

County of Albany

Harold L. Joyce
Albany County Office Building
112 State Street - Albany, NY 12207



Meeting Agenda

Thursday, June 27, 2024

6:30 PM

**Harold L. Joyce Albany County Office Building
Cahill Room - First Floor**

Audit and Finance Committee

PREVIOUS BUSINESS:

1. APPROVING PREVIOUS MEETING MINUTES
2. AMENDING THE RULES AND REGULATIONS FOR ALBANY COUNTY EMPLOYEES REGARDING HEALTH INSURANCE BENEFITS FOR RETIREES

CURRENT BUSINESS:

3. AMENDING THE 2024 ALBANY COUNTY BUDGET: NEW YORK STATE HEALTH CARE AND MENTAL HYGIENE WORKER BONUS PROGRAM – VESTING PERIOD V
4. AUTHORIZING AN AGREEMENT WITH CATHOLIC CHARITIES OF THE DIOCESE OF ALBANY REGARDING CASE MANAGEMENT SERVICES FOR THE LAW ENFORCEMENT ASSISTED DIVERSION PROGRAM
5. BOND AUTHORIZATION FOR VARIOUS NON-ROADWAY PAVING PROJECTS
6. AUTHORIZING CANCELLATION OF A CERTAIN UNENFORCEABLE DELINQUENT REAL PROPERTY TAX LIEN ON 936 SR 145 IN THE TOWN OF RENSSELAERVILLE AND CHARGE BACK OF THE AMOUNT CREDITED IN CONNECTION WITH SAID LIEN
7. AUTHORIZING CORRECTIONS TO THE TAX ROLL FOR THE CITY OF ALBANY
8. AUTHORIZING THE CONVEYANCE OF REAL PROPERTY LOCATED AT 446 COUNTY ROUTE 360 (TAX MAP NO. 148.-1-50.30) IN THE TOWN OF RENSSELAERVILLE
9. DECLARING A PORTION OF COUNTY ROUTE 103 (BLODGETT HILL ROAD) LOCATED ADJACENT TO 758 BLODGETT HILL ROAD IN THE TOWN OF COEYMANS NO LONGER NECESSARY FOR PUBLIC USE & AUTHORIZING THE CONVEYANCE OF A PORTION OF COUNTY ROUTE 103 (BLODGETT HILL ROAD) LOCATED ADJACENT TO 758 BLODGETT HILL ROAD IN THE TOWN OF COEYMANS

10. AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE A LICENSE AGREEMENT WITH STEWART'S SHOPS CORP. REGARDING THE USE OF PROPERTY AT 309 DELAWARE AVENUE IN THE TOWN OF DELMAR

County of Albany

*Harold L. Joyce
Albany County Office Building
112 State Street - Albany, NY 12207*



Meeting Minutes

Monday, May 13, 2024

6:00 PM

**William J. Conboy II Legislative Chambers
Albany County Courthouse**

Audit and Finance Committee

CURRENT BUSINESS:

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

Present: Dustin M. Reidy, Frank J. Commisso, Gary W. Domalewicz, Raymond F. Joyce, Mark E. Grimm and Paul J. Burgdorf

Excused: Wanda F. Willingham, William M. Clay and Lynne Lekakis

1. OMNIBUS RESOLUTION DATED MAY 13, 2024. A RESOLUTION RESCINDING CERTAIN PRIOR BOND RESOLUTIONS ADOPTED BY THE COUNTY OF ALBANY, NEW YORK

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

County of Albany

*Harold L. Joyce
Albany County Office Building
112 State Street - Albany, NY 12207*



Meeting Minutes

Thursday, May 30, 2024

6:30 PM

**Harold L. Joyce Albany County Office Building
Cahill Room - First Floor**

Audit and Finance Committee

PREVIOUS BUSINESS:

Present: Wanda F. Willingham, Dustin M. Reidy, Frank J. Commisso, Gary W. Domalewicz, Lynne Lekakis, Mark E. Grimm and Paul J. Burgdorf

Excused: William M. Clay and Raymond F. Joyce

1. APPROVING PREVIOUS MEETING MINUTES

A motion was made that the previous meeting minutes be approved. The motion carried by a unanimous vote.

2. AMENDING THE RULES AND REGULATIONS FOR ALBANY COUNTY EMPLOYEES REGARDING HEALTH INSURANCE BENEFITS FOR RETIREES

This proposal was tabled at the request of the Sponsor.

3. LOCAL LAW NO. "F" FOR 2024: A LOCAL LAW OF THE COUNTY OF ALBANY, NEW YORK AMENDING CHAPTER 270 OF THE ALBANY COUNTY CODE TO PROVIDE A REAL PROPERTY TAX EXEMPTION FOR LIVING QUARTERS FOR PARENT OR GRANDPARENT

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

4. AMENDING THE RULES AND REGULATIONS FOR ALBANY COUNTY EMPLOYEES REGARDING CHANGES TO ACCRUALS AND HEALTH COVERAGE

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

5. AMENDING RESOLUTION NO. 176 FOR 2022, AS AMENDED, REGARDING AMERICAN RESCUE PLAN ACT ADVISORY SERVICES AND AMENDING THE 2024 ALBANY COUNTY BUDGET

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

CURRENT BUSINESS:

6. AUTHORIZING AN AGREEMENT WITH TYLER TECHNOLOGIES, INC. REGARDING THE MUNIS FINANCIAL SYSTEM

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

7. AUTHORIZING A CORRECTION TO THE TAX ROLL FOR THE CITY OF ALBANY

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

8. AUTHORIZING A PAYMENT IN LIEU OF TAXES AGREEMENT WITH RIVER ROAD SOLAR A LLC REGARDING REAL PROPERTY LOCATED AT RIVER ROAD (TAX MAP NO. 98.00-2-10.22) IN THE TOWN OF BETHLEHEM

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

9. AUTHORIZING THE CONVEYANCE OF VARIOUS PARCELS OF REAL PROPERTY LOCATED IN THE CITY OF ALBANY

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

10. AUTHORIZING THE DISTRIBUTION OF MORTGAGE TAXES FOR THE PERIOD OCTOBER 1, 2023 THROUGH MARCH 31, 2024

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

11. AMENDING THE 2024 ALBANY COUNTY BUDGET: ADMINISTRATIVE ADJUSTMENTS

A motion was made to move the proposal forward with a positive recommendation. The motion carried by a unanimous vote.

LOCAL LAW “A” FOR 2024

A LOCAL LAW OF THE COUNTY OF ALBANY, NEW YORK AMENDING CHAPTER 106 OF THE ALBANY COUNTY CODE, SETTING FORTH REQUIREMENTS FOR FACILITIES WITHIN ALBANY COUNTY WHERE THE LOCAL GOVERNMENTAL UNIT IDENTIFIED BY NEW YORK STATE IS THE ALBANY COUNTY DEPARTMENT OF MENTAL HEALTH

Introduced: 2/12/24

By Mclean Lane:

BE IT ENACTED BY THE LEGISLATURE OF THE COUNTY OF ALBANY AS FOLLOWS:

Section 1. Article Creation.

Chapter 106, Article II, **Local Governmental Unit**, is hereby created.

Section 2. § 106-9 -- Legislative Purpose and Intent.

This legislation is to ensure that when an application is received by the Albany County Department of Mental Health where they are identified by New York State as the local governmental unit, before any decisions are made by County or State authorities, Albany County residents are offered the opportunity to be informed.

Section 3. § 106-10 - Notice of Receipt of Application to Involved Representatives.

A. Within 10 days of receipt of an application or notice of application from a New York State Agency where the Albany County Department of Mental Health is identified as the “local governmental unit” the Commissioner of the Department of Mental Health shall provide to the following representatives a copy of the application and/or notice of application from OASAS, and allow 30 days for those representatives to submit comment on the proposed facility:

- 1) The Albany County Legislator who represents the legislative district which contains the proposed location or facility; and
- 2) Each City, Town, or Village Mayor or Supervisor who represents the municipality which contains the proposed location or facility; and
- 3) Each City, Town, or Village Council or Board member who represents the municipality which contains the proposed location or facility.

B. All notifications pursuant to this Section shall be sent via regular mail, with an electronic mail following which shall contain a digital version or electronic link to

the application and/or notice of application along with all accompanying documents and information.

[C. No notice is required pursuant to this Local Law when the proposed application is only to re-locate an already existing facility within the same municipality in the County of Albany.]

Section 4. § 106-11 - Notice of Public Meeting to Involved Representatives.

A. Within 5 days of the posting of a notice of a public meeting agenda of the Behavioral Health Services Advisory Council, the Albany County Community Services Board, and/or the Albany County Alcohol and Substance Abuse Subcommittee where an application to locate a facility to treat substance use disorders in the County of Albany is on the agenda, the Commissioner of the Department of Mental Health shall provide a copy of that notice to the following representatives:

- 1) The Albany County Legislator who represents the legislative district which contains the proposed location or facility; and
- 2) Each City, Town, or Village Mayor or Supervisor who represents the municipality which contains the proposed location or facility; and
- 3) Each City, Town, or Village Council or Board member who represents the municipality which contains the proposed location or facility.

B. All notifications pursuant to this Section shall be sent via regular mail, with an electronic mail following which shall contain a digital version or electronic link to the application and/or notice of application along with all accompanying documents and information.

[C. No notice is required pursuant to this Local Law when the proposed application is only to re-locate an already existing facility within the same municipality in the County of Albany.]

Section 5. Severability.

If any clause, sentence, paragraph, subdivision, or part of this Local Law or the application thereof to any person, firm, corporation or circumstance, shall be adjudged by any court of competent jurisdiction to be invalid or unconstitutional, such order or judgment shall not affect, impair, or invalidate the remainder of the Local Law, but shall be confined in its operation to the clause, sentence, paragraph, subdivision, or part of the Local Law or in its application to the person, individual, firm, corporation or circumstance directly involved in the controversy in which such judgment or order may be rendered.

Section 6. SEQRA Compliance.

This County Legislature determines that this local law constitutes a “Type II action” pursuant to the provisions of the State Environmental Quality Review Act (SEQRA), and that no further action under SEQRA is required.

Section 7. Effective Date.

This local law shall take effect immediately after its filing with the Secretary of State.

Referred to Law and Health Committees – 2/12/24

Favorable Recommendation Law Committee – 4/24/24

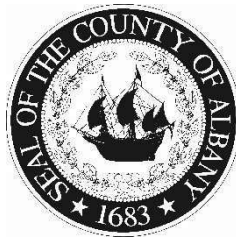
Favorable Recommendation Health Committee – 4/25/24

Favorable Recommendation Law Committee – 5/13/24

On long roll call vote the following members voted in favor: Beston, Burgdorf, Cleary, Collins, Commisso, Conway, Cunningham, Domalewicz, Drake, Efekoro, Ethier, Feeney, Fein, Grimm, A. Joyce, R. Joyce, Kuhn, Laurilliard, Lockart, Mauriello, McLaughlin, Pedo, Perlee, Plotsky, Reidy, Ricard, Robinson, Rosano, Simpson, Smith, Ward and Whalen – 32

Those opposed – Lekakis and Miller – 2

Local Law was adopted – 5/13/24



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
DEPARTMENT OF MANAGEMENT AND BUDGET
112 STATE STREET, SUITE 1200
ALBANY, NEW YORK 12207
OFFICE: (518) 447-5525
FAX: (518) 447-5589
www.albanycounty.com

M. DAVID REILLY, JR.
COMMISSIONER

PATRICK ALDERSON
DEPUTY COMMISSIONER

May 21, 2024

Honorable Joanne Cunningham, Chairwoman
Albany County Legislature
112 State Street, Room 710
Albany, New York 12207

Dear Chairwoman Cunningham,

As part of the State FY2023 budget, New York State created a Health Care and Mental Hygiene Worker Bonus (HWB) Program, allocating \$1.2 billion in funding for the payment of bonuses for certain frontline healthcare workers. The NYS HWB Program allows for bonus payments to "recruit, retain, and reward health care and mental hygiene workers" who meet specific eligibility requirements as set forth in Part ZZ of Chapter 56 of the Laws of 2022. Bonus amounts are commensurate with the number of hours worked by eligible workers covered by the HWB Program during designated vesting periods, up to a total of \$3,000 per covered worker.

Some County Departments are "eligible employers" due to the nature of their work. County Departments determine whether their operations met the qualifying employer criteria and identify eligible employees based on titles prescribed by NYS. Departments then submit claims on behalf of eligible employees to NYS by the due date for the vesting period – for the fifth vesting period, claims were due 5/1/2024. For this vesting period, County Departments submitted 64 claims on behalf of employees for a total of \$84,000 in bonus payments. Additionally, the County is anticipating receiving reimbursement for FICA contributions at 7.65%, equivalent to \$6,433. In total, Albany County departments are anticipating receiving \$90,433 from NYS for the fifth vesting period of the HWB program. Currently NYS is reviewing the claims submitted on behalf of County employees and will remit payment to the eligible County Departments. Once the County has received payment from NYS, we must pay bonuses to employees no later than 30 days afterwards.

This request to amend the 2024 County Budget adds the necessary personnel non-individual and fringe appropriations and revenue lines to each respective department's budget in anticipation of prompt payment of the NYS HWB bonus for vesting period 5 (October 1, 2023 – March 31, 2024) to eligible employees. Departments who weren't able to file on behalf of eligible employees for previous vesting periods, were able to submit those claims during this cycle, which are reflected in this request for legislative action.

Should you have any questions, please don't hesitate to reach out.

Sincerely,

M. David Reilly
Commissioner, Management & Budget

cc: Hon. Dennis A. Feeney, Majority Leader
Hon. Frank A. Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



County of Albany

Harold L. Joyce
Albany County Office
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NY 12207

Legislation Text

File #: TMP-5529, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

Amend the budgets for several departments to accommodate the New York State Health Care Worker Bonus Program for the fifth vesting period

Date: 5/21/2024
Department: Management and Budget
Attending Meeting: Zak Smetana, David Reilly
Submitted By: Zak Smetana
Title: Senior Budget Analyst
Phone: 518-447-7031

Purpose of Request: Budget Amendment Enter text.

CONTRACT TERMS/CONDITIONS:

Party Names and Addresses:
Enter text.

Term: (Start/end date or duration) Enter text.
Amount/Raise Schedule/Fee: Enter text.

BUDGET INFORMATION:

Is there a Fiscal Impact: Yes ☒ No ☐
Anticipated in Budget: Yes ☐ No ☒
Spreadsheet attached: Yes ☒ No ☐

Source of Funding - (Percentages)

Federal: Enter text. County: Enter text.
State: 100% Local: Enter text.

County Budget Accounts:

Revenue Account and Line: See attached Budget Amendment
Revenue Amount: \$90,433
Appropriation Account and Line: See attached Budget Amendment
Appropriation Amount: \$90,433

ADDITIONAL INFORMATION:

Mandated Program/Service: Yes ☐ No ☒
If Mandated, Cite Authority: Enter text.

Request for Bids / Proposals:

Competitive Bidding Exempt: Yes ☐ No ☐

of Response(s): Enter text.

of MWBE: Enter text.

of Veteran Business: Enter text.

Bond Resolution No.: Enter text.

Apprenticeship Program Yes ☐ No ☐

Previous requests for Identical or Similar Action:

Resolution/Law Number and Date: Enter text.

DESCRIPTION OF REQUEST: (state briefly why legislative action is requested)

We are requesting to amend the budgets for the Department of Children, Youth & Families, Mental Health, Shaker Place Rehabilitation and Nursing Center, Health, and the Sheriff's Office to accommodate the New York State Health Care and Mental Hygiene Worker Bonus Program for the fifth vesting period.

Employers are required to submit claims for bonus payments for their qualified employees. The State then issues bonus payments to employers, who then distribute the bonus payments to the qualified employees.

The fifth vesting period was October 1, 2023 - March 31, 2024. A qualified employee is eligible for up to two vesting periods per employer. The maximum amount any employee may receive is \$3,000.

APPROPRIATIONS

BUDGET LINE						DESCRIPTION	INCREASE	DECREASE	UNIT COST	DEPARTMENT NAME
FUND	ORG	OBJ	PRO	FOR POSITIONS ONLY						
				STATE POS. CODE	POSITION CONTROL					
A9	4059	19916	10000			NYS HC & MH Worker Bonus Prg	\$1,500		\$1,500	Children, Youth and Families
A9	4059	89030	10000			Social Security	\$115		\$101,570	Children, Youth and Families
A9	6119	19916	10000			NYS HC & MH Worker Bonus Prg	\$3,000		\$3,000	Children, Youth and Families
A9	6119	89030	10000			Social Security	\$231		\$908,336	Children, Youth and Families
A9	4310	19916	10000			NYS HC & MH Worker Bonus Prg	\$16,500		\$16,500	Mental Health
A9	4310	89030	10000			Social Security	\$1,264		\$572,238	Mental Health
NH9	6020	19916	10000			NYS HC & MH Worker Bonus Prg	\$54,000		\$54,000	Shaker Place Rehabilitation and Nursing Center
NH9	6020	89030	10000			Social Security	\$4,132		\$1,539,728	Shaker Place Rehabilitation and Nursing Center
A9	4010	19916	10000			NYS HC & MH Worker Bonus Prg	\$3,000		\$3,000	Health
A9	4010	89030	10000			Social Security	\$231		\$555,178	Health
A9	3110	19916	10000			NYS HC & MH Worker Bonus Prg	\$6,000		\$6,000	Sheriff
A9	3110	89030	10000			Social Security	\$460		\$1,541,544	Sheriff
TOTAL APPROPRIATIONS							\$90,433	\$0		

ESTIMATED REVENUES

BUDGET LINE						DESCRIPTION	DECREASE	INCREASE	UNIT COST	DEPARTMENT NAME
FUND	ORG	OBJ	PRO	FOR POSITIONS ONLY						
				STATE POS. CODE	POSITION CONTROL					
A9	4059	03455				NYS HC & MH Worker Bonus Prg		\$1,615	\$1,615	Children, Youth and Families
A9	6119	03455				NYS HC & MH Worker Bonus Prg		\$3,231	\$3,231	Children, Youth and Families
A9	4310	03455				NYS HC & MH Worker Bonus Prg		\$17,764	\$17,764	Mental Health
NH9	6020	03455				NYS HC & MH Worker Bonus Prg		\$58,132	\$58,132	Shaker Place Rehabilitation and Nursing Center
A9	4010	03455				NYS HC & MH Worker Bonus Prg		\$6,460	\$6,460	Health
A9	3110	03455				NYS HC & MH Worker Bonus Prg		\$3,231	\$3,231	Sheriff
TOTAL REVENUES							\$0	\$90,433		
GRAND TOTAL							\$90,433	\$90,433		

Department	Avg Weekly Hours Per Vesting Period	Bonus Amount Per Vesting Period	Eligible Employees Claimed	Total Bonus Per Avg Weekly Hours Category	FICA (7.65%), Round Up	Notes
ACDCYF	20 - 30 hours	\$ 500.00		\$ -	\$ 346.0000	4059: 1 employee 6119: 2 employees
	30-35 hours	\$ 1,000.00		\$ -		
	35+ hours	\$ 1,500.00	3	\$ 4,500.00		
ACDMH	20 - 30 hours	\$ 500.00		\$ -	\$ 1,264.0000	
	30-35 hours	\$ 1,000.00		\$ -		
	35+ hours	\$ 1,500.00	11	\$ 16,500.00		
SPRNC	20 - 30 hours	\$ 500.00	6	\$ 3,000.00	\$ 4,132.0000	
	30-35 hours	\$ 1,000.00	12	\$ 12,000.00		
	35+ hours	\$ 1,500.00	26	\$ 39,000.00		
DGS	20 - 30 hours	\$ 500.00	0	\$ -	\$ -	
	30-35 hours	\$ 1,000.00	0	\$ -		
	35+ hours	\$ 1,500.00	0	\$ -		
ACSO	20 - 30 hours	\$ 500.00		\$ -	\$ 460.0000	
	30-35 hours	\$ 1,000.00		\$ -		
	35+ hours	\$ 1,500.00	4	\$ 6,000.00		
DOH	20 - 30 hours	\$ 500.00		\$ -	\$ 231.0000	
	30-35 hours	\$ 1,000.00		\$ -		
	35+ hours	\$ 1,500.00	2	\$ 3,000.00		
Bonus TOTAL			64	\$ 84,000.00		
FICA TOTAL		7.65%	\$ 84,000.00	\$6,426.00	\$6,433.00	
			Aggregate	\$ 90,426.00	\$90,433.00	

NYS Healthcare Worker Bonus Program Frequently Asked Questions (FAQ)

Last Updated 3/13/2024

FAQ Table of Contents

General
Attestation
Eligibility (Qualified Employers)
Education Sector Employers
Tax Questions
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Eligibility (Employees)
Portal Registration and Claims Submission
Employee Separation
Enforcement
Employee Help
Help and Support

General

Q. What is the Healthcare Worker Bonus (HWB) Program?

A. As part of the 2022-2023 enacted New York State Budget, Governor Hochul and the State Legislature allocated \$1.2 billion in funding to the NYS **Healthcare Worker Bonus (HWB)** program for the payment of bonuses for certain frontline healthcare workers as Part ZZ of Chapter 56 of the Laws of 2022.

The HWB Program provision allows for the payment of bonuses to “*recruit, retain, and reward health care and mental hygiene workers*” meeting certain eligibility requirements.

Q. Where can I find the details of the HWB Program?

A. Please see Part ZZ of Chapter 56 of the Laws of 2022.

Q. Who is eligible for a health care worker bonus?

A. *Health care and mental hygiene workers that meet each of the following criteria will be eligible for the bonus:*

- The employee works for a qualified employer. A qualified employer is defined in SOS §367-w(2)(b) and (c).
- Assuming an employee works for a qualified employer, the eligible employee must:
 - Be in an eligible title listed in SOS §367-w(2)(a)(i)-(iii).
 - Receive an annual base salary of \$125,000 or less (excluding any bonus or overtime pay paid by the employer).
 - Be employed by an eligible provider during the entire “vesting period.”
 - Not be suspended or excluded from participation in the Medicaid program.

- Work for a qualified employer for the required number of hours during the vesting period to be eligible for the bonus.

The **employer** must evaluate and attest to whether they and/or any of their employees meet the eligibility criteria.

Q. Is the data I submit to the HWB Portal kept secure?

A. Yes. The HWB portal is compliant with New York State and Federal Security Standards. Data submitted to the HWB portal will be kept within a secure environment for up to seven (7) years. After the retention period, the Department of Health will be required to destroy the data and obtain a Certificate of Destruction from an IT Asset Disposition (ITAD) service provider ensuring the data has been destroyed in compliance with all applicable laws and industry standards.

Q. Should Governmental entities that are not State entities submit bonus claims in the portal for their eligible employees?

A. Yes, governmental entities that are not State entities (i.e. County nursing homes) and do not employ State employees should submit claims in the portal for their eligible employees.

Attestation

Q. What is the employer attestation process?

A. The bonus claim process requires all qualified employers to electronically sign an attestation that acknowledges they understand and have determined that each employee the employer included in the claiming process is eligible to receive the Healthcare Worker Bonus. Those requirements are found in section 367-w of the Social Services Law, and other guidance pertaining to the HWB.

Employers must download a copy of the HWB Employer Attestation, which can also be found on the HWB Program Portal.

Q. What is the Employee Attestation Process?

A. The bonus claim process requires all qualified employees to sign an attestation that confirms their wages from all sources in connection with their eligibility for the workforce bonus.

Employers must download a copy of the HWB Employee Attestation, which can also be found on the HWB Program Portal. An employee attestation for each employee must be signed by the employee and maintained by the employer.

Q. Can employee attestations be submitted electronically to the employer?

A. Yes, employee attestations may be submitted electronically.

Q. Could the Department provide additional guidance regarding the employee attestation?

A. The information below offers further details on employee attestations:

- Employers must collect employee attestations prior to submitting a bonus claim for the employee.
- Employers must retain the signed attestations from employees, but do not need to submit to the State unless explicitly requested to do so.

- If an employee fails to or refuses to sign the attestation but are otherwise eligible, employers should retain the documentation on why the employee is eligible and retain documentation that the employee declined to provide the signed attestation.
- Employers, if they choose, may collect employee attestations covering October 2021 – September 2022 to allow those employees to only attest once.
- Employers should submit claims for employees under the MMIS ID that is most appropriate for their employment situation. Therefore, the employee attestation should indicate the MMIS ID where the employee primarily works.

Eligibility (Qualified Employers)

Q. Who is a qualified employer?

A. Please refer to the Qualified Employer Section of the Department of Health HWB Program website for additional information.

Q. What employees working for qualified employers are eligible to receive the bonus?

A. A list of qualified employees and worker titles has been posted here.

Q. If an employee lives outside of New York State, are they eligible for the bonus?

A. A qualified employee who works for a qualified employer is eligible for the bonus regardless of state residency.

Q. Is the bonus for the Home Attendants/Aides? Are any staff for CHHAs, LHCSAs and FIs included?

A. Homecare aides are not an eligible title for the Bonus Program as they will be eligible for increased minimum wage payments pursuant to PHL 3614-f. As such, employees of Article 36 entities that fall under such titles (e.g., home health Aide, Personal Care assistant, home maker, etc.) are not eligible for the Bonus. However, certain Article 36 entities, such as Certified Home Health Agencies (CHHAs) and Licensed Home Care Services Agencies (LHCSAs), may employ eligible titles (e.g., Nurses, PT/OT Therapists, Speech Pathologists, etc.) that provide hands-on services, and may be eligible for the bonus if they meet all of the employee eligibility requirements. Fiscal Intermediaries under SOS section 365-f do not employ eligible titles that provide hands-on services, and so are not subject to the requirements under the Bonus program.

Q. I am a non-Medicaid provider, am I eligible for a bonus?

A. According to Part ZZ of Chapter 56 of the Law of 2022, eligible employers are those who include certain providers with at least one employee, and that bill for services under the Medicaid state plan or a home or community-based services (HCBS) waiver, providers that have a provider agreement to bill for Medicaid services provided or arranged through a managed care organization or a managed long term care plan, and certain educational institutions and other funded programs. These include certain providers, facilities, pharmacies, and school-based health centers licensed under the state Public Health Law, Mental Hygiene Law, and Education Law, as well as certain programs funded by the Office of Mental Health (OMH), Office for the Aging, Office of Addiction Services and Supports (OASAS), and the Office for People with Developmental Disabilities (OPWDD).

If your organization does not pertain to the above, you are unfortunately not eligible at this time.

Q. Would a provider enrolled in the medical assistance program (e.g. hospital, nursing home) (“provider”), who enters into a contract with the supplemental staffing agency (“staffing agency”), be considered an Employer (under the statute), with respect to those front-line healthcare workers (agency staff) who are assigned by the staffing agency to work at the provider’s facility on a temporary basis?

A. No. Qualified Employers should submit claims for bonuses only for individuals they employ directly or indirectly on a permanent basis. Contracted temporary staff that are employed or contracted by a staffing agency or other intermediary entity on a temporary basis are not eligible for the HWB program.

See the Question *“Q. Are contract staff eligible for the bonus? If they are, who is responsible for submitting these staff for a bonus? For example, if a hospital employs staff that fall under one of the eligible titles but are co-employed with a non-healthcare entity, are they eligible for the bonus?”*, for more details.

Q. Please clarify the criteria necessary for an employer to be subject to the Healthcare Workforce Bonus (HWB) Program?

A. The HWB statute provides two separate definitions of qualified employers, both of which are subject to the requirements of the HWB program.

- See SOS § 367-w(2)(b) and (c)

Under paragraph (2)(b), an employer is subject to the HWB program if they meet all the four following criteria:

1. They are a Medicaid enrolled provider.
2. They bill for Medicaid services (either through FFS, managed care, or a 1915(c) waiver).
3. Employ at least one eligible employee.
4. **A. Are included in the list of provider and facility types in the statute, OR**
B. Are subject to a certificate of need (CON) process, OR
C. The provider serves at least 20% Medicaid enrollees.

The Department of Health is not prescribing a specific methodology to determine the 20% Medicaid threshold criteria. Employers must determine whether their organization complies with this requirement as part of the employer attestation required for HWB claim submission.

Q. Please clarify the types of employers eligible for the HWB Program?

A. Paragraph (2)(b) identifies employers eligible for the program, and are limited to:

- Providers and facilities licensed, certified, or otherwise authorized under:
 - articles 28, 30, 36 or 40 of the public health law
 - articles 16, 31, 32 or 36 of the mental hygiene law
 - article 7 of the social services law
- Pharmacies registered under §6808 the education law
- School-based health centers
- Programs funded by the OMH, OASAS, Office of the Aging, or OPWDD, AND

- Other provider types determined by the commissioner and approved by the director of the budget (***at this time no other provider types have been determined***).

If the provider is subject to a certificate of need (CON) process OR the provider serves at least 20% Medicaid enrollees, they are not limited to this list defined in Paragraph(2)(b).

Q. What employer types are subject to the Certificate of Need (CON) process, and thus not required to meet the 20% threshold, but still required to be actively enrolled Medicaid providers?

A. Below is a list of employer types subject to the CON process:

Employer Types Subject to the CON Process
<i>Hospitals</i>
<i>Nursing Homes</i>
<i>Diagnostic and Treatment centers</i>
<i>Midwifery Birth Centers</i>
<i>Ambulatory Surgery Centers</i>
<i>Dialysis Providers</i>
<i>Certified Home Health Agencies</i>
<i>Licensed Home Care Services Agencies</i>
<i>Long Term Home Health Care Programs</i>
<i>Hospices</i>
<i>Adult Care Facilities</i>

Q. I am not enrolled to receive payments from eMedNY. Am I subject to the HWB program?

A. Paragraph (2)(c) of the statute identifies employers subject to the HWB program even if they are not eligible to receive payments from eMedNY. Entities with at least one eligible employee with programs identified in statute such as OMH, OPWDD, OASAS, OCFS or Municipalities may be subject to the HWB program.

Q. I am an employer who is not enrolled to receive payments from eMedNY and am not funded through OMH, OASAS, OCFS or OPWDD, am I subject to the HWB program?

A. With the exception of education and state-operated facilities, who will be eligible in the fall for the bonus program, employers who do are not enrolled to receive payments from eMedNY and are not funded by OMH, OASAS, OCFS or OPWDD are not likely eligible for the program.

Q. I am an Employer who is enrolled in eMedNY but in a non-payable status, am I subject to the HWB program.

A. Enrolled Medicaid providers who meet the eligibility criteria for the HWB but are enrolled with a non-payable status in eMedNY, this includes Managed Care Only and OPRA (Ordering, Prescribing, Referring, Attending) enrollment status, may be subject to the HWB program. Additional information on submitting for bonus will be provided.

Q. Are Providers whose practices that see at least twenty (20) percent Medicaid population qualified providers for the HWB?

A. Yes. Providers are Qualified Employers so long as the employer meets the 20% Medicaid threshold and all other eligibility requirements are met.

Q. Why was the second submission period extended?

A. In order to allow appropriate time for all Employers to submit claims for Vesting Period 1 and 2, the Department kept the HWB Program Portal open to claims for the second submission period until November 30, 2022. Qualified Employers were permitted to submit claims for eligible employees during that time. Please be advised that, in accordance with SOS § 367-w(4)(f), claims submitted after October 31, 2022, for Vesting Period 1 and 2 were technically late for filing purposes.

The Department is aware of several technical issues during the initial submission periods for Vesting Periods 1 and 2 that may have impeded the ability of certain Qualified Employers to submit claims. All Employers should document and retain information regarding the reason for any late submission for audits and investigation purposes relating to the submission of claims for the HWB Program.

Q. Are traveling nurses and temporary staff eligible for the bonus?

A. Qualified employers are responsible for identifying which of their staff are hired on a temporary or traveling basis. Contracted temporary staff that are employed or contracted by a staffing agency or other intermediary entity on a temporary basis are not eligible for the HWB program

Q. Are fire districts qualified employers?

A. Yes, fire districts and departments are municipalities and are considered Employers under the HWB program. If a Fire Fighter was a licensed EMT during the Vesting Period, and meets all other criteria, they would qualify for the bonus and the Employer would need to submit on their behalf. These Employers should determine if they have eligible employees and submit HWB claims as appropriate. If a fire district needs an SFS ID or sees an error message when attempting to register for the HWB Portal, please contact NYSWorkersBonus@health.ny.gov.

Q. Are employers overseen by OCFS eligible for the bonus program?

A. Qualified employers overseen by OCFS that are licensed by the Department of Health under Article 29-I that have an MMIS ID and meet the other necessary requirements should select DOH in the Agency drop down when submitting their employees via the portal, as they are billing via Medicaid and will receive bonus remittance payments via eMedNY.

Education Sector Employers

Q. Does "Other Direct Care Staff" includes aides and assistants in schools?

A. No. The Mental Hygiene titles listed in the statute at SOS § 367-w(2)(a)(ii) are taken from the title series in the Consolidated Fiscal Reporting and Claiming Manual (CFR), which includes additional descriptions of the referenced titles. The relevant description for titles under the CFR can be found here in [Appendix R](#).

Q. Are employees in educational settings that serve in roles that align with titles under “All Other Health Care Support Workers” (like a front office building attendant or custodian) eligible?

A. No. Such workers must support patient-facing care provided within a patient care unit of a hospital or nursing home in support of treating and caring for patients.

Q. Titles used in educational settings are different from those used in traditional healthcare settings. If the title does not match exactly, is the worker ineligible?

A. The titles listed in the statute describe the role the worker served. If the role served by the employee in an educational setting is consistent with the definition of the job title, the employee may be eligible assuming all other requirements are met.

The definition of each [BLS job title](#) is available on [O*Net Online](#). See ***“Q. Is there a definition for each job title?”*** under section [Eligibility \(Employees\)](#).

Employers will be required to identify which eligible title the employee qualifies under when submitting the employee in the HWB Portal. Employers should document and retain information justifying their determination that the employee qualified under the specified title for purposes of audits, investigations, and reviews of employers submitting claims for the HWB Program.

Q. Is there any guidance that compares school district job titles against those outlined in SOS Section 367-w(2)(a)(iii)?

A. The intent of HWB Program is to provide for the payment of bonuses to recruit, retain, and reward health care and mental hygiene workers. Educational institutions were included as an eligible employer because some employ health care and mental hygiene workers that are patient-facing and provide clinical care. The titles in SOS §367-w(2)(a)(i)-(iii) should therefore either be consistent with eligible employees in educational institutions or very closely align with the definitions of those job titles.

Q. Will there be any specific guidance/training for school districts?

A. All program guidance included on this website is consistent for all eligible employer types.

Q. If a district claims money, will there be a listing of which positions were approved so they will know who they can pay the funds out to?

A. Yes, employers will receive remittance advice when they receive payment. See ***“Q. Will employers be notified when payments will be made out of SFS and eMedNY and will a remittance be provided?”*** under section [Payment Issuance](#).

Q. Can educational employers submit their eligible employees from Vesting Period 1 during Submission Period 2?

A. Yes. See the prior FAQ regarding the administrative flexibility offered for the Vesting Period 1 and 2 submissions. This applies to all employers, including the education sector.

Q. I am a qualified employer within the education sector, looking to submit claims for eligible employees. How do I register for the HWB Program Portal?

A. School districts, charter schools, nonpublic schools, approved preschool programs for students with disabilities, BOCES, and private institutions of higher education, should register for the HWB Portal utilizing a Statewide Financial System (SFS) ID.

School districts, charter schools, nonpublic schools, approved preschool programs for students with disabilities and BOCES that do not have an SFS ID should contact SED at ChiefFinancialOfficer@nysed.gov. Private institutions of higher education that do not have an SFS ID should contact HESC at HWB@hesc.ny.gov.

Q. What steps do I need to take before logging in to the Portal?

A. Before logging into the Portal, Employers need to register. If the employer still issues accessing the Portal after registering, they should reset their password. Then the employer should be able to successfully login and submit their eligible employees for bonus payment.

Q. I am a qualified employer within the education sector, what vesting period should I begin submitting employee claims?

A. Education sector employers may begin submitting claims in Vesting Period 2. The Department acknowledges some providers may not be able to complete Vesting Period 2 claims by the close of the second vesting period (October 31, 2022). Where this is the case, they may submit for claims when Vesting Period 3 opens on April 1st, 2023.

Q. I am a qualified employer submitting claims for a school district's eligible salaried employees. Are 10-month employees considered continuously employed during a vesting period that overlaps with their 2-months off?

A. Yes. For purposes of the HWB Program, qualified salaried employees of a school district will be considered continuously employed for 12 months regardless of how their salary is paid (over 10 months or over 12 months). Districts do not need to pro rate average hours worked for salaried employees.

Q. Will the state be providing an updated qualified list for this program?

A. No. The titles in SOS §367-w(2)(a)(i)-(iii) should therefore either be consistent with eligible employees in educational institutions or very closely align with the definitions of those job titles.

Q. Is the word "patient" inter-changeable with "student"?

A. No. The word "patient" describes a person receiving clinical or behavioral health care from a health care provider. For purposes of bonus claiming, a "student" becomes a "patient" when a health care/mental hygiene worker employed by an eligible education sector employer provides clinical or behavioral health care in an educational setting.

Q. Do schools need to have a licensed medical facility to qualify?

A. No. Per SOS §367-w(2)(c), the definition of employer also includes a public and non-public school, a BOCES program, an approved preschool program for student with disabilities, and an institution of higher education.

Q. Do we have to bill Medicaid directly to qualify?

A. No. If you do not have an MMIS ID, meaning you are not enrolled in the NYS Medicaid system, you will need to verify that you have a Statewide Financial System (SFS) ID.

The agencies with providers who may not be in NYS Medicaid (eMedNY) system may include: Office of Mental Health, Office for People With Developmental Disabilities, Office of Children and Family Services, Office of Addiction Services and Supports and the New York State Education Department.

Once you have confirmed that you are actively enrolled or your SFS ID is active, you can prepare information for submission of reimbursement for eligible employees. More details, including a *Technical User Guide*, can be found within the [HWB Program Portal](#).

Q. Is there a modified version of the attestation for a school district?

A. No. The Employer and Employee attestation is consistent across all qualified employers.

Q. I am a qualified employer submitting claims for a school district's eligible hourly employees. How do I calculate hours for hourly employees of the school district who are not required to be available during the summer months?

A. For purposes of the HWB Program, school based hourly employees are eligible for the bonus based on the average number of hours worked during the vesting period in which they were continuously employed. Some school based hourly employees are still employed but are not required to be available to work during the summer months. So long as those employees are still employed but not obligated to report—and are otherwise ineligible for unemployment benefits during the summer months—those employees are considered continuously employed during vesting period(s).

Time which the employee is employed but did not work any hours because the school was closed for summer recess does not need to be factored into hourly employees' average hours worked as this can be counted as "other leave". For example, employee A is an hourly worker who on average works 40 hours per week from September through June each year. During July and August, the average hours worked is zero. When calculating average hours worked, these two months can be disregarded.

However, if employee A was not required to be available during July and August but **was** entitled to unemployment compensation, that employee would **not** be entitled to the bonus during that 6-month vesting period because they were not continuously employed.

Q. Are guidance counselors eligible for the bonus?

A. Guidance Counselor as listed in the [Consolidated Fiscal Report](#) (CFR) is not an eligible title. Guidance counselors may be eligible for the bonus if they are working in the capacity of another title on the list of [eligible titles](#) as defined in the CFR during the applicable vesting period, so long as they meet all other eligibility criteria including appropriate licensure. Employers should select the applicable title from the list of [eligible titles](#) for employees working in this capacity.

Q. Please confirm the process for medical schools to submit the HWB program portal.

A. The process follows the existing process for all other health care employers eligible for the bonus program. There is no distinct process for medical schools.

Tax Questions

If an employer or employee has a tax question not answered below, the Department recommends that you contact the NYS Department of Taxation and Finance for additional guidance.

Q. I am an employee, what are the tax implications of the bonus? Is the bonus considered taxable income?

A. Bonus payments paid to a New York State (NYS) resident are not subject to NYS personal income tax. To determine how the bonus payment may affect your specific situation, please consult with a tax professional.

Q. Would HWB Program bonus payments impact an employee's public benefits or other public assistance?

A. No.

Q. Are employees who were out on disability, FMLA, COVID Leave, etc. during the vesting period, but still an active employee, still eligible for the bonus?

A. The use of accruals or other leave, including but not limited to sick, vacation, or time used under the Family Medical Leave Act (FMLA), shall be credited towards and included in the calculation of the average number of hours worked per week over the course of the vesting period.

Q. I am an Employer, what obligation do I have to pay former employees who were otherwise eligible for a bonus and vested while in my employment?

A. Employers may be obligated to pay former employees that are eligible and vested while in their employment *provided that* the employee did not terminate his or her employment with the employer prior to the due date for payment of the bonus. In other words, if the Employer fails to pay the bonus within 30 days of receipt of payment on the bonus claim, the Employee may leave the Employer but the Employer will still be obligated to pay the bonus to the Employee. Please see the Employee Separation FAQs for more information.

Q. Do the bonuses have to be paid out as payroll or can they be 1099. If they can be 1099, will a form 1099 issued to the employee (under the employee's social security number) for any payment as Federal income tax will most likely be owed?

A. For federal income tax purposes, bonuses are considered supplemental wages and are required to be included as wages on the employee's W-2. See IRS Publication 15, Employer's Tax Guide, and IRS publication 525, Taxable and Nontaxable Income, for more information.

Q. Will the state reimburse employer or employee costs incurred for releasing HWB Program bonus payments such as FICA and payroll taxes?

A. Yes, employers will receive reimbursement for FICA and payroll taxes. In instances where the employee is a self-employed contractor, the employer should remit the bonus and the FICA to the employee. The employee will remit the FICA amount on their own behalf.

Q. What if an employee is exempt from FICA?

A. If a qualified employee is exempt from FICA, and the employer and the employee will not incur payroll costs or be required to remit FICA, the FICA amount received is an overpayment. Employers are required to report, return, and explain any overpaid HWB funds received to the Office of Medicaid Inspector General (OMIG). For FICA overpayment specific forms, please contact OMIG's Self-Disclosure Unit at selfdisclosures@omig.ny.gov or (518) 402-7030. Additional information, including directions on reporting and returning your overpayment can be found here: [Office of the Medicaid Inspector General - Self Disclosure of HWB Program Payments](#).

Q. What is the appropriate Federal tax to assign to HWB Program bonus payments to employees?

A. The Department of Tax and Finance (DTF) recommends employers reference the Internal Revenue Service (IRS) Tax Code – Supplemental Wage Guidance on Page 20 of [2022 Publication 15 \(irs.gov\)](#).

Q. Are HWB Program bonus payments exempt from New York State and local income tax?

A. Yes, the HWB Program bonus payments to employees is exempt from both NYS and local income tax (in municipalities such as New York City).

Q. With the knowledge that HWB Program bonus payments are exempt from NYS and local income tax, how should I reflect that on the check to my employee?

A. As there is no state withholding requirement for employees, employers should coordinate with their payroll vendor to remove state/local taxes for the bonus payments.

Q. Are HWB Program bonus payments subject to federal or other state taxes?

A. The bonus payment is not exempt from Federal or other State taxes.

Q. We are aware that HWB Program bonus payments to employees are exempt from NYS income tax for NYS residents. Does the same apply for employees that do not live in NYS but are eligible for the program?

A. Yes, the HWB Program bonus payments made to eligible employees who live out-of-state are exempt from NYS income taxes.

Q. Should Governmental entities, that meet the definition of qualified employers, but are not State entities submit bonus claims in the portal for their eligible employees?

A. Yes, governmental entities (i.e. County nursing homes), who meet the definition of qualified employers, but are not State entities and who do not employ qualified State employees should submit claims in the portal for their eligible employees.

Q. Is the HWB Program payment subject to the health facility cash receipts assessment (including the nursing home cash assessment)?

A. No. HWB Program payments are not subject to the health facility cash receipts assessments.

Q. How should employees ensure their HWB Program bonus remain exempt from NYS taxes when filing their 2022 taxes, as W-2 income for Federal and State taxes must match?

A. Eligible employees should complete [Form IT-225](#), and submit with their NYS tax return.

Q. When reporting employee earnings, what box on the W-2 should the HWB Program bonus be listed?

A. The HWB Program bonus should be recorded in Box 14 of the W-2.

Payment Issuance

Q. I am a qualified employer. How will I be issued the bonus payments?

A. Medicaid Employers (MMIS ID): Bonuses will be paid as a lump sum and included in qualified employer's weekly Medicaid cycle payment from eMedNY. The bonus payment due to eligible employees will appear under reason code **"HWB"**.

Additionally, the employer share of FICA, calculated at 7.65% of the total bonus amount will appear separately under reason code **"FTX"**.

Non-Medicaid Employers (SFS Vendor ID): Bonuses will be paid to the employer via the State Financial System.

Q. I am a qualified employer. May I keep any portion of the bonus payment?

A. No. A qualified employer shall not keep any portion of the bonus amount. Please note that the FICA portion is not due to the employee but must be remitted on behalf of the employee, except in instances where the employee is a self-employed contractor or when the Employee is exempt from FICA.

If the employee is a self-employed contractor, please see ***"Q. Will the state reimburse employer or employee costs incurred for releasing HWB Program bonus payments such as FICA and payroll taxes?"*** under section [Tax Questions](#).

If the employee is exempt from FICA please see ***"Q. What if an employee is exempt from FICA?"*** under section [Tax Questions](#).

Q. Will employers be notified when payments will be made out of SFS and eMedNY and will a remittance be provided?

A. The HWB Program Portal will notify employers when payment information is available and offer an employee-level remittance for employers via the email employers registered to sign in to the HWB portal. A reason will be provided for any submitted employee whose bonus amount was reduced or rejected during processing. Remittance advice information will also be available on the HWB Program Portal.

Q. I'm an eligible Employer, I submitted for vesting period three, when should I receive payment?

A. If you submitted for vesting period three, please see the table below for payment information. This table will be updated as information becomes available.

Submission Period	MMIS Submission	SFS Submission
One (08/03/2022 – 09/02/2022)	eMedNY Cycle 2352	10/05/2022

Two (10/01/2022 – 11/30/2022)	eMedNY Cycle 2366	01/11/2023
2.5 (02/01/2023 – 03/03/2023)	eMedNY Cycle 2382	05/03/2023
Three (04/01/2023 – 05/01/2023)	eMedNY Cycle 2393	07/19/2023

****Please Note: SED Providers will begin receiving payments on 1/13/2023***

Q. I am an employer. If I provided a bonus to my eligible employees prior to receipt of payment on the bonus claim, does this satisfy the requirement to pay a bonus under the HWB program?

A. No. An employer must identify eligible employees, submit a claim and receive payment from the HWB payment first. Bonuses as required by Part ZZ of Chapter 56 of the Laws of 2022 can only be paid to employees **after** claims are received, reviewed and payment is received by the employer through eMedNY or SFS.

Q. What should I do if I notice or suspect a mistake in an employee's bonus amount?

A. If you suspect an overpayment, please refer to question ***"Q. What happens if I identify an overpayment after a submission period is closed?"***. If you suspect it is an underpayment please refer to question ***"Q. What happens if I recognize an underpayment after a submission period is closed?"***

Q. What happens if I recognize an error during the submission period?

A. While the applicable claiming period is open, the HWB Portal includes a delete function to remove submissions made in error. Once an erroneous submission is deleted, a corrected submission can be loaded into the HWB portal.

Q. If an employer identifies an error in a bonus claim where they claimed a lower bonus amount for an eligible employee that they should have, how can the employer amend a submission to ensure the employee receives the correct amount?

A. Effective April 1st, a correction process is available. Instructions on how to submit corrections to modify either an employee's salary or hours worked from a previous submission can be found within the HWB Portal End User Guide available within the HWB Portal. The correction process is for employers to correct awarded bonuses ranging from \$0.00 to \$1000.00 which were determined by the Employer to have been lower than they should have been. Correction payments will be paid as a lump sum and included in qualified employer's weekly Medicaid cycle payment from eMedNY. Cycle information published once available.

Q. What happens if I identify an overpayment after a submission period is closed?

A. Please note this process is for **EMPLOYERS** only. Employers are required to report, return, and explain any overpaid HWB funds received. Additional information, including directions on reporting and returning your overpayment can be found here: **Office of the Medicaid Inspector General - Self Disclosure of HWB Program Payments.**

Please Note: Employers are prohibited from recovering bonuses paid to Employees under the HWB program even if the payment is later identified as an overpayment. See ***"Q. Can an Employer take back the HWB bonus from and Employee?"***.

Q. What happens if I recognize an underpayment after a submission period is closed?

A. An amended submission process is under development for identified underpayments. This process will allow employers to amend previous submissions and receive an additional payment for the underpaid portion of the previous submitted claim. Further guidance is forthcoming on this process.

Q. In the event that I am unable to issue payment to a former employee, or later determine a submitted employee to be ineligible, how do I return an overpayment of HWB bonus to the State?

A. Employers who have received a bonus payment for an ineligible employee, regardless of the reason, must return the HWB to the State. Employers' participation is subject to audit, investigation and review of paid claims by the Office of Medicaid Inspector General. Overpayments must be returned to OMIG. For more information on how employers should return HWB overpayments please see: [Self-Disclosure of Health Care Worker Bonus Payments | Office of the Medicaid Inspector General \(ny.gov\)](#).

Q. What happens when a submission period has closed, and an employer mistakenly applied for an employee who is not qualified for the bonus or applied for a larger value bonus than the employee should have received?

A. Employers who have received a bonus payment for an ineligible employee, regardless of the reason, must return the HWB to the State. Employers' participation is subject to audit, investigation, and review by the Office of Medicaid Inspector General. Overpayments must be returned to OMIG. For more information on how employers should return HWB overpayments please see: [Self-Disclosure of Health Care Worker Bonus Payments | Office of the Medicaid Inspector General \(ny.gov\)](#).

If the submission period is still open See *"Q: What happens if I recognize an error during the submission period?"*

Q. What is the appeals process for an employee who had their submitted bonus amount reduced by the State in the HWB Program portal?

A. There is no appeals process required for the HWB Program. Qualified employers who have questions about their bonus payments should submit questions directly to the State to understand payment amounts and associated reductions.

Q. If an employer identifies an error in a bonus claim where they claimed a lower bonus amount for an eligible employee that they should have, how can the employer amend a submission to ensure the employee receives the correct amount?

A. Additional guidance is forthcoming.

Q. Should bonus payments be reduced for any wage garnishment liabilities (e.g., for child support)?

A. HWB Program bonus payments must be offset by a qualified employer in compliance with any legally enforceable order against an eligible employee's wages, which includes the HWB bonus payment.

A previous version of this Q&A indicated that the HWB program should not be reduced for any wage garnishment liabilities. This was incorrect.

An employer who failed to withhold as required by a legally enforceable order against an employee's wages, which includes the HWB payment should review the legally enforceable order for the remedies required if such withholding was not made.

Q. When can I expect payment for the submission period which ended on October 1, 2023?

A. Payments for this submission period were released during the week ending February 2, 2024.

Q. I'm an employer who has diligently tried to remit an HWB bonus payment to an employee, but they are unreachable, and the payment is undeliverable. What do I do with the HWB payment and the corresponding FICA payment amount?

A. The HWB payment should be forwarded to OSC Unclaimed Funds: [Reporting Unclaimed Funds to New York State | Office of the New York State Comptroller \(ny.gov\)](#). The corresponding FICA payment is an overpayment and must be returned to OMIG. For more information on how employers should return HWB overpayments, including FICA payments, please see: [Self-Disclosure of Health Care Worker Bonus Payments | Office of the Medicaid Inspector General \(ny.gov\)](#).

Q. I'm an employee who was owed an HWB payment. I contacted my employer and they have indicated that my bonus payment was forwarded to OSC Unclaimed Funds. How do I request my bonus?

A. Individuals can claim monies held for them through the OSC Unclaimed Funds process. For more information please see: [Unclaimed Funds | Office of the New York State Comptroller \(ny.gov\)](#).

Eligibility (Employees)

Q. I am an employee; how can I find out if I am eligible?

A. Employees should contact their employer to determine their eligibility status. In addition, a list of qualified employees and worker titles has been posted [here](#).

Q. Are Medical Residents and Medical Fellows eligible titles for the bonus?

A. Yes, Medical Residents and Medical Fellows have been determined to be eligible titles under the authority provided by SOS § 367-w(2)(a)(iii).

Q. What does "All Other Health Care Support Workers" mean?

A. "All Other Health Care Support Workers" refers to workers that support the provision of health care services to patients in front-line settings for these titles. Such workers must provide patient-facing care provided within a patient care unit of a hospital or other institutional medical setting in support of treating and caring for patients.

This includes:

- Hospitals and Nursing Homes (Article 28 of Public Health Law)
- OMH Psychiatric Centers (Article 7 of Mental Hygiene Law)
- OASAS Addiction Treatment Centers (Article 19 of Mental Hygiene Law)

- Residential programs operated or certified by OPWDD, OMH, and OASAS (Articles 16, 31, and 32 of Mental Hygiene Law)
- Medicaid Assisted Living Programs (PHL Article 46-B)
- Hospice Residences (PHL Article 40)

These titles are included below:

All Other Patient Facing Care Support Workers in Article 28 Facilities:
<i>Admitting Clerk</i>
<i>Admitting Clerk Cashier</i>
<i>Ward Clerk</i>
<i>Critical Care Clerk</i>
<i>Discharge Control Clerk</i>
<i>Emergency Services Clerk</i>
<i>Front Desk Clerk</i>
<i>Lead Intake Specialist</i>
<i>Operating Room Clerk</i>
<i>Unit Clerk</i>
<i>Ward Clerk</i>
<i>Admitting Clerk</i>
<i>Registration Clerk</i>
<i>Unit Secretary</i>
<i>Unit Associate</i>
<i>Unit Coordinator</i>
<i>Unit Receptionist</i>
<i>Unit Secretary</i>
<i>Unit Assistant</i>
<i>Unit Associate</i>
<i>Ward Clerk</i>
<i>Dietary Aide</i>
<i>Food Prep/Service Worker</i>
<i>Dietary Worker</i>
<i>Dining Assistant</i>
<i>Dining Aide</i>
<i>Dietary Worker</i>
<i>Food & Nutrition Aide</i>
<i>Food Prep/Service Worker</i>
<i>Building Attendant</i>
<i>Building Service Aide</i>
<i>Building Service Worker</i>
<i>Custodian</i>
<i>Environmental Services Worker</i>
<i>Floor Maintenance Worker</i>

Maintenance/Physical Plant workers
Sanitation Worker
Service Worker
Environmental Service Aide/Tech
Maintenance/Physical Plant workers
Support Services Worker
Floor Maintenance Worker
Housekeeping Worker and Maids
Security Guards
Peace Officers

Q. What does “various mental hygiene workers” mean?

A. The Mental Hygiene titles listed in the statute at SOS § 367-w(2)(a)(ii) are taken from the title series in the Consolidated Fiscal Reporting and Claiming Manual (CFR), which includes additional descriptions of the referenced titles. The relevant description for titles under the CFR can be found in [Appendix R](#).

Q. Which employers are included in the education sector, which will participate in the October rollout?

A. For school districts, charter schools, nonpublic schools, approved preschool programs for students with disabilities, BOCES, and private institutions of higher education, the healthcare worker bonus portal will open on October 1, 2022.

Q. Are Nursing Homes not enrolled in Medicaid Qualified Employers?

A. Nursing Homes who are not currently enrolled in the Medicaid program would only be Qualified Employers if they have a Vendor ID (and receive payments) through the Statewide Financial System (SFS).

Q. Is there a definition for each job title?

A. The majority of the job titles are pulled directly from the Bureau of Labor Statistics (BLS). The definition of each [BLS job title](#) is available on [O*Net Online](#).

The Mental Hygiene titles listed in the statute at SOS § 367-w(2)(a)(ii) are taken from the title series in the Consolidated Fiscal Reporting and Claiming Manual (CFR), which includes additional descriptions of the referenced titles. The relevant description for titles under the CFR can be found here in [Appendix R](#).

Q. Please clarify the ‘All Other Health Care Support Workers’ section in the eligible title list found on the DOH website https://health.ny.gov/health_care/medicaid/providers/hwb_program/#titles?

A. Employees with titles on this list working in a hospital or institutional setting who **provide patient-facing care** provided within a patient care unit and meet all other criteria for the HWB program are eligible for HWB bonus.

- Employees in titles such as Coders, Billers, Call Center and Security are not eligible
- Clerical/office staff within Certified Home Health are not eligible under the ‘All Other Healthcare Support Workers’ title, which is limited to article 28 institutional facilities.

Q. Is there a threshold of hours an employee must work in a ‘hands-on clinical’ environment to be eligible?

A. No, if the employee has an eligible title and meets all other statutory requirements, they are eligible.

Q. I am an employer with staff who support patients via telehealth. Are they eligible?

A. Employees that work remotely but serve patient-facing roles are eligible for the bonus assuming they meet all other statutory requirements.

Q. Are employees who used accruals such as sick, vacation or Family Medical Leave Act (FMLA) eligible for the bonus? How should I calculate their average hours?

A. Employers should calculate accruals as hours worked when loading data in the HWB Portal.

Q. Are employees who resigned prior to the payment of the HWB bonus eligible?

A. Employers may be obligated to pay former employees that are eligible and vested provided that the employee did not terminate employment prior to the due date to pay the bonus.

Q. Can DOH provide guidance on the standard calculation for average weekly hours worked?

A. Employees must have worked 20 hours on average during the 6-month vesting period. Employers should calculate accruals as hours worked when loading data in the HWB Portal. For example, if an employee used 40 hours of vacation accruals during a week, those 40 hours would count towards their average weekly hours. Employers should exclude overtime hours when calculating the average weekly hours (**however employers should include weekend or holiday hours worked, regardless of the rate of pay, so long as the total hours worked remains under overtime thresholds, see 12 NYCRR 142-2.2**). Additional examples will be provided prior to the submission close date, but some common examples have been included below:

Period	Salaried Employees	Hourly Employees
Vesting Period for Employee Attestation	Example Method: Base Salary = Annual Salary divided in half – any bonuses or overtime pay received in the vesting period	Example Method: Base Salary = [Hourly Wage * (Average Hours Worked in Vesting Period – Overtime Hours) * 26 weeks – any bonuses or overtime pay received in the vesting period]
	Example: Annual Salary = 50K Employers should report Salary as 25K during 6-month vesting period	Example: Earns \$25/Hour and worked 35 Hours per week excluding overtime over the six-month period = \$22,750 (25*35*26)
Annual Salary for Submission on HWB Template	Annual Salary	Vesting Period Earnings * 2

Q. How should Employers calculate the annualized base salary for a vesting period (See Vesting Schedule)?

A. If an Employee is salaried, Employer should divide their annual salary in half. For example, if employee makes \$50,000 a year their salary during a vesting period would be \$25,000. If an employee is hourly, Employer should use moment in time calculation, for example, employer should calculate salaried earned across all pay periods that occurred during a vesting period.

Q. If an eligible employee makes \$125,000 or less annually but more than \$62,500 during one given vesting period, are they still eligible?

A. The intent of the HWB Program is to fund bonus payments to eligible employees that make \$125,000 or less annually.

For Qualified employers submitting claims for more than one vesting period at the same time (e.g., submitting employee claims for both vesting periods 1 and 2 during the October 2022 claiming window), employers should determine their employees' eligibility based on whether their employees' gross wages for both vesting periods were \$125,000 or less. For example, if an employee made \$60,000 in vesting period 1 and \$63,000 in vesting period 2, the employee would be eligible for the bonus for both vesting periods because their gross wages were \$123,000.

Note, where an employee makes *more* than \$125,000 during the first two vesting periods, but meets the income eligibility during a single vesting period (e.g. \$67,000 and \$60,000 for vesting periods 1 and 2, respectively), and the employee is otherwise eligible, the employer should submit a claim for the vesting period in which the employee met the criteria (in this example, for vesting period 2).

Q. If an employee is paid per diem and their rate of pay exceeds the requirement of \$125,000 annual base salary, but the employee did not work enough to earn the full \$125,000 annual pay, should the employer submit a claim for the bonus where the employee is otherwise eligible?

A. Yes. An employee's annual base salary is based on the employee's gross wages during the vesting period, not the employee's rate of pay. Employers are expected to obtain the employee attestation and review payroll records to determine if employees' gross wages for the relevant period meets the eligibility requirements.

Q. Please confirm that nursing certification, shift differential payments (paid as one-time lump-sum payments or as an add-on) should not be considered as part of base salary.

A. Differentials are part of gross wages and *should* be considered in the calculation of an employee's annualized base salary.

Q. Can an eligible employee that works across multiple employers earn more than \$1,500 in total across all employers from one vesting period?

A. No. Please see "**Q. How much is the bonus to which eligible employees are entitled?**" under section Portal Registration and Claims Submission.

Q. If an eligible “other healthcare support staff” worker is employed by an article 28 institution but works in a non-patient care building, are they eligible?

A. No these employees would not be eligible under the “other healthcare support staff” titles as they work in a setting where patient care is not provided.

Q. If employees do not have an SSN or ITIN, but their SSN is pending, are these staff eligible?

A. Employees must have an SSN or ITIN to be eligible for a bonus. If the employee’s SSN or ITIN is pending, the Employer may submit their bonus claim once their SSN or ITIN is active.

Q. Do mental hygiene worker titles (e.g., program site director) also apply to staff types with similar functions in non-mental hygiene settings?

A. The titles under section 367-w(2)(a)(ii) only apply to employers subject to the reporting requirements identified in the Consolidated Fiscal Report (CFR). The CFR manual provides definitions of each title such that an employee that may be classified in a definition of a title may be characterized as that title.

Q. Are “other healthcare support workers” that work at an eligible physician practice eligible for the bonus?

A. No. Workers must provide patient-facing care provided within a patient care unit of a hospital or other Article 28 institutional medical setting in support of treating and caring for patients.

Q. Are volunteers eligible for the bonus, assuming they meet all the other criteria?

A. No. Volunteers are not considered eligible employees under the statute.

Q. Are contract staff eligible for the bonus? If they are, who is responsible for submitting these staff for a bonus? For example, if a hospital employs staff that fall under one of the eligible titles but are co-employed with a non-healthcare entity, are they eligible for the bonus?

A. Permanent, contract staff in eligible titles may receive the HWB assuming all other requirements are met. For the purposes of the HWB program, qualified employers that have engaged in staffing arrangements to obtain workforce services (PEOs and other third-parties) for employees engaging in front- line-hands on health care services in eligible employee titles are eligible for the HWB. The qualified employer, not the contracted agencies, must submit bonus claims for staff that perform work for the qualified employer under such arrangements and that otherwise meet the eligibility criteria to be an eligible employee.

The qualified employer is required to maintain records that demonstrate the employee was employed for the full vesting period. All qualified Medicaid employers must maintain contemporaneous records tracking all claims submitted for no less than six (6) years. The qualified employer must furnish such records upon request to the department, the Office of Medicaid Inspector General (OMIG), the US Department of Health and Human Services, and the deputy attorney general for Medicaid Fraud.

Q. Are medical residents eligible for the bonus?

A. Yes. As reflected in the prior FAQ regarding the administrative flexibility offered for the Vesting Period 1 and 2 submissions, and in recognition that residents move to other residencies or

attending roles around June/July, these employees would be considered eligible under Vesting Periods: 1, 2, 3 and 5. The only vesting period that would present inconsistencies with seasonal changes in employment for residents would be Vesting Period 4.

Q. Our system is comprised of multiple employers versus only one employer. An employee who leaves one employer (part of our network) to go to another employer within our network, the employee would not be qualified due to not having continuous employment with the same employer. Is that accurate?

A. If the health system has an MMIS ID that is linked to the other employers within the health system, the employee will be eligible even if they transition to another employer within the same health system.

Please see response to *“Q. I am an employer with employees who support multiple MMIS ID’s across our organization, how should I report this employee in the HWB Portal?”* for additional information.

Q. Are management and supervisors, such as nursing, tech supervisors, dietary supervisors, that otherwise meet all eligible staff criteria eligible for bonuses?

A. Management and supervisors that also work under an eligible title and otherwise meet all criteria for eligibility may be eligible for the bonus. Management and supervisory responsibilities alone do not disqualify an employee from eligibility.

Q. Should State agencies use the online portal to apply for bonuses for their employees, and should State employees complete the employee attestation?

A. State employees should not complete the employee attestation included on this website. The process for payment of bonuses to eligible New York State employees are detailed in the Budget Bulletin issued by the Division of the Budget.

State agencies should not use this portal to apply for bonuses for their employees. The Budget Bulletin from the Division of the Budget provides comprehensive instructions to ensure eligible State employees are paid promptly.

Q. Who is responsible to claim for a Resident that vested during vesting period 1, but graduated in June/July 2022 and is no longer employed by the Employer they were with during vesting period 1?

A. The Qualified Employer that employed the Resident during vesting period 1 is responsible for claiming and paying the bonus. Employers *will* be able to submit claims for Vesting Period 1 during Vesting Period 2.

Please see *“Q. I am a qualified employer who was unable to complete my submission of qualified employees during a prior vesting period. Can I submit employees eligible for a bonus for Vesting Period 1 and/or 2 at a later date?”* under section Portal Registration and Claims Submission for more information.

Q. What payments and compensation are considered part of an employee’s base salary?

A. Base salary is defined to include an employee’s gross wages less any bonuses or overtime. Gross wages are defined under Labor Law Section 517 and 20 NYCRR § 2380.4.

Q. Does any additional pay outside of an employee's base salary count as bonus or overtime? For example, if a salaried employee picks up an additional shift at a different rate than their salary, is this considered overtime?

A. Overtime under the HWB program refers to any statutory overtime required to be compensated at 1 ½ times the regular rate of pay pursuant to New York State Minimum Wage Orders or the federal Fair Labor Standards Act (FLSA).

Q. Should I include unpaid leave or accruals in calculating Employee hours?

A. Employers should include any allowable leave or accruals that were used by the employee during the vesting period, whether or not the time off is paid or unpaid.

Q. Does an employee's title alone qualify them for a bonus? For example, an RN working in "Employee Health" unit and does not interact with patients that are general members of the public.

A. The "patient-facing" function or role of an eligible employee is only relevant for workers who qualify under the "All Other Health Care Support Workers" category in institutional settings. Registered Nurses, for example, are eligible for the bonus regardless of function with a Qualified Employer assuming the employee meets the other eligibility criteria.

Q. If an employee is out on disability receiving statutory disability pay, should this time be counted towards their hours worked?

A. Yes.

Portal Registration and Claims Submission

Q. I am an Employer with multiple MMIS IDs, which should I use to submit for the health care worker bonus?

A. Within the HWB Program Portal, a provider will have the ability to link an MMIS ID to a user account, the provider can then link other associated MMIS IDs to that user account. A provider will then have the ability to submit employees for the bonus based on the associated MMIS ID that best fits the employee's situation. Employers with multiple MMIS IDs should only use one MMIS ID on the HWB Portal system to claim bonus payments.

Q. Should Providers use their MMIS ID to register for the HWB Portal or their SFS Vendor ID?

A. Employers who are enrolled to receive payments from eMedNY and meet all other requirements to be eligible for the HWB Program, should utilize their New York State Medicaid Management Information System (MMIS) ID to register for the HWB Portal and claim for employees meeting the 20% Medicaid threshold, regardless of the status of their SFS ID.

Employers who are not enrolled to receive payments from eMedNY but meet all other requirements to be eligible for the HWB Program, should utilize their State Fiscal System (SFS) Vendor ID should refer to FAQs below.

A brief video on registration is available [here](#).

Q. Should I use an SFS ID to register on the HWB Portal?

A. If you are seeking to claim bonuses for eligible staff employed in programs that provide Medicaid services funded by: the Office for People with Developmental Disabilities (OPWDD), Office of Mental Health (OMH), Office for the Aging, and Office of Addiction Services and Supports (OASAS) you should utilize your Medicaid Management Information System number (MMIS ID) to submit claims for Medicaid services.

However, you should utilize your SFS ID to submit claims for eligible staff employed in programs that provide non-Medicaid services, or if you don't have a MMIS ID.

If you are not funded through the above agencies, you should utilize your Medicaid Management Information System (MMIS ID) number. You can verify your MMIS is active by calling the eMedNY Call Center at (800) 343-9000. Call center representatives are available from 8:00AM to 5:00PM, Monday through Friday.

Please note that the education and state operated facility portion of the bonus program will rollout in Fall. **If the above scenarios do not apply to you, you are likely not an eligible employer according to Part ZZ of Chapter 56 of the Law of 2022.**

Q. I operate under the Office of Mental Health (OMH) how do I obtain my SFS vendor ID?

A. To receive payments from NYS, entities are required to obtain access to the NYS Statewide Financial System (SFS) and have an SFS Vendor ID#.

To obtain an SFS Vendor ID#, please complete the Substitute W-9 Form found here [New York State Substitute Form W-9](#). Once completed please double check that the legal name and TIN fields are accurate, as discrepancies in these fields will cause processing delays. After you double check the information in the form, please send the signed form to OMHLocalAdminServices@omh.ny.gov for processing. Processing the form in the system should take about a week, and then you will receive your SFS user name and password by email. If you do not receive an email within 7 business days, please check your junk folder, and if it is not there, please contact OMHLocalAdminServices@omh.ny.gov for a status update.

After the login information is received, SFS functions as a self-service portal where banking information, additional users and additional addresses can be added. For information on the self-service functionality, please see the SFS vendor page found at <https://www.sfs.ny.gov/index.php/vendors> contact the SFS helpdesk at helpdesk@sfs.ny.gov or (518) 457-7717 or (855) 233-8363 toll-free.

Q. I operate under Office of Addiction Services and Supports (OASAS), how do I obtain my SFS ID?

A. To receive payments from NYS, entities are required to obtain access to the NYS Statewide Financial System (SFS) and have an SFS Vendor ID#.

To obtain an SFS Vendor ID#, please complete the Substitute W-9 Form found here [New York State Substitute Form W-9](#). Once completed please double check that the legal name and TIN fields are accurate, as discrepancies in these fields will cause processing delays. After you double check the information in the form, please send the signed form to the OASAS mailbox B1184Requests@oasas.ny.gov for processing. Processing the form in the system should take

about a week, and then you will receive your SFS username and password by email. If you do not receive an email within 7 business days, please check your junk folder, and if it is not there, please contact B1184Requests@oasas.ny.gov for a status update.

After the login information is received, SFS functions as a self-service portal where banking information, additional users and additional addresses can be added. For information on the self-service functionality, please see the SFS vendor page found Homepage (ny.gov) or contact the SFS helpdesk at helpdesk@sfs.ny.gov or (518) 457-7717 or (855) 233-8363 toll-free.

Q. I operate under Office for People with Developmental Disabilities (OPWDD), how do I obtain my SFS ID?

A. All OPWDD providers who receive payments other than Medicaid from NYS already have a Statewide Financial System (SFS) Vendor ID#. This is required for your agency to access SFS and receive payments. If you would like to confirm your SFS Vendor ID#, please contact central.operations@opwdd.ny.gov. Please use MH Worker Bonus in the subject of the email to ensure a timely response.

If you deliver non-Medicaid supports and services and don't already have an SFS Vendor ID#, you can obtain one by completing the [New York State Substitute W-9 Form](#). Once completed please double check that the legal name and TIN fields are accurate, as discrepancies in these fields will cause processing delays. After you double check the information in the form, please send the signed form to central.operations@opwdd.ny.gov for processing. Processing the form in the system should take about a week, and then you will receive your SFS username and password by email. If you do not receive an email within 7 business days, please check your junk folder, and if it is not there, please contact central.operations@opwdd.ny.gov for a status update.

After the login information is received, SFS functions as a self-service portal where banking information, additional users and additional addresses can be added. For information on the self-service functionality, please see the SFS vendor page found at: <https://www.sfs.ny.gov/index.php/vendors> or contact the SFS helpdesk at helpdesk@sfs.ny.gov or (518) 457-7717 or (855) 233-8363 toll-free.

Q. Will I receive a remittance advice or information on approved payments?

A. Providers/Employers will see the HWB bonus as a Lump Sum (HWB-HW Bonus) line item on their Medicaid remittance at the same time they normally receive their remittance for an eMedNY claim cycle, whether it's an electronic or a paper remittance. If they receive electronic remittances, they will see the remittance prior to receiving payment. If they receive a paper remit, the paper will accompany the remittance.

In addition, there may be information about the payment on the [HWB Program Portal](#).

Q. I am a qualified employer. Do we need to submit additional documents from employees to receive the HWB program bonus?

A. Employers are required to submit their qualified employees' data in a specified data format that will be provided by the department. All qualified Medicaid employers must maintain contemporaneous records tracking all claims submitted for no less than six (6) years. An

employer must furnish such records upon request to the department, the Office of Medicaid Inspector General (OMIG), the US Department of Health and Human Services (HHS) and the deputy attorney general for Medicaid Fraud.

Q. I am an Employer with eligible employees, what should I do next?

A. You will need to utilize the following web portal to make the claim. Please go to www.NYSWorkerBonus.com and begin reviewing important instructional information.

Providers enrolled in the NYS Medicaid (eMedNY) system:

Before you do so, please verify that you have an active Medicaid Management Information System (MMIS ID). You can verify your MMIS is active by calling the eMedNY Call Center at (800) 343-9000. Call center representatives are available from 8:00AM to 5:00PM, Monday through Friday.

Providers who are NOT enrolled in the NYS Medicaid (eMedNY) system:

If you do not have an MMIS ID, meaning you are not enrolled in the NYS Medicaid system, you will need to verify that you have a Statewide Financial System (SFS) ID.

The agencies with providers who may not be in NYS Medicaid (eMedNY) system may include: Office of Mental Health, Office for People With Developmental Disabilities, Office of Children and Family Services, Office of Addiction Services and Supports and the New York State Education Department. Once you have confirmed that you are actively enrolled or your SFS ID is active, you can prepare information for submission of reimbursement for eligible employees. More details, including a *Technical User Guide*, can be found within the [HWB Program Portal](#).

Education Sector Employers:

The healthcare worker bonus portal will open for education sector employers on October 1, 2022.

NOTE: Qualified employers that employ workers paid by the State ***should not*** claim through the HWB Program Portal and should instead work through their respective State agency for more details. See section [Education Sector Employers](#) for additional information.

Q. What should an eligible Medicaid employer do when they can't register with their Medicaid Management Information System (MMIS ID), or do not have an MMIS ID?

A. Please call the HWB Call Center at 1-866-682-0077. The operating hours are Monday through Friday, 8:00 AM until 5:00 PM.

Q. I am a qualified employer, what is the timeline for submitting for bonus payments for eligible employees?

A. Employers must submit claims for bonus payments within 30-days after the completion of each vesting period as defined by the schedule published by the Department. For the first vesting period, the 30-day claim filing deadline begins on the date the vesting schedule is published. Employers are required to pay bonuses within 30-days of receipt of payment on a claim for each qualified employee. Although employees may be eligible for vesting periods worked in the past (e.g. 10/1/21 to 3/31/22), the bonuses are not payable until the employer claims and receives payment. Advance payments are not permitted.

Q. I am a qualified employer may I keep any portion of the bonus payment?

A. No. A qualified employer shall not keep any portion of the bonus and any bonus amount not paid to an employee must be returned to the department.

Q. I am a qualified employer and have applied for health care worker bonuses on behalf of my qualified employee(s). I should have received the bonus payment for distribution, who can I call to check on the status of my payment?

A. You may log onto the [HWB Program Portal](#) and review the status of the claims submitted. If additional information is necessary, please call the HWB Call Center at 1-866-682-0077.

Q. I am a qualified employer. When will I be able to claim a bonus for my qualified employee(s)?

A. Please refer to the vesting schedule posted [here](#).

Q. Can you elaborate more on the vesting periods? Is it just any 6-month time period?

A. The “vesting period” is defined in SOS section 367-w(2)(d) as a six-month period between the dates of October 1, 2021 and March 31, 2024 included in a vesting schedule published by the Commissioner. Upon completion of six-months of consecutive employment by an employee with a qualified employer that ends within a vesting period established in the Vesting Schedule, the employer has thirty-days from the end of the vesting period to submit a claim for the bonus payment. See [Vesting Schedule](#).

Q. Is an employer required to provide a bonus to an otherwise eligible employee who has been terminated for cause, whether prior to or after the deadline for the employer’s payment of the bonus?

A. Employers may be obligated to pay former employees who are eligible and vested while in their employment. If the employee was terminated after the employer’s payment of the bonus, the employer is still required to pay the bonus to the employee. Please see **“Q. Are employers obligated to pay the HWB bonus to former employees?”** under section [Employee Separation](#).

Q. What is the employer’s obligation in relation to the bonus, if an employee is promoted within a vesting period from an eligible title to an ineligible title?

A. Upon completion of six-months of consecutive employment by an eligible employee with a qualified employer that ends within a vesting period established in the Vesting Schedule, the employer has thirty-days from the end of the vesting period to submit a claim for the bonus payment. See the [Vesting Schedule](#).

Q. How much is the bonus to which eligible employees are entitled?

A. Employers will pay bonus amounts to qualified employees based on the number of hours worked during the vesting period.

- Qualified employees who work at least 20 hours but no more than 30 hours per week are eligible for a bonus of \$500.
- Qualified employees who work at least 30 hours but no more than 35 hours per week are eligible for a bonus of \$1,000.
- Qualified employees who work at least 35 hours per week are eligible for a bonus of \$1,500.

A qualified employee is eligible for only two vesting periods per employer in an amount equal but not greater than \$3,000 across all employers.

Q. I am an employer with multiple facilities and MMIS ID's. Can I register them together?

A. The HWB Portal is designed to allow multi-site entities with multiple MMIS ID's to register all associated MMIS ID's under a single account. There is no limit on the number of MMIS ID's an employer can register to an account. Reimbursement from eMedNY will be made to the account (EFT)/location (paper check) designated by each MMIS ID registered under that account.

Separately, entities with multiple MMIS ID's do have the option should they choose of using a single MMIS for all employee bonus claims.

Q. I am an employer with employees who support multiple MMIS ID's across our organization, how should I report this employee in the HWB Portal?

A. Employees should be submitted once under the MMIS ID where the employee worked the majority of hours in the vesting period. The hours worked at other MMIS ID's should be included in the single submission. Multiple submissions for the employee by the same organization will result in system rejections for duplication.

Large employers with employees who work across multiple tax IDs within (or directly affiliated to) their health system should consider those employees as vested/eligible if they met all the eligibility requirements and were employed for the entire vesting period by the health system. The health system should claim these employees under the applicable tax ID where the employee worked the majority of the time during the applicable vesting period.

Q. I am an employer with an employee that has both an SSN and ITIN, which should I use?

A. Employers should never submit separate claims with the ITIN on one and SSN on the other. An ITIN should only be submitted when the employee does not have a valid SSN.

Q. Will employers be notified when payments will be made out of SFS and eMedNY and will a remittance be provided?

A. The HWB Portal will notify employers when payment information is available and offer an employee-level remittance for employers.

Q. As an employer, once I receive payment from SFS or eMedNY, what are my obligations?

A. Employers must reimburse their eligible employees within 30 days of receipt of the HWB payment from the state. Employers have no requirement to release the bonus payments as separate checks, so long as they bonus payment is identifiable to the employee and can be verified on audit.

Q. I am a qualified employer who was unable to complete my submission of qualified employees during a prior vesting period. Can I submit employees eligible for a bonus for Vesting Period 1 and/or 2 at a later date?

A. Providers/Employers who were not able to or did not complete submission of qualified employees within 30 days of the end of the Vesting Period when the employee was eligible are able to file a late submission.

Employers **will** be able to submit claims for any prior vesting period during any submission period. For example, during Submission Period 5, employers will be permitted to submit claims for any of the five Vesting Periods.

- Employers should make every attempt to submit claims as soon as the employee is eligible.
- Employers must validate that employee(s) met all other qualifying criteria during the respective vesting period.
- This flexibility does not change the criteria that a qualified employee is eligible for only two vesting periods per employer in an amount equal but not greater than \$3,000 across all employers.

Please be advised that, in accordance with SOS § 367-w(4)(f), claims submitted more than 30 days after the respective Vesting Period are technically late for filing purposes. All Employers should document and retain information regarding the reason for any late submission for audits and investigation purposes relating to the submission of claims for the HWB Program.

Employee Separation

Q. Are employers obligated to pay the HWB bonus to former employees?

A. Employers may be obligated to pay former employees that are eligible and vested while in their employment provided that the employee did not terminate his or her employment with the employer prior to the due date for payment of the bonus. The following table shows when the employer must provide the bonus payment.

Separation Facts	Employee is eligible	Employee is not eligible
The employee vested, was employed at the time of the claim, and the employee continues to be employed when the employer receives the bonus payment.	✓	
The employee vested, was employed at the time of the claim, and stays with the employer for at least 30 days after the employer received the bonus payment. The employer fails to pay the bonus within 30 days of receipt, then the employee leaves.	✓	
The employee vested and before the employer submits a claim the employee is terminated by the employer.	✓	
The employee vested, was employed at the time of the claim, and then the employee is terminated by the employer.	✓	
The employee vested but the employee quits the employer prior to the bonus being claimed.		✓
The employee vested, was employed at the time of the claim but the employee left before the employer receives the bonus payment.		✓

The employee vested, was employed at the time of the claim and when the employer received the payment, but the employee leaves less than 30 days after the employer received the payment.		✓
The employee vested, was employed at the time of the claim and when the employer received the payment, and the employee leaves less than 30 days after the employer received the payment but after the employer pays the bonus.	✓	

Q. If an employee retires, are they entitled to a bonus payment?

A. An employee retirement is analogous to the employee quitting or leaving their employer. See the above table for guidance on whether the employee is entitled to the bonus payment depending upon when they separated from the employer.

Q. If an employee passes away, is the employee or the employee's estate entitled to a bonus payment?

A. When an employee passes away, the employment relationship ends similar to when the employee quits or leaves their employer. See the above table for guidance on whether the employee or the employee's estate is entitled to the bonus payment depending upon when the employment relationship ends.

Enforcement

Q. Will the employer's determination of employee eligibility be subject to review?

A. Yes. SOS §367-w (3)(d) requires employers to maintain contemporaneous records to substantiate claims submitted and such records must be submitted upon request to the Department, OMIG, DOL, HHS and MFCU. SOS §367-w (5) permits OMIG, in consultation with the Department, to conduct audits, investigations, and reviews of employers submitting claims for the HWB.

Q. What if I am a qualified employer but do not apply for the bonus on behalf of my eligible employees?

A. If a qualified employer fails to identify, claim, or pay a bonus to an eligible employee they are subject to sanction, up to and including exclusion from the Medicaid program, and may be subject to penalty. See SOS §367-w (5).

Q. What happens if an employer mistakenly applied for an employee who is not qualified for the bonus or applies for a larger value bonus than the employee should have received?

A. If the employer receives a bonus for an employee who is not eligible to receive a bonus or an amount in excess of what the employee is qualified for that bonus amount must be returned to the Department. An employer is not entitled to retain any portion of the bonus payment.

Q. What if an employer fails to pay a HWB claimed and received on behalf of an eligible employee?

A. Any employer who fails to pay any part of the bonus payment to a designated employee shall remain liable to pay that bonus to the eligible employee regardless of any sanction or penalty OMIG may impose. See SOS §367-w (5)(c).

Q. If an employer improperly claims and pays a bonus to an ineligible employee will OMIG recover the payment from the employee?

A. No. All recovery of inappropriately paid bonus payments shall be recovered from the employer and the employer does not have the right to recover any inappropriately paid bonus from the employee. See SOS §367-w (5)(d).

Employee Help

Q. I am an employee and did not receive my health worker bonus, but believe I am eligible. What should I do?

A. First, please review these Q&A and the HWB webpage to see if you may be an eligible Employee. If you think you meet the criteria AND you worked for an entire vesting period, you may be entitled to an HWB bonus payment. Employers are responsible for determining which employees are eligible for the bonus. Therefore, you are encouraged to work with your employer to see if a resolution can be reached. Please note that your Employer has **about 90 days** after the end of your vesting period to pay you the bonus.

As such, you should first contact your employer and ask why you were not submitted for the bonus. If you believe your employer made a mistake in their determination of your eligibility, and the period for submitting claims is still open, please attempt to resolve the matter with your employer.

The Office of the Medicaid Inspector General (OMIG) has developed a process for employees to submit allegations that their employer has not complied with the requirements of the Healthcare Worker Bonus program. If you cannot reach a resolution with your employer, and wish to file an allegation, you will be required to complete a form that includes (1) your title, (2) your period of employment and average hours worked during the applicable vesting period, (3) your earnings excluding bonuses and overtime, and other pertinent information.

Process to File an Allegation:

- Please click [Health Care Worker Bonus Employee Inquiry](#) for the form that needs to be filled out and submitted to OMIG.
- Please click [Healthcare Worker Bonus Employee Inquiry Form Instructions](#) for instruction on how to complete each section of the Healthcare Worker Bonus Employee Inquiry Form.

If you have questions related to submitting the Healthcare Worker Bonus Employee Inquiry Form, or related to a submitted inquiry, please send an email to bmfahwb@omig.ny.gov or call (518) 402-6231.

Q. Can an Employer take back a HWB bonus payment from an Employee?

A. No. Once an Employer pays a bonus to an Employee under the HWB program, the Employer may not take back any portion of that bonus payment from the Employee, *even if* the claim is

determined inappropriately paid and recovered by the Office of Medicaid Inspector General (OMIG). See SOS § 367-w(5)(d). If an Employer pays a bonus under the HWB program, and then attempts to take back any portion of the bonus payment from the Employee, the Employee should contact the **New York State Department of Labor** at **(888) 469-7365**.

Help and Support

Q. How do I contact the State if I have any questions or concerns on the HWB Program?

A. The fastest way to obtain an answer is to review the published guidance and FAQs the Department has posted to its website:

- [HWB Program Website and Guidance](#)
- [HWB Program Frequently Asked Questions \(FAQs\)](#)

If your specific inquiry is not addressed in the provided guidance, The Department is committed to updating the information as new questions come in and are answered. To this end, the Department has established an email address, NYSWorkersBonus@health.ny.gov, dedicated to the HWB program. Please direct your inquiry to this inbox to make sure your questions are received and processed.

If your question is pertaining to the online claim's portal and technical assistance questions on how to submit your claims, The Department has established the **HWB Program Call Center which can be reached at 1 (866) 682-0077**. Operating hours are Monday through Friday, 8:00 AM until 5:00 PM.

Q. How do I stay informed of changes or updates to this and other programs? And how do I sign up for Provider ListServ to ensure I have up to date information?

A. The [HWB Program Portal](#) will be updated regularly with program updates and/or the most up to date information for employers. Please visit the [eMedNY ListServ page](#) to subscribe to applicable Listservs.

Q. How can I find more information regarding the Healthcare Worker Bonus (HWB) Program and Claim Portal?

A. Please visit the [HWB Program Portal](#). For additional questions please contact the HWB Program Call Center at 1 (866) 682-0077. The operating hours are Monday through Friday, 8:00 AM until 5:00 PM. Additional information is also provided on the [Department of Health HWB Program website](#).



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
OFFICE OF THE EXECUTIVE
112 STATE STREET, ROOM 1200
ALBANY, NEW YORK 12207-2021
(518) 447-7040 - FAX (518) 447-5589
WWW.ALBANYCOUNTY.COM

MICHAEL P. MCLAUGHLIN, JR.
DEPUTY COUNTY EXECUTIVE

May 14, 2024

Honorable Joanne Cunningham, Chairwoman
Albany County Legislature
112 State Street, Room 710
Albany, New York 12207

Dear Chairwoman Cunningham:

The Department of Management and Budget is requesting a no cost extension through December 31, 2025 to for the renewal of LEAD Funding allocated to sub-recipient Catholic Charities. This is a no-cost extension because the 2022 LEAD Funding is funded by an encumbrance since the funds were added to the 2023 budget.

If you have any questions about this request, please do not hesitate to contact me.

Sincerely,

Daniel P. McCoy
Albany County Executive

cc: Hon. Dennis A. Feeney, Majority Leader
Hon. Frank A. Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



County of Albany

Harold L. Joyce
Albany County Office
Building
112 State Street - Albany,
NY 12207

Legislation Text

File #: TMP-5511, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

Catholic Charities contract renewal for Law Enforcement Assisted Diversion (LEAD) funding from the \$300,000 2023 New York State Legislative Initiative Funding Grant of which \$234,699 allocated to Catholic Charities to continue to carry out services to the LEAD program...body

Date: 5/28/2024
Department: Management & Budget
Attending Meeting: Kate Pauly
Submitted By: Kate Pauly
Title: Grants Specialist
Phone: 518-447-7029

Purpose of Request: Contract Authorization Enter text.

CONTRACT TERMS/CONDITIONS:

Party Names and Addresses:

Catholic Charities
40 North Main Ave. Albany, NY 12203

Term: (Start/end date or duration) January 1, 2024- December 31, 2025
Amount/Raise Schedule/Fee: \$234,999

BUDGET INFORMATION:

Is there a Fiscal Impact: Yes ☐ No ☒
Anticipated in Budget: Yes ☒ No ☐
Spreadsheet attached: Yes ☐ No ☐

Source of Funding - (Percentages)

Federal: 100% County: Enter text.
State: Enter text. Local: Enter text.

County Budget Accounts:

Revenue Account and Line: A4322
Revenue Amount: \$234,699
Appropriation Account and Line: A4322.44092.LIF23
Appropriation Amount: \$234,699

ADDITIONAL INFORMATION:

Mandated Program/Service:	Yes ☐ No ☐
If Mandated, Cite Authority:	Enter text.
Request for Bids / Proposals:	
Competitive Bidding Exempt:	Yes ☐ No ☐
# of Response(s):	Enter text.
# of MWBE:	Enter text.
# of Veteran Business:	Enter text.
Bond Resolution No.:	Enter text.
Apprenticeship Program	Yes ☐ No ☐

Previous requests for Identical or Similar Action:

Resolution/Law Number and Date: 2023-596, signed 12/4/2023

DESCRIPTION OF REQUEST: Catholic Charities contract renewal for Law Enforcement Assisted Diversion (LEAD) funding from the \$300,000 2023 New York State Legislative Initiative Funding Grant of which \$234,699 allocated to Catholic Charities to continue to carry out services to the LEAD program.

RESOLUTION NO. 596

AUTHORIZING THE ACCEPTANCE OF FUNDING FROM NEW YORK STATE REGARDING THE LAW ENFORCEMENT ASSISTED DIVERSION PROGRAM IN ALBANY COUNTY AND AMENDING THE 2023 ALBANY COUNTY BUDGET

Introduced: 12/4/23

By Audit and Finance Committee:

WHEREAS, The Commissioner of the Department of Management and Budget has been notified that \$300,000 in funding is available from New York State in support of the Law Enforcement Assisted Diversion (LEAD) Program, and

WHEREAS, The Commissioner has requested authorization to accept said funding in support of the LEAD Program throughout Albany County and that there is no end date associated with such funds, now, therefore, be it

RESOLVED, By the Albany County Legislature that the County Executive is authorized to accept said funding from the New York State Assembly regarding the Law Enforcement Assisted Diversion Program in the amount of \$300,000 and that there is no end date associated with such funds, and, be it further

RESOLVED, That the 2023 Albany County Budget is hereby amended as follows:

Create and Increase Revenue Account A4322 0 3398 LIF23 LEAD Funding NYS by \$300,000

Increase Appropriation Account A4322.4 by \$300,000 by increasing line item A4322 4 4092 LIF23 LEAD Funding by \$300,000

and, be it further

RESOLVED, That the County Attorney is authorized to approve said agreement as to form and content, and, be it further

RESOLVED, That the Clerk of the County Legislature is directed to forward certified copies of this resolution to the appropriate County Officials.

Adopted by unanimous vote – 12/4/23

State of New York
County of Albany

This is to certify that I, the undersigned, Clerk of the Albany County Legislature, have compared the foregoing copy of the resolution and/or local law with the original resolution and/or local law now on file in the office, and which was passed by the Legislature of said County on the 4th day of December, 2023, a majority of all members elected to the Legislature voting in favor thereof, and that the same is a correct and true transcript of such original resolution and/or local law and the whole thereof.



IN WITNESS THEREOF, I have hereunto set my hand and the official seal of the County Legislature this 4th day of December, 2023.

A handwritten signature in cursive script, reading "Teresa Chamberlain", is written over a horizontal line.

Clerk, Albany County Legislature

Albany LEAD Budget, 2023-2025: Summary

<u>Function</u>	EXPENSES			<u>3-Year Totals</u>
	<u>2023</u>	<u>2024</u>	<u>2025</u>	
Case Management	443,933	512,573	527,055	1,483,561
Project Management	270,116	277,885	285,931	833,931
Clinical Support Initiative, ACDMH	-	175,000	181,000	356,000
Community Engagement	85,055	85,961	88,362	259,378
Albany Police Department	48,763	50,226	51,733	150,722
Albany County District Attorney	47,247	47,247	47,247	141,741
Albany County Performance Reporting	10,080	10,382	10,694	31,156
Evaluation and Research	80,000	83,000	83,000	246,000
TOTAL EXPENSES (including in-kind) *	985,194	1,242,274	1,275,021	3,502,490
TOTAL EXPENSES (excluding in-kind) *	902,473	1,144,802	1,176,042	3,210,027

<u>Source</u>	RESOURCES			
	<u>2023</u>	<u>2024</u>	<u>2025</u>	
2020 COSSAP Grant	221,289	-	-	221,289
2022 COSSAP Grant	132,219	382,868	392,614	907,701
2022 New York State Grant	280,965	9,035		290,000
LEAD Support Bureau Grant	75,000	-	-	75,000
Albany County Support	60,000	-	-	60,000
City of Albany Support	60,000	-	-	60,000
Health Research Inc. /Bridge Clinic Grant	73,000	73,000	73,000	219,000
TOTAL	902,473	464,903	465,614	1,832,990

PROJECTED SURPLUS OR (GAP)

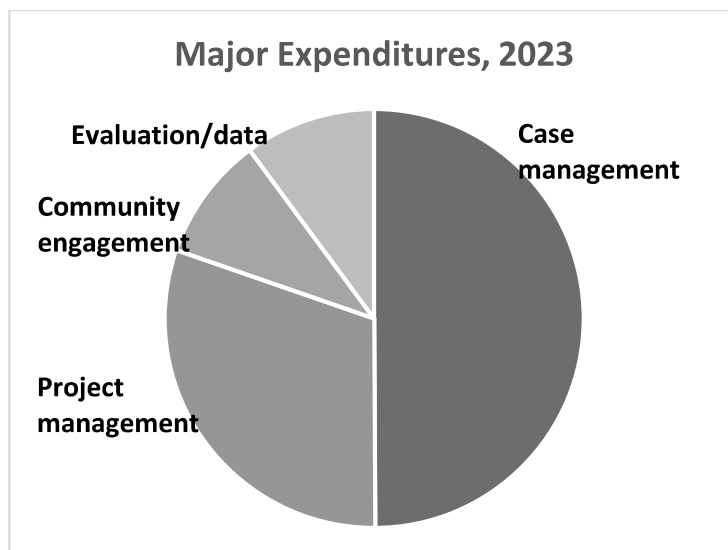
	<u>2023</u>	<u>2024</u>	<u>2025</u>
Gap including cost of in-kind services**	(82,721)	(659,372)	(809,407)
Gap excluding cost of in-kind services	-	(741,899)	(710,427)

Notes:

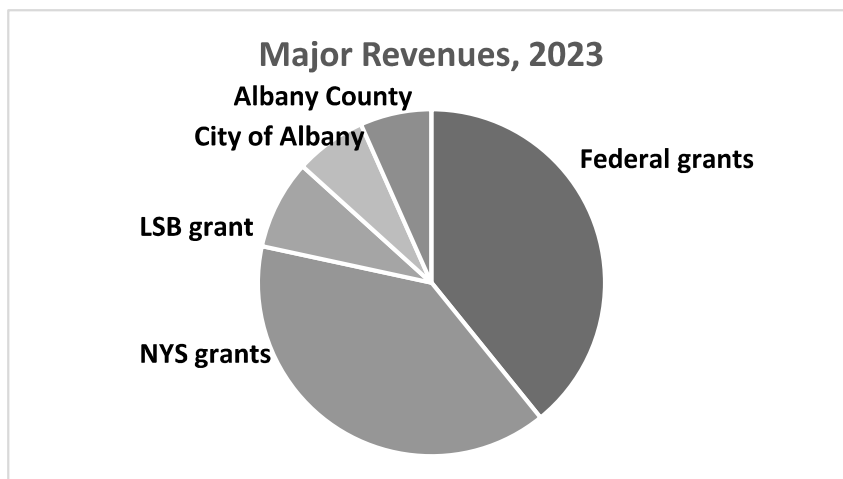
*In-kind services include estimates of certain costs for the Albany Police Department and Albany County District Attorney's Office; figures on other unreimbursed costs are not currently available.

The 2022 COSSAP Grant totals \$1.26 million, of which \$308,000 is tentatively budgeted for expansion jurisdictions.

Case Management	443,933
Project Management	270,116
Community Engagement	85,055
Evaluation/Data Analysis	90,080



Federal grants	353,508
New York State grants	353,965
LEAD Support Bureau grant	75,000
City of Albany	60,000
Albany County	60,000



Albany LEAD/Albany County LEAD Uses of 2022 COSSAP Grant

<u>Function</u>	<u>2023</u>	<u>2024</u>	<u>2025</u>	3-Year Totals
Case Management (all jurisdictions)	42,139	191,542	197,214	430,895
Clinical Support Initiative, ACDMH	-	175,000	181,000	356,000
Evaluation and Research	80,000	83,000	83,000	246,000
Project Management (Cohoes-Watervliet)	42,750	53,426	55,029	151,205
Albany County Performance Reporting	10,080	10,382	10,694	31,156
Travel/Conferences	6,000	6,000	6,000	18,000
TOTAL	180,969	519,351	532,936	1,233,256

Note: Full value of 2022 COSSAP grant is \$1,260,648; allocation of remaining \$27,392 to be determined.

Albany LEAD/Albany County LEAD Uses of 2022 New York State Grant

<u>Function</u>	<u>2023</u>	
Case Management (Albany)	113,794	-
Project Management (Albany)	102,116	
Community Engagement (all jurisdictions)	75,055	
TOTAL	290,965	
<i>Remaining to be used in 2024:</i>	9,035	

Note: Albany County LEAD budget appears in separate document.

Albany LEAD Budget: Case Management

	2023	2024	2025
Expenses			
<u>Personnel</u>			
Case Manager salary	42,627	43,906	45,223
Case Manager salary	42,627	43,906	45,223
Case Manager salary	42,627	43,906	45,223
Case Manager salary	42,627	43,906	45,223
Case Manager salary (to be added during 2023)*	31,970	43,906	45,223
Case Manager salary (to be added during 2024)	-	44,346	45,676
Case Management supervisor (25%)**	9,846	10,142	10,446
Case Management data analyst (40%)	21,200	21,836	22,491
LEAD Coordinator salary	52,514	54,089	55,712
Program Director salary (5%)	3,061	3,152	3,247
Executive Director salary (15%)	12,000	12,360	12,731
<i>Total Salaries</i>	301,099	310,132	319,436
<i>Total Fringe Benefits @ 33%</i>	99,363	102,344	105,414
Total Personnel	400,462	467,798	481,832
<u>OTPS</u>			
Supplies/equipment	4,777	4,920	4,970
Phone/internet	3,491	3,596	3,632
Travel/training/AAA	10,106	10,409	10,513
Rent	6,800	7,004	7,074
Total OTPS	25,174	25,929	26,189
Agency Admin.	18,297	18,846	19,034
Total Expenses	443,933	512,573	527,055
Resources			
2020 COSSAP Grant	80,000	-	-
2022 COSSAP Grant***	42,139	114,486	117,920
2022 New York State Grant	113,794		
LEAD Support Bureau Grant	75,000	-	-
City of Albany CDBG-CV Grant	60,000		
Bridge Clinic Grant (LEAD Coordinator)	73,000	73,000	73,000
Total Resources	443,933	187,486	190,920
Gap (Total Expenses - Total Resources)	-	(325,088)	(336,135)

Notes on Expenses:

Staffing levels assume 25 clients per case manager. Increase in caseloads would require additional staffing.

Additional case manager positions depend on overall client caseload.

* Fifth case manager and part-time case management supervisor positions are assumed to start in April 2023.

** 25% time case management supervisor position is shared with 25% time position in LEAD expansion jurisdictions, budgeted separately.

*** 2022 COSSAP grant resources support salaries for Case Management Supervisor and Data Analyst, plus 50% expected costs for fringe benefits and OTPS. Support for additional Case Manager begins in 2024.

Notes on Resources:

Bridge Clinic Grant is expected to be renewed annually.

Albany LEAD Budget: Project Management

	2023	2024	2025
Expenses			
<u>Personnel Expenses</u>			
Co-Project Manager salary	83,000	85,490	88,055
Co-Project Manager salary	83,000	85,490	88,055
<i>Total Salaries</i>	166,000	170,980	176,109
<i>Total Fringe Benefits</i>	49,800	51,294	52,833
Total Personnel	215,800	222,274	228,942
<u>NPS Expenses</u>			
20% Admin. (Equipment, supplies etc.)	43,160	44,455	45,788
Communications/social media	9,000	9,000	9,000
COSSAP conference	2,156	2,156	2,200
Total NPS	54,316	55,611	56,988
Total Expenses	270,116	277,885	285,931
Resources			
2020 COSSAP Grant	108,000	-	-
2022 COSSAP Grant	-	-	-
2022 New York State Grant	102,116	-	-
City of Albany support	-	-	-
Albany County support	60,000	-	-
Total Resources	270,116	-	-
Gap (Total Expenses - Total Resources)	-	(277,885)	(285,931)

Notes on Resources:

Project manager salary figures reflect 4% increase in 2023 per PDA and 3% annual increases thereafter.

Albany LEAD Budget: Clinical Support, Albany County Department of Mental Health

	2023	2024	2025
Expenses			
<u>Personnel Expenses</u>			
Clinical Social Worker	-	65,000	67,000
<i>Total Salaries</i>	-	65,000	67,000
<i>Total Fringe Benefits</i>	-	26,000	26,000
Total Personnel	-	91,000	93,000
<u>NPS Expenses</u>			
Contractual Psychiatric Services	-	84,000	88,000
Total NPS	-	84,000	88,000
Total Expenses	-	175,000	181,000
Resources			
2022 COSSAP Grant	-	175,000	181,000
Total Resources	-	175,000	181,000
Gap (Total Expenses - Total Resources)	-	-	-

Albany LEAD Budget: Community Engagement

	2023	2024	2025
Expenses			
<u>Personnel</u>			
Community Engagement Coordinator salary	60,000	61,800	63,654
<i>Total Salaries</i>	60,000	61,800	63,654
<i>Total Fringe Benefits @ 22%</i>	13,200	13,596	14,004
Total Personnel	73,200	75,396	77,658
<u>OTPS</u>			
Community Leadership Team expenses	4,500	4,635	4,774
Supplies/equipment	2,495	1,070	1,070
Travel	1,560	1,560	1,560
Rent	3,300	3,300	3,300
Total OTPS	11,855	10,565	10,704
Total Expenses	85,055	85,961	88,362
Resources			
2020 COSSAP Grant	20,000	-	-
2022 New York State Grant	65,055	-	-
Total Resources	85,055	-	-
Gap (Total Expenses - Total Resources)	-	(85,961)	(88,362)

Notes on Expenses:

Expenses for community engagement coordinator are estimates based on Center for Law and Justice experience and may be adjusted.

CLT expenses may include stipends, meeting costs e.g., child care, refreshments) and others.

Albany LEAD Budget: Albany Police Department

	2023	2024	2025
Expenses			
Overtime (900 hours per year)	48,763	50,226	51,733
Total LEAD Expenses	48,763	50,226	51,733
Resources			
2020 COSSAP Grant	13,289	-	-
Total Resources	13,289	-	-
Gap (Total Expenses - Total Resources)	(35,474)	(50,226)	(51,733)

Notes on Expenses:

Expenses not funded by COSSAP grant represent in-kind contributions by APD and the City of Albany. 2024 and 2025 figures reflect 3% annual increases.

Albany LEAD Budget: Albany County District Attorney's Office

	2023	2024	2025
Expenses			
LEAD-related personnel costs (partial)	47,247	47,247	47,247
Total LEAD Expenses	47,247	47,247	47,247
Resources			
Total Resources	-	-	-
Gap (Total Expenses - Total Resources)	47,247	47,247	47,247

Notes on Expenses:

Expenses represent in-kind contributions
by the Albany County District Attorney's office and Albany County.

Albany LEAD Budget: Albany County Performance Reporting

	2023	2024	2025
Expenses			
<u>Personnel</u>			
Data analyst 12%	7,200	7,416	7,638
<i>Total Salaries</i>	7,200	7,416	7,638
<i>Total Fringe Benefits @ 22%</i>	2,880	2,966	3,055
Total Personnel	10,080	10,382	10,694
 Total Expenses	 10,080	 10,382	 10,694
 Resources			
2022 COSSAP Grant	10,080	10,382	10,694
Total Resources	10,080	10,382	10,694
 Gap (Total Expenses - Total Resources)	 -	 -	 -

Albany LEAD Budget: Evaluation

	2023	2024	2025
Expenses			
Evaluation - Dr. Udo/SUNY RF	80,000	83,000	83,000
Total LEAD Expenses	80,000	83,000	83,000
Resources			
2022 COSSAP Grant	80,000	83,000	83,000
Total Resources	80,000	83,000	83,000
Gap (Total Expenses - Total Resources)	-	-	-



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
DEPARTMENT OF PUBLIC WORKS
449 NEW SALEM ROAD
VOORHEESVILLE, NEW YORK 12186-4826
(518) 765-2055 - FAX (518) 447-7047
www.albanycountyny.gov

LISA M. RAMUNDO
COMMISSIONER

May 16, 2024

Hon. Joanne Cunningham, Chairwoman
Albany County Legislature
112 State Street, Rm. 710
Albany, NY 12207

Dear Chairwoman Cunningham,

The Department of Public Works is requesting the Legislature's funding authorization in the amount of \$1,000,000 to finance Paving-Other than Roadways. This project will pave County owned parking lots and other County owned areas in need of paving that are not roadways. Projects include, but are not limited to, paving the Cornell Cooperative Extension and Parks and Recreation parking lots. The project also includes sidewalk and ADA improvements where necessary.

If there are any questions or further information is needed, please feel free to contact my office.

Sincerely,

Lisa M. Ramundo
Commissioner

cc: Hon. Dennis Feeney, Majority Leader
Hon. Frank Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



County of Albany

Harold L. Joyce
Albany County Office
Building
112 State Street - Albany,
NY 12207

Legislation Text

File #: TMP-5535, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

Financing Authorization Request for Paving-Other than Roadways

Date: 05.24.24
Department: Public Works
Attending Meeting: Lisa M. Ramundo
Submitted By: Rosa Maria Tirino
Title: Director of Operations
Phone: 518.655.7919

Purpose of Request: Other (State if not Listed) Financing Authorization Request

CONTRACT TERMS/CONDITIONS:

Party Names and Addresses:
Enter text.

Term: (Start/end date or duration) Enter text.
Amount/Raise Schedule/Fee: Enter text.

BUDGET INFORMATION:

Is there a Fiscal Impact: Yes ☒ No ☐
Anticipated in Budget: Yes ☒ No ☐
Spreadsheet attached: Yes ☐ No ☒

Source of Funding - (Percentages)

Federal: Enter text. County: 100%
State: Enter text. Local: Enter text.

County Budget Accounts:

Revenue Account and Line: Enter text.
Revenue Amount: Enter text.
Appropriation Account and Line: Enter text.
Appropriation Amount: \$1,000,000.00

ADDITIONAL INFORMATION:

Mandated Program/Service: Yes ☐ No ☒
If Mandated, Cite Authority: Enter text.
Request for Bids / Proposals:

Competitive Bidding Exempt:	Yes ☐ No ☐
# of Response(s):	Enter text.
# of MWBE:	Enter text.
# of Veteran Business:	Enter text.
Bond Resolution No.:	Enter text.
Apprenticeship Program	Yes ☐ No ☐

Previous requests for Identical or Similar Action:

Resolution/Law Number and Date: Enter text.

DESCRIPTION OF REQUEST: (state briefly why legislative action is requested)

The Department of Public Works is requesting the Legislature's funding authorization in the amount of \$1,000,000 to finance Paving-Other than Roadways. This project will pave County owned parking lots and other County owned areas in need of paving that are not roadways. Projects include, but are not limited to, paving the Cornell Cooperative Extension and Parks and Recreation parking lot. The project also includes sidewalk and ADA improvements where necessary.

2023

3 Tandem dumps

2 Road mowers

\$650,000

\$250,000

2023-2027 Vehicle replacement plan

D - DM Fund Public Works Capital Projects

Road Rehabilitation From CR155 to SR7

Project Number: D2501

Debt Account: _____

This project includes rehabilitation of Albany Shaker Road between Watervliet Shaker Rad and SR7.
 Project Description: Pavement rehabilitation, signal upgrades and drainage improvements are included in this project.

Amendment(s): _____

Project Status: 1 New Existing Amended Continual Completed

Authorized Funding	Pre-2024	2024	2025	2026	2027	2028	2029	Total
County			0.350		4.000			4.350
NY State								-
Federal								-
Other								-
Total Project Cost	-	-	0.350	-	4.000	-	-	4.350

Paving - Other than Roadways

Project Number: D2502

Debt Account: _____

This project will pave County owned parking lots and other County owned areas in need of paving that are not roadways. The project also includes sidewalk and ADA improvements where necessary.

Amendment(s): _____

Project Status: 1 New Existing Amended Continual Completed

Authorized Funding	Pre-2024	2024	2025	2026	2027	2028	2029	Total
County		1.000	0.250					1.250
NY State								-
Federal								-
Other								-
Total Project Cost	-	1.000	0.250	-	-	-	-	1.250

Various Traffic Signal Upgrades

Project Number: D2503

Debt Account: _____

This project will evaluate existing County owned traffic and pedestrian signals and design, purchase and install any necessary upgrades.

Amendment(s): _____

Project Status: 1 New Existing Amended Continual Completed

Authorized Funding	Pre-2024	2024	2025	2026	2027	2028	2029	Total
County			0.250					0.250
NY State								-
Federal								-
Other								-
Total Project Cost	-	-	0.250	-	-	-	-	0.250

Public Works Summary of All Projects

Project Status: 3 New 3 Existing 15 Amended 2 Continual 0 Completed

COUNTY OF ALBANY

REQUEST FOR BIDS ALBANY COUNTY DEPARTMENT OF PUBLIC WORKS



RFB #2024-064

**MILLING AND ASPHALT PAVING, CURB AND SIDEWALK
CONSTRUCTION AT THE CORNELL COOPERATIVE
EXTENSION
PROJECT NO. 24-C586**

**ALBANY COUNTY DEPARTMENT OF GENERAL SERVICES
PURCHASING DIVISION
PAMELA O'NEILL, PURCHASING AGENT
112 STATE STREET, ROOM 1000 ALBANY, NY 12207**

**COUNTY OF ALBANY
DEPARTMENT OF GENERAL SERVICES PURCHASING DIVISION
112 STATE STREET, ROOM 1000, ALBANY, NY 12207
TELEPHONE: 518-447-7140/ FAX: 518-447-5588**

TITLE: Milling and Asphalt Paving, Curb and Sidewalk Construction at the Cornell Cooperative Extension

RFB NUMBER: 2024-064

Receipt Confirmation Form

Please complete and return this confirmation form as soon as possible:

Pamela O'Neill
Purchasing Agent
County of Albany
112 State Street, Room 1000
Albany, NY 12207

**IF YOU PLAN TO SUBMIT A BID, YOU MUST RETURN
THIS FORM TO ENSURE THAT YOU WILL RECEIVE ALL
FURTHER COMMUNICATION REGARDING THIS RFB.**

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____

Title: _____

Phone Number: _____ Fax Number: _____ E-Mail: _____

If a Bidders/Proposers meeting has been arranged for this Bid/RFP, please indicate if you plan to attend: ☐
Yes / ☐ No

I authorize the County of Albany to send further correspondence that the County deems to be of an urgent nature by the following method (check):

Fax Number: _____ E-Mail: _____

NOTICE TO BIDDERS -- ALBANY COUNTY
REQUEST FOR BIDS #2024-064

Sealed Bids for **Milling and Asphalt Paving, Curb and Sidewalk Construction at the Cornell Cooperative Extension** as requested by Albany County Department of Public Works, will be received by the Albany County Purchasing Agent, Room 1000, 112 State Street, Albany, New York 12207 until 4:30 PM, local time on Thursday, May 23, 2024.

Request for Bid (RFB) documents may be obtained at the office of the Albany County Purchasing Agent, as noted above. RFB documents may be available for download from the Empire State Bid System website at <http://www.empirestatebidsystem.com>, starting by close of business (4:30 p.m.) on Thursday, May 9, 2024.

Pamela O'Neill
Purchasing Agent

Dated: May 2, 2024
Albany, New York

PUBLISH ONE DAY – Thursday, May 9, 2024 -- THE EVANGELIST
PUBLISH ONE DAY – Thursday, May 9, 2024 -- THE TIMES UNION

COUNTY OF ALBANY
REQUEST FOR BIDS
GENERAL INSTRUCTIONS TO BIDDERS

BID DISTRIBUTION- *IMPORTANT NOTICE*

The County of Albany officially distributes bidding documents through the Purchasing Division Office or through the Empire State Bid System website at <http://www.empirestatebidsystem.com>. Copies of bidding documents obtained from any other source are not considered official documents. Only those vendors who obtain bidding documents from either the Purchasing Division Office or the Empire State Bid System are guaranteed to receive addendum information, if such information is issued.

If you have obtained this document from a source other than the Albany County Purchasing Division or the Empire State Bid System, it is strongly recommended that you obtain an official copy.

SECTION 1: BID IDENTIFICATION

- 1.1 Title: **MILLING AND ASPHALT PAVING, CURB AND SIDEWALK CONSTRUCTION AT THE CORNELL COOPERATIVE EXTENSION**
- 1.2 Requesting Department: **DEPARTMENT OF PUBLIC WORKS**
- 1.3 Bid Number: **RFB- 2024-064**
- 1.4 Project Number: **24-C586**

SECTION 2: PURPOSE

- 2.1 The intent of these specifications is to furnish information to responsible bidders for the purpose of obtaining bids for **MILLING AND ASPHALT PAVING, CURB AND SIDEWALK CONSTRUCTION AT THE CORNELL COOPERATIVE EXTENSION** as requested by **ALBANY COUNTY DEPARTMENT OF PUBLIC WORKS**. Work location is 24 Martin Rd., Voorheesville, NY 12186. Work includes milling 4 inches of asphalt from parking lot(s); repaving with 2 ½ inches of asphalt binder and 1 ½ inches of asphalt top; removing existing curb and sidewalk; installing new curb and ADA compliant sidewalk and ramps. Add Alternate items include milling and paving an additional parking lot and replacing storm drain manholes and pipe. Complete scope of services is provided on pages GIB-15 through GIB-17.
- 2.2 Minority Business Enterprises (MBE's) and Women Business Enterprises (WBE's) are encouraged to apply.

SECTION 3: BIDDING DOCUMENTS

- 3.1 Complete sets of the Bidding Documents may be obtained or examined as stated in the Notice to Bidders.

RFB# 2024-064
**Milling and Asphalt Paving, Curb and Sidewalk Construction
 at the Cornell Cooperative Extension**

Scope of Services

Base Bid and Add Alternate #1

Milling and Asphalt Paving

- 1) Provide Inlet Protection as required by NYSDOT Specification Item 209.1703 and NYSDOT Standard Sheet 209-03.
- 2) Production mill parking lot(s) 4 inches to prepare for new asphalt as per NYSDOT Specification Item 490.10. **Contractor is advised that all materials generated under Item 490.10 are the sole property of Albany County. Albany County will meet all responsibilities for hauling materials off-site and storage of the materials.**
- 3) Cold mill, per NYSDOT Specification Item 490.30, as required near manholes, grates, lamp posts and other items in the parking lot.
- 4) Apply tack coat prior to paving on milled surface and between asphalt courses as specified in NYSDOT Specification Item 407.01.
- 5) Place 2 ½ inches (compacted) of asphalt binder course meeting NYSDOT Specification Item 404.198901.
- 6) Place 1 ½ inches (compacted) of asphalt top course meeting NYSDOT Specification Item 404.128101
- 7) Pavement Striping of parking stalls will be completed per the requirements of NYSDOT Specification Item 640.10. Pavement Striping layout will be similar to the existing condition with the additional of two additional Handicap Accessible parking stalls. The contractor is only responsible for pavement striping using white paint. Albany County forces will paint blue stripes and symbols.

Stone Curb and Concrete Sidewalk, Ramps and Entrances

- 8) Remove existing curb, sidewalks and entrance ramps per NYSDOT Specification Item 203.02
- 9) Establish area for concrete washout per NYSDEC standards and comply with NYSDEC maintenance requirements for duration of project.
- 10) Install fabric and subbase for curb and sidewalk as per NYSDOT Specification Item 304.12.
- 11) Install stone curb per NYSDOT Specification Item 609.021 and NYSDOT Standard Sheet 609-01. Curb face needs to have a 6 inch reveal from the paved parking lot surface.

- 12) Place concrete sidewalk and building entrance ramps per NYSDOT Specification Item 608.01.
- 13) Install ADA compliant concrete curb ramps, including embedded detectable warning units, where the parking lot meets the end of the entrance ramps for the building. Use Curb Ramp Configuration Type 9 as shown on NYSDOT Standard Sheet 608-01 with the entrance ramp continuing toward the building entrance.
- 14) Restore areas disturbed during sidewalk/entrance ramp installation with topsoil & seed per NYSDOT Specification Item 610.1605.

Add Alternate #2

Storm Drainage

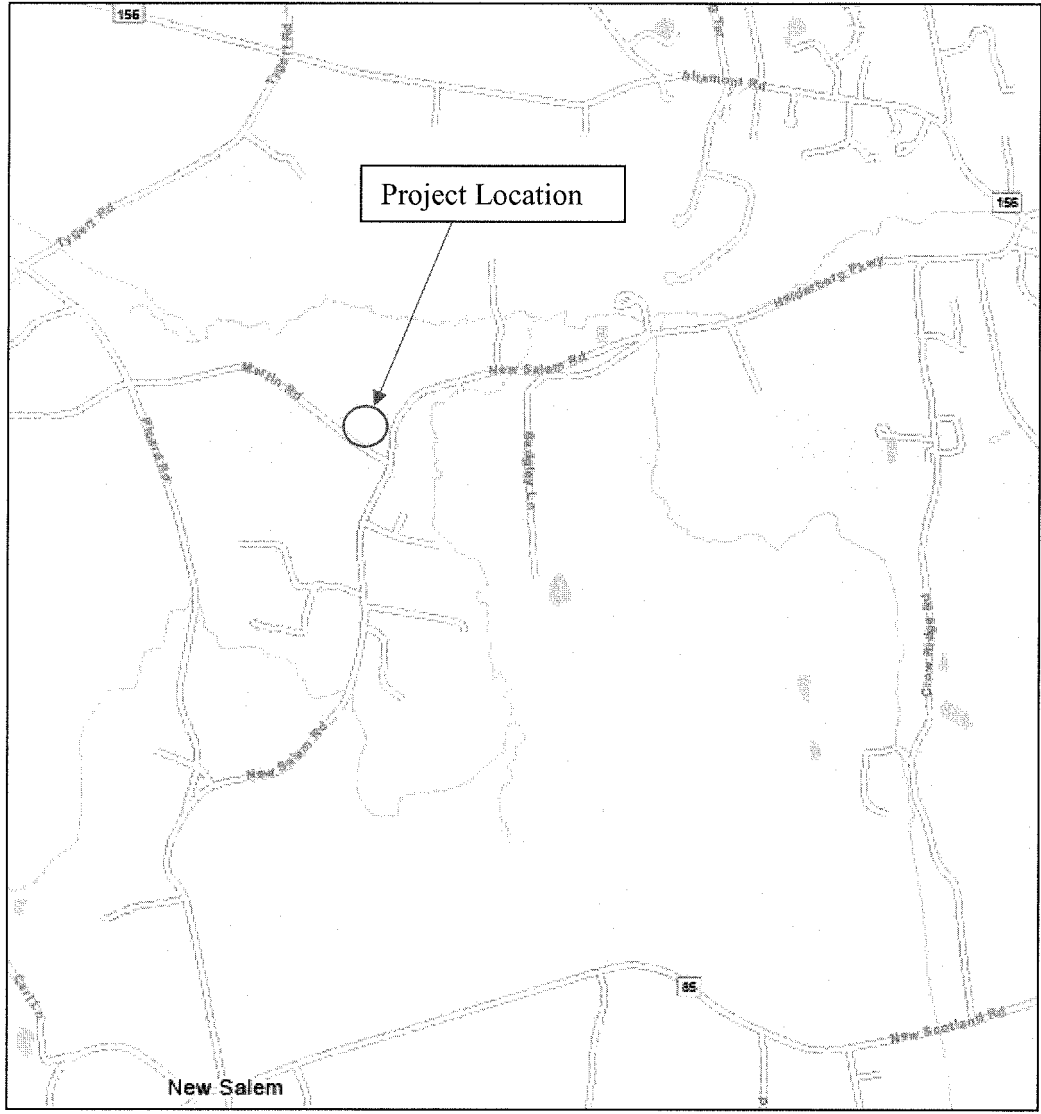
- 15) Cut asphalt and excavate to depth and remove existing pipe. Work will be conducted per NYSDOT Specification Items 203.02 and 627.50140008.
- 16) Install 12" pipe and select granular fill per NYSDOT Specification Items 203.02 and 203.08 and NYSDOT Standard Sheet 203-05. Pipe shall meet the requirements of NYSDOT Specification Item 603.9812
- 17) Modification to manholes will be done under the requirement of NYSDOT Specification Item 604.07XXYY.
- 18) Restore excavation using previously excavated material and compacting in 6 inch lifts. Additional material is payable under NYSDOT Specification Item 203.03.
- 19) Restore excavation to grade with 2 ½ inches (compacted) of asphalt binder course meeting NYSDOT Specification Item 404.198901.

Applies to all Bids/Alternates

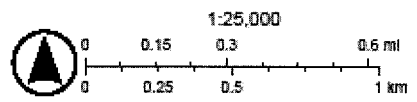
- 20) The project doesn't require any detours, and the parking lot(s) will be shut down to vehicles during the work. The contractor will guarantee ingress for building occupants via at least one upper lot building entrance throughout the project, and emergency egress via the two upper lot building entrances must be maintained at all times. Ensuring safe building entrance and exit during the project, including safeguarding open excavations for pedestrians, falls under the contractor's responsibility. The contractor is responsible for restricting vehicle access to the parking lot(s). This work is payable under Item 619.01.
- 21) The contractor shall coordinate access to job site and all work activities with the County's Representative. All work shall be performed on weekdays, during the hours of 8:00am-5:00pm unless otherwise agreed upon by the County's Representative.
- 22) The successful contractor shall field verify all dimensions PRIOR to commencing work.
- 23) Contractor shall erect temporary construction barriers and provide warning signs where required to ensure safety of pedestrians.

- 24) Contractor shall comply with all necessary OSHA regulations and standards.
- 25) Contractor shall clean all work areas each day to the satisfaction of the County's Representative. Contractor shall remove and legally dispose of all construction debris. Contractor shall keep all areas of the work site free from rubbish and accumulation of waste materials.
- 26) Contractor shall protect existing systems and surfaces to remain, all damage resulting from contractor's operations shall be replaced or repaired to a condition acceptable to the County's Representative, by the contractor at no additional cost to the County.
- 27) Contractor shall determine exact location of existing utilities before commencing work. Contractor agrees to be fully responsible for any and all damages which might be incurred by his failure to exactly locate utilities.
- 28) Contractor shall be responsible for all site staging and safety operations, as well as complete restoration of any disturbed areas to the satisfaction of the County's Representative.
- 29) Contractor shall provide warranty to cover contractor workmanship and material for a minimum of one (1) year from date of final completion of work.
- 30) All construction items shall be from the 1/1/2024 Version of the NYSDOT Standard Specifications Book and latest revisions to the NYSDOT Standard Sheets.
- 31) Project will be **Unit Price Bid**.
- 32) Suitable materials for back fill can be used upon concurrence from the County's Representative.

Location Map

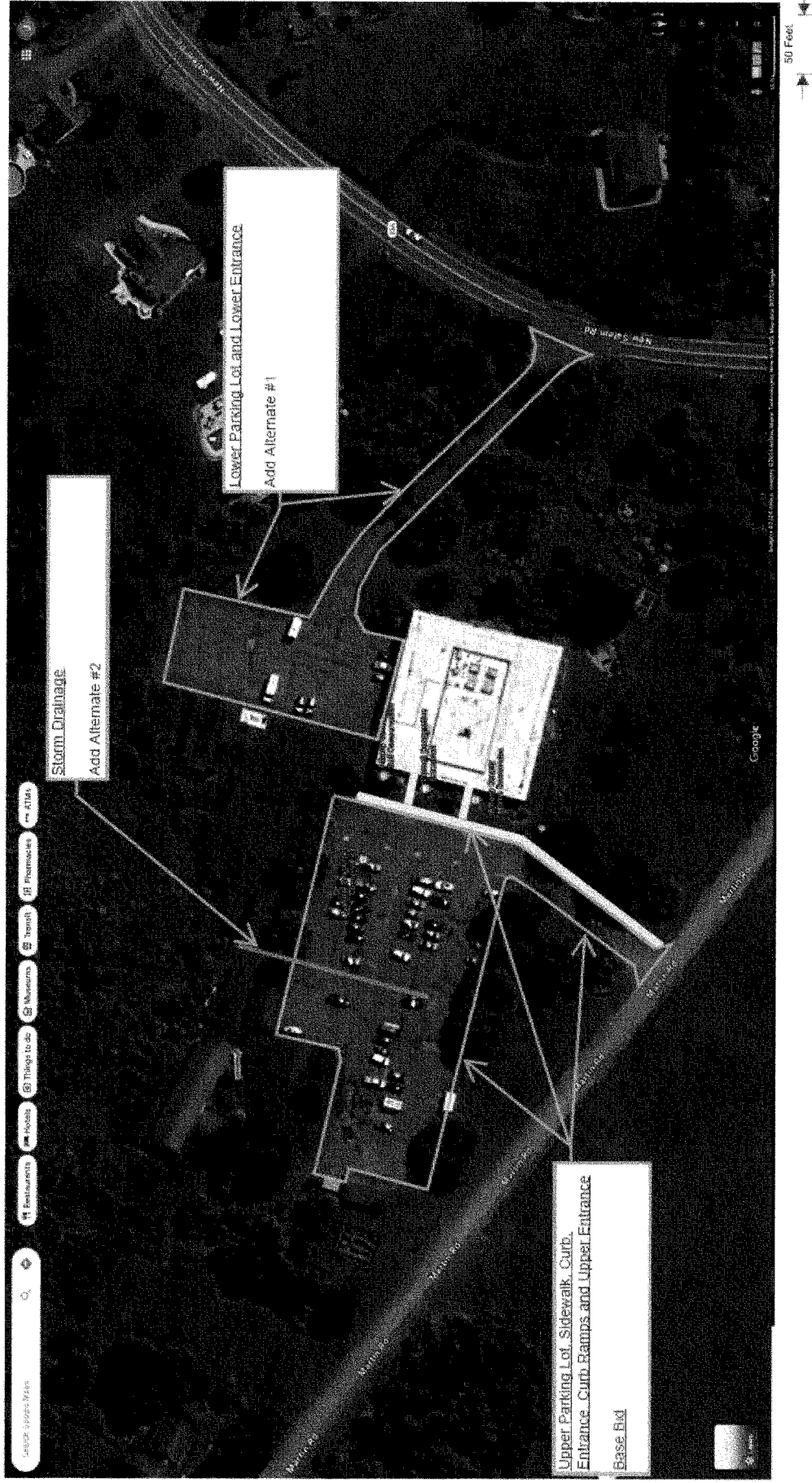


5/6/2024



Esri, TomTom, Garmin, SafeGraph, GeoTechnologies, Inc, METANASA, USGS, EPA, NPS, US Census Bureau, USDA, USFWS

Project Plan View



GIB 23



DANIEL P. McCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
REAL PROPERTY TAX SERVICE AGENCY
112 STATE STREET, ROOM 1340
ALBANY, NEW YORK 12207
OFFICE: (518) 487-5291
FAX: (518) 447-2503
www.albanycounty.com

MICHAEL McGUIRE
DIRECTOR

May 9, 2024

Honorable Joanne Cunningham, Chairperson
Albany County Legislature
112 State Street, Rm 710
Albany, NY 12207

Re: Request authorizing the cancellation of certain unenforceable delinquent tax liens
936 SR 145, Town of Rensselaerville – SBL 171.-3-3

Dear Chairperson Cunningham,

The three-year time limit to use the ordinary correction of errors process has expired, therefore, enclosed for your review is a resolution. In reviewing the 2019 List of Delinquent Taxes, it became apparent that a property tax bill was imposed on a property owned by the Albany County Land Bank. Parcel 171.-3-3 was conveyed to the Albany County Land Bank by deed R2018-19558. The deed was recorded with the Albany County Clerk on 08/30/2018. Pursuant to Not-For-Profit Corporation Law §1608 (a) property owned by the Albany County Land Bank is exempt from real property taxation upon acquisition of the property. As a matter of law the properties should have been wholly exempt from the 2019 property taxes.

Given the information provided, I am requesting that the County Legislature adopt a resolution canceling the unenforceable lien on 936 SR 145 pursuant to NPC §1608 (a). Additionally, I am requesting that said resolution authorize a chargeback of all amounts credited or guaranteed to the Town of Rensselaerville. The total amount of the chargeback is \$2,668.63.

Sincerely,

Michael McGuire, IAO, CCD
Real Property Tax Service Agency

Enclosures:

CC: Dennis Feeny, Majority Leader
Frank Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



County of Albany

Harold L. Joyce
Albany County Office
Building
112 State Street - Albany,
NY 12207

Legislation Text

File #: TMP-5497, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

AUTHORIZING CANCELLATION OF A CERTAIN UNENFORCEABLE DELINQUENT REAL PROPERTY TAX LIEN ON 936 SR 145 IN THE TOWN OF RENSSELAERVILLE AND CHARGE BACK OF THE AMOUNT CREDITED IN CONNECTION WITH SAID LIEN

Date: 5/9/2024
Submitted By: Michael McGuire
Department: Real Property
Title: Director
Phone: 518-487-5292
Department Rep.
Attending Meeting: Michael McGuire

Purpose of Request:

- ☐ Adopting of Local Law
- ☐ Amendment of Prior Legislation
- ☐ Approval/Adoption of Plan/Procedure
- ☐ Bond Approval
- ☐ Budget Amendment
- ☐ Contract Authorization
- ☐ Countywide Services
- ☐ Environmental Impact/SEQR
- ☐ Home Rule Request
- ☐ Property Conveyance
- ☒ Other: (state if not listed) Authorize cancellation of unenforceable delinquent tax

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

- ☐ Contractual
- ☐ Equipment
- ☐ Fringe

- ☐ Personnel
- ☐ Personnel Non-Individual
- ☐ Revenue

Increase Account/Line No.: Click or tap here to enter text.
Source of Funds: Click or tap here to enter text.
Title Change: Click or tap here to enter text.

CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:

- ☐ Change Order/Contract Amendment
- ☐ Purchase (Equipment/Supplies)
- ☐ Lease (Equipment/Supplies)
- ☐ Requirements
- ☐ Professional Services
- ☐ Education/Training
- ☐ Grant

Choose an item.

Submission Date Deadline Click or tap to enter a date.

- ☐ Settlement of a Claim
- ☐ Release of Liability
- ☐ Other: (state if not listed) Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee: Click or tap here to enter text.
Scope of Services: Click or tap here to enter text.

Bond Res. No.: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes ☐ No ☒
If Mandated Cite Authority: Click or tap here to enter text.

Is there a Fiscal Impact: Yes ☐ No ☒

Anticipated in Current Budget: Yes ☐ No ☐

County Budget Accounts:

Revenue Account and Line: Click or tap here to enter text.

Revenue Amount: Click or tap here to enter text.

Appropriation Account and Line: Click or tap here to enter text.

Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)

Federal: Click or tap here to enter text.

State: Click or tap here to enter text.

County: Click or tap here to enter text.

Local: Click or tap here to enter text.

Original Awarding Agency / Funder:

Click or tap here to enter text.

New York State Pass-Through Agency (if applicable):

Click or tap here to enter text.

Term

Term: (Start and end date) Click or tap here to enter text.

Length of Contract: Click or tap here to enter text.

Impact on Pending Litigation

Yes ☐ No ☒

If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: Click or tap here to enter text.

Date of Adoption: Click or tap here to enter text.

Justification: (state briefly why legislative action is requested)

The three-year time limit to use the ordinary correction of errors process has expired, therefore, enclosed for your review is a resolution. In reviewing the 2019 List of Delinquent Taxes, it became apparent that a property tax bill was imposed on a property owned by the Albany County Land Bank. Parcel 171.-3-3 was conveyed to the Albany County Land Bank by deed R2018-19558. The deed was recorded with the Albany County Clerk on 08/30/2018.

Pursuant to Not-For-Profit Corporation Law §1608 (a) property owned by the Albany County Land Bank is exempt from real property taxation upon acquisition of the property. As a matter of law the properties should have been wholly exempt from the 2019 property taxes.

Given the information provided, I am requesting that the County Legislature adopt a resolution canceling the unenforceable lien on 936 SR 145 pursuant to NPC §1608 (a). Additionally, I am requesting that said resolution authorize a chargeback of all amounts credited or guaranteed to the Town of Rensselaerville. The total amount of the chargeback is \$2,668.63.

00/00/24

RESOLUTION NO. _____

AUTHORIZING CANCELLATION OF A CERTAIN UNENFORCEABLE DELINQUENT REAL PROPERTY TAX LIEN ON 936 STATE ROUTE 145 IN THE TOWN OF RENSSELAERVILLE AND CHARGE BACK OF THE AMOUNT CREDITED IN CONNECTION WITH SAID LIEN

Introduced: 00/00/24

By Audit and Finance Committee:

WHEREAS, the Commissioner of the County Department of Management and Budget as Enforcing Officer ("Enforcing Officer") of the County of Albany, New York, Tax District ("Tax District") acting upon the advice of the County Department of Law has pursuant to RPTL 1138 (subds. 1 and 2) duly issued and filed with the County Clerk a Certificate of Withdrawal of the following parcel of real property from a proceeding brought by the Tax District pursuant to RPTL Article Eleven, Title 3, to foreclose the following delinquent real property tax lien affecting said parcel held by the Tax District on the ground there is a legal impediment to the enforcement of said lien:

<u>TOWN OF RENSSELAERVILLE</u>				
<u>Parcel Location</u>	<u>Tax Map No.</u>	<u>Tax Lien Year and Type</u>	<u>Charge Back Amount</u>	<u>Legal Impediment</u>
936 State Route 145, Town of Rensselaerville	171.-3-3	2019 Property Tax	\$2,668.63	This parcel was owned by the Albany County Land Bank when the tax was levied. The Albany County Land Bank is exempt from real property taxation pursuant to §1608(a)

				of the Not-For-Profit Corporation Law.
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, and

WHEREAS, the County Legislature in its capacity as the governing body of the Tax District has upon the advice of the Enforcing Officer determined as required by RPTL 1138 (subd.6 (a)) that under the circumstances there is no practical method to enforce the collection of said lien against said parcel, and that a supplementary proceeding to enforce its collection would not be effective, now, therefore be it

RESOLVED, that pursuant to RPTL 1138 (subd.6 (a)) said lien on said parcel are hereby cancelled and the Enforcing Officer is directed to issue and within 10 days thereafter file with the County Clerk a Certificate of Cancellation of said lien, and, be it further

RESOLVED, that the Enforcing Officer is pursuant to RPTL 1138 (subd. 6(c)) hereby authorized to upon filing said Certificate of Cancellation of said lien[s] with the County Clerk charge back to those municipal corporations within which said parcel is located any and all amounts credited or guaranteed to such corporations by the Tax District in connection with said cancelled lien, and, be it further

RESOLVED, That the Clerk of the County Legislature is hereby directed to file a copy of this Resolution with said Enforcing Officer and to forward certified copies thereof to the other appropriate County Officials.

COUNTY OF ALBANY



Real Estate Tax Statement

Parcel: 17100000030030000000

Location: 936 ST SR 145

Owner:

CULP CHELSEA
836 STATE ROUTE 990V
GILBOA NY 12076

Status:

Total	1.100
Deferr	.000
Land Valuation:	20,000
Building Valuation:	0
Exemptions:	0
Taxable Valuation:	20,000
Interest Per Diem:	1,685.43

Legal Description:

CONTACT THAT OFFICE. CONTINUED FAILURE TO PAY ALL
OF THE TAXES

Deed Date:

Book/Page:

Interest Date: 05/02/2024

Year	Type	Bill			
2024	RE-B	1622			
Inst	Charge	Billed	Principal Due	Interest Due	Total Due
1	RENS	1,210.58	1,210.58	48.42	1,259.00
		1,210.58	1,210.58	48.42	1,259.00
Year Totals		1,210.58	1,210.58	48.42	1,259.00

Year	Type	Bill			
2019	TL-B	622			
Inst	Charge	Billed	Principal Due	Interest Due	Total Due
1	RENSL TL	2,443.63	2,443.63	1,563.92	4,007.55
	LEGAL CHAR	225.00	225.00	0.00	225.00
		2,668.63	2,668.63	1,563.92	4,232.55
Year Totals		2,668.63	2,668.63	1,563.92	4,232.55

Grand Totals		3,879.21	3,879.21	1,612.34	5,491.55
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PARTIAL PAYMENTS ARE NOT ACCEPTED WITHOUT AN INSTALLMENT AGREEMENT
IF ANY PARCEL REMAINS SUBJECT TO ONE OR MORE DELINQUENT TAX LIENS,
THE PAYMENT YOU HAVE MADE WILL NOT POSTPONE THE ENFORCEMENT OF THE
OUTSTANDING LIEN OR LIENS. CONTINUED FAILURE TO PAY THE ENTIRE
AMOUNT OWED WILL RESULT IN THE LOSS OF THE PROPERTY(IES).

PAYMENT MADE TO:

ALBANY COUNTY DIVISION OF FINANCE
112 STATE ST. ROOM 1340
ALBANY, NY 12207
TEL: 447-7082

\$35.00 WILL BE CHARGED FOR ANY RETURNED CHECK
INTEREST WILL INCREASE ON THE 1ST OF THE MONTH

** End of Report - Generated by Murray, Christina **

INSTRUCTIONS(RP-5217-PDF-INS): www.orps.state.ny.us

FOR COUNTY USE ONLY

C1. FWS Code 0,1,3,6,0,0

C2. Date Deed Recorded 8/30/18

C3. Book 2018 C4. Page 19558


**New York State Department of
Taxation and Finance**

Office of Real Property Tax Services

RP- 5217-PDF

Real Property Transfer Report (8/10)

PROPERTY INFORMATION

1. Property Location 5 MILL TURN ROAD

* STREET NUMBER * STREET NAME

RENSSELAERVILLE 12469

* CITY OR TOWN * ZIP CODE

2. Buyer Name ALBANY COUNTY LAND BANK CORPORATION

* LAST NAME/COMPANY FIRST NAME

3. Tax Billing Address THE COUNTY OF ALBANY, NY

Indicate where future Tax Bills are to be sent if other than buyer address(at bottom of form) * LAST NAME/COMPANY FIRST NAME

4. Indicate the number of Assessment Roll parcels transferred on the deed 5 # of Parcels ☐ Part of a Parcel (Only if Part of a Parcel) Check as they apply:

4A. Planning Board with Subdivision Authority Exists ☐

4B. Subdivision Approval was Required for Transfer ☐

4C. Parcel Approved for Subdivision with Map Provided ☐

5. Deed Property Size X * FRONT FOOT * DEPTH * ACRES 0.43

6. Seller Name THE COUNTY OF ALBANY, NY

* LAST NAME/COMPANY FIRST NAME

7. Select the description which most accurately describes the use of the property at the time of sale:

C. Residential Vacant Land

Check the boxes below as they apply:

8. Ownership Type is Condominium ☐

9. New Construction on a Vacant Land ☐

10A. Property Located within an Agricultural District ☐

10B. Buyer received a disclosure notice indicating that the property is in an Agricultural District ☐

SALE INFORMATION

11. Sale Contract Date 07/09/2018

* 12. Date of Sale/Transfer 08/24/2018

* 13. Full Sale Price 1.00

(Full Sale Price is the total amount paid for the property including personal property. This payment may be in the form of cash, other property or goods, or the assumption of mortgages or other obligations.) Please round to the nearest whole dollar amount.

15. Check one or more of these conditions as applicable to transfer:

- ☐ A. Sale Between Relatives or Former Relatives
- ☐ B. Sale between Related Companies or Partners in Business
- ☐ C. One of the Buyers is also a Seller
- ☒ D. Buyer or Seller is Government Agency or Lending Institution
- ☒ E. Deed Type not Warranty or Bargain and Sale (Specify Below)
- ☒ F. Sale of Fractional or Less than Fee Interest (Specify Below)
- ☒ G. Significant Change in Property Between Taxable Status and Sale Dates
- ☒ H. Sale of Business is Included in Sale Price
- ☒ I. Other Unusual Factors Affecting Sale Price (Specify Below)
- ☐ J. None

*Comment(s) on Condition:

14. Indicate the value of personal property included in the sale .00

DEED WITH ASSIGNMENT

ASSESSMENT INFORMATION - Data should reflect the latest Final Assessment Roll and Tax Bill

16. Year of Assessment Roll from which information taken(Y) 18 * 17. Total Assessed Value 9,500

* 18. Property Class 314 * 19. School District Name MIDDLEBURGH

* 20. Tax Map Identifier(s)/Roll Identifier(s) (If more than four, attach sheet with additional Identifier(s))

171.-1-48 (+4 see attached)

CERTIFICATION

I certify that all of the items of information entered on this form are true and correct (to the best of my knowledge and belief) and I understand that the making of any willful false statement of material fact herein subject me to the provisions of the penal law relative to the making and filing of false instruments.

SELLER SIGNATURE

Gregory A. Robinson 8/24/18

SELLER SIGNATURE DATE

Albany 8/20/18

BUYER SIGNATURE DATE

BUYER CONTACT INFORMATION

(Enter information for the buyer. Note: If buyer is LLC, society, association, corporation, joint stock company, estate or entity that is not an individual agent or fiduciary, then a name and contact information of an individual/responsible party who can answer questions regarding the transfer must be entered. Type or print clearly.)

ALBANY COUNTY LAND BANK CORPORATION

* LAST NAME FIRST NAME

[518] 407-0309

* AREA CODE * TELEPHONE NUMBER (Ex: 999222)

69 STATE STREET, 8TH FL.

* STREET NUMBER * STREET NAME

ALBANY NY 12207

* CITY OR TOWN * STATE * ZIP CODE

BUYER'S ATTORNEY

LAST NAME FIRST NAME

AREA CODE TELEPHONE NUMBER (Ex: 999222)



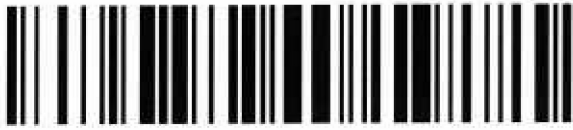
<u>Tax Map</u>	<u>SWIS</u>	<u>Street Address</u>	<u>City/Town</u>	<u>Assessed</u>	<u>Class Code</u>	<u>Lot</u>
<u>No.</u>				<u>Value</u>		<u>Size</u> (acres)
171.-1-48	013600	5 MILL TURN ROAD	Town of Rensselaerville	\$ 9,500.00	314 - Rural Vacant Land	0.43
171.-3-3	013600	936 MAIN STREET	Town of Rensselaerville	\$ 41,000.00	210 - One Family Residence	1.10
172.-1-53	013600	CR 352	Town of Rensselaerville	\$ 31,000.00	260 - Seasonal Residence	32.60
181.-2-55	013600	ARNOLD ROAD	Town of Rensselaerville	\$ 13,500.00	314 - Rural Vacant Land	3.50
183.-1-9	013600	158 CAMP MEDUSA ROAD	Town of Rensselaerville	\$ 5,000.00	311 - Residential Vacant Land	0.92



ALBANY COUNTY – STATE OF NEW YORK
BRUCE A. HIDLEY COUNTY CLERK
 16 EAGLE STREET, ALBANY, NEW YORK 12207

COUNTY CLERK'S RECORDING PAGE

THIS PAGE IS PART OF THE DOCUMENT – DO NOT DETACH



INSTRUMENT #: R2018-19558

Receipt#: 20180253204
 Clerk: KMC
 Rec Date: 08/30/2018 01:16:23 PM
 Doc Grp: D
 Descrip: DEED
 Num Pgs: 7
 Rec'd Frm: COUNTY OF ALBANY

Party1: COUNTY OF ALBANY
 Party2: ALBANY COUNTY LAND BANK CORP
 Muni: RENSSELAERVILLE TOWN

Recording:

Cover Page	0.00
Recording Fee	0.00
Cultural Ed	0.00
Records Management - Coun	0.00
Records Management - Stat	0.00
TP584	0.00
RP5217 Residential/Agricu	0.00
RP5217 - County	0.00

Sub Total: 0.00

Transfer Tax
 Transfer Tax - State 0.00

Sub Total: 0.00

Total: 0.00

**** NOTICE: THIS IS NOT A BILL ****

***** Transfer Tax *****
 Transfer Tax #: 782
 Transfer Tax

Total: 0.00

Record and Return To:

ALBANY COUNTY DEPARTMENT OF LAW
 112 STATE STREET ROOM 600
 ALBANY, NY 12207

THIS PAGE CONSTITUTES THE CLERK'S
 ENDORSEMENT, REQUIRED BY SECTION 316-a (5)
 & 319 OF THE REAL PROPERTY LAW OF THE
 STATE OF NEW YORK.

Bruce A. Hidley
 Albany County Clerk

RM 6
RETS

RECORD AND RETURN TO:

ALBANY COUNTY DEPARTMENT OF LAW
112 State Street, Room 600
Albany, New York 12207

DEED

THIS INDENTURE, made the 24th day of August, 2018 between

The **COUNTY OF ALBANY, NEW YORK, TAX DISTRICT**, a municipal corporation organized and existing pursuant to the laws of the State of New York having its principal office located at 112 State Street, Albany, New York 12207 ("Tax District"), and

ALBANY COUNTY LAND BANK CORPORATION, a not-for-profit corporation organized and existing pursuant to the laws of the State of New York, having its principal office located at 69 State Street, 8th Floor, Albany, New York 12207 ("Land Bank"),

WITNESSETH that the County of Albany, New York ("County") in consideration of the sum of ONE DOLLAR (\$1.00) AND NO CENTS lawful money of the United States paid to it by the Land Bank pursuant to the Assignment annexed hereto and simultaneously herewith being recorded assigning to the Land Bank the right of the County pursuant to the Summary Judgment of Foreclosure in the thereby listed Index numbered "in rem" delinquent real property tax lien foreclosure proceeding ("proceeding") to have the Enforcing Officer of the Tax District ("Enforcing Officer") execute and cause to be recorded a Deed conveying title to the thereby listed parcels of real property ("parcels") to the County and authorizing the Enforcing Officer to by virtue of said Assignment execute and cause to be recorded a Deed conveying title to said parcel(s) to the Land Bank, instead of to the County, hereby remises, releases and quitclaims unto the Land Bank, its successors and assigns forever,

ALL OF SAID PARCELS OF REAL PROPERTY situate, lying and located in the **TOWN OF RENSSELAERVILLE**, County of Albany and State of New York more particularly described in Exhibit "A" attached hereto.

TOGETHER WITH the appurtenances and all of the estate and rights of the Tax District in and to said parcels.

TO HAVE AND TO HOLD, all and singular, of all of said parcels hereby remised, released and conveyed unto the Land Bank, its successors and assigns, forever.

IN WITNESS WHEREOF the Enforcing Officer has hereunto set his hand on the date above written.

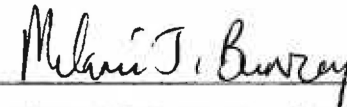


SHAWN A. THELEN, ENFORCING OFFICER
COUNTY OF ALBANY, NEW YORK, TAX DISTRICT

ACKNOWLEDGMENT

STATE OF NEW YORK)
) SS.:
COUNTY OF ALBANY)

On the 24th day of August 2018, before me, the undersigned, personally appeared SHAWN A. THELEN personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he executed the same as Enforcing Officer of the County of Albany, New York, Tax District and that by his signature on the instrument, the individual, or the person upon behalf of which he acted, executed the instrument.



NOTARY PUBLIC - STATE OF NEW YORK

MELANIE J. BUNZEY
Notary Public, State of New York
Qualified in Albany County
No. 01BU6048902
Commission Expires Oct. 2, 2022

List of Delinquent Foreclosure/ Taxes Filing							
Municipality	Street Name	Tax Map #	Index Number	Date	Judgment Granted	Judgment Entered	Class Code
Town of Rensselaerville	5 Mill Turn Road	171.-1-48	6159-13-35	11/21/2013	4/19/2018	4/23/2018	314 - Rural Vacant Land
Town of Rensselaerville	936 Main Street	171.-3-3	6159-13-38	11/21/2013	4/19/2018	4/23/2018	210 - One Family Residence
Town of Rensselaerville	CR 352	172.-1-53	6159-13-50	11/21/2013	4/19/2018	4/23/2018	260 - Seasonal Residence
Town of Rensselaerville	Arnold Road	181.-2-55	6159-13-71	11/21/2013	4/19/2018	4/23/2018	314 - Rural Vacant Land
Town of Rensselaerville	158 Camp Medusa Rd.	183.-1-9	6159-13-78	11/21/2013	4/19/2018	4/23/2018	311 - Residential Vacant Land

ASSIGNMENT

ASSIGNMENT, made this 24th day of August, 2018, by the COUNTY OF ALBANY, NEW YORK, having its principal office located at 112 State Street, Albany, New York 12207 ("County") to ALBANY COUNTY LAND BANK CORPORATION, having its principal office located at 69 State Street, 8th Floor, Albany, New York 12207 ("Land Bank").

WHEREAS, pursuant to Article Eleven, Title 3, of the Real Property Tax Law the County of Albany, New York, Tax District ("Tax District") heretofore brought "in rem" delinquent tax lien foreclosure proceeding(s) in the County Court of the State of New York, County of Albany ("proceeding"), under the Index Number for the **TOWN OF RENSSELAERVILLE** listed in Exhibit "A" attached hereto ("Exhibit "A"), and

WHEREAS, Summary Final Judgment of Foreclosure ("Judgment") was granted to and entered by the Tax District in said proceeding as to the thereby described parcels of real property ("parcels") on the dates thereby indicated directing the Enforcing Officer of the Tax District to execute and cause to be recorded a Deed conveying to the County title to said parcel(s), and

WHEREAS, the Albany County Legislature, the governing body of the County, by Resolution No. 317 for the Year 2018 adopted July 9, 2018 has approved and authorized the sale and conveyance of said parcels by the County to the Land Bank for the sum of ONE DOLLAR (\$1.00) AND NO CENTS lawful money of the United States,

NOW, THEREFORE, KNOW BY THESE PRESENTS, that in order to effectuate said sale and conveyance the County in consideration of payment to it of said sum by the Land Bank hereby without recourse assigns to the Land Bank the County's right pursuant to said Judgment in said proceeding to have the Enforcing Officer of the Tax District ("Enforcing Officer") execute and record a Deed conveying title to said parcels to the

County and hereby authorizes said Enforcing Officer to by virtue of said assignment execute and record a Deed conveying title to said parcels to the Land Bank, instead of to the County.

IN WITNESS WHEREOF, the undersigned has on behalf of the County hereunto set his hand on the date above written.

THE COUNTY OF ALBANY, NEW YORK

By Daniel P. McCoy
DANIEL P. McCOY, Albany County Executive

ACKNOWLEDGEMENT

STATE OF NEW YORK)
) SS.:
COUNTY OF ALBANY)

On the 24th day of August, 2018 before me, the undersigned, personally appeared DANIEL P. McCOY, personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his capacity as Albany County Executive, and that by his signature on the instrument, the individual, or the person upon behalf of which he acted, executed the instrument.

Melanie T. Burrey
NOTARY PUBLIC - STATE OF NEW YORK

MELANIE J. BUNZEY
Notary Public, State of New York
Qualified in Albany County
No. 01BU6048902
Commission Expires Oct. 2, 2022

List of Delinquent Foreclosure/ Taxes Filing							
Municipality	Street Name	Tax Map #	Index Number	Date	Judgment Granted	Judgment Entered	Class Code
Town of Rensselaerville	5 Mill Turn Road	171.-1-48	6159-13-35	11/21/2013	4/19/2018	4/23/2018	314 - Rural Vacant Land
Town of Rensselaerville	936 Main Street	171.-3-3	6159-13-38	11/21/2013	4/19/2018	4/23/2018	210 - One Family Residence
Town of Rensselaerville	CR 352	172.-1-53	6159-13-50	11/21/2013	4/19/2018	4/23/2018	260 - Seasonal Residence
Town of Rensselaerville	Arnold Road	181.-2-55	6159-13-71	11/21/2013	4/19/2018	4/23/2018	314 - Rural Vacant Land
Town of Rensselaerville	158 Camp Medusa Rd.	183.-1-9	6159-13-78	11/21/2013	4/19/2018	4/23/2018	311 - Residential Vacant Land

CERTIFICATE OF WITHDRAWAL

(Real Property Tax Law, §1138 (subds. 1, 2, and 3))

Index No. 01430-20

TO THE ALBANY COUNTY CLERK:

PLEASE TAKE NOTICE that the following parcel of real property included on the List of Delinquent Taxes for the "In Rem" delinquent tax lien foreclosure proceeding filed by the County of Albany, New York, Tax District in your Office under the above Index No. on February 18, 2020 covering the Towns _____ in Albany County:

PARCEL No. 01430-20-005074

OWNER(S) Albany County Land Bank Corporation

ADDRESS 936 Main St SR 145

Town of Rensselaerville

TAX MAP No. 17100000030030000000

RECEIVED
ALBANY COUNTY CLERK
MAY 22 PM 1:51

is hereby **WITHDRAWN** from said foreclosure proceeding by me for one or more of the following reasons (*check all that apply*):

☒ There is reason to believe that there may be a legal impediment to the enforcement of the tax lien(s) affecting said parcel.

☐ The tax lien(s) on said parcel has/have been canceled or is/are subject to cancellation pursuant to section 558 of the Real Property Tax Law.

☐ The enforcement of the tax lien(s) on said parcel has/have been stayed by the filing of a petition pursuant to the Bankruptcy Code of 1978 (Title 11 of the United States Code).

☐ If the Tax District were to acquire said parcel, there is significant risk that it might be exposed to a liability substantially in excess of the amount that could be recovered by enforcing said tax lien(s).

☐ The owner of said parcel has entered into an agreement to pay said tax lien(s) in installments pursuant to section 1184 of the Real Property Tax Law and has not defaulted thereon.

☐ Said parcel was included in the Petition for Foreclosure in said proceeding, but it has since been demonstrated to my satisfaction as Enforcing Officer that said parcel is residential or farm property, and as such, said parcel is not yet subject to inclusion of such a Petition.

The facts which render said parcel eligible for withdrawal from said proceeding are as follows: _____

The Albany County Land Bank Corporation is exempt from real property taxation pursuant to §1608(a) of the Not-For-Profit Corporation Law.

PLEASE TAKE FURTHER NOTICE that pursuant to Real Property Tax Law, §1138 (sub. 2 (b) you are therefore required and directed to upon the filing of this Certificate of Withdrawal in your Office enter on said List of Delinquent Taxes the word "withdrawn" and the date of such filing opposite the description of said parcel.

PLEASE TAKE FURTHER NOTICE that pursuant to Real Property Tax Law, §1138 (subd. 3)) the filing of this Certificate of Withdrawal has no effect upon the delinquent real property tax lien(s) against said parcel, or upon the notice of pendency of said proceeding as to said parcel, unless such lien(s) are canceled and, if said lien(s) are not canceled, said proceeding may be reinstated against said parcel.

DATED: May 14, 2024

**TAX ENFORCING OFFICER
COUNTY OF ALBANY, NEW YORK, TAX DISTRICT**


**M. DAVID REILLY Jr., Albany County
Commissioner of Management and Budget**

00/00/24

RESOLUTION NO. _____

AUTHORIZING CANCELLATION OF A CERTAIN UNENFORCEABLE DELINQUENT REAL PROPERTY TAX LIEN ON 936 STATE ROUTE 145 IN THE TOWN OF RENSSELAERVILLE AND CHARGE BACK OF THE AMOUNT CREDITED IN CONNECTION WITH SAID LIEN

Introduced: 00/00/24

By Audit and Finance Committee:

WHEREAS, the Commissioner of the County Department of Management and Budget as Enforcing Officer ("Enforcing Officer") of the County of Albany, New York, Tax District ("Tax District") acting upon the advice of the County Department of Law has pursuant to RPTL 1138 (subds. 1 and 2) duly issued and filed with the County Clerk a Certificate of Withdrawal of the following parcel of real property from a proceeding brought by the Tax District pursuant to RPTL Article Eleven, Title 3, to foreclose the following delinquent real property tax lien affecting said parcel held by the Tax District on the ground there is a legal impediment to the enforcement of said lien:

<u>TOWN OF RENSSELAERVILLE</u>				
<u>Parcel Location</u>	<u>Tax Map No.</u>	<u>Tax Lien Year and Type</u>	<u>Charge Back Amount</u>	<u>Legal Impediment</u>
936 State Route 145, Town of Rensselaerville	171.-3-3	2019 Property Tax	\$2,668.63	This parcel was owned by the Albany County Land Bank when the tax was levied. The Albany County Land Bank is exempt from real property taxation pursuant to §1608(a)

				of the Not-For-Profit Corporation Law.
--	--	--	--	--

, and

WHEREAS, the County Legislature in its capacity as the governing body of the Tax District has upon the advice of the Enforcing Officer determined as required by RPTL 1138 (subd.6 (a)) that under the circumstances there is no practical method to enforce the collection of said lien against said parcel, and that a supplementary proceeding to enforce its collection would not be effective, now, therefore be it

RESOLVED, that pursuant to RPTL 1138 (subd.6 (a)) said lien on said parcel are hereby cancelled and the Enforcing Officer is directed to issue and within 10 days thereafter file with the County Clerk a Certificate of Cancellation of said lien, and, be it further

RESOLVED, that the Enforcing Officer is pursuant to RPTL 1138 (subd. 6(c)) hereby authorized to upon filing said Certificate of Cancellation of said lien[s] with the County Clerk charge back to those municipal corporations within which said parcel is located any and all amounts credited or guaranteed to such corporations by the Tax District in connection with said cancelled lien, and, be it further

RESOLVED, That the Clerk of the County Legislature is hereby directed to file a copy of this Resolution with said Enforcing Officer and to forward certified copies thereof to the other appropriate County Officials.



DANIEL P. McCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
REAL PROPERTY TAX SERVICE AGENCY
112 STATE STREET, ROOM 1340
ALBANY, NEW YORK 12207
OFFICE: (518) 487-5291
FAX: (518) 447-2503
www.albanycounty.com

MICHAEL McGUIRE
DIRECTOR

May 9, 2024

Honorable Joanne Cunningham, Chairperson
Albany County Legislature
112 State Street, Rm 710
Albany, NY 12207

Re: RP-554 Application for Corrected Tax Roll
Albany County Land Bank – Various Properties located in the City of Albany

Dear Chairperson Cunningham,

The Albany County Land Bank has submitted 2 Application(s) for Corrected Tax Roll to correct erroneous 2024 property tax bills issued for properties which they own. The enclosed spreadsheet outlines the properties and amounts to be corrected.

The Albany County Land Bank was established under Article 16 of the NYS Not-For-Profit Corporations Law, the Land Bank Act. All property owned by the Albany County Land Bank is exempt from taxation upon acquisition of the property. Additionally the Land Bank Act also exempts the Albany County Land Bank from all special ad valorem levies, special assessments, sewer rents and user charges. Due to a unlawful entry error as defined under NYS RPTL §550 (7)(a) wholly tax exempt property was entered on the taxable portion of the 2023 assessment roll and subsequent tax rolls.

Real Property Tax Law §554 allows for the correction of unlawful entry errors on the assessment and tax rolls. I recommend that the Albany County Legislature approve the correction to the tax rolls and authorize the reissue of corrected bills in the amounts indicated on the enclosed spreadsheet.

Sincerely,

Michael McGuire, IAO, CCD
Real Property Tax Service Agency

CC: Dennis Feeny, Majority Leader
Frank Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



County of Albany

Harold L. Joyce
Albany County Office
Building
112 State Street - Albany,
NY 12207

Legislation Text

File #: TMP-5496, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

REQUEST TO AUTHORIZE THE CORRECTION OF 2023 SCHOOL TAX BILLS FOR PROPERTIES OWNED BY THE ALBANY COUNTY LAND BANK

Date: 5/9/2024
Submitted By: Michael McGuire
Department: Real Property
Title: Director
Phone: 518-487-5292
Department Rep.
Attending Meeting: Michael McGuire

Purpose of Request:

- ☐ Adopting of Local Law
- ☐ Amendment of Prior Legislation
- ☐ Approval/Adoption of Plan/Procedure
- ☐ Bond Approval
- ☐ Budget Amendment
- ☐ Contract Authorization
- ☐ Countywide Services
- ☐ Environmental Impact/SEQR
- ☐ Home Rule Request
- ☐ Property Conveyance
- ☒ Other: (state if not listed) Correct tax bills

CONCERNING BUDGET AMENDMENTS

Increase/decrease category (choose all that apply):

- ☐ Contractual
- ☐ Equipment
- ☐ Fringe
- ☐ Personnel

- ☐ Personnel Non-Individual
☐ Revenue

Increase Account/Line No.: Click or tap here to enter text.
Source of Funds: Click or tap here to enter text.
Title Change: Click or tap here to enter text.

CONCERNING CONTRACT AUTHORIZATIONS

Type of Contract:

- ☐ Change Order/Contract Amendment
☐ Purchase (Equipment/Supplies)
☐ Lease (Equipment/Supplies)
☐ Requirements
☐ Professional Services
☐ Education/Training
☐ Grant

Choose an item.

Submission Date Deadline Click or tap to enter a date.

- ☐ Settlement of a Claim
☐ Release of Liability
☐ Other: (state if not listed) Click or tap here to enter text.

Contract Terms/Conditions:

Party (Name/address):
Click or tap here to enter text.

Additional Parties (Names/addresses):
Click or tap here to enter text.

Amount/Raise Schedule/Fee: Click or tap here to enter text.
Scope of Services: Click or tap here to enter text.

Bond Res. No.: Click or tap here to enter text.
Date of Adoption: Click or tap here to enter text.

CONCERNING ALL REQUESTS

Mandated Program/Service: Yes ☒ No ☐
If Mandated Cite Authority: NYS RPTL §554

Is there a Fiscal Impact: Yes ☐ No ☒
Anticipated in Current Budget: Yes ☐ No ☐

County Budget Accounts:

Revenue Account and Line: Click or tap here to enter text.

Revenue Amount: Click or tap here to enter text.

Appropriation Account and Line: Click or tap here to enter text.

Appropriation Amount: Click or tap here to enter text.

Source of Funding - (Percentages)

Federal: Click or tap here to enter text.

State: Click or tap here to enter text.

County: Click or tap here to enter text.

Local: Click or tap here to enter text.

Original Awarding Agency / Funder:

Click or tap here to enter text.

New York State Pass-Through Agency (if applicable):

Click or tap here to enter text.

Term

Term: (Start and end date) Click or tap here to enter text.

Length of Contract: Click or tap here to enter text.

Impact on Pending Litigation

Yes ☐ No ☒

If yes, explain: Click or tap here to enter text.

Previous requests for Identical or Similar Action:

Resolution/Law Number: Click or tap here to enter text.

Date of Adoption: Click or tap here to enter text.

Justification: (state briefly why legislative action is requested)

The Albany County Land Bank has submitted 2 Application(s) for Corrected Tax Roll to correct erroneous 2024 property tax bills issued for properties which they own. The enclosed spreadsheet outlines the properties and amounts to be corrected.

The Albany County Land Bank was established under Article 16 of the NYS Not-For-Profit Corporations Law, the Land Bank Act. All property owned by the Albany County Land Bank is exempt from taxation upon acquisition of the property. Additionally the Land Bank Act also exempts the Albany County Land Bank from all special ad valorem levies, special assessments, sewer rents and user charges. Due to a unlawful entry error as defined under NYS RPTL §550 (7)(a) wholly tax exempt property was entered on the taxable portion of the 2023 assessment roll and subsequent tax rolls.

Real Property Tax Law §554 allows for the correction of unlawful entry errors on the assessment and tax rolls. I recommend that the Albany County Legislature approve the correction to the tax rolls and authorize the reissue of corrected bills in the amounts indicated on the enclosed spreadsheet.



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 111 Washington Ave Suite 100		Location of property (street address) 164 Livingston Avenue	
City, village, or post office Albany	State NY	ZIP code 12210	City, town, or village Albany
Daytime contact number 518-407-0309	Evening contact number		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.74-1-18
Account number (as appears on tax bill)		Amount of taxes currently billed 1,712.13	
Reasons for requesting a correction to tax roll: School taxes incurred after Albany County Land Bank acquisition.			

I hereby request a correction of tax levied by Albany for the year(s) 2023-2024
(County, city, village, etc.)

Signature of applicant 	Date 05-08-2024
----------------------------	---------------------------

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 5/9/2024	Period of warrant for collection of taxes 9/1/2023
Last day for collection of taxes without interest 9/30/2023	Recommendation Approve application ☒ Deny application ☐
Signature of official 	Date 5/9/2024

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of _____ who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____ (insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☒

Amount of taxes currently billed 1,712.13	Corrected tax 0
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____

Signature of chief executive officer, or official designated by resolution	Date
--	------

Albany County Real Property Tax Service Agency
Tax Bill Correction Worksheet

Date: 5/9/2024
Municipality: City of Albany
Property Address: 164 Livingston Ave
Tax ID Number: 65.74-1-18
Tax(s) to be corrected: 2023/2024 School Tax

Original Bill

Levy Description	Taxable Value	Rate	Tax Amount
School	69,000	21.959799	\$ 1,515.23
Library	69,000	1.672036	\$ 115.37
Total Tax Due			\$ 1,630.60

Correct Bill

Levy Description	Taxable Value	Rate	Tax Amount
School	-	21.959799	\$ -
Library	-	1.672036	\$ -
Total Tax Due			\$ -

Correction

Original Amount Due	\$ 1,630.60
Correct Amount Due	\$ -

City School District of Albany
518 - 475 - 6035

Notice of 2023 School Tax
SBL: 65.74-1-18
ADDR: 164 LIVINGSTON AVE
SWIS: 010100 Albany
Bill #: 2023-014195

ALBANY COUNTY LAND BANK C
111 WASHINGTON AVE
ALBANY, NY 12210

MAIL PAYMENT WITH REMITTANCE STUB TO:

City School District of Albany
PO Box 15133

Albany, NY 12212 - 5133

ASSESSMENT INFORMATION

Full Market Value as of July 01, 2023 \$97,416.00
Total Assessed Value as of July 01, 2023 \$69,000.00
Uniform Percentage of Value 70.83

Exemption

Ex Amt

PROPERTY TAXES				
Taxable Assessed		Non-Homestead		
	Before STAR	Rate per \$1000	Rate per \$1000	Taxes Due
Sch	\$69,000.00	21.959799	29.061638	\$1,515.23
Lib	\$69,000.00	1.672036	2.212776	\$115.37
Total Tax Due:				\$1,630.60

SEND STUB WITH PAYMENT

2023 - 2024 SCHOOL TAX INSTALLMENT #1 65.74-1-18

Mark here [] for receipt City School District of Albany

DUE WITHOUT PENALTY BY Oct 02, 2023



2023-014195-1

If Paid Between	Penalty Amt	Total Due
Sep 01 - Oct 02	\$0.00	\$1,630.60
Oct 03 - Oct 31	\$48.92	\$1,679.52
Nov 01 - Nov 15	\$65.22	\$1,695.82

COUNTY OF ALBANY



Real Estate Tax Statement

Parcel: 06507400010180000000

Location: 164 LIVINGSTON AVE

Owner:

ALBANY COUNTY LAND BANK
111 WASHINGTON AVE STE 100
ALBANY NY 12210

Status:

Square

0

Land Valuation:

69,000

Building Valuation:

0

Exemptions:

0

Taxable Valuation:

69,000

Interest Per Diem:

195.67

Legal Description:

Deed Date:

Book/Page:

Interest Date: 05/31/2024

Year	Type	Bill				
2023	RE-E	5062				
Inst	Charge	Billed	Principal Due	Interest Due	Total Due	
1	ALBANY SCH	1,630.60	1,630.60	163.06	1,793.66	
	5% PERCENT	81.53	81.53	0.00	81.53	
		1,712.13	1,712.13	163.06	1,875.19	
Year Totals		1,712.13	1,712.13	163.06	1,875.19	
Grand Totals		1,712.13	1,712.13	163.06	1,875.19	

** End of Report - Generated by SFOX **



Application for Corrected Tax Roll

RP-554
(12/19)

Part 1 – General information: To be completed in duplicate by the applicant.

Names of owners Albany County Land Bank Corporation			
Mailing address of owners (number and street or PO box) 111 Washington Ave Suite 100		Location of property (street address) 453 Elk Street	
City, village, or post office Albany	State NY	ZIP code 12210	City, town, or village Albany
Daytime contact number 518-407-0309		Evening contact number	
Account number (as appears on tax bill)		Tax map number of section/block/lot: Property identification (see tax bill or assessment roll) 65.55-2-58	
		Amount of taxes currently billed 3,276.37	
Reasons for requesting a correction to tax roll: School taxes incurred after Albany County Land Bank acquisition.			

I hereby request a correction of tax levied by Albany for the year(s) 2023-2024
(County, city, village, etc.)

Signature of applicant 	Date 05-08-2024
----------------------------	---------------------------

Part 2 – To be completed by the County Director or Village Assessor. Attach a written report including documentation and recommendation. Specify the type of error and paragraph of subdivision 2, 3, or 7 of Section 550 under which the error falls.

Date application received 5/9/2024	Period of warrant for collection of taxes 9/1/2023
Last day for collection of taxes without interest 9/30/2023	Recommendation Approve application ☒ Deny application ☐
Signature of official 	Date 5/9/2024

If approved, the County Director must file a copy of this form with the assessor and board of assessment review of the city/town/village of _____ who must consider the attached report and recommendation as equivalent of petitions filed under section 553.

Part 3 – For use by the tax levying body or official designated by resolution _____
(insert number or date, if applicable)

Application approved (mark an X in the applicable box):

Clerical error ☐ Error in essential fact ☐ Unlawful Entry ☒

Amount of taxes currently billed 3,276.37	Corrected tax 0
Date notice of approval mailed to applicant	Date order transmitted to collecting officer

Application denied (reason): _____ _____

Signature of chief executive officer, or official designated by resolution	Date
--	------

Albany County Real Property Tax Service Agency
Tax Bill Correction Worksheet

Date: 5/9/2024
Municipality: City of Albany
Property Address: 453 Elk St
Tax ID Number: 65.55-2-58
Tax(s) to be corrected: 2023/2024 School Tax

Original Bill

Levy Description	Taxable Value	Rate	Tax Amount
School	132,000	21.959799	\$ 2,898.69
Library	132,000	1.672036	\$ 220.71
Total Tax Due			\$ 3,119.40

Correct Bill

Levy Description	Taxable Value	Rate	Tax Amount
School	-	21.959799	\$ -
Library	-	1.672036	\$ -
Total Tax Due			\$ -

Correction

Original Amount Due	\$ 3,119.40
Correct Amount Due	\$ -

COUNTY OF ALBANY



Real Estate Tax Statement

Parcel: 06505500020580000000

Location: 453 ELK ST

Owner:

ALBANY COUNTY LAND BANK
111 WASHINGTON AVE
ALBANY NY 12210

Status:

Square

0

Land Valuation:

132,000

Building Valuation:

0

Exemptions:

0

Taxable Valuation:

132,000

Interest Per Diem:

3,409.55

Legal Description:

Deed Date:

Book/Page:

Interest Date: 06/31/2024

Year	Type	Bill				
2023	RE-E	5021				
Inst	Charge	Billed	Principal Due	Interest Due	Total Due	
1	ALBANY SCH	3,119.40	3,119.40	311.94	3,431.34	
	MAILING CH	1.00	1.00	0.00	1.00	
	5% PERCENT	155.97	155.97	0.00	155.97	
		3,276.37	3,276.37	311.94	3,588.31	
Year Totals		3,276.37	3,276.37	311.94	3,588.31	

Year	Type	Bill				
2023	RE-1	6467				
Inst	Charge	Billed	Principal Due	Interest Due	Total Due	
1	ALBANY PRO	2,003.99	2,003.99	380.76	2,384.75	
	ALBANY WAT	359.63	359.63	68.33	427.96	
	OTHER CHAR	103.50	103.50	19.67	123.17	
	5 PERCENT	123.36	123.36	0.00	123.36	
		2,590.48	2,590.48	468.76	3,059.24	
Year Totals		2,590.48	2,590.48	468.76	3,059.24	

Year	Type	Bill				
2022	RE-E	5005				
Inst	Charge	Billed	Principal Due	Interest Due	Total Due	
1	ALBANY SCH	3,119.80	3,119.80	686.36	3,806.16	
	5% PERCENT	155.99	155.99	0.00	155.99	
		3,275.79	3,275.79	686.36	3,962.15	
Year Totals		3,275.79	3,275.79	686.36	3,962.15	

Year	Type	Bill				
2022	RE-1	7232				
Inst	Charge	Billed	Principal Due	Interest Due	Total Due	
1	ALBANY PRO	1,967.76	1,967.76	610.01	2,577.77	
	MAILING CH	1.00	1.00	0.00	1.00	
	5 PERCENT	98.39	98.39	0.00	98.39	
		2,067.15	2,067.15	610.01	2,677.16	
Year Totals		2,067.15	2,067.15	610.01	2,677.16	

COUNTY OF ALBANY



Real Estate Tax Statement

Year	Type	Bill			
2021	RE-E	4906			
Inst	Charge	Billed	Principal Due	Interest Due	Total Due
1	ALBANY SCH	3,108.35	3,108.35	1,056.84	4,165.19
	5% PERCENT	155.42	155.42	0.00	155.42
		3,263.77	3,263.77	1,056.84	4,320.61
Year Totals		3,263.77	3,263.77	1,056.84	4,320.61
Grand Totals		14,473.56	14,473.56	3,133.91	17,607.47

** End of Report - Generated by SFOX **

City School District of Albany
518 - 475 - 6035

Notice of 2023 School Tax

KASSIM PROPERTY LLC
423 HOWE AVE
BRONX, NY 10473

SBL: 65.55-2-58
ADDR: 453 ELK ST
SWIS: 010100 Albany
Bill #: 2023-000658

MAIL PAYMENT WITH REMITTANCE STUB TO:

City School District of Albany
PO Box 15133

Albany, NY 12212 - 5133

ASSESSMENT INFORMATION

Full Market Value as of July 01, 2023 \$186,362.00
Total Assessed Value as of July 01, 2023 \$132,000.00
Uniform Percentage of Value 70.83

Exemption

Ex Amt

PROPERTY TAXES				
Taxable Assessed		Non-Homestead		
	Before STAR	Rate per \$1000	Rate per \$1000	Taxes Due
Sch	\$132,000.00	21.959799	29.061638	\$2,898.69
Lib	\$132,000.00	1.672036	2.212776	\$220.71
Total Tax Due:				\$3,119.40

SEND STUB WITH PAYMENT

2023 - 2024 SCHOOL TAX INSTALLMENT #1 65.55-2-58

Mark here [] for receipt City School District of Albany

DUE WITHOUT PENALTY BY Oct 02, 2023



2023-000658-1

<u>If Paid Between</u>	<u>Penalty Amt</u>	<u>Total Due</u>
Sep 01 - Oct 02	\$0.00	\$3,119.40
Oct 03 - Oct 31	\$93.58	\$3,212.98
Nov 01 - Nov 15	\$124.78	\$3,244.18



ALBANY COUNTY
LAND BANK CORPORATION

May 8, 2024

Board of Directors

Charles Touhey, Chair
Touhey Associates

Joseph J. LaCivita, Vice Chair
City of Watervliet

Natasha M. Alexander, Treasurer
Resident

Samuel Wells, Secretary
Resident

Mark Bobb-Semple
Resident

Anthony Capece
*Executive Director, Central
Avenue BID*

Juanita Nabors
Resident

Joseph Seman-Graves
Resident

David C. Rowley
*Managing Partner, Cooper
Erving & Savage*

Executive Director

Sean M. Maguire, AICP CECd

Albany County Real Property Tax Service Agency
Michael McGuire, Director
Harold L. Joyce Albany County Office Building
112 State St., Room 1340
Albany, NY 12207

Re: New York State Land Bank Statutory Exemptions

Dear Mr. McGuire:

The Albany County Land Bank was established in 2014 by Albany County to facilitate the process of acquiring, improving, and redistributing tax-foreclosed, vacant, or abandoned properties. As a New York State Land Bank established under Article 16 of the New York State Not-For-Profit Corporation Law (the Land Bank Act) all income, operations and real property of the Albany County Land Bank Corporation is exempt from taxation by the State of New York and by any of its political subdivisions.

New York State Land Banks are also exempt from all special ad valorem levies, special assessments, sewer rents and user charges. In accordance with §1608(a) of the Land Bank Act, the tax-exempt status of all land bank property, inclusive of all statutory exemptions, is effective upon the date of transfer of title to a land bank.

Enclosed, please find tax correction forms pertaining to property taxes levied on real property owned by the Albany County Land Bank Corporation. I respectfully request these corrections be reviewed and corrected in accordance with the exemptions provided to us under New York State law.

I have attached more information pertaining to the statutory exemptions provided to New York State Land Banks for your reference. Should you have any questions, please do not hesitate to contact our office at (518) 407-0309 or via email at info@albanycountylandbank.org.

Thank you for your time and consideration.

Regards,

Sean M. Maguire, AICP CECd

BARCLAY DAMON LLP

MEMORANDUM

TO: New York Land Bank Association
FROM: John P. Sidd, Esq.
DATE: February 1, 2019
RE: §1608(a) of the Land Bank Act

=====

On December 28, 2018 Governor Cuomo signed into law the latest amendment to §1608(a) of the Land Bank Act. Section 1608(a) has now been amended on four occasions since its original passage in 2011 and, as such, this memorandum is intended to summarize the current version of this important section of the Land Bank Act. The current version of §1608(a) is inserted at the end of this memorandum for your convenience.

Section 1608(a) begins by setting forth the fundamental tax exempt status of land banks by exempting the real property of a land bank and its income and operations from all taxation by the State of New York and by any of its political subdivisions. No additional filings are necessary or required with the State of New York or any of its political subdivisions, including local real property assessors, to implement the tax exemption applicable to income, operations or real property.

The real property tax exemption set forth in the first sentence of §1608(a) is applicable to the general purpose local tax levy. The general purpose local tax levy finances the activity of local government by an ad valorem levy upon taxable real property within the jurisdiction of the local government to provide a general benefit to the entire jurisdiction. The ad valorem general purpose local tax is a tax that is imposed proportionately based upon the assessed value of real property. In addition to the general purpose local tax, real property is often subject to additional fees which generally fall into the following three categories: special ad valorem levies, special assessments or user charges (please note there are no special ad valorem levies in cities). These additional fees may be ad valorem or unit/usage-based and are imposed on real property located within a special district for municipal improvements or services benefitting the particular real property assessed.

For most real property tax exempt owners, their tax exemption begins and ends with exemption from the general purpose local tax and they remain responsible for all special ad valorem levies, special assessments and user charges. Fortunately, the

second sentence of §1608(a) entitles land banks to a complete exemption from special ad valorem levies, special assessments, sewer rent (a type of user charge imposed by Article Fourteen-F of the General Municipal Law) and all other user charges imposed by any municipal corporation, special district or other political subdivisions of the state.

The exemption to user charges, however, is not applicable to real property for which a land bank receives rent, fees, or other charges for the use of such real property. While this limitation will most often impact land bank real property which is occupied by a rent paying tenant, please keep in mind that onetime event use of land bank real property for a fee could jeopardize this additional exemption. Land banks should be prepared to demonstrate to their local assessors which of its properties generate rent, fees, or other charges and, more importantly, which do not.

The December 2018 amendment provides that the tax exempt status of land bank property, which includes all of the exemptions discussed above, shall be effective upon the date of transfer of title to a land bank. There is no longer a need to wait until the next taxable status date as land bank property will now be transferred to the tax exempt roll immediately upon acquisition. An immediate real property tax exemption upon acquisition is uncommon and, therefore, land banks should be prepared to bring this exemption to the attention of local assessors and taxing jurisdictions.

The exemption to the general purpose local tax has been in place since the original adoption of the Land Bank Act in 2011. The exemption to special ad valorem levies and special assessments has been in place since November of 2016. The exemption to user charges, including sewer rent, has been in place since October of 2017. All of the above exemptions being effective upon the date of transfer of title to a land bank was immediately effective as of December 28, 2018.

Section 1608(a) concludes by providing land banks with an exemption to all filing and recording fees imposed by County Clerks. Land banks join only the State of New York and County Governments in being exempt from such recording fees. While the exemption applies to any and all documents either filed or recorded with a County Clerk, land banks will most frequently enjoy the benefit in relation to the recording of deeds, mortgages, mortgage discharges and the filing of Transfer Tax Returns (TP-584) and Real Property Transfer Reports (RP-5217).

§1608(a) of the Land Bank Act

The real property of a land bank and its income and operations are exempt from all taxation by the state of New York and by any of its political subdivisions. The real property of a land bank shall be exempt from: (i) all special ad valorem levies and special assessments as defined in section one hundred two of the real property tax law; (ii) sewer rent imposed under article fourteen-F of the general municipal law; and (iii) any and all user charges imposed by any municipal corporation, special district or other political subdivisions of the state, provided, however, that real property of a land bank for which such land bank receives rent, fees, or other charges for the use of such real property shall not be exempt from subparagraphs (ii) and (iii) of this paragraph. Such exempt status shall be effective upon the date of transfer of title to a land bank, notwithstanding the applicable taxable status date. Notwithstanding any other general, special or local law relating to fees of clerks, no clerk shall charge or collect a fee for filing, recording or indexing any paper, document, map or proceeding filed, recorded or indexed for a land bank, or an officer thereof acting in an official capacity, nor for furnishing a transcript, certification or copy of any paper, document, map or proceeding to be used for land bank purposes.

Assessor Manual, Exemption Administration: NPCL section 1608

Exemption Administration Manual—Part 2: Private Community Service and Social Organizations

Section 4.05, NPCL section 1608: Land Banks

Exemption code: 25900

Year originally enacted: 2011

Related statutes: NPCL Art. 16; RPTL §1102(6)

Summary:

If a city, town, village or county adopts a local option to create a land bank under Not-for-Profit Corporation Law Article 16 for purposes of acquiring, holding, managing and developing tax-delinquent, tax foreclosed, vacant, and abandoned property for the eventual return of such property to productive use, such property acquired or transferred to the land bank or a lawfully organized subsidiary becomes exempt from all taxation, special ad valorem levies and special assessments. Each land bank created must be a Type-C not-for-profit corporation, with the power to design, develop, construct, demolish, reconstruct, rehabilitate, renovate, relocate and otherwise improve real property or rights or real property rights and interests. The term of the exemption benefit for an acquired property extends up to when the land bank transfers the property, or until the land bank dissolves, whichever comes first.

Eligibility requirements:

Ownership requirements:

Property must be owned by a land bank created under Article 16 of the NPCL, which for purposes of this exemption is defined as a Type-C not for profit corporation, and created by a foreclosing governmental unit or units (defined as a taxing district of a city, town, village or county). Or the property must be owned by a lawfully organized subsidiary of such land bank.

Property location requirements: Property acquired or held by a land bank must be located within the foreclosing governmental unit or units which created the land bank, unless the land bank is granted authority under an intergovernmental cooperation agreement with another municipality (city, town, village, or county) to manage and maintain the property located within such other municipality. If a county creates a land bank, such land bank's power to acquire real property is limited to those portions of the county located outside of the geographic boundaries of any other land bank created by other foreclosing governmental units located partially or entirely within such county.

Note: A school district partially or wholly located in a foreclosing governmental unit or units which created the land bank may participate in such land bank under an intergovernmental cooperation agreement concerning the land bank's operation.

Property use requirements:

Property acquired by the land bank must be limited to real property that is tax-delinquent, tax foreclosed, vacant or abandoned. However, a land bank may enter into an agreement to purchase other real property that is consistent with a redevelopment plan approved by the foreclosing governmental unit or units which created the land bank. In any event, the land bank must maintain all of the real property according to the laws and ordinances of the jurisdiction in which the property is located.

Certification by state or local government:

Creation of a land bank must be approved by the New York State Urban Development Corporation (doing business as the Empire State Development Corporation). No more than thirty-five land banks may exist at any given time across the state. Furthermore, each land bank that produces a redevelopment plan must submit such a plan to the foreclosing governmental unit or units for approval.

Required construction start date or other time requirement:

Exempt status is effective upon the date of transfer of title to a land bank.

Local option:

Yes - Each foreclosing governmental unit may choose whether or not to create a land bank under Article 16 of the Not-for-Profit Corporation Law. The option must be exercised through adoption of a local law, ordinance or resolution after a public hearing. Once the option to create the land bank is adopted, exemption from taxation becomes available to property acquired by the land bank.

Limitation on exemption:

Limitation on exemption by amount, duration, and taxing jurisdiction

Type of limitation	General municipal taxes	School district taxes	Special ad valorem levies	Special assessments
Amount	No limit*	No Limit*	No limit*	No limit*

Duration	No limit**	No limit**	No limit**	No limit**
Taxing jurisdiction: county or county special district	Exempt***	Not applicable	Exempt***	Exempt***
Taxing jurisdiction: city	Exempt*	Not applicable	Not applicable	Exempt*
Taxing jurisdiction: town or town special district	Exempt*	Not applicable	Exempt*	Exempt*
Taxing jurisdiction: village	Exempt*	Not applicable	Not applicable	Exempt*
Taxing jurisdiction: school district	Not applicable	Exempt****	Not applicable	Not applicable

*If land bank is created by municipal option;

**Unless and until sold or transferred by land bank, or until dissolution of land bank, whichever occurs first

***Exemption by county-created land bank is limited to areas outside of land banks created by other municipalities located partially or wholly within such county

****If property is located in portion of school district that is part of land bank

Payments in lieu of taxes:

None required.

Calculation of exemption:

General municipal and school district taxes: 100% of assessed value.

Special ad valorem levies and special assessments: 100% of assessed value.

Assessment roll section:

Exempt (RPS Roll Section 8)

Filing requirements (owner or occupant of property):

None.

Reporting requirements (Assessor):

None.

Similar exemptions:

None.

Updated: January 02, 2019



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
OFFICE OF THE EXECUTIVE
112 STATE STREET
ALBANY, NEW YORK 12207-2021
(518) 447-7040 - FAX (518) 447-5589
WWW.ALBANYCOUNTY.COM

MICHAEL P. MCLAUGHLIN, JR.
DEPUTY COUNTY EXECUTIVE

June 3rd, 2024

Honorable Joanne Cunningham
Chair, Albany County Legislature
112 State St., Rm. 710
Albany, NY 12207

Dear Chairwoman Cunningham:

Legislative authorization is requested to transfer tax-delinquent foreclosed properties located at 446 CR 360 in the Town of Rensselaerville to the previous owner as a result of the previous owner reacquiring the property for the amount of taxes, fees and interest.

This transfer is in accordance with the Albany County Disposition Plan wherein the property will be discretionally conveyed by the County back to the immediate former owner upon a payment of the outstanding delinquent tax liability. The County has received the payment of taxes of \$17,500.

If you have any questions regarding this request, I can make myself available at your earliest convenience. Thank you for your consideration.

Sincerely,

Daniel P. McCoy
Albany County Executive

cc: Hon. Dennis Feeney, Majority Leader
Hon. Frank Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



County of Albany

Harold L. Joyce
Albany County Office
Building
112 State Street - Albany,
NY 12207

Legislation Text

File #: TMP-5517, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

Authorizing the conveyance of real property located at 446 CR 360 in the town of Rensselaerville to the former owner.

Date: 5/15/24
Department: CEO
Attending Meeting: Patrick Curran
Submitted By: Patrick Curran
Title: Policy Analyst
Phone: 518-447-5639

Purpose of Request: Property Conveyance Enter text.

CONTRACT TERMS/CONDITIONS:

Party Names and Addresses:
Enter text.

Term: (Start/end date or duration) Enter text.
Amount/Raise Schedule/Fee: Enter text.

BUDGET INFORMATION:

Is there a Fiscal Impact: Yes ☒ No ☐
 Anticipated in Budget: Yes ☒ No ☐
 Spreadsheet attached: Yes ☐ No ☐

Source of Funding - (Percentages)

Federal: Enter text. County: Enter text.
State: Enter text. Local: Enter text.

County Budget Accounts:

Revenue Account and Line: A1310.01051
Revenue Amount: \$17,500.00
Appropriation Account and Line: Enter text.
Appropriation Amount: Enter text.

ADDITIONAL INFORMATION:

Mandated Program/Service: Yes ☐ No ☒
If Mandated, Cite Authority: Enter text.

Request for Bids / Proposals:

Competitive Bidding Exempt: Yes ☐ No ☐

of Response(s): Enter text.

of MWBE: Enter text.

of Veteran Business: Enter text.

Bond Resolution No.: Enter text.

Apprenticeship Program Yes ☐ No ☐

Previous requests for Identical or Similar Action:

Resolution/Law Number and Date: Enter text.

DESCRIPTION OF REQUEST: (state briefly why legislative action is requested)

Legislative authorization is requested to transfer tax-delinquent foreclosed properties located at 446 CR 360 in the Town of Rensselaerville to the previous owner as a result of delinquent taxes being paid to the County.

This transfer is in accordance with the Albany County Disposition Plan wherein the property will be discretionally conveyed by the County back to the immediate former owner upon a showing of hardship and payment of the outstanding delinquent tax liability. The County has received the payment of the previously delinquent taxes of \$17,500.

Assessment Parcel: 148.-1-50.30

Zoom to

Municipality:

Address:

Owner:

Property Class:

Year Built:

School District:

Acres:

Deed Reference:

Land Assessment:

Total Assessment:

Town of Rensselaerville

446 CR 360

Green, Thomas M

314 - Rural Vacant Lots <10 Acres

193201 - Greenville CSD

7.50

Not Available

\$17,500

\$17,500

6/20/2024

To Whom it may Concern,

With this letter, I officially announce my intention to re-acquire the property at 446 county route 360, Medusa, New York, 12120.

Sincerely,

Dana Caulkins

A handwritten signature in cursive script, appearing to read "D. Caulkins", written in black ink.



COUNTY OF ALBANY
DIVISION OF FINANCE

DEPOSIT TRANSMITTAL

Division of Finance, Cash Receipts, 112 State Street, Suite 800, Albany, New York 12207
Office: (518) 447-7070, Fax: (518) 447-5516
PLEASE PRINT OR TYPE INFORMATION

DEPARTMENT: Management and Budget

ADDRESS: ROOM 900 112 STATE STREET

Total Number of Checks: 1

Total Amount of Checks: \$15,101.59

Total Amount of Cash: \$0.00

Total Deposit: \$15,101.59

[illegible]

VERIFIED BY: _____ DATE: 5/18/23

TITLE: Director

If Problems with Deposit, Contact: Jeff Neal **Phone:** 4912

FOR OFFICE USE ONLY: DIVISION OF FINANCE

RECEIVED BY (Initial):

PAID RECEIPT STAMP

MAR 28 2024

Albany Co. Dept. of Management & Budget
Division of Finance

COUNTY OF ALBANY



Real Estate Tax Statement

Parcel: 14800000010500300000

Location: 446 CR 360

Owner:

GREEN THOMAS M
CAULKINS DANA P
101 BARD AVE
STATEN ISLAND NY 10310

Status:

Total	7.500
Deferr	.000
Land Valuation:	17,500
Building Valuation:	0
Exemptions:	0
Taxable Valuation:	17,500
Interest Per Diem:	5,797.90

Legal Description:

Deed Date:

Book/Page:

Interest Date: 04/30/2024

Year	Type	Bill			
2022	RE-B	1588			
Inst	Charge	Billed	Principal Due	Interest Due	Total Due
1	RENS	1,015.91	1,015.91	274.30	1,290.21
		1,015.91	1,015.91	274.30	1,290.21
Year Totals		1,015.91	1,015.91	274.30	1,290.21

Year	Type	Bill			
2021	TL-B	401			
Inst	Charge	Billed	Principal Due	Interest Due	Total Due
1	RENSL TL	1,053.07	1,053.07	410.70	1,463.77
	LEGAL CHAR	225.00	225.00	0.00	225.00
		1,278.07	1,278.07	410.70	1,688.77
Year Totals		1,278.07	1,278.07	410.70	1,688.77

Year	Type	Bill			
2020	TL-B	505			
Inst	Charge	Billed	Principal Due	Interest Due	Total Due
1	RENSL TL	1,050.36	1,050.36	535.68	1,586.04
	LEGAL CHAR	225.00	225.00	0.00	225.00
		1,275.36	1,275.36	535.68	1,811.04
Year Totals		1,275.36	1,275.36	535.68	1,811.04

Year	Type	Bill			
2019	TL-B	647			
Inst	Charge	Billed	Principal Due	Interest Due	Total Due
1	RENSL TL	1,022.06	1,022.06	643.90	1,665.96
	LEGAL CHAR	225.00	225.00	0.00	225.00
		1,247.06	1,247.06	643.90	1,890.96
Year Totals		1,247.06	1,247.06	643.90	1,890.96

COUNTY OF ALBANY



Real Estate Tax Statement

Year	Type	Bill				
2018	TL-B	2539				
Inst	Charge	Billed	Principal Due	Interest Due	Total Due	
1	RENSL TL	998.26	998.26	748.70	1,746.96	
	LEGAL CHAR	225.00	225.00	0.00	225.00	
		1,223.26	1,223.26	748.70	1,971.96	
Year Totals		1,223.26	1,223.26	748.70	1,971.96	
Year	Type	Bill				
2017	TL-B	424				
Inst	Charge	Billed	Principal Due	Interest Due	Total Due	
1	RENSL TL	1,023.65	1,023.65	890.58	1,914.23	
	LEGAL CHAR	225.00	225.00	0.00	225.00	
		1,248.65	1,248.65	890.58	2,139.23	
Year Totals		1,248.65	1,248.65	890.58	2,139.23	
Year	Type	Bill				
2016	TL-B	672				
Inst	Charge	Billed	Principal Due	Interest Due	Total Due	
1	RENSL TL	1,018.50	1,018.50	1,008.32	2,026.82	
	LEGAL CHAR	150.00	150.00	0.00	150.00	
		1,168.50	1,168.50	1,008.32	2,176.82	
Year Totals		1,168.50	1,168.50	1,008.32	2,176.82	
Year	Type	Bill				
2015	TL-B	294				
Inst	Charge	Billed	Principal Due	Interest Due	Total Due	
1	RENSL TL	1,010.71	1,010.71	1,121.89	2,132.60	
	LEGAL CHAR	0.00	0.00	0.00	0.00	
		1,010.71	1,010.71	1,121.89	2,132.60	
Year Totals		1,010.71	1,010.71	1,121.89	2,132.60	
Grand Totals		9,467.52	9,467.52	5,634.07	15,101.59	

** End of Report - Generated by Neal, Jeffrey **

Albany County Division of Finance

LEVEL I TAX LIEN FORECLOSURE SEARCH

SEARCH DATE: MAY 27, 2021

MUNICIPALITY: RENSSELAERVILLE, N.Y.,

INDEX NO: 05419-16,

PARCEL FORECLOSURE NO.: 000024,

DATE OF FILING OF LIST OF DELINQUENT TAXES: DECEMBER 14, 2016,

PROPERTY DESCRIPTION:

446 CR 360, T/O RENSSELAERVILLE,

TAX MAP NO.: 148.-1-50.30,

PROP. CLASS CODE: 314 RURAL VAC<10,

REPUTED PARCEL OWNER(S) :

THOMAS M. GREEN & DANA P. CAULKINS,

OPEN MORTGAGES	0
ASSIGNMENTS	0
JUDGMENTS	1
FEDERAL TAX LIENS	0
UCC'S	0
STATE TAX WARRANTS	10
LEASES	0
OTHER LIENORS	0
OTHER INTERESTS	0
ESTATE PROCEEDINGS	0
MORTGAGE FORECLOSURES	0
TOTAL	11

NOTE(S): AS OF SEARCH DATE: MAY 27, 2021

SAID PREMISES IS SUBJECT TO THE FOLLOWING:

LIENS, IF ANY (11), LISTED IN THIS LEVEL ONE SEARCH.

Albany County Division of Finance

LEVEL I TAX LIEN FORECLOSURE SEARCH

SECTION I

PARTIES HAVING AN INTEREST OF RECORD ON THE DATE OF FILING OF THE LIST OF DELINQUENT TAXES

A.1. OWNER(S) OF RECORD:

THOMAS M. GREEN, (Reputed Parcel Owner)	446 CR 360,	RENSSELAERVILLE, NY, 12147
DANA P. CAULKINS, (Reputed Parcel Owner)	446 CR 360,	RENSSELAERVILLE, NY, 12147

A-2. ADDITIONAL ADDRESSES: (10)

THOMAS M. GREEN, (Reputed Parcel Owner)	101 BARD AVE,	STATEN ISLAND, NY, 10310,
DANA P. CAULKINS, (Reputed Parcel Owner)	101 BARD AVE,	STATEN ISLAND, NY, 10310,
THOMAS J. GREEN,	64 ACADEMY ROAD,	ALBANY, NY, 12208 (item # 6)
THOMAS CLARKSON GREEN,	15 CARSON DR,	CHARLESTON, SC, 29407-5103 (item # 7, 8,)
THOMAS R. GREENE,	5305 CHRISTOPHER ST.	RAMSEY, NJ, 07446-1931 (item # 9)
THOMAS EDWARD GREEN, JR.,	5285 LAKEROCK SW WAY,	ATLANTA, GA 30331-8933 (item # 10, 11,)
THOMAS GREEN, JR.	32 FARRAH ST.	GARNER, NC, 27529-8680 (item # 12)
THOMAS GREEN,	13521 SW 10 TH PL,	DAVIE, FL, 33325-1606 (item # 13)
THOMAS GREEN,	4804 S. COBBLESTONE DR.	ZIONSVILLE, IN, 46077 (item # 14)
DJ GREEN,	15101D JOHN J. DELANEY DR.	CHARLOTTE, NC, 28277-2741 (item 4, 5,)

TITLE IS VESTED IN:

THOMAS M. GREEN and DANA P. CAULKINS, by BARGAIN AND SALE DEED, from ROSEMARIE D' ACUNTI, dated September 7, 2004, and duly recorded October 6, 2004, in Liber 2781 of Deeds, at Page 551, (item # 3) of the Albany N.Y., County Clerk's Office.

DEED R & R:

JOYCE M ZEITLER, ATTORNEY AT LAW,	RTE 32 NORTH, P.O. BOX 425,	GREENVILLE, NY, 12083
--------------------------------------	--------------------------------	-----------------------

ESTATE PROCEEDINGS: (0)

No proof of death was found, within the search time frame, on THOMAS. GREEN, in the Albany County, N.Y. Surrogates Court.

No proof of death was found, within the search time frame, on DANA P. CAULKINS, in the Albany County, N.Y. Surrogates Court.

TAX LIEN FORECLOSURE SEARCH

SECTION I (CONTINUED)

LEASES: (0)

--	--	--

OTHER INTERESTS: (0)

--	--	--

B. ADDITIONAL PARTIES:MORTGAGES: (0)

--	--	--

ASSIGNMENTS: (0)

--	--	--

UCC'S: (0)

--	--	--

MORTGAGE FORECLOSURES: (0)

--	--	--

FEDERAL TAX LIENS: (0)

--	--	--

STATE TAX WARRANTS: (2)

NYS COMMIS. OF TAX & FINANCE, ATTN: OFFICE OF COUNSEL,	POB 5149,	ALBANY, NY, 12205 (item # 7, 8,)
---	-----------	---------------------------------------

JUDGMENTS: (0)

--	--	--

OTHER LIENS: (0)

--	--	--

LEVEL I TAX LIEN FORECLOSURE SEARCH

SECTION II

PARTIES HAVING AN INTEREST OF RECORD AS OF THE SEARCH DATE

A.1. OWNER(S) OF RECORD:

--	--	--

A-2. ADDITIONAL ADDRESSES: (0)

--	--	--

TITLE IS VESTED IN:

--

DEED R & R:

--	--	--

ESTATE PROCEEDINGS: (0)

--	--	--

LEASES: (0)

--	--	--

OTHER INTERESTS: (0)

--	--	--

B. ADDITIONAL PARTIES:

MORTGAGES: (0)

--	--	--

ASSIGNMENTS: (0)

--	--	--

UCC'S: (0)

--	--	--

MORTGAGE FORECLOSURES: (0)

--	--	--

TAX LIEN FORECLOSURE SEARCH

SECTION II (CONTINUED)

FEDERAL TAX LIENS: (0)

--	--	--

STATE TAX WARRANTS: (8)

NYS DEPT OF TAX & FINANCE, ATTN: OFFICE OF COUNSEL,	W.A. HARRIMAN CAMPUS, BLDG. 9,	ALBANY, NY, 12227 (item # 4, # 5, # 9, # 10, # 11, # 12, # 13, # 14)
--	-----------------------------------	--

JUDGMENTS: (1)

PEOPLE OF THE STATE OF NEW YORK, C/O ALBANY CO. DISTRICT ATTORNEY,	6 LODGE STREET,	ALBANY, NY, 12207 (item # 6)
--	-----------------	--------------------------------

OTHER LIENS: (0)

--	--	--

SEARCH EXAMINED BY:

JAMES A. ALBANO

SEARCH TIME FRAMESTART DATE (FROM):COMPLETION DATE (TO):

OCTOBER 26, 1972	MAY 27, 2021
------------------	--------------

LIST OF DELINQUENT TAXES

FOR

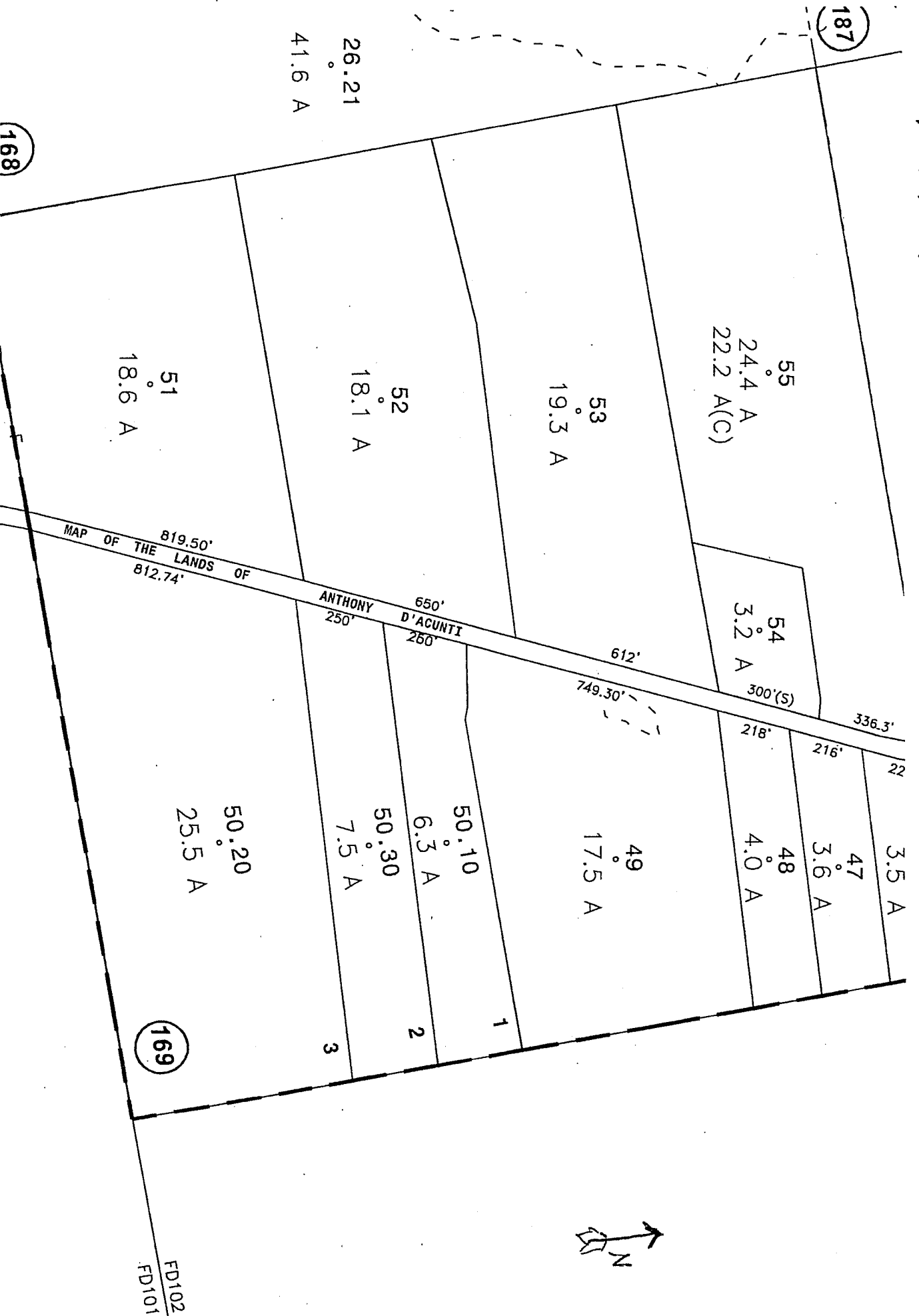
TOWN OF RENSSELAERVILLE, ALBANY COUNTY

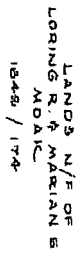
PARCEL FORCLOSURE NO: 000024
 FORECLOSURE PROCEEDING INDEX NO: 05419-16
 PARCEL LOCATION: 446 CR 360, TOWN OF RENSSELAERVILLE
 PARCEL TAX MAP NUMBER: 14800000010500300000
 PARCEL PROPERTY CLASS CODE: 314
 OWNER LISTED ON DELINQUENT TAX BILL: GREEN THOMAS M
 REPUTED PARCEL OWNER(S): GREEN THOMAS M
 AS OF 12/12/2016 CAULKINS DANA P
 MAILING ADDRESS: 101 BARD AVE
 STATEN ISLAND, NY 10310

DELINQUENT TAXES

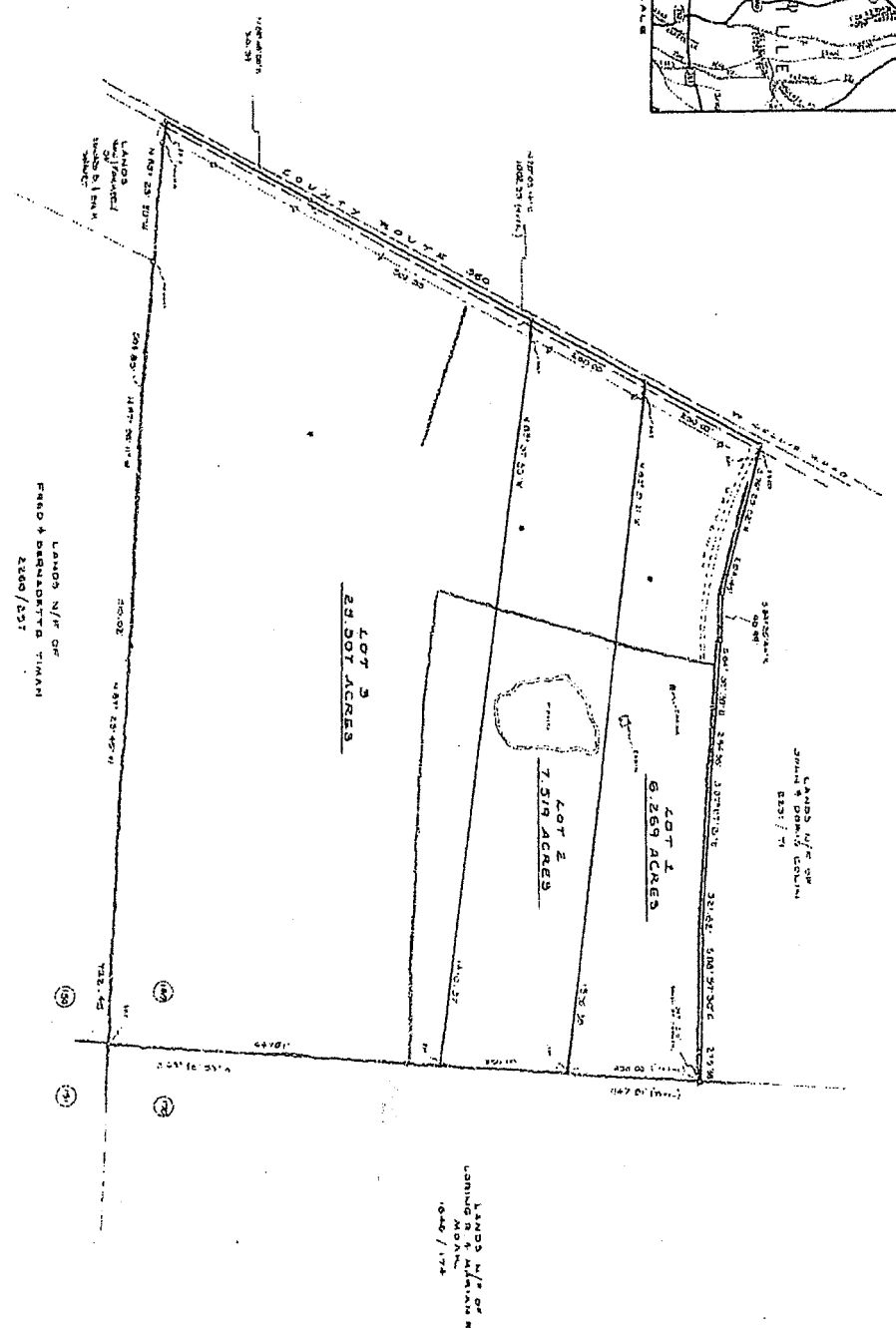
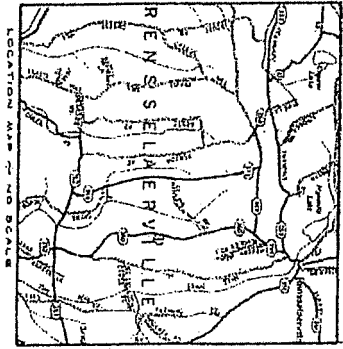
<u>YEAR</u>	<u>TYPE OF TAX</u>	<u>AMOUNT DUE</u>
2015	PROPERTY	1,160.71

Muskegonville, 4th County Block 560, Tax map # 148.-1-50.300





Map 6555 -
Mc 172



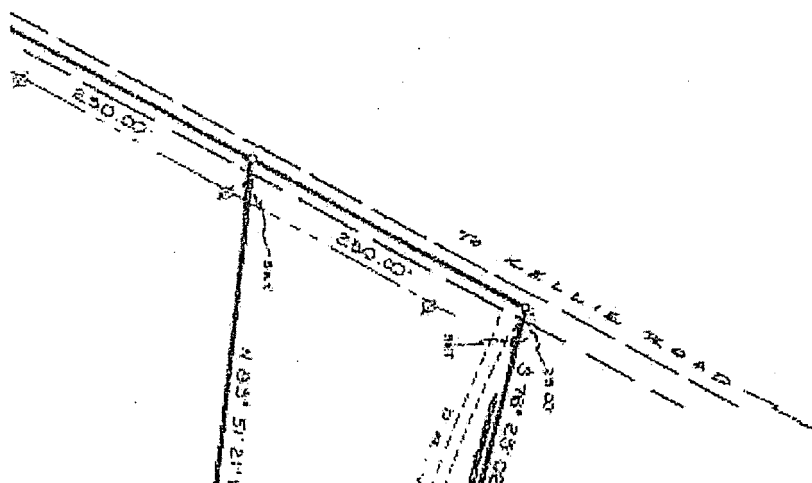
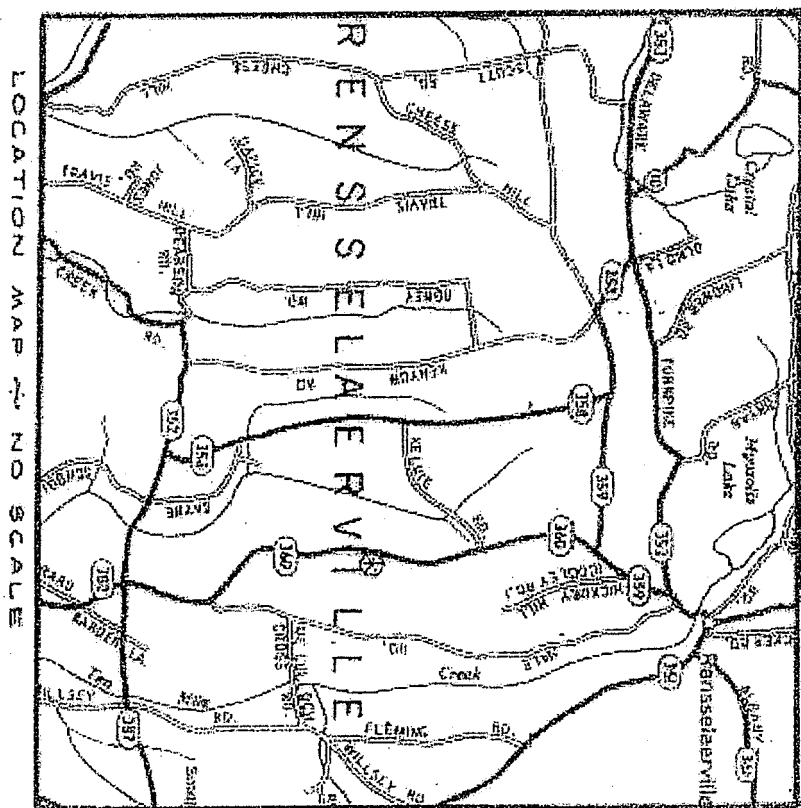
- NOTES**
1. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 2. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 3. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 4. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 5. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 6. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 7. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 8. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 9. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 10. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.

- LEGEND**
- 1. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 - 2. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 - 3. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 - 4. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 - 5. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 - 6. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 - 7. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 - 8. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 - 9. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.
 - 10. Surveyed by the Surveyor in 1978, under Order of the Board of Supervisors.

APPROVED - TOWN OF BURLINGTON
COUNTY OF ALABAMA
DATE: 11/10/00
BY: [Signature]
TITLE: [Title]
F. BARTO ASSOCIATES
BURLINGTON, ALA.

SURVEY & MAP OF LANDS OF
ANTHONY D'ACUNTI
COUNTY OF ALABAMA
STATE OF ALABAMA

SCALE: 1" = 100' (approx.)
DATE: 11/10/00
BY: [Signature]
F. BARTO ASSOCIATES
BURLINGTON, ALA.



Unsurpassed illustration or addition to a survey map bearing New York State Survey No. 708, and containing 2 of the N.Y. State Education Law survey marked with an original of the land surveyor's endorsement.

24210 CSS 9 JMM

ACCOUNT NO.

500 17,500
500 TO
7,500 TO
7,500 TO

***** 137.9-3-31

800
142,800
800
2,800 TO
2,800 TO
2,800 TO

124.-1-46

95,000
5,000 TO

0	39,730
156,300	
300	
570	
156,300 TO	

FULL MARKET VALUE 283,152

#3



**Albany County Clerk
Albany County Court House
16 Eagle Street Rm 128
Albany, NY 12207**

Return to:

JOYCE ZEITLER
RTE 32 NORTH
POB 425
GREENVILLE NY 12083

Instrument: Deed

Document Number: 9346449 Book: 2781 Page: 551 Transfer Tax Number: 2125

Grantor

DACUNTI, ROSEMARIE

Grantee

GREEN, THOMAS M
CAULKINS, DANA P

Number of Pages: 2

Transfer Tax Receipt
Albany County Clerk Received:
Trans Tax # 2125
.....\$138.00

Amount: \$34500.00

Filing Date/Time: 10/06/2004 at 3:08 PM

Receipt Number: 162496

Note:

THIS PAGE CONSTITUTES THE CLERK'S ENDORSMENT, REQUIRED BY SECTION 316A(5) & 319 OF THE REAL PROPERTY LAW OF THE STATE OF NEW YORK. DO NOT DETACH.

Thomas G. Clingan

Thomas G. Clingan, County Clerk

#3

De

2125

Albany County Clerk
Document Number 9346449
Rcvd 10/06/2004 3:08:42 PM



Bargain and Sale Deed

4-3208

THIS INDENTURE, made this 7th day of September, 2004

LIBER 2781 PAGE 551

BETWEEN

ROSEMARIE D'ACUNTI, residing at 17940 Gulf Road, Unit 9, Redington Shores, Florida 33708, Party of the First Part, and

THOMAS M. GREEN and DANA P. CAULKINS, residing at 101 Bard Avenue, Staten Island, New York 10310, Parties of the Second Part, AS JOINT TENANTS WITH RIGHTS OF SURVIVORSHIP.

WITNESSETH that the party of the first part, in consideration of ONE AND 00/100 (\$1.00) DOLLARS and other good and valuable consideration paid by the parties of the second part, do hereby grant and release unto the parties of the second part, their heirs and assigns forever,

ALL that piece or parcel of land situate, lying and being in the Town of Rensselaerville, County of Albany, State of New York, being more particularly described as follows:

BEGINNING at a point in the centerline of County Route 360, said point being the northwest corner of Lot #3 and 25.00 feet from an iron pin set on the easterly bounds of said road;

running thence along the centerline of the aforementioned County Route 360, N 28° 03' 14" E. 250.00 feet to a point, said point being 25.00 feet from an iron pin set;

running thence S 83° 51' 21" E 1306.38 feet through said iron pin and along said Lot #1 and passing through a stonewall to an iron pin set in the centerline of a stonewall and the westerly bounds of lands of Moak;

running thence along said stonewall S 03° 42' 53" W. 250.00 feet to an iron pin set and being the northeasterly corner of Lot #3;

running thence along said Lot #3 N 83° 07' 53" W. 1410.37 feet passing through a stone wall and the first mentioned iron pin set to the point or place of beginning. Containing 7.519 acres of land.

BEING the same premises conveyed to the party of the first part by deed dated February 27, 1987 and recorded in the Albany County Clerk's Office on March 20, 1987 in Liber 2333 of Deeds at page 713.

P&L

Joyce M. Zeittler
Attorney at Law
Route 32 North
P.O. Box 425
Greenville, New York 12083

#3

LIBER 2781 PAGE 552

TOGETHER with the appurtenances and all the estate and rights of party of the first part in and to said premises,

TO HAVE AND TO HOLD the premises herein granted unto the parties of the second part, their heirs and assigns forever.

AND said party of the first part covenant that the party of the first part has not done or suffered anything whereby the said premises have been encumbered in any way whatever, except as aforesaid.

AND, the party of the first part, in compliance with Sec. 13 of the Lien Law, covenant that the party of the first part will receive the consideration for this conveyance and will have the right to receive such consideration as a trust fund to be applied first for the purposes of paying the cost of the improvements and will apply the same first to the payment of the cost of the improvements before using any part of the total of the same for any other purpose.

IN WITNESS WHEREOF, the party of the first part has hereunto set her hand and seal the day and year first above written.

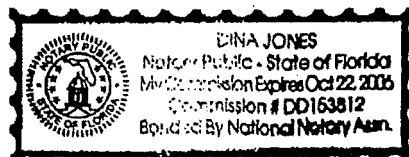
STATE OF NEW YORK } ss:
COUNTY OF [illegible]

Rosemarie D'Acunti
Rosemarie D'Acunti

STATE OF FLORIDA)
COUNTY OF PINELLAS) ss:

On the 7th day of September, in the year 2004, before me, the undersigned a notary public in and for said state, personally appeared ROSEMARIE D'ACUNTI, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument and that such individual made such appearance before the undersigned in the County of Pasco Florida. (Insert the city of other political subdivision and the state or country or other place the acknowledgment was taken).

[Signature]
Notary Public



#2

This Indenture,

Made the _____ day of _____
Nineteen Hundred and Eighty-seven
Between _____

080720

1987

ANTHONY D'ACURTI

14 Fox Lane
Dix Hills, New York
11746

part y of the first part and

1802033 n2 713

ROSEMARIE D'ACURTI

14 Fox Lane
Dix Hills, New York
11746

Witnesseth that the party of the first part in consideration of

lawful money of the United States and other good and valuable consideration,
paid by the party of the second part do hereby grant and convey unto the
party of the second part her heirs

all that piece or parcel of land situated in the Town of Mendham,
New York, being a portion of the land described as follows:

Beginning at a point in the centerline of County Route
380, said point being the northern corner of a lot of 21.00
feet from an iron pin set on the eastern side of
said road,

running thence along the centerline of the abovesaid
County Route 380 North 27° 24' East 120.00 feet to a
point, said point being 120.00 feet from an iron pin set

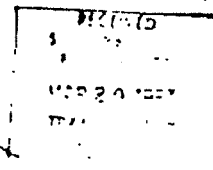
running thence along the centerline of County Route 380
said iron pin and along said centerline North 27° 24' East
stone wall to an iron pin set on the eastern side of
stone wall and the western side of said road,

running thence along the centerline of County Route 380
said iron pin and along said centerline North 27° 24' East
corner of lot 2,

running thence along the centerline of County Route 380
said iron pin and along said centerline North 27° 24' East
stone wall to an iron pin set on the eastern side of
stone wall and the western side of said road,

As it appears the said premises are more fully described
as Tracting Number 1802033, dated October 1, 1987.

Being a portion of the premises conveyed to George
Longo and Frances Longo, his wife, by Anthony D'Acurtti
deed dated October 21, 1982 and recorded in the
County Clerk's Office at Mendham, New Jersey, as
shown on page 19.



*Copy to Grand Jury
all the way
June 11, 1987*

2060-591

#2

Together with the appurtenances and all the estate and rights of the party of the first part in and to said premises

to have and to hold the premises herein granted unto the party of the second part, her heirs

AND the party of the first part covenants that the party of the first part has not done or suffered anything whereby the said premises have been incumbered in any way whatever, except as aforesaid.

AND the party of the first part, in compliance with Section 13 of the Lien Law, covenants that the party of the first part will receive the consideration for this conveyance and will hold the right to receive such consideration as a trust fund to be applied first for the purpose of paying the cost of the improvement and will apply the same first to the payment of the cost of the improvement before using any part of the total of the same for any other purpose.

LIBER 2333 PL 714

In Witness Whereof, the party of the first part has hereunto set hand and seal the day and year first above written

In Presence of

Anthony D'Acunzi

STATE OF NEW YORK
COUNTY OF ALBANY

Notary Public in and for the State of New York

CLYDE E. JONES
ALBANY, N.Y.

State of New York
County of

before me, the subscriber, personally appeared

Anthony D'Acunzi

(on this 27 day of March
Nineteen Hundred and Eighty-seven

to me personally known and known to me to be the same person described in and who executed the within instrument and acknowledged to me that he executed the same

Notary Public

NOTARY PUBLIC, State of New York
No. 25-10000
Qualified in Albany County
Expiration Date 11-11-1991

#1

This Indenture

Made the 27th day of October, Nineteen Hundred and Seventy-two,
Between George Congo and Frances Congo, his wife, both residing at Cairo, Greene County, New York, no street number,

parties of the first part, and
Anthony D'Acunti, of 14 Fox Lane, Dix Hills, Huntington, New York 11746,

Witnesseth that the parties of the first part, in consideration of One Dollar (\$ 1.00) lawful money of the United States, paid by the part of the second part, do hereby grant and release unto the part of the second part, and assigns forever, all that tract or parcel of land situate, lying and being in the Town of Rensselaerville, County of Albany and State of New York, bounded and described as follows:

Beginning at a point on the east side of Medusa-Rensselaerville Road, in the division line between lands of Congo on the north and lands of Goodrich, reputed owner, on the south, being the northwest corner of lands of Goodrich and the southwest corner of lands of Congo; running thence easterly along the line of lands of Goodrich 1698 feet more or less to the southeast corner of lands of Congo; thence northerly along the line of lands of the Beach farm, now or formerly, 1053 feet more or less to a point 3 feet north of the stone wall running east and west; thence westerly in a line 3 feet north of the centerline of said stone wall 1174 feet to a point in the east line of said road; thence southerly along the east side of said road 1314 feet more or less to the place of beginning.

Being part of the lands conveyed by Chester W. Kellie and Lulu M. Kellie, his wife, to George Congo and Frances Congo, his wife, by deed dated August 20, 1956, recorded August 20, 1956 in the Albany County Clerk's Office in Liber 1505 of Deeds page 337.

Subject to utility easements of record affecting said premises, if any.

BOOKS	INDEX	BOOK & PAGE
RECORDING IN		
DEEDS		
TRACTS		
MORTGAGES		
GRANTEES		
BOOK AND		
TACING		
PHOTO		
COMPARED		
MISC. RECD.		

ALBANY COUNTY
034350
REAL ESTATE
TRANSFER TAX
STATE OF NEW YORK
Dept. of Taxation
MAR-7713
PS 10950
06.60
PS

097012222551 7713

Stamp
6.60

#1

Together with the appurtenances and all the estate and rights of the parties of the first part in and to said premises, to have and to hold the premises herein granted unto the part of the second part, and assigns forever.

UNDER 2060 PAGE 592

And said parties of the first part covenant as follows:

First, That the part of the second part shall quietly enjoy the said premises;

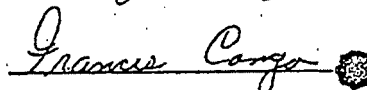
Second, That said parties of the first part will forever warrant the title to said premises.

Third, That, in Compliance with Sec. 13 of the Lien Law, the grantors will receive the consideration for this conveyance and will hold the right to receive such consideration as a trust fund to be applied first for the purpose of paying the cost of the improvement and will apply the same first to the payment of the cost of the improvement before using any part of the total of the same for any other purpose.

In Witness Whereof, the parties of the first part have hereunto set their hands and seals the day and year first above written.







State of New York } On this 27th day of October,
County of Greene } ss. Nineteen Hundred and Seventy-two,
before me, the subscriber, personally appeared

George Congo and Frances Congo, his wife,
to me personally known and known to me to be the same persons described in and who executed the within instrument, and they duly acknowledged to me that they executed the same.



ERNEST PUGLISI
Notary Public, State of New York
Residing in Greene County
Commission Expires March 30, 1974

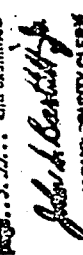

WARRANT WITH LIEN COVENANT

George Congo and
Frances Congo, his wife

TO

Anthony D'Acunti

Dated, October 27, 1972

State of New York } ss: Recorded
County of Albany }
On this 27th day of October, 1972
at 10:51 A.M. by
both D.O.G. of
17 F.F.R.
P.O. 591 and EXHIBIT

ALBANY COUNTY CLERK

ERNEST PUGLISI
COUNSELOR AT LAW
CAIRO, NEW YORK

Bruce A. Hidley, Albany County Clerk

Instr #: X18-66160

Rec Date: 08/22/2018 09:13:37 AM

Doc Grp/Desc: W / JUDGMENT, STATE TAX WARRANT

Creditor: NYS DEPT OF TAXATION AND FINANCE

Debtor: GREEN DJ
15101D JOHN J DELANEY DR
CHARLOTTE, NC 28277-2741

Amount: \$5,353.00

Transmittal ID: E09303

Warrant ID: C-100011947-W011

Related:

#4
Possible
Similar
Name
of
Dane M. Gree
P-K-A
Dane M. Gault

Bruce A. Hidley, Albany County Clerk

Instr #: X19-108842

Rec Date: 08/28/2019 09:29:51 AM

Doc Grp/Desc: W / JUDGMENT, STATE TAX WARRANT

Creditor: NYS DEPT OF TAXATION AND FINANCE

Debtor: GREEN DJ
15101D JOHN J DELANEY DR
CHARLOTTE, NC 28277-2741

Amount: \$4,478.50

Transmittal ID: E15611

Warrant ID: C-100011947-W012

Related:

#5 POSSIBLE
SIGNATURE NAME
OF
Dana P. Green
A-K A
Dana P.
Coulkins 144

#6

Bruce A. Hidley, Albany County Clerk

Instr #: T17-4436

Rec Date: 10/02/2017 01:30:27 PM
Doc Grp/Desc: JT / JUDGMENT, TRANSCRIPT OF

Creditor: PEOPLE OF STATE OF NEW YORK
6 LODGE STREET
ALBANY, NY 12207

Debtor: GREENE THOMAS J
64 ACADEMY ROAD
ALBANY, NY 12208

Court Name: TOWN

Where Perfected: BETHLEHEM

Perfected Date: 5/30/2017

Damages: \$205.00

Total: \$205.00

Plaintiff Attorney: ALBANY COUNTY DISTRICT ATTORNEY

Related:

#6

STATE OF NEW YORK
ALBANY COUNTY

BETHLEHEM TOWN COURT
CRIMINAL PART

PEOPLE OF THE STATE OF NEW YORK

VS.

THOMAS J. GREENE; dob: 12/17/1998, Defendant

CASE NO: 16100381

ORDER TO CONVERT FINE TO CIVIL JUDGEMENT

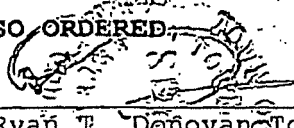
<u>Original Charge(s)</u>	<u>Amended Charges(s)</u>
PL 155.25 PETIT LARCENY	

Thomas J. Greene having being convicted of the charges listed above before Honorable Ryan T. Donovan, Justice of Bethlehem Town Court, and sentenced on March 7, 2017 it is;

ADJUDGED that such defendant has FAILED to pay a fine, including any applicable mandatory surcharge DNA fee and a crime victims fee, of \$205.00 to the Court is therefore;

ORDERED, that the District Attorney of Albany County shall file a certified copy of this order with the County Clerk of Albany County, pursuant to CPL 420.10(6), for entry by the County Clerk in the same manner as a judgement in a civil action.

SO ORDERED


Ryan T. Donovan Town Justice

Dated: May 30, 2017

Defendant's Address: Thomas J. Greene
64 Academy Rd.
Albany, NY 12208

RECEIVED
2017 OCT -2 PM 1:18
ALBANY COUNTY CLERK

#7

Bruce A. Hidley, Albany County Clerk

Instr #: X03-17290

Rec Date: 09/17/2003 10:00:44

Doc Grp/Desc: W / JUDGMENT, STATE TAX WARRANT

Creditor: NYS COMMISSIONER OF TAX & FINANCE
POB 5149 ALBANY, NY 12205

Debtor: GREEN THOMAS CLARKSON
15 CARSON DR CHARLESTON SC 29407-5103

Perfected Date: 9/10/2003

Amount: \$50.65

Warrant ID: E-020845701-W001-7

Related:

#8

Bruce A. Hidley, Albany County Clerk

Instr #: X03-17291

Rec Date: 09/17/2003 10:00:50

Doc Grp/Desc: W / JUDGMENT, STATE TAX WARRANT

Creditor: NYS COMMISSIONER OF TAX & FINANCE
POB 5149 ALBANY, NY 12205

Debtor: GREEN THOMAS CLARKSON
15 CARSON DR CHARLESTON SC 29407-5103

Perfected Date: 9/10/2003

Amount: \$3,630.00

Warrant ID: E-020845701-W002-2

Related:

#9

Bruce A. Hidley, Albany County Clerk

Instr #: X17-32404

Rec Date: 05/10/2017 09:03:31 AM

Doc Grp/Desc: W / JUDGMENT, STATE TAX WARRANT

Creditor: NYS DEPT OF TAXATION AND FINANCE

Debtor: GREENE THOMAS R
5305 CHRISTOPHER ST
RAMSEY, NJ 07446-1931

Amount: \$2,140.81

Transmittal ID: 401374

Warrant ID: E-045319909-W001-8

Related:

#10

Bruce A. Hidley, Albany County Clerk

Instr #: X18-84571

Rec Date: 10/17/2018 09:15:56 AM

Doc Grp/Desc: W / JUDGMENT, STATE TAX WARRANT

Creditor: NYS DEPT OF TAXATION AND FINANCE

Debtor: GREEN THOMAS EDWARD JR
5285 LAKEROCK SW WAY
ATLANTA, GA 30331-8933

Amount: \$22,270.95

Transmittal ID: E10299

Warrant ID: C-970091580-W013

Related:

#11

Bruce A. Hidley, Albany County Clerk

Instr #: X19-55634

Rec Date: 04/10/2019 09:28:14 AM

Doc Grp/Desc: W / JUDGMENT, STATE TAX WARRANT

Creditor: NYS DEPT OF TAXATION AND FINANCE

Debtor: GREEN THOMAS EDWARD JR
5285 LAKEROCK SW WAY
ATLANTA, GA 30331-8933

Amount: \$18,258.85

Transmittal ID: E12995

Warrant ID: C-970091580-W014

Related:

Bruce A. Hidley, Albany County Clerk

Instr #: X19-63432

Rec Date: 04/24/2019 09:10:25 AM

Doc Grp/Desc: W / JUDGMENT, STATE TAX WARRANT

Creditor: NYS DEPT OF TAXATION AND FINANCE

Debtor: GREEN THOMAS JR
32 FARRAH ST
GARNER, NC 27529-8680

Amount: \$16,254.17

Transmittal ID: E13375

Warrant ID: C-970046080-W010

Related:

#12

#13

Bruce A. Hidley, Albany County Clerk

Instr #: X19-73040

Rec Date: 05/15/2019 09:18:29 AM

Doc Grp/Desc: W / JUDGMENT, STATE TAX WARRANT

Creditor: NYS DEPT OF TAXATION AND FINANCE

Debtor: GREEN THOMAS
13521 SW 10TH PL
DAVIE, FL 33325-1606

Amount: \$22,779.71

Transmittal ID: E13771

Warrant ID: C-130000601-W006

Related:

#14

Bruce A. Hidley, Albany County Clerk

Instr #: X20-49818

Rec Date: 11/18/2020 09:29:32 AM

Doc Grp/Desc: W / JUDGMENT, STATE TAX WARRANT

Creditor: NYS DEPT OF TAXATION AND FINANCE

Debtor: GREEN THOMAS
4804 S COBBLESTONE DR
ZIONSVILLE, IN 46077-8984

Amount: \$2,436.73

Transmittal ID: 423811

Warrant ID: E-051394485-W001-7

Related:



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
DEPARTMENT OF PUBLIC WORKS
449 NEW SALEM ROAD
VOORHEESVILLE, NEW YORK 12186-4826
(518) 765-2055 - FAX (518) 447-7047
www.albanycountyny.gov

LISA M. RAMUNDO
COMMISSIONER

MICHAEL MCLAUGHLIN
DEPUTY COUNTY EXECUTIVE

SCOTT D. DUNCAN
DEPUTY COMMISSIONER

February 20, 2024

Hon. Joanne Cunningham, Chairwoman
Albany County Legislature
112 State Street, Rm. 710
Albany, NY 12207

Dear Chairwoman Cunningham:

The Department of Public Works is requesting Legislative authorization of a Resolution to abandon a section of County Route 103, (Blodgett Hill Road), located adjacent to 758 Blodgett Hill Road, in the Town of Coeymans; and to convey the abandoned section to an abutting property owner per the property owner's request, pursuant to New York State Highway Law section 118-A.

Albany County has stopped using and maintaining 0.23 acres of CR 103 as referenced above. Eric D. Burns and Kristin A Burns, who reside at 758 Blodgett Hill Road, have offered \$250.00 for purchase of the property and have provided mapping and a legal property description to Albany County DPW. Albany County Real Property has reviewed the information provided by the Burns' and concurs that the potential purchase price is in line with the market value.

If there are any questions or further information is needed, please feel free to contact my office.

Sincerely,

Lisa M. Ramundo
Commissioner

cc: Hon. Dennis Feeney, Majority Leader
Hon. Frank Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Amis Zilgme, Minority Counsel



County of Albany

Harold L. Joyce
Albany County Office
Building
112 State Street - Albany,
NY 12207

Legislation Text

File #: TMP-5571, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

Authorizing the Abandoning and Conveyance of Real Property located at 758 Blodgett Hill Road in the Town of Coeymans

Date: 5/30/24
Department: CEO
Attending Meeting: Patrick Curran
Submitted By: Patrick Curran
Title: Policy Analyst
Phone: 5184475639

Purpose of Request: Property Conveyance Enter text.

CONTRACT TERMS/CONDITIONS:

Party Names and Addresses:
Enter text.

Term: (Start/end date or duration) Enter text.
Amount/Raise Schedule/Fee: Enter text.

BUDGET INFORMATION:

Is there a Fiscal Impact: Yes ☒ No ☐
 Anticipated in Budget: Yes ☒ No ☐
 Spreadsheet attached: Yes ☐ No ☐

Source of Funding - (Percentages)

Federal: Enter text. County: Enter text.
State: Enter text. Local: Enter text.

County Budget Accounts:

Revenue Account and Line: A1310.01051
Revenue Amount: \$250.00
Appropriation Account and Line: Enter text.
Appropriation Amount: Enter text.

ADDITIONAL INFORMATION:

Mandated Program/Service: Yes ☐ No ☒
If Mandated, Cite Authority: Enter text.

Request for Bids / Proposals:

Competitive Bidding Exempt: Yes ☐ No ☐

of Response(s): Enter text.

of MWBE: Enter text.

of Veteran Business: Enter text.

Bond Resolution No.: Enter text.

Apprenticeship Program Yes ☐ No ☐

Previous requests for Identical or Similar Action:

Resolution/Law Number and Date: Enter text.

DESCRIPTION OF REQUEST: (state briefly why legislative action is requested)

The Department of Public Works is requesting Legislative authorization of a Resolution to abandon a section of County Route 103, (Blodgett Hill Road), located adjacent to 758 Blodgett Hill Road, in the Town of Coeymans; and to convey the abandoned section to an abutting property owner per the property owner's request, pursuant to New York State Highway Law section 118-A.

Albany County has stopped using and maintaining 0.23 acres of CR 103 as referenced above. Eric D. Burns and Kristin A Burns, who reside at 758 Blodgett Hill Road, have offered \$250.00 for purchase of the property and have provided mapping and a legal property description to Albany County DPW. Albany County Real Property has reviewed the information provided by the Burns' and concurs that the potential purchase price is in line with the market value.

Eric Burns
780 Blodgett Hill Road
Ravena NY, 12143

Lisa Ramundo
Commissioner
Albany County Department of Public Works

April 16, 2024

Dear Ms. Ramundo,

My wife and I purchase property located at 758 Blodgett Hill Road (County Route 103) in the Town of Coeymans in April of 2023. After speaking with the previous owner and reviewing tax maps we have learned that a majority of the driveway that has been used for that property for over 30 years in owned Albany County and is unused.

We would like to acquire the portion of that property that is our driveway and secure it as ours to avoid having any problems in the future. We had a survey and description completed for that parcel of land and it was submitted to your office for review.

We have reviewed similar cases like this where unused County property was given or sold to land owners and we believed that a fair price for the portion of land we are looking to acquire is two hundred and fifty dollars (\$250.00).

Please feel free to contact me directly with any questions you may have. I look forward to hearing back from you.

Thank you for your time,

A handwritten signature in black ink, appearing to read 'E Burns', with a long horizontal flourish extending to the right.

Eric Burns
518-429-6416
Eric.burns@albanycountyny.gov

DESCRIPTION
 PARCEL TO BE ACQUIRED FROM THE COUNTY OF ALBANY
 CONTAINING (0.23) ACRES
 PREPARED FOR: ERIC D. BURNS & KRISTIN A. BURNS
 BLODGETT HILL ROAD (COUNTY ROUTE 103)
 TOWN OF COEYMANS
 COUNTY OF ALBANY, STATE OF NEW YORK

Beginning at a point in the southeasterly line of lands of The County of Albany (Blodgett Hill Road, County Route 103), at its point of intersection with the division line between lands on the southwest conveyed to Gerald E. Weidman, Jr. & Sherrie L. Weidman by deed dated August 15, 2013 in Liber 3079, page 530 and lands on the northeast conveyed to Eric D. Burns & Kristin A. Burns by deed dated April 2024, 2023 as Instrument #: R2023-7907, recorded in the Office of the Albany County Clerk; thence running from said point of beginning N54°10'06"E along the southeasterly line of said lands of The County of Albany and along the northwesterly line of said lands conveyed to Eric D. Burns & Kristin A. Burns (16.50) feet to a point; thence N52°32'52"W along the northeasterly line of lands of The County of Albany and along the southwesterly line of said lands conveyed to Eric D. Burns & Kristin A. Burns (91.84) feet to a point; thence N08°11'02"W along the easterly line of said lands of The County of Albany and along the westerly line of said lands conveyed to Eric D. Burns & Kristin A. Burns (39.62) feet to a point, said point being the most southerly corner of lands conveyed by The County of Albany to Robert C. Wheeler by deed (Quit Claim), dated June 17, 1952, recorded as aforesaid on June 19, 1952 in Liber 1315, page 459; thence in a northerly direction along the easterly line of lands of The County of Albany and along the westerly line of said lands conveyed by The County of Albany to Robert C. Wheeler, now lands of Eric D. Burns & Kristin A. Burns the following courses and distances:

N22°03'39"W (33.62) feet to a point;
 N13°28'59"W (21.54) feet to a point;
 N08°19'06"E (50.00) feet to a point;
 N14°01'44"E (30.15) feet to a point and N20°52'11"E (35.29) feet to a point; thence
 in a general southwesterly direction, through said lands of The County of Albany with a curve to

the right, having a radius of (1,222.35) feet, a central angle of $08^{\circ}14'45''$, an arc length of (175.92) feet, and whose chord bears $S32^{\circ}56'33''W$ (175.76) feet to a point, the last mentioned curve being (29.00) feet southeasterly of, measured radially from and parallel with the centerline of pavement in Blodgett Hill Road (County Route 103); thence $S41^{\circ}33'01''E$ continuing through lands of The County of Albany (97.86) feet to a point; thence $S61^{\circ}02'43''E$ continuing through lands of The County of Albany (98.72) feet to the point of beginning.

Containing (0.23) acres of land.



DANIEL P. MCCOY
COUNTY EXECUTIVE

COUNTY OF ALBANY
OFFICE OF THE EXECUTIVE
112 STATE STREET
ALBANY, NEW YORK 12207-2021
(518) 447-7040 - FAX (518) 447-5589
WWW.ALBANYCOUNTY.COM

MICHAEL P. McLAUGHLIN, JR.
DEPUTY COUNTY EXECUTIVE

June 3, 2024

Honorable Joanne Cunningham, Chairwoman
Albany County Legislature
112 State Street, Room 710
Albany, New York 12207

Dear Chairwoman Cunningham:

Enclosed is a Request for Legislative Action from my office to allow for the extension of a license agreement giving permission to Stewart's Shops Corp. to use Albany County property. Resolution No. 326 of 2017 authorized the original execution of a license agreement between Albany County and Stewart's Shops Corp. to allow the use of county property at the Stewart's location at 309 Delaware Avenue in Delmar, NY. The rear piece of the parking lot of this location encroaches upon the Albany County Helderberg-Hudson Rail Trail.

The original agreement allowed for this property to be used for the annual amount of \$6,000 paid to Albany County for a three-year term between September 1, 2017 and August 31, 2020. Also included in the original agreement is the option for the licensee to renew the license agreement for three successive three-year terms. The licensee elected to extend the agreement for the first term from August 31, 2020 to August 31, 2023 which was authorized in Resolution No. 20-369. The licensee wishes to extend the agreement by the second of three terms.

I respectfully request consideration on this matter. If you have any questions or need additional information, please do not hesitate to contact me at (518) 447-7040.

Sincerely,

Daniel P. McCoy
Albany County Executive

cc: Hon. Dennis A. Feeney, Majority Leader
Hon. Frank A. Mauriello, Minority Leader
Rebekah Kennedy, Majority Counsel
Arnis Zilgme, Minority Counsel



County of Albany

Harold L. Joyce
Albany County Office
Building
112 State Street - Albany,
NY 12207

Legislation Text

File #: TMP-5580, **Version:** 1

REQUEST FOR LEGISLATIVE ACTION

Description (e.g., Contract Authorization for Information Services):

Request for Legislative Action to allow for the extension of a license agreement giving permission to Stewart's Shops Corp. to use Albany County property

Date: June 3rd, 2024
Department: County Executive's Office
Attending Meeting: Kevin H. Butterfield
Submitted By: Kevin H. Butterfield
Title: Policy Analyst
Phone: 518-447-5675

Purpose of Request: Contract Authorization Contract Renewal

CONTRACT TERMS/CONDITIONS:

Party Names and Addresses:

Stewart's Shops Corp, P.O. Box 435 Saratoga Springs, NY 12866

Term: (Start/end date or duration) August 3, 2023 to August 31, 2026
Amount/Raise Schedule/Fee: \$6,000

BUDGET INFORMATION:

Is there a Fiscal Impact: Yes ☒ No ☐
Anticipated in Budget: Yes ☒ No ☐
Spreadsheet attached: Yes ☐ No ☒

Source of Funding - (Percentages)

Federal: Enter text. County: Enter text.
State: Enter text. Local: 100%

County Budget Accounts:

Revenue Account and Line: A7410 02410
Revenue Amount: \$6,000
Appropriation Account and Line: Enter text.
Appropriation Amount: Enter text.

ADDITIONAL INFORMATION:

Mandated Program/Service: Yes ☐ No ☒
If Mandated, Cite Authority: Enter text.

Request for Bids / Proposals:

Competitive Bidding Exempt: Yes ☒ No ☐

of Response(s): Enter text.

of MWBE: Enter text.

of Veteran Business: Enter text.

Bond Resolution No.: Enter text.

Apprenticeship Program Yes ☐ No ☒

Previous requests for Identical or Similar Action: Resolution No. 326 of 2017 & Resolution 369 of 2020

Resolution/Law Number and Date: August 14, 2017 & October 13, 2020

DESCRIPTION OF REQUEST: (state briefly why legislative action is requested)

Request for Legislative Action from my office to allow for the extension of a license agreement giving permission to Stewart's Shops Corp. to use Albany County property.

Resolution No. 326 of 2017 authorized the original execution of a license agreement between Albany County and Stewart's Shops Corp. to allow the use of county property at the Stewart's location at 309 Delaware Avenue in Delmar, NY. The rear piece of the parking lot of this location encroaches upon the Albany County Helderberg-Hudson Rail Trail.

The original agreement allowed for this property to be used for the annual amount of \$6,000 paid to Albany County for a three-year term between September 1, 2017 and August 31, 2020. Also included in the original agreement is the option for the licensee to renew the license agreement for three successive three-year terms. The licensee elected to extend the agreement for the first term from August 31, 2020 to August 31, 2023 which was authorized in Resolution No. 20-369. The licensee wishes to extend the agreement by the second of three terms.



June 4, 2024

Ms. Eugenia Condon, Esq.
Office of the County Attorney
County Office Building
112 State St – Room 600
Albany, New York 12207

Ms. Condon,

Stewart's Shop wishes to renew its License Agreement for an additional three years associated with the use of 309 Delaware Ave (SBL: 85.12-4-33). The new expiration will be August 31, 2026. The agreement has one, three-year option remaining.

If you have any questions, please contact me at (518) 581-1201 ext 4435.

Sincerely,

A handwritten signature in black ink that reads "Charles Marshall". The signature is written in a cursive, flowing style.

Charles Marshall
Director of Real Estate
Stewart's Shops Corp.



County of Albany

Harold L. Joyce
Albany County Office
Building
112 State Street - Albany,
NY 12207

Legislation Text

File #: 20-369, **Version:** 1

RESOLUTION NO. 369

AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE A LICENSE AGREEMENT WITH STEWART'S SHOPS CORP. TO CONTINUE THE USE OF PROPERTY AT 309 DELAWARE AVENUE IN THE TOWN OF DELMAR

Introduced: 10/13/20

By Audit and Finance Committee:

WHEREAS, By Resolution No. 326 for 2017, as amended by Resolution No.429 for 2017, this Honorable Body authorized a license agreement with Stewart's Shops Corp. for use of the rear portion of the parking lot in an annual amount of \$6,000, for a three-year term commencing September 1, 2017 and ending August 31, 2020, with three three-year options to renew, and

WHEREAS, The County Executive has requested authorization to exercise the first of three options to renew the agreement for a three-year term commencing September 1, 2020 and ending August 31, 2023, and

WHEREAS, The license agreement with Stewart's Shops Corp. would allow for the continued use of the rear portion of the parking lot of the Stewart's Shop that encroaches upon the Albany County Rail Trail, in an annual amount of \$6,000, now, therefore, be it

RESOLVED, By the Albany County Legislature that the County Executive is authorized to enter into a license agreement with Stewart's Shops Corp., Saratoga Springs, NY 12866 for use of the rear portion of the parking lot in an annual amount of \$6,000, for a three-year term commencing September 1, 2020 and ending August 31, 2023, and, be it further

RESOLVED, That said agreement may be terminated on 90 days notice by either party, and, be it further

RESOLVED, That the County Attorney is authorized to approve said license agreement as to form and content, and, be it further

RESOLVED, That the Clerk of the County Legislature is directed to forward certified copies of this resolution to the appropriate County Officials.

RESOLUTION NO. 326

AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE A LICENSE AGREEMENT WITH STEWART'S SHOPS CORP. TO CONTINUE THE USE OF PROPERTY AT 309 DELAWARE AVE, DELMAR, NEW YORK, AND AMENDING THE 2017 ALBANY COUNTY BUDGET

Introduced: 8/14/17

By Audit and Finance Committee:

WHEREAS, The County Executive has requested authorization to enter into an agreement with Stewart's Shops Corp. regarding the use of property at 309 Delaware Ave in Delmar, NY, and

WHEREAS, The license agreement with Stewart's Shops Corp. would allow for the continued use of the rear portion of the parking lot of the Stewart's Shop that encroaches upon the Albany County Rail Trail, in an annual amount of \$6,000, and

WHEREAS, The County Executive has also requested a budget amendment in order to accept such funding, now, therefore, be it

RESOLVED, By the Albany County Legislature that the County Executive is authorized to enter into a license agreement with Stewart's Shops Corp. for use of the rear portion of the parking lot in an annual amount of \$6,000, for a 3 year term from September 1, 2017, to August 31, 2020, and, be it further

RESOLVED, That said agreement may be terminated on 90 days notice by either party, and, be it further

RESOLVED, That the 2017 Albany County Budget is amended to incorporate said funding as follows:

Increase Revenue Account A2412 Rental of Real Prop-Oth Govts by \$6,000

Increase Appropriation Account A1620.4 by \$6,000 by increasing Line Item 1620 4 4071 Property Repair and Rental by \$6,000

and, be it further

RESOLVED, That the County Attorney is authorized to approve said license agreement as to form and content, and, be it further

RESOLVED, That the Clerk of the County Legislature is directed to forward certified copies of this resolution to the appropriate County Officials.

Adopted by unanimous vote. 8/14/17