



ERIE COUNTY WATER AUTHORITY INTEROFFICE MEMORANDUM

TO: Jerome D. Schad, Chair
Peggy A. LaGree, Vice Chair
Michele M. Iannello, Treasurer

FROM: Terrence D. McCracken, Secretary to the Authority

DATE: February 7, 2025

SUBJECT: Civil Service Residency Requirements

As you are aware, Policy No. 92 Employment Policy and Procedures states “pursuant to Public Authorities Law §1053(3), all appointments made by the Authority are subject to the civil service laws of the State of New York and such rules as may be adopted and made applicable to the Authority by the Erie County Personnel Department.” In the Erie County Department of Personnel’s Rules for the Classified Civil Service of the County of Erie and the Towns, Villages, Special Districts and School Districts within the County, Rule VII Recruitment of Personnel reports:

“An applicant must be at the time of examination, and for at least one month prior thereto, and at the time of appointment, a resident of the municipality in which appointment is to be made, or any reasonable combination of municipalities both in and outside of New York State contiguous to the municipality in which appointment is to be made, or contiguous to the municipality in which such municipality is located, as determined by the Personnel Officer. Residence requirements may be suspended or reduced by the Personnel Officer where such requirements are disadvantageous to the public interest.”

In order to broaden the pool of candidates available for all positions, I recommend memorializing through a resolution the approval to expand our search for qualified candidates beyond Erie County. A resolution has been included for your consideration at the meeting of February 20, 2025.

Thank you for your consideration in this matter.

TDM:alh

ERIE COUNTY WATER AUTHORITY
AUTHORIZATION FORM
For Approval/Execution of Documents
(check which apply)

Contract: _____ **Project No.:** _____
Project Description: Acknowledgment and Acceptance of the Civil Service Residency
Requirements of the Erie County Department of Personnel

Item Description:

- | | | | |
|---|---|---|---------------------------------------|
| <input type="checkbox"/> Agreement | <input type="checkbox"/> Professional Service Contract | <input type="checkbox"/> Amendment | <input type="checkbox"/> Change Order |
| <input type="checkbox"/> BCD | <input type="checkbox"/> NYSDOT Agreement | <input type="checkbox"/> Contract Documents | <input type="checkbox"/> Addendum |
| <input type="checkbox"/> Recommendation for Award of Contract | <input type="checkbox"/> Recommendation to Reject Bids | | |
| <input type="checkbox"/> Request for Proposals | | | |
| <input checked="" type="checkbox"/> Other | <u>Acknowledgment and Acceptance of the Civil Service Residency Requirements of the</u>
<u>Erie County Department of Personnel</u> | | |

Action Requested:

- | | |
|---|---|
| <input type="checkbox"/> Board Authorization to Execute | <input type="checkbox"/> Legal Approval |
| <input type="checkbox"/> Board Authorization to Award | <input type="checkbox"/> Execution by the Chairman |
| <input type="checkbox"/> Board Authorization to Advertise for Bids | <input type="checkbox"/> Execution by the Secretary to the Authority |
| <input type="checkbox"/> Board Authorization to Solicit Request for Proposals | |
| <input checked="" type="checkbox"/> Other | <u>Acknowledgment and Acceptance of the Civil Service Residency Requirements of the</u>
<u>Erie County Department of Personnel</u> |

Approvals Needed:

APPROVED AS TO CONTENT:

- | | | |
|---|-------|-------------|
| <input type="checkbox"/> Other (if Applicable) | _____ | Date: _____ |
| <input type="checkbox"/> Chief Operating Officer | _____ | Date: _____ |
| <input type="checkbox"/> Executive Engineer | _____ | Date: _____ |
| <input type="checkbox"/> Director of Administration | _____ | Date: _____ |
| <input type="checkbox"/> Risk Manager | _____ | Date: _____ |
| <input type="checkbox"/> Chief Financial Officer | _____ | Date: _____ |
| <input type="checkbox"/> Legal | _____ | Date: _____ |

APPROVED FOR BOARD RESOLUTION:

- | | | |
|--|--|-------------------------|
| <input checked="" type="checkbox"/> Secretary to the Authority |  | Date: <u>02/07/2025</u> |
|--|--|-------------------------|

Remarks: _____

Resolution Date: _____ **Item No:** _____