



TOWN OF SYLVA SUPPLEMENTAL BOARD OF COMMISSIONERS MEETING

Thursday, February 22, 2024 at 9:00 AM
Board Room, 83 Allen Street Sylva, North Carolina

AGENDA

CALL TO ORDER

APPROVAL OF AGENDA

All items listed and adopted are for discussion or possible action

APPROVAL OF CONSENT AGENDA

1. February 22, 2024 Consent Agenda

PUBLIC COMMENTS

REPORTS

2. Mayor's Report
3. Commissioner's Report
4. Manager's Report
5. Public Works Department Report
6. Police Department Report
7. Fire Department Report
8. Main Street Report
9. TWSA Board Report
10. Pinnacle Park Report

NEW BUSINESS

11. Mill Street Design Presentation
12. Proclamation of Appreciation
13. Special Event Request—Innovation Brewing @ Greening Up The Mountains
14. Reschedule March Planning Board Meeting to March 21, 2024 at 5:00 p.m.

CLOSED SESSION

Pursuant to G.S 143-318.11(a)(3) - Consult with Attorney

Pursuant to G.S 143-318.11(a)(6) - Personnel

ADJOURNMENT

Town of Sylva
CONSENT AGENDA
February 22, 2024

1- BUDGET AMENDMENT:

#22 10-660-0600 Contingency	\$ 14,850 C
10-510-7400 PD Capital	14,850 D

REF: To appropriate contingency monies into the Police Department budget to upgrade the recording system in the interview rooms.

2- OTHER:

Auditor Recommendation Summary:

- Number of Request for Proposal submitted ~3 – Note: All RFP’s were evaluated under UG Compliance in order to meet Federal Grant requirements.
- Finance Officer, Lynn Bryant recommends that we accept **Shiela Gahagan, CPA located at 229 Penland Street ~ Clyde NC 28721** proposal for auditing services starting with fiscal year end June 30, 2024. Ms. Gahagan’s bid for the Audit and Financial Statements was \$20,600 and \$3,900 for State Single Audit (which is a requirement of the SCIF Grant funding) ~ **Total \$24,500**. Ms. Gahagan met all the requirements of the RFP, her bid was the lowest, and she received excellent references from current clients.
- The Board will officially approve the annual audit contract with Shiela Gahagan, CPA on March 14, 2024.



Proclamation
**IN HONOR OF
JULIE SPIRO DONALDSON**

WHEREAS, the Town of Sylva affirms that Julie Spiro Donaldson has dedicated 25 years of exemplary service to the economic development and community vitality in Jackson County and the Town of Sylva; and

WHEREAS, her leadership has been instrumental in fostering strong relationships within the town and promoting the growth and prosperity of our community and businesses; and

WHEREAS, Julie Spiro Donaldson has played a pivotal role in offering a welcoming and informative gateway to the tens of thousands of people visiting Jackson County each year; and

WHEREAS, her efforts have significantly contributed to making Jackson County a desirable destination for tourists and a thriving community for its residents; and

WHEREAS, Julie Spiro Donaldson has been involved in countless endeavors that have enhanced the quality of life and the economic well-being of Jackson County over the past quarter-century; and

WHEREAS, Julie Spiro Donaldson’s work ethic, determination, and creativity led to the creation of the WNC Fly Fishing Trail, Trout City, NC Trout Capital, Concerts on the Creek and many other accolades which have promoted and improved our community; and

WHEREAS, her unwavering commitment, exceptional leadership, compassion, and tireless dedication have forever improved the community and its people;

NOW, THEREFORE, BE IT HEREBY PROCLAIMED, that we, the Town of Sylva Board of Commissioners, do hereby recognize, and honor Julie Spiro Donaldson for her outstanding contributions to Jackson County and proclaim the month of February as "Julie Spiro Donaldson Appreciation Month" in recognition of her 25 years of dedicated service.

NOW, THEREFORE, BE IT FURTHER PROCLAIMED, that a copy of this resolution be presented to Julie Spiro Donaldson as a symbol of our deep appreciation and respect for her remarkable achievements and enduring impact on our community.

ADOPTED the 13th day of February, 2024.

Attest:

By:

Amanda W. Murajda, Town Clerk

Johnny Phillips, Mayor



BEVERAGE ARTS VENDOR APPLICATION

Festival Date: April 27, 2024
Application Deadline: March 15, 2024

Please note that a NC Sales Tax Registration Number is required. Applications submitted without a valid NC Sales Tax Number will be returned. Your NC Sales Tax Number must be displayed on the day of the festival.

Organization/Business Name: Innovation Brewing Company

Contact Person: Malia Parris NC Sales Tax No: 600925374

ABC permit number: 00213139AJ Special Events permit number: 00213140DG

Address: 414 W Main St City: Sylva State: NC

Zip: 28779 Telephone Number: 828-586-9678 Cell: 828-474-8887

Email Address*: manager@innovationberwing.com Website: www.innovation-brewing.com

*Please print legibly, as all festival communications will be sent to the email address provided. Greening Up the Mountains is an Arts Festival with a focus on Appalachian Arts. Our beverage arts spaces are reserved for Independent craft breweries and wineries. You must also get a certificate of insurance from your insurance company for the day of the event naming the Town of Sylva as an additional insured with a liability of 1,000,000. This will need to be submitted with your application. Paper Applications with accompanying payment and certificate of insurance must be submitted to Sylva Town Hall either by hand delivery or by mail. Please DO NOT email your application.

Please email your logo to greeninguothemountains@townofsyva.org. Logos may be posted on the festival's website and social media sites for promotional purposes.

Beverage Arts Vendor Fee: \$125.00

Type of vehicle: Car Truck Truck and Trailer

Please submit the application at events@townofsyva.org followed by payment at <http://townofsyva.us/#/>. By signing this application, you affirm that you have read and agree to abide by the festival policies and understand that no electricity or wi-fi service will be available on the day of the festival. You further consent that the photographs submitted may be used on the festival's website and social media outlets to promote the festival. If you have specific needs, please attach a detailed note describing any accommodations that may be needed. There will be no re-assignment of vendor booth spaces once the layout has been finalized. By signing below, you affirm your understanding that you may NOT consume alcoholic beverages while you are working.

Signature: Nicole Owen Date: 1-29-24

1/29/24 CLK# 1338 \$125.00



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/29/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Stanberry Insurance Agency, Inc. 715 E. Main St PO Box 577 Sylva NC 28779	CONTACT NAME: Vickie Oakes PHONE (P/C, No, Ext): (828) 586-8926 FAX (A/C, No): (828) 586-8929 E-MAIL ADDRESS: certrequest@stanberry-ins.com INSURER(S) AFFORDING COVERAGE INSURER A: Erie Insurance Exchange NAIC # 26271 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
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COVERAGES **CERTIFICATE NUMBER:** 23-24 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		Y	Q401651969	04/15/2023	04/15/2024	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Liquor Liability \$ 1,000,000 COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			Q281670808	04/15/2023	04/15/2024	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$ <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N Y	Q881501644	04/15/2023	04/15/2024	E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Event: Greening Up The Mountains - 4-27-24
 Certificate holder is added as additional insured with respect to General Liability coverage

CERTIFICATE HOLDER The Town of Sylva 83 Allen Street Sylva NC 28779	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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BEVERAGE ARTS VENDOR APPLICATION

Festival Date: April 27, 2024
Application Deadline: March 15, 2024

Please note that a NC Sales Tax Registration Number is required. Applications submitted without a valid NC Sales Tax Number will be returned. Your NC Sales Tax Number must be displayed on the day of the festival.

Organization/Business Name: Balsam Falls Brewing Co

Contact Person: Laurie Bryson NC Sales Tax No: 601109463

ABC permit number: 256653BM Special Events permit number: 256653WE
256653 DG

Address: 506 W Main St City: Sylva State: NC

Zip: 28779 Telephone Number: 828-631-1987 Cell: 828-226-1061

Email Address*: Laurie@balsamfallsbrewing.com Website: BalsamFallsbrewing

This is a rain or shine event!

*Please print legibly, as all festival communications will be sent to the email address provided. Greening Up the Mountains is an Arts Festival with a focus on Appalachian Arts. Our beverage arts spaces are reserved for independent craft breweries and wineries. You must also get a certificate of insurance from your insurance company for the day of the event naming the Town of Sylva as an additional insured with a liability of 1,000,000. This will need to be submitted with your application. Paper Applications with accompanying payment and certificate of insurance must be submitted to Sylva Town Hall either by hand delivery or by mail. Please DO NOT email your application.

Please email your logo to greeningupthemountains@townofsylva.org. Logos may be posted on the festival's website and social media sites for promotional purposes.

Beverage Arts Vendor Fee: \$125.00

Type of vehicle: Car Truck Truck and Trailer

Please submit the application at events@townofsylva.org followed by payment at <http://townofsylva.us/#/>. By signing this application, you affirm that you have read and agree to abide by the festival policies and understand that no electricity or wi-fi service will be available on the day of the festival. You further consent that the photographs submitted may be used on the festival's website and social media outlets to promote the festival. If you have specific needs, please attach a detailed note describing any accommodations that may be needed. There will be no re-assignment of vendor booth spaces once the layout has been finalized. By signing below, you affirm your understanding that you may NOT consume alcoholic beverages while you are working.

Signature: Laurie Bryson Date: 1/22/24