

11.5

Dean Weiberg

From: Jacob Crispo <jacob.crispo@bolton-menk.com>
Sent: Wednesday, April 8, 2026 4:22 PM
To: Dean Weiberg
Subject: RE: ERWB Project Labor Agreement

Caution: This email originated from outside the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

That is correct.



Jacob Crispo, PE (MN)
Municipal Senior Project Manager | Associate
Bolton & Menk, Inc.

📞 (218) 830-1119

From: Dean Weiberg <dweiberg@hoytlakes.com>
Sent: Wednesday, April 8, 2026 4:07 PM
To: Jacob Crispo <jacob.crispo@bolton-menk.com>
Subject: RE: ERWB Project Labor Agreement

*** WARNING: This email is from outside the company. Proceed with Caution***

I'll include it. What would the motion be? Motion to include a Project Labor Agreement in place for Hoyt Lakes portion of the joint water project to ensure the general contractor hires only union labor and prevailing wages and abides to the terms of the PLA?

From: Jacob Crispo <jacob.crispo@bolton-menk.com>
Sent: Wednesday, April 8, 2026 4:00 PM
To: Dean Weiberg <dweiberg@hoytlakes.com>
Subject: RE: ERWB Project Labor Agreement

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Dean,

I would suggest the council make decision on whether they would include a PLA in the CMAR contract or not. We do not have one prepared yet.

Thanks

**PROJECT LABOR
AGREEMENT**

Agenda
Item
5.b.2.IV

This Project Labor Agreement (hereinafter, the "Agreement") is entered into effective the _____ day of _____, _____, by and between _____ (hereinafter "Contractor") and _____ Council, on behalf of its affiliated Local Unions (hereinafter "Union") with respect to the construction of _____ to be known as the "Project."

It is understood by the parties to this Agreement that it is the policy of the Owner that the construction work covered by this Agreement shall be contracted to Contractors who agree to be bound by the terms of this Agreement. The Contractor shall monitor compliance with this Agreement by all subcontractors who, through the execution of this Agreement, have become bound hereto. The term "Contractor" shall include all Contractors and subcontractors of whatever tier engaged in on-site construction work within the scope of this Agreement.

The Union and all signatory Contractors agree to abide by the terms and conditions contained in this Agreement with respect to the administration of the Agreement by the Owner and the performance of the construction by the Contractor of the Project. This Agreement represents the complete understanding of the parties, and it is further understood that no Contractor party is required to sign any other agreement as a condition of performing work within the scope of this Agreement. No practice, understanding or agreement between a Contractor and a Union party which is not explicitly set forth in this Agreement shall be binding on any other party unless endorsed in writing by the Project Contractor.

**ARTICLE I
PURPOSE**

The Project, an undertaking of the Owner, is a public project which will employ numbers of skilled and unskilled workers. Construction of the Project will entail utilization of the construction industry in an area having multiple labor contracts and employer associations. Consequently, conflicts within labor-management relations could cause delay or disruption of the efficient completion of the project unless maximum cooperation of all segments of the construction industry is obtained. This Agreement is to establish, as the minimum standards on the Project, the hours and working conditions as those prevailing for the largest number of workers engaged in the same classes of work within the area.

It is in the public interest that the Project progress and be completed in an expeditious and efficient manner, free of disruption or delay of any kind. Therefore, it is essential to secure optimum productivity and to eliminate any delays in the work. In recognition of the special needs of this Project and to maintain a spirit of harmony, labor-management peace and stability during the term of this Project Labor Agreement, the parties agree to establish effective and binding methods for the settlement of all misunderstandings, disputes or grievances which may arise. Therefore, the Unions agree not to engage in any strike, slowdown or interruption of work and the Contractor agrees not to engage in any lockout.

ARTICLE II SCOPE OF THE AGREEMENT

Section 1. This Agreement, hereinafter designated as the "Project Labor Agreement" or "Agreement," shall apply and is limited to all construction work included in all Bid Categories for the Project, under the direction of the signatory Contractors and performed by those Contractor(s) of whatever tier which have contracts awarded for such work on or after the effective date of this Agreement with regard to the Project.

Such Project is generally described as the construction of:

Project Description

Section 2. It is agreed that all direct subcontractors of a Contractor, of whatever tier, who have been awarded contracts for work covered by this Agreement on or after the effective date of this Agreement shall be required to accept and be bound by the terms and conditions of the Project Labor Agreement.

Section 3. The provisions of this Project Labor Agreement shall apply to all craft employees represented by any Union listed in Schedule A hereto attached and shall not apply to other field personnel or managerial or supervisory employees as defined by the National Labor Relations Act.

Section 4. The Contractor further agrees to install the basic hourly wage rates, fringe benefits, hours and working conditions as have been duly negotiated with the Union listed in Schedule A hereto attached and are contained in the Local Area Collective Bargaining Agreements (hereinafter Local Area Agreement) in effect with the recognized bargaining agents in the locality. In the event of any conflict between any provisions of this Agreement and in the Local Area Agreements, the terms of this Agreement will be applied. In other words, where a subject covered by the provisions of this Project Labor Agreement is also covered by the Local Area Agreement, the provisions of this Project Labor Agreement shall prevail. Where a subject is covered by the Local Area Agreement and not covered by this Project Labor Agreement, the Local Area Agreement provisions shall prevail.

Section 5. This Agreement shall only be binding on the signatory parties hereto and shall not apply to the parents, affiliates, subsidiaries, or other ventures of any such party.

Section 6. This Agreement shall be limited to work historically recognized as construction work. Nothing contained herein shall be construed to prohibit, restrict, or interfere with the performance of any other operation, work or function which may occur in or around the Project site or be associated with the development of the Project, or with the ongoing operations of the Owner.

Section 7. It is understood that the liability of any Contractor and the liability of the separate Unions under this Agreement shall be several and not joint. The Union agrees that this Agreement does not have the effect of creating any joint employment status between or among Owner and any Contractor.

Section 8. All workers delivering fill, sand, gravel, crushed rock, transit/concrete mix, asphalt or other similar materials and all workers removing any materials from the construction

site as required by the specifications are subject to the provisions of the Minnesota state prevailing wage law and are entitled to the appropriate area standard wage. For purposes of this contract, such materials are for specified future use and, per Minnesota state prevailing wage law, delivery and pick up of the above-listed materials constitutes incorporation.

ARTICLE III UNION RECOGNITION AND REPRESENTATION

Section 1. The Contractor recognizes the Union as the sole and exclusive bargaining representative of all craft employees working on facilities within the scope of this Agreement.

Section 2. Authorized representatives of the Union shall have access to the Project, provided they do not interfere with the work of employees and further provided that such representatives fully comply with the posted visitor and security and safety rules of the Project.

ARTICLE IV WORK STOPPAGES AND LOCKOUTS

Section 1. There shall be no strike, picketing, work stoppages, slowdowns or other disruptive activity for any reason by the Union or employees against any Contractor covered under this Agreement, and there shall be no lockout by the Contractor. Failure of any Union or employee to cross any picket line established by any union, signatory or non-signatory, or any other organization, at or in proximity to the Project site is a violation of this Article.

Section 2. Any party alleging a breach of Section 1 of Article IV shall have the right to petition a court for temporary and permanent injunctive relief. The moving party need not show the existence of irreparable harm and shall be required to post bond only to secure payment of court costs and attorney fees as may be awarded by the court.

ARTICLE V DISPUTES AND GRIEVANCES

Section 1. This Agreement is intended to provide close cooperation between management and labor. The Contractor and the _____ Council shall each assign a representative to this Project for the purpose of assisting the Local Unions, together with the Contractor, to complete the construction of the Project economically, efficiently, continuously and without interruption, delays or work stoppages.

Each Contractor shall hold a pre-job conference with the Union and Contractor to clear up any project question and work assignments in which there is thought to be a difference in opinion. Every effort will be made to hold such conference well in advance of actual work performance.

Section 2. The Contractor, Union, and employees, collectively and individually, realize the importance to all parties to maintain continuous and uninterrupted performance of the work of the Project and agree to resolve disputes over grievances in accordance with the arbitration provisions set forth in the Local Area Agreements in effect with the Unions listed in Schedule A attached hereto.

**ARTICLE VI
JURISDICTIONAL DISPUTES**

Section 1. There will be no strikes, work stoppages, slowdowns, or other disruptive activity arising out of any jurisdictional dispute. Pending the resolution of the dispute, the work shall continue uninterrupted as assigned by the Contractor.

Section 2. Building construction work shall be assigned by the Contractor in accordance with the procedural rules of the Plan for the Settlement of Jurisdictional Disputes in the Construction Industry (hereinafter the "Plan"). Any jurisdictional dispute over the Contractor's assignment of work shall be settled in accordance with the provisions of the Plan.

Section 3. Where a jurisdictional dispute involves the International Brotherhood of Teamsters, it shall be referred for resolution to that International Union and the disputing International Union. The resolution of the dispute shall be reduced to writing, signed by the authorized representative of the International Unions and the Contractor. The assignments made by the Contractor shall be followed until such time as the dispute is resolved in accordance with this Section.

**ARTICLE VII
NO DISCRIMINATION**

Section 1. The Contractor and Union agree that they will not discriminate against any employee or applicant for employment because of his or her membership or non-membership in a Union or based upon race, color, religion, sex, national origin or age in any manner prohibited by law or regulation.

Section 2. Any complaints regarding application of the provisions of Section 1 should be brought to the immediate attention of the involved Contractor for consideration and resolution.

Section 3. The use of the masculine or feminine gender in this Agreement shall be construed as including both genders.

**ARTICLE VIII
SAVINGS AND SEPARABILITY**

It is not the intention of the parties to violate any laws governing the subject matter of this Agreement. The parties hereto agree that in the event any provisions of the Agreement are finally held or determined to be illegal or void as being in contravention of any applicable law, the remainder of the Agreement shall remain in full force and effect unless the part or parts so found to be void are wholly inseparable from the remaining portions of this Agreement. Further, the Contractor and Union agree that if and when any and all provisions of this Agreement are finally held or determined to be illegal or void by Court of competent jurisdiction, the parties will promptly enter into negotiations concerning the substance affected by such decision for the purpose of achieving conformity with the requirements of an applicable law and the intent of the parties hereto.

SCHEDULE "A"

- A-1 Asbestos Workers Local 49
- A-2 Boilermakers Local 647
- A-3 BAC Local 1 Chapter 3 Duluth & Iron Range
- A-4 Carpenters Local 361/606
- A-5 Cements Masons Local 633
- A-6 Elevator Constructors Local 9
- A-7 IBEW Local 242/294
- A-8 Iron Workers Local 563
- A-9 Laborers Local 1091/1097
- A-10 Millwrights & Machinery Erectors Local 1348
- A-11 Operating Engineers Local 49
- A-12 Painters & Allied Trades Local 106
- A-13 Plumbers & Fitters Local 11/584
- A-14 Roofers Local 96
- A-15 Sheet Metal Workers Local 10
- A-16 Sprinkler Fitters Local 669
- A-17 Teamsters Local 346

**ARTICLE IX
DURATION OF THE AGREEMENT**

The Project Labor Agreement shall be effective _____(DATE), and shall continue in effect for the duration of the Project construction work described in Article II hereof. Construction of any phase, portion, section or segment of the Project shall be deemed complete when such phase, portion, section or segment has been turned over to the Owner and has received the final acceptance from the Owner's representative.

Since there are provisions herein for no strikes or lockouts in the event any changes are negotiated and implemented under a Local Area Agreement during the term of this Agreement, the Contractor agrees that, except as specified herein, such changes shall be recognized and shall apply retroactively to the termination date in the particular Local Agreement involved. Each Contractor which has a Local Agreement with a Union at the time that its contract at the project commences shall continue it in effect with each said Union so long as the Contractor remains on the project. In the event any such Local Area Agreement expires, the Contractor shall abide by all of the terms of the expired Local Agreement until agreement is reached on a new Local Agreement, with any changes being subject to the provisions of this Agreement.

The Union agrees that there will be no strikes, work stoppages, sympathy actions, picketing, slowdowns or other disruptive activity affecting the Project by any Union involved in the negotiation of a Local Area Agreement nor shall there be any lockout on this Project affecting the Union during the course of such negotiations.

IN WITNESS WHEREOF the parties have entered into this Agreement to be effective as of the day and year above written.

_____ **COUNCIL**

CONTRACTOR

By: _____

By: _____

Its: _____

Its: _____

11.6

FRYBERGER

— LAW FIRM —

MIA E. THIBODEAU
Duluth Office
mthibodeau@fryberger.com
218.725.6873

April 1, 2026

East Range Water Board
16 West Second Avenue North
Aurora, MN 55705

City of Aurora ("Aurora")
16 West Second Avenue North
Aurora, MN 55705

City of Hoyt Lakes ("Hoyt Lakes")
Municipal Building
206 Kennedy Memorial Drive
Hoyt Lakes, MN 55750

Town of White ("White")
16 West 2nd Avenue North
PO Box 146
Aurora, MN 55705

Re: Conflict of Interest Waiver Request

Dear Sirs:

This letter concerns work by Fryberger, Buchanan, Smith & Frederick, P.A. ("Firm") on behalf of the East Range Water Board (the "Board") to amend the existing Joint Powers Agreement dated July 21, 2021 (the "Agreement") to provide for the entrance of the City of Hoyt Lakes ("Hoyt Lakes") as a new member under the Agreement presently between Aurora and White including necessary amendment to provisions addressing board composition, property ownership, financing, operations, and other matters with respect to the Joint System (the "Transaction"). Aurora, White, Hoyt Lakes are together referred to herein as the "Members" or a "Member."

The Board has requested that the Firm represent the Board in regard to the Transaction. The Firm also represents or has represented the Members in other municipal finance and real estate matters. The Firm's work regarding the Transaction will be on behalf of the Board.

FRYBERGER, BUCHANAN, SMITH & FREDERICK, P.A.

CLOQUET
813 Cloquet Ave.
Cloquet, MN 55720
p: (218) 879-3363

DULUTH
302 West Superior St.
Suite 700
Duluth, MN 55802
p: (218) 722-0861

SUPERIOR
1409 Hammond Ave.
Suite 330
Superior, WI 54880
p: (715)392-7405

fryberger.com

FRYBERGER, BUCHANAN, SMITH & FREDERICK, P.A.

April 1, 2026

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A conflict of interest arises when the Firm represents a client and that representation will be directly adverse to another client. While the Board's interests generally align with the Members, the Board's actions could be adverse to the interests of a Member, and vice versa. Pursuant to the Rules of Professional Conduct governing lawyers, a lawyer may not represent a client if the representation of the client will be directly adverse to another client, unless: (1) the lawyer reasonably believes the representation will not adversely affect the relationship with the other client; and (2) each client consents after consultation.

We believe our representation of the Board in documenting the Transaction will not adversely affect the Firm's relationship with the Members. Therefore, if you are agreeable to having the Firm carry out the work on behalf of the Board regarding the Transaction, please indicate your consent by signing this letter, as provided below, and deliver (email delivery is best) an executed copy to me.

You should each understand that if a conflict arises between the Board and a Member that cannot be resolved, the Firm cannot participate in a lawsuit or other action by any Member and may be required to withdraw. Such a withdrawal could impose delays and additional costs on all parties.

As a consequence, we are not able to advise any addressee of this letter with respect to their relationship with any other addressee other than as described in the preceding paragraphs. If an issue regarding business or financing matters arises for which we do not have instructions, we will present the issue to you for a decision. In addition, should a dispute subsequently develop concerning interpretation of the terms and conditions of the documentation for the Agreement, or should an event of default occur under the Agreement or the documents authorizing or related to the Agreement, we would not be able to represent any party against the other with respect to such matters.

Our inability to represent any of you could result in additional expense and loss of time to you as each of you would need to retain new counsel who would need to become familiar with your operations and relationships. Among other things, new lawyers and/or consultants might be required to become familiar with the background facts and documentation in order to bring the matter to resolution, causing you to incur additional legal fees.

You should be aware and may wish to take into account the fact that confidential information about any of you which we acquire by working on this matter could be disclosed to the others. In addition, if our representation includes your participation in joint discussions with us, information which could be subject to the attorney client privilege for each of you if you were separately represented and communicated such information privately to your legal counsel, will not be subject to that privilege because of your joint communications with us. Because much of the negotiations described above may take place at meetings which are required to be open to the public or during meetings or conferences with municipal borrowing consultants and the substance of the Transaction described in this letter is or will become part of the public record, the disclosure

FRYBERGER, BUCHANAN, SMITH & FREDERICK, P.A.

April 1, 2026
Page 3

risk is unavoidable. Nevertheless, each of you may wish to consult with separate counsel regarding the terms and form of the Agreement and the related documents.

As required by the Rules, I am seeking your written consent to the Firm's representation as outlined above. If you do consent, please indicate your consent by signing in the space provided below and returning the letter to me at your earliest convenience. The requested consent is for this real estate transaction only.

This letter/agreement may be executed in one or more counterparts and scanned, faxed and/or emailed signatures are acceptable.

If you have any questions, please do not hesitate to give me a call.

Sincerely,

Mia E. Thibodeau

Mia E. Thibodeau

FRYBERGER, BUCHANAN, SMITH & FREDERICK, P.A.

April 1, 2026
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SIGNATURE PAGE TO CONFLICT LETTER

AGREED AND ACCEPTED BY:

EAST RANGE WATER BOARD

By: Doug Gregor, Chair

ATTEST:

By: Jon Skelton, Vice-Chair

FRYBERGER, BUCHANAN, SMITH & FREDERICK, P.A.

April 1, 2026
Page 5

SIGNATURE PAGE TO CONFLICT LETTER

AGREED AND ACCEPTED BY:

CITY OF AURORA, MINNESOTA

By: _____

Its: Mayor

FRYBERGER, BUCHANAN, SMITH & FREDERICK, P.A.

April 1, 2026
Page 6

SIGNATURE PAGE TO CONFLICT LETTER

AGREED AND ACCEPTED BY:

CITY OF HOYT LAKES, MINNESOTA

By: _____

Its: Mayor

FRYBERGER, BUCHANAN, SMITH & FREDERICK, P.A.

April 1, 2026
Page 7

SIGNATURE PAGE TO CONFLICT LETTER

AGREED AND ACCEPTED BY:

TOWN OF WHITE, MINNESOTA

By: _____

Its: Chair

11.7

Sign Sponsorship - Notes

Date: February 3, 2026

Attendees: Matthew Bartle, Bucky (Area Administrator), Dean (Hoyt Lakes Administrator), Tom (Hoyt Lakes Mayor)

-
- **Ownership and Authority:** Confirmation of facility ownership and approval authority is required, including identification of the entity legally authorized to grant naming rights and execute agreements on behalf of the arena (Is the City the owner of the arena?)
 - *Question:* Please confirm no issue with this outline.
 - *Answer:* Confirmed, no issue
 - **Commercial Terms and Payment Structure:** NewRange and Hoyt Lakes Arena would enter into a renewable annual naming-rights agreement under which NewRange shall remit a lump-sum payment of \$10,000 per contract year to the arena. The City of Hoyt Lakes has approved the granting of naming rights for a ten-year term, subject to annual renewal and continued compliance with the agreement's terms and conditions.
 - *Question:* Please confirm Hoyt Lakes approves of this.
 - *Answer:* Confirmed, no issue
 - **Termination and Signage Removal:** In the event NewRange elects to terminate the agreement, NewRange would retain one year, from the confirmation of non-renewal, to remove all installed signage at its sole cost.
 - *Question:* Please confirm Hoyt Lakes approves of this.
 - *Answer:* Confirmed, no issue
 - **Approvals and Contract Execution:** Clarification is required regarding which City representatives, operational personnel, or governing bodies must review and approve the agreement, as well as confirmation of who will be the contract signatories.
 - *Question:* Who will be the Hoyt Lakes Signatories
 - *Answer:* Mayor and Dean will be signatories. Council will need to approve before signatures.
 - **Scope of Naming Rights Granted:** NewRange would receive exclusive naming rights to the full facility name, together with rights to interior signage, digital boards, and other mutually agreed-upon branding locations.
 - *Question:* Are there any interior signs that need to be reviewed by Johnny? Mesabi East Youth Hockey raises money by selling signage. Any conflicts?
 - *Answer:* Johnny has confirmed no issue
 - **Signage Placement and Design Control:** NewRange would retain the right to determine signage locations, dimensions, design specifications, and color schemes. No bylaws or safety issues with the LED screen
 - *Question:* Is NewRange to review the location and sign design with the City team before purchasing? Is "NewRange Copper Nickel Arena" to be the full name?
 - *Answer:* No issue with reviewing prior to sign purchase.
 - **Communications and Public Announcements:** NewRange would maintain control over the initial public announcement regarding the naming-rights partnership. All subsequent official references to the facility would use the name "NewRange Arena". This agreement would first

enter the public domain with a city council vote. It will be on the agenda and then discussed at the publicly broadcast meeting.

- Question: Would Johnny invite you to the meeting?
- Answer: Yes, Johnny will come to the meeting.
- **Supply, Installation, and Maintenance Responsibilities:** NewRange would be responsible for supplying, installing, maintaining, electrical and repairing all branded signage for the duration of the agreement, including compliance with all permitting and safety requirements.
 - Question: Please confirm Hoyt Lakes approves of this.
 - Answer: Confirmed, no issue
- **Paperwork:** Approvals and contracting to be completed under NewRange paperwork approved
 - Question: Please confirm Hoyt Lakes approves of this.
 - Answer: Confirmed, no issue

Tasks – Matthew Bartle

- Confirm that power is to be the responsibility of the Arena (not NewRange).
- Will the contract be available to the public?

Timelines

1. NewRange to review minutes internally.
 - a. Complete
2. Once approved, MB to give meeting notes to attendees alongside T&Cs for the contract
 - a. Current status
3. Once legal has reviewed, MB to draft the contract
4. Draft to be provided to Bucky/Dean, and council vote to occur
5. Once the council approves, the contract will be signed



March 9th, 2026

Dear Mayor and City Councilpersons:

The Sexual Assault Program of NSLC would greatly appreciate if you could discuss and adopt the enclosed **Mayors' Proclamation** at an upcoming city council meeting for the month of April. This Proclamation recognizes April as **Sexual Assault Awareness Month**.

During fiscal year 2025 we provided advocacy services with **10 crime victims from Hoyt Lakes, MN** and **646** from the surrounding communities. Last year we honored victims during our 1st annual Crime Victims Rights Week event.

We are grateful for your community's partnership in the mission to end sexual violence through public awareness and support of its' victims.

Together we DO make a difference!

Sincerely,

Jamie Koppes

Executive Director/ Crime Victim Advocate
Sexual Assault Program of Northern St. Louis County
327 1st Street S, Ste 17 Virginia, MN 55792
Office 218-749-4725
Cell 218-780-8824

Jamiek@stopsexualviolence.org

Believe, Listen, Learn & Support

TOTAL PROGRAM STATISTICS

Fiscal Year 2025

Local Crime Victims from Northern St. Louis County:

* Child & Youth Victims Served	318
* Adult Victims Served	338
Total Crime Victims Served	656












* Primary victims is the person the crime directly happened to and a Secondary victim is a parent, family member, loved one and/or friend that is affected by the crime against the primary victim

Advocacy Services Available:

Crisis Counseling/Intervention, Crime Victim Rights, Follow-up, Information & Referrals, Personal Advocacy, Info & Support during forensic exams, Criminal Justice Support/Advocacy, Legal Advocacy (*Orders for Protection, Harassment Orders, Civil & Family Court*) Financial Assistance, Assistance in filing Reparations, Individual, Group/family and peer Advocacy, Individual/family and group sessions are available throughout the year for children/teens,/adults, Supportive sessions in-person, or virtually (Doxy me or Zoom)

Total Services Provided: More than 23,133

Types of Crimes:

- | | |
|---|--|
|  Child/Teen Sexual Abuse (by family) |  Adult Sexual Assault |
|  Child/Teen Sexual Assault (by others) |  Sexual Harassment |
|  Internet-Related Crimes/Child Pornography |  Obscene Phone Calls/Texts |
|  Sex Trafficking/Sexual Exploitation |  Stalking |
|  Adults abused as children |  Exposing |
|  Child/Youth Porn/Revenge Porn | |

Sincere Gratitude to our Funders

- Minnesota Office of Justice Program - United Way of NEMN
- Community Development Block Grant - St. Louis County
- Many Community Allies and Organizations

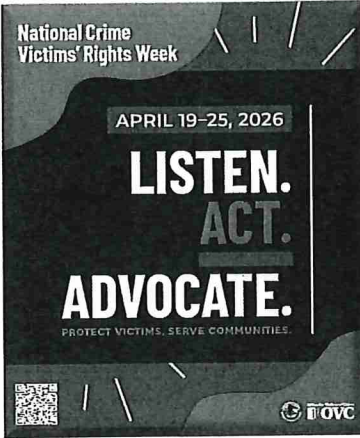




Spring Newsletter

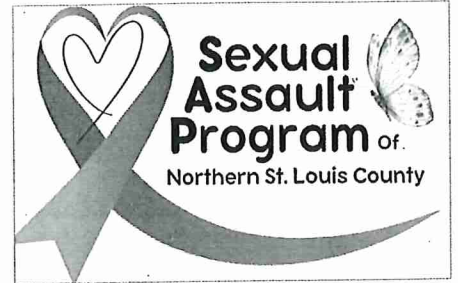
2026

NATIONAL CRIME VICTIMS RIGHTS WEEK



Since 1981, National Crime Victims' Rights Week (NCVRW) has challenged the Nation to confront and remove barriers to achieve justice for all victims of crime. During NCVRW, we recognize the accomplishments of the victims' rights movement and reflect on how far we have come. Every April, The Office of Justice Programs, Office for Victims of Crime, leads communities throughout the country in their annual observances of NCVRW. In

2026, we will observe NCVRW on April 19-25, with the theme—**Listen. Act. Advocate. Protect victims, serve communities.**



2025 Statistics Northern SLC

* Primary Victims

149 Child/Youth Victims
113 Adult Victims

* Secondary Victims

169 Child/Youth Victims
225 Adult Victims

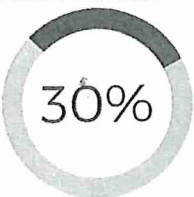
656 Total Victims

- Primary victims are direct victims of sexual violence
- Secondary victims are family and friends of the primary victim that have been effected by sexual violence

23,133

Total Services Provided

NATIONAL STATISTICS

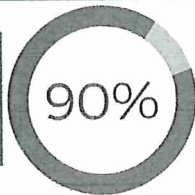


30% of sexual abuse is never reported.

95%

of child sexual abuse is preventable through education and awareness.

90% of child sexual abuse victims know the perpetrator.



1 in 3 girls

1 in 5 boys

are sexually abused before the age of 18.

90%

More than 90% of individuals with a **developmental delay or disability** will be sexually assaulted at least once in their lifetime.

2025 HIGHLIGHTS

ADVOCACY 101

- Presentation on our agency, what services we offer and how to become an advocate

AEOA EARLY CHILDHOOD HEADSTART

- Educated parents on Internet/body safety and available services

COOK WELLNESS FAIR

- Provided handouts on body safety including information about our agency

COMMUNITY CONVERSATIONS

- Provided information about our agency and what programs we offer

COMMUNITY CONNECT

- Provided information about our agency and distributed personal hygiene items

FAIRVIEW SKILLS TRAINING

- Collaborated with PAVSA to provide ER nurses training on forensic evidence collection

NATIONAL CRIME VICTIMS RIGHTS WEEK

- Held our agency's first annual National Crime Victims Rights Week Event

SAFE AND STRONG

- Safe and Strong Presentations on body safety

SAFETY TOWN

- Empower Me Presentations with several area elementary classes on body safety

SEXUAL ASSAULT AWARENESS MONTH

- Mayoral Proclamations in 14 communities declaring April as SAAM

YOUTH MENTAL HEALTH NIGHT

- Reaching at least 200 children and their families

SAFETY PROGRAMS

B.R.I.D.G.E.S.

(Building Relationships in Dedication to Girls Empowerment) Gender Specific alternative for young women within the 6th District Juvenile Court System "Girls Moving On" Curriculum

EMPOWER ME

Teaches Personal Safety for Pre-K through 6th grade.

Children will learn

about Saying No, Body Boundaries, 5 Trusted Adults, Secrets vs surprises, and the UH-OH feeling!



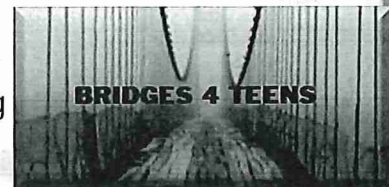
NOW MATTERS LATER

Teaches legal and emotional impacts of sexting and provides awareness of digital laws and safety



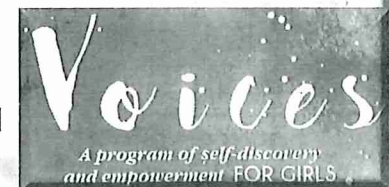
TEEN BRIDGES

Provides teens and youth the opportunity to acquire new coping and life skills, helps build self-esteem, set healthy boundaries and understand healthy relationships

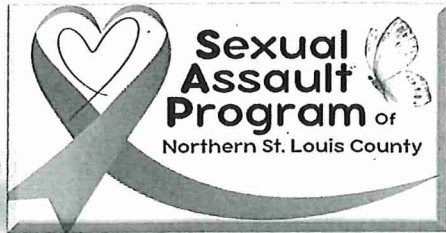


VOICES

Gives young girls the opportunity for self-discovery, coping and healing through trauma.



ADVOCACY SERVICES



INFORMATION & REFERRAL

- Will inform you of your rights and options
- Customized information packets
- Safety planning - Safe at Home, VINE, Reparations, and protection orders

PERSONAL ADVOCACY

- Advocacy during medical exam, police interview and all legal proceedings
- Liaison with other agencies to best meet victim needs

EMOTIONAL SUPPORT

- Crisis intervention - Safety planning
- 24/7 Hotline/Crisis line counseling
- On-going services with children, youth, and adults (Individual, family and/or group)
- Emergency financial assistance

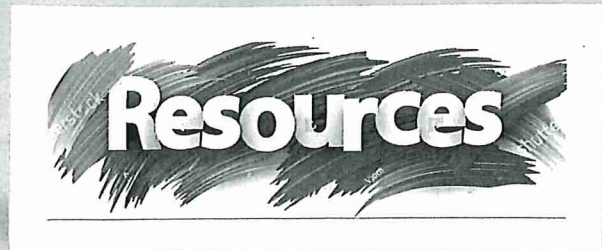
SHELTER / HOUSING

- Emergency shelter assistance
- Assistance securing transitional housing
- Relocation assistance

CRIMINAL/CIVIL JUSTICE ASSISTANCE

- Notification of case status, arrest, court proceedings, disposition, release)
- Assistance with Victim impact statements, restitution, OFP.HRO

RESOURCES



- BREAKTHESILENCE.ORG
- CONNECTSAFELY.ORG
- END-ABUSE.ORG
- FUTURESWITHOUTVIOLENCE.ORG
- JWRC.ORG
- LOVEISRESPECT.ORG
- MISSINGKIDS.ORG
- NETSMARTZKIDS.ORG
- NSTEENS.ORG
- NSVRC.ORG
- PLANNEDPARENTHOOD.ORG
- PROTECTYOUNGMINDS.ORG
- STOPITNOW.ORG
- STOPSEXUALVIOLENCE.ORG
- PREVENTCONNECT.ORG
- WEARERESOURCEFUL.ORG
- VETOVIOLENCE.CDC.GOV



Sexual Assault Program of NSLC	
24/7 Crisis Intervention	(218) 749-4725
Advocates for Family Peace	
Domestic Violence	(218) 248-5512
Day One	
Crisis Intervention	(866) 223-1111
AEOA Virginia	
Crisis Intervention	(800) 568-0149
AEOA Hibbing	
Crisis Intervention	(218) 748-7357
Bill's House	
Homeless Shelter	(218) 741-2063
Child Protection	
Report Child Maltreatment	(218) 471-7128
Hibbing Shelter	
Homeless Shelter	(218) 263-8487
Lutheran Social Services	
Family Resource Center	(218) 741-3343
Public Health & Human Services	
Financial/Medical/Family	(218) 749-0600
Range Transitional Housing	
Virginia, MN	(218) 741-9628
Suicide & Crisis Lifeline	
Call or Text Hotline	988
United Way of NEMN	
Crisis Intervention	211
Youth Foyer	
Virginia Homeless Shelter	(218) 749-0766

Thank You...

Board of Directors

<i>Board Chair</i>	Rich McCauley
<i>Vice Board Chair</i>	Chris Florey
<i>Secretary</i>	Ashley Rengstorf
<i>Board Member</i>	Mike O'Bryan
	Karly Kostich
	Therese Elverum
	Trina Hoff
	Steve Estey
	Chad Larson

Funders



MINNESOTA DEPARTMENT OF PUBLIC SAFETY
Office of Justice Programs



UNITED WAY
Northeastern
Minnesota



CDBG
Community Development
Block Grant



Thank you to the community members and our local businesses for their donations and ongoing support of our agency



Sexual Assault Program of
Northern St. Louis County

327 1st St. S. Ste 17 Virginia, MN 55792

Office: (218) 749-4725

www.stopsexualviolence.org

2026 Sexual Assault Awareness Month
Mayor Proclamation

WHEREAS, Sexual Assault Awareness Month is intended to bring awareness to the fact that sexual violence is widespread and is a public health concern for individuals, families, community members and communities as a whole.

WHEREAS, Child sexual abuse /exploitation, rape and sexual harassment impact all communities as seen by the national statistics: One in three girls and one in six boys will be sexually violated by the age of 18. One in five children is solicited sexually while on the internet. One-third of all sexual violence cases in Northern St. Louis County happen to children 17 years and younger.

WHEREAS, In fiscal 2025, our local Sexual Assault Program of Northern St. Louis County has worked with more than 656 primary and secondary crime victims of sexual violence whom reside in our communities. The Program has provided more than 23,133 documented trauma and victim-focused advocacy services with these crime victims.

WHEREAS, Staff, Board Members and Volunteers of our local anti-sexual violence program; The Sexual Assault Program of Northern St. Louis County, encourage every person to speak out when witnessing acts of violence, however small; and to help survivors connect with community allies.

WHEREAS, We must work together to educate and engage communities in sexual violence awareness and prevention and to believe, listen, learn and support its victims and family members.

WHEREAS, a growing number of Minnesota leaders are committed to sexual violence prevention; and

WHEREAS, All Minnesotans must be part of the solution to eliminate crimes of sexual violence.

THEREFORE, I, the Mayor of the City of Hoyt Lakes, Minnesota, do hereby proclaim the month of April in the year of 2026 as:

SEXUAL ASSAULT AWARENESS MONTH

IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal

of the city of Hoyt Lakes, located in St. Louis County in the state of Minnesota.

_____ this _____ day of _____, 2026.

Mayor Signature

11.9a

Water Carnival 2026 - Estimated in Kind for Event

Item	Cost	Notes
Arena Rental - Multipurpose Room		NA for 2025
Arena Rental - Arena		NA for 2025
Ballfield Concession Stand-propane	\$95.00	Not listed in 2025
Ballfield Maintenance/Prep	\$1,500.00	60 hours
Ballfield Rental	\$1,000.00	Fee Schedule: (100+150)x4
Barriers	\$86.00	\$1 each
Community Building Rental	\$420.00	Fee Schedule
Electricity at Midway	\$660.35	Increase from June 2025-July 2025 bills
EMTs	\$3,600.00	120 hours
Fire Personnel	\$450.00	15 hours
Golf Course - Tournament	\$2,500.00	Fees collected are returned in prizes. \$25/golfer Not listed in 2025
Morning Trash Pickup	\$13,500.00	150 hours - REMIND THEM TO GET EXTRA GROUP FOR CLEANUP OR WE SHOULD SEND THEM A BILL
Mosquito Control	\$1,500.00	2025 Bill
No Parking Signs	\$40.00	\$1 each
Police	\$4,100.00	60 hours plus \$500 to cover outside agency for their expense
Portajohn	\$6,564.00	2024 Costs
Pulling Docks	\$360.00	4 hours
Sand Pile	\$180.00	2 hours
Setup & Teardown	\$10,800.00	120 hours
Sweeping	\$1,080.00	12 hours
Trash Cans	\$200.00	\$1 each
Trash Removal	\$1,000.00	Tipping fees only, doesn't charge for extra pickups.
Water Utilities		NA Unknown
Total	\$49,635.35	

Hoyt Lakes Water Carnival Committee, Inc.

PO Box 219, Hoyt Lakes, MN 55750

Phone/Fax: 218.225.2654

info@hoytlakescarnival.com

www.hoytlakescarnival.com

11.96

March 23, 2026

**Hoyt Lakes EMS/ERPD
Hoyt Lakes, MN 55750**

Re: Hoyt Lakes Water Carnival ~ July 23-26, 2026

Dear EMS Crew:

We are writing to request your services over the annual Water Carnival weekend. These services have not changed this year, but here is a list of the typical services provided by your department:

Fire Department:

- hose down softball fields, if needed
- hose out Beer Garden in mornings, if needed
- fire truck at the Colby Beach parking lot Saturday night for the fireworks display at 10:00 pm

Ambulance:

- 5K Road Race – Arena Parking Lot, Saturday at 9 AM

If you would like to offer the Fire Truck rides again at the Friday turtle races, please let one of the committee members know so we can advertise that for you. There will be a separate letter for participating in the parade. Please watch for that to come in the near future. Thank you for your past and continued support of the Hoyt Lakes Water Carnival!

Sincerely, 

The Hoyt Lakes Water Carnival Committee

Dan Darbo, President	Nikki Swanson
Brad Carlson, Vice President	Garrett Mirau
Emma Thornbloom, Secretary	Austin Michaels
Connor Michels, Treasurer	Luke Nikunen
Shannon Alaspa, Parade Chair	Steve and Janel Scheuring
Emma Croft	

cc: Mayor Scott
HL City Council



11.9c

Minnesota Department of Public Safety
Alcohol and Gambling Enforcement Division
445 Minnesota Street, Suite 1600, St. Paul, MN 55101
651-201-7507 Fax 651-297-5259 TTY 651-282-6555
**APPLICATION AND PERMIT FOR A 1 DAY
TO 4 DAY TEMPORARY ON-SALE LIQUOR LICENSE**

Name of organization Date organized Tax exempt number
 HOYT LAKES WATER CARNIVAL COMMITTEE JAN 1991 41-1686048

Address City State Zip Code
 310 KENT ROAD HOYT LAKES MN 55750

Name of person making application Business phone Home phone
 DANIEL DARBO 218-750-0495

Date(s) of event Type of organization Microdistillery Small Brewer
 JULY 23-26, 2026 Club Charitable Religious Other non-profit

Organization officer's name City State Zip Code
 DANIEL DARBO, PRESIDENT HOYT LAKES MN 55750

Organization officer's name City State Zip Code
 BRAD CARLSON, VICE PRESIDENT HOYT LAKES MN 55750

Organization officer's name City State Zip Code
 CONNER MICHELS HOYT LAKES MN 55750

Location where permit will be used. If an outdoor area, describe.
 101 KENNEDY MEMORIAL DRIVE, COMMUNITY BUILDING, AND OUTDOOR AREA OF COMMUNITY SHELTER,
 & 3-BALL FIELD AREA

If the applicant will contract for intoxicating liquor service give the name and address of the liquor license providing the service.
~~10100 000~~

If the applicant will carry liquor liability insurance please provide the carrier's name and amount of coverage.
 \$1,000,000 - AHREN'S THOMPSON INSURANCE - AURORA, MINN.
 11 N. MAIN STREET
 AURORA, MINN. 55705
 218-229-2536

APPROVAL

APPLICATION MUST BE APPROVED BY CITY OR COUNTY BEFORE SUBMITTING TO ALCOHOL AND GAMBLING ENFORCEMENT

CITY OF HOYT LAKES
 City or County approving the license

100.00
 Fee Amount

3/20/2026
 Date Fee Paid

[Signature]
 Signature City Clerk or County Official

Date Approved

JULY 23-26, 2026
 Permit Date

tsnetsinger@hozt lakes.com
 City or County E-mail Address

218-225-2344
 City or County Phone Number

DEAN WEIBERG
 Please Print Name of City Clerk or County Official

CLERKS NOTICE: Submit this form to Alcohol and Gambling Enforcement Division 30 days prior to event.

**ONE SUBMISSION PER EMAIL, APPLICATION ONLY.
 PLEASE PROVIDE A VALID E-MAIL ADDRESS FOR THE CITY/COUNTY AS ALL TEMPORARY
 PERMIT APPROVALS WILL BE SENT BACK VIA EMAIL. E-MAIL THE APPLICATION SIGNED BY
 CITY/COUNTY TO AGE.TEMPORARYAPPLICATION@STATE.MN.US**

LG240B Application to Conduct Excluded Bingo

No Fee

11.9d

ORGANIZATION INFORMATION

Organization Name: Hoyt Lakes Water Carnival Previous Gambling Permit Number: XB-04862
Minnesota Tax ID Number, if any: Federal Employer ID Number (FEIN), if any: 41-1686048
Mailing Address: PO Box 219
City: Hoyt Lakes State: MN Zip: 55750 County: St. Louis
Name of Chief Executive Officer (CEO): Dan Darbo
CEO Daytime Phone: 2187500495 CEO Email:
Email permit to (if other than the CEO): csgrams@frontiernet.net

NONPROFIT STATUS

Type of Nonprofit Organization (check one):
[] Fraternal [] Religious [] Veterans [x] Other Nonprofit Organization

Attach a copy of at least one of the following showing proof of nonprofit status:

(DO NOT attach a sales tax exempt status or federal employer ID number, as they are not proof of nonprofit status.)
[] Current calendar year Certificate of Good Standing
[] Internal Revenue Service-IRS income tax exemption 501(c) letter in your organization's name
[] Internal Revenue Service-Affiliate of national, statewide, or international parent nonprofit organization (charter)

EXCLUDED BINGO ACTIVITY

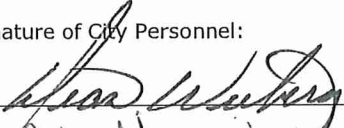
Has your organization held a bingo event in the current calendar year? [x] Yes [x] No
If yes, list the dates when bingo was conducted:
The proposed bingo event will be:
[x] one of four or fewer bingo events held this year. Dates: 07/26/2026
[] conducted on up to 12 consecutive days in connection with a:
[] county fair Dates:
[] civic celebration Dates:
[] Minnesota State Fair Dates:
Person in charge of bingo event: Dan Darbo Daytime Phone: 2187500495
Name of premises where bingo will be conducted: Hoyt Lakes Arena
Premises street address: 102 Kennedy Memorial Drive
City: Hoyt Lakes If township, township name: County: St. Louis

LOCAL UNIT OF GOVERNMENT ACKNOWLEDGMENT (required before submitting application to the Minnesota Gambling Control Board)

**CITY APPROVAL
for a gambling premises
located within city limits**

On behalf of the city, I approve this application for excluded bingo activity at the premises located within the city's jurisdiction.

Print City Name: Hoyt Lakes

Signature of City Personnel:


Title: City Administrator Date: 4-14-26

The city or county must sign before submitting application to the Gambling Control Board.

**COUNTY APPROVAL
for a gambling premises
located in a township**

On behalf of the county, I approve this application for excluded bingo activity at the premises located within the county's jurisdiction.

Print County Name: _____

Signature of County Personnel:

Title: _____ Date: _____

TOWNSHIP (if required by the county)
On behalf of the township, I acknowledge that the organization is applying for excluded bingo activity within the township limits. (A township has no statutory authority to approve or deny an application, per Minnesota Statutes, Section 349.213.)

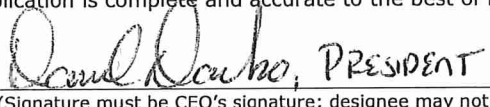
Print Township Name: _____

Signature of Township Officer: _____

Title: _____ Date: _____

CHIEF EXECUTIVE OFFICER'S SIGNATURE (required)

The information provided in this application is complete and accurate to the best of my knowledge.

Chief Executive Officer's Signature:  PRESIDENT Date: 3/25/26
(Signature must be CEO's signature; designee may not sign)

Print Name: Dan Darbo

MAIL OR FAX APPLICATION & ATTACHMENTS

Mail or fax application and a copy of your proof of nonprofit status to:

Minnesota Gambling Control Board
1711 West County Road B, Suite 300 South
Roseville, MN 55113
Fax: 651-639-4032

An excluded bingo permit will be mailed to your organization. Your organization must keep its bingo records for 3-1/2 years.

Questions?
Call a Licensing Specialist at 651-539-1900.

Bingo hard cards and bingo number selection devices may be borrowed from another organization authorized to conduct bingo. Otherwise, bingo hard cards, bingo paper, and bingo number selection devices must be obtained from a distributor licensed by the Minnesota Gambling Control Board. A list of licensed distributors is available on the Gambling Control Board's website at www.mn.gov/gcb.

This form will be made available in alternative format (i.e. large print, braille) upon request.

Data privacy notice: The information requested on this form (and any attachments) will be used by the Gambling Control Board (Board) to determine your organization's qualifications to be involved in lawful gambling activities in Minnesota. Your organization has the right to refuse to supply the information; however, if your organization refuses to supply this information, the Board may not be able to determine your organization's qualifications and, as a consequence, may refuse to issue a permit. If your organization supplies the information requested, the Board will be able to process the application. Your organization's name and address will be public information when received by the Board. All other information provided will be private data about your organization until the Board issues the permit. When the Board issues the permit, all information provided will become public. If the Board does not issue a permit, all information provided remains private, with the exception of your organization's name and address which will remain public. Private data about your organization are available to Board members, Board staff whose work requires access to the information; Minnesota's Department of Public Safety; Attorney General; Commissioners of Administration, Minnesota Management & Budget, and Revenue; Legislative Auditor, national and international gambling regulatory agencies; anyone pursuant to court order; other individuals and agencies specifically authorized by state or federal law to have access to the information; individuals and agencies for which law or legal order authorizes a new use or sharing of information after this notice was given; and anyone with your written consent.

11.9e



City of Hoyt Lakes

Special Event Permit Application

Fee: \$25.00

Contact Information

Group / Organization: Hoyt Lakes Water Carnival Committee, Inc.

Contact Person: Emma Thornbloom, DAN DARB Phone: 218.750.0587 / 218-750-0495

Address: PO Box 219

Email: info@hoytlakescarnival.com

Secondary Contact Person: Brad Carlson Phone: 218-780-7248

Event Day on-site Contact Emma Thornbloom Phone: 218-750-0587

Event Information

Type of Event: outdoor festival

Event Name/Title: Water Carnival

Description of Event: 4-day festival with music, softball, food/craft vendors, 5k, beer garden, bingo, parade, fireworks, bounce houses, other kids and famiyl events.

Proposed Location: Softball complexes/arena ***Estimated attendance: 4000-5000
*** Large Events may be subject to a damage deposit of no more than \$500*

Event Date and Times

Set Up Date and Time 7-21-26 - 12 PM Actual Event Time: 8 AM - 12:30 AM

Clean Up Date and Time 7-27-26 - 8 AM

Event Features

Will an any signs / banners be put up? Yes No if yes, number and size: 20

Will there be any inflatables? Yes No if yes, provide insurance certificates from rental provider

Will there be any entertainment? Yes No if yes, what type and time: music, acrobats, stunt dogs

Will sound amplification be used? Yes No if yes, hours and type: 6 PM - 12:30 AM

Will a stage or tent be set up? Yes No if yes, dimensions: 80x40 tent / 24x12 stage

Will Merchandise be sold? Yes No if yes, provide a list to City Hall

Will Food be prepared or sold? Yes No if yes, provide a list & the MN Health Licenses to City Hall

Will there be a Fireworks display? Yes No if yes, obtain permit from company to be approved by Council

Services

Will the Event Use, close, or block any of the following:

City Streets or Right-of-ways: Yes No If yes, Streets: Kennedy Memorial - Sat. parade only

City Sidewalks or Trails: Yes No If yes, Location: ATV trail by tennis court

Public Parking Lots or Spaces: Yes No If yes, location: downtown/beach/arena/softball areas

County Streets (Kennedy Memorial Drive) require County approval for closure.

**** answering yes to any of the above, police services may be required for the event, and you must contact the East Range Police Department to have a planning meeting no less than 30 days prior to the event. ****

Will the event need barricades? Yes No If so, how many are needed: 10-12

Will Alcohol be served? Yes No If so, who is serving it (approval to transfer liquor licenses required by Council; provide license with application): committee obtains own

Will portable restrooms be used? Yes No if yes, how many: 12-15

Will extra trash receptacles be needed? Yes No if yes, how many are needed: 4 dumpsters

Describe trash removal and cleanup after the event: East Mesabi Sanitation

Will the event need traffic control? Yes No

Will the event need additional police presences for the event? Yes No (the city may determine additional police presence is required for the event)

Describe crowd control procedure to ensure safety of participants and spectators: main area is fenced in and main area is fenced in and police will monitor site

Will "No Parking Signs" be needed? Yes No If yes, how many: 30

Will the event need EMS / Fire Department? Yes No (the city may determine EMS / Fire Department presence is required for the event)

Describe plans to provide first aid, if needed: police on site, many trained EMTs present

Describe the emergency action plan if severe weather should arrive: Use of the arena if needed

Use of the arena if needed

How does the event benefit the residents and/or businesses in the City of Hoyt Lakes? Tourist bring in tax paye
Tourist bring in tax payer money to the area.

List any other pertinent information (animals, etc.) _____

Possible costs of items that may be requested:

Firefighters / EMT\$30 per hour per person
Police – Special Events – Police Officer.....\$60 per hour per person
Extra Trash Removal.....\$100/dumpster pickup
Public Works – Special Events Assistance\$90 per hour per person
Barricades.....\$1 each per day

TOTAL _____

Attachments required

(Please attach additional sheets as needed)

- Site Plan (This is mandatory for all events. Include any tables, stages, tents, fencing, portable restrooms, vendor booths, trash containers, barricades, etc. If the event includes a parade, race or walk, attach a route map with directional arrows, rest stops, crossings, signage, etc.)
- Certificate of Insurance (Include: Policy Number, Amount and Provisions that the City of Hoyt Lakes is included as additional insured. The insurance requirements depend on the risk level of the event and are determined by the City.)
- Permits / List of Solicitors, and Food Vendors with the necessary Department of Health Certificates
- Signatures of Business Owners / Managers of all properties that the City deems as affected by the event, the City will provide a list of all signatures needed for approval.
- Proof of Non- Profit Status

Hold Harmless Agreement

The sponsor(s) of this event hereby agrees to save and hold harmless the City of Hoyt Lakes, its officers, agents, employees, and members from all claims, suits, or actions of whatsoever nature resulting or arising from this activity. As the sponsor or authorized representative, I certify that the information is provided as accurate and true to the best of my knowledge and agree to pay the permit fee for this event based upon the information provided in this application. I realize my submittal of this application request constitutes a contract between myself and the City of Hoyt Lakes and is a release of Liability.

David Doubo, PRESIDENT

3-25-26

Signature

Date

To be completed by City Hall

Fees may be waived by at the discretion of the City Council

<u>Department</u>	<u>Approval Signature</u>	<u>Date</u>
City Hall	_____	_____
Public Works	_____	_____
Recreation	_____	_____
Police Department	_____	_____
Fire/EMS Department	_____	_____
Application Fee	\$25	\$25.00
Firefighters/ EMT	Qty Requested _____ @ \$30 person/hr	Total _____
Police Officer	Qty Requested _____ @ \$60 person/hr	Total _____
Extra Trash Removal	Qty Requested _____ @ \$100/dumpster	Total _____
Public Works	Qty Requested _____ @ \$90 person/hr	Total _____
Barricades	Qty Requested _____ @ \$1 each/day	Total _____

TOTAL FEES: _____

Site Plan _____ Certificate of Insurance _____ Permits / vendor lists _____ Non-profit status _____

11.10

Tammy Snetsinger

From: Skyler Webb <Webbskyler@hotmail.com>
Sent: Wednesday, April 1, 2026 8:10 AM
To: Tammy Snetsinger
Subject: ARENA RENTAL 6.6.26

Caution: This email originated from outside the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

Hello!

My name is Skyler Webb and my fiancé Blake Fondie and I are getting married at the Hoyt Lakes Arena on Saturday June 6th, 2026. We have already coordinated the arena rental with Bucky.

Bucky mentioned that campers may be allowed in the arena parking lot with approval from the City Council. We would love to inquire if this could be allowed for our wedding as we have many out of town and out of state family members traveling for the wedding. We have booked the maximum room block at the Country Inn but unfortunately will still need other options for guests who plan to stay and would like to limit the need for anyone to have to drive even just down to the point campground.

Please let me know if anything else is needed for the council to review!

Thank you!

Skyler Webb
218-410-2228
Webbskyler@hotmail.com

Agreement for Professional Billing Services

This Professional Services Agreement ("Agreement") is entered into effective April 1, 2026, by and between ECP Services, LLC, a Limited Liability Company (hereinafter "ECP") and City of Hoyt Lakes, D.B.A. Hoyt Lakes Fire Dept. Ambulance (Hereinafter "CLIENT"). It is understood ECP will begin billing for services rendered by the CLIENT on or after June 1, 2026.

WHEREAS, CLIENT desires to engage ECP to provide certain professional or other billing services described in Exhibit A, attached hereto and incorporated herein by reference ("Services").

NOW THEREFORE, in consideration for the terms and conditions set forth in this Agreement, CLIENT and ECP agree as follows:

1. **DEFINITIONS.** For purposes of this Agreement:

- (a) "ECP" means ECP Services, LLC, a Wisconsin Limited Liability Company with address of 117 Main St, Suite B, Lake Mills, WI 53551.
- (b) "CLIENT" means City of Hoyt Lakes, D.B.A. Hoyt Lakes Fire Dept. Ambulance, a municipal-based Minnesota ambulance service with address of 801 Dorchester Drive, Hoyt Lakes, MN., 55750-1169.
- (c) "Services" means certain professional or other billing services described in Exhibit A, attached hereto and incorporated herein by reference.

2. **SERVICES TO BE PROVIDED BY CONTRACTOR.** ECP agrees to provide the Services indicated by CLIENT in Exhibit A to CLIENT in accordance with the terms and conditions of this Agreement. The Services shall be provided by ECP in accordance with parameters established, including all applicable State and Federal laws, CLIENT policies, procedures and guidelines relating to the confidentiality of strategic, operational, financial and patient information.

3. **TERMS OF PAYMENT.**

- (a) CLIENT shall pay ECP for the Services provided hereunder at the rate specified in Exhibit A.
- (b) ECP shall prepare and provide CLIENT with monthly invoices for ECP's Services hereunder, specifying the date and the services provided by ECP during the previous monthly period. ECP's invoices shall be delivered to CLIENT electronically to the e-mail address specified by CLIENT below. All original correspondence will be delivered to CLIENT at the following address:

Hoyt Lakes Fire Dept. Ambulance

801 Dorchester Drive

Hoyt Lakes, MN. 55750-1169

- (c) CLIENT shall pay ECP's monthly invoices hereunder within thirty (30) calendar days of actual receipt. CLIENT's payments shall be delivered to ECP in person, made via free Electronic Funds Transfer or mailed to ECP at the following address:

ECP Services, LLC.

PO Box 279

Lake Mills, WI 53551

4. **REGULATORY COMPLIANCE.** In connection with this Agreement, ECP shall comply with all applicable federal and state laws, Joint Commission for the Accreditation of Healthcare Organization accreditation standards, and CLIENT policies and procedures including:
 - (a) The provision of health care services, and reimbursement under the Medicare and Medicaid Programs;
 - (b) The accreditation of hospitals, ambulatory clinics and health care facilities;
 - (c) All policies, bylaws, rules, and regulations adopted by CLIENT and its governing boards; and
 - (d) Patient confidentiality and confidentiality of strategic, operational, financial and other information.
5. **PROHIBITED USES.** ECP shall not use CLIENT's space and equipment for any purpose other than the provision of Services to CLIENT.
6. **RELATIONSHIP OF PARTIES.** It is understood by the parties that ECP is an independent contractor with respect to CLIENT, and not an employee of CLIENT. ECP will provide consulting and other services to CLIENT as further described in Exhibit A. CLIENT shall not have or exercise any control over the methods used by ECP to provide Services hereunder; provided, however, that ECP shall ensure that such Services are performed in accordance with standards established by CLIENT. ECP has no authority to enter into contracts or agreements on behalf of CLIENT.
7. **TERM; TERMINATION.** This Agreement shall be effective upon approval and execution by ECP and CLIENT, and shall remain in effect for one (1) year thereafter. This Agreement and all its terms and conditions, without change, will automatically renew for a one (1) year period unless written notice of termination is provided and received by either CLIENT or ECP effective immediately with cause, or without cause upon thirty (30) days' written notice to the other party. Termination shall not relieve either of the parties from obligations already incurred.
 - (a) CLIENT incurs no obligations to ECP of any kind prior to the effective date established above, and reserves the right to cancel this Agreement at any time prior to the effective date immediately after notifying ECP.
 - (b) Termination with cause includes, but is not limited to, failure on the part of ECP to provide the services outlined in Exhibit A.
 - (c) Upon termination of this Agreement, all decisions related to transferring billing processes and historical data from ECP to CLIENT or CLIENT's selected billing agency are solely at the discretion of CLIENT.
8. **PROHIBITION AGAINST ASSIGNMENT OF CONTRACT.** This Agreement may not be assigned by either party to any person or entity (other than an affiliate) without the prior written consent of the other party. This Agreement shall be binding upon the parties' successors and assigns.

9. **AUDITS; ACCESS TO BOOKS AND RECORDS.** CLIENT will have the reasonable right to audit the books and records of ECP related to the services provided under this Agreement. If Section 952 of the Omnibus Budget Reconciliation Act of 1980 and the regulations promulgated thereunder are applicable to this Agreement, ECP shall, until four years after the expiration of this Agreement, comply with all requests by the Comptroller General of the United States, the Secretary of the Department of Health and Human Services, and their duly authorized representatives for access to this Agreement and to ECP's books, documents and records necessary to verify the nature and extent of the costs of the Services provided hereunder. Such access shall be requested in accordance with section 952.
10. **SEVERABILITY.** If any provisions in this Agreement are determined to be void and unenforceable for any reason, the remaining provisions shall remain in full force and effect to govern the parties' conduct and relationship.
11. **ENTIRE AGREEMENT.** This Agreement constitutes the entire understanding and agreement between the parties relating to their relationship as to matters covered by this Agreement, and supersedes all prior understandings, representations and agreements relating thereto. This Agreement may not be amended except pursuant to a written agreement signed by both parties.
12. **NONWAIVER OF RIGHTS.** No failure by a party to insist upon the strict performance of any term in this Agreement, or to exercise any right, power, or remedy consequent upon a breach thereof, shall constitute a waiver of any such term or breach. No waiver of any breach shall affect or alter this Agreement, which shall continue in full force and effect with respect to any other then existing or subsequent breach.
13. **NOTICES.** Any notice hereunder shall be effective upon mailing by certified mail, return receipt requested, and addressed to the other party at the following address or such other address as may be specified pursuant to a notice properly given:

(a) **Notices to CLIENT:**

Hoyt Lakes Fire Dept. Ambulance
801 Dorchester Drive
Hoyt Lakes, MN 55750-1169

With a copy to:

(b) **Notices to ECP:**

ECP Services, LLC.
117 Main St, Suite B
Lake Mills, WI 53551

14. **AMENDMENTS:** Should any party desire any modifications to this Agreement, these modifications shall be negotiated between the parties and set in writing. Should the parties fail to agree to such modifications, this Agreement shall remain in full force and effect.

15. **EQUIPMENT; TOOLS; MATERIALS; SUPPLIES.** If necessary, CLIENT shall provide ECP with equipment, materials and supplies, as further described in Exhibit A.
16. **WARRANTIES AND REPRESENTATIONS.** ECP hereby warrants and represents that:
- (a) ECP is qualified to perform the Services;
 - (b) ECP has obtained any and all licenses and permits required by applicable federal, state and local law to perform the Services;
 - (c) ECP is an independent contractor, not an employee of CLIENT or its affiliates;
 - (d) ECP is not currently covered, obligated or bound by any covenants not to compete, restrictive covenants or other contractual obligations that would prohibit ECP from entering into this Agreement with CLIENT.
 - (e) ECP is not and has not been excluded from participating in Medicare, Medical Assistance or any other government health programs; and, to ECP's knowledge, there are no pending or threatening governmental investigations that may lead to such exclusion.
 - (f) These warranties and representations shall survive the execution of this Agreement.
17. **INDEMNITY AND HOLD HARMLESS.** ECP hereby indemnifies and holds CLIENT harmless from, against and in respect of any and all loss, liability, expense or damage suffered or incurred by CLIENT by reason of any untrue representation, breach of warranty or nonfulfillment of any agreement by ECP to CLIENT contained in this Agreement.
18. **INSURANCE.** ECP shall procure and maintain during the term of this Agreement, insurance policies, hereinafter specified. If, for any reason, the insurance coverage required herein lapses, CLIENT may declare the Agreement null and void as of the date no valid insurance policy was in effect. Certifications of policy renewals shall be furnished to CLIENT throughout the term of this Agreement. The insurance requirement shall not be construed to conflict with the obligations of ECP in the "Indemnity and Hold Harmless" article above.
- (a) The following insurance will be in effect and continue in effect during the term of the Agreement in not less than the following amounts:
 - i. Worker's Compensation – Statutory – in compliance with the Worker's Compensation Law of the State of Minnesota.
 - ii. Professional Liability Insurance with a minimum limit of One Million (\$1,000,000.00) Dollars per occurrence and Two Million (\$2,000,000.00) aggregate.
 - iii. General Liability Insurance with a minimum limit of \$1,000,000 per occurrence and Two Million (\$2,000,000.00) aggregate.
19. **PROGRAM LIMITATIONS:** In addition, ECP makes no warranty or representations with respect to any hardware of third-party software and whatever warranty may apply to any hardware of third-party software, if any, is only as expressly stated by the third-party manufacturer, owner or licensor of the hardware of third-party software.

- (a) **DISCLAIMER:** Under no circumstances shall ECP be liable for any lost profits or for any claim or demand of any other person arising out of or in connection with the use of Computer Programs utilized to achieve the scope of services offered, including third party communication (Internet) outages and failures. In no event shall ECP be liable for, punitive or tort damages, even if ECP has been advised of the possibility of such damages.
- (b) **CLIENT'S ACTS AND OMISSIONS:** Neither CLIENT nor ECP are responsible for any acts or omissions of the other party or the other party's officers and employees.
- (c) **DATA NOT PROVIDED BY ECP:** ECP is not responsible for the accuracy of the data provided by CLIENT or data obtained or available from public or government records or sources of the public domain.

20. **DATA RETENTION.** All records and documents related to the services provided under this Agreement are the property of CLIENT.
21. **CONFIDENTIALITY AND PRIVACY.** ECP hereby warrants, represents and agrees that all information relating to the Services is confidential and proprietary to CLIENT, and, as such, may not be used or disclosed to any other person or purpose without CLIENT's prior written consent unless expressly mandated by applicable federal, state or local law.
22. **GOVERNING LAW.** This Agreement shall be governed by and construed in accordance with the laws of the State of Minnesota. Any judicial or other action or proceeding arising from or relating to this Agreement shall be brought before Jefferson County Circuit Court.
23. **COUNTERPARTS.** This Agreement may be executed by facsimile and/or in counterparts, each of which shall be deemed to be an original, but all of which together shall constitute one and the same Agreement.
24. **CAPTIONS.** The captions used in this Agreement are for convenience only and shall not be used to limit, define or interpret the provisions of this Agreement.
25. **FORCE MAJEURE.** No party to this Agreement shall be responsible for any failure to perform any obligation under this Agreement due to acts of God, strikes, disasters, acts of government or other similar significant disturbances beyond the control of such party. A party subject to such an act of force majeure shall use its best efforts to carry out its obligations under this Agreement and to mitigate any resulting damages.

EXECUTION: The undersigned, by virtue of his/her signature, has reviewed and agrees to all terms and conditions of this agreement, including Exhibit A.

IN WITNESS WHEREOF, the parties hereto have herein executed this Agreement on the dates below given.

City of Hoyt Lakes, D.B.A. Hoyt Lakes Fire Dept. Ambulance

Signature: _____
Printed Name: _____
Title: _____
Date: _____

ECP SERVICES, LLC.

Signature: _____
Printed Name: Galen Perkins
Title: Owner
Date: _____

EXHIBIT A

SCOPE OF SERVICES

Summary

CLIENT is engaging ECP Services, LLC (ECP) to provide professional billing and revenue cycle management services. As part of that agreement, this Exhibit will define the goals of this service offering and define a scope of services to achieve those objectives.

Project Services

During the term of this Agreement, ECP shall provide CLIENT with the following Services:

Description of Services

- ECP will enter data from all billable ambulance trips received from CLIENT into ECP's Billing Software to facilitate the accurate submission of claims to all insurance carriers in electronic or paper format.
- ECP will also submit invoices to facilities and other applicable entities in accordance with a written contract between CLIENT and the facility or other external entity, where either the contract itself and/or State or Federal Law establishes financial responsibility on the part of the facility or external entity.
- ECP will follow established billing industry guidelines for ambulance services and make reasonable efforts to ensure the services provided by CLIENT are billed accurately and timely. ECP will bill services rendered by CLIENT within 5 business days after the incident is sent to ECP for billing.
- Once all insurance coverage is exhausted, ECP will invoice the patient or responsible party who incurred the ambulance charges, followed by a second invoice 30 days later, and 30 days later, a final notice to advise the recipient to remit payment to avoid further collection efforts.
- ECP will assist CLIENT in establishing a dedicated account for receipt of ambulance billing funds, where the account is controlled by CLIENT and ECP has access to view transactions and prepare checks. Checks written from this designated account can only be signed by a designated employee of CLIENT.
- All monies and remittance advices for electronic payments received by ECP on behalf of CLIENT will be posted to the corresponding accounts on a weekly basis (at minimum), reflecting the exact date the transaction is recorded in the bank account, and deposited to your account via Remote Deposit Capture.
- All mail and correspondence will be processed by ECP in a timely fashion, where ECP will respond, or otherwise take action on the corresponding account, and leave a record in the account of the correspondence.
- ECP will maintain a toll-free number for customer service inquiries, and have available staff from Monday through Friday from 8:00am to 5:00pm Central Standard Time. Any voicemails will be returned within 1 business day.
- Prior to assigning patient accounts to an external collection agency, ECP will utilize paid databases to scrub all primary Self Pay accounts for insurance coverage and respond to all inquiries on the account. ECP will adhere to the process outlined in the Delinquent Account Collection Process below.
- ECP will submit a monthly reporting package to CLIENT that includes, at a minimum, the Charges, Adjustments, Payments, and Discounts entered during the previous month, as well as an Accounts Receivable aging report.
- ECP shall make any and all payment records available to authorized representatives of CLIENT for review and auditing purposes within a reasonable timeframe of a request to do so by CLIENT.

Project Pricing

1. CLIENT agrees to pay ECP a fee of **four percent (4.0%)** of net income deposited into the bank account controlled by CLIENT and recorded in ECP's Billing Software during the preceding month.
2. Net Income is calculated from all deposits received in CLIENT's bank account, less any refunds issued for improper or incorrect payments of ambulance services.
3. Failure to pay ECP within 60 days of the monthly bill may result in suspension of services described herein until the amount is paid in full.

Project Requirements

1. CLIENT is responsible for thoroughly completing each patient care report to ensure compliance with billing and reimbursement requirements established by CMS and the State of Minnesota. Recommendations for these documentation elements are contained herein.
2. ECP will import Patient Care Reporting (PCR) data into ECP's Billing Software and attach any trailing documentation to the associated account.
3. CLIENT hereby authorizes ECP to effect credit and debit transactions to CLIENT's designated bank account to facilitate the remote deposit of funds received by ECP, correct any erroneous credit entries, and fulfill any ACH returns arising from transactions covered under this Agreement.
4. CLIENT will authorize ECP to view transactions in their designated bank account for posting and accounting purposes.
5. CLIENT will establish written contracts with any facilities, EMS agencies or other external entities who may be financially responsible for ambulance services provided by CLIENT.
6. CLIENT will provide any necessary contact information for personnel at their organization to carry out business functions, such as adjudicating disputes, resolving overpayments or providing additional documentation as necessary. CLIENT will keep ECP abreast of any changes in contact information throughout the term of the agreement.
7. CLIENT and ECP will establish a process for Release of Information with regard to requests for clinical data created by CLIENT. Any fees collected for Release of Information will be retained by the party that fulfilled the request. Any information releases will be handled in accordance with the agreed upon Business Associate Agreement and internal policies of CLIENT.
8. CLIENT will notify ECP of any changes to their billing policies, fee schedule or any other information that may affect the billing processes of ECP within a reasonable timeframe.

Delinquent Account Collection Process

- CLIENT will enter into a separate agreement with a collection agency of their choice.
- Past due accounts will be written off as Collection Agency Bad Debt, and submitted to CLIENT's collection agency.
- ECP will maintain communication with CLIENT's Collection Agency in order to place new accounts for collections and follow up on insurance or liability claim inquiries arising from any collection activities.
- Any payments collected by CLIENT's Collection Agency can be remitted directly to CLIENT with no involvement or reporting on the part of ECP.
- If CLIENT chooses to have ECP track Collection Agency Activity, any Collection Agency Payments recorded in ECP's Billing Software as part of this process will be charged the same fee described above in "Project Pricing".

Essential Documentation Elements

Effective documentation of the patient encounter requires complete and accurate elements as described below:

1. Patient Care Report (PCR)

- a. Demographic information (Name, Address, Date of Birth, Social Security Number)
- b. Transport Origin and Destination information.
- c. Accurately record times of transport events.
- d. Odometer (or trip odometer) mileage while patient is loaded in the ambulance.
- e. What information was available at the time of Dispatch?
 - i. Why were you called?
 - ii. Patient's condition?
 - iii. Dispatch Level?
- f. Patient's Chief Complaint.
- g. Past pertinent history related to this encounter.
- h. Signs and symptoms at the time of transport, including specific location, onset and severity.
- i. Describe why the transport, and any medical services rendered during the transport, are medically necessary.
- j. If an ALS unit was specifically requested for the encounter, indicate why in the narrative, and describe if there was a level of service downgrade on scene, and why.
- k. Crew member names and levels of licensure.
- l. Patient Care Report must be signed or have accompanying medical record sheet with a crew member signature.

2. Beneficiary Signature Form

- a. CMS/Insurance Signature Authorization form must be signed by patient unless they are physically or mentally incapable of signing.
 - i. Unavailable due to being treated by hospital, or isolation precautions do not qualify. If the patient is physically and mentally capable of signing, another representative's signature cannot be used on the form.
- b. If the patient is incapable of signing:
 - i. Authorized Representative can sign, or...
 - ii. Crewmember can sign with accompanying facility representative signature or hospital record.

3. Physician Certification Statement (PCS)

- a. Required for non-emergency transports.
- b. Must support medical necessity for the transport.
- c. Requires legible physician or authorized health care professional signature (needs to be accompanied by printed name).

4. Other Recommended Documents

- a. Hospital Registration Sheet / Face Sheet with demographic & insurance information.
- b. Billing Sheet documenting use of billable disposable supplies.
- c. Contemporaneous Medical Records (transfer summaries, nursing notes, etc).

BUSINESS ASSOCIATE AGREEMENT

This Agreement is made effective March 1, 2026 by and between Hoyt Lakes Fire Dept. Ambulance, hereinafter referred to as "Covered Entity", and ECP Services, LLC, hereinafter referred to as "Business Associate".

1. **Term.** This Agreement shall remain in effect for the duration of this Agreement and shall apply to all of the Services and/or Supplies delivered by the Business Associate pursuant to this Agreement.
2. **HIPAA Assurances.** In the event Business Associate creates, receives, maintains, or otherwise is exposed to personally identifiable or aggregate patient or other medical information defined as Protected Health Information ("PHI") in the Health Insurance Portability and Accountability Act of 1996 or its relevant regulations ("HIPAA") and otherwise meets the definition of Business Associate as defined in the HIPAA Privacy Standards (45 CFR Parts 160 and 164), Business Associate shall:
 - a. Recognize that HITECH (the Health Information Technology for Economic and Clinical Health Act of 2009) and the regulations thereunder (including 45 C.F.R. Sections 164.308, 164.310, 164.312, and 164.316), apply to a business associate of a covered entity in the same manner that such sections apply to the covered entity;
 - b. Not use or further disclose the PHI, except as permitted by law;
 - c. Not use or further disclose the PHI in a manner that, had the Covered Entity done so, would violate the requirements of HIPAA;
 - d. Use appropriate safeguards (including implementing administrative, physical, and technical safeguards for electronic PHI) to protect the confidentiality, integrity, and availability of and to prevent the use or disclosure of the PHI other than as provided for by this Agreement;
 - e. Comply with each applicable requirements of 45 C.F.R. Part 162 if the Business Associate conducts Standard Transactions for or on behalf of the Covered Entity;
 - f. Report promptly to Covered Entity any security incident or other use or disclosure of PHI not provided for by this Agreement of which Business Associate becomes aware;
 - g. Ensure that any subcontractors or agents who receive or are exposed to PHI (whether in electronic or other format) are explained the Business Associate obligations under this paragraph and agree to the same restrictions and conditions;
 - h. Make available PHI in accordance with the individual's rights as required under the HIPAA regulations;
 - i. Account for PHI disclosures for up to the past six (6) years as requested by Covered Entity, which shall include:
 - i. dates of disclosure,
 - ii. names of the entities or persons who received the PHI,
 - iii. a brief description of the PHI disclosed, and
 - iv. a brief statement of the purpose and basis of such disclosure;
 - j. Make its internal practices, books, and records that relate to the use and disclosure of PHI available to the U.S. Secretary of Health and Human Services for purposes of determining Customer's compliance with HIPAA; and
 - k. Incorporate any amendments or corrections to PHI when notified by Customer or enter into a Business Associate Agreement or other necessary Agreements to comply with HIPAA.
3. **Termination Upon Breach of Provisions.** Notwithstanding any other provision of this Agreement, Covered Entity may immediately terminate this Agreement if it determines that Business Associate

breaches any term in this Agreement. Alternatively, Covered Entity may give written notice to Business Associate in the event of a breach and give Business Associate five (5) business days to cure such breach. Covered Entity shall also have the option to immediately stop all further disclosures of PHI to Business Associate if Covered Entity reasonably determines that Business Associate has breached its obligations under this Agreement. In the event that termination of this Agreement and the Agreement is not feasible, Business Associate hereby acknowledges that the Covered Entity shall be required to report the breach to the Secretary of the U.S. Department of Health and Human Services, notwithstanding any other provision of this Agreement or Agreement to the contrary.

4. **Return or Destruction of Protected Health Information upon Termination.** Upon the termination of this Agreement, unless otherwise directed by Covered Entity, Business Associate shall either return or destroy all PHI received from the Covered Entity or created or received by Business Associate on behalf of the Covered Entity in which Business Associate maintains in any form. Business Associate shall not retain any copies of such PHI. Notwithstanding the foregoing, in the event that Business Associate determines that returning or destroying the Protected Health Information is infeasible upon termination of this Agreement, Business Associate shall provide to Covered Entity notification of the condition that makes return or destruction infeasible. To the extent that it is not feasible for Business Associate to return or destroy such PHI, the terms and provisions of this Agreement shall survive such termination or expiration and such PHI shall be used or disclosed solely as permitted by law for so long as Business Associate maintains such Protected Health Information.
5. **No Third-Party Beneficiaries.** The parties agree that the terms of this Agreement shall apply only to themselves and are not for the benefit of any third-party beneficiaries.
6. **De-Identified Data.** Notwithstanding the provisions of this Agreement, Business Associate and its subcontractors may disclose non-personally identifiable information provided that the disclosed information does not include a key or other mechanism that would enable the information to be identified.
7. **Amendment.** Business Associate and Covered Entity agree to amend this Agreement to the extent necessary to allow either party to comply with the Privacy Standards, the Standards for Electronic Transactions, the Security Standards, or other relevant state or federal laws or regulations created or amended to protect the privacy of patient information. All such amendments shall be made in a writing signed by both parties.
8. **Interpretation.** Any ambiguity in this Agreement shall be resolved in favor of a meaning that permits the Covered Entity to comply with the then most current version of HIPAA and the HIPAA privacy regulations.
9. **Definitions.** Capitalized terms used in this Agreement shall have the meanings assigned to them as outlined in HIPAA and its related regulations.
10. **Survival.** The obligations imposed by this Agreement shall survive any expiration or termination of this Agreement.

IN WITNESS WHEREOF, the Parties have executed this Agreement as of the day and year written above.

COVERED ENTITY: HOYT LAKES FIRE DEPT. AMBULANCE

Signature: _____

Printed Name: _____

Title: _____

Date: _____

BUSINESS ASSOCIATE: ECP SERVICES, LLC

Signature: _____

Printed Name/Title: Galen Perkins / Owner

Date: _____