



Appropriations & Oversight Committee

Monday, April 27, 2026, 6:45 PM
 City Council Chamber, 1st Floor
 562 Main Street, Melrose, MA 02176

MINUTES

I. CALL TO ORDER

| | |
|-------------------------|-----------------------|
| Kimberly Vandiver | Vice Chair |
| Jason Chen | |
| Cal Finocchiaro | |
| Maya Jamaledine | |
| Manjula Karamcheti | |
| Elizabeth Kowal | |
| John Obremski | |
| Christopher Park | |
| Ryan Williams | |
| William Bradley Freeman | President, Ex Officio |
| Devin Romanul | Chair |

Meeting was called to order by Chair Romanul at 6:49 PM

| Attendee Name | Title | Status | Arrived |
|-------------------------|-----------------------|---------|--------------------|
| Kim Vandiver | Vice Chair | Present | |
| Jason Chen | At-Large | Present | |
| Cal Finocchiaro | Ward 6 | Present | |
| Maya Jamaledine | At-Large | Present | Arrived at 6:52 PM |
| Manjula Karamcheti | Ward 1 | Present | |
| Elizabeth Kowal | At-Large | Present | |
| John Obremski | Ward 2 | Absent | |
| Christopher Park | Ward 3 | Present | |
| Ryan Williams | At-Large | Present | |
| William Bradley Freeman | President, Ex Officio | Present | |
| | Member | | |
| Devin Romanul | Chair | Present | |

II. MINUTES APPROVAL

Motion to Approve the minutes by unanimous consent without reading made by Chair Romanul
 All were in favor and minutes were approved

| | |
|----------------|--|
| RESULT: | ACCEPTED [UNANIMOUS] |
| AYES: | Jason Chen, Cal Finocchiaro, Bradley Freeman, Maya Jamaledine, Manjula Karamcheti, Elizabeth Kowal, Christopher Park, Devin Romanul, Kim Vandiver, Ryan Williams |
| NAYS: | None |
| ABSENT: | John Obremski |

III. PUBLIC COMMENT

When: Apr 27, 2026 06:45 PM Eastern Time (US and Canada)
 Topic: Appropriations & Oversight Committee Meeting

Join from PC, Mac, iPad, or Android:
<https://cityofmelrose-org.zoom.us/j/99180785438?pwd=qMYQinOAw8kmkevcLzc0ZrGWEpNoc1.1>
 Passcode:263736
 Webinar ID: 991 8078 5438

Motion to Open public comment made by Chair Romanul at 6:50 PM
 There were no comments on the floor or via Zoom
 Motion to Close public comment made by Chair Romanul at 6:50 PM

IV. GRANTS

- A. **(ID # 2026-775):** Acceptance of a Climate Leaders Technical Assistance Grant in the amount of \$139,000

Motion to Recommend made by Councilor Williams
 Seconded by Councilor Karamcheti
 All were in favor and motion passed

| | |
|-----------------|--|
| RESULTS: | ACCEPTED [UNANIMOUS] |
| TO: | City Council |
| AYES: | Jason Chen, Cal Finocchiaro, Bradley Freeman, Maya Jamaledine, Manjula Karamcheti, Elizabeth Kowal, Christopher Park, Devin Romanul, Kim Vandiver, Ryan Williams |
| NAYS: | None |
| ABSENT: | John Obremski |

Comments and Discussion:
 Lori Massa presented the \$139,000 Climate Leaders Technical Assistance Grant for solar panel design on a salt shed and heat pump installation at schools. This grant covers the design only and the city will apply for another grant to cover the implementation cost. The contractor will work

through the summer to complete the design plan.

Motion by unanimous consent to take Item ID# 2026-749 out of order.
All were in favor and motion passed

- B. **(ID # 2026-773):** Acceptance of a FY26 Firefighter Safety Equipment Grant in the amount of \$12,375.87

Motion to Recommend made by Councilor Williams
Seconded by Councilor Vandiver
All were in favor and motion passed

| | |
|-----------------|--|
| RESULTS: | ACCEPTED [UNANIMOUS] |
| TO: | City Council |
| AYES: | Jason Chen, Cal Finocchiaro, Bradley Freeman, Maya Jamaledine, Manjula Karamcheti, Elizabeth Kowal, Christopher Park, Devin Romanul, Kim Vandiver, Ryan Williams |
| NAYS: | None |
| ABSENT: | John Obremski |

Comments and Discussion:

Cheif White proposed to utilize these funds to support the purchase of some critical life safety equipment, mainly 7 SCBA cylinders, self-contained breathing apparatus cylinders, and 3 multi-gas detection meters. The multi-gas meters are sophisticated devices that get used fairly a lot, so it's time to replace them when they get to the end of their life and we can't get any more parts or sensors for them. Additional funds from the city beyond this grant would cover other needs on the capital improvement plan.

V. ORDERS

- A. **(ID # 2026-749):** Informational order - Affordable Housing Trust Fund Board Update

Motion to Recommend to Place on File made by Councilor Williams
Seconded by Councilor Karamcheti
All were in favor and motion passed

| | |
|-----------------|--|
| RESULTS: | ACCEPTED [UNANIMOUS] |
| TO: | City Council |
| AYES: | Jason Chen, Cal Finocchiaro, Bradley Freeman, Maya Jamaledine, Manjula Karamcheti, Elizabeth Kowal, Christopher Park, Devin Romanul, Kim Vandiver, Ryan Williams |

| | |
|----------------|---------------|
| NAYS: | None |
| ABSENT: | John Obremski |

Comments and Discussion:

The Affordable Housing Trust Fund board presented their mission to create and preserve diverse affordable housing in Melrose. Chair person Amy Tierney, Vice Chair Jim Oosterman and treasurer Joe Viola were present. The Trust is a statutory body that was established by the Council in 2020 in accordance with the Mass General Laws with appointed volunteers serving on it. They work to create, preserve, and support diverse affordable housing to meet the needs of low- and moderate-income households in Melrose. In Massachusetts, Affordable housing is generally defined as housing where a household spends no more than 30% of their income on housing costs. Melrose has just over 12,000 housing units and 941 of them are affordable, so that's just about 7.5%, and of that 941, 731 are senior housing. To support our work, we need to rely on many tools. This includes Chapter 40B, inclusionary zoning, state and federal subsidies, and tax credits. And the trust itself is a flexible local funding tool. In the guidelines in our application there are different types of funding we can provide, such as gap financing, enabling acquisitions of rehabilitations that create or preserve affordable housing, an opportunity to support pre-development costs to unlock potential projects, and the leveraging of other public and private financing. They also discussed the potential adoption of the Community Preservation Act (CPA), which could generate approximately \$600,000 annually through a 1% property tax surcharge.

- B. **(ID # 2026-774):** That the City Council authorize the Mayor to enter into an Intermunicipal Agreement (IMA) for establishing a regional Animal Control Officer position in partnership with the Towns of Wakefield and Stoneham.

Motion to Recommend made by Councilor Finocchiaro
 Seconded by Councilor Karamcheti
 All were in favor and motion passed

| | |
|-----------------|--|
| RESULTS: | ACCEPTED [UNANIMOUS] |
| TO: | City Council |
| AYES: | Jason Chen, Cal Finocchiaro, Bradley Freeman, Maya Jamaledine, Manjula Karamcheti, Elizabeth Kowal, Christopher Park, Devin Romanul, Kim Vandiver, Ryan Williams |
| NAYS: | None |
| ABSENT: | John Obremski |

Comments and Discussion:

Anthony Chui asked for the support of the Council to establish a regional animal control officer position. This would be in partnership with the towns of Wakefield and Stoneham. This position will give us more capacity to help deal with some of the issues that our constituents are seeing. This shared position would fall under the health department, and we've also budgeted for education and events that might include rabies shots clinics at a discounted price. The cities are sharing equally in

the cost and resources. A recent issue for residents is off-leash dogs and this resource will help to educate the public on the leash law and assist in its enforcement. This role is one of the health department's main priorities and would not have any responsibilities in pest control. The cost is approximately \$30,000 per year.

VI. ADJOURNMENT

Motion to Adjourn by unanimous consent made by Chair Romanul at 7:51 PM
All were in favor and meeting was adjourned.



Commonwealth of Massachusetts

CONTRACTOR AUTHORIZED SIGNATORY LISTING

This form is jointly issued and published by the Office of the Comptroller (CTR) and the Operational Services Division (OSD) as the default form for all Commonwealth Departments when another form is not prescribed by regulation or policy.

**Signature for Corporation (C or S), Partnership, Trust/Estate,
Limited Liability Company, State and Local Government Entity**
(must match Form W-9 tax classification)

| | |
|-----------------------|--|
| Contractor Legal Name | Contractor Vendor/Customer Code <small>(if available, not the Taxpayer Identification Number or Social Security Number)</small> |
|-----------------------|--|

INSTRUCTIONS: Any Contractor (other than a sole-proprietor or an individual contractor) must provide a listing of individuals who are authorized as legal representatives of the Contractor who can sign contracts and other legally binding documents related to the contract on the Contractor's behalf. In addition to this listing, any state department may require additional proof of authority to sign contracts on behalf of the Contractor, or proof of authenticity of signature (a notarized signature that the Department can use to verify that the signature and date that appear on the Contract or other legal document was actually made by the Contractor's authorized signatory, and not by a representative, designee or other individual.)

For privacy purposes **DO NOT ATTACH** any documentation containing personal information, such as bank account numbers, Social Security Numbers, driver's licenses, home addresses, Social Security cards, or any other personally identifiable information that you do not want released as part of a public record. The Commonwealth reserves the right to publish the names and titles of authorized signatories of contractors.

There are three types of electronic signatures that will be accepted on this form: **1) Traditional "wet signature" (ink on paper); 2) Electronic signature that is either: a. hand drawn using a mouse or finger if working from a touch screen device; or b. An upload picture of the signatory's hand drawn signature; 3) Electronic signature affixed using a digital tool such as Adobe Sign or DocuSign.** Typed text of a name not generated by a digital tool, computer generated cursive, or an electronic symbol are not acceptable forms of electronic signature.

| Authorized Signatory Name | Signature <small>(As it will appear on contract or other documents)</small> | Title | Phone Number | Email Address |
|---------------------------|--|-------|--------------|---------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Acceptance of any payment under a Contract or Grant shall operate as a waiver of any defense by the Contractor challenging the existence of a valid Contract due to an alleged lack of actual authority to execute the document by the signatory.

I certify that I am a responsible authorized officer of the Contractor and as an authorized officer of the Contractor I certify that the names of the individuals identified on this listing are current as of the date of execution and that these individuals are authorized to sign contracts and other legally binding documents related to contracts with the Commonwealth of Massachusetts on behalf of the Contractor. I understand and agree that the Contractor has a duty to ensure that this listing is immediately updated and communicated to any state department with which the Contractor does business whenever the authorized signatories above retire, are otherwise terminated from the Contractor's employ, have their responsibilities changed resulting in their no longer being authorized to sign contracts with the Commonwealth or whenever new signatories are designated.

Please note: You cannot self-certify your own signature as a single signer listed above.

| | |
|------------|---------------|
| Signature | Date |
| Print Name | Phone Number |
| Title | Email Address |

A copy of this listing must be attached to the "record copy" of a contract filed with the department.



OFFICE OF THE COMPTROLLER

ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION AGREEMENT FORM

Complete this form to enroll, modify, or terminate an existing Electronic Funds Transfer (EFT) agreement with the Commonwealth of Massachusetts departments.

| | | | |
|--|--|--|----------------------------|
| Part I: Reason for Submission | | | See Instructions on Page 3 |
| <input type="checkbox"/> New Enrollment | <input type="checkbox"/> Change Enrollment | <input type="checkbox"/> Cancel Enrollment | |
| Document Included (Optional) | | | |
| <input type="checkbox"/> Voided Check | <input type="checkbox"/> Bank Letter | | |
| Part II: Account Holder Information | | | See Instructions on Page 3 |
| Account Holder Legal Name | | | |
| dba Name If different from above | | | |
| Legal Address Number, Street, Apartment/Suite Number | | | |
| City | | State | Zip Code |
| Account Holder Tax Identification Number 9 digits | Employer Identification Number (EIN) | Social Security Number (SSN) | |
| Part III: Financial Institution Information | | | See Instructions on Page 3 |
| Financial Institution Name | | | |
| Routing Number Only 9 digits | Account Number | Account Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings | |
| If this is an Enrollment Modification, you must include your old financial institution information or your request will be returned. | | | |
| Old Financial Institution Name | | | |
| Old Routing Number Only 9 digits | Old Account Number | Old Account Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings | |
| Part IV: Vendor/Customer Information | | | See Instructions on Page 3 |
| This is the person we will contact for any questions regarding this EFT Authorization | | | |
| Contact Person's Name | | Contact Person's Title | |
| Contact Person's Phone | | Contact Person's Email | |

This completed form should be submitted to the requesting department or the department you are currently doing business with.
(Revised November 2023)



OFFICE OF THE COMPTROLLER
ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION AGREEMENT FORM

Part V: Authorization

See Instructions on Page 3

By signing below, I hereby certify that the account(s) indicated on this form is under my direct control and access; therefore, I authorize the State Treasurer as fiscal agent for the Commonwealth of Massachusetts to initiate, change, or cancel credit entries to the account(s) as indicated on this form.

For ACH debits consistent with the International ACH Transaction (IAT) rules check one:

I affirm that payments authorized by this agreement are not to an account that is subject to being transferred to a foreign bank account.

I affirm that payments authorized by this agreement are to an account that is subject to being transferred to a foreign bank account.

This authority is to remain in full force and effect until the Office of Comptroller (CTR) has received written notification from either me or an authorized officer of the organization of the account's termination in such time and in such a manner as to afford CTR a reasonable opportunity to act upon it.

Account Holder Authorized Signature

Print Name

Title

Date

Part VI: Verification from the Commonwealth Department

See Instructions on Page 3

I hereby certify the Vendor/Customer is an authorized signatory and verified by internal records and verbal confirmation initiated by our department.

VCC/VCM Document ID

Three letter Department Code

Signature

Print Name

Title

Phone Number

Date



OFFICE OF THE COMPTROLLER

ELECTRONIC FUNDS TRANSFER (EFT) AUTHORIZATION AGREEMENT FORM

INSTRUCTIONS

All EFT requests are subject to a 5 (five) day pre-certification period in which all accounts are verified by the qualifying financial institution before any direct deposits are made.

Part I: Reason for Submission

Indicate your reason for completing this form by checking the appropriate box: New EFT enrollment, a change to your EFT enrollment account information, or cancellation of your EFT enrollment. The Commonwealth of Massachusetts reserves the right to request additional documentation such as Voided Check as verification of account ownership.

Part II: Account Holder Information

- **Account Holder Name:** Enter the accounts holder legal name (individual or business name), as reported to the Internal Revenue Service (IRS).
- **d/b/a Name:** Enter the d/b/a name if applicable.
- **Street Address:** Enter the account holder's street address. Enter the account holder's city, state, and zip code.
- **Account Holder Tax Identification Number:** Enter the tax identification number as reported to the IRS. If the business is a group, organization or corporation, provide the Federal employer identification number (EIN). If enrolling as an individual provide your Social Security Number.

Part III: Financial Institution Information

- **Financial Institution Name:** Enter your Financial Institution's name (this is the name of the bank or qualifying depository that will receive the funds). **NOTE:** The account name to which EFT payments will be paid is to the name submitted on Part II of this form.
- **Routing Number:** Enter the bank or financial institutional nine-digit routing number, including applicable leading zeros.
- **Account Number:** Enter the account holder's account number with the financial institution, including applicable leading zeros.
- **Account Type:** Select the account type (Checking or Savings).
- **Old Financial Institution Name:** Enter your Old Financial Institution's name (this is the name of the bank or qualifying depository that has been receiving the funds).
- **Old Routing Number:** Enter the old bank or financial institutional nine-digit routing number, including applicable leading zeros.
- **Old Account Number:** Enter the old account holder's account number with the financial institution, including applicable leading zeros.
- **Account Type:** Enter the old account type (Checking or Savings).

NOTE: Supporting bank documents must be in the account holder legal name only.

Part IV: Contact Information

- Enter the name, title, telephone number, and email address of a contact person who can answer questions about the information submitted on this EFT Authorization Form.

Part V: Authorization

- By your signature on this form, you are certifying that the account is drawn in the Name of an Individual, or the Legal Business Name of the person or entity who has sole control of the account to which EFT deposits are made.
- The EFT authorization form must be signed and dated by the same account holder name in Part II and include a title and telephone number.
- Submit this form electronically, or mail it with with the original signature in black or blue ink to the Commonwealth of Massachusetts Department that you are doing business with.

Part VI: Verification from the Commonwealth Department

By your signature on this form, you are certifying that authentication of the vendor/customer's authorized signatory was conducted by review of the Contractor Signatory Authorization Form (CASL) or by another internal verification process, and additional verification was conducted to confirm banking or address change request. Departments should have multiple known vendor contacts to confirm any registration change.

This completed form should be submitted to the requesting department or the department you are currently doing business with.

(Revised November 2023)

COMMONWEALTH OF MASSACHUSETTS | STANDARD CONTRACT FORM



This form is jointly issued and published by the Office of the Comptroller, the Executive Office for Administration and Finance, and the Operational Services Division as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the [Standard Contract Form Instructions and Contractor Certifications](#), the [Commonwealth Terms and Conditions](#), the [Commonwealth Terms and Conditions for Human and Social Services](#), or the [Commonwealth IT Terms and Conditions](#) which are incorporated by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access forms at macomptroller.org/forms or mass.gov/lists/osd-forms.

| CONTRACTOR INFORMATION | | COMMONWEALTH INFORMATION | |
|---|-----|---|--|
| Contractor Legal Name | | Department | Mosaic Department Code |
| d/b/a | | Contract Manager Name | |
| Legal Address As entered on Form W-9 or Form W-4 | | Business Mailing Address | |
| Contract Manager Name | | Billing Address If Different | |
| Phone | Fax | Phone | Fax |
| Email | | Email | |
| Vendor Code | VC | Mosaic Transaction ID(s) | |
| Vendor Code Address ID e.g. "AD001". | AD | RFR/Procurement or Other ID Number | |
| Note: The Address ID must be set up for Electronic Funds Transfer (EFT) payments. | | | |
| NEW CONTRACT | | CONTRACT AMENDMENT | |
| Procurement or Exception Type (Check one option only) | | Current Contract End Date <i>PRIOR</i> to Amendment | Amendment Amount Or Enter "No Change" |
| <p>Statewide Contract (OSD or an OSD-designated department.)</p> <p>Collective Purchase (Attach OSD approval, scope, and budget.)</p> <p>Department Procurement - Includes all Grants 815 CMR 2.00. (Attach Solicitation Notice or RFR, and Response or other procurement supporting documentation.)</p> <p>Emergency Contract (Attach justification for emergency, scope, and budget.)</p> <p>Contract Employee (Attach Employee Status Form, scope, and budget.)</p> <p>Interim Contract with new Contractor (Attach justification for Interim Contract and updated scope/budget.)</p> <p>Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope, and budget.)</p> | | <p>Amendment Type Check one option only. Attach details of amendment changes.</p> <p>Amendment to Date, Scope, or Budget (Attach updated scope and budget.)</p> <p>Interim Contract with Current Contractor (Attach justification for Interim Contract and updated scope/budget.)</p> <p>Contract Employee (Attach any updates to scope or budget.)</p> <p>Other Procurement Exception (Attach authorizing language/justification and updated scope/budget.)</p> | |
| TERMS AND CONDITIONS | | | |
| The Standard Contract Form Instructions and Contractor Certifications and the following document are incorporated by reference into this Contract and are legally binding. Check ONE option: | | | |
| <p>Commonwealth Terms and Conditions Commonwealth Terms and Conditions for Human and Social Services Commonwealth IT Terms and Conditions</p> | | | |
| COMPENSATION | | | |
| Check ONE option. | | | |
| The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00 . | | | |
| <p>Rate Contract (No Maximum Obligation). (Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.)</p> <p>Maximum Obligation Contract. Total maximum obligation for total duration of this contract (or new total if contract is being amended):</p> | | | |

Mosaic Transaction ID(s)

PROMPT PAYMENT DISCOUNTS (PPD)

Commonwealth payments are issued through Electronic Funds Transfer (EFT) 45 days from invoice receipt. See [Prompt Pay Discounts Policy](#).

Contractors requesting accelerated payments must identify a PPD as follows:

| | | |
|------------------------|----------------|--------|
| Payment issued within: | 10 days | % PPD. |
| | 15 days | % PPD. |
| | 20 days | % PPD. |
| | 30 days | % PPD. |

If PPD percentages are left blank, identify reason:

| | | | |
|-----------------|--|--------------------------------|----------------------|
| Statutory/legal | Ready Payments (M.G.L. c. 29, § 23A) | Agree to standard 45-day cycle | Only initial payment |
|-----------------|--|--------------------------------|----------------------|

BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT

Enter the Contract title, purpose, fiscal year(s) and a detailed description of the scope of performance or what is being amended for a Contract Amendment. Attach all supporting documentation and justifications.

SUPPLIER DIVERSITY PROGRAM (SDP) PLAN

Does the Supplier Diversity Program apply?

YES If YES, the Contractor's annual SDP commitment for this Contract is

NO If NO, and the department is an Executive Department, enter the appropriate exemption:

ANTICIPATED START DATE (Complete ONE option only.)

The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations:

1. may be incurred as of the Effective Date (latest signature date below) and no obligations have been incurred prior to the Effective Date.
2. may be incurred as of _____, 20____, a date **LATER** than the Effective Date below and **no** obligations have been incurred **prior** to the Effective Date.
3. were incurred as of _____, 20____, a date **PRIOR** to the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.

CONTRACT END DATE

Contract performance shall terminate as of _____, 20____, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.

CERTIFICATIONS

Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in [801 CMR 21.07](#), incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.

AUTHORIZING SIGNATURE FOR THE CONTRACTOR

Signature and date must be captured at time of signature.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

| | |
|------------|-------------|
| Print Name | Print Title |
|------------|-------------|

AUTHORIZING SIGNATURE FOR THE DEPARTMENT

Signature and date must be captured at time of signature.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

| | |
|------------|-------------|
| Print Name | Print Title |
|------------|-------------|

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DEPARTMENT OF ENERGY RESOURCES PON-ENE-2025-014 **CLIMATE LEADER COMMUNITIES DECARBONIZATION** **TECHNICAL SUPPORT GRANT PROGRAM**

City of Melrose

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- II. BACKGROUND
- III. ATTACHMENT A: DOER PON-ENE-2025-014
- IV. ATTACHMENT B: GRANTEE RESPONSE
- V. ATTACHMENT C: SCOPE OF GRANT AWARD
- VI. ATTACHMENT D: BUDGET
- VII. THE COMMONWEALTH OF MASSACHUSETTS STANDARD CONTRACT
- VIII. ATTACHMENTS:
 - a. COMMONWEALTH TERMS AND CONDITIONS
 - b. GRANTEE AUTHORIZED SIGNATORY LISTING
 - c. W-9 FORM
 - d. EFT FORM

BACKGROUND

1. The DOER has selected the Grantee to receive Climate Leader Communities Decarbonization Technical Support Grant for projects described in the Grantee's response to the PON.
2. The DOER approves the expenditure of funds as described in Attachment D (Budget) for the work planned and described in Attachment C (Scope of Grant Award).
3. The Grantee agrees to complete the projects described in the Scope of Grant Award (collectively referred to as "the Project").

This agreement (Agreement) incorporates and makes part hereof certain attachments and forms which have been provided and accepted by the parties as part to this Agreement. Copies of such agreed upon attachments and forms are attached hereto set forth in their entirety and made part of this Agreement by reference:

THE COMMONWEALTH STANDARD CONTRACT FORM

BACKGROUND

ATTACHMENT A: CLIMATE LEADER COMMUNITIES DECARBONIZATION TECHNICAL SUPPORT GRANT

ATTACHMENT B: GRANTEE RESPONSE

ATTACHMENT C: SCOPE OF GRANT AWARD

ATTACHMENT D: BUDGET

THE COMMONWEALTH OF MASSACHUSETTS STANDARD CONTRACT ATTACHMENTS

1. COMMONWEALTH TERMS AND CONDITIONS
1. GRANTEE AUTHORIZED SIGNATORY LISTING
2. W-9 FORM
3. EFT FORM

**ATTACHMENT A – Climate Leader Communities Decarbonization Technical Support Grant
Application Materials**

The Program Opportunity Notice (PON) was provided to the municipality via
Commbuys, the Commonwealth's procurement website.

**DOER PON-ENE-2025-014 Climate Leader Communities Decarbonization Technical Support Grant
Program**

Bid #: [BD-25-1041-ENE01-ENE01-110104](#)

ATTACHMENT B – Grantee Response

All documents listed below are available to DOER fiscal staff at:

<https://massdoer.imeetcentral.com/p/cgAAAAAAB-yoAAAAAAAAAAs>

- Final Attachment A- Heat Pump.xlsx
- Final Attachment A- Salt Shed.xlsx
- IMEG Heat Pump Project.pdf
- WS Salt Shed Solar PV Design.pdf
- Signed form B.pdf

**ATTACHMENT C – SCOPE OF GRANT AWARD
COMMONWEALTH OF MASSACHUSETTS
SCOPE OF GRANT AWARD AGREEMENT**

**By and Between
Massachusetts Department of Energy Resources (DOER)
and
City of Melrose (Grantee)**

Overview

This Contract is for the DOER PON-ENE-2025-014 Climate Leader Communities Decarbonization Technical Support Grant Program to provide grant monies to municipalities to pay for a consultant (Consultant) to assist certified Massachusetts' Climate Leader Communities by offering funding for technical support that generates both recommendations and engineering design documents to implement projects that align with the Grantee's Climate Leader Communities Municipal Decarbonization Roadmap.

Program Schedule

The Grantee shall contact the DOER promptly if the Grantee cannot complete work prior to the end of the grant period, which shall be 9/30/2027.

Disbursement of Funds

- All disbursements must be submitted during the fiscal year in which they occurred
- Disbursements shall be made per receipt by the DOER of the following:
 - 1) A signed copy of the contract between the Grantee and the Consultant.
 - 2) Consultant invoices provided to the Grantee detailing the Consultant's services, tasks completed, and charges for services provided.
 - 3) A REQUEST FOR PAYMENT FORM along with the Consultant invoices to the DOER.
- Final payment shall be contingent upon receipt by the DOER of a one to two-page summary (Final Report) of all work provided by the Consultant and the progress of the project for which the Consultant is providing services for, as further provided below.

Grantee Warrant to Keep Facility Open

For projects involving services or construction at facility(s) owned by or under the control of the Grantee, the Grantee hereby warrants and certifies that there are no present plans to close or sell the facility(s) for which the grants funds are designated for, and that said facility(s) will not be closed within the next five (5) years of contract Effective Date.

Administrative Costs

No administrative costs are allowed for municipal Grantees.

Publicity

The Grantee will coordinate with the DOER on all publicity regarding this project.

Reporting and Other Required Documentation

- A. The Grantee shall have a program to combat fraud, waste and abuse of funds and shall incorporate into its program guidance provided by the Office of the State Comptroller.
- B. **Quarterly reports:** The Grantee shall be required to file progress and financial reports once every quarter, unless specifically exempted in writing by the DOER. Quarterly reports are due by 5PM four (4) days after the completion of each of the following quarters:
 - a. Oct 1 – Dec 30, 2025
 - b. Jan 1 – Mar 30, 2026
 - c. Apr 1 – June 30, 2026

- d. July 1 – Sept 30, 2026
- e. Oct 1 – Dec 30, 2026
- f. Jan 1 – Mar 30, 2027

Quarterly reports shall include:

- a. The progress and status of activities performed in relation to the Scope of Grant Award including an explanation of any delays or obstacles encountered in meeting the performance schedule as well as a description of efforts taken to resolve delays; and
- b. The actual costs incurred to date by the Project, breaking down all costs in such manner as the DOER may prescribe.

C. **Final Report:** The Final Report shall reference and detail the work completed as outlined in Attachment B, Grantee Response along with the final invoice and the Request for Payment Form. The Final Report shall be submitted electronically to the Green Communities email address,

green.communities@mass.gov.

D. **Ownership of Reports and Other Required Documentation:** The deliverables shall be owned by the Commonwealth of Massachusetts and treated as public documents. Following the completion of the contract, both the Commonwealth and the Grantee retain the right to make further use of the deliverables.

ATTACHMENT D - BUDGET

Check one: Initial Budget

___ Budget/Account Amendment. Maximum Obligation before this Amendment: \$

PRIOR MMARS DOCUMENT ID: _____ (for reference - if applicable)

CURRENT DOC ID: _____.

[See Instructions for Additional Guidance on completion. Insert as many additional lines as necessary.]

| A | B | C | D | E | F | G | H | I |
|---------------------------|----------------|---------------------|--------------------|--|-----------------------------------|-------------------------|--|-----------------------------------|
| Budget Fiscal Year | Account | Object Class | Description | Initial Amount / or Amount Prior to Amendment | Indicate Add or Reduce +/- | Amendment Amount | Enter "YES" if Amount is a prior FY budget reduction or a current FY "Carry-in" authorization for Federal Funds | New Amount After Amendment |
| FY26 | 70067056 | P01 | | \$138,998.00 | | \$ | | \$ |
| FY27 | 70067056 | P01 | | \$ 1.00 | | \$ | | \$ |
| FY28 | 70067056 | P01 | | \$ 1.00 | | \$ | | \$ |

| FISCAL YEAR SUBTOTALS AND TOTAL MAXIMUM OBLIGATION FOR DURATION OF CONTRACT | |
|---|---------------------|
| FISCAL YEAR: <u>2026</u> SUBTOTAL (or New Subtotal if Fiscal Year Subtotal being amended) | \$138,998.00 |
| FISCAL YEAR: <u>2027</u> SUBTOTAL (or New Subtotal if Fiscal Year Subtotal being amended) | \$ 1.00 |
| FISCAL YEAR: <u>2028</u> SUBTOTAL (or New Subtotal if Fiscal Year Subtotal being amended) | \$ 1.00 |
| TOTAL MAXIMUM OBLIGATION FOR DURATION OF CONTRACT | \$139,000.00 |



CITY OF MELROSE

OFFICE OF PLANNING AND COMMUNITY DEVELOPMENT

City Hall, 562 Main Street
Melrose, Massachusetts 02176
Telephone - (781) 979-4190

LORI MASSA
Director & City Planner

MEMORANDUM

TO: Mayor Jennifer Grigoraitis
Melrose City Council

FROM: Lori Massa, Director OPCD
Elena Proakis Ellis, Director DPW

cc: Kerriann Golden, CFO/Auditor
Lauren Grymek, Chief of Staff
Maya Noviski, Senior Planner

DATE: April 1, 2026

RE: Climate Leaders Technical Assistance Grant Acceptance

The City of Melrose has been awarded a \$139,000 Climate Leaders Technical Assistance Grant from the Department of Energy Resources (DOER). The funds will go towards the design of installing solar photovoltaic (PV) panels on the City's salt shed in the DPW yard and the design of installing heat pumps at the Performing Arts Spaces at the Middle School and the School Department Central Administration Offices at the High School.

The City's salt shed, which is located in the DPW yard, was recently constructed and was designed to support solar panels with the intention of installing them when possible. This project would allow the City to use clean energy for a portion of the onsite electrical consumption.

The City has been working in phases towards the decarbonization of the Middle and High Schools in line with the City's Decarbonization Roadmap. With heat pump project these areas of the schools would both be electrified and also function independently so that the systems serving the remainder of the school complex can be operated in unoccupied modes when only these spaces are occupied, resulting in further energy savings.

With this technical assistance funding both projects would be construction-ready and the City would be eligible to apply for the Climate Leader Communities Decarbonization Accelerator Grant for implementation. Melrose is one of only twenty-eight communities that have the Climate Leaders designation.

We hereby request that the City Council accept the grant from DOER in the amount of \$139,000. The grant agreement document is attached for your reference.

Thank you for your consideration of this request.



FIRE DEPARTMENT

John J. White

Chief of Department

Fire Headquarters, 576 Main Street

Melrose, Massachusetts 02176

Telephone - (781) 979-4404

DATE: March 31, 2026

TO: City of Melrose – City Council

RE: FY26 Firefighter Safety Equipment Grant Award

Honorable Members of the City Council,

I am writing to inform you that the Melrose Fire Department has been awarded grant funding from the Executive Office of Public Safety & Security Department of Fire Services in the amount of **\$12,375.87**. The Department proposes utilizing these funds to support the purchase of critical life safety equipment, seven (7) self-contained breathing apparatus (SCBA) cylinders and three (3) multi-gas detection meters.

The seven SCBA cylinders will be utilized as spare bottles, allowing personnel to remain in immediately dangerous to life or health (IDLH) environments for longer durations by supporting rapid cylinder exchange during extended or consecutive fire incidents. This added capacity reduces operational delays and enhances firefighter safety by ensuring continuous and reliable air supply.

The multi-gas meters will be assigned to each frontline apparatus (*Ladder 1, Engine 2, and Engine 3*), ensuring that every responding unit is equipped with dependable equipment to monitor hazardous atmospheric conditions and support safe decision-making on scene.

This funding will allow the Department to improve equipment reliability, reduce the risk of in-service equipment failure, and strengthen the ability to safely and effectively respond to emergencies. The Department respectfully requests approval to proceed with the purchase of this equipment utilizing the awarded grant funds.

Thank you for your continued support of our personnel and the safety of our community.

Respectfully submitted,

John J. White
Chief of Department



OFFICE OF THE GOVERNOR
COMMONWEALTH OF MASSACHUSETTS
STATE HOUSE BOSTON, MA 02133
(617) 725-4000

MAURA T. HEALEY
GOVERNOR

KIMBERLEY DRISCOLL
LIEUTENANT GOVERNOR

March 31, 2026

Chief John White
City of Melrose
576 Main Street
Melrose, MA 02176

Dear Chief White,

Congratulations! I am pleased to inform you that the Executive Office of Public Safety and Security and the Department of Fire Services (DFS) has awarded the City of Melrose Fire Department \$12,375.87 of funding for the Firefighter Safety Equipment Grant Program in State Fiscal Year 2026.

With each new challenge, the fire service in Massachusetts demonstrates its ability to adapt, overcome, and continue providing the excellent level of services that the citizens of the Commonwealth have come to expect. Please know how thankful I am for this, and how grateful I am to be able to provide your department with this important equipment.

The contract, terms and conditions, and other documents for this program will be provided to you by DFS. Please contact Tim Moore at DFS with any questions about this award at 978-567-3721 or Timothy.Moore@mass.gov for contract terms, conditions, and other award documents.
Sincerely,

A handwritten signature in blue ink that reads "M. T. Healey".

GOVERNOR MAURA T. HEALEY

A handwritten signature in blue ink that reads "Kim Driscoll".

LT. GOVERNOR KIMBERLEY DRISCOLL

COMMONWEALTH OF MASSACHUSETTS | STANDARD CONTRACT FORM



This form is jointly issued and published by the Office of the Comptroller, the Executive Office for Administration and Finance, and the Operational Services Division as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. The Commonwealth deems void any changes made on or by attachment (in the form of addendum, engagement letters, contract forms or invoice terms) to the terms in this published form or to the [Standard Contract Form Instructions and Contractor Certifications](#), the [Commonwealth Terms and Conditions](#), the [Commonwealth Terms and Conditions for Human and Social Services](#), or the [Commonwealth IT Terms and Conditions](#) which are incorporated by reference herein. Additional non-conflicting terms may be added by Attachment. Contractors are required to access forms at macomptroller.org/forms or mass.gov/lists/osd-forms.

| CONTRACTOR INFORMATION | | COMMONWEALTH INFORMATION | |
|--|----------------------------|---|---|
| Contractor Legal Name City of Melrose | | Department Department of Fire Services | Mosaic Department Code DFS |
| d/b/a | | Contract Manager Name David Clemons | |
| Legal Address As entered on Form W-9 or Form W-4 562 Main St, Melrose, MA 02176 | | Business Mailing Address P.O. Box 1025, Stow, MA 01775 | |
| Contract Manager Name Chief John White | | Billing Address If Different N/A | |
| Phone 781-979-4403 | Fax 781-662-2304 | Phone 978-567-3179 | Fax 978-567-3121 |
| Email jwhite@cityofmelrose.org | | Email David.Clemons@mass.gov | |
| Vendor Code | VC6000192115 | Mosaic Transaction ID(s) CT-DFS-1000-2026FFEGRANT00000000 | |
| Vendor Code Address ID e.g. "AD001". | AD001 | RF/Procurement or Other ID Number BD-26-1021-DFS-DFS01-126740 | |
| Note: The Address ID must be set up for Electronic Funds Transfer (EFT) payments. | | | |
| <input checked="" type="radio"/> NEW CONTRACT | | <input type="radio"/> CONTRACT AMENDMENT | |
| Procurement or Exception Type (Check one option only) | | Current Contract End Date <i>PRIOR</i> to Amendment | Amendment Amount Or Enter "No Change" |
| <input type="checkbox"/> Statewide Contract (OSD or an OSD-designated department.) <input type="checkbox"/> Collective Purchase (Attach OSD approval, scope, and budget.) <input checked="" type="checkbox"/> Department Procurement - Includes all Grants 815 CMR 2.00 . (Attach Solicitation Notice or RFR, and Response or other procurement supporting documentation.) <input type="checkbox"/> Emergency Contract (Attach justification for emergency, scope, and budget.) <input type="checkbox"/> Contract Employee (Attach Employee Status Form, scope, and budget.) <input type="checkbox"/> Interim Contract with new Contractor (Attach justification for Interim Contract and updated scope/budget.) <input type="checkbox"/> Other Procurement Exception (Attach authorizing language, legislation with specific exemption or earmark, and exception justification, scope, and budget.) | | Amendment Type Check one option only. Attach details of amendment changes. <input type="checkbox"/> Amendment to Date, Scope, or Budget (Attach updated scope and budget.) <input type="checkbox"/> Interim Contract with Current Contractor (Attach justification for Interim Contract and updated scope/budget.) <input type="checkbox"/> Contract Employee (Attach any updates to scope or budget.) <input type="checkbox"/> Other Procurement Exception (Attach authorizing language/justification and updated scope/budget.) | |
| TERMS AND CONDITIONS | | | |
| The Standard Contract Form Instructions and Contractor Certifications and the following document are incorporated by reference into this Contract and are legally binding. Check ONE option: | | | |
| <input checked="" type="radio"/> Commonwealth Terms and Conditions <input type="radio"/> Commonwealth Terms and Conditions for Human and Social Services <input type="radio"/> Commonwealth IT Terms and Conditions | | | |
| COMPENSATION | | | |
| Check ONE option. | | | |
| The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00 . | | | |
| <input type="radio"/> Rate Contract (No Maximum Obligation) . (Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.) <input checked="" type="radio"/> Maximum Obligation Contract . Total maximum obligation for total duration of this contract (or new total if contract is being amended): \$12,375.87 | | | |

Mosaic Transaction ID(s)

CT-DFS-1000-2026FFEGRANT00000000

PROMPT PAYMENT DISCOUNTS (PPD)

Commonwealth payments are issued through Electronic Funds Transfer (EFT) 45 days from invoice receipt. See [Prompt Pay Discounts Policy](#).
Contractors requesting accelerated payments must identify a PPD as follows:

Payment issued within: **10 days** 0% PPD.
 15 days 0% PPD.
 20 days 0% PPD.
 30 days 0% PPD.

If PPD percentages are left blank, identify reason:

Statutory/legal Ready Payments ([M.G.L. c. 29, § 23A](#)) Agree to standard 45-day cycle Only initial payment

BRIEF DESCRIPTION OF CONTRACT PERFORMANCE or REASON FOR AMENDMENT

Enter the Contract title, purpose, fiscal year(s) and a detailed description of the scope of performance or what is being amended for a Contract Amendment. Attach all supporting documentation and justifications.
 This contract is for funds awarded through the Department of Fire Services' FY26 Firefighter Safety Equipment Grant, in accordance with the FY26 Firefighter Safety Equipment Grant Program Notice of Funding Opportunity, the contractor's FY26 Application, and the attached Contract Addendum. Funds for this program will be disbursed on a reimbursement basis only.

SUPPLIER DIVERSITY PROGRAM (SDP) PLAN

Does the Supplier Diversity Program apply?

YES If YES, the Contractor's annual SDP commitment for this Contract is
 NO If NO, and the department is an Executive Department, enter the appropriate exemption: Non-construction grants to public entities

ANTICIPATED START DATE (Complete ONE option only.)

The Department and Contractor certify for this Contract, or Contract Amendment, that Contract obligations:

- 1. may be incurred as of the Effective Date (latest signature date below) and no obligations have been incurred prior to the Effective Date.
- 2. may be incurred as of , 20, a date **LATER** than the Effective Date below and **no** obligations have been incurred **prior** to the Effective Date.
- 3. were incurred as of , 20, a date **PRIOR** to the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.

CONTRACT END DATE

Contract performance shall terminate as of **June 30, 2026**, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.

CERTIFICATIONS

Notwithstanding verbal or other representations by the parties, the "**Effective Date**" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor certifies that they have accessed and reviewed all documents incorporated by reference as electronically published and the Contractor makes all certifications required under the Standard Contract Form Instructions and Contractor Certifications under the pains and penalties of perjury, and further agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form, the Standard Contract Form Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response (excluding any language stricken by a Department as unacceptable, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in [801 CMR 21.07](#), incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.

AUTHORIZING SIGNATURE FOR THE CONTRACTOR

Signature and date must be captured at time of signature.

| | |
|---|-----------------------------|
| Signature | Date |
| Print Name Jennifer Grigoraitis | Print Title Mayor |

AUTHORIZING SIGNATURE FOR THE DEPARTMENT

Signature and date must be captured at time of signature.

| | |
|------------------------------------|--|
| Signature | Date |
| Print Name Jon M. Davine | Print Title State Fire Marshal |

**Department of Fire Services and the City of Melrose
Contract Addendum for Discretionary Grant Agreement**

**FY26 Firefighter Safety Equipment Grant
Scope of Work and Budget**

Authorization: The Department of Fire Services (DFS) is authorized to administer discretionary FY26 Firefighter Safety Equipment grant funds in accordance with Line Item 8324-2000 of Section 2D of Chapter 151 of the Acts of 2020, Line Item 1100-2515 of Section 2 of Chapter 140 of the Acts of 2022, and 815 CMR 2.00.

Introduction: This entire agreement (the “Grant Agreement”) between the parties consists of the following documents: (1) the Commonwealth’s Standard Terms and Conditions; (2) the Commonwealth’s Standard Contract Form; (3) this Addendum; (4) the FY26 Firefighter Safety Equipment Grant Notice of Funding Opportunity and Application Form BD-26-1021-DFS-DFS01-126740; and (5) the Grant Recipient’s (the “Grantee”) application for FY26 Firefighter Safety Equipment Grant funding.

Grant Project Description and Budget: The awarded funding shall be used only to purchase the equipment listed below. The quantities and unit prices of these items shown in the Grantee’s application shall be considered estimates only and may be adjusted at the discretion of the Grantee to account for changes to market conditions, the Grantee’s operational needs, or the total grant award amount. All items listed shall be construed to include any ancillary equipment typically necessary for operation of said equipment (batteries, chargers, mounting stations, carrying cases, etc.).

| Department | Description of Allowable Equipment |
|--------------------|---|
| City of Melrose | Combustible Gas Detector/4-Gas Meter SCBA Bottle |
| Total Award | \$12,375.87 |

The funds may not be used to serve as a match for a federal grant. The funds may not be used for construction and all applicable local and state procurement requirements must be adhered to in the use of the grant funds.

Grant Manager: The DFS and the grantee will each assign a grant manager with respect to this Grant Agreement. It is anticipated that the grant manager listed in the Grantee’s application will not change during the term of this agreement. In the event that a change is necessary, the party requesting the change will provide prompt written notice to the other.

The DFS Grant Manager will monitor the grant and grant-supported activities to ensure compliance with grant requirements, work closely with the Grantee to assure successful completion of the grant performance goals, provide technical assistance upon request, and review and approve required reporting/reimbursement request documentation.

The Grantee's grant manager will serve as the interface between DFS and all Grantee personnel involved with this program. The Grantee's grant manager will oversee the projects and activities that must be executed to meet the grant funding goals, will monitor the grant to assure the objectives are being met, funds are utilized efficiently and communicate necessary adjustments to the DFS grant manager if challenges arise, will facilitate regular communication with the DFS grant manager, including status reports/updates, participation in site visits, review of performance against the Grant Agreement, and will provide accurate and timely reporting to the DFS grant manager.

The grantee's grant manager is Chief John White, who can be reached at: 576 Main Street, Melrose, MA 02176, tel: 781-979-4403, email: jwhite@cityofmelrose.org. The DFS grant manager is David Clemons, Director of Operations, 1 State Road, Stow, MA 01775, tel: 978-567-3179, email: David.Clemons@mass.gov.

Reimbursement Request Process: The DFS agrees to disburse funds on a cost reimbursement basis. All costs requested for reimbursement must be listed on the DFS FY26 Firefighter Safety Equipment Grant Reimbursement Request Form. Appropriate supporting documentation for all costs must also be attached, including:

1. Copy of invoice
2. Proof of payment – Cancelled check or similar other proof of payment documentation from the Grantee's official accounting system or financial institution showing that the transaction has been completed.

Period of Performance: Approved expenditures may not be made until a contract has been executed between DFS and the grant recipient. Expenses incurred prior to execution of a contract **will not** be eligible for reimbursement through this program.

Grant recipients must take delivery of equipment no later than June 30, 2026. Equipment delivered to the recipient after that date **will not** be eligible for reimbursement through this program.

Reimbursement requests must be submitted no later than July 24, 2026. DFS will only reimburse for costs incurred through the grant performance period, June 30, 2026.

Grant Monitoring: The Department of Fire Services will conduct grant monitoring through either a desk-based review or on-site monitoring visits, or both, in order to obtain additional information or verify information related to grant spending, grant-funded activity, or grant award outcomes. Advance notice, when practicable, will be given prior to a site visit. In accordance with 815 CMR 2.00, the Grantee shall maintain records, books, files, reports, and other data in such detail as shall properly substantiate claims for payment for a minimum retention period of seven years beginning on the first day after the final payment under the grant. Any and all records pertaining to this grant are subject to inspection or audit by DFS at any time. DFS reserves the right to request, and the Grantee expressly agrees to provide, any additional records or documentation DFS deems necessary, at any time and for any reason, to verify that grant

funds are being expended in a manner consistent with the stated purpose of the grant. Findings of non-compliance with any portion of this agreement may result in a demand for funds to be returned to DFS.

Changes in Scope of Work or Budget: The grant project description and budget are fixed and any change would be a “material” change in the contract. “Material” changes to the project description (adding, deleting or altering items) or budget lines (deletions, additions or changes to items) will require both parties to execute an amended Standard Contract Form and Grant Agreement. Contract amendments may not be made retroactively and must be made prior to the grant end date.

Opportunity to Consult with Counsel: Grantee acknowledges that it has had the opportunity to consult with counsel of its choosing in the review of this Agreement, that it is encouraged by the DFS to do so and that the Grantee is fully aware of the contents of this agreement and its legal effect.

Representations: The individuals signing this agreement attest that they are competent and authorized to enter into this Agreement on behalf of their respective agencies.

Approved by:

Approved by:

City of Melrose

Department of Fire Services

Jennifer Grigoraitis, Mayor
Print Name and Title

Jon Davine, State Fire Marshal
Print Name and Title

Date

Date



Melrose Affordable Housing Trust

*April 2026 | Presentation to
Melrose City Council*

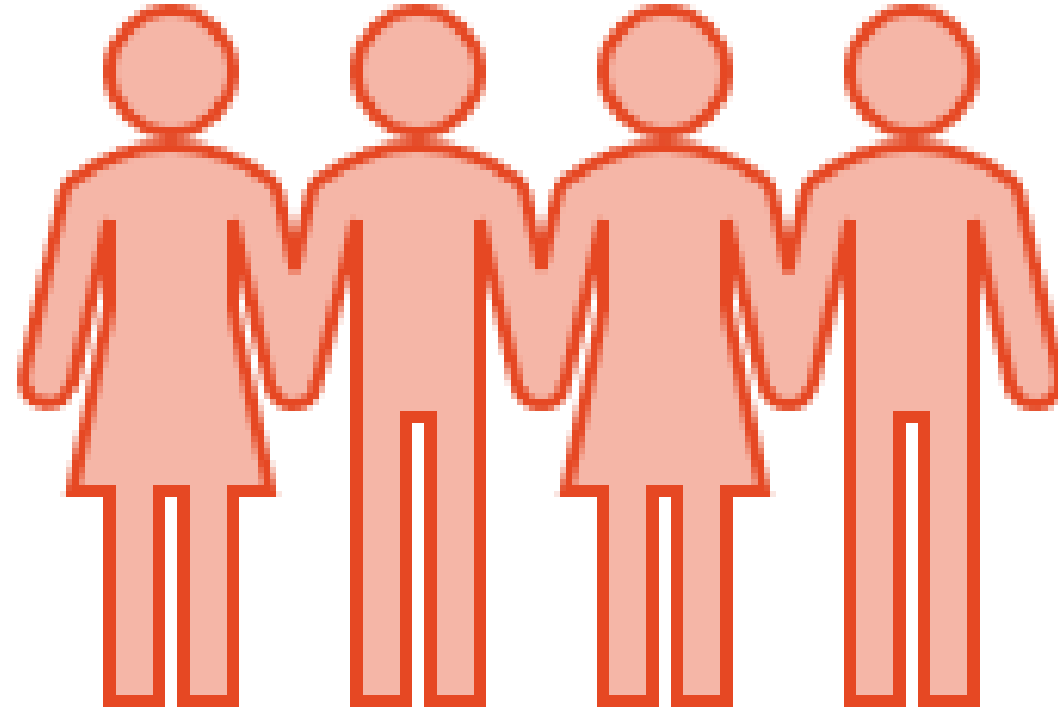
Introductions

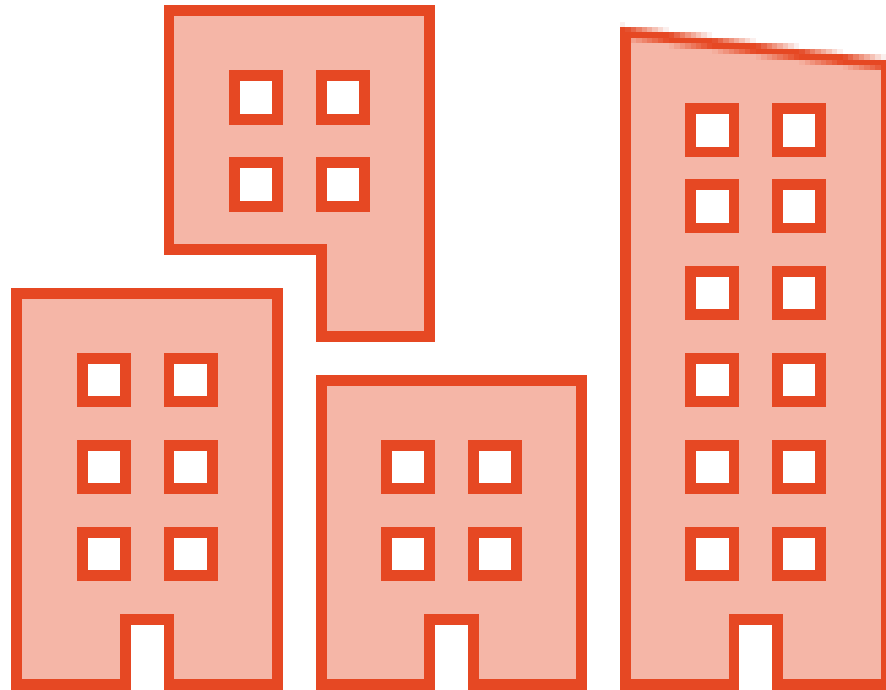
Amy Tierney, Chair

Jim Oosterman, Vice Chair

Helena Widtfeldt, Clerk

Joe Viola, Treasurer





What Is the Melrose Affordable Housing Trust?

- Established by City Council vote under M.G.L. c. 44 §55
- Volunteer board appointed by the Mayor and confirmed by City Council
- Supported by City staff in the Office of Planning and Community Development

Mission

MAHTF seeks to create, preserve and support diverse affordable housing to meet the needs of low- and moderate-income households in Melrose over their lifespan, in collaboration with municipal and community partners.

Why Are We Here?

Melrose's Commitment to Affordable Housing

- City Master Plan
- 2022 – 2027 Housing Production Plan goals
- Alignment with state housing and planning priorities
- Community values: inclusivity, stability, and sustainability

Why This Matters

- Stable housing strengthens families
- Diverse housing supports economic vitality
- Local action helps protect community character

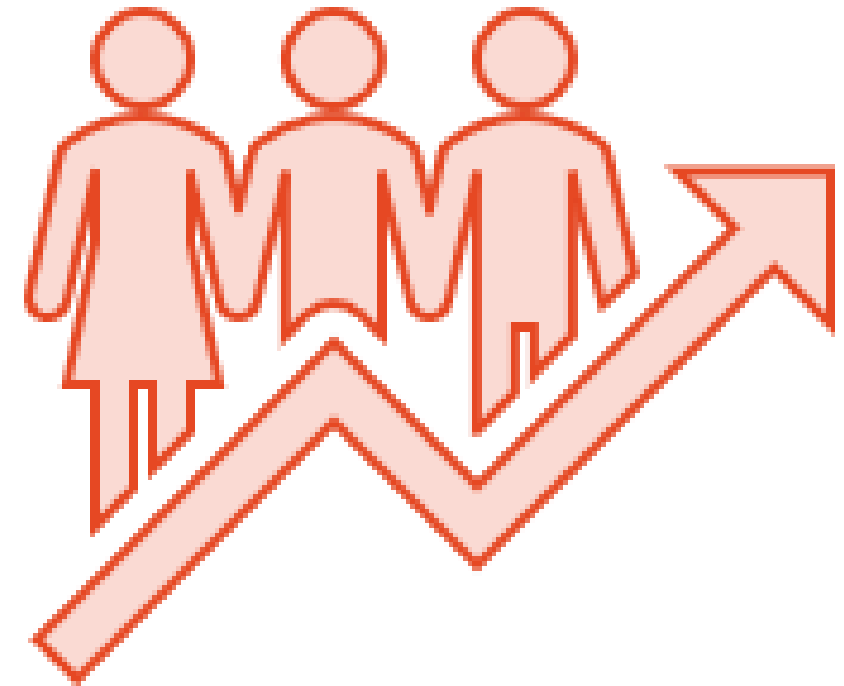
What Is Affordable Housing?

- In Massachusetts, Affordable Housing is defined as housing that is deed-restricted to be affordable to eligible low- and moderate-income residents without paying more than 30% of their annual household income
 - Includes subsidized, deed-restricted, inclusionary units
 - Naturally occurring affordable housing (NOAH) is not deed-restricted
 - In Melrose, inclusionary units are set for households earning up to 80% of Area Median Income (AMI)
 - AMI is set annually by HUD – Melrose is in the Boston metro area

| HH Size | 2025 Income Limits (by AMI) | | | |
|---------|-----------------------------|----------|----------|-----------|
| | 30% AMI | 50% AMI | 60% AMI | 80% AMI |
| 1 | \$34,750 | \$57,900 | \$69,480 | \$92,650 |
| 2 | \$39,700 | \$66,200 | \$79,440 | \$105,850 |
| 3 | \$44,650 | \$74,450 | \$89,340 | \$119,100 |
| 4 | \$49,600 | \$82,700 | \$99,240 | \$132,300 |

Housing Needs in Melrose

- Rising home prices and rents
 - Median s.f. home (\$970k) up ~42% since 2020
 - Median condo (\$525k) up ~8% since 2020
 - Avg rent (\$2,959) up ~29% since 2020
- Seniors seeking to age in place
- Young families and workforce households (i.e. retail workers, municipal employees, healthcare workers, etc.)
- Residents with disabilities and households on fixed incomes



Melrose by the Numbers



Population: approximately 29,871



Median household income: about \$133,953



Median home value: about \$970,000



Median rent: about \$2,970 per month



Total housing units in Melrose: about 12,711

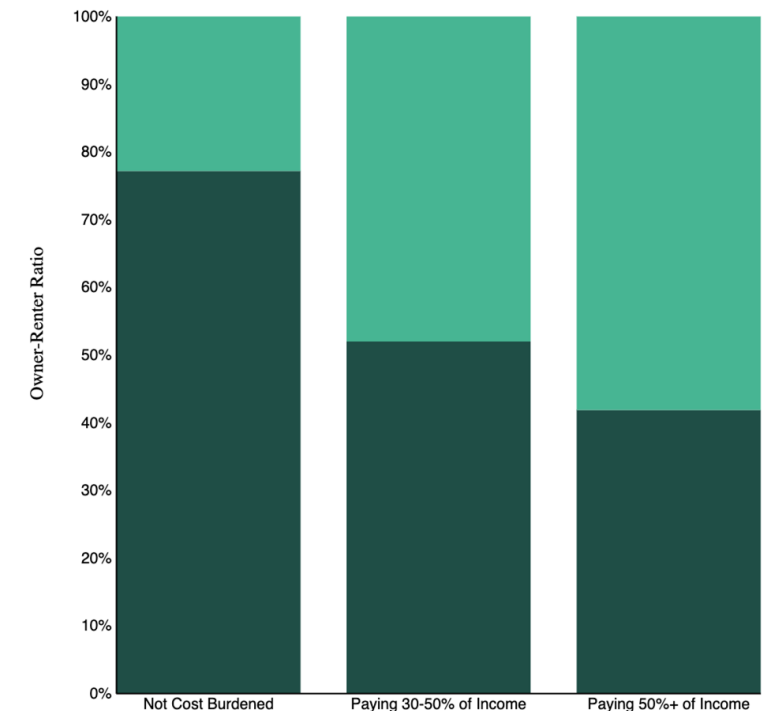


Total rental units: about 4,169

Who Is Struggling With Housing Costs in Melrose?

- 30% of all households are cost-burdened
 - 13.9% are severely cost-burdened
- 3,173 homes are owned by households over 60 years old
- Renters experience higher cost burden than homeowners
- Seniors face limited affordable, appropriately sized housing options

Housing Cost Burden



● Owner Occupied

● Renter Occupied

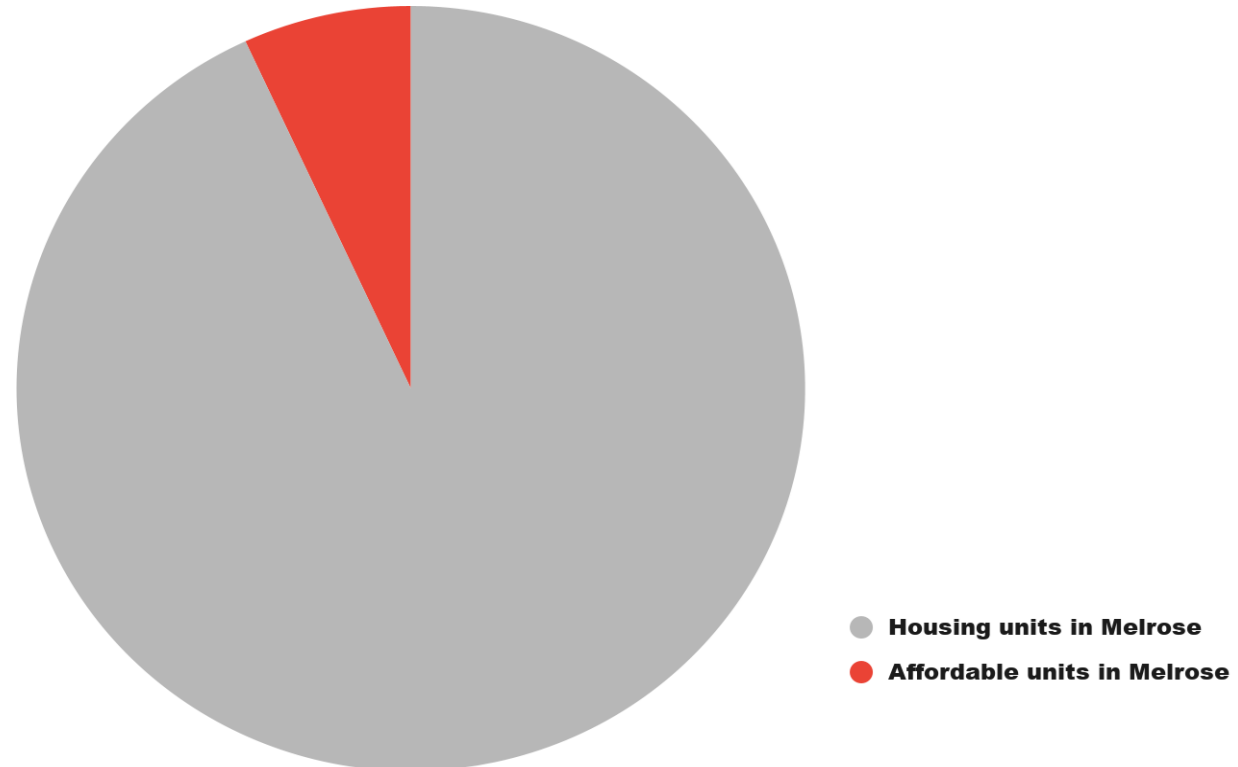
Source: American Community Survey
Years: 2020-2024 5-Year Estimates
Link to: Cost Burdened Households (Municipal)

Who are the Key Collaborators Around Affordable Housing in Melrose?

- City of Melrose
- Melrose Affordable Housing Trust
- Melrose Housing Authority
- Melrose Affordable Housing Corporation
- Congregational Retirement Homes/Cefalo Memorial Complex
- Private and nonprofit developers
- State and federal partners – North Suburban Consortium

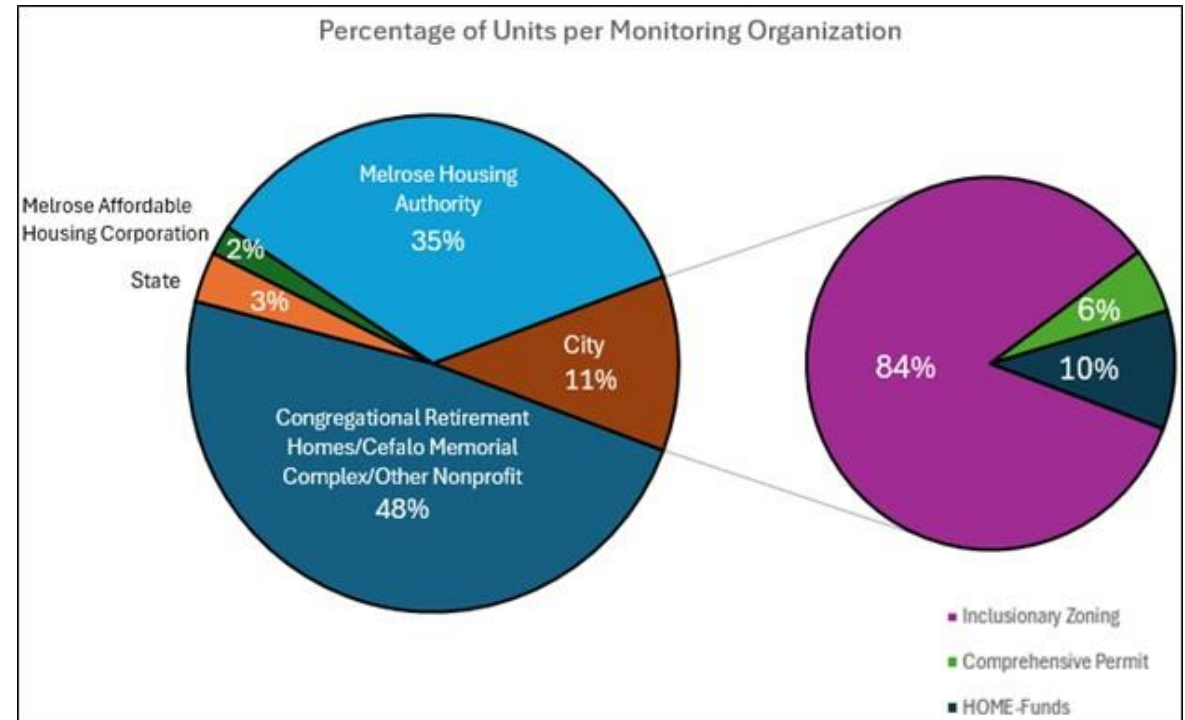
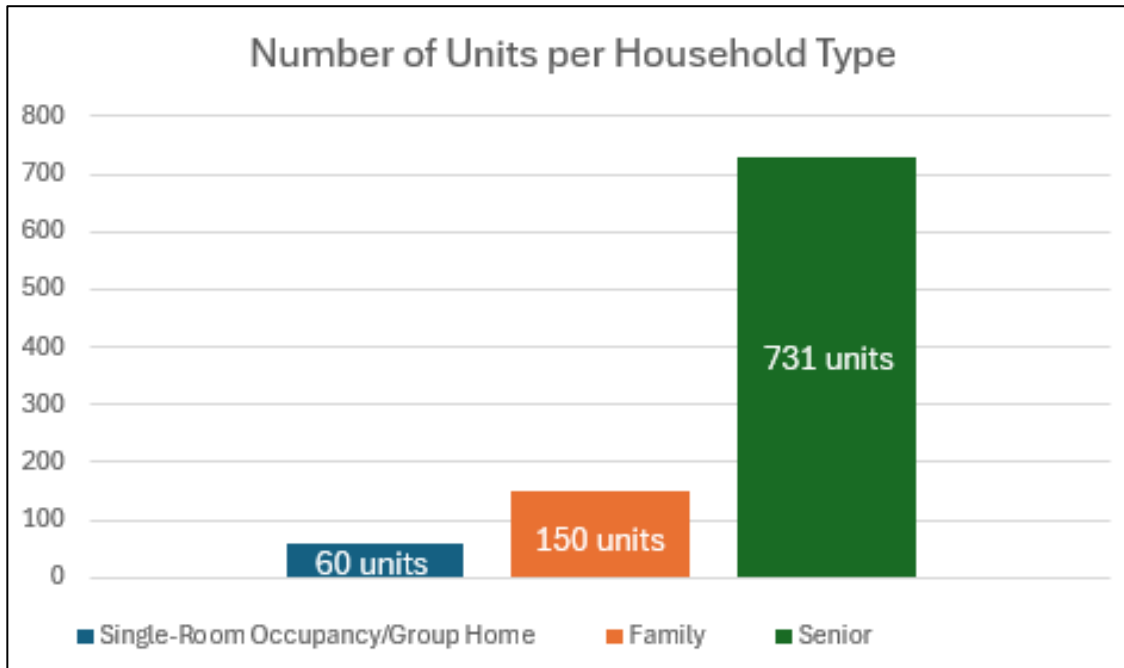
Affordable Housing in Melrose Today

- Total housing units = 12,711
- Total affordable units = 941



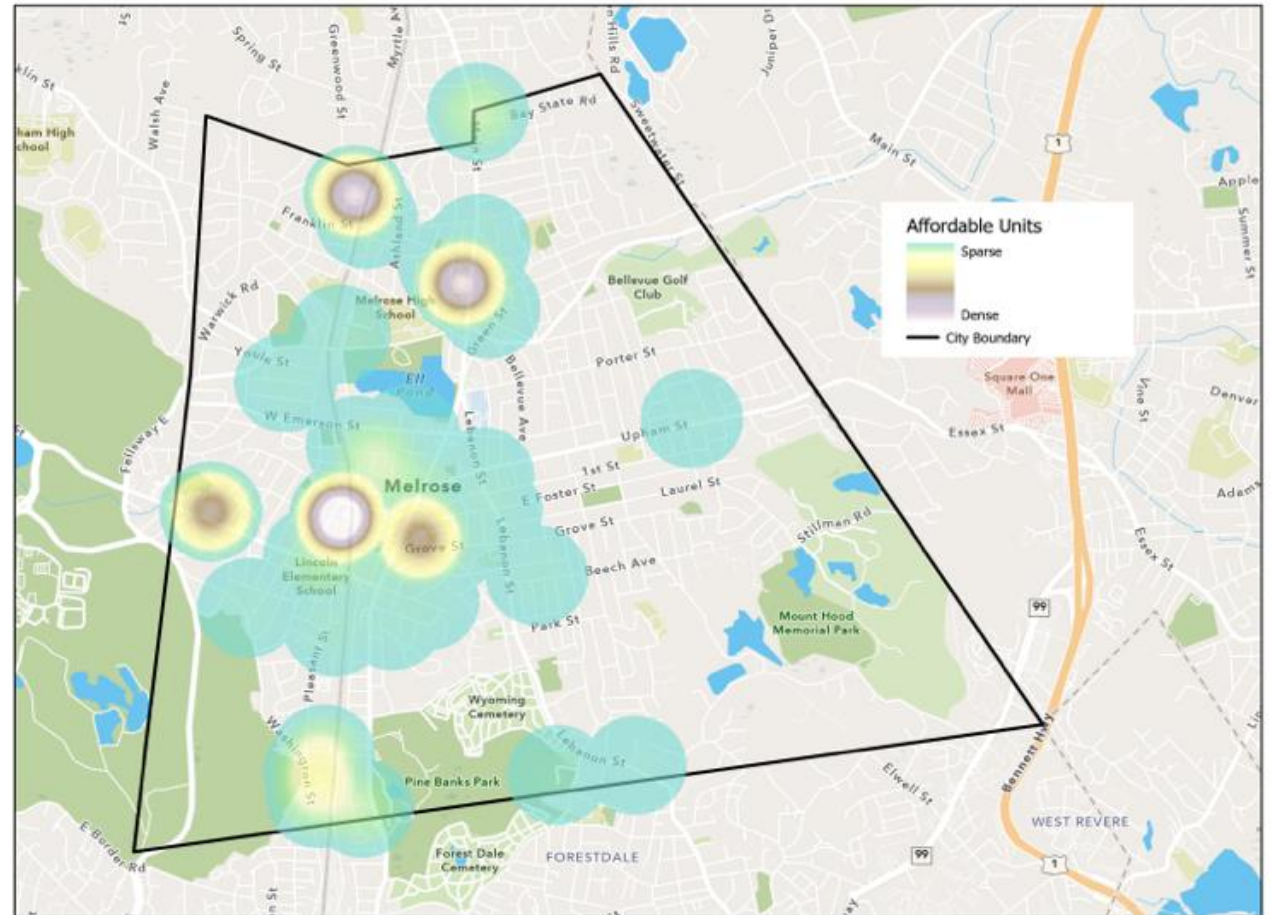
Types of Affordable Housing in Melrose

- Units monitored by various entities
- Affordable housing for seniors remains limited relative to need



Where Affordable Housing Is Located in Melrose

- Affordable housing located across multiple neighborhoods
- Variety of housing types and scales



Affordable Housing Tools

- Affordable Housing Trust
- North Suburban Consortium (NSC)
- Government subsidies
- Inclusionary Zoning
- Chapter 40B

Role of the Melrose Affordable Housing Trust

- Grant funds in order to create, preserve and support affordable housing
 - Guidelines and Application for Funds
 - Parameters for funding
 - Defined Selection Criteria
 - Sets Goals for next 5 years
- Leverage City, state, and federal funding
- Partner with nonprofit and private developers
- Steward long-term affordability

Current and Recent Trust Activities

- 2025 Massachusetts Housing Partnership Technical Assistance grant (January 2025 - October 2025)
 - Meet several times a month as a Board and in subcommittees with MHP Technical Staff
 - Developed Mission Statement, Goals & Strategies reflected in Guidelines & Application
- Melrose Affordable Housing Corporation (MAHC) project at West Wyoming Avenue
 - Private owner approached MAHC regarding buying 3 units
 - MAHC worked with private lender and NSC to secure financing for \$900,000 purchase
 - Trust granted MAHC \$140,000
 - Yielded 3 deed-restricted affordable units in perpetuity
- Held a public listening session with Melrose Housing Authority & MAHC
- Mayor's Melrose Minute

Trust Goals Over the Next 5 Years

- Community education and outreach
 - Develop minimum of 3 community outreach efforts a year
- Sustainable and diverse funding sources
 - Identify sources to secure \$3M over 5 years
- Affordable housing development and preservation pipeline
 - Support creation of 150 or more homes for rent or ownership



How We Do This Together: Today and in the Future

- How the Trust works
 - Collaborates with various City departments & boards to support affordable housing initiatives
 - Coordinates with interested stakeholders
 - Engages residents through public meetings and future listening sessions
- How the Trust is funded today (\$519,901.28)
 - City appropriations of free cash
 - Developer contributions through inclusionary zoning payment in lieu
- How Melrose can expand impact of Trust
 - Community Preservation Act (CPA)
 - Strategic use of City-owned property
- Possible expansion of funding to Homeownership Down Payment Assistance, etc.
- Expanded nonprofit and private partnerships

How City Council Can Partner with the Trust

Engage in Affordable Housing conversations and efforts

Support the Trust through Free Cash appropriations

Place CPA on the ballot



Thank You/ Questions

Melrose Affordable Housing Trust

Amy Tierney, Chair

Jim Oosterman, Vice Chair

Helena Widtfeldt, Clerk

Joe Viola, Treasurer



**MELROSE
AFFORDABLE
HOUSING TRUST
FUND**

Guidelines and Application

Melrose Affordable Housing Trust Fund

Guidelines and Application

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Part I: INTRODUCTION

Established in 2020 by the Mayor and City Council, the Melrose Affordable Housing Trust Fund (MAHTF) provides for the creation and preservation of affordable housing within the City of Melrose to promote greater diversity and racial equity in the community and for the benefit of low- to moderate-income households in accordance with the provisions of M.G.L. Chapter 44, Section 55c. These guidelines detail the operational framework and funding parameters of the MAHTF. They are subject to amendments and modifications in accordance with the changing needs and resources of the MAHTF.

a. **Mission Statement**

MAHTF seeks to create, preserve and support diverse affordable housing to meet the needs of low- and moderate-income households in Melrose over their lifespan, in collaboration with municipal and community partners.

b. **Administrative Structure**

i. **Board of Trustees**

The MAHTF is administered by a five-person Board of Trustees (“Trustees”), including the Mayor or Mayor’s designee. Trustees serve for two (2) year terms and are appointed by the Mayor. A Chair, Vice Chair, Treasurer and Clerk are elected annually by the Trustees.

ii. **Staffing**

Members of the City’s Office of Planning and Community Development provide staffing support to the MAHTF. The City Treasurer serves as the Custodian of Funds, managing expenditures of the trust and periodically providing an accounting of activities to the board.

iii. **Meetings**

The Board typically meets on the second Monday of the month at City Hall.

iv. **Funding**

The MAHTF primarily receives funds from payments as specified in the inclusionary housing requirements in Melrose’s Zoning Ordinance. The Board will be seeking other funding sources such as donations and making requests for free cash.

c. **Roles and Responsibilities**

i. **Powers**

As outlined in the MAHTF ordinance, the Board is given 17 powers,

including but not limited to: the right to receive, purchase, and convey real or personal property; purchase and retain real or personal property; sell, lease, convey any personal, missed or real property; execute deeds, assignments, transfers related to any transaction of the trustees; employ advisors and agents, such as accountants, appraisers and lawyers; and borrow money. The Trust ordinance limits powers in two ways, 1) the conveyance of any real property shall require the approval of the Mayor and City Council; and, 2) any debt incurred by the Trust shall not constitute a pledge of the full faith and credit of the City of Melrose.

Part II: POLICIES

a. Goals and Strategies

To help accomplish the following goals and strategies, the Board will follow an implementation plan that outlines specific tasks for each strategy with an expected timeframe for completion.

Funding - Identify sustainable and diverse funding sources to secure \$3 million over five years to support the work of the trust.

- i. Establish a process for accepting donations to the trust fund.
- ii. Work toward the implementation of a real estate transfer fee with most of the revenue being allocated to the trust fund.
- iii. Participate in teaching the community about the Community Preservation Act and advocate for the city's adoption of the statute.
- iv. Request an annual allocation of free cash be directed to the trust fund.

Development – Over the next five years, support the creation of 150 or more homes, for rent or ownership, affordable for people earning up to 80% AMI.

- i. With the city, identify one to two municipal sites to use for affordable housing development.
- ii. Support the permitting process of at least 1-2 developments that include affordable homes.
- iii. Explore programs that may support homeownership or housing access for low- and moderate-income households.

- iv. Develop process and criteria for allocating trust funds.

Education & Outreach - Develop a minimum of three outreach efforts a year to educate the community about local housing needs and build support for more affordable housing.

- i. Build out the trust's webpage with information about the trust and housing resources.
- ii. Initiate an annual Melrose Minute segment to focus on the local need for more affordable housing and the work of the trust.
- iii. Build trust with community partners through quarterly meetings to share ideas and identify areas to collaborate to address local housing needs.
- iv. Review upcoming City events and identify opportunities for the trust to participate.

b. **Eligible Activities for Project Funding**

The MAHTF is seeking applications for projects that will result in increased housing opportunities for low- and moderate-income households in the City of Melrose.

Eligible activities may be periodically amended by the MAHTF board.

i. **Acquisition**

Includes costs associated with land/property acquisition for future affordable housing development. This may include acquisition-related costs such as closing costs and a certified real estate appraisal to establish fair market value, required for funding. **While this funding activity is primarily intended for non-profit and emerging affordable housing developers, it could be available in other circumstances.**

ii. **Predevelopment**

Includes determining the viability of residential development on a particular site, including costs related to architectural, engineering and consultant fees; financial feasibility analyses; 21E report; pro forma projections and other costs associated with examining the feasibility of an affordable housing development. Up to \$75,000 is available per project, but the Board will consider a larger award if a qualifying proposal warrants it.

For non-public proposals, funds allocated for pre-development activities will be secured by a mortgage and promissory note to be converted to a forgivable loan upon the creation of affordable housing

on the site.

iii. **Rehabilitation**

Includes support to rehabilitate existing housing into affordable housing.

iv. **New construction/Redevelopment**

Includes gap funding, where there is a demonstrated shortfall of private and public funding, to support the development of new affordable housing or the redevelopment of a site into affordable housing.

c. **Affordability Priorities**

The MAHTF defines low- and moderate-income as those earning up to 80% of the area median income (AMI) as defined by the U.S. Department of Housing and Development (HUD). However, the Board will give higher weight to development proposals that include some units for households earning 60% AMI and below.

For informational purposes, the table below outlines the 2025 income limits by area median income (AMI), provided by HUD, for the Boston-Cambridge-Quincy Metropolitan Statistical Area that the MAHTF intends to support through funding:

| HH Size | 2025 Income Limits (by AMI) | | | |
|---------|--------------------------------|----------|----------|-----------|
| | 30% AMI | 50% AMI | 60% AMI | 80% AMI |
| 1 | \$34,750 | \$57,900 | \$69,480 | \$92,650 |
| 2 | \$39,700 | \$66,200 | \$79,440 | \$105,850 |
| 3 | \$44,650 | \$74,450 | \$89,340 | \$119,100 |
| 4 | \$49,600 | \$82,700 | \$99,240 | \$132,300 |

[Link to HUD Income Limits for Melrose](#)

Part III: PROCEDURES

a. **Application Process**

- i. Applications will be accepted on a rolling basis. All submissions, scheduling and communications will be through the City of Melrose’s Office of Planning and Community Development.
- ii. City staff will review applications and may request additional information prior to review by the MAHTF Board. Staff may recommend that Applicants submit a Preliminary Application to seek initial feedback on a

proposal, which *may* include an in-person conversation with the MAHTF Board.

- iii. All applicants that submit a Final Application will be expected to meet with the Board to discuss their proposal and answer any questions.
- iv. Trustees will score proposals according to the Selection Criteria outlined below and vote on the application request.
- v. Upon approval, the MAHTF will issue an award letter including the purpose and scope of the project, projected timeframe, approved funding amount for the project and the structure of funds. Awards structured as loans will be filed as mortgages at the Registry of Deeds. Upon denial, the MAHTF will provide a letter stating the reason(s) for the denial.
- vi. Awardees are expected to provide annual updates to staff in the Melrose Office of Planning and Community Development throughout the term of the funding allocation.

b. Selection Criteria

The Trustees will apply the following scoring criteria in its review of applications. Proposals must receive points in each category, receiving a minimum of 50 points to be eligible for funding. Meeting every criterion may not guarantee a funding award.

| Total Points | Selection Criteria | Description |
|--------------|--------------------------------------|---|
| 25 | Development Team Capacity | The applicant has completed development projects of similar scale and scope as the proposed project. The applicant is capable of financing, developing and successfully managing projects upon occupancy. Applicants will receive consideration for contracting with a development consultant and/or partnering with a more experienced affordable housing developer. |
| 25 | Development Feasibility and Timeline | The applicant has demonstrated that the proposed development is financially feasible, identifying sufficient financing sources for all project uses. Site control has been obtained (if needed) and there is a clear path to receiving necessary zoning and other public approvals. The proposed timeline is realistic and achievable. |
| 25 | Affordability Objectives | The proposed project will create new rental or homeownership affordable housing opportunities that target lower income households. At a minimum, units subsidized with Trust Fund support must be affordable at 80% AMI or lower, however projects serving lower income households (i.e. 60%, 50%, 30% AMI), and those that provide a greater portion of total affordable units targeted to lower income households will receive higher evaluation scores. All units created with MAHTF |

| | | |
|-----------|---------------------------|---|
| | | resources must meet and comply with requirements established by the Massachusetts Executive Office of Housing and Livable Communities (EOHLC) for the Subsidized Housing Inventory (SHI). |
| 15 | Other Housing Objectives | The proposal maximizes access to affordable housing and includes additional project elements such as (but not limited to) services and programming appropriate to the targeted populations, perpetual affordability restrictions, preference for disadvantaged households, green building practices, and/or the inclusion of spaces that benefit members of the general public, as appropriate. |
| 10 | Alignment with City Plans | The proposed project is consistent with the goals/objectives of and meets the housing needs identified in the City's Housing Production Plan and Master Plan and addresses gaps in the current supply & cost of rental/homeownership units in Melrose. |

c. Project Monitoring and Compliance

The MAHTF, with support from the Office of Planning and Community Development, will work with the Commonwealth’s Executive Office of Housing and Livable Communities (EOHLC) and the project sponsor to ensure units funded by the MAHTF and intended for the SHI meet all requirements to be counted. This will include annual monitoring of the units.

d. Funding Application

Application material requirements can be found in the funding application form.



CITY OF MELROSE

HEALTH DEPARTMENT

Board of Health

Frank Brincheiro, MD
Lillian Kelly R.N.
Carol Ann Licitra, L.M.H.C.

Health Director

Anthony Chui, MPH

City Hall, 562 Main Street
Melrose, Massachusetts 02176
Telephone - (781)979-4130
health@cityofmelrose.org

To: Members of the Melrose City Council
From: Melrose Health Department
Subject: Proposal for a Regional Animal Control Officer Position
Date: April 1, 2026

The Melrose Health Department requests the City Council's support for establishing a regional Animal Control Officer position in partnership with the Towns of Wakefield and Stoneham. This proposal builds on the existing Intermunicipal Agreement, through which the three communities already share several public health positions. The success of that collaboration demonstrates the value of coordinated regional services and provides a framework for expanding our shared capacity.

Animal control needs across the region have grown in both volume and complexity. Incidents involving domestic animals and community education require a consistent approach. Currently, each municipality manages these responsibilities independently, which can lead to gaps in coverage, uneven enforcement, and limited ability to provide proactive outreach to residents. A regional Animal Control Officer would allow the three communities to respond more effectively to these challenges.

This shared position would strengthen public health and safety by ensuring timely responses to domestic animal-related incidents. It would also promote consistent enforcement of regulations such as licensing, vaccination compliance, and leash laws, while expanding our capacity to educate residents on responsible pet ownership and the prevention of zoonotic diseases. By distributing the cost of the position across three municipalities, the regional model offers a cost-effective approach that enhances service quality without duplicating resources.

Given the success of the current Intermunicipal Agreement, the addition of a regional Animal Control Officer can be implemented efficiently within the existing administrative structure. A regional Animal Control Officer represents a strategic investment in public health, community safety, and intermunicipal cooperation.

Sincerely,

Anthony Chui
Regional Health and Human Services Director
achui@cityofmelrose.org
(781) 979-4130

AGREEMENT

THIS AGREEMENT dated as of this 1st day of May, 2026 (this "Agreement") between the City of Melrose, a Massachusetts municipal corporation having a usual place of business at 562 Main Street, Melrose, Massachusetts 02176, acting by and through its Mayor, the Honorable Jennifer Grigoraitis ("Melrose"), the Town of Wakefield, a Massachusetts municipal corporation having a usual place of business at the William J. Lee Memorial Town Hall, One Lafayette Street, Wakefield, Massachusetts 01880, acting by and through its Town Council ("Wakefield"), and the Town of Stoneham, a Massachusetts municipal corporation having a usual place of business at 35 Central Street, Stoneham, Massachusetts 02180, acting by and through its Select Board ("Stoneham").

WITNESSETH THAT:

WHEREAS, Melrose, Stoneham, and Wakefield have determined that they share a need for animal control services; and

WHEREAS, Melrose, Stoneham and Wakefield have determined that sharing of the benefits and costs of those services would be beneficial to each municipality; and

WHEREAS, each of the parties has obtained authority to enter into this Agreement pursuant to G.L. c. 40, s 4A;

WHEREAS, this Agreement shall provide for the terms, conditions, and liabilities of the parties with respect to these services, including, but not limited to terms of cooperation and obligations of each municipality relative to cost of benefits, operating costs, and

NOW, THEREFORE, in consideration of the premises set forth above and for other good and valuable considerations, the receipt and sufficiency of which are hereby acknowledged, the parties hereto, intending to be legally bound, hereby agree under seal as follows:

1. **Animal Control Services.** During the term of this Agreement, Melrose, Stoneham, and Wakefield shall assume their respective shares of the costs associated with a shared Animal Control Services ("ACS"), which encompasses the full range of animal control, inspection, enforcement, public health, and emergency response duties as authorized under applicable state laws, city ordinances, and regulations, including M.G.L. Chapter 129, and as otherwise detailed in Exhibit A. Notwithstanding any other provision of this Agreement to the contrary, Melrose, Stoneham, and Wakefield shall maintain separate Animal Control Boards (or other public body having the same or similar functions) which shall be vested with the authority for setting policy within their respective communities.
2. **Term.** The term of this Agreement shall commence on May 1, 2026, and shall expire on June 30, 2029, unless earlier terminated as set forth herein. The parties shall review their contractual relationship every 12 months, the terms of which are set forth herein, to ensure that this Agreement continues to satisfy the needs and objectives of each municipality.
3. **Identity of Animal Control Services.** The parties shall share equally the services and costs of the position of Animal Control Officer/Inspector, or a successor hired through the standard personnel practices of Melrose in coordination and consultation with Stoneham and Wakefield.

4. **Compensation.** Melrose shall pay the Animal Control Officer/Inspector pursuant to this Agreement and in accordance with the terms set forth in Exhibit A hereto, as the same may be revised from time to time. Stoneham and Wakefield shall contribute their respective share of the Melrose Health and Human Services Department costs by paying to Melrose a variable sum, as required by the terms and conditions of this Agreement and as set forth on Exhibit A hereto and as may be amended from time to time, per fiscal quarter during the Term, each payment to be due and payable within fifteen (15) days after the commencement of such fiscal quarter (i.e., after 7/1, 10/1, 1/1 and 4/1). Melrose shall adjust the compensation it pays the Animal Control Officer/Inspector as it may be required to do in accordance with standard personnel practices, which impact upon the Health and Human Services Department Staff and shall give prompt written notice to Stoneham and Wakefield of any such adjustment. Stoneham and Wakefield shall adjust their quarterly payments accordingly.
5. **Retirement, Workers Compensation, Unemployment Insurance, Health, and Life Insurance Benefits.** The Animal Control Officer/Inspector will remain member of the Melrose Contributory Retirement System. Upon their retirement, Stoneham and Wakefield will be assessed a share of the cost of pension plans reflecting any concurrent time an employee spent working for Stoneham and Wakefield hereunder pursuant to applicable Massachusetts General Laws. At the end of each fiscal year, Stoneham and Wakefield shall reimburse Melrose for its workers' compensation and unemployment insurance costs associated with the employment of the Animal Control Officer/Inspector, such reimbursement to be equal to the product of Stoneham's and Wakefield's contribution to the Animal Control Officer/Inspector's salaries during such year multiplied by the rate paid by Melrose for workers' compensation insurance and unemployment insurance for the Animal Control Officer/Inspector for such year. Stoneham and Wakefield shall also reimburse Melrose for its health and life insurance costs associated with the Animal Control Officer/Inspector, said reimbursement to be equal to the proportion of Stoneham's and Wakefield's contribution to the Animal Control Officer/Inspector salary.
6. **Duties.** The Animal Control Officer/Inspector shall perform the duties as required by the respective local laws and regulations of Melrose, Stoneham, and Wakefield. The Animal Control Officer/Inspector shall also enforce the regulations set forth under M.G.L. 129, 140, 272, Acts of 2012, and all other laws adopted by the Commonwealth of Massachusetts.
7. **Car.** Melrose shall reimburse the Animal Control Officer/Inspector for any mileage used during the performance of duties in Melrose, Stoneham, and Wakefield. However, as part of the quarterly payment as set forth in Paragraph 4 above, Stoneham and Wakefield shall pay Melrose for those miles incurred for any services performed by the Health and Human Services Department Director and shared staff on behalf of Stoneham and Wakefield, respectively. All mileage reimbursement shall be paid at the rate then governing in Melrose.
8. **Indemnification.** Notwithstanding the final sentence of G.L. c. 40, s 4A, each of Stoneham and Wakefield shall indemnify and hold harmless Melrose and each and all of its officials, officers, employees, agents, servants and representatives (the "Indemnitites") from and against any claim arising from or in connection with the performance by the Animal Control Officer/Inspector of their duties in or for such community including, without limitation, any claim of liability, loss, damages, costs and expenses for personal injury or damage to real or personal property by reason of any negligent act or omission or

intentional misconduct by the Animal Control Officer/Inspector while in or performing services for such community. Such indemnification shall include, without limitation, current payment of all costs of defense (including reasonable attorney's fees, expert witness fees, court costs and related expenses) as and when such costs become due and the amounts of any judgments, awards and/or settlements, provided that (a) Stoneham or Wakefield as the case may be, shall have the right to select counsel to defend against such claims, such counsel to be reasonably acceptable to Melrose and its insurer, if any, and to approve or reject any settlement with respect to which indemnification is sought, (b) the Indemnities shall cooperate with Stoneham or Wakefield, as the case may be, in all reasonable respects in connection with such defense, and (c) Stoneham or Wakefield, as the case may be, shall not be responsible to pay any judgment, award or settlement to the extent occasioned by the negligence or intentional misconduct of any of the Indemnities other than the Animal Control Officer/Inspector. For the avoidance of doubt, the indemnification contemplated here shall not be the joint obligation of Stoneham and Wakefield; rather, Stoneham's obligation shall be limited to those claims arising from acts within Stoneham and Wakefield's obligation shall be limited to those claims arising from acts within Wakefield.

9. **Termination.** This Agreement may be terminated by any party for any reason or no reason with sixty (60) days written notice to the other. No such termination shall affect any obligation of indemnification that may have arisen hereunder prior to such termination. The parties shall equitably adjust any payments made or due relating to the unexpired portion of the Term following such termination.
10. **Assignment.** Neither party shall assign or transfer any of its rights or interests in or to this Agreement, or delegate any of its obligations hereunder, without the prior written consent of the others.
11. **Severability.** If any provision of this Agreement is held by a court of competent jurisdiction to be invalid, illegal or unenforceable, or if any such term is so held when applied to any particular circumstance, such invalidity, illegality or unenforceability shall not affect any other provision of this Agreement, or affect the application of such provision to any other circumstances, and this Agreement shall be construed and enforced as if such invalid, illegal or unenforceable provision were not contained herein.
12. **Waiver.** The obligations and conditions set forth in this Agreement may be waived only by a writing signed by the party waiving such obligation or condition. Forbearance or indulgence by a party shall not be construed as a waiver, nor limit the remedies that would otherwise be available to that party under this Agreement or applicable law. No waiver of any breach or default shall constitute or be deemed evidence of a waiver of any subsequent breach or default.
13. **Amendment.** This Agreement may be amended only by a writing signed by all parties duly authorized thereto.
14. **Governing Law.** This Agreement shall be construed in accordance with the substantive law of the Commonwealth of Massachusetts, without regard to the conflicts of law provisions thereof.
15. **Headings.** The paragraph headings herein are for convenience only, are not part of this Agreement and shall not affect the interpretation of this Agreement.

16. **Notices.** Any notice permitted or required hereunder to be given or served on any party by the other shall be in writing signed in the name of or on behalf of the party giving or serving the same. Notice shall be deemed to have been received at the time of actual receipt of and hand delivery or three (3) business days after the date of any properly addressed notice sent by mail as set forth below.

a. To Melrose. Any notice to Melrose hereunder shall be delivered by hand or sent by registered or certified mail, return receipt requested, postage prepaid, to:

The Honorable Mayor Jennifer Grigoraitis
Melrose City Hall
562 Main Street
Melrose, Massachusetts 02176

or to such other address(es) as Melrose may designate in writing to Stoneham and Wakefield.

b. To Wakefield. Any notice to Wakefield hereunder shall be delivered by hand or sent by registered or certified mail, return receipt requested, postage prepaid, to:

Denise Casey
Town Administrator
William J. Lee Memorial Town Hall
One Lafayette Street
Wakefield, Massachusetts 01880

or to such other address(es) as Wakefield may designate in writing to Melrose and Stoneham.

c. To Stoneham. Any notice to Stoneham hereunder shall be delivered by hand or sent by registered or certified mail, return receipt requested, postage prepaid, to:

Dennis Sheehan
Town Administrator
Stoneham Town Hall
35 Central Street
Stoneham, MA 02180

or to such other address(es) as Stoneham may designate in writing to Melrose and Wakefield.

12. **Complete Agreement.** This Agreement constitutes the entire agreement among the parties concerning the subject matter hereof, superseding all prior agreements and understandings. There are no other agreements or understandings between the parties concerning the subject matter hereof. Each party acknowledges that it has not relied on any representations by the other party or by anyone acting or purporting to act for the other party or for whose actions the other party is responsible, other than the express, written presentations set forth herein.

13. **Financial Safeguards.** The Animal Control Officer shall maintain separate, accurate and comprehensive records of all services performed for each of the parties hereto. Melrose shall maintain accurate and comprehensive records of all costs incurred by or on account of the Animal Control Officer/Inspector, and all reimbursements and contributions received from Stoneham and Wakefield. On an annual basis, the parties' financial officers shall jointly review the accounts of the Animal Control Officer/Inspector for accounting consistency and reliability.

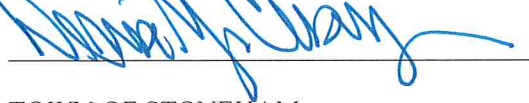
WITNESS OUR HANDS AND SEALS as of the first date written above.

CITY OF MELROSE

By its Mayor

TOWN OF WAKEFIELD

By its Town Administrator

A handwritten signature in blue ink, written over a horizontal line. The signature is cursive and appears to read "Marilyn Way".

TOWN OF STONEHAM

By its Town Administrator
