



HIBBING CITY COUNCIL
Regular Meeting
Wednesday, June 3, 2026
5:00 PM

Councilor Justin Fosso
Councilor John Schweiberger
Councilor James Bayliss
Councilor Jay Hildenbrand
Councilor Jennifer Hoffman Saccoman
Councilor Chris Whitney
Mayor Pete Hyduke

City Administrator Greg Pruszinske
City Clerk-Dep Admin Candie Seppala
Finance Dir - Treasurer Sheena Mulner
City Attorney Andy Borland
Chief of Police Steve Estey
City Engineer Jesse Story

Members may participate through remote technology

I. CALL TO ORDER:

II. PLEDGE OF ALLEGIANCE:

III. ADDS AND DELETES:

1. ADD: CONSENT AGENDA #5
ADD: DEPARTMENT & COMMITTEE REPORTS # 3a & #4a & #5a

IV. APPROVAL OF THE AGENDA:

V. APPROVAL OF MINUTES:

1. Approve the Minutes of the Hibbing City Council Meeting of May 20, 2026
2. Approve the Minutes of the Hibbing City Council Workshop of May 20, 2026

VI. CONSENT AGENDA:

1. Approve Accounts Payable dated May 27, 2026 checks #182865-182869 in the amount of \$1,300
2. Approve Accounts Payable dated May 28, 2026 check #182870 in the amount of \$250
3. Approve Accounts Payable dated May 29, 2026 checks #182871-182938 and drafts totaling \$847,819.13
4. Approve City Payroll ending May 15, 2026 in the amount of \$643,985.01 (The incorrect dollar amount of \$107,195.16 was approved at the meeting on May 20, 2026)
5. Approve City Payroll ending May 29, 2026 in the amount of \$701,254.34
6. Declare two dump trucks, six lawn mowers and one patch trailer surplus

7. Approval of Request for Proposals (RFP) for Employee Benefits Brokerage and Consulting Services.
8. Authorize City Administrator Pruszinske to sign the Letter of Intent to Purchase Property from CHAA
9. Approve waiving the assessments on Parcel Numbers 141-0010-01660 & 141-0010-01676 in the amount of \$1,906.72 for Garbage and Stormwater charges dating back from 2006 through 2014
10. Authorize the hire of Jimmy Bertram for the Full-Time Equipment Operator I pending pre-employment contingencies.
11. Authorize the Mayor and Council Members to attend the Law Enforcement Torch Run Final Leg for Special Olympics Minnesota / USA Games Ceremony at 9:30 a.m. Wednesday, June 17, at the Memorial Building
12. Authorize the Mayor and Council Members to attend Hibbing Public Utilities' Hibbing South Water Treatment Plant Ribbon Cutting at 1:30 p.m. Wednesday, June 17, at the South Waste Water Treatment Plant
13. Approve the 2026 Massage Therapy License of Sherri Teasck, Massage by Sherri, 11115 Hayes Rd
Massage License #001525
14. Approve the Special Event Permit Application for Oktoberfest on Howard Street, 1st Avenue, and 3rd Avenue on Saturday, September 19, 2026
15. Approve the Raffle Permit Application of the Hibbing Area Chamber of Commerce to hold their raffle on Monday, August 3, 2026 at the Mesaba Country Club
Raffle Permit #26-06-01
16. Approve the Raffle Permit Application Request of Hibbing Track and Field to hold Bingo at the Elk's Lodge July 9, 16, 23, & 30, 2026
Raffle Permit #26-06-02
17. Set the next Hibbing City Council Meeting for Wednesday, June 17, 2026 at 5:00 p.m. in the Hibbing City Hall Council Chamber
18. Set the next Hibbing City Council Workshop Meeting for Wednesday, June 17, 2026 following the 5:00 p.m. Regular City Council Meeting in the Hibbing City Council Chamber

VII. PUBLIC FORUM:

VIII. DEPARTMENT AND COMMITTEE REPORTS:

1. City Engineering Jesse Story

- a. Resolution No. 26-06-01 Creating a Prioritized Bridge Replacement List

2. City Administrator Greg Pruszinske

- a. City Administrator's Report

3. HPU General Manager Luke Peterson

- a. Offer RESOLUTION NO. 26-06-01 MAKING APPLICATION TO THE MINNESOTA PUBLIC FACILITIES AUTHORITY DRINKING WATER REVOLVING FUND FOR THE HYDRANT & VALVE REPLACEMENT, 17TH STREET, 23RD STREET PHASE I 23RD STREET PHASE II, AND 4TH & 4TH WATERMAIN PHASE I IMPROVEMENT PROJECT

4. City Attorney Andy Borland

- a. Authorize the Mayor and the City Clerk-Deputy Administrator to sign the Quit Claim Deed to address a gap in real property involving the Cobb Cook Place

5. City Councilor at Large Justin Fosso

- a. I move to hold further action on the property at 3215 14th Avenue East until a new Economic Developer is in place so they can review the information and help guide the long-term direction

IX. BIDS AND QUOTES:

1. City Engineering Jesse Story

- a. Hibbing Public Safety Building Change Order 5 - \$117,462.47
- b. Award the 2026 Dust Control to Trimark in the amount of \$78,929.28

X. CLOSED SESSIONS: FOR THE PURPOSE OF REAL PROPERTY PARCELS 140-0106-00110 (3125 14TH AVENUE EAST, HIBBING MN 55746) PURSUANT TO MN ST SECTION 13D.05SUB.3(C3)

XI. ADJOURNMENT:

XII. CITY COUNCIL REPORTS

- 1. RAMS
Hibbing Economic Development Authority
Airport Authority
PUC

VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
005814	ANDREW DAY	BOISE FORTE SINGER/MV HONORAR	R	5/27/2026		250.00CR	182865	250.00
005812	DAVID MORRISON JR.	BOISE FORTE SINGER/MV HONORAR	R	5/27/2026		250.00CR	182866	250.00
005815	LANCE KINGBIRD	BOISE FORTE SINGER/MV HONORAR	R	5/27/2026		250.00CR	182867	250.00
005813	NATHAN KING	BOISE FORTE SINGER/MV HONORAR	R	5/27/2026		250.00CR	182868	250.00
005811	VERNON ADAMS	BOISE FORTE SINGER/MV HONORAR	R	5/27/2026		300.00CR	182869	300.00

* * * T O T A L S * * *
 REGULAR CHECKS: 5 0.00 1,300.00 1,300.00
 HANDWRITTEN CHECKS: 0 0.00 0.00 0.00
 PRE-WRITE CHECKS: 0 0.00 0.00 0.00
 DRAFTS: 0 0.00 0.00 0.00
 VOID CHECKS: 0 0.00 0.00 0.00
 NON CHECKS: 0 0.00 0.00 0.00
 CORRECTIONS: 0 0.00 0.00 0.00
 REGISTER TOTALS: 5 0.00 1,300.00 1,300.00

TOTAL ERRORS: 0 TOTAL WARNINGS: 0

MM 5/27/26 CK#S 182865-182869

5/27/2026 3:11 PM
 PACKET: 04089 Regular Payments 5/27/26
 VENDOR SET: 01
 BANK : APBANK US BANK

A / P CHECK REGISTER
 **** CHECK LISTING ****

PAGE: 2

VENDOR NAME / I.D. DESC CHECK CHECK DISCOUNT AMOUNT CHECK CHECK

** POSTING PERIOD RECAP **

FUND	PERIOD	AMOUNT	TYPE	DATE	AMOUNT	NO#	AMOUNT
101	5/2026	1,300.00CR					
ALL		1,300.00CR					

PACKET: 04091 Regular Payments 5/28/26
VENDOR SET: 01
BANK : APBNK US BANK

***** CHECK LISTING *****

VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
005817	ANGELO KINGBIRD I-5/28/2026	BOIS FORTE SINGER - HULL RUST	R	5/28/2026		250.00CR	182870	250.00

* * * T O T A L S * *	NO#	DISCOUNTS	CHECK AMT	TOTAL APPLIED
REGULAR CHECKS:	1	0.00	250.00	250.00
HANDWRITTEN CHECKS:	0	0.00	0.00	0.00
PRE-WRITE CHECKS:	0	0.00	0.00	0.00
DRAFTS:	0	0.00	0.00	0.00
VOID CHECKS:	0	0.00	0.00	0.00
NON CHECKS:	0	0.00	0.00	0.00
CORRECTIONS:	0	0.00	0.00	0.00
REGISTER TOTALS:	1	0.00	250.00	250.00

TOTAL ERRORS: 0 TOTAL WARNINGS: 0

Cassie Tomasetti 5/28/2026
Check # 182 870

VENDOR SET: 01
BANK : APBNK US BANK

**** CHECK LISTING ****

VENDOR NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
** POSTING PERIOD RECAP **							
FUND	PERIOD	AMOUNT					
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101	5/2026	250.00CR					
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ALL		250.00CR					
=====		=====					

VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
1	'WANDA BELICH', I-BELICH 5/21/26	'REFUND'	R	5/29/2026		500.00CR	182871	500.00
003169	ABATESTER, INC I-5/8/26	LIBRARY ASBESTOS REMOVAL	R	5/29/2026		35,201.00CR	182872	35,201.00
005326	ABDO LLP I-523573R	PROF SVCS 12/31/25 AUDIT	R	5/29/2026		21,250.00CR	182873	21,250.00
000658	AIRGAS USA, LLC I-9172059808	OXYGEN INDUSTRIAL 80 CGA 540	R	5/29/2026		56.90CR	182874	56.90
000202	ARROWHEAD LIBRARY SYSTEM C-00015431 I-00015408 I-00015450	MOVIE LICENSE 5/24/26-5/23/27 MOVIE LICENSE 5/24/26-5/23/27 MOVIE LICENSE 5/24/26-5/23/27	R R R	5/29/2026 5/29/2026 5/29/2026		357.00 357.00CR 208.00CR	182875 182875 182875	208.00
005605	ASCENDANCE TRUCKS CENTRAL, LLC I-XA178009706:01 I-XA178010004:01	CONTROL, AUTO TRANSMISSION, A/ KIT-FILTER, 4 SUMP	R R	5/29/2026 5/29/2026		1,677.57CR 97.53CR	182876 182876	1,775.10
005405	BACH YEN RESTAURANT I-000003	SPRING ROLL CLASS	R	5/29/2026		1,350.00CR	182877	1,350.00
002481	BALDWIN SUPPLY CO I-4006987	SHEAR PIN ASSEMBLY x2	R	5/29/2026		68.38CR	182878	68.38
005808	BERRYMAN EQUIPMENT COMPANY I-26-0506	CARBON RING SEALS W/ SPRINGS	R	5/29/2026		456.86CR	182879	456.86
002754	BLUE CROSS BLUE SHIELD OF MN AND BLUE PLUS I-JUNE 26 80000	ACT 1006210280000 JUNE 26	R	5/29/2026		182.00CR	182880	182.00
000360	BOB HECHMOVICH MECHANICAL CONTRACTING INC I-4692	INSTALL WARR PUMP LCK RM MEM B	R	5/29/2026		390.00CR	182881	390.00
005810	BULANJA INVESTMENTS & RANGE CORNICE ROOFING I-5/21/26	HEBA LOAN - NEW EPDM ROOF SYS	R	5/29/2026		40,919.00CR	182882	40,919.00
000046	CARQUEST AUTO PARTS I-5077-217341 I-5077-217344 I-5077-217366 I-5077-217371 I-5077-217374 I-5077-217395 I-5077-217435 I-5077-217447 I-5077-217475	RAZOR BLADE-BOX ADD A CIRCUIT MINI 3030 COMBO 3 STROKE OIL FILTER-HD OIL FILTER/PC 10W30 CONV 1QT AIR 1 EA COBLU BRK PAD FRONTLINE PD SPARK PLUG MUFFLER	R R R R R R R R R	5/29/2026 5/29/2026 5/29/2026 5/29/2026 5/29/2026 5/29/2026 5/29/2026 5/29/2026 5/29/2026		11.52CR 21.82CR 151.98CR 17.77CR 77.24CR 74.94CR 58.84CR 5.03CR 55.48CR	182883 182883 182883 182883 182883 182883 182883 182883 182883	474.62

MMA 5/29/26 CK#S 182871-182938

VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
001433	CITY OF HIBBING	TEMP ZONING PERMIT RACETRACK	R	5/29/2026		50.00CR	182884	50.00
002755	COMO OIL & PROPANE	154.90 PROPANE/PW WARM STOR	R	5/29/2026		255.76CR	182885	255.76
005076	COMPUDYNE, INC. (LEASE)	JUNE 26 ZBOOK MOBILE/FD	R	5/29/2026		249.95CR	182886	
		JUNE 26 CONS ACCT	R	5/29/2026		2,089.67CR	182886	
		JUNE 26 TBOOKS/AMB	R	5/29/2026		725.59CR	182886	
		JUNE 26 PROD 400 G7 LEASE/LIBR	R	5/29/2026		1,108.80CR	182886	4,174.01
003611	CONSOLIDATED COMMUNICATIONS (FMR HICKORY TECH)	ACT 507-052-1052/0 MAY 26	R	5/29/2026		9.96CR	182887	9.96
005818	CORINNA JOANNA LYONS	CATERING-HULL RUST MV EVENT	R	5/29/2026		1,296.00CR	182888	1,296.00
005809	CREGO INC.	BLUEPRINT RACK FOR BLDG&HSG	R	5/29/2026		1,075.00CR	182889	1,075.00
001125	D ERVASTI SALES CO	SWTCBK GRN BOSS/FLD MRKR	R	5/29/2026		3,706.36CR	182890	3,706.36
000683	DEMCO, INC	BOX PAPER PROCESSING LABELS	R	5/29/2026		183.57CR	182891	183.57
000565	EARL F ANDERSEN, INC	ALUM 16" WING BRKT FLAT SIGN	R	5/29/2026		160.95CR	182892	
		16x9 HIP WHT/RD 911 ADD MRKR	R	5/29/2026		106.70CR	182892	
		8'x3#/8'x2.5# GALVANIZED POSTS	R	5/29/2026		925.75CR	182892	1,193.40
005644	EJ EQUIPMENT, INC.	HARNNESS, ADAPTE	R	5/29/2026		231.17CR	182893	231.17
000848	EXCEL BUSINESS SYSTEMS	PD CLICKS/LEASE MAY 26	R	5/29/2026		270.11CR	182894	
		MEM BLDG CLICKS/LEASE MAY 26	R	5/29/2026		263.53CR	182894	
		LIBRARY CLICKS/LEASE MAY 26	R	5/29/2026		190.34CR	182894	723.98
000849	FED EX	FEDEX EXPRESS SVC/EMS MNGT	R	5/29/2026		56.58CR	182895	56.58

VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
000033	FENA ADVERTISING	4MM DBLSD STEEP STAKES/24x18	R	5/29/2026		505.00CR	182896	505.00
000026	FORD OF HIBBING	SWITCH ASY - OIL PRESSURE	R	5/29/2026		23.90CR	182897	23.90
001021	GRAINGER PARTS	DBL EYE WASH STATION	R	5/29/2026		192.00CR	182898	192.00
000533	HIBBING CHRYSLER CENTER	NO RADIO AUDIO/H4	R	5/29/2026		693.40CR	182899	693.40
000488	IMPERIALDADE (FRMLY DALCO)	WIPES WYPALL L30 WHT 1 RL	R	5/29/2026		121.94CR	182900	121.94
005009	INGRAM LIBRARY SERVICES	BOOKS/BUNDLE IXTEND	R	5/29/2026		251.04CR	182901	251.04
003574	INNOVATIVE OFFICE SOLUTIONS, LLC FRMLY NBP	LEATHER GLOVES/SAFETY GLASSES	R	5/29/2026		108.00CR	182902	
		BRUSH, TILT	R	5/29/2026		41.24CR	182902	
		SCRUB DADDY SCRUBBER	R	5/29/2026		88.20CR	182902	
		PAPER #20 LTR/CLIP,PPR, JMBO	R	5/29/2026		52.98CR	182902	290.42
002393	INTERSTATE POWER SYSTEMS INC	B SERV&INSPECT/C1109	R	5/29/2026		1,109.00CR	182903	1,109.00
005552	KRONOS SAASHR, INC.	PAYROLL SVCS 4/1/26-4/30/26	R	5/29/2026		677.54CR	182904	677.54
005718	KUTAK ROCK LLP	PROF SVCS/ADVICE PUBLIC UTILIT	R	5/29/2026		6,799.66CR	182905	6,799.66
000285	L & L RENTALS INC	40/50 AUGER TOOTH/NUT LOCK	R	5/29/2026		85.47CR	182906	
		10" CAS-DOT-ALUM/10" 1/2 BAND	R	5/29/2026		974.38CR	182906	
		10" CAS-DOT-ALUM 16GA SOLD/FT	R	5/29/2026		898.40CR	182906	1,958.25
000334	L & M FLEET SUPPLY	TWL ROLL/GRDN FAB PINS/GRDN HO	R	5/29/2026		50.66CR	182907	
		VEGFATKILL/PUMP SPRAYER	R	5/29/2026		104.48CR	182907	
		ANTIFREEZE/AUTOCLUT HEAD/OIL MI	R	5/29/2026		225.51CR	182907	
		TAMPER 45IN 8X8 & 10X10 STEEL	R	5/29/2026		91.18CR	182907	
		WTR SPRING/TIDE LAUNDRY DETERG	R	5/29/2026		45.33CR	182907	
		PUMP 1-1/2HP CAST IRON	R	5/29/2026		351.49CR	182907	
		SPRAYER PUMP 3GAL HARV KI	R	5/29/2026		36.09CR	182907	
		GROUNDCLEAR RTU 1GAL	R	5/29/2026		33.24CR	182907	
		OUTDOOR CLNR/BATT D 4PK/DISH D	R	5/29/2026		94.55CR	182907	
		DISCNTT CLIP 1/2 /COUPLING 1/2	R	5/29/2026		16.02CR	182907	
		STORG BAGS QUART/GALLON	R	5/29/2026		15.16CR	182907	
		ROPE SISAL 1/2" x 5'	R	5/29/2026		14.24CR	182907	
		SPOTLIGHT/PLUNGER/WRENCH SET	R	5/29/2026		135.82CR	182907	

VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
000893	LAKE COUNTRY POWER I-MAY 2026	MAY 2026 LAKE COUNTRY POWER	R	5/29/2026		20,028.24CR	182908	20,028.24
002751	LOWES HOME CENTERS, INC I-99006569174 APR 26	ACT 99006569174 APR 26	R	5/29/2026		765.19CR	182909	765.19
002867	MEDICOM LLC I-3244 MAY 26	ACT 8384923250093244 MAY 26	R	5/29/2026		371.72CR	182910	371.72
003521	MEDICAREBLUE RX I-JUNE 2026	JUNE 2026 MEDICARE RX BILLING	R	5/29/2026		31,291.70CR	182911	31,291.70
001597	MESABI ANIMAL HOSPITAL, LLC I-255269 I-255338	HAC FOR ARCHIT&PRANCER 5/14/26 HAC FOR CAESAR&SAMSON 5/15/26	R	5/29/2026		617.50CR 272.15CR	182912 182912	889.65
005787	METLIFE I-90139441	METLIFE AMS JUNE 2026	R	5/29/2026		116.80CR	182913	116.80
000339	METRO SALES INC I-INV3092611	IMC2000 LIBR COPIER MAY 26	R	5/29/2026		155.46CR	182914	155.46
005793	METROPOLITAN LIFE INSURANCE COMPANY I-5/22/26	MAY 26 ADA/PWL/PFL	R	5/29/2026		7,375.12CR	182915	7,375.12
003847	MICROMARKETING LLC I-1007401	STARSLIDE (LPTP)	R	5/29/2026		28.80CR	182916	28.80
000492	MIDWEST TAPE I-508834756 I-508867952 I-508867954	DVDS DVDS DVDS	R	5/29/2026		154.99CR 79.47CR 124.39CR	182917 182917 182917	358.85
005816	MN DEPT. OF EMPLOYMENT & ECONOMIC DEVELOPMENT I-5/28/26	ID# AGREEMENT 215487 RTN INTER	R	5/29/2026		239.33CR	182918	239.33
003785	MOOVE NA DISTRIBUTION LLC (FRMLY PETROCHOICE) I-52226000	MOBILE CENTAUR XHP 462	R	5/29/2026		337.84CR	182919	337.84

VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
000570	MTI DISTRIBUTING I-1518736-00 I-1518736-01	WASHER-THRUST/SPACER/SCREW SCREW-HH	R	5/29/2026 5/29/2026		99.48CR 29.18CR	182920 182920	128.66
002710	NAPA SUPPLY OF HIBBING I-521908	PREM START FL 11 OZ	R	5/29/2026		29.97CR	182921	29.97
005785	NORTHERN PLUMBING & AIR LLC I-1408	FTX HOLES IN WTR PIPE/BENN PRK	R	5/29/2026		560.76CR	182922	560.76
000414	NTS I-INV6169 I-INV6225 I-INV6243	400 BLK ADDNL ASBESTOS SAMPLE PSB PH2/REP PROD/PRO MGMT/FLD NO HBG INDUSTRIAL PK GEOTECH	R R R	5/29/2026 5/29/2026 5/29/2026		604.23CR 18,643.56CR 10,483.25CR	182923 182923 182923	29,731.04
002935	O'REILLY AUTO PARTS I-1824-250677 I-1824-250926	55GL DREGASER ADD A CIRCVI	R R	5/29/2026 5/29/2026		419.99CR 21.98CR	182924 182924	441.97
000206	PUBLIC UTILITIES COMM I-4/1/26-4/30/26	4/1/26-4/30/26 UTILITIES PMT	R	5/29/2026		67,215.22CR	182925	67,215.22
000206	PUBLIC UTILITIES COMM I-5/27/26	PUC PFA REQUEST #20	R	5/29/2026		226,397.87CR	182926	226,397.87
000559	QUILL CORPORATION I-48801604	SCRATCH PADS/RULED PADS	R	5/29/2026		38.18CR	182927	38.18
000077	RADKO IRON & SUPPLY INC I-30354/1	MISC TOOLS AND SUPPLIES	R	5/29/2026		6.98CR	182928	6.98
002567	RDO EQUIPMENT CO I-P6685449	POCKET-CUT/5/8-18x2-1/8/TEETH	R	5/29/2026		1,371.62CR	182929	1,371.62
005244	RMB ENVIRONMENTAL LABORATORIES, INC. I-D087236 I-D088093 I-D088436 I-D088541 I-D088626 I-D088793	NO INFLUENT & EFFLUENT 4/7/26 INFLUENT & EFFLUENT 4/28/26 INFLUENT & EFFLUENT 5/5/26 INFLUENT & EFFLUENT 5/6/26 INFLUENT & EFFLUENT 5/7/26 INFLUENT & EFFLUENT 5/12/26	R R R R R R	5/29/2026 5/29/2026 5/29/2026 5/29/2026 5/29/2026 5/29/2026		310.16CR 127.07CR 158.42CR 127.07CR 127.07CR 135.43CR	182930 182930 182930 182930 182930 182930	985.22

VENDOR	NAME / I.D.	DESC	CHECK TYPE	CHECK DATE	DISCOUNT	AMOUNT	CHECK NO#	CHECK AMOUNT
000135	ROAD MACHINERY SUPPLIES	LIFT ASSY/BOLT PLATE/TIE BOLT	R	5/29/2026		5,849.79CR	182931	5,849.79
003003	ST LOUIS COUNTY PUBLIC WORKS HIBBING	AMP 4/26 DETICING MATERIALS	R	5/29/2026		133.11CR	182932	133.11
000722	SUPER ONE FOODS - RETAIL ACCOUNTING	MAY LUNCH&RN/WTR/FRUIT/VEGGIE	R	5/29/2026		94.73CR	182933	
		OFFICE RAISED DONUT	R	5/29/2026		28.88CR	182933	
		OFFICE RAISED DONUTS	R	5/29/2026		28.88CR	182933	
		OFFICE RAISED DONUT	R	5/29/2026		28.88CR	182933	
		OFFICE RAISED DONUT	R	5/29/2026		28.88CR	182933	210.25
002898	TESSMAN COMPANY	RUNWAY 1QT 12/CS	R	5/29/2026		63.20CR	182934	63.20
003754	TITAN MACHINERY	LIGHT ASSY	R	5/29/2026		149.15	182935	
		LAMP FLASHER	R	5/29/2026		74.85CR	182935	87.40
003130	TONER PLANET PACK N SHIP	UPS GRND&USPS FIRST CLASS SHIP	R	5/29/2026		49.15CR	182936	49.15
004082	WETLAND BANK ADMINISTRATOR	WITHDRAW 1.1390 CR TYPE 3/CCH	R	5/29/2026		1,436.26CR	182937	1,436.26
000633	ZIEGLER, INC	LAB/MJGE TO REPAIR EQUIPMENT	R	5/29/2026		683.44CR	182938	683.44

* * T O T A L S * *
 REGULAR CHECKS: 68 NO# DISCOUNTS CHECK AMT TOTAL APPLIED
 HANDWRITTEN CHECKS: 0 0.00 527,357.85 527,357.85
 PRE-WRITE CHECKS: 0 0.00 0.00 0.00
 DRAFTS: 0 0.00 0.00 0.00
 VOID CHECKS: 0 0.00 0.00 0.00
 NON CHECKS: 0 0.00 0.00 0.00
 CORRECTIONS: 0 0.00 0.00 0.00
 REGISTER TOTALS: 68 0.00 527,357.85 527,357.85

TOTAL ERRORS: 0
 TOTAL WARNINGS: 0

5/29/2026 10:09 AM
 PACKET: 04092 Regular Payments 5/29/26
 VENDOR SET: 01
 BANK : APBANK US BANK

A / P CHECK REGISTER
 **** CHECK LISTING ****

PAGE: 7

VENDOR NAME / I.D. DESC CHECK TYPE CHECK DATE DISCOUNT AMOUNT CHECK NO# CHECK AMOUNT

** POSTING PERIOD RECAP **

FUND	PERIOD	AMOUNT
101	5/2026	374,388.98CR
211	5/2026	8,502.91CR
250	5/2026	40,919.00CR
255	5/2026	10,492.65CR
400	5/2026	35,201.00CR
405	5/2026	1,436.26CR
418	5/2026	604.23CR
419	5/2026	18,643.56CR
431	5/2026	50.00CR
602	5/2026	33,475.84CR
603	5/2026	3,643.42CR

=====
 ALL 527,357.85CR
 =====

VENDOR	NAME / I.D.	DESC	ITEM TYPE	PAID DATE	DISCOUNT	AMOUNT	ITEM NO#	ITEM AMOUNT
005708	AMERHEALTH ADMINISTRATORS I-7010247239	MM PMT&SMITH RX 3/2&MED 5/18	D	5/29/2026		282,861.09CR	002182	282,861.09
005790	HEALLIA, INC. I-1M4Z1PPF-0020	TCO REIMBUR 5/10/26-5/16/26	D	5/29/2026		15.00CR	002183	15.00
005790	HEALLIA, INC. I-1M4Z1PPF-0021	TCO REIMBUR 5/17/26-5/23/26	D	5/29/2026		69.54CR	002184	69.54
000726	US BANK FARGO I-5/18/26	APR 2026 LANDFILL TIPPING FEES	D	5/29/2026		36,555.65CR	002185	36,555.65
005476	WEX HEALTH INC. I-5/1/26 J HAGER	2026 YEMBA/JASON HAGER SNG-FAM	D	5/29/2026		960.00CR	002186	960.00

* * * T O T A L S * * *

REGULAR CHECKS: 0 NO# 0.00 DISCOUNTS CHECK AMT TOTAL APPLIED

HANDWRITTEN CHECKS: 0 0.00 0.00 0.00

PRE-WRITE CHECKS: 0 0.00 0.00 0.00

DRAFTS: 5 320,461.28 0.00 320,461.28

VOID CHECKS: 0 0.00 0.00 0.00

NON CHECKS: 0 0.00 0.00 0.00

CORRECTIONS: 0 0.00 0.00 0.00

REGISTER TOTALS: 5 320,461.28 0.00 320,461.28

TOTAL ERRORS: 0 TOTAL WARNINGS: 0

MM 5/29/26 DRAFTS

CITY OF HIBBING (6195543)
 401 E 21ST ST
 HIBBING, MN 55746-1854
 United States
 41-6005232

Payroll Recap & Funding
 Biweekly Regular 05/22/2026

Pay Date: 05/22/2026

Payroll Overview

Payroll	Biweekly Regular 05/22/2026
Pay Date	05/22/2026
# Employees	163
# Paid Employees	163
# Regular	163
# Pay Periods	1
Base Compensation Changes	8
New Hires	4
Rehires	2

Employee Payments

	#	EE's	\$ Amount
Direct Deposits Debited	222	162	268,980.16 ^D
Total			268,980.16
(D) POD6 UKG Payroll Services Admin Debit			-268,980.16
Your Remaining Bank Account Liability			0.00
Vouchers Printed	0		
Vouchers Suppressed	0		

Taxes

	EIN	EE's	\$ Amount
FIT/EE	41-6005232	139	38,901.98
FICA/ER	41-6005232	105	13,289.58
FICA/EE	41-6005232	105	13,289.58
MEDI/ER	41-6005232	163	5,878.72
MEDI/EE	41-6005232	163	5,878.72
SIT:MN/EE	8022766	141	17,822.00
Total			95,060.58
Your Remaining Tax Liability			95,060.58

Vendor Liabilities

	EE's	\$ Amount
AFLAC-WWHQ	5	302.25
AFSCME MN COUNCIL 65	52	3,381.12 ^C
City of Hibbing Insurance	120	161,169.13 ^D
City of Hibbing PFML	163	3,510.58 ^D
EMPOWER	64	9,415.34
FIREFIGHTERS LOCAL #173 C/O HI	24	1,952.64 ^C
HIBBING POLICE ASSOCIATION	15	150.00 ^D
Lincoln Financial Group	17	4,085.08
MAPE UNION ATTN: JULIE LEE	6	431.08 ^C
MINNESOTA TEAMSTERS NO. 320	3	381.00 ^C
MN CHILD SUPPORT PAYMENT CEN	2	765.56 ^D
MN PERA	136	91,272.49
MN PUBLIC EMPLOYEES ASSOCIATI	21	1,008.00 ^C
NATIONWIDE	13	2,120.00
Total		279,944.27
(D) POD6 UKG Payroll Services Admin Debit		-165,595.27
(C) Vendor Checks		-7,153.84
Your Remaining Vendor Liability		107,195.16

Total

--More--

Total - Continued

	Total	643,985.01
POD6 UKG Payroll Services Admin Debit		-434,575.43
Total of Your Responsibility		209,409.58

Recap

POD6 UKG Payroll S	Date	Bank Account #	\$ Amount
Vendor Payment SPA	05/21/2026	x0087	165,595.27
Empl. Dir. Dep. SPA	05/21/2026	x0087	268,980.16
Total Debits			434,575.43

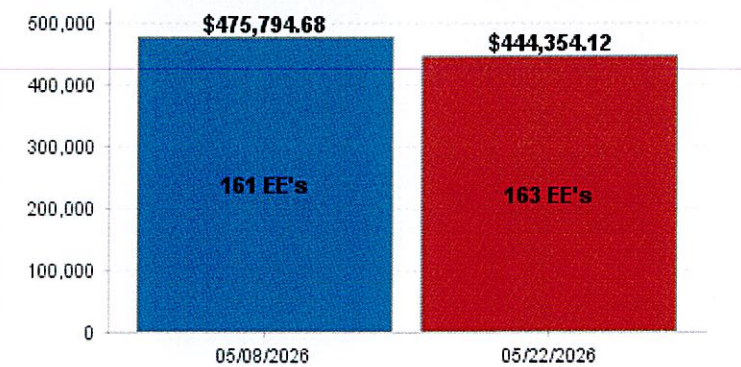
Cash Requirements: x0087

	\$ Amount
Vendor Payment SPA	165,595.27
Vendor Checks	7,153.84
Tax Payment	95,060.58
Empl. Dir. Dep. SPA	268,980.16
Total	536,789.85

General Ledger Summary

	Debit/Exp.	Credit/Liab.
Earning	445,822.48	682.91
ER Deduction	180,288.11	610.97
ER Tax (Offset)	19,168.30	
ER Deduction (Offset)	610.97	180,288.11
Deduction	152.74	100,419.87
ER Tax		19,168.30
Tax		75,892.28
Direct Deposit		268,980.16
	646,042.60	646,042.60

Comparison To Last Pay Period - Gross Wages



PR# 11-26
5/2/26-5/15/26
Paid 5/22/26

Grouped By: None
 Sorted By: None
 Filtered By: None

Kronos SaaShr, Inc.
 City of Hibbing



Generated: 05/20/2026 01:38p
 Generated By: OWEN D. WALTERS
 Page 1 of 2

City of Hibbing
Request for Proposals (RFP)
Employee Benefits Brokerage & Consulting Services
401 East 21st Street, Hibbing, MN 55746
Issued: June 4, 2026
Proposals Due: June 30, 2026, at 4:00 p.m.



Contact Person:

Angela Kleffman, Human Resources Director
City of Hibbing, 401 East 21st Street, Hibbing, MN 55746
Cell: (218) 295-2275
Email: angelakleffman@hibbingmn.gov

1. Introduction

The City of Hibbing is seeking proposals from qualified insurance brokers to provide comprehensive employee benefits brokerage and consulting services. The selected firm will be expected to play a key role in cost containment, regulatory compliance, enhancement of benefit quality and plan design, and the delivery of clear and effective communication to employees, City administration, and City Council.

2. Current Program Overview

- Renewal: January 1, 2027
- Current plans include:
 - Self-Funded Health Plan (Pareto Captive)
 - Active Plan: \$1,200 / \$2,400 deductible with VEBA
 - Retiree Plan: \$0 PPO
 - Group Medicare Plans (BCBS)
 - Dental
 - Life
 - LTD
 - FSA (Medical & Dependent Care)
 - Absence Management (FMLA, ADA)
 - MNPL
 - SIHRA Spousal Incentive Plan
 - Wellness Program
 - COBRA Administration

Approximate Population:

- 145 active employees and retirees enrolled in the \$1,200/\$2,400 VEBA plan
 - 360 covered lives
- 155 Group Medicare Members

3. Scope of Services

- Strategic planning and cost containment
- Renewal negotiations and underwriting
- Plan design and benchmarking
- Compliance Support (ACA, COBRA, HIPAA, Medicare, Minnesota public sector requirements, and other applicable federal and state regulations)
- Vendor management
- Claims analysis and reporting
- Employee communication and enrollment support
- Wellness and Medicare program support
- Reporting support

4. Qualifications

- Public sector and union experience
- Self-funded and captive expertise
- Medicare/retiree experience
- Strong compliance knowledge
- Proven cost-saving strategies
- Ability to effectively present recommendations and reporting to City administration, City Council, and employee committees
- Ability to meet employer and employee service needs while providing timely, responsive access to experienced consultants

5. Proposal Questionnaire

- Describe your firm's experience working with municipal and unionized groups.
- Detail your experience with self-funded health plans and captive arrangements, including Pareto or similar captives.
- Describe your service model, including roles and responsibilities of the service team.
- Describe your approach to providing timely and responsive service to both the City and employees.
- Describe your approach to cost containment and long-term strategy and provide examples of how you have reduced costs while maintaining or improving benefits for similar clients.
- What data sources and methodologies do you use to develop cost projections aligned with the City's fiscal goals? Please describe your process and the deliverables you provide for quarterly and annual health plan performance reviews.
- How do you keep clients informed of regulatory changes and ensure compliance?
- Describe your approach to evaluating and managing third-party vendors (e.g., TPA, PBM, wellness, stop-loss).
- How do you ensure performance and accountability?

- Describe your experience supporting retiree health plans and Group Medicare programs, including strategies for cost management and member support.
- Describe your approach to employee education and communication, including open enrollment and addressing employee benefit questions and day-to-day issues.
- Describe your transition and implementation process, including timeline, key milestones, and how you ensure continuity of service during a broker transition.
- Describe any Broker of Record (BOR) requirements, timing considerations, or limitations that may affect implementation of your proposed services.
- Provide examples of standard reports and dashboards available to clients.
- Provide a detailed description of your fee structure and all forms of compensation. Clearly identify any additional fees associated with value-added services, consulting, implementation, or educational resources, and disclose all commissions, incentives, and any potential conflicts of interest.
- Provide at least three public sector client references.

6. Evaluation Criteria

Proposals will be evaluated on:

- Experience & Qualifications
- Public Sector/Union Expertise
- Service Model & Responsiveness
- Cost & Fee Structure
- Innovation & Value-Added Services
- References

7. Selection Process and Timeline

- RFP Released: June 4, 2026
- Deadline for Questions: June 12, 2026
- Responses to Questions Issued: June 22, 2026
- Proposals Due: June 30, 2026, at 4 p.m.

The City may conduct interviews, request additional information, and engage in discussions or negotiations with selected respondents as part of the evaluation process.

8. Disclaimers

This Request for Proposals (RFP) is issued solely for the purpose of obtaining information and proposals from qualified firms. This RFP does not constitute a contract, offer, or commitment of any kind by the City of Hibbing. The City reserves the right to accept or reject any or all proposals, waive informalities or irregularities, request additional information, negotiate with one or more respondents, or cancel this RFP at any time without obligation or liability. Issuance of this RFP and receipt of proposals does not

obligate the City to award a contract or pay any costs incurred in the preparation or submission of proposals.

9. Submission Instructions

Please submit one (1) electronic copy (PDF format) of your proposal by the due date to the contact listed above.

Proposals should be organized in a manner that follows the order of the Proposal Questionnaire and include all requested information.



City of Hibbing
401 East 21st Street
Hibbing, MN 55746

June 3, 2026
Chisholm Hibbing Airport Authority
11038 MN-37
Hibbing, MN 55746

Subject: Letter of Intent to Purchase Property from CHAA

Dear Chair LaTendresse and Authority Members,

The City of Hibbing (“City”) hereby submits this Letter of Intent (“LOI”) to formally express its interest in purchasing the property located at 11215 MN-37, Hibbing, MN 55746 currently owned by the Chisholm-Hibbing Airport Authority (“CHAA”). This LOI sets forth the preliminary terms and conditions under which the City proposes to proceed with the acquisition, contingent upon Federal Aviation Administration (“FAA”) approval of the associated land release and compliance with all applicable regulations.

1. Purchase Terms and Conditions

- No First Right of Refusal: the CHAA and City of Hibbing acknowledges and agrees that no first right of refusal will be associated with this transaction.
- Proposed Timeline: The City proposes to complete the due diligence, FAA land release process, and final closing of the property purchase within thirty-six (36) months of execution of a formal Purchase Agreement, contingent on FAA approval timelines.
- Intended Use of Property After Sale: Upon acquisition, the City of Hibbing will divest the property with the intention of a third party using it as an animal intake or animal shelter or pound or similar, or commercial development, consistent with local planning and zoning ordinances. This use will remain compatible with adjacent airport operations and FAA land use policies.

2. FAA Land Release Conditions

- Fair Market Value and Land Release Compliance: The CHAA and the City of Hibbing agree to negotiate in good faith by using an FAA compliant appraisal as a basis. The City accepts the FAA land release conditions as stipulated in FAA Order 5190.6B, and the guidance materials provided, including adherence to the federal land disposal and public benefit conveyance protocols.
- Consulting, Legal, and Survey Fee Reimbursement: The City agrees to reimburse CHAA for any consulting, legal, and survey fees incurred that are necessary to process the Federal land release, subject to proper documentation, itemized and invoicing. A formal estimate of cost shall be provided to the City by the CHAA prior to engagement.



3. FAA Documentation and Requirements

The City understands that the following documentation and justifications are necessary for FAA approval of the land release:

- Description of how the property was acquired (grant agreements, conveyance documents)
- Description of current use and condition of the property
- Original acquisition purpose
- Survey drawing and legal description of proposed land release area
- Justification demonstrating the property is no longer needed for public airport purposes (as per ALP/Master Plan)
- Statement on benefits to civil aviation
- Supporting materials including maps, aerial photos, and relevant development plans
- Appraisal report and detailed terms of sale
- Documentation on the use of sale proceeds (e.g., reinvestment into AIP-eligible airport projects)
- Comparative analysis of benefits from sale vs. continued lease/rental income
- Height limit assessment for land use compatibility
- Updated Exhibit A
- NEPA environmental review documentation

4. Next Steps

Upon mutual agreement on the terms outlined in this LOI, the City will work in good faith with CHAA to execute a formal Purchase Agreement and initiate the FAA land release application process. This LOI is non-binding and intended solely to establish a framework for further discussions and actions. Failure to execute a Purchase Agreement within the specified timeframe renders this agreement void. This letter of intent does not oblige the City of Hibbing to perform in any way.

Should you have any questions or require additional information, please contact me at [email/phone].

Sincerely,

Greg Pruszinske
City Administrator
City of Hibbing

City of Hibbing
SPECIAL EVENT Permit Application

All applications for Special Events to be held within the City of Hibbing shall be reviewed by the City departments that will be involved during the operation of the Event. Prior to review, all application information must be completed. After Departments Review, the applications will be submitted to the City Council for final approval.

Deadlines: Applications must be submitted 60 days prior to the event.

RETURN APPLICATION to the City Hall Council Office
DATE RECEIVED BY COUNCIL OFFICE: _____

Name/Description of Event:	Oktoberfest
Date of Event:	9/19/2026
Location of Event:	Howard, 1 st , and 3 rd Ave
Organizer:	Rena Freeman
Organizer Contact Information:	Cell Phone: 218-969-3561

Department Review. If applicable and where noted in the application form, the event organizer will also need to contact City department heads

DEPARTMENT	CHECK IN WITH CITY CONTACTS TO DISCUSS YOUR NEEDS FOR YOUR EVENT	CONTACT #
Hibbing Police Dept.	Police Chief Steve Estey	218-262-0285
Fire Department	Fire Marshal Shawn Nickila	218-421-3942
Sanitation Dept.	John Yuretich/Bob Kobal	218-362-5991
Public Works Dept.	John Yuretich/Bob Kobal	218-362-5991
City Services	Nick Arola	218-362-5951

City of Hibbing

SPECIAL EVENT PERMIT APPLICATION

Applications MUST BE FILLED OUT COMPLETELY & ALL NECESSARY REQUIREMENTS ATTACHED

LOCATION OF EVENT: The Iron House, Sammy's, Checos', Palmers, Homer, Boomtown, Mike's, Sportsman's + ?

TITLE, PURPOSE, AND BRIEF DESCRIPTION OF EVENT:

Players will compete in a series of games & rotate to different themed bars. There will be an ending celebration by one central location.

Date of Event: 9/19/26

Refer media or citizen inquires to:

Rena Freeman or Brita Baratto Telephone: 218 969 3561

APPLICANT AUTHORIZATION:

Attach a written communication from the organization(s) in whose name the event will be advertised which authorizes you, the applicant, to apply for this special event permit on its or their behalf.

Applicants Name & Title:

Rena Freeman, The Iron House, owner

Address: 112 E Howard St Hibbing Mn 55740

Mailing Address: 3114 2nd Ave E Hibbing, MN

Affiliation:

Telephone: (day) 218-969-3561 (evening) _____

EVENT PRINCIPALS:

On the next sheet, please list names, addresses, and telephone numbers of all the principals involved in any way in the proposed special event. Include professional event organizers, event promoters, financial underwriters, commercial sponsors, charitable agencies for whose benefits the event are being produced, the organizations in whose name the event is being advertised, and all other administratively, financially, or organizationally involved as principals in the production of the proposed special event. Make additional copies of the next sheet as needed to include all the principals involved in the proposed special event.

All Hibbing Bars [NOT Mr Nick's The Do you]

Name: * will be including community/ local businesses

Organization/Business/Agency/Affiliation:

Mailing Address:

Daytime Phone: Evening Phone: Other:

Title and Functional Responsibility with Regard to the Event:

Will this person have authority to cancel or greatly modify event plans? Yes No

Will this person be present at the event area or areas and in charge of the event at all times Yes No

Name:

Organization/Business/Agency/Affiliation:

Mailing Address:

Daytime Phone: Evening Phone: Other:

Title and Functional Responsibility with Regard to the Event:

Will this person have authority to cancel or greatly modify event plans? Yes No

Will this person be present at the event area or areas and in charge of the event at all times Yes No

Name:

Organization/Business/Agency/Affiliation:

Mailing Address:

Daytime Phone: Evening Phone: Other:

Title and Functional Responsibility with Regard to the Event:

Will this person have authority to cancel or greatly modify event plans? Yes No

Will this person be present at the event area or areas and in charge of the event at all times Yes No

REQUESTED EVENT COMPONENTS:	
REQUESTED DAY AND DATE (first choice):	
Alternate days and dates:	
•	<u>N/A</u>
•	_____
•	_____
REQUESTED HOURS OF OPERATION:	
From: <u>9</u>	<u>a.m.</u> / p.m. To <u>12</u> <u>a.m.</u> / p.m.
SET UP beginning Day and Date	
**Indicate the time at which any unit of an event will begin to assemble at such area	
Day: <u>9/19/26</u>	Time: <u>9</u> <u>a.m.</u> / p.m.
Describe the number and type of animals to be used in the Event <input checked="" type="checkbox"/> Not Applicable	
**If the event is a Circus, Carnival, Menagerie, or Like Exhibition: The license fee payable to the City of Hibbing is \$60.00 for the first day and \$12.00 for each additional day.	
<input type="checkbox"/> If applicable, license fee to be included when submitting the application	
See City Code Chapter 6, Section 6.23 for additional information.	
Attach a Draft of the Entry Form for Participants / Spectators	<input type="checkbox"/> Attached
Anticipated number of Participants: <u>100</u>	Spectators: <u>100 + 4</u>
**INSURANCE	
<input type="checkbox"/> Attach to this application either an Insurance policy or a certificate of insurance including the policy number, amount, and the provision that the City of Hibbing is included as an additional insured.	

SANITATION:	
<input type="checkbox"/> Attach your "Plan for Clean-Up / Material Preservation". <i>Will need 4 or 5 city garbage</i>	<i>Home, Sammy's, Mike's, Palmers</i>
<input type="checkbox"/> Include number, type and location of trash containers to be provided for the event.	
<input type="checkbox"/> Indicate who and how many will be responsible for emptying and cleaning up around containers during the event. <i>All bars</i>	
<input type="checkbox"/> Indicate who and how many will be responsible for cleaning up after animals if they are used in the event.	
<input type="checkbox"/> Indicate who and how many will be responsible for cleaning up the event after the event. <i>All bars help</i>	
<input type="checkbox"/> Described the number, type and location of portable toilets to be provided for the event (or permanent toilets to be used for the event). <i>TBD</i>	
<input type="checkbox"/> Include any other plan you have for ensuring post-event cleanliness and material preservation of city facilities, equipment, premises and streets.	
MAP (Noting the following items):	
Check off below items that apply to your event.	
<i>Indicate these items on attached separate maps. Use, where necessary, a to-scale drawing.</i>	
<input type="checkbox"/> If a route is involved, the beginning area, the route (indicate directions with arrows), and the finished area; <i>Teams will rotate between bars</i>	<i>1st Ave - Howard Court</i>
<input type="checkbox"/> If a route is involved, the places where buses or trains need to be considered;	
<input type="checkbox"/> If a route is involved, it will expedite approval of your event if you attach separate maps giving two or three alternate routes;	
<input type="checkbox"/> Indicate if Roads and/or Sidewalks will be Closed The applicant will be required to explain how motorists and business owners and residents will be notified in advance of the event. <i>Will provide by 6/13/26</i>	
<input type="checkbox"/> Barricades, cones, safety, portable parking signs (note location - <i>provided by Public Works</i>)	
<input type="checkbox"/> If a relay is involved, indicate hand-off points;	
<input type="checkbox"/> Entertainment or stage locations (grandstand operators should provide you with a to-scale drawing; <i>TBD 6/13/26</i>	
<input type="checkbox"/> Alcoholic beverage concession areas; <i>location must be specified All inside bars</i>	
<input type="checkbox"/> Non alcoholic concession areas;	
<input type="checkbox"/> Food concession areas; <i>TBD</i>	
<input type="checkbox"/> General merchandise concession areas; <i>TBD</i>	
<input type="checkbox"/> Portable toilet facilities (indicate number); <i>4-5 TBD</i>	
<input type="checkbox"/> First aid facilities;	
<input type="checkbox"/> Event participant and/or spectator parking areas; <i>Avenues</i>	
<input type="checkbox"/> Event organizers command post; <i>1 at each game location</i>	
<input type="checkbox"/> Fireworks or pyrotechnics site; (Must contact Fire Marshal)	
<input type="checkbox"/> Vehicle fuel handling site;	
<input type="checkbox"/> Cooking areas;	
<input type="checkbox"/> Tables, enclosures, etc.;	

<input type="checkbox"/> Temporary or permanent structures constructed for the event;
<input type="checkbox"/> Site of electrical wiring to be installed for the event; -
<input type="checkbox"/> Trash containers (indicate number): <u>TBD 4-5</u>
<input type="checkbox"/> Other. Please describe:

AVAILABILITY OF FOOD, BEVERAGES AND/OR ENTERTAINMENT

ENTERTAINMENT:	<p>If there will be music, sound amplification or any other noise impact, please describe, including the intended hours of the music, sound or noise.</p> <p><u>11 AM - 11 PM There will be a stage w/ activities (ie: BINGO) during day & street dance @ night</u></p>
	<p>If a casino party, a dance or live entertainment is a part of your event, please describe:</p>
	<p>Please describe all of the activities of your event for which a license is required, for example, a cabaret license, a caterer's license, a general merchandise concession license, peddler or transient merchant license, etc. (attach to this application all required licenses)</p>

ALCOHOL:	<p>Alcoholic Beverages to be served? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>Temporary Liquor License Applied For?</p> <p>BEER <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>COMMUNITY FESTIVAL LICENSE <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>TEMPORARY ON SALE <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
	<p>Organization Applying for License for Alcoholic Beverages:</p>
	<p>Describe what system will be used to ensure that alcoholic beverages will be consumed only by those persons 21 years and older.</p> <p><u>ID All participants & give out wristbands</u></p>
	<p>Describe how, where, when and by whom the alcoholic beverages will be served.</p> <p><u>Inside Bars</u></p>
<p>List of people who will be selling the alcohol:</p> <p><u>All participating Bars</u></p>	
<p>Have they attended server training? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	

FOOD:	Food and/or non-alcoholic beverages to be served? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Describe sanitation measures, food handling procedures and the nature of the food (such as pre-packaged foods, hot dogs, pre-mixed sodas, unpeeled fruit, raw meats, vegetables, fish or peeled and cut fruits). <i>Determined by each indiv. food establishment</i>
	A health permit may be required from either the State of MN or St. Louis County. <input type="checkbox"/> Attach a copy of your health permit to this application.
	If you intend to <u>cook</u> food in the event area, describe your area layout, including fuel or If electrical sources to be used.

SECURITY AND SAFETY PROCEDURES:	
<p>The Hibbing Police Department will determine the minimum number of private security guards and police officers required to adequately staff your event. If the prescribed number of private security guards is not provided or proves inadequate, the Hibbing Police Department maintains the right to shut down any or all components of the event and/or to provide additional police services that may be billed directly to the host organization.</p>	
<p>Describe your proposed procedures for set-up operation, internal security and crowd control.</p> <p><i>No security hired. did not need last year. Potentially look into hiring 1-2 this year w/ live music</i></p>	
<p>If the event is to occur at night, describe how you are going to light the event area in order to increase the safety of participants and spectators coming to and leaving the event.</p> <p><i>Stage will have lighting</i></p>	
<p>If your event includes vehicles or animals, describe the minimum and maximum speeds of the event and the minimum and maximum intervals of space to be maintained between units.</p> <p style="text-align: center;">X</p>	
<p><input type="checkbox"/> Attach to this application a copy of your building permit (or permits) if you are installing any electrical wiring on a temporary or permanent basis and/or if you are building any temporary or permanent structures such as bleachers, scaffolding, a grandstand, reviewing stands, stages or platforms.</p>	

Attach a copy of your fire department permit or permits to this application if you will use parade floats; an open flame; fireworks or pyrotechnics; vehicle fuels; cooking facilities; enclosures (and tables within those enclosures), tents, air-supported structures, canopies, or any fabric shelters.

Give names, address and phone numbers of the agency or agencies which will provide first aid staff and equipment. Attach additional sheets if necessary.

Name of Agency: _____
Name of Representative: _____
Address: _____
Phone Numbers: _____

Indicate medical services that will provided for the event.

Medical Service

How Provided:

- Ambulance
- Doctors
- Nurses
- Paramedics

As needed basis

HIBBING FIRE DEPARTMENT REQUIREMENTS

In accordance with Minnesota State Fire Code Section 403.1 the Fire Marshal shall evaluate the need for requiring fire personnel to be in attendance of a public assembly for the following reasons: keep diligent watch for fires, obstruction to means of egress and other hazards and shall take prompt measures for remediation of hazards. The Hibbing Fire Marshal maintains the right to require fire service personnel to staff special events that are construed as a potential hazard to the public safety. These additional services may be billed directly to the host.

In accordance with Minnesota State Fire Code Section 403.2; for an indoor special permit public assembly, the Fire Marshal shall receive a floor plan with dimensions of the floor, seating, and exit widths. A total number of participants shall be submitted in order to evaluate the occupancy load and safe egress out of the building. The Fire Marshal shall assign an occupancy load for the event which shall be adhered to. All event floor plan layouts must be approved by the Fire Marshal and all special permit public events are subject to inspection by the Fire Marshal the day of the event. The Fire Marshal and/or designee reserves the right, under MN State Fire code, to stop and/or remedy any unsafe actions up to and including the cancelling of the event.

VENDORS OR CONCESSIONAIRES:

Describe what vendors or concessionaires you will allow in conjunction with the event and the purpose or purposes of these concessions.

We will be asking for as much community involvement as we can get. Bakers, tattoo shops, photographers, etc. want to make it a community festival.

Describe how you intend to regulate, monitor and control the type, number and quality of vendors/concessionaires who you may permit to operate in conjunction with the event.

NA

MITIGATION OF THE IMPACT ON OTHERS:

Describe how you intend to mitigate the impact of the special event on businesses, churches, neighbors, motorists, mass transit users and others. Attach additional sheets, if necessary entitled "Mitigation of the Impact of Others."

X

OTHER PERTINENT INFORMATION:

MINNESOTA LAWFUL GAMBLING
LG220 Application for Exempt Permit

An exempt permit may be issued to a nonprofit organization that:

- conducts lawful gambling on five or fewer days, and
- awards less than \$50,000 in prizes during a calendar year.

If total raffle prize value for the calendar year will be \$1,500 or less, contact the Licensing Specialist assigned to your county by calling 651-539-1900.

Application Fee (non-refundable)

Applications are processed in the order received. If the application is postmarked or received 30 days or more before the event, the application fee is **\$100**; otherwise the fee is **\$150**.
 Due to the high volume of exempt applications, payment of additional fees prior to 30 days before your event will not expedite service, nor are telephone requests for expedited service accepted.

ORGANIZATION INFORMATION

Organization Name: Hibbing Area Chamber of Commerce Previous Gambling Permit Number: X- 03449-26-049

Minnesota Tax ID Number, if any: 41-0310827 Federal Employer ID Number (FEIN), if any: _____

Mailing Address: PO Box 727

City: Hibbing State: MN Zip: 55746 County: St. Louis

Name of Chief Executive Officer (CEO): Amy Mandt

CEO Daytime Phone: 218-262-3895 CEO Email: a.mandt@hibbing.org
 (permit will be emailed to this email address unless otherwise indicated below)

Email permit to (if other than the CEO): _____

NONPROFIT STATUS

Type of Nonprofit Organization (check one):

Fraternal Religious Veterans Other Nonprofit Organization

Attach a copy of 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.)

- A current calendar year Certificate of Good Standing**
 Don't have a copy? Obtain this certificate from:
 MN Secretary of State, Business Services Division Secretary of State website, phone numbers:
 60 Empire Drive, Suite 100 www.sos.state.mn.us
 St. Paul, MN 55103 651-296-2803, or toll free 1-877-551-6767
- IRS income tax exemption (501(c)) letter in your organization's name**
 Don't have a copy? To obtain a copy of your federal income tax exempt letter, have an organization officer contact the IRS toll free at 1-877-829-5500.
- IRS - Affiliate of national, statewide, or international parent nonprofit organization (charter)**
 If your organization falls under a parent organization, attach copies of both of the following:
 1. IRS letter showing your parent organization is a nonprofit 501(c) organization with a group ruling; and
 2. the charter or letter from your parent organization recognizing your organization as a subordinate.

GAMBLING PREMISES INFORMATION

Name of premises where the gambling event will be conducted (for raffles, list the site where the drawing will take place): Mesaba Country Club

Physical Address (do not use P.O. box): 415 East 51st Street

Check one:

City: Hibbing Zip: 55746 County: St. Louis

Township: _____ Zip: _____ County: _____

Date(s) of activity (for raffles, indicate the date of the drawing): August 3, 2026

Check each type of gambling activity that your organization will conduct:

Bingo Paddlewheels Pull-Tabs Tipboards Raffle

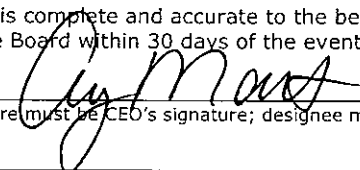
Gambling equipment for bingo paper, bingo boards, raffle boards, paddlewheels, pull-tabs, and tipboards must be obtained from a distributor licensed by the Minnesota Gambling Control Board. EXCEPTION: Bingo hard cards and bingo ball selection devices may be borrowed from another organization authorized to conduct bingo. To find a licensed distributor, go to www.mn.gov/gcb and click on **Distributors** under the **List of Licensees** tab, or call 651-539-1900.

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

<p style="text-align: center;">CITY APPROVAL for a gambling premises located within city limits</p> <p><input checked="" type="checkbox"/> The application is acknowledged with no waiting period.</p> <p><input type="checkbox"/> The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days (60 days for a 1st class city).</p> <p><input type="checkbox"/> The application is denied.</p> <p>Print City Name: _____</p> <p>Signature of City Personnel: _____</p> <p>Title: _____ Date: _____</p> <div style="border: 1px solid black; padding: 5px; text-align: center; margin-top: 20px;"> <p>The city or county must sign before submitting application to the Gambling Control Board.</p> </div>	<p style="text-align: center;">COUNTY APPROVAL for a gambling premises located in a township</p> <p><input type="checkbox"/> The application is acknowledged with no waiting period.</p> <p><input type="checkbox"/> The application is acknowledged with a 30-day waiting period, and allows the Board to issue a permit after 30 days.</p> <p><input type="checkbox"/> The application is denied.</p> <p>Print County Name: _____</p> <p>Signature of County Personnel: _____</p> <p>Title: _____ Date: _____</p> <p>TOWNSHIP (if required by the county) On behalf of the township, I acknowledge that the organization is applying for exempted gambling activity within the township limits. (A township has no statutory authority to approve or deny an application, per Minn. Statutes, section 349.213.)</p> <p>Print Township Name: _____</p> <p>Signature of Township Officer: _____</p> <p>Title: _____ Date: _____</p>
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CHIEF EXECUTIVE OFFICER'S SIGNATURE (required)

The information provided in this application is complete and accurate to the best of my knowledge. I acknowledge that the financial report will be completed and returned to the Board within 30 days of the event date.

Chief Executive Officer's Signature:  Date: 05/25/2026
(Signature must be CEO's signature; designee may not sign)

Print Name: Amy Mandt

<p>REQUIREMENTS</p> <p>Complete a separate application for:</p> <ul style="list-style-type: none"> • all gambling conducted on two or more consecutive days; or • all gambling conducted on one day. <p>Only one application is required if one or more raffle drawings are conducted on the same day.</p> <p>Financial report to be completed within 30 days after the gambling activity is done: A financial report form will be mailed with your permit. Complete and return the financial report form to the Gambling Control Board.</p> <p>Your organization must keep all exempt records and reports for 3-1/2 years (Minn. Statutes, section 349.166, subd. 2(f)).</p>	<p>MAIL APPLICATION AND ATTACHMENTS</p> <p>Mail application with:</p> <p>_____ a copy of your proof of nonprofit status; and</p> <p>_____ application fee (non-refundable). If the application is postmarked or received 30 days or more before the event, the application fee is \$100; otherwise the fee is \$150. Make check payable to State of Minnesota.</p> <p>To: Minnesota Gambling Control Board 1711 West County Road B, Suite 300 South Roseville, MN 55113</p> <p>Questions? Call the Licensing Section of the Gambling Control Board at 651-539-1900.</p>
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<p>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</p>	<p>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 Depart-</p>	<p>ment 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.</p>
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This form will be made available in alternative format (i.e. large print, braille) upon request.

An equal opportunity employer



Request for Council Action

City Council Action

Description of Agenda Item

Resolution Creating a Prioritized Bridge Replacement List

Strategic Initiative

Resolution Creating a Prioritized Bridge Replacement List

Owner of Agenda Item

Jesse Story, City Engineer-Director of Public Works, 218.969.0629, jessestory@hibbingmn.gov

Introduction/Background/Justification/Key Issues/Legal

Attached is a Resolution creating a prioritized bridge replacement list. I would like to apply for Bridge Bond Funds to replace the bridge on East Wegener Road. The first step to apply for Bridge Bond Funds is to create a prioritized replacement list.

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

None

Action Requested

Asking the City Council to support the Resolution

Attachments

1. Resolution Bridge Priority List 2026

At a Regular Meeting of the Hibbing City Council held on Wednesday, June 3, 2026, at 5:00 p.m. in the Hibbing City Hall Council Chamber, _____ offered the following Resolution and moved its adoption:

STATE OF MINNESOTA
ST. LOUIS COUNTY
CITY OF HIBBING
RESOLUTION NO. 2026-06-__

RESOLUTION CREATING A PRIORITIZED BRIDGE REPLACEMENT LIST FOR THE CITY OF HIBBING

WHEREAS, the City of Hibbing has reviewed the pertinent data on bridges requiring replacement, rehabilitation, or removal supplied by the local citizenry and local units of government; and,

WHEREAS, the City of Hibbing has identified those bridges that are high priority and that require replacement, rehabilitation, or removal within the next five years.

NOW, THEREFORE, BE IT RESOLVED, that the following deficient bridges are high priority, and the City of Hibbing intends to replace, rehabilitate, or remove these bridges as soon as possible when funds are available:

- 1) Bridge L6076 East Wegener Road
- 2) Bridge L4172 25th Street
- 3) Bridge L8510 Berg Road
- 4) Bridge L6064 Koivu Road
- 5) Bridge L6056 Stuart Road
- 6) Bridge L6057 Stuart Road
- 7) Bridge L6066 hayes Road

FURTHERMORE, The City of Hibbing does hereby request authorization to replace, rehabilitate, or remove such bridges.

The motion to adopt the foregoing Resolution was duly supported by _____ and upon being put to a vote, carried as follows:

FOR ADOPTION:

AGAINST ADOPTION:

ABSTAINED:

ABSENT:

Resolution No. 26-06-__
June 3, 2026

I certify that the above resolution was adopted by the city council on June 3, 2026.

CITY OF HIBBING

MAYOR PETE HYDUKE

ATTEST:

Candie Seppala, City Clerk-Deputy City Administrator



Request for Council Action

City Council Action

Description of Agenda Item

Strategic Initiative

Owner of Agenda Item

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Attachments

None



Request for Council Action

City Council Action

Description of Agenda Item

Strategic Initiative

Owner of Agenda Item

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Attachments

None



Request for Council Action

City Council Action

Description of Agenda Item

Strategic Initiative

Owner of Agenda Item

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Attachments

None



Request for Council Action

City Council Action

Description of Agenda Item

Strategic Initiative

Owner of Agenda Item

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Attachments

1. 26 06 01 PFA drinking water pUC



Request for Council Action

City Council Action

Description of Agenda Item

Strategic Initiative

Owner of Agenda Item

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Attachments

None



Request for Council Action

City Council Action

Description of Agenda Item

Strategic Initiative

Owner of Agenda Item

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Attachments

1. QCD-Hibbing-to-HPUC cobb cook place 6 3 2026

(Top 3 inches reserved for recording data)

QUIT CLAIM DEED

Business Entity to Business Entity

DEED TAX DUE: \$1.65

DATE: June 2, 2026

FOR VALUABLE CONSIDERATION, **City of Hibbing**, a **municipal corporation** under the laws of the **State of Minnesota** ("**Grantor**"), hereby conveys and quitclaims to **City of Hibbing a municipal corporation**, under the laws of the **State of Minnesota**, for the use and benefit of its **Public Utilities Commission** ("**Grantee**"), real property in **St. Louis** County, Minnesota, legally described as follows:

All that part of the SW 1/4 of the SE 1/4 of Section 24, Township 57 North, Range 21 West of the Fourth Principal Meridian described as follows:

Beginning at the northeast corner of said SW 1/4 of SE 1/4; thence running westerly along the north boundary line of said SW 1/4 of SE 1/4 a distance of 150.03 feet; thence southerly at an angle of 91 degrees 09 minutes from the last described course, a distance of 760 feet; thence in a northeasterly direction at an angle of 73 degrees 00 minutes from the last described course to the intersection of the east boundary line of said SW 1/4 of SE 1/4; thence northerly along said east boundary line to the point of beginning, comprising an area of 2.70 acres more or less,

EXCEPT all that part of the SW 1/4 of the SE 1/4, Section 24, Township 57 North, Range 21 West described as follows:

Beginning at a point on the North property line of said SW 1/4 of SE 1/4, Section 24, Township 57 North, Range 21 West which is located 480 feet west of the NE corner of said SW 1/4 of SE 1/4, Section 24, Township 57 North, Range 21 West, thence easterly on and along the North property line of said SW 1/4 of SE 1/4, Section 24, Township 57 North, Range 21 West, to a point located 150 feet West of the NE corner of said SW 1/4 of SE 1/4, Section 24, Township 57 North, Range 21 West, thence southerly parallel to the east property line of said SW 1/4 of SE 1/4, Section 24, Township 57 North, Range 21 West a distance of 654.30 feet to a point, thence left an angle of 90 degrees 07 minutes to a point located 330 feet west of said point, thence northerly to point of beginning, consisting of 5 acres more or less.

SUBJECT to reservations, easements, conditions, and restrictions of record.

Check here if all or part of the described real property is Registered (Torrens)

together with all hereditaments and appurtenances belonging thereto.

The total consideration for this transfer of property is \$3,000.00 or less.

Check applicable box:

- The Seller certifies that the Seller does not know of any wells on the described real property.
- A well disclosure certificate accompanies this document or has been electronically filed. (If electronically filed, insert WDC number: [...].)
- I am familiar with the property described in this instrument and I certify that the status and number of wells on the described real property have not changed since the last previously filed well disclosure certificate.

**Grantor
CITY OF HIBBING**

By _____
Pete Hyduke
Its Mayor

By _____
Candie Seppala
Its Clerk

State of Minnesota)
)ss
County of St. Louis)

This instrument was acknowledged before me on _____, 2026, by **Pete Hyduke** as **Mayor of City of Hibbing**, a Minnesota municipal corporation.

(Stamp)

(signature of notarial officer)
Title (and Rank): Notary Public
My commission expires: January 31,
(month/day/year)

State of Minnesota)
)ss
County of St. Louis)

This instrument was acknowledged before me on _____, 2026, by **Candie Seppala** as **Clerk of City of Hibbing**, a Minnesota municipal corporation.

(Stamp)

(signature of notarial officer)
Title (and Rank): Notary Public
My commission expires: January 31,
(month/day/year)

THIS INSTRUMENT WAS DRAFTED BY:
Andy Borland, #20710X
Attorney at Law
SELLMAN BORLAND & SIMON PLLC
1907 East Third Avenue, Suite 2
PO Box 37
Hibbing, MN 55746
Telephone: (218) 262-5502
FAX: (218) 263-4060 kb
attorneys@sellmanborlandsimon.com

TAX STATEMENTS FOR THE REAL PROPERTY DESCRIBED IN THIS INSTRUMENT SHOULD BE SENT TO:

**Hibbing Public Utilities Commission
1902 6th Avenue East
Hibbing, MN 55746**



Request for Council Action

City Council Action

Description of Agenda Item

Strategic Initiative

Owner of Agenda Item

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Attachments

None



Request for Council Action

City Council Action

Description of Agenda Item

Strategic Initiative

Owner of Agenda Item

Introduction/Background/Justification/Key Issues/Legal

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

Action Requested

Attachments

None



Request for Council Action

City Council Action

Description of Agenda Item

Hibbing Public Safety Building Change Order 5 - \$117,462.47

Strategic Initiative

To increase the load capacity of the driving surface at the new Public Safety Building.

Owner of Agenda Item

Jesse Story, City Engineer-Director of Public Works, 218.969.0629, jessestory@hibbingmn.gov

Introduction/Background/Justification/Key Issues/Legal

After looking at the proposed driving surface cross section at the Public Safety Building, we thought it would be advantageous to increase the bituminous cross section by 2" and the class 5 cross section by 2". This will create a much better base for the large fire trucks that will be using the surface.

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

The change order amount is \$117,462.47.

Action Requested

I am asking the City Council to approve the change order.

Attachments

1. Change Order #5

AGREEMENT DETAILS:

Agreement #: 8600
 Date: 06/25/2024
 Project #: 8600
 Project Name: Hibbing Public Safety Building
 Project Address: 1425 E 23rd Street
 Hibbing, MN 55746

CHANGE DETAILS

Change Number: 5
 Change Date: 05/22/2026

OWNER:

City of Hibbing (HPSB)
 401 East 21st Street
 Hibbing, MN 55746

All provisions of the original agreement, designated with the above mentioned OWNER contract, except as herein and hereby amended remain unchanged. Handwritten changes must be initialed by both parties. The contract is hereby revised by the following:

Change Order General Description: RFI 124 (Thicken Asphalt in heavy traffic area plus associated aggregate subgrade)

Item#	Cost Code	Description	Amount
001		CR RFI 124 - RFI 124 (Thicken Asphalt in heavy traffic area plus associated aggregate subgrade)	\$117,462.47
001	31-0000-01-S	8600RACH - Rachel Contracting Llc - RFI 124 (Thicken Asphalt in heavy traffic area plus associated aggregate subgrade)	\$112,500.00
002	00-6216-03-M	General Liability Ins	\$1,293.75
003	00-6216-06-M	Subcontractor Default Insurance	\$1,365.53
004	99-9999-99-F	Fee	\$2,303.19

The Original Agreement Value was.....	\$29,877,305.00
Sum of Changes by prior Owner Change Orders.....	\$484,115.53
The Agreement Value prior to this Owner Change Order.....	\$30,361,420.53
The Agreement Value will be changed by this Owner Change Order in the amount of...	\$117,462.47
The new Agreement Value including this Owner Change Order.....	\$30,478,883.00
The Agreement Time will be modified by.....	0 Days
The new Contractual Completion Date will be	12/07/2026

IN WITNESS WHEREOF, the parties have executed this Subcontract effective as of the day and year first above written.

Project: 8600 - Hibbing Public Safety Building

CONTRACTOR

OWNER

AP Midwest, LLC

City of Hibbing (HPSB)

dba Adolfson & Peterson Construction

Signature:

Signature:

By: _____

By: _____

Its: _____

Its: _____

Adolfson & Peterson Construction is committed to absolute integrity. If you observe an unethical or unsafe activity, please contact our anonymous INTEGRITY HOTLINE! at 866-858-9095.



HPSB COR. For RFI #124

Rachel Contracting, Inc.
5819 Highway 2
Hermantown, MN 55810
PH: 218.355.8487

Date: 04/29/26

Rachel Contracting
5819 Highway 2
Hermantown, MN 55810

TO: Adolfson & Peteson Construction
408 W. Superior St.
Duluth, MN 55802

Project Manager: Mike Friend
218.355.8487

Project Coordinator: Brilee Mass
218.355.8394

ATTN:
Todd Erickson
612.434.4062

JOB NAME/LOCATION

Rachel Job # 25045
Name City of Hibbing Public Safety Builing

We hereby submit our price for the following pricing request reflecting the change(s) attached on the following Summary Sheet.

	<u>Amount</u>
Increase Lot from 4" Standard duty to 6" Heavy duty Bit.(Shown in Blue)	\$112,500.00

This COR is for the cost assooiated with the changes made in RFI #124. Note that for us to come back and do this work after the lot is paved per plan, it would be approximatly \$330,000 in order meet the requirements of a Heavy duty Bit. lot. This would include ripping out the existing asphalt, adding an additional 4" of class 5, regrading with possible cut and fills to meet drainage requirments, and paving back the full 6" of asphalt.

Total CO Request	\$112,500
-------------------------	------------------

ACCEPTED - The above prices and specifications of this Pricing Request are satisfactory and are hereby accepted.

All work to be performed under same terms and conditions as specified in original contract unless otherwise stipulated.

Date: _____

Signature: _____

If you have any questions regarding this change order request, please call the Project Manager listed at the top of this page.

Thank you.

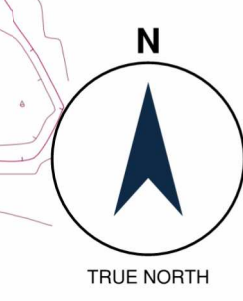
PAVEMENT DELINEATION PLAN

HIBBING PUBLIC SAFETY BUILDING | 1425 E 23rd Street, Hibbing, MN 55746

SCALE: 1" = 30'-0"

LEGEND

PROPOSED 6" BITUMINOUS PAVING

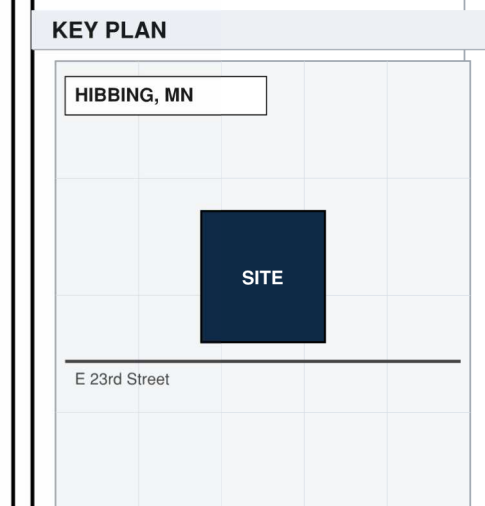


AP - DULUTH OFFICE
Adolfsen & Peterson
Construction
408 W Superior Street
Duluth, MN 55802
(218) 600-5520

PROJECT
HIBBING PUBLIC SAFETY BUILDING
1425 E 23rd Street
Hibbing, MN 55746

CIVIL ENGINEER
WIDSETH

DRAWING
6-INCH PAVEMENT DELINEATION PLAN
Issued: 2026.04.16



- GENERAL NOTES
1. ALL PAVING SHALL BE 6" BITUMINOUS PER PROJECT SPECIFICATIONS.
 2. CONTRACTOR TO VERIFY ALL DIMENSIONS IN THE FIELD.
 3. REFER TO CIVIL DRAWINGS BY WIDSETH FOR ADDITIONAL SITE INFORMATION.
 4. COORDINATE LIMITS OF WORK WITH OWNER PRIOR TO CONSTRUCTION.
 5. PROTECT EXISTING UTILITIES AND SITE FEATURES.
 6. RESTORE DISTURBED AREAS TO ORIGINAL CONDITION.
 7. CONFORM TO MNDOT 2360 STANDARDS.

REVISIONS

NO.	DATE	DESCRIPTION

DRAWN BY	CHECKED
AP	-

DATE: 2026.04.16
SCALE: 1" = 30'-0"

SHEET NUMBER

SK-01
ARCH D - 24" x 36"
(c) Adolfsen & Peterson Construction



Request for Council Action

City Council Action

Description of Agenda Item

Award the 2026 Dust Control to Trimark in the amount of \$78,929.28

Strategic Initiative

To apply dust control to our gravel roads.

Owner of Agenda Item

Jesse Story, City Engineer-Director of Public Works, 218.969.0629, jessestory@hibbingmn.gov

Introduction/Background/Justification/Key Issues/Legal

We have approximately 98 miles of gravel road within the Hibbing City limits, we apply dust control to about 44 miles. We follow St. Louis County bidding for dust control. This year Envirotec quoted \$1.44/gallon and Trimark quoted \$1.42/gallon. We have used Trimark for many years and they always do a good job.

Board/Commission/Committee Actions(s):

Budgetary/Fiscal Impact

We apply approximately 55,000 gallons for a total cost of \$78,929.28. We currently have \$84,000 budgeted in our Streets & Alleys operating budget.

Action Requested

I am asking the City Council to move forward with Trimark to apply our dust control.

Attachments

None