



GLADSTONE CITY COMMISSION REGULAR MEETING

City Hall Chambers – 1100 Delta Avenue

December 09, 2024

6:00 PM

AGENDA

CALL TO ORDER

1. Invocation
2. Pledge of Allegiance
3. Roll Call

PUBLIC HEARINGS

PUBLIC COMMENT

CONFLICTS OF INTEREST

CONSENT AGENDA

- [4.](#) Planning Commission August 13, 2024 Meeting Minutes
- [5.](#) Gladstone City Commission Regular Meeting Minutes November 25, 2024
- [6.](#) Planning Commission Meeting Schedule 2025
- [7.](#) Civic Plus - Invoice #322703 Website-Agenda-Minutes Programs \$5,071.50

UNFINISHED BUSINESS

NEW BUSINESS

- [8.](#) Social Media & Website Policy
- [9.](#) Police Cruiser Upfitting
- [10.](#) East End Lift Station Pump Replacement
- [11.](#) Wastewater Upgrades Request for Disbursement of Funds Draw #29
- [12.](#) MERS Participation Agreements-Department Heads
- [13.](#) City Property Sale Request
- [14.](#) Gladstone City Commission Regular Meeting Schedule 2025
- [15.](#) Parks & Recreation Advisory Board Member Resignation - Mr. Jeremy Cook

CITY MANAGER'S REPORT

CITY COMMISSION & COMMITTEE REPORTS

BOARDS & COMMISSIONS REPORTS

- [16.](#) DDA Informational Meeting

CITY COMMISSIONER COMMENTS

CITY CLERK COMMENTS

CLOSED SESSION

ADJOURNMENT

The City of Gladstone will provide all necessary, reasonable aids and services, such as signers for the hearing impaired and audiotapes of printed materials being considered at the meeting to individuals with disabilities at the meeting/hearing upon five days notice to the City of Gladstone. Individuals with disabilities requiring auxiliary aids or services should contact the City of Gladstone by writing or calling City Hall at (906) 428-2311.

Posted: 12-06-2024

Kimberly Berry, MiPMC
906-428-2311
kberry@gladstonemi.gov

RULES FOR PUBLIC COMMENT/ PUBLIC HEARINGS

(Excerpt from City Commission Rules of Procedure Adopted: 11-25-2019)

A. Public Comment / Public Hearings

At regular and special meetings of the commission, individuals wishing to be heard may address the commission during the public comment/public hearing periods as set forth in the agenda under the following rules:

1. Each speaker shall state name and address for the record.
2. Each speaker is limited to three (3) minutes of comment unless the presiding officer decides more time is necessary
3. Each speaker shall try to be concise and refrain from repeating comments already addressed by the commission.
4. Speakers who do not cease speaking when asked to do so will be deemed out of order and will not be allowed to address the commission again for the remainder of the meeting; continued disruption will warrant removal from the meeting.
5. The commission shall not decide issues that arise during public comment.
6. Speakers should address the commission through the presiding officer.
7. Commissioners and staff will not debate with the public.
8. Speakers will not verbally attack City Commissioners, City Staff or members of the public attending the meeting. Any such behavior will not be tolerated and any person presenting in this manner will be warned by the Mayor and shall be removed by Public Safety for noncompliance.
9. No vulgar or obscene language will be used by the speakers.
10. Any information the speaker wants to distribute to the Commission must first ask the Chair (Mayor) if they may present the Commission written comments at the meeting.
11. Speakers may not ask questions of the board during this time as the Commission or Staff will not address them during this public comment period.



GLADSTONE PLANNING COMMISSION MEETING

City Hall Chambers – 1100 Delta Avenue
December 03, 2024
5:00 PM

A Regular Meeting of the Gladstone Planning Commission will be held on Tuesday, December 03, 2024 at 5:00 PM hosted at City Hall Chambers – 1100 Delta Avenue.

MINUTES

CALL TO ORDER: Commissioner Haulotte called the meeting to order at 5:02PM

ROLL CALL:

Members Present: Haulotte, Noreus, Woodworth & Leonard

Members Excused: Butch & DeFiore

Vacancy: One

APPROVAL AND/OR CORRECTIONS OF:

1. Regular Planning Commission Meeting Minutes of August 13, 2024

Motion by Commissioner Noreus; seconded by Commissioner Woodworth to approve the meeting minutes of August 13, 2024 as presented. **MOTION CARRIED**

ADDITIONS TO AGENDA: None

PUBLIC HEARINGS: None

UNFINISHED BUSINESS: None

NEW BUSINESS

2. **Planning Commissioner Resignation-Alger Strom**

Motion by Commissioner Leonard; seconded by Commissioner Noreus to regretfully accept Alger Strom's resignation from the Planning Commission and to acknowledge Alger's 20 years of exemplary service to the Community. **MOTION CARRIED**

3. **Planning Commission 2025 Meeting Dates**

Motion by Commissioner Noreus, seconded by Commissioner Leonard to approve the 2025 Meeting Dates as presented. **MOTION CARRIED**

4. **Site Plan Review-Choice Propane-8 Robert Hupy Drive**

Barron reviewed the site plan submitted by Choice Propane for a satellite tank on 8 Robert Hupy Drive. The plans submitted are in alignment with the rules and regulations of the city and staff had no issues with the site plan. The Planning Commission reviewed the documents. Motion by Commissioner Noreus; seconded by Commissioner Woodworth to approve the site plan as submitted. **MOTION CARRIED**

PUBLIC COMMENT: Sam Hewitt, 615 Wisconsin, was in attendance and voiced his interest in serving on the Planning Commission. He gave a brief background of himself. Barron to forward him an application and some information.

INFORMATION SHARING

Item 4.

COMMISSIONER COMMENTS: Commissioners asked about the Besse property and the Fairview Manor property.

COMMUNITY DEVELOPMENT COMMENTS: Barron gave an update on the Northshore Property and provide some information on Fairview and Besse properties and discussed the millage issue.

ADJOURNMENT: 5:45PM

GLADSTONE



GLADSTONE CITY COMMISSION REGULAR MEETING

City Hall Chambers – 1100 Delta Avenue
November 25, 2024
6:00 PM

MINUTES

Mayor Thompson called the meeting to order, gave the Invocation followed by the Pledge of Allegiance.

Clerk Berry called the roll:

PRESENT

Mayor Joe Thompson
Commissioner Judy Akkala
Mayor Pro-Tem Brad Mantela
Commissioner Robert Pontius
Commissioner Steve O'Driscoll

No public comment.

Motion made by Commissioner O'Driscoll, Seconded by Mayor Pro-Tem Mantela to approve the consent agenda as presented.

MOTION CARRIED UNANIMOUSLY

Motion made by Mayor Pro-Tem Mantela, Seconded by Commissioner O'Driscoll to place Planning Commissioner Alger Strom's letter of resignation on the record and thank him for his twenty-four years of service.

MOTION CARRIED UNANIMOUSLY

Motion made by Mayor Pro-Tem Mantela, Seconded by Commissioner Akkala to approve the Letter of Agreement with the IBEW 906 Union regarding amendment to Section 2.02 Union Security, Requirements of Union Membership and authorize Mayor Joe Thompson and Manager Eric Buckman to sign the Letter of Agreement.

MOTION CARRIED UNANIMOUSLY

Motion made by Commissioner O'Driscoll, Seconded by Mayor Thompson to approve the request for disbursement of funds Draw #28 totaling \$337,200.00 for the Wastewater Treatment Plant Upgrades Project and authorize Manager Eric Buckman to sign.

MOTION CARRIED UNANIMOUSLY

Motion made by Commissioner Akkala, Seconded by Mayor Pro-Tem Mantela accept the Proposal for Professional Services from C2AE for \$957,150.00 for the CWSRF Project Plan and authorize Manager Eric Buckman to sign the proposal.

MOTION CARRIED UNANIMOUSLY

November 25, 2024

Motion made by Mayor Pro-Tem Mantela, Seconded by Commissioner O'Driscoll to approve Change Order No. 14 as recommended by C2AE Engineering for a net increase to the contract price of \$33,868.00 and authorize Manager Buckman to sign the order.

MOTION CARRIED UNANIMOUSLY

Mr. Joe Maki, Vice Chairman of the Gladstone Housing Commission invited the City Commissioners to contact him to schedule individual tours of Fairview Manor with him.

Motion made by Mayor Pro-Tem Mantela, Seconded by Mayor Thompson to authorize the placement of miscellaneous invoices and past due utility balances in the amount of \$19,419.33 on the Winter 2024 property tax bills as follows:

MISC INVOICES
OFF TO TAXES
WINTER 2024

Winter 2024 Miscellaneous Invoices To Taxes

PARCEL #	NAME	SERVICE ADDRESS	Owner Address	City, State, Zip	INVOICE #	DESCRIPTION	AMOUNT	10 % PENALTY	TOTAL
052-029-004-00	Justine Rochoon	608 Superior Ave	608 Superior Ave	Gladstone, MI 49837	3227	lawn service	\$ 54.00	\$ 5.40	\$ 59.40
052-038-008-00	Darren Louis	814 Minneapolis Ave	7715 W Armitage Ave	Elmwood Park, IL 60707	3155	broken rental inspection and code violation	\$ 93.50	\$ 9.35	\$ 102.85
052-038-008-00	Darren Louis	814 Minneapolis Ave	7715 W Armitage Ave	Elmwood Park, IL 60707	3221	broken rental inspection and code violation	\$ 307.80	\$ 30.78	\$ 338.58
052-041-010-00	Bailey McClintchy	810 Michigan Ave	810 Michigan Ave	Gladstone, MI 49837	3331	code violation	\$ 260.00	\$ 26.00	\$ 286.00
052-041-010-00	Bailey McClintchy	810 Michigan Ave	810 Michigan Ave	Gladstone, MI 49837	3359	code violation	\$ 520.00	\$ 52.00	\$ 572.00
052-048-011-00	Steve Hackleman	921 Delta Ave	921 Delta Ave	Gladstone, MI 49837	3100	code violation	\$ 56.00	\$ 5.60	\$ 61.60
052-066-003-00	John and Tammy Gillis	1109 Wisconsin Ave	1109 Wisconsin Ave	Gladstone, MI 49837	3159	code violation	\$ 55.00	\$ 5.50	\$ 60.50
052-072-007-00	Michael and Marilyn Albrecht	1225 Michigan Ave	2706 2nd Ave W	Gladstone, MI 49837	3152	rental re-inspection	\$ 33.00	\$ 3.30	\$ 36.30
052-072-007-00	Michael and Marilyn Albrecht	1225 Michigan Ave	2706 2nd Ave W	Gladstone, MI 49837	3240	broken rental inspection	\$ 37.80	\$ 3.78	\$ 41.58
052-072-007-00	Michael and Marilyn Albrecht	1225 Michigan Ave	2706 2nd Ave W	Gladstone, MI 49837	3285	broken rental inspection	\$ 37.10	\$ 3.71	\$ 40.81
052-072-007-00	Michael and Marilyn Albrecht	1225 Michigan Ave	2706 2nd Ave W	Gladstone, MI 49837	3317	broken rental inspection	\$ 37.10	\$ 3.71	\$ 40.81
052-072-007-00	Michael and Marilyn Albrecht	1225 Michigan Ave	2706 2nd Ave W	Gladstone, MI 49837	3354	broken rental inspection	\$ 36.40	\$ 3.64	\$ 40.04
052-073-011-00	William and Kelly Cavanaugh	1210 Michigan Ave	8397 S Lakeside T.5 Rd	Rapid River, MI 49878	3123	code violation	\$ 560.00	\$ 56.00	\$ 616.00
052-073-011-00	William and Kelly Cavanaugh	1210 Michigan Ave	8397 S Lakeside T.5 Rd	Rapid River, MI 49878	3166	code violation	\$ 550.00	\$ 55.00	\$ 605.00
052-073-011-00	William and Kelly Cavanaugh	1210 Michigan Ave	8397 S Lakeside T.5 Rd	Rapid River, MI 49878	3233	lawn service	\$ 54.00	\$ 5.40	\$ 59.40
052-073-011-00	William and Kelly Cavanaugh	1210 Michigan Ave	8397 S Lakeside T.5 Rd	Rapid River, MI 49878	3250	code violation	\$ 540.00	\$ 54.00	\$ 594.00
052-073-011-00	William and Kelly Cavanaugh	1210 Michigan Ave	8397 S Lakeside T.5 Rd	Rapid River, MI 49878	3312	code violation	\$ 530.00	\$ 53.00	\$ 583.00
052-073-011-00	William and Kelly Cavanaugh	1210 Michigan Ave	8397 S Lakeside T.5 Rd	Rapid River, MI 49878	3330	code violation	\$ 520.00	\$ 52.00	\$ 572.00
052-073-011-00	William and Kelly Cavanaugh	1210 Michigan Ave	8397 S Lakeside T.5 Rd	Rapid River, MI 49878	3360	code violation	\$ 520.00	\$ 52.00	\$ 572.00
052-073-012-00	William and Kelly Cavanaugh	1216 Michigan Ave	8397 S Lakeside T.5 Rd	Rapid River, MI 49878	3232	lawn service	\$ 64.80	\$ 6.48	\$ 71.28
052-076-018-00	Christina Flatt	1220 Delta Ave	1220 Delta Ave	Gladstone, MI 49837	3125	code violation	\$ 560.00	\$ 56.00	\$ 616.00
052-076-018-00	Christina Flatt	1220 Delta Ave	1220 Delta Ave	Gladstone, MI 49837	3200	code violation	\$ 540.00	\$ 54.00	\$ 594.00
052-076-018-00	Christina Flatt	1220 Delta Ave	1220 Delta Ave	Gladstone, MI 49837	3248	code violation	\$ 540.00	\$ 54.00	\$ 594.00
052-076-018-00	Christina Flatt	1220 Delta Ave	1220 Delta Ave	Gladstone, MI 49837	3310	code violation	\$ 530.00	\$ 53.00	\$ 583.00
052-076-018-00	Christina Flatt	1220 Delta Ave	1220 Delta Ave	Gladstone, MI 49837	3329	code violation	\$ 520.00	\$ 52.00	\$ 572.00
052-076-018-00	Christina Flatt	1220 Delta Ave	1220 Delta Ave	Gladstone, MI 49837	3358	code violation	\$ 520.00	\$ 52.00	\$ 572.00
052-077-001-00	Ricky Myers Jr	1206 Superior Ave	1206 Superior Ave	Gladstone, MI 49837	3291	lawn service	\$ 53.00	\$ 5.30	\$ 58.30
052-079-001-00	Daniel and Debra Mead	1301 1/2 Superior Ave	1301 Superior Ave	Gladstone, MI 49837	3131	rental inspection and certification	\$ 55.00	\$ 5.50	\$ 60.50
052-085-002-00	Michael and Marilyn Albrecht	1305 Montana Ave	2706 2nd Ave W	Gladstone, MI 49837	3132	rental inspection and certification	\$ 55.00	\$ 5.50	\$ 60.50
052-094-010-00	Michael Olsen	1510 Minnesota Ave	423 S 15th St	Escanaba, MI 49829	3122	code violation	\$ 560.00	\$ 56.00	\$ 616.00
052-102-003-00	Jarred Kholmman	1611 Michigan Ave	1611 Michigan Ave	Gladstone, MI 49837	3290	lawn service	\$ 53.00	\$ 5.30	\$ 58.30
052-102-003-00	Jarred Kholmman	1611 Michigan Ave	1611 Michigan Ave	Gladstone, MI 49837	3319	broken rental inspection	\$ 37.10	\$ 3.71	\$ 40.81
052-200-025-00	William and Fennette Raymond	409 Elm St	6423 Tanoak Ave	Kalamazoo, MI 49048	3087	broken rental inspection and code violation	\$ 599.20	\$ 59.92	\$ 659.12
052-200-025-00	William and Fennette Raymond	409 Elm St	6423 Tanoak Ave	Kalamazoo, MI 49048	3187	broken rental inspection	\$ 38.50	\$ 3.85	\$ 42.35
052-200-025-00	William and Fennette Raymond	409 Elm St	6423 Tanoak Ave	Kalamazoo, MI 49048	3264	broken rental inspection	\$ 37.80	\$ 3.78	\$ 41.58
052-200-025-00	William and Fennette Raymond	409 Elm St	6423 Tanoak Ave	Gladstone, MI 49837	3308	broken rental inspection and code violation	\$ 90.10	\$ 9.01	\$ 99.11
052-273-010-00	Carrie Rochefort	618 N 7th St	618 N 7th St	Gladstone, MI 49837	3161	code violation	\$ 55.00	\$ 5.50	\$ 60.50
052-273-010-00	Carrie Rochefort	618 N 7th St	618 N 7th St	Gladstone, MI 49837	3199	code violation	\$ 270.00	\$ 27.00	\$ 297.00
052-273-010-00	Carrie Rochefort	618 N 7th St	618 N 7th St	Gladstone, MI 49837	3273	code violation	\$ 540.00	\$ 54.00	\$ 594.00
052-273-010-00	Carrie Rochefort	618 N 7th St	618 N 7th St	Gladstone, MI 49837	3303	rental re-inspection fee	\$ 31.80	\$ 3.18	\$ 34.98
052-273-030-00	Arthur and Michael Mayers	629 N 8th	629 N 8th St	Gladstone, MI 49837	3162	code violation	\$ 55.00	\$ 5.50	\$ 60.50
052-353-009-00	Richard Semashko	1420 3rd Ave N	1420 3rd Ave N	Gladstone, MI 49837	3335	code violation	\$ 52.00	\$ 5.20	\$ 57.20
052-371-012-00	Jason and Kim LaPlant	9 Parkway Dr	9 Parkway Dr	Gladstone, MI 49837	3351	code violation	\$ 52.00	\$ 5.20	\$ 57.20
052-371-018-00	Brandon Harris	21 Parkway Dr	8525 N 66th St	Milwaukee, WI 53223	3129	code violation	\$ 550.00	\$ 55.00	\$ 605.00

November 25, 2024

MISC INVOICES
OFF TO TAXES
WINTER 2024

PARCEL #	NAME	SERVICE ADDRESS	Owner Address	City, State, Zip	INVOICE #	DESCRIPTION	AMOUNT	10 % PENALTY	TOTAL
052-371-018-00	Brandon Harris	21 Parkway Dr	8525 N 66th St	Milwaukee, WI 53223	3198	code violation	\$ 540.00	\$ 54.00	\$ 594.00
052-371-018-00	Brandon Harris	21 Parkway Dr	8525 N 66th St	Milwaukee, WI 53223	3278	code violation	\$ 530.00	\$ 53.00	\$ 583.00
052-371-019-00	Mary Ring	23 Parkway Dr	16 Pinewood Dr	Gladstone, MI 49837	3234	lawn service	\$ 54.00	\$ 5.40	\$ 59.40
052-371-019-00	Mary Ring	23 Parkway Dr	16 Pinewood Dr	Gladstone, MI 49837	3277	code violation	\$ 530.00	\$ 53.00	\$ 583.00
052-371-025-00	Sherry Myers and Wendy Webber	10 Parkway Dr	10 Parkway Dr	Gladstone, MI 49837	3130	code violation	\$ 55.00	\$ 5.50	\$ 60.50
052-371-025-00	Sherry Myers and Wendy Webber	10 Parkway Dr	10 Parkway Dr	Gladstone, MI 49837	3210	rental inspection and certification	\$ 54.00	\$ 5.40	\$ 59.40
052-524-008-00	Michael and Julie Rexford	701 Loueda Ave	701 Loueda Ave	Gladstone, MI 49837	3170	zoning compliance application fee	\$ 27.50	\$ 2.75	\$ 30.25
052-076-002-00	Connie Johnson	1205 Superior Ave	N12539 J1 Rd	Carney, MI 49812	3174	broken rental inspection	\$ 38.50	\$ 3.85	\$ 42.35
052-076-002-00	Connie Johnson	1205 Superior Ave	N12539 J1 Rd	Carney, MI 49812	3309	broken rental inspection	\$ 37.10	\$ 3.71	\$ 40.81
052-561-017-00	Aos Investments LLC	1304 Lakeshore Dr	1529 S 15th St	Escanaba, MI 49829	3239	rental inspection and multi-unit inspection	\$ 64.80	\$ 6.48	\$ 71.28
052-616-007-00	Gary Micheau	120 Cliffs Ave	9000 Stagecoach Q.5 Dr	Gladstone, MI 49837	3180	rental inspection	\$ 38.50	\$ 3.85	\$ 42.35
052-616-007-00	Gary Micheau	120 Cliffs Ave	9000 Stagecoach Q.5 Dr	Gladstone, MI 49837	3294	broken rental inspection	\$ 37.10	\$ 3.71	\$ 40.81
052-621-007-00	Clinton and Amelia Seawright	408 N 9th St	5256 S Kurth 17.5 Dr	Escanaba, MI 49829	3081	code violation	\$ 560.00	\$ 56.00	\$ 616.00
052-621-007-00	Clinton and Amelia Seawright	408 N 9th St	5256 S Kurth 17.5 Dr	Escanaba, MI 49829	3147	code violation	\$ 550.00	\$ 55.00	\$ 605.00
052-621-007-00	Clinton and Amelia Seawright	408 N 9th St	5256 S Kurth 17.5 Dr	Escanaba, MI 49829	3197	code violation	\$ 540.00	\$ 54.00	\$ 594.00
052-621-007-00	Clinton and Amelia Seawright	408 N 9th St	5256 S Kurth 17.5 Dr	Escanaba, MI 49829	3249	code violation	\$ 540.00	\$ 54.00	\$ 594.00
052-621-007-00	Clinton and Amelia Seawright	408 N 9th St	5256 S Kurth 17.5 Dr	Escanaba, MI 49829	3293	lawn service	\$ 53.00	\$ 5.30	\$ 58.30
052-621-007-00	Clinton and Amelia Seawright	408 N 9th St	5256 S Kurth 17.5 Dr	Escanaba, MI 49829	3311	code violation	\$ 530.00	\$ 53.00	\$ 583.00
052-621-007-00	Clinton and Amelia Seawright	408 N 9th St	5256 S Kurth 17.5 Dr	Escanaba, MI 49829	3352	code violation	\$ 520.00	\$ 52.00	\$ 572.00
							\$16,560.50	\$1,656.05	\$18,216.55

UTILITIES
OFF TO TAXES
Winter 2024

Account No	Parcel ID	Acct Name	Service Address	Owner Name	Owner Street	City, State, Zip	Electric	Fire Protection	Refuse	Sewer	Water	Compost	Utility Balance	10% Pen	Total	Notes
1426-31	616-078-00	Michael Danzite	1301 N 11th St	Michael Danzite	860 Westwood 0.6 Dr	Gladstone, MI 49837	\$ 376.20	\$ -	\$ 40.78	\$ -	\$ -	\$ 18.85	\$ 435.83	\$ 43.58	\$ 479.41	closed account
1624-31	175-023-00	Rally Norokoli	433 29th St	Rally Norokoli	433 29th St	Gladstone, MI 49837	\$ -	\$ -	\$ 43.47	\$ -	\$ -	\$ 21.03	\$ 66.50	\$ 6.65	\$ 73.15	refuse only customer
3108-32	102-002-00	Chanelle Sawyer	1611 Michiana Ave	James Kholmann	1600 S 30th St #116	Escanaba, MI 49829	\$ 85.14	\$ 5.37	\$ 32.85	\$ 118.84	\$ 56.94	\$ 16.57	\$ 318.73	\$ 31.87	\$ 350.60	former tenant
4328-30	065-014-00	Shirley Pickens	1118 Wisconsin Ave	Rushwely Dale	1118 Wisconsin Ave	Gladstone, MI 49837	\$ 138.90	\$ 2.93	\$ 19.63	\$ 68.83	\$ 33.03	\$ 9.06	\$ 273.38	\$ 27.34	\$ 299.62	prev owner
							\$ 600.24	\$ 8.30	\$ 141.73	\$ 187.67	\$ 89.99	\$ 65.51	\$ 1,093.44	\$ 109.34	\$ 1,202.78	

Business	0.00%
Landlord	0.00%
Back to Bank	0.00%
Enforced shutoff	0.00%
Vacant	0.00%
Prev Owner/Tenant	\$ 1,026.94 93.92%
Subtotal	\$ 1,026.94
All Others	\$ 68.50 6.08%
Total	\$ 1,093.44

Comparison: (total: w/o 10% penalty)	
Summer 2024	\$ 8,219.47
Winter 2023	\$ 7,119.87
Summer 2023	\$ 7,987.45
Winter 2022	\$ 3,096.47
Summer 2022	\$ 28,340.93
Winter 2021	\$ 4,857.88
Summer 2021	\$ 2,268.48

MOTION CARRIED UNANIMOUSLY

Manager Eric Buckman reported on the following:

- Met with Mr. John Kloet regarding Little bay Concrete has sold the plant in Gladstone as all their operations will be in Wells Township. Peninsula Pharmacy will be in the front building.
- Special Assessment payments will be refunded to those who paid after the close of business on November 5, 2024 (Election Day). From October 1st - November 5, 2024 the city has refunded \$17,625.00. Further discussions on the financial impact on City funds will occur at budget sessions in March 2025.
- Attended County EDA meeting
- Took some time off to go hunting and raking leaves

Manager Buckman reported on the year-to-date financial report.

There being no further business before the Commission Mayor Thompson adjourned the meeting at 7:18 PM.

Mayor Joe Thompson

City Clerk Kimberly Berry

Planning Commission 2025

Meeting Dates

5:00PM

January 7, 2025

February 4, 2025

March 4th, 2025

April 1st, 2025

May 13th, 2025 (May 5th Election Day)

June 3rd, 2025

July 1st, 2025

August 5th, 2025

September 2nd, 2025

October 7th, 2025

November 11th, 2025 (Nov.4th Election Day)

December 2nd, 2025

Posted: December 4, 2025



Invoice

Updated Remittance Address:
(FOR PAYMENTS ONLY)
CivicPlus LLC
PO Box 737311
Dallas TX 75373-7311

#322703

1/9/2025

PO #

Bill To

Kim Berry
City of Gladstone
1100 Delta Avenue
Gladstone Michigan 49837

TOTAL DUE

\$5,071.50

Due Date: 2/8/2025

Terms	Due Date	PO #	Approving Authority
Net 30	2/8/2025		

Qty	Item	Start Date	End Date
1	Municode Meetings Ultimate Annual	1/9/2025	1/8/2026
1	Municode Meetings Board Management	1/9/2025	1/8/2026
1	Municode Meetings Hub Stand Alone Purchase	1/9/2025	1/8/2026

Total	\$5,071.50
Due	\$5,071.50

To pay your invoice with a credit card [Click Here.](#)

101-101-800.003 = 845.20
 582-537-756.000 = 845.26
 590-537-756.000 = 845.26
 591-537-756.000 = 845.26
 540-537-756.000 = 845.26
 101-752-756.000 = 845.26

K.B.
 11-26-24

Please submit payment via ACH using the details below. Please send notification of ACH transmission via email to remittance@civicplus.com. That address is not monitored for other inquiries or notifications. For any other invoice questions or information, please contact us at accounting@civicplus.com.

Bank Name	Account Name	Account Number	Routing Number
JPMorgan Chase	CivicPlus LLC	910320636	021000021



City of Gladstone, MI
MEETING TYPE
STAFF REPORT

1100 Delta Avenue
 Gladstone, MI 49837
 www.gladstonemi.org

Item 8.

Agenda Date:	December 9, 2024	Eric Buckman, City Manager:	_____
Department:	City Clerk	Department Head Name:	_____
Presenter:	Kim Berry/Patricia West	Kim Berry, City Clerk:	_____

This form and any background material must be approved by the City Manager, then delivered to the City Clerk by 4:00 PM the Tuesday prior to the Commission Meeting.

AGENDA ITEM TITLE:

Social Media & Website Policy

BACKGROUND:

The City of Gladstone has developed a draft social media and website policy in response to the significant growth of our online presence over the past year. This policy is designed to establish best practices and posting guidelines that promote consistency across all platforms while ensuring compliance with FOIA requirements.

FISCAL EFFECT:

None.

SUPPORTING DOCUMENTATION:

[Draft] Social Media & Website Policy

RECOMMENDATION:

Move to adopt the Social Media & Website Policy as presented, effective January 1, 2025. The adoption shall require the notification of permanent city employees and training provided to department heads.

City of Gladstone

Social Media & Website Policy

Purpose

The purpose of the City of Gladstone's social media websites are to present matters of public interest in the City of Gladstone for its many residents, businesses, and visitors. The City of Gladstone may use social media tools to reach a broader audience and to further the goals of the city and the missions of its departments.

Our website and social media pages are intended to strengthen the connection between City government and the community by providing timely, interesting, accurate, and relevant information about living in, working in, and visiting Gladstone. This shall include insight into our municipal government, neighborhoods, commerce, history, and future.

Social Media Pages & Platforms

The City of Gladstone's website, www.gladstonemi.gov, will remain the city's primary and predominant internet presence.

Existing Social Media Pages

- Facebook
 - City of Gladstone
 - Gladstone Michigan | Sail School (Group)
 - Gladstone Old Fashioned Christmas (Inactive)
 - Gladstone Public Safety
 - Gladstone Volunteer Fire Department
- Instagram
 - City of Gladstone (Inactive)
 - Gladstone Farmers Market
 - Gladstone Public Safety

It is the intent of the City of Gladstone to download the content and archiving the data of inactive social media pages, before deleting the pages permanently.

All new social media tools proposed for city use shall be approved by the City Clerk.

Social media websites may occasionally be unavailable, and we accept no responsibility for lack of service due to downtime.

Posting Guidelines

The city has an overriding interest and expectation in deciding what is "spoken" on behalf of the city on social media sites. This policy establishes guidelines for the use of social media.

- As channels for disseminating time-sensitive information as quickly as possible
- As marketing/promotional channels which increase the city's ability to broadcast its messages to the widest possible audience.

Wherever possible, content posted to the City of Gladstone's Social Media Sites should also be available on the City of Gladstone's website and should contain links directing users back to the City of Gladstone's official website for in-depth information, forms, documents, or online services necessary to conduct business within the City of Gladstone.

Wherever possible, all City of Gladstone social media sites shall comply with all appropriate City of Gladstone policies and standards, as well as all federal, state and local laws including but not limited to:

- Accessibility Standards
- Copyright Laws
- First Amendment Freedom of Speech
- Freedom of Information Act
- General Computer Use, Document Storage, E-Mail and Internet Access
- Privacy Laws
- Public Record Laws

The City of Gladstone will approach the use of social media tools as consistently as possible, enterprise wide.

Content Editing & Deletion

Erroneous information needs to be corrected as quickly and transparently as possible. Serious errors need to be brought to the attention of your City Clerk.

If it is determined that content previously posted by the City of Gladstone should be deleted, consult with the City Clerk. If a decision is made to delete previously posted content, a digital record shall be recorded internally within the city archives, even if it is no longer posted publicly. The City Clerk will determine if an explanation should be given to constituents as to why you are deleting the content.

Social Media Interaction

Commenting on official City of Gladstone posts will generally be turned off, as this platform is not continuously monitored for community engagement and questions. Questions should be directed to city officials through official city correspondence, such as email or telephone.

When the City of Gladstone creates Facebook events, commenting cannot be disabled. The City of Gladstone will use the guidance below when it comes to responding to comments on Facebook events.

- **Comments without questions:** When members of the public comment on a Facebook event without a question, the City of Gladstone will not respond by commenting. The City of Gladstone may choose to leave a reaction (like, love, etc.) on a post, but will not engage with negativity on the platform.

- **Questions related to the event:** The City of Gladstone may choose to respond to simple logistical questions related specifically to the event (ex. What time does the event end?). If the city chooses to respond, the comment should provide a method to inquire about further questions outside of social media.
 - **Example:** “Great question! The last farmers market of the season will be Monday, September 30th. For further questions relating to the Farmers Market, please visit the webpage linked below or contact the Gladstone DDA Director.”

Please note that comments expressed by community members regarding the City of Gladstone social media websites do not reflect the opinions and/or position of the City of Gladstone municipal government or its officers and employees.

The City reserves the right to delete or censor comments with content that:

- Compromises the safety or security of the public or public systems
- Contains a personal attack, insult, racial slur or any other derogatory term
- Contains images, videos or links to sites that do not conform to these guidelines
- Contains private or personal information
- Contains random or unintelligible text
- Contains viruses or computer code
- Defames any person or organization
- Encourages illegal activity or violates any local, state or federal law
- Endorses candidates or a particular stance on an active ballot measure or specific legislation
- Is blatant spam, including advertising commercial services or products
- Is off-topic and unrelated to the original post
- Is reported as abuse
- Promotes hate or discrimination of any kind
- Uses foul language or is sexually explicit, including “masked” profanity
- Violates a legal ownership interest of any other party

Being followed by the City of Gladstone, or an entity of the City of Gladstone Government, does not imply endorsement of any kind. If you follow any City of Gladstone social media page or account, we may or may not follow you back or join your group or network.

This social media policy may be revised at any time through the City Commission approval process.

GLADSTONE

**City of Gladstone, MI****MEETING TYPE
STAFF REPORT**

1100 Delta Avenue
Gladstone, MI 49837
www.gladstonemi.org

Agenda Date: December 9, 2024**Eric Buckman, City
Manager:****Department:** Public Safety**Department Head Name:**

Ronald L. Robinson

Presenter: Ronald L. Robinson**Kim Berry, City Clerk:**

This form and any background material must be approved by the City Manager, then delivered to the City Clerk by 4:00 PM the Tuesday prior to the Commission Meeting.

AGENDA ITEM TITLE:

Police Cruiser Upfitting

BACKGROUND:

- 1)** Public Safety has had (2) Cruisers totaled in accidents, a third was damaged in a car V. deer crash and the newest vehicle is in the shop for an oil leak (as of 12-2-24). We are down to the K9 cruiser, the damaged cruiser, which we are driving until the parts come in, and the unmarked training car.
- 2)** Due to this vehicle emergency, I ordered a new 2025 Dodge Durango from MiDeal in October – lead time 3-4 months – Cost of cruiser (\$42,594.00 – without delivery costs)
- 3)** Attached are 3 estimated quotes for the upfitting (installation of equipment)
 - a. Truck equipment - \$10,830.00 – with decals
 - b. Elcom - \$9,396.00 – without decals
 - c. Mark Wilk - \$7,783.40 - without decals
- 4)** We have used all vendors in the past
- 5)** Quotes for decals are estimated at approximately \$800 - \$1,000

FISCAL EFFECT:

- 1) \$42,594.00 + \$2.00 a mile delivery (Approximately 240 miles)
- 2) \$7,783.40 – upfitting (estimate)
- 3) Decals approximately \$800 - \$1,000

NOTE: A new cruiser was not budgeted for this fiscal year

SUPPORTING DOCUMENTATION:

- 1) Quotes
- 2) Durango agreement

RECOMMENDATION:

Approve the bid from Mark Wilk



Mark Wilk
121 S. Second Street
St. Ignace, MI 49781
Tx: 906-643-6516
Cell: 906-430-1885

Quote

Quote for:

Director Ron Robinson
Gladstone Dept of Public Safety
144 4th Avenue
Gladstone, MI 49837

Date: November 21, 2024

Your #

906-428-3131

Terms

Valid for 30 days

Item	Qty	Description	Total
1	1	Setina PB400 Push bumper - 4 lights 21+ Durango	
2	1	Siren Speaker - Whelen	\$242.28
3	1	Whelen hook kit	\$110.00
4	1	Jotto Desk Front Partition with gun well	\$916.85
5	1	Jotto Desk Cargo Barrier	\$540.45
6	1	Havis Center Console C-VS-1110-DUR	\$572.43
7	1	400 Series, 200 watt, remote head siren amplifier	\$572.88
8	2	Dual mPower shrouds	\$30.80
9	4	4" mPower lights, stud mount. 2 - Red and 2 - Blue	\$367.84
10	4	4" mPower lights, stud mount with wedges for exterior of hatch	\$454.08
11	2	800 antenna and lead	\$50.00
12	2	Arm rest and Cup Holder	\$230.56
13	1	Interior light bar for back hatch window in Red / Blue - no arrow	\$564.08
14	1	Magnetic Mic	\$32.50
15	1	Electronics Cabinet - cargo area	\$748.65
16	1	Installation supplies - relay, fuse block, ties, connectors, etc.	\$450.00
17	1	Labor to upfit vehicle	\$1,900.00
18		Shipping	TBD
19			
20			
21			

Total Quote \$7,783.40



Quote

Date: 10/24/2024

Quote #:

Customer ID:

Expiration Date: 2/24/24

To: Name: Director Ronald Robinson
Company: Gladstone Public Saftey Dept.
Address : 144 4th Avenue NE
City, State, Zip: Gladstone, MI, 49837
Phone # 906-428-3131

Salesperson	Job	Payment Terms	Due Date
Trent Marheine		Net 10th	

[illegible]

Quotation prepared by: **Trent Marheine**

To accept this quotation, sign here and return:

Truck Equipment is not responsible for customer supplied item

Thank you for your business!
Trent Marheine

Trentm@truckequipinc.com

855 Glory Rd.

Green Bay, WI. 54304

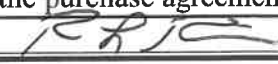
Direct: 920-321-2464

Subtotal	\$ 10,830.00
Shop Supplies	
Total	\$ 10,830.00
Tax	
Total with tax	\$ 10,830.00

LaFontaine CDJR-Lansing
6131 S. Pennsylvania Ave.
Lansing, MI 48911
517-394-1022-Direct
517-394-1205-Fax
mdeacon@lafontaine.com

Name: Gladstone Public Safety
Address: _____
City: _____ State: _____ Zip: _____
Contact: Ronald Robinson
Phone: 906.428.3131
Email: rrobinson@gladstonemi.gov

Date: 10/15/2024
Quote 101524

State of Michigan Contract 071B7700183		
WDEE75 2025 Dodge Durango AWD		\$41,194.00
2BZ 3.6L V6		
PXJ DB Black		
A7X9 Black Cloth Bucket Seats w/Rear Vinyl		\$160.00
LNF Black Left LED Spot Lamp		\$700.00
GXF Entire Fleet Alike Key (FREQ 1)		\$410.00
CW6 Deactivate Rear Doors/Windows		\$130.00
Per contract delivery is \$2.00 a mile one way mileage.		
By signing the purchase agreement you agree to purchase of the vehicle or		
vehicles X <u></u>		
Total Cost:		\$42,594.00

Signed Michelle Deacon

Please note payment is due within 30 days of delivery. Any invoices paid after 30 days may be subject to a 1.5% late fee



City of Gladstone, MI

1100 Delta Avenue
Gladstone, MI. 49837
www.gladstonemi.org

Item 10.

Staff Report

Agenda Date: December 9, 2024

Eric Buckman, City Manager: _____

Department: Wastewater

Department Head Name: Rodney Schwartz

Presenters: Rodney Schwartz

Kim Berry, City Clerk: _____

This form and any background material must be approved by the City Manager then delivered to the City Clerk by 4:00 PM the Tuesday prior to the Commission Meeting.

AGENDA ITEM TITLE: East End Lift Station Pump Replacement Bids

BACKGROUND: The East End Lift Station pumps have been plugging for more than a year and it has been getting progressively worse. The pumps and motors are originals with the pumps being rebuilt. The current layout is with the motors on the floor level and the pumps down in the pit with 17 foot drive shafts. We would like to replace these pumps and motors with Flygt dry pit submersible pumps. We currently have these pumps for our raw sewage and primary effluent pumping.

FISCAL EFFECT: \$\$27,562.00. This is in the wastewater 2024-25 budget.

SUPPORTING DOCUMENTATION: See attached.

RECOMMENDATION: Make a motion to approve the proposed bid price from Flygt-Xylem in the amount of \$27,562.00.

CITY OF GLADSTONE
BID RESULTS

DATE: 12/2/2024 @ 2:00 PM

BID OPENING FOR: East End Lift Station Pump Replacement

BID #	NAME OF BIDDER	Pre-Bid Mtg	Bid Amount	Total Bid
1	Clean Infusion	NA	\$73,559	\$73,559
2	Xylem Water Solutions	NA	\$27,562.86	\$27,562.86
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

OPENED BY: EUB

SIGNATURE: Em W. Burkman

East End Lift Station Pump Replacement Proposal Form

The undersigned agrees to provide the replacement pumps as specified in the RFP and as bid below:

Lump Sum Bid Price per Specifications: \$ 27,562

Warranty Information: 60 month florated factory warranty

Delivery Date: 8-10 weeks from PO date

Deviations from

Specifications: Specs call for a 84 month warranty. we have 60

Specs call for base to attach to flat concrete we need

a paved base.

Voltage on spec is 480 but motor is 230V

Signed: Kyle J. Printed Name: Kyle Volk

Phone Number: 262-219-2495

Company Name: Flygt - Kylum

Address: Note W23445 Paul Rd. Newberg, WI 53072

Bid shall be in a sealed envelope marked:

"East End Pump Replacement"

Kim Berry City Clerk

1100 Delta Avenue, Gladstone MI 49837

East End Lift Station Pump Replacement Proposal Form

The undersigned agrees to provide the replacement pumps as specified in the RFP and as bid below:

Lump Sum Bid Price per Specifications: \$ 73,559

Warranty Information: 5-Year Manufacturers Warranty

Delivery Date: 02/01/2025

Deviations from
Specifications:

Signed: Paul Carey Printed Name: Paul Carey

Phone Number: 573-489-2710

Company Name: Clean Infusion

Address: 2505 Shepard Blvd Columbia Mo 65201

Bid shall be in a sealed envelope marked:
"East End Pump Replacement"
Kim Berry City Clerk
1100 Delta Avenue, Gladstone MI 49837



City of Gladstone, MI

1100 Delta Avenue
Gladstone, MI. 49837
www.gladstonemi.org

Staff Report

Agenda Date: December 9, 2024 Eric Buckman, City Manager: _____
 Department: Wastewater Department Head Name: Rodney Schwartz
 Presenter: Rodney Schwartz Kim Berry, City Clerk: _____

This form and any background material must be approved by the City Manager then delivered to the City Clerk by 4:00 PM the Tuesday prior to the Commission Meeting.

AGENDA ITEM TITLE: Wastewater Upgrades Request for Disbursement of Funds Draw #29.

BACKGROUND: According to the procedures required by Michigan Finance Authority State Revolving Loan Fund documents, requests for reimbursement of funds require Commission approval before sending to the State. Draw #29 includes Staab Construction payment #30 totaling \$135,600.00.

FISCAL EFFECT: \$135,600.00

SUPPORTING DOCUMENTATION: Request for Disbursement of Funds Draw #29 packet.

RECOMMENDATION: Approve Request for Disbursement of Funds Draw #29 totaling \$135,600.00.



MICHIGAN DEPARTMENT OF ENVIRONMENT, GREAT LAKES, AND ENERGY

Finance Division

DRINKING WATER STATE REVOLVING FUND, CLEAN WATER STATE REVOLVING FUND, AND STRATEGIC WATER QUALITY INITIATIVES FUND REQUEST FOR DISBURSEMENT OF FUNDS

As required under authority of Parts 52, 53, and 54 of NREPA, 1994 PA 451, as amended.

General Information

You must complete the information on pages 1 and 2 for each request for disbursement of funds that is submitted to the State Revolving Funds (SRF). A separate form is required for each assigned SRF project number. Detailed instructions can be found at the end of this document. Email this completed request along with cost supporting documentation (invoices) to your [EGLE project manager](#).

SRF Project Number: 5727-01 Request #: 29 Request Type: ☒ Partial ☐ Final

Period Covered by Request (M/D/Y): 10/21/2024 to 11/29/2024 Loan Amount: \$21,305,000

Loan Recipient's Name: City of Gladstone Recipient's EIN: 38-6004686

Address: City Hall, 1100 Delta Avenue, Gladstone MI 49837 Phone Number: 906-428-2311

Recipient's Bank Name: Baybank

Address: 104 S. 10th Street, Gladstone MI 49837 Phone Number: 906-428-4040

Account Name: Checking ABA #: _____ Account #: _____

Special Instructions: _____

You must complete the information above along with page 2 for your request to be processed.

FOR EGLE USE ONLY

Amount this request from SRF loan (including BIL supplemental): _____

Amount this request from BIL EC: _____

Amount this request from BIL LSLR: _____

Amount this request from Grants ARP: _____ DWI: _____

Amount this request from Booker/WIFTA: _____

Budget Items (all amounts to the penny)	Approved Amount Incurred this Period	Approved Amount Incurred to Date
1. Asset Management Program/Fiscal Sustainability Costs		
2. Planning Costs		\$39,895.83
3. Rate Methodology Development Costs		\$1,309,660.00
4. Design Engineering Costs		\$73,625.00
5. Legal/Financial Service Fees		\$2,488.48
6. Administrative Costs		\$65,000.00
7. Bond Counsel Fees		\$6,533.10
8. Bond Advertisement Costs		
9. Bid Advertisement Costs		
10. Capitalized Interest		
11. Land Acquisition/Relocation Costs		
12. Land Purchase Costs		
13. Construction Engineering Costs		\$706,181.75
14. Construction Costs (Bid Contracts)	\$135,600.00	\$17,635,411.58
15. Construction Costs (Force Account)		
16. Equipment Costs		
17. Other Project Costs		
18. Adjustments Due to Other Funding		
19. Reimbursement from SRF-associated grant (ARP-SRF, DWI, Other)		
20. Total Amount Incurred This Period	\$135,600.00	
21. Total Cumulative Amount Incurred to Date		\$19,838,795.74
22. Amount Previously Disbursed		\$19,703,195.74
23. Amount Requested for Loan Disbursement		\$135,600.00

I certify that I am an authorized representative of the recipient and am authorized to make the following certifications on behalf of the recipient: (i) there is no pending litigation or event which will materially and adversely affect the project, the prospects for its completion, or the recipient's ability to make timely repayments on the obligation issued in connection with this project; (ii) the representations, warranties and covenants contained in the supplemental agreement for the obligations pursuant to which this request for disbursement is submitted continue to be true and accurate in all material respects as of the date hereof; (iii) to the best of my knowledge and belief, the costs above were incurred in accordance with the terms of the supplemental agreement and the application for assistance for this project; and (iv) the amount requested for disbursement represents the loan amount due, which has not previously been requested.

Authorized Representative Name: Eric Buckman Title: City Manager

Authorized Representative Signature: _____ Date: _____

FOR EGLE USE ONLY

Approved by EGLE Project Manager: _____ Date: _____

Remit to: STAAB CONSTRUCTION CORPORATION
1800 LAEMLE AVE
MARSHFIELD, WI 54449

Contractor's Application for Payment No.

30

Application Period: 10/21/24 to 11/29/2024		Application Date: 11/29/24	
From (Contractor): Staab Construction Corporation		Via (Engineer): C2AE	
Contract:			
Contractor's Project No: 4632-		Engineer's Project No: ENG PROJ NO. 21-0120	
Project: 4632- GLADSTONE, MI WWTF			
Owner's Contract No:			

Application for Payment

Change Order Summary			
Change Orders approved in Previous months by Owner	\$479,504.25	- \$175,604.00	
Number	13		
Additions	148,301.00	Deductions	0.00
TOTALS	\$627,805.25	- \$175,604.00	
Net Change by Change Orders		\$452,201.25	

1. ORIGINAL CONTRACT PRICE \$17,743,000.00
2. Net Change By Change Orders \$452,201.25
3. Current Contract Price (Line 1+2) \$18,195,201.25
4. TOTAL COMPLETED AND STORED TO DATE (Column G on Progress Estimate)..... \$17,835,411.58
5. RETAINAGE:
 - 1.10 % of Total Contract (Project over 50% Complete) \$200,000.00
 - c. Total Retainage (Line5a = 5b) \$17,635,411.58
6. AMOUNT ELEGIBLE TO DATE (Line 4 - Line 5c)..... \$17,499,811.58
7. LESS PREVIOUS PAYMENTS (Line 6 from prior Application) .. \$135,600.00
8. AMOUNT DUE THIS APPLICATION..... \$559,789.67
9. BALANCE TO FINISH, PLUS RETAINAGE (Column H on Progress Estimate + Line 5 above).....

Payment of:

\$135,600.00

Line 8 or other - attach explanation of other amount)

is recommended by:



(Engineer)

12/04/2024
(Date)

Payment of:

\$135,600.00

Line 8 or other - attach explanation of other amount)

is approved by:

(Owner)

(Date)

Approved by:

(Funding or Financing Agency (if applicable)

(Date)

Contractor's Certification

The undersigned Contractor certifies, to the best of its knowledge, the following:

- (1) All previous progress payments received from Owner on account of Work done under the Contract have been applied on account to discharge Contractor's legitimate obligations incurred in connection with Work covered by prior Applications for Payment;
- (2) Title of all Work, materials and equipment incorporated in said Work, or otherwise listed in or covered by this Application for Payment, will pass to Owner at time of payment free and clear of all Liens, security interests, and encumbrances (except such as are covered by a Bond acceptable to Owner indemnifying Owner against any such Liens, security interest or encumbrances); and
- (3) All the Work covered by this Application for Payment is in accordance with the Contract Documents and is not defective.

STAAB CONSTRUCTION CORPORATION

By:

Benjamin J. Lee President

Date: 12-2-24

CONTINUATION SHEET

Page 2 of 4

Application and Certification for Payment, containing

Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Application No. : 30

Application Date : 11/29/2024

To: 11/29/2024

Architect's Project No. ENG PROJ NO. 21-0120

Invoice #: 30 Contract: 4632- GLADSTONE, MI WWTF

A Item No.	B Description of Work	C Scheduled Value	D Work Completed		F Materials Presently Stored (Not in D or E)	G Total Completed and Stored To Date (D+E+F)	H Balance To Finish (C-G)	I Retainage
			From Previous Application (D+E)	This Period In Place				
010010-00	PM/Supervision	420,000.00	419,800.00	100.00	0.00	419,900.00	100.00	
012200-00	Bonds & Insurance	205,000.00	205,000.00	0.00	0.00	205,000.00	0.00	
013100-00	Misc Job Expenses	420,000.00	419,800.00	100.00	0.00	419,900.00	100.00	
015000-00	Temporary Facilities	130,000.00	129,900.00	100.00	0.00	130,000.00	0.00	
016000-00	Yard & Equipment	545,000.00	544,500.00	300.00	0.00	544,800.00	200.00	
024100-00	Demolition	145,000.00	145,000.00	0.00	0.00	145,000.00	0.00	
024135-00	Equipment Demo	55,000.00	55,000.00	0.00	0.00	55,000.00	0.00	
030000-00	Sitework Concrete	130,000.00	130,000.00	0.00	0.00	130,000.00	0.00	
030000-10	Service Concrete	140,000.00	140,000.00	0.00	0.00	140,000.00	0.00	
030000-20	Administration Concrete	255,000.00	255,000.00	0.00	0.00	255,000.00	0.00	
030000-30	Primary Settling Tank Concrete	510,000.00	510,000.00	0.00	0.00	510,000.00	0.00	
030000-40	MBBR Concrete	495,000.00	495,000.00	0.00	0.00	495,000.00	0.00	
030000-50	Final Settling Tank No 1 & 2 Concr	63,000.00	63,000.00	0.00	0.00	63,000.00	0.00	
030000-54	Final Settling Tank No 3 Concrete	305,000.00	305,000.00	0.00	0.00	305,000.00	0.00	
030000-58	Splitter Box Concrete	55,000.00	55,000.00	0.00	0.00	55,000.00	0.00	
030000-60	Chlorine Contact Concrete	50,000.00	50,000.00	0.00	0.00	50,000.00	0.00	
030000-70	Primary Digester Concrete	3,000.00	0.00	0.00	0.00	0.00	3,000.00	
034000-00	Precast Concrete	46,000.00	46,000.00	0.00	0.00	46,000.00	0.00	
036200-00	Concrete Repairs	26,000.00	20,000.00	0.00	0.00	20,000.00	6,000.00	
042000-00	Masonry	393,000.00	393,000.00	0.00	0.00	393,000.00	0.00	
055000-00	Metal Fabrications	320,000.00	320,000.00	0.00	0.00	320,000.00	0.00	
066000-00	FRP Fabrications	110,000.00	110,000.00	0.00	0.00	110,000.00	0.00	
068160-00	FRP Weirs & Baffles	114,000.00	114,000.00	0.00	0.00	114,000.00	0.00	
072113-00	Foundation Insulation	7,000.00	7,000.00	0.00	0.00	7,000.00	0.00	
074213-00	Insulated Wall Panels	100,000.00	0.00	0.00	0.00	0.00	100,000.00	
075300-00	Single Ply Roof	300,000.00	300,000.00	0.00	0.00	300,000.00	0.00	
081000-00	Metal & FRP Doors	180,000.00	180,000.00	0.00	0.00	180,000.00	0.00	
084000-00	Alum Doors & Windows	32,000.00	32,000.00	0.00	0.00	32,000.00	0.00	
092116-00	Metal Stud & Drywall	38,000.00	38,000.00	0.00	0.00	38,000.00	0.00	
093000-00	Ceramic Tile	9,000.00	9,000.00	0.00	0.00	9,000.00	0.00	

Item 11.

CONTINUATION SHEET

Page 3 of 4

Application and Certification for Payment, containing Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Invoice #: 30

Contract : 4632- GLADSTONE, MI WWTF

Application No. : 30

Application Date : 11/29/2024

To: 11/29/2024

Architect's Project No.ENG PROJ NO. 21-0120

A Item No.	B Description of Work	C Scheduled Value	D		E		F Materials Presently Stored (Not in D or E)	G Total Completed and Stored To Date (D+E+F)	H Balance To Finish (C-G)	I Retainage
			From Previous Application (D+E)	Work Completed This Period In Place						
085100-00	Ceiling Tile	10,000.00	10,000.00	0.00	0.00	0.00	0.00	10,000.00	0.00	
086500-00	Resilient Flooring	26,000.00	26,000.00	0.00	0.00	0.00	0.00	26,000.00	0.00	
089100-00	Painting	480,000.00	475,000.00	0.00	0.00	0.00	0.00	475,000.00	5,000.00	
101000-00	Misc Specialties	15,000.00	15,000.00	0.00	0.00	0.00	0.00	15,000.00	0.00	
107313-00	Metal Awnings	2,000.00	2,000.00	0.00	0.00	0.00	0.00	2,000.00	0.00	
123000-00	Casework & Cabinets	95,000.00	95,000.00	0.00	0.00	0.00	0.00	95,000.00	0.00	
124000-00	Furnishings ALLOWANCE	40,000.00	32,972.33	0.00	0.00	0.00	0.00	32,972.33	7,027.67	
133400-00	Primary Tank Cover	245,000.00	245,000.00	0.00	0.00	0.00	0.00	245,000.00	0.00	
220500-00	Plumbing	405,000.00	403,000.00	1,000.00	0.00	0.00	0.00	404,000.00	1,000.00	
230500-00	HVAC	1,400,000.00	1,390,000.00	5,000.00	0.00	0.00	0.00	1,395,000.00	5,000.00	
260500-00	Electrical Construction	2,300,000.00	2,290,000.00	5,000.00	0.00	0.00	0.00	2,295,000.00	5,000.00	
260500-01	Electrical ALLOWANCE	17,000.00	17,000.00	0.00	0.00	0.00	0.00	17,000.00	0.00	
312000-00	Earthwork	590,000.00	590,000.00	0.00	0.00	0.00	0.00	590,000.00	0.00	
312343-00	Dewatering	320,000.00	320,000.00	0.00	0.00	0.00	0.00	320,000.00	0.00	
314116-00	Permanent Sheet piling	60,000.00	60,000.00	0.00	0.00	0.00	0.00	60,000.00	0.00	
321216-00	Asphalt Paving	64,000.00	64,000.00	0.00	0.00	0.00	0.00	64,000.00	0.00	
323100-00	Fencing	75,000.00	68,000.00	7,000.00	0.00	0.00	0.00	75,000.00	0.00	
329219-00	Site Restoration	17,000.00	10,000.00	7,000.00	0.00	0.00	0.00	17,000.00	0.00	
333000-01	Underground Piping Materials	360,000.00	360,000.00	0.00	0.00	0.00	0.00	360,000.00	0.00	
333000-02	Underground Piping Install	570,000.00	570,000.00	0.00	0.00	0.00	0.00	570,000.00	0.00	
400519-01	Interior Piping Materials	1,100,000.00	1,094,000.00	6,000.00	0.00	0.00	0.00	1,100,000.00	0.00	
400519-02	Interior Piping Install	390,000.00	385,000.00	5,000.00	0.00	0.00	0.00	390,000.00	0.00	
400557-00	Slop & Slide Gates	240,000.00	240,000.00	0.00	0.00	0.00	0.00	240,000.00	0.00	
400562-00	Valve Material	650,000.00	650,000.00	0.00	0.00	0.00	0.00	650,000.00	0.00	
412214-00	Trolley & Hoist	49,000.00	49,000.00	0.00	0.00	0.00	0.00	49,000.00	0.00	
431133-00	Rotary Screw Blower	4,000.00	4,000.00	0.00	0.00	0.00	0.00	4,000.00	0.00	
432313-00	Centrifugal Slurry Pumps	78,000.00	78,000.00	0.00	0.00	0.00	0.00	78,000.00	0.00	
432331-00	Drypit Submersible Pumps	370,000.00	370,000.00	0.00	0.00	0.00	0.00	370,000.00	0.00	
432331-01	Vertical Non Clog Sewage Pumps	62,000.00	62,000.00	0.00	0.00	0.00	0.00	62,000.00	0.00	
462133-00	Rotary Drum Screen	145,000.00	145,000.00	0.00	0.00	0.00	0.00	145,000.00	0.00	

Item 11.

CONTINUATION SHEET

Page 4 of 4

Application and Certification for Payment, containing Contractor's signed certification is attached.

In tabulations below, amounts are stated to the nearest dollar.

Use Column I on Contracts where variable retainage for line items may apply.

Application No. : 30
Application Date : 11/29/2024
To: 11/29/2024
Architect's Project No. ENG PROJ NO. 21-0120

Invoice # : 30 Contract : 4632- GLADSTONE, MI WWTF

A Item No.	B Description of Work	C Scheduled Value	D Work Completed		F Materials Presently Stored (Not in D or E)	G Total Completed and Stored To Date (D+E+F)	H Balance To Finish (C-G)	I Retainage
			From Previous Application (D+E)	This Period In Place				
462324-00	Vortex Grit Removal and Classifier	380,000.00	380,000.00	0.00	0.00	380,000.00	0.00	
464350-00	Chain and Flight Sludge Collector	355,000.00	355,000.00	0.00	0.00	355,000.00	0.00	
465326-00	MBBR Equipment	610,000.00	610,000.00	0.00	0.00	610,000.00	0.00	
467318-00	Digester Floating Cover	280,000.00	280,000.00	0.00	0.00	280,000.00	0.00	
467330-00	Mechanical Sludge Mixing Equip	80,000.00	79,510.00	0.00	0.00	79,510.00	490.00	
467333-00	Digester Gas Handling	130,000.00	128,000.00	0.00	0.00	128,000.00	2,000.00	
467341-00	Spiral Heat Exchanger	80,000.00	74,011.00	0.00	0.00	74,011.00	5,989.00	
468000-00	Samplers	48,000.00	46,000.00	0.00	0.00	46,000.00	2,000.00	
C.O. # 01	Change Order #1	-68,722.00	-68,722.00	0.00	0.00	-68,722.00	0.00	
C.O. # 02	Change Order #2	69,561.00	69,561.00	0.00	0.00	69,561.00	0.00	
C.O. # 03	Change Order #3	120,708.00	120,708.00	0.00	0.00	120,708.00	0.00	
C.O. # 04	Change Order #4	-47,909.00	-47,909.00	0.00	0.00	-47,909.00	0.00	
C.O. # 05	Change Order #5	-57,379.00	-57,379.00	0.00	0.00	-57,379.00	0.00	
C.O. # 06	Change Order #6	154,269.00	114,511.00	0.00	0.00	114,511.00	39,758.00	
C.O. # 07	Change Order #7	66,842.00	66,842.00	0.00	0.00	66,842.00	0.00	
C.O. # 08	Change Order #8	26,198.00	26,198.00	0.00	0.00	26,198.00	0.00	
C.O. # 09	Change Order #9	-1,594.00	-1,594.00	0.00	0.00	-1,594.00	0.00	
C.O. # 10	Change Order #10	9,082.00	0.00	0.00	0.00	0.00	9,082.00	
C.O. # 11	Change Order #11	13,102.25	13,102.25	0.00	0.00	13,102.25	0.00	
C.O. # 12	Change Order #12	19,742.00	0.00	0.00	0.00	0.00	19,742.00	
C.O. # 13	Change Order #13	148,301.00	0.00	0.00	0.00	0.00	148,301.00	
Grand Totals		18,195,201.25	17,798,911.58	36,800.00	0.00	17,835,411.58	359,789.67	200,000.00

GLADSTONE

**City of Gladstone, MI****MEETING TYPE
STAFF REPORT**

1100 Delta Avenue
Gladstone, MI 49837
www.gladstonemi.org

Agenda Date: December 9, 2024**Eric Buckman, City Manager:****Department:** City Manager**Department Head Name:****Presenter:** Eric Buckman**Kim Berry, City Clerk:**

This form and any background material must be approved by the City Manager, then delivered to the City Clerk by 4:00 PM the Tuesday prior to the Commission Meeting.

AGENDA ITEM TITLE:

MERS Participation Agreements-Department Heads

BACKGROUND:

MERS agreements needed to facilitate contractual obligations

FISCAL EFFECT:**SUPPORTING DOCUMENTATION:**

MERS agreements

RECOMMENDATION:

Approve MERS agreements and allow Mayor to sign to facilitate contractual obligations.

MERS Health Care Savings Program Participation Agreement



Item 12.

1134 Municipal Way Lansing, MI 48917 | 800.767.2308 | Fax 517.703.9707

www.mersofmich.com

The Employer, a participating municipality or court within the state of Michigan, hereby agrees to adopt and administer the MERS Health Care Savings Program provided by the Municipal Employees' Retirement System of Michigan, in accordance with the [MERS Health Care Savings Program Plan Document](#), subject to the terms and conditions herein.

I. PARTICIPATING EMPLOYER

Employer Name: City of Gladstone

(Name of municipality or court)

Municipality Number: 2106

Division Number: 301648

II. EFFECTIVE DATE

1. If this is the initial Participation Agreement relating to the MERS Health Care Savings Program for this covered group, the effective date of the program here adopted shall be the 1st day of _____, 20____.
(Month) (Year)
2. If this is an amendment and restatement of an existing Participation Agreement relating to the MERS Health Care Savings Program for this covered group, the effective date of this amendment and restatement shall be effective the 1st day of _____, 20____.
(Month) (Year)

Note: You only need to mark **changes** to your plan throughout the remainder of this Agreement.

III. COVERED EMPLOYEE GROUPS

A participating Employer may cover all of its employee groups, bargaining units, or personnel/employee classifications ("Covered Group") in the same Health Care Savings Program plan.

Contributions shall be made on the same basis within each Covered Group according to the associated [HCSP Contribution Addendum](#), remitted as directed by MERS. This agreement encompasses the following group(s):

Supervisors hired before 3/31/08

(Name/s of HCSP covered group/s)

Note: To maintain the tax-favored status of the employer's Health Care Savings Program and to comply with federal law, the Employer may not provide coverage or benefit levels to highly-compensated employees that are not provided to non highly-compensated employees.

IV. ELIGIBLE EMPLOYEES

Only Employees of a "municipality" may be covered by the Health Care Savings Program Participation Agreement. Independent contractors may not participate in the Health Care Savings Program.

The Employer shall provide MERS with the name, address, Social Security Number, and date of birth for each Eligible Employee, as defined by the Participation Agreement.

Probationary Periods (select one):

- ☐ Contributions will begin after the probationary period has been satisfied. Probationary periods are allowed in one-month increments, no longer than 12 months. During this probationary period, contributions will not be reported and service toward vesting will begin when probationary period has ended.

The probationary period will be _____ month(s).

- ☐ No probationary period.

V. EMPLOYER CONTRIBUTIONS

The Participating Employer hereby elects to make contributions to the Plan. Contributions shall be made on the same basis within each Covered Group specified in this agreement, and remitted to MERS as directed by the employer, to be credited to the individual accounts of Eligible Employees according to the associated [Contribution Addendum](#).

Frequency:

Contributions will be remitted according to Employer's "Payroll Period" which represents the actual period amounts are withheld from participant paychecks, or within the month during which amounts are withheld. Contributions will be submitted (check one):

- ☐ Weekly ☐ Semi-Monthly (twice each month)
☐ Bi-Weekly (every other week) ☐ Monthly

Vesting Cycle For Basic Employer Contributions Only. The employer contributions identified in this Participation Agreement are subject to the following vesting cycle (where vesting is different, separate participation agreement must be completed).

- ☐ Immediate Vesting upon Participation
- ☐ Cliff Vesting: The participant is 100% vested upon _____ year(s).
 (Stated years)
- ☐ Graded Vesting Percentage per year of service: Employers can select the percentage of vesting with the corresponding years of service:

Years of Service	Percent Vested
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	100%

FORFEITURE PROVISION. Upon separation from service with the Employer prior to meeting the required vesting schedule set out above or in the event a Participant dies without Dependent(s) and/or a named Beneficiary, a Participant's account assets shall (where forfeiture is different, separate participation agreement must be completed):

Check only one:

- ☐ Remain in the HCSP sub-trust to be reallocated among all Plan participants equally
- ☐ Remain in the HCSP sub-trust to be used to offset future Employer Contributions
- ☐ Be transferred to the Retiree Health Funding Vehicle ("RHFV")

VI. MODIFICATION OF THE TERMS OF THE PARTICIPATION AGREEMENT

If a Participating Employer desires to amend any of its previous elections contained in this Participation Agreement, including attachments, the Governing Body by official action must adopt a new Participation Agreement and forward it to the Board for approval. The amendment of the new Participation Agreement is not effective until approved by the Board and other procedures required by the Plan Document have been implemented.

VII. APPOINTING MERS AS THE PROGRAM ADMINISTRATOR

The Employer hereby agrees to the provisions of the [MERS Health Care Savings Program Plan Document](#) ("Plan Document"). The Employer also agrees that in the event of any conflict between the Plan Document and this Participation Agreement, the Plan Document controls.

VIII. FEES AND EXPENSES

Employer acknowledges that investment selection and associated participant fees and operating expenses are established and charged by MERS as set forth in the Investment Fund and Fee Summary sheets available at www.mersofmich.com and may be amended by MERS.

IX. STATE LAW

To the extent not preempted by federal law, this agreement shall be interpreted in accordance with Michigan law.

X. TERMINATION OF THE PARTICIPATION AGREEMENT

This Participation Agreement may be terminated only in accordance with the Plan Document.

XI. ENFORCEMENT

1. This Participation Agreement may be terminated only in accordance with the [MERS Health Care Savings Program Plan Document](#).
2. The Employer hereby agrees to the provisions of the [MERS Health Care Savings Program Plan Document](#).
3. The employer hereby acknowledges it understands that failure to properly fill out this Participation Agreement may result in the ineligibility of the program.

XII. EXECUTION

Authorized Designee of Governing Body of Municipality or Chief Judge of Court

The foregoing Participation Agreement is hereby approved by City of Gladstone
on _____ (Name of Approving Employer)
(MM/DD/YYYY)

Authorized signature: _____

Name (printed): _____

Title: _____

Received and Approved by the Municipal Employees' Retirement System of Michigan

Dated: _____, 20____ Signature: _____
(Authorized MERS Signatory)

Contribution Addendum for MERS Health Care Savings Program (HCSP)

1134 Municipal Way Lansing, MI 48917 | 800.767.2308 | Fax 517.703.9711

www.mersofmich.com

This is an Addendum to the Participation Agreement completed by City of Gladstone
Name of Participating Employer
for Supervisors hired before 3/31/08 of 301648
Covered Employee Group Division Code

The Addendum modifies the *MERS Health Care Savings Program Participation Agreement*. Please complete this addendum for each contribution structure associated with the covered employee group.

Check one or more (A or B, C and/or D):

- A. ☐ Employer Contributions for Retirees / Former Employees.** Employer contributions may be made according to any frequency. Identify below the contribution formula or amount that will apply to all in this covered group. *Note: If this contribution is selected, Sections B, C, and D do not apply.*

Contribution structure (specify \$ or %): _____

For active employees, please check one or more below (B, C, and/or D).

- B. ☐ Basic Employer (Before-Tax) Contributions.** Before-tax employer contributions may be made as a percentage of salary and/or by a specified dollar amount. Identify below the basic employer contribution formula to be applied to the covered groups within the Health Care Savings Program identified in this addendum.

Contribution structure (**specify \$ or %** and, if a %, include the basis for that contribution. For example: Employer will contribute 3% of base wages):

- C. ☐ Mandatory Salary Reduction (Before-Tax) Contributions.** Before-tax Employer Contributions shall be made that represent a mandatory salary reduction resulting from collective bargaining or the establishment of a personnel policy. These reductions may be made as a percentage of salary or a specific dollar amount.

Contribution structure (**specify \$ or %** and, if a %, include the basis for that contribution. For example: Employees will contribute 3% of base wages):

D. ☒ Mandatory Leave Conversion (Before-Tax) Contributions. Before-tax Employer Contributions shall be made that represent a mandatory conversion of accrued leave including, but not limited to vacation, holiday, sick leave, or severance amounts otherwise paid out, to a cash contribution. These contributions may be calculated as a percentage of accrued leave or a specific dollar amount representing the accrued leave. Leave conversions may be made on an annual basis or at separation from service, or at such other time as the Employer indicates. *(Note: The leave conversion program shall not permit employees the option of receiving cash in lieu of the employer contribution.)*

☒ Check here if the covered employee group has the option to direct any/all of the leave conversion lump sum to an existing 457 program.

Check one or more:

- ☒ As of retirement, 100 % of eligible sick and vacation
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.
- ☐ As of _____, _____ % of _____
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.
- ☐ As of _____, _____ % of _____
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.
- ☐ As of _____, _____ % of _____
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.

Post-Tax Employee Contributions. Post-tax Employee Contributions made by Eligible Employees within the Covered Group(s) shall be remitted as directed by the Program Administrator, to be credited to the individual accounts of Eligible Employees. All Employee Contributions must be remitted to MERS along with the Participation Report.

Contribution Addendum for MERS Health Care Savings Program (HCSP)

1134 Municipal Way Lansing, MI 48917 | 800.767.2308 | Fax 517.703.9711

www.mersofmich.com

This is an Addendum to the Participation Agreement completed by City of Gladstone
Name of Participating Employer
for Director of Parks and Recreation of 300797
Covered Employee Group Division Code

The Addendum modifies the *MERS Health Care Savings Program Participation Agreement*. Please complete this addendum for each contribution structure associated with the covered employee group.

Check one or more (A or B, C and/or D):

- A. ☐ Employer Contributions for Retirees / Former Employees.** Employer contributions may be made according to any frequency. Identify below the contribution formula or amount that will apply to all in this covered group. *Note: If this contribution is selected, Sections B, C, and D do not apply.*

Contribution structure (specify \$ or %): _____

For active employees, please check one or more below (B, C, and/or D).

- B. ☒ Basic Employer (Before-Tax) Contributions.** Before-tax employer contributions may be made as a percentage of salary and/or by a specified dollar amount. Identify below the basic employer contribution formula to be applied to the covered groups within the Health Care Savings Program identified in this addendum.

Contribution structure (**specify \$ or %** and, if a %, include the basis for that contribution. For example: Employer will contribute 3% of base wages):

\$100 per pay period

- C. ☒ Mandatory Salary Reduction (Before-Tax) Contributions.** Before-tax Employer Contributions shall be made that represent a mandatory salary reduction resulting from collective bargaining or the establishment of a personnel policy. These reductions may be made as a percentage of salary or a specific dollar amount.

Contribution structure (**specify \$ or %** and, if a %, include the basis for that contribution. For example: Employees will contribute 3% of base wages):

\$50.00 per pay period

D. ☒ Mandatory Leave Conversion (Before-Tax) Contributions. Before-tax Employer Contributions shall be made that represent a mandatory conversion of accrued leave including, but not limited to vacation, holiday, sick leave, or severance amounts otherwise paid out, to a cash contribution. These contributions may be calculated as a percentage of accrued leave or a specific dollar amount representing the accrued leave. Leave conversions may be made on an annual basis or at separation from service, or at such other time as the Employer indicates. *(Note: The leave conversion program shall not permit employees the option of receiving cash in lieu of the employer contribution.)*

☒ Check here if the covered employee group has the option to direct any/all of the leave conversion lump sum to an existing 457 program.

Check one or more:

- ☒ As of retirement, 100 % of eligible sick and vacation
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.
- ☐ As of _____, _____ % of _____
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.
- ☐ As of _____, _____ % of _____
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.
- ☐ As of _____, _____ % of _____
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.

Post-Tax Employee Contributions. Post-tax Employee Contributions made by Eligible Employees within the Covered Group(s) shall be remitted as directed by the Program Administrator, to be credited to the individual accounts of Eligible Employees. All Employee Contributions must be remitted to MERS along with the Participation Report.

MERS Health Care Savings Program Participation Agreement



Item 12.

1134 Municipal Way Lansing, MI 48917 | 800.767.2308 | Fax 517.703.9707

www.mersofmich.com

The Employer, a participating municipality or court within the state of Michigan, hereby agrees to adopt and administer the MERS Health Care Savings Program provided by the Municipal Employees' Retirement System of Michigan, in accordance with the [MERS Health Care Savings Program Plan Document](#), subject to the terms and conditions herein.

I. PARTICIPATING EMPLOYER

Employer Name: City of Gladstone

(Name of municipality or court)

Municipality Number: 2106

Division Number: 300797

II. EFFECTIVE DATE

1. If this is the initial Participation Agreement relating to the MERS Health Care Savings Program for this covered group, the effective date of the program here adopted shall be the 1st day of _____, 20____.
(Month) (Year)
2. If this is an amendment and restatement of an existing Participation Agreement relating to the MERS Health Care Savings Program for this covered group, the effective date of this amendment and restatement shall be effective the 1st day of _____, 20____.
(Month) (Year)

Note: You only need to mark **changes** to your plan throughout the remainder of this Agreement.

III. COVERED EMPLOYEE GROUPS

A participating Employer may cover all of its employee groups, bargaining units, or personnel/employee classifications ("Covered Group") in the same Health Care Savings Program plan.

Contributions shall be made on the same basis within each Covered Group according to the associated [HCSP Contribution Addendum](#), remitted as directed by MERS. This agreement encompasses the following group(s):

Treasurer, Director of Parks & Rec, Director of Community Development, Electrical Superintendent

(Name/s of HCSP covered group/s)

Note: To maintain the tax-favored status of the employer's Health Care Savings Program and to comply with federal law, the Employer may not provide coverage or benefit levels to highly-compensated employees that are not provided to non highly-compensated employees.

IV. ELIGIBLE EMPLOYEES

Only Employees of a "municipality" may be covered by the Health Care Savings Program Participation Agreement. Independent contractors may not participate in the Health Care Savings Program.

The Employer shall provide MERS with the name, address, Social Security Number, and date of birth for each Eligible Employee, as defined by the Participation Agreement.

Probationary Periods (select one):

- ☐ Contributions will begin after the probationary period has been satisfied. Probationary periods are allowed in one-month increments, no longer than 12 months. During this probationary period, contributions will not be reported and service toward vesting will begin when probationary period has ended.

The probationary period will be _____ month(s).

- ☐ No probationary period.

V. EMPLOYER CONTRIBUTIONS

The Participating Employer hereby elects to make contributions to the Plan. Contributions shall be made on the same basis within each Covered Group specified in this agreement, and remitted to MERS as directed by the employer, to be credited to the individual accounts of Eligible Employees according to the associated [Contribution Addendum](#).

Frequency:

Contributions will be remitted according to Employer's "Payroll Period" which represents the actual period amounts are withheld from participant paychecks, or within the month during which amounts are withheld. Contributions will be submitted (check one):

- ☐ Weekly ☐ Semi-Monthly (twice each month)
☐ Bi-Weekly (every other week) ☐ Monthly

Vesting Cycle For Basic Employer Contributions Only. The employer contributions identified in this Participation Agreement are subject to the following vesting cycle (where vesting is different, separate participation agreement must be completed).

- ☐ Immediate Vesting upon Participation
- ☐ Cliff Vesting: The participant is 100% vested upon _____ year(s).
 (Stated years)
- ☐ Graded Vesting Percentage per year of service: Employers can select the percentage of vesting with the corresponding years of service:

Years of Service	Percent Vested
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	100%

FORFEITURE PROVISION. Upon separation from service with the Employer prior to meeting the required vesting schedule set out above or in the event a Participant dies without Dependent(s) and/or a named Beneficiary, a Participant's account assets shall (where forfeiture is different, separate participation agreement must be completed):

Check only one:

- ☐ Remain in the HCSP sub-trust to be reallocated among all Plan participants equally
- ☐ Remain in the HCSP sub-trust to be used to offset future Employer Contributions
- ☐ Be transferred to the Retiree Health Funding Vehicle ("RHFV")

VI. MODIFICATION OF THE TERMS OF THE PARTICIPATION AGREEMENT

If a Participating Employer desires to amend any of its previous elections contained in this Participation Agreement, including attachments, the Governing Body by official action must adopt a new Participation Agreement and forward it to the Board for approval. The amendment of the new Participation Agreement is not effective until approved by the Board and other procedures required by the Plan Document have been implemented.

VII. APPOINTING MERS AS THE PROGRAM ADMINISTRATOR

The Employer hereby agrees to the provisions of the [MERS Health Care Savings Program Plan Document](#) ("Plan Document"). The Employer also agrees that in the event of any conflict between the Plan Document and this Participation Agreement, the Plan Document controls.

VIII. FEES AND EXPENSES

Employer acknowledges that investment selection and associated participant fees and operating expenses are established and charged by MERS as set forth in the Investment Fund and Fee Summary sheets available at www.mersofmich.com and may be amended by MERS.

IX. STATE LAW

To the extent not preempted by federal law, this agreement shall be interpreted in accordance with Michigan law.

X. TERMINATION OF THE PARTICIPATION AGREEMENT

This Participation Agreement may be terminated only in accordance with the Plan Document.

XI. ENFORCEMENT

1. This Participation Agreement may be terminated only in accordance with the [MERS Health Care Savings Program Plan Document](#).
2. The Employer hereby agrees to the provisions of the [MERS Health Care Savings Program Plan Document](#).
3. The employer hereby acknowledges it understands that failure to properly fill out this Participation Agreement may result in the ineligibility of the program.

XII. EXECUTION

Authorized Designee of Governing Body of Municipality or Chief Judge of Court

The foregoing Participation Agreement is hereby approved by City of Gladstone
on _____ (Name of Approving Employer)
(MM/DD/YYYY)

Authorized signature: _____

Name (printed): _____

Title: _____

Received and Approved by the Municipal Employees' Retirement System of Michigan

Dated: _____, 20____ Signature: _____
(Authorized MERS Signatory)

Contribution Addendum for MERS Health Care Savings Program (HCSP)

1134 Municipal Way Lansing, MI 48917 | 800.767.2308 | Fax 517.703.9711

www.mersofmich.com

This is an Addendum to the Participation Agreement completed by City of Gladstone
Name of Participating Employer
for Treasurer and Electrical Superintendent of 300797
Covered Employee Group Division Code

The Addendum modifies the *MERS Health Care Savings Program Participation Agreement*. Please complete this addendum for each contribution structure associated with the covered employee group.

Check one or more (A or B, C and/or D):

- A. ☐ Employer Contributions for Retirees / Former Employees.** Employer contributions may be made according to any frequency. Identify below the contribution formula or amount that will apply to all in this covered group. *Note: If this contribution is selected, Sections B, C, and D do not apply.*

Contribution structure (specify \$ or %): _____

For active employees, please check one or more below (B, C, and/or D).

- B. ☒ Basic Employer (Before-Tax) Contributions.** Before-tax employer contributions may be made as a percentage of salary and/or by a specified dollar amount. Identify below the basic employer contribution formula to be applied to the covered groups within the Health Care Savings Program identified in this addendum.

Contribution structure (**specify \$ or %** and, if a %, include the basis for that contribution. For example: Employer will contribute 3% of base wages):

\$200 per pay period

- C. ☐ Mandatory Salary Reduction (Before-Tax) Contributions.** Before-tax Employer Contributions shall be made that represent a mandatory salary reduction resulting from collective bargaining or the establishment of a personnel policy. These reductions may be made as a percentage of salary or a specific dollar amount.

Contribution structure (**specify \$ or %** and, if a %, include the basis for that contribution. For example: Employees will contribute 3% of base wages):

D. ☒ Mandatory Leave Conversion (Before-Tax) Contributions. Before-tax Employer Contributions shall be made that represent a mandatory conversion of accrued leave including, but not limited to vacation, holiday, sick leave, or severance amounts otherwise paid out, to a cash contribution. These contributions may be calculated as a percentage of accrued leave or a specific dollar amount representing the accrued leave. Leave conversions may be made on an annual basis or at separation from service, or at such other time as the Employer indicates. *(Note: The leave conversion program shall not permit employees the option of receiving cash in lieu of the employer contribution.)*

☒ Check here if the covered employee group has the option to direct any/all of the leave conversion lump sum to an existing 457 program.

Check one or more:

- ☒ As of retirement, 100 % of eigible sick and vacation
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.
- ☐ As of _____, _____ % of _____
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.
- ☐ As of _____, _____ % of _____
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.
- ☐ As of _____, _____ % of _____
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.

Post-Tax Employee Contributions. Post-tax Employee Contributions made by Eligible Employees within the Covered Group(s) shall be remitted as directed by the Program Administrator, to be credited to the individual accounts of Eligible Employees. All Employee Contributions must be remitted to MERS along with the Participation Report.

Contribution Addendum for MERS Health Care Savings Program (HCSP)

1134 Municipal Way Lansing, MI 48917 | 800.767.2308 | Fax 517.703.9711

www.mersofmich.com

This is an Addendum to the Participation Agreement completed by City of Gladstone
Name of Participating Employer
for Director of Community Development of 300797
Covered Employee Group Division Code

The Addendum modifies the *MERS Health Care Savings Program Participation Agreement*. Please complete this addendum for each contribution structure associated with the covered employee group.

Check one or more (A or B, C and/or D):

- A. ☐ Employer Contributions for Retirees / Former Employees.** Employer contributions may be made according to any frequency. Identify below the contribution formula or amount that will apply to all in this covered group. *Note: If this contribution is selected, Sections B, C, and D do not apply.*

Contribution structure (specify \$ or %): _____

For active employees, please check one or more below (B, C, and/or D).

- B. ☒ Basic Employer (Before-Tax) Contributions.** Before-tax employer contributions may be made as a percentage of salary and/or by a specified dollar amount. Identify below the basic employer contribution formula to be applied to the covered groups within the Health Care Savings Program identified in this addendum.

Contribution structure (**specify \$ or %** and, if a %, include the basis for that contribution. For example: Employer will contribute 3% of base wages):

\$200 per pay period

- C. ☒ Mandatory Salary Reduction (Before-Tax) Contributions.** Before-tax Employer Contributions shall be made that represent a mandatory salary reduction resulting from collective bargaining or the establishment of a personnel policy. These reductions may be made as a percentage of salary or a specific dollar amount.

Contribution structure (**specify \$ or %** and, if a %, include the basis for that contribution. For example: Employees will contribute 3% of base wages):

\$50.00 per pay period

D. ☒ Mandatory Leave Conversion (Before-Tax) Contributions. Before-tax Employer Contributions shall be made that represent a mandatory conversion of accrued leave including, but not limited to vacation, holiday, sick leave, or severance amounts otherwise paid out, to a cash contribution. These contributions may be calculated as a percentage of accrued leave or a specific dollar amount representing the accrued leave. Leave conversions may be made on an annual basis or at separation from service, or at such other time as the Employer indicates. *(Note: The leave conversion program shall not permit employees the option of receiving cash in lieu of the employer contribution.)*

☒ Check here if the covered employee group has the option to direct any/all of the leave conversion lump sum to an existing 457 program.

Check one or more:

- ☒ As of retirement, 100 % of eligible sick and vacation
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
must be contributed to the HCSP.
- ☐ As of _____, _____ % of _____
Annual date or X weeks before termination Percentage Type of Leave Conversion (sick, vacation, etc.)
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GLADSTONE

**City of Gladstone, MI****MEETING TYPE
STAFF REPORT**

1100 Delta Avenue
Gladstone, MI 49837
www.gladstonemi.org

Agenda Date: 12/9/24**Eric Buckman, City
Manager:****Department:** City Manager**Department Head Name:****Presenter:** Eric Buckman**Kim Berry, City Clerk:**

This form and any background material must be approved by the City Manager, then delivered to the City Clerk by 4:00 PM the Tuesday prior to the Commission Meeting.

AGENDA ITEM TITLE: City Property Sale Request**BACKGROUND:**

The City owns property in Escanaba Township that is not currently being utilized. We have a request from an Escanaba Township business owner and resident that is looking to purchase the property. His family owns property adjacent to the land and they operate a gravel pit. They would utilize the property for that purpose.

FISCAL EFFECT:**SUPPORTING DOCUMENTATION:****RECOMMENDATION:**

Allow staff to determine a fair market value and initiate process to list property for sale.



CUPPAD Region



Map Publication:
11/26/2024 9:49 AM

0.3km
0.2mi

powered by
FetchGIS

Disclaimer: This map does not represent a survey or legal document and is provided on an "as is" basis. CUPPAD expresses no warranty for the information displayed on this map document.



CUPPAD Region



Map Publication:

11/26/2024 9:45 AM



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City of Gladstone, MI

1100 Delta Avenue
Gladstone, MI. 49837
www.gladstonemi.org

Staff Report

Agenda Date: 12-09-2024	Eric Buckman, City Manager: _____
Department: City Commission	Department Head Name: _____
Presenter: Kim Berry	Kim Berry, City Clerk: _____

This form and any background material must be approved by the City Manager then delivered to the City Clerk by 4:00 PM the Tuesday prior to the Commission Meeting.

AGENDA ITEM TITLE:

2025 City Commission Meeting Dates

BACKGROUND:

It is a Charter requirement and Open Meetings Act requirement to publish in a newspaper of general circulation the 2025 Regular City Commission Meeting Dates. Please find list attached - the meeting dates are the 2nd and 4th Mondays of each month at 6:00 PM unless noted.

Noted conflicts are the Presidential Primary is on February 27, 2024 and Memorial Day.

FISCAL EFFECT:

None

SUPPORTING DOCUMENTATION:

2025 Schedule

RECOMMENDATION:

Motion to approve the 2025 City Commission Regular Meeting Schedule.

GLADSTONE CITY COMMISSION 2025 REGULAR MEETING SCHEDULE

**All meetings begin at 6:00 PM and are held at Gladstone City Hall
1100 Delta Avenue, Gladstone, MI. 49837**

January 13, 2025
January 27, 2025
February 10, 2025
February 24, 2025
March 10, 2025
March 24, 2025
April 14, 2025
April 28, 2025
May 12, 2025
May 26, 2025
June 9, 2025
June 23, 2025
July 14, 2025
July 28, 2025
August 11, 2025
August 25, 2025
September 8, 2025
September 22, 2025
October 13, 2025
October 27, 2025
November 10, 2025
November 24, 2025
December 8, 2025
December 29, 2025

Memorial Day

Agenda Packets and Minutes are available on the city's website www.gladstonemi.gov
City Commission meetings are live streamed on City Youtube channel

Kim Berry, City Clerk



City of Gladstone, MI

1100 Delta Avenue
Gladstone, MI. 49837
www.gladstonemi.org

Staff Report

Agenda Date: 12-09-2024	Eric Buckman, City Manager: _____
Department: City Commission	Department Head Name: _____
Presenter: Mayor Thompson	Kim Berry, City Clerk: _____

This form and any background material must be approved by the City Manager then delivered to the City Clerk by 4:00 PM the Tuesday prior to the Commission Meeting.

AGENDA ITEM TITLE: Parks & Recreation Board Member Jeremy Cook Resignation Letter

BACKGROUND:

FISCAL EFFECT:

SUPPORTING DOCUMENTATION:

Letter of resignation dated 11-26-2024

RECOMMENDATION:

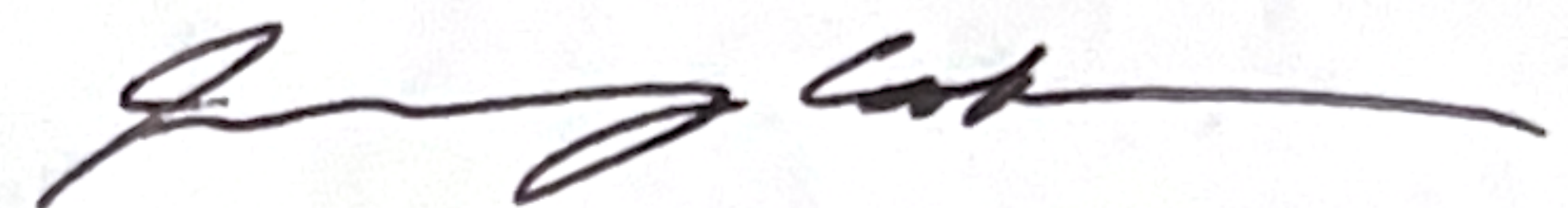
Motion to place Parks & Recreation Board Member Jeremy Cook's letter of resignation on file.

11/26/2024

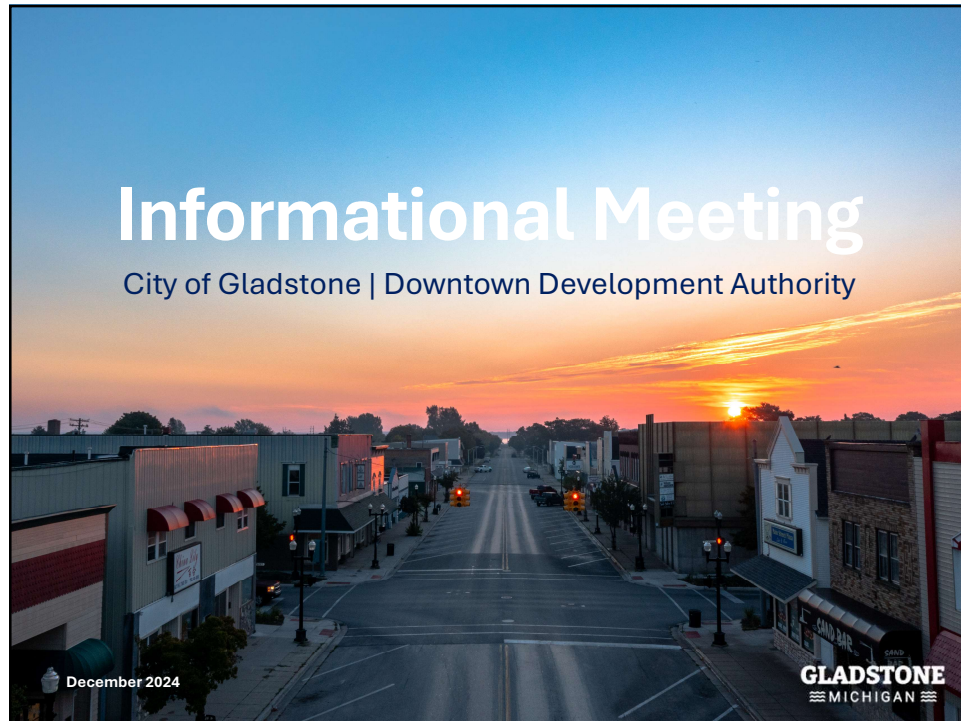
TO: CITY OF GLADSTONE

Please accept this as my official resignation from Parks and Recreation board. I enjoyed the time I spent on the board and appreciate the opportunity. Unfortunately, I am unable to continue serving, due to time constraints.

Thank you,

A handwritten signature in black ink, appearing to read 'Jeremy Cook', with a long horizontal flourish extending to the right.

Jeremy Cook



1



2



What is a Downtown Development Authority (DDA)?

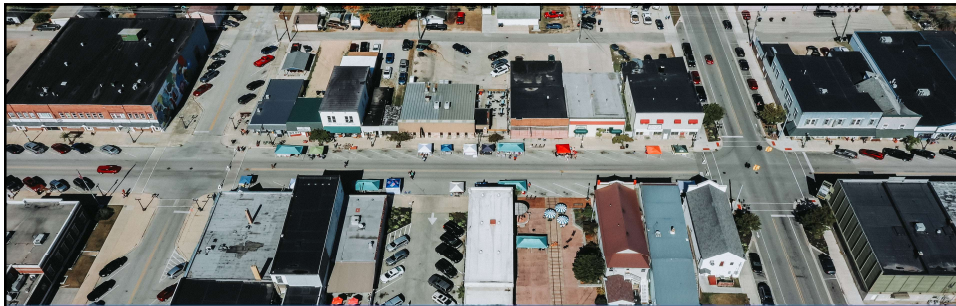
DDAs comprehensively manage downtowns to maximize the local economy.

DDAs are downtown management organizations that rely on TIF dollars for their operation

Quasi-governmental arm of the City

Goal to halt property value deterioration and increase property tax valuation to eliminate the causes of that deterioration, and to promote economic growth.

3



What is the DDA Responsible for?

- Downtown District (as defined by ordinance)
- Its Businesses, Property Owners, and Residents

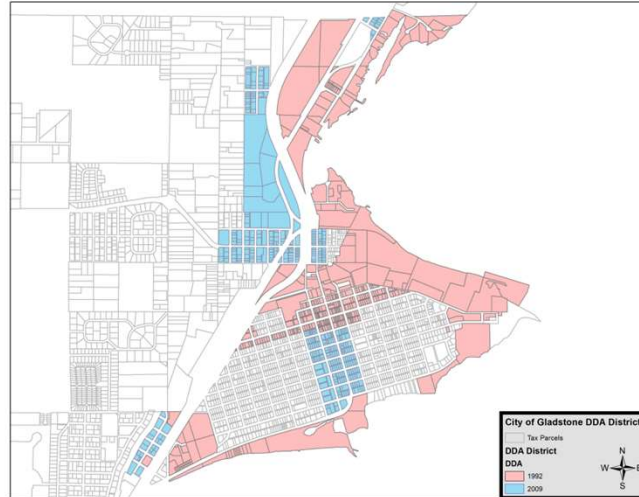
Who does the DDA benefit?

- Community- What happens in Downtown affects ALL
- City- DDA provides focused resources & insights

4

What is Tax Increment Financing (TIF)?

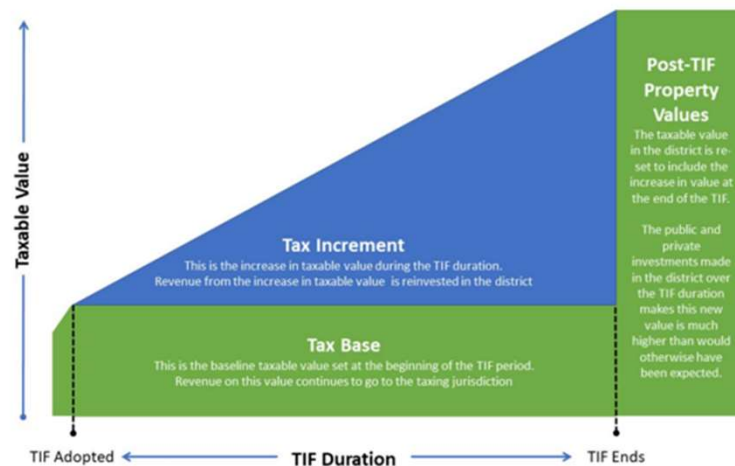
TIF is the annual capture of the year-to-year growth in property values in a defined district.



5

What is Tax Increment Financing (TIF)?

Upon adoption of a TIF plan, the 'Taxable Value Base Year' is set; which all growth is calculated from



6



Benefits of TIF

Allows community to direct funds to engage in specific, critical economic development activities without raising local property taxes.

Stimulates economic growth and is self-sustaining: As property values increase, the DDA captures more funding through TIF and is able to do more projects.



7



Activities of the Board



8

Activities of the Board

Farmers Market



Downtown Day



Old-Fashioned Christmas



Photo Credit:
Visit Escanaba

9

Beautification



10

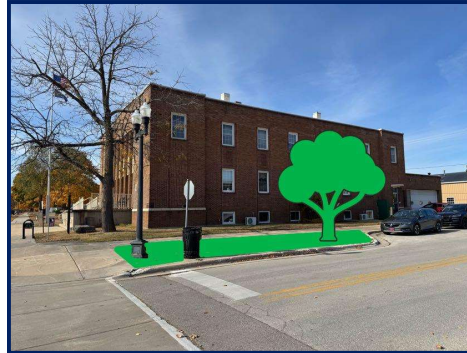
Beautification

Each year the DDA contracts services with the City of Gladstone's Parks & Recreation Department to oversee beautification efforts in the downtown.



2025 Plans

The DDA has applied for a grant, in which they would commit \$8000 in matching funds, to plant trees and vegetation at three intersections on Delta Avenue.



11

Façade Grant Program



Photo Credit:
Visit Escanaba

12



13

Façade Grant Program

The DDA is proud to have brought back the Façade Grant Program in 2024!
Application rounds run from September 1st through October 31st each year
– as funding is available.



2025 Plans

The DDA expects to distribute \$37,500 in funding during 2025
to recipients of the 2024 application round!

14



Infrastructure & Street Improvements

15

Infrastructure & Street Improvements

The DDA often partners with the City of Gladstone to offset the cost of infrastructure and street improvements within the district



The DDA has an annual bond payment of \$227,000 for the 9th Street project which took place in 2020.

This bond commitment is scheduled to end in the 2033-2034 fiscal year.

This year's bond payment made up 59.7% of our expected 2024-2025 TIF capture.

The DDA covered 59.9% of the total \$5,683,402 in project cost. (\$3.4 million)

16

North Shore Development

The DDA has assisted the City of Gladstone in acquiring undeveloped waterfront within the city limits for future development.

This financial commitment ends in the fiscal year 2031-2032.



This year's principal payment plus interest made up 16.1% of our 2024-2025 expected TIF revenue.

17

Placemaking

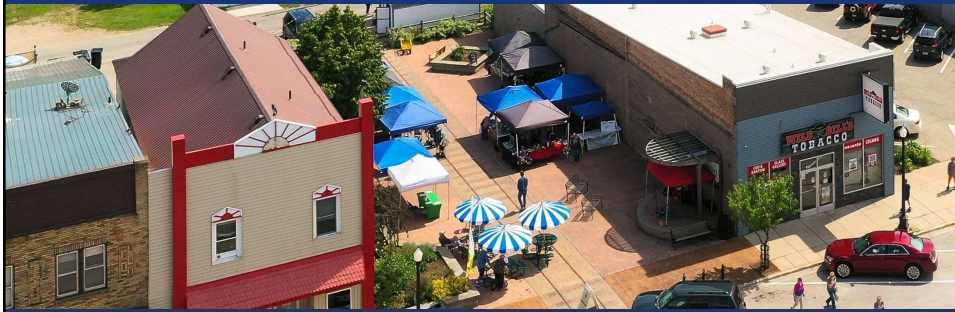
Placemaking is a collaborative process that aims to improve public spaces for the people who use them. It capitalizes on community assets, inspiration, and potential, with the intention of creating public spaces that improve urban vitality and promote health, happiness, and well-being.



18

Placemaking

The DDA continuously strives to invest in improvements to their Farmers Market Square.



2024 Updates

Pressure Washed the Concrete
Purchased 3 Picnic Tables
Repaired Planter Caps
Sealed the Concrete

2025 Plans

Through the receipt of a generous grant donation from the Community Foundation, the DDA plans to invest in permanent solutions to replace the need for pop-up canopies at our farmers market.

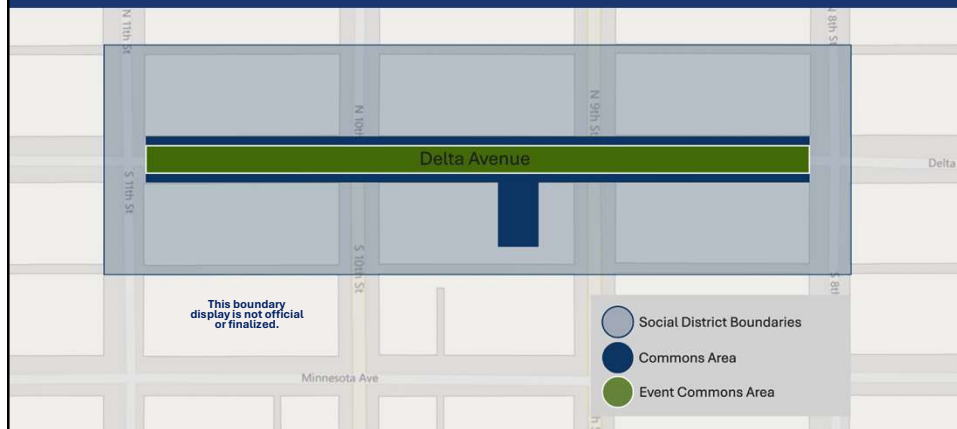
19

Placemaking

Our investment in the Market Square goes beyond just the Farmers Market...

We hope to pursue a Michigan Liquor Control Commission permitted

Social District
in 2025!



20



21