



**Capital Planning Committee**  
272 Main Street Townsend, MA 01469

RECEIVED  
JAN 31 2020  
TOWN OF TOWNSEND  
TOWN CLERK

Mark Hussey, Chair    Chris Nocella, Vice Chair    Steve Spofford, Clerk  
Don Klein, Member    Jerrilyn Bozica, Member    Veronica Kell, Member    Lynn Garafola, Member

**CAPITAL PLANNING COMMITTEE MEETING MINUTES**  
1/22/2020 – Selectmen's Chambers, 6:00 pm

**I. PRELIMINARIES:**

- 1.1 Chairman Mark Hussey (MH) called meeting to order at 6:00 pm
- 1.2 Roll call: Mark Hussey (MH), Chris Nocella (CN), Don Klein (DK), Jerrilyn Bozicas (JB)  
Steve Spofford (SS), Veronica Kell (VK)
- 1.3 Chairman's Additions or Deletions: None
- 1.4 Meeting minutes of Jan 15, 2020 read and approved

**II. MEETING BUSINESS:**

2.1 **Meet with Water Department:** Water commissioner Mike Maceachern discussed projects that are in the works. The well at cross street (3million), main street pump station (2million), Emery loop (1.5 million), 5000 feet of 6inch cast iron pipe on New Fitchburg road (1 million), West Elm Street water main replacement (3million), water main replacement from Harbor to town line (3million), water main replacement from main street pump station to West Elm Street (1.2million) and finally Witches Brook Station (75thousand). All of these will have to be brought before the board of Water Commissioners. All expenses and/bonds issued will be handled thru the Water Department. The Capital Planning Committee will be advised as to the clarification of their requests with an updated five year plan.

2.2 **Planning Board Member Update:** Continuation of discussion from meeting of Jan 15, 2020

2.3 **Review mail if applicable:** None

**2.4 Discussion at meeting:**

- 2.4.1 The \$200,000 that was allocated at town meeting will be added to the \$59,163.28 currently in the Capital Planning Account. Other sources will be discussed.
- 2.4.2 (DK) suggested that for the next meeting the members of the committee reread all department requests and prepare questions to be addressed and discussed as to the ranking on the final report.
- 2.4.3 (DK) also suggested that the Committee, as an entity, send one final report
- 2.4.4 The Town Administrator will be asked to attend the next meeting to answer any questions that may arise.

2.5 **Review/Set Next Meeting:** Next meeting Jan 29, 2020

111. **ADJOURNMENT:** Motion made by (MH) and seconded by (DK). All in favor  
Meeting adjourned at 7:00 pm

APPROVED 1/29/2020

## TOWN OF TOWNSEND

[illegible]

Department Head Signature

Date Submitted

# TOWN OF TOWNSEND CAPITAL PLANNING COMMITTEE FORM A - CAPITAL PROJECT REQUEST

1. Department	Water
2. Date:	12/20/2019
3. Contact Person & Title:	Paul Rafuse, Superintendent
4. Phone:	978-597-2212
5. Project Title:	Water Main Replacement Project Main St well to West Elm st
6. Contact Email Address:	water@townsend.ma.us
7. Purpose of Project Request Form (check):	( ) Add a New Project to the CIP ( ) Modify a Project Already in the CIP ( ) Resubmit Previous Project Request If Prior Unfunded Request, What FY 1st Submitted? _____
8. Fiscal Year Requested in CIP:	21
9. Department Priority:	1
10. Estimated Useful Life in Years:	indefinite
11. Description/Justification (attach any relevant background information):	This project consists of replacing approximately 3,300 feet of 10 inch unlined cast iron water main installed in 1934. This project involves replacing water main between the Main st well to West Elm St on Main St This will improve water quality as well as fire protection and allow for isolation of this area of town which is difficult due to a number of broken isolation valves on the Main st water main.
12. Need for Consultant Advisory Services? (check):	( ) Yes ( ) No
13. Month & Year Project Will Begin If Funded? unknown Month & Year Project Will End If Funded unknown	

Estimated Capital Costs:					
	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024
Planning & Design					
Land Acquisition					
Site Development					
Construction		1,200,000			
Other (specify):					
TOTAL	\$ -	\$ 1,200,000	\$ -	\$ -	\$ 1,200,000

15. Estimated Net Effects on Operation Costs (+/-):		One-Time \$		Annual \$	
Personnel					
Utilities					
Supplies					
Other (specify):					
TOTAL	\$ -	\$ (30,000)			
16. Estimated Net Effects On Municipal Revenue (+/-):		Bond or Band		18. Signature:	
17. Recommended Financing Source (if known):					

Notes (reserved):

other = contractors cost to repair watermain break on rt 119

For Capital Committee Use Only:	Recommended Number of Years (if any):	Estimated Annual Debt Service (Initial Fiscal Year):
History Reference:	Maximum Number of Years Allowed:	Date Estimated Provided:

**TOWN OF TOWNSEND CAPITAL PLANNING COMMITTEE  
FORM A - CAPITAL PROJECT REQUEST**

1. Department      Water	2. Date:                      12/11/2019
3. Contact Person & Title: Rebecca McEnroe , Interim Superintendent	4. Phone:                      Extension: 978-597-2212
5. Project Title: Water Main Replacement Project South St Directional Drill	6. Contact Email Address: water@townsend.ma.us
7. Purpose of Project Request Form (check): <input checked="" type="checkbox"/> Add a New Project to the CIP <input type="checkbox"/> Modify a Project Already in the CIP <input type="checkbox"/> Resubmit Previous Project Request If Prior Unfunded Request, What FY 1st Submitted? _____	8. Fiscal Year Requested in CIP: 22
	9. Department Priority: 2
	10. Estimated Useful Life in Years: indefinite
11. Description/Justification (attach any relevant background information): This project consists of replacing approximately 5,000 feet of 6 inch unlined cast iron water main installed in 1934. The project involves replacing approximately 3,000 ft. of 6 inch water main on New Fitchburg Rd. beginning at Main St. (Rt. 119). The age and construction (unlined cast iron) of this main has resulted in periodic on-going rusty colored water complaints from customers despite flushing and main cleaning efforts.	
12. Need for Consultant Advisory Services? (check): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
13. Month & Year Project Will Begin If Funded? <u>unknown</u> Month & Year Project Will End If Funded <u>unknown</u>	

14. Estimated Capital Costs:						
	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	TOTAL
Planning & Design						
Land Acquisition						
Site Development						
Other (specify):						
<b>TOTAL</b>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

15. Estimated Net Effects on Operation Costs (+/-):	16. Estimated Net Effects On Municipal Revenue (+/-):
Personnel	17. Recommended Financing Source (if known):
Utilities	BAND
Supplies	18. Signature:
Other (specify):	
<b>TOTAL</b>	

Notes (reserved):

For Capital Committee Use Only: Recommended Number of Years (if any): Statutory Reference:	Estimated Annual Debt Service (Initial Fiscal Year): Maximum Number of Years Allowed: Date Estimated Provided:
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**TOWN OF TOWNSEND CAPITAL PLANNING COMMITTEE  
FORM A - CAPITAL PROJECT REQUEST**

1. Department      Water	2. Date:                      12/11/2018
3. Contact Person & Title: Rwbwcca McEnroe, Interim Superintendent	4. Phone:                      Extension: 978-597-2212
5. Project Title: Water Main Replacement Project	6. Contact Email Address: water@townsend.ma.us
7. Purpose of Project Request Form (check): <input checked="" type="checkbox"/> Add a New Project to the CIP <input type="checkbox"/> Modify a Project Already in the CIP <input type="checkbox"/> Resubmit Previous Project Request  If Prior Unfunded Request, What FY 1st Submitted? _____	8. Fiscal Year Requested in CIP: 22  9. Department Priority:  3
10. Estimated Useful Life in Years: indefinite	
11. Description/Justification (attach any relevant background information): This project consists of replacing approximately 4,500 feet of 6 & 8 inch unlined cast iron water main installed in 1934 beginning at Rt. 119 to the end of the existing main. Because the end of the line borders our ability to supply water during a major event a booster station will be required. This would eliminate rusty water complaints while improving volume and quality of water.	
12. Need for Consultant Advisory Services? (check): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
13. Month & Year Project Will Begin If Funded? <u>unknown</u> Month & Year Project Will End If Funded <u>unknown</u>	

14. Estimated Capital Costs:						
	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	TOTAL
Planning & Design						
Land Acquisition						
Site Development						
Construction			3,000,000			3,000,000
Other (specify):						
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 3,000,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 3,000,000</b>

15. Estimated Net Effects on Operation Costs (+/-): <table style="width: 100%;"> <tr> <th></th> <th>One-Time \$</th> <th>Annual \$</th> </tr> <tr> <td>Personnel</td> <td></td> <td></td> </tr> <tr> <td>Utilities</td> <td></td> <td></td> </tr> <tr> <td>Supplies</td> <td></td> <td></td> </tr> <tr> <td>Other (specify):</td> <td></td> <td></td> </tr> <tr> <td><b>TOTAL</b></td> <td><b>\$ -</b></td> <td><b>\$ -</b></td> </tr> </table>		One-Time \$	Annual \$	Personnel			Utilities			Supplies			Other (specify):			<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	16. Estimated Net Effects On Municipal Revenue (+/-):  17. Recommended Financing Source (if known):  18. Signature:
	One-Time \$	Annual \$																	
Personnel																			
Utilities																			
Supplies																			
Other (specify):																			
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>																	

Notes (reserved):

For Capital Committee Use Only: Recommended Number of Years (if any): Statutory Reference:	Estimated Annual Debt Service (Initial Fiscal Year): Maximum Number of Years Allowed: Date Estimated Provided:
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**TOWN OF TOWNSEND CAPITAL PLANNING COMMITTEE  
FORM A - CAPITAL PROJECT REQUEST**

1. Department     Water	2. Date:                     12/11/2018
3. Contact Person & Title: Paul Rafuse, Superintendent	4. Phone:                     Extension: 978-597-2212
5. Project Title:     Main St. Pump Station replacement well development, Wellfield decommissioned, and pump station modifications.	6. Contact Email Address: prafuse@townsend.ma.us
7. Purpose of Project Request Form (check): ( ) Add a New Project to the CIP ( ) Modify a Project Already in the CIP ( <input checked="" type="checkbox"/> ) Resubmit Previous Project Request If Prior Unfunded Request, What FY 1st Submitted? _____	8. Fiscal Year Requested in CIP: 23
	9. Department Priority: 4
	10. Estimated Useful Life in Years: indefinite
11. Description/Justification (attach any relevant background information): A replacement well has already been located tested and permitted by the state MassDEP to replace the existing wellfield. Although a consistently good source the wellfield that consists of 52, 2½" wells has become costly to maintain and is very close to a brook. Each well would need to be filled with cement. The replacement well would need to be developed and connected to the existing pump station with a new supply main. Modifications to the existing pump station would consist of removal of existing pumps, priming system components, and control panel. Other modifications may include updating instrumentation and controls. This project would be beneficial to the system by providing us with a more updated, reliable source and eliminate the possibility to impact or be impacted by surface water (brook that surrounds the property).	
12. Need for Consultant Advisory Services? (check):             ( <input checked="" type="checkbox"/> ) Yes             ( ) No	
13. Month & Year Project Will Begin If Funded? <u>unknown</u> Month & Year Project Will End If Funded <u>unknown</u>	

14. Estimated Capital Costs:						
	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	TOTAL
Planning & Design						
Land Acquisition						
Site Development						
Construction				1,200,000		1,200,000
Other (specify):						
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1,200,000</b>	<b>\$ -</b>	<b>\$ 1,200,000</b>

15. Estimated Net Effects on Operation Costs (+/-):			16. Estimated Net Effects On Municipal Revenue (+/-):		
	One-Time \$	Annual \$			
Personnel			17. Recommended Financing Source (if known):		
Utilities					
Supplies					
Other (specify):					
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	18. Signature:		

Notes (reserved):

<b>For Capital Committee Use Only:</b> Recommended Number of Years (if any): Statutory Reference:	Estimated Annual Debt Service (Initial Fiscal Year): Maximum Number of Years Allowed: Date Estimated Provided:
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**TOWN OF TOWNSEND CAPITAL PLANNING COMMITTEE  
FORM A - CAPITAL PROJECT REQUEST**

1. Department     Water	2. Date:                      12/11/2018
3. Contact Person & Title: Paul Rafuse, Superintendent	4. Phone:                      Extension: 978-597-2212
5. Project Title:     Construct and Develop replacement well with water treatment facility at our Cross Street well to address Water Quality Issues.	6. Contact Email Address: prafuse@townsend.ma.us
7. Purpose of Project Request Form (check): ( ) Add a New Project to the CIP ( ✓ ) Modify a Project Already in the CIP ( ) Resubmit Previous Project Request If Prior Unfunded Request, What FY 1st Submitted? _____	8. Fiscal Year Requested in CIP: 24
	9. Department Priority: 5
	10. Estimated Useful Life in Years: indefinite
11. Description/Justification (attach any relevant background information): Unfortunately we have had to take this well offline for water quality reasons. Historically since constructed in 1980 water supplied from this well has been very good. Recently high levels of Iron and Manganese have been detected. These are naturally occurring minerals in water and are not a health risk. However, it does create an aesthetic problem resulting in discolored (rusty) appearance to the water as well as a "musty" odor. Although despite our efforts to reduce or eliminate the levels of iron and manganese through additional testing, cleaning and inspecting the well and, conventional treatment levels did come down but, aesthetically the water did not improve. Additional specialized testing was performed and provided their opinion that the main source of the problem was confined to the well and not from the ground formation around the well. In consultation with our engineers the most advantageous, cost effective solution is to locate and develop a replacement well within a 250 ft. area of the existing well. Upon doing so it was discovered that the cause or origin of the Iron & Manganese was within the ground formation confirming that in order to maintain this source construction of a treatment facility was needed. On a positive note, test well installation and development discovered a much higher yielding source.	
12. Need for Consultant Advisory Services? (check):            ( ✓ ) Yes            ( ) No	
13. Month & Year Project Will Begin If Funded? <u>unknown</u> Month & Year Project Will End If Funded <u>unknown</u>	

14. Estimated Capital Costs:	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	TOTAL
Planning & Design						
Land Acquisition						
Site Development						
Construction					3,000,000	3,000,000
Other (specify):						
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 3,000,000</b>	<b>\$ 3,000,000</b>

15. Estimated Net Effects on Operation Costs (+/-): One-Time \$            Annual \$	16. Estimated Net Effects On Municipal Revenue (+/-):
Personnel	17. Recommended Financing Source (if known):
Utilities	
Supplies	
Other (specify):	
TOTAL            \$ -            \$ -	18. Signature:

Notes (reserved):

For Capital Committee Use Only:  
Recommended Number of Years (if any):  
Statutory Reference:

Estimated Annual Debt Service (Initial Fiscal Year):  
Maximum Number of Years Allowed:  
Date Estimated Provided:

**TOWN OF TOWNSEND CAPITAL PLANNING COMMITTEE  
FORM A - CAPITAL PROJECT REQUEST**

1. Department      Water	2. Date:                      12/11/2018
3. Contact Person & Title: Paul Rafuse, Superintendent	4. Phone:                      Extension: 978-597-2212
5. Project Title: Emery Road to South Harbor Road Water Main Loop	6. Contact Email Address: <a href="mailto:prafuse@townsend.ma.us">prafuse@townsend.ma.us</a>
7. Purpose of Project Request Form (check): <input type="checkbox"/> Add a New Project to the CIP <input type="checkbox"/> Modify a Project Already in the CIP <input checked="" type="checkbox"/> Resubmit Previous Project Request If Prior Unfunded Request, What FY 1st Submitted? _____	8. Fiscal Year Requested in CIP: 20
	9. Department Priority: 6
	10. Estimated Useful Life in Years: indefinite
11. Description/Justification (attach any relevant background information): This project is beneficial to the distribution system because it would improve water quality by creating a loop and eliminating two dead ends in the system. Also, it would provide another main supply line parallel with Main St. on the South side in the event a section of Main had to be shut down on Main St. between the center and Harbor lights. Although the Harbor area is supplied from a loop on Wallace Hill Rd. this would provide an addition source of supply for the Harbor area and customers on the South side of the Squannacook River.	
12. Need for Consultant Advisory Services? (check): <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
13. Month & Year Project Will Begin If Funded? <u>unknown</u> Month & Year Project Will End If Funded <u>unknown</u>	

14. Estimated Capital Costs:						
	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	TOTAL
Planning & Design						
Land Acquisition						
Site Development						
Construction		1,500,000				1,500,000
Other (specify):						
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ 1,500,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1,500,000</b>

15. Estimated Net Effects on Operation Costs (+/-): <table style="width: 100%;"> <tr> <th></th><th>One-Time \$</th><th>Annual \$</th></tr> <tr> <td>Personnel</td><td></td><td></td></tr> <tr> <td>Utilities</td><td></td><td></td></tr> <tr> <td>Supplies</td><td></td><td></td></tr> <tr> <td>Other (specify):</td><td></td><td></td></tr> <tr> <td><b>TOTAL</b></td><td><b>\$ -</b></td><td><b>\$ -</b></td></tr> </table>		One-Time \$	Annual \$	Personnel			Utilities			Supplies			Other (specify):			<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>	16. Estimated Net Effects On Municipal Revenue (+/-):  17. Recommended Financing Source (if known):  18. Signature:
	One-Time \$	Annual \$																	
Personnel																			
Utilities																			
Supplies																			
Other (specify):																			
<b>TOTAL</b>	<b>\$ -</b>	<b>\$ -</b>																	

Notes (reserved):

For Capital Committee Use Only: Recommended Number of Years (if any): Statutory Reference:	Estimated Annual Debt Service (Initial Fiscal Year): Maximum Number of Years Allowed: Date Estimated Provided:
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