

**TOWN OF RIVERHEAD**

**TB Resolution**

**AWARDS BID FOR CHIPPER BOX TRUCK**

offered the following resolution,  
which was seconded by

**WHEREAS**, Town Board Resolution #2022-564 authorized the Town Clerk to advertise a Notice to Bidders for sealed bids for a **CHIPPER BOX TRUCK**; and

**WHEREAS**, 1 bid was received, opened and read aloud in the Office of the Town Clerk, 200 Howell Avenue, Riverhead, NY 11901 on **September 2, 2022 at 11:00 AM**; and

**WHEREAS**, the bid was reviewed and a bid tabulation was prepared by the Purchasing Agent and presented to the Town Board for review, and a recommendation for award has been made by the Highway Superintendent;

**NOW THEREFORE BE IT RESOLVED** that the **CHIPPER BOX TRUCK** be awarded to the vendor indicated below for prices on the attached pages;

**GABRIELLI TRUCK SALES, LTD.**  
**3200 HORSEBLOCK RD**  
**MEDFORD, NY 11763**  
**[pbianco@gabriellittruck.com](mailto:pbianco@gabriellittruck.com)**

**BE IT FURTHER RESOLVED**, that the Town Clerk be and is hereby authorized to forward a copy of this resolution to the vendor listed above, and the Highway and Purchasing Departments; and

**BE IT FURTHER RESOLVED** that all Town Hall Departments may review and obtain a copy of this resolution from the electronic storage device and, if needed, a certified copy of same may be obtained from the Office of the Town Clerk.

**THE VOTE**

**FISCAL IMPACT STATEMENT  
OF PROPOSED RIVERHEAD TOWN BOARD LEGISLATION**

A. Type of Legislation    Resolution <input checked="" type="checkbox"/> Local Law		
B. Title of Proposed Legislation: Awards Bid for Chipper Box Truck		
C. Purpose of Proposed Legislation:		
D. Will the Proposed Legislation Have a Fiscal Impact?    Yes <input checked="" type="checkbox"/> No		
E. If the answer to section D is "yes", select (a) or (b) below and initial or detail as applicable: <p>(a) The fiscal impact can be absorbed by Town/department existing resources set forth in approved Town Annual Budget            TB _____ (example:routine and budgeted procurement of goods/services)*if selecting E(a), please initial then skip items F,G and complete H,I and J;            or            (b) The description/explanation of fiscal impact is set forth as follows:</p>		
F. If the answer to E required description/explanation of fiscal impact (E(b)), please describe total Financial Cost of Funding over 5 Years		
<b>G. Proposed Source of Funding</b> Appropriation Account to be Charged: DA1-5-5130-240-000-00000 Grant or other Revenue Source: Appropriation Transfer (list account(s) and amount):		
H. Typed Name & Title of Preparer: Teresa Baldinucci	I. Signature of Preparer  <b>Teresa Baldinucci</b> Teresa Baldinucci	J. Date 9/13/22
K. Accounting Staff Name & Title	L. Signature of Accounting Staff	M. Date