MONROE TOWNSHIP SCHOOLS
423 Buckelew Avenue
Monroe Township, New Jersey 08831
www.monroe.k12.nj.us

DR. CHARI ROBYNNE CHANLEY
Superintendent of Schools
DR. ADAM M. LAYMAN
Assistant Superintendent of Schools
LAURA ALLEN, CPA
Business Administrator/Board Secretary

Tel: 732-521-1500
Fax: 732-521-2719

October 2, 2024

VIA EMAIL: opra+request-67046-4a406a90@requests.opramachine.com
Monroe Community Advocate

Re: OPRA Request dated September 23, 2024

Dear Sir/Madam:

On behalf of the Monroe Township Board of Education ("Board" and/or "District"), I am writing this letter in in response to your request for records pursuant to the Open Public Records Act ("OPRA") submitted and received via email on Monday, September 23, 2024.

More specifically, the Board's response to your request is set forth below:

"1. Building Use forms for the Monroe Education Foundation for dates in September where they used the schools to hand out information at Back to School Nights."

Enclosed please find the Facility Scheduling record which has been redacted to protect confidential personal information pursuant to N.J.S.A. 47:1A-1.1.

"2. MTSD Hold Harmless Agreement with Monroe Education Foundation".

Enclosed please find the Hold Harmless Agreement between the Board and the Monroe Education Foundation which has been redacted to protect confidential personal information pursuant to N.J.S.A. 47:1A-1.1.

"3. Certificate of Insurance for Monroe Education Foundation with MTSD listed on the certificate".

Enclosed please find Monroe Education Foundation's Certificate of Insurance which notes the Board as a certificate holder.

As the documents identified above are being provided to you in electronic format only, there is no charge associated with your request. The foregoing information and the enclosed documents constitute the Board's full and complete response to your OPRA request and therefore, your OPRA request is closed.

Sincerely,

Lisa Goldstein

Lisa Goldstein
OPRA Secretary

Monroe Township Board of Education

My Account(365139946) SchoolDude apps - Application Links - Logout

FS DIRECT

Home Calendar Availability New Schedule Documents Account Setup

Search for GO Advanced Search Services | Help

Actions: Add | List | Graph | Report

Schedule Shortcuts Related Links Legend

Update Schedule

☑ **Schedule ID** 18460

☑ **Status** Approved

☑ Notify Booked By

☑ Notify Contact Person

View/Change Declined Reason

Date Created 6/4/2024 10:32:31 AM

Schedule State? Activated

Check Double Bookings

This is an active schedule. Location and event dates cannot be changed on this schedule. You can create an Alternate Event for individual events related to this schedule or cancel this schedule and create a new one or add in new event dates.

☑ **Event Title** Monroe Education Foundation

Event Description General meeting.

Area -- Select Area --

View Bookings

☑ **Location** Monroe Township High School

View Room Details

Building -- Select Building --

☑ **Rooms** Lecture Hall-Left
Lecture Hall-Right
Main Gym
Main Office Conference Room

(Use the CTRL key to select multiple rooms.)

Start Time 7:00 PM **End Time** 9:00 PM

Setup Begin Time 6:00 PM **Breakdown End Time** 10:00 PM

Duration 2 hours 0 minutes, span over 1 days

☑ **Start Recurrence** 6/10/2024

☑ **Recurrence Pattern**

Daily

Weekly **Recur every** week(s) on:

Sunday Monday Tuesday Wednesday
Thursday Friday Saturday

Monthly Day of every month(s)

The third Monday of every 1 month(s)

☑ **End Recurrence** 6/16/2025

Add New Event

Organization Information

☑ **Organization** Monroe Education Foundation Note

or new

Type Class 1 User

Contact Name

-- Select Contact Name --

First Name Steven **Last Name** Riback

Email Confidential personal info. Email

Day-Time Phone

Evening Phone

Cellular Phone Confidential personal info.

Billing Address

☐ Use Organization Billing Address

FEIN **Sales Tax Exemption No.**

☐ Yes, add this contact to the organization's contact list.

Invoice Type? ○ Charge back ○ Payment ◉ No charge

Responsible for Billing -- Select Assignee --

Yes, invoices or usages fees have been generated.

Billing Comments

Budget -- Select Budget Account -- Charge backs requires a budget code.

Document Number **(e.g. contract or permit number)**

PO Number

Back to shortcuts

Insurance Information

Company

Company Policy No

Coverage

Coverage Dates **To**

☐ Yes, update organization record with above insurance information.

Setup Requirements

Note: Tasks already generated for events will not reflect changes in service description.

Required Maintenance Services	Service description
☐ Custodial	
☐ Delivery	
☐ Event Break Down	
☐ Event Setup	
☑ Security	needed

Required IT Services	Service description
☐ Equipment	
☐ Event Setup	

Rental Requests

+ Add Rental Request

No Rental Request defined.

Number Attending 15

Number of Adults 0

Number of Children 0

Back to shortcuts

Other Needs

Booked by **First Name** Steven **Last Name** Riback

Email Confidential personal info.

Route to Next -- Select Route To --

Note: Leave 'Route to Next' blank to allow the system to automatically route the next person defined in the routing system.

Event Visibility ☐ Yes, this is a schedule of public events

Inactive Schedule

Pending Schedule? Add/Update Pending Reason

Pending Expiration Date

Activate Schedule? ◉

Back to shortcuts Save Reset

Approval Process

Date Approved	Approved By	Note
6/4/2024 10:58:31 AM	Egna, Bonnie	
6/4/2024 12:46:39 PM	Tague, Gerald	

Pending Reasons

Delete	Pending Reason	Date Entered	Entered By

No Pending Reason on record.

Events

Add New Event

Event Start Date	Event End Date	Location	Alternate Event Start Date	Alternate Event End Date	
6/17/2024	6/17/2024				
7/15/2024	7/15/2024				
8/19/2024	8/19/2024				
9/16/2024	9/16/2024				
10/21/2024	10/21/2024				
11/18/2024	11/18/2024				
12/16/2024	12/16/2024				
1/20/2025	1/20/2025				**Canceled**
2/17/2025	2/17/2025				**Canceled**
3/17/2025	3/17/2025				
4/21/2025	4/21/2025				
5/19/2025	5/19/2025				
6/16/2025	6/16/2025				

Invoices

Create Invoice

Invoice Number	Status	Date Invoiced	Invoice Amount	Balance

No Invoices on record.

Payments

Add New Payment

Invoice Number	Date Paid	Check Number	Pay By	Amount

No Payments on record.

Work Order Costs

Work Order #	Transaction Type	Transaction Description	Transaction Date	Costs

No Transactions on record.

File Attachments

Add New File

Delete	Date	Submitted By	Description	Filename	Size

No attachments

(No limit on number of files attached. Total size of all uploaded files must be less than 5MB)

Legend

☑ Required Information
☒ Insurance Expired
Ctrl+MShortcut menu

Need help? Call us 1-877-655-3833

Live chat

Email us!

MONROE TOWNSHIP BOARD OF EDUCATION
HOLD HARMLESS AGREEMENT

Permittee: Monroe Education Foundation

Date of Request: 6/10/24

Date of Event: 6th + Third Monday of Each Month 7/15/24 9/16/24 11/18/24 8/19/24 10/21/24 12/16/24 1/20/25 2/17/25 3/17/25 4/21/25 5/19/25 6/16/25

Business Telephone: (732) 521-1500

Business Address: 423 Buckalew Ave. Monroe Twp NJ 08831

City, State, Zip: Monroe Twp. NJ 08831

Name of Primary Contact: Steven Riback

Primary Contact's Telephone: Confidential personal information

Activity to be held: Meeting

Location to be used by Permittee: H.S. Conf. Room main office

1. In consideration of the Monroe Township Board of Education (the "MTBOE") giving the above-named Permittee certain permission to conduct the above-described "Activity," the Permittee hereby agrees to defend, indemnify, and hold harmless the MTBOE and its officers, employees, representatives, volunteers and/or agents from loss or liability for claims, including worker's compensation, employer's liability or third-party claims, which may arise from or in connection with Permittee's engaging in the Activity.
2. In consideration of being allowed to participate, on behalf of Monroe Ed Foundation, The undersigned acknowledges, appreciates and agrees that participation includes possible exposures to and illness from infectious diseases including, but not limited to, MRSA, Influenza and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist.
3. During the course of the above-described "Activity" and during Permittee's use of the Board's facility, Permittee's use shall conform and comply with:
   1) The Board's policies and regulations;
   2) Local, state, and federal laws, ordinances, executive orders, and mandates;
   3) Rules, guidelines, and mandates issued by local, state and federal health departments, including, but not limited to, all COVID-19 and other health mandates;
   4) Rules of the police and fire department; and
   5) Any other requirements set forth by the Board.
4. Permittee hereby waives all rights of recovery from and releases and forever discharges the MTBOE, its officers, employees, representatives, volunteers and/or agents from any and all claims, including worker's compensation or employer's liability claims, rights of subrogation, demands, causes of action, damages, costs, losses of services and obligations, including attorney's fees, which Permittee may have against the MTBOE, whether known or unknown, which result from, or are in any way related to, Permittee engaging in the Activity.
5. This agreement shall be unlimited as to amount or duration, and it shall be binding upon and inure to the benefit of the parties, their successors, assigns and personal agents and representatives.
6. The foregoing terms shall be governed by and construed and interpreted in accordance with the laws of the State of New Jersey, without regard to its choice of law rules.
7. The undersigned warrants that he/she has authority to execute this Agreement on behalf of Permittee and that it is the Permittee's intention to be legally bound hereby.

SIGNATURE

Permittee Signature: Steven Riback Title: President MEF

Name: Steven Riback Date: 6/3/2024

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 06/03/2024

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 BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME: Benjamin Levenson	
Technology Insurance Associates InsureYourCompany.com/Techsmart Insurance Agency 225 Gordons Corner Road 2B Manalapan NJ 07726	PHONE (A/C, No, Ext): (888) 242-4675	FAX (A/C, No): (732) 862-1177
	E-MAIL ADDRESS: Ben@insureyourcompany.com	

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A : Hartford Underwriters Insurance Company.	30104
INSURER B : HARTFORD FIRE INS CO	19682
INSURER C :	
INSURER D :	
INSURER E :	
INSURER F :	

INSURED
Monroe Education Foundation
423 Buckelew Ave
Monroe Twp NJ 08831

COVERAGES **CERTIFICATE NUMBER:** 202722 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	X COMMERCIAL GENERAL LIABILITY			13SBMBG6WRT	06/03/2024	06/03/2025	EACH OCCURRENCE	$ 1,000,000
	☐ CLAIMS-MADE ☒ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$ 1,000,000
		X	X				MED EXP (Any one person)	$ 10,000
							PERSONAL & ADV INJURY	$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$ 2,000,000
	X POLICY ☐ PRO-JECT ☐ LOC						PRODUCTS - COMP/OP AGG	$ 2,000,000
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO OWNED AUTOS ONLY ☐ SCHEDULED AUTOS HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						BODILY INJURY (Per person)	$
							BODILY INJURY (Per accident)	$
							PROPERTY DAMAGE (Per accident)	$
								$
	☐ UMBRELLA LIAB ☐ OCCUR						EACH OCCURRENCE	$
	☐ EXCESS LIAB ☐ CLAIMS-MADE						AGGREGATE	$
	☐ DED ☐ RETENTION $							$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N						☐ PER STATUTE ☐ OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? ☐ N / A (Mandatory in NH)						E.L. EACH ACCIDENT	$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	$
							E.L. DISEASE - POLICY LIMIT	$
B	Directors & Officers	X	X	13KM0655987-24	06/03/2024	06/03/2025	$1,000,000 Limit / $1,000,000 Aggregate	

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

Certificate holder named as additional insured only if required by written contract. Coverage subject to policy terms and conditions.

CERTIFICATE HOLDER

Monroe Twp Board of Education
423 Buckelew Ave
Monroe Twp NJ 08831

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Benjamin Levenson