



Regular Council Meeting

A G E N D A

November 14, 2023

7:00 p.m.

Administrative

Approval of Minutes
Report of Town Manager
Appearance before Council
Council Comments
Report of Council Committees
Revisions to Agenda

Public Hearings

Consent Agenda (roll call)

- | | |
|------------------|---|
| 1-W/S-1-21-11-14 | Appointment of Member – Bedford Regional Water Authority |
| 2-PW-6-1-1-11-14 | Request to Close Street – Christmas in Centertown and Tree Lighting |

Old Business

New Business

- | | |
|------------------|---|
| 3-P/W-1-1-11-14 | Bedford Public Works Operations |
| 4-ST-7-1-11-14 | SmartScale for the Roundabout - Virginia Department of Transportation |
| 5-CC-15-1-11-14 | Rail Stop – Department of Rail and Public Transportation |
| 6-FIN-2-42-11-14 | FY2024 Additional House Bill (HB) 599 Funds (roll call) |
| 7-CC-15-1-11-14 | Resolution – Canceling Second Council Meeting in December (roll call) |

Citizens may watch the meeting in real time via the Town of Bedford Live Stream website: <https://www.youtube.com/@townofbedford>

The Town will strive to provide reasonable accommodations and services for persons who require special assistance to participate in this public involvement opportunity. Contact (540) 587-6001 for more information.

**TOWN OF BEDFORD, VIRGINIA
TOWN COUNCIL
ACTION FORM**

ITEM: Consent Agenda

DATE OF COUNCIL MEETING: November 14, 2023

DATE: November 8, 2023

PRESENTATION:

Appointment of Member – Bedford Regional Water Authority

The term of Mr. Michael Moldenhauer on the Bedford Regional Water Authority will expire on December 31, 2023. Mr. Moldenhauer has expressed a willingness to serve another term on the Authority, if reappointed by Council. Ms. Nancy Leighton has also expressed an interest in serving. The vacancy has been advertised in the local newspaper.

ACTION REQUESTED:

Council is requested to appoint a representative to serve a four-year term on the Bedford Regional Water Authority, said term to expire December 31, 2027.

		YES	NO	OTHER	ROUTING	
DATE: _____	BLACK	()	()	()	TOWN ATTY. ()	I.T. ()
	CARSON	()	()	()	COMM. DEV. ()	POLICE ()
APPROVED ()	HAILEY	()	()	()	ELECTRIC ()	PUBLIC SERV. ()
DENIED ()	HARTWICK	()	()	()	ENGINEERING ()	OTHER _____ ()
DEFERRED TO:	JOHANNESSEN	()	()	()	FINANCE ()	
_____	SHOEN	()	()	()	FIRE DEPT. ()	
	STANLEY	()	()	()	H.R. ()	

Anderson, Debra

From: Warner, Barrett
Sent: Saturday, October 21, 2023 9:12 PM
To: Council
Cc: Anderson, Debra
Subject: FW: Reappointment to BRWA

Sent from my U.S.Cellular© Smartphone

----- Original message -----

From: mcmrolls@gmail.com
Date: 10/20/23 12:50 PM (GMT-05:00)
To: "Warner, Barrett" <BWarner@bedfordva.gov>
Cc: "Key, Brian" <b.key@brwa.com>, BRWA-Directors <directors@brwa.com>
Subject: Reappointment to BRWA

****BEWARE!** This email originated from outside of the organization! Do not follow guidance, click links, or open attachments unless you know the content is safe. ******

Bart, Please use this email as my official request to you and the Town Council for consideration to be reappointed to the BRWA when my current term expires at the end of 2023. As one of two original appointees still remaining on the BRWA Board, and having served the entire period of BRWA's creation, I feel that I can continue to represent the Town's interests and contribute constructively to the overall goals of the organizations that BRWA serves.

Respectfully Submitted, Michael Moldenhauer

Sent from [Mail](#) for Windows



TOWN OF BEDFORD
APPLICATION TO SERVE ON APPOINTED BOARDS, COMMITTEES OR COMMISSIONS

Date: 9/13/2023

Name: NANCY LEIGHTON

Home Address: 750 PEAKS ST Property Owner?: Yes [checked] No

City: BEDFORD State: VA Zip Code: 24523-1433

E-mail address: njlsml@gmail.com Years as Town resident: 4

Home Telephone: 540-586-0157 Other Telephone: (cell) 703-964-6779

Present Employer: none - retired

Which Telephone number is preferred for contact: Home Other 703-964-6779

List the board, committee, or commission for which you wish to volunteer:

BEDFORD REGIONAL WATER AUTHORITY

Applying for: Initial Appointment/Reappointment (circle one)

Please list any committees or organizations in which you currently participate:

NONE

Please explain your interest in serving on the above named board:

I HAVE ALWAYS BEEN CONCERNED ABOUT WATER - BOTH QUALITY & QUANTITY. AS A CUSTOMER OF BRWA, I WANT TO ENSURE THAT WE ARE GETTING OUR MONEY'S WORTH & THAT THE AUTHORITY IS WELL RUN, WELL MANAGED, & RESPONSIVE TO ITS CUSTOMERS. WATER IS A PRECIOUS COMMODITY & MUST BE CONSERVED & ITS ENVIRONMENT TREATED WITH RESPECT.

Date: 9/13/2023 Signature: Nancy Leighton

Return to Debra Anderson, Town of Bedford, 215 E. Main Street, Bedford, VA 24523

For Office Use Only: Date Received: 9/18/23

**TOWN OF BEDFORD, VIRGINIA
TOWN COUNCIL
ACTION FORM**

ITEM: Request to Close Street – Christmas in Centertown and Tree Lighting

DATE OF COUNCIL MEETING: November 14, 2023

DATE: October 20, 2023

PRESENTATION:

Jonathan Hayden is hosting the Christmas in Centertown and Tree Lighting event on Saturday, December 2, 2023, from 2:00 p.m. to 7:00 p.m. The end of the event will be the lighting of the 16-foot tree at 6:00 p.m. He is requesting the following road closure:

South Bridge Street to be closed beginning at 1:30 p.m. and reopening at 7:00 p.m.

He will notify the Fire Department, Bedford County Fire and Rescue and Police Department of the street closings.

ACTION REQUESTED:

Town Council is requested to close the above street for the Christmas in Centertown and Tree Lighting event on Saturday, December 2, 2023, from 2:00 p.m. to 7:00 p.m.

		YES	NO	OTHER	ROUTING	
DATE: _____	BLACK	()	()	()	TOWN ATTY.	() I.T. ()
	CARSON	()	()	()	COMM. DEV.	() POLICE ()
APPROVED ()	HAILEY	()	()	()	ELECTRIC	() PUBLIC SERV. ()
DENIED ()	HARTWICK	()	()	()	ENGINEERING	() OTHER _____()
DEFERRED TO:	JOHANNESSEN	()	()	()	FINANCE	()
_____	SHOEN	()	()	()	FIRE DEPT.	()
	STANLEY	()	()	()	H.R.	()

Town Council-

I am writing you to request permission for a road closure on Saturday, December 2, 2023.

The closure would be for "South Bridge Street" from the times of 1:30pm-6:00pm.

On this date I will host the Annual Community Christmas Tree Lighting. This event will have Live Music, Arts & Craft vendors, Food & Kid activities.

We ask you to come out and support this festive gathering.

Thanks,
Jonathan Hayden

Temporary Road Closure Permit/Facility Use Application

Accepted by: _____
Date Rcvd: _____

Contact Information

Name: Jonathan Harden
Company: DJ Showtime
Address: 1013 Windy Ridge Drive

Phone: 540-425-4675
Email: BookDJShowtime@gmail.com
City, Zip: Bedford VA

Application Information

Description of Event: Tree Lighting

Dates and Times of Event: 12/2/23 3:00pm - 6:00pm

Special Conditions (check all that apply)

- | | | | |
|-----------------------------------|--|---|---|
| <input type="checkbox"/> Festival | <input type="checkbox"/> Inflatables | <input type="checkbox"/> Signs/Banners | <input checked="" type="checkbox"/> Use of Sidewalk |
| <input type="checkbox"/> Food | <input type="checkbox"/> Mechanical Rides | <input type="checkbox"/> Amplified Sound | <input type="checkbox"/> Tents |
| <input type="checkbox"/> Alcohol | <input type="checkbox"/> Town Parking lots | <input checked="" type="checkbox"/> Closing Streets | <input type="checkbox"/> Run/SK |

INDEMNITY: Applicant agrees to defend and indemnify the Town, its officers, agents and employees from all claims of every kind including all costs of defense arising out of, or which would not have occurred but for Applicant's use of the facilities licensed herein. Applicant accepts the facilities (and equipment, if applicable) in "as is" condition. Applicants shall be responsible for proper conduct of any and all persons attending the Event. By my signature on this form, I hereby confirm that the information provided above is accurate.

Applicant's Signature: [Signature] Date: 10/17/23
Return completed application to Town of Bedford Public Works, 702 Orange St Bedford, VA. For more information call 540.587.6081.

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Public Works | <input type="checkbox"/> Building Inspections |
| <input type="checkbox"/> Police Dept. | <input type="checkbox"/> Admin |
| <input type="checkbox"/> Fire Dept. | <input type="checkbox"/> Health Dept. |

<input type="checkbox"/> Approved	<input type="checkbox"/> Denied
Comments:	

Temporary Road Closure Permit and Town Property/Facility Use Application Instructions

A Temporary Road Closure and Town Property/Facility Use Permit is required for all outdoor special events that require the closure of a public road as part of the event.

For a Temporary Road Closure and Property/Facility Use Permit, please submit the following to the Town of Bedford at least 30 days prior to the event:

- A completed application form
 - A Facility use agreement
 - A map or site plan of the location and event (may be hand drawn)
 - A copy of an ABC license if alcohol will be served
 - Health Department permit if required for food service
 - If inflatables or mechanical rides are being used a building permit is required
 - Tent(s) may require a building permit depending on size or arrangement
 - Attach a cover letter describing your event
 - Payment for permit (\$100)
 - If the event will be held on public (Town) property, a certificate of insurance listing the Town as a certificate holder (not as additional insured)
-

Potential Conditions of Temporary Road Closure Permits

After event, return site to its original condition

Leave sufficient room on sidewalk for pedestrian traffic

Make sure any tent is securely fastened and safe

Electrical service: For any use that requires electrical service, a safety inspection by the Town's Building Inspector must be completed prior to the start of the event.

Food Service: Must be inspected and approved by the Health Department prior to the event.

Inflatable or Mechanical rides: Must be inspected and approved prior to the event.





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/16/2023

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 The Hilb Group, LLC 3601 MacCorkle Ave. Ste 50 Charleston WV 25304		CONTACT NAME: Maurielle Skinner PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: mskinner@hilbgroup.com	
INSURED D Showtime 1013 Windy Ridge Dr Bedford VA 24523-2417		INSURER(S) AFFORDING COVERAGE INSURER A: United States Liability Insurance Co MAIC # 25895 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 23-24 Master

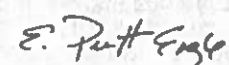
REVISION NUMBER:

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 SUBR INSD 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 GENL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:		MHB022C1294	01/25/2023	01/25/2024	EACH OCCURRENCE	\$ 1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000
						MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	\$
						GENERAL AGGREGATE	\$ 2,000,000
						PRODUCTS - COMPOP AGG	\$
							\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident)	\$
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
							\$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
	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	N/A			PER STATUTE	OTHER
						E.L. EACH ACCIDENT	\$
						E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$

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

CERTIFICATE HOLDER**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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PRODUCER The Hill Group, LLC 3601 MacCorkle Ave, Ste 50 Charleston WV 25304		CONTACT NAME: Maurielle Skinner PHONE (A/C, No, Ext): E-MAIL ADDRESS: msknner@hillgroup.com		FAX (A/C, No):
INSURED Dj Showtime 1013 Windy Ridge Dr Bedford VA 24523-2417		INSURER(S) AFFORDING COVERAGE INSURER A: United States Liability Insurance Co		NAIC # 25895
		INSURER B:		
		INSURER C:		
		INSURER D:		
		INSURER E:		
		INSURER F:		

COVERAGES **CERTIFICATE NUMBER:** 23-24 Master **REVISION NUMBER:**

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A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			MHB022C1294	01/25/2023	01/25/2024	EACH OCCURRENCE	\$ 1,000,000
	GENL AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER							DAMAGE TO RENTED PREMISES (Ea occurrence)
	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB DED RETENTION \$						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
							PER STATUTE	OTHER
							E.I. EACH ACCIDENT	\$
							E.I. DISEASE - EA EMPLOYEE	\$
							E.I. DISEASE - POLICY LIMIT	\$

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

CERTIFICATE HOLDER Town Of Bedford 939 Burks Hill Rd Bedford VA 24523	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 <i>E. Ruth Engle</i>
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10/16/2023

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							PRODUCTS - COMPROP AGG	\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/>						BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE	\$
							AGGREGATE	\$
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							E.L. DISEASE - POLICY LIMIT	\$

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

Evidence of insurance

CERTIFICATE HOLDER

CANCELLATION

Town of Bedford Center Town Park S Bridge St & W Main St Bedford VA 24523	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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**TOWN OF BEDFORD, VIRGINIA
TOWN COUNCIL
ACTION FORM**

ITEM: FY2024 Additional House Bill (HB) 599 Funds

DATE OF COUNCIL MEETING: November 14, 2023

DATE: October 26, 2023

PRESENTATION:

The *Code of Virginia* provides for financial assistance to localities with police departments through the "599" program. The program is administered through the Department of Criminal Justice Services (DCJS). To receive this funding, a locality must have a police department as defined in State Code, and all personnel must meet the minimum training requirements. To remain eligible, the police department must submit information to the State Police further detailed in the program requirements. This funding has been received by the Town for many years, and is allocated based on the Appropriations Act. This funding is used to supplement local funding of the Police Department, and is not allowed to be used for supplanting purposes.

The Town has been notified that the allocation for FY2024 will be \$313,415. The amount appropriated in the FY2024 Budget was \$271,054. The difference of \$42,361 is available for appropriation. The Police Department is requesting Council to consider appropriating \$12,000 towards additional training expenses and \$30,361 towards equipment expenditures, to include items such as a security fence for seized property.

ACTION REQUESTED:

Town Council is requested to approve the below budget amendment which will appropriate budget to the general ledger accounts listed.

<i>Budget Entry:</i>		
Revenue Increase		
100033-422108	State Aid – Law Enforcement	\$42,361
Expenditure Increase		
10033110-555000	Training Expense	\$12,000
10033110-582000	Equipment	\$30,361

	YES	NO	OTHER	ROUTING
DATE: _____	()	()	()	TOWN ATTY. ()
APPROVED ()	()	()	()	COMM. DEV. ()
DENIED ()	()	()	()	ELECTRIC ()
DEFERRED TO: _____	()	()	()	ENGINEERING ()
	()	()	()	FINANCE ()
	()	()	()	FIRE DEPT. ()
	()	()	()	H.R. ()
				I.T. ()
				POLICE ()
				PUBLIC SERV. ()
				OTHER _____ ()

**TOWN OF BEDFORD, VIRGINIA
TOWN COUNCIL
ACTION FORM**

ITEM: Resolution - Canceling Second Council Meeting in December

DATE OF COUNCIL MEETING: November 14, 2023

DATE: November 9, 2023

PRESENTATION:

Since the second Town Council meeting in December falls during the Christmas Holiday Season, Council is requested to adopt a Resolution canceling the second Council meeting in December (December 26th).

ACTION REQUESTED:

Town Council is requested to adopt a Resolution canceling the second Council meeting in December (December 26th).

		YES	NO	OTHER	ROUTING	
DATE: _____	BLACK	()	()	()	TOWN ATTY. ()	I.T. ()
	CARSON	()	()	()	COMM. DEV. ()	POLICE ()
APPROVED ()	HAILEY	()	()	()	ELECTRIC ()	PUBLIC SERV. ()
DENIED ()	HARTWICK	()	()	()	ENGINEERING ()	OTHER _____ ()
DEFERRED TO:	JOHANNESSEN	()	()	()	FINANCE ()	
_____	SHOEN	()	()	()	FIRE DEPT. ()	
	STANLEY	()	()	()	H.R. ()	

RESOLUTION

WHEREAS, Section 11 of the Charter of the Town of Bedford requires that Council shall "fix the time and place of its meeting," and

WHEREAS, the Town Code requires in Section 2-27 that meetings shall be on "the second and fourth Tuesday of each month," and

WHEREAS, the second regular Council meeting in December is scheduled for December 26, 2023, which falls during the Christmas Holiday Season;

NOW, THEREFORE, BE IT RESOLVED that the Town Council meeting scheduled for December 26, 2023, be and the same hereby is canceled.