3/15/24, 2:11 PM



Diane Cappiello <dcappiello@twpunionschools.org>

(no subject)

1 message

Alicia Rodriguez <alrodriguez@twpunionschools.org>

Thu, Mar 14, 2024 at 10:28 PM

To: Diane Cappiello <dcappiello@twpunionschools.org>

Cc: Gerald Benaquista <gbenaquista@twpunionschools.org>, "fire@uniontownship.com" <fire@uniontownship.com>, "Giambusso, Theresa" <tgiambusso@uniontownship.com>, Kira Baskerville <kbwilliams@twpunionschools.org>, December Field-Moore <dfieldmoore@twpunionschools.org>

I would like to get this item put on the BOE agenda for the next meeting. It is for our Family House/PBSIS event. We will be having a food truck come to our school again. Please let me know if there is anything else I must do or provide to you. Dr. Baskerville & Ms. Moore are aware of the date and ok'd it.

Thank you so much.

Re: Board of Education Approval Request

Who: Ms. Moore, Vice Principal

Event: Family House Event for School/Family Connection **Why:** Celebrating Family-School Connection: PBSIS Event!

We are thrilled to announce an exciting event as part of our PBSIS Grant initiative: a celebration of the strong bond between families and our school community!

Join us for a fun-filled gathering where we'll be playing games, building relationships, and celebrating the achievements of the past month. This event marks the kickoff of the various houses throughout our school, fostering a sense of belonging and camaraderie among students, staff, and families.

Here's what you can expect at the event:

- Interactive Games: Enjoy engaging games that promote teamwork and connection among families and school members.
- Relationship Building: Connect with fellow families, teachers, and staff members in a relaxed and welcoming atmosphere.
- Achievement Showcase: Celebrate the accomplishments of our students and school community over the past month. From academic milestones to acts of kindness, we have much to celebrate together!

We believe that strong family-school connections are essential for the success and well-being of our students. Through events like these, we aim to strengthen these connections and create a supportive community where every member feels valued and empowered.

We can't wait to see you there and celebrate together!

When: Thursday, April 25, 2024

Where: Franklin Elementary School Gymnasium

Time: 6pm-8pm Cost: Free!

**There is no cost to attend the event. The Food truck vendors will directly receive the money for their items sold.

Vendors have been cross checked with Town Hall obtaining the necessary permits.

Vendors: Hadez Food Truck and Chef Deluxe Me Food Truck.

Alicia Rodriguez School Counselor Middle School Volleyball Coach Franklin Elementary School 908-851-4699

3 attachments



Hadez Food Truck.jpg 3551K

Certificate of Insurance.pdf 436K

Chef Deluxe cert - Union TWP.pdf 210K



Diane Cappiello <dcappiello@twpunionschools.org>

RE: [EXTERNAL] [EXTERNAL]

1 message

Giambusso, Theresa <TGiambusso@uniontownship.com> Fri, Mar 15, 2024 at 9:38 AM To: Alicia Rodriguez <alrodriguez@twpunionschools.org>, "Guzman, Orlando" <oguzman@uniontownship.com> Cc: December Field-Moore <dfieldmoore@twpunionschools.org>, Diane Cappiello <dcappiello@twpunionschools.org>,

Gerald Benaquista <gbenaquista@twpunionschools.org>, Kira Baskerville <kbwilliams@twpunionschools.org>, UFD-

Administration < UFD-Administration@uniontownship.com>

Good morning,

Thank you for the heads up on your event. Both food trucks have been inspected and are licensed for 2024 with the Health Department as well.

Kindly reach out if you include any additional food vendors.

Thank you. Wishing you a great event!

Theresa Giambusso

Township of Union Health Department

908-851-8507

From: Alicia Rodriguez [mailto:alrodriguez@twpunionschools.org]

Sent: Friday, March 15, 2024 7:12 AM

To: Guzman, Orlando <oguzman@uniontownship.com>

Cc: December Field-Moore <dfieldmoore@twpunionschools.org>; Diane Cappiello

<dcappiello@twpunionschools.org>; Gerald Benaquista <gbenaquista@twpunionschools.org>; Giambusso,

Theresa <TGiambusso@uniontownship.com>; Kira Baskerville <kbwilliams@twpunionschools.org>; UFD-

Administration < UFD-Administration@uniontownship.com>

Subject: Re: [EXTERNAL] [EXTERNAL]

Thank you so much Mr. Guzman.

On Fri, Mar 15, 2024 at 7:11 AM Guzman, Orlando <oguzman@uniontownship.com> wrote:

Good Morning,



Diane Cappiello <dcappiello@twpunionschools.org>

Re: [EXTERNAL]

1 message

Alicia Rodriguez <alrodriguez@twpunionschools.org>

Fri, Mar 15, 2024 at 7:11 AM

To: "Guzman, Orlando" <oguzman@uniontownship.com>

Cc: December Field-Moore
december Field-Moo

Thank you so much Mr. Guzman.

On Fri, Mar 15, 2024 at 7:11 AM Guzman, Orlando <oguzman@uniontownship.com> wrote:

Good Morning,

Thank you for reaching out and letting us know. Both food trucks have their 2024 yearly fire permit. I'll stop by the day of the event just to check for propane leaks. Any other questions on this or anything at all, please reach out any time. See you all then.

Orlando Guzman

Captain

Fire Official

Township of Union Fire Department

1 Bond Drive Union, NJ 07083

Office - (908) 851-5422

Cell - (908) 645-3631

oguzman@uniontownship.com



From: Alicia Rodriguez [mailto:alrodriguez@twpunionschools.org]

Sent: Thursday, March 14, 2024 10:29 PM

To: Diane Cappiello <dcappiello@twpunionschools.org>

Cc: Gerald Benaquista <gbenaquista@twpunionschools.org>; **UFD-Administration** <UFD-Administration@ uniontownship.com>; **Giambusso**, **Theresa** <TGiambusso@uniontownship.com>; **Kira Baskerville**



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/14/2024 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER, THIS ERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES JELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT Joseph Gurrieri **Alliance Risk Management** PHONE (A/C, No, Ext): (732) 851-6315 5521 FAX (A/C, No): (732) 851-6317 PO Box 671 E-MAIL ADDRESS: joeg@ariskmgt.com Englishtown, NJ 07726 INSURER(S) AFFORDING COVERAGE NAIC# INSURER A: United States Liability Insurance Company 25895 INSURED Chef Deluxe Me LLC INSURER C: 303 Oak Street INSURER D: Perth Amboy, NJ 08861 INSURER E : INSURER F **COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS ADDL SUBR INSD WVD TYPE OF INSURANCE **POLICY NUMBER** LIMITS X COMMERCIAL GENERAL LIABILITY 1,000,000 EACH OCCURRENCE CLAIMS-MADE X OCCUR 100,000 CP1783295A 4/13/2023 4/13/2024 DAMAGE TO RENTED PREMISES (Ea occurrence) 5,000 MED EXP (Any one person) 1,000,000 PERSONAL & ADV INJURY 2,000,000 GEN'L AGGREGATE LIMIT APPLIES PER: **GENERAL AGGREGATE** POLICY X PRO-X LOC Included PRODUCTS - COMP/OP AGG \$ OTHER: COMBINED SINGLE LIMIT (Ea accident) **AUTOMOBILE LIABILITY** ANY AUTO BODILY INJURY (Per person) SCHEDULED AUTOS OWNED AUTOS ONLY BODILY INJURY (Per accident)
PROPERTY DAMAGE
(Per accident) HIRED AUTOS ONLY NON-OWNED AUTOS ONLY **UMBRELLA LIAB** OCCUR EACH OCCURRENCE **EXCESS LIAB** CLAIMS-MADE AGGREGATE DED RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY PER ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) E.L. EACH ACCIDENT . DISEASE - EA EMPLOYEE If yes, describe under DESCRIPTION OF OPERATIONS below E.L. DISEASE - POLICY LIMIT 4/13/2024 Physical damage **Equipment Floater** CP1783295A 4/13/2023 35.000 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) re: Food Truck Operation

CERTIFICATE HOLDER

CANCELLATION

Township of Union Public Schools Franklin Elementary School 1550 Lindy Terrace Union, NJ 07083 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Joli Pastirick



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 03/13/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES 3ELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed.

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).													
	DUCER	amoute does not confer rights to	, tile	CEILI	mode noticer in neu of St	CONTACT							
Hiscox Inc.							NAME: PHONE (A/C, No, Ext): (888) 202-3007 (A/C, No):						
520 Madison Avenue						(A/C, No, Ext): (888) 202-3007 (A/C, No): E-MAIL contact@hissov.com							
32nd Floor							E-MAIL ADDRESS: contact@hiscox.com						
New York, NY 10022							INSURER(S) AFFORDING COVERAGE					NAIC#	
INGUIDED							INSURER A: Hiscox Insurance Company Inc					10200	
INSURED Hadez Liner LLC							INSURER B : Progressive Auto Insurance					24260	
846 Bishop St							INSURER C:						
Union, NJ 07083						INSURE	RD:						
8						INSURER E :							
							INSURER F:						
COVERAGES CERTIFICATE NUMBER:							REVISION NUMBER:						
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. INST. POLICY EST. POLICY EST. POLICY EST.													
INSR LTR	TYPE OF INSURANCE			WVD	POLICY NUMBER	POLICY EFF POLICY EXP (MM/DD/YYYY)			<u></u>	LIMITS			
	X COMMERCIAL GENERAL LIABILITY								EACH OCCURRENCE		\$ 1,000	0,000	
		CLAIMS-MADE X OCCUR X Primary & Noncontributory GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY PROJECT LOC OTHER:							DAMAGE TO RENTE PREMISES (Ea occu	ED irrence)	\$ 100,	000	
									MED EXP (Any one p		\$ 5,000	0	
Α	X				UDC-4678515-CGL-2	0	01/01/2024	12/31/2024	PERSONAL & ADV II		\$ 1,000,000		
^					UDU-4078313-UGL-2		01/01/2024	12/31/2024	GENERAL AGGREG		\$ 2,000,000		
									PRODUCTS - COMP		\$ 2,000,000		
+									FRODUCTS - COMP		\$ 2,000,000		
_		MOBILE LIABILITY							COMBINED SINGLE	LIMIT	•	0.000	
-		X ANY AUTO					01/01/2024	12/31/2024	(Ea accident) BODILY INJURY (Pe		\$ 1,000,000 \$		
	Ho	OWNED AUTOS ONLY HIRED OWNED AUTOS NON-OWNED			04749072 0				•	,			
	A				01748973-0				PROPERTY DAMAG	-	s s		
		AUTOS ONLY AUTOS ONLY							(Per accident)				
	<u> </u>		-								\$		
	-	JMBRELLA LIAB OCCUR							EACH OCCURRENC	CE	\$		
	E	CLAIMS-MADE							AGGREGATE		\$		
		DED RETENTION \$							I DED		\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?			N/A						PER STATUTE	OTH- ER			
									E.L. EACH ACCIDEN	DENT \$			
	(Mandatory in NH)								E.L. DISEASE - EA E	EA EMPLOYEE \$			
If yes, describe under DESCRIPTION OF OPERATIONS below									E.L. DISEASE - POL	ICY LIMIT	\$		
		v											
DESC	DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Franklin Elementary School 1550 Lindy Terrace Union, New Jersey 07083												
CERTIFICATE HOLDER							CELLATION						
Township of Union BOE 2369 morris Ave, 'Jnion New Jersey 07083							SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
							AUTHORIZED REPRESENTATIVE						