Committee | <input checked="" type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input checked="" type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 2-7-22 Recorded 2-7-22 Application Expires 2-7-25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Justin Dulak

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (781) 573 7262 & EVENINGS () Same

EMAIL ADDRESS justin.dulak@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION

BA, History, Suffolk University

EXPERIENCE

Certification as a Community Access Mentor

INTERESTS

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
| <input checked="" type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input checked="" type="checkbox"/> Community School Use Committee | <input checked="" type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input checked="" type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input checked="" type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 9-11-19 Recorded 9-11-19 Application Expires 9-11-22
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN
 Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
 508-634-2303 Fax 508-634-2324

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YOUR NAME Samantha Cesario

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (315-256-6392) & EVENINGS() _____

EMAIL ADDRESS Samanthacesario@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION UAlbany: Master of Science: Library Information and Services

EXPERIENCE _____

INTERESTS Community organizing, youth work, arts & culture,

Please indicate below if you are a Town Employee or serve on any Town Board.

Supervisor of Youth Services at the Milford Town Library

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input checked="" type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input checked="" type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-21-21 Recorded 4-21-21 Application Expires 4-21-2024
 Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

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YOUR NAME Jeff Birdwell

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () 910-703-2336 & EVENINGS () 910-703-2336

EMAIL ADDRESS jeffbirdwell@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Currently finishing BS in Economics from Penn State.

EXPERIENCE 6 years in Passenger Rail Transit.
12 years in Rail Industry.
Currently employed by Amtrak in Quality Management.
Worked with MBTA, RTDC, and other transportation.

INTERESTS Public Transportation, Finance, Zoning, Planning, School

Please indicate below if you are a Town Employee or serve on any Town Board.

N/A

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input checked="" type="checkbox"/> Industrial Development Commission |
| <input checked="" type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input checked="" type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input checked="" type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input checked="" type="checkbox"/> Other (Describe Below) |

Public Transportation Advisory Committee

FOR OFFICE USE ONLY: Date Rec'd 10-13-20 Recorded 10-13-20 Application Expires 10-13-23
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

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YOUR NAME Robyn Bratica

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (774-573-9216) & EVENINGS(774-573-9216)

EMAIL ADDRESS robyn.bratica.phd@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION PhD in School Psychology

EXPERIENCE Assistant Professor of School Psychology, Interim Director of MA/CAGS Program in School Psychology, School Psychologist, Licensed Educational Psychologist, Licensed School Adjustment Counselor and work experience as Special Education Team Chairperson

INTERESTS Mother to a child at Brookside Elementary School with multiple disabilities.

Please indicate below if you are a Town Employee or serve on any Town Board.

Town Meeting Member

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input checked="" type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
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| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 8-30-21 Recorded 8-30-21 Application Expires 8-30-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

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508-634-2303 Fax 508-634-2324

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YOUR NAME James Hughes

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS 508 648-2738 & EVENINGS () _____

EMAIL ADDRESS J.hughes@4a100.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION

Bachelors of Science / Economics

EXPERIENCE

Retail Management (June 1998 - March 2022)
Consumer Sales Manager (March 2022 - Pres.)
Inventory Control Assoc. (July 2021 - Pres.)

INTERESTS

Sports, Music, Gardening, Animals

Please indicate below if you are a Town Employee or serve on any Town Board.

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- | | |
|--|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
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| <input checked="" type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Youth Commission |
| <input checked="" type="checkbox"/> Finance Committee | <input checked="" type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 6-2-22 Recorded 6-2-22 Application Expires 6-2-25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757

508-634-2303 Fax 508-634-2324

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YOUR NAME Abolghasem Moazeni

YOUR ADDRESS

TELEPHONE NO. FOR WEEKDAYS (510-9150014) & EVENINGS (5109150014)

EMAIL ADDRESS Moazeni42@aol.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS Mechanical Engineering and Systems Engineer

EXPERIENCE 20 years of restaurant management and 22 years of IT Systems Engineering

INTERESTS Music, Theater, Parks, Musume and learning about different cultures to promote undrestanding.

Please indicate below if you are a Town Employee or serve on any Town Board.

No

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
| <input checked="" type="checkbox"/> Commission on Disability | <input checked="" type="checkbox"/> Industrial Development Commission |
| <input checked="" type="checkbox"/> Community School Use Committee | <input checked="" type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input checked="" type="checkbox"/> Conservation Commission | <input checked="" type="checkbox"/> Milford Cultural Council |
| <input checked="" type="checkbox"/> Council on Aging | (formerly Arts Lottery Council) |
| <input checked="" type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-23-21 Recorded 4-23-21 Application Expires 4-23-24
Referred to Board Chair for Review/Comment/Recommendation



MILFORD BOARD OF SELECTMEN
 Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
 508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

If you would like to serve on any of the local government boards whose members are appointed by the Board of Selectmen, please complete this application, providing all information requested, and return to the Board of Selectmen at the above address. Your application will remain on file for **three years**. If you have not had an opportunity for appointment within that time period, please reapply, so that your application can remain current. Thank you for your interest. (All information required on this form should be typed or printed clearly.)

YOUR NAME Rj Sheedy

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (508) 244-2136 & EVENINGS() _____

EMAIL ADDRESS rjsheedy867@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION MHS Graduate, class of 2014. Studied communication at Worcester State University.

EXPERIENCE Proud member, organizer and rep of UFCW 1445 & Clerk at Stop And Shop. Also ran for office twice, am a town meeting member, and have been a longtime member of Milford TV since it's inception.

INTERESTS Community events, media relations, organizing and education.

Please indicate below if you are a Town Employee or serve on any Town Board.

I am a town meeting member in precinct 5.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
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| <input type="checkbox"/> Finance Committee | <input checked="" type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-12-21 Recorded 4-12-21 Application Expires 4-12-24
 Referred to Board Chair for Review/Comment/Recommendation _____

COUNCIL ON AGING

OF VACANCIES: **ONE (1)**

COUNCIL RECOMMENDATION: ***JOAN MOTUZAS***

Richard Villani

From: Dino DeBartolomeis
Sent: Tuesday, June 7, 2022 1:23 PM
To: Richard Villani
Cc: Susan Clark
Subject: Appointment to the Council on Aging

Dear Attorney Villani and the Milford Select Board,

I hope this e-mail finds you all well. I am sad to announce that Mrs. Josephine Magliocca recently passed away. Josephine was an outstanding and valuable member for the Council for a long period of time. She was involved in all aspects of the Senior Center. She truly loved helping the Milford seniors with their individual needs. She was always very pleasant and offered her strong and significant recommendations as a dedicated member of the Council on Aging. We are truly grateful for her loyal service and wish her family the very best.

I am recommending that you consider the appointment of Mrs. Joan Motuzas to fill the open seat on the Council. Joan has devoted many hours over many years to the Milford Council on Aging. Joan is the most valuable and loyal advocate for our Milford Seniors. She and her husband, ED, have given numerous hours of service and dedication to our most precious Senior Center. You will always find Joan distributing food, working in the Gift Shop, assisting an elderly person with a need. Joan participates and volunteers daily in all the activities provided by the Senior Center.

Last year, Joan and her husband Ed received much recognition and were provided citations by the Select Board at a meeting for their unselfish and honorable service.

Thank you for your consideration!

Dino B. DeBartolomeis, Chairman of the Milford Council on Aging.



MILFORD BOARD OF SELECTMEN
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APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME JOAN MOTUZAS

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS 508-473-4239 & EVENINGS 508-473-4239

EMAIL ADDRESS headlx@comcast.net

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION High School

EXPERIENCE _____

INTERESTS C.O.A.

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
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| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 7-31-20 Recorded _____ Application Expires 7-31-23
 Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME James Hughes

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS 508 648-2738 & EVENINGS() _____

EMAIL ADDRESS J.hughes@yahoo.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION

Bachelors of Science/Economics

EXPERIENCE

Retail Management (June 1998 - March 2022)
Consumer Sales Manager (March 2022 - Pres.)
Inventory Control Assoc. (July 2021 - Pres.)

INTERESTS

Sports, Music, Gardening, Animals

Please indicate below if you are a Town Employee or serve on any Town Board.

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|--|--|
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| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 6-2-22 Recorded 6-2-22 Application Expires 6-2-25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Abolghasem Moazeni

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () 510-9150014 & EVENINGS() 5109150014

EMAIL ADDRESS Moazeni42@aol.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS Mechanical Engineering and Systems Engineer

EXPERIENCE 20 years of restaurant managment and 22 years of IT Systems Engineering

INTERESTS Music, Theater, Parks, Musume and learning about different cultures to promote undrestanding.

Please indicate below if you are a Town Employee or serve on any Town Board.

No

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| | <input type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-23-21 Recorded 4-23-21 Application Expires 4-23-24
Referred to Board Chair for Review/Comment/Recommendation _____



FOR L12

MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Jeffrey P. Rotatori
YOUR ADDRESS Milford MA 01757
TELEPHONE NO. FOR WEEKDAYS (774-573-1352 & EVENINGS (Same)
EMAIL ADDRESS JPRGuitar@Verizon.net

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION 1978 Graduate Framingham South High
EXPERIENCE worked at the former Cushing Hospital, at the time a 200 Bed Nursing Home.
INTERESTS Giving back some of my time to the town I've called home the last 35 years.

Please indicate below if you are a Town Employee or serve on any Town Board.

I am a substitute crossing guard currently

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
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| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 1/14/22 Recorded 1/14/22 Application Expires 1/14/25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Daniel "Scott" Wilson

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () 5 & EVENINGS () _____

EMAIL ADDRESS _____

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS in Plant & Soil Science university of Massachusetts Amherst 1986. MBA Bentley College 199

EXPERIENCE 6 years as a head grower, and 2 years owning a retail/wholesale garden center. 27 years in the print industry, designing mailrooms, print centers, and office printing in the S&P 500 arena. Develop process improvements around print in large coporations such as. Raytheon, Deutche Banc, Goldman Sachs, etc. I have had numerous teams that I managed over my career. Developed and successfully ran an online store, with website, email lists, and social media.

INTERESTS Fishing and building fishing rods. Reading, especially history. Lapidary, Gardening, Visiting historical sites in the U.S. home improvement.

Please indicate below if you are a Town Employee or serve on any Town Board.

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- | | |
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| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input checked="" type="checkbox"/> Other (Describe Below) |

Animal Resecue, etc.

FOR OFFICE USE ONLY: Date Rec'd 7-1-22 Recorded 7-1-22 Application Expires 7-1-25
Referred to Board Chair for Review/Comment/Recommendation _____

FAIR HOUSING COMMITTEE

OF VACANCIES:

THREE (3)

TALENT BANK APPLICATIONS ATTACHED



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

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YOUR NAME Steven Borges

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (508.317.1244) & EVENINGS() _____

EMAIL ADDRESS stevenborges@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Suffolk University

EXPERIENCE 4+ years Construction Industry - 5+ years Real Estate Industry - served 2 years IDC

INTERESTS Serving our community

Please indicate below if you are a Town Employee or serve on any Town Board.

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- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
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| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 11-30-21 Recorded 11-30-21 Application Expires 11-30-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME James Hughes

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS 508 148-2738 & EVENINGS() _____

EMAIL ADDRESS J.hughes@Yahoo.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION

Bachelors of Science/Economics

EXPERIENCE

Retail Management (June 1998 - March 2022)
Consumer Sales Manager (March 2022 - Pres.)
Inventory Control Assoc. (July 2021 - Pres.)

INTERESTS

Sports, Music, Gardening, Animals

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| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 6-2-22 Recorded 6-2-22 Application Expires 6-2-25
Referred to Board Chair for Review/Comment/Recommendation _____



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 508-634-2303 Fax 508-634-2324

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YOUR NAME Abolghasem Moazeni

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (510-9150014) & EVENINGS(5109150014)

EMAIL ADDRESS Moazeni42@aol.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS Mechanical Engineering and Systems Engineer

EXPERIENCE 20 years of restaurant managment and 22 years of IT Systems Engineering

INTERESTS Music, Theater, Parks, Musume and learning about different cultures to promote undrestanding.

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No

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| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-23-21 Recorded 4-23-21 Application Expires 4-23-24
 Referred to Board Chair for Review/Comment/Recommendation _____

CULTURAL COUNCIL

OF VACANCIES:

TWO (2)

COUNCIL RECOMMENDATION:

MICHELLE PICI

DENISE TRACY

Lena Pires

From: Geri Eddins <geri@eddins.net>
Sent: Friday, May 27, 2022 9:28 AM
To: Richard Villani; Thomas O'Loughlin; Michael Walsh; Paul Mazzuchelli
Cc: Lena Pires; Sandee Buckley
Subject: REQUEST: Appointments and Reappointment to the Milford Cultural Council
Attachments: Letter from Nicole Romiglio 9 May 2022.pdf; TALENT BANK Michele Pici.pdf; TALENT BANK Denise Tracy 2022.pdf

CAUTION: This email originated from outside the **Town of Milford**. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Good morning:

Terms are ending for three of the current Cultural Council members this June. Here are the details:

- Patricia Salomon: This June ends her second term on the council. Per Mass Cultural Council guidelines, she cannot be reappointed until she has taken a year off from council membership.
- Nicole Romiglio: This June ends her first term. However, she has requested that she not be reappointed at this time. Please see her attached letter.
- Jenny Lyons: This June ends her first term, and she has requested that she be reappointed to a second term.

With Patty's six-year tenure ending and with Nicole asking not to be reappointed, the council will have two open seats. At our May 17th meeting, the members of the Cultural Council reviewed all the talent bank applications received by your office and voted unanimously to recommend the following two applicants for appointment:

- Michelle Pici
- Denise Tracy

We believe these two individuals will make excellent members of the Cultural Council and will help to expand our experience and skill base. These appointments will bring membership to our maximum of 13 as stipulated in our rules and regulations. I have attached the associated talent bank applications.

We respectfully request that you appoint both Michelle Pici and Denise Tracy at the Select Board meeting on June 13th and that you also reappoint Jenny Lyons to serve a second term on the council.

Lastly, we hope you will all join us in thanking both Patricia Salomon and Nicole Romiglio for their dedicated years of service to the council and the community. They are both passionate about elevating arts and culture in Milford and subsequently have both been enthusiastic

members whom we hope to work with again in the future!

We are happy to answer any questions you may have about these requests. Thank you for your help with this matter.

All the best,

Geri Eddins, Chair

Sandee Buckley, Vice Chair

Milford Cultural Council

Email: CulturalCouncil@TownofMilford.com

Web: milfordma.gov/milford-cultural-council



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Michele Pici, DO, MBA

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (508) 450 4072 & EVENINGS () SAME

EMAIL ADDRESS mpici1963@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Medical Degree - New York College Osteopathic Medicine - 1992

MBA - University of Tennessee - 2011

EXPERIENCE was chief Medical officer, & Medical Director @ Edward M. Kennedy Community Health Center for 17 yrs. Worked in diverse cultural groups

INTERESTS Gardening, hiking, eating good food, Giving to community

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input checked="" type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 3-23-22 Recorded 3-23-22 Application Expires 3-23-25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

If you would like to serve on any of the local government boards whose members are appointed by the Board of Selectmen, please complete this application, providing all information requested, and return to the Board of Selectmen at the above address. Your application will remain on file for **three years**. If you have not had an opportunity for appointment within that time period, please reapply, so that your application can remain current. Thank you for your interest. (All information required on this form should be typed or printed clearly.)

YOUR NAME Denise Tracy

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (617) 283-7817 & EVENINGS () _____

EMAIL ADDRESS deniset5k@live.com denise@hopkintoncenter.org

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Chamberlain School of Design
Boston, MA

EXPERIENCE Former live music venue owner
Current event planner + music promoter Hopkinton
Center for the Arts
Hopkinton, MA

INTERESTS music, arts, gardening,
entertaining

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

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|---|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input checked="" type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 3/11/22 Recorded 3/11/22 Application Expires 3/11/25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME JAMES J. BUCKLEY JR

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (617) 875-8005 & EVENINGS (617) 875 8005

EMAIL ADDRESS jim5mail23@yahoo.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION D. Ed, HARVARD University
EXPERIENCE 6 years on Cultural Council in the past
- Over 200 published Milford History Articles
INTERESTS Writing, MAKING ORAL presentations About
Milford history

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

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| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
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| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 3-28-22 Recorded 3-28-22 Application Expires 3-28-25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Stephen J. Cassinelli

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (508 422 9583) & EVENINGS(508 422 9583)

EMAIL ADDRESS festoonz@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Graduated Milford High School 1986 Berklee College of Music awards Composition & performance

EXPERIENCE Operate alcassmouthpieces.com (in contact with iconic brass musicians throughout the world daily) Recording artist composer & performer aka Casarachi casarachi.com Music director at Milford Youth Center prior to rehab Have been performing in Milford & on Radio since age 5. 6th generation student of Ludwig Von Beethoven. Winner of the Dave Maynard talent show 1980 @Milford High (12 years old). Flag bearer bicentennial parade 1976 @8. & other

INTERESTS Music, art, history, and antiques. Creative problem solver.

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

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|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
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| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-23-24 Recorded 4-23-24 Application Expires 4-23-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN
 Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
 508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Samantha Cesario

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (315) 256-6392 & EVENINGS() _____

EMAIL ADDRESS Samanthacesario@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION UAlbany: Master of Science: Library Information and Services

EXPERIENCE _____

INTERESTS

Community organizing, youth work, arts & culture,

Please indicate below if you are a Town Employee or serve on any Town Board.

Supervisor of Youth Services at the Milford Town Library

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
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| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
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| <input type="checkbox"/> Conservation Commission | <input checked="" type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-21-21 Recorded 4-21-21 Application Expires 4-21-2024
 Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Johnna L O'Loughlin

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (774-287-1305) & EVENINGS() _____

EMAIL ADDRESS johnna.grenard@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION West Virginia University Morgantown, WV

EXPERIENCE Milford Federal Bank, Milford MA 2015 - Present and 2008 - 2012
Milford Sr Center Milford MA 2012 - 2015 (program coordinator)

INTERESTS yoga, dance, physical fitness, reading, theatre (plays & musical productions) and decorating

Please indicate below if you are a Town Employee or serve on any Town Board.

N/A

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
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| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
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| <input type="checkbox"/> Conservation Commission | <input checked="" type="checkbox"/> Milford Cultural Council |
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| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 3-23-22 Recorded 3-23-22 Application Expires 3-23-25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Rj Sheedy

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (508) 244-2136 & EVENINGS() _____

EMAIL ADDRESS rjsheedy867@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION MHS Graduate, class of 2014. Studied communication at Worcester State University.

EXPERIENCE Proud member, organizer and rep of UFCW 1445 & Clerk at Stop And Shop. Also ran for office twice, am a town meeting member, and have been a longtime member of Milford TV since it's inception.

INTERESTS Community events, media relations, organizing and education.

Please indicate below if you are a Town Employee or serve on any Town Board.
I am a town meeting member in precinct 5.

Please place "x" beside the Board(s) on which you are interested in serving:

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| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
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| <input type="checkbox"/> Conservation Commission | <input checked="" type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
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| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input checked="" type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-12-21 Recorded 4-12-21 Application Expires 4-12-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN
 Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
 508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Candace Skorupa

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS 508 473-8322 & EVENINGS() same

EMAIL ADDRESS C.Skorupa19@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Bachelor of music University of Rhode Island
30yrs Classroom music teacher and Chorus in
medway and Hopedale; Piano Teacher to present

EXPERIENCE Community Concert Association (Franklin) Program
Planner 1980's
Milford Theater Guild 1980-1990's semi leads

INTERESTS Vice President Greenleaf Garden Club of Milford 2007-2009
2021-2023 Program Chair
Boston Symphony Orchestra, Clafin Hill Symphony Orchoe
Piano Teaching, Gardening

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

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|---|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
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| <input type="checkbox"/> Conservation Commission | <input checked="" type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-26-21 Recorded 4-26-21 Application Expires 4-26-24
 Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Frederick [Fritz] Smith

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () 508-479-8124 & EVENINGS() 508-479-8124

EMAIL ADDRESS CatScratchFurniture@hotmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Degree in Cabinet and Furniture Making [Last education]

EXPERIENCE Retired Quality Engineer, Furniture and Cabinet Maker, Kitchen Designer. Past President Eastern Massachusetts Guild of Woodworkers, Past Vice President Milford Community Choir. Friend of the Library.

INTERESTS Drawing, Sculpture, Furniture Making, Supporting the Arts,

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

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|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
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| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
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| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-26-21 Recorded 4-26-21 Application Expires 4-26-24
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MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Asheley St.Clair III

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (212-960-8641) & EVENINGS(212-960-8641)

EMAIL ADDRESS covhope@hotmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION MA Theological Studies

EXPERIENCE Currently employed by The Guild for Human Services as a TA, have worked with Pinestreet Inn as a Manager in a Residential Program in Brookline, was employed as an administrative Assistant to Pastor Samuel B. Hogan, Sr. Jurisdictional Bishop of MA 1st and a tenured Professor at Harvard University for over 10 years. In this varying roles it was of the utmost importance to have an understanding of the cultural differences of the community you served.

INTERESTS Counseling, volunteering for senior citizens and the homeless populations of my community. Teaching and networking with young and sharing the importance of giving back in some way.

Please indicate below if you are a Town Employee or serve on any Town Board.

N/A

Please place "x" beside the Board(s) on which you are interested in serving:

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|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
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| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-23-21 Recorded 4-23-21 Application Expires 4-23-2024
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MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Khizra Syeda

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (508) 377-2669 & EVENINGS() _____

EMAIL ADDRESS inconspicuousseal@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION

Bachelor of Arts in Environmental Science at UMass Boston 2018

EXPERIENCE

- Brush 2 Table
- BSC environmental tech
- MACC education intern
- Art Commissions
- Moderator for small fanart club
- retail jobs:
 - Gap: Sales
 - Market Basket: Cashier
 - Target: Sales
- small art business

INTERESTS

- Art
- Culture
- Advocacy for LGBT+, environment, racial justice, + poverty.
- nature
- planning art projects + challenges

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
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| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-11-22 Recorded 4-11-22 Application Expires 4-11-25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

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YOUR NAME Verne L. Thayer

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () Cell 508-282-1332 & EVENINGS() 508-282-1332

EMAIL ADDRESS vern1620@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Associate Applied Science, Management

EXPERIENCE Artist 50+ yrs

INTERESTS Oil Painting, Leather work, Genealogy, History



Please indicate below if you are a Town Employee or serve on any Town Board.

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| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
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| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-26-21 Recorded 4-26-21 Application Expires 4-26-24
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MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

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YOUR NAME Stephen Vond

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS 8169510 & EVENINGS() _____

EMAIL ADDRESS stevovond@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS at Emerson College, Boston, MA

EXPERIENCE acting + communications
Disc jockey - radio WCIN Worcester

INTERESTS Music + arts (performing + visual)

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input checked="" type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-26-21 Recorded 4-26-21 Application Expires 4-26-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

If you would like to serve on any of the local government boards whose members are appointed by the Board of Selectmen, please complete this application, providing all information requested, and return to the Board of Selectmen at the above address. Your application will remain on file for **three years**. If you have not had an opportunity for appointment within that time period, please reapply, so that your application can remain current. Thank you for your interest. (All information required on this form should be typed or printed clearly.)

YOUR NAME Daniel "Scott" Wilson

YOUR ADDRESS: _____

TELEPHONE NO. FOR WEEKDAYS (_____) & EVENINGS(_____)

EMAIL ADDRESS _____

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS in Plant & Soil Science university of Massachusetts Amherst 1986. MBA Bentley College 199

EXPERIENCE 6 years as a head grower, and 2 years owning a retail/wholesale garden center. 27 years in the print industry, designing mailrooms, print centers, and office printing in the S&P 500 arena. Develop process improvements around print in large coporations such as. Raytheon, Deutche Banc, Goldman Sachs, etc. I have had numerous teams that I managed over my career. Developed and successfully ran an online store, with website, email lists, and social media.

INTERESTS Fishing and building fishing rods. Reading, especially history. Lapidary, Gardening, Visiting historical sites in the U.S. home improvement.

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
| <input checked="" type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input checked="" type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input checked="" type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input checked="" type="checkbox"/> Council on Aging | (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input checked="" type="checkbox"/> Other (Describe Below) |

Animal Resecue, etc.

FOR OFFICE USE ONLY: Date Rec'd 7-1-22 Recorded 7-1-22 Application Expires 7-1-25
Referred to Board Chair for Review/Comment/Recommendation _____

ZONING BOARD OF APPEALS

OF VACANCIES: *ONE (1)*

BOARD RECOMMENDATION: *DAVID CLARO*

Lena Pires

From: Dave Consigli <dave.consigli@c21regroup.com>
Sent: Thursday, June 9, 2022 12:20 PM
To: Lena Pires
Cc: Dave Consigli
Subject: Re: Appointments/ Reappointments

CAUTION: This email originated from outside the **Town of Milford**. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Lena, the legal department has Tim Walsh resignation letter .

Upon review of the applications, I would recommend David Claro as an alternate member . David has vast experience in in the permitting process of zoning , planning , understanding the development process and familiar with zoning regulations in most local communities around and including Milford

Thank you
David

David Consigli
Chairman
Milford Zoning Board



MILFORD BOARD OF SELECTMEN
 Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
 508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

If you would like to serve on any of the local government boards whose members are appointed by the Board of Selectmen, please complete this application, providing all information requested, and return to the Board of Selectmen at the above address. Your application will remain on file for **three years**. If you have not had an opportunity for appointment within that time period, please reapply, so that your application can remain current. Thank you for your interest. (All information required on this form should be typed or printed clearly.)

YOUR NAME David Claro

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (774-248-0192) & EVENINGS (same)

EMAIL ADDRESS _____

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Associates in Engineering at Mass bay community college

EXPERIENCE Home building and land development as of 2005- Claro Construction Corporation
 25 years working in the trades
 Construction supervisors License
 A & B Hydraulics License

INTERESTS Serving the community

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input checked="" type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 12-23-20 Recorded 12-23-20 Application Expires 12-23-2023
 Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

If you would like to serve on any of the local government boards whose members are appointed by the Board of Selectmen, please complete this application, providing all information requested, and return to the Board of Selectmen at the above address. Your application will remain on file for **three years**. If you have not had an opportunity for appointment within that time period, please reapply, so that your application can remain current. Thank you for your interest. (All information required on this form should be typed or printed clearly.)

YOUR NAME Jeff Birdwell

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (910-703-2336) & EVENINGS(910-703-2336)

EMAIL ADDRESS jeffbirdwell@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Currently finishing BS in Economics from Penn State.

EXPERIENCE 6 years in Passenger Rail Transit.
12 years in Rail Industry.
Currently employed by Amtrak in Quality Management.
Worked with MBTA, RTDC, and other transportation.

INTERESTS Public Transportation, Finance, Zoning, Planning, School

Please indicate below if you are a Town Employee or serve on any Town Board.

N/A

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input checked="" type="checkbox"/> Industrial Development Commission |
| <input checked="" type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input checked="" type="checkbox"/> Finance Committee | <input type="checkbox"/> Milford Youth Commission |
| | <input checked="" type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input checked="" type="checkbox"/> Other (Describe Below) |

Public Transportation Advisory Committee

FOR OFFICE USE ONLY: Date Rec'd 10-13-20 Recorded 10-13-20 Application Expires 10-13-23
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

If you would like to serve on any of the local government boards whose members are appointed by the Board of Selectmen, please complete this application, providing all information requested, and return to the Board of Selectmen at the above address. Your application will remain on file for **three years**. If you have not had an opportunity for appointment within that time period, please reapply, so that your application can remain current. Thank you for your interest. (All information required on this form should be typed or printed clearly.)

YOUR NAME Steven Borges

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () 508.317.1244 & EVENINGS() _____

EMAIL ADDRESS stevenlborges@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Suffolk University

EXPERIENCE 4+ years Construction Industry - 5+ years Real Estate Industry - served 2 years IDC

INTERESTS Serving our community

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input checked="" type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input checked="" type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 11-30-21 Recorded 11-30-21 Application Expires 11-30-24
Referred to Board Chair for Review/Comment/Recommendation _____

Application for Appointment to Board or Committee

I'd like to add a little more about myself in regards to my application. Although there are 3 committees I'd be happy to serve on, Zoning Board of Appeals would be my first choice.

I was born and raised in Milford. I went off to college in 2000 and eventually moved back to Milford in 2016 married with 3 children. I have been a full time real estate agent for 5+ years now. Prior to that, I spent 4+ years working alongside a local contractor while I got licensed and started in Real Estate.

I love this town and feel compelled to somehow give back to this community. I've been a town meeting member since 2017 and would like to join a board that would best utilize my experience and skill set. I believe the ZBA would be the best fit.

Thank you for your consideration.



Steven Borges



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME James Hughes

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS 508 148-2138 & EVENINGS() _____

EMAIL ADDRESS J.hughes@yahoo.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION

Bachelors of Science / Economics

EXPERIENCE

Retail Management (June 1998 - March 2022)

Consumer Sales Manager (March 2022 - Pres.)

Inventory Control Assoc. (July 2021 - Pres.)

INTERESTS

Sports, Music, Gardening, Animals

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input checked="" type="checkbox"/> Industrial Development Commission |
| <input checked="" type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input checked="" type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input checked="" type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Youth Commission |
| <input checked="" type="checkbox"/> Finance Committee | <input checked="" type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 6-2-22 Recorded 6-2-22 Application Expires 6-2-25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN
 Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
 508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

If you would like to serve on any of the local government boards whose members are appointed by the Board of Selectmen, please complete this application, providing all information requested, and return to the Board of Selectmen at the above address. Your application will remain on file for **three years**. If you have not had an opportunity for appointment within that time period, please reapply, so that your application can remain current. Thank you for your interest. (All information required on this form should be typed or printed clearly.)

YOUR NAME Abolghasem Moazeni

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () 510-9150014 & EVENINGS() 5109150014

EMAIL ADDRESS Moazeni42@aol.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS Mechanical Engineering and Systems Engineer

EXPERIENCE 20 years of restaurant managment and 22 years of IT Systems Engineering

INTERESTS Music, Theater, Parks, Musume and learning about different cultures to promote undrestanding.

Please indicate below if you are a Town Employee or serve on any Town Board.

No

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
| <input checked="" type="checkbox"/> Commission on Disability | <input checked="" type="checkbox"/> Industrial Development Commission |
| <input checked="" type="checkbox"/> Community School Use Committee | <input checked="" type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input checked="" type="checkbox"/> Conservation Commission | <input checked="" type="checkbox"/> Milford Cultural Council |
| <input checked="" type="checkbox"/> Council on Aging | <input checked="" type="checkbox"/> Milford Geriatric Authority |
| <input checked="" type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-23-21 Recorded 4-23-21 Application Expires 4-23-24
 Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

If you would like to serve on any of the local government boards whose members are appointed by the Board of Selectmen, please complete this application, providing all information requested, and return to the Board of Selectmen at the above address. Your application will remain on file for **three years**. If you have not had an opportunity for appointment within that time period, please reapply, so that your application can remain current. Thank you for your interest. (All information required on this form should be typed or printed clearly.)

YOUR NAME Robert J. Speroni

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () 774-573-1135 & EVENINGS () Same

EMAIL ADDRESS rjsperoni@verizon.net

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Ma. Dept. Education Vocational Instructor. Fitchburg State University

EXPERIENCE Certified Building Commissioner Ma. Dept. Professional Licensure, Zoning Enforcement Officer. 30 Years

INTERESTS

Please indicate below if you are a Town Employee or serve on any Town Board.

N/A

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input checked="" type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-8-21 Recorded 4-8-21 Application Expires 4-8-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA
01757 508-634-2303 Fax 508-634-2324

APPLICATION ON FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Michael P. Visconti, Jr. Submitted on 6 / 15 / 2021 & every previous year since 2009

YOUR ADDRESS: _____

TELEPHONE NOS. FOR WEEKDAYS: 508-473-0014 & **EVENINGS:** 508-473-0014

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EXPERIENCE:

INTERESTS: Volunteering my services to the town of Milford

Please indicate below if you are a Town Employee or serve on any Town Board.

Town Meeting member for 40 + years

Please check below the Board(s) on which you are interested in serving:

- Cable TV Complaint Committee
- Capital Improvement Committee
- Cedar Swamp Pond Development Committee
- Commission on Disability
- Community School Use Committee
- Conservation Commission
- Council on Aging
- Fair Housing Committee
- Finance Committee

- Industrial Development Commission
- Memorial Hall Cultural Center Committee
- Milford Cultural Council (Formerly Arts Lottery Council)
- Milford Geriatric Authority
- Milford Youth Commission
- Personnel Board
- Zoning Board of Appeals
- Other (Describe Below)

Historical Commission

FOR OFFICE USE ONLY: Date Rec'd 6-15-21 Recorded 6-15-21 Application Expires: 6-15-2024

review/Comment/Recommendation ion _____ Referred to Board Chair for
Revised 7/8/05

YOUTH COMMISSION

COMMISSION RECOMMENDATION: *CHRISTINE CREAN*

Lena Pires

From: Brendan Rickert
Sent: Thursday, June 9, 2022 9:31 AM
To: Lena Pires; Sousa, Steve; Jennifer Ward
Subject: Re: Presumed appointments/ reappointments

Hi Lena,

At the last board meeting, the majority of the group recommends Christine Crean to be appointed to open seat.

The Select Board in a public meeting has told us they will NOT go above 11 seats. Last year we submitted an article for Town Meeting to reduce the number to 11 (from 21) however the Select Board without notice or discussion removed our article from the warrant despite the committee's right to sponsor articles.

We would ask that only ONE seat is filled to have an odd number again. We also look forward to having the Select Board sponsor an article for the fall Town Meeting to reduce the number to 11.

Please let me know if you have any questions. Have a great day!

Brendan



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Christine Crean

YOUR ADDRESS: _____

TELEPHONE NO. FOR WEEKDAYS (617-852-3824) & EVENINGS (617-852-3824)

EMAIL ADDRESS cmcrean56@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Providence College, BA Social Work 1978; Salem State College, MSW 2009; Post Graduate Cert

EXPERIENCE Elderly Home Care, Caseworker 1978-1980; Dept. of Children & Families, Social Worker, Adoption Worker, Supervisor 1980-2015; Private Mental Health Practice 2016-present.

INTERESTS Running; sailing; skiing; cooking & baking

Please indicate below if you are a Town Employee or serve on any Town Board.

I am a Town Meeting Member and on the Town Meeting Study Improvement Comm

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-4-22 Recorded 4-4-22 Application Expires 4-4-25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Robyn Bratica

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () 774-573-9216 & EVENINGS() 774-573-9216

EMAIL ADDRESS robyn.bratica.phd@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION PhD in School Psychology

EXPERIENCE Assistant Professor of School Psychology, Interim Director of MA/CAGS Program in School Psychology, School Psychologist, Licensed Educational Psychologist, Licensed School Adjustment Counselor and work experience as Special Education Team Chairperson

INTERESTS Mother to a child at Brookside Elementary School with multiple disabilities.

Please indicate below if you are a Town Employee or serve on any Town Board.

Town Meeting Member

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input checked="" type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input checked="" type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 8-30-21 Recorded 8-30-21 Application Expires 8-30-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD BOARD OF SELECTMEN
 Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
 508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Samantha Cesario

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (315-256-6392) & EVENINGS() _____

EMAIL ADDRESS Samanthacesario@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION UAlbany: Master of Science: Library Information and Services

EXPERIENCE _____

INTERESTS Community organizing, youth work, arts & culture,

Please indicate below if you are a Town Employee or serve on any Town Board.

Supervisor of Youth Services at the Milford Town Library

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|---|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input checked="" type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input checked="" type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 4-21-21 Recorded 4-21-21 Application Expires 4-21-2024
 Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

If you would like to serve on any of the local government boards whose members are appointed by the Board of Selectmen, please complete this application, providing all information requested, and return to the Board of Selectmen at the above address. Your application will remain on file for **three years**. If you have not had an opportunity for appointment within that time period, please reapply, so that your application can remain current. Thank you for your interest. (All information required on this form should be typed or printed clearly.)

YOUR NAME Laura Crisafulli

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () 508-400-7228 & EVENINGS() _____

EMAIL ADDRESS littleduke52@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Graduate of MHS Class of 1986/ Graduate of Mass Bay Community College Class of 1988

EXPERIENCE Licensed Loan Originator 25 + Years

INTERESTS Cooking & Entertaining

Please indicate below if you are a Town Employee or serve on any Town Board.

~~N/A~~ Town meeting member

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 8-6-21 Recorded 8-6-21 Application Expires 8-6-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

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YOUR NAME Kathleen Donovan

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (508 422-6608) & EVENINGS() _____

EMAIL ADDRESS Kdonovan@fagschool.org

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION RNBSN

EXPERIENCE private school nurse

INTERESTS member of celebrate Milford. Board member.

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 8-6-21 Recorded 8-22-21 Application Expires 8-6-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Rosanna Blanchard-Erickson

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (774-230-0082) & EVENINGS(774-230-0082)

EMAIL ADDRESS rosannab0831@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Milford High School Class of 1986

EXPERIENCE Having grown up personally, and having raised my children in Milford, I am highly invested in our community. As a professional Realtor, I am continually working with clients who are moving to our Town, and I advocate greatly for all Milford has to offer. My youngest child just graduated Milford High, and the MYC has been a large part of his development.

INTERESTS Cooking, interior design, entertaining, and spending quality time with family and friends,

Please indicate below if you are a Town Employee or serve on any Town Board.

Town Meeting Member _____

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 8-6-21 Recorded 8-6-21 Application Expires 8-6-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME William Farrell

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (508) 282-0348 & EVENINGS () SAME

EMAIL ADDRESS billpenny@comcast.net

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS - Accounting (Bentley University)
MBA - Lake Forest Graduate School of Mgmt.

EXPERIENCE 40 years with large corporations in controllership and strategic planning roles.

INTERESTS Sports, Reading, Cribbage

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|--|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input checked="" type="checkbox"/> Community School Use Committee | <input checked="" type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input checked="" type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 2-7-22 Recorded 2-7-22 Application Expires 2-7-25
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Jane Newman

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () 774-244-6173 & EVENINGS() 774-244-6173

EMAIL ADDRESS jcrew6201@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION M.Ed Boston University/ CAGS- Cambridge College

EXPERIENCE Full-time teacher in an urban high school. Daily planning of academic tasks, daily interaction with adverse student population, supervision of staff and students, mother of 2 Milford students.

INTERESTS Volunteering, Milford Youth Sports, walking my puppy, baking.

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 8-6-21 Recorded 8-6-21 Application Expires 8-6-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Lee Scudo

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (508-498-7626) & EVENINGS(508-498-7626)

EMAIL ADDRESS leescudo15@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Belmont High School, 1990.

EXPERIENCE Medical Assistant, EMT, Case Worker (recovery center), Alumni Coordinator (recovery center), Post-partum doula, Milford Youth Soccer Coach.

INTERESTS Cycling, reading, coaching youth sports, arts and crafts.

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 8-6-21 Recorded 8-6-21 Application Expires 8-6-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Susanne Tourtellot

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (508-498-6999) & EVENINGS(same)

EMAIL ADDRESS Susannetourt@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION High School Graduate

EXPERIENCE have been involved with youth sports , cheer mom, life long resident of the town. I have always wanted to take part in the towns doings but never really had opportunity.

INTERESTS walking, hiking, biking, watching my kids at all their sports.

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 8-6-21 Recorded 8-6-21 Application Expires 8-6-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

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508-634-2303 Fax 508-634-2324

APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

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YOUR NAME Courtney Walsh

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS (201) 467-5075 & EVENINGS (201) 467-5075

EMAIL ADDRESS cwalsh2716@gmail.com

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION Bachelor's Degree - New England College
Henniker, NH

EXPERIENCE

I have worked w/ kids from age 12+
Have 2 kids of my own - 6+4

INTERESTS

keeping kids safe
sports

Please indicate below if you are a Town Employee or serve on any Town Board.

Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input type="checkbox"/> Historical Commission |
| <input type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
| <input type="checkbox"/> Community School Use Committee | <input type="checkbox"/> Memorial Hall Cultural Center Committee |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> (formerly Arts Lottery Council) |
| <input type="checkbox"/> Fair Housing Committee | <input type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Finance Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input type="checkbox"/> Other (Describe Below) |

FOR OFFICE USE ONLY: Date Rec'd 11-17-21 Recorded 11-17-21 Application Expires 11-17-24
Referred to Board Chair for Review/Comment/Recommendation _____



MILFORD SELECT BOARD

Room 11, Town Hall, 52 Main Street (Route 16), Milford, MA 01757
508-634-2303 Fax 508-634-2324

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YOUR NAME Daniel "Scott" Wilson

YOUR ADDRESS _____

TELEPHONE NO. FOR WEEKDAYS () 5082442695 & EVENINGS() 5082442695

EMAIL ADDRESS scottwilson@comcast.net

PLEASE INDICATE BELOW, INFORMATION PERTINENT TO YOUR EDUCATION, EXPERIENCE, AND/OR INTERESTS WHICH WOULD BE RELEVANT TO THE BOARD(S) YOU HAVE CHOSEN.

EDUCATION BS in Plant & Soil Science university of Massachusetts Amherst 1986. MBA Bentley College 199

EXPERIENCE 6 years as a head grower, and 2 years owning a retail/wholesale garden center. 27 years in the print industry, designing mailrooms, print centers, and office printing in the S&P 500 arena. Develop process improvements around print in large coporations such as. Raytheon, Deutche Banc, Goldman Sachs, etc. I have had numerous teams that I managed over my career. Developed and successfully ran an online store, with website, email lists, and social media.

INTERESTS Fishing and building fishing rods. Reading, especially history. Lapidary, Gardening, Visiting historical sites in the U.S. home improvement.

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Please place "x" beside the Board(s) on which you are interested in serving:

- | | |
|---|--|
| <input type="checkbox"/> Cedar Swamp Pond Development Committee | <input checked="" type="checkbox"/> Historical Commission |
| <input checked="" type="checkbox"/> Commission on Disability | <input type="checkbox"/> Industrial Development Commission |
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| <input checked="" type="checkbox"/> Conservation Commission | <input type="checkbox"/> Milford Cultural Council (formerly Arts Lottery Council) |
| <input checked="" type="checkbox"/> Council on Aging | <input checked="" type="checkbox"/> Milford Geriatric Authority |
| <input type="checkbox"/> Fair Housing Committee | <input checked="" type="checkbox"/> Milford Youth Commission |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Personnel Board |
| | <input type="checkbox"/> Zoning Board of Appeals |
| | <input checked="" type="checkbox"/> Other (Describe Below) |

Animal Resecue, etc.

FOR OFFICE USE ONLY: Date Rec'd 7-1-22 Recorded 7-1-22 Application Expires 7-1-25
Referred to Board Chair for Review/Comment/Recommendation _____